



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. **3816**

Name **William Tarrant** Corps **S. A.**

Questions to be put to the Recruit before Enlistment

1. What is your name? 1. **William Tarrant.**
2. What is your full Address? 2. **Dartwood**
3. Are you a British Subject? 3. **yes.**
4. What is your age? 4. **18** Years **4** Months
5. What is your Trade or Calling? 5. **lumbarman.**
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.**

FOR THE DURATION OF THE WAR

I, **William Tarrant** 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.

William Tarrant SIGNATURE OF RECRUIT.

Brendan Simons Signature of Witness.

F25-5-17

William Tarrant OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, **William Tarrant** 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 and as replied to, and the said recruit has made and signed the declaration and taken the oath before me at **St Johns** on this **25** day of **May** 191**7**.

Signature of Attesting Officer **W. H. ...**

†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**7** } 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. 3816 Name William Tarrant Corps S.I.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. William Tarrant
2. What is your full Address? 2. Pastor's ch.
3. Are you a British Subject? 3. yes
4. What is your age? 4. 19 Years 4 Months
5. What is your Trade or Calling? 5. Lumberman
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, William Tarrant.....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.

F25-5-17 William Tarrant.....SIGNATURE OF RECRUIT.
Brendan Linnott.....Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Tarrant.....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 25 day of May 1917

Signature of Attesting Officer W. J. [unclear]

†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).....

REPORT ON ENLISTMENT

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

Name Pillson Tarrant
 Parent age 19 years 4 months. Height 5 feet 0 inches
 Chest Measurement { Girth when fully expanded 36 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Tarrant
Bateman | 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 <u>25-5-17</u>									
Joined at <u>St John's</u> on <u>May 25th 17</u>									
<u>Purchased leave July 8 1919</u>									
<u>Embarked St John's St. Howard to Halifax NS 4-8-17</u>									
<u>Embarked for B.C. 4-2-18 Admitted 9th Hosp. St John's 14th 78</u>									
<u>Wid to 5th Regt. Camp St. James 2-4-18 Admitted 11th Hosp. Lower 11th 78</u>									
<u>Wid to 2nd Regt. Ware House 18-4-18 Admitted New Zealand Coy Hosp. August 20th 78</u>									
<u>Admitted 14th Coy. Hospital Cape Breton 9-10-18 Admitted 13th Coy. Hospital 12-10-18</u>									
<u>Wid to 12th Coy. Hospital St. John's 20-12-18 To hospital for demobilization 22-5-19</u>									
<u>Arrives home from land 1-6-19</u>									
Total Service forfeited as above <u>Demobilization St John's 18-7-19</u>									

Total Service towards Engagement to 18-7-19 (date of discharge) 2 years 55 days
 " " Pensions " [" "] " " "

C.R. 3816

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. St. John's, July 25/19.

The discharge of the undernoted on demobilisation has been
CONTINUED by officer i/c Records from 10-7-19.

3816 Pte. Wm. Tarrant.

C.R. 3816

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, July 5th, 1919.

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

3816 Pte. W. Tarrant.

C.R. 3816

Extract from Daily Orders Part 11 Depot. St. John's,

Date

June 18th 1919.

3816, Pte. W. Tarrant.

Reported at Headquarters

1/6/19.

RE "Corsican"

which sailed Liverpool. May 22/1919.

C.R. 3816

Extract from Daily Orders part II, Depot Winchester
dated 20-12-18 By Lieut. Col. B.J. Barton, D.S.O. Officer
Commanding 2nd. Battalion.

The undernoted having reported back from the 1st. Battalion
is taken on the strength and posted to "H" Co. from 18-12-18.

#3816 Pte. W, Tarrant.

C.R. 3816

Extract from Casualties received from Pay & Record
Office London, 4-12-18.

3816 Pte. W. Tarrant.

Ex Bermonsey Military Hospital Ladywell Road, S.E. 2-12-
18. is granted furlough to 11-12-18 He is considered fit
for 1 dpty.

C.R. 3816
Serial No. 3816

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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 Dept of Militia

Line Number	Rcd	By	Sent	by	Check

Dated Oct 25th, 1918

To George Tarrant, Botwood

Regret to inform you that Record Office, London,
officially reports **No. 3816, Private William Tarrant**
at Brompton Military Hospital London, suffering from
diphtheria

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

J.R. Bennett

Dhge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 3816

Extract from Casualties List No.H.A. 30160

3816 Pte. Tarrant W.

Adm. 14 Sty H. Boulogne, 9th Oct'18 Diphtheria ^Ild.
L/Nfld. Regt.

SICK AND WOUNDED N.C.O.'s AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.C O R K RECORD OFFICE.

No.H.A. 21226

4843 Pte Maxwell P.	6 Connaught Rang.	Laryntis Slt.	Adm 7 Con.Dep.Boulogne ex 3 Can.Gen.H 29 Mar'18
426415 " Kelly M.	6 R Irish att 934 A.E.C.	PUO.Slt.	Adm 7 Con.Dep.Boulogne ex 10 Sty H 29 Mar'18

D U B L I N RECORD OFFICE.

