## FIRST NEWFOUNDLAND RECIMENT.

## ATTESTATION OF

$\square$ Name $\qquad$ Corps

1. What is your name?

2. What is your full Address?

3. Are you a British Subject?
4. What is your Age ? $\qquad$
5. 
6. What is your Trade or Calling? $\qquad$
7. Are you Married ?\%...

8. Have you ever served in any Branch of His Majesty's $\}$ Forces, naval or military, if so, ${ }^{-6}$ which?
9. Are you willing to be vaccinated or re-vaccinated ?
10. Are you willing to be enlisted for General Service ?

## Questions to be put to the Recruit before Enlistment.

10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?........................................ $\}$

11. ................. $\left\{\begin{array}{l}\text { Name } \\ \text { Corps }\end{array}\right.$
12. Are you willing to serve upon the conditions as embodied in the roll of service 11.
 to be signed by you if you are accepted?.

1

do solemnly declare that the above answers
made by me to the above questions are true, and that I am willing to fulfil the engagemehts made.


OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
$\mathrm{I}_{\text {r }}$
,
 bear true allegiance to His Majesty King feorge 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 bave 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 $\qquad$ on this $\qquad$ day of $\qquad$ 191
Signature of the Altesting Offeer.

## $\dagger$ Certuficate 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 : $\qquad$
If enlisted by special authority, such will be attached to the original attestation.
Date
191

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

- If so, the 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)


## DESCRIPTIVE REPORT ON ENLISTMENT.

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

Name Aephorwons \$pres
Apparent age 18 years months.

Height 5 feet $3 / 4$ inches. Chest measurement $\left\{\begin{array}{l}\text { Girth when fully expanded } \\ \text { Range of expansion }\end{array} \quad 48 \quad\right.$ inches. $\quad$ inches. $\quad$.

Distinctive marks $\qquad$

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin $\qquad$ Benson tomes $\qquad$ Bay Y' anat $^{\prime} 7$. $B$. Father

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

| (a) | (b) | (c) | (d) |
| :--- | :--- | :--- | :--- |

Particulars as to Children.

| Christian Names. |  | Date and Place of Birth. |
| :--- | :--- | :--- |
|  |  |  |

## STATEMENT OF. THE SERVICES.


$\qquad$

2


I heroby enilat for sesvice ring at heme ar abrosd in the
Cing's Forees undibethe following conditiens.

For the duration of the prosent war, or until my Aischarge.
subjeot to the Arry Aet, the King's Regulations, and to arich oxtinances as may apply or may be made to apply to the Byitith Regular Arwo.
subjeet to the Fepitoundiand Volumteor Aoto
5 ecerge ti mapter $2 \%_{0}$


PERSONAL EFFFEOTS.
$\qquad$

- came Myyacs a.
C.O. 1941



Trext of kim: Fatheri:- Bontri Hyines. Pay L'Angoset Forlione $73 \mathrm{ay} ~ \$ 17$.

No. 581
Received from



# C.R. 1941 

June 2Cthe 1529.

Benton Hynes, $\mathrm{Hg} \mathrm{H}_{0}$ 。
Hay It $^{6}$ axgonts
Pa.

Dear sir: -
Itan Poxwarding on to you hy Registersed mail one parosi of efloots whiah belongs to your son, 10. 1941 Private 4e Hynease of the RHyal Hewiounalana Hogiment.

I am enoloaing herevith reoeipt, will you kindly aign aame and retusn to this office at your earliest canvenience.

Yours ainoerely.

Lieut.
Qacualty Ogitser.

Extract from Casualties received from Pay and Record office London dated 28 th. August 1917.

## 2537 Rte. A. Charley.

 1941 Pto. A. Hines.The above Lien have been discharged fan $n$ the Holborn Military Hospital and granted furlough from $13 / 8 / 17$ to $28 / 8 / 17$ and are considered eft for Ho. 1. Duty.

Signed Registrar. Holborn Military Hospital.,

## 1941


 TO BNGLAND.
\#1941 A. Hynes.

Bxtract from War Office List No. H.A. 30417

ADMITRED 83 큐N. H. BOULOGNE 16 Oct. 1918.
$\$ 1941$ Pte. A. Hynes
G. N. W. SIDE R. SRVRRR .

Extract of Daily Orders Part II Royal Newfoundland Regiment. Depot St. Johnls dated April 26th 1919.

The dischatge of the nndernoted on dmobilization has been CONFIRMED by Officer $1 / 0$. Records on $25 / 4 / 19$.
\#1941, Pte. Alphonsus Hynes.

## C.R:1941

Hatheot from pally owlewa part in untit the mogal
相


Tha atsoharze at thas unajsmetad an canobsiszation


1941 Pte. Aplhonsus Hynes

## C.R. 1941

Extract from Nominal Roll og NPId. Regt. Jraft No. \%. from 2nd Bno, Depot, to Ist Bn. Bosor' Fmbarked Southe ampton, 25-6-16.

1941 Pte. A.Hynes.

## C.R. 1941

## ilinohestex

 by itte Gole. Bo do gerton Do do O. Oxfleer Gomanding 2ade, Settelion of the Logal Iowfoundlazd kegisent.

