



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2848 Name Ronald Turner Corps

### Questions to be put to the Recruit before Enlistment.

1. What is your name? ..... 1. Ronald Marsden Turner
2. What is your full Address? ..... 2. 721. Seaside
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years 7 Months
5. What is your Trade or Calling? ..... 5. Analyst
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 ..... } II. Yes
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... } II. Yes

I, Ronald Turner 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.

June 5<sup>th</sup> 16 ..... SIGNATURE OF RECRUIT.  
[Signature] ..... Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Ronald Turner 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 Seaside on this 5<sup>th</sup> day of June 1916

Signature of Attesting Officer Charles Ayre Capt

### †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 2nd Bn

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

Date ..... 191 .....  
Place ..... } 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) .....





This Form is to be used in connection with Pamph. M. E. (1)  
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Ronald Turner  
aged 18 conducted at C. H. B

Date: May 10/16 Recruiting Officer:

NO OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 yes
- 7 yes
- 8 yes
- 9 no
- 10 n
- 11 2
- 12 2
- 13 2
- 14 2
- 15 n
- 16 n
- 17 n
- 18 6/12 bath
- 19 n
- 20 n
- 21 n
- 22 n
- 23 2
- 24 n
- 25 n
- 26 n
- 27 n
- 28 n
- 29 n
- 30 n
- 31 n
- 32 n

2848

~~50~~

poor physique

Yes, scars left arm 8 years ago

5-6

107 lbs 111

30-34 in 30-34 in  
Left 20 Per month

Parents Mr George Turner 331 Southside

None

Signature of Medical Examiner: W. Borden Lewis

To be used for recruits enlisting direct into the Regular Army only.  
 Army Form B. 178 to be used for Special Reserve recruits  
 and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname Turner Christian Name Donald

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County May

Examined ... { on 10 day of May 1916  
 at St John's Hospital

Declared Age ... 18 years 7 months

Trade or Occupation ... Analyst

Height ... 5 feet, 6 inches.

Weight ... 111 lbs.

Chest Measurement { Girth when fully Expanded. 34 inches.  
 Range of Expansion 4 inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left 1  
 Number \_\_\_\_\_

When Vaccinated ... 8 years ago

Vision ... { R.E.—V= 6/2  
 L.E.—V= 6/2

(a) Marks indicating congenital peculiarities or previous disease ... \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... \_\_\_\_\_

Approved by (Signature) L. Lamont Peterson  
 (Rank) Major



Medical Officer.

Enlisted ... { at St John's  
 on 18 day of May 1916.

Joined on Enlistment ...	<u>1</u> <u>April</u> <u>Regt</u>	Regtl. No. <u>2848</u>
Transferred to ...		

Became non-effective by \_\_\_\_\_  
 on \_\_\_\_\_ day of \_\_\_\_\_ 1916

(Signature) \_\_\_\_\_  
 (Rank) \_\_\_\_\_

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
4 <sup>th</sup> London Regt Hosp	24	9	17	29	12	17	S.A. N. Darrabeck & nervous exhaustion N.D.F.	96.	History of Rheumatism 4 years ago. Now has effects of endocarditis. S. D. was 1/2 in inside nipple line, not much enlargement of heart. Sounds not clear. No marked murmur. Spl. Treatment Much improved. Medical Board	<p>Warrant Officer  <i>[Signature]</i>                      4<sup>th</sup> London Regt Hospital</p>

**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature
24.7.16	1 <sup>st</sup> inoculation <i>[Signature]</i>
31.7.16	2 <sup>nd</sup> <i>[Signature]</i>
7.8.16	3 <sup>rd</sup> <i>[Signature]</i>
20.8.16	None <i>[Signature]</i>
31.12.17.	<p>Medical Board Approved                      Permanently Unfit  <i>[Signature]</i>                      Major A. P. [Signature]                      Major R. [Signature]                      4<sup>th</sup> London General Hospital</p>

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Medical Report on an Invalid

Station 4<sup>th</sup> London General Hospital, Denmark Hill, S.E.1.

Date 29 Dec 1917

CERTIFIED TRUE COPY

1. Unit 1<sup>st</sup> Afld  
 2. Regimental No. 2848  
 3. Rank Plt  
 4. Name JAMES DONALD

5. Age last birthday 19  
 6. Enlisted { on 15<sup>th</sup> April 1916  
 at St John's  
 7. Former Trade { Analyst  
 or Occupation {



8. Disability.

D.A.H. Diarrhoea & Nerve Exhaustion  
U.S.H. (Dec 31/17)

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. Indefinite  
 10. Place of origin of disability. Not known

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

24.9.17. Was admitted to 4<sup>th</sup> L.G.H.  
D.A.H. & Diarrhoea history. Complained of Rheumatism  
4 years ago, 3 weeks in bed & medical attendance.  
Apx heart 1/4" outside nipple line. Sounds not clear.  
No murmurs. Had continued rest with  
much improvement.  
Aux Hosp. 1.X.17 - 29.11.17.

12. (a) Give your opinion as to the causation of the disability.  
 (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Exigencies of Military Service  
active or pre-existing, neuropathic  
condition

13. What is his present condition?

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

Capt. Trenchard reports.  
No physical signs except those of nervous exhaustion.  
Aged 19. Joined service at 17 yrs.  
Rec'd for Board & classification.  
Upon re-examination, Capt. Shore, Capt. Davis, & myself heard a  
BII or III slight psychical murmur Dec 31<sup>st</sup>.

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?

19. Do you recommend

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

Not applicable

Classification Board

Sgt. C. S. Lundy

Officer in medical charge of case.

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

accept London General Hospital

Station Denmark Hill S.E.

Date 3<sup>rd</sup> Dec 17

Sgt. A. M. Gage

Officer in charge of Hospital

Sgt. H. G. Lane General Hospital

\* 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.



Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1163, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service.

*due to (i)  
stress of service*

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance? *No*

(b) Misconduct? *No*

22. Is the disability permanent?

*no*

23. If not permanent, what is its probable minimum duration?

To be stated in months.

*Six Months*

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.

*Three Quarters at present*

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

*✓*

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

*(a) Yes*

Signatures:—

*# 4th London General Hospital*

Station *Seamers' Hall, S.E.*

Date *31 Dec. 1917.*

Approved

Station *Bo*

Date

*J. W. Dunnington* *Appt. M. O.*  
President.

*J. D. Davis* *Appt. M. O.*  
Members.

*J. W. Shore* *"*

*J. W. Dunnington* *Appt. M. O.*  
Administrative Medical Officer.

Administrative Medical Officer.



ROYAL NEWFOUNDLAND REGIMENT  
HEADQUARTERS

ST. JOHN'S. NEWFOUNDLAND.

February 22nd. 191

From Officer Commanding,  
Depot.

To Paymaster and Officer in Charge Records,  
Dept. of Militia.

2848 Private D.M. Turner.

Above mentioned man was recommended for discharge  
as permanently unfit by Medical Board held on February  
19th. 1918.

I am sending him herewith for your attention and  
necessary action, please.

  
Adjutant  
Depot, First Newfoundland Regiment,  
St. John's, Nfld.



X  
REPORT OF THE MEDICAL BOARD

STATION St. John's, Nfld. DATE February 19th., 1918  
NO. 2848 AGE 19 HEIGHT 5'6"  
RANK Private COMPLEXION Red  
NAME Turner, Donald EYES Blue HAIR Dark  
UNIT 1st. Nfld.  
ADDRESS 321 Southside

ENLISTED AT St. John's, Nfld. ON April 15th., 1916

DISEASE OR DISABILITY D.A.H., DIARRHOEA V.D.H. (Dec. 31/17) AND NERVOUS EXHAUSTION

PRESENT CONDITION *Weight 136 lbs pulse 120 with exertion. 88 resting. Acystotic murmur faint, good color. No diarrhoea now*

HAS HE BEEN EMPLOYED AND BY WHOM?

AVERAGE WEEKLY EARNINGS

ESTIMATED DISABILITY *Total for 3 months*

RECOMMENDATION OF MEDICAL BOARD

*Discharge permanently unfit*

MEMBERS OF BOARD

*W. J. [unclear]  
Pindar East  
Watson [unclear]*

APPROVING MEDICAL OFFICER

*Cluny Macpherson,*  
D. M. S. NEWFOUNDLAND, *Major.*



CR. 2848

Extract of Daily Orders part 11, from Unit Royal Nfld.  
Regiment, St. John's, dated March 7th, 1918.

