



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4815 Name Thomas Lumbert ~~Comp~~ with

Questions to be put to the Recruit before Enlistment

- 1. What is your name? 1. Thomas Lumbert
- 2. What is your full Address? 2. Barby's Cove
Bonaville
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 Years 4 Months
- 5. What is your Trade or Calling? 5. Fisher man
- 6. Are you Married? 6. No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Thomas Lumbert 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.

Thomas Lumbert SIGNATURE OF RECRUIT.
W. Churchill Signature of Witness.

M
1-5-18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas Lumbert 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 1st day of May 1918.

Signature of Attesting Officer Wm. Churchill

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.

Date May 1st 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)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Thomas Lremblat
 Apparent age 18 years 4 months. Height 54 feet 5 inches
 Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Tom Lremblat
100th Bronnista | Relationship Mother

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 L'epot	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>3-18</u>									
Joined at <u>St. John's</u> on <u>May 1-1918</u>									
<u>Discharged July 3/19</u>									
<u>Embarked St. John's train to Halifax N.S. 11-6-1918.</u>									
<u>Wissen Bayker Service 26-10-18</u>									
<u>Admitted 8 Pen Hosp Royal Victoria 12-3-1919</u>									
<u>Rep'd Hosp 3-4-1919</u>									
<u>Transferred from Hosp 22-4-1919</u>									
<u>Arrived Winchester 23-4-1919</u>									
<u>Transferred to Newfoundland for demobilization 22-5-1919</u>									
<u>Arrived Newfoundland 1-6-1919</u>									
<u>Demobilization St. John's 3-7-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 3-7-1919 (date of discharge) 1 years 64 days
 " " Pensions " " " " " " " " " " " "

No. 4818 Name *Samuel T. J. Sqn., Batty., D* Corps ROYAL NEWFOUNDLAND REG. Date of enlistment *1/19/19* G.C. Badges *2* Service or Proficiency Pay *2501/11*

Date of last entry in Company Conduct Sheet *1/19/19* No. and date of last drunk *1/19/19* Period not reckoning towards freedom from extra fine *1/19/19* Sheet No. *One* Signature O.C. Company, etc. *W. M. Russell* Character *Left*

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
<i>Seeds</i>	<i>16/1/19</i>	<i>Pat</i>	<i>-</i>	<i>Self Guard Post 15/1/19</i>	<i>C. M. S. etc.</i>		<i>16/1/19</i>	<i>Major Bennett</i>	<i>Pay for same</i>
<i>In the hall</i>	<i>6-2-19</i>	<i>Pte</i>	<i>-</i>	<i>Duty rule on Guard</i>	<i>C. S. M. Andy</i>	<i>2 days CP</i>		<i>Capt Williamson</i>	<i>16/1</i>
<i>"</i>	<i>8/4/19</i>	<i>"</i>	<i>-</i>	<i>Def. of left window dish damaged Carpet near the cover 2/10</i>	<i>Edwards</i>	<i>Pay for same</i>	<i>8/4/19</i>	<i>Major Bennett</i>	

ARMY FORM B. 122

Bonavista Nov 19

C.R. 4815

C. B. Brown 3

Dear Sir

will you please
send me the
British service
ribbons

and oblige

Er No 4815

Pte T Tremblat

Sent

C.R. 4815

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

The discharge of the undersigned on demobilization has been
CONFIRMED BY OFFICER i/c Records with effect from 3-7-19.

4815 Pte. Thos. Tremblett.

C.R. 4815

Extract from Daily Orders Part 11 Unit The Royal WFLA.
Regt. Depot St. John's, June 9th, 1919.

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

4815 Pte. Thos. Tremblett.

C.R. 4815

Extract from Daily Orders Part 11 Depot. St. John's,
Date June 7th, 1919

4815 Pte. Thos. Tremblett

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

C.R. 4815

Extract from Daily Orders Part II Unit the Royal Rifles. Regt
Issued By Lt. Col. T.G. Mathias, D.S.O. Commanding 1st Bn. 3-11-18.

The following joined the Bn. 3-11-18.

4815 Pte. T. Tremblatt.

D Coy.

C.R. 4815

Extract from Nominal Roll 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion
left Rouen Camps 22/4/19, embarked at
Havre 22/4/19; disembarked at Southampton
23/4/19 and reached Hazeley Down Camp
23/4/19.

#4815 Pte. T. Tremblett.

