



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 71

Name in full Francis Emile Watts Age 19

Address 25 Welsh's Square

Married Height 5' 4 1/2" Weight 125
Single

Color Dark Hair Dark Brown Eyes Dark Brown

Other distinguishing marks Scar of operation for appendicitis

Nearest relative Mother - Elizabeth Watts

Address 25 Welsh Square

Dependents Mother - partly

Occupation Packet Present Wage 18 5/10 weekly

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment _____

I, Francis Emile Watts, 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 conditions of my service.

Francis Watts

Declared before me this 1st day
of October 1914

Georg L. Carby
Capt. A Co

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 71.

Name Francis Emile Watts.

Apparent age 19 years _____ months. Height 5 feet 4 1/2 inches.

Chest measurement { Girth when fully expanded _____ inches.
Range of expansion _____ inches.

Distinctive marks Color: Dark, Hair: Dark Brown, Eyes: Dark Brown.

Other distinguishing mark: Scar of operation for appendicitis.

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Elizabeth Watts, 25 Walsh Square, St. John's.

| Relationship Mother.

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Re-served 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>2/9/14</u>									
Joined at <u>St. John's</u> on <u>2nd September '14.</u>									
<i>Discharged at St. John's Dec. 7/1918.</i>									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ (") _____ " _____									

S. J. Watts

C.R. 71

PKO
7

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

MEDICAL HISTORY of

Surname Watts Christian Name Frank E.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St. Johns County Nfld.

Examined ... { on 10th day of Sept. 1914.
 at St. Johns Nfld.

Declared Age ... 18 years ... days.

Trade or Occupation ... Clerk

Height ... 5 feet, 5 inches.

Weight ... 126 lbs.

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

Physical Development ...

Vaccination Marks { Arm ... None Right Left
 Number ...

When Vaccinated ...

Vision ... { R.E.—V= 6/6
 L.E.—V= 6/6

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

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

COPIES SENT		
TO	No.	DATE
M or M	20482/510	R+E 11/10/15 (alt)
D.C.		

Approved by (Signature) _____
 (Rank) _____ Medical Officer.

Enlisted ... { at St. Johns Nfld.
 on 10th day of Sept. 1914.

Corps.	Regtl. No.
<u>10th Nfld. Regt.</u>	<u>71</u>

Became non-effective by _____
 on _____ day of _____ 1914.

(Signature) _____
 (Rank) _____

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
1st Scot. Gen. Hosp. Aberdeen	16	8	17	29	x	17	Syphilis 42	74	Wassermann Positive 24.8.17 .. Negative 26.x.17 Next blood test due 26.1.18	29d. A.P. Lawson Capt. Rank. 29 x 17
Hiloca Mil. Hosp.	13	5	18						Wassermann Negative	29d. J.P. Knight Capt. Rank. for Lt. Col. 1/6 Hosp.

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

Date	Brief details, and signature
12. 9. 14	<u>T. V.</u> Qd. Am. W.
30. 9. 14	2
5. 4. 15	Vac .. Am. W.
7. 5. 17	Fitted with abdominal belt. (with special piece for ventral hernia). Belt satisfactory.
	Qd. M. W. Huston Capt. Rame.
27. 6. 18	Boarded at Hazeley Down Camp. Marked BI Cat.
	Qd. W. H. Parsons Maj. Rame. Qd. J. S. P. Knight Capt. Rame.

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

OFFICE COPY

LAST PAY CERTIFICATE

LAST P.N.F.P./94

To be rendered for all ranks on discharge, transfers to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 71 Rank L/Cpl. Name Watts F. Unit Royal Wld Regt. who was sent
Newfoundland on 21/7/18. Authority Draft 68. Cause Blue Puttee Leave

STATEMENT OF ACCOUNT

PARTICULARS		\$	¢	£	s	d	PARTICULARS		\$	¢	£	s	d
PERIOD: From 26/10/18 To 28/11/18.	Balance Dr. from						Balance Cr. from						
	Allotment 28 days @ 70¢	19	60	4	0	7	F. Coy 25/10/18.			10	9	2	
	Cash Payments:						Pay 28 days @ \$.100	28	00				
							Field Allowance 28 days @ \$.15¢	4	20	6	12	4	
	Other Debits:						Other Allowances days @ \$						
Total Debits			4	0	7	Other Credits:							
Balance due by Paymaster			17	1	6	<i>Copy sent to m of m</i>				17	1	6	
			17	1	6	<i>Per W J D B's's. 3338/52</i>				17	1	6	
						<i>Poa 6-3-19</i>							
						Total Credits							
						Balance due to Paymaster							

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

(Place)

(Date)

191

(Place)

191

Made up and checked in accordance with information received in the Pay & Record Office London to 19/2/19 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London, S.W. 1.
 February 19th 191

Pay & Record Office, London, S.W. 1.
 191 Chief Paymaster & O. i/c Records.

CHECKED.
 4/3/19
 W.M.

SYPHILIS CASE-SHEET.

Regtl. No. 71 Rank and Name L. Cpl. Watts F. Corps 2/1 Rfld.
 Placed on Syphilis Register at Aberdeen on 24.8.17 No. in Register 129
 Disease contracted at Ayr . Primary sore appeared on (date) Feb. 1917

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site Pitted remains of chancre on prepuce.
 Lymphatic glands General enlargement.
 Skin (nature and distribution of rash) Close-set scaly macular rash over limbs
and trunk becoming confluent over deltoids.
 Mucous membranes Inflammation of throat. Tonsils ulcerated and
sloughing.
 Other symptoms Original

COPIES SENT		
To	No.	DATE
M. of M.	20472/201	17/11/18 at H.
O. C. 1st. Div.		
" 2nd. Div.		

