



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4086 Name James Taylor Corps S.A.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>James Taylor</u> |
| 2. What is your full Address? | 2. <u>Burns Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>2</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. <u>No</u> { 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, James Taylor 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.

9/5-11-17 James Taylor SIGNATURE OF RECRUIT.
James Taylor Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James Taylor 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 Burns on this 5 day of Nov 1917
 Signature of Attesting Officer James

†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 1st Bn. Rgt.
 If enlisted by special authority, such will be attached to the original attestation.
 Date Nov 5th 1917 } James Taylor Approving Officer.
 Place Burns }

† 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

4086

ATTESTATION OF

No. 4086 Name James Taylor Corps S. I.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. James Taylor
- 2. What is your full Address? 2. Burns Bay
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 Years 2 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. No { 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? } II. Yes

I, James Taylor 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.

45-11-17 James Taylor SIGNATURE OF RECRUIT.
W. James Lt Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James Taylor 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 Burns on this 5 day of Nov 1917
Signature of Attesting Officer W. James

† 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 S. I. 1st Lt.
If enlisted by special authority, such will be attached to the original attestation.
Date Nov 5th 1917 } W. James Lt Approving Officer.
Place Burns }

† 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).....

Original

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 for 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... *R. Newfoundland*
- 2. Regtl. No. *4086* 3. Rank... *Private*
- 4. Name... *TAYLOR James*
(Surname) (Christian Names)
- 5. Age last birthday... *19*
- 6. Posted for duty on... *25/10/14* at... *St John's*
in category (or grade)... *AI*
- 7. Former Trade or Occupation } *Fisherman*
- 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 *YES* (b) on field service *YES*
(c) on duty *YES* (d) off duty? *No*
- 9. If a Court of Inquiry was held on an injury state:—
(a) When } *N/A*
(b) Where }
(c) Opinion of Court }
(b) Date of Discharge;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)

N/A

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. *4. E.M.R. Calf. Feb 22 1918. Hush.*
- 12. Place of origin of disability. *Ypres.*
- 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. *Has advancing to attack then hit by shell.*

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

14. State whether the disabilities are
- | | | |
|---|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | <i>Yes</i> | |
| (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 | <i>No</i> | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? *G. S. M.*

In all cases such as facial injuries, eye, ear, nose and throat, chest illness, etc., 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.)
- All wounds healed. And he can walk fairly well. There is anaesthesia at back of leg.*

16. Was an operation performed? If so, when and what was its nature? *Yes*
17. If not, was an operation advised and declined? *Yes*
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? *Not applicable*
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? *None.*

20. Do you recommend—
- (a) Discharge as permanently unfit? *Yes Discharged and*
- (b) Change to United Kingdom? *Classified in Grade B.1*
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.
- J. B. Carlisle, Capt.*
 Medical Officer in charge of case.
- 3rd London General Hospital
 WANDSWORTH, S. W.
 Station
- Date *18.1.19*

* 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.

21. Give diagnosis and particulars of:—
- (a) Any disability claimed or discovered. *Large scar over back of right calf, not involving tendons but causing pain on flexion likely to improve*
- (b) The present condition thereof.
22. State whether the disabilities are:—
- | | | |
|--|---------------------|-------------------|
| | (a) Attributable to | (b) Aggravated by |
| (i.) Service during the present war | <i>Yes</i> | <i>Yes</i> |
| (ii.) Previous active service | <i>Yes</i> | <i>Yes</i> |
| (iii.) Climate in pre-war service | <i>Yes</i> | <i>Yes</i> |
| (iv.) Ordinary military service before the war | <i>Yes</i> | <i>Yes</i> |
| (v.) Serious negligence or misconduct on the part of the soldier | <i>No</i> | <i>Yes</i> |
- Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?
23. Is the disability in a final stationary condition? If not
- (a) How long is the present degree of disability likely to last? *Six months*
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24. *No*

Report of Medical Board.

Station St. John's, Nfld.

Date *June 5 1919*

No. and Rank *4086*

Age *20*

Height *5'4"*

Name *Taylor James*

Complexion **FAIR**

Unit Royal Newfoundland

Eyes **GREY** Hair **DARK BROWN**

Address **BURIN BAY**

Former Trade

Enlisted at **ST. JOHN'S** On **28/10/17**

(The Board will please note how the soldier's appearance corresponds with above description).

Disease or Disability Original **GUN SHOT WOUND RIGHT CALF. (FLESH)**

Subsequent

Present Condition (Compare with previous Board)

*Scar extends long obliquely down the right calf
bluish looking & adherent to tissues beneath. Interferes
with walking & tender to pressure. Numbness
down to the heel.*

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market? *30%*

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service? *30% 6 months*

Recommendation of Medical Board

Discharge permanently unfit.

Members of Board

[Signature]

[Signature]

[Signature]

Approving Medical Officer.

C.R. 4086

From

Minister of Militia
St. John's,
Newfoundland.

