



D.V.A. File. Vol. 122.

1914-5.

FIRST NEWFOUNDLAND REGIMENT.

P.C. 260469.

ATTESTATION OF

W.V.A. 51458

No. 1639

Name Garland West

Corps

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Garland West
- 2. What is your full Address? 2. Stearmanville
St. John's.
- 3. Are you a British Subject? 3. Yes
- 4. What is your Age? 4. 17 Years 7 Months.
- 5. What is your Trade or Calling? 5. Carpenter
- 6. Are you Married? 6. No widower
- 7. Have you ever served in any Branch of His Majesty's }
Forces, naval or military, if so,* which? } 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
- 10. Did you receive a Notice, and do you understand its }
meaning, and who gave it to you? } 10. — Name —
Corps —
- 11. Are you willing to serve upon the conditions as embodied in the roll of service }
to be signed by you if you are accepted? } 11. Yes

I, Garland West 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.

Garland West SIGNATURE OF RECRUIT.
Amant Gomerie Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Garland West 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 17 day of July 1910.
Amant Gomerie Signature of the 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 _____ 191 _____
Place _____ } Approving Officer.

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

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

1639

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Name West Garland
 Apparent age 28 years 7 months. Height 5 feet, 4 inches.
 Chest measurement { Girth when fully expanded 37 1/2 inches.
 { Range of expansion 4 1/2 inches.
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Joseph West
Carmanville | Relationship Father

None 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.
<u>Sarah Helen</u>	<u>West</u>	<u>Grand Falls June 6/1909</u>
<u>John Thomas</u>	<u>✓</u>	<u>Bonaville Oct 18/1913</u>

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ (") _____ " _____									



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1639 Name Garland West Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Garland West
2. What is your full Address? { 2. Stearmanville
3. Are you a British Subject? 3. Yes
4. What is your Age? 4. 28 Years 7 Months.
5. What is your Trade or Calling? 5. Carpenter
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? } 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. Yes

I, Garland West 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.

Garland West SIGNATURE OF RECRUIT.
Amant Gaudin Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Garland West 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 17 day of July 1915.

Amant Gaudin Signature of the 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 _____ 1915 }
Place _____ } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1639

Name West Garland
 Apparent age 28 years 5 months. Height 5 feet 4 inches.
 Chest measurement { Girth when fully expanded 37 1/2 inches.
 Range of expansion 4 1/2 inches.
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Joseph West
Larmanville | Relationship Father

Garland West 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.
<u>Sarah Helen</u>	<u>West</u>	<u>Franklin, June 11 1919</u>
<u>John Thomas</u>	<u>v</u>	<u>Gomerville Oct 18 1913</u>

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>18-6-15</u>									
Joined at <u>St John's</u> on <u>June 18th 1915</u>									
<u>Embarked St John's train to Quebec 27-10-15</u>									<u>Embarked B.C. 28th 1916</u>
<u>Disembarked Quebec 30-3-16</u>									
<u>Discharged to duty 29-4-16</u>									
<u>Involved to transport 4-4-16</u>									<u>Wounded 1-7-16</u>
<u>Embarked attached depot 13-9-16</u>									
<u>Arrived Newfoundland 10-10-16</u>									<u>Wounded 6-7-16</u>
<u>Discharged medically unfit 19-1-17</u>									
Total Service forfeited as above									

Total Service towards Engagement to 19-1-17 (date of discharge) 1 years 216 days
 " " Pension " " " " " "

Regimental Number

1639

Company

"A"

THE
1ST NEWFOUNDLAND REGIMENT.

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

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

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

Subject to the Newfoundland Volunteer Act,
5 George V., Chapter IV.

Signed

Sayland + West

Witness

G. G. G. G.

Dated at

Newton Park School

Nov 27th 1916

C.R. 1639

Garland West was attested for General Service
with the NEWFOUNDLAND REGIMENT on June 18th 1915
Regimental No. 1639 was allotted to Pte G. West.

AUTHORITY:

Record Keeper

Dept. of Militia,

March 25th. 1919.