C.R. 4815

Extract from Nominal Roll Re-inforcement Staff No. 55 embarked Folkestone,
26/10/18, from 2nd Batta, Royal Newfoundland Regiment, Hasleby Down Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment, B.E.F.

4815 Pte. Tremblat, T.

M.P.

C.R. 4815

Extract from Daily Orders part 11, from Unit The Royal Bfld.
Regt. St. John's, dated May 2nd, 1918.

#4815 Pte. Thomas Fremlett.

Attested for Gener Service with the Royal Bfld. Regt. from
1/5/18.

C.R. 4815

Extract from War Office List No. H.A. 35783.

DIS. TO REINF EX 8 GEN. HOSP. ROUEN 3rd. APRIL 1919.

#4815 Pte. T. Tremblett.

SCABIES MILD.

C.R. 4815

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

NEW FOUNDLAND RECORD OFFICE

No. H. A. 35454

ADM 8 GEN H ROUEN 12 MARCH 1919

4815 Pte Tremblett T..... 1. N 'land R att 2 Exp... Scabies Mild.
Base Depot.

X

INFANTRY RECORD OFFICE - HAMILTON

No. H. A. 35454

ADM 4 GEN H DANNES CAMIERS 12 MARCH 1919

476581 Pte Bavis F..... 15 Sc. Rifs att Deformity Leg rt Mild.
174 POW Co.

ADM 8 GEN H ROUEN 10 MARCH 1919

7559 QMS Kirkpatrick A ... 2 Scots Rifs Gastritis Mild.



324

J. Tremblett.

C.R. 4813

P. & P. 10.

No. 7385/349

N.F.P. 176-

099513

From: NEWFOUNDLAND CONTINGENT

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

To; Officer Commanding, Depot
1st Bn. Ryl. Regt. Regiment
Winchester.

13th May 1919

May 18th 1919.

4815 Pte. T. Tremblett

Receipt hereunder.

With reference to the following
telegram from the Minister of
Militia / / 19 ()::

Officer Commdg. 1st Batt'n.

"Pay to- 4815 Tremblett T.
£6-0-0

Received the sum of £6

Cheque £ 6-0-0 is enclosed
for payment to this Soldier.
Kindly obtain his receipt
hereon.

pounds (£6-0-0) in respect of
telegraphic remittance from the
Minister of Militia.

A. G. Mansell Maj.

J. Tremblett Pte

Chief Paymaster & O. i/c Records.

No. 4815 Rank Pte.

Witness: *J. H. Aches Sgt*

c
No. 15550/1619.

N.F.P./79.

149750
JFB
NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn. Royal Nfld. Regt.,
Winchester.

September 26th, 1918

30 SEP 1918 191

Subject: 4815, Pte. T. Tremblett.

With reference to the following telegram (8358) from the Hon. Minister of Militia, received

"pay to 4815, Pte. T. Tremblett, £3.0.0.

Draft £3.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

F. W. Marshall
Chief Paymaster & O. 1/c Records.

Witness

Receipt hereunder.

Chas. J. **LIEUT. COLONEL.**
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Comdng. Batt'n
Royal Newfoundland Regiment

Received the sum of £3.0.0

three pounds on account of cable remittance from Newfoundland.

T. Tremblett
T. Tremblett
No. 4815 Rank Pls

C. Manning

To: The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-
Please charge the amount set opposite my name to my account and
pay it to the N.W.S.A. "Prisoners of War Fund" in quarterly instalments
for the period of the year,
Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
4815	Pte	Tremblett	£5.50	X Tremblett

I have the honour to be, Sir,
Your obedient servant.

X Tremblett X

Date July 1/18

Medical Report on an Invalid.

Station Hazley BoconDate 1/3/19

1. Unit Royal Newfoundland
2. Regimental No. 4815
3. Rank plc
4. Name Trumblett Thomas
5. Age last birthday 19
6. Enlisted { on May 11/15
at St John
7. Former Trade or Occupation } Diakona
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

nil
nil
nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

nil.

13. What is his present condition?

He complains of no disability.

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

If so—(a) When?

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what?

17. If not, was an operation advised and declined?

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

Repatriation

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

A. Procunier

Capt Ramel

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Wyeley Down*

Officer in charge of Hospital.

Date *1/5/19*

*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.

† Delete this word if no exceptions are to be made.

Tremblett, T.

4815

Pay sept.

