THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 1619 Name Patrick Sullivan Corps R.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name?	1. Patrick Sullivan
2. What is your full Address?	2. Spaniard's Bay
3. Are you a British Subject?	3. Yes
4. What is your age?	4. 19 Years ..... Months
5. What is your Trade or Calling?	5. Mechanic
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 Patrick Sullivan 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.

Patrick Sullivan SIGNATURE OF RECRUIT.

A-73118 ..... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 23 day of April 1918

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.....191 .....

Place..... ..... Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Patrick Sullivan

Apparent age ..... years ..... months. Height 5 feet 7½ inches

Chest Measurement { Girth when fully expanded 34 inches
Range of expansion 3 inches

Distinctive marks .....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Patrick Sullivan
Ste Marie Cte. | Relationship Father.

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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

Recruiting Form B, 1915.

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4619 Name [illegible] Corps R.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name?	1.	[illegible]
2. What is your full Address?	2.	[illegible]
3. Are you a British Subject?	3.	Yes
4. What is your age?	4.	18 Years ..... Months
5. What is your Trade or Calling?	5.	Merchant
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 [illegible] 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.

[illegible] SIGNATURE OF RECRUIT.

[illegible] Signature of Witness.

A-7/2/18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I [illegible] 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 12 day of April 191 8

Signature of Attesting Officer [illegible]

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the‡.....

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

Date.....191 .....

Place..... ..... Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Patrick Sullivan

Apparent age ..... years ..... months. Height 5 feet 4½ inches

Chest Measurement { Girth when fully expanded 34 inches
Range of expansion 3 inches

Distinctive marks .....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Patrick Sullivan
11 Mona Pl, | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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

4649

Recruiting Form B, 1915.

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4649 Name P Sullivan ~~Corps~~ R.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name?	1.	Patrick Sullivan
2. What is your full Address?	2.	Torbay
3. Are you a British Subject?	3.	Yes
4. What is your age?	4.	18 Years ..... Months
5. What is your Trade or Calling?	5.	Machanic
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 Patrick Sullivan 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.

Patrick Sullivan Witness J.W. Pittman 18

SIGNATURE OF RECRUIT.

Jas W. Pittman Signature of Witness.

2nd Regt 1-6

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 10 day of October 1918

Signature of Attesting Officer L.J. Jannaherent.

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the‡.....

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

Date.....191 .....

Place..... ..... Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Patrick Sullivan

Apparent age ..... years ..... months. Height 5 feet 7½ inches

Chest Measurement { Girth when fully expanded 34 inches
Range of expansion 3 inches

Distinctive marks .....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Patrick Sullivan
Mr Maine P.E.I. | Relationship Father

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 23-4-18							
		Joined at St Johns on April 23-1918							
		Discharged St Johns Jan 9 1919							
		Reported for duty 13-3-18.							
		Sick Bell Island (Telegram)		13-7-18					
		Returned from Leave		22-7-18					
		Admitted R.N.D. Hospital		17-8-18.					
		Discharged to Field Street		27-9-18					
		Remobilized taken on strength							St Johns 9-1-19
		Total Service forfeited as above							

Total Service towards Engagement to 9-1-1919 [date of discharge] — years 240 days

" " Pensions " [" "] " "

C.R. 4649

Extract of Daily Orders Part II, dated Jan.10th 1919

DEMOBILIZATION.

The discharge of the under noted has been approved by the Officer i/c Records on noted date.

4649 Pte. Patrick Sullivan

Discharged 9-1-19

C.R. 4649

Extract from Daily Orders Part 11 Unit the Royal Nfld. Regt., St. John's, Dec.18th, 1918.

The undernoted man discharges on Demobilization has been approved by O.C. Discharge Depot from noted dates. He is removed from Depot strength to Discharge Depot pending confirmation by Officer i/c Records.

4649 Pte. Patrick Sullivan.

11-12-18.

C.R.4649

Extract from Preliminary Report at a Medical Board held on TUESDAY AFTERNOON December 3rd., the following were the findings.