#2848 Pte. D. Turner.

Having been found Medically Unfit is struck off the  
strength with effect from 5/3/18.

C.R.

~~2484~~  
2848

Extract from list of men of the Royal Newfoundland Regiment  
discharged on various dates.

2484 Pte. D. Turner,

Discharged 5 - 3 - 18<sup>3</sup>/<sub>4</sub> Medical ly unfit

C.R. 2848

Extract of Daily Orders part 11, from Unit The Royal  
Newfoundland Regiment, Headquarters, dated February  
13, 1918.

The following man returned from Overseas and is  
attached to Headquarters, with effect from February  
13, 1918.

No. 2848, D. Furner

C.R. 2848

Extract from Casualties received from P. & R. O. London  
dated 8th., January, 1918.

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#3848 pte. D. Turner.

ex 4th., General Hospital, Denmark Hill, S.E., classified  
unfit for further service, was granted furlough to 29/12/17  
to 9/1/18 pending arrangements for repatriation.

BC.



C.R. 2848

Extract of casualties received from Pay & Record Office,  
London, dated January 8, 1918.

2848 Pte. D. Turner, ex 4th London General Hospital,  
Denmark Hill, S.E., classified unfit for further  
service, was granted furlough from 29/12/17 to  
9/1/18 pending arrangements for repatriation. ✓

2848 Pte.D.Turner.

C.R. 4448

Ext.of Daily Orders part 2 from G.H.Q.

3rd.Echelon,6/10/17.

Invalided to England 23/9/17. Sick.

For information see file Daily Orders,Nfld.Regt.

letter No.4357.

September 28, 1917.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 2848, Private Donald Turner, is at Fourth London General Hospital, suffering from disordered action of and enlarged heart.


I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Colonial Secretary.

Mr. George E. Turner,  
321 South Side.

2848 Pte Donald Turner. 

C.R. 3705

Ext. of Casualty list received Sept 28, 1917.

At 4th London General Hospital. Disordered

Action of, and Enlarged Heart.

C.R. 2848

Extract from Nominal Roll of Draft No. 24 from 2/1st Newfoundland Regiment  
Newton on Ayr, to 1/1st Newfoundland Regiment B.E.F. 1/6/17

2848 Pte. D.M. Turner

MP

C.R. 2848

Extract from Nominal Roll Embarked St. John's for Overseas,  
10/0/16.

2848 Pte. D.M. Turner.

C. 2848

D. Turner was attested for General service  
with the NEWFOUNDLAND REGIMENT on ... June 5th 1916.  
Regimental No 2848 was allotted to Pte. Donald Turner

AUTHORITY:

Record Ledger,  
Dept. of Militia,  
March 25th, 1919.

L. C. TURNER

C.R. 2848

~~SPRO~~

5



This space to be left blank for the Chelsea Number.

Army Form B. 268.

*Originals*

### Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>2848</u>	Army Rank <u>St</u>
Name <u>Turner Donald M.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>1 Newfoundland Regt</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge _____	
Place of discharge _____	
1. <i>Description at the time of discharge.</i>	
Age <u>19</u> years _____ months Height <u>5</u> feet <u>6</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>Light</u> Eyes <u>Blue</u> Hair <u>Dark</u> Trade <u>Analyst</u> Intended place of residence { <u>1321 Southside</u> <u>St John's</u> <u>Nfld</u> (To be given as fully as practicable)	Descriptive marks. <u>Scar L. Thumb</u> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">           COPY SENT TO            O.C. H.Q.            ST. JOHNS. N.F.L.D.            N.F.F.33. No. <u>22</u>            DATED <u>18 JAN 1918</u> </div>
<p><small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small></p>	
2. The above-named man is discharged in consequence of <u>Sickness</u>	
<p><small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small></p>	
3. Military character :—	
4. Character awarded in accordance with King's Regulations :—	
<div style="display: flex;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small; margin-right: 5px;">To be filled in on the soldier quitting the Colours.</div> <div style="border-bottom: 1px solid black; width: 100%;"></div> </div>	
<p><small>Certified that the above is an accurate copy of the character given by me on Army Form B. 2087* and that Army Form D. 489 was awarded in this case.</small></p>	
<p>Initials of Commanding Officer. _____</p>	
<p>Army Form B. 2088 has been issued to* _____</p>	

Medical Report on an Invalid.

GENERAL HOSPITAL, R.A.M.C.

Station DENMARK HILL, S.E. 5.

Date 29 Dec 1917

1. Unit 1 NF

2. Regimental No. 2848

3. Rank Plt

4. Name Turner, Donald

5. Age last birthday 19

6. Enlisted { on 15 Oct 1916  
at 50 John St.

7. Former Trade or Occupation Analyst



8. Disability.

*F.W.T.* DAH. Diarrhea & Nervous exhaustion  
VDH. (Dec 31 1917)

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. indefinite
10. Place of origin of disability. Not known
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.38. No. 9587  
DATED 18 JAN 1918

24. 9. 17.  
was admitted to 40th  
DAH and diarrhea history. Complained  
of Rheumatism legs etc. Jerken bed. &  
Medical attendance  
Apex Best 1/4 " outside nipple  
line. Sound not clear. No murmurs  
Had continued rest with much improvement  
Ans. Hosp 1 x. 17 - 29. 11. 17.

12. (a) Give your opinion as to the causation of the disability. Exigencies of Military Service
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). adus. On. preexisting neuropathic condition

13. What is his present condition?

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

*Cap. Dinncliffe reports.*

*No physical signs except those of nervous exhaustion.  
Age 19. joined service at 17 yrs.*

*Rec<sup>d</sup> for Board + Classification*

*Upon examination Capt. Shore, Capt. Davis, and myself  
B.H. in it. ... near a show  
... had symptoms*

*Dec 31<sup>st</sup>*

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?

*No Applicable*

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?

19. Do you recommend

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

*Classification Board*

*W. Handley*

Officer in medical charge of case.

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

except

*4th LONDON GENERAL HOSPITAL, R.A.M.C.*

Station *DENMARK HILL, S. 50.*

Date *31 DEC 1917*

*an. j. s. s. e.*

Major R.A.M.C., T.,  
for Officer Commanding  
4th London General Hospital, R.A.M.C.V.

Officer in charge of Hospital.

\* 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.

## Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918.)
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.
20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.
- (b) If due to one of these causes, to what specific conditions do the Board attribute it?

*due to (i)*

*Muti service*

21. Has the disability been aggravated by

- (a) Intemperance?  
 (b) Misconduct?  
 (c) Any of the conditions mentioned in question 20, and if so, which?

*no*  
*no*  
*✓*  
*no*

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

*6 months*

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*three quarters at present*

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

*no*

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

*✓*

26. Do the Board recommend

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

*fw. yes*

Signatures:—

4th LONDON GENERAL HOSPITAL, R.A.M.C.  
 Station DENMARK HILL, S.E. 8.  
 Date 31 DEC 1917

*J. J. Tunncliffe*  
*LTD Davis*

President.  
 Captain, R.A.M.C.  
 Captain, R.A.M.C.

Approved: [Stamp]  
 Station DENMARK HILL, S.E. 8.  
 Date 31 DEC 1917

*J. W. Shors* *Captain*

Members.  
 Captain, R.A.M.C.

*J. J. Tunncliffe*  
 Administrative Medical Officer.

Captain, R.A.M.C.

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

# MEDICAL HISTORY

OF

Surname Turner

Christian Name James



Table I.—GENERAL TABLE.

Birthplace:—Parish

County

**SPECIAL RESERVE.**

**REGULAR ARMY**

Examined	on 10 day of May 1916	at St John of N4	on	day of	191	at			
Declared Age	18 years	7 200 days	years		days				
Trade or Occupation	Analyst								
Height	5 feet	6 inches	feet		inches				
Weight	111	lbs.			lbs.				
Chest Measurement	Girth when fully expanded	34 1/2 inches			inches				
	Range of expansion	4 inches			inches				
Physical Development									
Vaccination Marks	Right		Left	1		Right			
	Number								
When Vaccinated	8 years ago								
Vision	R.E.—V=	4/2	R.E.						
	L.E.—V=	6/2	L.E.						
(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>James Peterson</u>								
(Rank)	Major								
Enlisted	at	St John	on	17 day of	May	1916	on	day of	191
Joined on Enlistment	Corps.		Regtl. No.	2848			Corps.		Regtl. No.
	<u>1st Bn</u>		<u>Regiment</u>						
Transferred to									
Became non-effective by	on	day of	191	on	day of	191			
(Signature)									
(Rank)									



COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 N.F.P.39 No. 2587  
 DATED 18 JAN 1918  
 Medical Officer.

