



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 35-88 Name A. Smetapple Corps S.A.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Stephen Smetapple</u> |
| 2. What is your full Address? | 2. <u>Alexander Bay</u>
<u>B.B. R.D.B.</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>26</u> Years <u>9</u> Months |
| 5. What is your Trade or Calling? | 5. <u>fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, Stephen Smetapple 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.

4-12-17 Stephen Smetapple SIGNATURE OF RECRUIT.
A. J. Parsons Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Stephen Smetapple 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 12 day of April 1915.

Signature of Attesting Officer T. Mess R. Appleby

†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 rank of Private.

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

Date.....191..... } Approving Officer.
Place..... }

† 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).....



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3588 Name S. Sweetapple Corps A.A.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Stephen Sweetapple
- 2. What is your full Address? 2. Alexander Bay
B.B. A.O.S.
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 26 Years 9 Months
- 5. What is your Trade or Calling? 5. Fisherman
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. yes
- 9. Are you willing to be enlisted for General Service? 9. yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ... 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service } II. yes
to be signed by you if you are accepted?

I, Stephen Sweetapple 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.

4-12-17 Stephen Sweetapple SIGNATURE OF RECRUIT.
Alex. E. Parsons Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Stephen Sweetapple 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 12 day of April 1917

Signature of Attesting Officer Mr. R. Aylmer

†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..... } Approving Officer.
Place..... }

† 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 Stephen Sumrappé
 Apparent age 20 years 9 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Sumrappé
Alexander Bay | Relationship Father
B. 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>12.4.17</u>									
Joined at <u>St John's</u> on <u>April 12-17</u>									
<u>Discharged July 19 1919</u>									
<u>Embarked St John's St. Margaret Co</u>									<u>Hatfield N.S. 19 17</u>
<u>Embarked for S.E. 37 3-1918</u>									<u>St. Helier 30 17</u>
<u>Warranted 1st S.W. Co Reg. 15 18</u>									<u>Admitted Military Hosp. Entert 25 18</u>
<u>Surveys to 1-12-18</u>									<u>to 1/2 for demobilization 22 19</u>
<u>Arrived Newfoundland 1-6-1919</u>									
<u>Demobilization St John's 19-7-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 19-7-19 (date of discharge) 2 years 99 days
 " " " Pensions " [" "] " " "

C.R. 3588

Extract from Daily Orders Part II Unit The Royal WFLA. Regt.
St. John's, July 25th, 1919.

The discharge of the undernoted on demobilisation has been
CONFIRMED by officer i/o Records from 19-7-19.

3588 Pte. Stephen Steetapple.

6765

Alexander Bay

CR 3588

Oct 2nd 1919

Please Sir
 I am begging you to send me my
 service when you officially
 3688 Stephen Sweetapple

Recd
 S

C.R. 3588

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, July 7th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot with effect from 5-7-19.

3588 Pte. S. Sweetapple.

C.R. 3588

Extract from Daily Orders Part II Depot, St. John's,

Date June 18th 1919.

3588, Pte. S. Sweetable.

Reported at Headquarters 1/6/19. ex "Corsican"
which sailed Liverpool May 22/1919.

Petries C.R. 35-88
Bay of Islands
May 30th - 19

Mr A. E. Hickman M. H. A.
St. John's.

Dear Sir:-

I have a brother returning on the
boosean this trip.

another come on her in Feb.

They both have served with the Regiment
since the Spring of 1917 & spent several
months fighting in France, one being
wounded during that time.

I have been anxious to see them,
travelling expenses to Bay of Islands
prevents them from coming.

I could go & see them for about \$20.⁰⁰

Can you grant me free passage to &
from Alexander Bay which will not be
more than the amount above mentioned.

Thanking you in anticipation,

Yours very sincerely,

James Sweetapple. (Capt
Salvation Army)

C.R. 3588

Nov. 6th, 18.

Mr. John Sweetapple,
Alexander Bay, B.B.