4649 Pte. P. Sullivan

RECOMMENDED DISCHARGE AS PERMANENTLY UNFIT.

BC?

C.R. 4649

xtract from Daily Orders part 11 Depot St. John's dated Sept. 20/19B

##4649 Pte. I. Sullivan

Discharged from 21 Field Street 27/9/18

C.R. 4649

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt. St. John's, dated Sept. 5th, 1918.

4649 Pte. R. Sullivan.

Discharged from M.I.D. Hospital and Admitted to 21 Field St. 4-9-18.

C.R. 4649

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St, John's, dated August 17th 19181

4649 Pte. P. Sullivan.

Admitted to M.I.D. Hospital 17-8-19.

C.R. 4649

Extract from Daily Orders part 11, from Unit The Royal Nfld.Regt. St.John's, dated April 25,1918.

#4649 Pte.Patrick Sullivan

Attested for General Service with the Royal Nfld.Regt. from 23/4/18 To report 1/6/18.

Sullivan, Patrick 4649

Hay Dept.

January 9th.,1919

#4649 Pte. Patrick Sullivan,

Harbor Main,C.B.

Dear Sir:-

Please find enclosed "Discharge Certificate No.354."

Yours faithfully,

Captain,
Paymaster & O. i/c Records.

Enc'l 1.

Demobilisation Form 2.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4649 Rank Pte Name Pat Sullivan
Intended place of residence St Johns

2. Occupation Mechanic
Classification of soldier B Medical Category E

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

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

Place St. John's
Date DEC 10 1918

H Mosley Capt
Comanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date St Johns
Dec 10th 1918

Signature of soldier
Pat Sullivan
Signature of witness
A/Capt

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date St. Johns
10-12-18

Pat Sullivan
Signature of soldier
J E Peters Lt
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 23-4-18
Discharged from service 11-12-18 plus 28 days

No of days on Military Service 261

8 31 30 31 31 30 31 30 31 9 262

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S.
Date DEC 11 1918

R H Daintcart
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St Johns. Nfld.
Date January 9/1919
A.F.B. 2079/354

J M Bowley Capt
Officer i/c Records
The Royal Newfoundland Regiment

Demobilization Form 8

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4649 Rank Pte Name Sullivan Pat

Date of Enlistment 23.4.18 Address St Mary's District St Mary's

Occupation Machinist Classification for Discharge B Medical Category E

Recommendation S.M.B Permanently unfit Disability Rating 20%

Passed to Demobilization Officer with following documents:—

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

Date 9.1.19

for O. C. Discharge Depot. A.B. Bailey Capt

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Pat Sullivan

Particulars passed to Vocational Officer for information and action.

Date .....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable $60.00

(b) ~~Clothing Supplied~~ Joseph H Lawless

Date 10.12.18

O i/c. Re-clothing.

3. **Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. R173 to his home at H. Main and Release Certificate No. 248 issued.

Date 10-12-18 C.S. Dicks Capt
Demobilization Officer

4. **Pay and Allowances.**

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 8-1-19

Date 10-12-18 Mosley Capt.
Depot Paymaster.

Discharge approved for Dec 16th 1918

Forwarded with following documents to O.C Discharge Depot.

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

Date 10-12-18 C.S. Dicks Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 11 1918 R.H. Last Capt
O. C. Discharge Depot.

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

Date Dec. 12/1918

D. & Co.—1000-7-17.

Reprint for 1st Nfld. Regt. of
Army Form B. 178A.

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

MEDICAL HISTORY

OF

Surname Sullivan Christian Name Patrick

Table I.—GENERAL TABLE.

