



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5149

Name Jasper Verman

Corps Infantry

Questions to be put to the Recruit before Enlistment.

1. What is your name? Jasper Verman
2. What is your full Address? Grand Bay Ferry Street
3. Are you a British Subject? Yes
4. What is your age? 23 Years Months
5. What is your Trade or Calling? Postman
6. Are you Married? No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? Yes

I, Jasper Verman 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.

Jasper Verman ^{H.V.S. 15 days} SIGNATURE OF RECRUIT.

J. Raymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Jasper Verman 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
on this day of 1918

E. B. Dicks Lieut. Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the

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

Date May 18 1918
Place St. John's Approving Officer.

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

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

Reg. No. 5149 Rank *Pte* Name *Vivian, J. D.*
Attested *18-5-18* Address *Gander Bay, Fofo*
Allotment *60* Allotee *James Vivian (Father)*
Date of Allotment *1-8-18* Returned from Overseas
Embarked for Overseas *JUL 22 1918* Cause

20-5-18 Vacc 1⁵⁰ Insp 5⁴/₃ 2nd Groe 3rd Dec 4/18
5⁴ 16 6 18 - 24-6-18 R. L. 2.8 4/8

C.R. 5149

extract from Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 22nd 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date 11-8-19.

5149, Pte. Jasper Vivian.

C.R. 5149

Extract from Daily Orders Part 11 Unit the Royal WFLD.
Regt. St. John's, July 16th, 1919

The discharge of the undernoted on demobilisation has been
APPROVED by O.C. Discharge Depot with effect from 28-7-19

5149 Pte. J. Vivian.

C.R. 5149 Counter No.

NEWFOUNDLAND 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 _____ Address Dept of Militia

Line Number	Rcd	By	Sent	by	Check

Dated Mon July 15th, 1919To Mrs. Jas. Vivian
Gander Bay.

5149 Pts. Jasper Vivian was discharged yesterday will be returning first opportunity. His address is 184 Duckworth street.

A.E. Hinckman,
Minister of Militia.

FOR TYPEWRITER

C.R. 5149

Extract from Daily Orders Part II Unit The Royal Field. Regt.

St. John's, July 3rd 1919.

5149 Pte. J. Vivian.

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

C.R. 5149

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD



Class No. 65 Sent by H Rec'd by AM Check 10 No. 10

Place from Grand Bay

To A. G. Dickson
Min. of Milit.



Please inform me if
5149 Jasper Vivian left
Sophie's reply.

Mrs James Vivian

No

184 Duckworth St.

1
Heg

Demobilized, yesterday 14/7/19

No enquiry respecting this message will be attended to without the production of this paper.

C.R. 15-149 Counter No. _____

NEWFOUNDLAND 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 connect on 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 _____

Address Militia Dept.

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated **June 5th. 1919**

To **Mrs. Jas. Vivian. GANDER BAY.**

BEG TO INFORM YOU THAT 5149 JASPER VIVIAN DID
NOT ARRIVE ON CORSICAN.

A. E. HICKMAN
MINISTER OF MILITIA.

CHARGE TO DEPT. OF MILITIA.

FOR TYPEWRITER

C.R.

NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No.

Sent by

Rec'd by

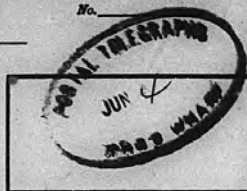
Check

No.

Place from

To

THH 4
 Sander Bay
 A. E. Hickman
 Milika



to Mr Jasper Vivian in
 St. Johns

Mrs Jas. Vivian

(5149)

Not
 confirmed

C.R. 5149

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

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

#5149 Pte. Jasper Vivian.

Extract from Daily Orders part 11, from Unit The Royal Nfld.
Regt. St. John's, dated May 20th, 1918.

#5149 Pte. Jasper Vivian.

Attested for General Service with the Royal Nfld. Regt.
from 18.5.18.

J. Kivan

C.R.

