



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 2064 Name James Vates Corps _____

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>James Vates</u> |
| 2. What is your full Address? | 2. <u>Pouch Cove</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your Age? | 4. <u>21</u> Years <u>4</u> Months. |
| 5. What is your Trade or Calling? | 5. <u>fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. { Name _____
Corps _____ |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, James Vates, 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.

James Vates SIGNATURE OF RECRUIT.

E. January 8, 1916 J. A. Paine Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James Vates, 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 Pouch Cove

on this 8 day of January 1916

Signature of the Attesting Officer. J. A. Paine

1 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 _____ 1916

Place _____ Approving Officer.

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

* If so, the 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.—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 James Vales
 Apparent age 21 years 4 months. Height ✓ feet 7¹/₂ inches.
 Chest measurement { Girth when fully expanded 36¹/₂ inches.
 { Range of expansion 4¹/₂ inches.
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin James Vales
Touch Cove | Relationship Father
 Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names.	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, 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>8-1-16</u>									
Joined at <u>St. John's</u> on <u>January 8th 16</u>									
<u>Embarked St. John's S.S. Section for Cork</u>					<u>25</u>	<u>16</u>	<u>Embarked for Cork 24th 16</u>		Signature of Officers certifying correctness of entries
<u>Admitted 208 5th Bn 1st Div 13-10-16</u>					<u>31</u>	<u>16</u>	<u>Admitted 14-10-16</u>		
<u>to England 25-10-16</u>					<u>3</u>	<u>16</u>	<u>Embarked for Cork 14-10-16</u>		
<u>Embarked for Cork 2-12-16</u>					<u>15</u>	<u>17</u>	<u>Embarked for Cork 2-12-16</u>		
<u>Admitted 12th Coy 4th Bn 1st Div 15-3-17</u>					<u>29</u>	<u>17</u>	<u>Embarked for Cork 2-12-16</u>		
<u>Admitted 12th Coy 4th Bn 1st Div 27-4-17</u>					<u>28</u>	<u>17</u>	<u>Embarked for Cork 2-12-16</u>		
<u>Embarked for Cork 10-7-17</u>					<u>7</u>	<u>17</u>	<u>Embarked for Cork 2-12-16</u>		
<u>Admitted 3rd Coy 4th Bn 1st Div 27-3-18</u>					<u>29</u>	<u>18</u>	<u>Embarked for Cork 2-12-16</u>		
<u>Embarked for Cork 2-4-18</u>					<u>2</u>	<u>18</u>	<u>Embarked for Cork 2-12-16</u>		
<u>Discharged 29-10-18</u>									
Total Service forfeited as above									
Total Service towards Engagement to <u>29-10-18</u> (date of discharge)					<u>2</u>	<u>295</u>			
" " " Pension									

10 draft,



REGIMENTAL NUMBER 2064

COMPANY H

THE
1st NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's
Forces under the following conditions:

For the duration of the present war, or until my discharge.

Subject to the Army Act, The King's Regulations
and to such ordinances as may apply or may
be made to apply to the British Regular Army

Subject to the Newfoundland Volunteer Act:

5 George V.

Chapter IV.

Signed J. Waters

Witness J. [Signature] Capt

Dated Aug
August 2nd 1916

C.R. 2064

Extract from Nominal Roll of Mfld. Regt. Draft No.19.
From 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-
ampton, 15-2-17.

2064 Pte. J. Vaters.

C.R. 2064

Extract from Nominal Roll of Mfld. Regt. Draft No. 2.
from 2nd Bn. Depot, to 1st Bn. ~~xxxx~~ B.E.F. 9-7-18.

2064 Pte. H. Vaters.

C.R. 2064

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland Regt.,
dated October 30th. 1918.

Strength Decreases.

2064 Corpl. James Vater

Having been found medically unfit is discharged from ^{as} 23/10/18.

C.R. 2064

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

2064 Cpl. J. Vater,

Discharged 29 - 10 - 18, Medically unfit

100 100 100 100 100 100 100 100 100 100

100 100 100 100 100 100 100 100 100 100

100 100 100 100 100 100 100 100 100 100

C.R. 2064

Extract from Report ~~with~~ of Medical Board held Tuesday Oct 15
1918.

2064 Bpl. Vater J.

Recommended discharge -- Permanently Unfit.

C.R. 2064

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
St. John's, Oct. 14th, 1918.

The undernoted Non Commissioned Officer returned from Overseas
and reported at Depot 12-10-18.

2064 R/Spl. Vater J.

C.R. 2064

Extract from telegram from Synoptical,
London dated September 25th 1918.

2064 A/Opl. Vaters.

The above mentioned embarked by Government
Transport on September 23rd., at London
arriving at Montreal. BRING SENT HOME FOR
DISCHARGE.

C.R. 2064

Extract from telegram received from Synoptical,
London, dated September 24th, 1918

In answer to your telegram September 22nd #2064
Pte. Waters #10, was he repatriated recently you
can adjust.

CR. 2064

Extract from ~~British Casualties~~ Casualties received from P.&R.
Office, London, Sept.10,1918.

The u/m.(for repatriation) ex 3rd London General Hospital,
10-2, 18 has granted furlough to 10-a.m. 20-9-18, with orders
to report at the P.&R.Office, on the latter date for disposal.

2064 Sgt. Vater SJ.

Authority: A.F's W.3201 from 3rd L.G.H.

2064

Extract from Telegram despatched to Synoptical, London,
dated July 9th, 1918.

was 26. cabled 2064 Pte. Vater 17-4-18 paid

C.R. 2064

Extract from Telegram received from London, dated
June 5th, 1918.

Stop payment of allotment from April 30th,
#2064 Pte. Waters. see cable May 31st.

C.R. 2064

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. in the field, dated May 27, 1918.

#2064 L/Cpl. J. Vayers.

Appointed Acting Corporal March 16, 1918.

April 6 18

Dear Mr. Vaters :-

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

No. 2064, Cpl. James Vaters is at Wandsworth suffering from G.S.M. Jaw

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,



Mr. James Vaters,
Fench Uvee.

Actg. Minister of Militia.

C.R. 2064

Extract from Casualties received from Pay & Record
Office, London, dated April 18th, 1918.

#2064 A/Cpl. J. Vaters.

Wounded March 27th, 1918.

C.R. 2064

Extract of casualty List ~~xxxxxxxx~~ received from P.&R.O., London

Dated

24

2064 Opd. J. Vater,

R. Nfld. Regt., G.S.W. Jaw.....Adm. 3rd. London General Hospital
Wandsworth, S.W. 3/4/18.

C.R. 2064

Extract from War Office List No.H.A. 21218.

NFLD. EXPEDITIONARY FORCE.

#2064 Corpl. J. Vater.

Gunshot wound severe.

Admitted 10th Stationary Hosp. St. Omer March 29th, 1918.

CR. 2064

Extract of Daily Orders part 11, from Unit 1 t. Bfld.
Regiment, 3rd Echelon, B. S. F., dated 26/1/18.

#2064 Pte. J. Vaters, C. Co.,



Appointed Lance Corporal 16/12/17.

C.R. 2064

Extract of Daily Orders Part 11 by Major J.R.Meiklejohn, D.S.O.,
commanding Newfoundland Regiment 27/12/17.

2064 Pte. J. Vaters, C.Co.,

to be Lance Corporal.

C.R. 2064

Extract from Nominal Roll of Draft No. 29: 51 Other ranks from 2/1st
Newfoundland Regt., to 1/1st Newfoundland Regt., R.C.F. Embarked
Southampton 7/9/17.

2064 Pte. Vater, J.

NE FOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender

Geo. M. Staley

Address

Line Number	Recd	By	Sent	by	Check

Dated

May 1, 1917.

To

Mr. James Vaters,
Pouch Cove.

Regret to inform you that Record Office, London, officially reports No. 2064, Private James Vaters, has been admitted to King George Hospital, London, suffering from debility slight.

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

J. R. BENNETT,

Colonial Secretary.

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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender

J. R. Bennett Address

Line Number	Red	By	Sent	by	Check

Dated

April 7, 1917.

To

Mr. James Vaters,

Pouch Cove.

Record Office, London, today reports No. 2064,

Private James Vaters, out of danger.

J. R. BENNETT

Colonial Secretary.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender

John M. Murray

Address

Line
Number

Rod

By

Sent

by

Check

Dated

April 2, 1917.

To

Mr. James Waters,

Pouch Cove,
Regret to inform you that Record Office,

London, officially reports No. 2064, Private James
Waters, was dangerously ill of pneumonia at New Zealand
Stationary Hospital, Amiens, March twentyninth.

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

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

Wes
813

C.R. 2064

The Honourable
The Colonial Secretary.

For necessary action.

Governor.

31 March 1917.

No. 1026.

Code Telegram from Major Timewell.

(recd. 31 March 1917)

Dangerously ill Pneumonia New Zealand Stationary
Hospital, Amiens, March 29th

2064 Voters.

No. 1026.

Code Telegram from Major Timewell.
(recd. 31 March 1917)

Wandsworth, influenza,

40 Edgecombe.

C.R. 2064

Extract of Communication received from Pay & Record
Office, London, dated November 24, 1916.

#2064 Pte. J. Vater.

The abovementioned soldier is discharged from
the 3rd London General Hospital, Wandsworth, S.W.,
and granted furlough from 23/11/16 to 2/12/16.
Fit for 1. Duty. ✓


C.R.

2064

Extract of Casualties received from Pay & Record
Office, London, dated November 2, 1916.

2064 Pte. J. Vater

Gunshot wound Vlll 1 L. Severe.
To England ex 8 R.C. Hospital Le Treport 25th
Octobe 1916.



C.R. 2064

Extract from Casualties received from P.A.R. Office London,
Oct. 31. 1916.

Admitted to Wandsworth: 27 & 28.

2064 Vaters.

Gunshot wounds, severe.

FOUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____

Address _____

Line Number	Red	By	Sent	by	Check

Dated 31st October, 1916.*To* Mr. James Vater,
Pouch Cove.

Record Office London today advises No. 2064 Private James
Vater at Wandsworth.

COLONIAL SECRETARY.

C.R. 2064

Extract of Casualty received from Pay & Record
Office, London, dated October 20, 1916.

#2064 Pte. J. Vaters. ✓

Gunshot wound Vill. 1. severe.

Admitted 3rd London General Hospital, Wandsworth, P.W.
27/10/16.

C.R. 2064

Extract of Casualties received from Pa & Record
Office, London, dated October 30, 1916.