The undeamentioned havin; zeported baak from the Firet Bettelion are tekon on the atrongth and posted to "A" Geg from 26/28/280
\#1941 Pte. A. Hynes.

## C.R. 1941

##  

 yopeto 71219


1941 Pte. Alphansus Hynes.

## C.R. 1941

##  1) 2119 

 popato 72119

Bundionsedtula 179

1941 Pte. Alphansus Hynes.

## C.R. 1941

Fotraet frem Irenilial RoII of the Roral rela. Regto Zambariced S.S.Corsiann, Jan.50,1919.

1941 Hynes.

## C.R. 1941

Alphonsus Hynes Service with the NEWFOUNDLAND REGIIENT ON was alloted to Pte\& A. Hynes

AUTHOR ITY:
Reca-d Ledger;
Dept。 of llilitia.
March 25th 1919

## CR. 1941

Extract from casualties received from Pay \& $R_{i}$ cord office, London, 17 Dec. 1918.

The undermentioned who was readmitted to Endell St., MilitayyHospital, on $3 / 12 / 18$ was discharged $16 / 12 / 18$, and proceeded same date to Winchester.

1941 Pto. Haynes F .

Fetract from Yominal Roll of Slok and Wounded from The Military Hospital at Indell Street, W.C.2. admitted on December 3rd 1918.

1941 Pte. F. Hynes
R. Fewfoundland.. ........Adm. from Siok Leave up and...... old
G.S.W. Rt. Chest (Shell)
15. Benson Hynes,

Bay JiArgent, Po3.

Dear Siz:-
I beg to inform you that adaitional inforए2tion has to-day beon received by this Department through the Visiting Committee of the llemfoundiand Far Contingent Association, to the offoct that 110. 1912, Private Alphonuas Hynes, is now prograssing favourably.

Yours Paithfuliy.

Lifout. COL.,
Chiel stafi osficer.

$$
\therefore R 1941
$$

Etraet from War orfica, bist Mo. O. 1753. ciated 2. 21. 18.
\$1941 Pte. A. Hynes.

Wounded 14. 10. 18.

## All Messages Sent are Subject to the Following Conditions:

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

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

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

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 belonying 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 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 followin; Tclogram may be forwarded according to the foregoing Conditions, by which I agree to abide. (NOT TRANSMITTED)
Signature of Sender
Address Dotof militita

| Hue | Rod | By | sont | by |
| :--- | :--- | :--- | :--- | :--- |
| Numbor- | Oheok |  |  |  |
| Dated | Oet 28th, 1918 |  |  |  |

Regret to inform you that Record Office, London, officially reports Ho. 1941㗊 Private Alphonsas Hynes now at Military Hospitel kniell Street, Iondon zateludigrots

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

> Minister of Militia.

Extract from Casualties from London Distriot No. C. 997 dated 27-10-18

1941 Pte. A. Hynes.

WOUNDED 12-10-16.
AUTHORITY. O. C. BN. 14-10-16.

BC?

Etraet from Fominal zell of Siok and Mounded sdroittod to Verimas Happstale on varione fotes.

1941 Pte. F. Hynes.
R. Yifla, R........ G.S.W. R.Side shell.


## NEWFOUNDLAND POSTAL TELEGRAPHS.

## Gable Connection with ail the worlu.R. 1941

## All Messages Sent are Subject to the Following Conditions:

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

In case the Message shall nerer reach its destination by reason of any neglect or default of the N. P.T. or its Servants whilst the Message mains under the control of the N. P. T., they will refund the amount paid by the Sender for such Meseage

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for hay loss, furjury, or damage arising or resulting from the non-transmission or non-delivery of tho Message, or delay or error in the transmission or delivery thereol, howsoever such or crror shall have occurred.
The control of the N. P. T. over the Messuge shall be deemed to have ntirely ceased for the porposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by ithe N. D. T. (on.d the N. P. T. elatl have fivilinower so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worloal by (h) administration or authority aot controlled by the N. P. T. exclusively, although worked as part of or in connection with the Talographic sybten or service of the N. P. T. I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide. (NOT TRANSMITTED)
Signature of Sender
Address Deptor Mulitia.

To

> Senson Hynes, Bay Lutargent, F. Be

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

Hio. 1941, Privateinliphoners Hyne: etn88rd General Hospital Boulogne oot 16th suffering from G. Sollor right side severe.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence. J. H 。 Benne $t$

Chge dept of militia
Minister of Militia.

Hro Vincent Iymes, Bey riargonts. Dears Str:-

With Inrther reference to your fotter 02 Varoh 25 th and my roply of 25 April, a reply has been roeelred from the Recori Ustiae, LIondom ting that Mo. 1941. Pte. A. Hynes ts in Fien 00. Tours tatheruliz:

Majore O.SeO

## C.R.

Extract from Telegram despatohed to Synontioal, Jondon, dated April 19th,1918.

With reference to your telegram 17 th April please repeat Wuth regard to 1941 Hynes.