Examination of exudate from sore—Spirochaeta Pallida (present or absent) Not done
 Examination of blood serum—(Method employed (original or modification) M
 Wassermann reaction { Result (positive or negative) Positive ++

Station 1st Scot. Gen. Hosp. Date 24.8.17 Signature of M.O. A.R. Jensen
Aberdeen Capt. 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, e.g., "Blood test due 15.5.14."
 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 clothed, without boots—lb.	Urine		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) Albumen (Alb.)	Wassermann Reaction	Arsenical		Mercurial	Other Methods		
						Intravenous Injection. Dose in grammes	Salvarsan				Neo-Salvarsan
	16.8.17	Admitted to Hospital									
	24.8.17				M +						
	21.8.17		128	N			/		.3		Ad. A.R.H. asst. Capt.
	25.8.17		128	N					.3		Ad. A.R.H.
	29.8.17		128	N			/		.3		
	5.9.17		128	N			/				
	12.9.17		129	N			/		.4		
	19.9.17	Rash clearing up.	129	N			/		.5		
	26.9.17	Mouth and throat condition practically well.	129	N			/				
	3.10.17	Rash quite gone.	129	N					.5		
	10.10.17	Voice no longer hoaky.	130	N			/		.5		
	17.10.17		129	N			/		.5		
	26.10.17	Wassermann Negative No active signs.			M -						
	29.10.17	Discharged from Hospital.									
		Next blood test due 26.1.18									
	Apr. 13. 1918	Hiloca Mil. Hop. Wassermann Negative									Ad. A.R.H.
											Ad. J.P.P. Knight Capt. Rank for Lt. Col. in Hop.

VETERANS AFFAIRS
 AFFAIRES DES ANCIENS COMBATTANTS

RG 38 vol. 497
 File/dossier: 71
 WATTS Francis Emile

No. *71* Name *Watts, J.* Sqn., Batty., or Company } *A* Corps *First Newfoundland* Date of enlistment } *Aug 28 1914* G. C. Badges } Service or Proficiency Pay }
 Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. } Signature O.C. } *G. J. Carby* Character }

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

Army Form B. 122

MEDICAL OFFICERS REPORT
FINAL EXAMINATION

First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 71

Name in full Francis Emile Watts Age 19

Address 25 Welsh's Square

Married Single Height 5' 4 1/2" Weight 125

Color Dark Hair Dark Brown Eyes Dark Brown

Other distinguishing marks Scar of operation for appendicitis

Nearest relative Mother - Elizabeth Watts

Address 25 Welsh Square

Dependents Mother - partly

Occupation Paiker Present Wage 5.00 weekly

Previous service

Decorations

General Remarks

Date of Enlistment

I, Francis Emile Watts, 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 conditions of my service.

Francis Watts

Declared before me this 1st day of August 1914

George Leahy
Capt. A Co

SEP 2 1914

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. **71**

Name Francis Emile Watts

Apparent age 19 years _____ months. Height 5 feet 4½ inches.

Chest measurement { Girth when fully expanded _____ inches.
 { Range of expansion _____ inches.

Distinctive marks Color: Dark, Hair: Dark Brown, Eyes: Dark Brown

Other distinguishing marks: Scar of operation for appendicitis

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Elizabeth Watts, 25 Walsh Square, St. John's

Relationship Mother

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	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>2/9/14</u>									
Joined at <u>St. John's</u> on <u>2nd September '14</u>									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ (") _____ " "									

F. E. Watts.

71

Ray Dept

Nov. 29th/20

Mr. F. Watts,
o/o Ayre & Sons Grocery,
City.

Dear Sir:-

The recent blood test which you had taken at this office has given a negative result. It will not, therefore, be necessary for you to report for treatment at the present time.

Yours faithfully,

Captain.
For Secretary.

LBD.

F. WATTS

REPORTED

25-11-20

This space to be left blank for the Chelsea Number.

Proceedings on Discharge.

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

No. <u>71</u>	Army Rank <u>Lance Corporal</u>
Name <u>Watts, Francis Emile</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>The Royal Newfoundland Regiment.</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>December 7th 1918.</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. Description at the time of discharge.	
Age <u>23</u> years _____ months	Descriptive marks. <u>operation scar on right side</u>
Height <u>5</u> feet <u>5 1/2</u> inches	
Chest measure- ment { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>fair</u>	
Eyes <u>brown</u>	
Hair <u>dark</u>	
Trade _____	
Intended place of residence (To be given as fully as practicable) <u>Signal Hill St. John's Nfld.</u>	
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>	
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character :—	
4. Character awarded in accordance with King's Regulations :—	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
Initials of Commanding Officer.	

To be filled in on the soldier quitting the Colours.

29
20
7
97

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

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

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

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

{ _____

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Batta. _____ Regiment.

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

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

(Place) St. John _____ J Hatto (Signature of Soldier.)

(Date) 7/12/18 _____ W Newbury Coy (Signature of Witness.)

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

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

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

_____ (Signature of Soldier.)

10. *Statement of service.*

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

Further service " " _____ (the date of confirmation of discharge) " " "

Total " " "

11. *Confirmation of discharge.*

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

(Place) _____

Signature _____

(Date) _____

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

No Reservations

Lieut F Pratt

Witness W Hawbury Capt

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:

*I have secured employment
in Grocery Dept. of Messers Ayre & Sons, Ltd.*

L/c F. Matthews

Signature of Man.

Reg. No. 71

W. L. Matthews,
Signature of the Vocational Officer or his Representative.

Place *Militia Building, St. John's,*

Date *December 7 1918*

The Royal Newfoundland Regiment

DEMOBILIZATION

CIVILIAN CLOTHING GUARANTEE

I, No. 71..... Rank Lee Corp. Name L. Watts
 hereby undertake to supply myself with civilian clothing, consisting of one suit of clothes, one cap, one tie, one collar, one overcoat, within 14..... days from date, in consideration of being issued with clothing allowance to the amount of \$ 60⁰⁰.....

Date Nov. 30th 18.....

St. John's.....

L. Watts 71
 Signature of Soldier

H. H. Maddie Lt.
 Signature of Witness

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 Watts Christian Name Frank. E.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St John's County Newfoundland

Examined ... { on 1st day of September 1914,
 at St John's Newfoundland.

Declared Age ... 18 years ... days.

Trade or Occupation ... Cherk.

Height ... 5 feet 5 inches.