5149

SAFO
L



THE ROYAL NEWFOUNDLAND REGIMENT

Jasper Vivian

ALLOTMENTS

5149

I, *Jasper Vivian*, Regl. No. *5149*

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and _____ 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 *July 1918*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
		<i>Jasper Vivian</i>	<i>Private Reg Co</i>	
Total Allotment, \$				<i>7-11</i>

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

(Sig.) *Jasper Vivian*
 Officer Commanding
 Company
July 1918 191 8

(Sig.) *Jasper Vivian*
 (Rank) *Private*

No. 19344/8170

065578
HC

30 NOV 1918
N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

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

26th November 1918

Nov. 28th 1918

Subject: 5149, Pte. J. Vivian *B*

Receipt *Over*
James J. LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

With reference to the following telegram (10148) from the Hon. Minister of Militia, received

Officer Commdg. 2nd Batt'n
Royal Newfoundland Regiment

pay to 5149 Vivian £4:2:0

Received the sum of Four pounds
two shillings on account of
cable remittance from Newfoundland.

Draft £ 4:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

J. Vivian
Private
No. 5149 Rank Pte.

Chief Paymaster & O. i/c Records.

W P. Power, Pte

103/27/P&A

NEWFOUNDLAND CONTINGENT

From:

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

To: ^{103/27} Officer Commanding,
2nd. Bn. R. Newfoundland Regt.
Hazeley Down Camp,
Winchester.

2nd. January, 1918Subject: 5149.Pte. J. Vivian.

With reference to the following telegram (19&20) from the Hon. Minister of Militia, received

Pay to 5149 Vivian - £5:3:0

Draft £5:3:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

J. H. M. Maudslayi
Chief Paymaster & O. i/c Records.

6-1-1919

Receipt hereunder.

J. Seymour
LIEUT. COLONEL,
Officer Commanding 2nd Bn. R. N.F. REGT.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of five Pounds
three Shillings on account of
cable remittance from Newfoundland.

J. & Vivian.
No. 5149 Rank Pte

Witness; *A Maudslayi*

No. 5280/761

N.F.P./79.

098979

From NEWFOUNDLAND CONTINGENT

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

Top Officer Commanding.
2nd Bn. Royal Newfoundland Regiment,
Hazelley Down Camp,
Winchester.

3rd April 1919

April 7th 1919

5149 Pte. Vivian J.

With reference to the following telegram from the Minister of Militia / / (114)

"Pay to- 5149 Vivian
£2. 1. 0

Cheque £2. 1. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

J. J. Minard
Chief Paymaster & O. i/c Records.

Receipt hereunder

J. J. Minard
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commanding 2nd Bn. Batt'n.

R. N. R.

Received the sum of Two pounds

one Shillings in respect of telegraphic remittance from the Minister of Militia.

J. Vivian
No. 5149 Rank Private

Witness H. Hoek

B

No. 1774/253/P.&.A

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn.R.Nfld.Regt.
Winchester.



3rd February 1919.

February 6th 1919

5149 Pte. Vivian J.

With reference to the following telegram from the Minister of Militia 30/10/19 (976)

Receipt hereunder.
M. Barton LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. 2nd Batt'n.

"Pay to- 5149 Pte. Vivian

Received the sum of Two pounds

22 5:0
Cheque £2:5:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Five Shillings in respect of telegraphic remittance from the Minister of Militia.

A. C. Munnell Cap.

Chief Paymaster & O. i/c Records.

J. Vivian
No. 5149 Rank Private
Witness M. Rocketts

B

103/27/P&A

Officer Commanding,
2nd. Bn. R. Newfoundland Regt.
Hazeley Down Camp,
Winchester.

2nd. January, 8

5149. Pte. J. Vivian.

19&20

Pay to 5149 Vivian - £5:3:0

5:3:0

222

Vivian, J

5149

Jay Lept.

August 14, 1919

#5149 Pte. Jasper Vivian,
Gander Bay.

Dear Sir:-

Please find enclosed Discharge Certificate #3760.