Extract from Telegram despatched to Synoptioal London, dated April 16,1918.

Please inform Whereabouts 1941 Hynes.

## Mrotinceat Hynes,

(May IVAzgont.

Six.
I am ilracted to aclanowledge reoeipt of your latter of 2ind Maroh, concerning *2912, Pte.Alphonsus Hynos, An Inquixy mill be fommardea to the Record OPtlae, London, tolifind ont the prosont whereabouts of thil soldier, and you will be informed as soon as a roply has been received.

I have the honour to be. Str.

Your obeatent segrant.

2ajor.
Chier stapif offleor.
(2F2/Jाア.


Nor fom eny yrunger squee 0 9941. IS harsut heanst Haor ham suric Hast aporil wher the were wounded. turll yw feindly hit is and tit wherit hit is and le mer Tow at o amiansuns as this forther io a Éprisoner in getmany and hy
io noviting to hear where the is.
trusting you well find out where he is.

I remain respectfully yours orr Vrucuid ofyues.

## C. $\quad 1941$

Bxtruct from Hominis ioll of Draft flo. 35 : 18 pther Ranks from 2/3et
 Bmbericed southampton $5 / 22 / 27$.

1941 Pte. Hynes, A.
12.

## WFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

## All Messages Sent are Subject to the Following Conditions:

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

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

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Signature of Sender

Address


## Dated

April 23, 1917.
To

Mr. Benson Hynes,

Bay L'Argent, F.B.
Regret to inform you that Record Office,
London, officially reports No. 1941, Private
Alphonsus Hynes, has been admitted to Wandsworth
suffering from gunshot wound left ankle.

Upon receipt of further information I shall immedi-
ately wire you and trust that next report will be
of his convalescence.
J. R. BENNETT,

Colonial Secretary.

## C.7. 1941




\#1941 Pte.A. Hynes.

GSW.Left Ankle 1. severe.


Dear Sir.
In reply to my enquiry on your behalf for address of No. 1941, Private Alphonsus Hynes, I am to-day in receipt of a reply fram the Record Office, London, to the effect that he is with the British Expeditionary Foree. Yours faithfully,

Coloniel Secretary.

Mr. Vincent Hynes: Bay L'Argent.

## NFOUNDLAND

## Cable Connection with all the World

## All Messages Sent are Subject to the Following Conditions:

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Signature of Sender
Address

| Line Number | Rod - By- | Sent 1-by- | Oheek |
| :---: | :---: | :---: | :---: |

January 2, 1917.

Bay L'Argent.

According to latest report your son nineteen fortyone Private Alphonsus Hynes was with the Regiment Will enquire his present address and notify you on receipt of reply.

COLONIAL SECRETARY.

Translation of message sent to synoptical, Jan. 2, 1918.

What is address of, what is latest news of 2585 Gillespie, 1685 durrell, 2370 Thistle, 1792 Walsh, 1793 Walsh, 2589 Penton, 2375 Field, 1941 Hynes. State present condition aid nature of mounds of 1566 Voisey, 2296 Columbe, 698 english, 72 Reardigan. Report by telegraph present condition of 2085 Spurrell, 2516 Bower. 2368 Clark.


## FUUNDLAND POSTAL

## 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.

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Signature of Sender



Dated
To MR.BENSON HYNES,

BAY L'ARGENT,

RECORD OFFICE LONDON TODAY REPORTS NO. 1941 HYNES PREVIOUSLY REPORTED WOUNDED WAS WITH UNIT OCTOBER 29 TH.

J.R. BENNETT

COLONIAL SECRETARY.

## C.R. 1941

Extract of Casualty List received from P.\&.R.O. November lIth. 1916.

1941, Pto A. Hynes.
Previously reported Wounded $12 / 10 / 16$. now reported serving with list Battalion 29/10/16:- Authority Nominal Roo last Battalion dated 29/00/16.

## C.R. 1941

Friract of ${ }^{0}$ asualties received from Pay \& Record Office London, dated Notember 7,1916. The following Casyalty in the Ist. Nfl. $d$ Regt. With the Britiah Expeditonary Force is reported under various dates: \#1941 Pte. A. Hynes.

## COPY OF TELEGRAM.

## Dated

31 at October, 1916.

## $4 r_{3}$ Benson Hynes,

## Bay L'Argent.

Regret to inform you that the Record Office, No . 1941 Pcivate Alphonsua London, officially reports Hynes Wounded October twolfth.

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

Colonial Secretary.

## C.R. 1941

 0et. 32,2916.

Following soported wounded outel2th Wharaaboute and nature of wounae not seported yet:

1941 Hynes.

## C.R. 1941

Bxtreat of Casulaties reoeiv drom Fry of Record office, London, dated octobe 30.1916. \#1941 Pte. A. Hynes. $y$ Wounded 12/10/16 and roported by . C. $\mathrm{Kn}_{1} 14 / 10 / 16$.

$$
\text { C.R. } 1941
$$





1941 Pte. A. Hynes.

Autheritys Toeninal 3o13 1et. B ttalion dated $9 / 20 / 26$.

