



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4734 Name Alfred Batstone Corps Infantry

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Alfred Batstone</u> |
| 2. What is your full Address? | 2. <u>English Har, T B</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>4</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

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

A 26-4-18 Alfred Batstone SIGNATURE OF RECRUIT.
James Arklie Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Alfred Batstone do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St Johns on this 26 day of April 1918

Signature of Attesting Officer [Signature]

CERTIFICATE OF APPROVING OFFICER

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the
if enlisted by special authority, such will be attached to the original attestation.

Date 1918
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.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows: viz.—(Name) re-enlisted in the (Regiment) on the (Date)

C.R. 4734

Extract from Daily Orders Part 11 Unit The Royal Wfla.
Regt. Depot St. John's, June 11th, 1919

The discharge of the undernoted on demobilization has
been APPROVED by. O.C. Discharge Depot with effect from
21-5-19.

4734 Pte. A. Batstone.

C.R. 4734

Extract from Daily Orders Part 11 Depot, St. John's,
Date 10-6-19.

4734 Pte. A. Batstone

Reported at Headquarters 1-6-19. EX "Corsican"
which sailed Liverpool May 22/1919.

C.R. 4734

Extract from Nominal Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#4734 Pte. A. Batstone.

C.R. 4734

Extract from Nominal Roll of Draft No. 56, from the 2nd.,
Battalion of the Newfoundland Regiment to the 1st.,
Battalion of the Newfoundland Regiment, Winchester.
Embarked Southampton 23/11/18.

#4734 Pte. A. Batstone.

CR 4734

Extract from Daily Orders part 11, from ~~2211222222~~
~~222222~~, from Unit The Royal Field Regt, St. John's,
dated July 28, 1916.

The following man embarked for overseas on the
H.S.M. the "Columbell" July 28, 1916.

#4734 Pte. Alfred Batstone

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 29, 1918.

#4734 Pte. A. Batstone.

Attested for General Service with the Royal Newfoundland
Regt. from 26/4/18.

A. Bakstone

C.R. 4734

~~PRO~~

Medical Report on an Invalid.

Station Ragley Down.Date 1-5-19

1. Unit Royal Newfoundland.
2. Regimental No. 4437
3. Rank Pte
4. Name Batson. A.
5. Age last birthday 22.
6. Enlisted $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$ 26th April 1918
St Johns
7. Former Trade } Fisherman
or Occupation }
- 7a. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries in the Medical History Sheet bearing on the case.

no

no

no

no

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

na.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

He complains of no disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

If so—(a) When?

- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what?

no,

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

no.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

no.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

no.

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Depulvation

W.S. Proctor

Capt. Rame
Trainer W.S.P.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Hayley Down*

Date *1-5-19*

Officer in charge of Hospital.

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

† Delete this word if no exceptions are to be made.

Watstone, A.

4734

Ray Sept.

July 16, 1919

#4734 Pte. Alfred Batstone,

English Harbor, T.B.

Dear Sir:-

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

Yours truly

Captain & Paymaster

DEPARTMENT OF MILITIA.
WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 28th. 1918.

A complete reply must be given to every question in this Declaration there must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name..... *Alfred*
S. Rank..... *Pte.*
6. Address in full to which future payments of gratuity are to be forwarded..... *English St. J. B.*
6. Date of enlistment in the Regiment..... *apl. 26/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
8. Relationship of such dependents.....
9. Address in full of such dependents.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Wld. If so, give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service, whether in Wld. or Overseas..... *From apl. 26/18 to June 7/19* 13.

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

No

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

15. Have you been issued with a War Service Badge? *No*

16. Have you, during the present war, served in the Imperial Forces? *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

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

19. Are you now serving in the Regt.? *No* If not give - (a) Date of discharge *June 7/19* (b) Reason for discharge *Temporary Demobilization*

France, Belgium + Germany from Nov. 11/18 to Sept. 1919

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 receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee? *No*

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

Signature of Applicant: *Alfred Batstone*
 Place of Residence: *English A. T. B.*
 Declared before me at: *N. John, Nfld*
 This *7th* day of *June* 19*19*
John W. Taggley

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

POST DISCHARGE PAY.				
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....
.....
.....
Certified correct.				Paymaster

July 5, 1919

#4734 Pte. Alfred Batstone,

English Harbor, T B.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2538.

Yours truly

Wm. J. ...
Major & C. i/c "records."
Captain D.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4734 Rank Pvt. Name Batstone, R.
 Intended place of residence English H^{rs} Bonaville

2. Occupation Tradesman
 Classification of soldier E Medical Category A 2

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S JUN 7 1919
 Date ST. JOHN'S JUN 7 1919 J. H. Mousley
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S JUN 7 1919
D. Batstone
 Signature of soldier
W. B. [unclear]
 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 ST. JOHN'S 7-6-19
A. Batstone
 Signature of soldier
James O. O'Sullivan
 Signature of witness JM-

STATEMENT OF SERVICE

7. Enlisted for service 26-4-18 No of days on Military
 Discharged from service 21-6-19 plus 14 days Service H. 36a

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S JUN 21 1919
R. H. [unclear]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment
 Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place St. John's H^{rs} May 5/1919
 Date

M. Rowley Capt
 Officer in Charge of Records
 The Royal Newfoundland Regiment

27 B2079/2638

The Royal Newfoundland Regiment

Class for Demobilization: *B.*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *6.6.19*

Regimental No. *4734*

Name *B. Atkinson*

Address *English Hs.*

Present Medical Category *A.I.*

Recommended for:— { (a) Immediate discharge
(b) Standing Medical Board

Members of Board {

R.H. [Signature]
O.C. Discharge Depot.

[Signature]
Senior Medical Officer

[Signature]
M. O. Depot

The Royal Newfoundland Regiment

DEMOLIBIZATION OF

Reg. No. 4734 Rank Plt Name Paterson Alfred
 Date of Enrollment 26-4-18 Address English Mt. Bonaville District H1
 Occupation Postman Classification for Discharge J.F. Medical Category H1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 6-6-19

O. C. Discharge Depot

PARTICULARS FOR DEMOLIBIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation. Paterson

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable..... 60/-

(b) Clothing Supplied

Date 7-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R1549B.615 to his home at English Hill and Release Certificate No. 2448 issued.

Date 7-6-19 J.A. Brown Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 5-7-19

Date 7-6-19 J.A. Brown Capt.
Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P126	B 268	B 121	/	N.F. Med.	D.F. 1	/
E 173	W 3494	B 122	/	Board 1st	" 2	/
B 178a	/ D 400A	/ B 1915	/	do 2nd	" 3	2 Form B
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	/ D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B.120	M 93				

Date 7-6-19 J.A. Brown Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 21 1919 R.H. Sait Capt.
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former Occupation

A. Botstone
Signature of Man.

Reg. No. 4734

J. A. Snow Capt.
Signature of the Vocational Officer or his Representative.

Place P. Johns

Date JUN 7 1919 191

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

MEDICAL HISTORY

Surname Batstone OF Christian Name Alfred

Table I.—GENERAL TABLE.

Birthplace:—Parish English Har., County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>26</u> day of <u>April</u> 191 <u>8</u>		on day of 191	
	at <u>St John's Nfld.</u>		at	
Declared Age	<u>21 1/2</u> years days		years days	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>3</u> inches		feet inches	
Weight	<u>118</u> lbs.		lbs.	
Chest Measurement	Girth when fully expanded... <u>34 1/2</u> inches		inches	
	Range of Expansion... <u>2 1/2</u> inches		inches	
Physical Development				
Vaccination Marks	Arms	/		
	Number			
When Vaccinated				
Vision	R. E.—V=	<u>6/6</u>	R. E.—V=	
	L. E.—V=	<u>6/4</u>	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lammie Parsons</u>			
(Rank)	<u>Major</u>		Medical Officer.	
Enlisted	at <u>St John's Nfld.</u>		at	
	on <u>26</u> day of <u>April</u> 191 <u>8</u>		on day of 191	
Joined on Enlistment	Corps.	<u>The Royal Nfld Regt.</u>	Corps.	
	Regtl. No.	<u>4734</u>	Regtl. No.	
Transferred to				
Became non-effective by	on day of 191		on day of 191	
(Signature)				
(Rank)				



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 *Batstone Alfred*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4734*

Intended address *English St.*

Height on discharge *5* Feet *7"*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *medium*

Christian name of Father *Richard*

Christian name of Mother *Jean*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *English St. 1898 Dec 22nd*

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)

Alfred Batstone

(Rank)

Sgt.

Station **ST. JOHN'S.**

Date

6.6.19

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

Station

Date



The Royal Wld. Regiment

DEMOBILIZATION

No. 4534 Rank _____

Name Batson G

Warned for demobilization on

JUN 7 1919

Medical Report on an Invalid.

Station Hapeley Down CampDate 1. 5. 19

1. Unit Royal Newfed
2. Regimental No. 4734
3. Rank Rt
4. Name Ratton A.
5. Age last birthday 22
6. Enlisted { on April 26 1918
at St John
7. Former Trade } Fisherman
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional, or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.
- na

13. What is his present condition?

No complaint of no disability

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

If so—(a) When?

- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what?

na

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

na

18. *In case of loss or decay of teeth:* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Repatriation

*W. E. Proctor, Capt. R.A.M.C.
Sgd. M.D. Major*

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *H. A. Camp*

Officer in charge of Hospital.

Date *1. 5. 19*

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

† Delete this word if no exceptions are to be made.

Casualty Form - Active Service.

Regiment of Corps 1st Newfoundland
 Rank Pte Surname Batstone Christian Name A
 Religion Methodist Age on Enlistment 21 years 4 months
 Enlisted (a) 26/4/18 Terms of Service (a) Duration Service reckons from (a) 26/4/18
 Date of promotion to present rank Date of appointment to lance rank
 Extended (.....) Re-engaged (.....) Qualification (b)
 or Corps Trade and Rate
 Occupation Fisherman Signature of Officer M. Hodkapp

Report		Record of promotions, reductions, transfers, casualties, etc., 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 such case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...	28 NOV	1918	
		Joined Batt.	5	1 JAN 1919	
		Arrived in UK		23/7/19	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoelns-Smith, & Co. (L7521.) W.L. W 1557-P 1154. L 500,000. 6/25. D & S. Form B.105. (E. 1355.)

P.T.O.

Next of Kin: Father: Batstone Richard English 22: 1. Bay: 70 of L. D.

FORM K

Nº 4670



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Alfred Batstone, Regl. No. 4734
hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Sixty Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and} or Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and} or Persons
concerned, viz.:

Allotment begins 16-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4310	Mother,	Mrs. Richard, (Emma Jane) Batstone,	English Hr, T. Bay.	60
			Total Allotment, \$	60

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.) [Signature]
Officer Commanding
A. Company
St. John's.
10-6 1918

(Sig.) A. Batstone
(Rank) Pte.

The Royal Newfoundland Regiment 84734

DEMobilIZATION OF

Reg. No. 4734 Rank Mr. Name Batstone Address Bonaville
 Date of Enlistment 26-11-18 Address English Pt. District Bonaville
 Occupation Postman Classification for Discharge F Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	/	N.F. Med.	D.F. 1	/
B 178	W 3494	B 122	/	Board 1st	" 2	
B 178a	D 400A	B 1915	/	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2		" 6	" 6	
B 179c	B 120	M 93				

Date 6-6-19

for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

A. Batstone

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$65.00

(b) Clothing Supplied _____

A. Batstone

Date 7-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *TR 1549.8.615* to his home at *English Hill* and Release Certificate No. *2448* issued.

Date *7-6-19*

J.A. Shaw Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *5-1-19*

Date *7-6-19*

H. Huskint
Depot Paymaster.

Discharge approved for *21-6-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *7-6-19*

J.A. Shaw Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

11111 01 1919

Date

R.H. Sait Capt.
O. C. Discharge Depot.

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

Date *June 14/19*

Jane Hathfield
London

Reg. No. *4734* Rank..... Name *Watson, A.*
Attested Address *English St.*
Allotment..... Allottee ..
Date of Allotment..... Returned from Overseas *1.6.19*
Returned on S S *7.0.19* Cause *Discharge.*

6.6.19
21.6.19

~~PASSED TO DEMOBILIZATION OFFICER~~

DISCHARGE APPROVED ON DEMOBILIZATION.