To

Chief Staff Officer,
Pay & Record Office,
Newfoundland Contingent,
58 Victoria Street,
London, S.W.1.

Nov.7th, 1919.

4086, Private James Taylor
39 63, Private Leo Byrne.

9th December

Copy of Police Report
(22a) 12/7/19 is enclosed and
5/- referred to has been paid,
please.

The attached letters received
from Secretary, New Scotland Yard are for-
warding to you please. The original letter
referred to in both these letters attached
has not been received by this Office. I should
be glad if you will take this matter up with
the proper authorities & secure a copy of the
original, and if possible deal with the matter
referred to.

H.A. TIMEWELL?
Lt.Col.,
Chief Staff Officer(London)

W.F. Rendell,
for Lieut. Col.,
Minister of Militia.

see 3963

Any further communication on the subject of this letter should be addressed to—

THE COMMISSIONER OF POLICE
OF THE METROPOLIS,
New Scotland Yard, S.W. 1.,

and the following No. quoted:—

G.R. 480811 (S.3)

New Scotland Yard, S.W. 1.

21st November, 1919.

CR 4086

Sir,

With reference to the communication forwarded to you on the 15th July last relative to the arrest of Privates 4086 James Taylor and 3962 Leo Byrne, absentees from the 2nd Battalion, Newfoundland Regiment, I am directed by the Commissioner of Police of the Metropolis to ask that I may be favoured with a reply thereto as soon as possible, as the matter has now been outstanding for some considerable time.

I am, Sir,

Your obedient Servant,

C. W. Halliwell
for Secretary

The Officer Commanding,
2nd Battalion,
Newfoundland Regiment,
Hazeldown Camp,
Winchester.

1 Copy

C.R. 4086

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

The discharge of the underneted on demobilisation has been
CONFIRMED by Officer i/c Records from 8-7-19

4086 Pte. Jas. Taylor

225/408643963

C.R. 4086

Chief Staff Officer
Pay & Record Office
Newfoundland Contingent
58 Victoria Street
London, S.W.1

Nov 7th,

9

4086, Private James Taylor
2965, Private Lee Byrne

The attached letters received from the Secretary, New Scotland Yard are forwarded to your please. The original letter referred to in both these letters attached has not been received by this Office. I should be glad if you will take this matter up with the proper authorities to secure a copy of the original, and if possible deal with the matter referred to.



Minister of Militia.

C O P Y.

New Scotland Yard, S.W.I.

14th October, 1919.

G.R.480811. (S.3.)

Accounts.

Sir,

With reference to the communication forwarded to you on the 15th July last, relative to the arrest of Privates 4086 James Taylor and 3962 Leo Byrne, absentees from the 2nd Battalion, Newfoundland Regiment, I am directed by the Commissioner of Police of the Metropolis to ask that I may be favoured with a reply thereto at an early date.

I am,

Sir,

Your Obedient Servant,

(Sgd) A.W. Ballard,

for Secretary

The Officer Commanding,
2nd Battalion Newfoundland Regiment,
Hazeldown Camp,
Winchester.

New Scotland Yard, S.W.I.

G.R. 480811 (S.S.)

4th Sept. 1919.

Sir,

With reference to the communication forwarded to you on the 15th July relative to the arrest of Privates 4086 James Taylor and 5261 Leo Byrne, absentees from the 2nd Battalion, Newfoundland Regiment by Police Sergeant Ganniclift on 11th May, I am directed by the Commissioner of Police of the Metropolis to ask that I may be favoured with a reply thereto at an early date.

I am,

Sir,

Your obedient Servant,

A.W. Ballard,

for Secretary

The Officer Commanding

2nd Battalion Newfoundland Regiment,

Hazeldown Camp,

Winchester.

C.R. 4086

Extract from ~~the~~ Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 14th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot, with effect from 24-6-19.

4086 Pte. J. Taylor.

C.R!

4086

Extract from Preliminary Report of a Medical Board
held on Thursday Evening June 5th. The following
was the finding. 119

Recommended discharge from the Army.

4086, Pte. J. Taylor.

C.R.I. 4086

Extract from Daily Orders Part 11 Depot, St. John's,
Date 13/6/19.

4086, Pte. Jas. Taylor.

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

BY "Corsican"

C.R.

4086

Extract from Casualties received from Pay & Record
Office, London, Jan.22,1919.

The undermentioned was discharged from 3rd.L.G.H.,
on 20-1-19 and granted furlough to 29-1-19 Classified by
Medical Board fit for Cat. Bii, 18-1-19.

4086 Pte. J. Taylor.

C.R. 4086

Extract from Daily Orders Part II by Lt. Col. B.J.
Darton. D.S.O., Commanding 2nd Bn., Royal Wilt. Regt.
20-1-19.

The following having reported back from the 1st
Bn., is taken on the strength and posted to H Co.
from 20-1-19.

