



H THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 14461 Name J. J. [unclear] Corps [unclear]

Questions to be put to the Recruit before Enlistment.

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

I, [unclear] 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.

[unclear] SIGNATURE OF RECRUIT.

[unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, [unclear] 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 [unclear] on this 17 day of April 1915

Signature of Attesting Officer [unclear]

† 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 [unclear]

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

Date [unclear] 1915 }
Place [unclear] } 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 William Lynch

Apparent age 18 years 5 months Height 5 feet 6 inches

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

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Paradise Bay | 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.

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. 1114 Name Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|----------------------------|
| 1. What is your name? | 1. |
| 2. What is your full Address? | 2. |
| 3. Are you a British Subject? | 3. |
| 4. What is your age? | 4. Years .. Months .. |
| 5. What is your Trade or Calling? | 5. |
| 6. Are you Married? | 6. |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } | 7. |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. |
| 9. Are you willing to be enlisted for General Service? .. | 9. |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. } Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. |

I,, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

..... SIGNATURE OF RECRUIT.

..... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I,, do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at..... on this..... day of..... 191

* Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been 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.....

} 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
 Apparent age years months. Height feet inches
 Chest Measurement { Girth when fully expanded inches
 { Range of expansion inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin
 | Relationship

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					[" "]	years	days	



H THE ROYAL NEWFOUNDLAND REGIMENT I

ATTESTATION OF

No. 4461 Name Lynch, Willie Corps Loft

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Willie Lynch
- 2. What is your full Address? 2. Paradise C.B.
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 Years 5 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
- 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, Willie 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.

A Willie Lynch SIGNATURE OF RECRUIT.
17.4.18 Walter Lynch Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Willie 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 St. John's on this 17 day of April 1918

Signature of Attesting Officer Geo. S. Bartley

† 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 April 17 1918
 Place St. John's } 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 William Lynch
 Apparent age 18 years 5 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 4 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin David Lynch
Paradise Bay | 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 Dep't	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>17-4-1918</u>									
Joined at <u>St. Helier</u> on <u>April - 17 - 1918</u>									
<u>Discharged. St. Helier Jan. 16/1919</u>									
<u>Demobilization St. Helier 16-1-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>16-1-1919</u> (date of discharge) — years <u>2 1/5</u> days									
Pensions " " " " " " " " " " " "									

C.R. 4461

Extract from Daily Orders part II Depot St. John's dated Jan. 17/1919.

The discharges of the undernoted have been CONFIRMED by Officer
i/c Records from 16-1-19.

#4461 Pte. Willis Lynch.

C.R. 4461

Extract from Daily Orders part 11, Depot
St. John's dated December 20th., 1918.

#4461 Pte. Willis Lynch.

The a/m discharge on demobilization have been
approved by O. C. discharge Depot from noted
date. He is removed from Depot strength and
transferred to discharge depot pending confirmation
by Officer i/c Records, 19-12-18

C.R. 4461

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt. St. John's, Nov. ²² 20th, 1918.

4461 Pte. W. Lynch.

Discharged from Fever Hospital 20-11-18.

MM.

C.R. 4461

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, dated October 12th 1918.

Hospital.

4461 Pte. W. Lynch.

Admitted to Fever Hospital 11/10/18.

C.R. 4461

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment dated October 11th 1918.

Leave.

4461 Pte. W. Lynch.

Granted Leave from 10/10/18 to 20/10/18.

C.R. 4461

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
St. John's, Sept. 14th, 1918.

4461 Pte. N. Lynch,

Discharged from Barracks Hospital & Admitted to Fever Hospital
14-9-18.

C.R. 4461

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
St. John's, Sept. 14th, 1918.

4461 Pte. N. Lynch,

Adm. of Barracks Hospital 13-9-18.

C.R. 4461

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 18, 1918.

#4461 Pte. W. Lynch.

Attested for General Service, with the Royal Nfld.
Regiment, from 17/4/18. ~~1/1~~

Lynch, Willie

4461

May Sept.

January 16th., 1919

#4461 Pte. Willis Lynch,

Paradise,

Hr.^{ms} in Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No.536."

