



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4103 Name William R Taylor Corps S.A.

Questions to be put to the Recruit before Enlistment

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>William R Taylor</u> |
| 2. What is your full Address? | 2. <u>13 Iron Road</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>1</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 |
| 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> { Corps |

I, William R 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.

William R Taylor SIGNATURE OF RECRUIT.

W. James Lt Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William R 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 Burin on this 5th day of Nov 1915.

Signature of Attesting Officer W. James Lt

†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 5th Bn Rgt.

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

Date Nov 5th 1915 } W. James Lt Approving Officer.

Place Burin }

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William R Taylor
 Apparent age 18 years 1 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 35½ inches
 Range of expansion 2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr William Taylor
Burin Bay | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " Pensions " _____ [" "] _____ " _____



FIRST NEWFOUNDLAND REGIMENT

4103

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No. 4103

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Questions to be put to the Recruit before Enlistment

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>William R Taylor</u> |
| 2. What is your full Address? | 2. <u>Burn Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>1</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, William R 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

William R Taylor SIGNATURE OF RECRUIT.
W. James Lt Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William R 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 Burn Bay on this 5th day of Nov 1917
 Signature of Attesting Officer W. James Lt

†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 Newfoundland Regt
 If enlisted by special authority, such will be attached to the original attestation.
 Date Nov 5th 1917 } Approving Officer.
 Place Burn Bay }

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William R Taylor
 Apparent age 18 years 1 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 35½ inches
 Range of expansion 2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr William Taylor
Burn Bay | 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>5-11-17</u>									
Joined at <u>St John's</u> on <u>November 5th 17</u>									
Discharged <u>July 8, 1919</u>									
Embarked <u>St John's S.S. Steamer</u> to <u>Halifax N.S.</u> <u>29-7-18</u> . Embarked for <u>Rt of I.</u> <u>2-9-18</u> . Joined <u>Battle</u> <u>9-7-18</u> . Saw action <u>Wentworth</u> <u>19-7-18</u> . Wounded by <u>16.6.18</u> . <u>Wounded</u> ; 2 <u>shots</u> the <u>escape</u> . <u>Entered</u> <u>35 days F.P. No 1.</u> <u>7/18</u> . <u>Wounded</u> <u>14-10-18</u> . <u>Admitted</u> <u>14</u> <u>Gen Hosp.</u> <u>Wounded</u> . <u>15</u> <u>18</u> . <u>Wounded</u> <u>to</u> <u>17</u> <u>18</u> . <u>Admitted</u> <u>3</u> <u>London</u> <u>Gen Hosp.</u> <u>17-10-18</u> . <u>Wounded</u> <u>Went</u> <u>to</u> <u>Wentworth</u> <u>20-1-19</u> . <u>So</u> <u>18</u> <u>for</u> <u>demobilization</u> <u>22-5-19</u> . <u>Arrived</u> <u>Halifax</u> <u>1-6-1919</u>									
<u>Demobilization</u>									
<u>St John's 8-7-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 8-7-19 (date of discharge) 1 years 238 days
 " " Pensions " " " " " " " " " " " "

C.R. 4103

Extract from Order~~s~~ by Major G.T. Mathias, D.S.O.
Commanding 1st Battn. R.Nfld. Regt. 4-8-18.

A Field General Court Martial will ~~be~~ assemble at Battn.
HQ., at 1030 on the 6th inst., for the trial of
No.4103 Pte. Taylor

of this Unit.

C.R. 4103

Extract from Order~~a~~ by Major G.T. Mathias, D.S.O.
Commanding 1st Battn. R.Nfld. Regt. 8-8-18.

A Field General Court Martial will ~~be~~ assemble at Battn.
HQ., at 1030 on the 6th inst., for the trial of

No.4103 Pte. Taylor

of this Unit.

C.R. 4103

Extract from Orders by Major G.T. Mathias, D.S.O.
Commanding 1st Battn. Royal Nfld. Regt. 19-9-18.