Dear Sir:-

I beg to inform you that additional information has to-day been received by this Department through the visiting committee of the Newfoundland War Contingent Association, to the effect that No. 3588, Private Stephen Sweetapple, is now progressing favourably.

Yours faithfully,

Lieut. Col.,
Chief Staff Officer.

C.R. 3588

Extract from Daily Orders part IIm, by Lt. Col.,
B. J. BARTON, Officer Commanding 2nd., Battalion
of the Royal Newfoundland Regiment dated 2-12-16.

The u/m having reported back from the 1st., Batt.
is taken on the strength and posted to "H" Co.,

3588 Pte. S. Sweetapple.

1-12-18.

C.R. 3588

Extract from Casualties received from Pay & Record Office
London,

3588 Pte. S. Sweetapple.

Ex Military Hospital Endell St., 22-11-18 is granted furlough
to 1-12-18. Fit for 11 Command Depot.

C.R. 3588

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT
IN FRANCE DATED 21/11/18.

TO ENGLAND.

#3588 Pte. S. Sweetapple,

24/10/18.

C.R. 3588

Extract from War Office List.

#0. 1733 dated 11. 18.

#3588 Pte. S. Sweetapple.

wounded 14. 10. 18.

BC.

C.R. 3588

Extract from Medical History of Sick and Wounded admitted to various
Hospitals on various dates.

3588 Pte. S. Sweetapple.

R. Wfld. R..... G.S.W. R.Leg.

Admitted to Military Hospital Edwell Street, W.C.S., 29/10/18.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

C.R. 3588

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address **Dep of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated

Oct 28th, 1918

To

John Sweetapple, Alexander Bay, B.B.

Regret to inform you that Record Office, London,
officially reports **No. 3588, Private Stephen Sweetapple**
at Military Hospital Endell Street, London suffering
from G.S.W. right leg.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Chef Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 3588

Extract from War office List. No. H. A. 30585

ADMITTED 30 GEN. HOSPITAL. CALAIS 15th OCTOBER 1918.

#3588 Pte. S. Sweetapple.

G.S.W., LEG. R.

BC.

C.R. 3588

Extract from Nominal Roll. embarked St. John's for Overseas 19-5-17.

#3588 PTE. S. SWEETAPPLE.

C.R. 3688

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt., St. John's, April 18th, 1917.

3588 Pte. Stephen J. Sweetapple.

Attached to the Strength from April 18th, 1917.

S Sweetapple

C.R. 3588

~~Hand~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

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

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

Statement of Case.

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

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

ly. S.W. right leg.

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

J. J. wound popliteal region superficial healed movement of knee joint good

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

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

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

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

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Refaturation

Shohier Capt

mo

Medical Officer in charge of case.

Station

Date

* 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.



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

Stephen Sweetapple

aged

20

conducted at

Hdqs.

Date:

12/4/17.

Recruiting Officer:

NO OF TEST

FINDING

1 *no*
2 *no*
3 *no*
4 *no*
5 *no*
6 *no*
7 *yes*
8 *yes.*
9 *no - no*

10 *~*
11 *~*
12 *~*
13 *~*
14 *~*
15 *~*
16 *~*
17 *~*
18 *~*
19 *4/6 Bots*
20 *~*
21 *~*
22 *~*
23 *~*
24 *~*
25 *~*
26 *~*
27 *~*
28 *~*
29 *~*
30 *~*
31 *~*
32 *~*

M.S.

33 *yes. 1 scar. 4 yrs ago*
34 *5ft 9*
35 *135 lbs.*
36 *35-38*
37 *\$1.50 per day*
38 *Father John. Alexander Bay.*
39 *Mother*

St. J. [Signature]

Signature of Medical Examiner:

St. J.

Only for use with Men returned from an Expeditionary Force
or from Garrisons Abroad.

Army Form W. 3016,
(In Books of 200.)