No.H.A. 21226

426415 Pte Kelly M.	6 R Irish att 934 A.E.C.	PUO.Slt.	Adm 7 Con.dep.Boulogne ex 10 Sty H 29 Mar'18
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A D M I R A L T Y.

No.H.A. 21226

10944 Pte Bell J.	RM Lab Co."A" Co.	Influenza Slt	Dis to Duty Henriville ex 7 Con.Dep.29 Mar'18
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N E W F O U N D L A N D EXPEDITIONARY FORCE.

No.H.A. 21226.

3816 Pte Tarrant W.	1 Newf'land.	ICT Thumb Rt Slt.	Adm 7 con.Dep.Boulogne ex 59 Gen.H.29 Ma'18
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N o 2. RECORD OFFICE - W A R L E Y

No.H.A. 21226.

204113 Pte Lofts I.	4 Beds.	Debility Slt.	Dis to 5 Rest Camp St.Martins ex 12 Con.Dep.29 Mar'18
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I N F A N T R Y RECORDS - W A R W I C K PART 1.

No.H.A. 21226.

39037 Pte Crump R.	14 Glosters att 19 Cps.Reinf.Dep.	Trench feet Slt.	Adm.7 Con.Dep.Boulogne ex 10 Sty.H. 29th Mar'18.
16018 " Peacy W.	10 Glosters.	Scalded Foot Slt.	Dis to 5 Rest Camp St.Martins ex 12 Con.dep.29 Mar'18
267321 " Saunders S.E.	14 Glosters.	Trench Feet Slt.	Dis to 5 Rest Camp St.Martins ex 12 Con.Dep.29 Mar'18



625

C.R. 3816

WOUNDED & SICK N.C.O.s AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

LIST NO.H.A. 21927

NO.1. RECORD OFFICE - PRESTON



	ADMITTED	2	CON.	DEP.	ROUEN	13TH APRIL	1918.	
275281 CSM. Joyce, J.	1/7		Manch.			Gassed.		ex 1 Aus.Gen.H.
47203 Pte. Davies, F.	16/		Lanc.Fus.			Gassed.		ex 1 Aus.Gen.H.
275163 Pte. Fod, P.	1/7		Manch.			Gassed.		ex 1 Aus.Gen.H.
200516 Pte. Walters, A.	1/7		-do-			Gassed.		ex 1 Aus.Gen.H.
360208 Pte. Bartley, R.	9/		Manch.att.198	TMB		ICT Feet.		ex 5 Gen.H.
13414 Pte. Birbeck, G.	11/		Border.att.97	TMB		Cont.knee L acc.		ex 6 Gen.H.
27694 Pte. Thomas, H.	11/		Border.			P.U.O.		ex 6 Gen.H.
33036 Pte. Horton, J.	11/		-do-			P.U.O.		ex 9 Gen.H.
49778 Pte. Fleming, J.	1/6		Manch.			P.U.O.		ex 3 Sty.H.
251431 Pte. Hindley, H.	1/6		-do-			ICT Heel.R.		ex 3 Sty.H.
250160 L/C. Hughes, A.	1/6		-do-			ICT Heel.R.		ex 3 Sty.H.
47318 Pte. Andrews, A.	2/8		Lanc.Fus.			Inf. Tonsils.		ex 10 Gen.H.
26708 Pte. Williams, F.	1/6		9do-			Septic Fngr.L.		ex 12 Gen.H.
400550 Pte. Rock, L.	9/		Manch.			Diarrhoea.		ex 11 Sty.H.
201240 Pte. Barley, W.	1/5		-do-			Scabies & Pyoderma.		ex 1 Aus.Gen.H.
30175 Pte. Ollerton, W.	1/5		Lanc.Fus.			Chr. Eczema.		ex 1 Aus.Gen.H.
31194 Pte. Fishburn, C.	1/5		E.Lanc.			Balanitis.		ex 5 Gen.H.
201810 Pte. Stott, J.	15/		Lanc.Fus.			Pyoderma & Eczema.		ex 8 Gen.H.
41364 Pte. Clough, J.	15/		-do-			Impetigo.		ex 9 Gen.H.
52389 Pte. Wyke, F.	1/8		-do-			Pediculi & Impetigo.		ex 10 Gen.H.
46666 Pte. Redfern, B.	1/6		Manch.			Scabies & Eczema.		ex 10 Gen.H.
337 CSM. McGowan, G.	1/5		Manch.			Scabies.		ex 12 Gen.H.
203638 Pte. Buchanan, D.	7/		Border.			Boils & ICT.		ex 12 Gen.H.
241778 L/C. Johnson, R.	1/7		Lanc.Fus.			Pediculi.		ex 11 Sty.H.
275062 Pte. Barlow, R.	1/7		Manch.			Pediculi & Psoriasis.		ex 11 Sty.H.
202418 Pte. Eyre, W.	1/5		E.Lanc.			Scabies & Impetigo.		ex 11 Sty.H.