Court-Martial:/ No. 4103 Pte. W.B. Taylor tried
by F.C.M.M. 6/8/18 Charge:- Without reasonable excuse allowing
to escape two Prisoners whom it was his duty to guard. Finding
Guilty Sentence; 35 days F.P. No.1. Conf. by Commdt. G.H.W.
Troops 728-18.

2
C.R. 4103

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, July 14-1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer l/c Records from 8-7-19.

4103 Pte. Wm. Taylor.

C.R.

4103

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

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

4103 Pte. R. Taylor.

C.R. 4103

Extract from Preliminary Report of a Medical Board
held on Thursday Evening June 5th 1919.

The following was the finding:-

4103, Pte. W.R. Taylor.

Recommended Discharge from the Army.

C.R! 4103

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

4103, Pte. R. Taylor.

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

BE "Corsican"

C.R. 4103

Extract from Orders Part 11 By Lt. Col. B.J.Barton
Commanding 2nd Bn., Royal Nfld. Regt. 20-1-19.

The following having reported back from the
1st Bn. is taken on the Strength and posted to "H"
Company. from 20-1-19.

4103 Pte. R. Taylor.

C.R. 4103

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. B11, 18-1-19.

4103 Pte. W.R. Taylor.

C.R. 4103

Extract from War Office List No. G. 1733 dated 1. 11. 18.

#4103 Pte. W. R. Taylor.

Wounded 10. 11. 18.

BO. 2

C.R. 4103

Oct. 31, 18.

Mr. William 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. 4103 Pte. Wm. R. Taylor, is now progressing favourably.

Yours faithfully,

Lieut. Col.

Chief Staff Officer.

C.R. 4103
Counter No.

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	Recd	By	Sent	by	Check

Dated Oct 21st, 1918

To William Taylor, Burin Bay.

Regret to inform you that Record Office, London, officially reports **No. 4103, Private William R. Taylor at 3rd London General Hospital, Wandsworth suffering from G.S.W. thigh.**

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

J.R. Bennett

Gge. Dept of Militia

Minister of Militia.

FOR TYPEWRITER

C.R. 4103

Extract from Casualties received from Pay & Record
Office, London, Oct. 19th, 1918.

Admitted to 3rd London General Hospital.

4103 Pte. Taylor W.R.

G.S.W. Thighs.

C.R. 4103

Extract from Daily Orders part 11 Unit The Royal Nfld. Regt.,
17/8/18.

4103 Pte. Taylor W.

In ~~unjust~~ confinement awaiting trial, 19/7/18. tried by
F.G.C.M. 6/8/18 & sentenced to 35 days F.P. No.1, for without
reasonable excuse allowing to escape two prisoners whom it was
his duty to guard" ^C confirmed by commdt. G.H.Q. troops, 7/8/18.

C.R. 4103

Extract from War Office List. No H. A. 30380. dated 24 Oct. 1918

ADMITTED 14 GEN. H. WIMEREUX 15 OCTOBER 1918.

#4103 Pte. R. Taylor.

bc.
G.S.W. THIGHS SEVERE.

C.R. 4103

Extract of Nomin 1 Roll to B. E. P. embarked
Folkestone 2-7-18

#4103 Pte. W.R. Taylor.

C.R. 4103

Extract from Nominal Roll Draft "H" Company Embarked

S.S. Florizel Jan. 29th, 1918.

4103 Pte. Taylor W.R.

C.R. 4103

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt., Nov.14th, 1917.

4103 Pte. W.R. Taylor.

Attested at Burin on Nov.5th/17 and reported to Head-
quarters Nov.13th, 1917.

W. R. Taylor

C.R.

4103

~~PRC~~

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 } Fisherman.
 or Occupation }
 2. Regtl. No. 4103 3. Rank..... Private 7a. If the soldier claims previous service in Army, he should state—
 4. Name TAYLOR, William Reuben (a) Former Regts. or Corps; with Regtl. Nos.
 (Surname)..... (Christian Names)
 5. Age last birthday,..... 19
 6. Posted for duty on..... 3. 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 }
 (b) Where } N/A, (d) Particulars of Pension or Gratuity (if any)
 (c) Opinion of Court }

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
G. S. W. Both Thighs - Flesh,
 11. Date of origin of disability. October 14th 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. Advancing for 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 is able to walk fairly well.