No. 2203 Date 21.11.1918

- * (1) To the Officer i/c Records } 58 Victoria St. London S.W.1.
 - * (2) The Officer Commanding } Hazelton Camp, Winchester
 - } 58 Victoria St.
 - * (3) The Paymaster } London S.W.1. Station.
- Strike out that which is inapplicable.

Regimental No. 3588

Rank and Name Sweetapple, Stephen, Pte.

Regiment or Corps Newfoundland Regt. C Coy.

admitted into hospital on 5.10.18
has been granted } is reporting to headquarters
a furlough from } as instructed.

His address while on leave will be } Furlough 22¹¹/₁₈ to 1¹²/₁₈

- I consider he is fit for } * ~~I. DUTY.~~
 - } * II. COMMAND DEPOT to report to depot
 - } * ~~III. EMPLOYMENT.~~ understood to be 1 duty
- Strike out that which is inapplicable. on 22¹¹/₁₈

Munn
Officer in charge MILITARY HOSPITAL, Hospital.
ENDELL STREET, W.C. Station.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps, two copies of Army Form W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. shown in the Schedule.

No. 4476/663

#

ob 4 917

N.F.C./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.,
Hazelby Down Camp,
Winchester.

20th March 1919

25/3/ 1919

3588 Pte. Sweetapple S.

With reference to the follow-
ing telegram from the Minister of
Militia / / (84)

"Pay to- 3588 Sweetapple,
£10. 0. 0.

Cheque £10. 0. 0 is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

A. D. Minshall Maj.
Chief Paymaster & O. i/c Records.

Receipt hereunder

[Signature] LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.,
Officer Commdg. *[Signature]* Batt'n.

Received the sum of £10

Pravids in respect of

telegraphic remittance from the
Minister of Militia.

S. Sweetapple

No. 3588 Rank Private

Witness Chudell

NEWFOUNDLAND CONTINGENT

N.F.P./45.

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

Please remit to

S Sweetapple

the sum of 3 pounds — shillings (~~£ —~~)

on account of any balance that may be due to me.

Regtl No. 2588 Rank 1st

Name

DOCTOR IN CHARGE

Approved

THE MILITARY HOSPITAL.

ENDELL STREET, W.O.

Endell Street Hospital.

Dated at

2/11/18

1918

OK £3-0-0.
2-11-18.
Receipt No. 9477

[Handwritten signature]

Sweetapple, S

3588

Ray seph

July 22, 1919

#3588 Pte. Stephen Sweetapple.
Alexander Bay.

Dear Sir :-

Please find enclosed Discharge Certificate #3170.

Yours truly

Captain & Quartermaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3588 Rank. Pte Name. Sweetapple, S.
 Intended place of residence. Alexander Bay
 2. Occupation Alexander Bay, Fisherman
 Classification of soldier. F Medical Category. A.I

3. The above named man is discharged in consequence of

DEMOBILIZATION

Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 3 1919

H. Mous Lt.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 3 - 1919

Sweetapple
 Signature of soldier
J. Knowlton
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date JUL 3 - 1919

Sweetapple
 Signature of soldier
J. W. Chaucey
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service. 12-4-17 No. of days on Military Service. 829
 Discharged from service. 5-7-19 Plus 14 days

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 5 1919

R. H. Last Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place, ST. JOHN'S

Date July 19/1919

J. W. Chaucey
 Officer in Charge
 The Royal Newfoundland Regiment

19
31
30
19
99

0273207913170

The Royal Newfoundland Regiment

Class for Demobilization: —

6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

7.7.19

Regimental No

3588

Name

Sweetapple S.

Rank

Pte

Address

Alexander Bay, B. B.

Present Medical Category

A1

Recommended for: —

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R. H. East Major
O.C. Discharge Depot.