Yours truly,

Captain & Kaymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5749 Rank Pte Name Virian J
 Intended place of residence Stander Bay Fog
2. Occupation Freeman
 Classification of soldier E Medical Category A 1
3. The above named man is discharged in consequence of

DEMOBILIZATION

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
- Place, ST. JOHN'S
 Date JUL 14 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
- Place, ST. JOHN'S
 Date JUL 14 1919
 Signature of soldier
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
- Place, ST. JOHN'S
 Date JUL 14 1919
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 18-5-18 No. of days on Military
 Discharged from service JUL 28 1919 Plus 14 days Service 45-1

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty eight days from date.
- Place, ST. JOHN'S
 Date JUL 28 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
- Place, ST. JOHN'S
 Date August 11/1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

14
20
31
14
16

13 207913760

The Royal Newfoundland Regiment

Class for Demobilization:—

E.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

July 12/19

Regimental No. *5749*

Name

William Jasper

Address

Gander Bay

Present Medical Category

A7

Recommended for:—

(a) Immediate discharge

(b) Standing Medical Board

A. R. Coogan Capt.
O. C. Discharge Depot.

Members of Board

H. H. H. H.
Senior Medical Officer

G. W. B. B.
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3149 Rank Plt Name Harold J. ...
 Date of Enlistment 18-5-18 Address Grand Bay District
 Occupation Fisherman Classification for Discharge 4 Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L4	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 12-7-19 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:

(a) Clothing Allowance payable. #60.00

(b) Clothing Supplied _____

Date 14-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2420 to his home
 at Jander Bay and Release Certificate No. 3610 issued.

Date 14-7-19
 Demobilization Officer [Signature]

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 11-8-19

Date 14-7-19
 Depot Paymaster. [Signature]

Discharge approved for 28-7-19

Forwarded with following documents to O.C Discharge Depot.

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

Date
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 28 1919
 O. C. Discharge Depot. [Signature]

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

Date

Civil Re-establishment Committee



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

To resume former Occupation.

Vivian J.

Signature of Man.

Reg. No. 6148

M. Johnston

Signature of the Vocational Officer or his Representative.

ST. JOHN'S

Place

Date

14-7-19

191

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

MEDICAL HISTORY

OF

Surname

Vivian

Christian Name

Jasper

Table I.—GENERAL TABLE.

Birthplace:—Parish

Gander Bay 790

County

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	day of	191
Examined	on	18 th day of May 1918	on	day of 191
Declared Age	at	23 years	at	years days
Trade or Occupation		Fisherman		
Height		5 feet 8 ¹ / ₂ inches	feet	inches
Weight		155 lbs.		lbs.
Chest Measurement {	Girth when fully expanded	34 ¹ / ₂ inches		inches
	Range of Expansion	2 inches		inches
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
		1 Scar		
When Vaccinated	8 th May 1910			
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	Lammertson			
(Rank)	Major			
		Medical Officer.		Medical Officer.
Enlisted	at	S. Johns	at	
	on	18 day of May 1918	on	day of 191
		Corps.		Regtl. No.
Joined on Enlistment	The Royal 5149			
	after test			
Transferred to				
Became non-effective by	on	day of 191	on	day of 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 future use. In case of syphilis, admissions and re-admissions to hospitals will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Hazley Down	29	1	19	10	12 ²	19	Influenza	12	Discharged to duty.	B. S. W. Vician CAPT., R. A. M. C.



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Jasper Vivian*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5749*

Intended address *Gander Bay*

Height on discharge *5 Feet 9*

Color of hair on discharge *Black*

Complexion *swart*

Color of eyes *Blue*

Descriptive Marks

Figure on discharge *Medium*

Christian name of Father *James*

Christian name of Mother *Lucy*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Gander Bay 10-3-age 24-1896*

Nature and locality of civil employment required

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

(Soldier's signature in full) *Jasper Vivian*
Marist R. Taylor

(Rank) *Pte*

Station *St Johns*

Date *July 5th 1919*

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

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

Station

Date

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

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

1. Unit and Corps..... *Royal Newfoundland* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *5149* 3. Rank..... *Pvt.* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name *Vivian* *Jaddy*
(Surname) (Christian Names)
5. Age last birthday... *23*
6. Posted for duty on..... at.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (b) Where (c) Opinion of Court
(d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

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

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

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

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.)

