



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4200 Name Geo Stuckland Corps R.F.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name? I. Geo Stuckland
2. What is your full Address? 2. Thames Valley
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 18 Years 6 Months
5. What is your Trade or Calling? 5. Greenhouse
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 THE DIRECTOR OF THE WAR
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } II. Yes

I, Geo Stuckland 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.

Geo Stuckland SIGNATURE OF RECRUIT.

W. H. M. M. M. Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at..... on this..... day of..... 1915

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..... 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).....

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name James Strickland

Apparent age 18 years 6 months. Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 5 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin James Strickland
Newman Ave | Relationship Father
213. 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.

<small>(a)</small>	<small>(b)</small>	<small>(c)</small>	<small>(d)</small>

Particulars as to Children

<small>Christian Names</small>	<small>Date and Place of Birth</small>

STATEMENT OF THE SERVICES

<small>Corps in which served</small>	<small>Rgt. or Depot</small>	<small>Promotion, Reductions, Casualties, &c.</small>	<small>Army Rank</small>	<small>Dates</small>	<small>Service not allowed to reckon for fixing the rate of pension</small>		<small>Service in Reserve not allowed to reckon towards G. C. Pay</small>		<small>Signature of Officers certifying correctness of entries</small>
					<small>Years</small>	<small>Days</small>	<small>Years</small>	<small>Days</small>	
<small>Service towards limited engagement reckons from _____</small>									
<small>Joined at _____ on _____</small>									
<small>Total Service forfeited as above.....</small>									

Total Service towards Engagement to _____ (date of discharge) _____ years _____ days

“ “ Pensions “ [“ “] “ “ “



4200

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4200 Name Geo Strickland Corps Co E

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Geo Strickland</u> |
| 2. What is your full Address? | 2. <u>Newmans Cove</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>6</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Boatman</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 <u>for</u> |
| | { 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> |

FOR THE DURATION OF THE WAR

I, Geo Strickland 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.

H. 3-17-17 James Strickland SIGNATURE OF RECRUIT.
Namornsky Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Geo Strickland 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 3rd day of December 1917

Signature of Attesting Officer W. H. [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 compiled with. I accordingly approve, and appoint him to the 7th Co E.

If enlisted by special authority, such will be attached to the original attestation.

Date Dec 3rd 1917

Place St Johns

} Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
 ‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Geo Strickland
 Apparent age 18 years 6 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 5 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Geo Strickland
Newmans Cove | Relationship Father
Q.B. 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>3-12-17</u>									
Joined at <u>St. John's</u> on <u>December 3-1917</u>									
<u>Discharged. St. John's. Nov. 29/1918.</u>									
<u>Embarked St. John's S.S. Hazel & Halifax N.S. 29/18</u>									
<u>Transferred to Brampton Hospital for Consumption & other cases 19-6-18</u>									
<u>Admission to London the 21-9-18.</u>									
<u>To be expanded for discharge 16-10-18. Revised & confirmed 8-11-18</u>									
<u>Discharged Medically Unfit 29-11-18</u>									
<u>No Active Service!</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 29-11-18. [date of discharge] _____ years 362 days
 " " Pensions " [" "] " " "

C.R. 4200

RECEIVED FROM THE DEPARTMENT OF MILITIA

ONE COTTON BAG CONTAINING EFFECTS BELONGING TO
NO. 4200 PTE. JAS. STRICKLAND.

SIGNED X *J. James Strickland*

DATE

a Registered Receipt. dated Feb. 17th., 1919.

One package No. R. 1592 Jas. Strickland,

To.

Newman's Cove.

C.R. 4200

Feb. 14th

19

Jas. Strickland, Esq.,
Newmans Cove, B.B.

Dear Mr. Strickland:

I beg to forward you by Registered mail,
one cotton bag containing effects belonging to
your son No. 4200 Pte. Jas. Strickland of the Royal
Newfoundland Regiment.

Herewith enclosed you will find receipt,
kindly sign same and return at your earliest
convenience.

Yours sincerely,




Lieut.

Casualty Officer.

No. of Paper 1429**PERSONAL EFFECTS.**Name Stickland J.**CR** 4200Rank Private

Regiment

ROYAL NEWFOUNDLAND REGIMENT

Article	Where stored	Notified by
<p>1 cotton bag containing:- Personal effects extracted from Kit Bags.</p>		<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Shipped to Newfoundland</p>
	<p>Final disposal</p>	

Remarks :- Repatriated 16/10/18Next of kin: - Father: - James Stickland,
Newman's Cove

C.R. 4250

Extract from Daily Orders, Part 11, 1918: The Royal WFLB. Regt.
dated Dec. 10th. 1918.

STRONGER DISEASES.

4200 Pte. Jas. Stickland

Having been found Medically Unfit is Discharged from 26/11/18.

WAR OFFICE BOARD

C.R. 4208

Extract from Medical Board held Friday Nov. 15th, 1918.

4200 Pte. J. Strickland.

Recommended Discharge-Permanently Unfit and admission
to Jensen Camp.

III.

C.R. 4200

Extract from Daily Orders part 11, Depot. St. John's
dated Nov. 14th., 1918.

#4200 Pte. J. Stickland.

The abovementioned returned from Overseas and reported
at depot. 8/11/1918.

BC.

C.R. 4200

Extract from Telegram to Military, St. John's, dated Oct. 17th 1914

Being sent home for Discharge:

4200 Stockland.

C.R. 4200

Extract from Nominal Roll of repatriation Draft, Embarked for
Newfoundland 16/10-18.

FOR DISCHARGE UNDER A.F. B.179.

4200 Pte. Stickland J.

MM.

C.R. 4208

Extract from Casualties received from P & R Office London,
June 21st, 1918.

The U/N was transferred from Mil. Hospital, Hazeley Down Camp.
19/6/18. to Brompton, Hospital, for Consumption, Fulham Road,
London, S.W.3.

