



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

**C.R. 4294**

No. 4294 Name Wilson Billard Corps Cof S.

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Wilson Billard</u>           |
| 2. What is your full Address? .....  | 2. <u>Rue Bleue</u>                |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>-</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, Wilson Billard 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.

11. 7-1-18 Wilson Billard SIGNATURE OF RECRUIT.  
[Signature] Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Wilson Billard 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 [Signature] on this 7 day of July 1918.  
[Signature] Signature of Attesting Officer

### †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 complied with. I accordingly approve, and appoint him to the;.....  
 If enlisted by special authority, such will be attached to the original attestation.  
 Date July 7 1918 } Approving Officer.  
 Place [Signature] }

† 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).....



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

C.R. 4294

No. 4294 Name Wilson Billard Corps Cof S.

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

- |  |                                      |
|--|--------------------------------------|
| 1. What is your name? .....  | 1. <u>Wilson Billard</u>             |
| 2. What is your full Address? .....  | 2. <u>Rue Blanch</u>                 |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                        |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>---</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, Wilson Billard.....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.

11. 7-1-18

Wilson Billard SIGNATURE OF RECRUIT.

Regiment Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at.....

on this 7 day of Jan 1918

Signature of Attesting Officer

John  
Money

### †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 complied with. I accordingly approve, and appoint him to the.....

If enlisted by special authority, such will be attached to the original attestation.

Date Jan 7 1918

Place St John's

} 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).....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Nelson Belleard  
 Apparent age 18 years — months. Height 5 feet 7 inches  
 Chest Measurement { Girth when fully expanded 34 inches  
 Range of expansion 4 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Samuel R. Belleard  
Rue Blanche | Relationship 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

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>7-1-18</u>									
Joined at <u>St John's</u> on <u>January 7-1918</u>									
<u>Discharged July 31 1919</u>									
<u>Embarked St John's by train to Halifax at 11 3/8.</u>									
<u>Embarked for 136 S. 23-9-18. Joined base depot 25-9-18</u>									
<u>Joined 136 S. on the field 6-10-18. Wounded 14-10-18</u>									
<u>Admitted 34th Hosp. to 1st S.W. Hospital 14-10-18. Admitted 53rd Gen Hosp</u>									
<u>Base Depot 11-10-18. Joined base depot 4-11-18. Received sent 14-1-19.</u>									
<u>Transferred from 136 S. 22 7/8. Arrives Newmarket 23-4-19. To file for</u>									
<u>demobilization 22-5-19. Arrives Leamington 1-6-19/19.</u>									
<u>Total Service forfeited as above.</u>									
<u>Demobilized from St John's 3-7-19</u>									
Total Service towards Engagement to <u>3-7-1919</u> (date of discharge) <u>1</u> years <u>178</u> days									
" " Pensions " " " " " " " " " " " "									

C.R. 4294

Extract from Daily Order part II, Init the R.Nfld.R.  
dated July 5th. 1919.

The discharge of the underoted on demobilization on  
has been ~~OFFERED~~ CONFIRMED by officer i/c Records on noted date.

#4294 Pte. Wilson Billard.

3-7-19.

C.R. 4294

Extract from Daily Orders Part 11 Unit The Royal 2214.  
Regt. Depot St. John's, June 9th, 1919.

The discharge of the following on demobilization has been  
APPROVED BY by C.O. Discharge Depot with effect from 19-6-19

4294 Pte. Wilson Billard.

C.R.

4294

Extract from Daily Orders Part A1 Depot, Sp. Johns,

Date June 7th, 1919

4294 Pte. Wilson Billard.

Reported at Headquarters 1-6-19.

ex "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4294

**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.

74294 Pte. W. Billiard.

C.R. 4294

Extract from War Office Let. No. G. 1722. Dated 1. 11. 18.

4294 Pte. W. Billiard.

WOUNDED 14. 10. 18.

BG.



313

C.R. 4294



EXPEDITIONARY FORCE FRANCE

Amendments to Nos. H.A. 30129, & H.A. 31109.