753

NEWFOUNDLAND - EXPEDITIONARY FORCE

LIST NO.H.A. 21927

	ADMITTED	2	CON.	DEP.	ROUEN.	13TH APRIL	1918.	
3816 Pte. Tarrant, W.	1/		Newfoundland.			ICT.		ex 11 Sty.H.

C.R. 3816

Extract from War Office List No.H.A. 21483.

WFLD. CONTINGENT.

#3816 Pte. W.Tarrant.

ICT.Right Thumb slight. Dis.to Rest Camp.St.Martins
ex 7th Con.Dep. April 2,1918.

C.R. 3816

Extract from Casualties received from Pay & Record
Office, London, dated April 1, 1918.

#3816 Pte. W. Tarrant.

Infected Abrasion thumb mild.

Admitted 59th General Hospital, St. Omer 24th March 1918.

C.R. 3816

Extract from Nominal Roll of Draft No. 36, 200 Other Ranks, from
2nd. (Reserve) Battn. Royal Newfoundland Regt, and proceeded to
join the 1st. Battn, Royal Nfld., Regt., B. E. F.
Embarked Southampton 4/2/18.

#3816 Pte. W/ Tarrant.

C.R. 3816

Extract from Hospital Bill of Mortality. J. M. O. for Oronoco,
per S.S. "Florida" Aug. 4, 1917.

3816 Pte. W. Tarrant.

C.R. 3816

Extract from Daily Orders Part 11 Unit The Royal Nfld.

St. John's, May 25th, 1917.

3816 Pte. Wm. Tarrant.

Attested this day, posted to F. Coy, and assigned number
as shown.

W. Tarrant.

3816.

P. & P. 6

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

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

1. Unit and Corps..... *Royal New Foundland*
2. Regtl. No. *3816* 3. Rank..... *Plt*
4. Name *Farran* — *William*
 (Surname) (Christian Names)
5. Age last birthday..... *19*.....
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.
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
 (b) Date of Discharge ;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.
 (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

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

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.)

Complains of no disability -

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

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

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

Repatriation

W.S. Proctor, Capt. R.A.M.C.
 Medical Officer in charge of case.

Station *Hazeley Down*
 Date *28-3-19*

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

No. 4151

N.E.P./11

11 OCT 1917

NEWFOUNDLAND CONTINGENT

ALLOTMENT

I, (No.) 3876 (Rank) Pvt (Name) William Tarrant

hereby agree, until further notification by me, and in required form, to make an allotment of _____ dollars and 40 cents per diem, from my pay, to and for the benefit of the undermentioned Person and/or Persons. Such payments to be made on proof of identity of the Person and/or Persons concerned, viz:-

Whether Wife Child, other Relative or Friend	NAME (In Full.)	ADDRESS	AMOUNT (Each Person)	
			\$	c
<u>Father</u>	<u>George Tarrant</u>	<u>Botwood, Nfld</u>		<u>40</u>
				<u>40</u>

This Allotment to take effect from and including November 1st 1917

NOTE:- This Form must be completed and signed by the Soldier, countersigned by the Officer Commanding his Company, and forwarded to the Paymaster in accordance with P. & R.O. C.L./10, 9/12/16.

(Sig.) J. A. [Signature]
Officer Commanding
"D" Company.

Dated at Qyn
October 9th 1917

NOTED
[Signature]
C.Q.M.S.
Date _____ Coy _____

(Sig.) Wm Tarrant
Allotter.

NOTED
[Signature]
C.Q.M.S.
Date 9-10-17 "D" Coy _____

No. 4451

ORIGINAL

N.F.P./11

NEWFOUNDLAND CONTINGENT



ALLOTMENT

I, (No.) 3816 (Rank) Pfc (Name) William Tarrant

hereby agree, until further notification by me, and in required form, to make an allotment of _____ dollars and 40 cents per diem, from my pay, to and for the benefit of the undermentioned Person and/or Persons. Such payments to be made on proof of identity of the Person and/or Persons concerned, viz:-

Whether Wife Child, other Relative or Friend	NAME (In Full.)	ADDRESS	AMOUNT (Each Person)	
			\$	c
Father	George Tarrant	Botwood, Hfd.		40
				40

This Allotment to take effect from and including November 1st 1917

NOTE:- This Form must be completed and signed by the Soldier, counter-signed by the Officer Commanding his Company, and forwarded to the Paymaster in accordance with P. & R.O. C.L./10, 9/12/16.

(Sig.) [Signature] Captain
Officer Commanding
"A" Company.

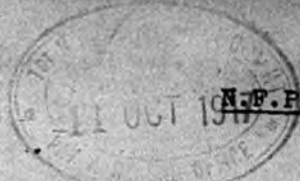
Dated at [Signature]
October 9th 1917

NOTED
[Signature]
C.Q.M.S.
Date 9/10/17 Co'y

(Sig.) Wm Tarrant
Allotter.