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... *Garland* 2. Surname... *West*

3. Rank... *Private* 4. Regt. No. *1639*

5. Address in full to which future payments of gratuity are to be forwarded... *55 Coakstown Road St. John's*

6. Date of enlistment in the Regiment... *18 June 1915*

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

Altogether to Sarah Jane West

8. Relationship of such dependents... *mother*

9. Address in full of such dependent... *Carmarville N. B. N.*

10. Is said dependent, now or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

None - only kids
11. Were you on active service only in Nfld. If so, give dates, and particulars of such service.....

France
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *1 year 216 days*

9 pages you

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?.....

Yes

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.?..... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

Jan 19/17

Wounded

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.....

France - March 1916 to July 1916

Wounded

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?

No

(b). If so, are you in receipt of full pay and allowances from that Com.?

Permittee \$20.00 per month

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:

Garland & Whist
17 Coopers Road, St. Johns

Place of Residence:

Declared before me at:

St. Johns

This

4th

day of *March* 19*47*

W.D. Spinks

W. A. ...

Signature of Barrister of the 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>4 mos.</i>	<i>\$280.00</i>

Certified Correct.

Paymaster.

246 rounded off

C.R. 1634

Extract from Nominal Roll of Royal Nfld. Regt.
Draft No. 5. from 2nd Bn., Depot to 1st Bn., B.E.F.
Embarked 28-3-16.

1639 Pte. G. West.

G. West

1639

P. L. P. 9

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

MEDICAL HISTORY

OF

Surname West

Christian Name Garland

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County W. I.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 19 day of June 1915 at St. Johns W. I.		on day of 191	
Declared Age	25 years Carpenter		years	days
Trade or Occupation	Carpenter			
Height	5 feet	4 inches	feet	inches
Weight	122 lbs.			lbs.
Chest Measurement	Girth when fully expanded... 34½ inches		inches	
	Range of expansion... 4½ inches		inches	
Physical Development				
Vaccination Marks	Arm			
	Number	1		
When Vaccinated	1912			
Vision	R. E.—V=	4/6	R. E.—V=	
	L. E.—V=	4/6	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b) Ear slightly everted		(b)	
Approved by (Signature)	<u>W. Amos Petersen</u>			
(Rank)	Capt			
	Medical Officer.			Medical Officer.
Enlisted	at St. Johns on 18 day of June 1915		at day of 191	
Joined on Enlistment	Corps.	1 st W. I. Regt. 705	Corps.	
	Regtl. No.	1639	Regtl. No.	
Transferred to				
Became non-effective by				
(Signature)	on	day of 191	on	day of 191
(Rank)				

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

Date	Brief Details, and Signature
17.10.15	
19.11.15.	Vacc. <i>R.P. Graham Lt. R.M.C.</i>
23.10.15.	
20.3.16.	Fit for active service <i>R.P.M.</i>

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
<i>St John's 12/14</i>					

INVALID SOLDIER.

2/1st BATTAL THE FOUNDATION REGIMENT



I recommend for Purlough 1639. Pate West, G.

for 4 months on account of Gun Shot wounds
of left leg, involving main vessels & knee joint

which renders him unfit for duty, will you kindly arrange for his
re-examination shortly before his Purlough expires.

Signed A. J. Wilson
St. Paul.

20 9. 16
Ayr.

ORIGINAL

Temporary

Army Form B. 178

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. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname *West* Christian Name *G.*

TABLE I.—General Table.

Birthplace { Parish.....
County.....

Examined { on..... day of..... 191..
at.....

Declared Age years..... days.

Trade or Occupation.....

Height..... feet..... inches

Weight..... lbs.

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

Physical Development.....

Vaccination Marks { Arm..... RIGHT LEFT
Number.....

When Vaccinated.....

Vision { R.E.—V=.....
L.E.—V=.....

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

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

Approved by
Rank
Medical Officer.

Enlisted { at.....
{ on..... day of..... 191..

	Corps	Regtl. No.
Joined on enlistment	<i>1st Hampshire</i>	<i>1639</i>
Transferred to		

Became non-effective by
on..... day of..... 191..
(Signature).....
(Rank).....

