



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6142 Name Arthur Holloway Corps Mith

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------|
| 1. What is your name? | 1. <u>Arthur Holloway</u> |
| 2. What is your full Address? | 2. <u>Newport BB</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>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, Arthur Holloway 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.

Arthur Holloway SIGNATURE OF RECRUIT.
Peter Mouton Signature of Witness.

6-9-15

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arthur Holloway 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 6 day of September 1915

Edwards Signature of Attesting Officer

† CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the rank of Private

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

Date 7-9-15

Place St. John's

J. King } 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).....



JG

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6142 Name Arthur Holloway Corps Mith

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Arthur Holloway</u> |
| 2. What is your full Address? | 2. <u>Newport BB</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>25</u> Years <u>0</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, Arthur Holloway 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.

Arthur Holloway SIGNATURE OF RECRUIT.

6-9-18

Peter Mouton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arthur Holloway 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 6 day of September 1918.

Signature of Attesting Officer C. Dicks Lieut

† 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 Corps

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

Date 7-9-18
Place St. John's

J. J. [Signature] } 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

6142

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

Name Arthur Holloway

Apparent age 25 years 0 months 0 days Height 5 feet 5 1/2 inches

Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 4 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Thomas Holloway
Newport BB | 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 _____									
Joined at _____ on _____									
Disch'd. <u>Arthur Holloway</u> Jan 6/1919									
Total Service forfeited as above.....									

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

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

C.R. 6142

Extract of Daily Orders Part II, Depot, St. John's dated Jan. 8th
1919

Demobilization.

The discharge of the undernoted on demobilization has been confirmed by the Officer i/c records on noted date.

6142 Pte. Arthur Holloway

Discharged 6-1-19

C.R. 6142

Extract from Daily Orders, Part 11, UNIT: The Royal Field Artillery, dated Dec. 10th. 1918.

DEMOBILIZATION.

The unaccounted Discharged on DEMOBILIZATION has been approved by C.C. Discharge Depot from noted date. ~~That~~ He is removed from Depot strength and is transferred to Discharge Depot pending confirmation by Officer i/s Records:

6142 Pte. Arthur Holloway

9/12/18.

C.R. 6142

Extract from Daily Orders Part 11 Unit, St. John's
September 7th 1918.

#6142 PTE. ARTHUR HOLLOWAY

Attested for Service with the Royal Newfoundland Regiment,
6/9/1918.

C.R. 6142

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland Regt.

Dated October 18th 1918.

SPECIAL DUTY.

THE UNDERSIGNED RETURNED FROM SPECIAL DUTY AT NO. PEARL 10/10/18.

6142 Pte. A. Holloway.

C.R. 6142

Extract from Daily Orders Part II Unit The Royal Hild. Regt.,
St. John's Sept. 24/18.

The following Men proceeded to Mount Pearl on Special Duty.
19-9-18.

6142 OPte. A. Holloway.

Holloway, Arthur

6142

May & Sept.

January 6th., 1919.

#6142 Pte. Arthur Holloway,
Newport, B.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 157."

Yours faithfully,

Captain,
Paymaster & Officer i/c Records.

Enc: 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. *6144* Rank *Pte.* Name *Arthur Holloway*
 Intended place of residence *Wesport B.B.*

2. Occupation *fisherman*
 Classification of soldier *e.* Medical Category *A.II*

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

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place *DEC 7 1918*
 Date *DEC 7 1918*
W. Bowley 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*
7. 12. 18.
Arthur X Holloway CSD
 Signature of soldier
C. B. Dickson A. Capt.
 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*
Dec 7th 1918
Arthur X Holloway
 Signature of soldier
Raymond Sgt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service *6. 9. 18* No of days on Military
 Discharged from service *Dec. 9th 1918 plus 25 days* Service *190 days*

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*
DEC 9 1918
R. H. Lant 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.*
January 6/1919
W. Bowley, Capt.
 Officer i/c Records
 The Royal Newfoundland Regiment
20. 20 19 157

25
31
27
6
128



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 **Arthur Holloway**

Regiment from which discharged *1st. Newfoundland*

Regimental number **6142**

Intended address **Newport, B..B.**

Height on discharge **5** Feet **5½**

Color of hair on discharge **Brown**

Complexion **Fair**

Color of eyes **Blue**

Descriptive Marks

Figure on discharge

Christian name of Father **Thomas**

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. **Newport, B..B.**

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)