## C.R. 1941




1941 Pte. Hynes Alphonsus.

#   

1941 Pte. Hynes, A.<br>



Synes, t.


|  |
| :---: |
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|  |  |

## April 25,1919

\#1941 Pte. Iphonsum Hynes. Bay L'Argent, Foxtune。F.B.

Deer Sir:-
Please find ancloste "Discharge Certifioato
Ho. 2035."
Yours truly
Paymaster \& $0.1 / 0$ mocords

## The royal szemoundanio regiment

Class for Demobil-ization:-


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

Discharge Depot: Headquarters The Royal Newfoundland Regiment
Date


Regimental No. 19.4!
Name
Ph ahem Sher

Address Posture N. S.

Present Medical Category. A. 1

$$
\text { Recommended for:- }\left\{\begin{array}{l}
\text { (a) Immediate discharge ... } \\
\text { (b) Standing Medieur-Board. }
\end{array}\right.
$$



Members of Board
Senior Medical Officer

$\mathrm{M} \cap$ Depot

## The opal 3zemfounolano regiment

 Occupation $\cdots$. 10.0 . 2 . Classification for Discharge F. ...Medical Category Recommendation S.M.B. Disability Rating
Passed to Demobilization Officer with following documents:-


Date AR ...4. -1.19.

## PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am,.............in a position to resume civilian occupation.


Date
Particulars passed to Vocational Officer for information and action.
2. Clothing.

Certified that Clothing Regulations have been complied with:-
(a) Clothing Allowance payable.
(b) Clothing Supplied ..


$$
52+2+2+2
$$

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. ..to his home at

Date $\qquad$ and Release Certificate No.
$\qquad$ $1.9 .8 .9 .$. issued.
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

$4-4-19$

Discharge approved for

> Miner io adjuarmant of ovenasas par a oct.

Forwarded with following documents to O.C Discharge Depot.


## APPROVED.

Documents as above forwarded to :-

## Officer ic Records.

 Board of Pension Commissioners.with following additional documents.

## Eligible for War Service Gratuity

Date APR 111919

O. C. Discharge Depot.

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

## 

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 be uscd only for Special Reserve Recruits, and for Special Reservists enlintont th noptat Anmy.

## OMEDICAL HISTORY <br> or

## Surname Hfloree

Christian Name eARA.fanone
Table I.-GENERAL TABLE.
Birthplace:-Parish
Examined

$\ldots$

Physical Development.

Vaccination Marks $\left\{\begin{array}{l}\text { Arm .... } \\ \text { Number.... }\end{array}\right.$

When Vaccinated
Vision
(a) Marks indicating congenital peculiarities or previous disease
(b) Slight defects but not sufficient to Cause Rejection

Approved by (Signature)

Enlisted

Joined on Enlistment ...

Transferred to .

## Became non-effective by

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

 Fareigu Service, Extension, Re-engagemant, or prolongation of Seryice; I Isue be Bur gical applianees; Partietlars of Dental Treitment, de.
 $(9 \cdot 6 \cdot 16$
$4 \cdot 15$
$2)^{2}$

$$
\rightarrow 1
$$



hes bren $b$ f re a T-a walling it Rioct: Basad and has beab cibusitith tes 6 for-Liscluerse oni)crubablia ation. Meelioal oulegory AT H. High

TABLE IV.-SERVICE TABLE.


1. Unit and Corps,
2. Regal. No.

3. Rank. N. 1 .

4. Age last birthday $\qquad$
5. Posted for duty on $\qquad$
in category (or grarle) $\qquad$
Y. ES F f?
(Surname)
(Christian Names)
6. Name

$\left.\begin{array}{l}\text { or Occupation }\end{array}\right\}$
7a. If the soldier claims previous service in Amy, he should state-
(a) Former Regis, or Corps ; with Regtl. Nos.
7. If the disability is an injury was it caused
(a) in action
(b) on field service
(c) on duty
(d) off duty ?
8. If a Court of Inquiry was held on an injury state :-
(a) When
(b) Where
(c) Opinion of Court
(b) Date of Discharge ;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)
Norse- The foregoing particulars are to be filled in and A.F.B. 179 m (statement by the soldier) completed before the soldier
In seen by the Officer in charge of the case.

## Statement of Case.

Norw.- 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 case to confine himself exclusively to the medical aspect of the case and to such information as may berecorded 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.

12. Place of origin of disability. Wronged in have or the
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical/ 1 gal wo e 141 P History Sheet bearing on the case and in otherylierd. Wand 2.2 nd relevant official-documents.

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\begin{aligned}
& \begin{array}{l}
\text { ©. D left lego } 3 \text { el wand } \\
\text { *hex. Ail waves how }
\end{array} \\
& \text { trade haw heed }
\end{aligned}
$$

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

In at caver one 1 in faecal tinter les eves ester. poe not throat, cienbuirles, AL oprechatis be Fortiched to with ratiocheapps
 bid in oases al potation the Exact position could be stated
15. What is his present condition? 121 worn ondech wo fur ger
(A note should be made as to Weight in all cases when it is likely to afford evidence of the pro-. Mace gean at apex. grass of the disability.)
use freer seas. lither envornts suite lett lea. not paifue on pusome.