#2064 Pte. J. Vaters. ✓

Wounded: 12/10/16 and reported by O.G.En. 14/10/16.

C.R. 2064

Extract from Casualties received from Pay & Record Office,
London, Oct. 30, 1916.

Adm. Ser. ³Ligon, Gen. Hqs. Wandsworth. 27/10/16.

2064 Pte. Vaters, J.

1st Nfld. G.S.W. VIII 1 Sev.

C.R. 2064

Extract from Gazette from London District No. 8. 937 dated 27-10-16

#2064 Pte. J. Waters.

FOURTH

18-10-16

BC...

19

COPY OF TELEGRAM.

Dated
24th October, 1916.

To James Vater,
Mr. James Vater,
Pouch Cove.

Regret to inform you that the Record Office,
London, officially reports No. 2064 Private James Vater
at Eighth Red Cross Hospital LeTouquet October fourteenth
Gunshot Wound Upper Extremity Left Severe.

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

J. R. BENNETT,

Colonial Secretary.

C.R. 2064

Extract from Casualties received from P.&R. Office, London,
Oct. 24, 1916.

8th Red Cross Hospital. Lerouquet, Oct 14:

Gunshot wound; upper extremity left severe.

2064 Vaters.

C.R. 2064

Extract from Nominal Roll Embarked St. John's for Overseas,
Mar. 22, 1915.

2064 Pte. Vaters J.

C.R. 2064

James Vaters was attested for General
Service with the NEWFOUNDLAND REGIMENT ON Jan. 8th 1915.
Regimental No. 2064 was allotted to Ptes J. Vaters.

AUTHORITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

2206

October 17th 1918

From Assistant Adjutant
Depot

To Paymaster & Officer i/c Records.
Militia Dept.

2064, Crpl. J. Vater.
8172, Pte. . . Wells

Above noted men have been recommended for discharge
as permanently unfit by Medical Board, held on
Tuesday, October 15th. I am sending them here-
with for your attention, and necessary action,
please.

Dict #
CCD/WFC

Waters

2064

P. + R. 12

Promotions, Appointments, Reductions, and any casualty affecting the net daily rate of pay.

Date	Nature of Casualty	* Officer's Signature
31/12/16	Rank of C. Q.M.S. Confirmed	

* NOTE.—In addition to the above record, the Officer making the entry will write across the columns for cash payments the nature of the casualty and the amended net rate of pay corresponding with page 4. He will also record in the same places all sentences of imprisonment, attesting such entries by his signature.

Signature of Soldier

J. H. Water

Book opens on 11-11-18 1918. (For the Net Daily Rate of Pay see pages 3 and 4, and Note on page 5.)

If the Soldier was in debt on the above date, the amount to be recovered from the next pay due to him should be stated.

NEWFOUNDLAND CONTINENT. Debt £

R. H. Crawford O. C. Company, &c.
for CHIEF PAYMASTER & OFFICER I/C RECORDS.
Cash Payments.

Date.	Place.	Amount.	Signature of Officer.
1918 11-11-18	PTRO.	£ 16 0	<i>R. H. Crawford</i>
23-11-18	DO	3 12/4	<i>R. H. Crawford</i>
Paid in full with inc	24-11-18		<i>R. H. Crawford</i>

EXTRACT OF TELEGRAMS.

"Synoptical, London.

"10/7/18 (

"295- was £6.0.0.- cabled 2064 Vater- April 17- paid- fullstop."

"Military."

"Military, St. John's.

"17/7/18, (904):

"With reference telegram 10th July- 2064 Vaters- in Hospital- amount placed-
"to credit of his account."

"Synoptical."

6155/155

3rd London General Hospital,
Wandsworth,

20th April ... 8

2064 Pte. J. Vaters

15542

18 4 18

Pay to 2046 Vaters £6:0:0

*To 2 a/c
R.M.*

NEWFOUNDLAND CONTINGENT

TELEGRAM ~~from~~ extract from MINISTER OF MILITIA No. 163

Dated 10/ 7/14 (), Received 10/ 7/14

Decoded by JKH Checked by mpc

Branch Land. Acted upon (Initial) _____

Acknowledged per No. dated / /

295 - was - K6-0-0 - cabled 2064
Water - April 17 - paid -
fullstop -

Military

*Richard Gray
May 1914*

No. 2064 Rank

Cpl.

Name

J. Waters

Pay	F.A.	Wkf	Total
110	10		120
Less Allotment			
Net Rate			

N.P.P/33

30/18

*60 &
WR*

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate: \$	£	s d		
						From	To						
Balance					Balance		$21 \frac{13}{17}$				7	5	10
Acquittance Rolls		<i>9</i>	<i>14</i>	<i>0</i>	Pay @ Net Rate	$22 \frac{13}{17}$	$25 \frac{13}{17}$	4	50	2	00	8	3
Hospital Advances		<i>42</i>	<i>6</i>	<i>0</i>		$26 \frac{13}{17}$	$15 \frac{3}{18}$	80	55	44	00	9	10
A.B. E4.		<i>1</i>	<i>14</i>	<i>0</i>		$16 \frac{3}{18}$	$30 \frac{4}{18}$	46	60	27	60	5	13
P.&R.C. Payments		<i>70</i>	<i>2</i>	<i>0</i>		$1 \frac{5}{18}$	$10 \frac{9}{18}$	135	120	159	60	32	15
<i>G.L.H.</i>			<i>72</i>	<i>0</i>	<i>P.C.</i>	$10 \frac{9}{18}$	$20 \frac{9}{18}$	10	<i>7/1</i>		1	2	11
					<i>249</i>								
					<i>back 8772</i>								
					<i>10-9-18 20 00</i>								

31-17-2

*WR
19/9/18*

56-7-1

Cable

No 2

Stop payment of
allotment of Pay.

2064 Voters.

as from
April 30th.

PARACARY.

PANIFICAR

2064

Voters
ANNELIDANS
AMORGALE

(Charge of 2064 Voters)

Cable No 712 date 31/5/18



Jay

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES
CABLEGRAM

Prefix <u>WORDS</u>	Code <u>CHARGE</u>	SENT		FOR STAMPS
		At _____	To _____ By _____	
11/2/18		VIA WESTERN UNION		THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

10/7/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

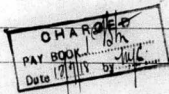
To EPM JAMES VATER

POUGHCOVE (Newfoundland)

CABLE TWENTY POUNDS THROUGH MILITIA

2064 VATER

Charge ↗



Authorized.

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.
1801

Part

ANGLO-AMERICAN

WESTERN UNION DIRECT UNITED STATES
CABLEGRAM

Prefix		Code		SENT		FOR STAMPS	
WORDS	CHARGE	At	To		By	THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.	
16	2 1/2	VIA ANGLO					

10/9/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EPM JAMES VATER

POUGHOOVE STJOHNS (Newfoundland)

CABLE TEN POUNDS THROUGH MINISTER MILITIA ~~REMI~~ COMING
HOME SOON

2064 VATER

Charge 2/c

16
2 1/2
3 1/2
40 3/4

CHARGED
PAYLEDGER <i>W. H. H. H.</i>
Date <i>12/9/18</i> by <i>W. H. H. H.</i>

Authorized.

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

56 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.

OFFICE COPY.

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regt No. 2084 Rank A/Cpl Name Vaters, J. Unit Royal Newfoundland who was Repatriated
 to Newfoundland on 21/9/18 Authority A.P.S. 179 Cause Class A

STATEMENT OF ACCOUNT

DR.		STATEMENT OF ACCOUNT					CR.				
PARTICULARS		£	£	s	d	PARTICULARS		£	£	s	d
PERIOD: FROM 21/9/18 TO 21/9/18	Balance Dr. from					Balance Cr. from					12 8
	Allotment days @					Pay 1 days @ \$ 110					
	Cash Payments: P&R.C. 19/9/18		1	0	0	Field Allowance 1 days @ \$ 110	1	10			
						Other Allowances days @ \$	1	10			4 11
	21/9/18 Cash payment P&R.B			1	2 7	Other Credits:					
	Other Debits: Receipt No. 8897					Ration Allowance					
	<i>File</i>				10/9/18 - 21/9/18 12 days @ 2/1			1	5	0	
Total Debits					Total Credits						2 2 7
Balance due by Paymaster					Balance due to Paymaster						2 2 7
											2 2 7

COPIES SENT
 TO: N.F.P. DATE: 23/9/18
 M. G. M. 15292/154
 O.C. 1st. En.

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) _____ (Date) 1918 O.C. " " Company.

Made up/checked in accordance with information received in the Pay & Record Office London to 20/9/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

20/9/18

Chief Paymaster & Officer i/c Records.

11584/59

Barham Military Hosp.,
Weybridge, Surrey.

18th, July 1918

2084, Cpl. J. Vaters

6427

*Pay to 2084 Vaters £5. 0. 0

No Receipt

*KB
9/7/18*

7007/154

3rd London Gen. Hospital,
Wandsworth.

May 7th 8

2064, A/Cpl. J. Vaters,

4045

4 5 18
Pay to 2064 Vaters £6:10:0

No Receipt

Admitted 3 2 18.

**NOTIFICATION that a Soldier has been sent
• Home from Hospital to await Discharge
under para. 392 (xvi.) King's Regulations.**

Soldier's Regt'l. No. } 2064 Rank Col.
 Name Vater
 (Surname first)
 Corps or Regiment } R. Field Ambulance
 (also Unit if known)
 To Officer i/c of Records 58 Victoria St
 Regimental Paymaster 58 Victoria St



The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 7. 9. 18, has been sent to ^{the address below} ~~his home~~

~~to~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes.~~

He proceeded on (date) 10 9 18
 to (full address) 58 Victoria St
D.W

Date 10. 9. 18 S. W. Wisley { Officer
 Comm.
 Place Wandsworth Capt. Registrar, R.A.M.C.I. Hospital

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

Admitted 3. 4. 18.
NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's } 2064 Rank Cpl.
Regtl. No. }
Name Vater, J.
(Surname first)
Corps or Regiment } R Infd. Winchester
(also Unit if known) }
To Officer i/c of Records 58 Victoria St
Regimental Paymaster 58 Victoria St

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 7. 9. 18 has been sent to ^{the address below} ~~Wandsworth~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) 10 9 18
to (full address) 58 Victoria St

Date 10. 9. 18 J. W. Registrar, R.A.M.C. Hospital, Wandsworth
Place Wandsworth
Three copies to be made, ^{one copy} sent to each Officer above-mentioned, and ^{one copy} to be retained in the Office.