NOTED
[Signature]
Date 6/1/17 Co'y

ORIGINAL



N.F.F./12.

NEWFOUNDLAND CONTINGENT

CANCELLATION of ALLOTMENT.

1. I, (No) 3816 (Rank) Sgt (Name) W. Yarrant

hereby apply for cancellation of Allotment made by me on ^{FORM K} N.F.F./11

No. 3902 dated July 1st, 1917 in favour of George Yarrant, Botwood

for \$ cts 60 per diem.

Such cancellation to take effect on the 31st day of October 1917

2. I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, in time to become operative at above nominated cancelling date; and that in the event of such non-delivery, and thereby the allotment continuing to be paid to the Allottee, I also agree to such further stoppage in the Pay Books as may be necessary, or otherwise to refund such overpaid amount or amounts.

Dated at

Bay
twelfth day of
October 1917

Wm Yarrant
Allotter.

Approved and Witnessed:

T. E. M. Sgt Captain
O.C. "D" Company.

Hoked
Boanile Cgm.
5 Co. 9-10-17

NOTED
W. Martin
Sgt
13/10/17

To be made out in TRIPlicate and delivered at the Pay & Record Office not later than date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

To the Paymaster,
Royal Newfld Regt.
58 Victoria Street.

File

No. 3816 Rank. Plt Name. Tarrant H.

Dr. "H" Coy. Pay Book £. 1. S. 10. d. 0

This man is on ~~draft~~ leave and can you pay him the balance due to this date
~~the end of the period, please~~ please.

Date.
Dec. 31/18



Signed. *Wm J. L. King*

O.C. "H" COY.
2nd. BATT. ROYAL NEWFOUNDLAND REGT.

17653

To O.C. The Bermondsey Military Hosp
Ladywell Road S.E. 13.

Station



Herewith Army Form B. 178 (Medical History Sheet)

in the case of 3816 Tarrant Pte. W. Royal Newfoundland Regt

Please acknowledge receipt hereon.

NEWFOUNDLAND CONTINGENT

RECEIVED

[Signature]

Signature

[Signature]

Commanding

Capl. B.A.M.O.

CHIEF PAYMASTER & OFFICER I/C RECORDS

Date

Registrar.

No. 17319/7

NEWFOUNDLAND CONTINGENT

N.F.P/48.

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

To: Officer Commanding,

Bermendsey Military Hospital,

25th October 1918

Ladywell Road, S. E. 13

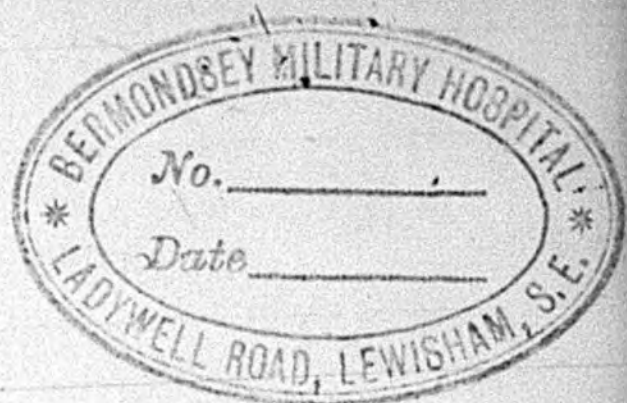
With reference to request of (No) 3816 (Rank) Pte
(Name) W. Tarrant. Cheque No. 8993 for
£ 1: 0: 0 is enclosed for payment to this Soldier as may
be deemed fit.

Kindly complete receipt form on back of cheque before
presenting at a Bank.

J. W. Marshall
Chief Paymaster & O. i/c Records.

From O.C. Bermondsey Mil. Hosp.
Ladywell Rd. SE 13

To Chief Paymaster
58 Victoria Street. SW 1



I have to acknowledge receipt of
cheque for £1 which has been duly handed
over to Mr Tarrant - please.

29/10/1918



L. M. M. M.
Capt. H. A. M. M.
Registrar

Berrondsey Military Hospital,

Ladywell Road, S.E. 13.

From No. **3916**.....Rnk. **Pte**.....Name **J. Larrant W**.....Rgt **1st Newfoundland**.....

To Regtl. Paymaster
.....**Pay. And. Record. Office**.....

58 Victoria Street S.W. London.....

Sir,

I have the honour to request that you will forward

.....**£**.....out of the credit due to me to the following address:-

.....**Berrondsey Military Hospital**
Ladywell Road S.E. 13.....

I have the honour to be,

Sir,

Your obedient servant.

Pte W. Larrant.....

*Account
du maître*

*O.K. f 1-0-0
25/10/18 W.R.*

173197

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
Ref. Nos IN	9228
REC'D	25 OCT 1918
APRIL	Ans'd
Ref. Nos	173197
of Nos	001
ON	
BRANCH	
Cmd.	
P & A.	
R & C.	
W & E.	
H & E.	

