



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3675 Name Herbert White Corps Infantry

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Herbert White</u> |
| 2. What is your full Address? | 2. <u>Mortons St</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>Yes</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, Herbert 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.

Herbert White SIGNATURE OF RECRUIT.
Wm Loughlan Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Herbert 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 at St Johns on this 24 day of April 1917
 Signature of Attesting officer Wm Loughlan

†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 1st Battalion
 If enlisted by special authority, such will be attached to the original attestation.
 Date.....1917
 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, 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).....



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3675 Name Herbert White Corps Infantry

Questions to be put to the Recruit before Enlistment.

1. What is your name? Herbert White
2. What is your full Address? Mortons St
Green Bay
3. Are you a British Subject? Yes
4. What is your age? 21 Years 7 Months
5. What is your Trade or Calling? Fisherman
6. Are you Married? Yes
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... }
 { 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? } II. Yes

I, Herbert 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.

Herbert White SIGNATURE OF RECRUIT.
Em Longhead Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Herbert 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.

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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 St Johns

on this 24 day of April 1917
Signature of Attesting Officer H. S. ...

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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..... } Approving Officer.
Place..... }

† 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).....

C.R.

3675'

Extract from Daily Orders part 11, Depot St. John's
dated January 23rd., 1919.

The Discharge of the undernoted on demobilization
have been APPROVED by O. C. Discharge Depot from
noted date .

#3675 Pte. H. White.

21-1-19.

C.R. 3675

Extract from Daily Orders part 11, Depot St. John's dated Feb. 5/1919.

The discharge of the undernoted on demobilisation have been
CONFIRMED BY Officer i/o records. 4-2-19.

#3675 Pte. Herbert White.

C.R. 3675

Extract from Medical Board held on Friday afternoon July
4th, 1919.

n3675 Pte. Hall, R

Recommended discharge from the Army.

EMPIRE HOSPITAL FOR TREATMENT & OBSERVATION

C.R. 3675

Extract from Medical Board held on Friday July 4th, 1919.

3675 Pte. R. Hall

Recommended Discharge from the Army.

EMPIRE HOSPITAL FOR TREATMENT & OBSERVATION.

C.R. 3675

ST

Extract from Medical Board held on Tuesday Jan.14th
1919.

3675 Pte. H. White.

Recommended discharge as permanently unfit and
admission to JENSEN CAMP.

C.R!

3675

Extract from Daily Orders part II, Depot St. John's dated Jan. 31st. 1919.

ST

Hospital

Admitted to St. John's Gen'l Hospital 25-1-19.

3675 Pte. H. White.

C.R. 3675

Extract from Daily Orders part 11, Depot St. John's dated Dec. 21. 18

The a/m returned from Overseas and reported at Depot 11-11-18.

#3675 Pte. H. White.

C.R. 3675

Extract from Nominal Roll of repatriation draft No. 79
from the 2nd., Battalion of the Royal Newfoundland
Regiment per S.S. CORSICAN, w hich embarked at
Tilbury Docks 12/12/18.

#3675 Pte. H. White.

C.R. 3675

Extract from Casualties received from P.&. R. Office, London,
Sept. 26th, 1918.

The undermentioned Soldier, classified "B" was transferred
from the 1st Bn., B.E.F. 1309-18, and attached to 2nd Bn.,
Winchester 14-9-18.

3675 ~~House~~ H.

White

H.M.

C.R. 3675

Extract from Nominal Roll Embarked Folkestone, Draft #51, to

B.E.F. 31-8-18.

3675 Pte. White H.

C.R. 3675

June 27th 1918.

Mrs. Elisabeth White,

North West Arm, New Bay.

Dear Mrs. White,

In answer to our inquiries as to the whereabouts of your son, #3675 Herbert White, The Royal Newfoundland Regiment, we are informed by the Record Office, London, that he is now with the 1st Battalion in France.

I would advise you to address your letters as follows:

#3675 Pte. Herbert White,
~~The Royal Newfoundland Regiment,~~
c/o Pay & Record Office,
58 Victoria Street,
London, S.W. 1.,
England.

Yours faithfully,

C.C.B.

Captain,
for Chief Staff Officer.

C.R. 3675

ST

Extract from Telegram ~~3675~~ received from London,
dated June 26th, 1918.

Your telegram June 24th 3675 White, B.E.F.

C.R. 3675

Extract of Telegram to Military St. John's dated June 26th. 1918.

Your telegram June 24th

3675 White

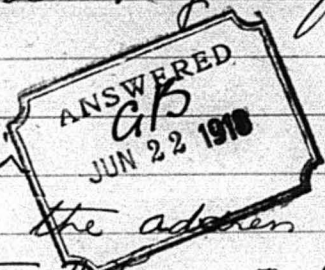
B.E.F.

C.R. 3675

Extract from Telegram despatched to Synoptical, London,
dated June 24, 1918.

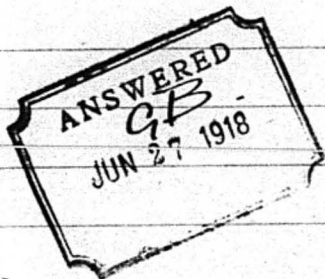
Inform whereabouts #3675 Pte. White.

North West ^{C.R. 3675}
New Bay Newfoundland



Dear Sir

Will you please find the address of
3675th St Herbert White I have had
either letter from him this two months
I would be very glad for you find it
I am his mother Mrs Elizabeth White



C.R. 3675

June 21st 1918.

Mrs. Elizabeth White,
North West Arm,
New Bay.

Dear Madam,

I beg to acknowledge receipt of your letter asking for information as to the present address of your son, #3675 Pte. Herbert White, Royal Newfoundland Regiment. We have telegraphed the Record Office, London, asking the whereabouts of Pte. White, and upon receipt of a reply, we shall immediately communicate with you.

Yours faithfully,

C.G.B

Captain,
for Chief Staff Officer.

C.R. 3675

Extract from Daily Orders part 11, from Unit The Royal
Wilt. Regt. in the Field, dated May 5, 1918.

The following man is transferred to England Class "B"
April 30, 1918.

#3675 Pte. H. White.