To Pay Master
Pay & Record office
58 Victoria St London

Please pay me the sum
of two pounds, which is
to my credit & oblige

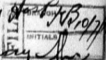
1664 eps of Water

Royal Newfoundland

Regt.

Barham Military Station

Weybridge Surrey



H. Fr-o-shiff

18/10/71
10/10/71
10/10/71

Grace Hensherg
Nation

W. H.
£20-0-0
Paid to W. H.
27/18



33/18

To pay Master
pay & Record office,
58 Victoria St London

Please pay me the
sum of £ which is to my
credit & oblige yours sincerely

To Lt Cpt James Gates
Royal New Zealand Regt
Bosham Military Hospital
Weybridge Surrey

Grace Newbery.
Nelson.

To pay Master
Pay & Record Office
58 Victoria St London

Please pay me the sum
of one pound) which is to my
credit) & oblige yours Sincerely

2664 Cpl James Vate
Royal Newfoundland Regt
London & Hospital
Wandswoth
London SW

1-0-0
Receipt No 821
25/7/18

FILE BRANCH
INITIALS
K 25/7/18

LONDON GENERAL HOSPITAL R.A.M.C. I.
REGISTRAR
25 JUL 1918
WANDSWORTH

Approved
W. J. [Signature]

NEWFOUNDLAND CONTINGENT
65, VICTORIA ST
LONDON, S.W. 1.
JUL 1918
PAY & RECORD OFFICE

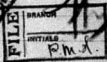
To Paymaster
Pay & Record Office
58 Victoria St
London S W

Please pay me the
sum of one pound) which
is to my credit & oblige
Yours sincerely

To Cpl J. Gates
Royal Artillery
3rd London & Hospital
Wandsworth
London S W 18

Approved
Schall
Capt Rtd

1-0-0
No 8638
Recd



To Pay Master
Pay & Record Office
58 Victoria St London S.W.

Please pay me the
sum of one pound which
is to my credit & oblige

Yours sincerely
Lt Col J. Vaten
Royal Artillery Regt
3rd London G Hospital

Wandsworth
Q.F. 1-0-0 London S.W. 18

H.P. 20/8/18
Receipt No. 8565

3 RD LONDON GENERAL HOSPITAL
No. _____
20 AUG 1918
WANDSWORTH, S.W. 18.

affirmed
Major
myself

RECEIVED	DATE
INITIALS	SIGNATURE
5.	Handwritten initials

To Pay Master
Pay & Record Office
58 Victoria St
London S.W.

Please pay me
the sum of one pound
which is to my credit
& oblige yours sincerely
2064 Capt J Water
Royal Artillery Regt
3rd London Hospital
Wandsworth
London S.W.18



LONDON GENERAL HOSPITAL
NO.
10 AUG 1918
WANDSWORTH, S.W. 18.

60/350
Capt J Water
J. H. 1.0.0
17/8/18
Receipt to 5089

£ 2-0-0
1902
1/6
1/11

To pay Master
Pay & Record office
58 Victoria St
London S W

Please pay me the
sum of ££ (two pounds)
which is to my credit and
oblige yours sincerely

2064 Cpl James Vates
Royal Newfoundland Regt
Barkon Military Hospital
Weybridge Surrey

Grace Newbery
Nation

W.A.M.

FILE: _____
BRANCH _____
INVEST _____

Approved J. Hall
Capt. Genl

Pay Master
Pay & Record Office
58 Fectona St
London S W



Please pay me
the sum of 1 £ one pound
which is to my credit

Kind oblige yours
£1.0.0
Sincerely
2064 Capt J. Gater
Rec. No. 7483

Royal Wiltshire & Hampshire Regt
3rd. L. of Hospital
Wandsworth London
S W



To Pay Master
Pay & Record office
58 Victoria St

O.K. £1.0.0 kept
Receipt No 7338 London SW
22/18

Please pay me the
sum of 1£ (one pound)
which is to my credit
and oblige yours sincerely

2664 Cpl James Vates
Royal W. F & D Regt
3rd London Hospital
Wandsworth
London S W

affirm
Schall
Apr 20/18

FILE
INITIALS



~~W 2 a/c.~~
cheque no 520187
don to 251

To Pay Master
Pay & Record Office
58 Victoria St
London S W 1



Please pay me the
sum of 1 £ One Pound
which is to my credit
and oblige you

Sincerely



206 Water
S D Regt
Admiralty
London S W 1

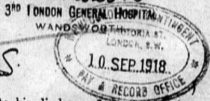
Approved
W. J. [Signature]

FOR USE IN THE CASE OF ALL SOLDIERS SENT TO THEIR HOMES UNDER
A.C.I. 1011 OF 1916, PARA. 2(ix.)

No. 2064, Rank Cpl., Name R. J. M. J. (Regiment).
is discharged from* Veter. J.

with orders to proceed to home:

(Address 58. Victoria St. S.S.)



and there to await further instructions as to his discharge from the Service.

Place WANDSWORTH. Capt. R. J. M. J. Officer Commanding.

Date 10/9/18. Registrar, R.A.M.C.T.

Here enter name of Hospital or Unit to which the Soldier is discharged.

3rd London General Hospital
WANDSWORTH.

Sub to 10am 20/9/18

EXTRACT OF TELEGRAM.

Despatched. 24/9/18.

Military. St. John's.

Reference your telegram 22nd. September-8064- Vaters- £10.- he was-
"repatriated- recently- you can adjust-"

(sd) SYNOPTICAL."

Pay.

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES

CABLEGRAM

Prefer <u> </u> Code <u> </u> WORDS CHARGE <u>14</u> <u>2 1/2</u>		SENT At <u> </u> To <u> </u> By <u> </u>	FOR STAMPS THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.
13/4/18		VIA WESTERN UNION	

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EPM JAMES VATER

POUGHCOVE (Newfoundland)

PLEASE CABLE IMMEDIATELY TEN POUNDS THROUGH MINISTER

MILITIA

JAMES VATER

14 2 1/2
29 2 1/2
35 2 1/2
Charge p/c of 2064

CHARGED	
PAY BOOK	<i>13/4/18</i>
Date	<i>13/4/18</i> by <i>DRS</i>



Authorised.

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.

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.		
Ref. Nos. IN	1475	
Rec'd	8 MAY 1918	
Ack'd	Ans'd	
Ref. Nos. UU1		
ACTED UPON		
BRANCH	DATE	BY
Comd		<i>Th</i>
P & A	81614W LT	<i>Th</i>
R & C		
B & E		
P.S.		

To Pay Master
 Pay & Record Office
 Royal Cf'g S. D. Regt
 58 Victoria St London

Dear Sir

Would you please give
 me a statement of my account
 (and oblige yours) Sincerely

2064 Capt James Yates
 Royal Newfoundland Regt
 8th London G. Hospital
 Ward 11 Wandsworth
 Hounslow S W

Pay Master
Pay & Record Office
58 Victoria Street
London



Please pay me the sum of
£1 One Pound (which is to my
Credit) and Oblige yours
Sincerely

2064 Cpl James Vates
Royal ex F.S.D. Regiment
3rd London General Hospital
Wandsworth London



Approved
198 Recpt No 6859

To Pay Master
Pay & Record Office
58 Victoria St
London



Please pay the above
sum (£ one pound) which
is to my credit) and
oblige yours sincerely
to be Cpt Percus Yates
Royal Wth F. & H. Regt
St Andrews Hospital
St Andrews Hospital
St Andrews Hospital



Approved
per
Capt Yates

O.K. £1.0.0 net.
14/5/18 Receipt No 7132

To pay Master
Pay & Record Office
38 Victoria St London

Please pay the sum
of 1£ one pound) which is
to my credit and oblige

Yours sincerely

2664 Capt James Vetter
Royal Wilt Regt
and London
Wandsworth
London S W

3824 1000 C
WANDSWORTH, S.W. 18.
MAY 1918

NEWFOUNDLAND
PAY & RECORD OFFICE
MAY 1918

app small cap but not

1000 C
MAY 1918

95/8
D.K. 11.0.0 hrs
Paper No 6986

OR £1-0-0

AW. 20-4-18

Receipt no 6674

To Pay Master

Pay & Messed Office

58 Victoria St London



Please pay me the sum
of £1 one pound (which
is to my credit) and
oblige) yours sincerely

2064 Cpl James Bates
Royal W of L D Regt
3rd L of Hospital

Aburdamouth & W

FILE [Signature] Approved [Signature]

AFRIGLAND CONTINGENT
2 VICTORIA ST.
29 APR 1918

Pay Master
Pay & Record Office
58 Victoria St., London

Please pay me the sum of £1
One pound (which is to my credit)
and oblige

Yours
Sincerely

OK
9 4/17
£1-0-0
NO
6504

2064 Capt. J. ...
E Coy
R. Keiffle Capt-
2nd L. S. Hospital

3rd LONDON GENERAL HOSPITAL R.F.C.
REGISTRAR
9 - APR 1918
No. _____
WANDSWORTH

BRANCH
APPROVED

approved
W. W. W. W.
Capt. Keiffle

(3).

"Military. St. John's.
"31/5/18 (712):

RE. 2064. Cpl. J. VATERS.

"Stop payment of- allotment of pay- 2064- Vaters as from- April
"30- ."

ENTERED

LEDGERS

NUM. ROLL

ALLOT. INDEX

REGISTER

APR 12 1918

To Pay Master

Pay & Record Office

58 Victoria St London

Please pay me the sum of £1
one pound (which is to my credit)
and oblige

Wm

Yours

Sincerely

2064 Col J. Waters

Regt R. Royal Regt

L. S. Hospital

Handsworth Sw 18

Approved
Schaff
apt

Receipt



To Pay Master
 Pay & Record office
38 Victoria St London

please pay me the sum
 of 1£ one Pound (which
 is to my credit) and oblige
 Yours sincerely



L064 Cpl James Yates
 8nd London General Hosp
 Wandsworth
 London

PKS
 £ 1.0.0
 PKS 25/4/18

Receipt for ~~500~~ ~~500~~
 7760



NEWFOUNDLAND CONTINGENT

Pay & Record Office,
58, Victoria Street,
London, S.W.,
31st May, 1917.

To: Officer in Charge,

Gifford House Aux., Hospital,

Roehampton, S.W.

