

THE ROYAL NEWFOUNDLAND REGIMENT

1. What is your name? 2. What is your full Address? 3. Are you a British Subject? 4. What is your Trade or Calling? 5. What is your Trade or Calling? 6. Are you Married? 6. Are you Married? 7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vac- cinated? 9. Are you willing to be enlisted for General Service? 9. Are you willing to be enlisted for General Service? 9. Are you willing to serve upon the conditions as emb died in the roll of service to be list meaning, and who gave it to you? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted? 1. Are you willing to serve upon the conditions as emb died in the roll of service to be listed by me that I will be faithful an ear true allegiangs to film Majesty Hig George the Fifth. His Hefrs and Successors, and that I will be faithful an ear true allegiangs to His Majesty His Heirs and Successors, in Person, Crown and Dignity against a semiles, according to the conditions of my service. 1. The above questions were then read to the Recruit in my presence. 1. The above questions were then read to the Recruit in my presence. 1. The above questions were then read to		Questions to be put to the Becruit pefore Enlistment.
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It The signature of the Approxing Officer to be effect to be	r t	OATUSE BE TAKEN BY RECRUIT ON ATTESTATION. I
the signature of the Approving Omeer is to be affixed in the presence of the Recruit.	ear oun ien ir ate	OATUSE BE TAKEN BY RECRUIT ON ATTESTATION. I. O make oath, that I will be faithful and true allegiance to His Majesty Ring George the Fifth. His Heirs and Successors, and that I will, as in duty, honestly and faithfully defpth His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all less, 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 ould 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 daily entered piled to, and the said recruit has made and signed the deflaration and taken the oath before me at. **CERTIFICATE OF APPROVING OFFICER.** I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the red forms appear to have been compiled with. I accordingly approve, and appoint him to the the said authority with will be attached to the original attestation. **Light Supplies to the property of th

DESCRIPTIVE REPORT ON ENLISTMENT To correspond with entries on the Medical History Sheet. Height Apparent age.... Girth when fully expanded 33 Chest Measurement Range of expansion.... Distinctive marks INFORMATION SUPPLIED BY RECRUIT 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. (6) (0) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service not al-lowed to reckon for fixing the rate of pension Service in Re-serve not allow-ed to reckon to-wards G. C. Pay Signature of Officers certi-Corps in Rgt. or which served L'epot Promotion, Reductions, Casualties, &c. fying correctness of entries Army Rank Dates Days Total Service forfeited as above..... [date of discharge]

C.R. 5268

Extract from Daily Orders Part 11 Unit The Royal Bfld. Regt. St. John's, Dec.16th,18.

The Undermyntianed man was discharged on Demobilisation was been approved by O.C. Discharge Depot from Noted Dates he is remove/dirom strength and transferred to Discharge Depot panding confirmation by Officer 1/c Records.

5268 Pte. Geo. Tayler.

C.R. 5268

Extract of Daily Orders Part II, dated Jan. 10th 1919.

DEMOBILIZATION

The discharge of the undernoted has been confirmed by the Officer 1/c Records on noted date.

5268 Pte.Geo. Taylor.

Discharged 9-1-10

Extract from Daily Orders part 11.from Unit The Royal Mild.Regt.St.John's, dated May 22,1918.

#5268 Pte. George Taylor.

Attested for General Service with the Royal Bfld Regt. from 21.5.18

15:268

Demobilization Form 2

The Royal Newfoundland Regiment

Reg. No. 5268 Rank ATC Name Jaylor Storge Date of Enlistment 21.5.18 Address Dauffell District Distric	
and the state of t	
Occupation	
Recommendation S.M.B	
Passed to Demobilization Officer with following documents:—	
	_
N.F. P 36 D.F. 1 D.F. 1	
B 178 W 3494 B 122 Board 1st " 2	
B 178a	
B 179 D 400B Form L do 3rd " 4	••••
B 179a D 400C Form K	•••
B 179b	•••
B 120	
PARTICULARS FOR DEMOBILIZATION 1. Civil Re-Establishment. I am	
2. Clothing.	
Certified that Clothing Regulations have been complied with:-	
(a) Clothing Allowance payable 1 00	
(b) Clothing Supplied	
Date. 12-12-18	•