4200 Bt~~e~~. Strickland, J.

Authobity:

Memo. (55650 from Military Hospital., Hazeley Down Camp.

C.R. 4200

Extract from Telegram despatched to Synoptical, London,
dated ~~May 31st~~ June 5th, 1918.

Pay to as follows:-

#4200 Pte. Strickland.

£5.

C.R. 4200

Extract from Nominal Roll Draft "H" Company Embarked

S.S. Flerizel. Jan.29th, 1918.

4200 Pte. Strickland.

C.F.

4200

Extract from Daily Order to Part II Unit and Regal
Hfld. Regt. Dec. 4th/17.

4200 Pte. J. Strickland.

Attested for General Service with the 1st Hfld. Regt.
posted to H. Coy. with effect from Dec. 3rd/17.

C.R. 4200

~~Extract~~ from Casualties received from P.O. R. Office London,
Sept. 17, 1918.

Association Visiting Committee reports progressing favourably.

4200 Strickland.

Reg. No. H200 Rank Pls Name Stickland J.

Attested 3-12-17 Address Newman Cove B. Bay.

Allotment _____ Allottee _____

Date of Allotment _____ Returned from Overseas _____

Embarked for Overseas _____ Cause _____

Vac 7-12-17 Dec. 11-12-17, H.S. 17/12/17 - 27/12/17
2nd Dec. 17/12/17, Retd. 31/12/17
3rd Dec. 2/1/18
H.S. 23-1-18 - 25-1-18, Retd. 27/1/18

J. Struckland

C.R. 4200

F.V. R.D.

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

MEDICAL HISTORY

Surname Sheklaus

OF

Christian Name James

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's Co. Nfld. County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>3rd</u> day of <u>Dec</u> 191 <u>7</u>	at <u>St. John's</u>	on	day of 191
Declared Age	<u>18</u> years	<u>6</u> months	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>7</u> inches	feet	inches
Weight		<u>131</u> lbs.		lbs.
Chest Measurement	Grith when fully expanded <u>35</u> inches			inches
	Range of Expansion <u>4 1/2</u> inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V <u>4</u>			
	L.E.—V <u>4</u>			
(a) Marks indicating congenital peculiarities or previous disease	(a)			
(b) Slight defects but not sufficient to Cause rejection	(b)			
Approved by (Signature)	<u>Lammie Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St. John's</u>		at	
	on <u>3rd</u> day of <u>Dec</u> 191 <u>7</u>		on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps,	Regtl. No.
Transferred to	<u>1st Nfld Regt 4300 Royal Newfoundland</u>			
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

COPIES SENT

To	No.	DATE
M. OF M.	<u>16608/160</u>	<u>15/11/18</u>
(d) C. 1ST. BN.		
" 2ND. BN.		

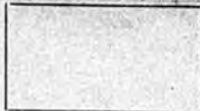
Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>Hazeley Qu</i>	<i>15</i>	<i>5</i>	<i>18</i>	<i>19</i>	<i>6</i>	<i>18</i>	<i>Tubercle - lung</i>	<i>35</i>	<i>T. B. found. Detained in hosp. pending transfer to Brompton Hosp</i>	<i>Asst Medical Capt RMC</i>

Originals

This space to be left blank for the Chelsea Number.

Army Form B. 268.



Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>4209</u>	Army Rank <u>Private</u>												
Name <u>Stickland? (Stickland) James</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>													
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>													
Battalion, Battery, Company, Depôt, &c. _____ <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>													
Date of discharge _____													
Place of discharge _____													
1. Description at the time of discharge.													
Age <u>18</u> years _____ months Height _____ feet _____ inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion _____ Eyes _____ Hair _____ Trade _____ Intended place of residence _____ (To be given as fully as practicable)	Descriptive marks. <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <p style="text-align: center; margin: 0;">COPIES SENT</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">To</td> <td style="width:30%;">No</td> <td style="width:40%;">DATE</td> </tr> <tr> <td>M. OF M.</td> <td><u>1660/168</u></td> <td>15 OCT 1918</td> </tr> <tr> <td>O.C. 1st Bn.</td> <td></td> <td></td> </tr> <tr> <td>.. 2nd Bn.</td> <td></td> <td></td> </tr> </table> </div>	To	No	DATE	M. OF M.	<u>1660/168</u>	15 OCT 1918	O.C. 1st Bn.			.. 2nd Bn.		
To	No	DATE											
M. OF M.	<u>1660/168</u>	15 OCT 1918											
O.C. 1st Bn.													
.. 2nd Bn.													
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>													
2. The above-named man is discharged in consequence of _____													
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>													
3. Military character :— _____													
4. Character awarded in accordance with King's Regulations :— _____													
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.													
_____ Initials of Commanding Officer.													
Army Form B. 2088 has been issued to*													

To be filled in on the soldier quitting the Colours.

* Strike out if not applicable.

[OVER.]

Original

Medical Report on an ^{Invalid} Invalid.

Station London General Hospital, WANDSWORTH, S.W.
 Date 21 SEP 1918

- 1. Unit Royal Newfoundland Regt.
- 2. Regimental No. 4200
- 3. Rank Private
- 4. Name Strickland James
- 5. Age last birthday 18
- 6. Enlisted on 1st December 1917
 at St John's, Nfld.
- 7. Former Trade or Occupation } Fisherman
- 7A. If with previous service in Army, state—
 - (a) Former Unit;
 - (b) Regimental No.;
 - (c) Date of Discharge;
 - (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Pulmonary Tuberculosis

COPIES SENT		No.	DATE
O.C. 1ST. BN.		<u>108</u>	<u>15 OCT 1918</u>
.. 2ND. BN.		<u>108</u>	

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. About Feb. 1916
- 10. Place of origin of disability. Hazeley Down Canada
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

From our file for above

Trouble began in April 1916 (Serious). Patient reports that Tubercle was found on X-ray taken here. Pain in Rt side, spitting, dyspnoea.
- 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 - (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 - (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Temperature within normal limits, up all day. No cough & no sputum. Present wt. - 10 st 1 1/2 lbs, increase by 5 lbs. Battleford 20-6-19

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

~~_____~~ *yes*

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what? _____

17. If not, was an operation advised and declined? _____

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? _____

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war. _____

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) ~~Change to England?~~

Yes

T. Gwynne Hattland
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station Chesham Hospital T. Gwynne Hattland
Bromsgrove England Officer in charge of Hospital.
Date 20-IX-1918

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

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, and, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?

Yes
Yes active service to home land tour

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

Yes *Yes* active service to home land tour

23. Is the disability permanent?

Some may persist
See number

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

100% / 6

26. If an operation was advised and declined, was the refusal unreasonable?

27. Do the Board recommend—

- (a) Discharge as permanently unfit, or
- (b) ~~Change to England?~~

Yes return to Newfoundland

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

Yes

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—

3rd London General Hospital,

Station *WANDSWORTH, S.W.*

John Reginald Capt. ... President.

W. A. Brown Capt. ... Members.

Date *21 9. 16*

Approved.

Station _____

John Reginald Capt. ...
Administrative Medical Officer.

Date *2. 9. 16*

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full *Strickland James.*
 Regiment from which discharged *Royal Newfoundland*
 Regimental Number *4200*
 Where born (Parish, Town and County), and when *Bonavista Bay, Nfld 21/9/1899*
 Intended address
Newman's Cove, Bonavista Bay, Newfoundland.
 Height on discharge *Five* Feet *Nine* Inches
 Colour of Hair on discharge *Fair* Colour of Eyes *Bluish Gray*
 Descriptive marks *Scar left ankle (denied by doc)* Complexion *Pale*
 Figure on discharge *Medium*
 Christian name of Father *James*
 Christian name of Mother *Maria*
 Wife's Maiden name in full }
 Date and Place of Marriage } *N/A.*
 Christian names of Children }
 Nature and locality of civil employment desired *Fisherman - Newfoundland*

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) *James Strickland* *Plt*
Sgt
 Station *Regimental Quartermaster* Date *20.9.18*

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.

H. J. Wheeler *Medical Officer i/c*
Hanoverian *Hospital.*
 Station *Chert Hill Det Provost* Date *20.10.1918*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years		Days	
Disallowed ...								
Service towards Pension ...								
Date inclusive to which pay has been issued				Sum due on account of advance of Pension				
Sums due on account of public debts ...								

India COPIES SENT		
To	No.	DATE
S. Africa M.	<i>1668</i>	<i>15 OCT 1918</i>
O.C. 1st. Bn.		
" 2nd. Bn.		

Rank on Discharge
 Character (as on Certificate of discharge)
 Where born, and on what date
 Date and Place of first Enlistment
 Trade on Enlistment
 Cause of Discharge
 Number of G.C. Badges
 Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge
 Date _____ Records.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 4200 Rank Pte Regiment Royal Newfoundland

Name Strickland James
(Surname first)

1. State what special qualifications you have for employment in civil life.

Fisherman

COPIES SENT		
To	No.	DATE
M. OF M.	<i>16608/168</i>	<i>15 OCT 1918</i>
O.C. 1st. BN.		
" 2ND. BN.		

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed.

*Fisherman in employ of
Parents*

3. What is the nature and locality of the employment you desire?

Fisherman - Newfoundland

4. What is the name of your Approved Society?

none

5. Have you been employed whilst with the Colours? If so, in what capacity?

Infantryman

Date *19th September 18* Signature *James Strickland*

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class P. or P.(T.) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 3 (ii), item 3, of Army Council Instruction No. 1912, of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Notification by President of Medical Board of Approval of a Soldier's Discharge, under Para. 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records _____

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Strickland Christian names James
(in full)

Regt. No. and Rank 4200 Regt. or Corps ROY NEWFOUNDLAND
(If T.F. this should be stated)

His address on discharge will be Newman's Cove, Bonavista Bay
Newfoundland

This information is for the Central Army Pension Issue Office only.

The Soldier states that _____ allowance is being issued in respect of him.

*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

Station _____

2nd London General Hospital
Wandswoth Sq

Date _____

21 September 1918

Paul Poynter
President of Board
(Approving Officer)

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^a to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Strickland Christian Name James

TABLE I.—General Table.

Birthplace { Parish _____
County Bonavisia Bay Nfld

Examined { on 1st day of December 1917,
at St Johns

Declared Age 18 years — days.

Trade or Occupation Fisherman

Height 5 feet 9 inches.

Weight _____ lbs.

Chest Measurement { Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development _____

Vaccination Marks { Arm — RIGHT | LEFT
Number — | _____

When Vaccinated _____

Vision { R.E.—V— _____
L.E.—V— _____

(a) Marks indicating congenital peculiarities or previous disease—

(b) Slight defects but not sufficient to cause rejection—

Approved by _____

Rank _____ Medical Officer.

Enlisted { at St Johns
on 1st day of December 1917

	Corps	Regtl. No.
Joined on enlistment	<u>Royal</u>	<u>4200</u>
Transferred to	<u>Newfoundland</u>	

Became non-effective by _____

on _____ day of _____ 1917

(Signature) _____

(Rank) _____

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature
<u>21/9/18</u>	<u>Board held</u> <u>Finding</u> <u>Permanently</u> <u>Unfit</u> <u>Board approved 21/9/18</u>
	<u>H. O. G. G. Hall</u> <u>Capt. Med.</u>
	<u>3rd London General Hospital</u> <u>WANDSWORTH</u>

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd L. G. H. Wandsworth							Tuberculosis Pulmonary		Board held see overleaf Disability Pulmonary Tuberculosis Weight: - 10 st. 1½ Cause Exposure active service home conditions Total - Inability to earn a livelihood at present 100 % 90 Hall Capt H. O. B.	

3rd London General Hospital
WANDSWORTH, S. W.

COPIES SENT
TO
M. OF M. 7/11/18
OCT 1ST. BN.
" 2ND BN.
DATE
15 OCT 1918

047544

No. 9188/842

NEWFOUNDLAND CONTINGENT

JUN 1918

N.F.P./10.

From

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

To

Officer Commanding,
2/Bn Royal Nfld. Regt.
Winchester.

Subjects 7th June 1918

Subject: 4200, Pte. J. Strickland

With reference to the following telegram (5081) from the Hon. Minister of Militia, received

Pay to 4200 Strickland £5:3:0

Draft £ 5:3:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

A. A. ...

Chief Paymaster & O. i/c Records.

June 15th 1918

Receipt hereunder.

Cham

LIEUT. COLONEL.

COMMANDING 2ND BATTN ROYAL NEWFOUNDLAND REGT.
1st Newfoundland Regiment

Received the sum of Five

Guineas on account of cable remittance from Newfoundland.

J. Strickland

No. 4200 Rank Private

Notification to the Regimental Paymaster that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.

NOTE.—This notification is sent in order that the Officer i/c Records, at the time the soldier's documents reach him from the Officer i/c Hospital, may be in possession of particulars of the soldier's children in respect of whom separation allowance is being paid.

This information is required by the Ministry of Pensions at the time of assessing the soldier's pension, and it is important that this Army Form should be returned to the Officer i/c Records in time for despatch to the Controller, Ministry of Pensions, with the soldier's documents.

To enable the Ministry of Pensions to make the assessment by the termination of the period covered by the temporary pension allowance and thereby avoid hardship to the soldier, it is essential that there should be no delay in completing and forwarding this Army Form to the Officer i/c Records.

Part I.

A.F.W. 3977A has been sent to
O.O.A.F.W. 3977B has been sent to
The Officer i/c Records,

The Regimental Paymaster,

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

No. 4200 Rank PrivateName Stickleland James
(Surname) (Christian names in full)Unit and Corps Royal Newfoundland RegtStation 3rd London General Hospital, St Mary's, Lambeth,
Officer i/c Hospital.Date W.A.N.D.S.WORTH, S.W.

NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/c Hospital has been instructed to complete such of the following particulars as the soldier can furnish. This information is required by the Officer i/c Records to enable him to verify the claim.

The soldier claims repatriation to _____ (Country). _____ (Place).

(i) Where enlisted _____

(ii) Date of arrival in United Kingdom _____

(iii) Port of arrival _____

(iv) Ship on which arrived _____

(v) Name of Shipping Line or Agent _____

(vi) Names and addresses of two references who can verify the above particulars _____

In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report to the Officer i/c Hospital on Part II. of Army Form W. 3977B whether the claim is substantiated or not.

Part II. of this Army Form is to be completed by you, or if necessary by the Secretary, T.F. Association, and forwarded without delay to the Officer i/c Records,

Station _____

Date _____ 191_____

Officer i/c Hospital.

Notification to the Officer i/o Records that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.

NOTE.—On receipt of this notification the Officer i/o Records is to ensure that he has all the documents of the soldier that should be in his possession, or prepare temporary documents in the event of absence or loss of the originals.

Army Form W. 3977c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/o Records after having filled in the particulars of the names and dates of birth of the soldier's children for whom separation allowance is being paid, on receipt of which the Army Form is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3977c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If the Army Form has not been received by the Officer i/o Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

Part I.

A.F. W. 3977A has been sent to O.O.

The Officer i/o Records,

58 Victoria St
SW

A.F. W. 3977c has been sent to The Regimental Paymaster,

58 Victoria St
SW

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

You are requested to forward without delay Army Form W. 3977c, or temporary document, for the soldier.*

No. 4200 Rank Private

Name Strickland (Surname) James (Christian names in full).

Unit and Corps Royal Newfoundland Regt

Station 19.9.1918 3rd London General Hospital, Officer i/o Hospital.

Date WANDSWORTH, S. W.

* Strike out if inapplicable.



NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/o Hospital is to complete such of the following particulars as the soldier can furnish before transmitting the Army Form to the Officer i/o Records:—

The soldier claims repatriation to _____ (Country). _____ (Place).

- (i) Where enlisted _____
- (ii) Date of arrival in United Kingdom _____
- (iii) Port of arrival _____
- (iv) Ship on which arrived _____
- (v) Name of Shipping Line or Agent _____
- (vi) Names and addresses of two references who can verify the above particulars _____

If such a case the Officer i/o Records is to verify the soldier's claim forthwith and report on Part II. of this Form whether the claim is substantiated or not.

Part II.

Officer i/o Hospital,

The soldier's claim to be repatriated abroad* _____ accepted. { Insert "is" or "is not." }

On termination of his leave he is to report to the Officer Commanding, _____ (Station) { Strike out if inapplicable. }

Station _____

Date _____ 191 _____

Officer i/o _____ Records.

HOSPITAL FOR CONSUMPTION
AND DISEASES OF THE CHEST,
BROMPTON,

LONDON, Sept. 9th 1918
S.W.3.

The O.C.

Battⁿ Royal Newfoundland
Reg^t Winchester

Sir,

I am about to be discharged
from the above Hospital,
and shall be glad to know

whether arrangements can now
be ^{made} for me to proceed
to my home at: —

"Newmans Cove", Bonavista,
Newfoundland. Yours obediently
W. James Stickland

Royal Newfoundland Reg^t.
1704200.

NEWFOUNDLAND
PAY & PENSION OFFICE
12 SEPT 1918
Rec'd
Ack'd
Ref. Nos
BRANCH
Comd. ✓
P. & A.
R. & C.
B. & E.
P. S.