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

03501  
11-10-17

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 further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
H. L. S. Hpl	24	9	17	29	12	17	S. A. H. Deakin & nervous exhaustion V 814	96	History of Rheumatism 4 yrs ago. Now has effects of endocarditis. A. B. now 1/2 inside. Nipple line, not much enlargement of heart. Sounds not clear. No marked murmurs. Hpl. treatment. Health improved. Trans. to Hqts 58 Victoria St. Medical Board	<i>A. J. Jones</i> MAJOR R.A.M.C. (T) 1417121, 612 London Record Hospital



## 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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer in Charge of the Hospital when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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



**A Name in full** Jurmes, Donald  
**Regiment from which discharged** 1 New South Wales  
**Regimental Number** 2848  
**Where born (Parish, Town and County), and when** St John N.F. 20th. 1898  
**Intended address** 321 South Side St John N.F.  
**Height on discharge** 5 Feet          Inches  
**Colour of Hair on discharge** Dark  
**Descriptive marks** Scar on right hand  
**Figure on discharge** well  
**Christian name of Father** George  
**Christian name of Mother** Catherine  
**Wife's Maiden name in full**           
**Date and Place of Marriage** } single  
**Christian names of Children**           
**Nature and locality of civil employment desired** as - 2494

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)

**Station** Army D The Jurmes **(Rank)** Plt. **Date** 31/1/17

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.

**Station** DENTAL **Date**          **Medical Officer i/c Hospital.**         

B Period of Service and in what Corps ...	Regiment			All Service Abroad with Stations		
	Years	Days	India	Years	Days	S. Africa
Disallowed ... ..						
Service towards Pension ... ..						
Date inclusive to which pay has been issued				Sum due on account of advance of pension )		
Sums due on account of public debts ...						

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 N.F.P.33. No .....  
 DATED **18 JAN 1918**

**Rank on Discharge**  
**Character (as on Certificate of discharge)**  
**Where born, and on what date**  
**Date and Place of first Enlistment**  
**Trade on Enlistment**  
**Cause of Discharge**  
**Number of G.C. Badges** **Medals**  
**Wounds, and Actions in which received**

**Other distinguishing marks**

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

**Station** \_\_\_\_\_ **Officer in Charge**  
**Date** \_\_\_\_\_ **Records.**



Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service



No. 2548

Rank Pl

Name (surname first) Turner, Donald

Regiment 1 New South Wales

1. State what special qualifications you have for employment in civil life.

*analyst*

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.38, No. 2548  
DATED 18 JAN 1918

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

*Government Lab. St Johns  
NF  
2 years*

3. What is the nature and locality of the employment you desire?

*as before*

4. What is the name of your Approved Society?

*\_\_\_\_\_*

5. Have you been employed whilst with the Colours? If so, in what capacity?

*\_\_\_\_\_*

Date 31/12/17

Signature D M Turner

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. 2548 of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

**MEDICAL CASE SHEET.**

*S. K. Conway*

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

*6 M. 71.12*

*2848*

*Pte*

*Jurner*



Year

*1917*

Unit.

*1 Newfoundland B.*

Station and Date.

Disease

*D.A.H. +  
Diarrhea.*

*41.9.H*

*24.9.17.*

*Has had Rheumatism in both legs.  
4 yrs. Attack lasted 3 wks  
2 wks in bed. + Medical attention*

*Has now effects of Endocarditis.  
Ab now  $\frac{1}{4}$  in inside Nipple line.  
Not much enlargement of heart.*

*Sounds not clear. no marked murmurs*

*Much improved. For continued Rec.  
G. Randall.*

*1.12.17 For Auxiliary Hospital E.H.*

AUXILIARY HOSPITAL  
AT *Stammon*  
FROM *Dec 3 1917*

ADMITTED TO  
*25 London General Hospital*  
R.A.M.C.T.  
Date *6.16.17*  
*R.D.*  
Date *29/11/17*

*admitted by  
Major Forsyth  
orders  
29/11/17*

*24.11.17*

*Will Capt. Simmliff please see C.H. in room  
+ home*

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

**CLINICAL CHART.**

(To be attached to Case Sheet.)

Corps \_\_\_\_\_

Military Hospital \_\_\_\_\_

Rank and Name \_\_\_\_\_

*Jurner*

Age \_\_\_\_\_

Service \_\_\_\_\_

Disease \_\_\_\_\_

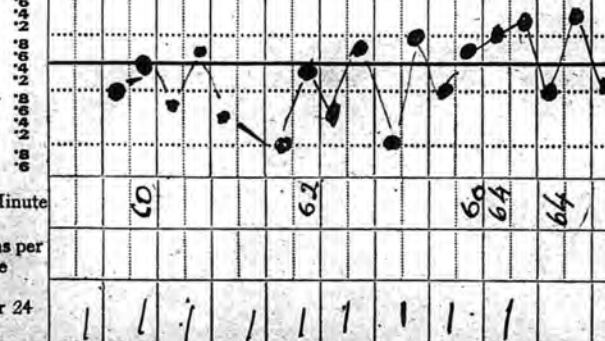
Date of admission \_\_\_\_\_

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_



Dates of Observation	Oct																											
	Days of Disease																											
Temperature Fahrenheit	Time																											
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
107°																												
106°																												
105°																												
104°																												
103°																												
102°																												
101°																												
100°																												
99°																												
98°																												
97°																												
Pulse per Minute																												
Respirations per Minute																												
Motions per 24 hours																												



N.F.P/35

NEWFOUNDLAND CONTINGENT

Pay & Record Office,  
53, Victoria Street,  
London, S.W. (24.),

1917.

*Dec 9/17*

No \_\_\_\_\_

To:

*Registrar  
4th L.F.C. (23)*

*Denmark Hill*

*For Medical Board as per telephone  
communication of this morning date please*

With the compliments of:  
PAYMASTER & OFFICER i/c RECORDS.

*2849 Ke. Turned*

4th LONDON GENERAL HOSPITAL, W.A.M.C.  
DENMARK HILL, S.E. 5.

## MEDICAL TRANSFER CERTIFICATE.

Army Book 172.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of \_\_\_\_\_ Hospital at \_\_\_\_\_ Date Dec. 20 1917

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of			DATES		Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
					Age last birth-day.	Service.	Service in the command.	Admitted into Hospital.	Transferred.			
	1st Newfoundland Regt.	B	2 8 4 8	Pte. Turner Donald	19	12	4	24 9 14	Dec. 11 1917		19. A. H.	Newfoundland H. Q 58, Victoria St