Birthplace:—Parish Ft Maine County Nfld

	SPECIAL RESERVE.	REGULAR ARMY.
Examined	on 23 day of Apr 1918 at St Johns	on day of 191 at
Declared Age	18 years — days	years days
Trade or Occupation	Machanic	
Height	5 feet 7½ inches	feet inches
Weight	130 lbs.	lbs.
Chest Measurement: Girth when fully expanded	34 inches	inches
Chest Measurement: Range of Expansion	3 inches	inches
Physical Development		
Vaccination Marks: Arm / Number	Right / Left	Right / Left
When Vaccinated		
Vision	R.E.—V= 6/15 L.E.—V= 6/15	R.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) (Rank)	Lamont Paterson Major Medical Officer.	Medical Officer.
Enlisted	at St Johns on 23 day of Apr 191	at on day of 191
	Corps. / Regtl. No.	Corps. / Regtl. No.
Joined on Enlistment	The Royal Nfld Regt 1469	
Transferred to		
Became non-effective by	on day of 191	on day of 191
[Signature] [Rank]		

[P.T.O.

Table II.—Only for admission to hospital or to the sick list i

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the syphilis, admissions and of treatment
	Day	Month	Year	Day	Month	Year			
M. I. D. Hospital.	17	8	18	3	9	18	Mumps	17	Discharged

al or to the sick list in case of Warrant Officers treated in quarters.

Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case 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
Discharged to Billets to finish Quarantine	Archibald

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
5-6-18	Vacc 1st
	It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as B *for discharge on Demobilisation. Medical category* B1 28.11.18 (Date of S.M.B.) H.B. Riley Captain (Discharging Medical Officer)

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

Form B.
16-10-18-300.

Civil Re-establishment Committee.

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

To work as mechanic

Pat Sullivan
Signature of Man.

Reg. No. 4649

C. B. Dicks
Signature of the Vocational Officer or his Representative.

Place St. John's

Date 9/12/18 191

Demobilization Form 1

The Royal Newfoundland Regiment

Class for Demobilization:— B.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 26th Nov 1918

Regimental No. 4649

Name Sullivan Patrick Private

Address No 1 Main

Present Medical Category E

Recommended for:— (a) ~~Immediate discharge~~

(b) Standing Medical Board

Proceeding of S.M.B. infil

Members of Board

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

L.O. Gatherer
Senior Medical Officer

D.W. Borden
M. O. Depot

FORM K

№ 7021

THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Patrick Sullivan, Regl. No. 1,649

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

Allotment begins November 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
7021	Father	Patrick Sullivan	Harbour Main		60cts
			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.) [illegible]
Officer Commanding
C Company
Princes Park
Oct 7 1918

(Sig.) Patrick Sullivan
(Rank) Pte

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms B. 121. 39.

Number of Sheet One

Regiment of Royal Newfoundlands

Signature of O. C. Company [signature]

Regimental Number and Name	Enlistment	Trade	Good Conduct Badges, Service pay or proficiency pay
No. H649 Sullivan Pat.	Age on 18 years months	Machanic	
Joined Date	Place and Date of Enlistment St Johns 23.4.18	Religion R.C	
Joined Date			
Joined Date	Period of with Colours years. with Reserve years.	Place of Birth Harbor Main	
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

To be carried over

Army Form B. 121.

Form M. E. (2) N.F.1915

☞ This Form is to be used in connection with Pamph. M. E. (1) N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Patrick Sullivan

aged 18yrs *conducted at* Head Quarters

Date: April 23/18 *Recruiting Officer:*

NO OF TEST	FINDING
1	No
2	No
3	Yes Has Rheumatism in legs
4	No
5	No
6	No
7	No
8	Yes
9	No
10	"
11	"
12	"
13	"
14	"
15	"
16	"
17	"
18	"
19	Yes Both
20	"
21	"
22	"
23	"
24	"
25	"
26	"
27	"
28	"
29	"
30	"
31	"
32	"
33	No
34	5 ft 7 1/2
35	130
36	31 — 34
37	"
38	Father Patrick St. Main C Bay
39	Nobody

4649

Signature of Medical Examiner: Archd Gut

N.M.D. Form B 179

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 St. Johns

Date 28th Nov 1916

1. Unit Royal Newfoundland
2. Regimental No. 4649
3. Rank Private
4. Name William Patrick
5. Age last birthday 18 years
6. Enlisted on 23rd April 1916
   at St. Johns
7. Former trade or occupation Mechanic

8. Disability

Pain in Side

9. History Says he had pain in side for long period before enlisting. Came on periodically more especially on exertion. Also been continually on sick parade

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.)