LAST PAY CERTIFICATE

N.F.P./94

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

Regtl No. 4200 Rank Private Name Strickland, J. Unit 2nd Bn. R. Nfld Regt. who was repatriated.
to Newfoundland on 16/10/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.		STATEMENT OF ACCOUNT					CR.										
PARTICULARS		£	s	d	PARTICULARS		£	s	d								
PERIOD: FROM 28/9/18 TO 25/10/18	Balance Dr. from				Balance Cr. from prev. Pay Book.		8	0	2								
	Allotment 28 days @ 60¢	16	80		Pay 28 days @ \$ 1.00	28	00										
	Cash Payments: 8/10/18			2 0 0	Field Allow 28 days @ \$.10	2	80										
	Other Debits:				Other Allowances days @ \$	30	80	6	6 7								
					Other Credits:												
	Total Debits			5 9 1	<div style="border: 1px solid black; padding: 5px; margin: 5px;"> <p style="text-align: center;">COPIES SENT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>TO</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td><i>[Signature]</i></td> <td>11-11-18</td> </tr> <tr> <td><i>[Signature]</i></td> <td>11-11-18</td> </tr> <tr> <td><i>[Signature]</i></td> <td>11-11-18</td> </tr> </tbody> </table> </div>					TO	DATE	<i>[Signature]</i>	11-11-18	<i>[Signature]</i>	11-11-18	<i>[Signature]</i>	11-11-18
TO	DATE																
<i>[Signature]</i>	11-11-18																
<i>[Signature]</i>	11-11-18																
<i>[Signature]</i>	11-11-18																
	Balance due by Paymaster			8 17 8	Total Credits		14	6	9								
				14 6 9	Balance due to Paymaster												
							14	6	9								

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

(Place) _____ (Date) 191 _____ O.C. " " Company.

Made up and checked in accordance with information received in the Pay & Record Office London to 25/10/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

10/11/18 191

Chief Paymaster & Officer i/c Records.

RECEIVED
8 - MAY. 1918
COUNTY LAB.

Outfit Number.....1029

Result of the examination of the specimen of.....*Tubercle bacilli*.....taken from

Reg. No...*3200* Rank...*Plt.* Name...*Thickland*

Corps...*2nd Batta Newfoundland Regt.*

Result...*Tubercle bacilli not found.*

TO BE LEFT BLANK.

May 9th 1918.

A. A. Hyatt

Specialist Sanitary Officer.

TO BE LEFT BLANK.

Result of the examination of the specimen of.....

Outfit Number.....

48

Reg. No.....

4200

Rank.....

Phi

Name.....

Trickla

taken from

RECEIVED

16 MAY 1918

COUNTY LAB.

Corps.....

Newfoundland Regt

Result.....

Tubercle bacilli

Found

16 MAY 1918

191.....

R. A. Myster

Specialist Sanitary Officer.

Stickland, James

4200

Ray Sept.

COPY.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No.	4200	Army Rank	Private
Name	Strickland (?) (Stickland) James		
<small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>			
Corps	ROYAL NEWFOUNDLAND REGIMENT.		
Battalion, Battery, Company, Depot, &c.			
<small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>			
Date of discharge	November 29 th 1918		
Place of discharge	St. John's, Nfld.		
1.	<small>Description at the time of discharge.</small>		
Age	19 years	2 months	<small>Descriptive marks.</small> <i>old scar on left ankle,</i>
Height	5 feet	9 inches	
Chest measurement	girth when fully expanded _____ ins.		
	range of expansion _____ ins.		
Complexion	<i>pale</i>		
Eyes	<i>bluish grey</i>		
Hair	<i>fair</i>		
Trade	<i>Fisherman</i>		
Intended place of residence	<i>Newman's Cove B.D.</i>		
<small>(To be given as fully as practicable)</small>			
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>			
2. The above-named man is discharged in consequence of <i>being no longer physically fit for war service</i>			
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>			
3. Military character :—			
4. Character awarded in accordance with King's Regulations :—			
<div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small; margin-right: 5px;">To be filled in on the soldier quitting the Colours.</div> <div style="flex-grow: 1; border-bottom: 1px solid black; border-left: 1px solid black; border-right: 1px solid black;"></div> </div>			
<small>Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. A89 was awarded in this case.</small>			
			Initials of Commanding Officer.
Army Form B. 2088 has been issued to*			

365

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Bttn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St. John's Rd _____ (Signature of Soldier.)
(Date) 7/12/18 _____ E. Walsh (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " _____

Total " " _____

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____ Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No reservations
James Stikaland
C. Walsh.

The Royal Newfoundland Regiment

DEMOBILIZATION

CIVILIAN CLOTHING GUARANTEE

I, No: 4200 Rank: Pt Name Gas. Stickland
 hereby undertake to supply myself with civilian clothing, consisting of one suit of clothes, one cap, one tie, one collar, one overcoat, within 14 days from date, in consideration of being issued with clothing allowance to the amount of \$ 60⁰⁰
 Date 7/12/18

James Stickland
 Signature of Soldier
E. Walsh
 Signature of Witness

Report of Medical Board.

Station	St. John's, Hfld. November 15th., 1918	Date	November 15th., 1918
No. and Rank	4200 - Private	Age	18 Height 5'9"
Name	STRICKLAND, JAMES	Complexion	Pale
Unit	Royal Hfld.	Eyes	Blue Grey Hair Fair
Address	Newmans Cove, B. B.		
Former Trade	Fisherman		
Enlisted at	St. John's On 1/12/17	(The Board will please note how the soldier's appearance corresponds with above description.)	
Disease or Disability	Original	PULMONARY TUBERCULOSIS	

Subsequent

Present Condition (Compare with previous Board)

Weight 137. Pulse 104. Temp. normal.
Right lung affected.

THE ENTIRE DISABILITY : To what extent is his capacity lessened at present for earning a livelihood in the general labour market ?

100%

PENSIONABLE DISABILITY : To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service ?

100% while in hospital.

Recommendation of Medical Board

Discharge Permanently Unfit
Enter Jensen Camp.