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

*Ex. France.**Entitled to leave.**W. J. H. H. H.*

\_\_\_\_\_  
Medical Officer in Charge.  
Registrar, 4th London General Hospital

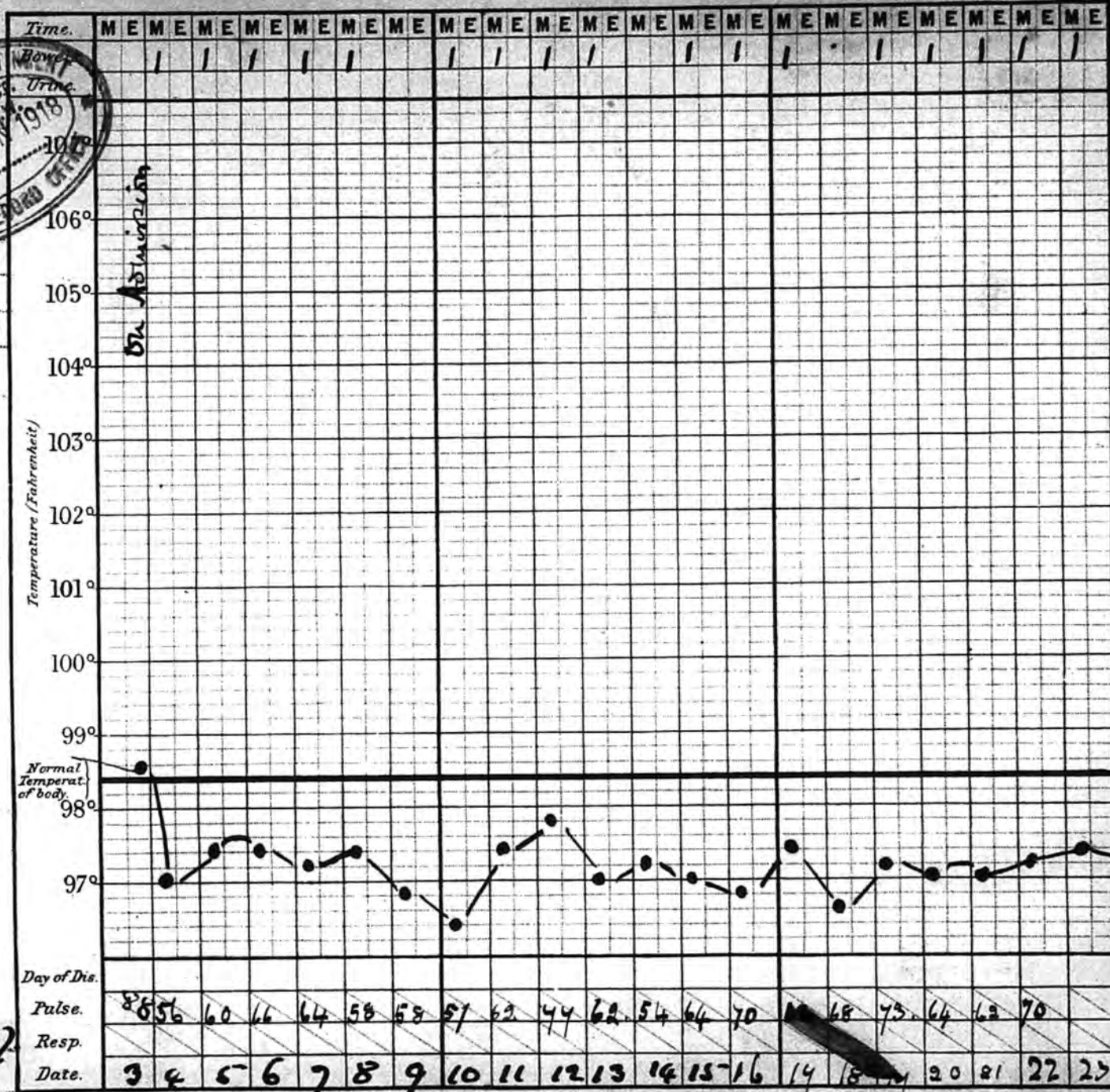


DISEASE.

D. A. K.



Name: Turner  
Age: 19  
Diet:  
Case Book N°:



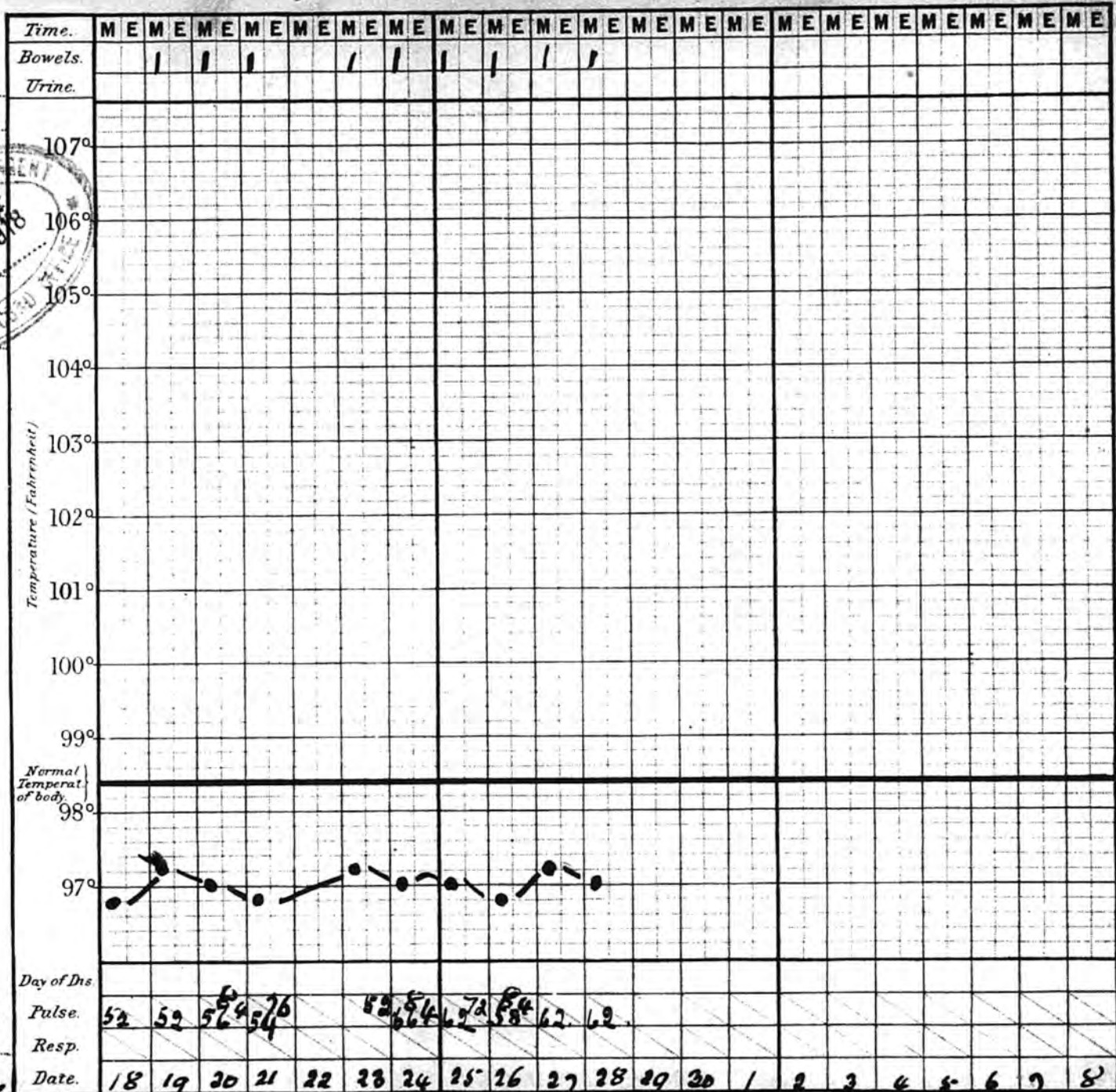
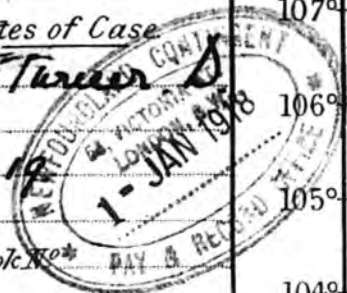
Date of admission: Oct 13 1917  
Result: Oct