No. 21613/2500/P.&.A

21613 7500

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn. Royal Wfld. Regt.,
Hazeley Down Camp,
Winchester,

30th December, 1918

Subject: 3816 Pte. W. Tarrant,

With reference to the following telegram (11296) from the Hon. Minister of Militia, received

Pay to 3816 Tarrant, £3 0 0.

Draft £ 3.0.0. is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

J. H. Marshall
Chief Paymaster & O. i/c Records.

H.

Jan 6th 1919
Receipt hereunder
J. Seymour
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n,
Royal Newfoundland Regiment.

Received the sum of Three
Pounds £3.0.0 on account of
cable remittance from Newfoundland.

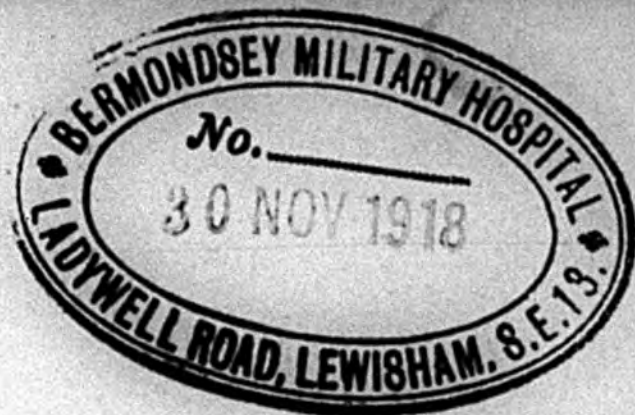
W Tarrant

No. 3816 Rank Pte

Witness J. M. Crow

(Sentry Post)

TO:- Officer Commanding,
Newfoundland Headquarters,
65 VICTORIA STREET. S.W.
58



FROM:- Officer in Charge,
Bermondsey Military Hospital,
Ladywell Road...S.E.13.

3816 Pte. Farrant, M. 1/ Newfoundlands.
.....

The above named man will be discharged from Hospital
Monday 2nd December with instructions to report to you please
as per instructions received.p

30th November 1918.

H. W. Marcett Sims

Lt. Col. R.A.M.C.

O. /c Bermondsey Military Hospital.

"A" Form
MESSAGES AND SIGNALS.

Army Form C. 2121
(In pads of 100.)

No. of Message.....

Prefix.....Code.....m.	Words	Charge.	This message is on a/c of :	Recd. at.....m.
Office of Origin and Service Instructions.	Sent			Date.....
.....	AtService.	From
.....	To	By.....
.....	By		(Signature of "Franking Officer")

TO	O.O.	Bermondsey	Military Hospital
	Ladywell	Road	S.E.

Sender's Number. 411	Day of Month. 29/11/18	In reply to Number.	AAA
--------------------------------	----------------------------------	---------------------	------------

Please	send	3816	Tarant
Royal	Newfoundland	Regt.	to
58	Victoria	Street	for
disposal	in	accordance	with
General	Instructions	3	issued
with	AGI 500	of	1918
page	54		
		Synoptical.	

From			
Place			
Time			

The above may be forwarded as now corrected (Z)

.....

Censor. Signature of Addressor or person authorised to telegraph in his name

* This line should be erased if not required.

7/11/18
28/18

Cannot get the Hoop by phone

POST OFFICE



TELEGRAPHS.

38



Handed in at

Office of Origin and Service Instructions

Words

Charges to pay

1430

hadswell Grefb tms

Received here at

THIS FORM MUST ACCOMPANY ANY ENQUIRY RESPECTING THIS TELEGRAM.

TO

B=C.

Newfoundland

Head qrs

65

Victoria

St St



3816 pte farrant m. 1st new

foundland regt is now fit to
be discharged from hospital kindly
instruct me if he is to report
to you or as to his disposal
please

B=C. Bermundsey military
Hospital hadswell Road SE

To Chief Paymaster
58 Victoria Street-S.W.

From C.O. Bermondsey Military Hospital,
Ladywell Road, S.E.13,



I have to acknowledge receipt of cheque for £3
which has been paid to Pte Tarrant as requested please.

15/11/18.

L. Thoma
Capt R.A.M.C.
Registrar.

54
No. 18261/9

NEWFOUNDLAND CONTINGENT

N.F.P/48.

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

To: Officer Commanding,

Bermondsey Military Hospital,

Ladywell Road, S.E.13

12th November 1918

With reference to request of (No) 3816 (Rank) Pte
(Name) W. Tarrant, Cheque No. 11055 for
£ 3:0:0 is enclosed for payment to this Soldier as may
be deemed fit.

Kindly complete receipt form on back of cheque before
presenting at a Bank.