4086 Pte. J. Taylor.

C.R. 4086

Extract from Casualties received from Pay & Records Office,
London, Dec. 28th, 1918.

The undermentioned was transferred from City of London
Military Hospital to 3rd London General Hospital on 26-11-18.

4086 Pts. J. Taylor.

4186
C.R.
Dec. 16th 18

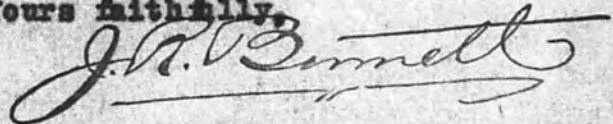
Rev. J. Brinton,
" Cathedral Rectory ",
CITY

Dear Sir:-

I regret to inform you that the Record Office, London officially reports to-day No. 4186, Private Augustus Goodland reported died of wounds on Oct. 14th by 3rd Echelon, France on Dec. 13th. Will you kindly notify the next of kin, Mrs. Clara Goodland, Winter Avenue.

The above information was unofficially notified to Mrs. Goodland, but it is the first official notification received by this Department

Yours faithfully,



Minister of Militia.

C.R. 4086

Nov. 6th., 1918.

Mr. John Taylor,
Burin Bay.

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. 4086 Private James Taylor, is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 4086

Extract from War Office List No. C. 1723. dated 1. 11. 18

#4086 Pte. J. Taylor.

Wounded 10. 11. 18.

BC.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

C.R. 4086

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. 15th, 1918**
To **John Taylor, Burin Bay**

Regret to inform you that Record Office, London, officially reports **No. 4086, Private James Taylor at 2nd Australian General Hospital Wimereux Oct. 5th later transferred to City of London Military Hospital Clapton suffering from ~~GBL~~ right thigh w.d.**

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

J. B. Bennett

Minister of Militia.

FOR TYPEWRITER

C.R. 4086

Extract from Nominal Roll of sick and wounded
from France to the City of London Military
Hospital, Clayton E. 5 admitted 10/10/18.

4086 Pte. J. Taylor

G.S.W. R. LEG.

C.R. 4086

Extract of Nominal Roll to B. E. F. embarked
Folkestone 2-7-18

#4086 Pte. J. Taylor.

C.R. 4086

Extract from Medical Roll Staff "H" Company Embedded
I. S. Medical. Aug. 20th, 1916.

4086 Pte. Taylor J.

C.R. 4086

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Nov. 8th, 1917.

4086 Pte. J. Taylor.

Attested for General Service with the Nfld. Regt., posted
to G. Coy, with effect from Nov. 8th, 1917.

J. Taylor

C.R. 4086

P.R.O.

copy *120*
 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 Regt.** 7. Former Trade or Occupation } **Fisherman.**
2. Regtl. No. **4086** 3. Rank... **Private** 7a. If the soldier claims previous service in Army, he should state—
4. Name **TAYLOR.** **James.** (a) Former Regts. or Corps ; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday..... **19.**
6. Posted for duty on... **28.10.17** at... **St. Johns.** in category (or grade)... **A1**..... *N/A*
8. If the disability is an injury was it caused
- (a) in action **Yes** (b) on field service **Yes**
- (c) on duty **Yes** (d) off duty? **No.** (b) Date of Discharge ; (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
- (a) When } **N/A.** (d) Particulars of Pension or Gratuity (if any)
- (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."
G. S. W. Right calf - Flesh.

11. Date of origin of disability: **October 3rd, 1918.**
12. Place of origin of disability: **Ypres.**
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. **Was advancing to attack when hit by shrapnel.**

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 | | |
| (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? }

G. S. W.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., 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.)

All wounds healed, and he can walk fairly well. There is Anaesthesia at back of leg.

16. Was an operation performed? If so, when and what was its nature?

No

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?

Not applicable.

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?

None.

20. Do you recommend—

(a) Discharge as permanently unfit?

For dispersal and Classified in Grade Bi.

(b) Change to United Kingdom?

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

(sgd) Thos. B. Carlyon, Capt.

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.

OPINION OF THE MEDICAL BOARD.

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

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

Large scar over back of Rt. calf, not involving hamstrings, but causing pain on flexion. Likely to improve.

22. State whether the disabilities are:—

- (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 part of the soldier

(a) Attributable to

(b) Aggravated by

Yes

No

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not

No.

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

Six months

No.

- 24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

- 26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

No.

Opinion of Military Member in case of disagreement.

B.ii

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

No.

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

No.

Signatures:—

3rd. London General Hospital sd. G. Gore Gillon, Lt. Col. } President or
Wandsworth, SW. } RAMC: } Chairman.
Station sd. R. J. B. Howard, C/S. } Members.
Date 18.1.1919..... }

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station Officer in charge, Central Hospital.
Date

} Only applicable in cases of Patients in Hospitals.

OR

Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W, or W.(T), P. or P.(T)).