**DISEASE.**

*J. A. H.*

*Notes of Case*

Name }  
 Age }  
 Diet }  
 Case Book No. }



Date of admission: *Dec. 3<sup>rd</sup>*

Result: *November*



DISEASE

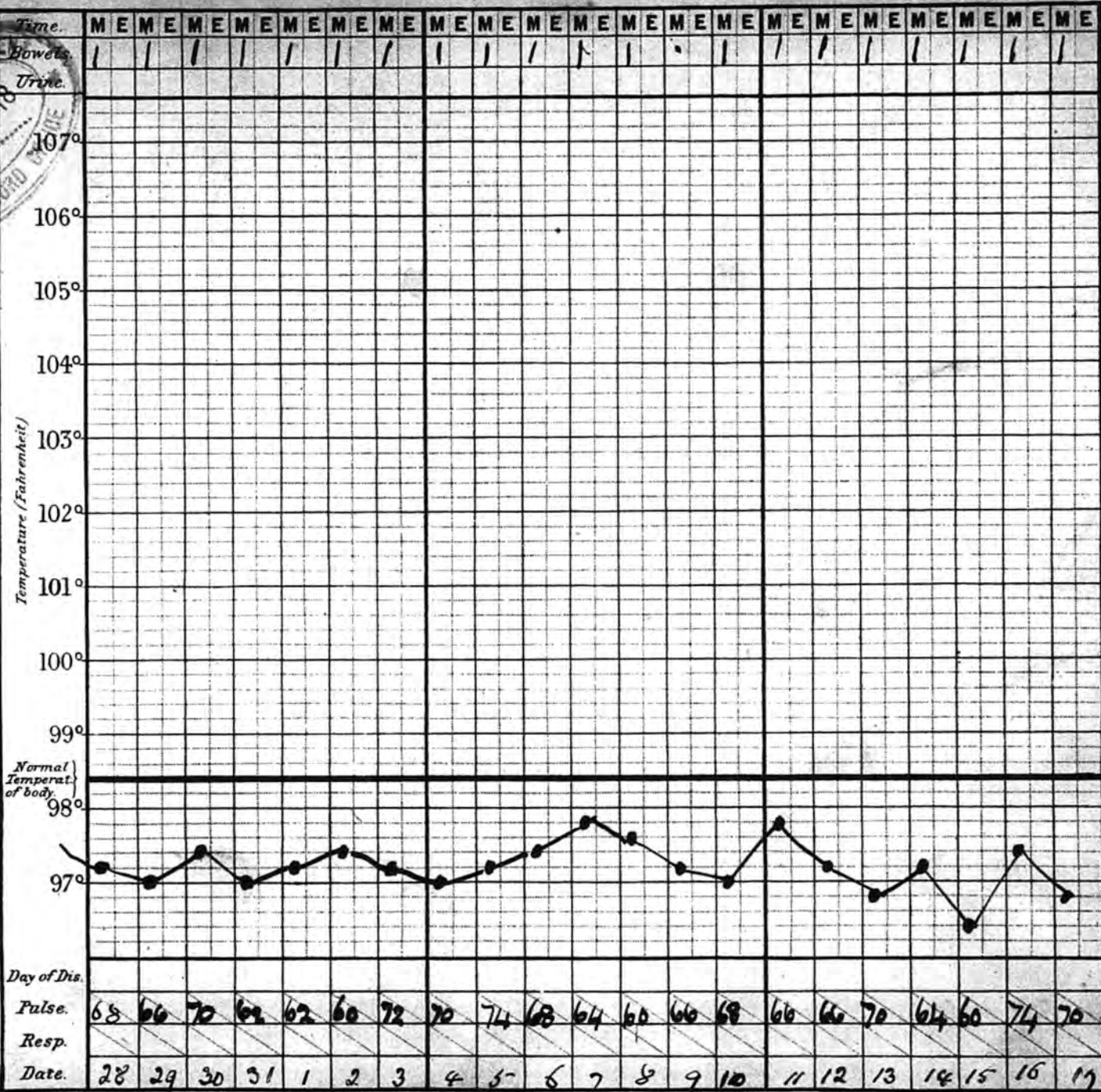
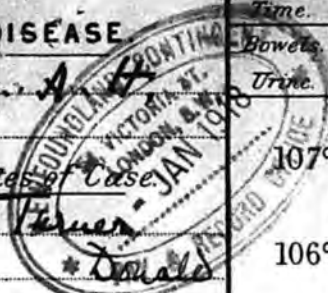
Notes

Name

Age 19

Diet

Case Book N<sup>o</sup>



Date of admission.

Oct: 3<sup>rd</sup>

Result

Oct

122

# THE WARDELL HOSPITAL, STAMMERE,

FOR SICK AND WOUNDED SOLDIERS



Regimental No. 2268  
Name Turner, Donald  
Rank Private  
Regiment 1st Devonshire  
Age 19 Religion Methodist  
Next-of-kin Father  
Address 9 Turner, Deptford, London  
St. John's Newington

Admitted Oct:  
Discharged Nov: 29

DIET.

### TREATMENT.

Referred back for treatment  
to No 4 General P.R.  
28.11.17

*A.2.* MEDICAL CASE SHEET.



No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
Year 1914	2848	Pte	Turner	
	Unit. 1. Newfoundland C.			19.
Station and Date.	Disease			
<i>H.d. G.H. 24-9-14</i>				
5.12.17	<i>no physical examination - then of various ex haemorrh. as a 19. Inward service at 7.30. Commenced at 8.15. &amp; Recommended for Board. JW</i>			
<del>20.11.17</del>	<i>Will Dr. Lindsay please examine this patient Sypo. E.R. Randall</i>			
20.12.17	<i>epi defect v. in RE <math>R.V. \frac{6}{18} = -0.25 = \frac{6}{24}</math> L.V. <math>\frac{5}{60} = -1 = \frac{6}{60}</math> Pulse 94</i>			
21.12.17	<i>Report Friday way for Mixed astigmatism higher in LE. Media clear Fundus normal <math>R.V. = +2.5 = \frac{6}{12}</math> L.V. <math>= +4 = \frac{6}{12}</math> same</i>			
<i>For discharge to Command Depot + Board E.R. Randall</i>				

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

### Statement of Accounts

OF

No. 2848 Rank Pte Name D. Turner

Company, etc. Repatriated 19/1/18 S. S. Classification A.

From 22/12/17 to 19/1/18 (dates).

DEBITS				CREDITS			
Date				Date			
/17	Balance	8	7	6	21/12/17	Pay	
	Hospital Advances	2		6	Period		
					22/12/17-19/1/18		
					29 days @ £1.10		
					51.90	6	11
					Ration Allow.		
					29/12/17-9/1/18		
					12 days @ 2/-	1	4
					10/1/18-19/1/18		
					10 days @ 1/9	17	6
	Creditor Balance	6	2	7	Debtor Balance		
	Total £	8	12	7	Total £	8	12

CHECKED:  
*[Signature]*  
18/1/18



Certified correct,

NEWFOUNDLAND CONTINGENT.

Station \_\_\_\_\_  
Date \_\_\_\_\_

CHIEF PAYMASTER OFFICER / G. RECORDS  
Paymaster.

**NEWFOUNDLAND CONTINGENT**

STATEMENT of ACCOUNT of No. 2848 Pte. D. Jones.

(Substituting A.F. J. 1925). N.F.P./36.

H Company. From \_\_\_\_\_ To 9-1-18. (Dates inclusive).

Embarked per S.S. \_\_\_\_\_  
From Liverpool Date 19/1/18

DR. Classification (See Procedure).

Draft No. 56 CR.

Date	Pay Book Col.	PARTICULARS	Rate	Days	£	s	d	Date	Pay Book Col.	PARTICULARS	Date	Days	£	s	d
	8	Forfeited Pay							1	Pay					
	9	Allotments							2	Field Allowance					
	10								3	Other " "					
	11/12	Total Stoppages							4/5	Total @ 4.86 2/3					
	13	Fines							6	Balance Credit Last Period			2	19	11
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS</u>			3	5	2
	15	Arms & Accoutrements								Ration Allice, 11 - 11					
	16	Barrack Damages								= 1 days @ 1			6	5	1
	17	hospital Stoppages													
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
	20	1st Payment													
	21	2nd "													
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period													
	28	" Due by Paymaster							27	Balance Due to Paymaster			2	19	11

The above soldier will proceed direct from Enniscorthy to Liverpool  
Wickchester

CERTIFIED CORRECT.

Statement herewith as per N.F.P./22 No. 1644

Jan 17<sup>th</sup> 1918

Not on H's strength

Woolcot

W. J. Clark 2/11:  
For O.C. "H" Company.

**NEWFOUNDLAND CONTINGENT**

STATEMENT of ACCOUNT of No. 2848 Pte. D. Turner.

(Substituting A.F. J. 1925). N.F.P./38.

H Company. From \_\_\_\_\_ To 9-1-18. (Dates inclusive).

Embarked per S.S. Liverpool Date 19/1/18

DR. Classification (See Procedure).

Draft No. 56 CR.