General condition fair. Complains of debil & loss of ~~memory~~ excertion. Sibilant rales over front. right chest. Bronchial breathing both bases. to subject to periodic colds. Pulse 92. Temp normal

11. Was ~~sanatorium~~ / ~~operation~~ advised and refused? —

12. Do you recommend discharge as permanently unfit? ~~No~~ Yes

Signature .....

Rank or Qualification ...Surgn.....

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

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? 20 %

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a ful livelihood in the general labor market lessened by that portion of his disability to or incurred during service? (State in percentage.) Nil

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperence No (b) Misconduct No

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 Convalescent Hospital, / Jensen Tuberculosis Camp. } No

20. We recommend discharge from / ~~retention in~~ the Army permanently unfit.

Remarks if any:—

..... President

Signatures .....

.....

Place St Johns

Date Dec 3/18

APPROVED

Station .....

Date ..... DEC 3 1918

DIRECTOR OF MEDICAL SERVICES No. NEWFOUNDLAND

..... Administrative Medical Officer Major

April 5th.,1919

#4649 Pte.Patrick Sullivan,

Lakeview,

Harbor main.

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 Regt. Twelve months (12), and you have not been Overseas.

Your truly,

Paymaster & O.i/c Records Capt.

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 question are not applicable, the words "NOT APPLICABLE" must be written out.

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

Christian name. Patrick 2. Surname Sullivan

3. Rank Private 4. Regtl. No. 4649

5. Address in full to which future payments of gratuity are to ~~be~~ be forwarded... Patrick Sullivan

Lake View Harbor Main

6. Date of enlistment in the Regiment... April 23rd/18

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

Patrick Sullivan Harbor Main

8. Relationship of such dependents... Son

9. Address in full of such dependent... Patrick Sullivan

Lake View Harbor Main

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

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service...

Served in Regt. at St. John's

from April 23rd 18 to Dec 11th/18

12. Give total length of time which you served on active service, whether in Nfld. or Overseas...

9 Months in Nfld

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

14. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid... no

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

16. Have you, during the present war, served in the Imperial Forces. no

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

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

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

19. Are you now serving in the Regt.? ..no.... If not give:- (a) Date of discharge.. Dec 11 - /18.....(b) Reason for discharge..... Demobilization

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

Place of Residence: Lake View Harbor Main

Declared before me at:

This 2nd day of April 1919.

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of Affidavits. P. O. Woodford J.P.

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			Nil	

Certified Correct.

Paymaster.

FORM K

No. 7021

THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Patrick Sullivan, Regl. No. 1649

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

Allotment begins November 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
7021	Father	Patrick Sullivan	Harbour Main		60 cts
			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.) [illegible]
Officer Commanding
C Company

Princess Rink
Oct 7 1918

(Sig.) Patrick Sullivan

(Rank) RC

Br 4649 Lr Main
March 26-19

Pay & Record Office
Please send by
return mail one
claims form for War
Service Gratuity use
Oblige
Yours
Patrick Sullivan
H. Main

4649

Demobilization Form 3

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4649 Rank. Pte Name. Sullivan Pat

Date of Enlistment. 23.4.18 Address. St Mary's District. St Mary's

Occupation. Machinist Classification for Discharge. B Medical Category. E

Recommendation S.M.B. Permanently unfit Disability Rating. 20%

Passed to Demobilization Officer with following documents:—

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

Date. 9.12.18 for O. C. Discharge Depot. W. Bailey Capt

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am ~~.....~~ in a position to resume civilian occupation.

Pat Sullivan

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

DEC 13 1918

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. $60.00

(b) ~~Clothing Supplied~~ Robert H Crawford

Date. 10-12-18 O i/c. Re-clothing.

3. **Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. R.173 to his home at H. Main and Release Certificate No. 2.4.8 issued.

Date 10-12-18 C.B. Dicks Capt
Demobilization Officer

4. **Pay and Allowances.**

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 8-1-19

Date 10-12-18 Money Capt.
Depot Paymaster.