Station O.C. Discharge Centre.
Date

No. 18957/9

From: NEWFOUNDLAND

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

21st November 1918

Subject: 4086, Pte. J. Taylor

With reference to the following telegram (9984) from the Hon. Minister of Militia, received

Pay to 4086 Taylor £4:2:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

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

To: Officer Commanding
City of London Mil. Hosp.
Clapton, E.5.

25 / 11 / 1918

ANSWER.

*Please remit the money
requested to me.*

H. J. Gray
Major Rame Registrar
City of London Mil Hosp
Clapton



19421

3969
18

CITY OF LONDON
MILITARY HOSPITAL,
42, CLIFDEN ROAD,
CLAPTON, N.E.



CHIEF PAYMASTER & OFFICER I/C. RECORDS.
NEWFOUNDLAND CONTINGENT,
53, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

Officer Commanding,
City of London Mil. Hosp.
Clapton, S.E.

Pay & Record Office,
27th November 1918.

Reference reverse: Postal
Draft for £4:2:0 is enclosed for
payment as indicated.
Kindly obtain receipt, hereon.

A. S. Minwell Maj.
Major,
Chief Paymaster & O.i/c Records.

FM/S

Recd. £4.2.0

Nov 29. 1918

Taylor, 4.086

J. H. J.
Major R. W. C.
Registrar
for O/C

29-11-18

18957/9

City of London Mil.Hosp.
Clapton, E.5.

21st November 8

25/11/18

4086, Pto. J. Taylor

Please remit the money
required to me.

9984

Major R.A.M.C. Registrar,
City of London Mil.Hosp.

Pay to 4086 Taylor £4:2:0

BRANCH
PAID

19421

Officer Commanding,
City of London Mil. Hosp.
Clapton, S.E.

Pay & Record Office,
27th November 1918.

Reference reverse: Postal
Draft for £4:2:0 is enclosed for
payment as indicated.
Kindly obtain receipt, hereon.

Major,
Chief Paymaster & O.I/c Records.

FM/S

129

RECEIVED
PAY & RECORD OFFICE
25 FEB 1919

No. 3022/439.

N.F.P./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,
2nd/Bn Ryl Nfld Regt.
Winchester.

21st February 1919

Feb 22nd 1919

4086. Pte. Taylor. J.

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / (38)

Chambers
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. _____ Batt'n.

"Pay to-4086. Taylor.

£4.2.0.

Received the sum of Four

Cheque £ 4.2.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Four. Two Shillings 4-2-0 in respect of telegraphic remittance from the Minister of Militia.

R. P. Hunt
Chief Paymaster & O. i/c Records.

J Taylor
No. 4086 Rank Pte
Witness J. M. Coe

3rd. London General.

23-12-18.

Dear Sir.

~~Seven~~ Will you please allow me
~~to~~ ^{£100} Pound. To my credit. Yours truly
James Taylor. R. N. 47 D H 086.

23-12-18.

J. B. Curlyon

Per Minister

| |
|---|
| 3 RD LONDON GENERAL HOSPITAL |
| No. _____ |
| 23 DEC 1918 |
| WANDSWORTH, S.W. 18. |

A. H. f 2-0-0 M. R. 23/12/18

Receipt no 29.

P. J. A.

Depot.

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

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

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

Part I.

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

The Officer i/o Records,
58 Victoria St

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

58 Victoria St

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

You are requested to forward without delay Army Form B. 178, or temporary document, for the soldier.*

No. 4086 Rank Private

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

Unit London General Hospital Newfoundland

Station MEDICAL BOARD Chas Carleton Capt
Officer i/o Hospital.

Date 17 JAN. 1919 1919

* Strike out if inapplicable.

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

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

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

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

Part II.

Officer i/o Hospital, _____

The soldier's claim to be repatriated abroad* _____ accepted. { Insert "is" or "is not." }
On termination of his leave he is to report to the Officer Commanding, { Strike out if inapplicable. }
_____ at _____ (Station)

Station _____

Date _____ 191 _____

Officer i/o _____ Records.

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

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

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

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

Part I.

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

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

The Regimental Paymaster,

58 Victoria St

58 Victoria St

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

No. 4086 Rank Private

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

Unit and Corps 8th LONDON GENERAL HOSPITAL

Station MEDICAL BOARD 23 Carlyon Cabot Officer i/c Hospital.

Date 17 JAN 1919 191

WANDSWORTH

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

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

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

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

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

Station _____
Date _____ 191

Officer i/c Hospital.

FORM K

N^o 3832^A



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, James Taylor, Regl. No. 4086

hereby agree, until further notification by me, and in similar official form to make an Allotment of Twenty Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.: December 1st 17

Allotment begins

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) | |
|--------------------------|---|------------------------|------------------|----------------------|----|
| 3751 | Wife | Mrs John (Mary) Taylor | Burn Bay Burn | | 60 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | Total Allotment, \$ | 60 |

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) [Signature]
Officer Commanding

[Signature] Company
Nov 20th 1917

(Sig.) [Signature]

(Rank) Plt

Taylor, J

4086

Ray Sept.

