

FIRST NEWFOUNDLAND REGIMENT

| No. 3901. Name M. J. Bush Corps Mill. |
|---|
| Questions to be put to the Recruit before Enlistment. |
| I. What is your name? I Mr. J. Bushof. |
| 2. What is your full Address? |
| 3. Are you a British Subject? 4. What is your age? 5. What is your Trade or Calling? 6. Are you Married? 6. Mo |
| 7. Have you ever served in any Branch of His Ma ; ? |
| 8. Are you willing to be vaccinated or re-vac- cinated? |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? \\ 10. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? |
| made by me to the above questions are true, and that I am willing to fulfil the engagements made. ### 10/7/17 |
| OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I |
| 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 |
| on this |
| †CERTIFICATE OF APPROVING OFFICER. |
| I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re- |
| quired 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 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. |

| m. | J- 13 m | dop | | | | | • | 1 4 |
|---|--|---|--|---|--|--|--|---|
| | Girth when fu | lly expand | led 37 | <u> </u> | inch | | | feet |
| | Range of expa | nsion | 4. | inches | | | | |
| e mark | :S | | | | | h | | |
| | | | | | | | | |
| d Addre | | | | | | | to | |
| u | png. | CAR DIS | | | | 7 | -a | the |
| 7). Christia | n and Surname of Woman t | o whom marrie | d, and whether | spinster or | widow | . (6) P | lace and | date of marriage. |
| (a) | (c) Prese | nt address. (a | nitials of Of | icer verify | ing en | try, | | (d) |
| | | | | | | | 4 | |
| | | a de aba | | | | | 1 | |
| Chris | tian Names | Particula | ars as to Cl | ııldren | | Date | and Pla | ce of Birth |
| Rgt. or | STATE Promotion, Reductions, | | | Service lowed to | not al- | Service | in Re- | Signature of Officers cert |
| 100000000000000000000000000000000000000 | | Army Rank | - Dates | | ng the | wards G | C. Pay | fying correctness of |
| Depot | Casualties, &c. | Alaly Kalik | | Years | I straigh | Years | Days | entries |
| | Casualties, &c. l engagement reckons from | | | rate of p | I straigh | Years | Days | entries |
| | Casualties, &c. | | | rate of p | I straigh | Years | Days | entries |
| | Casualties, &c. | | | rate of p | I straigh | Years | Days | entries |
| | Casualties, &c. | | | rate of p | I straigh | Years | Days | entries |
| | Casualties, &c. | | | rate of p | I straigh | Years | Days | entries |
| | Casualties, &c. | | | rate of p | I straigh | Years | Days | entries |
| | Casualties, &c. | | | rate of p | I straigh | Years | Days | entries |
| | Casualties, &c. | | | rate of p | I straigh | Years | Days | entries |
| | asurem e mark d Addre | Assurement { Girth when further assurement { Range of expanse marks | Assurement Range of expansion. INFORMATION S I Address of next of kin Particular Particular Christian and Surname of Woman to whom marrie (a) Present address. (a) Particular Christian Names | Range of expansion INFORMATION SUPPLIED Address of next of kin Particulars as to Ma Christian and Surname of Woman to whom married, and whether (a) Particulars as to Ch Christian Names STATEMENT OF THE | Assurement Girth when fully expanded Range of expansion inches in | Assurement Sirch when fully expanded 373 inches inches re marks INFORMATION SUPPLIED BY RE Address of next of kin Relationship Particulars as to Marriage (a) Present address. (a) Initials of Officer verifying enterprise (b) Particulars as to Children Christian Names STATEMENT OF THE SERVICE SERVICE (C) Service not all service not | Address of next of kin Particulars as to Marriage (a) (b) Present address. (c) Particulars as to Children Christian Names Christian Names (d) Initials of Officer verifying entry. STATEMENT OF THE SERVICES Service not als. Service. | Assurement Sange of expansion Sinches inches INFORMATION SUPPLIED BY RECRUIT Address of next of kin Relationship Particulars as to Marriage Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and (c) Present address. (d) Initials of Officer verifying entry. Particulars as to Children Christian Names Date and Pla STATEMENT OF THE SERVICES Service not at Service in Re- |



1st. NEWFOUNDLAND REGIMENT

| of iden | | he undermentioned Person and Person of the relative Identit | y Certificates by the Person | de on pro |
|---------|---|---|------------------------------|----------------------|
| | Whether Wife, Child, other Relative or Friend | NAME (in full) | Address | AMOUNT (each pers |
| 81 | mother | h 2 Susantal 1 | Janus Bishop | |
| | 6 | 9 | | |
| | | | Treempon | |
| | | | 1003 | |
| | | | | |
| | | | | |
| | | | | |
| | | . 4 | | |
| | | | | |
| | | | | |
| , | | , | | |
| | | | Total Allotment, \$ | 6 |



FIRST NEWFOUNDLAND REGIMENT

| No. 3901 Name M. Boilet Corps Meth |
|---|
| Questions to be put to the Recruit before Enlistment. |
| |
| |
| 2. What is your full Address? |
| 3. Are you a British Subject? 3. Are |
| 4. What is your age? |
| 5. What is your Trade or Calling? 5. Laapter |
| 6. Are you Married? 6. 20 . |
| 7. Have you ever served in any Branch of His Ma ; // // // // // // // // // // // // / |
| 8. Are you willing to be vaccinated or re-vac- |
| 9. Are you willing to be enlisted for General Ser- |
| 10. Did you receive a Notice, and do you under- stand its meaning, and who gave it to you?} 10 |
| 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? |
| made by me to the above destions are true, and that I am willing to fulfil the engagements made. **Malastrandar Biology Signature of RECRUIT.** Signature of Witness. |
| |
| OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful and bear true allegiance to his Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service. |
| CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER. |
| The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act. |
| The above questions were then read to the Recruit in my presence. |
| I have taken care that he understands each question, and that his answer to each question has been duly entered |
| as replied to, and the said recruit has made and signed the declaration and taken the oath before me at |
| on this day of |
| argnature of Attesting Omcer |
| †CERTIFICATE OF APPROVING OFFICER. |
| I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re- |
| quired 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. |

DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet. Name... Apparent age 26 years months. Height 5. Girth when fully expanded 372. inches Chest Measurement Range of expansion.... Distinctive marks ... INFORMATION SUPPLIED BY RECRUIT Deras Bucky Name and Address of next of kin Relationship. 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) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service not allowed to reckon to rate of pension wards G. C. Pa Signature of Officers certi-Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. ed to reckon to-wards G. C. Pay Army Rank Dates fying correctness of entries Years Service towards limited engagement reckons from 29-9-18 Lland 21-12-18.

Total Service towards Engagement to 6-2-1919 - [date of discharge] / years 2/2 days

Total Service forfeited as above.....

C.R. 3901

Extract from Orders by Lt.Col. G.t. Mathias, D.S.O. 19 Commanding 1st Battn, R. Efld. Regt. 82-8418.

The following appointment is made this day.

3901 Cpl. M. Bishop

A. Coy to be a Sergeant.

J.R. 3901

Extract from Brders by T.G. Mathias, D.S.O. Commanding 1st Batte Royal Nfld. Regt. 3/7/18.

The following arrived yesterday and is posted to A. Co.

