



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5945 Name Alexander White corps R. L.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------------|
| 1. What is your name? | 1. <u>Alexander White</u> |
| 2. What is your full Address? | 2. <u>Stephenville</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>22</u> Years Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Alexander White.....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.

Alexander White.....SIGNATURE OF RECRUIT.

P. H. D. Dowden.....Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Alexander White.....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 St. Johns on this 9 day of August 1918

Signature of Attesting Officer Abdikouf

†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 Aug 10 1918.....

Place..... } Approving Officer. [Signature]

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

5945-

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

Name Alexander White
 Apparent age 22 years 4 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Charles M White
Stephenville | Relationship Father
 Particulars as to Marriage

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, 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>27-8-18</u>									
Joined at <u>Mkhas</u> on <u>August 9-18</u>									
Discharged <u>August 11-1919</u>									
of									
Re-embarked <u>Mkhas</u> train to <u>Halifax</u> on <u>22-9-18</u>									
I am a constable for demobilization <u>24-6-19</u>									
Access to constable <u>1-7-1919</u>									
Demobilization <u>Mkhas</u> <u>11-8-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>11-8-1919</u> (date of discharge) <u>1</u> years <u>3</u> days									
" " Pensions " " " " " " " " " " " "									

Reg. No. 5945 Rank PT Name White Alex. C.
 Attested 9-8-18 Address St Georges
 Allotment 50⁰ Allottee Mother Mrs. Chas White
 Date of Allotment 1-10-18 Returned from Overseas.....
 Embarked for Overseas 22-9-18 Cause.....

Vacc 14-9-18.	186-9-9-18.	225 14-9-18.
8-9-18	G. Leave 25-8-18 to 4-9-18. Kets 8-9-18. Forfeit 2 days pay under R.W.	

C.R. 5945

Extract from Daily Orders Part II Unit The Royal Field. Regt.
St. John's, July 3rd 1919.

5945 Pte. A. White.

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

C.R. 5945

**Extract from Daily Orders ~~xxxxxx~~ By Major M.S.
Sullivan, Commanding Newfoundland Forestry Companies
6-12-18.**

**The undermentioned having reported for duty
from the 2nd Bn. Royal Nfld. Regt. is attached to the
Strength, for rations, from this date and posted to
"A" Company.**

5945 Pte. A. White.

C.R. 5945

Extract from Daily Orders Part 11 Unit the Royal Nfld.

Regt. St. John's, July 16th, 1919

The discharge of the undernoted on demobilization has been

APPROVED by O.C. Discharge Depot with effect from 28-7-19

5945 Pte. Alex. White.

C.R. 5945

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

The discharge of the undernoted on demobilization has
been CONFIRMED by Officer i/c Records from noted date
10-8-19.

59 45, Pte. Alexander White.

C.R. 5945

Extract from Daily Orders Part 11 Unit The Royal Nfdl.
Regt. St. John's, dated August 26th, 1918.

5945 Pte. A.C. White.

Granted leave from 25-8-18 to 4-9-18.

C.R. 5945

**Extracts from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated August 12, 1918.**

#5945 Pte. Alexander C. White,

**Attested for General Service with the Royal Nfld. Regt.
from 9-8-18.**

C.R. 5945

Extract from Nominal Roll Entrained St. John's for Overseas.

Sept. 22, 1916. "L".

5945 Pte. White Alex.

air white.

C.R. 5945

1190

No. 4712/690

N.F.P./79.

FROM: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.,
Hazeley Down Camp,
Winchester.

25th March 1919

March 31st 1919

5945 Pte. White A

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / (93)

[Signature] LIEUT. COLONE'
Officer Commanding
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to-5945 White
£5. 15. 0.

Received the sum of £5.15/0

Cheque £5. 15. 0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Five pound fifteen in respect of telegraphic remittance from the Minister of Militia.

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

a white
No. 5945 Rank Pte
Witness Geo. P. [Signature]

No. 21627/2510/P.&.A.

066456
21627
2510



N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Wfld. Regt.,
Winchester.

30th December, 1918

Jan 10/19 1919

Subject: 5945 Pte. A. White,

Receipt hereunder.

With reference to the following telegram (11296) from the Hon. Minister of Militia, received

W.A. Ross
Officer Comdg. ~~2/Bn. Royal Wfld. Regt.~~
Royal Newfoundland Regiment.

"Pay to 4945 White, £4.2.0.

Received the sum of Four
Pounds 2/- on account of
cable remittance from Newfoundland.

Draft £ 4.2.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

J.H. Marshall Capt
Chief Paymaster & O. i/c Records.

at white
No. 5945 Rank Private

Witness _____

21627/2510/P.&A.

2/Bn. Royal Nfld. Regt.,
Winchester.

30th December, 8

5945 Pte. A. White,

✓
11296

"Pay to 4945 White, £4.2.0.

4.2.0.