Amendment to H.A. 30129.

O.C. 12 Con. Dep. Aubenque reports :-

PLEASE READ:-

234295 Spr. McNiven D.

RE. 277 R.C.C.

Lac. Fgr. L. Aoc.

NOT:- RE. 227 R.C.C.

Dis. to 5 Rest Camp St. Martins 7 Oct. 18.

-----

Amendment to H.A. 31109.

O.C. 12 Con. Dep. Aubenque reports:-

PLEASE READ:-

4294 Pte. Billard W.

1/NEWFOUNDLAND RGT.

G.S.W. Shldr. R.

NOT:-

4294 Pte. Billard W.

1/N. Fus.

Dis. to 5 Rest Camp St. Martins 30 Oct. 18.

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# NEWFOUNDLAND 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.

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

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

**(NOT TRANSMITTED)**

**Dep t of Militia.**

Signature of Sender \_\_\_\_\_

Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

*Dated* Oct 25th, 1918

*To* Samuel R. Billiard, Rose Blanche

Regret to inform you that Record Office, London, officially reports No. 4294, Private Wilson Billiard at 53rd General Hospital Boulogne Oct. 15th suffering from G.S.W. right shoulder mild.

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

J.R. Bennett

Charge to Dept of Militia.

Minister of Militia.

C.R. 4294

EXTRACT FROM W. O. ~~LIST.~~ # H. A. 30542

#4394 Pte. W. Billard.

G.S.W., shoulder

Admitted to Con. Dep. Aubengue 18 Oct. 1918.

C.R. 4294

Extrac from War Office List No. H. A. 30423. dated 24th Oct. 1918

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ADMITTED 53 GEN. H. BOULOGNE BASE 15th OCT. 1918.

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4294 Pte. W. Pillard.

G.S.W., R. SHOULDER MILD

BC.

C.R. 4294

Extract from Nominal Roll Embarked St. John's for Overseas,  
Mar. 28, 1918.

4294 Pte. Billard W.

C.R. 4294

Extract of Daily Orders Part 11, from 4/1st  
Royal Newfoundland Regiment, Headquarters,  
dated January 8, 1918.

#4294 Pte. W. Billiard.

Attested for General Service with the 1st Nfld.  
Regiment, posted to H. Coy' and given Numbers as  
shown, with effect from January 7, 1918.

C.R. 4294

7342

James

Rose Blanche  
October 30<sup>th</sup> 1918.

Dear Sir:-

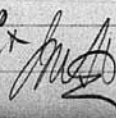
Could you forward  
me my Great War Ribbon  
Served in the Army,  
as Private

sent. ?  
12/11/19. Wilson Billard  
Reg 4294

Dear Sir:-

Could forward  
me my Great War Ribbon  
Served in the Army

? as Private  
William Hendtke

2/Lt  Reg 4988

sent 13/11/19.

10/11/19

C.R. 4294

December 16th 1919.

4294, Ex. Pte. W. Billiard,  
Rose Blanche.

Dear Sir:-

Enclosed herewith is "Shooting Medal" awarded to you and your Squad as winners of the Bennett Challenge Cup, 1918, for the best shooting during the competition held at Winchester, July, 1918. Congratulations.

Kindly sign the enclosed receipt and return to this Office, please.

Yours faithfully,

Lieut.

CASUALTY OFFICER.



W. Sillard

C.R.

41294

~~SAC~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfound Land*
2. Regtl. No. *4294* 3. Rank. *pl*
4. Name *Billard Williams*  
(Surname) (Christian Names)
5. Age last birthday. *19*
6. Posted for duty on *Jan. 1/18* at *(A. I. S. H. S.)*  
in category (or grade).....
7. Former Trade or Occupation } *Tradesman*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps ;  
with Regtl. Nos.
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—  
(a) When (b) Date of Discharge ;  
(c) Opinion of Court (d) Cause of Discharge.  
(d) Particulars of Pension or Gratuity  
(if any)

NOTE.—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 in charge of the case.

### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal 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. *nil*
12. Place of origin of disability. *nil*
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. *nil*

14. State whether the disabilities are (a) attributable to (b) aggravated by

- (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 all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

*See appendix for details*

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 or have been aggravated by service during 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.

*Repatriation*

*W. E. P. ...*

*Capt. Kane*

Station: *Hazeley Brown*

Medical Officer in charge of case.

Date: *29/11/19*

\* 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



No. 11352/1124

N.F.P./79.

From:

NEWFOUNDLAND CONTINGENT

Chief Paymaster & O. i/c Records,  
Newfoundland Contingent,  
Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1.

Officer Commanding,  
2<sup>nd</sup> Bn Royal Newfoundland Regt.  
Winchester.

15th July 1918

Subject: 4294, Pte. W. Billiard

With reference to the following telegram (6328) from the Hon. Minister of Militia, received

Pay to ~~4294~~ Billiard £7:0:0

Draft £ 7:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*J. H. Marshall Capt.*  
Chief Paymaster & O. i/c Records.

17. 9. 18 191

Receipt hereunder.

*Oram* LIEUT. COLONEL,  
COMMANDING OFFICER, ~~2<sup>nd</sup> Bn~~ ROYAL NEWFOUNDLAND REGT.  
Royal Newfoundland Regiment

Received the sum of £ 7

Seven pounds on account of cable remittance from Newfoundland.

*W. Billiard*  
No. 4294 Rank Pte

Witness: *n27 J. Murphy*  
*Pte*

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

Sir:-

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

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature:
4294	ATS	Sillard, G.	\$2.50	

I have the honour to be, Sir,  
~~Yours faithfully~~  
Your obedient servant.

Date

June 28<sup>th</sup> 1918

W. Sillard

To:

Samuel Billard

Rose Blanche

Newfoundland.

Cable nine pounds through  
Militia.

A 294. Pt. W. Billard

215

No. 5965/298

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

Chief Paymaster & O.i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

To: Officer Commanding,  
1/Bn. Royal Newfoundland Regiment,  
B.E.F.

16th April 1919

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4294 Pte. Billard W.

With reference to the following telegram from the Minister of Militia, / / ( 137 )

"Pay to- 4294 Billard,  
£9. 0. 0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

*[Handwritten Signature]*  
Chief Paymaster & O. i/c Records

*Deposited*



*a*

No. *4294* Name *Pte Billard w* Sqn., Batty., } *C* Corps *2/1 Royal Wld* Date of enlistment } *7-1-18* G.C. Badges } *1* Service or Proficiency Pay } *Good*

Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. } Signature O.C. } Company, etc. } *W. Long Capt* Character *Good*

Army Form B. 122.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
									<i>10-8 14/10/18</i>

*Temporary*

No. *4294* Name *Bellord W* Sqn., Batty., } *A* Corps *Royal Newfoundland Regt* Date of enlistment }  
 or Company } }  
 Date of last entry in } No. and date } Period not reckoning towards } Sheet No. *one* } G.C. } Service or }  
 Company Conduct Sheet } of last drunk } freedom from extra fine } } Badges } Proficiency Pay }  
 Signature O.C. } *R. Evans* } Character *Good* }  
 Company, etc. }

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>Ronan</i>	<i>14-4-19</i>	<i>Pvt</i>		<i>Deficiency of Kit Value -/3<sup>d</sup></i>	<i>COMS Wardlaw</i>	<i>Reef for Same</i>	<i>15-4-19</i>	<i>Mr Bernard</i>	<i>1082</i>

Army Form B. 122

Billard, W.

4294

Ag Sept.

July 3, 1919

#4294 Pte. Wilson Billard,

Rose Blanche.

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 & O.i/c Records.

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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. 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..... *Wilson* ..... 2. Surname..... *Billard* .....

3. Rank..... *Pfc* ..... 4. Reg't. No..... *4294* .....

5. Address in full to which future payments of gratuity are to be forwarded..... *Rose Blanche* .....

6. Date of enlistment in the Regiment..... *Jan. 2/18* .....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *No* .....

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?..... *No* .....

11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas* .....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From Jan. 2/18 to June 5/19* .....

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.? If not give? - (a) date of discharge.

*June 5/19*  
*Temporary*

*No*

(b) Reason for discharge.

*Demobilization*

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.

*France, Belgium & Germany - From Sept 1918 to April 1919*

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.

Wilson Billard

Signature of Applicant:

Place of Residence: *Rose Blanche*  
*St John's, Nfld*

Declared before me at:

This *5<sup>th</sup>* day of *June* 19...*19...*

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

*John M. Carthy*

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount
.....	.....	.....	<i>5 mos.</i>	<i>280</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Paymaster <i>[Signature]</i>

July 3, 1919

#4294 Pte. Wilson Billard,

Rose Blanche, Hfid.

Dear Sir:-

Please find enclosed Discharge  
Certificate No. 2265.

Yours truly

Captain  
Paymaster & Officer i/c Records.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4294 Rank Plt Name Billard Wilson  
 Intended place of residence Ros. Blanche

2. Occupation Intermar  
 Classification of soldier R Medical Category A1

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  
 Date JUN 5 1919 *for* Must  
 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 5 1919  
 Signature of soldier Wilson Ballard  
 Signature of witness A. McBlouston

### 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  
5-6-19  
 Signature of soldier Wilson Ballard  
 Signature of witness W. J. Scatton

### STATEMENT OF SERVICE

7. Enlisted for service 7-1-18 No of days on Military  
 Discharged from service 19-6-19 Plus 14 days Service 543

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S  
JUN 19 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment. R. H. Last Capt

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place St. Johns, Nfld  
 Date July 27 1919  
 Officer in Charge  
 The Royal Newfoundland Regiment. M. Bowley Capt

2079/2265

25  
28  
30  
31  
20  
3  
78

## 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

Signature of Man. *W. B. Beard*  
Reg. No. *418*

*W. B. Beard*  
Signature of the Vocational Officer or his Representative.

Place

*St Johns.*

Date

*5 - 6*

1919

# The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date .....

Regimental No. *4294*.....

Name *Blouche* .....

Address *Blouche* .....

Present Medical Category *A.I.* .....

Recommended for:— { (a) Immediate discharge .....

(b) ~~Standing Medical Board~~ .....

Members of Board {

*R.H. Last Capt*  
.....  
O.C. Discharge Depot.

*L. Pearson*  
.....  
Senior Medical Officer

*See Burden*  
.....  
M. O. Depot

**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps... *Royal Newfoundland* } Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4294* 3. Rank... *3rd Lieut* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Billard* *William* (Surname) (Christian Names) (a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday... *19*
6. Posted for duty on *Jan. 1/18* at... *St. John's* in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge ;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal 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. *nil*
12. Place of origin of disability. *nil*
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. *nil*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (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 all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and to cases of amputation the exact position should be stated.

15. What is his present condition ?  
*(A note should be made, as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

*Re complains of no disability.*

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

*na*  
*na*  
*na*  
*na*

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.

*Repatriation*

Station *Bazely D. Camp*

Date *29.4.19*

*W. S. Drommer Capt R.A.M.C.*  
 Medical Officer in charge of case.

\* 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

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4397 Rank Pvt. Name Billard Wilson  
 Date of Enlistment 7-1-18 Address 125 Regent District Burgoyne  
 Occupation Tradesman Classification for Discharge E Medical Category H  
 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 11-3-19

O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment

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

*Wilson Ballard*

Particulars passed to Vocational Officer for information and action.

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00(b) Clothing Supplied Am. G. L. SmithDate 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R.1478.9581* to his home  
 at *Rose Blanche* and Release Certificate No. *2338* issued.

Date *5-6-19*

*W. Blomster*  
 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 *3-9-19*

Date *5-6-19*

*J. H. [unclear]*  
 Depot Paymaster.

Discharge approved for *19-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
E 178	W 3494	B 122	Board 1st	" 2
R 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 *5-6-19*

*J. A. [unclear] 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**

*R. H. [unclear] Capt.*

Date *JUN 19 1919*  
*6161 61 MAG*

O. C. Discharge Depot.

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

Date .....

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

# MEDICAL HISTORY

OF

Surname

*Bellard*

Christian Name

*Wilson*

Table I.—GENERAL TABLE.

Birthplace:—Parish

*Rose Blanche*

County

*Nfld.*

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 7th day of <i>July</i> 191 <i>8</i>	on	day of	191
	at <i>St. John's</i>	at		
Declared Age	18 years	— days	years	days
Trade or Occupation	<i>Fisherman</i>			
Height	5 feet	7 inches	feet	inches
Weight		137 lbs.		lbs.
Chest Measurement	Girth when fully expanded...			inches
	Range of Expansion...			inches
Physical Development				
Vaccination Marks	Arm	<i>1 Scar</i>		
	Number			
When Vaccinated				
Vision	R.E.—V= <i>6/6</i>		R.E.—V=	
	L.E.—V= <i>6/6</i>		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)	<i>Lamm St. John</i>			
(Rank)	<i>Major</i>			
	Medical Officer.			Medical Officer.
Enlisted	at <i>St. John's</i>	at		
	on 7th day of <i>July</i> 191 <i>5</i>	on	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment				
Transferred to	<i>Royal Nfld Regt 4294</i>			
Became non-effective by	on	day of	191	on
			day of	191
[Signature]				
[Rank]				





The Royal Nfld. Regiment

DISEMBARKATION TICKET

Group No. .... **6** .....

No. **4294** ... Rank .. **Private** ..

Name .. **Wilson Billard** ..

Address .. **Ross Blanche** ..

Leave Expires

**R. J. Sait Capt**  
**JUN 4 1919**



## 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 *Wilson Billard*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4294*

Intended address *Rose Blanche*

Height on discharge *5* Feet *"*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Tattoo mark left forearm*

Figure on discharge *Normal*

Christian name of Father *Samuel*

Christian name of Mother *Mary*

Wife's maiden name in full *-*

Date and place of marriage *-*

Christian names of children *-*

Place and date of soldier's birth *Rose Blanche Dec. 12, 1900*

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)

*Wilson Billard*

(Rank) *Pte*

Station

*St. John's Inf*

Date

*11-6-18*

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.

Station

Date

Outfit Number.....*X*.....

Result of the examination of the specimen of.....*Troat*..... taken from

Reg. No. *4294* Rank.....*Pvt*..... Name.....*Billard*

Corps .....

Result.....*diphtheria bacilli not found*.....

RECEIVED  
31 . III 1918

*August 1<sup>st</sup> 1918*

*R. A. Hyester*

Specialist Sanitary Officer.

TO BE LEFT BLANK.

**1ST. NEWFOUNDLAND REGIMENT****ALLOTMENTS**I, *Wilson Billard*, Regl. No. *4294*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 <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof  
of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons  
concerned, viz.:Allotment begins *April, 1st, 18*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>3779</i>	<i>Brother</i>	<i>Saml Billard</i>	<i>Rose Blanes</i>	
				<i>60</i>
Total Allotment, \$				

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.) *Wilson B*

Officer Commanding

Company

(Sig.) *Wilson Billard*(Rank) *Pte W**Johns**March 12<sup>th</sup> 1918*

FORM K

No 3897



1ST. NEWFOUNDLAND REGIMENT

**ALLOTMENTS**

I, Wilson Ballard, Regl. No. 4294

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 <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz :

Allotment begins April 1st 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3779	Brother	Saml Ballard	Knox Barracks	60
Total Allotment, £				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) Wilson Ballard

Officer Commanding  
Company

(S) Wilson Ballard

(Rank) Pte IV

W. J. Jones  
March 12<sup>th</sup> 1918

**The Royal Nfld. Regiment**

**DEMOBILIZATION**

No. 4194 Rank

Name William W

Warned for demobilization on

**JUN 5 1919**

**Casualty Form—Active Service.**

Regiment or Corps *Royal Newfoundland*  
 Rank *Pte* Surname *Billard* Christian Name *Wilson*  
 Religion *C. E.* Age on Enlistment *18* years *—* months  
 Enlisted (a) *7-1-18* Terms of Service (a) *Duration* Service reckons from (a) *7-1-18*  
 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. B. [Signature]*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	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				
<i>20-9-18</i>		<i>AE</i>	Embarked ... <i>23/9/18</i>		
	<i>James Hunt 4/10/18</i>	<i>ARRIVED 'D' I.B.D.</i>	Disembarked... <i>25 SEP 1918</i>		
		<i>Wounded in Action</i>	<i>14/10/18</i>		
	<i>3 Ave CCS</i>	<i>Ad PW Shearman</i>	<i>14/10/18</i>	<i>E.D.P.200</i>	
	<i>53 Gun 4th</i>	<i>- D -</i>	<i>B Gue</i>	<i>15/10/18</i>	<i>TR. 30422</i>
	<i>12 Coasep</i>	<i>Arrived</i>	<i>Antwerp</i>	<i>16/10/18</i>	<i>Reg. 31502</i>
	<i>'D' I.B.D.</i>		<i>Revan</i>	<i>21/10/18</i>	<i>Rael</i>
		<i>Requires Unit 14/11/18</i>			<i>B.213 24/1/19</i>
	<i>Samuel A. Billard</i>				
	<i>Rose Blanche</i>				
	<i>Newfoundland</i>				

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoehing-Smith, &amp;c.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

 Forms  
B. 121.  
30.

Regiment of

*Royal 1<sup>st</sup> Regt*

Number of

*Comp*

Signature of O. C. Company

*Hobley*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>4894 Billars D.</i>	Age on	18 years - months	<i>Scouterman</i>	
Joined		Place and Date of Enlistment	<i>St. John's</i>	Religion	
Joined		Date	<i>7-1-18</i>	<i>C. of E.</i>	
Joined		Date	} with Colours <i>175</i> years. } with Reserve <i>365</i> years.	Place of Birth	
Joined		Date			

Place	Date of Offence	Rank	Class of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized St. John's, 3/79</i>					

To be carried over

Army Form B. 121.

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 11894 Rank Pr. Name Billard Wilson  
 Date of Enlistment 7-1-18 Address West Bank District Bengal  
 Occupation Postman Classification for Discharge 1 Medical Category H  
 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 11-5-19 for H. Mansford  
 O. C. Discharge Depot.

## PARTICULARS FOR DEMobilIZATION

## 1. Civil Re-Establishment.

I am  in a position to resume civilian occupation.

Wilson Ballard

Particulars passed to Vocational Officer for information and action.

Date .....

## 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable #60.00  
 (b) ~~Clothing~~ Supplied

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1478.3581 to his home at Ree Blanche and Release Certificate No. 2338 issued.

Date 5-6-19

*W. Blomster*  
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 3-7-19

Date 5-6-19

*J. H. [unclear]*  
Depot Paymaster.

Discharge approved for 19-6-19

Forwarded with following 19 documents to O.C Discharge Depot.

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

Date 5-6-19

*J. H. Snow Capt.*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer in Charge Records.  
Board of Pension Commissioners.  
with following additional documents.

Eligible for War Service Gratuity

Date JUN. 19. 1919

*R. H. [unclear] Capt.*  
O. C. Discharge Depot.

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

Date June 10 1919

*[Signature]*  
[unclear]

Reg. No. *4294* Rank..... *Sgt.* Name *William W.*  
Attested..... Address *Rose Blanche.*  
Allotment..... Allottee ..  
Date of Allotment..... Returned from Overseas *16.19*  
Returned on S.S. *Cassian* Cause *Discharge.*

*4-6-19*  
*19-6-19*

**PASSED TO DEMOBILIZATION OFFICER**  
**DISCHARGE APPROVED ON DEMOBILISATION**