3901 Arst. M.J. Bishop.

| No. 390/ N Date of last entry Company Conduc | in t Sheet } | 1 × 1 | NO. 8 | Sqn., Batty., or Company } | Period not re- freedom from | extra fine | Sheet No. | Date of 10-7-1 Company, etc. | Mo m. | Le Ohas | acted |
|--|-------------------|--------|------------------------------|--|--------------------------------|--|--|--|---|-----------------|-------|
| Place | Date of offence | Rank | Cases of Drunken- ness | | Offence | | Names of Witnesses | Punishment awarded | Date of award or of order dispensing with trial | By whom awarded | Rema |
| the standard of the standard | profession of the | 21 -20 | an Bardin | | | - 44 - 4 | | | report to the second | of the same of | |
| 8 | 9.5 | W 289 | | | 100 | | an unumerinum uposanium | | | | |
| i | 1 0 00 0 | 50 | A | | | | | | - Col | No. | |
| A | | 100 | | | | | | + x + x x x | led ! | 29418 | |
| g | | | | | | | 1 | | | 6 | |
| A | | | | | | 2., | , V | | | | |
| | | | | | | | | | manufaction ships | | |
| 4 | | 3 | 1.60. | | | | | | turn modern minum | | |
| | | | | | | north and the state of the stat | A CONTRACTOR OF THE CONTRACTOR | | | | |
| | | 1 1-1 | 1 | | | | | 9-1-120- | | | 6 , |
| | | | MADE OF | | -41 | | | | 4. | | |
| | | | | A STATE OF THE STA | | | - A | | | | |
| Managara and | | | | | | | The second second | the state of the s | | | |
| A Zelanda | | | CO Branco | | | | | | | | . 0 |

CR. 3901

Extract from Del;y Orders Part 11 Unit the resyl Hila. Regt. St. John's, Pob.18th, 1919.

The duscharge of the undernoted on demobilization has been confirmed by Officer 1/c Records an noted Dates.

3901 Bgt. Malcoim Bishop.

C.R: 390

Autrest from Daily Orders part 11, Sepat st. John's Sated Jan. 24th., 1919...

The discharge of the unde noted on describing the bure been sufficiently by C. C. Discharge depot on Mali-1-19.

#3901 Sgt. N. Bishop .

#3901 2

C.R. 3901

Extract from Medical Board held Jan. 15th, 1919.

3900 Bgt. M. Bishop.

Recommended Discharge as permanently unfit.

Extract of ORDERS BY LT. COL. B.J. BARTOND D.S.O., COMMANDING 2nd BATTALION ROYAL NEWFOUNDLAND REGIMENT, 2/1/19.

The following having reported back from the 1st Battn. is taken on the strength and posted to "H" Company.

#3901 Pte. Bishop.

28/12/18.

C.R. 3901

Extract from Nominal Roll of repatriation draft No. 79, per S. S. CORSICAN which embarked at filbury Docks, 12/18/18 from the 2nd., Battalion of the Newf undland Regiment.

#3901 A/Sgt. M. J. Bishop.

Extract from Daily Orders part 11, Depot St. John's dated December 23rd., 1918.

The u/m returned from Overseas and reported at Depot, 21-12-18.

#3901 Pte. M. J. Bishop.

Extract from Daily Orders part II. Depot Simphester by Liout Col., B. J. B ARTON, D. S. O. Officer Communiting 2nd., Bettellion of the Ro al Newfoundland Regiment, 10-12-18

The undermentioned having reported back from the late, Battalion is taken on the strength and posted to "H" Company. Offer to

3901 Sergt. M. Bishop.

C.R.

Extract from Nominal Rell discharged fr om 3rd London General Mospital on 7-12-18 and sent to 2nd Battn. Winchester, for Ammediate repatriation, in accordance with arrangements made by Major Timewell. 17 Dec. 1918,

3901 Sgt. M.J. Bishop.

Oct 16th, 1918

Darius Bishop , by , Greenspond

Dear Sir:-

I beg to inform you that additional information has been received through the Visiting Committee to the Newfoundland War Contingent Association to the effect that No. 5901, Sergt. Malcolm Bishop is now progressing favourally.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

NEWFOUNDLAND POSTAL TELEGRAP



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.

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 ntirely 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. 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)

Darius Bishop,

To

| Signature of | of Sender | | Address Dept of Militia. | | | |
|----------------|---------------|------|--------------------------|-------|--|--|
| Line Number | RodBy | Sent | by_ | Check | | |
| Dated | 0et 8th, 1918 | | 4 | | | |

Greenspond

Regret to inform you that Record Office, London. officially reports Ho. 5901 Sergt. Malcolm Bishop at 33d London General Hespital, Wandsworth suffering from G.S.W. right thigh

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

A.R. Bermett

Minister of Militia.

FOR TYPEWRITER

Extract from Casual ties received from Pay & Record London.

ALLITZED SEO LONDON GENERAL HOSPITAL 5-10-18.

3901 Sgt. M.J. Bishop.

G.S.W. R. Thigh.

H.H.

SICK AND WOUNDED N. C.O'S AND MEN OF THE EXPEDITIONARY FORCE - BRANCE

No. 1 RECORD OFFICE . H.OUHSLOW.

Adm 55 Gen H Boulogne 30th September 1918.

67963 Pte Carpenter R.W...... 11 RW Surreys BW Upper Arm Sit. GBW R.Knee Slt. Debility Slt. Debility Slt. 12 Bast Surreys. 48377 . Lee A. 67847 . Hutton W. 1332 . Stewart A. 1 QRW Surreys. 23 Middlesex.

NO TWO RECORD OFFICE - HOUNSLOW.

No.H. A. 29765.

Adm 55 Gen H Boulegne 30th September'18.

20702 Pte Barber A...... 10 RW Kents..... GSW Shoulder Sev. SW Rt. Thigh Sev. 10 do. 30813 L/C Knight C:J. GSW Upper Lip Bit. GSW Rt. Foream Bit. 5028 Pte Skardon B. 10 do. 29717 "Scarfe E 10 do. SW Rt. Foot Sit. 11757 Cpl Unthank A..... ... 10 do.

MACHINE GUN CORPS & TANK CORPS.

No.H.A.Z

Adm 55 Gen H Boulogne 50th September 1918.

79396 Gnr Eden T...... 1 Wot, Bde MGC........................ GSW L. Cheek, Slt. 66170 Cpl. Farquhar B. 9 M.G. Corps. GSW Rt. Side, Sit. 29 do. SW Hand Slt. 53519 Sgt Lowin C.

NEWFOUNDLAND EXPEDITIONARY FORCE. No.H.A. 29765.

Adm 55 Gen H Boulogne 30th September 1918.

3901 Sgt Bishop M.J...... 1 Newfoundland Sw L. Thigh Sev

entract from War Office List. No. C. 1716. dated 16. 10. 18

#3901, A/Sergt. M. Bishop.

POUNDED BR-9-18.

20.

Regiment, dated Sept. 10th., 1918.

REVERSIONS.

3901 A/Sgt. M. Bishop.

Reverts to rank of Cpl. 31/7/18.

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland Regiment, dated 10th Sept. 1918.

APPOINTMENT.

3901 Cpl. M. Bishep.

Appeinted Acting Sergeant, 19/8/18.

#3901 A/Sgt. Bishop, M. J.

Extract from Daily Orders part 11. Sydy by Liout.Col.

R.A Berners, D.F.O., Commending Snd; En., Royal Fewfoundland Regiment, dated 25/2/18.

#3901 L/Cpl. Bishop.

To be Acting Corporal.

Extract from Nominal Roll Embarked St. John's for OMerseas, per S.S. ("Florizel" Aug, 4.1917,

3901 Pte. M. Bishop.

CR 3401

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt., St. John's, July 10th, 1917.

3901 Pte, M.J. Bishep.

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

M. g. Bishop 3901 P.+P. 10.

Army Form B. 179A. This Form only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), 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 see 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. Offiner Trade or Occupation 7a. If the soldier claims previous service in Army, he should state-(a) Former Regts. or Corps; with Regtl. Nos. (Christian Names) 5. Age last birthday. 6. Posted for duty on in category (or grade)...... 8. If the disability is an injury was it caused (a) in action (b) on field service (c) on duty (d) off duty? (b) Date of Discharge: (c) Cause of Discharge. 9. If a Court of Inquiry was held on an injury state :-(a) When (d) Particulars of Pension or Gratuity (b) Where (if any) (c) Opinion of Court Norz.—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. Norg.—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 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 quantion No. 19). If no disability enter "nil." 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

| 14. State whether the disabilities are (a) artibutable to (b) aggravate | d by OPINION OF THE MEDICAL BOARD. |
|--|--|
| (i.) Service during the present war (ii.) Previous active service. | NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a ma 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. |
| (iii.) Climate in pre-war service | Expressions such as "may," "might," "probably," etc., are to be avoided. |
| (iv.) Ordinary military service before the war | (ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service is the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climati 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. |
| specific condition do you attribute it? | 0 0 1. A / 4 00 21. Give diagnosis and particulars of: |
| In all cases such 15. What is his present condition? In all cases such 15. What is his present condition. In all cases such 15. What is his present condition. In all cases such 15. What is his present condition. In all cases such 15. What is his present condition. In all cases such 15. What is his present condit | (a) Any disability claimed or discovered. (b) The present condition thereof. (b) The present condition thereof. |
| walking | |
| 16. Was an operation performed? If so, when and what was its nature? | 22. State whether the disabilities are :— (a) Attributable to (b) Aggravated by |
| 17. If not, was an operation advised and declined? | (i) Service during the present war |
| 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? | (ii.) Previous active service |
| 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? | (v.) Serious negligence or misconduct on the part of the soldier |
| 20. Do you (a) Discharge as permanently unfit? | 22 (a). If not due to any of these causes, to what specific condition do the Board attribute |
| 20. Do you | it? |
| (a) Discharge as permanently unfit? | 23. Is the disability in a final stationary condition? If |
| (b) Change to United Kingdom? Note—(b) is only applicable to soldiers invalided at Foreign Stations. | not (a) How long is the present degree of disability likely to last? |
| Date Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evic it is due to some other cause. | with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to |

The second second

ALL CHARLES

Nº 3321





1st. NEWFOUNDLAND REGIMENT

| ereby age | | Dollars and | nilar official form to make an Allo Cents, per diem, from | |
|--------------------------------|--|----------------------------|--|------------------|
| o, and for | | | Persons, such payment to be made | Company of the |
| f identit | y of, and product | tion of the relative Ident | tity Certificates by the Person and | d Pers |
| oncerned All | , viz.: otment begins | lugi | 11/19 | |
| Identity Certificate No. | hether Wife, Child, other Helative or Friend | NAME (in/full) | Address (e | AMOUN ach per |
| 81 | mother ! | 2 Siveral / | Brien Birkof | |
| | 0 | - (| | |
| | | | Treempon | |
| | - | | 1/5/3 | - |
| | | | | |
| | | 132 | | |
| | | * | | |
| | | | | |
| | | | | |
| | | | | |
| 100 | - | | Total Allotment, \$ | 6 |

(Sig.) Child Call
Officer Commanding
Company

(Sig.) Malalm Bush

(Rank)

| No. 3901 Ran | Sergh. Name _ | Bish | op. W. | | Pay //// Less A Net Ra | llotrent | Total N.W.V/ | 3 3. |
|-------------------------------------|---------------|--------|--------------------------------|-----------------------------------|----------------------------|-------------------|---------------|--------------------|
| DEBIT | S Date | £ s d. | CREDITS | Period I | Carlo Box Pacific Addition | State of the last | 3 d | |
| Balance Acquittance 1 Hospital Adva | rances | 8 11 4 | Pay & Not Rate Pay & Not Rate | 3-6-18 Not 18 19-6-18 (-12-18) | 16 90 | 9602 | 6 3 £34- | 14-4 |
| P.E.R.O. Pays | | | Bul bush | | | | 26- | 12 - 42 |
| bash. | 10197. | | | | | - | | |
| | | | | | | | | , |
| - 3 | | | | * * = | | | | |
| | | | | • | | | in the second | |

TO, - The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.T.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N. ".O.A. "Prisoners of "ar Fund" in quarterly instalments for the period of one year.

Commencing on lat July 1918.

| Regtl. No. | Rank, | Name | Amount | Signature. |
|---------------|-------|-----------|---------|----------------|
| 3901 | Sugt. | Suchop m. | \$ 5.00 | egs M.J.Biderp |
| | | | | |

Tata- June 26-1/18

Your obedient servant.

ge M. J. Bishop

3rd Codo Se Hap. she Chief Paymasler DAY & RECORD OF Rojal Ald Regt Please pay to Sgt- My Bishop the and I to six pounds) my stedy. Signed Agt. W.g. Bishop approved Samon jung

* Upper Victoria fan. 4. 194 Thanks for information regarding "3901. Lugh. ba. Y. Beshop Porjet henfoundland Nigt. I would be obliged if you would give me his home address or is unable to do that; if you would forward a letter from the to him. Was he wounded a colore de Flance : Justing for will be able to oblige Act of Assert fortherely Any Correspondence core the office will be forwarded Wided west from 29 to Sw Kmigh

Report of the same Rysper Victoria

38 By Carnonsti

Forfarohire

Lear Line 1918

Dec. 28th 1918

Obliged to for sould give the

any cetair of 3921.

Fergy Judesome Beat Lergy Judlesme Beshop 2/1 Newfoundland Eligiment who was supposed to be in hospital either sick or wounded in October who I have been unable to trase spice Trusting you will oblige Jours faithfully mis Towdon

British Red Cross Society.



Kingston-upon-Thames Division.

TEL. ESHER 44.

COMMANDANT :

MRS. LIONEL MARTINEAU.

B&E

Dec 7. 18.

RED CROSS HOSPITAL,

ESHER,

SURREY.

To Pay master

R. N/B Rym

Attaches cheque returned des longe Bishop was transferred out of host on short notice on

| bec 5. | |
|--------------------|--|
| PAY & RECORD OFF | allo CONTINGENT |
| St. Los IN Cobulty | Licret 30 6 N |
| ec'd 8 DEC 1918 | THE STATE OF THE S |
| rck'd g Ans'd | |
| hef. Nos. UUT | TOWN OF THE PARTY |
| Chypu hemind | E SA B |
| No. 11152 | |
| Comd M | |
| P&A. UM. | |

| To: Officer Commanding, | Record Office, Victoria Street, London, S.W. 1, |
|--|---|
| Red Cross Hospital | 5th December 1918 |
| With reference to request of (Name) M. J. Bishop | (Rank) Sgt |
| | it to this Soldier as may |
| presenting at a Bank. | Minerall his |

Chief Paymaster & O. i/c Records.

THIRD LONDON GENERAL HOSPITAL, TELEPHONE: BATTERSEA 8085. GEHER WANDSWORTH, S.W. 18. REGISTRAN 4-NOV 1918 The Paymoster Royal Royal Royal Pay to #390 kg Marshop. the sum of fl. (one bound) and deductifrom acch. O.K fro-on M.R. 4/1/18 Deceptaro. 9506 zod Lorden Hop affront pure. 4-11-18

Ac Chief Pagn own MR 4/2/8 Suren.

No Chief Pagn own MR 4/2/8 Suren.

No Chief Pagn own 3-12-18. do prodon Please pay #3901 Byt he 9 Buth of approved for the first 19861178

19881/128

Red Cross Egher

5th December

Sgt

3901

M. J. Bishop

2:0:0

Chrque no 11152 Dato 5-12-18

Bishop, The

3901

flag souph

February 17,1919

#3901 Sergt. Malcolm Bishop.

Greenspond. Act direct

Deinemans.

Liosure: 1.

Dear Sir:-

Please find enclosed "Discharge Certificate No.1019.

Yours truly.

