



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. <sup>4395</sup> ~~1344~~ Name Abraham Cove ~~Corps~~ Cape

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Abraham Cove</u>                 |
| 2. What is your full Address? .....  | 2. <u>Change Island N.D.B.</u>         |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                          |
| 4. What is your age? .....   | 4. <u>24</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, Abraham Cove 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.

Abraham Cove SIGNATURE OF RECRUIT.

Jacob Pittman Signature of Witness.

Abraham Cove 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 8th day of April 1918

Signature of Attesting Officer James Smit

### †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.....1918 James Smit Approving Officer.

Place.....

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
 ‡ Here insert the "Corps" for which the Recruit has been enlisted.

\* 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. 4395

Extract from ~~Sebagus-Camp~~ D.O. Pt. II, Depot St. John's dated  
April 15th., 1919.

The discharge of the u/n on demobilization has been ~~RECORDED~~ (CONFIRMED)  
by O. 1-0 Records on 10-4-19.

4395 Pte. A. Cave.

C.R. 4395

Extract of DAILY ORDERS PART II NEWFOUNDLAND FORESTRY  
COMPANIES DEPOT ST. JOHN'S DATED MARCH 27th/19.

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The Discharge of the undernoted on Demobilization has  
been APPROVED by O.C. Discharge Depot on noted date

#4395 Pte. A. Cave.

27/3/19

C.R. 4395-

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regiment, dated 11-2-19.

The undernoted returned from Overseas and reported  
at Depot 11-2-19.

#4395 Pte. Abraham Cave.

C.R. 4395'

Extract from Memorial Roll of Foresters Embarked by  
S.S. Corsican, Feb. 1st 1919.

4395  
5495 Cave,



C.R. 4396

Extract from Orders by Lt. Col., B.J. Barten, D.S.O.,  
Commanding 2nd Bn., Royal Newfoundland Regiment, dated  
10/10/ 18.

The undermentioned will hold ~~himself~~ <sup>himself</sup> in readiness to  
join the Newfoundland Forestry Corps on one months  
probation as from 11/16/18, Major J.W. March, M.C. will  
conduct this party.

"C" Company:

4395 Pte. A. Cave.

C.R. 4395

Extract from Daily Orders Part 11. from Unit the Royal Nfld.  
Regiment, St. John's, dated June 14th 1918.

4395 Pte A. Cave.

Embarked for Overseas with draft 11-6-18.



C.R. 4395

Extract from Daily Orders part 11, from Unit The Royal  
Newfoundland Regiment, St. John's, dated April 9th, 1918.

#4395 Pte. A. Cave.

Attested for General Service with the 1st. "fld." Regt. ~~from~~

~~9/4/19.~~ To report 15/4/18.

Cave, A.

C.R. 4395

P. & R. O.



To: The Chief Paymaster,  
Royal Newfoundland Regiment,  
58 Victoria Street,  
London, S.W.

Sir:-

Please charge the amount 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 the year.  
Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
1395	Pte	Case A	\$250	at have

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

at have

Date

July 1/18

Cave, A.

4395

Ray Sept.



April 14, 1919

#4395 Pte. Absalom Gaven  
Change Islands,  
Fogo.

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 & C. i/c Records



14376

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. JOHN'S.

Christian name *Alston* 2. Surname *Leave*

3. Rank *Private* 4. Regt. No. *4395*

5. Address in full to which future payments of gratuity are to be forwarded. *Change Islands Post*

6. Date of enlistment in the Regiment. *April 7<sup>th</sup> 1918*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *Not applicable*

8. Relationship of such dependents. *Not applicable*

9. Address in full of such dependent. *Not applicable*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*

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. *11 1/2 months*

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.....

*No*

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.....

*Not applicable*

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?.....

*Not applicable*

19. Are you now serving in the Regt.? ..... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

*March 25/19*

*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.....

*No*

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: *absalom lave*

Place of Residence: *Change Islands.*

Declared before me at: *St John's Hill.*

This *26<sup>th</sup>* day of *March* 19*19*

*M. B. Bannister at Qld.*  
Signature of Barrister of the  
Supreme Court, Stipendiary Magistrate,  
Notary Public, Justice of the Peace,  
or Commissioner of affidavits. *No charge.*

POST DISCHARGE PAY.					
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Not amount due	
.....	.....	.....	<i>4 mos.</i>	<i>280.00</i>	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
Certified Correct.			Paymaster.		

April 10th., 1919

#4395 Pte. Absalom Cawc,  
Change Islands,

Dear Sir, -  
Please find enclose Discharge Certificate  
No. 1703."

Yours truly,

Paymaster & O. i/c Records      Capt.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4395 Rank Pte Name Cove, Absolon  
 Intended place of residence Change Island, Twillingate

2. Occupation Fisherman  
 Classification of soldier E Medical Category A-1

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 .....

Date MAR 25 1919

*H. Mrs. H.*  
 In 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

25-3-19

*absalom lave*  
 Signature of soldier  
*J. A. Snowfoot*  
 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

25-3-19

*absalom lave*  
 Signature of soldier  
*S. L. L. Rgt.*  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 8-4-18 No of days on Military  
 Discharged from service 27-3-19 plus 14 days Service 368

## APPROVAL OF DISCHARGE

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

Place ST. JOHN'S

MAR 27 1919

Date .....

*R. H. Lait Capt*  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place A. Louis, Med.

Date April 10/1919

*M. Howley Capt*  
 Officer i/c Records  
 The Royal Newfoundland Regiment

22 B 2079 / 1703

# The Royal Newfoundland Regiment

Class for Demobilization: *g*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *24.3.19* .....

Regimental No. *4395* .....

Name .. *Code Abulom* .....

Address .. *Orange Island* .....

Present Medical Category ..... *A/B II* .....

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

(b) Standing Medical Board .....

Members of Board

*R. H. Saint-Capt*  
O.C. Discharge Depot.

*J. P. Brown*  
Senior Medical Officer

*J. O. Borden*  
M. O. Depot



# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4395 Rank Private Name Cave, Absolom  
 Date of Enlistment Jan 8-18 Address Change Isls District Dwillingate  
 Occupation Disternan Classification for Discharge E Medical Category H.S.  
 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
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 25-3-19

H. M. S. H.  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

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

*absalom cave*

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 [Signature]

Date 25-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *P 952 9.327 326* to his home at *Change Islands, F.V.P.* and Release Certificate No. *1720* issued.

Date *25-3-19* ..... *J.A. Snowford*  
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 *10-4-19* .....

Date *25-3-19* ..... *H. M. ...*  
Depot Paymaster.

Discharge approved for *27 3-19* .....

Forwarded with following documents to O.C Discharge Depot.

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

Date *25-3-19* ..... *J.A. Snowford*  
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. Sait Capt.*

Date *MAR 27 1919* .....  
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  
Fishing

Abraham Cave  
Signature of Man.

Reg. No.

4395

Abraham Cave  
Signature of the Vocational Officer or his Representative.

Place

Al Jones

Date

25-3-19

191

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

# MEDICAL HISTORY

OF

Surname Cave Christian Name Abelou

Table I.—GENERAL "TABLE.

Birthplace:—Parish Change Islands County Newfoundland

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>5<sup>th</sup></u> day of <u>April</u> 191 <u>8</u> at <u>St Johns</u>		on _____ day of _____ 191 at _____	
Declared Age	<u>24</u> years — days		years days	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>3</u> inches		feet inches	
Weight	<u>122</u> lbs.		lbs.	
Chest Measurement	Girth when fully expanded... <u>36</u> inches		inches	
	Range of Expansion... <u>3</u> inches		inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V= <u>6/20</u> L. E.—V= <u>6/20</u>		R. E.—V= L. E.—V=	
	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>Lamm Peterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u> on <u>5<sup>th</sup></u> day of <u>April</u> 191 <u>8</u>		at _____ on _____ day of _____ 191	
Joined on Enlistment	Corps. <u>The Royal Newfoundland</u>	Regtl. No. <u>4395</u>	Corps.	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. & 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

*Abraham Cave*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*4395*

Intended address

*Change Islands*

Height on discharge

*5* Feet *6*

Color of hair on discharge

*Light*

Complexion

*Fair*

Color of eyes

*Blue*

Descriptive Marks

—

Figure on discharge

*Medium*

Christian name of Father

*William*

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

*Change Islands. Feb 22<sup>nd</sup>, 1894*

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)

*Abraham Cave**Pte*

(Rank)

Station

*ST. JOHN'S.*Date *24.3.19*

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.

The Royal Newfoundland Regiment  
HEADQUARTERS  
Medical Officer i/c Hospital,  
Unit, or Command Depot.  
DEPOT  
St. John's, Newfoundland

Station

Date







ST. JOHN'S, Mar 25<sup>th</sup> /19

# Newfoundland Forestry Companies

Billeting Account,

To Pvt. A. Cane

Billeting Soldiers as undermentioned

from Feb 16/19 to March 25/19

4395 - Pvt. A. Cane

39 30

ACCOUNT	<u>B. V. M.</u>
AN NO.	<u>876</u>
INITIALS	<u>R. W.</u>
ISS. LEDGER	INITIALS
REY LEDGER	INITIALS
REV. LEDGER	INITIALS

Certified correct for \$ 39.30

J. A. Snow  
Billeting Officer.

Abraham Cane

B. W.

ROYAL NEWFOUNDLAND REGIMENT

Dr.

To Eli LeDrew,  
Change Islands

To Conveyance of <sup>I</sup> P4395 Pte. A. Cave from Change  
Islands to Lewisporte

*J.C.R.*

\$25.00

*E* As per B/P attached

ASSIGNMENT	<i>Grant</i>
OR. NO.	<i>14928</i>
INITIALS	<i>LeD</i>
IND. LB22	_____
MAY LB22	_____
GEN. LB22	_____

*OK.*

*E*

*[Signature]*  
Assistant Adjutant & Quartermaster  
Discharge Depot, Newfoundland

*Act*  
*[Signature]*  
DISTRICT OFFICER  
NEWFOUNDLAND  
MAR 26 1919  
COMMANDING

MAR 22 1919

Chang Islands  
March. 2<sup>nd</sup> 1919

Dear Sir

Please Pay to  
Mr. Eli Sedrew the sum  
of \$25.00 for diving  
P. O. Cave No 4395  
from Chang Islands to  
Ladwepou.

Signed P. O. Cave.  
Per. Eli Sedrew.  
Chang Islands  
Main Tickle

CMS  
for your attention  
P.  
CMS

No. R. 25

# TRAVELLING WARRANT

Date 11-2-19 The Royal Newfoundland Regiment

*Mailman*

Please issue 1st Class Passage and Meals for

No. 4395 Rank Pte Name James A 25

To ST. JOHN'S From St. John's

The Royal Newfoundland Regiment  
DEPOT ST. JOHN'S N.S.

PLEASE QUOTE THIS WARRANT NUMBER  
ON STATEMENT AND MEAL CHECKS

*W. H. [Signature]*  
SIGNATURE OF ISSUING OFFICER.



April 10, 1919

Mr. Eli LeDrew,  
CHANGE ISLANDS,  
Nfld.

*J.C.R.*

Dear Sir:

I enclose herewith cheque  
for \$25.00, amount due you for conveying Pte.  
A. Cave from Change Islands to Lewisporte.

Yours truly,

Capt.  
Paymaster.

LM/

Encl. 1-

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 2 <sup>79</sup>/<sub>100</sub>

Apr 30 19 19

Received from the First Newfoundland Regiment  
the sum of two  $\frac{79}{100}$  Dollars.  
on account of Pay.  
balance

Cheque mailed to  
Change Islands.  
W. H. Jones Bay  
May 16/19.

Ch. No.	19795	Initials	E.W.
Pay Ledger	472	Initials	[Signature]
Gen. Ledger	472	Initials	

No. 4395

Rank

Pl

Name

Lawe. O

~~236 93 712 5 17 1/2~~

~~298.78~~

535.71

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

***Royal Nfld. Regt.***

***Dept. of Militia,***

***ST. JOHN'S, Nfld.***

---

Fold Here

OCT 15 1921

1921.

The accompanying ~~Victory Medal and/or~~ British War Medal

is/are forwarded herewith to

Abraham Cave

in respect of his service as No. 4395 Rank Pte.

Name A. Cave Royal Nfld. Regt.  
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received British War Medal

Signature Abraham Cave

Date Nov. 18<sup>th</sup> 1921.

Address Change Islands N. F. L. D.

[P.T.O.]



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Number of Sheets one

Regiment of The Royal Rfls

Signature of O. C. Company J. Jamieson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Abraham Cave</u>	Age on	<u>24</u> years - months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment	<u>St. Johns</u> <u>18-4-18</u>	Religion	
Joined	Date			<u>C.P.</u>	
Joined	Date	Period of	with Colours <u>3</u> years. with Reserve <u>365</u> years.	Place of Birth	
Joined	Date			<u>Changabond</u>	

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
<p style="font-size: 2em; font-family: cursive;">Demobilized St. Johns, 10 <sup>4</sup>/<sub>19</sub></p>									

To be carried over

Army Form B. 121.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4395 Rank Private Name Cave, Absolom  
 Date of Enlistment 8-4-18 Address Chargé St. S. District St. John's  
 Occupation Postman Classification for Discharge F Medical Category #11  
 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 25-3-19 ju H. W. H.  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

*absalom cave*

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 [Signature]

Date 25-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *W 952 9.327 326* to his home at *Change Hands Ferry* and Release Certificate No. *1720* issued.

Date *25-3-19*

*J.A. Snowling*  
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 *10-4-19*

Date *25-3-19*

*H.M. W. H.*  
Depot Paymaster.

Discharge approved for *27-3-19*

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 *25-3-19*

*J.A. Snowling*  
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

**MAR 27 1919**

Date

*R.S. [Signature]*  
O. C. Discharge Depot.

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

Date *27/3/1919*

*[Signature]*