 16. Was an operation performed If so, when and what was its nature?
17. If not, was an operation advised and declined? pan ow persevere. ane ie
18. "In the case of loss or decay of teeth,-Is the loss bf 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 daring 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. r unalike to can pacts.


No. 1941 Name Alfonso tyues Suce Banti.)
corps (becofoundlawd Davira orment $\left.\begin{array}{c}\text { Period on reckenion sownard } \\ \text { freedom from exira hno }\end{array}\right\}$
 $\checkmark$

## Sheet No.

$\left.27 / 10 / 1 \sum_{\text {- G.c. }}^{\text {Gigdges }}\right\}$ Sigrature O.C.
Company, etc. Service or
Proliciency Pay

Pay $\} \sim$


## April 26, 2929

$\$ 1941$ Pte. 4 lphonsus Hynes。

## Bay Lesrgent, FoB. $_{\text {B }}$

Dear Sir:-
Refaring to your applioation I enelose oh oque for Soventy donlam (\$70 009, be ing arount of flrst payment due you on eocountof the "Mar Sorvice Gratuity." $Y_{\text {ours }}$ truly

## St. John's, Howfoundland.

Dosiaration wo uired of officers and non of the Roycl lotfoundiend Rogienst, who olnine lar Sorvico Gretusty under order-in-Council datod Jomuery 20th,1918.






3. Rovi. . . . . . . . . ote
$1.9 .4!$
6.iddecos in tutl to wian futuro payrontg of brituity oxc to bo

6. Dete of musistiont in tho nogarcat. . Q.e...ohor...!. $1.5 . .$.
 iosuca, or tas boinj issuch,imouistoity paise to yous dischanso...... nor apphacbec.
8. Rcluctionship of such doponlants...N.
9.iduross in fulk of such dopondnats. A?
10. Is seid iopontont, now, or was srid iofoniont at ony tire in mpooipt

 perviuniers of anch serviuc. Opepeseas,
 Whother in Jfl deor 0\%-reces.
13. Heve you had noro then ono enlistiont? If so, give particulars of discheriso and, re-cnlistmonts, ind under what rostiontal numbors. 70
14. Have you alroady roceived any paymont of Poeit Dischargo pay or For Sorvicc Gratuity? If so, steto anount you and your dopendonts heve ciroedy receivod and by whon peid.

15. Hevo you boon issucd trith a Vor Scrvioc Bodgo? $\square$ 16. Heve you, duxing tho presont wer, sorvot in the I:pori il Doroos...\% 17. iro you entitlod to rocoive, or heve you rocoived emy Gr: tuity in tho neture of Post Dicchergo Poy fron the If poricl Forces? If so, stcte 工ouni rocoivcl, or to thich you aro entitlod.....0.
18. DiA. you revort oversocs to a rank lover then tine substentive ronk hold by you on your crrivel in whelmi?.

(b) If 80 , tras such roversion in conseg*ance of tisconduct or incfizei ency?....t.
 of dischor x. PPoice. IN/iq. (b) Roneon for discher $5^{2}$. 소…
20. Did you c.t cny tino sorve et the front in on estunl thectro of Ver? If co give perticuinrs of plecce, me dates of such sorvice. auce.
 .......... 9.1 .8
21. ( $二$ ) Liro you rocciving trostront frof: the Uivil Ro-zetablishent CHi.(b) If so cro you in rocospt of full pey and delowericos frot: that cor rittoc.
ind $\tau$ rko this so?cm docloration, consciontiously boliovin, it, to bo truc, end lrovidn theit it is of tho scio force ond oifect os if riado under Orth.
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This
$4 \mathscr{H}^{\text {dey }}$ of Apric 1919
Signeture of Berrjater of the Sup-ens covit, St, pardinery liagis-


POST TZSCHAZCE TAY.
liar Sorvico
IIt mount
: Gratuity

$\qquad$


Regimental
$\frac{\text { Suirnf }}{-7}$
-



When Vaccinated
Vision $\left\{\begin{array}{l}\text { R.E. }-\mathrm{V}=\sim \\ \text { L.E. }-\mathrm{V}= \\ \text { With }\end{array}\left\{\begin{array}{l}\mathrm{R} \\ \text { Glases } \\ \mathrm{L}\end{array}\right.\right.$
Identification Marks, such as Tattoo, Moles, Scans, ete :-
$\qquad$
Defects or Ailments :-

Examined and foumd-
Fit for Grade $\left\{\begin{array}{l}\text { I. } \\ \text { II. } \\ \text { III. } \\ \text { IV. }\end{array}\right.$
(Strike out thoee which do not apply.) Signature

Chairman of Medical Board.

| Re-examined for posting at. |  |  |
| :---: | :---: | :---: |
| On $\qquad$ Bulisted | day of - 191- |  |
|  | 1 |  |
|  | day of | 191 |
|  | Corpe | Regti No. |
| Joined an enlistment | 1 IR.hwowndlowd | 1941 |
| Traniferreal |  |  |

 Vacoinstion, Inooulstions, etc.; Examifiations for Field or Forblen Bervice; Extonsion, Roengegement, or Prolongation of Serviog, Tesue of Surgical Appliances, Particulare of Dental Treptment, etc.