Weight ... 126 lbs.

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

Physical Development ...

Vaccination Marks { Arm ... — Right — Left
 Number — —

When Vaccinated ... Never.

Vision ... { R.E.—V= 6/6
 L.E.—V= 6/6

(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 Newfoundland.
 on 1st day of September 1914.

Corps.	Regtl. No.
<u>1st Newfoundland Regiment</u>	<u>71</u>

Became non-effective by _____

on _____ day of _____ 1914.
 (Signature) _____
 (Rank) _____

Nov. 23/20

Francis E. Watts.
Mr. ~~Chas. Field,~~ *Francis E. Watts.*
~~38 Prescott Street,~~
City. *Signal Hill*

Dear Sir:-

With reference to our communication of October 30th.
The following is a copy of an Order in Council dated April 1st/19:-

"Under the provisions of the War Measures Act 1914-16 it is ordered that any person who is or has been a member of His Majesty's Forces during the present War and who has suffered from any venereal disease, and who may still be suffering from the effects of said disease may, on the certificate of the Medical or Acting Medical Health Officer setting forth the nature of the disease and recommending aggregation be arrested by any Peace Officer and placed in the Military Hospital at St. John's and there detained until pronounced cured by a certificate of the Medical or Acting Medical Health Officer, or the Medical Superintendent or the physician in charge of said Hospital.

Any person so detained who escapes or who refuses to comply with the rules and regulations of said Hospital, or any person who aids another in escaping from said Hospital, shall be guilty of a breach of this Order and liable on summary conviction to a fine of One thousand Dollars and in default of payment to one year's imprisonment."

In view of the above order, I would be glad if you would report at Room 6, Militia Building, at your earliest.

Yours faithfully,

Captain.
For Secretary.

LBD.

October 30th/20

Mr. Francis E. Watts,
French's Lane,
Signal Hill.

Dear Sir:-

You will remember you were in the 1st Scottish General Hospital from August 16th 1917 to Oct. 29th 1917.

The treatment then given was only sufficient in a number of cases to make a man fit for Active Service.

Arrangements have now been made to have all such cases examined in St. John's and, if necessary, treatment continued.

Please notify us if it is convenient for you to take this treatment. Address all communications to Room 6, Militia Building.

Yours faithfully,

Captain.
For Secretary.

LBD.

SYPHILIS CASE-SHEET.

Regtl. No. 71 Rank and Name Sgtl Watto Frank Corps 71 New Zealand
 Placed on Syphilis Register at Aberdeen on 24. 8. 17 No. in Register 129
 Disease contracted at Ayr. Primary sore appeared on (date) Feb. 1917.

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site Pitted remains of chancre in prepuce.
 Lymphatic glands General enlargement.
 Skin (nature and distribution of rash) Close-set scaly macular rash over limbs & trunk becoming confluent over deltoids.
 Mucous membranes Inflammation of throat. Tonsils ulcerating and sloughing.
 Other symptoms

Examination of exudate from sore—Spirochaeta Pallida (present or absent) Not done
 Examination of blood serum—(Method employed (original or modification) M
 Wassermann reaction (Result (positive or negative) Positive ++

Station ABERDEEN Date 24. 8. 17 Signature of M.O. W. Phasen
Capt Rame

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, e.g., "Blood test due 15.5.14."

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 clothed, without boots—lbs.	Urine	Wasser- mann Reaction	Treatment				Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)			
						Normal (N.) Albumen (Alb.)	Method { Original (O.) Modification (M.)	Result { Positive (+) Negative (-)	Arsenical			Other Methods	
									Salvarsan		Neo-Salvarsan		Intravenous Injection. Dose in grammes
100 GENERAL HOSPITAL ALBERTON	16.8.17	Admitted to Hospital											
	24.8.17				M	+						ARKER Capt.	
	21.8.17		128	N					1		'3	ARK	
	25.8.17		128	N					1		'3	ARK	
	29.8.17		128	N					1		'3	ARK	
	5.9.17		128	N					1			ARK	
	12.9.17		129	N					1		'4	ARK	
	19.9.17	Rash clearing up	129	N					1		'5	ARK	
	26.9.17	Mouth & throat condition practically well.	129	N					1			ARK	
	3.10.17	Rash quite gone.	129	N							'5	ARK	
	10.10.17	Voice no longer hoarse.	130	N					1		'5	ARK	
	17.10.17		129	N					1		'5	ARK	
	26.10.17	WASSERMANN NEGATIVE. No Active Signs				M	-					ARK	
	29.10.17	DISCHARGED FROM HOSPITAL.										ARK	
			Next Blood test due 26.1.18										ARK
13 Apr 1918		Kilrea Military Hosp Wassermann Negative										ARK Capt same for 1st Lt 8846	

VETERANS AFFAIRS
AFFAIRES DES ANCIENS COMBATTANTS

RG 38 vol. 497
File/dossier: 71
WATTS Francis Emile

RECEIPT FOR A SOLDIER'S DOCUMENTS

HEADQUARTERS NEWFOUNDLAND REGIMENT

To *Paymaster*

Please receive documents as indicated below

No.	RANK AND NAME	N.F.P. 36 Non-effective account	B. 178 Medical history sheet	B. 178a Mtd. medical history sheet	B. 179 Medical report on an invalid	B. 268 Proceedings on discharge	W. 3494 Civil life quali- fications	D. 400A Descriptive return	B. 103 Active service casualty form	B. 120 Regimental conduct sheet	B. 121 Company conduct sheet	B. 122 Field conduct sheet	Report of Newfoundland Medical Boards				B. 1915 Attestation paper	Form L Identity certificate	Form K Allotment papers	Form I Kit issue on payment	Headquarters Travelling Board	
													1st Board	2nd Board	3rd Board	4th Board	Board					
71	L/C Watts Frank. E.		1								1	1										1

Received above noted documents,

Date _____ 19____

Signature of officer forwarding documents :

Date *26-12-18* 19____



ORIGINAL.

LAST PAY CERTIFICATE

N.F.P./94.