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 ?

No

--

Not applicable.

None

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.

For Dispersal and
Classified in Grade Bii.

(sgd) Thos. B. Carlyon, Capt.

Medical Officer in charge of case.

3rd London General Hospital,
Station WANDSWORTH, S.W.

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.

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.

21. Give diagnosis and particulars of:—

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

*Scars of flesh wounds in
both thighs - right thigh is
rather weak - otherwise no
disability.*

Will 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

.....	<i>yes</i>
.....	—
.....	—
.....	—
.....	<i>No</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

yes.

- (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.

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).

Under 20

(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?

no.

Opinion of Military Member in case of disagreement.

OR

(b) In what other grade do the Board place him?

Bii

(c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

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?

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?

Signatures:—

3rd London General Hospital (S) G. G. Lovell
WANDSWORTH, S. W.

Local Name

President or Chairman.

Station

Date *1.8.19*

(sd) R. G. B. Howard

Members.

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

Station

Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

Date

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

Depot

Notification to the Officer i/c 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/c 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/c 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/c 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/c Records,

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

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

No. 4003 Rank Private

Name TAYLOR William Ruben
(Surname) (Christian names in full)

Unit and Corps R. Newfoundland

Station ADD LONDON GENERAL HOSPITAL
Medical Board
Ch. Barclay Cpt
Officer i/c Hospital.

Date 17 JAN 1919 191__
* 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/c Hospital is to complete such of the following particulars as the soldier can furnish before transmitting the Army Form to the Officer i/c 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/c 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/c 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/c _____ 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, <u>58 Victoria St</u>	The Regimental Paymaster, <u>58 Victoria St</u>
---------------------------------------	--	--

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

No. 4003 Rank Private
 Name TAYLOR William Reuben
 (Surname) (Christian names in full)
 Unit and Corps R. Newfoundland
 Station LONDON GENERAL HOSPITAL Officer i/c Hospital.
MEDICAL BOARD
 Date 17 JAN 1919

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

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

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

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

Station _____
 Date _____ 191 _____
 Officer i/c Hospital.

~~Mrs Wood~~

N6403/933

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 Batt. Ryl. Nfld. Regiment
Winchester.

29th April 1919

5/5/ 1919

4103 Pte. W.R. Taylor

With reference to the following telegram from the Minister of Militia / / (154)

Receipt hereunder.
Reyman
for ~~Colonel~~ COLONEL,
OFFICER COMMANDING, NEWFOUNDLAND REGT.

"Pay to- 4103 Taylor W.R.
£5. 11. 0.

Received the sum of Five pounds.

Cheque £. 11. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Edmond Hillings in respect of telegraphic remittance from the Minister of Militia.

W R Taylor

Chief Paymaster & O. i/c Records.

No. 4103 Rank Private

Witness Chubbell

ppd 29/4/19 9/5/19

25/10/18



Dear "Friend"
 I would like for you
 to try and find
 out where my Cousin
 Pto James Taylor is
 his number is 4086.
 He was wounded in
 October as far as I
 can find out and
 I would like to know
 his address if you
 please

NEWFOUNDLAND CONTINGENT,
 P.O. BOX 26, ST. JOHN'S, AFB, CANADA
 RECEIVED
 OCT 26 1918
 OCT. NOS. OUT

This is my address
 Pto W R Taylor
 Royal Army Medical Corps
 No 4103 3rd London
 general Hospital ward
 L Wandsworth SW 18
 London
 Reply over

No 41086

Mr James Taylor

City of London

Military Hosp
Clapton London
E 5

Wm R Leg

18453/364

3rd London Gen.
Wandsworth.

