



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5816 Name William Eddy Corps Methodist

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------|
| 1. What is your name? | 1. <u>William Eddy</u> |
| 2. What is your full Address? | 2. <u>North St. P. A.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>25</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Carpenter</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. <u>Yes</u> Name |
| 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, William Eddy 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.

William Eddy SIGNATURE OF RECRUIT.
W. A. Moulton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Eddy 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. John's on this 18th day of July 1918.

Signature of Attesting Officer W. A. Moulton

†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 1st

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

Date July 18 1918

Place St. John's

Signature of Approving Officer W. A. Moulton

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 William Eddy

Apparent age 25 years months. Height 5 feet 5 1/2 inches

Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Eddy North St
 | 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 _____									Signature of Officers certifying correctness of entries
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days

" " Pensions " _____ [" "] _____ " _____

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5816 Name William Eddy Corps Methodist

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. William Eddy
2. What is your address? 2. North St. P. A.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 20 Years Months
5. What is your Trade or Calling? 5. Carpenter
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service?.. 9. Yes
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. Yes

I, William Eddy, 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.

William Eddy SIGNATURE OF RECRUIT.
W. A. P. Moulton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Eddy, 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. John's

on this 12th day of July, 1918
Signature of Attesting Officer W. A. P. Moulton

†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 12, 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

5816

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

Name William Eddy
 Apparent age 25 years months. Height 5 feet 5 1/2 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Eddy, North St. P.B.
 | 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>18-7-18</u>									
Joined at <u>St. John's</u> on <u>July 18-1918</u>									
<u>Discharged. St. John's Jan. 19/1919.</u>									
<u>Admitted to S.D. Hospital 6-10-18.</u>									
<u>Transferred to Cockspur Conv. Hospital 23-10-18</u>									
<u>Leisure Hospital 4-11-18</u>									
<u>Demobilization St. John's 19-1-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>19-1-1919</u> [date of discharge] <u> </u> years <u>186</u> days									
" " Pensions " " " " " " " "									

C.R. 5816

Extract from Daily Orders part II, Depot St. John's dated Jan. 21st. 1919

The discharge of the undernote on demobilization have^s been CONFIRMED
by Officer i/c Records on Jan. 21st., 1919.

#5816 Pte. William Eddy.

5816

C.R.

Extract from Daily Orders part 11, Depot St. John's dated Dec. 24th.
1918.

The undernoted discharge on demobilization have been approved by Officer Commanding Discharge depot from noted date. He is removed from Depot strength and transferred to discharge Depot pending confirmation by Officer in charge of Records.

#5816 Pte. Wm. Eddy.

22-12-18.

C.R. 5816

Extract from daily Orders part 11, Depot. St. Johns
dated November 6th, 1918.

EXCHANGED FROM ESCORTS 4/11/18.

#5816 Pte. W. Eddy

BC.

C.R. 5816

Extract from Daily Orders part 11, Depot, St. John's
dated October 25th 1918.

#5816 Pte. W. Eady

DISCHARGED FROM M. I. D., HOSPITAL 23/10/18 TO
ESKASONI CONVALESCENT HOSPITAL,

C.R. 5816

Extract from Daily Orders Bart 11 Unit The Royal Nfld. Regt.m
St., John's Oct. 5th, 1918.

5816 Pte. W. Eddy.

Admitted to M.I.D. Hospital 6-10-18.

Extract from Daily Orders part 11, from Unit The Royal
Wilt. Regt. St. John's, dated July 18, 1918.

#5816 Pte. Wm. Henry Eddy.

Attested in Gen ral Service with the Royal Wilt. Regt.
July 18, 1918.

Eddy, D^{ew}

5816

Ray sept

January 19th, 1919

#5816 Pte. William Eddy,

North Harbor, P.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 568."

Yours faithfully,

Captain,
Paymaster & C.i/c Records

Enc 1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5816 Rank Pvt. Name Wm. Eddy
 Intended place of residence North St. St. John's
 2. Occupation Carpenter
 Classification of soldier C. Medical Category A-1

DEMOBILIZATION.

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

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

Place DEC 20 1918
 Date

W. Eddy Capt.
 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 W. Eddy
Dec 20th 1918 Signature of soldier
 Signature of witness Ericks Capt.