Yours faithfully,

Captain,
Paymaster & O.i/c Records

enc 1 l.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4461 Rank Plt Name Willis Lynch
 Intended place of residence Paradise N. Man.
2. Occupation Fisherman
 Classification of soldier A Medical Category A.U.
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 St. John's
 Date DEC 19 1918
- W. Lynch 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
Dec 19th 1918
- W. Lynch
 Signature of soldier
- C. S. Dicks 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
18-12-18
- W. Lynch
 Signature of soldier
- C. S. Dicks
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 17-4-18 No of days on Military
 Discharged from service 19-12-18 plus 28 days Service 275

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 19 1918
- R. H. Sait Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
- Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St. John's. Nfld.
January 16/1919
- W. B. 2079/536
- W. Bowley Capt.
 Officer in Charge
 The Royal Newfoundland Regiment

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4461 Rank Pvt Name Lynch Willis
 Date of Enlistment 17-4-18 Address Paradise District McMain
 Occupation Fisherman Classification for Discharge A Medical Category A2
 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	1		" 6	
B 179c	B 120	M 93				

Date 17-12-18

Joseph H. Brown
O.C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am.....in a position to resume 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. 860.00

(b) Clothing Supplied *Joseph H. Brown*

Date 18-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 470 to his home
 at Madurai and Release Certificate No. 18-12-18 issued.

Date 18-12-18
 Demobilization Officer CRS Duro Capt

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 19-12-18

Date
 Depot Paymaster. Madurai Capt.

Discharge approved for 19.12.18

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	1	Form B
E 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	2	
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	3	
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....	4	
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....	5	
B 179b.....	B 103.....	ME 2.....		" 6.....	6	
B 179c.....	B 120.....	M 93.....				

Date 19.12.18
 Demobilization Officer. CRS Duro Capt

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

DEC 19 1918

Date
 O. C. Discharge Depot. RH Capt

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

Date Dec 21/1918

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

MEDICAL HISTORY

Surname Lynch OF Christian Name Willis

Table I.—GENERAL TABLE.

Birthplace:—Parish Paradise County C.B.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	17	4		1918
	at <u>Headquarters</u>		at	
Declared Age	18	5		
	years	days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	5	6		
	feet	inches	feet	inches
Weight	129			
		lbs.		lbs.
Chest Measurement	Girth when fully expanded		34 1/2	
	Range of Expansion		4 1/2	
		inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/		/	
When Vaccinated				
Vision	R. E.—V=	6/6	R. E.—V=	
	L. E.—V=	6/6	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>Lammie Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at	<u>St John's N.F.</u>	at	
	on	day of	on	day of
		191		191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>Royal Buffs</u>	<u>4461</u>		
Transferred to				
Became non-effective by	on	day of	on	day of
		191		191
[Signature]				
[Rank]				

Table II.—Only for admission to hospital or to the sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
<i>J. J. J. Hospital.</i>				10	10	18	<i>Diphtheria</i>		
<i>do</i>	11	10	18	20	11	18	<i>Scarlet Fever.</i>	42	

list in case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

H Peterson M.D.
H Peterson M.D.

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 *Willis Lynch*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *4461*
 Intended address *Pondassie Conception Bay*
 Height on discharge Feet
 Color of hair on discharge *Dark*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks *varicellous marks*
 Figure on discharge *normal*
 Christian name of Father *David*
 Christian name of Mother *marion*
 Wife's maiden name in full
 Date and place of marriage } *not married*
 Christian names of children }
 Place and date of soldier's birth. *Pondassie Conception Bay*
 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) *Willis Lynch*
Witness J. Deneand (Rank) *Q. Ke*
 Station *Princes Point* Date *11/12/18*

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.

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

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 fisherman

*Wm
Willis + Lynch
mark*

*Witness J. Sinclair
RTS*

Signature of Man.

Chadwick Cap

Reg. No. *4461*

Signature of the Vocational Officer or his Representative.

Place

St John's N.Y.C.P.

Date

10/2/18

191

C

H. main

Demobilization Form 1

400 A

The Royal Newfoundland Regiment

Class for Demobilization:—
A

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

NOV 29 1918

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. *4461*...