J. H. Marshall
Chief Paymaster & O. i/c Records.

17319/7

Bermondsey Military
Ladywell Road, S. E. 13

25th Octobe r

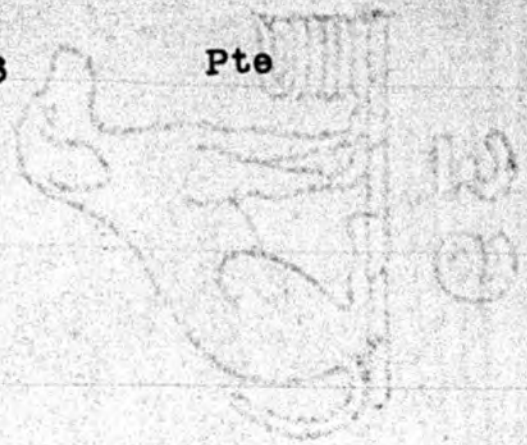
8

3816

Pte

W. Tarrant,

1: 0: 0



21613/2500/P.&.A

2/Bn. Royal "fld. Regt.,
Hazeley Down Camp,
Winchester,

30th December, 8

3816 Pte. W. Tarrant,

11296

Pay to 3816 Tarrant, £3.0.0.

3.0.0.

K.F. 3-0-0
 1826/19
 11/1/18

Berrondsey Military Hospital,
 Ladywell Road, S.E. 13.

From No. 5816 Rnk. Pte. Name Sarrant. W. Regt. 1st Newfoundland

To Regtl. Paymaster

Newfoundland. Pay & Record. Office
58. Victoria. Street. London. England

Sir,

I have the honour to request that you will forward
...3 Pounds... out of the credit due to me to the following address:-

Berrondsey. Military. Hospital.
Ladywell. Road. S.E. 13. D. 5.

I have the honour to re,

Sir,

Your obedient servant.

Pte. W. Sarrant.

1826/19
 11/1/18
 5816

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE,		
Ref. Nos. IN	9701	
Ward	11	NOV 1918
ACK'D		Furisham London
Ref. Nos. DU	18200/9	12/18
SEARCHED	INDEXED	BY
Compd		
P & A		
R & C		
B & E		
IPS		

1 avant, H

3816

Hay Sept.

July 19, 1919

#3816 Pte. William Tarrant,
Botwood.

Dear Sir:-

Please find enclosed Discharge Certificate #3088.

Yours truly

Captain & Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3816 Rank Lt Name Larrant, W.
 Intended place of residence Botwood
 2. Occupation Lumberman
 Classification of soldier FL Medical Category FI

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 2 1919

H. M. S. Larrant
 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 -2 1919

W. Larrant
 Signature of soldier
M. Chancey
 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 -2 1919

William Larrant
 Signature of soldier
J. W. Chancey
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 25-5-17 No. of days on Military Service 785
 Discharged from service 4-7-19 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 2 1919

R. H. Larrant
 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 18/1919

M. Bowley
 Officer in Charge
 The Royal Newfoundland Regiment

9275 20791 3098

7
30
18
55

The Royal Newfoundland Regiment

Class for Demobilization: *70*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *30.6.19*

Regimental No *3816*

Name *Tarrant William*

Rank *Pte*

Address *Bolton Rd*

Present Medical Category *A1*

Recommended for:— (a) Immediate discharge
(b) ~~Standard Medical Board~~

Members of Board

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

P. Robinson
Senior Medical Officer

S. G. Burdett
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3816 Rank Plt Name Sarrant W
 Date of Enlistment 25-5-17 Address Betwood District Gate
 Occupation Lumberman Classification for Discharge 4 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 30-6-17 O. C. Discharge Depot. Miss H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

William Sarrant

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~~ Miss H.

Date 2-7-19 O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R2132 to his home at Rotterdam and Release Certificate No. 13098 issued.

Date 2-7-19

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 15-7-19

Date 2-7-19

H. M. ...
Depot Paymaster.

Discharged approved for 4-7-19
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 From B

Date 2-7-19

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

APPROVED.

Documents as above forwarded to:—
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 4 1919

R. H. Lait MAJOR
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former Occupation.

William Tarrant
Signature of Man.

Reg. No. 3816

J. J. Snow Capt.
Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

JUL - 2 1919

191

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

MEDICAL HISTORY

Surname Tarrant OF Christian Name William

Table I.—GENERAL TABLE.