Discharge approved for Dec 16th 1918

Forwarded with following documents to O.C Discharge Depot.

N.F. P|36		B 268		B 121 ✓	1	N.F. Med		D.F. 1 ✓	1	Form B ✓	
F 173		W 3494		B 122		Board 1st		" 2 ✓	1		
B 178a	✓ 1	D 400A ✓	1	B 1915 ✓	2	do 2nd		" 3 ✓	2		
B 179	✓ 1	D 400B		Form L		do 3rd		" 4			
B 179a		D 400C		Form K ✓	1	do 4th		" 5			
B 179b		B 103		ME 2 ✓	1			" 6			
B 179c		B 120		M 93							

Date 10-12-18 C.B. Dicks Capt
Demobilization Officer.

APPROVED. R.

Documents as above forwarded to:—

Officer i\|c Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 11 1918 R.H. Hart Capt
O. C. Discharge Depot.

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

Date Dec. 12/1918 M. Docoley, Capt
O.C.R.

I hereby certify that Patrick Francis, son of Patrick Sullivan and Mary A. Costigan was born on the 29th day of August 1900

P. H. Shea P. P.

Harbor Main
Newfoundland
May 6th 1918

File 14

May 11th 8

My Dear Fr.Sheah,-

I have to thank you for the Birth certificate of Pte.P.F.Sullivan.

As this man is so close to his eighteenth birthday I do not think it would be wise at the present juncture to have him withdrawn from the service. I can give you the positive assurance however that he will not be drafted overseas until next year. I would request that you pass this information on to his parents, and I trust this will allay any fears they may have on this point.

With kindest regards,

Sincerely,

MAJOR:

Officer Commanding Depot.

Form No. 15

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 7 Sent by [redacted] Rec'd by Check 12 Time

Place from Bell Island

To Headquarters Royal Marine Light Infantry Depot Deptford

POSTAL TELEGRAPHS JUL 13 1918 DARLING & WHARF

pte patrick Sullivan
not feeling well
dont expect Get back
before monday.

4649 pte Patrick Sullivan

Pte Patrick Sullivan
Bell Island.

You will require Doctor's
Certificate if you are ill.
Capt R. Connolly

FORM NO. 10

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 10 Sent by _____ Rec'd by _____ Check 11 No. _____

POSTAL TELEGRAPHS OCT 29 1918 KING'S WHARF

Place from Harmain 29

To Capt Lait

Princes Rink

How is influenza
Can I get another
week time up 30th

4649 pte pat Sullivan

6 boys

Report for duty November 1st

No enquiry respecting this Message will be attended to without the production of this paper.

Form No. —

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 10 Sent by MD Rec'd by _____ Check 17 No. _____

Place from Belleisland

To Capt. O'Grady

POSTAL TELEGRAPHS OCT 16 1918 KING'S WHARF

I was home on leave
hearing influenza was plenty
will I return now or
later please reply.

4649 Pte H. Sullivan

Grattan Lines

Oct 16 - 18 - 30

No enquiry respecting this Message will be attended to without the production of this paper.

Reg. No. 4649 Rank Pte Name Sullivan P.

Attested 12.11.18 Address Harbour Main

Allotment 104 Allotee Patrick Sullivan (Father)

Date of Allotment 1-11-18. Returned from Overseas

Embarked for Overseas Cause

Report 1.10.18 Reported 10.5.18

5/8 Pace

13-7-18 Sick at Base Boland

Returned from leave 22.7.18

17-8-18 Adm - 20 M.D. Hosp.

Discharged from M.D. 20 to 31 Fits Lt.

27-9-18 " " 1 " 6-10-18 " "

Leave 8-10-18 to 16-10-18.

Leave M.D. 1 from 16.10.18 to 30.10.18. Returned 1-11-18.

3.11.18 Recommended Discharge Permanently Unfit.

10-7-18 PASSED TO DEMOBILIZATION OFFICER

4-12-18 DISCHARGE APPROVED ON DEMOBILISATION.