W. A. Brown
Senior Medical Officer

J. W. Borden
— M. O. Depot

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 72207 issued to his home at Alexander Bay and Release Certificate No. 3142

Date 3-7-19

J.A. Snowball
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

Date 3-7-19

19-7-19
H.M. [unclear]
Depot Paymaster

Discharged approved for 5-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 3-7-19

J.A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents

Eligible for War Service Gratuity

JUL 5 1919

Date

R.H. Sait MAJOR

O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3588 Rank ptr Name Sweetapple J.
 Date of Enlistment 12-4-17 Address Alexander By District Bonaville
 Occupation Fulcrum Classification for Discharge 4 Medical Category A
 Recommendation S. M. B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

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

Date 2-7-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

J Sweetapple

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 [Signature]

Date 3-7-19 O i/c. Re-clothing _____

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:

.....
.....
.....

S. Queteppe

Signature of Man.

J. J. Snowball

Signature of the Vocational Officer or his Representative.

Reg. No. 3588-

Place ST. JOHN'S.

Date JUL 3 - 1919 191

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

MEDICAL HISTORY


Surname Sweetapple OF Christian Name Stephen

Table I.—GENERAL TABLE.

Birthplace:—Parish Alexander Bay County Bonaville Bay

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>12th</u> day of <u>April</u> 191 <u>1</u> at <u>Headquarters</u>		on _____ day of _____ 191 <u>1</u> at _____	
Declared Age	<u>20</u> years — days		years _____ days _____	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>9</u> inches		feet _____ inches _____	
Weight	<u>135</u> lbs.		lbs. _____	
Chest Measurement	Grith when fully expanded ... <u>38</u> inches		_____ inches _____	
	Range of Expansion .. <u>3</u> inches		_____ inches _____	
Physical Development				
Vaccination Marks	Arm		Right	Left
	Number	<u>1</u>		
When Vaccinated				
Vision	R.E.—V= <u>6/6</u> L.E.—V= <u>6/6</u>		R.E.—V= <u> </u> L.E.—V= <u> </u>	
	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)	
Approved by (Signature)	<u>W.S. Procuier</u>			
(Rank)	<u>Lieut.</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's</u> on <u>12th</u> day of <u>April</u> 191 <u>1</u>		at _____ on _____ day of _____ 191 <u>1</u>	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>4/1st</u>	<u>3580</u>		
Transferred to	<u>Mfld Regt.</u> ROYAL NEWFOUNDLAND REGIMENT.			
Became non-effective by				
(Signature)	on _____ day of _____ 191 <u>1</u>		on _____ day of _____ 191 <u>1</u>	
(Rank)				

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				
 DUNDEE WAR HOSPITAL St. George's Cross Hospital DUNDEE	21	8	17	18	8	17	Diphtheria	25	Free from infection (bacteriological) on six days.	W. T. Burgess
MILITARY HOSPITAL, ENDELL STREET, W.B.	24	10	18	21	11	18	g s w at leg 12.1	27	wounded 14.10.18. most of knee normal. Wds. healed.	W. Kinnear, M.B., Ch.B.
Hilsea	7	1	19	5	2	19	Spunkacea	30	Treated by KMnO ₄ irrigations and Mist. Soda Bic. Fit. to rejoin unit.	R. Massey Capt. Massey



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Switapple Stephen*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5088*

Intended address *Alexander Bay, B.B.*

Height on discharge *5* Feet *10*.

Color of hair on discharge *Dark*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *Tall*

Christian name of Father *John*

Christian name of Mother *Mary*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Gooseberry B.C. 7 July. 1896.*

Nature and locality of civil employment required _____

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct.

(Soldier's signature in full) *Stephen Switapple*

(Rank) *Private*

Station *St. John's*

Date *2-7-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Station _____

Date _____



The Royal Wld. Regiment

DEMOBILIZATION

No. 3578 Rank

Name Sweetapple W

Warned for demobilization on

JUL 3 1919

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve. In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

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

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

Statement of Case.

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

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

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

R.S. W Right leg.
1st wound, popliteal region, superficial, healed. Movement at knee joint good.