(Rank)

Station

Date

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



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

Date **DEC 10 1918**

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6147 Rank Plt Name Holloway Arthur
 Date of Enlistment 6 9 18 Address Newport District Bonaville
 Occupation Fisherman Classification for Discharge C Medical Category AIF
 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.....	
B 178a.....	1	D 400A.....	B 1915.....	2	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.....	2			

Date 5 12 19
Arthur Holloway
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Arthur Holloway
 Hqs. Royal Newfoundland Regiment

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 H Snow.....

Date 7-12-18.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 107 to his home at Newport and Release Certificate No. 183 issued.

Date 7-1-18 C. B. Dicks 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 6-1-19

Date 7-12-18 W. H. C. Capt.
Depot Paymaster.

Discharge approved for 9th Dec 1918

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	
F 178	W 3494	B 122		Board 1st.	" 2	1	Form B
F 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	2				

Date 9-12-18 C. B. Dicks Capt
Demobilization Officer.

APPROVED.

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

Date DEC 9 1918 R. H. [Signature]
O. C. Discharge Depot.

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

Date Dec. 10/1918

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

MEDICAL HISTORY

OF

Surname Holloway

Christian Name Arthur

Table I.—GENERAL TABLE

Birthplace :—Parish	<u>New Port</u>	County	<u>Newfoundland</u>	
	<u>SPECIAL RESERVE</u>		<u>REGULAR ARMY</u>	
Examined	on <u>6th</u> day of <u>September</u> 191 <u>8</u>	on	day of	191
	at <u>St Johns</u>	at		
Declared Age	<u>25</u> years	days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>5-1/2</u> inches	feet	inches
Weight		<u>128</u> lbs.		ll s.
Chest Measurement {	Girth when fully expanded	<u>36</u> inches		inches
	Range of Expansion	<u>4</u> inches		inches
Physical Development				
Vaccination Marks {	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R. E.—V=	<u>6/6</u>	R. E.—V=	
	L. E.—V=	<u>6/6</u>	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease.....	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Paterson</u>			
(Rank)		Medical Officer		Medical Officer
Enlisted	at <u>St Johns</u>	at		
	on <u>6th</u> day of <u>Sept</u> 191 <u>8</u>	on	day of	191
Joined on Enlistment.....	Corps	Regtl. No.	Corps	Regtl. No.
	<u>Royal</u>	<u>6142</u>		
Transferred to	<u>Nfld</u>			
	<u>Regt</u>			
Became non-effective by.....	on	day of	191	on
(Signature)		day of	191	
(Rank)				

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 at Fishing

his
Arthur + Holloway

Signature of Man.

Witness Arthur + Holloway

Arthur + Holloway

Reg. No. 6142

Signature of the Vocational Officer or his Representative.

Place *St. Johns*

Date *7/12/18*

Bonaorsta

The Royal Newfoundland Regiment

Class for Demobilization:—
C

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date NOV 29 1918

Regimental No. 6142

Name Holloway Arthur Pl.

Address Newport
Bonaorsta Bay

Present Medical Category A ii

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

Members of Board
R.H. Lat Captn. O.C. Discharge Depot.
L.P. Paterson Senior Medical Officer
G.W. Burden M. O. Depot

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Hogquecans on Sept 6 1918

1. Name Arthur Falloway Age (a) Declared 25
(b) Apparent

2. Do you know of anything wrong with you? no

What severe illnesses have you had? none

eyes any
imp black
marks seen on toes of R foot

6142

3. Height 5-5 1/2 Weight 128

4. Eyesight (a) Left 6/6 (b) Right 6/6

5. Physical Defects (Examine after strenuous exercise) n

6. Examination of Lungs n

Measurement (a) Expiration 32 (b) Inspiration 36

7. Examination of Heart n

8. Examination of Urine _____

9. Examination of Mouth—(Defective Speech)

Teeth
Throat
Nose
Ears (Otorrhea)
(Deafness) n

10. Have you been successfully vaccinated, and when? yes, by nurse

11. Name and address of next of kin Arthur Thomas Falloway HB

REMARKS—

A-11

Arthur Falloway
W. Borden

Medical Examiners.

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ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Greenland Sept. 5. 1918

1. Name Arthur Scallaway Age (a) Declared 26
(b) Apparent 25

2. Do you know of anything wrong with you?
No

What severe illness have you had?
None.

3. Height 5' 7 1/2 Weight 127 lbs.

4. Eyesight (a) Left 6/6 (b) Right 6/6

5. Physical Defects (Examine after strenuous exercise)
None found 0142

6. Examination of Lungs Shows slight weakness
Measurement (a) Expiration 32 1/2 (b) Inspiration 35 1/2

7. Examination of Heart Satisfactory

8. Examination of Urine Satisfactory

9. Examination of Mouth—(Defective Speech)
Teeth 9 deficient or defective - non-reparable
Throat Satisfactory
Nose Satisfactory
Ears—(Deafness, Otorrhea) None

10. Have you been successfully vaccinated, and when? yes. 1912.

11. Name and address of next of kin
Thomas Scallaway (York) Newport

REMARKS—

We consider this man { Fit
~~Temporarily unfit for Military Service~~
~~Permanently unfit for Military Service~~

(If unfit, Form M.S.B., 10 A, should be filled and attached).

J. J. Jamieson
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland

Signature of O. C. Company

Number of Sheet *One*
C. B. Dickson Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Arthur Holloway</i>	Age on	<i>25</i> years <i>0</i> months	<i>Fisherman</i>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<i>St John's</i> <i>6-19-18</i>	<i>Meth</i>	
Joined		Date			
Joined		Date	Period of	Place of Birth	
		with Colours <i>123</i> years.	<i>Newport BB</i>		
		with Reserve <i>325</i> 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
				<i>Demobilized</i>	<i>St John's</i>	<i>6/19</i>			

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6147 Rank Pte Name Holloway Arthur
 Date of Enlistment 6.9.18 Address Newport District Bonaville
 Occupation Fisherman Classification for Discharge C Medical Category AII
 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.....	
B 178a.....	D 400A.....	B 1915.....	2	do 2nd.....	" 3.....	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.....	2			

Date 5.12.18

Arthur Holloway
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Arthur Holloway
 Hk Reg. Depot

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 H Snow

Date 7-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 107* to his home at *Newport* and Release Certificate No. *183* issued.

Date *7-12-18*

C.B. Dicks 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 *6-1-19*

Date *7-12-18*

W. Bowley Capt.
Depot Paymaster.

Discharge approved for *9th Dec 1918*

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	Form B ✓
B 178	W 3494	B 122		Board 1st	" 2	✓ 1	
R 178a ✓ 1	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	✓ 2				

Date *9.12.18*

C.B. Dicks Capt.
Demobilization Officer.

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

Date *DEC 9 1918*

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

Received the above noted documents from O. C. Discharge Depot.
Date *Dec. 10/1918*

W. Bowley Capt.
O.C.D.

Reg. No. 6142 Rank #6 Name Holloway A. (G. boy)
Attested 6-9-19. Address New Port RR
Allotment 50 Allottee Mrs William Holloway mother
Date of Allotment 1-10-18. Returned from Overseas
Embarked for Overseas Cause

Recd 1-9-18. 19-9-18 Special duty Mount Pearl Bldg 10-10-18
1st proc 14-9-18
A leave 13-10-18 to 23-10-18 lets 4-11-18.

1-12-18
9-12-18

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.

C.R. 6142

October 10th 1919.

Arthur Holloway Esq.,
New Port R&B.

Dear Sir:

Your letter of October 3rd, to hand.

In reply thereto we regret to inform you that you have not fulfilled the conditions necessary to be entitled to the "General Service Riband," which reads as follows: "A soldier must have left his place of residence and rendered approved service overseas."

Yours faithfully,

2nd Lieut.

Casualty Officer.

New Port. Oct 3rd 1917
Hon. A. E. Hickman
Minister of Militia
St John's

Dear Sir

I see by the
Advocate that you are giving
out General Service Ribands
Will you please ~~send~~ send
me mine by mail

Ex-pte Arthur Holloway
Royal Wfld Regiment

6142