Members of Board

..... **N. S. FRASER.** **J. SINCLAIR TAIT.** **L. PATERSON, Major.**(Sig) **CLUNY MACPHERSON.** **Major.**

Approving Medical Officer.



COPY

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 Commissioners of Chelsea Hospital.
Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full Stickland, James
Regiment from which discharged ROYAL NEWFOUNDLAND REGIMENT
Regimental Number 4200
Where born (Parish, Town and County), and when Bonavista Bay, Nfld 21/9/1849
Intended address Thomas Cove Bonavista Bay Newfoundland
Height on discharge Five Feet Nine Inches
Colour of Hair on discharge Fair **Colour of Eyes** Bluish Gray
Descriptive marks Scar left hand (old cut by axe) **Complexion** Pale
Figure on discharge Medium
Christian name of Father James
Christian name of Mother Marina
Wife's Maiden name in full } N/A
Date and Place of Marriage }
Christian names of Children }
Nature and locality of civil employment desired Fisherman Newfoundland

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) Spd James Stickland
Station Chest Hospital Brompton **(Rank)** Pte
Date 20.9.18

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 Chest Hosp Brompton **Date** 20-9-18
Spd Wheeler **Medical Officer i/c**
Head Physician **Hospital.**

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India	
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of Pension }		
Sums due on account of public debts ...						

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ **Officer in Charge** _____
Date _____ **Records.** _____

To be used for recruits enlisting direct into the Regular Army only.
 Army Form B. 178^A to be used for Special Reserve recruits
 and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Strickland Christian Name James

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County Conavista Bay, Nfld

Examined ... { on 1st day of December 1917
 at St Johns

Declared Age ... 18 years ... days.

Trade or Occupation ... Fisherman

Height ... 5 feet, 9 inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. _____ inches.
 Range of Expansion _____ inches.

Physical Development ...

Vaccination Marks { Arm ... Right _____ Left _____
 Number _____

When Vaccinated ...

Vision ... { R.E.—V—
 L.E.—V—

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____
 (Rank) _____ Medical Officer.

Enlisted ... { at St Johns
 on 1st day of December 1917

Joined on Enlistment ...	Corps.	Regtl. No.
	ROYAL NEWFOUNDLAND REGIMENT.	<u>4200</u>
Transferred to ...		

Became non-effective by _____
 on _____ day of _____ 1917

(Signature) _____
 (Rank) _____

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<p><i>Det L G. H.</i> <i>Wandsworth</i></p>							<p><i>Tuberculosis</i> <i>Pulmonary</i></p>		<p><i>Board held - see overleaf.</i> <i>Disability - Pulmonary Tuberculosis</i> <i>Weight - 10 st 1 1/2</i> <i>Cause - Exposure Active Service home</i> <i>Conditions</i> <i>Total - Inability to earn a livelihood</i> <i>at present 100%</i></p>	<p><i>(Sgd) G. Hall</i> <i>Capt. I.M.S.</i> <i>for 1/2</i> 3rd London General Hospital WANDSWORTH S W</p>

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

Date	Brief details, and signature
21-9-18	<p>Board held Finding Permanently unfit Board approved 21-9-18 <i>(Sgt) G. Hall</i> <i>Capt. Sims</i> <i>J. M. P.</i> 3rd London General Hospital WANDSWORTH S W</p>

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

COPY.

DMS

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^a to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Stickland Christian Name James

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Newmans Cove B.S. County Ald.

Examined ... { on 3rd day of Dec 1917
at St Johns

Declared Age ... 18 years 6 mos days.

Trade or Occupation ... Fisherman

Height ... 5 feet, 7 inches.

Weight ... 121 lbs.

Chest Measurement { Girth when fully Expanded. 35 inches.

Range of Expansion 4 1/2 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left
Number / /

When Vaccinated ...

Vision ... { R.E.—V—4/6
L.E.—V—3/6

(a) Marks indicating congenital peculiarities or previous disease ...

(b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) (Sgd) Lamont Paterson
(Rank) Major Medical Officer.

Enlisted ... { at St Johns
on 3rd day of Dec 1917

Corps.	Regtl. No.
ROYAL NEWFOUNDLAND REGIMENT.	<u>4200</u>

Became non-effective by
on _____ day of _____ 191

(Signature) _____
(Rank) _____

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Hazeley Down	15	5	18	19	6	18	Tubercle Lung	35	<p>TB found Detained in Hosp. pending transfer to Brompton Hosp</p> <p>Result of exam. of specimen of Sputum Tubercle bacilli not found. May 8th 1918. <i>Genl. C. W. Wynter</i> Specialist Sanitary Officer</p> <p>Result of exam. of specimen of Sputum Tubercle bacilli found May 16th 1918. <i>Genl. C. W. Wynter</i> Specialist Sanitary Officer</p>	<p><i>Genl. C. W. Wynter</i> Specialist Sanitary Officer</p>

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

Date	Brief details, and signature
7-12-17	Vacc LP
11-12-17	TAB LP
18/2/17	TAB LP
2/1/18	do LP

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

COPY.

Army Form W. 8494.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 4200 Rank Pte Regiment ROYAL NEWFOUNDLAND REGIMENT.

Name Stickland James
(Surname first)

1. State what special qualifications you have for employment in civil life.

Fisherman

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed.

Fisherman in employ of Parents

3. What is the nature and locality of the employment you desire?

Fisherman — Newfoundland.

4. What is the name of your Approved Society?

None.

5. Have you been employed whilst with the Colours? If so, in what capacity?

Infantryman.