14th November 8

4103

Pte

W. R. Taylor

2:0:0

O.K. 1-0-0
M.R. 23-12-18
Receipt No 30

3 RD LONDON GENERAL HOSPITAL	
No.	23-12-18
23 DEC 1918	
WANDSWORTH, S.W. 18.	

General

Dear Sir

Will you kindly allow
me one pound to my
credit yours truly
P. W. R.

Jaylor. Royal W of L D

Reig
P. W. R.
23-12-18

4103

P. W. R.

Taylor, R

H103

Ray sept.

July 8, 1919

#4103 Pte. William Taylor.

Burin.

Dear Sir:-

Please find enclosed Discharge Certificate
No. 2785.

Yours truly

Captain
Raymaster & U.i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4103 Rank Plt Name Jaylor W. R
 Intended place of residence Burin

2. Occupation Fisherman
 Classification of soldier B Medical Category F

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
 for H. M. [Signature] 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.
(SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACC)
 Place and date JUN 10 1919
ST. JOHN'S
W. R. Jaylor Signature of soldier
Amie [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
Jaylor W. R. Signature of soldier
James [Signature] Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 5-11-17 No of days on Military
JUN 24 1919 plus 14 days Service 61 1/2
 Discharged from service

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
R. H. [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

AG B2079/2785

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4003 Rank Pvt Name Taylor W R
 Date of Enlistment 5-11-17 Address Beynon District Beynon
 Occupation Fireman Classification for Discharge B Medical Category F
 Recommendation S.M.B. private/1st Lt Disability Rating 20% 3 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 for H. M. W. St O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Taylor R

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

W. G. L. W. St

Date 10-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. PR/04466 to his home
 at Burn and Release Certificate No. 2544 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 11/11/19
SUBJECT TO ADJUSTMENT OF OVERLEAF PAY ACE.

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	N.F. Med.	D.F. 1	1/2 Form B
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	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 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 Gratitude

Date JUN 24 1919 R.H. Sait Capt.
 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

W R Taylor

Signature of Man.

J B Shaw Capt.

Signature of the Vocational Officer or his Representative.

Reg. No. *4103*

Place *ST. JOHN'S*

Date *10-6-19.*

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

MEDICAL HISTORY

OF

Surname Taylor Christian Name Richard W.

Table I.—GENERAL TABLE.

Birthplace:—Parish Burn County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>5th</u> day of <u>Nov</u> 191 <u>7</u> at <u>Burn</u>		on _____ day of _____ 191____ at _____	
Declared Age	<u>18</u> years <u>11</u> months <u>11</u> days		_____ years _____ days	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>5</u> inches		_____ feet _____ inches	
Weight	<u>125</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>33</u> inches		_____ inches	
	Range of Expansion... <u>5</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arm	<u>/</u>		
	Number			
When Vaccinated				
Vision	R.E.—V=		R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Parsons</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>Burn</u> on <u>5th</u> day of <u>Nov</u> 191 <u>7</u>		at _____ on _____ day of _____ 191____	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<u>1st Regt</u> <u>4103</u> <u>Regt</u> <u>ROYAL NEWFOUNDLAND REGIMENT.</u>			
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				
	17	10	18				<p><i>Genl. W. Rotts thighs.</i></p>		<p><i>Board held - account of.</i> <i>Disability - Genl. Rotts thighs.</i> <i>Cause. - Service during present war.</i> <i>Disablement - Under 20.</i></p> <p><i>H. B. Conly</i> Col. A.M.C. Comdg. 3rd. London Gen. Hospital.</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 O. & 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

Taylor, William R.

Regiment from which discharged *Royal Newfoundland*

Regimental number

24103

Intended address

Bevin

Height on discharge

5 Feet *5*

Color of hair on discharge

Light

Complexion

Fair

Color of eyes

Blue

Descriptive Marks

Scar on legs.

Figure on discharge

M.S.

Christian name of Father

William

Christian name of Mother

Elizabeth

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

Bevin. 20 Sept 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), *W. R. Taylor.*

(Rank)

PL

Station **ST. JOHN'S.**

Date

JUN 4 1915

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 of the **HEADQUARTERS**
Unit, or Command Depot.