With reference to request of

No. 2064 Pte James Vater, 1st Newfoundland Regiment.

Cheque

postal-money-order No. 3441 for £ 2: 0: 0 is enclosed

for payment to this Soldier as may be deemed fit.

Kindly complete receipt form on back of cheque before
~~Attached receipt form for SIGNATURE and RETURN to this~~
presenting at a Bank, please.
office, please.

Pay James Vater *H. J. Pinnerwell* Major,
Paymaster & Officer i/c Records.

20 Paymaster's Office i/c Receipts
Newfoundland Contingent
58 Victoria Street
London.



Please remit me per postal order the sum
of Two pounds £2, and charge to my
account.

of £2 0 0

Sgd 20 by James Bates

30th
Gifford House,
Rochampton,
May 28/17



Gifford House Aux. Hospital.
Sgd. Michael Robertson

Med. Officer in Charge.
31/5/17.

5151/4.

31st May, 1917.

Gifford House Aux.,

Roehampton, S.W.

2084 Pte James Vater, 1st Newfoundland Regiment.
Cheque

2: 0: 0.

Kindly complete receipt form on back of cheque before
presenting at a Bank, please.



N.B.—This Form must accompany any inquiry respecting this Telegram.



POST OFFICE TELEGRAPHS.

REGD. PATENT OFFICE, LONDON, E.C.

If the Receiver of an Inland Telegram doubts its accuracy, he may have it repeated on payment of half the amount originally paid for its transmission, any fraction of 1d. less than 1/2d. being reckoned as 1/2d.; and if it be found that there was any inaccuracy, the amount paid for repetition will be refunded. Special conditions are applicable to the repetition of Foreign Telegrams.

Office of Origin and Service Instructions

Offms Kingsway

Charges } s. d.
to pay }

Office Stamp



Handed } 7.500 Received } 9.300
in at } here at }

TO { Officer i/c Records Newfoundland
contingent

626as P55760 o/c new
sta Hos annals reports

April condition unchanged. 4467

Pte Vater J. 1 Newfoundland

Robt Vaters Proclreas



Handwritten signature/initials

NEWFOUNDLAND CONTINGENT

N.F.P./33.

Temporary A/c.

Regtl No. 2064 Rank Plt

Name J. Vaters

Pay	F. Allow	Working	Total
100	10		110
Less Allotment			60
Net Rate			50

Date
1917

DEBITS

£ s d

CREDITS

£ s d

Balance 1/1 9 8
P.M. ADVANCES:
A.B. 64.

Acquittance Rolls 1/12 11

Hospital Advances 1 60
STOPPAGES:

Hospital dys @ =
 Forfeited Pay dys @
 Miscellaneous
 Cables

P. & R.O. PAYMENTS: 2 9 0

Cash

Balance 1/1

Pay @ Net Rate:

17/12/17 to 31/1/17 = 133 days!

@ 50 = \$ 6650

31/1/17 to 2/1/17 = 10 days.

@ 24 = \$

1/1 to 1/1 = days.

\$

7/1/17 5 8 7
 9 10 0

2-7-17

6 31

13 13 4

1 0 0

14 19 7



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, James Vaters, Regl. No. 2064
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
60 Dollars and 60 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz.:

Allotment begins March 22nd. 1916.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1839	Father	James Vaters	Parish Lane St. John's East	60
<p><i>Cancelled 30/4/18</i></p> <p><i>Cash No 712 31/5/18</i></p> <p><i>733 5/4/18</i></p>				
Total Allotment, \$				

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

(Sig.) R.H. Hallaway
Lieut.
 Officer Commanding
H. Company
St. John's.
March 20th. 1916

(Sig.) James Vaters
 (Rank) Private



MELBOURNE CONTINGENT,
 PAY & RECORD OFFICE.
 No. 3763
 Recd. 26 APR 18
 Ack'd
 Ref. Nos. 001
 P & A.
 R. & C.
 B. & E.
 P. S.

J. G. I. G. H.
 No 11 Ward
 Wandsworth
 London Sw.
 25/4/18

Pay Master
 58 Victoria St
 London

Sir

I want to
 get my allotment of two & six
 (which I am leaving home) consold
 & to draw the whole on this side
 beginning from the 1st of May
 trusting you will do me this favour
 as early as possible. And oblige.

Yours
 Sincerely
 2064 Cpl James Water
 R. Newbold Payor

No. 6444/143



From:

NEWFOUNDLAND CONTINGENT

Officer Commanding,

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

3rd London Gen. Hospital,

Wandsworth.

26th April 1918

April 24th 1918

ALLOTMENT

No. 2064, Opl. Jas. Vaters,

This N. C. O. states

With reference to the enclosed application for cancellation of Allotment of the above-named, 25/4/18 (3783), kindly ascertain and advise:-

as under:-

1. Whether the Allotment is payable to a dependent as a sole or contributory means of support?
2. Whether Separation Allowance (in addition to Allotment) is being paid to any person in Newfoundland or elsewhere on his behalf, and if so, to whom?
3. The reason for cancellation.

No. Being banked by Father

No

Should the Soldier's reply to "2" be in the affirmative he should be informed that Allotment may not be cancelled without reference to the Minister of Militia in Newfoundland, to whom reason for cancellation will require to be submitted.

Has not sufficient funds at his disposal at present

A. A. Munn
Major,
Chief Paymaster & O. 1/c Records.

H. Hagan
Adj. Major,
Registrar, R.A.M.C.
3rd London General Hospital,
WANDSWORTH, S. W.

Telegram No.

Cancelling Allotment 30/4/18.

ENTERED
PAY LEDC <u>6th</u>
NUM <u>2064</u>
DATE <u>2</u>
INITIALS <u>Q</u>
RECEIVED

ORIGINAL.

N.F.P./12.

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

1. I, (No) 2064 ~~1916~~ (Rank) Cpl. (Name) Vaters J
 hereby apply for cancellation of Allotment made by me on N.F.P./11
 No. 1886 dated 22/3/16 in favour of
Jas. Vaters Bush Cove
 for \$ 2 cts 60 per diem.

Such cancellation to take effect on the 30th day of
April 1918

2. I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, in time to become operative at above-nominated cancelling date, and that in the event of such non-delivery, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage in the Pay Books as may be necessary, or otherwise to refund such overpaid amount or amounts.

Confirming cable 712 3/7/18.

Dated at _____

_____ 1918

Cpl James Vaters
 Allotter.

Approved and Witnessed:

O.C. " " Company.

COPIES SENT		
TO	No.	DATE
M. OF M.	<u>11400/93</u>	<u>10 JUL 1918</u>
O.C. 1st. Dn.		
" 2nd. Dn.		

N.B. - To be made out TRIPPLICATE and delivered to the Pay & Record Office not later than the date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/18.

Admitted 27 10 16

Army Form W. 3016.

No. _____

Date Jan 23rd 1916

(1) To the Officer i/c Records,

58 Victoria St
S.W. (Station.)

(2) The Officer Commanding,

Infed. Cont
Aug. (Station).

(3) The Paymaster,

58 Victoria St
S.W. (Station).

Regimental No. 2064

Rank and Name Pte Vater J

Regiment or Corps 1st Infed Cont

has been granted a furlough from Jan 23rd to Dec 2nd

His address while on leave will be :-

58 Victoria St S.W

*This man has been furnished with
a warrant to Victoria and given
an advance of £1. (one pound).*

I consider he is fit for 1st Div. I Duty.

Horace Fagan Capt R.A.M.C. (F)

Registrar, R.A.M.C.I.

Officer in charge London General Hospital
WANDSWORTH, S. W.

_____ (Station).

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

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

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

Army Form W. 3077c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/c Records after having filled in the particulars of the name and date of birth of the soldier's children for whom separation allowance is being paid, on receipt of which the Army Form is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3077c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If the Army Form has not been received by the Officer i/c Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

Part I.

A.F. W. 3077a has been sent to
O.C.

The Officer i/c Records,

A.F. W. 3077c has been sent to
The Regimental Paymaster,

58 Victoria St. SW

58 Victoria St. SW

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

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

No. 2064 Rank Sergeant
 Name Vater (Surname) James (Christian name in full).
 Unit and Corps 1st Royal Newfoundland
 Station 2nd London General Hospital Wandsworth, SW H. J. G. M. J. (Officer i/c Hospital).
 Date 2-9-1918 191 18
 * Strike out if inapplicable.

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

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

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

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

Part II.

Officer i/c Hospital,

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

Station _____

Date 2-9-1918 191 18

Officer i/c _____ Records.

[Handwritten initials]



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

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

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

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

Part I.

A.F.W. 3977A has been sent to O.C.	A.F.W. 3977a has been sent to The Officer i/c Records, 58 Victoria St. A.	The Regimental Paymaster, 58 Victoria St. SW
---------------------------------------	---	---

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

No. 2064 Rank Lieutenant
 Name Vater (Surname) James (Christian names in full)
 Unit and Corps 1st Royal Newfoundland
 Station 3rd London General Hospital Wandsworth SW H. T. Jackson (Officer i/c Hospital)
 Date 2-9-1918 191

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

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

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

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

Station _____
 Date 6 191 _____
 Officer i/c Hospital.

1081

Originals

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. <u>2064</u>	Army Rank <u>Corporal</u>															
Name <u>Water, James.</u> (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)																
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>																
Battalion, Battery, Company, Depot, &c. (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)																
Date of discharge																
Place of discharge																
1. Description at the time of discharge.																
Age <u>22</u> years _____ months Height _____ feet _____ inches Chest measurement { girth when fully expanded _____ ins. { range of expansion _____ ins. Complexion _____ Eyes _____ Hair _____ Trade _____ Intended place of residence _____ (To be given as fully as practicable)	Descriptive marks <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <thead> <tr> <th colspan="3">COPIES SENT</th> </tr> <tr> <th>To</th> <th>No.</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td>M. of M.</td> <td><u>321</u></td> <td><u>23 SEP 1914</u></td> </tr> <tr> <td>O.C. 1ST. Bn.</td> <td></td> <td></td> </tr> <tr> <td>" 2ND Bn.</td> <td></td> <td></td> </tr> </tbody> </table>	COPIES SENT			To	No.	DATE	M. of M.	<u>321</u>	<u>23 SEP 1914</u>	O.C. 1ST. Bn.			" 2ND Bn.		
COPIES SENT																
To	No.	DATE														
M. of M.	<u>321</u>	<u>23 SEP 1914</u>														
O.C. 1ST. Bn.																
" 2ND Bn.																
2. The above-named man is discharged in consequence of _____ _____ _____																
(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.)																
3. Military character:— _____ _____																
4. Character awarded in accordance with King's Regulations:— _____ _____ _____ _____ _____ _____																
Certified that the above is an accurate copy of the character given by me on Army Form B. 2667* and that Army Form D. 480 was awarded in this case.																
Initials of Commanding Officer.																
Army Form B. 2688 has been issued to*																

To be filled in on the soldier quitting the Colours.

STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

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

Regimental No. 2064.....Rank. 1st Lt.....Name.....J. G. Carter.....

(Surname)

(Christian Names)

Unit and Corps } 1st Regt.....

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

- (a) The statements made by him will be checked by official records.
 (b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

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

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

France 28/6/16 until 30/9/16
80/11/17
4/9/17
2/5/17
2/3/18

(b) In what capacity?

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

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

Gas Jaw
26/3/18

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To	No.	DATE
M. OF M.	<u>300/11/17</u>	<u>23 SEP 1918</u>
O.C. 1st. Bn.	<u>[Signature]</u>	
" 2nd Bn.	<u>[Signature]</u>	

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

3rd S. Y. Hospital

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

No

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

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

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

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

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

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

Fireman

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

Station 3rd S. Y. Hospital

Signed (Soldier)

Carl J. Walter

Date 8/9/18

Signed

G. C. Hall
Capt

To be filled in by M/O.

MEDICAL REPORT ON AN INVALID.

NOTE.—This Form is only applicable to men discharged from Hospitals; and when filled in is to be attached to A.F. 3972A and forwarded to the CONTROLLER, MINISTRY OF PENSIONS, BURTON COURT, KING'S ROAD, LONDON, S.W. 3.

Name..... Take James Regt. No. 2064 Rank Corp. Unit and Corps. R. 22nd
(Surname) (Christian Names)

1. State the nature of the disability or disabilities from which this man is suffering.. . . .

*G. S. W. lower jaw, fract: mandible
injury to lower lip & teeth*

2. What is the present condition of such disability or disabilities?

*Wounds completely healed but
power of mastication reduced to
10%.*

3. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic treatment) is desirable in a:—

NOTE.—Treatment shall only be recommended for the disability for which the man was discharged from the Navy or Army or Air Force during the present war. Provided that if the invaliding disability has been held to be due to an accident by service or to the treatment of such an accident recommended for an incapacity of 100% at the date of that disability.

- (a) Sanatorium or other institution for tuberculosis
- (b) Hospital, and if so, what class?
- (c) Convalescent Home
- (d) Asylum, or
- (e) Other institution
- (f) Is out-patient hospital treatment or treatment at home recommended. If so, which?

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To	No.	DATE
M of M	1024/104	23 SEP 1918
O.C. Inf. Co.		
2nd Bn.		

4. With reference to Army Council Instructions, is any surgical appliance recommended?

*Dentures, top & bottom, recommended
& supplied*

5. Is the invalid willing to accept the offer of treatment or not? If not, state the reason given for the refusal, and say whether you consider the refusal reasonable

Yes

3rd London General Hospital
Station.....
Date 7.9.18

G. C. Hall *Med. President.*
Cap
R. H. Edwards *Members.*

Approved, 3rd LONDON GENERAL HOSPITAL
Station WARDWORTH.
Date 10/9/18.

J. E. Somerville
Officer in charge Casual Hospital

Original

2-9-1918

Ward 11

Army Form B. 178a

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P, or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *1st Re. Newfoundland* 7. Former Trade or Occupation } *Ship's Fireman*
2. Regtl. No. *2064* 3. Rank. *Corporal* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Water* *James* (Surname) (Christian Names) (a) Former Regts. or Corps;
5. Age last birthday. *22* with Regtl. Nos.
6. Posted for duty on *9.10.1915* at *St. John's Nfld* in category (or grade) *A1* **COPIES SENT**
8. If the disability is an injury was it caused
(a) in action *Yes* (b) on field service *Yes*
(c) on duty *Yes* (d) off duty? *No*
9. If a Court of Inquiry was held on an injury state:—
(a) When } *N/A*
(b) Where }
(c) Opinion of Court }
(d) Particulars of Pension or Gratuity (if any)

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To	No.	DATE
M. of M.	<i>N/A</i>	<i>23 SEP 1916</i>
O.C. 1st. Div.		
2ND. DIV.		

(b) Date of Discharge,
(c) Cause of Discharge.

(d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

G.S.W. Fract. Compound fracture of mandible

11. Date of origin of disability. *26-3-18*
12. Place of origin of disability. *Paschaendale (mandible)*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Upper jaw fracture was put in to wire mesh plates Admitted here 4-18, received double jaw treatment. Amalgam had taken place by Aug. 2nd 1918. Injury wound of chin from helmet the P.B. was removed from wire mesh the mesh on 29 March 1918.*

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

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

15. What is his present condition?

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

Wounds are healed
Consolidation is complete
Pt. has 75% masticatory power (see note of dental surgeon).

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

3

- ① Operation on upper jaw
② Operation on lip 26-3
③ Removal of P.P. 29-3
④ Operation of back putting on splint - Home U.S.

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

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease—directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

yes - result of wounds

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Permanently unfit

Station 2 London General Hospital

S. H. Sanders C.P.
Medical Officer in charge of case.

Date 3-5-18

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

OPINION OF THE MEDICAL BOARD.

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

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

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

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

(b) The present condition thereof.

*G. S. W. Lower jaw & lower lip
injured & teeth
Wounds are soundly healed but
masticating power reduced to 10% of normal
capacity. Though dentures, top & bottom, have
been supplied he is still on slop & mince food.
14 teeth were extracted here.*

22. State whether the disabilities are:—

(i) Service during the present war

(ii) Previous active service

(iii) Climate in pre-war service

(iv) Ordinary military service before the war

(v) Serious negligence or misconduct on the part of the soldier

Give details:

(a) Attributable to

(b) Aggravated by

Yes

✓

✓

✓

✓

✓

✓

✓

✓

✓

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

✓

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

(a) How long is the present degree of disability likely to last?

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

Yes, permanent

✓

✓

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

100

✓

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

✓

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

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

Yes
Permanently unfit.

Opinion of Military Member in case of disagreement.

✓
✓

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

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

Yes

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

No

29. Does the soldier require:—

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

no
no
no

Signatures:—

G. C. Hall
Capt. Maj.
A. H. Stewart

President or Chairman.

Station Wandsworth

Date 7.9.18

Members.

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

Station WANDSWORTH

Date 10.9.18

H. D. Mee Gots
Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

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

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

Station

Date

O.C. Discharge Centre.

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

INSTRUCTIONS.—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W, W(T), P., or P(T), of the Reserve, as follows—
 (a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.
 (b) By the Officer in Charge of the Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

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

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

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

A. Unit from which discharged 1st Royal Newfoundland Regt.

Regimental Number 2064 Rank on discharge Corporal Age on discharge 22

Married, widower with children, or single Single

Occupation before enlistment Ships Fireman

Special qualifications (if any) for employment in civil life } As Ships Fireman

Nature and locality of employment desired Ships Fireman - Newfoundland

Full postal address to which proceeding on discharge } St. John's Barb Newfoundland

Name of Approved Society (if any) _____

Part A. of Army Forms W, W(T), P., or P(T), are to be filled in at the same time by unit, and Part B. and C. are to be filled in at the same time by the Officer in Charge of the Central Hospital.

Part B. and C. are to be completed by the Officer in Charge of the Central Hospital.

PART

C.

Period of service, and in what Corps	Regiment	Years	Days	All service abroad, with Stations	
				Years	Days
...					
Disallowed					
Service towards pension					

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South Africa No.	DATE
M of M. <u>1247/14</u>	<u>10/11</u>
O.C. 1st. Bn.	
2nd. Bn.	
	SEP 10/11

Number of G.C. badges _____ medals _____

Wounds and actions in which received _____

PART Where born (parish, town and county), and date St. John's Nfld 12/8/1896.

D. Colour of hair on discharge Light Brown Colour of eyes Blue Complexion Fair

Christian name of father James

Christian name of mother Sarah

NOTE.—Army Forms D. 400 and W. 2463a and 3 are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 2463a are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and Part A. of Army Form W. 2463a and 3 are to be completed by the Officer in Charge of the hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and in Part A. of Army Form W. 2463a are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

Wife's maiden name in full

N/A

Date and place of marriage

Christian names of children and dates of birth

N/A

Date and place of 1st enlistment

9-10-1915 St John's Newfoundland

Figure on discharge

Medium

Descriptive and other distinguishing marks

scar Rt Lower Jaw (Bull's head)

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

(Signature in full) J. Water

Rank CPL

Station Wainwright

Date 2/19/18

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

A. A. Davis

(Rank) Capt Surgeon

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

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

The soldier named overleaf was

Discharged under para. King's Regulations

or

Transferred to Class * of the Reserve.

Strike out whichever inapplicable.

Military character

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

Officer i/c Records.

Station

Date

191

* Insert P., or P.(T).

Report to the Local Committees of the War Pensions Committee
on Soldiers Discharged.

- (a) From Central Hospitals or Discharge Centres, as no longer physically fit for war service, under para. 392 (xvi), King's Regulations.
- (b) From Discharge Centres, as surplus to military requirements (having suffered impairment since entry into the Service) under para. 392 (xvi.a), King's Regulations.

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Local Committee of the Area in which the man intends to reside.

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

A. Unit from which discharged 1st Royal Newfoundland Regt.

Regimental Number 2064 Rank on discharge Corporal Age on discharge 22

Married, widower with children, or single single

Occupation before enlistment Ships Fireman

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

Nature and locality of employment desired
Ships Fireman - Newfoundland

Full postal address to which proceeding on discharge } St Johns East Newfoundland

Name of Approved Society (if any) _____

PART B. Nature of medical unfitness _____

Service with Colours _____ years _____ days, of which _____ days were served abroad during the present war.

Military character _____

Anything against the soldier to render his recommendation undesirable _____

Date of discharge _____ 191 _____

Station _____

Date _____

Officer i/c Records _____

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To	No	Date
M.O.M.	15299/151	9/10
G.C. 1st Ltn.		9/10
2nd Ltn.		9/10
		9/10
		9/10

To be completed by the Officer i/c Records.

NOTE 1.—Part B of this Army Form and Army Form W. 3463a can be completed at the same time by the use of carbon paper.

NOTE 2.—Part A of this Army Form is to be completed by the G.C. unit in all cases of soldiers sent to a Discharge Centre with a view to discharge or transfer to the Reserve, as it will not be known until a soldier is medically boarded whether he may not be discharged under Para. 392 (xvi) or (xvi.a), King's Regulations.

CONFIDENTIAL

Army Form W. 3463B.

Report to the Employment Department, Ministry of Labour, on a Soldier's Discharge from a Central Hospital as physically unfit for further War Service under para. 392 (xvi.), King's Regulations.

To be sent by the Officer i/o Records, within 24 hours of the receipt of the soldier's discharge documents, to the Director of the Employment Department, Ministry of Labour, 1, Queen Anne's Chambers, Westminster, London, S.W.1.

PART Soldier's Name Fater James

A. Unit from which discharged 1st Royal Newfoundland Regt (Surname) (Christian names in full)

Regimental Number 2064 Rank on discharge Corporal Age on discharge 32

Married, widower with children, or single Single

Occupation before enlistment Ship's Fireman

Special qualifications (if any) for employment in civil life } As Ship's Fireman

Nature and locality of employment desired Ship's Fireman - Newfoundland

Full postal address to which proceeding on discharge } St Johns Port

Name of Approved Society (if any) _____

COPIES SENT		
To	No.	Date
M. of L.	15704	15/9/16
O.C. 1st. En.	154	
" 2nd. En.		

PART B. Nature of medical unfitness _____

Service with Colours _____ years _____ days, of which _____ years

_____ days were served abroad during the present war.

Military character _____

Anything against the soldier to render his recommendation undesirable _____

Date of discharge _____ 191 _____

Station _____

Date _____

Officer i/e Records

To be completed by the Officer i/o Records.

NOTE 1.—As there is a representative of the Employment Department, Ministry of Labour, attached to each Discharge Centre, this Army Form is not to be sent to the Ministry of Labour, except in cases of discharge from Central Hospitals.



Special Reserve Recruits, and for Special Reservists enlisting into the

MEDICAL HISTORY

OF

Surname Water

Christian Name James John

102

Table I.—GENERAL TABLE.

Birthplace:—Parish

County K'lefe

	SPECIAL RESERVE.		REGULAR ARMY CONTINGENT	
Examined	on <u>25</u> day of <u>Dec</u> 191 <u>8</u>	on		
	at <u>St John K'lefe</u>	at		
Declared Age	<u>18</u> years	days		
Trade or Occupation				
Height	<u>5</u> feet	<u>4</u> inches	feet	inches
Weight		<u>125</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded...	<u>35 1/2</u> inches		inches
	Range of expansion...	<u>3 1/2</u> inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Number			<u>1</u>
When Vaccinated				
Vision	R.E.—V=	<u>4/6</u>	R.E.—V=	
	L.E.—V=	<u>4/6</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	COPIES SENT To No. DATE M. of M. <u>3222/14</u> <u>23 SEP 1918</u> O.C. 1st. Div. .. 2nd. Div. (b)		(a)	
			(b)	
(b) Slight defects but not sufficient to Cause Rejection				
Approved by (Signature)	<u>J.W. Burden</u>			
(Rank)	<u>Lieut</u>			
	Medical Officer.			
Enlisted	at	at		
	on	on		
	day of	day of		
	191	191		
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st K'lefe Reg</u>	<u>2064</u>		
Transferred to	<u>Newfoundland</u>			
Became non-effective by				
	on	on		
	day of	day of		
	191	191		
(Signature)				
(Rank)				

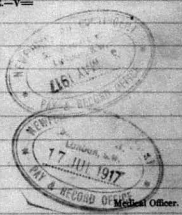


Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of 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				
3rd London General Hospital, WANDSWORTH.	27	10	16	23	11	16	G.S.W. VIII. 1. Septic abscess forearm & shoulder	25	Wounded France 12 Oct. 16. A dirty septic wound, 4 inches & forearm. Furlough.	St. Bailely Capt Ramo
KING GEORGE HOSPITAL, LONDON, S.E.	28	11	17	2	7	17	Debility	65	On admission. Patient is progressing favourably. Cough much better & very little expectoration. Gets rather short of breath after walking. Appetite & sleep good. Bowels regular. Chest & heart nil abnormal. Sleep nil abnormal now. 10.5.17 Still rather weak on the leg after walking. 2.7.17 Discharged 10 days furlough III	Dr. Robert Hunter R.S.M. Col. 1st M.C.
3rd London General Hospital, WANDSWORTH, S.W.	4	4	18	10	9	10	G.S.W. Lower jaw.		Bad neck - see overlap. Debility G.S.W. Lower jaw & lower leg, injury to heel. Dentures supplied but he is still on 50% food. Metabolism reduced to 10% of normal capacity. Cause - G.S.W. in action. Total - Debility to same a breakdown at present.	G.C. Hall Capt 3rd London General Hospital, WANDSWORTH, S.W.

Vater, James

2064

Ray & Dept

DEPARTMENT OF MILITIA.
WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name.. *James* 2. Surname.. *J. Jater*
3. Rank.. *Cpl.* 4. Regt. No. *L Co 14*
5. Address in full to which future payments of gratuity are to be forwarded. *4. Queen St. Jamaica Plain*
- *Boston Mass. U.S.A.*
6. Date of enlistment in the Regiment. *8. January 1916*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
- *James Jater*
8. Relationship of such dependents... *Wife Jater*
9. Address in full of such dependents... *Pouch House*
- *St. Johns East. Newfoundland*
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 Mld. If so, give dates and particulars of such service. *at SLD 2 months 11 days*
- *Overseas 2 years 5 months*
-
12. Give total length of time which you served on active service, whether in Mld. or Overseas *2 years 295 days*
- *12*

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

..... *only one*

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. *£ 97. Capt. Stanley*

..... *Myself*

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

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

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. *£ 1000*

..... *I know if I received any or am entitled to any*

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

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

19. Are you now serving in the Rep't. ? *No* ... Is not give? - (a) date of discharge *29 Oct 1918* (b) Reason for discharge *in account*

..... *of wounds sustained in action*

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 Oct 1916. Cambrai Oct 1918. Passchendaele Nov 1918*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee. *No*

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

Signature of Applicant: AUG 18 1919

James Vater

Place of Residence:

4 Dresden St Jamaica Plain

Declared before me at

Boston, County of Suffolk, State of Massachusetts

This nineteenth

day of August 1919.....

Natter E. Rogers,

Signature of Notary Public, Justice of the Peace, or Commissioner of Probate

My Commission expires Aug. 15-1924.

89 Court Street Boston, - - - Mass.

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

Register

ORIGINAL.LAST PAY CERTIFICATEN.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regt No. 2064 Rank AV/Cpl Name Vaters, J. Unit royal Newfoundland who was Repatriated
to Newfoundland on 21/9/18 Authority A&F.B. 179 Cause Class ASTATEMENT OF ACCOUNT

DR.		STATEMENT OF ACCOUNT						CR.			
PARTICULARS		£	s	d	PARTICULARS			£	s	d	
From 21/9/18 To 21/9/18	Balance Dr. from				Balance Cr. from 30/9/18				12	8	
	Allotment days @				Pay 1 days @ \$ 110						
	Cash Payments: P&R.O. 19/9/18		1	0	0	Field Allice 1 days @ \$ 10	1	10			
	21/9/18 Cash payment P&R.B receipt No. 8897		1	2	7	Other Allices days @ \$	1	20		4	11
	Other Debits:				Other Credits:						
					Ration Allowance						
					10/9/18 - 21/9/18 12 days @ 2/1			1	5	0	
	Total Debits				Total Credits			2	2	7	
	Balance due by Paymaster				Balance due to Paymaster						
			2	2	7			2	2	7	

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place)

(Digs)

191

O.C. " " Company.

Made up, checked in accordance with information received in the Pay & Record Office London to 20/9/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

20/9/1918

Chief Paymaster & Officer i/c Records.

LAST PAY CERTIFICATE

**DUPLICATE
MAIL COPY**

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 2064 Rank A/Op1 Name Waters, J. Unit Royal Newfoundland who was Repatriated
 to Newfoundland on 21/9/18 Authority A.P.R. 170 Cause Class A

DR.

STATEMENT OF ACCOUNT

PERIOD: From	TO	PARTICULARS				PARTICULARS				CR.				
		£	s	d		£	s	d		£	s	d		
		Balance Dr. from				Balance Cr. from <u>20/9/18</u>								
		Allotment days @				Pay 1 days @ <u>£ 110</u>							12	8
		Cash Payments: P&R.O. 19/9/18	1	0	0	Field Alice 1 days @ <u>£ 10</u>	1	10						
		<u>21/9/18</u> Cash payment P&R.O receipt No. 8897				Other Allces days @ <u>£</u>	1	20					4	11
		Other Debits:				Other Credits:								
						Ration Allowance								
						10/9/18 - 21/9/18 12 days @ <u>2/1</u>				1	5	0		
		Total Debits				Total Credits				2	2	7		
		Balance due by Paymaster				Balance due to Paymaster								
			2	2	7					2	2	7		

CH/20
20/9/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) _____ (Date) 1918

Made up/checked in accordance with information received in the Pay & Record Office London to 20/9/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London.

20/9/1918

O.C. " " Company.
[Signature]
 Chief Paymaster & Officer i/c Records.

COPY.

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]



Proceedings on Discharge.

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

No. 2064 Army Rank Coyford

Name Water James
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps ROYAL NEWFOUNDLAND REGIMENT

Battalion, Battery, Company, Depot, &c. _____
(If attached to the Regular Establishment of the Social Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge October 29th 1918

Place of discharge St. John's, Nfld

1. Description at the time of discharge.

Age <u>22</u> years _____ months	Descriptive marks. <u>scar through lower lip</u> <u>Scars on right arm & right shoulder.</u>
Height <u>5</u> feet <u>7 1/2</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>fresh</u>	
Eyes <u>blue</u>	
Hair <u>light brown</u>	
Trade <u>Fisherman</u>	
Intended place of residence (To be given as fully as practicable)	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home on 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.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service on account of wounds received in action

(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.)

3. Military character:— H. G.

4. Character awarded in accordance with King's Regulations:—

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 469 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2068 has been issued to*

24
28
31
30
31
30
29
29

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

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

- (a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.
 - (b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.
- It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.
- This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.5.

PART A. Soldier's Name Water James
(Surname) (Christian names in full)

Unit from which discharged 1st Royal Newfoundland Regt

Regimental Number 2064 Rank on discharge Captain Age on discharge 22

Married, widower with children, or single single

Occupation before enlistment Ships fireman

Special qualifications (if any) for employment in civil life as Ships fireman

Nature and locality of employment desired Ships fireman Newfoundland

Full postal address to which proceeding on discharge St Johns East Newfoundland

Name of Approved Society (if any) _____

PART B.

Period of service, and in what Corps	Regiment	Years	Days	All service abroad, with Stations	Years	Days
...				India		
...				South Africa		
Disallowed						
Service towards pension						

Number of G.C. badges _____ medals _____

PART C. Wounds and actions in which received _____

PART D. Where born (parish, town and county), and date St Johns Afd 18/8/1896

Colour of hair on discharge Light Brown Colour of eyes Blue Complexion Fresh

Christian name of father James

Christian name of mother Sarah

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

Wife's maiden name in full

Date and place of marriage

N/A

Christian names of children and dates of birth

N/A

Date and place of 1st enlistment

9-10-1915 St Johns Newbold

Figure on discharge

Medium

Descriptive and other distinguishing marks

Scar R. Lower Jaw (Bullet Wd)

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

(Signature in full) *Ed J. Water*

Rank

Cpl

Station

Wandswoth

Date

3-9-18

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

Ed J. Davies

(Rank) *Civil Surgeon*

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

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

The soldier named overleaf was

Discharged under para.

King's Regulations

or

Transferred to Class *

of the Reserve.

Strike out whichever is applicable.

Military character

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

Officer i/c Records.

Station

Date

191

* Insert P. or P.(T).

COPY

Casualty Form—Active Service.

Regiment or Corps... **ROYAL NEWFOUNDLAND REGIMENT.**

Rank... *Pte* Surname... *Watkins* Christian Name... *John P. James*

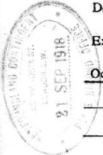
Religion... *Methodist* Age on Enlistment... *21* years... *4* months

Enlisted (a)... *St John's* Terms of Service (a) *duration of* Service reckons from (a) *date of Enlistment*

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

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

Occupation... *Fisherman (Sgd) Col Raley Capt* Signature of Officer.



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 212, Army Form A. 96, 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. 212, Army Form A. 96, or other official documents.
Date	From whom received				
		Embarked	<i>Hampton</i>	<i>29/1/17</i>	
		Disembarked	<i>Rouen</i>	<i>9/9/17</i>	
<i>29/12/17</i>	<i>of Unit</i>	<i>App of Plt</i>	<i>formed Battalion</i>	<i>12/10/17</i>	
			<i>Field</i>	<i>24/12/17</i>	<i>B 213</i>
			<i>with Battalion</i>	<i>30/12/17</i>	
<i>30/12/18</i>	<i>of Unit</i>	<i>Wounded in Action</i>		<i>27/1/18</i>	<i>B 213</i>
	<i>3 Bns CCS</i>	<i>Ad Swallower hp of</i>	<i>87 FA</i>	<i>27/1/18</i>	<i>289488</i>
	<i>of Staly Sp</i>	<i>Grav Severe</i>	<i>Sr-Dover</i>	<i>29/1/18</i>	<i>EA 21218</i>
	<i>of Binghamton</i>	<i>To England</i>		<i>3/4/18</i>	<i>W 3083</i>
		<i>(Sgd) R. Boyd</i>	<i>of 1st Infy Bde</i>		
			<i>Gold Bird Emblem</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, Sheehy-Smith, & Co.

COPY

Army Form B. 103.

Regimental Number 2064

Casualty Form—Active Service.

Regiment or Corps... ROYAL NEWFOUNDLAND REGIMENT

Rank Private Surname Petes Christian Name James
 Religion Methodist Age on Enlistment 21 years 4 months
 Enlisted (a) St John's Terms of Service (a) Narrative Service reckons from (a) June 8/1916
 Date of promotion to present rank..... Date of appointment to lance rank.....

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

Occupation..... 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.
Date	From whom received				
		Embarked	<u>Southampton</u>	<u>14.2.17</u>	
		Disembarked	<u>Rouen</u>	<u>15.2.17</u>	
		Joined Battalion	<u>Amiens</u>	<u>6.3.17</u>	<u>B 213</u>
	<u>W. St John's</u>	<u>Ad Pneumonia Sang</u>	<u>Amiens</u>	<u>29.3.17</u>	<u>WAR 8046</u>
	<u>Western Australia</u>	<u>Invalided to England</u>		<u>27.4.17</u>	<u>W 3483</u>
	<u>112 9th Coy Rouen</u>				
		<u>E. Lohme</u>			
		<u>9th Coy 1st Bde 1st Div</u>			
		<u>1st Bde 1st Div</u>			

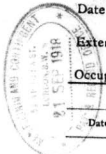
(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.
 W. 2027-2200 1908a 7/17 (2000) C. P. & G., Ltd. Forms B. 103 B. 1100

(P.T.O.)

Casualty Form—Active Service.

COPY

Report of Pte. Waters ROYAL NEWFOUNDLAND REGIMENT:
 Name Surname Christian Name
 Religion Method Age on Enlistment 21 years 4 months
 Enlisted (a) Jan 8/16 Terms of Service (a) Duration of War Service reckons from (a)
 Date of promotion to present rank Date of appointment to lance rank
 Extended (.....) Re-engaged (.....) Qualification (b)
 Occupation or Corps Trade and rate
 Signature of Officer. _____



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, Army Form A. 34, 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. 218, Army Form A. 34, or other official documents.
Date	From whom received				
			Embarked	<u>Hampton</u>	<u>24/10/16</u>
			Disembarked	<u>Rouen</u>	<u>25/8/16</u>
			Joined	<u>Bath</u>	<u>8/9/16</u>
	<u>140 477</u>	<u>G.S.W. 4 Arm</u>	<u>transf</u>	<u>CCB</u>	<u>12/14/16</u> <u>SLD 4361</u>
	<u>4/8 "Petrus"</u>	<u>Invalided to England</u>			<u>27/10/16</u> <u>W 3086</u>
		<u>ex Red Cross Hospital Longuet</u>			
		<u>G.S.W. 4 Arm</u>			
		<u>Regt A Manuella</u>			
		<u>1st Reg Sigs. Section No 1</u>			
		<u>General Headquarters 1st Sigs. Bn</u>			

(4) In the case of a man who has re-engaged for, or realized into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (5) Signaller, Shostag-Smith, Bn.
 W. 2827-32308 16000 7117 (26000) C. P. & C. Ltd. Forms B. 103 E/15182. (P.T.O.)

CONFIDENTIAL

Army Form W. 3463A.

Report to the Employment Department, Ministry of Labour, on a Soldier's Discharge from a Central Hospital as physically unfit for further War Service under para. 392 (xvi.), King's Regulations.

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Director of the Employment Department, Ministry of Labour, 1, Queen Anne's Chambers, Westminster, London, S.W.1.

PART Soldier's Name

Water
(Surname)

James
(Christian names in full)

A. Unit from which discharged

1st Royal Newfoundlanders

Regimental Number

2064

Rank on discharge

Captain

Age on discharge

27

Married, widower with children, or single

single

Occupation before enlistment

ships fireman

Special qualifications (if any) for employment in civil life

As Ships fireman

Nature and locality of employment desired

ships fireman Newfoundland

Full postal address to which proceeding on discharge

St Johns East Newfoundland

Name of Approved Society (if any)



PART Nature of medical unfitness

B.

To be completed by the Officer i/c Records.

Service with Colours

years

days, of which

years

days were served abroad during the present war.

Military character

Anything against the soldier to render his recommendation undesirable

Date of discharge

191

Station

Date

Officer i/c Records

NOTE 1.—As there is a representative of the Employment Department, Ministry of Labour, attached to each Discharge Centre, this Army Form is not to be sent to the Ministry of Labour, except in cases of discharge from Central Hospitals.

St Johns Hdq 18/8/1918
James
Sarah

COPY

Report to the Local Committees of the War Pensions Committee on Soldiers Discharged.

- (a) From Central Hospitals or Discharge Centres, as no longer physically fit for war service, under para. 392 (xvi.), King's Regulations.
- (b) From Discharge Centres, as surplus to military requirements (having suffered impairment since entry into the Service) under para. 392 (xvii.), King's Regulations.

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Local Committee of the Area in which the man intends to reside.

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

A. Unit from which discharged 1st Royal Newfoundland Regt

Regimental Number 2064 Rank on discharge Captural Age on discharge 22

Married, widower with children, or single Single

Occupation before enlistment Ships fireman

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

Nature and locality of employment desired Ships fireman Newfoundland

Full postal address to which proceeding on discharge } St Johns East Newfoundland

Name of Approved Society (if any) _____



PART Nature of medical unfitness _____
B. _____

Service with Colours _____ years _____ days, of which _____ years _____ days were served abroad during the present war.

Military character _____

Anything against the soldier to render his recommendation undesirable _____

Date of discharge _____ 191 _____

Station _____

Date _____ Officer i/c Records _____

To be completed by the Officer i/c Records.

NOTE 1.—Part B. of this Army Form and Army Form W. 3463a can be completed by the soldier in his own case.

NOTE 2.—Part A. of this Army Form is to be completed by the O.C. unit in all cases of soldiers sent to a Discharge Centre with a view to discharge or transfer to the Reserve or to be not be known until a doctor or medically boarded whether they are to be discharged under Para. 392 (xvi.) or (xvii.) King's Regulations.

St Johns 1st 18th 1896
Sarah



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, James Vaters, Regl. No. 2064
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and 60 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz.:

Allotment begins March 22nd 1916.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
1839	Father	James Vaters	Panels Lane St. John's East		60
Total Allotment, \$					

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

(Sig.) R.D. Hallaway
 for Lieut.
 Officer Commanding
H. Company
St. John's.
March 20th 1916

(Sig.) James Vaters
 (Rank) private

4 Duesden St
Jamaica Plain
Mass
U S A
151 20 / 19

Dear Sir
I understand that there
is some money due to me
in the Army how much
I do not know But I had a
Paper from the Department
of Military about three months
ago to fill out, I done so
But Haven't got any
reply would you please
look it up & advise
2664 cpl James Pater

M Oct 29/19

Mar. 1	70.00 ✓
Apr. 1	70.00 ✓
May 1	70.00 ✓
June 1	<u>30.80 ✓</u>
	<u>240.80</u>

Amount
date of dish. 15.60

Post Discharge

Pay 21/12/18 61.40

do 13/1/19 32.20

\$ 350.00

October 28 ,1919

J. Vaters,
4, Dresden Street,
Jamaica Plains, Mass.,
U.S.A.

Robert
Dear Sir:

I enclose cheques (4)
amount of War Service Gratuity due you.

Yours truly,

Major
Paymaster.



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 *James Vates*

aged *21 yrs.* conducted at *Headquarters.*

Date: *Jan. 7/11* Recruiting officer:

NO. OF TEST FINDING

NO. OF TEST	FINDING
1	no
2	no
3	no
4	no
5	no
6	no
7	yes
8	yes
9	n
10	n
11	n
12	n
13	one tooth to be taken out.
14	n
15	n
16	n
17	n
18	n
19	6-36 both
20	n
21	n
22	n
23	n
24	n
25	n
26	n
27	n
28	n
29	n
30	n
31	n
32	n
33	1 scar left arm 8 yrs ago
34	5-7 1/2
35	10x0
36	52-3 1/2
37	50 month
38	Father James Vates Birchlove
39	no body

2064

Signature of Medical Examiner:

J. W. Burden
Lewis

1830

Pouch Cove
July 13th / 1918

To the PayMaster
1st Field Regiment
St John's

Dear Sir

Mr James Vaters wishes me to inform
you that the usual monthly pay due for
July to him was 2064 (Sev?) James Vaters
has not - up to date - reached.

Kindly look into the cause of delay
& inform him

Thanking you in anticipation

Dear Sir

Yours truly

W. Henry Browning
M. M. Minister

allotment in
cancelled by
(Call from
U.G.P.)
H.R.D.

July, 18th., 1918.

Rev. W. H. Browning,
Pouch Cove.

Dear Sir:-

Referring to your letter of
July, 13th., I beg to state, that #2064 Private Vaters
cancelled his allotment from May, 31st., 1918, and that
accounts for Mr. Vaters not receiving an allotment cheque
for the month of June.

Yours faithfully,

for Capt. & Paymaster.

P.M.

2064 Water

Proceeding tomorrow to Montreal

Please pay P.D. Pay in one cheque

12/1/19

Frederick A. Newman

W.F.H.

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15⁰⁰ -

Oct 12th 19 18

Received from the First Newfoundland Regiment
the sum of fifteen $\frac{00}{100}$ Dollars.
on account of Pay.
balance

J. H. Valey

Regtl. No. Rank

Ch. No. 3875	Initials. kw
Pay Ledger 304	Initials. kw
Gen. Ledger	Initials.

No. 2064

Rank Corp

Name Valer J

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 6, $\frac{40}{100}$

Dec 21 ¹¹ 1918

Received from the First Newfoundland Regiment
the sum of Sixty on $\frac{40}{100}$ Dollars.
~~on account~~ of Pay. P.D.P.
~~balance~~

Ch. No. 7219	Initials. EW.
Pay Ledger 379	Initials. AWK.
Gen. Ledger.....	Initials.....

J. H. Water

Regtl. No. 5064 Rank Cpl

No. 2064.

Rank Lt

Name

Vaters J.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

32 ²⁰
x 2

Jan 13 19 19

Received from the First Newfoundland Regiment
the sum of Thirty two ²⁰/₁₀₀ Dollars.
on account of Pay. P. & P.
balance

J. Bates

Ch. No. 8237	Initials. K.W.
Pay Ledger. 379	Initials. A.W.L.
Gen. Ledger.....	Initials.....

Regtl. No.

Rank

Frederick Jones

No. 2064

Rank Corp'l

Name Waters J.

Reg. No. 2064 Rank L/Co Pl Name Vaters J.

Attested _____ Address Truck Brook

Allotment _____ Allottee _____

Date of Allotment _____ Returned from Overseas 12-10-18

Embarked for Overseas _____ Cause Discharge

15-10-18 Rec. Discharge - Permanently unfit

DISCHARGED - MEDICALLY UNFIT 29-10-18 Nov 1918

Casualty Form—Active Service.

C.R.

2564

Regiment or Corps

Newfoundland

Rank

Private

Surname

Waters

Christian Name

James

Religion

Methodist

Age on Enlistment

21

years

4

months.

Enlisted (a)

St Johns

Terms of Service (a)

Duration

Service reckons from (a)

June 8/1916

Date of promotion to present rank

Date of appointment to lance rank

Extended

Re-engaged

Qualification (b)

or Corps Trade and Rate



COPIES SENT

DATE	NO
20 SEP 1918	
TO	
MI OF M.	
O.C. INF. Bn.	
2nd Dn.	

Report

Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, Army Form A. 28, or in other official documents. The authority to be quoted in each case.

Place of Casualty

From Army Form B. 218, Army Form A. 28, or other official documents

From whom received

Embarked

Southampton 14-2-17

Disembarked

Rouen 15-2-17

Joined Battalion

6 MAR 1917

B 213

NZ. H. Hoop Ad. Pneumonia Tang. Amiens 29.2.17 N.A. 8046
 Waters Invalided to England 27.4.17 W 3083
 Australia 123. Hoop. Rouen

- (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.
 (2) Signatur, Shading-Smith, &c.

Casualty Form - Active Service.

Regiment or Corps 1st Newfoundland
 Rank Private Surname Waters Christian Name John
 Religion Catholic Age on Enlistment 21 years 4 months
 Enlisted (a) 1st June 1916 Terms of Service (duration of war) Service reckons from (date of enlistment)
 of promotion to present rank Date of appointment to lance rank



Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation Fisherman Signature of Officer. W. Kelly Capt

COPIES SENT

DATE	NO.
23 SEP	
TO	M. OF M.
O.C. 1st Lt.	2nd Lt.

Report	Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.103, 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.103, Army Form A. 36, or other official documents.
Date From whom received				
		Embarked <u>Stampton</u>	<u>7.9.17</u>	
		Disembarked... <u>Rouen</u>	<u>19.17</u>	
		Joined Battalion <u>12 OCT 1917</u>		
<u>29/1/17</u>	<u>of West</u>	<u>App Hope</u>	<u>26/1/17</u>	<u>13213</u>
	<u>VI. n. 30.12.17</u>			
<u>30.3.18</u>	<u>of ours</u>	<u>Wounded in action</u>	<u>27-3-18</u>	<u>13213</u>
	<u>3 days ill Ad returned up ex</u>	<u>87A</u>	<u>27.3.18</u>	<u>E.O. 9488</u>
	<u>10 days ill</u>	<u>87A</u>	<u>29/3/18</u>	<u>E.O. 21218</u>
	<u>of Brighton</u>	<u>87A</u>	<u>3-4-18</u>	<u>21308.3</u>
	<u>to England</u>			
	<u>W. Kelly</u>			

[Handwritten signature]

(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, Shoering-Smith, &c. W. 2184-251185 16000 1/17 (2727) S P & Co, Ltd. Forms B. 103/4 L. 134. P.T.O.

Casualty Form—Active Service.

Regiment or Corps 12th Newfoundland Regt. Regimental Number 1514 7064
 Rank Pte Surname Vaters Christian Name J.
 Religion meth Age on Enlistment 21 years 4 months.
 Enlisted 20/11/16 Terms of Service (a) duration of war Service reckons from (a)
 Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended Re-engaged Qualification (b) _____
 or Corps Trade and Rate _____
 Signature of Officer i/c Records.

COPIES SENT

To _____
 M of M _____
 U.C. IN _____
 DATE _____
 1918

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 56, 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. 56, or other official documents
		Embarked ... <u>Southampton</u>			<u>24.8.16</u>
		Disembarked... <u>Harbour</u>			<u>25.8.16</u>
		Joined Battalion		<u>3 SEP 1916</u>	
	<u>1407A.</u>	<u>GSWtdan base</u>	<u>Colts</u>	<u>13.10.16</u>	<u>6204361</u>
	<u>A.S. Asturias</u>	<u>Invalided to England</u>		<u>25/10/16</u>	<u>W 3083</u>
		<u>ex Red C. Hosp. La Tourquet</u>			
		<u>G. H. L. L.</u>			
		<u>W. H. H. H.</u>			
		LIEUT. COLONEL.			
		Officer i/c Regular ... Co. 1			
		General Headquarters, C.I. 1. Nelson.			

(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.

L. LOWY & PAUL, PRES.
H. H. HARGIS, VICE PRES.
S. B. PAUL, SECY. TREAS.

PAUL & MAYER CO.

627 WEST LAKE STREET

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113 BROADWAY
TEL. WATSON 5740

2064

May 13 1936

To whom it may concern,

Corporal James Vater 2064
Company C. First Royal Newfoundland Regiment
has lost his discharge and wishes to
get a duplicate copy of same.

Enlisted in St. John's Nfld. July 8 1916
and was discharged in November 28 1918 at
St. John's Nfld.

Kindly mail same to

James Vater
53 Bond St.
New York City

% Frank A. Volino



June 8th., 1936.

THIS IS TO CERTIFY THAT

#2064, Corporal James Vater, enlisted
in the Royal Newfoundland Regiment January 8, 1916.
Wounded left arm, October 13, 1916; wounded Lip,
March 27, 1918.

Discharged medically unfit October 29,
1918.

J. A. McGrath,
Clerk, Dept. of War Pensions.

June 8th., 1936.

Dear Sir:

In reply to your letter of May
13th., I beg to enclose herewith copy of your
Discharge, as requested by you.

Yours faithfully,

J. A. McGrath,
Clerk, Dept. of War Pensions.

Mr. James Vaters, c/o F. A. Voline,
53 Bond Street,
New York City

SM/
Encl. 1

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

V. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[64] W 0017/7124 1000s 2/15s 22 5GForms
B. 121
23.

Regiment of

21. Newfoundland Regt

Number of Sheets

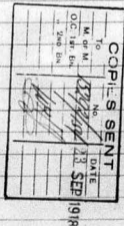
Signature of O. C. Company

*To: [Signature]
[Signature]*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No. <i>7064</i>	<i>Vaters J</i>	Age on <i>21</i> years <i>4</i> months	<i>As before</i>		
Joined _____ Date _____		Place and Date of Enlistment) <i>St Johns Nfld Dec 9/16</i>	Religion <i>Meth.</i>		
Joined _____ Date _____		Period of { with Colours _____ years. with Reserve _____ years.	Place of Birth <i>St Johns Nfld</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
		<i>Me</i>							

To be carried over



Army Form B. 121.