C.R. 3675

Extract from Nominal Roll B.E.F. Embarked "Southampton"

6-4-18.

3675 Pte. White, H.

C.R. 3676

EXTRACTS of daily orders part 11 by LIEUT. COL. BENE D.S.O.
commanding 2nd, Battn. ROYAL NFD. REGT. dated 25th/18.

3675 L/Cpl. White ✓

has been deprived of Lance stripe for 1 day's pay.

C.R. 3675

Extract from Orders by LT. COL. B. J. BARTON D.S.O.
COMMANDING 2nd. BATTALION OF THE ROYAL NEWFOUNDLAND
REGIMENT.

The following haveing reported back from the 1st.,
Battalion are taken on the strength and posted
to "H" Company.

#3675 pte. W. White.

C.R. 3675

Extract of Casualties received from Pay & Record Office,
London, dated February 11, 1918.

O.C. 3rd London General Hospital, S.W.18, reports:-

#3675 L/Cpl. H.S. White. ✓

Discharged from Hospital 7/2/18 granted furlough to
16/2/18. Auth:- A.F.S.W.3016 from Hospital.

Fit for 1, Duty.

C.R. 8675

Counter No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address _____

Line Number	Rcd	By	Sent	by	Check

Dated Jan 1st, 1918.

To Mrs. Rita White,
Moreton's Hr.

Regret to inform you that Record Office, London,
officially reports

3675, Pte. H. White as suffering from inflammation
~~connective tissue~~ right knee, at Wandsworth

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

R. A. SQUIRES,

~~Colonial Secretary.~~

Minister of Militia.

FOR TYPEWRITER

C.R. 3675

Extract of Casualties received from Pay & Record
Office, London, dated December 31, 1917.

#3675 L/Cpl. H. White. ✓

I.C.T. Right Knee.

Admitted 3rd London General Hospital, Wandsworth.

28/12/17

C.R. 3675

Extract from Casualties received from Pay & Record
office, London, Dec. 31st 1917.

3rd London General Hospital
Admitted to Hospital, Wandsworth. 28-12-17

3675 L/C. H. White.

J. G. Y. R. Kneel,

C.R. 3675-

Extract from Nominal Roll Draft No. 32: 111 Other Ranks from 2/1st
Newfoundland Regt., Ayr, to 1/1st Nfld. Regt., B.E.F. Embarked
Southampton 6/11/17

3675 L/C White, H.

111.

C.R. 3675

ST

Extract from Nominal Roll, embarked St. John's for Overseas 19-5-17

5675 Pte. H. White.

C.R.

3675

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Apl. 24th, 1917.

3675 Pte. H. White.

Attested this day. posted to F. Company, and assigned
number as shown.

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 3675

No. 1. RECORD OFFICE - Y O R K.

LIST No.H.A.17280.

6850 Pte.Ewart,W.	14- North'd Fus.	Debility Sev:	Adm: 3 Sty.H.Rouen 8th Dec'17.
53841 L/C.Smith,S.	14- Dur.L.I.	Impetigo Mild	Adm: 3 Sty.H.Rouen 9th Dec'17.
201218 Pte.Martin,W.	7- do.	V.D.G.	Adm: 4 Sty.H.Arques 10th Dec'17.
21308 " Beattie,M.	13- do.	G.S.W.Finger L. Mild .	Dis:ex 6 Sty.H.Dieppe 8th Dec'17.

No. TWO - RECORD OFFICE - Y O R K.

LIST No.H.A.17280.

42440 Pte.Butler,W.	2/7- W.York Regt	Diarrhoea Mild. . . .	Adm: 3 Sty.H.Rouen 9th Dec'17.
52101 " Milam,E.	2/7- do.	do. Sev:	Adm: 3 Sty.H.Rouen 9th Dec'17.

No.TWO - RECORD OFFICE - W A R L E Y.

LIST No.H.A.17280.

23973 Pte.Crisp,G.	9- Essex Regt	I.C.T.Feet Mild	Adm: 3 Sty.H.Rouen 9th Dec'17.
38018 " Murgleton, P.	1- do.	do. Feet Hands Sev: .	Adm: 3 Sty.H.Rouen 9th Dec'17.
18808 Pte.Andrews,F.	1- Bedf.R.	I.C.T. Arm L.	Adm: 12 Sty.H.St.Pol 10th Dec'17.
35904 " Saunders,H.	1- do.	do.Legs.	Adm: 12 Sty.H.St.Pol 10th Dec'17.
285382 L/C.Howell,D.	1- do.	Diarrhoea.	Adm: 12 Sty.H.St.Pol 10th Dec'17.
21751 Pte.Perish,J.C.	1- do.	do.	Adm: 12 Sty.H.St.Pol 10th Dec'17.
43234 " Samuels,L.A.	1- do.	Debility	Adm: 12 Sty.H.St.Pol 10th Dec'17.
291342 " Pudney,P.L.	1- do.	do.	Adm: 12 Sty.H.St.Pol 10th Dec'17.
41550 " Reed,T.A.	1- do.	I.C.T.Neck	Adm: 12 Sty.H.St.Pol 10th Dec'17.

No.1. RECORD OFFICE - W A R L E Y.

LIST No.H.A.17280.

18994 Sgt.Brown,D.	7- Norfolk Regt	I.C.T.Knee L. Mild. . .	Adm: 3 Sty.H.Rouen 9th Dec'17.
329448 Pte.Watson,F.	9- Suffolk Regt	do.Scrotum Mild . . .	Adm: 3 Sty.H.Rouen 9th Dec'17.

N E W Z E A L A N D E X P E D I T I O N A R Y F O R C E.

LIST No.H.A.17280.

40279 Pte.Broadhead,G.	1- N.Z. Rif.Bde	V.D.G.	Dis:to Dtls St.Omer ex 4 Sty.H.10th Dec'17.
44897 " Marfell,A.	1- Canterbury Btn	Scabies	Adm: 4 Sty.H.Arques 10th Dec'17.
60441 Spr.Campbell,J.	N.Z. Tunnel Co.	N.Y.D. Measles. . . .	Adm: 12 Sty.H.St.Pol 10th Dec'17.