Station

Date

Report of Medical Board.

Station **St. John's, Nfld.** Date **June 6/19.**
 No. and Rank **4103 Pte†** Age **20.** Height **5'5".**
 Name **Taylor William Reuben** Complexion **Fair**
 Unit **Royal Newfoundland** Eyes **Blue** Hair **Light.**
 Address **Burin.**
 Former Trade **Fisherman.**
 Enlisted at **St. John's.** On **2/10/17.** (The Board will please note how the soldier's appearance corresponds with above description).
 Disease or Disability **Original GUN SHOT WOUND BOTH THIGHS.**

Subsequent

Present Condition (Compare with previous Board)

T&T WD. R. THIGH WITH FRACTURE OF FEMUR, SOUNDLY HEALED. NUMBNESS DOWN TO THE KNEE WITH LOSS OF STRENGTH IN THE KNEE APT TO GIVE WAY WHEN WALKING .
2ND FLESH WD. ABOVE THIS. FLESH WD. OF L. THIGH.

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

PENSIONABLE DISABILITY: ^{20%} 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

DIS. PERMANENTLY UNFIT.

20% 3 Months.

Members of Board

H.S. FRASER.

(SGD) L. PATERSON. MAJOR.

J.S. TAIT.

J.B. O'RIELLY. CAPT.

Approving Medical Officer.



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. 4100...

Name .. Jaylor William R.

Address .. B. Min.

Present Medical Category..... F

Recommended for:—

(a) ~~Immediate discharge~~

(b) Standing Medical Board.....

Members of Board

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

J. Paterson
Senior Medical Officer

J. Burden
M. O. Depot

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 A. Soldier's Name TAYLOR William Reuben
(Surname) (Christian names in full)

Unit from which discharged R. Newfoundland

Regimental Number 4103 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 }

Nature and locality of employment desired as above

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

Name of Approved Society (if any) _____

PART B.

Period of service, and in what Corps	Regiment	Years	Days	All services 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 Burton - Nfld - 10/9/99

Colour of hair on discharge Brown Colour of eyes Blue Complexion Flesh

Christian name of father William

Christian name of mother Elizabeth

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)

Station

Rank

Date

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

(Signature)

(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
is applicable.

Military character

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

Station

Date

Officer i/c Records.

Insert P., or P.(T).

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. 4103Rank. Pte.Name Taylor Wm Kenner

(Surname)

(Christian Names)

Unit and Corps

} 2/R. Newfoundland.

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 7 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.

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

Gun shot wounds
both thighs.

July 11, 1919

#4103 Pte. William Taylor,

Burin Bay.

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 & C. 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..... *W R Taylor*

3. Rank..... *Pte* 4. Regt. No. *4403*

5. Address in full to which future payments of gratuity are to be forwarded..... *Burris Bay, Burris*

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.....
no

8. Relationship of such dependents..... *no*

9. Address in full of such dependents..... *no*

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..... *Overseas*

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

W R Taylor

Signature of Applicant: *W R Taylor*
 Place of Residence: *Burin Bay, Burin*
 Declared before me at: *St Johns, Nfld*
 This *10th* day of *June* 19*. 19...*

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

POST DISCHARGE PAY.				Net amount due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	
.....
.....
Certified correct.				Paymaster

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 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. R. Newfoundland
- 2. Regtl. No. 4103 3. Rank. Private
- 4. Name TAYLOR William Reuben
(Surname) (Christian Names)
- 5. Age last birthday 19
- 6. Posted for duty on 3-10-17 at St. John's
in category (or grade) A1
- 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 }
(d) Particulars of Pension or Gratuity (if any)

N/A

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."

G. M. Both Pugh Herb

11. Date of origin of disability. Feb-14/18.

12. Place of origin of disability. Gpres.

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. Advancing for attack. When hit by shell.