Date	Pay Book Col.	PARTICULARS	Rate	Days	£	s	d	Date	Pay Book Col.	PARTICULARS	Date	Days	£	s	d
	8	Forfeited Pay							1	Pay					
	9	Allotments							2	Field Allowance					
	10								3	Other " "					
	11/12	Total Stoppages							4/5	Total @ 4.86 2/3					
	13	Fines							6	Balance Credit Last Period			2	19	11
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>			3	5	2
	15	Arms & Accoutrements								Ration Allce, / / - / /			6	5	1
	16	Barrack Damages								= iays @ /					
	17	Hospital Stoppages													
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
	20	1st Payment													
	21	2nd "													
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period													
	28	" Due by Paymaster							27	Balance Due to Paymaster			2	19	11

The above soldier will proceed direct from St. John's to Liverpool

CERTIFIED CORRECT.

W. J. Class

Statement herewith as per N.F.P. 102 No. 164

Jan 17<sup>th</sup> 1918

Not on H's strength

W. J. Class

W. J. Class 2/11  
For O.C. "H" Company.

No. \_\_\_\_\_

N.F.P./45.

NEWFOUNDLAND CONTINGENT

To: Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

3/10/17  
P.K. 2.2  
ib. h.

Please remit to £2848 Pte. D. M. Turner,

4 London Terr. Hqs, Rustington Park, Wand 2 Denmark Hill

the sum of 2 (two) pounds 10 (ten) shillings, on

account of any balance that may be due to me.

Regtl. No. 2848 Rank Pte

Name Donald M. Turner

Approved [Signature]  
Officer i/c., Wand 2

[Signature] Hospital.

5604

4/10/17 (10192/10)

6867

Dated at \_\_\_\_\_

Sept. 29th 1917.

10192/10

4th October,

4th London General

Denmark Hill, S.E.

2848

Pte.

D.M. Turner, 1st Nfld Regt.

2 : 10 : 0



Enclosure

No. 10192/10

N.F.P./48.

NEWFOUNDLAND CONTINGENT

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

4th October, 1917.

To: Officer in Charge;

4th London General Hospital,

Denmark Hill, S.E.

With reference to request of:

(No) 2848 (Rank) Pte. (Name) D.M. Turner, 1st Nfld Regt.

Cheque No. 6864 for £ 2 : 10 : 0 is enclosed for payment  
to this Soldier as may be deemed fit.

Kindly complete Receipt Form on back of cheque before  
presenting at a Bank, please.

*A. A. Guinness* Major,  
Paymaster & Officer i/c Records.



RECEIVED CHEQUE VALUE TWO POUNDS TEN SHILLINGS FROM THE  
PAYMASTER, NEWFOUNDLAND CONTINGENT, 58 VICTORIA ST., S.W.

*Pte. D. M. Turner 28481 N.F.L.D.*

Date... *6/10/17* .....

O.i/c Records,  
58, Victoria St., S.W.1.

Acknowledgment of cheque by Pte. D. M. Turner, herewith  
please.

Denmark Hill, S.E.5.  
8th October, 1917.

*H. J. ...*  
MAJOR, R.A.M.C. (T.)  
Registrar, 4th London General Hospital.

*X*

II B.

(2)

No. 10801/2

N.F.P./48.

NEWFOUNDLAND CONTINGENT

*Cheque cancelled*

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

18th, October

1917.

To: Officer in Charge,

Wardell Military Hospital,

Stanmore, Middlesex.

With reference to request of:

(No) 2848 (Rank) Pte. (Name) Donald M. Turner

Cheque No. 6903 for £ 3. 0. 0. is enclosed for payment  
to this Soldier as may be deemed fit.

Kindly complete Receipt Form on back of cheque before  
presenting at a Bank, please.

*H. A. Guinness* Major,

Paymaster & Officer i/c Records.

THE WARDELL HOSPITAL

FOR SICK AND WOUNDED SOLDIERS

BRANCH
Pay
ACTED UPON
BY
STANMORE,
MIDDLESEX.

Telephone:  
STANMORE 15.

19<sup>th</sup> Oct. 1917

(3)

The Paymaster  
Newfoundland Contingent  
58 Victoria Street  
London. S.W.1.

Sir, I am returning the cheque & Correspondence received this morning for ~~6903~~ Pte J. M. Turner as I think it most undesirable that he should have so much money in his possession while a patient in my hospital. He had cheques of considerable value sent to him during last week and while men are patients here they have no need for more than a few shillings at a time. I shall estimate it a favour if you will not send more than a few shillings to any

man while a patent here.

Yours faithfully  
Millicent Mackenzie  
Matron

1st WYOMING AND RECORDS	
PAY & RECORD OFFICE.	
Ref. No.	6064
Rec'd.	21 OCT. 1917
Acc'd.	
Ans'd.	
File No.	

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

23rd, October 1947

Officer Comanding,  
Wardell Military Hospital,  
Stammore, Middlesex.

2848, PTE. D. M. TURNER.

With reference to your memorandum 19/10/17 (6064),  
relative to cheque £3. 0. 0. forwarded to you on  
account of Pte. Turner: Original request of this  
Soldier is forwarded for inspection, <sup>Return please</sup> Where similar  
requests are received from Soldiers in your Hospital  
to whom should they be submitted for approval, please.

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

No. ~~28~~

11545/4

N.F.P./45.

NEWFOUNDLAND CONTINGENT

*Ok 28  
AW 31/10/17*

To: Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. (1).

Please remit to #2848 Pte Donald M. Turner

Wardell Hosp. Stannora, India.

the sum of 2 (two) pounds — shillings, on  
account of any balance that may be due to me.

64401  
11545/4 1/14/17  
OCT 1917

(£2 — )

Regtl No. 2848 Rank Pte

Name Donald M. Turner

*Pay*  
*J.H.M.*  
Approved Millicent MacRangie  
Officer i/c.,

Wardell Military Hospital.

Dated at Wardell Hosp.  
Oct. 27th 1917

Stannora

11545/4

1st, November

Wardell

Stanmore, Middlesex.

2648 ..... Pte. .... Donald M. Turner

6966

2. 0. 0.



# WESTERN UNION

## ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



Prefix _____		Code _____		At _____		FOR STAMPS
WORDS		CHARGE		To _____	By _____	
				<b>VIA WESTERN UNION</b>		THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

1/1/18.

To **E.F.M. TURNER,**  
**ST. JOHN'S. (NEWFOUNDLAND)**

LEAVING FOR HOME SHORTLY BROKE CABLE TO AYR.

**D. TURNER.**

Authorized:

*D. Turner*

**NOT TO BE  
TELEGRAPHED.**

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature \_\_\_\_\_ Address **58, Victoria St., S.W.1.**

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.



BRANCH  
PAY  
RECORDS OFFICE

N.F.P./45.

APPROVED.

To: Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. (1).

*C. V. Foster*

MAJOR, R.A.M.C. (T.)

Registrar, 4th London General Hospital.

6900  
12376/2  
17/11/17

Please remit to 2848 Pte Donald B. Turner

Wardell Hosp. Stammers, India.

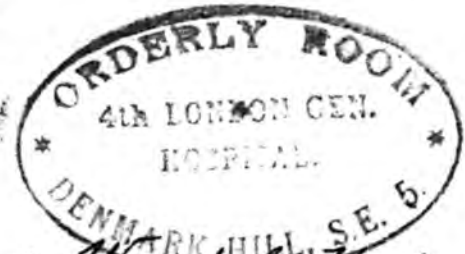
the sum of 3 (+ 00) pounds — shillings, on  
account of any balance that may be due to me.

OK.  
3-0-0  
17/11/17  
He

(£ 3 (three)).

Regtl No. 2848 Rank Pte

Name Donald B. Turner



Approved Millicent MacKenzie  
Officer i/c.,

Wardell Military Hospital.

Dated at Wardell Hosp.

Stammers

Nov 12th 1917

DOVER.

12376/6.

17th November

Officer Commanding,  
Wardell Hospital,  
Stanmore, Middlesex.

3 : 0 : 0

2848, Private D. Turner, 1st Newfoundland  
Regiment.

4th London Gen. Hosp.  
6/12/17

Officer i/c Records  
Newfoundland Contingent

Dear Sir,

Please forward from  
my account the sum  
of 5 (five) pounds.

OK &c. yours etc.

£ 5-0-0 Pte Donald M. Turner  
7/12/17 # 2848

A. V. Foss

Major, R.A.M.C. (T)

Registrar

Signed 4th London General Hospital M.O

Receipt 4646.



No. \_\_\_\_\_

4914 Rect



NEWFOUNDLAND CONTINGENT

To: Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. (1).



