



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5805 Name Arch Lynch C of C

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Arch Lynch
- 2. What is your full Address? 2. Upper Isld Cove
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 27 Years Months
- 5. What is your Trade or Calling? 5. Fisherman
- 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 Yes
- 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, Arch Lynch 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.

Arch Wallace Lynch SIGNATURE OF RECRUIT.

R. Power Signature of Witness.

Arch Lynch OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arch Lynch 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 Upper Isld Cove on this 17 day of July 1915

R. Power 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 C of C.

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

Date July 18/15 1915
Place Upper Isld Cove } 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 Arch Lynch
 Apparent age 22 years months. Height 5 feet 7 3/4 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George
Upper Isld Cove | Relationship Father
St Grace 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 " _____ [" "] _____ " _____ "									



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 580 S

Name Arch Lynch C of C

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Arch Lynch</u> |
| 2. What is your full Address? | 2. <u>Upper Isld. Cove</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>27</u> Years <u>7</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 <u>Yes</u> |
| 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, Arch Lynch 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.

Arch Lynch SIGNATURE OF RECRUIT.
R. Power Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arch Lynch 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 17 day of July 1918

Signature of Attesting Officer Edwards 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 July 18/18 1918 } Approving Officer.
Place St. John's }

† 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

5805.

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

Name Arch Lynch

Apparent age 22 years months Height 5 feet 4 3/4 inches

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

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George

Upper Seld Cove | Relationship Father

H. Grace 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>17th 7-1918</u>									
Joined at <u>St John's</u> on <u>July 17-1918</u>									
Detached to St John's Jan 12/1919									
Remobilization St John's 12-1-1919									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>12-1-1919</u> (date of discharge) <u> </u> years <u>180</u> days									
" " Pensions " " " " " " " " " "									

C.R. 5-805-

Extract of Daily Orders Part II, Depot St. John's,
dated Jan. 14th 1919.

Discharge confirmed on demobilization.

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

5805 Pte. Arh Lynch.

Discharged 12-1-19

C.R.

5805

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt., St. John's, Dec.16th, 1918.

The undernoted man discharged on Demobilization ~~has~~ been approved by G.C. Discharge Depot from noted date. he is removed from Dept strength and transferred to Discharge Depot pending confirmation by Officer i/c Records.

5805 Pte. A. Lynch.

15-12-18.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated July 19, 1918.

#5805 Pte. Archibald Bynch.

Attested for General Service with the Royal Nfld.
Regiment July 17, 1918.

Lynch, Arch.

5805

Ray sept

January 12.1919.

#5805 Pte. Archibald Lynch,
Upper Island Cove,
Harbor Grace Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No.428."

Yours faithfully,

Captain,
Paymaster & O.I-C Records.

Enc: 1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5805 Rank Pte Name Arch Lynch
 Intended place of residence Upper 2nd Cove

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 14 1918
 Date W. M. Cops
 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
Dec 14th 1918
 Signature of soldier a Lynch
 Signature of witness W. M. Cops A. Cap

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 Johns
13-12-18
 Signature of soldier a Lynch
 Signature of witness W. M. Cops

STATEMENT OF SERVICE

7. Enlisted for service 17-7-18 No of days on Military
 Discharged from service 15-12-18 plus 28 days Service 180.....

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
DEC 15 1918
R. H. Lait
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St Johns Med
January 12 1919
 Date 12-20-1918
W. M. Cops
 Officer in Charge Records
 The Royal Newfoundland Regiment

11
30
31
30
31
12
180

The Royal Newfoundland Regiment

DEMobilIZATION OF
 Reg. No. 5805 Rank Plt. Name Lynch Arch.
 Date of Enlistment 17-7-18 Address Upper Old Cove District H. Grace
 Occupation Volunteer Classification for Discharge 6 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.....	1 B 1915.....	2	do 2nd.....	" 3.....	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.....	1			

Date 12-12-18

Stanley Capt
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Arch ibee Lynch

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$ 60.00

(b) ~~Clothing Supplied~~

Joseph A. [Signature]

Date 13-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 253 to his home at Upper Isold Cove and Release Certificate No. 333 issued.

Date 13-12-18 OB Drake 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 12-1-19

Date 14-12-18 Atkinson Capt
Depot Paymaster.

Discharge approved for 15.12.18

Forwarded with following documents to O.C Discharge Depot.

N.F. P36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1	
E 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	1	Form B
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.....	X	do 4th.....	" 5.....		
B 179b.....	B 103.....	ME 2.....			" 6.....		✓
B 179c.....	B 120.....	M 93.....	1				

Date 14 12 18 OB Drake Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 15 1918 R.H. [Signature] Capt
O. C. Discharge Depot.

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

Date Dec. 18/1918

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

MEDICAL HISTORY

Surname Lynch. OF Archt.
 Christian Name Archt.

