



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5291 Name George Stone Corps Inf

Questions to be put to the Recruit before Enlistment

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>George Stone</u> |
| 2. What is your full Address? | 2. <u>St. John's N.B.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>27</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Postman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, George Stone 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.

George Stone SIGNATURE OF RECRUIT.
22/5/18 John Signature of Witness.

QUESTIONS TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 22 day of May 1918
 Signature of Attesting Officer P. Dicks Lieut.

†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 compiled with. I accordingly approve, and appoint him to the
 If enlisted by special authority, such will be attached to the original attestation.
 Date May 22 1918
 Place St. John's } Approving Officer.
 The signature of the Approving Officer is to be affixed in the presence of the Recruit.
 † Here insert the "Corps" for which the Recruit has been enlisted.

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

C.R. 5291

Extract from Daily Orders Part II Unit The Royal Field, Regt.
St. John's, July 24th 1919.

5291 Pte. G. Thorne.

Reported at Headquarters 1-7-19 ex "Cassandra" which sailed
Glasgow 24th June, 1919.

C.R. 5291

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

The following men embarked for overseas on H.M.S.
"Columbella" July 22, 1918.

#5291 Pte. George Thorne.

C.R. 5291

Extract from Daily Orders part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 11th 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date
3-8-19.

5291, Pte. G. Thorne.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 23, 1918.

#5291 Pte. George Thorne.

Attested for Gener ^{al} Service with the Royal Nfld.
Regt. from 22.5.18

C.R. 5291

Extract from Daily Orders part II, Unit the Royal
Newfoundland Regiment dated July 21st. 1919.

The discharge of the undersigned on demobilisation has
been received by O. J. Bouchage Depot on 20-7-19.

#5291 Pte. G. Thorne,

Thorne, G.

5291

Ray sept

August 4th 1919.

#5291, Pte.G.Thorne,
Brownsdale.T?B.

Dear Sir:

Enclosed please find Discharge Certificate # 3477.

Yours truly,

Capt. W. Kaymaster.

RS/.

August 9th 1919.

Mr. G. Thorne,
Brownsdale, T.B.

Dear Sir:

In referring to your application, I enclose
cheque for seventy dollars (\$70.00) being amount
of first payment due you on account of War Ser-
vice Gratuity.

Yours truly,

Capt. & Kaym st.

RS/.

August 9th 1919.

Mr. G. Thorne,
Brownsdale, T.B.

Dear Sir:

In referring to your application, I enclose
cheque for seventy dollars (\$70.00) being amount
of first payment due you on account of War Ser-
vice Gratuity.

Yours truly,

Capt. & Kaym st.

RS/.

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..... *G. O.* 2. Surname..... *Hoare*
3. Rank..... *Pte* 4. Regtl. No..... *5291*
5. Address in full to which future payments of gratuity are to be forwarded..... *Brown's Dale, S.B.*
6. Date of enlistment in the Regiment..... *Nov. 20/18*
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..... *no*
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..... *Fourteen months*
- 1. $\frac{1}{2}$

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

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

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

.....
.....

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

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

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.

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

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

19. Are you now serving in the Regt.?⁷⁰⁰ If not give:- (a) date of discharge. *July 2/19* (b) Reason for discharge.

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.

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.

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant: *George Thorne*
 Place of Residence: *Brownsdale, S.B.*
 Declared before me at: *St John's*
 This *18th* day of *July* 19*19*....

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

POST BY-COMMISSION PAY.				Net amount
Date paid	Paid	Paid	Wage Service	due
	Soldier.	Dependent.	ability.	
.....
.....
.....
Certified correct.			Register	

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5291 Rank Pte Name Thorne G
 Intended place of residence Brownvale

2. Occupation Interman
 Classification of soldier E Medical Category A1

3. The above named man is discharged in consequence of

DEMOBILIZATION

Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 18 1919

W. H. News H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 18 1919

G. Thorne
 Signature of soldier

M. L. Tomlinson
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date 18-7-19

G. Thorne
 Signature of soldier

James O'Sullivan
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22-5-18 No. of days on Military
 Discharged from service 20-7-19 Plus 14 days Service 439

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 20 1919

N. R. Cooper Capt.
 Officer in Charge of Records
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

Date August 3/1919

M. Bowley Capt.
 Officer in Charge of Records
 The Royal Newfoundland Regiment

Card B 2079 / 2477

10
20
31
3
7

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

MEDICAL HISTORY

OF

Surname Thorne

Christian Name George

Table I.—GENERAL TABLE.