$\square$
IF


Special Remarks: atate if a discharged Boldier
$\qquad$
TABLE IV.-Service Table.

| Station or Trooptilip | Dutedinutiol |  |
| :---: | :---: | :---: |
| . |  |  |
|  |  |  |
|  |  |  |
| - | . |  |
|  |  |  |
| Became non-effective by |  |  |
| on_ day of 191. |  |  |
| (Signature) |  |  |
|  |  |  |

TABLE II. -Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.


Form is

1ST NEWFOUNDLAND REGIMENT
ALLOTMENTS

1. Defihonses Hones Regl. No. 1941
hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and $\qquad$ 30 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person $\frac{\operatorname{mad}}{\text { or }}$ Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ${ }^{\text {and }}$ or Persons concerned, viz. :

Allotment begins.

| Identity <br> Certificate <br> No. |
| :---: |
| Whether Wife, Child, <br> Friend |

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.) $\qquad$
Enald wi:gue

$$
7^{1} \text { officer Commanding }
$$

At Shim, nope.

$$
H \text { company }
$$

Decerba 11 1915


Save not-recider allotment for bec fany feby reply immesiatey Benson Styes 1941 aYphomons symes.
 15

> Mr. Denson Aynes, Bny L' Argent.

## Dear 8Ir:

With reference to your telegram
of February 2lat. I beg to inform you that Ho. 1941 Alphonsus Hynes, canzelled his allotment from Hovember $30 \mathrm{th}_{\mathrm{o}}$, therefore the last ofeque which you should have received, would be on or about Pebruary 7th. 1919
Yours truly.

ST. JOH.N'S, APR 4-1911
Royal Newfoundland Regiment.
Billeting Account,
To


Billeting Soldiers as undermentioned
from Ted $8^{\text {th }} / 19$ to april $s^{\text {ed }} / 19$

A.frn4. C.R. 1941

Pro 0

## 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, $[\ldots$, ar $, \ldots, \ldots, \ldots$
2. Regtl. No..19.\%J 3, Rank........ ....
3. Name

$.24 .4 .6 .2 . .+4$
(Christian Names)
4. Former Trade or Occupation $\}$
Ta. If the soldier claims previous service in Army, he should state-
(a) Former Regis, or Corps: with Regt. Nos.
5. Age last birthday. $\qquad$
6. Posted for duty on. $\qquad$
in category (or grade). $\qquad$
7. If the disability is an injury was it caused
(a) in action
(b) on field service
(c) on duty
(d) off duty ?
8. If a Court of Inquiry was held on an injury state :-
(a) When
(b) Where
(d) Particulars of Pension or Gratuity (if any)
(c) Opinion of Court
(3) Date of Discharge;
(c) Cause of Discharge.

Nors.-The foregoing particulars are to be filled in and A.F.B. 179 a (statement by the soldier) completed before the soldier Is seen by the Officer tin charge of the case.

## Statement of Cave.

Norm- 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 la the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disotae.
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 "nils."
11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.


14. State whether the disabilities are
(a) attributable to
(b) aggravated by
(i) Service during the present war $\qquad$
(ii) Previous active service. .
(iii)) Climate in pre-war service
.. $\quad$.. $\quad$..
$\qquad$
(iv.) Ordinary military service before the war
$\left.\begin{array}{l}\text { (v.) Serious negligence or misconduct on the } \\ \text { man's part. }\end{array}\right\}$ $\qquad$
$\qquad$
14 (a). If not due to any of these causes, to what $\}$ specific condition do you attribute it? $\}$
 ins fractal thar Ins. kos the rs. filsativites, is elsabititints res oupechints re athene with
radierraphs radiographs whir in poestioj amputation the evict portion
15. What is his present condition ? 1) winch Bevel. nun Pugh'
 when it is lithely to afford evidence of the prograss of the disability.)
 made

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 of have been aggravated by service during the present war, and if so, to what or by what specific military conditions?




Prus zverguear sears $\infty$ Donahue vel
20. Do you recommend-
(a) Discharge as permanently unit ?
(b) Change to United Kingdom ?

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

Station fioverey. Down Comp
Medical Officer in charge of case.
Date $1.7-1-1.1$.

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

Al for wee with Men returned from os $B a y$
Garrisons Abroad.

Army Form W. 3016.
(s) Boise et spin)

No. $\qquad$ $\begin{array}{lll}\text { Dato } & \frac{1}{4} \quad 2 \mathrm{~N}^{2} \\ \text { Records, } & 291\end{array}$
(2) The Omioor Commanding.



I consider he is fit for*

* Strike out that which is isapplicalis.

(d) Duty.
(b) Fight Duty, and likely to bo fit for Service, Grerseas withinghree monthe-1
(o) Light Duty, and not likely to be fit for Service Overseas within three months or roqifiling special radical treat pent.
(d) Service at Home, but unlikely ever to be fit for Service Overpass.

