



THE ROYAL NEWFOUNDLAND REGIMENT

asp 5376
No. ~~5385~~

ATTESTATION OF

Name *Willis White* Corps *C of C*

Questions to be put to the Recruit before Enlistment.

1. What is your name? *Willis White*
2. What is your full Address? *Newfoundland*
3. Are you a British Subject? *Yes*
4. What is your age? *20* Years Months
5. What is your Trade or Calling? *Fisherman*
6. Are you Married? *no*
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? *no*
8. Are you willing to be vaccinated or re-vaccinated? *Yes*
9. Are you willing to be enlisted for General Service? *Yes*
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? } Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } *Yes*

I, *Willis 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.

Willis White SIGNATURE OF RECRUIT.
P. R. Bowler Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Willis 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. John's*

on this *23* day of *May* 191*5*

Signature of Attesting Officer *P. D. Whitehead*

CERTIFICATE OF APPROVING OFFICER.

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

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

Date 191*5* } 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)

DESCRIPTIVE REPORT ON ENLISTMENT

2376

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

Name Willis White

Apparent age _____ years _____ months. Height 5 feet 6³/₄ inches

Chest Measurement { Girth when fully expanded 36 inches
Range of expansion 4 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George D. White
New Haven | Relationship Father,
J. B. 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									
Joined at	<u>St. As</u>								<u>Leave Lt 1918.</u>
				<u>Nov 23-1918</u>					<u>Reverts to Ranks 16-1-19</u>
									<u>Leave Lt. 20-6-19</u>
									<u>Returned to service 11/1/19</u>
									<u>Embarked St. As for St. Elizabeth to Halifax N.S. 22-1-18</u>
									<u>Left for demobilization 24-6-1919</u>
									<u>Arrived Newfoundland 1-7-1919</u>
									<u>Demobilization St. As 11-8-1919</u>
Total Service forfeited as above.....									

Total Service towards Engagement to 11-8-1919 (date of discharge) 1 years 81 days
 " " Pensions " [" "] " " "

Aft. Content

Oct 7th 19

C.R. 5376

To Staff Officer

Dear sir,

As I heard there were service ribbons for anyone who call or send for them, so I am sending to see if you would please send me one. I want something to show I was with the boys for awhile anyway,

meanwhile I am.

Dear sir

Yours respectfully

W. White

#5376 Ex L/c Willis White.

Riband posted Oct 8/19

C.R. 5376

Extract from Daily Orders Part II Royal Newfoundland Regiment
Depot ST. JOHN'S dated Aug 22nd 1919.

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

5376, L/C. Willis White.

C.R. 5376

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

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

5376 L/C. W. White.

C.R. 5376

Extract from Daily Orders Postmill Unit The Royal Nfld.
Regt. St. John's, July 5th, 1919.

5376 Pte. W.White.

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

C.R. 5376

Extract from Daily Orders By Lt. Col., B.J. Barton, D.S.O.
Commanding to 2nd Bn., Royal Wfld. Regt. 18-1-19.

5376 L/C. W. White.

Reverts to the ranks as from 18-1-19.

C.R. 5376

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

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

#5376 Pte. Willis White.



C.R. 5376

Extract from Daily Orders part 11, from Unit The Royal
H214. Regt. St. John's, dated May 25, 1918.

#5376 Pte. Willis White.

Attested for General Service with the Royal H214 Regt.
from 23.5.18

C.R. 5376

Extract from Orders by Lt. Col., B. J. BARTON, D.S.O.,
COMMANDING 2ND. BATTALION OF THE ROYAL NEWFOUNDLAND REGIMENT.

5376 Pte. W. White.

TO BE LANCE CORPORAL.

W. White

C.R. 5376

P. + R. G

No. 5263/764

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 Regiment,
Hazeley Down Camp,
Winchester.

3rd April 1919

April 5th 1919

5376 Pte. White W.

With reference to the following telegram from the Minister of Militia / / (116)

"Pay to- 5376 White
£2. 17. 6

Cheque £2. 17. 6 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

W. W. White
Chief Paymaster & O. i/c Records.

RECEIVED
58, VICTORIA ST.
LONDON, S.W. 1.
-7 Receipt hereunder.
Cham
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of Two pounds
Serentem & Six pence respect of
telegraphic remittance from the
Minister of Militia.

W. W. White
No. 5376 Rank Pte
Witness W. Barnes

~~A~~ B



No. 3428/527.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding.
2nd/Bn. Ryl Nfld Regt.

Witchester.

P.D. 064608
4/2/19

3rd March 1919

March 6th 1919

5376. Pte White. W.

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / (56)

"Pay to-5376. White.