To be rendered for all ranks on discharge, transfers to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 71 Rank L/Cpl. Name Watts F. Unit Royal Nfld Regt. who was sent
Newfoundland on 21 /7 /18. Authority Draft 68. Cause Blue Puttee Leave

STATEMENT OF ACCOUNT

	PARTICULARS			£ s d				PARTICULARS			£ s d		
PERIOD: From 26/10/18 to 22/11/18.	Balance Dr. from						Balance Cr. from F. Coy 25/10/18.				10	9	2
	Allotment 28 days @ 70¢	19	80	4	0	7	Pay 28 days @ £.100	28	00				
	Cash Payments:						Field Alice 28 days @ £.15¢	4	20	6	12	4	
	Other Debits:						Other Allces days @ £						
							Other Credits:						
	Total Debits			4	0	7	Total Credits			17	1	6	
	Balance due by Paymaster			13	0	11	Balance due by to Paymaster			17	1	6	
				17	1	6							

CHECKED.

4/3/19
W M

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

191

(Place)

(Date)

Made up and checked in accordance with information received in the Pay & Record Office London to 19/2/19 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London, S.W. 1.
 February 19th 1919.

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

DUPLICATE.

LAST PAY CERTIFICATE

N.F.P./94.

To be rendered for all ranks on discharge, transfers to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 71 Rank L/Cpl. Name Watts F. Unit Royal Nfld Regt. who was sent Newfoundland on 21 / 18. Authority Draft 68. Cause Blue Puttee Leave

STATEMENT OF ACCOUNT

	PARTICULARS							PARTICULARS							
		£	s	d					£	s	d				
PERIOD: From 26/10/18 To 22/11/18.	Balance Dr. from														
	Allotment 28 days @ 70¢	19	60	4	0	7	Balance Cr. from P. Coy 25/10/18.								
	Cash Payments:						Pay 28 days @ \$1.00	28	00			10	9		2
							Field Allow 28 days @ \$1.50	4	20			6	12		4
	Other Debits:						Other Allowes days @ \$								
							Other Credits:								
	Total Debits			4	0	7	Total Credits					17	1	6	
	Balance due by Paymaster			13	0	11	Balance due to Paymaster					17	1	6	
				17	1	6									

CHECKED.
4/3/19
RM

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

191

(Place)

(Date)

Made up and checked in accordance with information received in the Pay & Record Office London to 19/12/19. and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London, S.W. 1.
February 19th 1919.

O.C. " " Company.
J.F. Harstedt
Chief Paymaster & O. i/c Records.



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Frank Watts., Regl. No. 71.

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Seventy 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 October 1st 1918.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>7211</u>	<u>wife</u>	<u>Ms Sarah (Miss) Watts.</u>	<u>Signal Hill Road St John's Nfld.</u>	<u>70</u>
Total Allotment, \$				<u>70</u>

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.) [Signature]
 Officer Commanding
 Company
St John's Nfld
Sept 30th 1918

(Sig.) [Signature]
 (Rank) Private L Corp.

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. *Francis. Emile.* Surname... *Watts*.....

3. Rank... *Lance Corporal*..... 4. Regtl. No. *71*.....

5. Address in full to which future payments of gratuity are to ~~be~~ be forwarded..... *French's Lane, Signal Hill*.....

6. Date of enlistment in the Regiment..... *Aug. 28th. 1914*.....

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

8. Relationship of such dependents..... *Wife*.....

9. Address in full of such dependent..... *French's Lane, Signal Hill*.....

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

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service..... *No*.....

12. Give total length of time which you served on active service, whether in Nfld, or Overseas..... *4 years... 97 days*.....

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.....
..... *Seventy Four Dollars.*
..... *Sgt. Newberry.*

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?..... *Not applicable.*

19. Are you now serving in the Regt.? .. *No* ... If not give: - (a) Date of discharge... *Dec. 7th 1918.* (b) Reason for discharge... *Unfit for active service.*

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*

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

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

Signature of Applicant: *Francis E. Hitts*
 Place of Residence: *French's Lane, Signal Hill*
 Declared before me at: *St John's Newfoundland*
 This *28th* day of *February* 19*19*

Bhas D. Hunt
 Signature of Barrister of the *Notary Public*
 Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>8-1-19</i>	<i>34.50</i>		<i>3 mos.</i>	<i>300.00</i>
			<i>less</i>	<i>34.50</i>
				<i>265.50</i>
Certified Correct.			Paymaster.	

FORM K

No. 256



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Frank Watts, Regl. No. 71

hereby agree, until further notification by me, and in similar official form, to make an Allotment of Dollars and Seventy 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:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person).
	mother	Mrs Elizabeth Abbott	75 Welsh's Square 8 Plymouth Road St John's NFLC	70.
			Total Allotment, \$	

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.) Groep Liberty
Officer Commanding
Company

(Sig.) Frank Watts
(Rank) Pfc.

OCT 10 1914 191

SEPARATION ALLOWANCE.

Claimant... Elizabeth Abbott (Mother)
On account of Frank Witto No. 71 Rank... 1st Lt

Decision... Approved
Payable to date of Chesley's 19th (Dec. 11th/16)
by the day or to 1/4/17, whichever date

March 16/1920
Payable to 11/12/16
date of Chesley's 19th birthday

~~W. J. Rudell
M. Bowley~~
Date... Sep 24 1920

W. J. Rudell Capt. Coe
M. Bowley Major

Instructions.....
.....
.....

204 Allotment of 70 per day payable to Elizabeth Abbott
his Mother from 10/10/14 to 30/9/18
Discontinued on account of by allottee & all is made payable
to his wife from 1/10/18 L. Pike S. Sgt.

\$ 520 ⁶⁷/₁₀₀

ROYAL NEWFOUNDLAND REGIMENT

(Separation Allowance Branch)

NOTICE

MOTHER

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

The Paymaster
Separation Allowance Branch
St. John's, Nfld.

(1) Name in full of soldier Rank Reg't or Unit Reg't No.