TABLE III.—Boards; Courts of Enquiry, 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

TABLE IV.—Service Table.

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

TABLE II.—Only for admissions 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 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				
<i>8th</i> LONDON GENERAL HOSPITAL WANDSWORTH.	5	7	16	2	9	16	<i>M. N. T. L. 2nd 60 IV. 158.</i>		<i>Open wound. Gaping wound of calf of left leg. very deep. Small abscess at site of wound. level of 10. in. Wound healed for discharge.</i>	<i>A. R. M. Hill</i> <i>Capt. A. R. Hill</i>

Admitted 5-7-16

Army Form W. 3016.

No. _____

Date Sept 2nd 1916

(1) To the Officer i/c Records,

58 Victoria St

S.W. (Station.)

(2) The Officer Commanding,

New Zealand Contingent

Quays (Station.)

(3) The Paymaster,

58 Victoria St

S.W. (Station.)

Regimental No. 1639

Rank and Name. Plt West

Regiment or Corps 1st Field Contingent

has been granted a furlough from Sept 2nd to Sept 11th

His address while on leave will be:—

58 Victoria St. S.W.

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

I consider he is fit for ~~Heavy~~ Light duty. and likely to be fit for service overseas within 3 months

Horace Tegan Cpl R.A.M.C.(F)
Registrar, R.A.M.C.I.

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

(Station.)

* Strike out that which is inapplicable.

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

Receipt for Army Book 64

No. *1639* Name *Gwesh*

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

Name *West Garland*

Date *20 Oct 1920*

Place *51A. Fedrickton Ave.*

Halifax N.S.

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

W. Westland

C.R. 1639

Extract of Nominal Roll Draft (All Ranks) to 1st Bn.,
B.E.F. Embarked Southampton.

1639 Pte. G. West.

28-3-16.

Casualty Form—Active Service.

1061

Regiment or Corps Newfoundland
 Regimental No. C.R. 1639 Rank Pte Name West G.

Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) _____

Date of promotion to present rank } _____ Date of appointment to lance rank } _____ Numerical position on roll of N.C.Os. } _____

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<u>Embarked</u>			
		<u>Disembarked.</u>			
<u>25/4/16</u>	<u>James Battalieu</u>	<u>4</u>	<u>5.16 B</u>	<u>213</u>	<u>unit</u>
	<u>6 Lt Col Admitted</u>	<u>Irish</u>	<u>Raven</u>	<u>12.4.16</u>	<u>A 7666</u>
	<u>do do to duty</u>		<u>---</u>	<u>29.4.16</u>	<u>A 8195</u>
	<u>"Hospitalship"</u>	<u>Transferred to England</u>		<u>4.7.16</u>	<u>W 3083</u>

all clerk CAPTAIN.
 FOR O.I.C. INFANTRY RECORDS
 G. H. Q.; 3RD ECHELON.

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

P.T.O.

STATEMENT OF ACCOUNT

No. 1639.

Name West J

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
	Brought forward		243 43	248 29	4 86
	Wan Source Gratuity 4 mos @ 70 ⁰⁰			280 00	284 86
	Best clothing Bonus			35 00	319 86
Dec 9.	To Pay		12 95	563	306 91
	" "		87 15		219 76
Jan 12/21	" "		35 00		184 76
Mar 1	" "				114 76
		11282	70 00		44 76
Apr 1	" "	14162	70 00		4 86
May 1	" "	18641	39 90		
			368 43		
			558 43	563 29	4 86 cr

Signed Alvany JSM

28
1
1921

6391 C.R.

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

#1639 PtelWest, Garland discharged Jan.19th 1917

Medically unfit

C.R. 1639

Extract from Telegram received from London, dated
September 30, 1916.

~~Message~~ Leaving Liverpool, Scandinavia, September
27th passage has been provided, Quebec, following on
furlough:

#1639 Pte. West.

C.R. 1639

Copy of Cablegram to Governor St. John's Nfld from P.&R.O 30 Sep 86.