Capt.
Paymaster & 0.1/c Records

Enc*1 1.

| - | e /14 (b) (5) |
|----|--|
| 1. | No. 390 / Rank . Jeng Name |
| | Was but House at Aug |
| | Intended place of residence. |
| 2. | Occupation Drafer Sheet, Hastonnews |
| | Classification of soldier |
| - | DEMORU IZ |
| 3. | The above named man is discharged in consequence of. DEMOBILIZATION. |
| | FI-MINITE ST. BOOT DISCHARGE DAY |
| | ELGIBLE for POST DISCHARGE PAY |
| 4. | His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in |
| | accordance with Regulations. |
| | Place |
| | Date JAN 21 1919 Comanding Discharge Depot The Royal Newfoundland Regiment |
| | CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE |
| | I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all |
| J. | just demands up to the present date, and hereby release the Discharge Depot, Royal Newtoundland Regiment of all financial responsibility in my councection, subject to my true as facing of their adjustice. |
| | I Tohm |
| | Place and date |
| | 21-1-19 Coricho Copt |
| | 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 far 2/1909 BioBushopo |
| | Signature of soldier |
| | ST. JOHN'S. Saufound to |
| | Signature of wieness |
| - | STATEMENT OF SERVICE |
| | |
| 7. | Enlisted for service |
| | Discharged from service 23-1-19 ble 14 day 6 Service 578 K |
| | 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. |
| | id GEMILAY II |
| | Place ST. JOHN'S. |
| | The Powel Newfoundland Regiment |
| | JAN 23 1919 |

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

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

MEDICAL HISTORY

Surname Dishof

Christian Name

m. 4.

Table I.—GENERAL TABLE.

| Birthplace:—Parish Lynes | SPECIAL I | County RESERVE. | REGUL | AR ARMY. |
|--|-------------------------|--|----------------------|-----------------|
| | on 10 day of | THE STREET STREET | 1000 | |
| Examined | 01 0 | 1. / | on day of | 191 |
| | | 1 | at | |
| Declared Age | 2 6 years | Arterior de la constitución de l | years | days |
| Trade or Occupation | Drag | her. | | |
| Height | 5 feet | inches | feet | inches |
| Weight ,,,, | 13 | 12. | | lbs. |
| Chest Grith when fully expanded | 37 | inches inches | | inches |
| ment (Range of Expansion | 3/ | ALCOHOL: THE RESERVE OF THE PARTY OF THE PAR | | inches |
| Physical Development | | | | * " |
| (Arm | Right | Left | Right | Left |
| Vaccination Marks Number | | | | |
| When Vessinated | | | | |
| | 11. | | 11 11 11 11 11 | |
| Vision | R.EV=6/9 | | R.EV= L.EV= | |
| | 79 | 1111 | Yes | |
| . [| (a) | | (a) | |
| (a) Marks indicating congenital peculi- arities or previous disease | *16 | | N. | |
| ** | | - 1 | | |
| 4 | (b) | 1 | (b) | |
| (b) Slight defects but not sufficient to Cause rejection | (0) | | " | |
| 41.0 | and the grown | 22 mg | | |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | E | |
| "Approved by (Signature) | Nammet? | eterson | 10413 | |
| (Rank) | may | n | | |
| | • | Medical Officer. | | Medical Officer |
| mlisted | at St for | at at | | |
| PAGE TO SERVICE THE PAGE THE | on 10 day of Co | uly 1917 on | n day of | 191 |
| oined on Enlistment | Corps. | Regtl. No. | · Corps, | Regtl. No. |
| med on companion | et ~ Oc | | | |
| | 137L2 | 3901 | | 1 |
| ransferred to | ROYAL NEWPOUN | NDLAND REGIMENT | • | 1 / 2 |
| | Table 11 | AGE TO SEE | | 196.00 |
| exame non-effective by | 198 | at . | 1 | |
| | on day of | 191 on | day of | 191 |
| (Signature) | | | | |
| (Rank) | A THE LOCK OF THE PARTY | Medical Control of the last of the | Arthur State Charles | |

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

| | | Admitted to | | Admitted to Hospital | | Admitted to Hospital | | Admitted to Hospital | | Admitted to Hospital | | Admitted to Hospital | | Admitted to | | Admitted to Hospital | | Admitted to Hospital | | Admitted to | | Admitted to | | Admitted to | | Admitted to Hospital | | Admitted to | | Admitted to Hospital | | Admitted to | | Admitted to Hospital | | Admitted to | | Admitted to | | Admitted to | | Admitted to | | Admitted to Hospital | | Admitted to | | Admitted to | | Admitted to Hospital | | Admitted to Hospital | | Admitted to Hospital | | Admitted to | | Admitted to Hospital | | Dis | Discharged from Hospital | | 1 | Number | Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of | Service of the servic |
|--|-----|-------------|----|-------------------------|-------|-------------------------|-----------------------------------|-------------------------------|--|------------------------------|--|-------------------------|--|-------------|--|-------------------------|--|-------------------------|--|-------------|--|-------------|--|-------------|--|-------------------------|--|-------------|--|-------------------------|--|-------------|--|-------------------------|--|-------------|--|-------------|--|-------------|--|-------------|--|-------------------------|--|-------------|--|-------------|--|-------------------------|--|-------------------------|--|-------------------------|--|-------------|--|-------------------------|--|-----|-----------------------------|--|----------|--------|--|--|
| Name of Hospital. | 200 | MADELLE | | 700000 | Month | | 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 syphills, 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3R9 I DADON GENERAL HOSPI WANDSWORTH. | TÀL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Ji | 10 | 18 | 7 | 12 | 18 | asw. Ryhr Shijh (Sungle fleth) | 64. | Woudesta France 29. 9. 18. Though & high wornsk thick I tor. on ade Wous healer Galefach propen | Storance, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |) | | | | | 13 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | Ŀ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | · | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | [P.T.O. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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

| gio | cal Appliances; Particulars of Dental Treatment, &c. | |
|----------|--|---|
| Date | Brief Details, and Signature | detail to |
| | | |
| 16-7-17 | 1.A.B. 20 | XXXX |
| 13-7-17. | 4 200 | |
| 30-7-17 | 3. 20 | |
| 217-8-17 | Vace. Lo | |
| Y | | |
| | It is hereby o | ertified that this soldier |
| | has been befor | e the Standing Medical |
| | Board and I | ics been classified as |
| | 6 ford | ischarge on Demobilisa- |
| | tion. Medical | category |
| | 111: 1.19 Date of SM.6. | Assistant Adjutant Discharge Depti-Newloundland |
| | Date of Smith | Discharge Depot-Newloundland |
| | 1 | |
| | Pen a series and a series are a series and a | 161 7 599 |
| | 1 1 | |
| | | |
| - T | | |
| | | |
| | | |

TABLE IV.—SERVICE TABLE.

| Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation | Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation |
|----------------------|--------------------------------------|---|----------------------|--------------------------------------|---|
| | | | | 10. | - 10 |
| | į. | | 2 | | |
| 444 | 30° p | | | 4 | 3813 |
| Te Te | | | | | |
| | | | | | |
| | | | | 01 5 | |
| | | | | | |
| | | 1 7 | 140 T. 140 T. | | |
| | | | | | |
| | | | | | |
| | | mu a | | 4.6 | |
| | | | | | |

The Royal Newfoundland Regiment

| DEMOBILIZATION OF |
|--|
| to No. 3407 Renk Dant Name Bull my |
| Date of Enlistment 10. 7 11 Address Incensport District de State |
| Jate of Enlistment. 10 |
| Occupation |
| Recommendation S.M.B. Farmfly weefile. Disability Rating Tel. |
| Passed to Demobilization Officer with following documents:- |
| |
| F. P 36 D.F. 1 B 121 N.F. Med D.F. 1 |
| 178 W 3494 B 122 Board 1st " 2 " |
| 178a |
| 179 do 3rd |
| 179a |
| B 179b B 103 ME 2 " 6 " 6 |
| B 120 |
| PARTICULARS FOR DEMOBILITATION |
| . Civil Re-Establishment. |
| I amin a position to resume civilian occupation. |
| 1 |
| MB Non |
| 11 99500 |
| Particulars passed to Vocational Officer for information and action. |
| |
| Date |
| . Clothing. |
| Certified that Clothing Regulations have been complied with:— |
| commed that croming regulations have been complete with. |
| // / |
| (a) Clothing Allowance payable. |
| // / |

| 3. Transportation and Release Certificate. | |
|--|----------|
| 3. Transportation and Release Certificate. The above named has been provided with Travelling Warrant No | home |
| at | |
| D'AT A | 1 |
| Date 21-1-19 WOLTHSTANDARD CAN WHO COP | · |
| Demobilization Officer | V 30 |
| 4. Pay and Allowances. | 5 |
| The herein named soldier's accounts have been correctly balanged and all matters in conne | ection |
| therewith settled. He has received pay and allowances to | Table 10 |
| therewith settled. He has received pay and allowances to | 1 1 9 |
| Date Date | |
| bacreas Pay a/c to be asynstea - Depot Paymaster. | |
| Discharge approved for. | |
| Forwarded with following documents to O.C Discharge Depot. | |
| Forwarded with following documents to O.C Discharge Depot. | _ |
| N.F. P 36 B 268 B 121 N.F. Med D.F. 1 | 16 |
| E 178 W 3494 B 122 Board 1st " 2 | 1.0 |
| B 178a D 400A B 1915 do 2nd " 3 " | |
| B 179 D 400B Form L do 3rd 4 4 | |
| B 179a D 400C Form K do 4th " 5 " | |
| B 179b B 103 ME 2 " 6 " 6 | |
| B 179c B 120 M 93 | |
| 22 1.19 CADUKO Cope | / |
| Date | |
| Demobilization Officer. | _ |
| APPROVED. | |
| Documents as above forwarded to:- | |
| Officer i c Records. | |
| Board of Pension Commissioners. | |
| with following additional documents. | |
| ELIGIBLE for 1031 DISCHARUE PAY | and |
| JAN 23 1919 — | 57,013 |
| Date | • |
| O, C. Discharge Depot. | Moyer |
| Received the above noted documents from O. C. Discharge Depot. | |
| policies for the state of the s | 4 |
| | |
| Date | 672. |

Civil Ke-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:

| follows: | |
|--|--------------------|
| To take up Joiner Oc | entation |
| Book | Ceeper (Montreel) |
| • . | |
| | Belignature of Man |
| CBDUKS Caph | eg. No. |
| Signature of the Vocational Officer or his Representative. | |
| Date 21_1 _ 19 _ 191_ | |

This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), 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. (I), 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. R. W. F.L. D. 7. Former Trade or Occupation 7a. If the soldier claims previous service in Army, he should state-4. Name BISHOP malcolm. (a) Former Regts. or Corps; with Regtl. Nos. 6. Posted for duty on at 8. If the disability is an injury was it caused (a) in action (b) on field service (d) off duty? (c) on duty (b) Date of Discharge; (c) Cause of Discharge. 9. If a Court of Inquiry was held on an injury state:-(a) When (d) Particulars of Pension or Gratuity (b) Where (if any) (c) Opinion of Court Note.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case. Statement of Case. Note.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal 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." . D. W. Right thigh 11. Date of origin of disability. 13. Give concisely the essential facts of the history of Aruch by explosing bullet Austern the disability in so far as it is recorded in the Medical History Short Land the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other throughout relevant official documents. was taken 33 australian C. C. Ssameda later, was admitted to grd. L. 4. 4-10

| | 14. | State | whether the dis | abilities are | | | (a) attributable | to | (b) aggravat | ed by |
|--|-----|-----------------------------|--|---|---|-----------|---|------------|--------------------|--|
| | 1 | (i.) | Service during | the present war | | | 410 | | | |
| | | | Previous active | | | 200 | ello | | STRUCTURE | |
| | | | Climate in pre- | | | | Qa | | | |
| | | - 1 | Ordinary milita | | re the war | | υQ. | | | |
| | | | Serious neglige man's part. | | | le } | · · · · · · · · · · · · · · · · · · · | | | |
| | 14 | (a). If | not due to a specific condi | ny of these cation do you att | auses, to wribute it? | hat | ala | | | |
| In all cases such as facial injur- les, eye, car, mose and throat, disabilities, &c., a specialist's re- port is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated. | 15. | What | is his present co. (A note should be when it is likely gress of the dis | e made as to We | ence of the 1 | pro- | mall sea ught this Jean on f long no d latel dams of | h . r | ternal à por paris | A CONTRACTOR OF THE PARTY OF TH |
| | 16. | Was ar | n operation perfo | ormed? If so, v | when and w | hat | eRa | | 10 M 1 M | |
| | 17. | If not, | was an operation | on advised and | declined? | | | | | |
| | 18. | dire serv | e case of loss or h the result o ctly attributable ice under such it was unobtains | wounds, inju- to active servi conditions that | ry or dise | ase | eRa | | | |
| | 19. | not Stat have war, | articulars of any in themselves a te whether or no e been aggravate , and if so, to wh ditions? | sufficient to cau of they are attr d by service dur | ise invalidi ibutable to ing the pres | or ent | 20 | | | |
| | | | | | - | | T | | - | |
| | 4 | 100 | 10/1 | 1 - | | | | tu | men. | |
| | 20. | Do you | | | | | The res | Tall Sale | | |
| 1 300 | | 0.000,344,6 |) Discharge as p | ermanently und | | | 19. | - 11 | 1 | |
| | | |) Change to Uni | | | | | 1 | au. | The same of the sa |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | Note- | -(b) is only app Foreign Stations | licable to soldier | rs invalided | at. | We ret | -0 | A. | |
| | | | The state of the s | | | | an also also | A 2011 | ar verala re- | |
| | Sta | tion | | | | | Medical Off | ficer in c | harge of case. | |
| | Dat | e | | S. 1371.6174 | | | | | | |
| | | • Los | s of teeth on or in some other cause. | mediately after a | ctive service, | shou | ld be attributed the | ereto, unl | cas there is evi | dence that |

NATION OF THE PARTY AND THE PA

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 :
 - ve diagnosis and particulars of :
 (a) Any disability claimed or discovered. If S. W. height ships
 - (b) The present condition thereof.

Vide Sect 15.

(a) How long is the present degree of dis-

(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.

ability likely to last?

| 62 | | | |
|-----------|---|---------------------|---|
| 22. State | whether the disabilities are :- | (a) Attributable to | (b) Aggravated by |
| (i) | Service during the present war | 99 | |
| (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 | ho | |
| | | | • |
| | | | THE COLUMN TWO IS NOT |
| 22 (a). I | f not due to any of these causes, to what | | |
| .,,,,, | specific condition do the Board attribute it? | 95.W. | |
| 23. Is th | e disability'in a final stationary condition? If | | |
| | not | | 7.4 |

| | 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). | | |
|---|--------|--------|--|-------------|--|
| | | | 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. | | n operation was advised and declined, was the fusal unreasonable? | | |
| If the Military Member is in disagreement with the Civil- ian Members, he is to state his opinion in the space provided. | | | Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only? OR In what other grade do the Board place him? | | Opinion of Mili- tary Member in case of dis- agreement. |
| , | | | Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)? | 19 | |
| 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? | | |
| | 28. | | treatment being recommended on Army Form 179c? | 4 | |
| | 29. | Do | es the soldier require :— | | |
| | | | attendant for his journey home? | | 144 |
| | 1.5 | | ansport from railway station to his home? | | |
| | 10.7 | Th | e constant attendance of another person in his own ome? | | |
| | | | Signatures | | President or |
| | | | / / and | | Chairman. |
| | Sto | tion | Volyus , Rendan | Var | |
| | - | cion | k uster 14000 | PANE. | Members. |
| | Da | te . | Jews 119 July 10 Wayso | m. Ju | Jes |
| | | Di | scharge Approved under Pasa. 392 (xvi) King's Regulations. | their. | Major Only applicable |
| | | te . | JAN 15 1919 C Officer in charge, Centr | al Hospi | tal. in cases of Patients in Hospitals. |
| 9 | 4 1000 | Tra | scharge Approved under Para. 392 () King's Regulations. nsfer Approved No. 1 () King's Regulations. of the Reserve. | | Č. |
| | lins | sert s | sub-para, King's Regulations under which discharge is approved or insert W. or V | W.(T), P. o | or P.(T)). |
| | | 34 | ationO.C. i | Discharge | Centre. |