Frank Watts L. Corpl R. Nfld Reg. 71

(2) Age of soldier Married or single

18 on enlistment Married Sept. 1918

(3) Name in full of mother Age Occupation Permanent Address

Elizabeth Abbott 51 Home duties Frenchs Lane

(4) Give name of your husband Age Occupation Where employed

Albert Abbott 49 Carpenter A. Harvey Co.

(5) If your husband is not supporting you give the reason.

Semi invalid

(6) If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue).

Neuritis
See Med. Certificate

(7) If you are a widow, state date and place of death of your husband

Not applicable

(8) Have you married again since death of above mentioned husband?

N.A.

(9) Names of your other children. Address in full Age Occupation Married or single

No. 397 James Watts Frenchs Lane 25 Expressman Married
K. in A. 12/10/16 St. John's at death

Florence Sheppard Indian Islds 27 Home duties Married

No. 7246 C. Wesley Watts Frenchs Lane 19 Paint Mfg. Single
K. in A. 9/10/17 St. John's at death

(10) State amount earned by (a) Yourself (b) Your husband

Nil
See statement attached

(11) State amount and source of any other income

Nil

- (12) State value of real property belonging to you and your husband *None*
- (13) State value of personal property belonging to you and your husband *\$200.*
- (14) If husband is dead state value of real and personal property left by him *N.A.*
- (15) Actual amount contributed by soldier during the year prior to his enlistment *\$365.*
- (16) Was this amount contributed weekly or monthly *Weekly*
- (17) Did this amount include payment of son's board, etc? *yes*
- (18) State your son's trade or occupation prior to enlistment *Packer*
- (19) State amount of his wages per week *\$6.*
- (20) State name and address of his last employer *Standard Mfg Co.*
- (21) State amount of monthly support from son since enlistment *70¢ p. day allotment*
- (22) State amount of allotment received by you from son since enlistment *About \$1,000.*
- (23) State from what date did you receive allotment? *November 7th 1914*
- (24) Actual amount contributed by other children *Wesley* Weekly Monthly
\$6. before enlistment
+70¢ p. day after enlistment
- (25) Are any of these children in the employ of you or your husband? *No*
- (26) If not receiving support from other children, state cause. Explain fully. *James was married eight years ago*
- (27) With whom are you residing at present? *My husband*

(28) Have you made a previous claim for Separation Allowance. If not, why? Give particulars? *No. Not aware of it*

(29) Are you already in receipt of any payment from any Patriotic Fund? If so, how much? *No.*

(30) Are you already in receipt of Separation Allowance from any source? If so, how much? *No.*

(31) Was the soldier at the time of his enlistment an employee of the Nfld. Government? *No.*

(32) In what capacity and in what place? *N.A.*

(33) Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much? *N.A.*

I herewith make this solemn Declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath, and in virtue of the Evidence Act.

Signature of Applicant *Elizabeth Abbott*

Place of Residence *French Lane, Signal Hill Road*

Declared and subscribed before me at *St. John's* this *16th* day of *January* 19*20*

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. *[Signature]*
Barnet Law

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of member of the Patriotic Fund Committee *Katherine Pearson*

L. N. W. P. A.
Methodist - Minister

I, Elizabeth Abbott, make this
further solemn Declaration :-

My husband, Albert Abbott,
was in hospital during October 1914
and November 1914, during January
and part of February, 1915, each
time for Neuritis. He was again
in hospital during August and
September 1916, with pneumonia.
He has been under doctors care
since October 1914. He could do
absolutely no work from October
1914 until April 1917. Since then
and to this date he has been able to do
only two or three days work a week,
sometimes nothing for one or two weeks,
and never a full weeks work.

Frenchs Lane, St. John's
Declared and subscribed before me
at St. John's this day of January 1920.

MEDICAL CERTIFICATE.

For Information of Separation Allowance Department.

1. Name and regimental number of soldier in respect of whom Separation Allowance is claimed } *C. W. M. M. M. M.*
2. Name and age of said soldier's ~~father or other relative.~~ } *Robert Abbott*
3. Is said ^{step} ~~father or other relative~~ a chronic invalid and totally incapacitated. } *Yes at present*
4. Of what nature is disability ? } *neuritis chronic*
5. From what date has this total incapacity been existent ? } *At times total; at other times can do partial work.*
6. How long is total incapacity likely to continue and what will be the effect on earning power. } *Questionable. Disability is permanent*
7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced and from what date. } *never less than 50%.*
8. Are you the regular attending physician ? } *Yes.*
9. Relationship to soldier of applicant ? } *Mother.*

correct.

I certify that the above statements are

.....*Asphers*.....Place,

.....*Jan. 14. 1920*.....Date.

.....*Clara M. M. M. M.*.....
Physician.

Feb. 26, 1920

Mrs. Elizabeth Abbott,
French's Lane,
City.

Dear Madam:-

With reference to your application
for Separation Allowance, I have been directed to
request that you furnish us with your son Chesley's
Birth Certificate, and oblige

Yours truly,

Major

Paymaster.

Extract from family Bible register.

Charles W. Watts born Dec 11/1897.

Francis E. Watts married Sep. 24/1918.

March 1st 1920.

M. Bowley Major
Paymaster

Mar .24, 1920

Mrs. Elizabeth Abbott,
French's Lane,
Signal Hill Road,
City.

Dear Madam:-

Referring to your application for Separation Allowance, I beg to state that same has been approved, payable to the date of your son Chesley's 19th birthday. I enclose cheque for five hundred and twenty dollars and sixty seven cents (\$520.67) in payment of same.

Yours truly

Major

Paymaster.

SEPARATION ALLOWANCE.

Claimant..... *Mr. James Woodford, Guardian*.....

On account of *M. F. Kelly*..... No..... Rank.....

Decision..... *Approved*.....

Date..... *May 17/1920*.....

W. F. Rendelee Lieut. Col.
J. M. Howley Major

Instructions.....
.....
.....

Allotment of per payable to
his from to
Discontinued on account of

.....



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

April 15, 1920

Mrs. M. Kelly,
#37 Cabot St.,
City

Dear Madam:-

You have no doubt failed to notice the publication which was made somewhat over a year ago, to the effect that the government has authorized payment of Separation Allowance to wives and other dependents of soldiers for the whole period of the War.