Form K
No 1850

1st Newfoundland Regiment
ALLOTMENTS

1. Defthervess Horus $\qquad$ Regl. No. hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and $\qquad$ Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person $\frac{}{\text { and }}$ or Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ${ }_{\text {or }}^{\text {and }}$ Persons concerned, viz.:


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.)
ended w: gre
7 or oscar commanding
$1 /$ Company
pt gee, Mut
Desebanst 1915

$\therefore$. 1941 aink Ite ramo a. Hymes



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\text { (1. K. }=2-0-0^{\circ}
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$$
\text { EPR } 30 / 10 / 18
$$

NEWFOUNDLAND CONTIMGENT
Reciptera quo8
10: Chief Paymaster \& $0.1 / \mathrm{c}$ Recorda, Newfoundland contingent,

58, Viotoria Street, London, S.v. 1.
Please remit to $\qquad$ No 1941 Privats

Hynes A. the sum of Ywe
$\qquad$ pounds $\qquad$ shillinge ( $\ell$ 2.0.0) on account of any balance that may be due to me.


Regti. Ho. 1941 Rank pte
Name
A Jeyroes
Approved $\qquad$ $\frac{\square \text { hiac hamus lof } N \text { RHM }}{\text { 6onficer } 1 / \mathrm{c} . \text {. }}$ HOLBORN MILITARY HOSPITAL. Hospital.
-nated at. $\qquad$ 18 Gulp 191\% WESTKON ROAD.MITCMAH: 1917.
10. $\qquad$
NEWFOUNDLAND CONTINGENT
To: Paymaster \& Officer 1/o Records, newfoundland Contingent, 58, Victoria Street, London, S.W. 1.

Please remit to $\qquad$ 19 uletifised fryer. First Cteufoundisind Requment the sum of $\qquad$ shillings, on account of any balance that may be due to me.


- Dated at Chitchumv, CHEAt.

- No. $\qquad$

From:


Chi of Paymaster \& $0.1 / \mathrm{c}$ Records, Newfoundland Contingent, Pay \& Record Office. 58, Victoria Street, London, S.W. 1.

To: Ofeicar Commanding,

$\qquad$ 1918
ALLOTMENT
No. gaul fie trues.
Wi th reference the enclosed supplication for cancellation of Allotment of the above-named, /. ( ), kindly acertain and advise:-

1. Whether the Allotment is payable to a dependent as a sole or contributary means of support?

2: Whether Separation Allowance (in addition to Allotmont) is being paid to any person in Newfoundland or elsewhere $\theta$ on his behalf, and if 30 , to whom?
3. The reason for cancellation.

Should the Soldier's reply to " 2 " be in the affirmative he should be informed that Allotment may not be cancelled without reference to the Minister of Militia in Newfoundland, to whom reason for cancellation will require to be submitted.

O.C. Ist R.Newfoundland,

Winchestor.
To be Discharged from Hospitaliay-morrow.


$$
16-18-18
$$

p.p. F. MURFAY.

Doctior-in-Oherge
military Hospits
Endell Streat, W.c.

Only for way vita Mon rufurnal finn as Repafitiosary, Forte erfruen Garrimer ABroad.

Army Form W. sole, (Ta Boils of Be.)

No. Date $\qquad$ 191
*(1) To the Officer file Recons)
*(2) The Officer Commanding
*(3) The Paymaster

- Strike ont that which in inapplicable.

Regimental No.

 advuited wits hrpitebretiroif has been granted? a furlough from \}

His address while ow leave will be

I consider he is fit for

- Heller est chat whin is insppricalle.

END HOSPITAL Onvucicuy $\qquad$ Hospital. 9 Station.
Bour copies to be made, and ondGopy sent to ewob-Otticer mentioned above and one espy filed in the office.

In the cast of pea of the Royal High Corps, Royal Engineers and Army Ordnance Cope, two copies of Army Form W. 3016 will be sent to the Officer in charge Records concerned and eoe to the Paymaster, instead of eoe copy to the Officer $i / 6$ Rhoprds, the Byruater and $0 . C$. showa in tho Schedule.

O.C. lst R.Newfoundland, Winchester.
today
To be Discharged from Hospital te-merrew.


$$
16-12-18
$$

p.p. F. MURRAYotor-in-Charga,

Military Hospilal,

ORIGINAL.
NEWFOUNDLAND CONTINGENt

CAITOELLAATION OF ALLOTMENT

1. $\qquad$ (Rank) $\qquad$ (Tame) $\qquad$ Q 1tynes. hereby apply for cancellation of Allotment made by me on N,F,P, /11 No. $1850^{\circ}$ dated December $19^{2 \alpha} 1915$ in favour of

$\qquad$ Such cancellation to take effect on the $\qquad$ day of Novenaber ${ }^{191}$ K
2. I agree to accept all risks and consequences of this appli~ oration failing to reach Headquarters, St. John' s , in time to become operative at above-nomineted cancelling date, and that in the event of guck nondelivery, and theroby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage int the Pay books as may be nocosaary, or otherwise to refund such overpaid, amount or amounts.