1639, Pte West.

Left Liverpool on Scandinavian 27th Sept. Passage has been provided
to Quebec. On furlough.

C.R. 1639

Extract of Communication from P. & R. O. August. 15th., 1916 .

From Officer Commanding 3rd London General Hospital.

To Officer i/c Records Newfoundland Contingent 58 Victoria Street, S.W.

1639, Pte R. West. ✓

to Lammus Aux. Hosp., Esher 10.8.16.

In accordance with your memo of 30th. June, I beg to inform you that the undermentioned men were transferred to the Convalescent Home named on 10/8/16.

(Sgd) Horace Fagan, Capt. R.A.M.C.T.

Registrar R.A.M.C.T.

3rd London General Hospital,

Wandsworth S.W.,

Wandsworth, S. W.

12th August 1916.

C.R. 1639

Extract from Casualties G.914 5/8/16, 1st. Bn. The Royal Newfoundland
Regiment, dated Aug. 9th. 1916.

1639 Pte. G. West

W. 1/7/16.

R/b O.C. Bn. 11/7/16.

C.R. 1639

Extract of Casualties received from Pay & Record Office,
London, dated August 5, 1916.

#1639 Pte. G. West. ✓

Wounded 1/7/16. Reported by C.C. Bn., 11/7/16.

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

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender

Frederick M. Stirling

Address

Line
Number

Rcd

By

Sent

by

Check

Dated

27th July, 1916.

To

Mr. Joseph West,
Carmanville.

Regret to inform you that Record Office First Newfoundland Regiment reports No. 1639 Private Garland West at Wandsworth Gunshot Wounds leg and side.

J.R.BENNETT,

Colonial Secretary.

FOR TYPEWRITER

C.R. 1639

Extract of Casualties received from Pay & Record Office,
London, dated July 27, 1916.

#1639 Pte. Garland West. ✓

Admitted 3rd L.G.H., 6/7/16 GSW. L.Leg and R.Side.

Auth:- Hospital's Mistake and Correction.

JUN 8 1916

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 1639, Private G. West, who was previously reported at Rouen, April 12th, suffering from Tinea, was discharged to duty April 29th.

This information has been received by mail.

Yours faithfully,

Mr. Jas. West
Carmenville.

Colonial Secretary.

W(41)

MAY 13 1916

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1639, Private Garland West, was admitted to the 6th General Hospital, Rouen, April 12th, suffering from Tinea. This information has been received by mail.

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

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

Yours faithfully,

Colonial Secretary.

Mr. Joseph West,
Carmenville.

C.R. 1639

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P. & F. O. May 6th. 1916.

1639, Pte G. West. ✓

1/Newfoundland Tinea Dis to Duty ex 6 Gen. Hos. Rouen 29th April 1916.

C.R. 1639

Extract from Casualties..... List No. H. 8195.

1639 Pte. G. West

Dis. to duty ex 6 Gen. H. Rouen 29th Apl. 16. Tinea.

C.R. 1639

Extract from Nominal Roll Sgt Draft to B.E.F. arrived
19, I.D.D. 30-3-16 Joined Battalion 15-4-16

#1639 Pte. G. West.

C.R. 1639

Extract from Nominal Roll Entrained St. John's 27/10/15 for Overseas

1639 Pte. Garland West

SICK & WOUNDED N.C.OS & MEN OF THE EXPEDITIONARY FORCE - FRANCE.



PERTH RECORD OFFICE.

LIST NO.H.7666.

13247 Pte. Graham, W. 2/Gord.Highrs. ICT.Foot 952.....Adm.Conv.Dep.H.Rouen ex 6 Gen.H.12th Apr.16.
 3889 Pte. Davidson, W. 9/Gord.Highrs. ICT.Leg 952.....Adm.Conv.Dep.H.Rouen ex 9 Gen.H.12th Apr.16.
 17974 Pte. Suttie, D. 7/Cam.Highrs. Dis.to 15 Inf.Base Etaples Class "A" ex Conv.Dep.H. 12th Apr.16.
 13536 Pte. White, H. 2/Gord.Highrs. Deafness.....To Eng.by H.S.Aberdonian ex 5 Gen.H.12th Apr.16.