Birthplace:—Parish Brownsdale N.B. County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	27 day of May 1918	S. Johns		
Declared Age	21 years			
Trade or Occupation	Fisherman			
Height	5 feet 7 1/4 inches			
Weight	117 lbs.			
Chest Measurement	Girth when fully expanded	37 inches		
	Range of Expansion	4 inches		
Physical Development				
Vaccination Marks	Right	Left	Right	Left
		1050		
When Vaccinated	3700 40			
Vision	R. E.—V=	6/6	R. E.—V=	
	L. E.—V=	6/6	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>Y. J. [Signature]</u>			
(Rank)	Major			
		Medical Officer.		Medical Officer.
Enlisted	at S. Johns			
	on 27 day of May 1918			
	Corps.	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	Medical 5291			
	Nfld Regt			
Transferred to				
Became non-effective by				
(Signature)	on	day of 191	on	day of 191
(Rank)				



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Thorne, George*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5291*

Intended address *Brown's Dale Trinity Bay*

Height on discharge *5 feet 11-1/2*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks *Medium*

Figure on discharge *John*

Christian name of Father *Sarah Jane*

Christian name of Mother _____

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Brown's Dale 1-6-1896*

Nature and locality of civil employment required _____

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

(Soldier's signature in full) *George Thorne* *the* (Rank)

Station **ST. JOHN'S.** Date *17-7-19*

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

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

Date



NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvii) or xviii), 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* } Former Trade or Occupation } *Fisher*
2. Regt. No. *5291* 3. Rank. *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Thorn* } (Surname) } *George* } (Christian Names) } (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday. *22*
6. Posted for duty on at in category (or grade)
8. If the disability is an injury was it caused
- (a) in action (b) on field service
- (c) on duty (d) off duty? (b) Date of Discharge;
- (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
- (a) When (b) Where (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

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

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

See complaints of no disability

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.)

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

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

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

Repatriation

W.E. Proemier, Capt R.A.M.C.

Medical Officer in charge of case.

Station *Hazley Down*

Date *31.11.19*

* 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

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 18-7-19

Regimental No. 5291

Name Thorne George

Address Brownsdale P. B.

Present Medical Category A7

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

K.R. Cooper Capt
O. C. Discharge Depot.

Members of Board

H. Paterson
Senior Medical Officer

D.W. Gordon
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5291 Rank Plt Name Thorne G
 Date of Enlistment 22.5.18 Address Bourneville District St. John's
 Occupation Gubernment Classification for Discharge 6 Medical Category I
 Recommendation S.M.B. Disability Rating
 Passed to Demobilization Officer with following documents:—

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

Date July 1919O. C. Discharge Depot. St. John's

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

G Thorne

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) Clothing Supplied

Date 18-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 11245 31930 to his home at Brownsville and Release Certificate No. 3705 issued.

Date 18-7-19

[Signature]
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 3-7-19

Date 18-7-19

[Signature]
Depot Paymaster.

Discharge approved for 18-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36	B 268	B 121	N.F. Med	D.F. 1
F 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		

[Handwritten: 2 Form B]

Date 18-7-19

[Signature]
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 20.4.19

L. R. COOPER, 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.

George Sherne

Signature of Man.

Amel Conshin

Signature of the Vocational Officer or his Representative.

Reg. No. 3291

Place ST. JOHN'S.

Date 18-7-19

191

30 / 7

ST. JOHN'S, JUL 18 1919

Royal Newfoundland Regiment.

Billeting Account,

To W. G. Thorne

Billeting Soldiers as undermentioned

from July 3rd 19 to July 16th 19

5291. W. G. Thorne 14 40

ACCOUNT	
CH. D.	3197
ING. LEDGER	
PAY LEDGER	
GEN. LEDGER	40

Brm
Cw

Certified correct for \$

R. J. M. Brown
Billeting Officer.

W. G. Thorne

H. Thorne

C.R. 5291

1890

No. 18521/2047

*18521
72*

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn Royal Nfld. Regt.

Winchester.

16th November 1918

Subject: 5291, Pte. G. Thorne, B

With reference to the following telegram (9818) from the Hon. Minister of Militia, received

Pay to 5291 Thorne £3:2:0

Draft £ 3:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

R. Hens offic

Chief Paymaster & O. i/c Records.

