



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 5309

Name in full Berttram William Coker Age 23

Address 3090

~~Married~~ Single Height 5'8" Weight 145 lbs.

Color fair Hair brown Eyes blue

Other distinguishing marks cut on inside left thigh

Nearest relative Father, Ham Coker

Address 3090

Dependents None

Occupation Labourer Present Wage \$2.00 per week

Previous service

Decorations

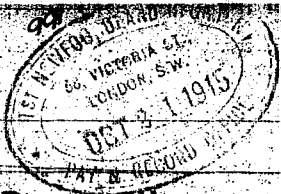
General Remarks

Date of Enlistment

I, Berttram William Coker, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland as the case may be) against all his enemies and opposers whatsoever according to the conditions of my service.

Declared before me this 14 day of October 1914
W. J. Russell
Berttram William Coker
16
21

This space to be left blank for the Colonel's signature.



Army Form B, 268.

Proceedings on Discharge.

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

No. <u>539</u>	Army Rank <u>Lance Corporal</u>
Name <u>Orake Burton William</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>First Newfoundland Regiment</u>	
Battalion, Battery, Company, Depot, etc. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>October 15/15</u>	
Place of discharge <u>Edinburgh</u>	
1. <i>Description at the time of discharge.</i>	
Age <u>24</u> years _____ months	Descriptive marks. <u>Cut on inside left thigh</u>
Height <u>5</u> feet <u>8</u> inches	
Chest (girth) when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Fair</u>	
Eyes <u>Blue</u>	
Hair <u>Brown</u>	
Trade <u>Clerk</u>	
Intended place of residence <u>Edgely</u> <small>(To be given as fully as practicable.)</small>	
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>	
2. The above-named man is discharged in consequence of <u>Time expiring</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character :- <u>Very Good</u>	
4. Character awarded in accordance with King's Regulations :- <u>Regret to lose this man who should be a very good workman in civil life.</u>	
To be filled in on the soldier quitting the Colours.	
Certified that the above is an accurate copy of the character given by me on Army Form B, 268* and that Army Form B, 489 was awarded in this case. <u>Crow</u>	
Initials of Commanding Officer. COMMANING DEPOT, N. F. L. D. REGT. NEWTON-ON-AIR, N.B.	
Army Form B, 268 has been issued to*	

FIRST NEWFOUNDLAND REGIMENT.

We the undersigned Officers of the Newfoundland Regiment declare that
in the presence of both of us,

No. 539 Laneborough W. B. Baker

of his own free will elected to be discharged in the United Kingdom,
renounced his claim to be repatriated in Newfoundland, and absolved the
Government of Newfoundland from all liability to repatriate him.

Name Robertson
Rank Lieut. Col. G. G. G.
Date October 15, 1915

Name A. White MAJOR.
COMMANDING DEPÔT, N. F. L. D. REGT.,
NEWTON-CR. AVR. # 6
Rank _____
Date OCT 15 1915



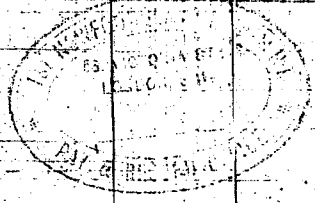
991

PAY LIST of "P" { 1/ Newfoundland } Regiment or Corps,
 for the period from 29 May 1915 to 25 June 1915 Voucher No. _____

ACCOUNT OF HOSPITAL STOPPAGES

due from the "P" Squadron, Troop, Batty., or Compy., for Soldiers and Boys in the Military Hospital
 at Nels. on Pyne Workhouse during the above period.

Rank	Regtl. No.	*NAME.	Whether suffering from Venereal Disease or Alcoholism †	Date of Admission.	Period.		No. of days in Hospital, including day of admission.	No. of days on which Medical Comforts have been issued.
					From	To		
L/Cpl.	539	Oake, B.W.	Venereal	21/5/15	29/5/15	26/6/15	19	
Totals carried forward								19



*Charged H.E. Pay Book
 of No. 48*

*(Names, &c., to be filled in in the order of admission from the Admission and Discharge Book.)
 † "Venereal" or "Alcoholism" should be entered in red ink, and in the handwriting of the Medical Officer, opposite the name of any man suffering from either of those diseases, and "NO" in other cases.
 NOTE: In the case of an Officer treated in hospital this form is to be used, any necessary amendments being made in manuscript.

CR. 539

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

#539 Pte. B. W. Oake, Oct. 15th 1915, time expired.

C.R. 539

Extaret from Nominal Roll Embarked St. John's per S.S.

"Florissal" Oct. 4. 1914.

539 Oake Bertram Wm.

C.R. 539

Extract from Nominal Roll of Warrant officers and
N.C.O's of the 1st Mfld. Regt.

589 B.W.Oaks.

Promoted L/Cpl. 3-10-14.