O.K.  
£ 5  
13/12/17

Please remit to #2848 Pte Donald M. Turner  
1st Newfoundland Regt. 9th London Gen. Hosp.

the sum of 5 (five) pounds \_\_\_\_\_ shillings, on  
account of any balance that may be due to me.

**APPROVED.**

(£ 5. \_\_\_\_\_ ).

Regtl No. 2848 Rank Pte

Name Donald M. Turner

Approved \_\_\_\_\_  
Officer i/c.,

9th London General Hospital.

*W. J. ...*

Major, R.A.M.C. (A)  
Regt. ...  
4th ... General Hospital.

Dated at 9th London Gen. Hosp.

Dec. 13<sup>th</sup> 1917



No. 2848 Rank Pl's Name Turner D.

Pay	F.A.	Wkg	Total
100	10		110
Less: Allotment			none
Net Rate			110

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d					
						From	To								
<del>2 days pay</del>			9	0	Balance		8/6/17				2	3	3	✓	
Balance			4	19	Pay @ Net Rate	8/6/17	31/12/17	206	110	226	60	46	11	3	✓
Acquittance Rolls			2	5											
Hospital Advances			3	2	Ration allowance							1	0	0	✓
A.B. 54				10	10 days @ 2/-										
P. & R.O. Payments			1	0	(9-10-6)										
Diff in Pric's Towel & Slaters															
40-4-0			9	10											
Cash. 4995															

He

49-14-6

*[Handwritten signature]*

# WESTERN UNION

## ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



Prefix          Code           
 WORDS 013 CHARGE 2 1/2

SENT  
 At           
 To          By           
**VIA WESTERN UNION**

FOR STAMPS  
 THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

1/1/18.

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To **E.F.M. TURNER,**

**ST. JOHN'S. (NEWFOUNDLAND)**

LEAVING FOR HOME SHORTLY BROKE CABLE TO AYR.

**D. TURNER.**

~~13 1/2~~  
~~26 1/2~~  
~~32 1/2~~  
~~27 8 1/2~~

CHECKED.  
*H. O. S.*

Authorized:

*Charge of  
Turner  
28/18*

CHARGED  
1/1/18 by *AC*

**NOT TO BE TELEGRAPHED.**

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature \_\_\_\_\_ Address **58, Victoria St., S.W.1.**

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.



No. 2848 Name *Turner D* Sqn., Batty., } 6 Corps *1st Newfoundland* Date of enlistment } 5.6.16 G.C. Badges } Service or Proficiency Pay }  
 or Company } No. and date } *Nil* Period not reckoning towards } Sheet No. 1. Signature O.C. } *A. Smith* Character } *Good*  
 Company Conduct Sheet } of last drunk } freedom from extra fine } *Don* Company, etc. }

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>Korea</i>	<i>14/6/17</i>	<i>Platoon</i>		<i>W.O.A. 4 in 4 days on duty</i>	<i>W. Marshall</i>	<i>Severely reprimanded</i>	<i>15/6/17</i>	<i>W. Marshall</i>	<i>1st</i>
<i>Korea</i>	<i>17.6.17</i>	<i>Platoon</i>		<i>When on Active Service, absent from parade for inspection at 11.30 a.m.</i>	<i>Sgt. Waterhouse</i>	<i>Deprived of 1 day's pay.</i>	<i>18.6.17</i>	<i>H. Col. Glynne</i>	<i>4th</i>
				<i>No. 1</i>					

Army Form B. 122

Turner, D.

2848

Hay sept.

5







# Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>2848</u>	Army Rank <u>Plt.</u>
Name <u>Turner Donald M.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>Newfoundland Exp.</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be stated.)</small>	
Date of discharge <u>March 5<sup>th</sup> 1918</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. <u>Description at the time of discharge.</u>	
Age <u>19</u> years <u>4</u> months Height <u>5</u> feet <u>6</u> inches Chest measurement { girth when fully expanded _____ ins. { range of expansion _____ ins. Complexion <u>Dark</u> Eyes <u>Blue</u> Hair <u>Brown</u> Trade <u>Analyst</u> Intended place of residence { <u>321 Southside</u> { <u>St. John's</u> { <u>Nfld.</u> (To be given as fully as practicable)	Descriptive marks.  <u>Scar L. Thumb</u>
2. The above-named man is discharged in consequence of <u>Sickness</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character :—	
4. Character awarded in accordance with King's Regulations :—	
<div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small; margin-right: 5px;">To be filled in on the soldier quitting the Colours.</div> <div style="border: 1px solid black; flex-grow: 1;"></div> </div>	
<small>Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.</small>	
<small>Initials of Commanding Officer.</small>	
Army Form B. 2088 has been issued to*	



5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay ... .. Class \_\_\_\_\_

6. Campaigns, Medals and Decorations

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Certificate of education .....

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

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_ Commanding \_\_\_\_\_ Batta. \_\_\_\_\_ Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St John's Field

(Signature of Soldier.)

(Date) Mar. 5th 1918

(Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to \_\_\_\_\_ (the date to which the record of service is completed) \_\_\_\_\_ years \_\_\_\_\_ days.

Further service " " \_\_\_\_\_ (the date of confirmation of discharge) ... .. " " "

Total ... .. " " "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for \_\_\_\_\_ (date)

(Place) \_\_\_\_\_

Signature \_\_\_\_\_

(Date) \_\_\_\_\_

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

---

No Reservations!—

J. M. Turner

C. O. Oke, S.S.M.

---

# 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 Commissioners of Chelsea Hospital.

Statements should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirmation of the 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, to be completed by the Officer i/c Records when received, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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

**Name in full** James Donald  
**Regiment from which discharged** 2nd Buffs  
**Regimental Number** 2848  
**Where born (Parish, Town and County), and when** Syphus Africa 20.10.98  
**Intended address** 321 Southside Syphus Africa  
**Height on discharge** 5 Feet 6 Inches  
**Colour of Hair on discharge** Dark **Colour of Eyes** Blue  
**Descriptive marks** Scars of Thumb **Complexion** Red  
**Figure on discharge** Medium  
**Christian name of Father** George  
**Christian name of Mother** Catherine  
**Wife's Maiden name in full** Single  
**Date and Place of Marriage**  
**Christian names of Children**  
**Nature and locality of civil employment desired** as in 7494



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

(Soldier's Signature in full) James Donald

(Rank) Ser  
 Date 31.12.17

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.

4th London General Hospital W. A. George Medical Officer i/c  
11th London General Hospital.  
 Station Seamark Hill S.C.S. Date 31.12.17.

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India	
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued	Sum due on account of advance of pension }					
Sums due on account of public debts ...						

**Rank on Discharge**  
**Character (as on Certificate of discharge)**  
**Where born, and on what date**  
**Date and Place of first Enlistment**  
**Trade on Enlistment**  
**Cause of Discharge**  
**Number of G.C. Badges**  
**Wounds, and Actions in which received**

Medals

Other distinguishing marks

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

Station \_\_\_\_\_ Officer in Charge  
 Date \_\_\_\_\_ Records.



Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section (T) in substitution for a man fit for General Service.

CERTIFIED TRUE COPY

No. 2848 Rank *Plt.*

Name (surname first) *James Donald*

Regiment *Newfoundland*

1. State what special qualifications you have for employment in civil life.

*Analyst*



2. State the name and address of your last, or any other employer before enlistment, etc. the nature of employment and how long you were employed?

*Government Job. St John's N.S.*

*2 years*

3. What is the nature and locality of the employment you desire?

*as before*

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? If so, in what capacity?

Date *31/12/17*

Signature *J. P. Turner*

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. 2207 of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Casualty Form Active Service.

CERTIFIED TRUE COPY

Regiment or Corps 1st New Zealand  
 Regimental No. 2848 Rank Plt Name Turner Donald  
 Enlisted (a) John's Terms of Service (a) Duration Service reckons from (a) 1.6.16.  
 Date of promotion to } Date of appointment } Numerical position on }  
 present rank } to lance rank } roll of N.C.Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., 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	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Public Collector		3.6.17.	
		Regimental Cookhouse		3.6.17.	
		1st Med. Battalion		19.6.17.	B212
17.9.17.	10 Coy. Hq. Lt. W. D. Mill		S. Omer.	28.8.17.	P.A. 13501.
23.9.17.	"Jan. Hospital" Lt. D. England			23.9.17.	W 3083
					Sgt. Edridge
					Plt. H. J. Leg. Inf. Section
					Pvt. J. G. Shelton



(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) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

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 question 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 *Donald W.* 2. Surname *Turner*

3. Rank... *Pvt.* 4. Regt. No. *2848*

5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded... *321 South Side St. John's*

6. Date of enlistment in the Regiment... *4/4/16* (~~1/6/16~~)

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... *Not Applicable*

9. Address in full of such dependent.....

..... *Not Applicable*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not Applicable*

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service.....