No Complaints of no disability

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

20. Do you recommend—

- (a) Discharge as permanently unfit ?
- (b) Change to United Kingdom ?

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

Repatriation

W.E. Procuier. Capt Rame

Station *Hazley Down*

Medical Officer in charge of case.

Date *3/11/19*

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

August 18, 1919

Mr. Jasper Vivian,
Gander Bay.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

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..... *Jasper* 2. Surname..... *Vivian*

3. Rank..... *Pte* 4. Regtl. No..... *5149*

5. Address in full to which future payments of gratuity are to be forwarded..... *Gander Bay*

6. Date of enlistment in the Regiment..... *May 18/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *Co*

8. Relationship of such dependents..... *No*

9. Address in full of such dependents..... *No*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No*

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

12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *No*

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

..... No

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.

..... No

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 Res? If not give (a) Date of discharge.

July 14/19
..... No
(b) Reason for discharge.
..... Desert

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.

..... No replaced only

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.

Lie

*Jasper X. ...
Mark*

Signature of Applicant:

Place of Residence:

Declared before me at:

This

14

day of

*Gauley Bay
St Johns
July 19...9...*

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

*John D. Carthy
J.P.*

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Registrar

Gander Bay
Oct 24/19

Hon. A. E. Hickman,

Ministry Militia

S. Johns,

Dear Sir:-

My cheque for October has not yet
reached me, I mean my gratuity cheque for
\$76⁰⁰, & as the other ones here have got their
possibility mine has been overlooked - will you
kindly inquire about it & have it sent forward
& oblige

Yours respectfully

5149 St. Josephs Drive

Cheque no 1567^v
for 70⁰⁰
Marked 29/10/19.





THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, James Vernon, Regl. No. 5149 hereby agree, until further notification by me, and in similar official form to make an Allotment of 5 Dollars and 50 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 July 12

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4664	Wife	James Vernon	Green Bay	60
Total Allotment, \$				60

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

(Sig.) James Vernon
Officer Commanding
5 Company
July 12 1918

(Sig.) Robert Vernon
Private
(Rank) Pl.

M.M.

5149 Vivian J.

Please make first pay. W.S.G.

6/7/19

W.T.L.
A.C.S.

Form K. 6262.

Gander Bay
Oct 24/18

To the Ministry of Militia,

3031

Dr. John.
5149

Dear Sir:-

I have not yet received the
allowance for September month as yet, my
Post Office Officer and thinking it may
have gone astray. I would be obliged if you
would kindly make enquiry about it, as
possibly it may have been overlooked.

an amount will be paid for the month of Oct 1918

The cheque
pending inquiry was
mailed on the 7th of Oct 1918
to Griquet instead of Gander Bay
in error, I would M. Messiah
recall the cheque and mention no
the signatory of the letter.

Yours respectfully
Note - The wrong address was
typed and not noticed until
checking back; advance
changed properly this
month.

U.S.B.

November 1st.1918

Mr. Joseph Vivian,
GANDER BAY.

Dear Sir:

With reference to your letter of October 23rd. regarding your son's allotment, I beg to inform you that through an error in this office the envelope containing your cheque was addressed incorrectly. I am however, making enquiries and expect to have it returned within a few days. Just as soon as I receive it, I will immediately forward it on to you.

Sorry for the inconvenience caused by the delay.

Yours truly,

Lieut.
For Paymaster

November 1st, 1938.

The Post Master,
G R I Q U E T.

Dear Sir:

On the 7th. of October an envelope containing a cheque was posted from this office to Joseph Vivian, Griquet, which was intended for Gander Bay.

If this is still in your possession, will you kindly return it to this office, so that I may forward it on to the correct address.

Yours truly,

Lieut.
For Paymaster

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70⁰⁰/₁₀₀

JUL 17 1919 19

Received from the First Newfoundland Regiment
the sum of Seventy Dollars
on account of Pay. W. S. R.
~~balance~~

5149 J. Vivian
his x [Signature]
Regtl. No. [Signature]

Ch. No. 3159	Initials. awl
Pay Ledger. 302	Initials. wr
Gen. Ledger.....	Initials.....

No. 5149

Rank

Plt

Name

Vivian J

C.R. 5149

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name.. ^{Am} *Jasper D. Vivian*.. No. 5149
_{Smart}

Date. *Nov. 24/19.*

Place. *Gander Bay, Nfld.*

Witness

G. S. Howland

1921

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

Signature

Date

Address

OCT 20 1921 _____ 1921.

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

is/are forwarded herewith to

Jasper Vivian

in respect of his service as No. 5149 Rank Pte.

Name J. Vivian Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received Medal No 5149 with thanks

Signature Jasper Vivian

Date Nov 16

Address Sander Bay

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.

Regiment of

Royal Newfoundland

Number of Sheet *1*

Signature of O. C. Company

C. D. Dicks Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<i>5149. Nuran Jasper</i>	Age on	<i>23</i> years / months	<i>fisherman</i>			
Joined	Date	Place and Date of Enlistment	<i>St Johns 18.5.18</i>	Religion			
Joined	Date	Period of	with Colours <i>1 1/2</i> years. with Reserve <i>3 1/2</i> years.	<i>Meth.</i>			
Joined	Date			Place of Birth	<i>Gander Bay, 790</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>Demobilized</i>	<i>St Johns</i>	<i>11 5/19</i>			

To be carried over

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5149 Rank Plt Name Vivian J. ...
 Date of Enlistment 18-5-18 Address London, W. Dist.
 Occupation Subaltern Classification for Discharge F. Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:-

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

Date 12-7-19

O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Vivian J. ...
Plt J. ...

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:-

- (a) Clothing Allowance payable. # 60
- (b) Clothing Supplier

Date 14-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. ⁴⁴²⁴²⁰ 3610 to his home at Spencer Bay and Release Certificate No. issued.

Date 14-7-19 Demobilization Officer *[Signature]*

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 11-8-19

Date 14-7-19 Depot Paymaster *[Signature]*

Discharge approved for 28-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1.	
E 178	W 3494	B 122	Board 1st	" 2.	2 Form B
B 178a	D 100A	B 1915	do 2nd	" 3.	
B 179	D 400B	Form L	do 3rd	" 4.	
B 179a	D 400C	Form K	do 4th	" 5.	
B 179b	B 103	ME 2		" 6.	
B 179c	B 120	M 93			

Date Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 28 1919 *[Signature]*
O. C. Discharge Depot.

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

Date Aug 7/19 *[Signature]*

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *42420* to his home at *Jordan Bay* and Release Certificate No. *3610* issued.

Date *14-7-19* *Am. Dis. 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 *11-5-19*

Date *14-7-19* *Depot Paymaster.*

Discharge approved for *28-7-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	<i>2 Form B</i>
F 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUL 28 1919* *L.R. Cooper Capt.*
O. C. Discharge Depot.

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

Date *Aug 7/19* *Mt*

No. 5149 Rank Pt Name Vivian J

Attested Address Garder Bay

Allottee

Allotment Returned from Overseas JUL 1 1919

Received by S.S. Cassand Cause Discharge

147 19 PASSED TO DEMOBILIZATION OFFICE

287 19 DISCHARGE APPROVED ON DEMOBILIZATION

C.R. 511/19

NOTE—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 302 (xvi) or 302 (i) King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps *Royal 2. Cav. for 10 yrs* Former Trade or Occupation } *fisherman*
2. Regt. No. *5749* 3. Rank... *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Muirain* *James* (a) Former Regts. or Corps ; with Regt. Nos.
- (Surname) (Christian Names)
5. Age last birthday... *23*
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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

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

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | | |
| (ii.) Previous active service | ✓ | |
| (iii.) Climate in pre-war service | ✓ | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. | ✓ | |

- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

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.)

No complaint of no disability.

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

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.

Rehabilitation

W. E. Proccurier - Capt Ramc

Station *Hazley town*

Date *3/4/19*

Medical Officer in charge of case.

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