Table I.—GENERAL TABLE

Birthplace :—Parish	<u>Upper Salf Cove</u>		County	<u>Newfoundland.</u>	
	<u>SPECIAL RESERVE</u>			<u>REGULAR ARMY</u>	
Examined	on	<u>17</u> day of <u>July</u>	191 <u>8</u>	on	day of 191
	at	<u>St. John's</u>		at	
Declared Age		<u>22</u> years	days	years	days
Trade or Occupation	<u>Postman</u>				
Height		<u>5</u> feet	<u>4 3/4</u> inches	feet	inches
Weight			<u>132</u> lbs.		lbs.
Chest Measurement {	Girth when fully expanded		<u>37</u> inches		inches
	Range of Expansion		<u>3</u> inches		inches
Physical Development					
Vaccination Marks {	Arm	Right	Left	Right	Left
	Number				
When Vaccinated					
Vision	R.E.—V=	<u>4/8</u>		R.E.—V=	
	L.E.—V=	<u>4/12</u>		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)				(a)
	(b) Slight defects but not sufficient to cause rejection	(b)			
Approved by (Signature)	<u>L. M. Paterson</u>				
(Rank)	<u>Major</u>			Medical Officer	Medical Officer
Enlisted	at				
	on	<u>17</u> day of <u>July</u>	191 <u>8</u>	on	day of 191
		Corps	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	<u>Royal Nfld. Regiment. 5805</u>				
Transferred to					
Became non-effective by	on	day of	191	on	day of 191
(Signature)					
(Rank)					

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signatures
	<p><i>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>C</u> for Discharge on Demobilisation. Medical category <u>A II</u></i></p> <p><u>28-11-18</u> <i>W. H. H. H.</i> <small>Date of T.M.B. Assistant Adjutant</small> <small>Discharge Depot—Newfoundland</small></p>

TABLE IV.—SERVICE TABLE

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation

T. G.



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 *Synch, Archibald*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *5805*
 Intended address *Upper Island Cove, Conception Bay*
 Height on discharge *5 Feet 6"*
 Color of hair on discharge *Brown*
 Complexion *Ruddy*
 Color of eyes *Blue*
 Descriptive Marks —
 Figure on discharge *Slight*
 Christian name of Father *George*
 Christian name of Mother *Rebecca*
 Wife's maiden name in full —
 Date and place of marriage —
 Christian names of children —

Place and date of soldier's birth. *Upper Island Cove, 4/4/97*
 Nature and locality of civil employment required *Liskerman, Conception Bay*

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Archibald Synch* (Rank) *pte*
 Station *St Johns* Date *10/12/18*

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



W. J. Woods, M.D.
 Commanding Officer of Hospital
 Unit, or Command Depot

Station

Date

H. Grace

The Royal Newfoundland Regiment

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

Class for Demobilization: 6

400 A

Discharge Depot: Headquarters The Royal Newfoundland Regiment

NOV 28 1918

Date

Regimental No. *5805*.....

Name *Lynch, Archibald*.....

(pk)

Address *Upper Island Cove, Conception Bay*.....

Present Medical Category.....

A II

Recommended for:— (a) Immediate discharge

(b) ~~Standing Medical Board~~.....

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

Members of Board

Paterson
Senior Medical Officer

Geo. Burden
M. O. Depot

*Let's
20-11-18
Under Army Here*

Civil Re-establishment Committee.



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

To work as fitter

- a Lynch

Signature of Man.

Chas. H. A. H.

Signature of the Vocational Officer or his Representative.

Reg. No. *5805-*

Place *St. John's*

Date *13/12/18* 191

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on July 17 1918

1. Name Arch Lynch. Age (a) Declared 22
(b) Apparent

2. Do you know of anything wrong with you? No
What severe illnesses have you had? None.

Eyes Blue
Comp. Hair.
Marks.

5805

3. Height 5ft-4 3/4 in Weight 132.
4. Eyesight (a) Left 1/10 (b) Right 1/12
5. Physical Defects (Examine after strenuous exercise) ✓

6. Examination of Lungs " " Measurement (a) Expiration 34 (b) Inspiration 37

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? No.
11. Name and address of next of kin Father George. Upper Island Cove. St. John's Dist.

REMARKS--
A. 11

L. W. Borden
Archibald
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland Regiment Signature of O. C. Company C. B. Dickson
Number of Sheet one

Regimental Number and Name		Enlistment		Title	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	years	months	
<u>505</u>	<u>Arch Lynch</u>	<u>22</u>			<u>Soldier</u>
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	<u>St John's</u>		<u>C of E</u>	
Joined	Date	Period of	with Colours	years.	Place of Birth
Joined	Date		with Reserve	years.	<u>Upper Saddle Cove</u>
			<u>180</u>		
			<u>365</u>		

Place	Date of Offence	Rank	Causes of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized</u>	<u>St John's</u>	<u>12</u>	<u>'19</u>		

To be carried over.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5805 Rank Plt. Name Lynch Arch.
 Date of Enlistment 17-7-18 Address Upper Old Cove District H. Grace
 Occupation Steward Classification for Discharge 6 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.....	1 B 1915.....	2	do 2nd.....	" 3.....	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.....	1			

Date 12-12-18

Stanley Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Archibald Lynch

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.....

Date 13-12-18

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 253* to his home at *Upper Island Cove* and Release Certificate No. *333* issued.

Date *13-12-18*

ASDicks 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 *12-1-19*

Date *14-12-18*

ASDicks Capt
Depot Paymaster.

Discharge approved for *15-12-18*

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	<i>Form B</i>
B 178	W 3494	B 122	✓ 2	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.	X	do 4th.	" 5.		
B 179b	B 103	ME 2.			" 6.		
B 179c	B 120	M 93.	✓ 1				✓

Date *14.12.18*

ASDicks Capt
Demobilization Officer.

APPROVED. *N.*

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

Date *DEC 15 1918*

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

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

Date *Dec. 18/1918*

M. Bowley Capt
i/c

Reg. No. 5805 Rank Pfc Name Lynch Archibald 7

Attested 17-7-18 Address Upper Island Cove

Allotment..... Allottee

Date of Allotment..... Returned from Overseas.....

Embarked for Overseas..... Cause.....

G.L. without pay 18-7-18 to 15-8-18.
20-11-18 Returned from leave without pay and reported at depot
12-12-18 PASSED TO DEMOBILIZATION OFFICER
15-72-18, DISCHARGE APPROVED ON DEMOBILISATION.