N E W F O U N D L A N D E X P E D I T I O N A R Y F O R C E.

LIST No.H.A.17280.

3875 L/C.White,H.	1- Newfoundland R.	I.C.T.Knee R. Mild . .	Adm: 3 Sty.H.Rouen 9th Dec'17.
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63rd (R O Y A L N A V A L) DIVISION.

LIST No.H.A.17280.

MZ/208 P.O.Gordon,T.B.	R.N.D.Hawke Battn	Septic sores legs . . .	Dis:to Dtls St.Omer ex 4 Sty.H.10th Dec'17.
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White, H

C.R. 3675

P.R.O.

we have his home address
I will be greatly indebted
to you or where I could get
it Dear Sir we are anxious
to know about him as he
was such a nice boy & we
appreciated his company
very much & we made it
our endeavour to make him
feel at home owing to being
so far from home I hope I
am not putting you to any
inconvenience & any information
with regarding him we
will be pleased to receive
about Herbert it is good to

C.R. PAY OFFICE, C.M.F.O.

P.L.

REFR TO

8-SEP-1919

ACTED ON

C/O L/R

MILLBANK, LONDON, E.C.

Ydhis Kar
38 Park Circus
Edy
HQ Scotland
5th 9th 1919

NEWFOUNDLAND CONTINGENT
PAY & RECORD OFFICE
Ref. Nos IN 5344

Dear Sir

No doubt you will be surprised
at hearing from me I am
writing you to see if you
can give me any account of
Pte Herbert White F 609
2nd Royal Newfoundland Reg.
he was up at Winchester
for a time but has left there
he gave me his home address
but I am sorry that I have
mislaid it so if you can let

know all the boys are getting
sent away home again to
their dear people as we have
all appreciated the work they
have done to help our motherland
Thanking you for your trouble
trusting you are well.

I remain yours

Sincerely

Bessie H. Jones

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

10th September, 9.

11215/1/R.&C.

Miss Bessie H. Juned,
c/o Mrs. Kerr,
38, Park Circus,
Ayr, Scotland.

Dear Madam,

3675 Pte. Herbert White
The Royal Newfoundland Regt.

With reference to your letter of the 5th instant: I beg to inform you that Pte. White has already returned to Newfoundland, and if you will address a letter to him in care of the Department of Militia, St. John's, Newfoundland, it will be duly forwarded, as his present home address is not known here.

Yours faithfully,

Major,
Chief Staff Officer (London).

HA/NV

11215/1/R.&C.
Kerr
W.C.

Caroffi

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

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

ROYAL NEWFOUNDLAND REG.

1. Unit and Corps.....
2. Regtl. No. *5075* 3. Rank *Plt*
4. Name *W. WHITE*
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade }
 or Occupation }
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
 (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 n (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

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

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

Inflammation Rt. Knee.

11. Date of origin of disability.
12. Place of origin of disability.
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.

Returned to England from Cambrai area Inflammation right knee due to a fall in the trenches. After treatment at 3rd L.G.H. returned to Depot boarded D.V. since then developed pleurisy right side for which he was treated in Hazely Down military Hospital.

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 present inflammation
 knee movements at knee
 joint free. Complains of
 pain in right side after
 old pleurisy*

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. S. 1
 APPROVAL NEWFOUNDLAND REG.

Station

Date

Medical Officer in charge of case.

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

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 New Foundland* } Former Trade }
 or Occupation }
 2. Regtl. No. *2675* 3. Rank. *pld* 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
 4. Name *Hall* *R.* }
 (Surname) (Christian Names)
 5. Age last birthday.....
 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 (b) Date of Discharge ;
 (c) on duty (d) off duty ? (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."
plans in neck.

11. Date of origin of disability.
 12. Place of origin of disability.

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.

Bay lateral cervical adenitis - right side operated on, left side large gland size of plum palpable. foot trench feet at Cambrai. Cared at Manaworth. developed mumps March 1918

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 when 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.)

flound left 50% of
neck, otherwise condition good

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.

Restriction

W. J. Proctor, Capt R.A.M.C.

Medical Officer in charge of case.

Station .. *Mozley Down*

Date *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



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

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 Herbert White
aged 21 conducted at Hdgms.
Date: 23/4/17 Recruiting Officer:

NO OF TEST

FINDING

1 no
2 no
3 no
4 no
5 no
6 no
7 yes
8 yes.
9 no. no
10 ~
11 ~
12 ~
13 Teeth to be attended to.
14 ~
15 ~
16 ~
17 ~
18 ~
19 6/6 Both.
20 ~
21 ~
22 ~
23 ~
24 ~
25 ~
26 ~
27 ~
28 ~
29 ~
30 ~
31 ~
32 ~
33 no
34 5ft 8
35 161.
36 37 - 40 1/2
37 \$30 per month
38 Wife Mrs Rita White. Moretons Hr.
39 Wife.

5
1
26

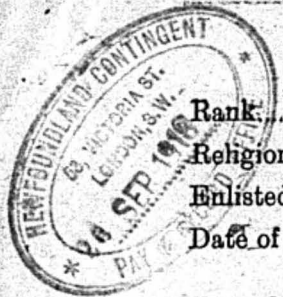
J. J.

Signature of Medical Examiner:

J. W. Burden

Casualty Form—Active Service.

Regiment or Corps *1st Royal Newfoundland*



Rank *Pte* Surname *White* Christian Name *Robert*

Religion *Methodist* Age on Enlistment *21* years *7 1/2* months

Enlisted (a) *24/11/17* Terms of Service (a) *Duration* Service reckons from (a) *24/11/17*

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended { } Re-engaged { } Qualification *Signaller*
or Corps Trade and Rate.....

Occupation *Fisherman* Signature of Officer. *[Signature]*

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
				<i>31 AUG 1918</i>	
				<i>31 AUG 1918</i>	
				<i>2 SEP 1918</i>	
<i>13-9-18</i>	<i>"D" L B D</i>	<i>To England "B" house</i>	<i>ARRIVED 1 I. B. D.</i>	<i>13-9-18</i>	<i>Roll</i>
			<i>Officer i/c 1 Section</i>		<i>LIEUT. FOR</i>
			<i>G. H. Q., Brit. EXP. Force</i>		

Rest of him: White, Mr. Robert White, Montreal St. [Signature]

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, etc. (17781.) Wt. N. 237, P. 112, 1,000,000, 1918, D & S, Form B.103 (E. 1956.)

Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland
 Rank Pte Surname White Christian Name Hubert
 Religion Methodist Age on Enlistment 21 years 4 months
 Enlisted (2) at John's Terms of Service (a) Duration Service reckons from (a) 24-4-17
 Date of promotion to present rank — Date of appointment to lance rank —
 Extended Re-engaged Qualification (b) —
 or Corps Trade and Rate —
 Occupation Fisherman Signature of Officer W. G. Russell



Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			<u>Lieut</u>		
			Embarked ...	<u>6-4-18</u>	
			Disembarked...	<u>10-4-18</u>	
<u>15/18</u>	<u>"D" I.B.D.</u>	<u>Transferred to Eng classified "B"</u>	<u>Rouen</u>	<u>30/4/18</u>	<u>Race</u>
	<u>6-5-18</u>				<u>Infantry Section</u> <u>O.M.C. 3rd Echelon</u>

Handwritten notes and signatures on the left margin.

(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) Signaller, Shoeing-Smith, &c.

LAST PAY CERTIFICATE

OFFICE COPY

N.F.P./94. ^{4.6.7}
4-5-11
8

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with G.L./19, 26/5/17.
Regtl No. 3675 Rank Pte. Name White W Unit 1st Bn who was repatriated
to 1st Bn on 11/12/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	\$			£			CR.
		£	s	d	£	s	d	
PERIOD: FROM 23/11/18 TO 11/12/18	Balance Dr. from <u>Pte.</u>			10	0		Balance Cr. from	
	Allotment 19 days @ 70¢	113	30	12	14	8	Pay 19 days @ \$ 1.00	119
	Cash Payments:						Field Allow 19 days @ \$ 1.00	119
	<u>1st Bn</u>					10		120
	<u>2nd do.</u>					10	Other Allowces days @ \$	90
	Other Debits							14
	<u>Pd Damages</u>					6	Other Credits:	5
	<u>Miss [unclear]</u>					5	<u>Copy sent HQ. 6/11/18.</u>	11
	<u>Obstructor Y. Coy. 22. 11. 18</u>	1	40	1	2	8	<u>21302/209 P.V.A. 23/12/18.</u>	
	Total Debits			14	8	3	Total Credits	14
Balance due by Paymaster						Balance due to Paymaster	2	
			14	8	3		48	
			14	8	3		11	

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

W. Co.
Winchester Dec 9th 1918.
(Place) (Date)

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

Pay & Record Office, London,

[Signature]
O.C. [unclear] Company.

Chief Paymaster & O. i/c Records.

No. 3675 Rank Lt Col Name White H.S.

Pay	F.A.	Wkg	Total	N.F.P./73
1.05	10		1.15	[Signature]
Less Allotment			.70	
Net Rate			.45	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To							
Balance					Balance									
Acquittance Rolls					Pay @ Net Rate	22/177	7/2/18	48	45	21	60	48	9	
Hospital Advances					Rat. Allowance	7/2/18	16/2/18	10	2 ^s			1	0	0
A.B. 64.		1	14	0										
P.&.R.O. Payments														
Cheque no. 7531	7/2/18	6	0	0										

7. 16. 11

7. 16. 11
1. 14. 0
 6. 2. 11.

OK
 [Signature]
 6/1/18

White, H

3675

Ray Sept.

LAST PAY CERTIFICATE

DUPLICATE
MAIL COPY.
Posted.....

N.F.P./94.

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.
Regtl No 6675 Rank Private Name White, W. Uni R. Newfoundland Rgt who was repatriated to Newfoundland on 12/12/18 Authority Cause

STATEMENT OF ACCOUNT

DR.		STATEMENT OF ACCOUNT										CR.	
		PARTICULARS					PARTICULARS						
		\$	¢	£	s	d	\$	¢	£	s	d		
11/12/18	To	Balance Dr. from Prev. Pay Book			10	0	Balance Cr. from						
		Allotment 19 days @ 70¢	18	30	2	14	0	Pay 19 days @ 1.00	19	00			
25/11/18	To	Cash Payments:					Field Allce 19 days @ .10	1	90				
		1st Pay			10	0		20	90	4	5	11	
25/11/18	To	2nd "			10	0	Other Allces days @ \$						
		Other Debits					Other Credits:						
25/11/18	To	Barrack Damages				6							
		Misc. Stoppages			1	5							
22/11/18	To	Observation "F" Company	40		1	8							
		Total Debits			4	8	5	Total Credits			4	5	11
		Balance due by Paymaster			4	8	5	Balance due to Paymaster			4	8	5

CHECKED.
E.P.
18/12/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of Winchester December 9th, 1918 (Signed) J. Nunn, Captain.

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.
Pay & Record Office, London, Dec. 19th, 1918.
Chief Paymaster & O. i/c Records.

ORIGINAL.

LAST PAY CERTIFICATE

N.F.P./94

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

Regtl No. 3675 Rank Private Name White, W. Unit R. Newfoundland Rgt who was repatriated

to Newfoundland on 12/12/18 Authority _____ Cause _____

DR.

STATEMENT OF ACCOUNT

PARTICULARS	£ s d			PARTICULARS	£ s d		
	£	s	d		£	s	d
Balance Dr. from Prev. Pay Book			10 0	Balance Cr. from			
Allotment 19 days @ 70¢	13	30	2 14 0	Pay 19 days @ \$1.00	19	00	
Cash Payments:				Field Allowance 19 days @ \$.10	1	90	
1st Pay			10 0	Other Allowances days @ \$	20	90	4 5 11
2nd "			10 0	Other Credits:			
Other Debits:							
Barrack Damages			6				
Misc. Stoppages			1 5				
Observation "F" Company 22/11/18	40		1 8				
Total Debits			4 8 3	Total Credits			4 5 11
Balance due by Paymaster			4 8 3	Balance due to Paymaster			2 4
			4 8 3				4 8 3

PERIOD: From 23/11/18 To 11/12/18

CHECKED.
B.P.
18/12/18

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

Winchester December 9th, 1918

(Place)

(Date)

(Signed) J. Nunns, Captain.