July 8, 1919

#4086 Pte. James Taylor,
Durin Bay.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2377.

Yours truly

Captain,
Paymaster & O.i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4086 Rank Plt Name Taylor James
 Intended place of residence Fisherman Buri Bay

2. Occupation Fisherman
 Classification of soldier B Medical Category E

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 JUN 10 1919
 H. M. [Signature]
 Comanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place and date ST. JOHN'S
 JUN 10 1919
 J. Taylor
 Signature of soldier
 [Signature]
 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 and Date ST. JOHN'S
 JUN 10 1919
 J. Taylor
 Signature of soldier
 James O. [Signature]
 Signature of witness Sgt

STATEMENT OF SERVICE

7. Enlisted for service 5-11-17 No of days on Military
 Discharged from service JUN 24 1919 plus 14 days Service 611

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place ST. JOHN'S
 Date JUN 24 1919
 [Signature]
 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 Nfld
 Date July 8/1919
 [Signature]
 Officer i/c Records
 The Royal Newfoundland Regiment

AF 2029/2377

25
31
31
28
31
30
31
30
8
24

The Royal Newfoundland Regiment

Class for Demobilization:—

B.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

9.6.19

Regimental No. *40.86*.....

Name *Taylor*..... *James*.....

Address

Present Medical Category..... *F*.....

Recommended for:— { (a) ~~Immediate discharge~~.....
(b) Standing Medical Board.....

Members of Board {

R.H. Last
O.C. Discharge Depot.

W. Rose
Senior Medical Officer

A.W. Curdson
~~M. O. Depot~~

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4086 Rank Plt Name Taylor James
 Date of Enlistment 5-11-17 Address Dunlop Camp District Buryn
 Occupation Truckman Classification for Discharge B Medical Category E1
 Recommendation S.M.P. Special Duty Disability Rating 50% 6 mths
 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 9-6-19 O. C. Discharge Depot [Signature]

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

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 10-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1641* to his home at *Burns Bay* and Release Certificate No. *2547* issued.

Date *10-6-19* Demobilization Officer *J.A. Snowcroft*

4. Pay and Allowances.

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

Date *10-6-19* Depot Paymaster. *J.W. [Signature]*

Discharge approved for *24-6-19*

Forwarded with following documents to O.C Discharge Depot.

| | | | | |
|----------------|-------------|-------------|----------------|-------------|
| N.F. P 36..... | B 268..... | B 121..... | N.F. Med..... | D.F. 1..... |
| F 178..... | W 3494..... | B 122..... | Board 1st..... | " 2..... |
| R 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 *10-6-19* Demobilization Officer. *J.A. Snowcroft*

APPROVED.

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

Eligible for War Service Gratuity

Date *JUN 24 1919* O. C. Discharge Depot. *R.H. [Signature]*

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

Signature of Man.

J. Gaylor

Reg. No.

J. A. Snowdapt

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S

Date

10-6-19

191

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

MEDICAL HISTORY

Surname

Laylor

OF

Christian Name

James

Table I.—GENERAL TABLE.

Birthplace:—Parish

Burn Bay

County

Nfld.

| | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|------------------------------|------------------------------------|---------------|------------------|
| | on | day of | on | day of |
| Examined | 5 | Nov 1917 | | 191 |
| at | <i>Burn</i> | | at | |
| Declared Age | 18 | years 2 days | years | days |
| Trade or Occupation | <i>Fisherman</i> | | | |
| Height | 5 | feet 4 inches | feet | inches |
| Weight | 138 lbs. | | | lbs. |
| Chest Measurement | 33 1/2 inches | | | inches |
| | 4 1/4 inches | | | inches |
| Physical Development | Right | Left | Right | Left |
| Vaccination Marks | Arm | | | |
| | Number | | | |
| When Vaccinated | | | | |
| Vision | R.E.—V= | <i>6/6</i> | R.E.—V= | |
| | L.E.—V= | <i>6/6</i> | L.E.—V= | |
| (a) Marks indicating congenital peculiarities or previous disease | (a) | | (a) | |
| (b) Slight defects but not sufficient to cause rejection | (b) | | (b) | |
| Approved by (Signature) | <i>Samuel Paterson</i> | | | |
| (Rank) | <i>Major</i> | | | |
| | Medical Officer. | | | Medical Officer. |
| Enlisted | at | <i>Burn</i> | at | |
| | on | <i>31st</i> day of <i>Nov</i> 1917 | on | day of 191 |
| Joined on Enlistment | Corps. | Regtl. No. | Corps. | Regtl. No. |
| Transferred to | <i>1st Nfld Regt</i> 4086 | | | |
| | ROYAL NEWFOUNDLAND REGIMENT. | | | |
| Became non-effective by | on | day of 191 | on | day of 191 |
| [Signature] | | | | |
| [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 case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|------------------|----------------------|-------|------|--------------------------|-------|------|---|-------------------------|---|--|
| | Day | Month | Year | Day | Month | Year | | | | |
| | 10 | 10 | 18 | | | | g.s.w. shell. leg. R. flesh. severe. | | healed - had adherent scars, requiring excision later to be transferred. | R. H. Howard P.R.C. |
| | 30 | 11 | 18 | | | | G.S.W. Rt. calf. | | Board held - see overleaf. Disability: g.w. R. calf. Cause: Service during present war. Disablement: 30%. | <i>H. B. Carter</i> Col. A.M.C. Comdg. 3rd. London Gen. Hospital. |