July 3, 1919

#4815 Pte. Thomas Eremblett,

Bonavista, B.B

Dear Sir:-

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

Yours truly

Captain,
Paymaster & O.i/c Records.

592

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.

1. Christian name Thomas 2. Surname Jewett
3. Rank Pvt 4. Regt. No. 4815
5. Address in full to which future payments of gratuity are to be forwarded Bonanza
6. Date of enlistment in the Regiment April 20, 1918
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge not applicable
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 fourteen months
- 13

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

..... *not applicable.*

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.....

..... *\$70.69 Clothing & Ration money*

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

16. Have you, during the present war, served in the Imperial Forces?..... *no*

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

18. Did you revert (versene) to a rank lower than the substantive rank held by you on your arrival in England?..... *no*

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

19. Are you now serving in the Ropt.?..... *no* If not give:- (a) Date of discharge..... *June 19/19*..... (b) Reason for discharge.....

..... *Demobilization*

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

..... *France 1918 and Germany*

21. (a) Are you receiving treatment from the Waril 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: *Thomas + Jewett* ^{(Witness) Thompson}

Place of Residence: *Bonanza,*

Declared before me at: *St Johns rged*

This *5th* day of *June* 191*5*...
John H. C. [Signature]

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

POST DISCHARGE PAY.				
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Not amount due
.....
.....
.....
Certified correct.				Paymaster

July 3, 1919

#4815 Pte. Thomas Tremblett,

Bonaville, B.B.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2281.

Yours truly

Captain
Paymaster & Officer i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 44815 Rank Pte Name Dumblott
 Intended place of residence Bonaville
2. Occupation Drummer
 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 JUN 5 1919
 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 and date ST. JOHN'S
JUN 5 1919
 Signature of soldier
 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
5-6-19
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 1-5-18 No of days on Military
 Discharged from service 19-6-19 Plus 14 days Service 429

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place ST. JOHN'S
 Date JUN 19 1919
 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 3/1919
 Officer in Charge
 The Royal Newfoundland Regiment

A 9 B 2029/2281

Civil Re-establishment Committee

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

To resume former occupation

Signature of Man.

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

5-6-

191 1919

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4815 Rank Pte Name Humblett Has
 Date of Enlistment: 1-5-18 Address Bonavista District Bonavista
 Occupation Fisherman Classification for Discharge E Medical Category A.F.
 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 4-6-19

O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

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

(b) ~~Clothing Supplied~~

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R. 1476 to his home
 at Bonnamite and Release Certificate No. 2336 issued.

Date 5-6-19

J. H. Stout
 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 5-1-19

Date 5-6-19

J. H. Stout
 Depot Paymaster.

Discharge approved for 14-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	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		

Date 5-6-19

J. A. Shaw Capt.
 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 JUN 19 1919

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

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

Date

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

MEDICAL HISTORY

OF

Surname HemblettChristian Name Thomas

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John'sCounty Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	1	May		191
	at	St. John's	at	
Declared Age	18	years		days
Trade or Occupation	Fisherman			
Height	5	feet		inches
Weight	120	lbs.		lbs.
Chest Measure- ment	Girth when fully expanded	34		inches
	Range of Expansion	4		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Number			
When Vaccinated				
Vision		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>Lammie Peterson</u>			
(Rank)				
		Medical Officer.		Medical Officer.
Enlisted	at	St. John's	at	
	on	day of May	on	day of
		1918		191
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<u>The Royal</u>	<u>4818</u>		
	<u>Nfld Regt</u>			
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)		191		191
(Rank)				

Medical Report on an Invalid.

Station Hazelby Down CampDate 1-5-19

1. Unit Royal Newfoundland
2. Regimental No. 4815
3. Rank Pte
4. Name Trinnett Thomas
5. Age last birthday 18
6. Enlisted $\left\{ \begin{array}{l} \text{on } \underline{\text{May } 1/18} \\ \text{at } \underline{\text{St John's}} \end{array} \right.$
7. Former Trade } Jackman
or Occupation }
- 7a. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

na

13. What is his present condition?

He complains of no disability

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what?

na

17. If not, was an operation advised and declined?

na

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na

Re-patients

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

W. C. [Signature]
Sgt. M. M. [Signature] Cap R.A.M.C.
 Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Haydon Station*

Officer in charge of Hospital.

Date *1-5-19*

*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.

† Delete this word if no exceptions are to be made.