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service.. .. . | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. } | No | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *N.A.*

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

15. What is his present condition? *Two small scars on external surface of face about popliteal space and 3 inches apart not healed. no disability*

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

16. Was an operation performed? If so, when and what was its nature? *No*
17. If not, was an operation advised and declined? *N.A.*
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *N.A.*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? *N.A.*

20. Do you recommend— *Repatriation*

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Repatriation
Forfeited Capt. M.O.

Station *Hazeley Down Camp.*

Date

Medical Officer in charge of case.

* 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

July 24, 1919

#3588 Pte. Stephen Sweetapple,
Alexander Bay, B.B.

Dear Sir:-

Referring to your application I enclose cheque for seventy dollars (\$70.00), being amount of first payment due you on account of the war Service Gratuity.

Yours truly,

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name..... *Stephen S. Sweetapple*

3. Rank..... *Pte.*..... 4. Regtl. No. *3588*

5. Address in full to which future payments of gratuity are to be forwarded..... *Alexander Bay, ~~St. John's~~ B.P.*

6. Date of enlistment in the Regiment..... *June 17/17*

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.....

9. Address in full of such dependents.....

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..... *Overseas*

.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From June 17/17 to*

July 3/19..... 1.

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

No

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

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

No

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

No

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

No

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

No

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

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

No

July 27 1919
Temporary

Demobilization

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

France + Belgium - From March 1918 to Oct 1918

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.

ST. JOHN'S, JUL 3-1919

Royal Newfoundland Regiment.

Billeting Account,

To Pt1 S Sweetapple

Billeting Soldiers as undermentioned

from June 1/19 to June 30/19

3588 Pt1 S Sweetapple 31 00

ACCOUNT	<u>Btm</u>
CH. NO	<u>2135</u> <u>EW</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

[Handwritten signature/initials]

Certified correct for \$ 31.00

[Handwritten signature]
Billeting Officer.
[Handwritten signature]

cl. 102.

RECEIPT FOR ISSUE OF **C.R. 35-88**
RIBAND OF BRITISH WAR MEDAL-1914-1919.

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

NAME.....*Stephen Sweetapper*.....

(Date).....*26-10-19*.....

(Place).....*Avonmouth Bay*.....

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
R 121.
39.

Regiment of 1st Newfoundland.

Number of Sheet First
Signature of O. C. Company Wm. A. Capelapt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>3588. Sweetapple S.</u>	Age on	<u>20</u> years <u>9</u> months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment	<u>St. John's.</u> <u>12. 4. 17</u>	Religion	
Joined	Date			<u>S. A.</u>	
Joined	Date	Period of	{ with Colours <u>2 22</u> years. with Reserve <u>3 65</u> years.	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 style="font-size: 2em; font-family: cursive;">Demobilized St. John's, 19 79</p>									
<p>To be carried over</p>									

53588

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 53588 Rank Plt Name Sweetapple
 Date of Enlistment 12-4-17 Address Alexander Ry. District Bonaville
 Occupation Teleman Classification for Discharge by Medical Category A
 Recommendation S.M.B. _____ Disability Rating _____

Pass to Demobilization Officer with following documents:—

N.F. P1	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 178b	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 2-7-19

[Signature]
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

[Signature]
 Sweetapple

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 [Signature]

Date 3-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 112287 to his home at Alexander Bay and Release Certificate No. 3142 issued.

Date 3-7-19

J.A. Snowball
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 17/11/19

Date 3-7-19

J.A. Snowball
Depot Paymaster

Discharge approved for 5-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 3-7-19

J.A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents

Eligible for War Service Gratuity

Date JUL 5 1919

R.H. Jett
O. C. Discharge Depot.

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

Date July 21 1919

[Signature]

Reg. No. *5589* Rank *Pte.* Name *Sweetapple S.*
Attested Address *Alexander Bay*
Allotment Allottee
Date of Allotment Returned from Overseas *29-5-19*
Returned on S.S. *Corsecan* Cause *Discharge*

3.7.19
5.8.19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILIZATION