



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 873

Name in full Charles Joseph Vavasour Age 22
72 Pleasant Street

Address

Married Single Height 5'7" Weight 126

Color Fair Hair Brown Eyes Brown

Other distinguishing marks None

Nearest relative Hugh Vavasour (Father)

Address 72 Pleasant St.

Dependents None

Occupation Salesman Present Wage \$600.00 per year

Previous service

Decorations

General Remarks Enlisted 21st Jan 1914

Date of Enlistment 21st Jan 1914

I, Charles Joseph Vavasour, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Charles Joseph Vavasour

Declared before me this 16th day of January 1914

Eric Shyle

DESCRIPTIVE REPORT ON ENLISTMENT.

(To correspond with Entries on the Medical History Sheet.)
Applicable to all ranks.

Reg. No. 873

Name Charles Joseph Vavasour
 Apparent age 22 years months. Height 5 feet 7 inches.
 Chest measurement { Girth when fully expanded inches.
 { Range of expansion inches.
 Distinctive marks Color: Fair, Hair: Brown, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Hugh Vavasour, 72 Pleasant St., St. John's
 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 | Regt. 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>2/1/15</u> | | | | | | | | | |
| Joined at <u>St. John's</u> on <u>2nd January '15</u> | | | | | | | | | |
| <i>Discharged 13/1/19</i> | | | | | | | | | |
| <i>Embarked S.S. Stephens Adams 100th Embarked M. & F. 20th Disembarked Rev and entrained for Cairo 31st Embarked for Gallipoli 13th Landed Sulva Bay night of 19-20 Sep. 15</i> | | | | | | | | | |
| <i>Admitted Corp Hudson Diarrhoea 23-12-15 with Battalion Day 16th Embarked Fort St. 14th</i> | | | | | | | | | |
| <i>Disembarked Agassellan 22nd Admitted 87 F.A. Mount of Marine 19th Lds. to duty 28th Recorded 1-7-16</i> | | | | | | | | | |
| <i>Admitted Corp Balyne P.S. M. unit 3-7-16 Inv. to England 27th Admitted Handwith 2-7-16 Furlough then attached depot 15th Embarked B. & F. Baudemar 1-3-17 Reattached Depot 18-4-17 Admitted Cheselton Hospital Epitheli 2-11-18 Discharged Corp attached 6th Employment Company 6th station. To Newfoundland for discharge 12th Arrived Newfoundland 21st</i> | | | | | | | | | |
| <i>Demobilization St. John's 13-2-19</i> | | | | | | | | | |
| Total Service forfeited as above | | | | | | | | | |
| Total Service towards Engagement to <u>13-2-19</u> (date of discharge) <u>4</u> years <u>43</u> days | | | | | | | | | |
| " " " Pension " " " " " " " " " " " " | | | | | | | | | |

Parasour, Chas.

873

Gay Sept

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

MEDICAL HISTORY

OF

Surname Davason

Christian Name Charles Joseph

Table 1.—GENERAL TABLE.

| Birthplace:—Parish | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|---|---------------------|---------------|------------------|
| | County | | County | |
| Examined | on <u>3rd</u> day of <u>Dec</u> 191 <u>4</u> | at <u>St John's</u> | on | day of 191 |
| Declared Age | <u>27</u> years | days | years | days |
| Trade or Occupation | <u>Salesman</u> | | | |
| Height | <u>5</u> feet | <u>7</u> inches | feet | inches |
| Weight | | <u>126</u> lbs. | | lbs. |
| Chest Measurement | Girth when fully expanded... <u>31</u> inches | | | inches |
| | Range of expansion... <u>34</u> inches | | | inches |
| Physical Development | <u>11</u> | | | |
| Vaccination Marks | Right | Left | Right | Left |
| | Arm | | | |
| When Vaccinated | <u>1905</u> | | | |
| Vision | R.E.—V= | | R.E.—V= | |
| | L.E.—V= | | L.E.—V= | |
| (a) Marks indicating congenital peculiarities or previous disease | <u>(a)</u> | | | |
| (b) Slight defects but not sufficient to Cause Rejection | <u>(b)</u> | | | |
| Approved by (Signature) | <u>Cluny Macpherson</u> | | | |
| (Rank) | <u>Capt.</u> | | | |
| | Medical Officer. | | | Medical Officer. |
| Enlisted | at <u>St John's</u> | at | | |
| | on <u>2nd</u> day of <u>Jan</u> 191 <u>5</u> | on | day of 191 | |
| Joined on Enlistment | <u>1st Newfoundland Regt.</u> | <u>873</u> | Corps. | Regtl. No. |
| Transferred to | | | | |
| Became non-effective by | | | | |
| | on | day of 191 | on | day of 191 |
| (Signature) | | | | |
| (Rank) | | | | |

Table II.—Only for admissions to hospital or to the sick

in the case of Warrant Officers treated in quarters

| Name of Hospital. | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number Days in Hospital | Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of relapses 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 | | | | |
| 8 th LONDON GENERAL HOSPITAL WANDSWORTH. | 3 | 7 | 16 | 5 | 8 | 16 | <i>Syph. Latent. R. High <u>IV</u> 1. IX 1.</i> | 34 | <i>from severe neuralgic pain. In evidence of injury to lower limbs. Healed. S. & G. follow.</i> | <i>H. P. S. & Hunt. Capt. A. G. Hunt.</i> |
| SPRING GROUND MILITARY HOSPITAL, CHICHESTER. | 21 | 1 | 18 | 26 | 2 | 18 | <i>Syphilis</i> | 37 | <i>Tranquillized as I.P. Discharged after a full course of S. & G. I.M. & Hg. Was - de</i> | <i>Dr. Stewart Dr. Stewart</i> |

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

| Date | Brief Details, and Signature |
|--------------------|--|
| | T. V. <u>2</u> |
| | Dw. V. <u>2</u> |
| | Vacc. |
| | Fit for Foreign Service |
| | T. A. B. { 30. 4. 17. 2 { 9. 5. 17. <i>W. S. M. [Signature]</i> |
| 30. 4. 18 A F H | |
| 30 NOV 1918 | HAZELEY DOWN CAMP. <i>Recommend Repatriation</i> ROYAL NEWFOUNDLAND REG. <i>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as [B] for discharge on Demolition. Medical category [C].</i> Date of S.M.B. <u>22. 1. 19</u> <i>[Signature]</i> Captain Discharge Depot, Newfoundland |

TABLE IV.—SERVICE TABLE.

| Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation. | Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation |
|------------------------|--------------------------------|--------------------------------------|----------------------|--------------------------------|-------------------------------------|
| St John's Newfoundland | Jan 2. 15 | 20 Mar. 15 | | | |
| T.S. "Stéphano" | 20 Mar. 15 | 22 Mar. 15 | | | |
| T.S. ORDUNA | 22 Mar. 15 | 30 Mar. 15 | | | |
| Edinburgh Castle | 30 Mar. 15 | | | | |

Civil Re-establishment Committee

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

To resume previous occupation
Hardware Clerk

Charles V. Vasson
Signature of Man.

Reg. No.

W. Dicks Capt.
Signature of the Vocational Officer or his Representative.

Place

St John's

Date

29 11 19

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LAST PAY CERTIFICATE

ORIGINAL

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, 26/5/17.

Regtl No. 873 Rank Pk. Name Davasour Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18 Authority _____ Cause _____

| DR. | | STATEMENT OF ACCOUNT | | | | | CR. | | | | | | |
|----------------------------|------------------|----------------------|---|----|----|----|--|-----|----|---|----|---|-----|
| PARTICULARS | | \$ | ¢ | £ | s | d | PARTICULARS | | \$ | ¢ | £ | s | d |
| From 23-11-18 To 12-12-18. | Balance Dr. from | | | | | | Balance Cr. from <u>H. Pay Book</u> | | | | | | |
| | Allotment days @ | | | | | | Pay 19 days @ \$ <u>1⁰⁰</u> | 119 | 00 | 1 | 3 | 0 | 0. |
| | Cash Payments: | | | | | | Field Alice 19 days @ \$ <u>10/100</u> | 11 | 90 | | | | |
| | <u>18 Pay.</u> | | | 1 | 10 | 0 | | 120 | 90 | 1 | 4 | 5 | 11. |
| | <u>2nd "</u> | | | 5 | 14 | 0 | Other Allces days @ \$ | | | | | | |
| | Other Debits: | | | | | | Other Credits: | | | | | | |
| <u>B. Damages</u> | | | | | 6 | | | | | | | | |
| <u>Miss Slopp</u> | | | | | 1 | 5 | | | | | | | |
| Total Debits | | | | 17 | 5 | 11 | Total Credits | | | | 17 | 5 | 11 |
| Balance due by Paymaster | | | | | | | Balance due to Paymaster | | | | | | |
| | | | | 17 | 5 | 11 | | | | | 17 | 5 | 11 |

CHECKED: [Signature]
 PERIOD: 18/12/18

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

HAZELEY DOWN CAMP. DEC 11 1918 191
 (Place) (Date)

Made up/Checked in accordance with information received in the Pay & Record Office [Signature] O.C. "7" Company. London to 19/12/18. and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
Dec. 19th. 1918.

Chief Paymaster & Officer i/c Records.

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.

- ROYAL NEWFOUNDLAND REG.
1. Unit and Corps.....
 2. Regtl. No. *873* 3. Rank. *Pte*
 4. Name *VA VASOUR.*
(Surname) (Christian Names)
 5. Age last birthday.....
 6. Posted for duty on..... at.....
 in category (or grade).....
 7. Former Trade }
 or Occupation }
 - 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (b) Date of Discharge ;
 (b) Where (c) Cause of Discharge.
 (c) Opinion of Court (d) Particulars of Pension or Gratuity
 (if any)

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

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to 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. 10). If no disability enter "nil."
G. S. W. wound to thigh (slight).
11. Date of origin of disability. *July 1916.*
12. Place of origin of disability. *Beaumont Hamel.*
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.
*Both wounds now healed
 kept to the force with
 Brnd (Disability)*

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.

14. State whether the disabilities are
- | | | |
|--|-------------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | <i>Yes</i> | ..... |
| (ii.) Previous active service | <i>No</i> | ..... |
| (iii.) Climate in pre-war service | <i>No</i> | ..... |
| (iv.) Ordinary military service before the war | <i>No</i> | ..... |
| (v.) Serious negligence or misconduct on the man's part. } | <i>No V.D.S (cured)</i> | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *N.A.*

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.)

He is thin pale and debilitated, unfit to do any hard work probably due to result of old venereal dis. (incured)

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

20. Do you recommend—
(a) Discharge as permanently unfit?
(b) Change to United Kingdom?
Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation (1)
M. R. C. P. M. D.
ROYAL NEWFOUNDLAND REG.
Medical Officer in charge of case.

Station **ZEL**
Date **30 NOV 1918**

* 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

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered. *S.S.W. left wrist*
(b) The present condition thereof. *Two scars near left wrist healed
Scar right thigh near hip healed as disability
Some weakness remaining on left hand.
Pulse 88. Heart normal*

22. State whether the disabilities are:—
- | | | |
|--|---------------------|-------------------|
| | (a) Attributable to | (b) Aggravated by |
| (i.) Service during the present war | <i>Yes</i> | ..... |
| (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 | <i>No</i> | ..... |
- Give details:

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

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.

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). *less than 20%*
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army? ✓

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

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

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only? *Yes*
- 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)?

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?

29. Does the soldier require:—

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

Signatures:

Station *Lophus*

Date *Jan 19/19*

Date *Jan 22 1919*

Date *No*

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

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

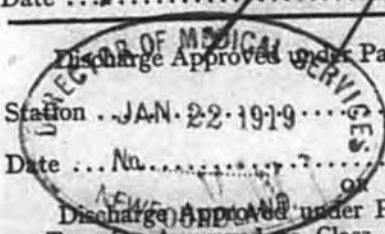
Date

O.C. Discharge Centre.

President or Chairman.

Members.

Only applicable in cases of Patients in Hospitals.



Casualty Form—Active Service.

990

Regiment or Corps Newfoundland
 Regimental No. 873 Rank Pvt Name Vadasovics
 Enlisted (a) Jan 2/15 Terms of Service (a) 14 yrs Service reckons from (a) Jan 2/15
 Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____
 Extended Duration of War re-engaged Aug 15/15 Qualification (b) _____

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|--------------|----------------------|--|-----------------------|----------------|--|
| Date | From whom received | | | | |
| | | Embarked St. John's, Nfld. | | 20.3.15 | |
| | | Disembarked Alexandria | | 1.9.15 | |
| | | Embarked for Gallipoli | | 13.9.15 | |
| <u>20/16</u> | <u>Lowland Field</u> | <u>Admitted Banks</u> | <u>L.F.A. unit</u> | <u>23/15</u> | <u>C 5483</u> |
| <u>23/16</u> | <u>and</u> | <u>unit</u> | <u>Battalion unit</u> | <u>6/16</u> | <u>B 213</u> |
| | | Emb'kd Port Suez | | 14.3.16 | |
| | | Disemb'kd MARSEILLES | | 22.5.16 | |
| | <u>89 L.A.</u> | <u>Admitted</u> | <u>ERS</u> | <u>19.5.16</u> | <u>ED 10018 22.5.16</u> |
| | <u>ERS</u> | <u>Dis to duty</u> | <u>unit</u> | <u>28.5.16</u> | <u>ED 10749 3.6.16</u> |
| | <u>Haubrey</u> | <u>Dis to duty</u> | | <u>3.7.16</u> | <u>W 3083</u> |

Al Clerk CAPTAIN.
 FOR O.F.O. INFANTRY RECORDS
 G.H.O. 310 ECHELON.
 (P.T.O.)

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form—Active Service.

Rank Pte Regiment or Corps Newfoundland
 Surname Varasour Christian Name Charles
 Religion C of E. Age on Enlistment 22 years — months.
 Enlisted (a) St Johns Terms of Service (a) D. of W. Service reckons from (a) 2/1/15
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____



| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 26, 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. 26, or other official documents |
|----------------|--------------------|---|---|-------------------|---|
| Date | From whom received | | | | |
| | | | Emarked <u>Hampton</u> | <u>1.3.17</u> | |
| | | | Disembarked... <u>Rouler</u> | <u>4.3.17</u> | |
| | | | Joined Battalion | <u>7 MAR 1917</u> | |
| <u>20.3.17</u> | <u>S. A. G.</u> | <u>Transferred to England</u> | | <u>2.4.17</u> | <u>RR No 7 256/100</u> |
| | | <u>attached Depot</u> | | <u>18/4/17</u> | |
| | | | <u>Woshier</u> FOR | | |
| | | | <u>Q. J/c No. 1 Reg. Infantry Section</u> | | |
| | | | <u>G.H.Q., 3rd Echelon</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) See Fuller, Shoeing-Smith, &c.

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, 26/5/17

Regtl No. 873. Rank Pte. Name Navasour. C.J. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18. Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

| PERIOD: | PARTICULARS | £ | | | CR. | | |
|---------------------------|----------------------------|---|---|--------|------------------------------|-------|--------|
| | | £ | s | d | £ | s | d |
| From 23-11-18 To 20-12-18 | Balance Dr. from | | | | Balance Cr. from | | |
| | Allotment days @ | | | | Pay 19 days @ \$1.00 | 19 00 | 3 00 |
| | Cash Payments: | | | | Field Alice 19 days @ \$1.10 | 1 90 | |
| | <i>19th Pay</i> | | | 1 10 0 | Other Allces days @ \$ | 20 90 | 4 5 11 |
| | <i>22nd</i> | | | 5 14 0 | Other Credits: | | |
| | Other Debits: | | | | Total Credits | | 7 5 11 |
| | <i>B. Damages</i> | | | | Balance due to Paymaster | | |
| | <i>Mi Stopp</i> | | | 6 | | | |
| | | | | 1 5 | | | |
| | Total Debits | | | 7 5 11 | | | |
| Balance due by Paymaster | | | | | | | |

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

HAZELEY DOWN CAMP. **DEC 11 1918** 191
(Place) (Date)

J. W. ...
O.C. "7." Company.
to 1

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

Chief Paymaster & Officer i/c Records.

SYPHILIS CASE-SHEET.

Regtl. No. *873* Rank and Name *Wadman Varsova* Corps *Newfoundland*
 Placed on Syphilis Register at *Chiseldon* on *22-1-18* No. in Register *998*
 Disease contracted at *Opshire* Primary sore appeared on (date) *14-1-18*

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site *ulcer size 3/4 inch x segment mucous membrane of prepuce extending to sulcus margins almost 1/2 inch wide, infiltrated, base indurated, slight depression in center covered with gray slough surrounding induration*

Lymphatic glands *R Inguinal (marked) & L inguinal Adenitis. Lymphatic Adenitis*

Skin (nature and distribution of rash) *faint macular eruption on flanks lower part of chest & abdomen, between shoulders & lumbar region*

Mucous membranes *Injection of soft Palate & Uvula.*

Other symptoms *Slight Arterial Adenitis.*

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum—Method employed (original or modification)

Wassermann reaction (Result (positive or negative))

Station *Chiseldon* Date *22-1-18* Signature of M.O. *D. J. Stewart*
Lieut. R. A. M. C.

Struck off Syphilis Register at _____ on _____

Cause of being struck off Register { (a) Recovered
 (b) Transferred to Army Reserve
 (c) Discharged from Army }

Station _____ Date _____ Signature of M.O. _____

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line.
 P.F.—Blood test due 15.3.18.
 The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

| Station | Date | Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.) | Weight checked, without boots—the | Urine | | Wassermann Reaction | | Treatment | | | Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialed) | | | |
|-----------|---------|--|-----------------------------------|-------------|----------------|---------------------|---------------|-------------------|--------------|--------------|--|-----------|-----------|---------------|
| | | | | Normal (N.) | Albumin (Abs.) | Method | Original (O.) | Modification (M.) | Positive (+) | Negative (-) | | Arsenical | Mercurial | Other Methods |
| | | | | | | | | | | | | | | |
| Chisleton | 22-1-18 | Admitted to Hospital. | | | | | | | | | | | | |
| | 24-1-18 | | | | N | | | | | | | | | |
| | 28-1-18 | | | | N | | | | | | | | | |
| | 30-1-18 | | | | | | | | | | | | | |
| | 1-2-18 | | | | N | | | | | | | | | |
| | 6-2-18 | | | | | | | | | | | | | |
| | 11-2-18 | | | | N | | | | | | | | | |
| | 13-2-18 | | | | | | | | | | | | | |
| | 18-2-18 | | | | N | | | | | | | | | |
| | 20-2-18 | | | | | | | | | | | | | |
| | 27-2-18 | | | | N | | | | | | | | | |
| | 28-2-18 | | | | | | | | | | | | | |
| | 1-3-18 | | | | N | | | | | | | | | |
| | 8-3-18 | | | | N | | | | | | | | | |
| | 14-3-18 | | | | | | | | | | | | | |
| | 22-3-18 | Discharged to Duty | | | | | | | | | | | | |
| | | Blood test due 27-6-18 | | | | | | | | | | | | |

Dr. Stewart
Secy R.A.M.C.

FORM to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease. (2) for furnishing information between Medical Officers when cases are transferred from one Station to another.

| Corps | Company | Regimental No. | Rank and Name | * Date on which case originally came under treatment |
|----------------------|---------|----------------|--------------------------------|--|
| Newfoundland Regt | "F" | 843 | B nd Lt. Vossour. C | 22-1-18 |
| | | | | <p style="text-align: center;">REMARKS</p> <p>Discharged after full course with Wassermann Negative</p> <p>To report again in 3 Months for further test. He should report to the nearest Military Hospital on - 22-6-18</p> |

To _____

Station and date

Chesleron 22-3-18

J. Stewart Lt. Col. Rame

The Officer who places the man under surveillance will prepare this form in duplicate. One copy will be forwarded to the Officer Commanding, and the other to the Medical Officer who will have the surveillance of the man. When any circumstances arise likely to interfere with the regular attendance of men on the continued treatment list, such as transfer to another station, musketry courses, imprisonment, and especially furlough, their Commanding Officer will apprise the Medical Officer of the fact.

* When cases are transferred Medical Officers will be careful to insert the date on which the case was first placed on a syphilis register, irrespective of the number of registers the case may have passed through.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
 Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Vaugeois Christian Name Charles J.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St. John's County Newfoundland

Examined ... { on 2nd day of January 1915,
 at St. John's

Declared Age ... years ... days.

Trade or Occupation ...

Height ... feet ... inches.

Weight ... lbs.

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

Physical Development ...

Vaccination Marks { Arm ... Right Left
 Number

When Vaccinated ...

Vision ... { R.E.—V=
 L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... { (a)

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



Approved by (Signature) _____
 (Rank) _____

Medical Officer.

Enlisted ... at St. John's
 on 2nd day of January 1915

| Corps. | Regtl. No. |
|--------|------------|
| | <u>873</u> |
| | |
| | |

Became non-effective by _____

on _____ day of _____ 1915
 (Signature) _____
 (Rank) _____

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name Charles Joseph 2. Surname Navarro

3. Rank Private 4. Regtl. No. 873

5. Address in full to which future payments of gratuity are to ~~far~~ be forwarded 72 Pleasant Street

St. Johns Newfoundland
6. Date of enlistment in the Regiment Jan. 27 1915

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge not applicable

8. Relationship of such dependents not applicable

9. Address in full of such dependent not applicable

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

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

12. Give total length of time which you served on active service, whether in Nfld. or Overseas Three years and nine months Overseas (3 to 9 mths)

total: four years and forty three days with the colors [4 1/2 days]

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

No ~~Not applicable~~

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

No

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

No

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

No

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

not applicable

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

No

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

No - not applicable

19. Are you now serving in the Regt.? If not give:- (a) Date of discharge.....

Feb 13th 1919

No

Demobilization and unfit for General Service "Medically"

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.....

20 landed at Suva bay Sept 20th 1915 participated in the evacuation of the aforesaid place also at Cape Hillis until Jan 1st 1916 Camped at Day Egypt Jan Feb and part of March 1916 left Day Egypt in March 1916 for France served in France until wounded on the 12th day of July 1916 also served in France from the 3rd of March until the 17th of April 1917.

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: *Charles Joseph Vasson*

Place of Residence: *72 Pleasant St. Boston*

Declared before me at:

This *28th* day of *February* 19*19*.

[Signature]
Signature of Notary Public of the
State of Massachusetts, Stipendiary Magistrate,
Notary Public, Justice of the Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.

| Date paid | Paid Soldier | Paid Dependent | War Service Gratuity | Not amount due |
|-----------|--------------|----------------|----------------------|----------------|
| | | | <i>6.00</i> | <i>420.00</i> |
| | | | | |
| | | | | |

Certified Correct.

Paymaster.

February 13, 1919

#873 Pte. Charles J. Vavasour,
#72 Pleasant St.,
City.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 912."

Yours truly,

Captain,
Paymaster & O.i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 875 Rank Private Name Charles Vavasour
 Intended place of residence 1 Pleasant St. St. John's
 2. Occupation Clk.
 Classification of soldier B Medical Category C

3. The above named man is discharged in consequence of DEMOBILIZATION.

ELIGIBLE for POST DISCHARGE PAY

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

Place JAN 20 1919
 Date
W. Kelly Capt.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date St. John's 30-1-19
Charles J. Vavasour
 Signature of soldier
W. Dicks Capt.
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date Jan 27th 1919
St. John's
Charles J. Vavasour
 Signature of soldier
W. Dicks Capt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 3. 12. 14 No of days on Military Service
 Discharged from service 29-1-19 plus 14 days Service 1538 Days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
R. H. Lant Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JAN 30 1919

CONFIRMATION OF DISCHARGE

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

Place St. John's, Nfld
February 13/1919
M. Bowley Capt.
 Officer in Charge of Records
 The Royal Newfoundland Regiment

221 B 2079/1912

30
13
28
31
13
13

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of Newfoundland

Number of Sheet /

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.20,712-a.

Signature of O. C. Company

D. March
Capt.

| Regimental Number and Name | | Enlistment | | Trade | Good Conduct Badges, Service Pay or Proficiency Pay | | | |
|----------------------------|------------|--------------------|--------------------------|-----------------|---|--|--|--------------|
| No. | <u>873</u> | Age on | <u>22</u> years - months | <u>Saltman</u> | | | | |
| <u>Varvouser Co.</u> | | Date of Enlistment | <u>Jan 2 1915</u> | Religion | | | | |
| Joined | Date | Period of | with Colours | <u>C. of E.</u> | | | | |
| Joined | Date | | | | | | | with Reserve |
| Joined | Date | | | | | | | |
| 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 |
|---|---------------------------------|----------------------|----------------------|--|--|---|---|---|-----------------------------|
| <u>Stob's Camp</u> | <u>4/1/15</u> <u>7/1/15</u> | <u>PLC.</u> | | <u>Absent 2atto chace.</u> <u>Refusing to obey an order.</u> | <u>Cpl Mew</u> <u>Capt Crow</u> <u>Sgt Green</u> | <u>2 days CC.</u> <u>5 days CC.</u> | <u>7/1/15</u> <u>8/1/15</u> | <u>Capt D. March</u> <u>do</u> | <u>AKK</u> <u>PHH</u> |
| <u>Barry,</u> <u>Hazelton Barracks</u> | <u>10/9/17</u> <u>5/7/18</u> | <u>"</u> <u>"</u> | | <u>Theft.</u> <u>Improperly dressed in Winchester</u> <u>about 9.15 P.M.</u> | <u>Pvt. J. Shears</u> <u>C. S. M. White</u> | <u>14 days detention</u> <u>2 days R. B.</u> | <u>10/9/17</u> <u>10/1/18</u> | <u>Sgt. J. 10. of arch.</u> <u>Capt. P. Kern</u> | <u>PHH</u> <u>W.P.W.</u> |
| | | | | To be carried over | | | | | |

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 873 Rank Pte Name Kavassow Charles
 Date of Enlistment 3-12-14 Address St Johns District St Johns
 Occupation Clerk Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating less than 20%
 Passed to Demobilization Officer with following documents:—

| | | | | |
|-----------|--------|--------|-------------|--------------|
| N.F. P/36 | B 268 | B 121 | N.F. Med. | D.F. 1 |
| B 178 | W 3494 | B 122 | Board 1st | " 2 |
| B 178a | D 400A | B 1915 | do 2nd | " 3 <u>3</u> |
| B 179 | D 400B | Form L | do 3rd | " 4 |
| B 179a | D 400C | Form K | do 4th | " 5 |
| B 179b | B 103 | ME 2 | <u>1238</u> | " 6 |
| B 179c | B 120 | M 93 | <u>1239</u> | |

Date

25-1-19

W. H. L. Lark
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Charles J. Kavassow

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied

Joseph H. Brown

Date

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *958* to his home
 at *Alpen* and Release Certificate No. *958* issued
 Date *24-1-19* *C.B. Dicks Capt.*
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to *13-2-19*
 Date *20-1-19* *W. H. Key Capt.*
 Depot Paymaster.

Discharge approved for *24. 1. 19*

Forwarded with following documents to O.C Discharge Depot.

| | | | | | |
|-----------|--------|--------|-------------|--------|---------------|
| N.F. P/36 | B 268 | B 121 | N.F. Med | D.F. 1 | <i>Form B</i> |
| B 178 | W 3494 | B 122 | Board 1st | " 2 | |
| B 178a | D 400A | B 1915 | do 2nd | " 3 | |
| B 179 | D 400B | Form L | do 3rd | " 4 | |
| B 179a | D 400C | Form K | do 4th | " 5 | |
| B 179b | B 103 | ME 2 | <i>1238</i> | " 6 | |
| B 179c | B 120 | M 93 | <i>1239</i> | | |

Date *30 1-19* *C.B. Dicks Capt.*
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
 Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date *JAN 30 1919* *R. H. Sait Capt.*
 O. C. Discharge Depot.

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

Date

Col. Vanseur.

C. 8/3.

P. 0.

Admitted 3 7 16

Army Form W. 3016.

No. _____

Date Aug 5th 1916.

(1) To the Officer i/c Records,

58 Victoria St SW

(Station.)

(2) The Officer Commanding,

Newfoundland Contingent

Ops

(Station.)

(3) The Paymaster,

58 Victoria St

SW

(Station.)

Regimental No. 873

Rank and Name Pte. Vavasour, G.

Regiment or Corps 1st Newfoundland Contingent

has been granted a furlough from Aug 5th to Aug 14th

His address while on leave will be:—

58 Victoria St - S.W.

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

I consider he is fit for ~~Duty~~ and likely to be fit for service overseas
Light duty without 3 months.

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

Registrar, R.A.M.C.T.

Officer in charge 3rd 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.

ORIGINAL



NEWFOUNDLAND CONTINGENT

CANCELLATION of ALLOTMENT.

1. I, (No) 873 (Rank) Pte. (Name) Vavasour, B.

hereby apply for cancellation of Allotment made by me on N.F.P/11

No. 953 dated March 27th/15 in favour of

A.A. Vavasour

for \$ - cts 50 per diem.

Such cancellation to take effect on the 31st day of

December 1917

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.

Dated at

Newton Park School,
Apr.
Nov. 20th 1917

Chas Vavasour
Allotter.

Approved and Witnessed:

C. L. ...
O.C. "B" Company.

Noted
20/11/17
E. J. ...

NOTED
W. Markin
Date 22/11/17
P. O. ...

To be made out in TRIPPLICATE and delivered at the Pay & Record Office not later than date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

LAST PAY CERTIFICATE

OFFICE COPY N.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, 26/5/17.

Regt No. 873 Rank Pte. Name Yavasour. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT OR.

| PERIOD: From 23-11-18 To 20-12-18. | PARTICULARS | | | | | PARTICULARS | | | | |
|------------------------------------|-------------|---|---|---|---|--|-----|----|----|-------|
| | £ | s | d | £ | s | d | £ | s | d | |
| | | | | | | Balance Cr. from <u>H. Pay Book</u> | | | | |
| | | | | | | Pay 19 days @ \$1 ⁰⁰ | 119 | 00 | 13 | 0 0 |
| | | | | | | Field Allce 19 days @ \$. ¹⁰ / ₁₀₀ | 11 | 90 | | |
| | | | | | | Other Allces days @ \$ | 120 | 90 | 14 | 5 11. |
| | | | | | | Other Credits: | | | | |
| | | | | | | Copy sent to of to 21303/210 | | | | |
| | | | | | | Pa. 24-12-18. | | | | |
| | | | | | | Total Credits | | | 17 | 5 11 |
| | | | | | | Balance due to Paymaster | | | | |
| | | | | | | | | | 17 | 5 11 |
| | | | | | | | | | | |
| | | | | | | | | | | |

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

HAZELEY DOWN CAMP. DEC 11 1918 191
(Place) (Date)

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

Pay & Record Office, London,

Chief Paymaster & Officer i/c Records.

No. 10364/594

NEWFOUNDLAND CONTINGENT

68, VICTORIA ST.,
LONDON, W. 1.
N.F.P./79.
22 OCT 1917

From:
Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London. S.W. 1.

To:
Officer Commanding,
2/1st. Newfoundland Regt.
Ayr. N. B.

8th, October 1917

Oct 11 1917

Subject: 873, PTE. G. J. VAVASOUR

ANSWER

With reference to the following telegram from the Hon. the Minister of Militia, (5652) received 5/10/17,-

Receipt hereunder
[Signature]
Officer Comdg. 41 Battn.
1st Newfoundland Regiment

"Pay to 873 Vavasour ten
"pounds".

Cheque £10.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of Ten
pounds (£10.0.0) on account of cable remittance from Newfoundland.

[Signature]
Major,
Chief Paymaster & O. i/c Records.

G. J. Vavasour
No. 873 Rank Pte

873

Mr. Chas Navasoni

All

D^{to}
50

Hospital £ 1-10-0 -

Hospital 1-10. 4-6 -

Uniform 4-1-6 -

Leggins 9-2-6 -

Wash £ 14-18-6 -

Balance 17/3/14

From 18/3/16 - 5/8/16 = 1408 -

Ck 84-60 = 17-7-8

£ 41-2-7

14-18-626-2-1

23-12-11

WILL.

Name

Vaveson *FFF* *C*

Regtl. No.

893

Rank

Regiment

Date of:—

28/5/19

Receipt ...

Transfer ...

Final disposal and
to whom sent ...

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.

- ROYAL NEWFOUNDLAND REG.
- Unit and Corps.....
 - Regtl. No. 873 3. Rank Plt
 - Name YAVASOUR
(Surname) (Christian Names)
 - Age last birthday.....
 - Posted for duty on..... at.....
 in category (or grade).....
 - If the disability is an injury was it caused:
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
 - If a Court of Inquiry was held on an injury state:—
 (a) When (b) Date of Discharge ;
 (b) Where (c) Cause of Discharge.
 (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

- 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. wrist + thigh. (right)
- Date of origin of disability. July 1st 1916
- Place of origin of disability. Beaumont Hamel
- 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.
Both wounds now healed. Wrist 170th Force with Band (Delites).

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war *Yes*
 - (ii.) Previous active service.. .. . *no*
 - (iii.) Climate in pre-war service *no*
 - (iv.) Ordinary military service before the war *no*
 - (v.) Serious negligence or misconduct on the man's part. } *V.D.S. now cured*
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *na*

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

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

He is thin frail + debilitated unfit to do any hard work probably due to result gold venereal dis. (now cured)

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

20. Do you recommend—
- (a) Discharge as permanently unfit?
 - (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation
MR. APPROVED (1)

ROYAL NEWFOUNDLAND REG.

Medical Officer in charge of case.

Station *SELEY CAMP*
 Date *30 NOV 1918*

* 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

Medical Report on an Invalid.

Station HASLET DOWN CAMP.Date NOV. 30th. 1918.

1. Unit **ROYAL NEWFOUNDLAND.**
2. Regimental No. **873.**
3. Rank **PTE.**
4. Name **YAVASOUM. Charles**
5. Age last birthday
6. Enlisted $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$
7. Former Trade }
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit;
- (b) Regimental No.;
- (c) Date of Discharge;
- (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
(Other disabilities should be reported upon in answer to question No. 19).

G.S.W. WRIST & THIGH SLIGHT.

Statement of Case.

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

9. Date of origin of disability. **JULY 24 1916.**
10. Place of origin of disability. **BEAUMONT HANDED**
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **BOTH WOUNDS NOW HEALED. UNFIT TO GO TO FRANCE.**
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). **YES.**
- (b) constitutional or hereditary, and not aggravated by service during the present war. **NO.**
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. **V.D.S. CURED.**

13. What is his present condition? **HE IS THEN PALE & DEBILITATED & UNFIT FOR HARD WORK PROBABLY DUE TO RESULT OF OLD VENEREAL DISEASE.**
Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

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

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

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

If so—(a) When?

(b) Where?

(c) Opinion?

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

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

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

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

20. Do you recommend—

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

REPATRIATION. (1)

J. ST. P. KNIGHT. CAPT NFD. REGT.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

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

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

Opinion of the Medical Board

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

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

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease 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.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease. **G.S.W. LEFT WRIST. TWO SACRS NEAR LEFT WRIST HEALED. SCAR RIGHT THIGH NEAR HIP HEALED NO DISABILITY. SOME**

1. (a.) State whether the disability is clearly **WEAKNESS REMAINING IN LEFT HAND. PULSE 88** attributable to—

(i.) Service during the present war; **YES.**

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or **NO.**

(v.) Whether it is constitutional or hereditary.

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it? **G.D.W.**

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:— 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

LESS THAN 20%

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or **YES.**

(b) Change to England?

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—

N.S. FRASER

President.

Station **ST. JOHN'S.**

J.S. TAIT.

Members.

Date **JAN. 22nd. 1919.**

L.PATERSON. MAJOR.

Approved

Station

JAN 22 1919

(SGD) CLUNY MACPHERSON. MAJOR.

Administrative Medical Officer.

Date

No.

NEWFOUNDLAND.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 675 Rank Pte. Name Charles Vavasour
 Intended place of residence 72 Pleasant St. City St. John's

2. Occupation Clerk
 Classification of soldier R. Medical Category R.

3. The above named man is discharged in consequence of DEMOBILIZATION

ELIGIBLE FOR POST DISCHARGE PAY

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

Place ST. JOHN'S (SGD) C.C. Duley Capt.
 Date 30-1-19 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S (SGD) Charles J. Vavasour
30-1-19 Signature of soldier
 (SGD) C.B. Dicks Capt.
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S (SGD) Charles J. Vavasour
29-1-19 Signature of soldier
 (SGD) J. Daymond Sgt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 3-12-14 No of days on Military
 Discharged from service 29-1-19 Plus 14 days Service 1534

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S (SGD) R.H. Tait Capt.
 Date 30-1-19 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place St. John's Officer i/c Records
 Date 30-1-19 The Royal Newfoundland Regiment

Receipt for Army Book 64

No. 873 Name C. Vavasour

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

Name Charles J. Vavasour

Date Aug 27 / 1920

Place 72 Pleasant Street
St. John's

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

10

C.R. 873

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 873 Name Chas. J. Vavara

Witness. W. Bandy

Date 4/12/19

Place St Johns

C.R. 873

RECEIPT FOR ISSUE OF
RIBAND OF BRITISH WAR MEDAL-1914-1919.

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

NOTE.....Chas J. Vavasour (873)

(Date).....Nov 8th.....1919

(Place).....72 Pleasant Street....."City"

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 Star.

C.R. 873

I certify that I have received an issue
of 3 inches of Riband of 1914-15 Star.

Name *Chas. J. Rawson*

Date *21/3/19*

Place *St. Johns*

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. J. Readell
Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue, having served on*

from 20th ~~Jan~~ *Apr* 1915 to 31st ~~Dec~~ *Dec* 1915. in Gallipoli
(Date) *21/3/19* (NO) *873* (Rank) *Plt.* (Name) *G. J. Varroons*
(Place) *St. Johns*

also
Arrived
in
the
undertaken
places

*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, ~~and~~ ~~Western~~ ~~Egyptian~~ Frontier. (Surge)

C.R. 873

Extract of Daily Orders, Part II, Depot St. John's,
dated 14/2/19.

The discharge of the undernoted on demobilization
has been CONFIRMED by Officer i/c Records on noted date.
13/2/19.

#873 Pte. Chas. Vavasour.

LANDFORD BOND

STANDARD QUALITY

C.R.

873

Extract from Daily Orders part 11, Depot
St. John's dated Feb. 1st., 1919.

The discharges of the undernoted on demobilisation
have been approved by C. C. Discharge depot from 30-1-19.

#873 Pte. C. Vavasour.

C.R. 873

Extract from Medical Board held Jan. 22nd, 1919.

873 Pte. C.J. Vavasour.

Recommended Discharge as permanently Unfit.

C.R. 873

Extract from Daily Orders part 11, Depot St. John's
dated December 23rd., 1918.

The u/m returned from Overseas and reported at Depot 12-21-18.

#873 Pte. C. J. Vavasour.

BC.

C.R. 873

Extract from Nominal Roll of repatriation Craft No. 79 per
S.S. CORNICAY, which embarked at Tilbury Docks 18/12/18.
Embarked from 2nd., Battalion, Winchester.

#873 Ste J. C. Vatacour.

C.R. 873

Extract from Casualties received from P' & R. Office, London,
Mar. 22, 1918.

873 Pte. Vavasour, C.

Discharged Hospital, attached 615th Employment Company, Chiseldon.

C.R. 873

Extract from Nominal Roll Draft (All Ranks) to 1st Bn.
B&F. Embarked Southampton. 1-3-17.

873 Pte. C.J. Vavasour.

The Band returned to Ayr, 18-4-17.

C.R. 873

Extract from Nominal Roll of MFLd, Regt. Draft No.20
Embarked from Southampton, for the B.E.F. 1-3-17 and
returned to Ayr, 18-4-17.

873 Pte. C.J.Vavasour,

C.R. 873

Extract of Casualties received from Pay & Record
Office, London, dated August 7, 1916.

#873 Pte. C. Vavasour. ✓

Hosp

Discharged from/granted furlough 5/8/16 to 14/8/16
fit for Light Duty "B" likely to be fit for service
overseas within 3 months.

C.R. 873

Extract of Casualties received from Pa. & Record Office,
London, dated July 31, 1916.

(Extract from Army Form B 213, from O.C. 1st. Wfld. Regt.
dated 11/7/16.)

#873 Pte. C. Vavasour. ✓

Wounded in Action 1/7/16.

C.R. 873

Extract from List of Men transferred to Convalescent Homes dated July 31st 1916, from Officer Commanding 3rd London General Hospital to Officer i/c Records, Newfoundland Contingent, 58 Victoria St., S.W.

In accordance with your Memo of 30th June, I beg to inform you that the undermentioned man was transferred to the Convalescent Home named on the date specified:

873 Pte. C. Wavasour

1 Newfoundland. TO ESHER 24/7/16.

CR. 873

Extract of ~~of~~ communication received from O.C. 3rd Lond
General Hospital, to O.i/c "records, Nfld. Contingent,
58 Victoria Street, S.W., dated July 31, 1916.

In accordance with your memo of 30th July I beg to inform
you that the undermentioned man was transferred to the
Convalescent Home ~~#####~~. Lammus Aux. Hosp.
Esher 24/7/16.

#873 Pte. C. Vavasour. ✓

C.R. 873

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.S.R.O.
July 14th. 1916.

873, Pte C. J. Vavasour, ✓

1/Newfoundlands Co. Wrist Severe.

Adm. 15 Sty. Bn

Boulogne 3rd July 1916.

C.R.

873

Extract from Casualties from Pay and record Office, dated
July 5th.,

At 3rd., London General Hospital, Wandsworth. S.W.

Nominal Roll of Sick and Wounded Francoem admitted To Hospital
July 3rd.,

#873 Pte. C. Vavasour.

S.S.W. L, Wrist R Thigh

C.R. 873

Extract of Casmaties received from Pay & Record
Office, London, dated July 5, 1916.

#873 Pte. C. V^{VA}asour. ✓

Gunshot wound left wrist right thigh.

at 3rd London, General Hospital, Wandsworth.

July 5, 1916.

C.R. 873

Extract of Cablegram received from London,
dated 5/7/16.

#873 Pte. Vavasour. ✓

Gunshot wound Left Wrist Right Thigh.

in Mansworth July 3rd.

V(9)

July 5, 1916.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 673, Private Charles J. Vavasour, is at the Third London General Hospital, Wandsworth, suffering from a bullet wound in the left wrist and right thigh.

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,

J. R. Bennett
Colonial Secretary.

Mr. Hugh Vavasour,
72 Pleasant St.

C.R. 873

Extract from Nominal Roll of "D" Co. 1st Bn. Field. Regt.
Embarked at Devenport for Active Service 20-8-15.

Machine Gun Section.

873 Pte. C. Vavasour.

Disembarked at Alexandria 31-8-15 proceeded to Abbassia
Cairo. same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 873

Extract from Naval Roll of Draft embarked for
Overseas per S.S. Stephens March 20th 1915.

No. 6. Platoon.

873 Pte. C. Vavasour.

C.R.

873

Charles Joseph Vavasour was attested for General service
with the NEWFOUNDLAND REGIMENT on
Jan. 2nd. 1915.
Regimental No 873 was allotted to Pte. C.J.Vavasour.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

D. 873
Demobilization Form 3

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 873 Rank Lt Name Kavasow Charles
 Date of Enlistment 3-12-14 Address St Johns District St Johns
 Occupation Clerk Classification for Discharge B Medical Category F
 Recommendation S.M.B. Permanent unfit Disability Rating Less than 20%

Passed to Demobilization Officer with following documents:—

| | | | | | | | |
|-----------|---|--------|--------|-----------|--------|---|--|
| N.F. P\|36 | 1 | B 268 | B 121 | N.F. Med | D.F. 1 | | |
| B 178 | | W 3494 | B 122 | Board 1st | " 2 | | |
| B 178a | 1 | D 400A | B 1915 | do 2nd | " 3 | 3 | |
| B 179 | 1 | D 400B | Form L | do 3rd | " 4 | | |
| B 179a | 1 | D 400C | Form K | do 4th | " 5 | | |
| B 179b | | B 103 | ME 2 | 1238 | " 6 | 1 | |
| B 179c | | B 120 | M 93 | 1239 | | 1 | |

Date 25-1-19 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Charles J. Kavasow

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable.....
- (b) Clothing Supplied.....

Joseph H. Brown

Date..... O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. Nil to his home at Alph and Release Certificate No. 958 issued.

Date 24-1-19

C. B. Dicks Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 13-2-19

Date 20-1-19

Money Capt
Depot Paymaster

Discharge approved for 29 1. 19

Forwarded with following documents to O.C Discharge Depot.

| | | | | | | | | |
|-----------|---|--------|--------|---|-----------|--------|---|--------|
| N.F. P/36 | 2 | B 268 | B 121 | 1 | N.F. Med | D.F. 1 | 1 | Form B |
| B 178 | | W 3494 | B 122 | 1 | Board 1st | " 2 | 2 | |
| B 178a | 1 | D 400A | B 1915 | | do 2nd | " 3 | | |
| B 179 | 1 | D 400B | Form L | | do 3rd | " 4 | | |
| B 179a | 1 | D 400C | Form K | | do 4th | " 5 | | |
| B 179b | | B 103 | ME 2 | | 1238 | " 6 | | |
| B 179c | | B 120 | M 93 | | 1239 | | | |

Date 30-1-19

C. B. Dicks Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JAN 30 1919

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

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

Date 24/1/19