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 Regiment from which discharged Royal Newfoundland Regimental number Intended address Height on discharge Color of hair on discharge Complexion Color of eyes Descriptive Marks Figure on discharge Christian name of Father Christian name of Mother Wife's maiden name in full Date and place of marriage Christian names of children Place and date of soldier's birth Nature and locality of civil employment required statement are, to the best of my knowledge, correct

I declare that I am the soldier referred to above and that all the particulars contained in the above

(Soldier's signature in full) Q

Station

Date 14, 1.19

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

ORDERLY ROOM Medical Officer ic Hospital. Unit, or Command Depot. St. John's, Newic

Date

Station

LAST BAY CRRTIFICATE OF BET PREFERENCE PIF

To be rendered for all ranks on discharge, transfer to other United for only termine to New Sandland in law or tangent and United with C.L./19, 26/5/17. with G.L./19, 25/5/17. Regtl No. 3901 Rank Sgt. Name Bishop M. Regtl NoUnit Reffeld. Regt. Nambo was repatriated on 12//12/18 Authority Draft 79 Authority T to Newfoundland Causeon STATEMENT OF ACCOUNT STATISTENT OF ACCOUNT PARTICUEARS PARTICULARS £% BC Balance: Cros fromow Balance Dr. from 7/12/18 Radance Alletment 4 days 8 60 Pay114 tidays @ # days @ 1 35 Payllow 2 40 10 Cesh Payments: Field Addresnt4: days @ \$ 15 Field A V.7095 Other Allces days @ \$ Other Other Credits: Other Other webits national national and district and is 17:50 1 12:50 a Popula C. Total Debits Total Credits 7 Balance Balance due by Paymaster Balance: dubit of Paymaster THE SAME STATE AND have carefully examined this Statement of Account and find die to be accorrect; extract finant the Raysbookson find it

place up/Checked in accordance with information received in the Payer Respiratoristics with information received in the Payer Respiratoristics with information testing in the payer respirator to the payer respiratoristics with information received in the payer respiratoristics with the payer r and is therefore subject to amendment if and as may be found magazaary ubject to amendment if and as may be found, magaza

Fay & Record Office, London,

Pay & Record Office, London Paymaster 0, 1/c floords;

Mucisell Ma

February 28,1919

Sergt. M. J. Bishop.

Green ap ond.

Dear Sir:-

Your letter of February 4th wass received after the regulations governing Post Discharge Pay were superseded by those concerning har Service Granity, and reply has been delayed on account of the time required to make the necessary calculations of the war Service Gratuity.

Payments of this Gratuity will commence on March 1st. 1919, and will be made in monthly installments until such time as the amount due has been paid.

The amount due is calculated on the basis of a soldier's services, and any amount paid as bonus at the time of discharge, and Post Discharge Pay if already paid, will be deducted from the total amount of the Gratuity.

It is necessary before the payment is made, that the enclosed Statutory Declaration be completed and returned to me.

As so on as it is received the first payment on account of the War Service Gratuity will be forwarded.

Yours truly,

Captain
Oaymaster & Ufficer 1/c Records

Docton 10 The Paymoster Rogal Med Ref 3967 Dear Sir: I think when I left of Johns I left my allowatered address with the Outen in the dischafe office. I am not slaying in Mortreal so if you well kindly forward anything whatever dealing with my account to Free repord it will be attended to. Kindly do so and office Jours Cespectfully M. J. Brohop Seigh

April 22,1919

Mrs.Susannah Bishop,

Greenspond.

Dear Madam:I enclose cheque for Seventy dollars (\$70.00).

being amount of first payment due Malcolm J.Bishop, on account

of the "War Service Gratuity," payable to you his request.

Yours truly

Paymester & 0.1'c maserds

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.

dated January 28th. 1919. A complete reply must be given to every question in this Declaration. There must be no blanks and no dashed, 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, MAY & RECORD OFFICE, ST. WOHN'S. Christian nome Malcolm John. 2. Surname. Bushop..... 4. Regtl . Ho. . . . 3.901 5. Address in full to which future payments of gratuity are to fax be forwarded. Mrs. Susannah Bushop. seemspood, Nfed 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge...... Wa Susannal Beshop 8. Relationship of such dependents Mo other. 9. Address in full of such dependent Licenspord Son anosta Bay 10. Is said dependent, now, or was said dependent at my time in receipt of Separation Allowance on account of mother soldier?........ 11. Were you on active service only in Nfld. If so give dates, and particulers of such service not applicable..... 12. Give total length of time which you served on active service, whether in Nfidor Overseas. Che. P. Cos. from ... Chy .. 19.17... to blecander 1918 ... (inclusion).....

| | 13. Have you had more than one enlistment? If so, give particulars of |
|-------|---|
| 17790 | discharge and re-emlistments, and under what regimental numbers |
| | most applicable |
| | |
| 11 | 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 payment received |
| | |
| | 15. Have you been issued with a War Service Bedge ? |
| | 16. Have you, during the present war, served in the Imperial Forces. The. |
| | 17. Are you entitled to receive, or have you received any Cratuity in |
| | the nature of Post Discharge Pay from the Imperial Forces? If so, |
| | state amount received, or to which you are entitled |
| | not applicable |
| | 18. Did you revert Overseas to a rank lower than the substantive rank |
| | held by you on your arrival in England? |
| | (b). If so, was such reversion in consequence of misconduct or in- |
| | efficiency? not applie alle |
| | 19. Are you now serving in the Regt.? NO If not give: - (a) Date of discharge |
| | Urtit for frather 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 |
| 4 | At . Spice. Balguen J. rdy 1918 to Acpt 29 1/1910 |
| 1 | ······································ |
| 2 | 21.(a) Are you receiving treatment from the Civil Re-Establishment Com. |
| | (b). If \$0/, are you in receipt of full pay and allowences from that |
| | Somittee Net uppluable |
| | and I make this solemn declaration, conscientionally believing it to be the and knowing that it is of the same force and effect as if made near eath. |

| Signature Place of Declared This | Luguo Signa Suprè | dcy of long SR ture of Barrens Ocurt. Eti | iprif 19/9 | 100 m | 2 |
|---|--|---|--|-------------------|---|
| Ards an | A SECTION OF THE PARTY OF THE P | mary | · Lus | | |
| mycom | milion | , aprico | 1423-1923 | · | |
| PC | ST DISCHAR | GE PAY. : | | | |
| Date paid | | Pråd Dependent | Ver Scrvice Gratuity | Not enount due | |
| • | | | | | |
| ••••• | | • • • • • • • • • • • • | | • | |
| | ertified C | orrect. | •••••••••••••••••••••••••••••••••••••• | yraster. | |

Thereit feld 1918 2202 Sureply tryour letter of the 30 to July Syon enclose herewith aswers statement you me Susamuch & Fishoh in reference tother son Trie Ofthe Royal air Free of This women is auxious Canali. trast arifly toher application Joursten July Stipularing Mystrato

Northern District Renfoundland Greenifrond I Susanuch Bishoh of Freue pour aforesaid widow make outh and say asfordons: 1 My son brie 4. Bishop 11554 heabeen antember of the Royal au force of Canada for about fifteen months and us more Share been receiving an alloturent of \$15 per mouth. 3. Before this time I received a few dollars her month Sometimes fix apelan and aforther mouth a little more which was sent mely my soul Swansia Bishop Swow at Green fruit the 8th day Cugust ad 1918 befrience 3 Stipudering Plagetate

No. 3321



| 1, | galco | lm) B | ship, Regl. No. | 39 |
|--------------------------------|--|------------------------------|--|----------------------|
| hereby a | ngree, until further | notification by me, and in | similar official form to make an A | 30 00 000 |
| of iden concern | ALCOHOL: N | the undermentioned Person an | Persons, such payment to be mentity Certificates by the Person | ade on pro |
| Identity Certificate No. | Whether Wife, Child, other kelative or riend | NAME (in full) | ADDRESS | AMOUNT (each pers |
| 81 | mother | n's Sisantal | Darius Birkop | |
| | 6 | • | | |
| | | | Treemson | |
| | | | 133 | |
| | | | | 11/18 |
| | | - | | |
| | · · · · | | LUT | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total Allotment, \$ | 6 |

(Rank)

77 Tower OF Jis-1-19 Department of Militia, Dear Dis: I feel it my duty to water you concerning a matter about which I would like information. When I goined the Regt in July 1917. I explained to the authorities that my father was unable to work through we health and expressed the wish that the family at home he assisted by the government. I had only arrived in s'estland in august when I received news of my fathers death While father was aline he earned a little during his years If Ill health and we assisted him. My bother who was working his way to ester college left work are joined the 1850. He made a small allowance to mother and that with mine, considering the high cost of living tas not been enough to support them Consequently on my coming home last morth from oversion I find that the state of affairs en inded not nevy good after my stay brenes, and think that my misthe should have received assistance

Now six I know a friend of our in Green pond a thro Bury who has one son with the Dark Corps at present and one sal Davis with ours" her husband is aline but I don't think able to earn much towards a living . I understand that all through of this is not so I have been wrongly informed. It is only a statement I heard While at home. The may get it from the Canadian Got. My case is Dirmelas, two of wo in the army and muther and two young orders at home. I do not see why the cases differ as regards the government allowance. I am not grundling but I understand it to be a lawful allowance and not a more charily of it were the latter I would not trouble. All I ask Der is a but of information in reply as to if my mother should the have received an allowance of not why ? and if it is payable? I sincerely wish for would look into the matter es soon as possible as I would like a wording repl, before I leave town. Hoping you will give my case your kindest attention I am dear Dis yours Rospectfully P.S. Kirdest address reply to above address. M. J. Brokesp Date

Hagistrair's Office Leepout dec 22: 1917 M. Howley and Sept & Milities Searling Sureply trypus letter of the 13th with Sheg trong that her Susanush Bishop Claims she received \$7 from her Son Flying of a enember of the Canadier further the dres out mores and amount in the way of assigned By or Separation wellow ance from ans sent links I Williams

Pinn amfoundad adling.

Seperation Allowence Drench.

Bottoe.

detell, and complete reply must be given to each question.

is to be signed before a Berrister of the Jureme Court, Stipendiary Legistrate, Botary Lubis or Justice of the Peace, and returned to:-

THE PARAMETER.

Joparation Allowance Branch. Jt. John's, 3518.

| | | | | 56.00m s.a. | P. Francisco | |
|----|--|--|---|-------------|---|---|
| | derlu Bis | | Privale | J.Co | | 3901 |
| 2. | Age of poldier | 26 | | /orrio | d or Single. | Suigle |
| Su | aunah Bioh | | 60 | Widow | Greens | ederoce. |
| | Husband | | in aug | whigh | horo ampi | lo;md. |
| | In gour imple of | ic not ru | | | 1-16 - 16 - 16 - 16 - 16 - 16 - 16 - 16 | Miller and an open side of the Principle Assets |
| | as your hasomed and totall industry of a lagrange of the continuous of the term of the time of tim | reals tod real redic leath thic t date now tested end thought one | oteto l'estiffe descript and has so for he to ntimus). | on a | | and an ord make of plants to the |
| • | or donth of grad | le . otate lesbond. | dito elli o | ang 20 | it igit | n/ |
| | Heve you ame los above Lantioned | lagin sîn Imsbasî | uo Gosth 2 | a | o | |
| | Since of your of | | rees in | | 3. | Ned or |
| 4 | Soffice Hoche | ALC: N | uspord | 34 Box | A CONTRACT OF THE PARTY OF THE | named |
| | Eric Bishop | K 7 | , , , | 30 Feel | | merica |
| | alice Bish | 1 4 | eneper | of Court | hgil | Thingle |

| 10. | state amount carned by (2) your but | abound (a) regetatos frankquider |
|------|--|---|
| 11. | State enount and Source of any other income. | No privati means |
| 12. | belonging to you and your husband? | Fishermen's directing and small quantity plant |
| 13. | State value of personal property belonging to you and your imedead. | |
| 24. | If husband is fload state value of load and oreonal reporty left by him?. | Believe 3 and 4 huntrel dellars Muchand dies interes |
| 25. | hatual amount contributed by Sancialor during the year prior to onlie bont. | dier her more or law Suffayled the more and Eigling for parties means |
| 10. | au werse much | fre & leu dellars per mond |
| 17. | id this expent include porment of | e shn/s |
| 10. | Shed Factory Monthest | Cant say |
| 3.0. | State amount of his wagon por wool | · Cant ay |
| £0. | Lest Bull Employment | tet Shood Frehand |
| 21. | State amount of support conthir. | +18. 60 Spare min |
| 58. | tate securit of Alletsent receive | a \$18. |
| RS. | rom what date did, you receive | nato Stat land |
| 84. | | weith from others |
| | are enjos those children in | |
| 86. | Ti not receiving suppor . From ot ebildron state course. Explain Fa | married 3000 have Enough to book |
| 27. | the gloss are you residing st pre- | my own or had and house |
| 66. | the state of the s | I the first Claim |
| 20. | are you already in receipt of detailed allowance from any course? | is only as plated above |

| 30. | Are you in receipt of one payment from any Patriotic Fund? If oo, how much? |
|----------------------|--|
| 81. | on employee of the Newfoundland Severment? |
| 52. | In what especity and in what place? |
| 50. | In he in receipt of a salary as each while serving in the lot. Mfld. Reg t? If so, how man? |
| | |
| | |
| onel | I herewith make this colors declaration conscients— y believing the case to be true and insuring it to be of the case o and offer as if made under seth and in virtue of the systema Act. Study of amplicant. Huannu Bandy |
| Jim. | stary of Amiliant Suganna (Suhoji |
| They are | |
| 120 | o of localders breuspone Med |
| | cred ind consecrated before a e at dreems four |
| Mool | ared ind conscribed before a e at |
| this | 10 day of Oct |
| | |
| Jours' | ture of Astricter of the Supreme) July 1000 1000 gistrate Sold of the Sense State of the |
| | · Vooroff |
| | And an extra factor of the first of the contract of the contra |
| 2" | This application must be signed by two responsible |
| your thoi corr | led one of them must be a florgymm, the other a representative of local atrictic fund demittee, certifying that to the best of a localedge after cereful investigation, the above statements are set, and the bove soldier, first centioned, is the cole support of applicant. The Clubter of diergymen |
| dim | store at Anther of Entrionin S. 1 Commerce |
| | over the Comment of son in Hyny Coops |
| M | See should the allo twent |
| | or state of |

Rev. T. C. Elliott. Che Methodist Parsonage,

Greenspond, Mfld., Oct 241 The How JR Bennett, Muist of Nilita 8 Johns, durch Weall your attention to Mrs Susannal Dishop of this place, who is now entitled by a Separation allowance Mis Bishop is the widow of the late Dorms Bishop, and has two sons in the war. Malcolm is with the Wed Reg in Footband Eric is with the Canadian awation Corp, This 19. shop has only one other son and he is married Mrs Bishop has two daughters me lbys old the other 18 yra old, I shall be glad of you will see that Mrs Bishop receives her Separation Allowance Jours Surcerly John & Elliot

November, 8th., 1917.