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrant No
at South Side St. Tahwarfease Certificate No 3.0.4 issued.
and in the second
Date 12-12-18 LKNicks Kish
Dem ob ilization Officer
4. Pay and Allowances.
The herein named soldier's accounts have been correctly balanced and all matters in connection
therewith settled. He has received pay and allowances to
Men, C,
Date 17-13 BUD May Cafet Depot Paymaster.
- 10 18
Discharge approved for. 12 - 12 - 18
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36. B 268. B 121. N.F. Med. D.F. 1.
N.F. P 36. B 268 B 121 N.F. Med D.F. 1 E 178. W 3494 B 122 Board 1st 2 1/ 107 m
B 178a
B 179 D 400B Form L do 3rd " 4
B 179a D 400C
В 179ь В 103 МЕ 2 " 6 " 6
В 179с В 120 М 93
and the Ball
Date 12.12.18 Demobilization Officer.
Demonization officer.
APPROVED. V
Documents as above forwarded to:—
Officer i c Records. Board of Pension Commissioners.
with following additional documents.
0 11d 1-1
Date DEC 1 2 1918 Bottail Capt
O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot
MATOEVEL Cast
Nea Klinic Run A
Date 200 10/1918

Attested	5268 Rank Pte Name Daylon, G. A. 215-18, Address Obert John Hall	
Allotment.	Allottee	h)
	for Overseas	
22-5-18 Va		un montessadion
13/98/	16 10 48	
20 10	75 10/13	
11-12-18	PASSED TO DEMOBILIZATION OFFICER	
12-12-1	DISCHARGE APPROVED OF DEMORILISATION.	

Taylor, Lo 5268 Aay Loepl.

January 9th., 1919.

#5268 Pte.George Taylor.

South Side,

City.

Dear Sir:-

Please find enclosed "Discharge Certificate No.379."

Yours faithfully,

Paymester & Officer i/w Records.

Enc 1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE
I. No. 5268 Rank 16 Name Glorge Laylor Intended place of residence. Southside Stylohas
2. Occupation Cooper Classification of soldier
3. The above named man is discharged in consequence of Almobility attor
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations. Place DEC 12 1918 Comanding Discharge Depot The Royal Newfoundland Regiment
CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE 5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection. Place and date Signature of soldier 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 Signature of soldier 12-12-18 Signature of witness
STATEMENT OF SERVICE 7. Enlisted for service . 2.1-5-18 No of days on Military Discharged from service . 12-12-18 Alw 28 Ways Service 23.4
8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i c Records, The Royal Newfoundland Regiment, twenty-eight days from date. Place Officer Commanding Discharge Depot The Royal Newfoundland Regiment. Date DEC 1 2 1918
9. The discharge of above mentioned sodier is hereby confirmed to bowless Capt Place The Course of State of St

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The Royal Newfoundland Regiment

DEMOBILIZATION OF
Reg. No 526 Rank Alt Name Jaylor Storge
Date of Enlistment 21.5.18 Address Sauthur District Holos
Recommendation S.M.B
Passed to Demobilization Officer with following documents:—
N.F. P 36
B 178
B 178a / D 400A
B 179 D 400B Form L do 3rd " 4
B 179a D 400C Form K
B 179b
B 179c
Monley Capt.
Date. 11.14 % O. C. Discharge Depot.
PARTICULARS FOR DEMOBILIZATION
I. Civil Re-Establishment.
I amin a position to resume civilian occupation.
[2018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018] [1018]
J Tuylor
Particulars passed to Vocational Officer for information and action.
Date
Date
2. Clothing.
2. Clothing. Certified that Clothing Regulations have been complied with:
2. Clothing. Certified that Clothing Regulations have been complied with:
2. Clothing. Certified that Clothing Regulations have been complied with: (a) Clothing Allowance payable.

3. Transportation and Release Certificate.	4cl
The above named has been provided with Ti	ravelling Warrant No
at and Release	Certificate No issued.
Date	KAS NUCKS PLUT
Date	Demobilization Officer
No.	
4. Pay and Allowances.	
The herein named soldier's accounts have be	een correctly balances and all matters in connection
therewith settled. He has received pay and all	lowances to
Date /2 - /2 - 18	/ /
	Depot Paymaster.
12 12 18	V
Discharge approved for	On the State of the contract the state of th
Forwarded with following documents to O.C I	Discharge Depot.
N.F. P 36 B 268 B 121	N.F. Med. D.F. 1
5 178 B 122	
B 178a D 400A B 1915	
3 179 D 400B Form L	do 3rd
B 179a D 400C Form K	do 4th " 5
B 179b B 103 ME 2	" 6
B 120 M 93	200.1
1- 12 18	LA BURGA
Date	The state of the s
	Demobilization Officer.
APPROVED.	
Documents as above forwarded to:—	
Officer i c Records. Board of Pension Commissioners.	
with following additional documents.	
	_#
	and the second contraction to the second contraction of the second con
DEC 1 2 1918	Ret Last Cant

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[P.T.O.

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

n n	MEDICAL		Y	
Surname Jaylor	onessel	OF Christian Nam	ne Georg	<i>pe</i>
	77 ble I.—GEN	IERAL TABLI	- 1	
/c	Vable I. GEN		11/11	
Birthplace:—Parish	your	Coun	y	
	SPECIAL	70.		R ARMY
Examined	on day of	May 1918	on day	of 191 -
n. 1. 1. 1.	at of years	— days	at year	rs days
Declared Age	60	601		
Trade or Occupation	1 feet	tuches	feet	inches
Weight		120 lbs.		lbs.
Chest (Girth when fully expanded		355 inches		inches
Measure- ment Range of Expansion		34 inches		inches
Physical Development				
	Right	Left	Right	Left
Vaccination Marks Arm Number				
When Vaccinated	61			
Vision	1 K V 9/8		R.E.—V= 1,.E.—V=	
Talou	L.EV= 6/60	and the second s	13.43.	·
1	(.)		(u)	
(a) Marks indicating congenital peculi-	(a)		(11)	
arities or previous disease				
	(b)		(6)	
(b) Slight defects but not sufficient to				
cause rejection				
Approved by (Signature)	La 10	Patern		
(Rank)	& ammit	areron		
(Kauk)	00	Medical Officer.		Medical Officer.
	at I the	9	at	
Enlisted	on 21 day	Name of Street, or other Designation of the Owner, where the Parket of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which i		of 191
	Corps.	/268	Corps	Regtl. No.
Joined on Enlistment	1000	200		1 1 1 1 1
	Makegt			
Transferred to	(Alasa			2 Com
Became non-effective by	on day	of 191	on day	y of 191
. (Signature				
(Rank)	St.			

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

g	icai App.	nances, ran	iculais of D	X-14 X-19-10 10 10 10 10 10 10 10 10 10 10 10 10 1	an ann an	nearly an account.	
Date	Brief Details, and Signatures						
			Contraction of the Contraction o				
			· ·				
22-5-18.	1/10		10				
13-6-18	1	u. z	90 10	•			
19-6-10	, ,	3		It is hereby certified			
				has been before a Tra Board and has been			
				for Discharg			
	-			for Discharg	eon		
No.				tion. Medical catego	FULL.		
	tion. Medical category A II 9 11 8 Down of T.M.B. Down of The Minds						
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		1	able IV.—Si	ERVICE TABLE.			
Station or Tr	oopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	
<u> </u>		,					
				4명에 로마일(many m 전) 함께 한 가게 되었다. [1] 이 이 경기가 있다면 하기 있다. [1] 1 시간 [1]			

N.M.D. Form D400A Sec [500-3-17]



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. iIc 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

George Taylor

Regiment from which discharged 1st. Newfoundland

Regimental number

5268

Intended address 81 Southside, St John's

Height on discharge 5 Feet

Color of hair on discharge Light

Complexion

Light

Color of eyes

Blue

Descriptive Marks

Figure on discharge

Christian name of Father Robert

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

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)

(Rank)

Station

Date

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

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

Civil Re-establishment Committee.



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To work as cooper

W of Daylor

Signature of Man.

Reg. No. 5268

OSDICKO ACALI

Place St Johns n.7. L.D.
Date 12/12/18. 191

The Royal Newfoundland Regiment

Cla	ss for Dem	obil-
	ization:—	
	1.	

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

Discharge Depot: Headquarters The Royal Newfou	ndland Regiment Date9.1V.18
	Date
Regimental No. 62.65	₽ ₽
Name Daylor Cigry	
South Sid	'e St Joha's
Address	
Present Medical Category.	
Recommended for:	(a) Immediate discharge
Accommended 1911	
	RHaut Capp.
	O.C. Discharge Depot.
	.00 1
Members of Board	Lo steron
	Senior Medical Officer
	1 See Burdon
	M. O. Depot
	M. O. Depot

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at 84.0	adjuntin may 21/15
1. Name Geveze Baylor	Age (a) Declared 2.4 (b) Apparent
2. Do you know of anything wrong with you?	0.1
What severe illnesses have you had?	1268
3. Height 5 ft 5 4. Eyesight (a) Left 6/60	Weight /20
4. Eyesight (a) Left 6/60	(b) Right 6/1
5. 4 Physical Defects (Examine after strenuous exerc	그러나 하나 사람들은 사람들이 살아 가지 않는 생활을 가내었다면 하는데 하나 하는데 하나 나는 아니라 하나 하는데 그렇게
6. Examination of Lungs Measurement (a) Expiration	32 (b) Inspiration 35 %
7. Examination of Heart W	
8. Examination of Urine 9. Examination of Mouth—(Defective Speech)	
Teeth	
Throat	1
Nose	
Ears—(Otorrhea)	
(Deafness)	
10. Have you been successfully vaccinated, and when	Robert & south side styling
Remarks	
AI	The Cenderon
	expersus

Medical Examiners.



THE ROYAL NEWFOUNDLAND REGIMENT

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Vo		N ame	\mathcal{O}_{-l}	-	Corps	, –	,,,,,,,,,,
	(duestions to be p	put to the	Recruit befo	re Enlistment	allo	
1. What	t is your name?			18118	Tuck	Sed 2	A
2. What	t is your full Ad	dress?	}	2		······································	
3. Are y	you a British Su	bject?		3 may of	p	•••••	
				136	None.	Months	
		r Calling?		5	a con .	Months	•
				5			•••••
7. Have	you ever served	in any Branch of r military, if so,*	His Ma)	7			
8. Are y		oe vaccinated or			60		
9. Are ye	ou willing to be e	nlisted for General	Service? 9	J. J.	alian area		
its me	ou receive a Notic aning, and who g	e, and do you un we it to you?·····	derstand) 10		Name	·····	
1. Are yo signed	ou willing to serve	upon the condition	ons as emb. d	ied in the rol	l of service to 1	be 11 - 12 5	
T	Leaning	Juge	00			are that the above ans	
2/5/	18	12	bay.	hort		GNATURE OF RECR	UIT.
		ajesty King George	the Fifth I		do make oath, t	that I will be faithful d that I will, as in on and Dignity agains	
	C	ERTIFICATE OF N	IAGISTRATE	OR ATTESTIN	NG OFFICER.		
		med de provided in	the Almy A	.33.	alse answer to a	any of the above quest	tions
		e then read to the					A.
nave	taken care that h	understands each	question, and	d that his answ	er to each quest	tion has been duly ent	ered
	day of	ruit has made and		eclaration and	ken the oath	before me at. f.	
i tilis	uay or		191 Attesting Off	icer	100000	10 hun	1
				ROVING OFFI			
I certi	fy that this Attest	ation of the above-	named Recru	ilt is correct, a	and properly fil	led up, and that the	re-
uired form	ns appear to have	been complied with	. I accordin	gly approve, a	nd appoint him	to the ‡	
	The state of the s	nority such will be	attached to	tne original at	testation.		
ate	Tophi	191				Annuari 0:	
lace	J					Approving Of	mcer.
	† The signature o ‡ Here insert the						

Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....on the (Date)

		DESCRIP Applicable to all rank		PORT C					•
Name	×	enge Jo	ylo		A Palenta				THE PERSON NAMED IN COMMENT.
Apparent a	ige	years C	mont	hs.	-1/-	EL COLOR		f	eet 5 inche
Chest Meas	surem	$\operatorname{ent} \left\{ egin{aligned} \operatorname{Girth when fu} \\ \operatorname{Range of expa} \end{aligned} ight.$		31/2	inches	inch	es		
Distinctive	mark	s							
		INFORMA	TION S	UPPLIE	D BY	RE	CRU	IT	
8/S	Addre	ss of next of kin	affer	Relatio	nehla	75	ia	7/	en .
			Particula	rs as to M			*		
(a)	Christia	n and Surname of Woman t				Sec. 1	. (6) P	lace and	date of marriage.
	(a)		(b)	/ Initials of O		c)			(d)
			Particul	ars as to C	hildren				
	Chris	tian Names					Date	and Plac	ce of Birth
									:
		STATE	EMENT	OF TH	E SEI	RVIC	ES		1
Corps in R	gt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	lowed to	not al- oreckon ing the pension	Service serve no ed to rec wards G	in Re- t allow- kon to- C. Pay	Signature of Officers cert fying correctness of entries
			<u> </u>		Years	Days	Years	Days	
Service toward Joined at	s limited	l engagement reckons from	n		_				
					_	-			
					_				
				500					
			A trans	550	.9				
			A trans	550	.9				
			A trans	350	.9				
			bag.	55,00					
Total	Service	forfeited as above			9				

Nº 4131



1ST. NEWFOUNDLAND REGIMENT

	Whether Wife, Child, other Relative or Friend	Name (in full)	Address	AMOUNT (each perso
709	Hotter	-falest Haylor	81 Louthride	
			J	
			,	
si	his form must be co	mpleted by the Officer Commanding Commanding Company and handed	Total Allotment, S Company, signed by the Volum to the Paymaster as authority	teer, counter to make th

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. HOHN'S. am Glorgesumane. Jaylor. . 4. Regtl . No. 3. 268 5.Address in full to which future payments of gratuity are to far be iam yearge Jaylor. 6.Date of enlistment in the Regiment. May. 2.1..... 7. Hame of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge...... 8. Relationship of sech dependents..... Not ... Shplicable 9. Address in full of such dependent ... 10. Is said dependent, now, or was said dependent at my time in receipt 11. Were you on active service only in Nfld. If so, give dates, and partic-

12. Give total length of time which you served on active service, if whether in Nfld, or Overseas.....

Service ofly in St gohns.

Mas on service 18 4 Days in ally

ulars of such service

DEPARTMENT OF MILITIA.

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13. Have you had more than one enlistment? If so, give particulars of
discharge and re-emlistments, and under what regimental numbers
W.O
••••••••••••
- not post Discherge Day Or
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
15. Have you been issued with a War Service Bodge?
16. Have you during the present wor, served in the imperior forces,
17 Are you entitled to receive, or have you received any Gratuity in
the nature of Bost Discharge Pay from the Imperial Forces? If so,
state amount received, or to which you are entitled
To mid wait rewart Overseas to a rank lower than the substantive rank
held by you on your arrival in ingland?
(b). If so, was such reversion in consequence of misconduct or in-
efficiency?
19. Are you now serving in the Regt.? . 910 If not give: - (a) Date
of discharge. Der. 12.19 (8. (b) Reason for discharge. Breauth.
and services were no longer release.
account of war bung over
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
21.(a) Are you receiveng treatment from the Civil Re-Establishment Com.?
(b). If \$6), are you in receipt of full pay and ellowences from that
Germitice. M.O
and I make this selemn declaration conscientionsly believing it to be true, and knowing that it is of the same force and effect as if made under eath.

-3-

Signature of Applicant: William George South of State of Residence: St John:

Declared before me at:

This day of Many 19,15 Carfful

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

PO Da te paid	Paid Soldier	GE PAY: : Poid Dependent	War Scrvice Gratuity	Not mount due
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	Certified C	correct.	PG	yraster.

Nº 4131



1ST. NEWFOUNDLAND REGIMENT

Identity Certificate No. Whether Wife, Child, Other Relative or Friend NAME (in full) ADDRESS (e	Amount each person)
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	5
. 0	
Total Allotment, \$	7

Nº 4131



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	Na.	ME (in full)		Address	AMO (each p	
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si	his form must be co	Commanding	ne Officer Commandi Company and hanc	ng Company, sig	gned by the Volun	teer, con to mak	unt ce 1