Mr. Preamble
Casualty Form—Active Service.

Regiment or Corps... ROYAL NEWFOUNDLAND REG.Rank Pte Surname Preamble Christian Name ThomasReligion Methodist Age on Enlistment 6 years 4 monthsEnlisted (a) 1875 Terms of Service (a) DURATION Service reckons from (a) 1875

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

Extended () Re-engaged () Qualification (b).....
or Corps Trade and Rate.....Occupation Likewise Signature of Officer. *J. H. Curran*

Report		Record of promotions, relocations, 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.16, or other official documents
Date	From whom received				
		Embarked ...	} 26 OCT 1918	1918	
		Disembarked...			
		Joined Battalion	3 NOV 1918		
		<u>8. Gen. Insp. Adv. Lieut. Leabie</u>		<u>12.3.19</u>	<u>B213 7635454</u>
		<u>Discharged top.</u>		<u>4.4.19</u>	<u>B213.</u>
		<u>Arrived in UK</u>		<u>23/4/19</u>	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c.

(1921) WL 17187—P 1234, 1,000,000, 6/18, D & S. Form B.103. (M. 1956.)

I.P.V.O.

Next of Kin Mother, Mrs Wm Preamble, Bonaville St, Fed.

C.R. 4815

RECEIPT.

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.

DATE..

Jan 20th 1920

PLACE...

Bonaville

NO. 4815

NAME

Exp. Pte. J. Drenth

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

SEP 20 1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Thomas Tremlett

in respect of his service as No. 4815 Rank Pte.

Name T. Tremlett

Royal Nfld. Regt.
Nfld. Pioneer Corps.

Receipt of the same should be acknowledged hereon.

Received the medal upright

Signature _____

Date _____

Address Thomas Tremlett
Bonavista [P.T.O.]

Receipt for Army Book 64

No. 4815 Name T. Fremblett

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

Name Thomas Fremblett

Date

Place

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



Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet One

Regiment of Royal Newfoundland

Signature of O. C. Company Wm. Churchill Smith

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	18 years / months	Fisherman	
Joined _____ Date _____		Place and Date of Enlistment <u>St John's</u>		Religion	
Joined _____ Date _____		Period of } with Colours / 64 years.		Meth.	
Joined _____ Date _____		} with Reserve / 36 years.		Bonavista	

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
				<i>Demobilized St John's</i>					<i>3 1/19</i>

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4815 Rank Pte Name Humblett Hos
 Date of Enlistment 1-5-18 Address Bonavista District Bonavista
 Occupation Instrument Classification for Discharge E Medical Category A 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.	1
B 178	W 3494	B 122	Board 1st	" 2.	3
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 4-6-19 for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

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 _____

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1476 to his home at B. Narasimha and Release Certificate No. 2336 issued.

Date 5-6-19

[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 3-1-19

Date 5-6-19

[Signature]
Depot Paymaster.

Discharge approved for 14-6-19

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
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 5-6-19

[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 10.11.1919

[Signature]
O. C. Discharge Depot.

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

Date June 10/19

[Signature]
[Signature]

Reg. No. 4815 Rank 1st Name Tremblett, J.

Attested Address Ponerville

Allotment Allottee

Date of Allotment Returned from Overseas 29-5-19

Returned on S.S. Corsican Cause Discharge

4-6-19
19-6-19

~~PASSED TO DEMOBILISATION OFFICER~~

DISCHARGE APPROVED ON DEMOBILISATION.

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. *4816*.....

Name *J. Campbell* *Stroma*.....

Address

Present Medical Category *A-1*.....

Recommended for:— { (a) Immediate discharge

{ (b) ~~Standing Medical Board~~.....

Members of Board {

R.H. Last Capt

O.C. Discharge Depot.

W. Paterson

Senior Medical Officer

Geo. Birdeu

M. O. Depot



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 *Thomas Tremblett*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4815*

Intended address *Bonavista*

Height on discharge *5* Feet *5*

Color of hair on discharge *Dark*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks —

Figure on discharge *Normal*

Christian name of Father *William*

Christian name of Mother *Mary*

Wife's maiden name in full —

Date and place of marriage —

Christian names of children —

Place and date of soldier's birth *Bonavista, January 11, 1901*

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) *Thomas Tremblett*
with J. J. W. as R/C

(Rank) *Pte*

Station *St John's* Date *4-6-19*

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

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