



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4003 Name John Fleming Corps 1st Bn.

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

- |  |                                      |
|--|--------------------------------------|
| 1. What is your name? .....  | 1. ....                              |
| 2. What is your full Address? .....  | 2. ....                              |
| 3. Are you a British Subject? .....  | 3. ....                              |
| 4. What is your age? .....   | 4. .... Years ..... Months .....     |
| 5. What is your Trade or Calling? .....  | 5. ....                              |
| 6. Are you Married? .....  | 6. ....                              |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? }                                 | 7. ....                              |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. ....                              |
| 9. Are you willing to be enlisted for General Service? .....   | 9. ....                              |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... }                                     | 10. .... { Name .....<br>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. ....                             |

I, ....., 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.

John Fleming SIGNATURE OF RECRUIT.

..... Signature of Witness.

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

I, ....., 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..... day of..... 191

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 compiled with. I accordingly approve, and appoint him to the.....

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

Date..... 191 ..... } 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).....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name John Henry

Apparent age 18 years 1 months. Height 5 feet 6 inches

Chest Measurement { Girth when fully expanded 34 1/2 inches  
 Range of expansion 3-3 1/2 inches

Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin 1775 Main Street, York  
William T. Carr | Relationship Mother

### 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 _____									<div style="text-align: right; margin-bottom: 10px;">                     Total Service forfeited as above.....                 </div>
Joined at _____ on _____									

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

" " Pensions " \_\_\_\_\_ [ " " ] \_\_\_\_\_ " \_\_\_\_\_ "



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

4092

No. 4092 Name John Fleming Corps R. Co.

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

1. What is your name? ..... 1. John Fleming
2. What is your full Address? ..... 2. Spiller's Cove, Trinity Bay
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years 1 Months
5. What is your Trade or Calling? ..... 5. Boat Maker
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? ..... II. Yes

I, John Fleming 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.

John Fleming SIGNATURE OF RECRUIT.

..... Signature of Witness.

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

I, John Fleming 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 7th day of Nov 1913

Signature of Attesting Officer Henry G

### †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.....1913

Place..... } Approving Officer.

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name John Fleming  
 Apparent age 18 years 1 months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 31 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs John (Anna) & Christ  
Spiller's Cove T. Bay. | Relationship Mother

### 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>9-11-17</u>									
Joined at <u>St John's</u> on <u>November 9-17</u>									
<u>Discharged April 23/1919</u>									
		Embarked St John's N.S. Messianche		11-12-17					Embarked for St. L.
		25-5-18. No. 29-9-18.							Admitted 2 hrs. 4/1/18
		Boulogne 30-9-18							Admitted 3 hrs. 4/1/18
		Supplies then posted to Herby Winchester		6-12-18.					So left for demobly chon
		20-1-19							Arrived Georgetown 7-2-19
		Demobly chon St John		23-4-19					

Total Service forfeited as above.....

Total Service towards Engagement to 23-4-19 [date of discharge] 1 years 166 days  
 " " Pensions " " " " " " " " " " " "



In case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

T+T wound Healed no nerve or  
vascular lesion

S. M. M. Capt. Rank



**Casualty Form—Active Service**

Regiment or Corps *21st Royal Newfoundland*

Rank *Pte* Surname *Fleming* Christian Name *John*

Religion *R.C.* Age on Enlistment *18* years *1* months

Enlisted (a) *9.11.17* Terms of Service (a) *Duration* Service reckons from (a) *9.11.17*

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended [ ] Re-engaged [ ] Qualification (b) .....  
or Corps Trade and rate *2.5 MAY 1918*