P.J. Barlin LIEUT. COLNEL,
OFFICER COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

£6. 2. 3.

Cheque £6. 2. 3. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of £6. 2. 3. in respect of telegraphic remittance from the Minister of Militia.

[Handwritten signature]

Chief Paymaster & O. i/c Records.

W.W. Hite
No. 5376 Rank Pte.

Witness [Signature]



ARMY AND NAVY
 YOUNG MEN'S CHRISTIAN ASSOCIATION
 "WITH THE COLORS"



CONTINGENT OFFICE
 517
 Paymaster of 7th & 2^d Regt
 518 Victoria St
 London.
 14-1-19

1031

WR

Dear Sir.
 Would You be kind
 as to oblige me by Cabling to my
 Parents for five pounds as I am
 in hospital & getting marked out
 next week & want some money for
 leave as my pay is stopped while
 in here. I guess you know
 what is wrong, and I havnt money
 enough now to cable myself.

I was out last night &
 they couldnt send one collect as I
 am writing to see if you would do
 me a favour.

By sending you will
 oblige yours truly
 #5376 Lt. Willis White
 B. Company
 R. 7. Regt.

I am now at
 Hilsa M. Hospital
 Ward
 72
 Portsmouth

If you send all you need say
is.

to G. B. J. White

New Perlican
Newfoundland

Cable five pound
immediately

Willis

that is sufficient.

Please let me know if you
send or not.

W.W.

46/45

1409/2/P.&.A

Hilsea Mil.

24th. Jan: 9.

Cosham

5376

Private

W. White.

3 : 0 : 0d.



Major,

O.K. f 3-0-0
NR 21/1/19

NEWFOUNDLAND CONTINGENT

N.F.P./45.

To: Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street, London, S.W. 1.

Please remit to *5376 Pte. W. White.

B. Company. R. N. Regt

the sum of three pounds — shillings (£ 3-0-0.)

on account of any balance that may be due to me.

Regtl No. 5376 Rank Pte

Name Willis White.

Approved J. B. P. Esq. Cpt. Name
Officer i/c.,

Dated at Hilsea.

Hilsea Military Hospital.

20-1 1919



ARMY AND NAVY
 YOUNG MEN'S CHRISTIAN ASSOCIATION
 "WITH THE COLORS"



NEWFOUNDLAND CONTINENTAL
 PAY & RECORDS OFFICE.
 CH. POS. NO. 1409/2
 21 JAN 1919

Plus 1+1

Hilsea Hosp.
 20-1-19

Dear Sir;

Thanks for
 your letter of this morning for I
 owe the money to some boy at
 the depot & want to pay him as
 soon as I can for he will soon
 be going back home.

Since I wrote you
 I've be reduced to Private as you
 will see by the form.

meanwhile I remain
 yours sincerely

#6376 Pte. W. Whit
 R. 2nd Bde Regt
 Ward 6.

Hilsea Mil Hosp.
 Eosham.

FORM K

N^o 4416



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Willis White, Regl. No. 5376

hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Five Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
concerned, viz.:

Allotment begins 1-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>4182</u>	<u>Mother</u>	<u>Mrs George Albert (Elizabeth Ann) White</u>	<u>New Parishian T.B.</u>	<u>60</u>
			Total Allotment, \$	<u>60</u>

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

Sig.) W. Summers Lt
Officer Commanding
"B" Company
St. Johns
8-6-1918

(Sig.) Willis White
(Rank) Private

White, W

5576

Ray Dept.

August 14, 1919

#5376 L/C. Willis White,
New Berlican, T.B.

Dear Sir:-

Please find enclosed Discharge Certificate #3745.

Yours truly,

Captain & Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5376 Rank. S/Cpl Name. White W.
 Intended place of residence. New Berlin

2. Occupation Insulman
 Classification of soldier. E Medical Category. NI

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

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

Place, ST. JOHN'S
 Date JUL 14 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S
 Date JUL 14 1919
 Signature of soldier: W. White
 Signature of witness: W. Johnston

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S
 Date JUL 14 1919
 Signature of soldier: W. White
 Signature of witness: W. Johnston

STATEMENT OF SERVICE

7. Enlisted for service. 23. 5-18 No. of days on Military
 Discharged from service. 28. 7-19 Plus 14 days Service. 446

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S
 Date JUL 28 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S
 Date August 11/1919
 Officer in Charge
 The Royal Newfoundland Regiment

9
20
31
11

Handwritten notes and signatures at the bottom of the page.

The Royal Newfoundland Regiment

Class for Demobilization: —

10

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

July 12/19

Regimental No. *5376*

Name

White, Willis

Address

New Perlican

Present Medical Category

A1

Recommended for:— (a) Immediate discharge

(b) ~~Standing Medical Board~~

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

Members of Board

J. Paterson
Senior Medical Officer

W. Barden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5376 Rank Sgt Name White W
 Date of Enlistment 23-5-18 Address New Brunswick District St. John's
 Occupation Postman Classification for Discharge E1 Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	B 263	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	E
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 13-7-19

O. C. Discharge Depot. *[Signature]*

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

W. 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

Date 14-7-19

O i/c. Re-clothing. *[Signature]*

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 92425 to his home at New Orleans and Release Certificate No. 33-82 issued.

Date 14-7-19 *Ambleton*
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 11-5-19

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

Discharge approved for 25-7-19
Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
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		

Form B

Date 14-7-19 *Ambleton*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date 0161 82 1117 *K.P. 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.

W. W. White

Signature of Man.

M. D. Conner

Reg. No. 5376

Signature of the Vocational Officer or his Representative.

Place

San Francisco, 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

OF

Surname White

Christian Name Wills

Table I.—GENERAL TABLE.

Birthplace:—Parish New Peruvian Nfld County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <u>27th</u> day of <u>May</u> 191 <u>8</u>	at <u>S. Johns</u>	on	day of 191
Declared Age...	<u>20</u> years	<u>3</u> days	<u>24</u> years	<u>1</u> days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>6 3/4</u> inches		feet	inches
Weight	<u>129</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded...	<u>36</u> inches		inches
	Range of Expansion...	<u>4</u> inches		inches
Physical Development...				
Vaccination Marks	Right	Left	Right	Left
	<u>3 mtd. 29 12 201</u>			
When Vaccinated				
Vision	R. K.—V= <u>6/6</u>	L. E.—V= <u>6/6</u>	R. E.—V=	L. E.—V=
	(a)	(a)		
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>Lammie Peterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>S. Johns</u>	on <u>27</u> day of <u>May</u> 191 <u>8</u>	at	day of 191
Joined on Enlistment...	Corps.	Regtl. No.	Corps	Regtl. No.
	<u>1st Depot</u>	<u>1376</u>		
Transferred to...				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature of treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospitals will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Hilsea	14	12	18	15	2	19	Gonorrhoea	64	Out & put with cert. G.C. Journal. Discharge & Post. Discharge. Retate message. Bony. Jit & up in uenil	W. J. J. J. Capt. Name

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*
2. Regtl. No. *5376* 3. Rank. *Pvt.*
4. Name *W. Little* *W. Little*
(Surname) (Christian Names)
5. Age last birthday. *21*
6. Posted for duty on at
in category (or grade)
7. Former Trade or Occupation } *Fisherman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ; with Regtl. Nos.
(b) Date of Discharge ;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
(a) in action (b) on field service.
(c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
(a) When
(b) Where
(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. } | V.D.E. cured | |

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

He complains of no disability

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

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.)

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

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

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

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

20. Do you recommend—

(a) Discharge as permanently unfit ?

(b) Change to United Kingdom ?

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

Repatriation

W.E. Proctor *Capt RMC*
 Medical Officer in charge of case.

Station *Hazeley Down*

Date *3.11.19*

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

BB/EB

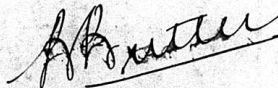
November 25, 1919.

To:- Major Parsons,
Medical Officer.

From:- V. O.

J. W. Parsons 3920.
Willis White 5376.

Will you kindly have the medical reports on the above named men for Friday's nights Meeting, as I wish to have their cases taken up at that time.



Major
For V. O.



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 Office 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 *Willis White*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5-376*

Intended address *New Parlian C.B.*

Height on discharge *5* Feet *8*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks —

Figure on discharge *Medium*

Christian name of Father *George*

Christian name of Mother *Elizabeth*

Wife's maiden name in full —

Date and place of marriage —

Christian names of children —

Place and date of soldier's birth *New Parlian, 25th October, 1898*

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) *Willis White*

P. Cpl.
(Rank)

Station *St. John's*

Date *9. 7. 19*

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.



Station

Date

August 18, 1919

Mr. Willis White,
New Perlican, T.B.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name *Willis* 2. Surname *White*
3. Rank *Capt* 4. Regtl. No. *5376*
5. Address in full to which future payments of gratuity are to be forwarded. *New Orleans, La.*
6. Date of enlistment in the Regiment. *May 23/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
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. *From May 23/18 to July 14/19*

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

No.

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

No.

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

No.

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

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

No.

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

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

No.

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

19. Are you now serving in the Post? If not give? (a) Date of discharge. (b) Reason for discharge.

No.
July 14/19
Resignatory
Demobilization

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

No.

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

No.

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

W. White

Signature of Applicant:

Place of Residence:

Declared before me at:

This

14th

day of

July

1919

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

POST DISCHARGE PAY.

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

Certified correct.

Raymaster

FORM K

Nº 4416



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Willis White, Regl. No. 5376

hereby agree, until further notification by me, and in similar official form to make an Allotment of
244 Dollars and 45 Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
concerned, viz.:

Allotment begins 1-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4182	Wife	Mrs George Albert (Elizabeth Ann) White	New Bedford N. B.	60
			Total Allotment, \$	60

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

Sig.) Al Summers Lt
Officer Commanding
"B" Company
Dr. Johns
8-6-1918

(Sig.) Willis White
(Rank) Private

ST. JOHN'S, July 21st /19

Royal Newfoundland Regiment.

Billeting Account,

To M^{rs}. F. Kelly
6. Dunsford Street

Billeting Soldiers as undermentioned

from July 11th /19 to July 17th /19

5376. Lt. W. White 6 60

Rtm
3573
NEW

ACC	
NO	
NO	
NO	
NO	
NO	
NO	
NO	

Certified correct for \$ 6

M. Christie
Billeting Officer.
R.J.
J.F. Kelly

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

3
Royal Newfoundland

Number of Sheet one
Signature of O. C. Company C. D. Pitts Lieut.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.		Age on	20 years months	Insternew	Promoted Lance Corporal 9-9-18 Reverted to Rank. 16-1-19	
5376 <u>Walter Miller</u>		Place and Date of Enlistment	<u>St. John's 23 8 18</u>	Religion		
Joined	Date	Period of } with Colours / 81 years. with Reserve / 365 years.		Place of Birth	<u>New Brunswick N.B.</u>	
Joined	Date					
Joined	Date					

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
<u>Hillsia</u>	<u>15-1-19</u>	<u>Pte</u>		<u>Breaking out of Hospital and apprehended</u>	<u>Cpl Smith</u>	<u>Reverted to Rank</u>	<u>16-1-19</u>	<u>Lt Col M. J. Camerote</u>	<u>W.H.</u>
<u>Hazelton 2nd Camp</u>	<u>16-2-19</u>	<u>Pte</u>		<u>Regular Conduct or Denying that is Throwing Tea around.</u>	<u>Sgt Mohney</u>	<u>2 days CB</u>	<u>7-5-19</u>	<u>Cap W. H. O'G</u>	<u>W.H.</u>
				<u>Demobilized St John's</u>	<u>11 8 19</u>				

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

9376

DEMOBILIZATION OF

Reg. No. 5376 Rank Lt Colonel Name White W.
 Date of Enlistment 23.5.18 Address New Bedford District St. John's
 Occupation Postman Classification for Discharge F Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 12.7.19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

W. 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

Date 14-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B2425 to his home at New Palestine and Release Certificate No. 3382 issued.

Date 14-7-19

Ambleton
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

Date 14-7-19

Ambleton
Depot Paymaster.

Discharge approved for.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	2 Form B
F 178	W 3494	B 122	Board 1st	" 2	
F 178a	D 490A	B 115	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 14-7-19

Ambleton
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date 14-7-19

A.P. Cooper Capt
O. C. Discharge Depot.

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

Date 14-7-19

Reg. No. *5376* Rank *P6* Name *White W.*
Attested Address *New Orleans*
Allotment..... Allottee
Date of Allotment..... Returned from Overseas..... *JUL 1 1915*
Returned on S.S. *Cassandra* Cause *Discharge*

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION

14-7-19
28-7-19

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi.), 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*
- 2. Regtl. No. *5376* 3. Rank. *Private*
- 4. Name *White Willis*
(Surname) (Christian Names)
- 5. Age last birthday. *21*
- 6. Posted for duty on..... at.....
in category (or grade).....
- 7. Former Trade or Occupation } *fisherman*
- 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 ?
- 9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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

- 11. Date of origin of disability. *mf*
- 12. Place of origin of disability. *mf*
- 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. *mf*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war 1
 - (ii.) Previous active service. 1
 - (iii.) Climate in pre-war service 1
 - (iv.) Ordinary military service before the war 1
 - (v.) Serious negligence or misconduct on the } *W. S. G. Cured*
 - man's part.

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

See Complaints of W.S. Disability

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.)

- 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?

Reputation

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.

W. E. Proctor *Capt Rank*

Medical Officer in charge of case.

Station *Razeky Down*

Date *3/4/19*

* 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.