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war .. *Yes* ..
 - (ii.) Previous active service
 - (iii.) Climate in pre-war service
 - (iv.) Ordinary military service before the war .. *Yes* ..
 - (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? } *9.5.19*

In all cases such as facial injury, ear, nose and throat, dislocation, 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 is able to walk. Fingers well.*

16. Was an operation performed? If so, when and what was its nature? *Yes*
17. If not, was an operation advised and declined? *Not applicable.*
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? *None.*
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? *To Discharge and classified in Grade B II*

(b) Change to United Kingdom?

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

3rd London General Hospital, WANDSWORTH, S. W.

Station

Date .. *18. 1. 19*

M. B. Carver, Capt.
 Medical Officer in charge of case.

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

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.

21. Give diagnosis and particulars of:—
- (a) Any disability claimed or discovered.
- (b) The present condition thereof.
- Scars of flesh wounds in both thighs: right thigh is rather weak—otherwise no disability will improve*

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 *Yes*
- (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.

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). *Under 20*
- (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? *No*
- OR
- (b) In what other grade do the Board place him? *B.ii.*
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Opinion of Military Member in case of disagreement.

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? —

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? —

Signatures:—

3rd London General Hospital, Wandsworth, S.W. *G. Cor. G. G. A. W. A. M. C.* President or Chairman.
 Station *WANDSWORTH, S.W.* *A. D. Howard Esq.* Members.
 Date *18.1.19*

Discharge Approved under Para. 392 (vii) King's Regulations.
 Station *WANDSWORTH, S.W.* *A. E. D. M. Esq.* Officer in charge, Central Hospital. *Not applicable in cases of Patients in Hospitals.*
 Date *19.1.19*

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
 Date
 O.C. Discharge Centre.

Report of Medical Board.

Station St. John's, Nfld. Date JUNE 5TH., 1919.
 No. and Rank 4103 - PRIVATE Age 30 Height 5' 5"
 Name TAYLOR, WILLIAM REUBEN Complexion FAIR
 Unit Royal Newfoundland Eyes BLUE Hair LIGHT
 Address BURIN
 Former Trade FISHERMAN
 Enlisted at ST. JOHN'S ON 3/10/17 (The Board will please note how the soldier's appearance corresponds with above description).
 Disease or Disability Original GUN SHOT WOUND BOTH THIGHS

Subsequent

Present Condition (Compare with previous Board)

Through & through wounds right thigh with fracture of femur, soundly healed. Numbness down to the knee with loss of strength in the knee - apt to give way when walking. Second flesh wound above this.
 Flesh wound of left thigh.

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market? 70%

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? 70% 3 months

Recommendation of Medical Board

Discharge permanently unfit

Members of Board

L. Peterson

Major

J. H. Jones
 J. H. Jones

Approving Medical Officer.



RECEIPT.

CR. 4103

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

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

NO. 4103... NAME... *K R Jaynes*.....

DATE. *Mar 8 1920*.....

PLACE. *Burn*.....

C.R. 4103

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name. *William R Taylor*

Date *Feb 10 1920*

Place *Burn*

Receipt for Army Book 64

No. 4103 Name RW Taylor

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

Name William R Taylor

Date Aug 18 1920

Place Burin

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

WT

Fold Here

ON HIS MAJESTY'S SERVICE

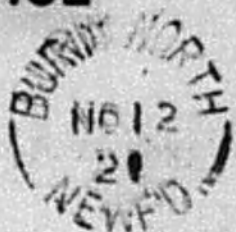
To the Officer in Charge of Records,

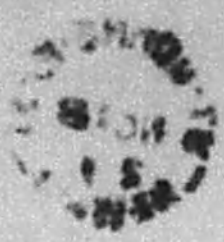
Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here





OCT 21 1921 1921.

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

William R. Taylor

in respect of his service as No. 4103 Rank Pte.

Name W.R. Taylor Royal Nfld. Regt.
Nfld. Forestry Corps

Receipt of the same should be acknowledged hereon.