H.B. - To be made out TRIPLICATE and del Office not later than the dato of with P.di.0. 0.L. $/ 10,9 / 72 / 18$.


Reg. No. $18.4 \ldots$....... Rank. Plo Name Nitynes.

Attested $\qquad$ Address.
$\qquad$ Allottee. $\qquad$
Date of Allotment. $\qquad$ Returned from Overseas. $\qquad$
Returned on S.S. $\qquad$ Cause. $\qquad$

$\qquad$
$\qquad$

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Diosifohni $:=1$ Hibl no. 1084, pto. A. Bmao.

Bay d'angent F. Bous

WILL.
2* the event of xy ding I que the whle \& ony yon te alde effere to my in achers
yyr. Bemon. Ftyuer. Fortane
Bay. Bey targer Houfoumdene (Diginature) alphomadi. Aynut friale. Yo. 1941
grapal igly Foiftuadland

## NEWFOUNDLAND CONTINGENT

> Copy of "Will"
of
1941, Pte. A. Hynes.

3rd April 1917.
In the event of my death I give the whole of my property and effects to my father Mr. Benson Hynes, Fortune Bay, Bay Larger, Newfoundland.
(Signature) Alphonsus $\frac{\text { his }}{\text { xark }}$ Hyes.
Private. No. 1941.
Newfoundland Regt.
Certified True Copy.

```
HETHPOUNDLARD CONTINGEET
Copy or "T112"
    of
```

1941, Pte. A. Hynes.
3rd April 1917.
In the event of my death I give the whole of my
property and effects to my father Hr . Benson Hynes,
Fortune Bay, Bay Larger, Nevfoundland.
(signature) Alphonsus $\frac{\text { hig }}{x}$ Hynes.
mark
Private. No. 1941.
Newfoundland Regt.

Certilied True Copy.

## 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 . $\mathrm{i} \mid \mathrm{c}$ 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
"Alphonsus
bones

Regiment from which discharged Royal Newfoundland
Regimental number 1941
Intended address fortune sac/,
Height on discharge 5 Feet 6
Color of hair on discharge Sexen
Complexion of ark
Color of eyes 2 conn
Descriptive Marks sean. Req ht Wu, Ley Req.
Figure on discharge nedilun
Christian name of Father) incest
Christian name of Mother
Wife's maiden name in full
Date and place of marriage $\qquad$
Christian names of children
Place and date of soldier's birth Say parquet. sept 28 . 190
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)



Station
 Withes whunditay Che (Rank)

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.

Army Form B. 103.
Gasualty Form-Active Service.
Ticgimentpr Corps 2 1 ; Nped keqt.
Bank PVi formame firyee
Religion Noman patholec
$\qquad$ Cluristian Namo
reind 1941 Religion (a) Oct $2 y / i s$ Terms of Service
$\qquad$ Age on Entistment $18^{\text {. y y y }}$ years montha. Date of promotion to present rank $\qquad$
 Date of appointment to lan fo ìink Losiou .i.
Extended $\qquad$ Re-engaged Came, $9 / 16$ Qualification (b) $\qquad$ or Corps Trade and Rht Signature of Officeri/c Records.


Army Form B. 103.

Casualty Fgym-Agtive service.
Rank frigate Surname ...Nones............... Christian Name. A House.............
Religion-Lomavi batiolie
Religion-2.aza
Enlisted (a) AX Cons Terms of Service (a) curnackins. Service reckons from (a) $27 / 10 / 10$.
Date of promotion to present rank... $\qquad$ Date of appointment to lance rank $\qquad$
 Re-engaged $\qquad$ Qualification (b). (b). or Corps Trade and Rate.
Occupation Sioherine ace.................................................t. Signature of Officer.


$\therefore$ 4/10/18
34.10.18 Se Domes.



Whluad ban

Squadron, Troop, Battery and Company Conduct Sheet.




#  

Reg. No..1.9.1,4/..Rank ........................Name


Date of Enlistment. $\qquad$ Address
 ..o...tint......... District Occupation .s............. . Classification for Discharge n.

$\qquad$ !.す... Occupation
$\qquad$ Medical Category Disability Rating $\qquad$ Recommendation S.M.B. $\qquad$
Passed to Demobilization Officer with following documents:-




Date. .........................

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.
2. Clothing.

Certified that Clothing Regulations have beep complied with:-
(a) Clothing Allowance payable. $\%$. 0 .
(b) Clothing Supplied


Date: $4 . .1 .4 .1 .1 .9$.
3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. at $\qquad$ and Release Certificate No.

Date $\qquad$
$\qquad$

## 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
 ........t..........9.


Depot Paymaster.

Discharge approved for.
$11-4-19$
Forwarded with following documents to O.C Discharge Depot.


## APPROVED.

Documents as above forwarded to:-
Officer ike Records.
Board of Pension Commissioners.
with following additional documents.
Alible for War Service Gratotly APR 111919

O. C. Discharge Depot.

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


