



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5964 Name Benjamin Jones Corps Infantry

Questions to be put to the Recruit before Enlistment.

1. What is your name? Benjamin Jones
2. What is your full Address? St. John's 1918
3. Are you a British Subject? Yes
4. What is your age? 24 Years Months
5. What is your Trade or Calling? fisherman
6. Are you Married? No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? 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, Benjamin Jones 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.

Benjamin Jones SIGNATURE OF RECRUIT.

Corp. Raymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Benjamin Jones 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 10 day of Aug 1918

Asdicks Lieut 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 12-8 1918

Place St. John's

Asdicks Lieut 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 Benjamin Jones
Apparent age 28 years 0 months Height 5 feet 4 1/2 inches
Chest Measurement { Girth when fully expanded 36 inches
Range of expansion 5 inches
Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Jones
Templeman St 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 _____ | | | | | | | | | |
| Joined at _____ on _____ | | | | | | | | | |
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| | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |
| Total Service towards Engagement to _____ [date of discharge] _____ years _____ days | | | | | | | | | |
| " " Pensions " _____ [" "] _____ " _____ " | | | | | | | | | |



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5964 Name Benjamin Jones Corps TRK

Questions to be put to the Recruit before Enlistment.

1. What is your name? Benjamin Jones
2. What is your full Address? Appleton BTR
3. Are you a British Subject? Yes
4. What is your age? 24 Years Months
5. What is your Trade or Calling? Widderman
6. Are you Married? No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? Yes 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? Yes

I, Benjamin Jones 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.

Benjamin Jones SIGNATURE OF RECRUIT.
Orlando Raymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Benjamin Jones 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 10 day of Aug 1918.

Signature of Attesting Officer Asdick 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
 If enlisted by special authority, such will be attached to the original attestation.

Date 12-8 1918
 Place St. John's

J. H. ... } 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)

C.R. 5964

Extract from Daily Orders part 11 Depot St. John's dated Sept. 25/1918.

5964 Pte. B. Jones

The above mentioned soldier proceeded on Special Duty to Bell Island
C.B. ON 24/9/18

C.R. 5964

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's Nov. 15th, 1918.

THE FOLLOWING MAN RETURNED FROM SPECIAL DUTY AT BELL
ISLAND 15-11-18.

5964 Pte. B. Jones.

C.R. 5964

Extract from Daily Orders part 11, Depot St. John's dated December 28th.,
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 i/o Records.

#5964 Pte. Benjamin Jones.

26-12-18

CR 5964

Extract from ~~Interpretation~~ Daily Orders part
II, Depot St. John's dated Jan. 26th, 1919.

The discharges of the undernoted on demobilization
have been CONFIRMED by Officer i/o Records on
noted date 23-1-19.

#5964 Pte. Ben. Jones.

Jones, Bay:

9964

May Sept.

January 23rd., 1919

#5964 Pte. Benjamin Jones,
Templeman, B.B.

Dear Sir :-

Please find enclosed "Discharge
Certificate No. 678."

Yours faithfully,

Paymaster & C. ^{Cap'n in,} i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5964 Rank Pte. Name Benjamin Jones
 Intended place of residence Templeton R.R.

2. Occupation fisherman
 Classification of soldier C. 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 23 1918
 Date DEC 23 1918 Abbey 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. Johns Benjamin Jones
Dec 23rd 1918 Signature of soldier
Abbey 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 Dec 23rd 1918 Benjamin Jones
St. John's Signature of soldier
Raymond Sgt. Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 10. 8. 18 No of days on Military
 Discharged from service 26. 12. 18 plus 28 days. Service 167 days

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 S.NHOP LS R.H. Dent Capt.
 Officer-Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date DEC 26 1918

CONFIRMATION OF DISCHARGE

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

Place St. John's, Nfld. M. Howley Capt.
 Date January 23/1919 Officer in Charge
 The Royal Newfoundland Regiment

a 2 B 79/678

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5964 Rank Pvt. Name Jones Benjamin
 Date of Enlistment 10.8.18 Address Imperial District Bonaire
 Occupation Fitterment Classification for Discharge P Medical Category A II
 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 | 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 17.12.18

Stanley Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Benjamin Jones

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. Snowford*

Date 23.12.18

Joseph H. Snowford
O. i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 413 to his home at Jempelman BB and Release Certificate No. 565 issued.

Date 23-12-18

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 23-1-19

Date 23-12-18

W. H. H. Capt
Depot Paymaster.

Discharge approved for 26. 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 | Garn B |
| F 178 | W 3494 | B 122 | | Board 1st. | " 2. | 1 | |
| R 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 24 12. 18.

C. B. Dicks Capt
Demobilization Officer.

APPROVED.

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

with following additional documents.

Date DEC 26 1918

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

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

Date Dec 28/1918.

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

MEDICAL HISTORY

Surname *Jones*

Christian Name *Benjamin*

Table I.—GENERAL TABLE

Birthplace:—Parish *Templeman* County *Newfoundland*

| | SPECIAL RESERVE | | REGULAR ARMY | |
|-------------------------------------------------------------------|---------------------------|---------------------------|--------------|-----------------|
| | on | day of | on | day of |
| Examined | 10 | August 1918 | | 191 |
| | at | <i>St John's</i> | at | |
| Declared Age | 24 | years | | days |
| Trade or Occupation | <i>Yesternan</i> | | years | days |
| Height | 5 | feet <i>4 1/2</i> inches | feet | inches |
| Weight | | <i>172</i> lbs. | | lbs. |
| Chest Measurement | Girth when fully expanded | | <i>36</i> | inches |
| | Range of Expansion | | <i>5</i> | inches |
| Physical Development | | | | |
| Vaccination Marks | Arm | Right | Left | Right |
| | Number | | | Left |
| When Vaccinated | | | | |
| Vision | R.E.—V= | <i>4/6</i> | R.E.—V= | |
| | L.E.—V= | <i>4/6</i> | L.E.—V= | |
| (a) Marks indicating congenital peculiarities or previous disease | (a) | | (a) | |
| (b) Slight defects but not sufficient to cause rejection | (b) | | (b) | |
| Approved by (Signature) | <i>Lamm Baker</i> | | | |
| (Rank) | | Medical Officer | | Medical Officer |
| Enlisted | at | <i>St John's</i> | at | |
| | on | 10 day of <i>Aug</i> 1918 | on | day of 191 |
| | Corps | | Corps | Regtl. No. |
| Joined on Enlistment | <i>Royal Nfld 5964</i> | | | |
| Transferred to | <i>Regiment</i> | | | |
| Became non-effective by | on | day of 191 | on | day of 191 |
| (Signature) | | | | |
| (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

Benjamin Jones

Signature of _____

Reg. No. *0964*

Edwards Capt.

Signature of the Vocational Officer or his Representative.

Place *St-Johns N.Y.L.D.*

Date *23/12/18* 191.....



C. H. ...

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

Jones Benjamin

Regiment from which discharged *Royal Newfoundland*

Regimental number *5964*

Intended address *Templeman B.P.O.*

Height on discharge *5* Feet *4 1/2*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks

Figure on discharge

Christian name of Father *William*

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

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)

B. Jones

(Rank)

Station

Date *16-12-18*

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

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

Bonavista

608

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. *5964*.....

Name *Jones Benjamin Pte*

Address *Templeman Bonavista*

Present Medical Category..... *A II*

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

Members of Board { *RH Jant Call*
O.C. Discharge Depot.

L Paterson
Senior Medical Officer

Geo Burden
M. O. Depot

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on Aug 10 1918

1. Name Benjamin Jones Age (a) Declared 24
 (b) Apparent

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

What severe illnesses have you had? None

Eyes, Blue
Hair, Fair.
Mark Scar on Right Shoulder.

5964

3. Height 5' 4 1/2 Weight 122

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

5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs m
 Measurement (a) Expiration 31 (b) Inspiration 36

7. Examination of Heart m

8. Examination of Urine ~

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

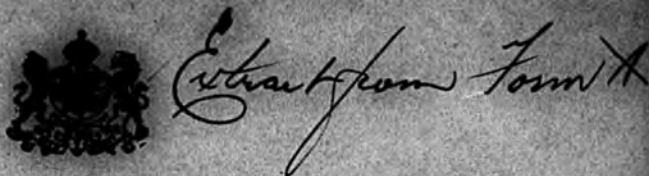
10. Have you been successfully vaccinated, and when? Yes by Dr. S. H. Brown.

11. Name and address of next of kin Father William Dimpleman P.B.

REMARKS—

A "

St. J. B. Borden
Archibald
 Medical Examiners.



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 *James Benjamin*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *5964.*
 Intended address *Templeman B.B.*
 Height on discharge *5* Feet *4 1/2*
 Color of hair on discharge *Light*
 Complexion *Fair*
 Color of eyes *Grey.*
 Descriptive Marks
 Figure on discharge
 Christian name of Father *William*
 Christian name of Mother
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children

Place and date of soldier's birth

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)

Station *J. Johns*

Date *30-12-18*

(Rank)

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

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

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5964 Rank. Plt Name Jones-Benjamin
 Date of Enlistment. 10.8.18 Address Templeman District Bonavota
 Occupation Fisherman Classification for Discharge. R 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 | 1. 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 | 1 | | | |

Date. 17.12.18

W. H. C. Carr
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Benjamin Jones

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. Snowford*

Date. 23-12-18

Joseph H. Snowford
O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 413 to his home at Implanon BB and Release Certificate No. 565 issued.

Date 23-12-18

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 23-1-19

Date 23-12-18

W. Bowley Capt
Depot Paymaster

Discharge approved for 26. 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 | Form B ✓ |
| B 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 24. 12. 18

C. B. Dicks Capt
Demobilization Officer.

APPROVED. W

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

Date DEC 26 1918

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

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

Date Dec 28/1918

W. Bowley, Capt
O.C.D.

Reg. No. 5964 Rank Pvt Name Jones Benjamin
Attested 16-5-18 Address Templeman
Allotment 50 Allottee William Jones, Father
Date of Allotment 1-9-18 Returned from Overseas
Embarked for Overseas Cause

Vacc 15-5-18, 1st Inoc 26-8-18

2nd Inoc 1-9-18, 2nd " - 9-18

24-9-18 Special duty Bell Island, held B 13th 18

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.

DEC 26 1918