Date *19th Sept 18*

Signature *Sgt James Strickland*

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class P. or P.(T.) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 3 (ii), item 3, of Army Council Instruction No. 1912, of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

LAST PAY CERTIFICATE

N.F.P./94

DUPLICATE
MAIL COPY

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 4200 Rank Private Name Strickland, J. Un End.Bn.R.Nfld Regt., who was repatriated.
to Newfoundland on 16 10 18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	\$			£			CR.				
		¢			s	d						
PERIOD: FROM <u>28/9/18</u> TO <u>25/10/18</u>	Balance Dr. from							Balance Cr. from				
	Allotment <u>28</u> days @ <u>60¢</u>	<u>16</u>	<u>80</u>		<u>3</u>	<u>9</u>	<u>1</u>	Prev. Pay Book.		<u>8</u>	<u>0</u>	
	Cash Payments <u>4/10/18</u>				<u>2</u>	<u>0</u>	<u>0</u>	<u>28</u> days @ <u>£.00</u>	<u>28</u>	<u>00</u>		
	Other Debits:							Field Allce <u>28</u> days @ <u>£10</u>	<u>2</u>	<u>80</u>		
								<u>30</u> <u>80</u>	<u>6</u>	<u>6</u>	<u>7</u>	
								Other Allces				
								days @ <u>£</u>				
								Other Credits:				
		Total Debits				<u>5</u>	<u>9</u>	<u>1</u>	Total Credits		<u>14</u>	<u>6</u>
		Balance due by Paymaster				<u>8</u>	<u>17</u>	<u>8</u>	Balance due to Paymaster			<u>9</u>
					<u>14</u>	<u>6</u>	<u>9</u>			<u>14</u>	<u>6</u>	

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

Checked (Date) 191
 Made up and checked in accordance with information received in the Pay & Record Office London to 25 10 18
 and is therefore subject to amendment if and as may be found necessary.
 Pay & Record Office, London,
10/11/18 191
 Chief Paymaster & Officer i/c Records.

ORIGINAL

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 4200 Rank Private Name Strickland, J. Unit 2nd. Bn. R.Nfld Regt., who was repatriated.
to Newfoundland on 18/10/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.		PARTICULARS					£	s	d	PARTICULARS					£	s	d	CR.
PERIOD: From 28/9/18 To 25/10/18		Balance Dr. from							Balance Cr. from prev. Pay Book.				8	0	2			
		Allotment 28 days @ 60¢	16	80		3	9	1	Pay 28 days @ \$1.00	28	00							
		Cash Payments: 8/10/18				2	0	0	Field Allow 28 days @ \$.10	2	80							
		Other Debits:							Other Allowances days @ \$	30	80		6	6	7			
		Total Debits				5	9	1	Total Credits				14	6	9			
		Balance due by Paymaster				8	17	8	Balance due to Paymaster				14	6	9			
					14	6	9											

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

(Place) _____ (Date) 191

Made up & checked in accordance with information received in the Pay & Record Office London to 25/10/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
10/11/18

191

OK/WA

O.C. " " Company.
A. J. Munnell Maj.
Chief Paymaster & Officer i/c Records.

May 17, 1919

#4200 Pte. James Stickland,
Newman's Cove, B.B.

Dear Sir:-

Referring to your application for War Service Gratuity, I beg to state that you are not entitled to same, as you have not served in the Royal Newfoundland Regiment twelve months, and you were not Overseas on the 11th November 1918.

Yours truly

Captain,
Paymaster & O.i/c records

me

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.

- 1. Christian name... *James*..... 2. Surname... *Threlkeld*.....
- 3. Rank... *Private*..... 4. Regtl. No... *4207*.....
- 5. Address in full to which future payments of gratuity are to be forwarded... *St. John's, Newfoundland*.....
- 6. Date of enlistment in the Regiment... *5 Dec 1917*.....
- 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... *none received*..... *allotment made*
- 9. Address in full of such dependents... *none*..... *Maria Threlkeld*
- 10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
- 11. Were you on active service only in Nfld. If so, give dates and particulars of such service... *at*... *Worcester*.....
- 12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *nine months of which*..... *5 has been spent in hospital*.....

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

..... only one

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....

..... have already received \$50.00 for me for 3 months to present

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

Yes

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?.....

not applicable

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

..... Nov. 29, 1918..... Physical Impairment

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

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.

Signature of Applicant:

*James Stickland
700 mm Cmn*

Place of Residence:

Declared before me at: *Barraburki*

This *6th* day of *May* 19*19*

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

*John Ross
A.P.*

POST DISCHARGE PAY.

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

Certified Correct. Paymaster!

Embarked 3/12/17
Disch'd 29/11/18
Service 36 1/2 days
War Overseas.

JR

Neunauis Cove
April 21, 19

Capt. Howley:

Dear Sir:-

Please send form for
war service gratuity
and oblige yours Truly

Pte James Stickland
4200

Jensen Camp
city D.O.B 231

Capt J M Howley
- paymaster

Dear Sir

Kindly forward cheque
of banas money 30 dollars
to morrow

your most
abedant servant

Hte James Stekelind
No ~~231~~

Mrs James Shepley.
Newman's Cove,
B. B.

April 18th
18
4200

Dear Sir, I write these few lines to let you know that some obstacle has arisen with the money due me. Dear Sir I received money for Jan. & Feb. but received none for March. The people around got theirs but none came due James Shepley Reg. No. 4200. Allotment Pay No. 4369. I would like to know whether you sent one or not. As to the first obstacle as regards my money etc. I now write you to see the difficulty whether its mislaid or not. I leave it to me know
Yours Truly
Mrs James Shepley

cheque was mislaid
by turned up and
has since been mailed
to proper party
HCB

10597

4200

Newman's Cove
April 5th/20

Dear Sir

Your letter dated to me
to day you said that there
was no War Gratuity for me,
as I didnt go over seas yet
I was over seas thats where I
got sick and went to London
Hospital from the time I enlisted
December 1st 1917 untill I was
discharged November last 1918 I served
362 days with the colours
It is not right for some to
get it and others to get none
what served there time as long
as they.

I remain

yours obedient servant

Wm E. James Stebbins

Newman's Cove
Barrow's Bay

My name is not
Stebbins but
Stebbins

Our letter probably stated that he was not overseas on
Nov. 11/1918. Look it up.