There is on this account a certain amount lying to your credit at this Department, which you have not so far claimed. I shall be pleased to pay you any amount on production of your marriage certificate.

Yours truly

W. Howley
Major

Paymaster

In Lunatic Asylum for past 3 months. One child - male - by name Lewis with Mrs James Woodford 37 Cabot St. - mother of Mrs Kelly.

Statement made to me by Mrs. W. 26/4/20 W. Howley Major.

May 19, 1920

Mrs. James Woodford,
#87 Cabot St.,
City

Dear madam:-

Referring to my letter of April 15th to Mrs. Kelly, I beg to advise that I have received authority for payment, due on account of Separation Allowance to Mrs. Kelly, to you as "Guardian" of her child. I enclose cheque for Four hundred and thirty eight dollars and sixty seven cents (\$438.67), being the full amount due.

I also return Mrs. Kelly's
Marriage Certificate.

Yours truly

Major

Paymaster



THE ROYAL NEWFOUNDLAND REGIMENT

HEADQUARTERS

ST. JOHN'S, NEWFOUNDLAND.

Nov. 30th, 1918

3363

From Officer Commanding,
Depot

To Paymaster and Officer i/c Records,
Militia Department

71 L/C. F. Watts

Above noted man who was attached to Depot on "Blue Puttee" leave, was before the Standing Medical Board, and recommended for discharge as unfit for general service, on Nov. 23rd.

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

Clothing has not been issued to him and certificate is attached herewith.

CCD/AC

ADIT.
The Royal Newfoundland Regiment,
St. John's.
R. H. Satt Capt.
Pres. Regimental
Depot The Royal Newfoundland Regiment
St. John's, Nfld.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

ST. JOHN'S, NEWFOUNDLAND.

Nov. 27-1918

This certifies that #71 L/c. J. Watts
 has not been issued with any civilian clothing at the
 Discharge Depot.

R. H. Lat Capt.

Depot The Royal Newfoundland Regiment
 St. John's, Nfld.

71
Oct. 5th., 1918.

Mrs. Frank(Alice) Watts,
Signal Hill Road,
St. John's.

Dear Madam:-

Application has been made by your
husband L/Cpl. Frank Watts to have Separation Allowance
granted to you.

Will you kindly send me your Marriage
Certificate to be recorded, in connection with same and
oblige,

Yours faithfully,

Capt. & Paymaster.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 60⁰⁰

Nov 30th 1918

Received from the First Newfoundland Regiment
the sum of Sixty ⁰⁰ Dollars.
on account ~~balance~~ of Pay.

F Watts

Ch. No. 6030	Initials EW
Pay Ledger 41	Initials Wn
Gen. Ledger	Initials

Regtl. No. 71 Rank S/C

No. 71

Rank S/ser

Name

Watts F

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 2.65

Sept 14 1918

Received from the First Newfoundland Regiment
the sum of Two $\frac{65}{100}$ Dollars.
on account of Pay.
Balance

F Watts

Ch. No. 2619	Initials JH
Pay Ledger 263	Initials WJ
Gen. Ledger	Initials

Regtl. No. 71 Rank LC

No. 71

Rank. *Sgt*

Name

Watts Jr

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 500

Aug 27th 1918

Received from the First Newfoundland Regiment
the sum of Five ⁰⁰ Dollars.
on account of Pay.
~~Balance~~

H. F. Watts

Regtl. No. 71 Rank Plc.

Ch. No. <u>1711</u>	Initials <u>EW</u>
Pay Ledger <u>263</u>	Initials <u>Wm</u>
Gen. Ledger.....	Initials <u>J</u>

No. 71

Rank *S/ser.*

Name *Watts F*

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 7 $\frac{23}{100}$

Apr 7 1919

Received from the First Newfoundland Regiment
the sum of Seven $\frac{23}{100}$ Dollars.
~~on account~~ of Pay.
balance

Cheque made to Signal Hill Rd.

Ch. No.	15354	Initials	EW
Pay Ledger	41	Initials	EF
Gen. Ledger		Initials	

Regtl. No.

Rank

No. 71

Rank Staff

Name Watts 7

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 34⁵⁰

Jan 8 19 19

Received from the First Newfoundland Regiment
the sum of thirty four $\frac{50}{100}$ Dollars.
on account of Pay. *P.D. J. Jones*
balance *F. Watts*

Ch. No. <i>8006</i>	Initials <i>Jones</i>
Pay Ledger <i>370</i>	Initials <i>aux.</i>
Gen. Ledger	Initials

Regtl. No. *71* Rank *Lieut.*

No. 71

Rank *S/ptl*

Name *Watts, T.*

NOV 29 1918

St. John's,

Royal Newfoundland Regiment.

Billeting Account,

To Lt. F. Watts

Billeting Soldiers as undermentioned

from Nov 22nd /18 to Nov 29th /18

<u>71 Lt. F. Watts</u>	<u>7</u>	<u>20</u>
------------------------	----------	-----------

ACCOUNT	<u>BQM</u>	INITIALS	<u>EW</u>
CH. NO.	<u>6029</u>	INITIALS	
IND LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN LEDGER		INITIALS	

Certified correct for \$ 7 20

R-J
Billington
 Billiting Officer.

F. Watts

DEC 6 1918

St. John's,

Royal Newfoundland Regiment.

Billeting Account,

To L/C. F. Watts

Billeting Soldiers as undermentioned

from Nov 29th /18 to Dec 6th /18

71. L/C. F. Watts

7 20

ACCOUNT 6387 B4m Ren

~~7 20~~

Certified correct for \$ 7. 20

C. D. Dickson

Billeting Officer.