Rev. J.C. Elliot. Gesenspond.

Dear Sir:-

With reference to your letter of October, 24th., I enclose form of Application for Separation Allowance to be completed by Mrs. Bishop.

You will note that it is necessary to have this completed before a Magistrate or Justice of the Peace.

Kindly return at your earliest convenience, and oblige,

Yours faithfully.

LAST PAY CERTIFICATE OFFICE COPYPE SETTE

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

| Ne Froundland on 12/1 | . 10 | | ST | ATEM | ENT | OF ACCOUNT |
|--|------|----|-------------|------|-----|--|
| PARTICULARS Balance Dr. from 7/12/18 Allotment days 60 | \$ | 1 | £ | 13 | 111 | Balance Crue from the second s |
| Cash Payments: 60 | 2 | 40 | | 9 | 10 | Paylid days @ \$ days @ 1 55 . 40. |
| V.7095 | | | - | 3 | .6 | 00 1 4 8 |
| | | | | | | Other Allces days @ \$ |
| Other Debits | | | | | | Other Credits: |
| | | | of the same | | | Copy Lint Mof M 1355/5 Fotal Credits |
| | | | | | | mosm isrold |
| | | | dant | | | 31-1-19 |
| Total Debits | | | 1 | 7 | . 3 | Fotal Credits Balance due to Paymaster |
| Balance due by Paymaster | | | | | | paramee des to raymaster |

Fay & Record Office, London, 8 . 1 . 191 9

chief Paymaster & O. i/c Roccids.

Army Form B. 103. Regimental Number ... 9.9.1 Casualty Form-Active Service. Regiment or Corps. Religion.. Age on Enlistment ... 26 A.... Terms of Service (a). Demander Service reckons from (a). 1.9 Qualification (b)..... Extended Re-engaged or Corps Trade and rate..... Occupation..Signature of Officer. Report Record of promotions, reductions, transfers, casualties, Remarks &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. Taken from Army Form B. 213, Army Form A. 36, or other official Date of Place of Casualty Casualty Date From whom received documents. Embarked Disembarked Johned Batteffee JUL Echelon., G, H,

Army Form B, 121 Squadron, Troop, Battery and Company Conduct Sheet. Regiment of 1st Newfoundland Regimental Number and Name Enlistment Good Conduct Badges, Service pay or proficiency pay appointed house Corporal. 25.2-18. Confirmed Cosp to be acting Eight 27 4-18 Age on 26 years - months Draffer. Place and Date of Enlistment with Reserve 365 years. Names of REMARKS Rank OFFENCE Punishment awarded By whom awarded Witnesses

To be carried over

Forms B 121.

Joined

Joined

Joined

Place

Date

Date

Date

Date of

Offence

| | CAN THE RESERVE OF THE PARTY OF | |
|---|--|--|
| The 42 mm | dring tring | iland Regiment |
| WIIL KAUPAL | Trummann | many archiment |
| TO THE RESERVE OF THE PARTY OF | A CONTRACTOR OF THE PARTY OF TH | THE PROPERTY OF STREET, MANUAL PROPERTY OF THE |

emobilisation Form 1

| | | DEMOBILI | ZATION OF | , | | P | . Gy7: CL |
|--|---|--|--|--|-------------------------------|---------|---------------|
| Reg. No. 39.07. | Rank . Ager | t | Name 13 | whoh | my | | |
| | nt 10 7 10 | | | | District | dwlgt | 4 |
| The state of the s | Donker | | erd with the second | 1 | Medical Cate | egory.E | |
| | S.M.B. Pernt. | | | | NO RECORD ASSESSMENT OF COMPA | | |
| | ilization Officer with | 11- 1 | | | | | - 741 |
| Passed to Demob | mization Onicer wie | ir following docum | ciita. | | , | | _ |
| | В 268 | Control of the Contro | | Control of the contro | and the second second | | |
| The Robert Street Control of the Con | W 3494 | Particular and Committee and C | The state of the s | | 2 | 3 | |
| | D 400A | Company of the second | The second secon | | 4 | | |
| The second secon | D 400C | 1 | | | 5 | | |
| | В 103 | | | 1 11 | 6 | | |
| | В 120 | | | | | | |
| | 1 | | 0 | 11 | 411 | 0 | |
| Date. 20 1. | 9 | | | · Will | ischarge De | Caph | , |
| Date. A.Y | | | | for | ischarge De | pot. / | |
| | PA | RTICULARS FO | R DEMOBIL | ZATION | | | |
| 1. Civil Re-Estab | lishment | 15.13 | | | | | |
| | iin a | position to resum | e civilian occu | pation. | | | 3 |
| | | 9. | 1 | | | | 1/4 |
| | | 11-9 | Bestof | 6. | | | |
| | | // | / | | | × | |
| Particula | rs passed to Vocat | ional Officer for i | nformation and | l action. | | | 1 |
| Date | INT JUI | MINGH | | Table 1 | | | |
| Date | . Name | | | | | | |
| 2. Clothing. | الله الماسيا | 71 - | | | | | |
| Certific | ed that Clothing Re | gulations have bee | n complied wit | h:- | | | |
| | (a) Clothing Allow | ance payable. | 00 | D. f | | ا | 1 |
| | (b) Cleaning Dupp | Fed | 18/21 | W. | me | /-w | / |
| | | * () | / | (| | | |
| Date | AND A STREET, | | | Oile | De elethine | | |

| 3. Transportation and Release Certificate. |
|--|
| The above named has been provided with Travelling Warrant No. 164 to his home |
| at |
| at |
| 21 1-10 PNOUS 11 |
| Date 21-1-19 CANUTO Caff |
| Demobilization Officer |
| |
| 4. Pay and Allowances. |
| The herein named soldier's accounts have been correctly balanced and all matters in connection |
| thousanish could be be seeind as and all be 6-7-19 |
| therewith settled. He has received pay and allowances to |
| Date 21-1-19- |
| Angelia Pari al Al Depot Paymaster. |
| orusens Pay of the asjusted - Depot Paymaster. |
| Discharge approved for 23.1.19 |
| |
| Forwarded with following documents to O.C Discharge Depot. |
| |
| N.F. P 36 B 268 B 121 N.F. Med D.F. 1 |
| Б 178 W 3494 В 122 Board 1st " 2 Ум |
| B 178a |
| B 178a D 400A B 1915 do 2nd " 3 2 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 " 6 |
| B 179c B 120 M 93 |
| |
| Date 22.1.19 CADUKO Coff. |
| Demobilization Officer. |
| Ox |
| APPROVED. WY |
| Documents as above forwarded to:— |
| Officer ilc Records. |
| Board of Pension Commissioners. |
| with following additional documents. |
| |
| ELIGIBLE for POST DISCHARGE PAY |
| FIGURE 101 1001 DIGOLUMAL 1111 |
| |
| JAN 23 1919 Hair Ger. |
| Date |
| |
| Received the above noted documents from O. C. Discharge Depot. |
| Draweld |
| |
| many S/19 South Rend |
| Date January |

Reg. No. 3901 Rank Sught Name Oislap. L.
Attested Address Furns part Allottee G. Leave por 21-14 18 60 6779 15-1-19 Ree Dis Permanently unfit 20-149 PASSED TO LEMOBILIZATION OFFICE 23 - 1 - 9 DISCHARGE APPROVED ON DEMOBILISATION.