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 Dec 25th 1918 W. Eddy
St. John's Signature of soldier
 Signature of witness J. Raymond Capt.

STATEMENT OF SERVICE

7. Enlisted for service 18. 7. 18 No of days on Military 186
 Discharged from service 22. 12. 18 plus 28 days Service 191 Days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Last Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date DEC 22 1918

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's, Nfld M. Bowley Capt.
 Officer in Charge Records
 The Royal Newfoundland Regiment
 Date January 19/1919
2079/568

14
31
20
21
20
31
19
18

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5916 Rank Plt Name Walter J. Wynn
 Date of Enlistment 13.7.18 Address North St District Placentia
 Occupation Carpenter Classification for Discharge f Medical Category AII
 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 9.12.18

Wynn Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

W E Wynn

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with—

(a) Clothing Allowance payable 60/100

(b) ~~Clothing~~ Supplied Joseph & Snowfield

Date 20-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 369 to his home at North St. P. B. and Release Certificate No. 521 issued.

Date 20-12-18 C. S. Deeks 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 19-1-19

Date 20-12-18 C. S. Deeks Capt.
Depot Paymaster.

Discharge approved for 22.12.18

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	John B
F 178	W 3494	B 122		Board 1st	" 2	1	
B 178a	D 400A	B 1915	2	do 2nd	" 3	2	
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	1				

Date 20.12.18 C. S. Deeks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

DEC 22 1918

Date R. H. Lunt Capt.
O. C. Discharge Depot.

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

Date Dec 26/1918.

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

MEDICAL HISTORY

Surname

Eddy

OF

Christian Name

William

Table I.—GENERAL TABLE

Birthplace:—Parish

St. John's

County

Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	18	July	1918	191
Declared Age	25	years		
Trade or Occupation	Carpenter			
Height	5	feet 5 1/2		inches
Weight	143	lbs.		ll.s.
Chest Measurement	Girth when fully expanded	37 1/2		inches
	Range of Expansion	3 1/2		inches
Physical Development				
Vaccination Marks	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R.E.—V=	4/6	R.E.—V=	
	L.E.—V=	1/6	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>Lammont Peterson</i>			
(Rank)	Major		Medical Officer	Medical Officer
Enlisted	at	St. John's	at	
	on	18 day of July	on	day of 191
Joined on Enlistment	Corps	Royal	Corps	
	Regtl. No.	5816	Regtl. No.	
Transferred to	Regiment			
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				

To be used only for Special Reports and for Special Reports made into the Regular Report.

Table II.—Only for admission to hospital or to the sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on Syphilitis, admissions of treat
	Day	Month	Year	Day	Month	Year			
M. J. D. Hospital	6	10	1893	10	11	18	Influenza	17	
Gianni	24	10	1893	4	11	18	Contaminant	11	

cause, nature or treatment of the case likely to be of interest or of future use. In case of
re-admissions to hospitals will be shown. The subsequent progress, including particulars
out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

Watson

John C. Rowe

It is for you certified that this soldier
has been before a Training Station
board and has been classified in
for discharge on compassionate
Medical category

DATE
OFFICER

TABLE IV--SERVICE TABLE

Civil Re-establishment Committee



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

To work as fisherman.

W. Eddy

Signature of Man.

Reg. No. *5816*

W. Dicks Coff

Signature of the Vocational Officer or his Representative.

Place *St Johns N. F. I. D.*

Date *20/12/18* 191

F.

Placentia &
St. Marys

Demobilization Form 1

The Royal Newfoundland Regiment

Class for Demobilization:—
6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

NOV 28 1918

Date

Regimental No. *5816*...

Name *Eddy, Wm.* (ptz)

Address *North Harbour, Placentia Bay*

Present Medical Category *A II*

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

Members of Board {
..... *R. H. Tait Capt.*
O.C. Discharge Depot.
..... *J. Paterson*
Senior Medical Officer
..... *J. W. Burden*
M. O. Depot



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 *Eddy, William*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *5816*
 Intended address *North Harbour Placentia Bay*
 Height on discharge *5 Feet 6"*
 Color of hair on discharge *Blaxen*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks —
 Figure on discharge *Slight*
 Christian name of Father *William*
 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. *North Harbour Placentia Bay 11/5/93*
 Nature and locality of civil employment required *Fisherman, Placentia Bay*

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) *William Eddy*

(Rank) *Pte*

Station *St John's*

Date *10. 12. 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.



Station

Date

[Signature]
 Medical Officer i/c Hospital,
 Unit, or Command Depot.



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, William Eddy, Regl. No. 5816
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
5 Dollars and 00 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 Sept 1st / 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6775	Wife	<u>William Eddy</u>	<u>North St. P.B.</u>	60
Total Allotment, \$				60

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.) M. J. Clark
 Officer Commanding

(Sig.) William Eddy
 (Rank) Pte.

M. J. Clark
Aug 27 1918

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on July 15th 1918

1. Name William Eddy Age (a) Declared 30
(b) Apparent

2. Do you know of anything wrong with you? No
What severe illnesses have you had? Measles about 3 years ago

Eyes Blue.
Comp Hair.
Marked.

3. Height 5-5 1/2 Weight 143
4. Eyesight (a) Left 1/6 (b) Right 1/6
5. Physical Defects (Examine after strenuous exercise) ~

2180

6. Examination of Lungs ~
Measurement (a) Expiration 34 (b) Inspiration 37 1/2

7. Examination of Heart ~

8. Examination of Urine ~

9. Examination of Mouth—(Defective Speech)
Teeth
Throat
Nose
Ears—(Otorrhea)
(Deafness) ~

10. Have you been successfully vaccinated, and when? Yes about 3 weeks ago at 10th Nov.
11. Name and address of next of kin Father William North St.

REMARKS—

A 11

Archibald
Sturges

Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland

Number of Sheet One
Signature of O. C. Company W. Dickson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay			
No.	William Eddy	Age on	25 years	months	Carpenter			
Joined	Date	Place and Date of Enlistment	St John's		Religion			
Joined	Date		18. 7. 18.			Meth.		
Joined	Date	Period of	with Colours		Place of Birth			
Joined	Date		186 years.			North. Hr. P. B.		
			with Reserve					
			56 years.					

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				Demobilized St John's 19/19					

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5816 Rank Alvt Name Eddy Wm
 Date of Enlistment 18.7.18 Address North St District Placentia
 Occupation Carpenter Classification for Discharge f Medical Category ATI
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P 36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	3
B 178a.....	D 400A.....	B 1915.....	✓	do 2nd.....	" 3.....	
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.....	1			

Date 9.12.18 W. Eddy
 O. C. Discharge Depot. W. Eddy Capt

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

W. Eddy

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 Joseph A Snowbird

Date 20-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 369* to his home at *York N.P.* and Release Certificate No. *521* issued.

Date *20-12-18* *As Duke 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 *19-1-19*

Date *20-12-18* *As Duke Capt.*
Depot Paymaster.

Discharge approved for *22.12.18*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	✓ 1	N.F. Méd.	D.F. 1	✓ 1	<i>John D.</i>
F 178	W 3494	B 122		Board 1st	" 2	✓ 1	
R 178a	✓ 1 D 400A	✓ 1 B 1915	✓ 2	do 2nd	" 3	✓ 2	
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	✓ 1				

Date *20.12.18* *As Duke Capt.*
Demobilization Officer.

APPROVED. *h*

Documents as above forwarded to:—
Officer i/c Records.
Board of Pension Commissioners.
with following additional documents.

Date *DEC 22 1918* *R.H. Sant Capt.*
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot
Date *Dec 26/1918* *M. Bowley Capt.*
As Duke

Reg. No. 5816 Rank. Pt Name. Teddy Henry
Attested 18-7-18 Address. North St Pleasantia
Allotment 760 Allottee William Teddy (Father)
Date of Allotment 1-9-18. Returned from Overseas
Embarked for Overseas Cause

Vacc 24th 18. 1st 2-9-18. 2nd 9-9-18 3rd Nov 14-9-18

6-10-18 Admitted to M. I. S. Hosp. Y
23-10-18 Discharged from M. I. S. to Esplanade
7-11-18 " " Esplanade

9-12-16 PASSED TO DEMOBILIZATION OFFICER
22-12-18 DISCHARGE APPROVED ON DEMOBILIZATION