Received Metals

Signature W R Taylor

Date Nov 2nd

Address Burin Bay

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.;

Dept. of Militia,

St. John's, Nfld.

BURIN &
BJY30
21
NEWFID

Fold Here

ST. JOHN'S
AL 1
21

July 9th., 1921. 1919.

The accompanying King's Certificate, on his discharge,

(No. 1336), is forwarded herewith to

Private William R. Taylor

in respect of his service as No. 4103 Rank Pvte.

Name W.R. Taylor Corps Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received

Certificate

Signature

W R Taylor

Date

July 20th

Address

Parish Bay

Casualty Form—Active Service.

Regiment or Corps **Royal Newfoundland** **C.P.R.** **5-11-1898**

Rank **Private** Surname **Saylor (W.R.)** Christian Name **Reuben William**

Religion **S-a** Age on Enlistment **18** years **1** months

Enlisted (a) **5-11-17** Terms of Service (a) **3 years** 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				
		A I Embarked ...	2 JUL 1918		
		28-6-18 Disembarked	5 JUL 1918		
		Joined Battalion	Field	9.7.18	1013 d 13/7/18
15/7	O. C	In arrest awaiting trial	-	19.7.18	
		Tried by F.C.C.Y & sentenced			
		to 35 days F.P. No 1-		6.8.18	
		for "Without reasonable excuse			
		allowing to escape, two prisoners			
		whom it was his duty to guard"			
		Confined by Commr. & H.Q. Troop		7.8.18	B. 2069 B.A. 390
		Wounded in Action	14/10/18		

(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, Shosong-Smith, & Co. W. 5527-M2093 1000m 7/17 (25686) C. P. & S., Ltd. Form B. 103 E/1555. [P.T.O.]

NEXT OF KIN: - William Taylor, Burn Bay, Nfld

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland

Number of sheet 1 of 1

Signature of O. C. Company W. H. [Signature]

Regimental Number and Name		Enlistment		Trade
No.	<u>Taylor R. W.</u>	Age on	18 years 1 months	<u>Siskerman</u>
Joined	Date	Place and Date of Enlistment	<u>St. Johns 13-11-17.</u>	Religion
Joined	Date	Period of	with Colours 238 years. with Reserve 365 years.	Place of Birth
Joined	Date			

Good Conduct Badges, Service pay or proficiency pay

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>In the Field</u>	<u>19th 18</u>	<u>Pte</u>		<u>When on active service, without reasonable excuse, allowing to escape two persons whom it was his duty to guard.</u>	<u>Pts E. Mahaffey " E. Rees " C. Cox</u>	<u>35 days F.P. No 1</u>	<u>3 ⁸/₁₈</u>	<u>Field Gen Court Martial Confirmed by Col. B. Burnetville 7/8/18</u>	<u>W.H.H.</u>
				<u>Demobilized St. Johns, 8 ⁷/₁₉</u>					

To be carried over

The Royal Newfoundland Regiment

4103

DEMOBILIZATION OF

Reg. No. 4103 Rank Private Name Taylor W R
 Date of Enlistment 5-11-17 Address Dublin District Dublin
 Occupation Gasman Classification for Discharge B Medical Category F
 Recommendation S.M.B. permitted Disability Rating 20% 3 mths
 Passed to Demobilization Officer with following documents:—

N.F. P36	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 for H. M. Smith O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Taylor R.

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 ABC brother

Date 10-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *100* to his home
 at *Burn* and Release Certificate No. *2544* 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* SUBJECT TO ADJUSTMENT OF PAY AND ALLOWANCES.

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	N.F. Med.	D.F. 1.
B 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		

2 Form B

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

Date *JUN 24 1919* *R.H. Sait Capt.*
 O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
 Date *June 19/19* *J.A. Snow Capt*
 for Records

Reg. No. *4107* Rank *Pte* Name *Taylor, W.*

Attested Address *Buren*

Allotment Allottee

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

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

5.6.19. Rec. Dis. from the Army.

9.6.19.
24.6.19.

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.