F. Watts



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1914

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

Examination of Watts Bank (194)
aged 19 years conducted at C. L. O'Quinn
Date: 28/8/14 Recruiting Officer:

NO. OF TEST FINDING

1 No
2 No
3 No
4 No
5 No
6 No
7 Yes
8 Yes
9 No
10 N
11 n.
12 n.
13 No.
14 n.
15 n.
16 n.
17 n.
18 n.
19 n.
20 n.
21 n.
22 n.
23 n.
24 n.
25 n.
26 n.
27 n.
28 n.
29 n.
30 n.
31 n.
32 n.
33 No
34 5 x 4 1/2
35 125 lbs
36 32 - 36
37 5 40/100 for milk
38 Mother Elizabeth Watts 25 Walsh's Sq.
39 No.

Fit

Signature of Medical Examiner:

Cherry Macpherson



Department of Militia, Newfoundland
Medical Department

Medical Report on an Invalid

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station **St. John's**

Date **Nov. 22nd '18.**

- | | | |
|-----------------------------------|-------------------------------|-----------------------|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday | 22 years |
| 2. Regimental No. 71 | 6. Enlisted on | Aug. 28th '14. |
| 3. Rank L/Cpl | at | St. John's |
| 4. Name WATTS, FRANK | 7. Former trade or occupation | Packer |
| 8. Disability | | |

VENTRAL HERNIA

9. History **Was operated on for appendicitis about eight years ago. Ventral hernia followed this. States this condition was present at time of enlistment, and was not noticed. He states that he is no worse than when enlisted.**

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

Large operation scar over appendix area with ventral hernia complicating bulging on coughing. Otherwise normal.

11. Was sanatorium advised and refused?
operation

12. Do you recommend discharge as permanently unfit?

Signature F. W. BURDEN.....

Rank or Qualification Actg. M.O.

Remarks if any by Officer i/c Hospital.

Place Signature

Date Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x **CANNOT** be considered as aggravated by:—
due to

(a) Service during this war. (b) Climate. (c) Ordinary Military Service
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

15. (a) **THE ENTIRE DISABILITY**—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **Nil**

(b) **PENSIONABLE DISABILITY**—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? **Nil**

(State in percentage.)

Remarks if any:—

16. Is the disability permanent? **No**

17. Has the disability been aggravated by (a) Intemperance **No** (b) Misconduct **No**

18. The refusal of operation sanatorium is:— (a) Reasonable
(b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to { General Hospital, **No**
Naval and Military Con-
valescent Hospital,
Jensen Tuberculosis Camp.

20. We recommend discharge from retention in the Army **Unfit for General Service**

Remarks if any:—

(Sgd)... **N. S. FRASER** President

Signatures..... **J. SINCLAIR TAIT**

..... **L. PATERSON, Major**

Place **St. John's**

Date **Nov. 23rd. 1918**

APPROVED

Station

Date



(Sgd)... **CLUNY MACPHERSON, Major**
D. M. S. NEWFOUNDLAND.
Administrative Medical Officer

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

Pension No. _____

Regtl. No. 71 Rank 1 Lt Name Frank Watts

Corps served with Royal Nfld Regt.

Date of Medical Board Nov. 23/18

Pensionable disability Nil for _____ months

Pension granted:
\$ _____ per month for _____ months

or Gratuity granted:
\$ _____ payable in _____ equal monthly insts.

Granted to:
Name _____
Address _____

Date case disposed of NOV 26 1918

Approved by:
Members of Board
Phelan Chairman
L. C. C.
W. P. P.

Remarks:



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 *Walter Frank*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *71*
 Intended address *Signal Hill St Johns*
 Height on discharge *5* Feet *5 1/2*
 Color of hair on discharge *Dark*
 Complexion *Fair*
 Color of eye *Brown*
 Descriptive Marks *Scar right side*
 Figure on discharge *medium*
 Christian name of Father
 Christian name of Mother *Elizabeth*
 Wife's maiden name in full *Alice Tucker*
 Date and place of marriage *Sept 21st 1918 St Johns*
 Christian names of children
 Place and date of soldier's birth. *Paris Ave. S B. Dec 25th 1895*
 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) *Frank Watto*

Station *St Johns* Date *Nov 22*

(Rank) *Plc*

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.

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

Station *St Johns* Date *Nov 22/18*



The Royal Newfoundland Regiment

REPORT OF HEADQUARTERS TRAVELLING BOARD HELD ON SOLDIER ON REGIMENTAL STRENGTH

Depot: Headquarters, Royal Newfoundland Regiment

Date Nov 22nd 1918

Regimental No. 71

Name Watts Foul

Address

Disease or Disability Neutral Service

Finding of last Standing Medical Board,

held on 19

Present Condition The above condition present when

he enlisted -

not due to military service

Recommendation Standing Med Bd

Category C III

Members
of
Board

R. H. Fairbank

O. C. Depot

Patterson

D. D. M. S.

Scott-Burden

adj

M. O. Depot



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station *St. John's*

Date *Nov. 22nd 1918*

1. Unit *Royal Newfoundland*
2. Regimental No. *71*
3. Rank *Lt. Col.*
4. Name *Watts. Frank*
5. Age last birthday *22 years*
6. Enlisted on *Aug. 28th 1914*
- at *St. John's*
7. Former trade or occupation *Packer*

8. Disability

Ventral Hernia

9. History *Was operated on for appendicitis about 8 yrs ago. Ventral Hernia followed this. States his condition less present at time of enlistment than now. He states that he has no worse than then when enlisted.*

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

Large operation. Scar over
Appendix area, with ventral
Hernia complicated - bulging
on coughing -
Otherwise normal.

11. Was sanatorium operation advised and refused?

12. Do you recommend discharge as permanently unfit?

Signature

W. Burden

Rank or Qualification

Reg. Med.

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x cannot be considered as aggravated by:—
due to

(a) Service during this war. (b) Climate. (c) Ordinary Military Service
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? nil

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? nil

(State in percentage.)

Remarks if any:—

16. Is the disability permanent? no

17. Has the disability been aggravated by (a) Intemperance no (b) Misconduct no

18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to General Hospital, Naval and Military Convalescent Hospital, Jensen Tuberculosis Camp. no

20. We recommend discharge from retention in the Army unfit for General Service

Remarks if any:—

Signatures: [Signature] President
[Signature]
[Signature]

Place [Signature]
Date Nov 20/18

APPROVED [Stamp]
Station [Stamp]
Date [Stamp]

[Signature]
D. S. NEWFOUNDLAND
Administrative Medical Officer

C.R. 71

Extract from Daily Orders, Part II, UNIT: The Royal Wfld. Regt.,
dated Dec. 10th. 1918.

STRENGTH DECREASES.

71 L/C. F.E.Watts

Having been found Medically Unfit is Discharged from 5/12/18.

Nov. 30th, 1918

From Officer Commanding,
Depot

To Paymaster and Officer i/c Records,
Militia Department

71 L/C. F. Watts

Above noted man who was attached to Depot on "Blue Puttee" leave, was before the Standing Medical Board, and recommended for discharge as unfit for general service, on Nov. 23rd.

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

Clothing has not been issued to him and certificate is attached herewith.

CCD/AC

R. H. 7,
for BB

C.R. 71

Extract from Medical Board held on Saturday Nov. 23rd,
1918~~1~~

71 L/C. Watts, F.

Recommended Discharge from Army Unfit for General
service.

MM.

C.R. 71

Extract of Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, dated October 2nd 1918.

BLUE PUTTEE LEAVE.

THE FOLLOWING REPORTED AT HEADQUARTERS ON THE FOLLOWING DATE:

Pte. F. Watts

1/10/18.

D-71.

Sept. 30th, 1918.

From O. C. Depot.

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

Re Allotment of #71 L/C F. Watts.

Above noted man has made application to have his Allotment in favour of his mother cancelled from and including October 1st. New allotment in favour of his wife, together with application for Separation Allowance, is enclosed herewith.

St Johns
Sept 16th 1/18

Dear Sir:

I herewith apply for Permission
to marry Miss Alice Lillian Tucker
74. Forest Road, Sept 24th 1/18

I have the Honor to be your
Obedient Servant.

W. L. Frank E. Watts
Signal Hill
City

Granted
SEP 16 1918

To be Noted

Part II. Orders
Card Index
Nominal Roll

JLW

C.R. 71

Extract from Daily Orders part 11 depot, St. John's Dated Sep. 16/1918.

71 L/C F. E. WATTS

The above mentioned soldier is hereby granted permission to **Marry**
Miss Alice L. Tucker of St. John's Newfoundland.

C.R. 71

August

August 24th/18

From D.O.C., Newfoundland,

To #71, L/C F. Watts,
Royal Newfoundland Regiment,
Walsh's Sqr, C I T Y .

I have the honour to acknowledge receipt of your communication of the 22nd inst being application for Discharge from the Royal Newfoundland Regiment. You are at present in Newfoundland on Furlough granted to the remaining men of the original Contingent. This Furlough was granted on the condition that all the men concerned would report back to their Units on the termination of their leave. As you are on the strength of the Second Battalion at Winchester, you will have to report there for Duty, when any application for discharge should be forwarded to Commanding Officer, Second Battalion .

Major,

D. O.C., Newfoundland.

Walsh's Square,
C I T Y.

August 22nd.1918.

Major A.Montgomerie, O.B.E.
District Officer Commanding.
C I T Y.

C.R.

71

Sir:

I have the honour to hereby make application for discharge from the Royal Newfoundland Regiment, having given nearly four years of Service in the United Kingdom, being unfit for Active Service in France, owing to a Rupture in the Right Side.

My two brothers have fought with the Regiment, and are among the Killed, and being the only son now living, I consider the circumstances sufficient to have the request granted, so that I may be in a position to take up my former pursuits.

Thanking you in anticipation of an early reply.

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

Frank H. Pettit

#71 L/Cpl.

ROYAL NFLD. REGIMENT.

C.R.

71

Extract from Daily Orders part 11, from Unit The Royal
Mfld. Regt. St. John's, dated August 5, 1918.

The following unreturned from overseas and reported
at Depot August 4, 1918.

#71 Pte. F.E. Watts.

On special "Home Retter" leave and granted leave from
Depot to 4-9-18

C.R. 7



French's Lane
Signal Hill
St Johns

April 26th 1918

Hon. J. R. Bennett
Minister of Militia

Please will you grant me my request and get my boy home. No. 71. L/C Frank Watts now at Winchester England. he is not fit for active service, I gave all I had to give that was 3 and two of them has made the Supreme Sacrifice. 397 Priv James Watts. & 2226 Pte Westey Watts. My health is failing me fast my heart is very weak.

I would be more than thankful to you and God to see him before I get any worse. Doctor Macpherson advised me to write you, he says he knows you will do your very best for me. Please send & tell me what you can do for me.

Yours Sincerely
Mrs Albert Abbott

May 2nd, 1918

Mrs. Albert Abbatt,
French's Lane,
Signal Hill

Dear Madam:-

In reply to your letter dated April 26th I am directed to inform you that your application for furlough for No. 71 L/Cpl. Frank Watts has been forwarded to the proper authorities on the other side, and when their decision on this matter has been received by us you will be informed of same.

Yours faithfully

Major, C.S.O.

C.R.

71

Extract from Nominal Roll Embarked St. John's per S.S.
Florazel, Oct. 4, 1914.

#71 Watts Francis.

C.R. 71

Francis Emily Watts was attested for General service
with the NEWFOUNDLAND REGIMENT on Sept. 2nd. 1914.
Regimental No 71 was allotted to Pte. F. E. Watts.

AUTHORITY:

Record Ledger,

Dept. of Militia,
March 25th. 1919.

Reg. No. 71 Rank *Pt* Name *Watts F C*
Attested Address *25 Walsh's Square*
Allotment *70* Allottee *Wife (Mrs Alice Watts)*
Date of Allotment *1-10-18* Returned from Overseas *4-8-18*
Embarked for Overseas Cause *Special Blue Putter Leave*

*16-9-18. Granted permission to marry Miss
Lillian Quicker of St John's npld.*

*30-9-18 application for separation allowance
sent to paymaster this date.
of leave from 18-10-18 to 22-10-18*

1-12-18

DISCHARGED—MEDICALLY UNFIT