TERRITORIAL FORCE PERTH RECORD OFFICE.

LIST NO.H.7666.

806 Pte. Scott, R. 6/Gord.Highrs.att.Impetigo.....Adm.2 Sty.H.Boulogne 12th Apr.16.
 H.Q. IGC.
 11951 Pte. Thompson, G. 6/Gord.Highrs. N.Y.D. -do-
 3355 Pte. Moir, W. 5/Gord.Highrs. GSW.Foot.R.Leg.L....Adm.6 Gen.H.Rouen 12th Apr.16.
 2059 Cpl. White, J. 6/Sea.Highrs. GSW.Eye. -do-
 916 Pte. Stark, A.G. 5/Sea.Highrs. Influenza. -do-
 5480 Pte. Carr, R. 6/A.& S.Highrs. W.Shock Shell. -do-
 1647 Sgt. McEwing, A. 6/A.& S.Highrs. GSW.Thigh.R. -do-
 1467 Pte. Lunn, A. 6/Blk.Watch. Influenza 21.....Adm.Conv.Dep.H.Rouen ex 11 Sty.H.12th Apr.16.
 2916 Pte. Scott, W. 7/Blk.Watch. Debility 61. -do-
 2907 Pte. Ramsey, D. 7/Blk.Watch. Trench Fever.....Adm,Conv,Dep.H.Rouen ex 12 Gen.H.12th Apr.16.
 4242 Pte. Parker, E. 5/Sea.Highrs. Cont.Shldr.1195.....Adm.Conv.Dep.H.Rouen ex 1 Sty.H.12th Apr.16.
 2454 Pte. Crichton, W. 7/Gord.Highrs. GSW.Back Vl.....Adm.Conv.Dep.H.Rouen ex 9 Gen.H.12th Apr.16.
 2689 Pte. Anderson, R. 9/A.& S.Highrs. Dis.to 2 Terr.Base Rouen Class "A" ex Conv.Dep.H. 12th Apr.16.
 3626 Pte. McLachlan, T. 9/A.& S.Highrs. Dis.to 2 Terr.Base Rouen Class.T.B.B.ex Conv.Dep.H.12th Apr.16.
 2836 L/C. Smith, W. 4/Gord.Highrs. GW.IV.(1),VI(1).....To Eng.by H.S.Aberdonian ex 5 Gen.H.12th Apr.16.
 2383 Pte. Brand, J. 5/Gord.Highrs. Influenza. -do-
 1884 Pte. McInnes, N. 1/8 A.& S.Highrs. Obs.Enteric Carrier.Adm.Isol.H.Etaples ex 51 Inf.Base Dep.12th Apr.16. Slt.
 3285 L/C. Greer, J. 6/A.& S.Highrs. Dis.to 51 Inf.Base Etaples Class "A" ex Conv.Dep.H. 12th Apr.16.
 3457 Pte. Trainer, J. 6/Blk.Watch. GW.II(1).II(3)Eye L.To Eng.by H.S.Aberdonian ex 5 Gen.H.12th Apr.16.

NEWFOUNDLAND CONTINGENT.

LIST NO.H.7666.

1639 Pte. West, G. 1/Newfoundland. Tinea.....Adm.6 Gen.H.Rouen 12th Apr.16.

C.R. 1639
1429

June 2nd. 1917.

1639

Mr. G. West,
Carmerville,
Fogo.

Dear Sir:-

MA
I enclose herewith cheque for \$4.86 being the amount due you as Ration money whilst on Furlough in England.

Yours truly,

Lieut.
Deputy Paymaster.

West, Harland

1639

Sept

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ $87 \frac{15}{100}$

Dec 9th 1918

Received from the First Newfoundland Regiment
the sum of Eighty Seven $\frac{15}{100}$ Dollars.
~~on account~~
balance of Pay.