White, A

5945

Ray Sept.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5915 Rank Pt. Name White, Alex
 Date of Enlistment 9-8-18 Address Stephenville District H. George
 Occupation Teleman Classification for Discharge F1 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med	D. F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 12-7-19

H. George
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
 (b) Clothing Supplied None

Date 14-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R2412 to his home at Stephenville Tex and Release Certificate No. 33-88 issued.

Date

14-7-19

Amelbush

Demobilization Officer

Pay and Allowances.

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

Date....

14-7-19

Amelbush
Depot Paymaster.

Discharge approved for

28-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 178b	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Fam B

Date.....

14-7-19

Amelbush

O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

JUL 28 1919

N.R. Cooper Capt.

O. C. Discharge Depot.

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

Date

Aug 7/19

Amelbush

August 14, 1919

#5945 Pte. Alexander White,
Stephenville Crossing.

Dear Sir:-

Please find enclosed Discharge Certificate #3756.

Yours truly,

Captain & Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5945 Rank PTG Name White - Alex
 Intended place of residence Stephenville ST George

2. Occupation Fisherman
 Classification of soldier E Medical Category A1

3. The above named man is discharged in consequence of

DEMOBILIZATION
Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 14 1919

H. M. White
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 14 1919

White
 Signature of soldier

A. M. Blouston
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date JUL 14 1919

E. White
 Signature of soldier

James O. Newman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 9-8-18 No. of days on Military
 Discharged from service JUL 28 1919 Plus 14 days Service 368

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 28 1919

R. R. Cooper Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

Date August 11/1919

A. Bowley Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment

Aug 13 20 1919

The Royal Newfoundland Regiment

Class for Demobilization:—

16.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

July 12/19

Regimental No. *5945*

Name

White, A.

Address

Stephenville

Present Medical Category

A1

Recommended for:—

(a) Immediate discharge

(b) ~~Standing~~ Medical Board

Members of Board

D.N. Cooper Capt.
O.C. Discharge Depot.

J. Paterson
Senior Medical Officer

J.W. Burden
M.O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5915 Rank Plt Name White, Alene
 Date of Enlistment 9-8-18 Address Stepenville Bay District H. Green
 Occupation Fireman Classification for Discharge E1 Medical Category A1
 Recommendation S. M. B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B J21	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 12-7-19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am white in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

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

Date 14-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. *R2412* to his home at *Stephenville, Ky* and Release Certificate No. *33-88* issued.

Date *14-7-19*

Amelbush
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *11/11/19*

Date *14-7-19*

H. M. H.
Depot Paymaster.

Discharged approved for *28-7-19*

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 17H	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Fam B

Date *14-7-19*

Amelbush
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

6161 82 707

Date

K. R. Cooper Capt.
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former Occupation.

whit. ad

Signature of Man.

W. M. Clonahan

Reg. No. 3915-

Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S.

Date 14-7-19.

191

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

MEDICAL HISTORY

Surname

White

OF

Christian Name

Alexander

Table I.—GENERAL TABLE

Birthplace:—Parish

Stephenville Crossing

County

Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	9 th	July	1918	191
	at	St. John's.	at	
Declared Age	22	years		days
Trade or Occupation	Fisherman		years	days
Height	5	feet 8	feet	inches
Weight	132		lbs.	lls.
Chest Measurement {	Girth when fully expanded	34 1/2		inches
	Range of Expansion	4		inches
Physical Development				
Vaccination Marks {	Arm	Right	Left	Right
	Number	/		Left
When Vaccinated				
Vision	R.E.—V=	6/9		R.E.—V=
	L.E.—V=	6/9		L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease	(a)			(a)
(b) Slight defects but not sufficient to cause rejection	(b)			(b)
Approved by (Signature)	Lambertson			
(Rank)	Major		Medical Officer	Medical Officer
Enlisted	at	St. John's.	at	
	on	9 th	day of August	1918
Joined on Enlistment	Corps	Regtl. No.		Corps
	Royal Mpa.	5945		
Transferred to	Regiment.			
Became non-effective by	on	day of	191	on
(Signature)			day of	191
(Rank)				

[P.T.O.]

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

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

1. Unit and Corps *Royal Newfoundland* } Former Trade or Occupation } *Postman*
 2. Regtl. No. *5945* 3. Rank *pl* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *White* } *Alexander* } (a) Former Regts. or Corps ;
 (Surname) (Christian Names) with Regtl. Nos.
 5. Age last birthday *23*
 6. Posted for duty on..... at.....
 in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
 11. Date of origin of disability. *nil*
 12. Place of origin of disability. *nil*
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

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

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

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

15. What is his present condition?

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

No Complaints of no disability

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

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

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

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

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Repatriation

W. J. Proctor, Capt RMC

Medical Officer in charge of case.

