



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5891 Name John Landon Corps Cpl.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>John Landon</u> |
| 2. What is your full Address? | 2. <u>Baileys Cove Bonavista</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>27</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, John Landon 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 Landon SIGNATURE OF RECRUIT.
John Landon Signature of Witness.

2-8-18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Landon 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 on this 2 day of August 1918

Signature of Attesting Officer [Signature]

† 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

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

Date.....191.....
 Place..... } Approving Officer. [Signature]

† 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 Lander
 Apparent age 22 years months. Height 5 feet 6 1/2 inches
 Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Lander
Baileys Cove Bonanza | 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 _____									
Total Service forfeited as above.....									

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



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- | | |
|--|--------------------------------|
| 1. What is your name? | 1. <u>John Landon</u> |
| 2. What is your full Address? | 2. <u>Balys Cove Bonavista</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>27</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, John Landon 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.

2-8-18

John Landon SIGNATURE OF RECRUIT.
John Moulton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Landon 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... 2 ... day of... August ... 1918

Signature of Attesting Officer Asst. Comm. ...

† 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.....191

Place.....

Asst. Comm. ... } 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

5891

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

Name John Lander

Apparent age 27 years months. Height 5 feet 6 1/2 inches

Chest Measurement { Girth when fully expanded 34 inches
Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Lander
Baileys Cove Bonaville | Relationship Father

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
(c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>7-8-18</u>									
Joined at <u>St John's</u> on <u>August 2-1918</u>									
Discharged <u>St John's</u> <u>Jan. 2/1919</u>									
Granted leave without pay from <u>7-8-18</u>									
Remobilization <u>St John's</u> <u>2-1-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 2-1-1919 [date of discharge] 15 years 15 days

" " Pensions " " " " " " " " " " " "

C.R. 5'891

Extract of Daily Orders Part II, Depot, St. John's, dated
Jan. 7th 1919.

DEMOBILIZATION.

The discharge of the undernoted man has been approved by O.C.
Discharge Depot from noted dates. He is removed from Depot
Strength and transferred to Discharge Depot pending con-
firmation by Officer i/c Records.

5891 Pte. John W^hander.

Discharged 2-1-19

C.R. 5891

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, dated August 19th, 1918.

5891 Pte. J. Lander.

Granted leave from 18/8/18 to 25/8/18.

C.R. 5891

Extract from Daily Orders part 11, from Unit The Royal
Wilt. Regt. St. John's, dated August 8, 1918.

#5891 Pte. John Lander.

Attested for Gen. Service with the Royal Wilt. Regt.

2-8-18

Lauder, John

5891

Pay Sept.

January 10th., 1919.

#5891 Pte. John Lander,
Bailey's Cove, B.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No.411."

Yours faithfully,

Captain,
Paymaster & U.i/c Records.

Enc '1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5891 Rank Pvt Name Lander John
 Intended place of residence Baileys Cove Bonaville
 2. Occupation Fisherman
 Classification of soldier A Medical Category A II
On full leave without pay granted

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.

ENLISTED under the MILITARY SERVICE ACT
 Place
 and granted leave without pay,
 Date 7-1-19
 NOT ELIGIBLE for PAY and ALLOWANCES.

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.

ENLISTED under the MILITARY SERVICE ACT
 Place and date
 and granted leave without pay,
 Signature of soldier
 NOT ELIGIBLE for PAY and ALLOWANCES.
 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 **NOT APPLICABLE**
 Signature of soldier
 Granted Leave without pay at his own request after
 attestation to continue in civilian occupation.....
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 2.8.18 No of days on Military
 Discharged from service 2.1.19 Service Jan 15 1919

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
 Date JAN 2 1919
 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 January 2nd 1919
 Officer i/c Records
 The Royal Newfoundland Regiment

2079/411

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5891 Rank Pte Name Lander John
 Date of Enlistment 2.5.18 Address Bailys Cove District Banarista
 Occupation Fisherman Classification for Discharge D Medical Category A
On date leave without pay granted.
 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 E	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 2.1.1919

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

NOT APPLICABLE.

Granted Leave without pay at his own request after attestation to continue in civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied

ENLISTED under the MILITARY SERVICE ACT and granted leave without pay, **NOT ELIGIBLE** for PAY and ALLOWANCES.

Date.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. one to his home at Barley Cove B.B. and Release Certificate No. 683 mailed

Date 6-1-19 C.B. Duko Capt.
Demobilization Officer

4. Pay and Allowances. ENLISTED under the MILITARY SERVICE ACT

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. NEE has received pay and allowances to ELIGIBLE for PAY and ALLOWANCES.

Date 2-1-19 W. H. H. Capt.
CR #1291 for bal. of a/c mailed 2-1-19 Depot Paymaster.

Discharge approved for 2 1 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	1	N.F. Med	D.F. 1	
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	2			

Date 6.1.1919 C.B. Duko Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer in Charge Records.
- Board of Pension Commissioners.

with following additional documents.

JAN 2 1919

Date [Signature]
O. C. Discharge Depot.

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

Date Jan. 8/1919

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

MEDICAL HISTORY

Surname Lander Christian Name John

Table I.—GENERAL TABLE

Birthplace:—Parish Baileys Cove County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	2	Aug.		
	at <u>St John's</u>		at	
Declared Age	27	years		
Trade or Occupation	<u>Fisherman</u>			
Height	5	feet	6 1/2	inches
Weight			137	lbs.
Chest Measurement	Girth when fully expanded		34	inches
	Range of Expansion		3	inches

	SPECIAL RESERVE		REGULAR ARMY	
	Right	Left	Right	Left
Vaccination Marks				
When Vaccinated				
Vision	R. E.—V= L. E.—V=	<u>6/8</u> <u>6/6</u>	R. E.—V= 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) _____ (Rank) _____ Medical Officer

Enlisted at St John's on 2 day of Aug 1918 at _____ on _____ day of _____ 191

Joined on Enlistment _____ Corps Royal Regt. No. 5891 _____ Corps _____ Regt. No. _____

Transferred to _____ 107422 _____ Regt

Became non-effective by _____ on _____ day of _____ 191 on _____ day of _____ 191

(Signature) _____ (Rank) 1

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 _____

Donavista

Line Number	Rcd	By	Sent	By	Check

Dated _____

To *Capt W Grady*
Trinidad

We wish leave 1/10.
For work can you please
send our discharge.
Answer.

*3891 John. Gendel.**5889 Lewis Butler*

ROYAL NEWFOUNDLAND REGIMENT.

copy

Medical Examination held at Bonaville

Date _____ 191__

1. Name *John Lander* Age (a) Declared *22*
Bonaville (b) Apparent

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

What severe illnesses have you had? *None*

5891 ✓

3. Height *5 ft. 7.* Weight *139*

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

5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs *Normal*
Measurement (a) Expiration *34* (b) Inspiration *36 1/2*

7. Examination of Heart *Normal*

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)
Teeth *Good*
Throat *Normal*
Nose ..
Ears—(Deafness, Otorrhea) ..

10. Have you been successfully vaccinated, and when? *No & vaccinated*

11. Name and address of next of kin *Mrs. John Lander*
Bonaville

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).

Aii
CW

C.A. Forbes

Medical Examiners.



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 40 by MS Rec'd by _____ Check 9/25 No. _____

Place from Bonavista 26

To Capt O'Grady.



Please grant three days more leave shipping fifth reply.

5891 John Lander. 75-8-19

Leave Extended to Oct 15/18 without pay

Auth. O.C. J.H.

To be Noted { Part II. Orders
Card Index
Nominal Rep
H

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on Aug 2nd 1914 F

1. Name John Lander Age (a) Declared 22
 (b) Apparent
2. Do you know of anything wrong with you? Trouble with left arm

What severe illnesses have you had? none

eyes grey
Comp Fair

5891

3. Height 5ft 6 1/2 Weight 182
4. Eyesight (a) Left 4/6 (b) Right 6/6
5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~
 Measurement (a) Expiration 31 (b) Inspiration 34

7. Examination of Heart ~

8. Examination of Urine ✓

9. Examination of Mouth—(Defective Speech)

- Teeth
- Throat
- Nose
- Ears—(Otorrhea)
- (Deafness)

} ~

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

11. Name and address of next of kin Father John Burley Cove 1313.

REMARKS—

A II

Accepted
G.W. Burden
 Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet One

Regiment of Royal Newfoundland

Signature of O. C. Company C. S. Dickson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>5891</u>	Age on	22 years months	Fisherman			
Name		Place and Date of Enlistment		Religion			
<u>John Landon</u>		<u>St. Johns. 2-8-18</u>		<u>C of C</u>			
Joined	Date	Period of	} with Colours <u>15th</u> years. with Reserve <u>3rd</u> years.	Place of Birth			
Joined	Date			<u>Baileys Cove B B</u>			
Joined	Date						

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
				<u>Demobilized St Johns 2/19</u>					

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5891 Rank Pte Name Landed John
 Date of Enlistment 2.8.18 Address Baileys Camp District Bonaville
 Occupation Fisherman Classification for Discharge D Medical Category A
On date Leave without Pay granted.
 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 2.1.1919

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

NOT APPLICABLE.

Granted Leave without pay at his own request after attestation to continue in civilian occupation

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. **ENLISTED** under the **MILITARY SERVICE ACT**

(b) Clothing Suppliedand granted leave without pay.

NOT ELIGIBLE for **PAY** and **ALLOWANCES.**
 O i/c. Re-clothing.

Date.....

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *nil* to his home at *Barley's Lane BB* and Release Certificate No. *683* issued *mailed*

Date *6-1-19*

CR Dukes Capt
Demobilization Officer

4. Pay and Allowances.

ENLISTED under the MILITARY SERVICE ACT

The herein named soldier's accounts are settled and all matters in connection therewith settled. He has received pay and allowances to **NOT ELIGIBLE for PAY and ALLOWANCES.**

Date *2-1-19*

CR Dukes Capt
Depot Paymaster.

Discharge approved for *2 1 19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	✓ 1	N.F. Med.	D.F. 1
F 178	W 3494	B 122		Board 1st	" 2
R 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 *21.1.1919*

CR Dukes Capt
Demobilization Officer.

APPROVED. *h.*

Documents as above forwarded to:—

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

JAN 2. 1919

Date

J. K. ...
O. C. Discharge Depot.

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

Date *Jan. 8/1919*

M. Bowley, Capt
A/C R

Reg. No. 5891 Rank Pfc Name Bailey John
Attested 2-8-18 Address Bailey Lane B.B. 7
Allotment 60 Allottee Mrs John Bailey (Mother)
Date of Allotment 1-9-18 Returned from Overseas
Embarked for Overseas Cause

Recd 3-8-18

1. leave 15-5-18 to 25-5-18.

4. extension of leave without pay 25-8-18 to 15-10-18

2-1-19

PASSED BY MEDICAL OFFICER

7-1-19.

DISCHARGE APPROVED ON DEMOBILISATION.