Birthplace:—Parish Botwood County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>25</u> day of <u>May</u> 191 <u>7</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
Declared Age ...	at <u>Headquarters</u>	at _____	at _____	at _____
Trade or Occupation ...	<u>18</u> years <u>+ months</u> <u>days</u>	<u>years</u> <u>days</u>	<u>years</u> <u>days</u>	<u>years</u> <u>days</u>
Height ...	<u>Lumberman</u>	_____	_____	_____
Weight ...	<u>5</u> feet <u>6</u> inches	_____ feet _____ inches	_____ feet _____ inches	_____ feet _____ inches
Chest Measurement {	Girth when fully expanded....	<u>126</u> lbs.	_____ lbs.	_____ lbs.
	Range of Expansion..	<u>36 1/2</u> inches	_____ inches	_____ inches
Physical Development ...		<u>3 1/2</u> inches	_____ inches	_____ inches
Vaccination Marks {	Arm ...	Right	Left	Right
	Number ...	_____	_____	_____
When Vaccinated ...	_____	_____	_____	_____
Vision ...	R. E.—V=	<u>6/6</u>	R. E.—V=	_____
	L. E.—V=	<u>6/6</u>	L. E.—V=	_____
(a) Marks indicating congenital peculiarities or previous disease	(a) _____	(a) _____	(a) _____	(a) _____
(b) Slight defects but not sufficient to cause rejection	(b) _____	(b) _____	(b) _____	(b) _____
Approved by (Signature)	<u>L. M. Parsons</u>		_____	
(Rank)	<u>Major</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted ...	at <u>St Johns N.F.</u>	at _____	at _____	at _____
Joined on Enlistment ...	on <u>25</u> day of <u>May</u> 191 <u>7</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
Transferred to ..	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>4th N.F.L.D.</u>	<u>3816</u>	_____	_____
Became non-effective by	Regt. <u>ROYAL NEWFOUNDLAND REGIMENT.</u>		_____	
(Signature)	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	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				
Desmondsey Mt. Hospital Ladywell London	20	10	18	2	12	18	Diphtheria 10 (Debility after)	10	Contracted last Sept 25 th in France K I B present. Patient debilitated. Swabs of throat negative Oct 11 th 14 th and 17 th . Progress satisfactory.	W. C. O. S.

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
73-1-17	Kace AD
28-5-17	T. A. P. AD
5-6-17	3 AD
21-6-17	AD

It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as 6 for discharge on Demobilisation. Medical category

30.6.19

[Signature]

Date of T.M.B.

Table IV.—SERVICE TABLE.

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



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *William Tarrant*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3816*

Intended address *Stwood*

Height on discharge *5* Feet *6*

Color of hair on discharge *Dark Brown*

Complexion *Rose Fair*

Color of eyes *Grey*

Descriptive Marks

Figure on discharge *medium*

Christian name of Father *George*

Christian name of Mother *Lucy (Step m.)*

Wife's maiden name in full —

Date and place of marriage —

Christian names of children —

Place and date of soldier's birth *Stwood, April 22nd, 1900*

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)

William Tarrant *MR*
(Rank)

Station *St John's* Date *30-6-19*

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.

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

Station

Date

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

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

1. Unit and Corps *Royal N. F. Co.* 7. Former Trade or Occupation }
 2. Regtl. No. *3816* 3. Rank *Pvt.* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *Jarvan* *W. J. M.* (a) Former Regts. or Corps ;
 (Surname) (Christian Names) with Regtl. Nos.
 5. Age last birthday *19*
 6. Posted for duty on at
 in category (or grade)
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

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

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | ✓ | |
| (ii.) Previous active service.. .. . | ✓ | |
| (iii.) Climate in pre-war service | ✓ | |
| (iv.) Ordinary military service before the war | ✓ | |
| (v.) Serious negligence or misconduct on the man's part. } | ✓ | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

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.)

Nil
Nil
No complaints of no sensibility.

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.

Retardation

A. S. Premier Capt/Ranc
Medical Officer in charge of case.

Station *Haydock*

Date *25-3-19*

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



Army Form B. 103.

Regimental Number 5816

Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland
 Rank Pvt Surname Sarrant Christian Name William
 Religion Crest Age on Enlistment 18 years 4 months
 Enlisted (a) 25-5-17 Terms of Service (a) Duration Service reckons from (a) 25-5-17
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation Lumberman Signature of Officer [Signature]

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
			Embarked ...	3 FEB 1918	
			Disembarked...	6 FEB 1918	
				15 FEB 1918	
	89 4A	Ad Abrasco P. Thumt	Recd	15-3-18	Ed 178
	17 CES	Ad Depuchumb 2nd Trans	44 CES	22-3-18	Ed 9244
	59 Coy Sp		McQueen	24-3-18	NA 20931
	2nd Coy	joined base of	Raven	5-4-18	Roe
	" "	20 11 State Sp	" "	11-4-18	Roe
	2nd Coy	2nd Coy			
	2nd Coy	joined base of 2nd Coy	Raven	14/4/18	Roe
		Reported next		23-4-18	
	76 7A	Ad Depuchumb Trans	27 7A	23/9/18	Ed 7217
	N 2nd Coy	Ad Depuchumb?	Wagner	25/9/18	NA 29378

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.
 W. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354. [P.T.O.]