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 |
|----------|--|
| 10-11-17 | A.A.B. <i>SP</i> |
| 16-11-17 | " <i>SP</i> |
| 21-11-17 | $\frac{3}{3}$ <i>SP</i> |
| 26-11-17 | Vac <i>SP</i> |
| 18.1.19. | <p>Board held.</p> <p>" Finding:—Disposal of <i>SP</i>.</p> <p>" Reclassified, B II.</p> <p><i>H. B. Curly</i> Col. A.M.C. Comdg. 3rd. London Gen. Hospital.</p> |

Table IV.—SERVICE TABLE.

| Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation | Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation |
|---|--------------------------------|-------------------------------------|----------------------|--------------------------------|-------------------------------------|
| <p style="text-align: center;"><i>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>E</u>.</i></p> <p style="text-align: center;"><i>5.6.19</i> Date of S.M.B.</p> <p style="text-align: center;"><i>J. H. M. H.</i> Discharge Officer</p> | | | | | |



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 Office 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 *James Taylor*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4086*

Intended address *Parish Bay*

Height on discharge *5* feet *4*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks *Op. S. W. Right Leg*

Figure on discharge *Short*

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 *Parish, Aug 5th, 1899*

Nature and locality of civil employment required _____

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

(Soldier's signature in full) *James Taylor*

Pte
(Rank)

Station *St Johns*

Date *4-6-19*

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 in Hospital,
Unit, or Command Depot.

Station

Date

Report of Medical Board.

Station **St. John's, Nfld.** Date **JUNE 5/19.**
 No. and Rank **4086.** Age **20** Height **5'4"**
 Name **TAYLOR JAMES.** Complexion **FAIR**
 Unit **Royal Newfoundland** Eyes **GREY** Hair **DARK BROWN**
 Address **BURIN BAY**
 Former Trade
 Enlisted at **ST. JOHN'S** On **28/10.17** (The Board will please note how the soldier's appearance corresponds with above description).
 Disease or Disability Original **GUN SHOT WOUND RIGHT CALF (FLESH)**

Subsequent

Present Condition (Compare with previous Board)

Scar 6" long obliquely down R. Calf, blue-looking & adherent to ~~HEALTHY~~
 Tissues beneath. Interferes with walking and painful to pressure. Numb-
 ness down to heel.

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

30%.

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

Recommendation of Medical Board

30% 6 Months.

DIS. PERMANENTLY UNFIT.

Members of Board

H.S. FRASER.

L. PATERSON, MAJOR.

J.S. TAIT.

E.D. O'RIELLY, CAPT.

Approving Medical Officer.



Army Form B. 103.

Regimental Number 4086

Casualty Form—Active Service.

Regiment or Corps Royal New Zealand 5-10-1898

Rank Private Surname Saylor Christian Name James

Religion S. C. Age on Enlistment 18 years 2 months

Enlisted (a) 5-11-17 Terms of Service (a) Periodic Service reckons from (a) 5-11-17

Date of promotion to present rank Date of appointment to lance rank.....

Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate.....

Occupation Fisherman Signature of Officer [Signature]

| Report | | 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. |
|--------|--------------------|--|-----------------------|------------------|--|
| Date | From whom received | | | | |
| | | <u>AI</u> Embarked ... | <u>2 JUL 1918</u> | | |
| | | <u>28-6-18</u> Disembarked | <u>5 JUL 1918</u> | | |
| | | Joined Battalion | <u>Field</u> | <u>9-7-18</u> | <u>6113013/7/18</u> |
| | <u>3 Hussars</u> | <u>Co. G.W. High</u> | <u>4/10/18</u> | <u>4/10/18</u> | <u>827604 7/10/18</u> |
| | <u>2 Grenadier</u> | | <u>Boulogne</u> | <u>5/10/18</u> | <u>AA 29936</u> |
| | <u>de Boninck</u> | Transferred to England | | <u>10/10/18</u> | <u>W 3083</u> |
| | | <u>0-1/8 No 1 Infantry Section,</u> | | | |
| | | <u>and Echelon.</u> | <u>G.H.O., B.E.F.</u> | | |

(e) 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.
 (f) Signaller, Shoosmith, &c.
 W. 5527—M2093 1000m 7/17 (25698) C.P. & S. Ltd. Forms B/103 E/1555. (P.T.O.)

NEXT OF KIN! John Taylor Queen's Bay

STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 4086Rank... Pvt.Name..... Taylor James

(Surname)

(Christian Names)

Unit and Corps } 2/R. N.Y.C.

Note.—Before answering the questions below, the soldier is to note that

(a) The statements made by him will be checked by official records.

(b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

France. 6 months.

(b) In what capacity?

Private Soldier.

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

G.S.W. R. Galf.
Shell shock.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

No 2. Australian P. France
Blaphone Mil. Hosp.
3rd L. Hosp.

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

✓

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

✓

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

✓

7. What is the name and address of your last employer before joining the Army?

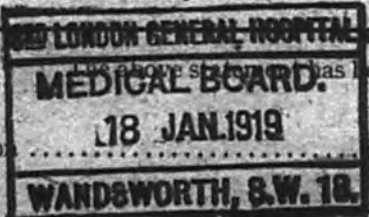
Hollits.
Buran. n.f.

8. (a) What was your occupation before joining the Army?

Fishing.

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)



The above statement has been read over to me; I agree to it, and have nothing further to add.

Station

Signed (Soldier) *J. Taylor*

Date

Signed *J. Taylor*

Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

INSTRUCTIONS.—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or P.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.3.

PART Soldier's Name TAYLOR *James*
(Surname) (Christian names in full)

A. Unit from which discharged R. Newfoundland

Regimental Number 4086 Rank on discharge Private Age on discharge 19

Married, widower with children, or single Single

Occupation before enlistment Fisherman

Special qualifications (if any) for employment in civil life } as above

Nature and locality of employment desired as above

Full postal address to which proceeding on discharge } Burns - Newfoundland

Name of Approved Society (if any) _____

PART **B.** Period of service, and in what Corps

| Regiment | Years | Days | All service abroad, with Stations | Years | Days |
|----------|-------|------|-----------------------------------|-------|------|
| | | | India | | |
| | | | South Africa | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Disallowed

Service towards pension

PART **C.** Number of G.C. badges medals

Wounds and actions in which received _____

PART **D.** Where born (parish, town and county), and date Burns Nfld. 25/12/99

Colour of hair on discharge Dark Brown Colour of eyes Brown Complexion Fair

Christian name of father John

Christian name of mother Mary

NOTE.—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Forms W. 3463A and B are to be completed by the Officer i/c hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

[P.T.O.]

Wife's maiden name in full

Date and place of marriage

Christian names
of children and
dates of birth

Date and place of 1st enlistment

Figure on discharge

Descriptive and other distinguishing marks

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full) James Taylor

Rank

Station

Date

I certify that the above-named soldier signed the foregoing declaration in my presence.

(Rank)

O.C. unit or Officer i/c Hospital.

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

The soldier named overleaf was

Discharged under para. _____ King's Regulations

or

Transferred to Class* _____ of the Reserve.

Strike out
whichever
inapplicable.

Military character

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

Officer i/c Records.

Station

Date

191

Insert P., or P.(T).

July 11, 1919

#4086 Pte. James Taylor,

Burin,

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 Gratitude.

Yours truly

Captain,
Paymaster & O.i, c Records

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..... *James* 2. Surname..... *Taylor*

3. Rank..... *Cpl* 4. Regtl. No..... *4086*

5. Address in full to which future payments of gratuity are to be forwarded..... *Barin - District of Barin*

6. Date of enlistment in the Regiment..... *Oct 20/17*

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 Oct 20/17 to June 10/19* 1. *2*

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.... *No*

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

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

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

19. Are you now serving in the Regt.?..... If not give? - (a) date of discharge *June 10/19* (b) Reason for discharge *New York New York* *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 June 1918 to Oct. 1918 - 4 years.

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.

J Taylor

Signature of Applicant:

Place of Residence: *Barin, Dis. of Barin*

Declared before me at: *M Johns, Nfld,*

This *15th*, day of *January*, 19...*9*...

John M. Cooney

Signature of Barrister of the
Supreme Court, Stipendiary Legis-
trats; Notary Public, Justice of the
Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.

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

.....

.....

.....

Certified correct.

Paymaster

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



July 9th., 1921.

The accompanying King's Certificate, on his discharge,

(No. 1331), is forwarded herewith to

Private James Taylor

in respect of his service as No. 4086 Rank Pvte.

Name J. Taylor Corps Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received Certificate

Signature J Taylor *MJ*

Date July 20th

Address Burin Bay

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland

Number of Sheet ONE

Signature of O. C. Company [Signature]

| | | | | | | | |
|----------------------------|-------------------------|------------------------------|--------------------------------|--------------------------------|--|---|--|
| Regimental Number and Name | | Enlistment | | Trade | | Good Conduct Badges, Service pay or proficiency pay | |
| No. | <u>4086 Taylor Jas.</u> | Age on | <u>18 years 2 months</u> | <u>Fisherman</u> | | | |
| Joined | Date | Place and Date of Enlistment | <u>Burin</u> | Religion | | | |
| Joined | Date | | | <u>S.A.</u> | | | |
| Joined | Date | Period of | with Colours <u>246</u> years. | Place of Birth | | | |
| Joined | Date | | | with Reserve <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>S/ Lt's hq.</u> | <u>13-1-18</u> | <u>Plt</u> | | <u>Absent from Church Parade</u> | <u>Lt. Miller</u> | <u>2 days C.B.</u> | <u>14-1-18</u> | <u>S. T. Garty Major</u> | <u>[Signature]</u> |
| <u>Hazeley Down Camp.</u> | <u>28.3.18</u> | <u>"</u> | | <u>Destroying government property</u> | <u>Coppl</u> | <u>Christian</u> | <u>2.4.18</u> | <u>Plt La Edens.</u> | <u>[Signature]</u> |
| <u>"</u> | <u>8.6.18</u> | <u>"</u> | | <u>absent from 10.4.18 pm parade</u> | <u>Cpl</u> | <u>Christian</u> | <u>9.6.18</u> | <u>Plt. J. H. Lane</u> | <u>[Signature]</u> |
| <u>"</u> | <u>6/2/19</u> | <u>"</u> | | <u>Widely buttons on parade</u> | <u>Sgt. Hodge</u> | <u>3 days C.B.</u> | <u>7.2.19</u> | <u>Plt. W. S. Weston</u> | <u>C.B.</u> |
| <u>"</u> | <u>20/19</u> | <u>"</u> | | <u>on absent from 13.4.5 parade till 14.00 hr. same date</u> | <u>Sgt. Rendell</u> | <u>2 day C. B.</u> | <u>21/19</u> | <u>Lt. Col. Burton RSO.</u> | <u>[Signature]</u> |
| <u>"</u> | <u>19/19</u> | <u>"</u> | | <u>Refusing to obey an order</u> | <u>Cpl. Crawford</u> | <u>168 hrs' detention</u> | <u>15/19</u> | <u>[Signature]</u> | <u>2 1/2 days pay</u> |
| <u>"</u> | <u>19/19</u> | <u>"</u> | | <u>Absent without leave till 19/19 hrs</u> | <u>Cpl. [Signature]</u> | <u>7 days C.B.</u> | <u>13/19</u> | <u>Lt. Col. Burton RSO.</u> | <u>6 Days Pay.</u> |
| <u>"</u> | <u>10/19</u> | <u>"</u> | | <u>absent without leave for latter 1/19 notice appeared by order Lt. Col. Burton RSO.</u> | <u>[Signature]</u> | <u>10 days C.B.</u> | <u>8/19</u> | <u>[Signature]</u> | <u>Demobilized St. John's, 8/19</u> |

Army Form B. 121.

The Royal Newfoundland Regiment

D 408

DEMOBILIZATION OF

Reg. No. 4086 Rank Plt Name Taylor James
 Date of Enlistment 5-11-17 Address Duryn Bay District Buryn
 Occupation Wheelerman Classification for Discharge B Medical Category F1
 Recommendation S.M.B. permitted to leave Disability Rating 50% 6 mths
 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 9-6-19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

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 permitted to leave

Date 10-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1641*.....to his home at *Home*..... and Release Certificate No. *2547*..... issued.

Date *10-6-19*.....

J.A. Snow Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *8-7-19*.....

Date *10-6-19*.....

J.A. Snow Capt
Depot Paymaster.

Discharge approved for..... *24-6-19*

Forwarded with following documents to O.C Discharge Depot.

| | | | | | | |
|----------------|-------------|-------------|----------|----------------|-------------|-----------------|
| N.F. P 36..... | B 268..... | B 121..... | <i>1</i> | N.F. Med..... | D.F. 1..... | <i>1</i> |
| B 178..... | W 3494..... | B 122..... | | Board 1st..... | " 2..... | <i>1</i> |
| B 178a..... | D 400A..... | B 1915..... | | do 2nd..... | " 3..... | <i>2 Form B</i> |
| 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 *10-6-19*.....

J.A. Snow Capt
Demobilization Officer.

APPROVED.

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

Eligible for War Service Gratuity

JUN 24 1919

Date

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

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

Date *June 18/19*.....

James H. Sait
for O.C. Records

Reg. No. *4086* Rank *Pfc* Name *Taylor, Jas.*

Attested Address *Burien*

Allotment Allottee

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

Returned on S.S. *Corseican* Cause *Discharge*

5.6.19. Rec. serv. from the Army

9.6.19. USED TO DEMOBILIZATION OFFICE

24.6.19. DISCHARGE APPROVED ON DEMOBILIZATION.