4200 Pt. Jas. Stuckland
Civilian Clothing

ch. 6483

\$60⁰⁰

~~PAID~~

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 95 ²⁶/_{4x}

Dec 5/18 19

Received from the First Newfoundland Regiment

the sum of Ninety five ²⁶/_{4x} Dollars.

~~account~~ of Pay. ^{35.26}/_{95.26}

James Stickland

Ch. No. 6483	Initials J.W.
Pay Ledger.....	Initials.....
Gen. Ledger.....	Initials.....

Regtl. No. Rank

No. 4200

Rank

P6

Name

Strickland J

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$34¹⁰

Aug 13th 1920

Received from the First Newfoundland Regiment
the sum of Thirty four _____¹⁰ Dollars.
on account of Pay. W.S.G.
balance

James Stickland

Ch. No. 11688	Initials R.H.
Pay Ledger 2941	Initials R.H.
Gen. Ledger	Initials R.H.

A.C.S. Regt. No. 4201 Rank

No. 4200

Rank Private

Name

J. Strickland

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 33⁰⁰/₁₀₀

Dec 24 1912

Received from the First Newfoundland Regiment
the sum of thirty three 4 Dollars.
on account of Pay. P.D.O.
~~balance~~

James Sheppard

Ch. No. 7419	Initials E.W.
Pay Ledger 394	Initials a.w.
Gen. Ledger	Initials

Regtl. No. Rank

No. 4200.

Rank

PL

Name

Stuchland J

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 33.⁰⁰

July 29 1919

Received from the First Newfoundland Regiment

the sum of Thirty Three ⁰⁰/₁₀₀ Dollars.

on account
balance

of Pay. P. D. O.

J. Stickland

Ch. No.	8907	Initials	J.S.
Pay Ledger	394	Initials	awh.
Gen. Ledger		Initials	

Regtl. No.

Rank

Frederick J. Jones

No. 4200 Rank Pl-

Name Strickland

C.R. 4200

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal 1914-1919.

Name, *James Strickland*

Date *Nov 19th*

Place *Botwood*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland

Number of Sheets One
Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>Stickland J.</u>	Age on	<u>18</u> years <u>6</u> months	<u>Fisherman</u>		
<u>H200</u>		Place and Date of Enlistment	<u>St. John's</u> <u>5-12-17</u>	Religion		
Joined		Date	Period of	with Colours <u>362</u> years. with Reserve <u>365</u> years.		<u>C. of C.</u>
Joined		Date				Place of Birth
Joined		Date				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<p><i>Discharged Medically Unfit</i></p> <p><i>St. John's, 29th / 18</i></p>					

To be carried over

LC 24700.

November 16th, 1918

From Assistant Adjutant
Genl.

To Paymaster & Officer i/o Records.
Military Dept.

- 4187, Wto. M. Bligh
- 4208, " S. Gollon
- 5566, " C. Langdon
- 4221, " J. Ryland
- 5618, " H. Walsh

The marginally noted men were recommended for discharge as permanently unfit, and admission to General Camp, by Medical Board, held on Friday, November 15th. I am sending them herewith for your attention, and necessary action please, and have given them with I instructions to report to the P. M. O. for his attention, after they have finished their business with you.

Copy for P. M. O.

Reg. No. *4200* Rank *Pte* Name *Stickland J.*

Attested Address.....

Allotment..... Allottee

Date of Allotment..... Returned from Overseas...*8-11-18*

Embarked for Overseas Cause...*Discharge*

15-11-18 *See Dis-Per unfit & admission to Jensen*
Camp

29-11-18 **DISCHARGED—MEDICALLY UNFIT**



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

Dec. 7th. 1918 191

Officer Commanding,

Headquarters.

Sir:-

The under-mentioned men have been discharged on the dates given. Kindly note and post in Daily Orders, Part 11.

I have the Honour to be,
Sir,
Your obedient Servant.

Sgd. J.M. Howley,
Capt.
Paymaster & O. i/c Records.

4202.	Pte.	Wellon, Stewart	Nov. 29th. 1918.	Med. Unfit.
3235.	Lt. Col.	Pike, Thos.	do	do
4123.	Pte.	LeDrew, Edward J.	do	do
5555.	"	Langdon, Chas.	do d	do
5395.	"	Coleman, Bartholomew	do	do
4200.	"	Stickland, James	do	do
4265.	"	Morris, Willis. H.	30th	do
5662.	"	Verge, Thos.	do	do
5641.	"	Sooley, John.	Do	do.

Newman's Cove
March 15/3/20

Dear Sir

I am sending to you to ask
you what is the reason I did not
get my War Gratuity Money.
I have spent a year in the war
other fellows get their Money
what reason have you ~~with~~
me: hoping to hear from you

I remain
your obedient
servant

(Address)

Mr James Stikland
Newman's Cove
Bonavista Bay

Hon. R A Squires
Prime Minister

(over)

Pam.
Omy gratuity due?

I did not serve twelve months.

II was not overseas on 11/11/18

III was never to France

W Newbery



C.R. 4200

25th March, 1920.

AS
Sir,

I have the honour to enclose herewith letter dated 15th instant, from Mr. James Stickland, of Newman's Cove, B.B., who complains that he has not yet received his War Gratuity money.

Kindly have this complaint looked into and a reply sent direct to Mr. Stickland.

I have the honour to be,
Sir,
Your obedient servant,

Deputy Colonial Secretary.

Lieut. Col. W. F. Rendell, C.B.E.,
Chief Staff Officer,
Dept. of Militia.

C.R.

March 29th 1920

Mr. James Strickland
Newman's Cave
B.B.

Dear Sir:-

Your letter dated March 15th addressed to the Prime Minister, relative to War Service Gratuity, has been forwarded to this Department for attention.

I have to inform you with reference to your enquiry that there is nothing due you on account of War Service Gratuity as you did not go overseas, and your service was less than twelve months.

Yours faithfully,

Lieut.-Col.,
Chief Staff Officer