..... *No*

12. Give total length of time which you served on active service, whether in Nfld, or Overseas... *4/4/16 to 5/15/18*

..... *1 year 335 days*

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

*One Enlistment*

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.....

*\$87.00*

15. Have you been issued with a War Service Badge? *Discharge Budge. No. 421*

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.....

*Not Applicable*

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

(b). If so, was such reversion in consequence of misconduct or inefficiency? *Not Applicable*

19. Are you now serving in the Regt.? *No.* If not give: - (a) Date of discharge. *Mar. 5 + 6. 1918.* (b) Reason for discharge.....

*Disability*

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. *Yes.*

*Belgium June. 1917 to Sept. 1917*

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... (a) *No.* (b) *Not Applicable.*

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:

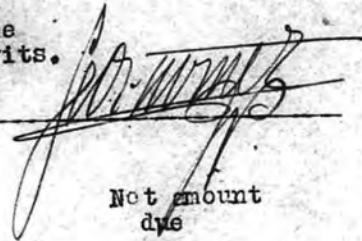
*Douglas M. Turner*  
*321 South Side St. John*

Place of Residence:

Declared before me at:

This *3<sup>rd</sup>* day of *March* 19*19*

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



POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>11-12-18</i>	<i>100.10</i>		<i>4 hrs.</i>	<i>280.00</i>
			<i>less P.D.P.</i>	<i>100.10</i>
				<i>179.90</i>
			Certified Correct.	Paymaster.

5

HW/L.

July 9, 1940

Dear Sir:

I have been directed to advise you that the cost of the Miniature Victory Medal supplied you, is \$/60, or sixty cents, and to ask if you will kindly forward same to this Department at your convenience.

Yours truly,

Capt.

For Payment.

No. 2848, Ex Pte. D. Turner  
Southside,  
C i t y.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$78<sup>16</sup>/<sub>100</sub>

Mar. 5<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Ninety Eight <sup>16</sup>/<sub>100</sub> Dollars.  
on account of Pay when Discharged.  
balance

D. M. J. J. J.

Ch. No. 4616	Initials. ew.
Pay Ledger 58	Initials. G. J.
Gen. Ledger 111	Initials. J. J.

Regtl. J. J.

Rank

No. 2848

Rank. Pte

Name W. M. Turner



Receipt of the same should be acknowledged hereon.

Received

2/17/21

Signature

Donald W. Morris

Date

2/17/21

Address

321 South Side  
City

2848

[P.T.O.]

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

***Royal Nfld. Regt.***

***Dept. of Militia,***

***ST. JOHN'S. Nfld.***

---

Fold Here

SEP 28 1921.

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

is/are forwarded herewith to

**Donald M. Turner**

in respect of his service as No. **218** Rank **Pte.**

Name **D.M. Turner** **Royal Nfld. Regt.**  
**Nfld. Forestry Corps.**

Receipt of the same should be acknowledged hereon.

Received \_\_\_\_\_

Signature

*Donald M. Turner*

Date

*27/1/22*

Address

*Southside, St. John's.*

[P.T.O.]

**Casualty Form—Active Service.**

Regiment or Corps *1st York and Lancs*  
 Rank *Private* Surname *Turner* Christian Name *Donald*  
 Religion *None* Age on Enlistment *18* years *7* months.  
 Enlisted (a) *St John* Terms of Service (a) *Duration* Service reckons from (a) *5.6.16*  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....  
*Occupation Analyst* *Provisionally 2nd Lieut* Signature of Officer.

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
COPY SENT TO Date O.C. H.Q. ST. JOHNS, N.F.L.D. N.F.P.38. No..... DATED <i>18 JAN 1918</i>			Embarked <i>Holkstone</i>	<i>3.6.17</i>	
			Disembarked <i>Boulogne</i>	<i>3.6.17</i>	
			Joined Battalion	<i>1.9 JUN 1917</i>	<i>B 213</i>
<i>17.9.17</i>	<i>10 Stat. Hosp.</i>	<i>Ad. N.Y.D. Mills</i>	<i>St. Omer</i>	<i>28.8.17</i>	<i>H.M. 13501.</i>
<i>23-9-17</i>	<i>Jau Breydel</i>	<i>Invalided to England</i>		<i>23-9-17</i>	<i>W. 3083</i>
<i>[Signature]</i>		<i>[Signature]</i>			
		<i>Office for Reg. Sup. Section</i>			
		<i>W. G. 2nd Battalion of 1st</i>			



(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoeing-Smith, &c.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.  
 [686] W:017/2121 1000m 6/19as 23 56

Forms  
B. 121.  
29.

Regiment of

Newfoundland.

Number of Sheet

First

Signature of O. C. Company

J. J. ...  
Capt

Regimental Number and Name <i>10674 Turner D.</i>		Enlistment Age on <i>18</i> years <i>7</i> months		Grade <i>Analyst</i>		Good Conduct Badges, Service Pay or Proficiency Pay	
Joined <i>Depot</i> Date <i>5/9/16</i>		Place and Date of Enlistment <i>St. John's</i> <i>5/6/16</i>		Religion <i>Presbyterian</i>			
Joined _____ Date _____		Period of { with Colours <i>1 2/4</i> years. with Reserve <i>3/5</i> years.		Place of Birth <i>St. John's</i>			
Joined _____ Date _____							

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
				Medically unfit	St John's	5 <sup>3</sup> / <sub>18</sub> .			

COPY SENT TO  
O. C. H. Q.  
ST. JOHNS, N. F. L. D.

N.F.P.38. No. *9587*  
 DATED **18 JAN 1918**

To be carried over

Army Form B. 121.

COPY

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
[1052] W1958/M499 500m 6/16x8 23 56

Forms  
B. 121.  
40.

Regiment of *Newfoundland*

Signature of O. C. Company  
*Sgt. H. L. Ingham*  
Cpt.

Regimental Number and Name <i>No. 1848 Turnel</i>		Enlistment Age on <i>18</i> years <i>7</i> months		Trade <i>Messenger</i>	Good Conduct Badges, Service Pay or Proficiency Pay
Joined <i>Sept</i> Date <i>5.9.16</i>		Place and Date of Enlistment <i>St. John's</i>		Religion	
Joined Date		Period of <i>with Colours</i> years.		Place of Birth	
Joined Date		<i>with Reserve</i> years.			



Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS

To be carried over

Army Form B. 121.

D2848

March 5th. 1918.

The O. C.

Royal Newfoundland Regiment,  
Headquarters.

Sir,-

The undermentioned men have been discharged  
on the dates given.

Kindly note and post in Daily Orders, Part

11.

I have the honour to be,

Sir

Your obedient Servant,

Signed. J.M. Howley,

Capt. & Paymaster &

Officer i/c Records.

JH.

No. 2759 L/Cpl. Burke, L.P. March 5th. 1918. Med. Unfit.  
No. 2848 Pte. Turner, D. do. do.  
No. 1640 Pte. Lewis, F.J. do. do.

5

February 22nd.

From Officer Commanding,  
Depot.

To Paymaster and Officer's Records,  
Dept. of Militia.

2848 Private D.M. Turner.

Above mentioned man was recommended for discharge  
as permanently unfit by Medical Board held on February  
19th. 1918.

I am sending him herewith for your attention and  
necessary action, please.



FEBRUARY 15th.

8.

From Adjutant,  
Deput.

To Paymaster and Officer i/c Records,  
Department of Militia.

I enclose herewith three vouchers for Cash advances issued to the following men during passage of Draft which arrived here on the 13th. inst.

2848 Pte. D.M. Turner.	£1. 6. 0.
275911/Cpl. J.F. Burke.	£1. 6. 0.
3409 Pte. C.W. Hiscock.	£1. 6. 0.

These payments were made by Capt. O'Grady and will appear in statement of accounts which will be presented by him.

f