Witness
Mark witness P. G. Walsh
Regtl. No. 1639 Rank Pte

Ch. No. 6508	Initials. EW
Pay Ledger 288	Initials. WN
Gen. Ledger	Initials.

No. 1639

Rank

Pl.

Name

Wes. G.

P.M. 1639 West

Proceeding to Halifax
on Wednesday. Please

pay one cheque for P.P.
Pay.

B.T.D.

9/12/18

91 days @ 1.10 = 100.10

Bonus

12.95

87.15

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. *1639* Rank *Private* Name *G West*

Died ^(a) at _____ on the _____ of _____ 191 .

Deserted at *On Furlough* on the *26th* of *Sept.* 191 *6.*

I Certify to the correctness of above in every particular.

Embarked 'Scandinavian'

FROM Liverpool 27-9-16

{ Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>29/9/16 P.M.</i>	<i>3</i>	<i>6</i>	<i>3 1/2</i>
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay			
	<i>Sept. 15 191</i>		<i>10</i>		days at _____ from _____ to _____			
	<i>22 "</i>		<i>10</i>		Messing allowance days at			
	"				from _____ to			
	"				Clothing and kit allowance			
				<i>1 0 0</i>	Amount produced by the sale of Necessaries			
	Consolidated stoppage.....				Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including			
					interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	<i>2</i>	<i>6</i>	<i>3 1/2</i>	Balance due to the Paymaster.....			
		£	<i>3</i>	<i>6 3 1/2</i>		£	<i>3</i>	<i>6 3 1/2</i>

I hereby Certify that the above account is correct in every particular, and that the debtor balance of ~~£~~ is correctly chargeable against the Public.^(b)

Dated at _____
this _____ day of _____ 191 .

NEWFOUNDLAND CONTINENT
J. W. Marshall
PAYMASTER & OFFICER *Paymaster*

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
(b) Words in Italics to be struck out when there is no debtor balance.



98



1ST NEWFOUNDLAND REGIMENT

P. O. BOX No. 1242

TELEPHONE No. 361

PAY DEPARTMENT

CABLES AND TELEGRAMS TO
"PAYDEPT."
ST. JOHN'S, NEWFOUNDLAND

ST. JOHN'S, NEWFOUNDLAND.

ALL COMMUNICATIONS TO BE
ADDRESSED TO THE
PAYMASTER

January 12th 1917.

Deputy Paymaster,
First Newfoundland Regiment,
St. John's, Nfld.

Dear Sir:-

Please stop payment of allotment on my account (as per Form K.1528) from January 1st inclusive 1917, and oblige.

Yours very truly,

hi
Pte. H. West
mark
Witness E. Walshe
~~ST. JOHN'S, NEWFOUNDLAND.~~

STATEMENT OF ACCOUNT

No. 1639

Name West

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
Sept 29	Balance due by P.M. £ 2-6-3½			11 28	11 28
Oct 9	By Pay 10 days @ 10			11 00	22 28
31	" " 22 " @ 16			35 20	57 48
Nov 30	" " 30 " @ 18½			55 50	112 98
Dec 31	" " 31 " @ do			57 35	170 33
Jan 19	" " 19 " @ do			35 15	205 48
	Bonus			12 95	218 43
	Clothing			25 00	243 43
	Ration allowance £1.00			4 86	248 29
Oct 10	To Pay				
15	" "	22	15 00		233 29
Nov 27	" "	28	20 00		213 29
	" "	52	20 00		193 29
Dec 27	" "	62	15 00		178 29
14	" "	68	15 00		163 29
31	allotment 9½ days @ 50		46 50		116 79
29	To Pay	82	20 00		96 79
Jan 12	To Pay	94	10 00		86 79
19	" "	100	81 93		4 86
			243 43	248 29	4 86

Signed A. J. Ivory

28
1/1921

bt

Embarked 'Scandinavian'
FROM Liverpool 27-9-16

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 1639

Rank Private

Name G. West

Died (a) at Da Bunkaugh on the 16 of Sept 1916

Deserted at Da Bunkaugh on the 16 of Sept 1916

I Certify to the correctness of above in every particular.

{ Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

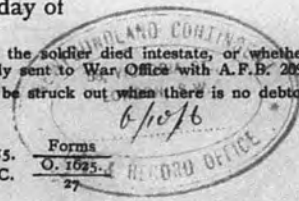
[FORM 1.

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <u>29/10/16</u> <u>PAYED</u>	<u>36</u>	<u>3</u>	<u>3 1/2</u>
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
	<u>Sept 1916</u> <u>10</u> <u>10</u>				Proficiency, Service or good conduct pay			
	" " <u>10</u>				days at _____ from _____ to _____			
	" " <u>1</u>				Messing allowance days at _____			
					from _____ to _____			
	Consolidated stoppage.....				Clothing and kit allowance			
					Amount produced by the sale of Necessaries			
					Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	<u>26</u>	<u>3</u>	<u>3 1/2</u>	Balance due to the Paymaster.....	<u>36</u>	<u>3</u>	<u>3 1/2</u>
		£				£		

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £ _____ is correctly chargeable against the Public~~ AND CONTINGENT

Dated at _____ this _____ day of _____ 191 . PAYMASTER & OFFICER Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
(b) Words in Italics to be struck out when there is no debtor balance.



[Handwritten signature]

SEPARATION ALLOWANCE.

Claimant..... *Sarah Jane West, Guardian*

On account of *Garland West* No. *1639* Rank *Pte*

Decision..... *approved*

allowed R

.....
W. F. Rendell, Lieut. Col.
M. Dowley, Major

Date..... *Aug. 21/1923*

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

360-92

Allotment of *50¢* per day payable to applicant
his from *30/10/15* to *31/12/16*.
Discontinued on account of being cancelled by allottee

18/6/15
19/1/17 -
Married March 5/1917

OK.

Mr Joseph West
270 1/2 St
Portland Maine

Stanly West:

clo A. A. Beunden

Head of Pleasant St.

NEWFOUNDLAND ROYAL NAVAL RESERVE
(Increase in Separation Allowance).

GUARDIAN

NOTICE

THIS STATUTORY DECLARATION is to be filled in correctly, 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.

(1) Name of ~~Reservist~~ *Soldier* Official's Number
(If more than one give all names)

Garland West

1639

(2) Name of applicant, and age. *Sarah Jane West aged 67.*

(3) By what authority are you acting as "Guardian"? (If not verbal enclose written documents). *Verbal*

(4) Names of Children	Age last Birthday	Occupation	Married or single
<i>Sarah Helen</i>	<i>13</i>		
<i>John Thomas</i>	<i>10.</i>		

(5) Are all the above children in your care, and living with you? Explain fully. *None in my care whilst Garland was in the Regt.*

(6) Are any of the above children suffering from mental or Physical incapacity *No.*

(7) Give names of children of ~~Reservist~~ not in your care. Ages last Birthday Occupation Permanent Address

None

(8) Are you already in receipt of Separation Allowance from any source? If so, state amount. *No.*

(9) From what date have you received Allotment, and state amount per month.

Oct. 1st 1915.

I herewith make this solemn declaration conscientiously believing the same to be true, and knowin it to be of the same force and effect as if made under OATH, and in Virtue of the Evidence Act.

Signature of Applicant-----

Sarah Anne West

Place of Residence-----

Pleasant Street St John's

Declared ~~XXXXXX~~ and subscribed before me at-----

St John's, Wfld.

this-----

9th

day of-----

August 19 23,

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace.

John W. McCarthy
J.W.

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 enquiry, the above statements are correct.

Signature of Clergyman-----

J. Kelly *Cliff* *Captn. A.*

Signature of Member of

Patriotic Fund Committee-----

N.B.

Forward Birth Certificate of all children of the Reservist in your case or that of any other party.

Aug. 21st. 1923

Mrs Sarah Jane West,
c/o H.A. Blunden,
Head of Pleasant St.

Dear Madam:-

I beg to advise that your claim for Separation Allowance, as the Guardian of the children of Garland West, No. 1639, Royal Nfld. Regiment, has been approved.