Occupation *Brick Maker* *P. M. Curran* Signature of Officer



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				
		Embarked	<i>25-5-18</i>		
		Disembarked	<i>27-5-18</i>		
		Joined Battalion	<i>31-5-18</i>		
		Wounded in action	<i>29-9-18</i>		
<i>30/9/18</i>	<i>87 FA</i>	<i>Ad Bowley</i>	<i>36 Col</i>	<i>29/9/18</i>	<i>627363</i>
<i>30/9/18</i>	<i>2 Aus Gen Stp</i>	<i>Transferred to England</i>	<i>Boulogne</i>	<i>30-9-18</i>	<i>RA 29656</i>
				<i>5/10/18</i>	<i>W 3083</i>
		<i>O/I. No 1 Infantry Section, ord Echelon, G.H.Q., B.E.F. ✓</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, Shoeing-Smith, &c. W 8645 512731 20.000 9/17 (3501) C. P. & S., Ltd., Form B.103 B/1907. P.T.O.





## RECORD OF SERVICE

Regimental number 4092-40 [REDACTED]  
Name Fleming, John  
Rank Private  
Unit Royal Newfoundland Regiment  
Enlisted 9th November, 1917  
Embarked St. John's, Nfld. 11th December, 1917  
Embarked Folkestone 25th May, 1918  
Wounded G.S.W. Left [REDACTED] 25th September, 1918  
Adm. 2nd Aus.Gen. Hospital, Boulogne 30th September, 1918  
Transferred 3rd Lon. Gen. Hosp. Wandsworth 5th October, 1918  
Disch. Hospital - Duty 1-and granted  
Furlough 27th November, 1918  
Reported Depot Winchester 6th December, 1918  
Repatriated 30th January, 1919  
Reported Depot St. John's, Nfld. 7th February, 1919  
Demobilised 23rd April, 1919

Period with the Colours - 1 year 166 days

Age on enlistment - 18 years 1 month

Trade- Brickmaker

Religion - Roman Catholic

Next-of-kin - Mrs. Robert Street (Mother)

Address - Spillars Cove, Trinity Bay, Newfoundland.

Certified Correct

Lieut.-Col.,  
Chief Staff Officer.

**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 }
2. Regtl. No. *4092* 3. Rank..... *Pte.* 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name ..... *FLEMMING* .....  
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....  
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  
(b) Where (if any)  
(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."

- G.S. w left leg.*
11. Date of origin of disability.
  12. Place of origin of disability.
  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.  
*T & T left leg no nerve or vascular lesion. no disability*

14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                | Yes                 | .....             |
| (ii.) Previous active service.. .. .                       | No                  | .....             |
| (iii.) Climate in pre-war service .. .. .                  | No                  | .....             |
| (iv.) Ordinary military service before the war .. .. .     | No                  | .....             |
| (v.) Serious negligence or misconduct on the man's part. } | No                  | .....             |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } No.

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.)

*He 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?

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.

*Reputation*

*Robins M.D.*

ROYAL NEWFOUNDLAND REG.

Station *Facely Down Camp*

Date *Jan 8th 1919*

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

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* 7. Former Trade or Occupation }  
 2. Regtl. No. *1093* 3. Rank *Private* 7a. If the soldier claims previous service in Army, he should state—  
 4. Name *FLEMING* (Surname) *FLEMING* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.  
 5. Age last birthday.....  
 6. Posted for duty on.....  
 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. *G.S. W left leg*  
 12. Place of origin of disability. *0*  
 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. *T.T. left leg no nerve or vascular lesion*  
*no disability.*

14. State whether the disabilities are

(a) attributable to (b) aggravated by

- (i.) Service during the present war .. .. . Yes .. .. .
- (ii.) Previous active service .. .. . No .. .. .
- (iii.) Climate in pre-war service .. .. . No .. .. .
- (iv.) Ordinary military service before the war .. .. . No .. .. .
- (v.) Serious negligence or misconduct on the man's part. } .. .. . No .. .. .

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } M.A.

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.)

He 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?

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.

Reputation  
Hobley, M.D.

ROYAL NEWFOUNDLAND REG.

Station Hazelley Down Camp

Medical Officer in charge of case.

Date Jan 8th 1919

\* 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



## 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

*John Flemming*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*4092*

Intended address

*Spillars Cove, I.B.*

Height on discharge

*5 Feet 9*

Color of hair on discharge

*Black*

Complexion

*Fair*

Color of eyes

*Blue*

Descriptive Marks

—

Figure on discharge

*medium*

Christian name of Father

—

Christian name of Mother

*Anna*

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

*Spillars Cove, March 29<sup>th</sup> 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)

*John Flemming**Pte*

(Rank)

Station

*ST. JOHN'S.*

Date

*7-4-19*  
~~*2-4-19*~~

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

Station

Date



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4092 Rank Private Name Fleming John A.  
 Intended place of residence Spiller's Cove Oranby Bay  
 2. Occupation Book maker  
 Classification of soldier E Medical Category A

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 APR 7 1919  
 H. M. Smith  
 Comanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place and date ST. JOHN'S  
7-4-19  
 John Fleming  
 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  
7-4-19  
 John Fleming  
 Signature of soldier  
 W. J. Gately  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 9-11-17 No of days on Military  
 Discharged from service 9-4-19 Plus 14 days Service 531

### 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  
APR 9 1919  
 R. T. Lat. Capt.  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place St. John's, Nfld.  
 Date April 23/1919  
 W. Howley Capt.  
 Officer in Charge  
 The Royal Newfoundland Regiment

*A.B. 2097/1978*

22  
31  
31  
174  
31  
23  
166



ST. JOHN'S, APR 7 - 1919

# Royal Newfoundland Regiment.

Billeting Account,

To Mr. J. Fleming

Billeting Soldiers as undermentioned

from Feb 8<sup>th</sup> /19 to April 5<sup>th</sup> /19

4092. Mr. J. Fleming 58 70

<u>B.M.</u>	
AMOUNT	<u>153 86</u>
CH. NO.	<u>153 86</u>
IND. LEVY	<u>70</u>
PAY LEVY	<u>70</u>
OTHER LEVY	<u>70</u>

Certified correct for

J. A. Snow  
Billeting Officer.  
John Fleming

*J. Fleming*

ACCOUNT 17100

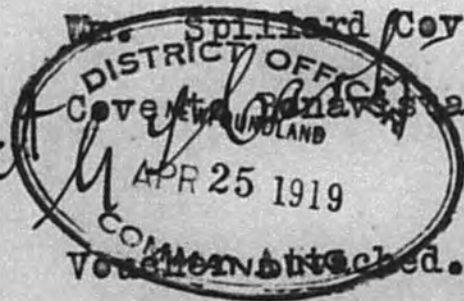
NO. 17100

DATE April 21st. 1919

The Department of Militia.

The sum of Ten Dollars \$ 10.00 is due Mr John Flemming of

Spillard Cove, For driving 4092 Pts. J. Flemming, from Spillard  
Cove to Bonavista, and from Bonavista to Spillard's Cove,



*J. J. Brown*  
24/4/19

Discharge Depot - Newfoundland

No. G. 451

TRAVELLING WARRANT

Date 7-4-19 The Royal Newfoundland Regiment

General

Please issue 1st Class Passage, and Meals for

No. 4092 Rank P.C. - Name Fleming John

From Bonaville - ~~ST. JOHN'S~~ - To Spillars Cove

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

PLEASE QUOTE THIS WARRANT NUMBER  
ON STATEMENT AND MEAL CHECKS

J. A. Crawford  
SIGNATURE OF OFFICER.  
Discharge Depot - Newfoundland

I the undersigned  
have done pt John Fleming  
from Bonnorata to Spillars  
Cone for the sum of \$5<sup>50</sup>/<sub>100</sub>  
and from Spillars Cone to  
Bonnorata \$5<sup>00</sup>/<sub>100</sub>  
total 10<sup>00</sup>/<sub>100</sub>

John Fleming of Wm  
April 11<sup>th</sup>/<sub>xx</sub> 19

Spillers

April 11-19

Dear Sir

The difference  
between my two Arinas  
was I had to hire John  
Flaming of ~~Wm~~ to Arina the  
from Spillers - Come to  
Bonovista when I leave  
for the train to go to St  
Johns and the charge  
was fine. You  
will find it on my traveling  
warrant.

St. John Selwyn

April 29, 1919

Mr. John Fleming, (of Wm.)  
SPILLARD'S COVE.


Dear Sir:

I enclose herewith cheque for \$10.00  
amount due you for driving Pte. J. Fleming, #4092, from  
Spillard's Cove to Bonavista, and return.

Yours truly,

Capt.  
Paymaster.

RECEIVED  
BY VMD LOSD



May 15, 1919

No. 4092, Pte. John Fennell,  
Bonavista.

With reference to your letter of  
May 1st. I beg to advise you that I cannot trace  
any record of having cabled money to you in  
January last.

Will you advise whether it was  
sent through this Department or whether it was  
sent direct through the Anglo or through some  
Bank, so that I may furnish you with further  
particulars.

Lieut.  
For Paymaster.

April 26, 1919

#4092 Pte. John Fleming,

Spillar's Cove, B.B.

Dear Sir:-

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

Yours truly

Paymaster & O.i/c Records

Captain,



17305

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 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..... *John* ..... 2. Surname..... *Fleming* .....

3. Rank..... *Pte* ..... 4. Regtl. No..... *4092* .....

5. Address in full to which future payments of gratuity are to be forwarded..... *Spillers Cove Bonavesta* .....

.....

6. Date of enlistment in the Regiment..... *November 6. 1917* .....

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..... *do* .....

9. Address in full of such dependents..... *do* .....

.....

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 Mfld. If so, give dates and particulars of such service..... *Overseas* .....

.....

12. Give total length of time which you served on active service, whether in Mfld. or Overseas..... *Seventeen months* .....

..... *Seventeen days* ..... 1. *3* .....



*John Fleming*

Signature of Applicant:

Place of Residence: *Spiller's Cove. Bonavista*

Declared before me at: *St John's Newfoundland*

This *8<sup>th</sup>* day of *April* 19*19*

*John McCarthy*  
*J.P.*

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

POST DISCHARGE PAY.					
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due	
.....	.....	.....	<i>4 mes -</i>	<i>280<sup>00</sup></i>	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
Certified Correct.				Paymaster.	<i>[Signature]</i>

## 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!*  
*(Buck making)*

Signature of Man.

Reg. No. 4092

*J. H. Snow*  
Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date **APR 7 - 1919**

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4097 Rank Pvt Name Hemming John A  
 Date of Enlistment 9-11-17 Address Spallans St District St. John's  
 Occupation Brick Maker Classification for Discharge by 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	m
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 7-11-19

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

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

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

John F. Hemming

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 Allowed

Date 7-11-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R1219645-1* to his home at *A. Pulliam Love* and Release Certificate No. *2015* issued.

Date *7-4-19* ..... *J.A. Snow*  
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 *23-4-19*

Date *7-4-19* ..... *H. M. S. H.*  
Depot Paymaster.

Discharge approved for. *9-9-19*

Forwarded with following documents to O.C Discharge Depot.

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 *7-4-19* ..... *J.A. Snow*  
Demobilization Officer.

APPROVED.

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

with following additional documents.

Eligible for War Service Gratuity

Date *APR 9 1919* ..... *R.H. Sait Capt.*  
O. C. Discharge Depot.

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

Date .....

# The Royal Newfoundland Regiment

Class for Demobilization: *8*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *7.11.19*

Regimental No. *4092*

Name *John Fleming*

Address *Spilled Cove T.B.*

Present Medical Category *A1*

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

Members of Board {

*R. H. Lait*  
O.C. Discharge Depot.