Station ... *Mozley Barr.*

Date ... *10/11/14*

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

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

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

15. What is his present condition?

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

No Complaints of no disability

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

20. Do you recommend—

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

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

Repatriation

W. J. Proctor, Capt RMC
 Medical Officer in charge of case.

Station ... *Hazelton, B.C.*

Date ... *10/17/14*

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



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 *Alia. White*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5945*

Intended address *Stephenville*

Height on discharge *5 Feet 9*

Color of hair on discharge *Dark Brown*

Complexion *Dark*

Color of eyes *Gray*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father *Charles*

Christian name of Mother *Mary*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Stephenville 2-12-age 24-1896*

Nature and locality of civil employment required _____

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

(Soldier's signature in full) *Alia White*

(Rank) *Plt*

Station *St. John's*

Date *July 8th 1919*

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

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

Station

Date

August 19, 1919

Mr. Alexander White,
Stephenville Crossing.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name..... *Aliscander* 2. Surname..... *White*

3. Rank..... ~~Sgt~~ *Pte* 4. Regtl. No..... *5945*

5. Address in full to which future payments of gratuity are to be forwarded..... *Sherbourne, Box 50 Serge*

6. Date of enlistment in the Regiment..... *Aug 9/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *no*

8. Relationship of such dependents..... */*

9. Address in full of such dependents..... */*

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

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

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Eleven mos*

..... 1 $\frac{3}{4}$

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.

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

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

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.

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

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

19. Are you now serving in the Res? *no* If not give:- (a) date of discharge. *July 28/19* (b) Reason for discharge.

Removal

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.

England

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.

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: *white et*
 Place of Residence: *Stephenville. Co. St George*
 Declared before me at: *St Johns*
 This *14* day of *July* 19...*19...*

Signature of Barrister of the
 Supreme Court, Stipendiary Magistrate,
 Notary Public, Justice of the Peace,
 or Commissioner of affidavits. *John M. Clarke JP*

POST DISCHARGE PAY.					
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Not amount due	
.....
.....
.....
Certified correct.				Register

The Department of Militia:

The sum of *fifteen Dollars* $\$15.\frac{00}{100}$ Dollars is due

Mr. *Martin Luther Twillingate* for *Conveying*

Reg. No. Rank Name *Capt. White wife & 2 children*

from *Lewisville* to *Twillingate*

Carriage fare $\$15.\frac{00}{100}$

2-7-19
J. H. Snow
W. A. B.

Captain
Demobilization Officer

Yvillingate
Aug 17

To Pay & Record office
Military Department St John's
Dr to Martin Luther
for conveying private
Edward White's wife &
two children from
Lewisport to Yvillingate
by motor boat the sum
of fifteen dollars (\$15.00)

Aug 11/19

North Side

Hurlingham, etc.

Sir Please find enclosed account for travelling expenses. I have had some trouble to get this — Hence the delay. The rest of my account was paid & no receipt taken & I have not been able to look up the people to get same.

Sincerely yours

5945? A. White

The O.I.C. Dept.

Discharged July 28/1919.

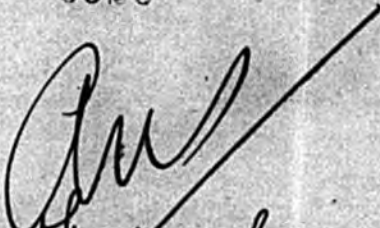
6997

Stephenville
Oct. 13th 1919

Department Militia
St. Johns

6928

Gentlemen:-


On August 19th in past you wrote me and enclosed cheque for \$10.00, advising me at same time that the \$10.00 was the amt. of first payment due me on Acct. "War Service Gratuity. I have not receive any amount since or letter from you, and only as stated above, one payment. Consequently, I think some mistake has occurred in your department regarding my Acct. or possibly some-one-else has received my cheques. Please reply at your earliest convenience & oblige

Yours truly

Private A. White No. 5945

Aug 12 - 7000

Sept 12 7000

Oct 12 7000

M. to Stephanowice

C.R. 5945

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name. *St. Alex. White. 5945*

Date. *the 15th Nov. 1919*

Place. *Stephenville...*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland

Number of Sheet One
Signature of O. C. Company C. B. Dickson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay			
No.		Age on	months					
5945	Alexander White	22		Fisherman				
Joined	Date	Place and Date of Enlistment		Religion				
		St. Johns		R.C.				
Joined	Date	Period of	with Colours	Place of Birth				
					1 1/2 years.	St. John's, Nfld.		
Joined	Date		with Reserve					

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Princes Rink	9-9-18	Pvt.		Overstaying Leave from Tattoos 6-9-18 to 2 P.M. 8-9-18	Cpl. E. Hiscocks		9-9-18	Capt. R. H. Tait M.C.	Forfeits 12 Days Pay
				Demobilized St. John's	11/19				

To be carried over.

C.R. 5945
Army Form B. 179A

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

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

1. Unit and Corps *Royal Newfoundland* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *5745* 3. Rank *Pr* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Whit* *Alexander* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday *33*
6. Posted for duty on at.....
- in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.
(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *Nil*
12. Place of origin of disability. *Nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Nil*

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

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

15. What is his present condition?

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

He complains of no disability

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

20. Do you recommend—

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

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

Repatriciation

W. E. Proctor *Capt Rame*

Station *Hazeley Down*

Medical Officer in charge of case.

Date *10/14/19*

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