O.C. "F" Company.

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary. London to 19/12/18.

Pay & Record Office, London,

Dec. 19th. 1918.

Chief Paymaster & Officer i/c Records.

February 4th., 1919

#3675 Pte. Herbert White,
Moreton's Harbor.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 818."

Yours faithfully,

Captain,
Paymaster & O.i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3675 Rank Pte. Name White, Herbert
Intended place of residence Mortons, N.S.

2. Occupation Fisherman
Classification of soldier B Medical Category E

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

~~FOR POST DISCHARGE~~
FOR POST DISCHARGE

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

Place
Date JAN 20 1919 W. H. Carr
Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S Herbert White
Signature of soldier
W. H. Carr
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S H. White
Signature of soldier
W. H. Carr
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 24-4-17 No of days on Military
Discharged from service 20-1-19 Plus 14 days Service 651 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Carr
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.
Date JAN 21 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. Johns, Nfld. M. Howley, Capt
Date February 4/1919
Officer in Charge of Records
The Royal Newfoundland Regiment

2019/818

1
31
30
31
31
30
31
20
31
31
4
187

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 3675 Rank Private Name White Robert
 Date of Enlistment 24.11.17 Address Moncton N.B. District Trinity
 Occupation Ex-ferment Classification for Discharge B Medical Category E
 Recommendation S.M.B. Peaceably prof'd Disability Rating 100% 3.700
 Passed to Demobilization Officer with following documents:—

N.F. <u>239A</u>	1	B 268	B 121	1	N.F. Med.	D.F. 1	
B 178		W 3494	B 122	2	Board 1st	" 2	
B 178a	1	D 400A	B 1915		do 2nd	" 3	3
B 179	1	D 400B	Form L		do 3rd	" 4	
B 179a	1	D 400C	Form K		do 4th	" 5	
B 179b		B 103	ME 2			" 6	
B 179c		B 120	M 93				

Date 20.1.19

W. White
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not 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 \$ 0.00
 (b) Clothing Supplied *Joseph A. Lawrence*

Date 20.1.19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *854* to his home at *Archeronville* and Release Certificate No. *854* issued.

Date *20-1-19*

C. B. Duks
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 *4-2-19*

Date *20-1-19*

W. H. King Capt.
Depot Paymaster.

Discharge approved for *21. 1. 19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *22. 1. 19*

C. B. Duks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

JAN 2 - 1919

Date

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

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

Date

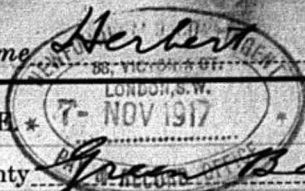
To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

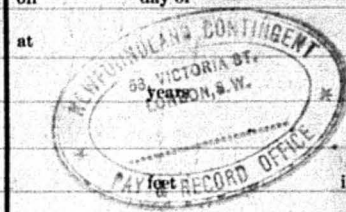
Surname White OF Christian Name Herbert

Table I.—GENERAL TABLE

Birthplace:—Parish Mortons Hr County Green Bay



	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>24</u> day of <u>April</u> 1917		on _____ day of _____ 191	
	at <u>Headquarters</u>		at _____	
Declared Age	<u>21</u> years <u>7</u> days		_____ years _____ days	
Trade or Occupation	<u>Fisherman</u>		_____	
Height	<u>5</u> feet <u>8</u> inches	_____ inches	_____ feet _____ inches	_____ inches
Weight	<u>161</u> lbs.	_____ lbs.	_____ lbs.	_____ lbs.
Chest Measurement	Grith when fully expanded ... <u>40 1/2</u> inches		_____ inches	
	Range of Expansion ... <u>3 1/2</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	Left
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V=	<u>4/6</u>	R.E.—V=	_____
	L.E.—V=	<u>4/6</u>	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)	<u>W.E. Pocumier</u>		_____	
(Rank)	<u>Lieut.</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u>		at _____	
	on <u>24</u> day of <u>April</u> 1917		on _____ day of _____ 191	
Joined on Enlistment	Corps.	<u>4/1st Nfld</u>	Corps.	_____
	Regtl. No.	<u>3675</u>	Regtl. No.	_____
Transferred to	_____		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)	_____		_____	
(Rank)	_____		_____	



[P.T.O.]

Nfld

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 rd London Ken Hoop.	28	12	17	7	2	18	I.C.T R knee	41	Reported sick in France 29.11.17	G. C. Hall Capt. Med
Hazley Down	28	10	18	18	11	18	Pleurisy	21	Large pleural effusion R. side. Aspiration & 1 3/4 pts of clear fluid withdrawn. R. base still duller on percussion than left & breath sounds faint. X Ray shows no evidence of fluid, but diaphragm on R. side not moving well.	85 th Privates CAPT. R. M. C.

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 go to Jensen Camp for treatment

H. White
Signature of Man.

Reg. No.

3675

A. B. Dicks Capt

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

20-1-1919

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 work at Fishing

Herbert White

Signature of Man.

Ernie Allen

Signature of the Vocational Officer or his Representative.

Reg. No. 3675

Place

St John

Date

20/1/19.

191

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 REG.
2. Regtl. No. 3675 3. Rank Pte
4. Name WHITE
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade }
 or Occupation }
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
 (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (b) Where
 (c) Opinion of Court
 (d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

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

Inflammation Right Knee

11. Date of origin of disability.
12. Place of origin of disability.

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.

Returned to England from Cambrai then

Inflammation Right Knee, due to fall in the trenches. After treatment was awarded, returned to Depot Boarded B.M. Since then developed Pleurisy which was treated Hoagley Down military Hospital

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 radiographic reports 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 present Inflammation
Knee, movements
Knee joint free, complains
of pain right side of leg
old pleurisy*

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

M. J. Appo

ROYAL MEDICAL OFFICER IN CHARGE OF CASE

Station

Date

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

OPINION OF THE MEDICAL BOARD.

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

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

(b) The present condition thereof.

*Inflammation right knee
Pleurisy
Scar across right knee - no swelling
Friction rub on right axilla
Pulse 120*

22. State whether the disabilities are:—

(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 part of the soldier

Give details:

(a) Attributable to

(b) Aggravated by

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

23. Is the disability in a final stationary condition? If not

(a) How long is the present degree of disability likely to last?

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

Military Service

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).

100% 3 months

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

✓

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

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

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

Yes

Opinion of Military Member in case of disagreement.

OR

(b) In what other grade do the Board place him?

(c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

Yes

28. Is treatment being recommended on Army Form B. 179c?

Admin admission to prison camp

29. Does the soldier require:—

(a) An attendant for his journey home?

(b) Transport from railway station to his home?

(c) The constant attendance of another person in his own home?

Signatures

Station.....

Date.....

..... } President or Chairman.
 } Members.

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

Station.....

Date.....

..... } Only applicable in cases of Patients in Hospitals.
 Officer in charge, Central Hospital.

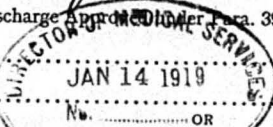
Discharge Approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station.....

Date.....

O.C. Discharge Centre.



LAST PAY CERTIFICATE

N.F.P./94.

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

Regtl No. 3675 Rank Pte. Name White W Unit R. Field Reg who was repatriated
to R. Field on 11/12/18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

PERIOD: FROM	PARTICULARS	£			s			d	PARTICULARS	£			s			d
		£	s	d	£	s	d			£	s	d				
TO	Balance Dr. from <u>Prev. P.B.R.</u>						10	Balance Cr. from								
	Allotment 19 days @ <u>70¢</u>	13	30		2	14	5	Pay 19 days @ <u>\$1.00</u>	19	00						
	Cash Payments:							Field Allow 19 days @ <u>\$10¢</u>	1	90						
	<u>1st Pay.</u>						10	Other Allowes days @ <u>\$</u>	20	90	4	5	11			
	<u>2nd "</u>						10	Other Credits:								
	Other Debits															
	<u>B.d.g.s.</u>						6									
	<u>Miss. Stg.</u>						5									
	Total Debits								Total Credits							
	Balance due by Paymaster								Balance due to Paymaster						8	
						4	6							7		

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

Floy
Winchester (Place) Dec 9 1918 (Date)

J. Kinnear
D.C. & S. Company, to 17

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

Pay & Record Office, London,
191

Chief Paymaster & O. i/c Records.



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

Herbert White.

Regiment from which discharged

Royal Newfoundland

Regimental number

2675.

Intended address

Leading Tickers.

Height on discharge

5 Feet *6.*

Color of hair on discharge

Light.

Complexion

Fair.

Color of eyes

Grey.

Descriptive Marks

Figure on discharge

Short.

Christian name of Father

William

Christian name of Mother

Betsy.

Wife's maiden name in full

Maria J. White.

Date and place of marriage

Essex. 1917.

Christian names of children

Robert.

Place and date of soldier's birth

Leading Ticker. 1899

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)

Herbert White.

Station

M. John

Date

13.1.19

(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.

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

Station

Date

22

Hazeley Down Mil Hospital.

Army Form W. 3172.
(In pads of 50.)

Ward 3

No. of Bed _____

Date

Nov. 14th 1918.

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
3674	Plc. White Herbert	2 nd Afd.	Lungs

SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case.)

Pleural effusion
R. side 1 3/4 pts of
fluid withdrawn
? Am't of fluid
now present.

REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

No. of Plate _____

Plate shows no evidence
of fluid present in R.
lung. The R. diaphragm
appeared immovable

Signature of M.O.

B. S. Miran

Signature of Radiographer

E. W. Heam

Date

14.11.18.

Date

14.11.18



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... *Herbert* 2. Surname... *White*

3. Rank... *Pte* 4. Regtl. No... *3675*

5. Address in full to which future payments of gratuity are to ~~be~~ forwarded... *Troutons Harbour*

6. Date of enlistment in the Regiment... *April 29th 1917*

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

..... *Mrs. Herbert (wid.) White*

8. Relationship of such dependents... *wife*

9. Address in full of such dependent..... *Mrs. Herbert White (Troutons Harbour)*

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.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *1 year 9 months*

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

..... *he* *he*

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. *he*

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

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

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. *am entitled*

..... *to gratuity but have received none*

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

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

19. Are you now serving in the Regt.? *he* ... If not give:- (a) Date of discharge. *Feb. 2nd 1919* ... (b) Reason for discharge. *through*

..... *wound received while on 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. *at*

..... *Cambria Nov. 20th 1917*

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

(b) If (a), are you in receipt of full pay and allowances from that Committee? *he*

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: *H. S. W.*
 Place of Residence: *Monetou St. Nfld.*
 Declared before me at: *St. John's, Nfld.*
 This *22nd* day of *March* 191*9*
John M. [Signature]

Signature of Barrister of the
 Supreme Court, Stipendiary Magis-
 trate, 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>4.60.01</i>	<i>400.00</i>
.....
.....
Certified Correct.			Paymaster.	



THE ROYAL NEWFOUNDLAND REGIMENT HEADQUARTERS

ST. JOHN'S, NEWFOUNDLAND.

W. J. P.

Royal Nfld. Regt.

To 3675 Pte. H. White.

Morton's Harbour - B. O. B.

Transportation From Lewisporte to

Cottles Island..... \$5.00

As. Per. P.B. Attached.

b. k.

ACCOUNT	<i>Trans</i>		
CH NO	<i>8421</i>	INITIALS	<i>EW</i>
INS LEDGER	---	INITIALS	---
PAY LEDGER	---	INITIALS	---
GRN LEDGER	---	INITIALS	---

W. J. P.
Assistant Adjutant & Quartermaster
Discharge Depot - Newfoundland

JAN 15 1919

fiit
Cheque mailed to above address. *May 8/19*

Cottles Island.
Dec 24th / 18

Department of Militia
3675 Dr

to Herbert White

Transport from Samsport to
Cottles Island 5.00

Certified correct
for 5⁰⁰

W. W. Buggley

J. C.

May 10, 1919

Ex Pte. H. White,
Moreton's Hr., N.D.B.

I enclose cheque for \$5.00, amount due
you on account of transportation from Lewisporte
to Cottles Island.

Capt.
Paymaster.

Mortons Harbour.

5615

3675

June 24th

1919.

ST
Mr. J. W. Howley.

Sir is it possible that I have to inquire again about my war service gratuity this is my third time of writing concerning it and I sincerely hope it will be the last.

For it seems to me that it is a very strange thing that I should only receive one month's ^{war service gratuity} that was March which I drew at your office while in town was told then that it would be forwarded to me. But none so far as yet have been received.

2.

my wife has received her money
and has proved satisfactory
But why is it I myself have
received none now Sir will
you kindly see to this matter
and forward money that I should
have received.

another thing I wish to speak of
is my discharge badge, why
is it that it has not been
forwarded as promised Surely
I am intitled to it if not.
I should be greatly obliged if you
would say so. please oblige
Herbert White.

Shrunk
July 4/1919

[Handwritten signature]

3675

March 22, 1919

Mrs. Hebert White,

Moreton's Harbor, N.D.B.

Dear Madam:-

I enclose cheque for Three hundred and twenty-four dollars and sixty-seven cents (\$324.67), in payment of retroactive Separation Allowance. I also enclose cheque for Thirty-dollars (\$30.00) being amount of first payment on account of War Service Gratuity."

Yours truly,

Paymaster & Officer i/c Record. Captain.

Winstons A.T.

May 22nd
1869.

5223

Sir John. Hooker:-
Sir

I wish to make an inquiry concerning my war Service gratuity I have received only 70th which I drew at the Militia Bddy. on March the 25th is this the amount of war Service gratuity that is due for two years Service especially a married man. I should think not.

Please inform the reason why this money have not been received and forward soon as possible

2

L. remain Herbert S. White
Protons H.S.

No 3675 (P)

[Handwritten signature]

C.R. 3675

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.

Date... *Nov 24th 1919*

Place... *Milton's Harbour*

Name... *Herbert White*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
R 121
39.

Regiment of 1st Newfoundland

Number of Sheet First
Signature of O. C. Company Wash. Ouellet

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	years	months	
3675.	White Hubert.	21	7	Fisherman	Appointed <u>2nd Lt.</u> Aug 24 th 1917. Retired <u>1st Lt.</u> February 26 th 1918.
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	St. John's. 24.4.17		Luther.	
Joined	Date			Period of		Place of Birth
Joined	Date	with Colours		287 years.	
Joined	Date	with Reserve		365 years.	

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
London	20.2.18	2/cpl.		absent from HQ the 20.2.18 till seen by the Military Police on Waterloo station about 10.30 am. 22.2.18.	Documentary Refos of Laurence 20.2.18			Lt. Col. Berners.	Profus iday pay 1-40.
St. John's	24/4/18	Plt		was sleeping from 24/4/18 to 12.39 pm 25/4/18	Documentary	Dep. 3 days 5 pay 24/4/18		Lt. Col. Barton	5.50 for 2 days pay
				Remobilized St. John's, 4 th 19					
To be carried over									

Army Form B. 121.

3675
mf

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. *3675* Rank *Plt* Name *White Robert*
 Date of Enlistment *24.4.17* Address *Mountans St* District *Dullage*
 Occupation *Fisherman* Classification for Discharge *B* Medical Category *E*
 Recommendation S.M.B. *Plenty profit* Disability Rating *100% 3 mva*
 Passed to Demobilization Officer with following documents:—

N.F. P/56.7.11	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 *20.1.19* *W. White Capt*
 O.C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am *not* in a position to resume civilian occupation.

H. 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 *£00.00*
- (b) Clothing Supplied *Joseph A Snowling*

Date *20-1-19*

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 55-1 - at home* to his home at *Antioch, Ill* and Release Certificate No. *884* issued.

Date *20-1-19* *C. S. Dicks*
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 *4-2-19*

Date *20-1-19* *Money Capt.*
Depot Paymaster.

Discharge approved for *21. 1. 19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	
F 178	W 3494	B 122	Board 1st	" 2	<i>201 m B</i>
R 178a	D 400A	B 1915	do 2nd	" 3	<i>2</i>
B 179	D 400B	Form L	do 3rd	" 4	<i>2</i>
B 179a	D 400C	Form K	do 4th	" 5	<i>✓</i>
B 179b	B 103	ME 2	<i>W 3.1.19</i>	" 6	<i>7</i>
B 179c	B 120	M 93			

Date *22. 1. 19* *C. S. Dicks Capt.*
Demobilization Officer.

APPROVED.

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

with following additional documents.

ELIGIBLE for FOOT DISCHARGE PAY

JAN 21 1919

Date *R. H. [Signature]*
O. C. Discharge Depot.

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

Date *Jan 23/19* *[Signature]*

Reg. No. 3675 Rank Pvt Name White H
Attested Address Morebong St
Allotment Allottee
Date of Allotment Returned from Overseas 21.12.18
Embarked for Overseas Cause Discharge

G. Leave from 21-12-18 to 6-1-19.

14-1-19 Rec & is Permanently Unfit and Admission Jensen Camp.

20-1-19

PASSED TO DEMOBILIZATION OFFICER

21-1-19

DISCHARGE APPROVED ON DEMOBILISATION



DEPARTMENT OF MILITIA
ST. JOHN'S, NEWFOUNDLAND

January 30th., 1919.

From:- D. M. S.
To:- O. C. Depot.

3675, Pte. White, H.

Please note that the maginally noted man who was recommended for admission to Jensen Camp 14/1/19 was admitted to the St. John's General Hospital with a broken leg January 25'1919.

Cluny Macpherson
Major, D. M. S.

AMB.

Copy to Board of Pension Commissioners.

To be Noted

Part II Orders
Card Index
Nominal Roll



NEWFOUNDLAND POSTAL TELEGRAPHS

No. _____

Received _____ m. By _____

Sent out for delivery _____ m. By _____

No. 60 Place from Mortons No. of Words _____



To Dept of militia

Please grant extension unable to report.
 # 3695 *Private H. White.*

Report first of month in
AB sent

O.C. Dept



Jan. 20th, 1919

From Officer Commanding,
Discharge Depot

To Board of Pension Commissioners,
Militia Bldg.

3675 Pte. H. White

Above noted man ^{is} was before the Standing Medical Board on 14-1-19 and was recommended for discharge as permanently unfit and admission to Jensen Camp.

His discharge on demobilization has been approved by O.C. , effective from 21-1-19, and I am sending him herewith for your attention and necessary action, please.

Copy of his Medical Board will be forwarded you in due course.

CCD/C

1236
 Medical Report on an Invalid.

Station Hazeley-Down-Camps.

Date _____

- | | |
|--|--|
| <p>1. Unit Royal Newfoundland</p> <p>2. Regimental No. 3675</p> <p>3. Rank Pte.</p> <p>4. Name White, Herbert</p> <p>5. Age last birthday _____</p> <p>6. Enlisted { on _____
at _____</p> | <p>7. Former Trade }
or Occupation }</p> <p>7A. If with previous service in Army, state—</p> <p>(a) Former Unit;</p> <p>(b) Regimental No.;</p> <p>(c) Date of Discharge;</p> <p>(d) Cause of Discharge.</p> |
|--|--|

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Inflammation, Right Knee.

Statement of Case.

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

9. Date of origin of disability.
10. Place of origin of disability.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
- Returned to England from Cambrai Area Inflammation right knee due to fall in the trenches. After treatment Wandsworth returned to depot boarded Bii since then developed Pleurisy right side which was treated Hazeley Down Military Hospital.**

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

Opinion of the Medical Board.

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

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

(iii) The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

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

(v) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a) State whether the disability is clearly attributable to—

(i) Service during the present war;

(ii) Climate;

(iii) Ordinary military service;

(iv) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v) Whether it is constitutional or hereditary.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

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

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

(a) Sanatorium;
(b) Hospital;
(c) Convalescent home;
(d) Asylum; or

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

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

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

13. What is his present condition? **No present inflammation knee, movements knee joint free. Complaints of pain in right side after old pleurisy**

Weight should be given in all cases to the fact that it is likely to afford evidence of the progress of the disability.

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

(a) In action?

(b) On field service?

(c) On duty?

(d) Off duty?

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

If so—(a) When?

(b) Where?

(c) Opinion?

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

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

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

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

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

Repatriation.

J. ST. P. KNIGHT, CAPT. NYLD REGT.

Officer in medical charge of case.

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

except†

Station _____

Date _____

Officer in charge of Hospital.

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

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

Signatures:—

Station **ST. JOHN'S.**

Date **JAN 14th, 1919**

Station _____

Date _____

M.S. FRASER.

J.S. TAIT.

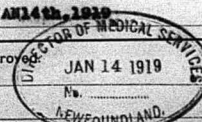
L. PATTERSON. MAJOR.

(Sgd.) CLAUDE MACPHERSON. MAJOR.

Administrative Medical Officer.

President.

Members.



Medical Report on an Invalid.Station Hazley-Dawn-Camps.

Date _____

- | | |
|-----------------------------------|--|
| 1. Unit Royal Newfoundland | 7. Former Trade }
or Occupation } |
| 2. Regimental No. 3675 | 7A. If with previous service in Army, state— |
| 3. Rank Pte. | (a) Former Unit; |
| 4. Name White. Herbert | (b) Regimental No.; |
| 5. Age last birthday | (c) Date of Discharge; |
| 6. Enlisted { on
at | (d) Cause of Discharge. |

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Inflammation, Right Knee.Statement of Case.

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

9. Date of origin of disability.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **Returned to England from Cambrai Area Inflammation right knee due to fall in the trenches. After treatment Wandsworth returned to depot bearded B11 since then developed Pleurisy right side which was treated Hazley Dawn Military Hospital.**
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page.3).
 - constitutional or hereditary, and not aggravated by service during the present war.
 - attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition? **No present inflammation knee, movements free joint**

free. Complains of pain in right side after old pleurisy
Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

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

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

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

If so—(a) When?

- (b) Where?
- (c) Opinion?

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

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

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

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

20. Do you recommend—

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

Repatriation.

J. ST. P. KNIGHT. CAPT. NELD REGT.

Officer in medical charge of case.

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

except †

Station _____

Officer in charge of Hospital.

Date _____

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

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

Opinion of the Medical Board.

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

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

(iii.) The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentials between them.

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

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

Yes.

No.

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

Military Service,

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

23. Is the disability permanent?

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

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

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

100% 3 months.

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

27. Do the Board recommend—

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

Yes.

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

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

Advise admission Jensen Camp.

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

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

Signatures:—

N.S. FRASER.

President.

Station **ST. JOHN'S.**

J.S. TAIT.

Members.

Date **JAN 14th. 1919**

L. PATERSON. MAJOR.

Approved by
DIRECTOR OF MEDICAL SERVICES
JAN 14 1919

Station _____

(Sgd.) **CLUNT MACPHERSON. MAJOR.**

Administrative Medical Officer.

Date _____

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3675 Rank Pte Name White, Herbert
 Intended place of residence Morton's Pt.

2. Occupation Fisherman
 Classification of soldier B Medical Category E

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

ELIGIBLE for FOOT DISCHARGE PAY

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

Place ST. JOHN'S (SGD) C. C. DULEY, CAPT.
 Date Jan 20 1919 for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S (SGD) H. HERBERT WHITE
 Signature of soldier
20-1-19 (SGD) C. B. DICKS, CAPT.
 Signature of witness

Jensen Camp

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S (SGD) HERBERT WHITE
 Signature of soldier
20-1-19 (SGD) W. J. EATON, P/RQMS
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 24-4-17 No of days on Military
 Discharged from service 20-1-19 plus 14 days Service 651

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S (SGD) R. H. TAIT, CAPT.
 Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.
 Date Jan. 21. 1919

CONFIRMATION OF DISCHARGE

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

Place
 Date
 Officer i/c Records
The Royal Newfoundland Regiment