I enclose cheque for \$380.92, representing the amount due for the period of his service with the Regiment, and one for \$120.00, payment of War Service Gratuity.

Yours truly,

Major
Paymaster

cap. a/o.

1639 BANK

Pfe

NAME

G. West

CO.

3

ALLOTMENT *50*

P.M. As. etc

Amount

PAID

Amount

Dr. Balance

Credit Balance *191* 191

2 13 5 ✓

Hospital

1 100

Exchange " 191

PAY 2 NET RATE

A.B. 64

6

From *15/4* To *7/9/6* 141 days

3 60

8460

~~17 7 8~~
~~20 1 1~~

Acq Rolls

2 50

From _____ To _____ days

~~3 15 6~~

3 15 6

From _____ To _____ days

~~16 5 7~~

P. & R.O.
Uniform.

From _____ To _____ days

Old list

ST. JOHN'S
NO 15
21
NEWFOUNDLAND

ST. JOHN'S
NO 15
21
NEWFOUNDLAND

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Newfoundland Regiment,

Department of Militia,

St. John's Newfoundland.

Fold Here

June 24th. 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 603), is forwarded herewith to

Private Garland West

in respect of his service as No. 1639 Rank Pvte.

Name Garland West Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received

Signature

Date

Address

11/11/21
Garland West
Garland West *H.G.S.*
11/11/21
51 Red Ave
Halifax



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 *Gorland West.*

Regiment from which discharged *1st. Newfoundland*

Regimental number *1639*

Intended address *Comauville. Topo.*

Height on discharge *5* Feet *7*

Color of hair on discharge *Dark.*

Complexion *Fair.*

Color of eyes *Greyish blue.*

Figure on discharge *Medium.*

Christian name of Father *Joseph.*

Christian name of Mother *Sarah Jane.*

Wife's maiden name in full *Jennie West. Secd.*

Date and place of marriage *~~Nov 1898~~ Grand Falls. 1908*

Christian names of children *Sarah Helen. John Howard.*

Place and date of soldier's birth. *Comauville. 1 Jan. 1889.*

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)

Gorland West.

(Rank) *Plt*

Station *St. Johns Nf*

Date *Jan. 4, 1917*

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.

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

Station *St. Johns Nf*

Date *Jan 4, 1917*

ORIGINAL.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
(686) W5017/2124 1000m 6/15ss 93 56

Forms
B. 121.
39.

Number of Sheet 2521

Regiment of 1st Newfoundland

Signature of O. C. Company *[Signature]*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>1639 G. West</u>	Age on	<u>28</u> years <u>7</u> months	<u>Carpenter</u>	
Joined	Date	Place and Date of Enlistment	<u>St John's</u>	Religion	
Joined	Date		<u>June 18 1915</u>	<u>Methodist</u>	
Joined	Date	Period of	<u>with Colours</u> <u>3 1/2</u> years.	Place of Birth	
Joined	Date		<u>with Reserve</u> <u>1 1/2</u> years.	<u>Barmanville</u>	



Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Medically Unfit</u>	<u>19 17</u>				

To be carried over

Army Form B. 121.

DEPARTMENT OF VETERANS AFFAIRS

WWI

To Copy for H.O. file.

Attention of

P.A.

OTTAWA 4, ONTARIO.
Date JUNE 8, 1965.

NAME WEST Garland.

SERVICE 1639

C.P.C. No. 260469

NAVY

NUMBER ROY Nfld REGT.

W.V.A. No. 51458

ARMY X

W.W. 1

R.C.A.F.

The DEPARTMENT has received information from

S. T. M. O. CAMP HILL HOSPITAL, HALIFAX, NOVA SCOTIA, JUNE 7, 1965.

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death JUNE 6, 1965.

Cause of Death

Place of Death CAMP HILL HOSPITAL, HALIFAX, NOVA SCOTIA.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~NAVY~~
~~ARMY~~
H.O.

Destroy form if advice of death already received.

C. A. Richards

for
Chief, Central Registry