*J. Petersen*  
Senior Medical Officer

*S. Burden*  
M. O. Depot

April 23, 1919

#4093 Pte. John Fleming,

Spillars Cove, T.B.

Dear Sir:-

Please find enclosed "Discharge Certificate  
No.1978."

Yours truly

Capt.  
Paymaster & O.i/c Records









*Pay*

# WESTERN UNION

## ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



Prefix	Code	SENT	FOR STAMPS
WORDS	CHARGE	At _____	
13		To _____ By _____	
VIA WESTERN UNION			THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

7/21/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To MRS ROBERT STREET

SPILLARSCOVE BONAVIDA (Newfoundland)

CABLE SIX POUNDS THROUGH MINISTER MILITIA

4092 FLEMING

*change a/c* *13/*

CHECKED.  
*[Signature]*  
Mar 13/18

CHARGED  
PAY BOOK *18/1/18*  
Date *13/1/18* *MR*

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

58 Victoria St. S.W. 1.

Signature \_\_\_\_\_

Address \_\_\_\_\_

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

TELEPHONE:  
BATTERSEA 3085.

THIRD LONDON GENERAL HOSPITAL,

WANDSWORTH, S.W. 18.

go Postmaster oct 24  
R W Pinfoundland. 1918  
Regt  
58 Victoria St.

Please Remit to me  
the sum of one pound  
on account of any Balance  
that may be due to me.

No 4092

*AK*

8/15/18  
Recd 9350  
10/1/18  
Appind

Pte. J. J. Fleming

INITIAL  
J.J.F.

S. C. Hall  
Capt R.A.M.C.  
Registrar, R.A.M.C.  
3rd London General Hospital,  
WANDSWORTH, S.W.

3rd LONDON GENERAL HOSPITAL R.A.M.C.  
REGISTRAR  
25 OCT 1918  
No. ....  
\* WANDSWORTH \*

Office of Pay Rec Office

Please pay on account to

94092 P. J. Fleming  
the sum of one pound  
and deduct from his  
account

3 London Gas Works

58 Victoria St

4/11/18

Approved

W. J. [Signature]

Receipts

P. J. Fleming

4/11/18



P. J.

Chief Paymaster  
Newfoundland Contingent  
Pay & Record Office

Dear Sir

will you please forward me  
credit of one pound

yours truly

H092 J Fleming  
Royal N.F.C.D. Regs

*[Signature]*  
Approved  
W. J. [Signature]  
[Signature]



P.P.S.

O.K. £ 1-0-0 M.R. 9/11/18  
Receipt No. 9621

No. 4092 Rank

Pte Name Fleming

Pay	F.A. Wks	Total
100	10	110
Less Allowment		60
Net Rate		50

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate					
						From	To		£	s	d			
Balance					Balance		7-6-18				2	5	1	
Acquittance Rolls		9	16	0	Pay @ Net Rate	8-4-18	27-11-18	173	50	96	50	17	15	6
Hospital Advances		1	3	6	<i>R.A. Hoop</i>	27-11-18	6-12-18	10	2/1			1	0	10
A.B. 64					<i>P m R 27/11/18</i>									
P.&.R.O. Payments		6	0	0	<i>£ 3 11</i>							2	1	5
<i>Sub. Pop W</i>				5										
<i>Other Stopp.</i>				7										
<i>Cash 10029</i>	<i>27/11/18</i>	4	3	0										

16176



18719/369

3rd London Gen. Hosp.  
Wandsworth,

19th November 8

4092, Pte. J. Fleming,

9925

Pay to 4092 Flemingh £6:0:0

PAID.

Chief Paymaster

Pay, Record Office

58 Victoria Street

Dear Sir

please forward me  
the sum of three pounds.  
your Obedient servant

2092 Pte J Fleming.

Royal N.F.D. Regt

Approved

Capt. Row:

Samson

16 11. 1918

*[Signature]*

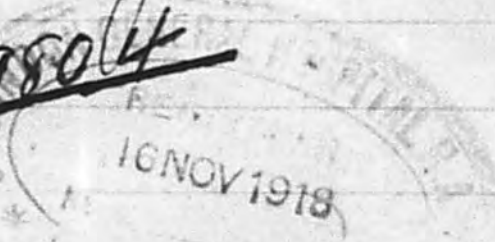
O.K. £3-0-0

*[Signature]*

Receipt No.

9804

16/11/18



*[Handwritten initials]*

# The Royal Newfoundland Regiment

*D409V*

## DEMOBILIZATION OF

Reg. No. *1093* Rank..... Name *John F. Leming*

Date of Enlistment *9-11-17* Address *Spellar Street* District *St. John's*

Occupation *Drum Major* Classification for Discharge..... 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 *11-4-19* ..... O. C. Discharge Depot. *H. M. S. St.*

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

*John F. Leming*

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. *\$160.00*

(b) ~~Clothing Supplied~~ ..... *Chubb Street*

Date *7-4-19*.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *P 1219 457* to his home at *A. Pullman Love* and Release Certificate No. *2075* issued.

Date *7-4-19*

*J.A. Snow*  
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 *23-4-19*

Date *7-4-19*

*H. M. H.*  
Depot Paymaster.

Discharge approved for *9-9-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
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 *7-4-19*

*J.A. Snow*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date **APR 9 1919**

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

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

Date *15/4/19*

*A. H. Snow*  
for spec for Records

Reg. No. 4092 Rank P/6 Name Slening John  
Attested ..... Address Spillers Cove TB  
Allotment ..... Allottee .....  
Date of Allotment ..... Returned from Overseas 2-19  
Embarked for Overseas ..... Cause Discharge

7.1.19

PASSED TO DEPARTMENT OFFICER

9.1.19

DISCHARGE APPROVED ON DEMOBILIZATION

4092

May 25th 22

Regimental Paymaster,  
South Staffordshire Regiment,  
Lichfield.

Re No. 61906, Pte. Fleming, J.

Sir:-

Your correspondence concerning the above mentioned soldier, forwarded to the Deputy Minister of Militia and Defence, Ottawa, Canada, has been passed to this Dept. for necessary action.

I am attaching a record of this man's service with the Royal Newfoundland Regiment for your information, please.

I have the honour to be  
Sir  
Your obedient servant

Lieut.-Col.,  
Chief Staff Officer

4092

May 25th, 22

Secretary, Militia Council,  
Department of Militia & Defence,  
Ottawa.

I am in receipt of your H.Q. 30/5/79 of May 10th,  
forwarding correspondence in relation to No.4906996 Pte.  
J. Fleming, South Staff's. Regiment, formerly 4092 Royal  
Newfoundland Regiment.

The necessary action will be taken.

I have the honour to be  
Sir  
Your obedient servant

Lieut.-Col.,

Chief Staff Officer,

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*1<sup>st</sup> Newfoundland*

Number of Sheets

*ONE*

Signature of O. C. Company

*[Signature]*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Hemming Jth</i>	Age on	18 years 1 months	<i>Brick layer</i>	
Joined _____ Date _____		Place and Date of Enlistment	<i>St. John's</i>	Religion	<i>R.C.</i>
Joined _____ Date _____		Period of	} with Colours <i>166</i> years.		Place of Birth
Joined _____ Date _____			} with Reserve <i>365</i> years.		
Joined _____ Date _____					

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>Demobilized St. John's 23/79</i>					

To be carried over



C.R. 4092

Ex recd from Daily Orders part II, Depot St. John's  
dated 12-2-19.

The discharge of the undernoted on demobilization has been  
APPROVED by C. C. Discharge Depot on 9-4-19.

#4092 Pte. J. Fleming.

C.R. 4092

Extract from Daily Orders Part II The Royal Newfoundland Regt.  
Dated April 25th 1919 Depot St. John's.

.....

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from noted date  
23/4 /19.

4092, Pte. John Fleming.

C.R. 4092

Extract from Daily Orders Part II Unit The Royal Rifles.  
Regt. St. John's, 11-8-19.

The undernoted Returned from Overseas and reported to  
Regt 7-2-19.

Reprinted on A.F. 2179.

4092 Pte. John Fleming.

C.R. 4092

Extract from Nominal Roll of the Royal Nfld. Regt.

~~Starbuck~~ Embarked S.S. Corsican, Jan. 30th, 1919.

4092 Fleming.

C.R. 4092

Extract from Orders Part 2 by Lt. Col. R. H. Barton D.S.O.  
Commanding 2nd Battalion Royal Newfoundland Regiment.

The following reported back from the 1st Batta ~~was~~ <sup>is</sup> taken  
on the strength and posted to "H" Company

4092 Pte. Flemming, J.

from 6-12-18.

C.R.

4092

Extract from Casualties received from P & R O .London,  
Nov.28th,1918.

The Undermentioned was discharged from 3rd London Gen.  
Hospital on 27-11-18 and granted furlough to 6-12-18. all  
marked 1, Duty.

4092 Pte. J. Fleming.

Spencer's Case  
Oct. 19/18  
C.R. 4092

W. J. Rendell  
Lieut Col,  
S. Pahr's

Dear Sir:-

Yours of the 16<sup>th</sup>  
to hand. Glad to hear  
my son John Fleming  
is improving. You make a  
slight mistake in my address  
it is Mrs. Robert Street  
not Mrs. John.

Yours truly  
Mrs. Robt Street

C.R. 4092

Oct. 16th, 1918

Mrs. John Street  
Spillar's Cove  
T.B.

Dear Madam:

I beg to inform you that additional information has been received concerning your son, No. 4092, Private John Fleming, through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that he is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.



C.R. 4092  
Counter No.

# 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)

Signature of Sender \_\_\_\_\_ Address **Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Oct 8t 1918**

To **Mrs. John Street, Spillar's Cove, T.B.**

Regret to inform you that Record Office, London, officially reports **No. 4092, Private John Flemming at 3rd London General Hospital, Wandsworth suffering from G.S.W. left leg.**

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

**J.R Bennett**

Minister of Militia.

**FOR TYPEWRITER**

C.R. 4092

Extract from Casualties received Pay & Record Office,  
London.

Admitted to 3rd London General Hospital 5-10-18.

4092 Pte. J. Flemming.

G.S.W. L. Leg.

H.M.

C.R. 4092

Extract from Casualties List No. H.A. 29656.

4092 Pte. J. Fleming.

ARR. 2 AVST GEN. H. BOULOGNE 30 SEPT.18.

GSW leg Lt.Mild.

H H.

C.R. 4092

~~Extract from the Office List No. 7, 1732 222210/10/11.~~

#4092 aJ. Fleming.

YOUNG 29-9-18.

C.R. 4092

Extract from Nominal Roll of RFLd. Regt. Draft No. 46  
from 2nd Inf. Depot Winchester to 1st Bn. B.M.F.  
Embarked Folkestone 25-5-16.

4092 Pte. J. Fleming,

C.R. 4092

Extract from Daily Orders Part 11 Unit The Royal  
Nfld. Regt., Nov. 9th, 1917.

4092 Pte. J. Fleming.

Attested for General Service with the Nfld. Regt., with  
effect from Nov. 9th, 1917.

C.R. 4092

Extract of Nominal Roll Draft. (All Ranks) to 1st  
Bn. B.E.F. Embarked Folkestone.

4092 Pte. J. Flemming.

25-5-18.

C.R. 4092

Extract from Nominal Roll Embarked St. John's for Overseas,  
per S.S. "Florissal" Dec. 11, 1917.

#4092 PTE. J. FLEMING.