Name *Lynch Willis* *Jr*

Address *Paradise C.B.*

Present Medical Category *A II*

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

Members of Board {
R. H. East Capt.
O.C. Discharge Depot.
P. Paterson
Senior Medical Officer
B. W. Burden
M. O. Depot



This Form is to be used in connection with Pamph. M. E. (1) N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Willis Leach H/161
 aged 1.8 yrs conducted at Headquarters
 Date: April 1917 Recruiting Officer:

NO OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 eye
- 8 eye
- 9 two
- 10 n
- 11 n
- 12 n
- 13 n
- 14 n
- 15 n
- 16 n
- 17 n
- 18 n
- 19 6/6 both
- 20 n
- 21 n
- 22 n
- 23 n
- 24 n
- 25 n
- 26 n
- 27 n
- 28 n
- 29 n
- 30 n
- 31 n
- 32 n
- 33 no
- 34 57 6 in
- 35 129 lbs
- 36 30 34 1/2
- 37 Father David Paradise & Bay
- 38 nobody.
- 39

Handwritten initials

Signature of Medical Examiner:

Sto Burden



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *Willis Lynch*, Regl. No. *4461*
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and *Seventy* Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}_{or} Persons
 concerned, viz. :

Allotment begins *August 1st 1918*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>6435</i>	<i>Father</i>	<i>Mr David Lynch</i>	<i>Paradise C.B.</i>	<i>70</i>
			Total Allotment, \$	<i>70</i>

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) *S. Murphy*
 Officer Commanding
b Company
St John's Nfld.
July 6th 1918.

(Sig.) *Willis Lynch*
 X *W. Knopf.*
 (Rank) *Private*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheets

Regiment of

The Royal Nfld

Signature of O. C. Company

one
C. J. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>11161 Willis Lynch</i>	Age on	<i>18</i> years, <i>0</i> months	<i>Fisherman</i>	
Joined	Date	Place and Date of Enlistment	<i>St. John's 17-1-18</i>	Religion	
Joined	Date	Period of	with Colours <i>27</i> years. with Reserve <i>36</i> years.	Place of Birth	
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
									<i>Demobilized St. John's, 16/19</i>

To be carried over

Army Form B. 121.

4461

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. *4461* Rank *Pfc* Name *Lynch Willis*
 Date of Enlistment *17-4-18* Address *Paradise* District *St. John's*
 Occupation *Fisherman* Classification for Discharge *A* Medical Category *A2*
 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	1		" 6	
B 179c	B 120	M 93				

Date *17-12-18*

W. Lynch
 O.C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

W 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 H. Snow*

Date *18-12-18*

O i/c. Re-clothing.

DEC 1918

4461

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4461 Rank Pte Name Lynch Willis
 Date of Enlistment 17-4-18 Address Paradise District Htmain
 Occupation Fisherman Classification for Discharge A Medical Category A2
 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.....	1	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....	1		" 6.....	
B 179c.....	B 120.....	M 93.....				

Date 17-12-18

W. Lynch
 O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

W 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.....

(b) Clothing Supplied.....

Joseph H. Snow

Date 18-12-18

O i/c. Re-clothing.

DEC 18 1918

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 235 to his home at Paradise Rd and Release Certificate No. 470 issued.

Date 18-12-18

OSDicks 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 16-1-19

Date 19-12-18

McNulty Capt.
Depot Paymaster.

Discharge approved for 19.12.18

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	J. Brown
F 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	✓ 1	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 19.12.18

OSDicks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 19 1918

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

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

Date Dec. 21/1918

McNulty Capt.
O.C.D.

Reg. No. 4461 Rank Pvt. Name Lynch William
 Attested 17.4.18 Address Paradise C.B.
 Allotment 70 Allottee Mr David Lynch (Father)
 Date of Allotment 1-8-18 Returned from Overseas _____
 Embarked for Overseas _____ Cause _____

Page 23 1/2 *St. Inoc 17-5-18 To Inoc 25-5-18 315 13 1/2 Inoc*

24-7-18 Admitted to M.S.D. (measles)

13-9-18 Admitted to Barracks Hosp.

14-9-18 Discharged from Barracks Hosp. + admitted to
 Fever Hospital

9-10-18 Discharged from Fever Hospital
 5 leave 10¹⁰/₁₄ to 12¹⁰/₁₄

11-10-18 Adm. to Fever Hosp.

26-11-18 Discharged from Fever Hosp.

17-12-18 PASSED TO DEMOBILIZATION OFFICER

19-12-78

DISCHARGE APPROVED ON DEMOBILISATION.