November 20 1918

Receipt hereunder
Charn

LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n
Royal Newfoundland Regiment

Received the sum of Three

pounds 2/ on account of
cable remittance from Newfoundland.

G Thorne

No. 5291 Rank Pte

2930 P. Stein

No. 2547/346

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. 1/3

14th February 1919

5291. Pte Thorne. G.

With reference to the following telegram from the Minister of Militia / / (21.)

"Pay to- 5291. Thorne

£4.2.0.

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

A. D. Ginn
Chief Paymaster & O. i/c Records.

To: Officer Commanding.

2nd/Bn. Ryl Nfld Regt.

Winchester. 1/3

February 19th 1919

Receipt hereunder.

Receipt LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of *Four pounds two Shillings* in respect of telegraphic remittance from the Minister of Militia.

G. Thorne
No. *5291* Rank *Private*

Witness *A. G. G. G.*

LONDON N.F.P./79.
21 FEB 1919
RECORD OFFICE

P.D. 0674 2
15/2/19 9.13

No. 5843/853

N.F.F./79.

From: NEWFOUNDLAND



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. Regt.

Winchester

14th April 1919

April 24th

1919

5291 Pte G. Thorne

With reference to the follow-
ing telegram from the Minister of
Militia / / (132)

Receipt hereunder.

J. Seymour

LIEUT. COLONEL,

COMMANDING 2ND BATT. ROYAL NEWFOUNDLAND REGT.

"Pay 5291 Thorne G.

£4. 2. 0.

Cheque £ 4. 2. 0 is enclosed.
for payment to this Soldier.

Kindly obtain his receipt
hereon.

Received the sum of *Four pounds*

two Shillings in respect of

telegraphic remittance from the
Minister of Militia.

& Thorne

Chief Paymaster & O. i/c Records.

No. *5291* Rank *Private*

Witness *J. Shore*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Marines

Number of Sheet

210

Signature of O. C. Company

C. B. Dick

Regimental Number and Name	
No.	<i>5291 Thorne Geo</i>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment	
Age on	<i>21</i> years <i>11</i> months
Place and Date of Enlistment	<i>St. John 22. 11. 18</i>
Period of	with Colours <i>14</i> years.
	with Reserve <i>365</i> years.

Trade	<i>Fisherman</i>
Religion	<i>Method</i>
Place of Birth	<i>St. Monnsdale 103</i>

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Class of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St John's</i>	<i>3 1/2</i>			

To be carried over.

Reg. No. 5291 Rank Y6 Name Thorne Geo
Attested Address Brownsdale
Allotment Allottee
Date of Allotment Returned from Overseas
Returned on S.S. Cassandra Cause Discharge JUL 1 1919

18-7-19
20-7-19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILIZATION

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5291 Rank Plt Name Thorne G
 Date of Enlistment 22.5.18 Address Brownvale District St. John's
 Occupation Postman Classification for Discharge 6 Medical Category AI
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date July 27/19 O. C. Discharge Depot Miss H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

G Thorne

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable £6.50
- (b) Clothing Supplied _____

Date 18-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *11245 3730* to his home at *Bromfield* and Release Certificate No. *3705* issued.

Date *18-7-1919* *Ambleton*
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 *3*.....

Date *18-7-19* *Ambleton*
Depot Paymaster.

Discharge approved for *18-7-19*.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
E 178	W	B 122	Board 1st	" 2
B 178a	D 400A	B 1215	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 *18-7-19* *Ambleton*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUL 20 1919* *L. H. Cooper, Capt.*
O. C. Discharge Depot.

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

Date *Aug 11/19* *Ambleton*

C.R.

5291

Army Form B. 179a

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..... *Rajah's Regiment*
- 2. Regtl. No. *5291* 3. Rank..... *Pvt.*
- 4. Name *Home*..... *Geo*
(Surname) (Christian Names)
- 5. Age last birthday *27*.....
- 6. Posted for duty on..... at.....
in category (or grade).....
- 7. Former Trade or Occupation } *Infantryman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
(b) Date of Discharge;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)
- 8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty?
- 9. If a Court of Inquiry was held on an injury state:—
(a) When
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 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."

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

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

No Complaints of No Disability

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

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

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

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

Repatriation

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

W.E. Procmier. Capt. R.A.M.C.

Station *Roxley Down*

Date *3/11/19*

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