July 24, 1919

#3816 Pte. William Tarrant,
Botwood, N.D.B.
(Peter's Arm)

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 20th. 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... *William* 2. Surname... *Jarrant*
3. Rank... *private* 4. Regtl. No. *3816*
5. Address in full to which future payments of gratuity are to be forwarded... *Bethwood Peter arm*
-
6. Date of enlistment in the Regiment. *25th May 1917*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *None*
-
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? *No*
11. Were you on active service only in Nfld. If so, give dates and particulars of such service. *France Belgium*
-
-
12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *Two years 1 month*
- 1. $\frac{2}{3}$

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

..... *No*

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

.....

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

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

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 *2nd July 1919*. (b) Reason for discharge *Demob.*

.....

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....

Passendale 7th March 1918. Arrantiers 1st & 2nd April 1918. Ypres 25th Sept 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.

Signature of Applicant: *William Tarant*

Place of Residence: *Botwood Peter Arm*

Declared before me at: *St Johns*

This *9th* day of *July* 19*49*....

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

Mr James D.P.

POST DISCHARGE PAY.

Date paid	paid Soldier.	paid Dependant.	War Service Gratuity.	Net amount due
.....
.....
.....
Certified correct.			Paymaster	

DUPLICATE
ORIGINAL



NEWFOUNDLAND CONTINGENT

CANCELLATION of ALLOTMENT.

1. I, (No) 3816 (Rank) Plt (Name) H. Lirant
 hereby apply for cancellation of Allotment made by me on N.F.F. 11 ^{FORM K}
 No. 3902 dated July 1st 1917 in favour of
George Lirant
 for \$ cts 60 per diem.
 Such cancellation to take effect on the 31st day of
October 1917.

2. I agree to accept all risks and consequences of this applica-
 tion failing to reach Headquarters, St. John's, in time to become
 operative at above nominated cancelling date; and that in the
 event of such non-delivery, and thereby the allotment continuing
 to be paid to the Allottee, I also agree to such further stoppage
 in the Pay Books as may be necessary, or otherwise to refund such
 overpaid amount or amounts.

Dated at Asp
ninth day of
October 1917

Amn

Wm Yarrant
 Allotter.

Approved and Witnessed:

J.E.T. Ho Captain
O.C. "D" Company.

NOTED
W.M. Martin
C. S. P.
 Date 12/10/17 P.R.O. Co'y

Noted
P. Sanilco
D. Co.
 9-10-17

To be made out in TRIPPLICATE and delivered at the Pay & Record
 Office not later than date of cancellation, in accordance with
 P. & R.O. C.L./10, 9/12/16.

ST. JOHN'S, JUL 2-1919

Royal Newfoundland Regiment.

Billeting Account,

To Pt. W. Laurant
W Laurant

Billeting Soldiers as undermentioned

from June 1/19 to July 4/19

3816 Pt W Laurant

35.40

Bvt. P.	
2068. (C)	
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 35.40

J. H. Howcroft
Billeting Officer.

Letts.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

• Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

SEP 28

1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

William Tarrant

in respect of his service as No. **3816** Rank **Pte.**

Name **W. Tarrant** **Royal Nfld. Regt.**
~~Nfld. Fusiliers~~

Receipt of the same should be acknowledged hereon.

Received

Nov. 9th 1921

Signature

William Tarrant

Date

Nov. 9th /21

Address

B Stood

[P.T.O.]

Receipt for Army Book 64

No. 3814 Name .. Larrant

To Certify that I have received the AB 64 of the above
named soldier.

Name .. William Larrant

Date. 12/8/20

Place .. Bowood

N.B. For completion and return to the Department of Militia
insert in corner of envelope "AB 64"

W.L. ✓

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland.

Number Sheet First
Signature of O. C. Company W. R. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Tarrant W.</u>	Age on	<u>18</u> years <u>4</u> months	<u>Lumberman</u>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<u>St. John's.</u> <u>25.5.17</u>	<u>S. A.</u>	
Joined		Date	Period of	Place of Birth	
Joined	Date	} with Colours <u>55</u> years.	} with Reserve <u>2</u> <u>365</u> years.		

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
				<u>Demobilized St. John's. 1879</u>					

To be carried over

23816

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3816 Rank Pvt. Name Sarrant W. J. Gata.
 Date of Enlistment 25.5.17 Address Botwood District Gata.
 Occupation Lumberman Classification for Discharge K1 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

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

Date 30.6.17 O. C. Discharge Depot Mrs H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

William Sarrant

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 2-7-19 O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. B2132 to his home at Baltimore and Release Certificate No. 3098 issued.

Date 2-7-19

J. A. Snowbapt
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 2-7-19

Date 2-7-19

H. M. ...
Depot Paymaster.

Discharge approved for 4-7-19

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		

Form B

Date 2-7-19

J. A. Snowbapt
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 4 1919

R. ...
O. C. Discharge Depot.

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

Date July 18 1919

[Signature]

Reg. No. *3816* Rank *Pvt.* Name *Tarrent, Wm.*

Attested Address *Batwood*

Allotment Allottee

Date of Allotment Returned from Overseas *29-5-19*

Returned on S.S. *Corsecan* Cause *Discharge*

2.7.19

4.7.19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILIZATION