



**1, FIRST NEWFOUNDLAND REGIMENT**

4326

**ATTESTATION OF**

No. 4326 Name Alfred G. Parrott Corps Rif

**Questions to be put to the Recruit before Enlistment**

- |                                                                                                                                    |                                          |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| 1. What is your name? .....                                                                                                        | 1. <u>Alfred G. Parrott</u> .....        |
| 2. What is your full Address? .....                                                                                                | 2. <u>Conventure</u> .....               |
| 3. Are you a British Subject? .....                                                                                                | 3. <u>Yes</u> .....                      |
| 4. What is your age? .....                                                                                                         | 4. <u>18</u> Years <u>6</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, Alfred G. Parrott 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.

# 2571118 Alfred G. Parrott SIGNATURE OF RECRUIT.  
Frank B. Murray Signature of Witness.

**OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.**

I, Alfred G. Parrott 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 25 day of January 1918  
W. W. W. 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 1st .....  
 If enlisted by special authority, such will be attached to the original attestation.  
 Date Jan 25 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 Alfred G Parrott  
 Apparent age 18 years 6 months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 37 inches  
 Range of expansion 2 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Saml. Smith Son of T. 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
M	

## 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>25-1-18</u>									
Joined at <u>1st Regt</u> on <u>January 25-1918</u>									
<u>Discharged July 7, 1919</u>									
<u>Embarked St John's train to Halifax NB 28<sup>th</sup> 18.</u>									
<u>Embarked for Halifax 20<sup>th</sup> 4-1918.</u>									
<u>Embarked for Pt S. 26-10-18 found Battle Honour 3-11-18.</u>									
<u>24<sup>th</sup> 6<sup>th</sup> Depot Ft. S.C. Foot. 11-12-18 to duty 21-12-18.</u>									
<u>Arrived 27.5-1919</u>									
<u>Arrived Newfoundland 11-6-1919</u>									
<u>Demobilization St John's 7-7-19</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>7-7-19</u> (date of discharge)					1	164			
Pensions " " " " " "									

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 326 Rank Pte Name Parratt Alfred H.  
 Date of Enlistment 25/1/18 Address Bonaventure District Trinity Bay  
 Occupation Fisherman Classification for Discharge E Medical Category A I  
 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	1	A.F.S.
B 178	W 3494	B 122	Board 1st	" 2	256	1
B 178a	D 400A	B 1915	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				

Date 7/6/19

O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Parratt A

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 \_\_\_\_\_

O. C. Discharge Depot

Date 9-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1696 to his home at Bonaventure and Release Certificate No. 2513 issued.

Date 9-6-19

J.A. Snow  
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 7-7-19

Date 9-6-19

J.A. Snow  
Depot Paymaster.

Discharge approved for 23-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	
F 178	W 3494	B 122	Board 1st	" 2	
F 178a	D 400A	B 1915	do 2nd	" 3	2 Form B
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 9-6-19

J.A. Snow  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 23 1919

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

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

Date .....

C.R. 4326

Extract from Daily Orders Part 11 Unit The Royal Wfld.

- Regt. By Lt. Col. T.G. Mathias, D.S.O. Commanding the 1st  
Battn. 3-11-18.

The following joined the Battn. 3-11-18.

4326 Pte. A. Parrott

C Coy.

6  
C.R. 4326

**Extract from Daily Orders Part II Unit The Royal HKIA.  
Regt. St. John's, July 10th, 1919.**

**The discharge of the undernoted on demobilisation has been  
CONFIRMED by Officer's Records from 7-7-19.**

4326 Pte. Alfred Parrott,

CR. 4324

Extract from Daily Orders Part II Unit Royal Wfld. Regt. Depot  
St. John's dated June 15th 1919.

The discharge of the undernoted on demobilisation has been  
Approved by O.C. Discharge Depot with effect from 25/6/19.

4326, Pte. Alfred Parrott.

C.R. 4326

Extract from Paddy Orders Part 11 Depot, St. John's,

Date 12-6-19.

4326 Pte. Alfred Parrott

Reported at Headquarters 1-6-19.

BE "Corsican"

which sailed Liverpool May 22/1919.



C.R. 4326

Extract from Nominal Roll from 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left  
Rouen Camps 22/4/19, embarked at Havre 22/4/19,  
disembarked at Southampton 23/4/19 and reached  
Hazeley Down Camp 23/4/19.

#4326 Pte. A. Parrott.

362



EXPEDITIONARY FORCE - FRANCE

C.R. 4326

LIST NO. H.A. 35690.

O.C. 44 C.C. STATION BEF. FRANCE reports 11th Feb. 19.

(Via Canadian Record Office).

Admitted 13 Dec. 18.

4326 Pte. Parrott, A. 1/C.E.

ICT. Foot L.

The D.A.G. G.H.Q. 3rd Echelon, B.E.F. now states in reply to a communication from this Department that the above mentioned soldier belongs to the 1st BATTALION ROYAL NEWFOUNDLAND REGIMENT.

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C.R. 4326

**Extract of Part 2 Orders by Major A.E. Bernard, M.C.  
Commanding 1st Battalion Royal Newfoundland Regiment  
dated 22/12/18**

**The undermentioned is discharged to duty.**

4326 Pte. A. Barrett

C. Company

C.F.

4326

Extract from Daily Orders Part 11 Unit The Rif. Regt.

By A.E. Bernard, Comdgr. 1st Battn. 22-22-18.

The n/m is discharged to duty.

4326 Pte. A. Parrott.

C.R. 4326

Extract from Seminal Re-inforcement Draft No.55: Embarked Folkeston 25/10/18  
from 2nd Batta, Royal Newfoundland Regiment, Hazelton Down Camp, Winchester,  
to 1st Batta, Royal Newfoundland Regiment, B.E.F.

4326 Pte. Parrott, A.G.

MP.

**NEWFOUNDLAND POSTAL TELEGRAPHS.**

C.R. 4326

**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 **Militia Dept.**

Line Number	Recd	By	Sent	by	Check

Dated **April 28th 1918.**To **Mr. Samuel Parrott, Smith Sound, T.B.**

Regret to inform you that Record Office, London,

officially reports #4326, Pte. Alfred G. Parrott at Hospital  
 Liverpool, landed from draft which embarked here March 28th  
 suffering from Measles

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

**J.R. Bennett,**

Acting Minister of Militia.

**FOR TYPEWRITER**

C. 4326

Extract from Casualties received from Pay & Record  
Office, London, dated May 3rd, 1918.

The undermentioned of this draft was left in Hospital  
at Liverpool:

O.C. 1st Western General Hosp. L'pool reports

#4326 Pte. A. Parrott

Measles slight admitted Sparrow Hall Aux. Hosp. Liverpool

C.R. 4326

Abstract from Medical Roll Subscribed at. J. ha's for overseas  
Mar. 20th, 1918.

4326 Pts. Parrott J.



CRI 4326

Extract of Daily Orders part 11, from Unit 4/1st  
Royal Newfoundland Regiment, Headquarters, dated  
January 25, 1918.

#4326 Pte. C. Parrott.

Attested for General Service with the 1st Newfoundland  
Regiment, with effect from 25/1/18.

A. S. Powell

C.R. 4326

~~P.S. U~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Waterman*
2. Regtl. No. *3263* 3. Rank. *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Parrott* *alfred* (Surname) (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday. *18*
6. Posted for duty on *Jan 25/18* at *St John's* in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*  
*nil*

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

- (i) Service during the present war .. .. .
- (ii) Previous active service .. .. .
- (iii) Climate in pre-war service .. .. .
- (iv) Ordinary military service before the war .. .. .
- (v) Serious negligence or misconduct on the man's part. } .. .. .

} na

14 (a). If not due to any of these causes, to what specific condition do you attribute it ? }

na.

15. What is his present condition ?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

no complaints of no disability

In all cases such as facial injuries, eyes, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

16. Was an operation performed ? If so, when and what was its nature ?

na.

17. If not, was an operation advised and declined ?

na.

18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable ?

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions ?

na.

20. Do you recommend—

(a) Discharge as permanently unfit ?

(b) Change to United Kingdom ?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation

W.F. Procuier. Capt R.A.M.C.  
Medical Officer in charge of case.

Station Bungay D. Camp

Date 30 4-19

\* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause



## 1ST. NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, Alfred G. Parrott, Regl. No. 4396  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
 Dollars and Sixty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons  
 concerned, viz.:

Allotment begins April 1, 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3772</u>	<u>Father</u>	<u>Mr. Saml Parrott</u>	<u>Letley Trinity Bay</u>	<u>60</u>
			Total Allotment, \$	

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.)

[Signature]  
 Officer Commanding

Company

191 8

(Sig.)

(Rank)

Alfred G. Parrott  
Private

Witness J. W. Pittman

17402/2/P&amp;A

(504) W. W. W. 10,000,000. 1917. C. &amp; Co.

Form  
C. 548  
1560

ENCLOSURE

NEWFOUNDLAND CONTINGENT  
& RECORD OFFICE  
Army Form C. 548.

MEMORANDUM.

CHIEF PAYMASTER &amp; OFFICER I/C RECORDS.

NEWFOUNDLAND CONTINGENT,  
53 VICTORIA STREET,  
LONDON, S.W. 1.  
ENGLAND.To Officer i/c Savings  
Bank,  
2nd. Bn. Royal Newfoundland Rgt  
Winchester.

Pay &amp; Record Office,

28th October, 1918.

4326. Pte. A. Parrott.

Reference your memo 26/10/18  
(9330): Cheque 10/- is  
enclosed in payment. Kindly  
acknowledge receipt hereon.Major.  
Chief Paymaster & O. i/c Records  
PAY & RECORD OFFICE

Ref-Nos IN

Rec'd

Ack'd Aus'd

Ref Nos. 001

FOR SUPPLY

L. ALCH. BY

Gord

P&amp;A

R&amp;C

B&amp;T

P.S.

30 OCT 1918

From C'd

Ref. Nos. 001

To

ANSWER.

Oct 29 1918

Received from  
 Paymaster Royal Rfd.  
 Regt the sum of Ten  
 Shillings (10/-) on  
 account of #4326 Pte  
 A. Parrott Major  
 from and Major  
 O. i/c SAVINGS BANK,  
 2ND BN. ROYAL NEWFOUNDLAND REGT.  
 Hazelton Barracks  
 Winchester.

• 17402/2/P&A

SUSPENSE | CLEARED

Officer i/c Savings  
Bank,  
2nd.Bn. Royal Newfoundland Rgt  
Winchester.

Pay & Record Office,

28th October, 8.

1326. Pte. A. Parrott.

✓ Reference your memo 26/10/18  
(9330): Cheque 10/- is  
enclosed in payment. Kindly  
acknowledge receipt hereon.

Major.  
Chief Paymaster & O. i/c Records

FM/MN.

*From*

O. i/c SAVINGS BANK,  
2<sup>ND</sup> BN. ROYAL NEWFOUNDLAND REGT.

20 Paymaster,  
Royal Newfoundland Regt  
London

NEWFOUNDLAND CONTINGENT,  
PAY & RECORD OFFICE

Ref. Nos. in 9530 ✓

Rec'd 28 OCT 1918

Acct'd Paid

Ref. Nos. 001 17402/2

Reference attached order  
for #4326 Pte. A. Parrott. This

man left for ~~London~~ last  
night and as his bag books  
have not been squared

will you send us a  
cheque for same, please

J. W. March Major  
O. i/c SAVINGS BANK,  
2<sup>ND</sup> BN. ROYAL NEWFOUNDLAND REGT.

Hazeley Down Camp

Oct. 26 <sup>60</sup> / 1918

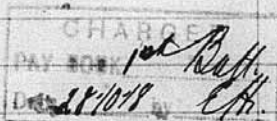
CHARGED  
BY  
Dotts



To: O.B. Bay:

Please pay Officer in charge  
of Regimental Savings Bank the sum  
of Ten shillings and charge same to  
my account

W. G. A. Parrott  
Hazeley Down Camp,  
Winchester  
Oct 25/18



Ref. pt. No. Vols. 314  
C.H.

TO, - The Chief Paymaster,  
Royal Newfoundland Regiment,  
58 Victoria Street,  
London, S.W.

Sir:

Please charge the amounts set opposite my name to my account and pay it to the N.F.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.  
Commencing on 1st July 1918.

Regtl. No.	Rank.	Name	Amount	Signature.
4376	Plt	Carrott. A.	\$2.50	A. Carrott

I have the honour to be, Sir,  
~~Yours faithfully,~~  
Your obedient servant.

Date

June 28 1918

A. Carrott

Parrott, A

4326

Ray Sept

July 8, 1919

#4326 Pte. Alfred Parrott,  
Bonaventure, T.B.

Dear Sir:-

Referring to your application I enclose  
cheque for Seventy dollars (\$70.00), being amount  
of first payment due you on account of the War  
Service Gratuity.

Yours truly

Captain  
Paymaster & C. i/c Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name..... *Alfred* ..... 2. Surname..... *Parrott* .....  
3. Rank..... *Pte* ..... 4. Regtl. No..... *4376* .....  
5. Address in full to which future payments of gratuity are to be forwarded..... *Bonaventure T-B* .....  
.....  
6. Date of enlistment in the Regiment..... *January 25/18* .....  
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
..... *Not applicable* .....  
8. Relationship of such dependents..... *Do* .....  
9. Address in full of such dependents..... *Do* .....  
.....  
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No* .....  
11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas* .....  
.....  
.....  
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Seven* .....  
*months* ..... 1. *2* .....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

*Not applicable*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

*\$ 68.10 Clothing Etc*

15. Have you been issued with a War Service Badge? *no*

16. Have you, during the present war, served in the Imperial Forces? *no*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *no*

19. Are you now serving in the Regt.? *no* If not give:- (a) Date of discharge. *June 23/19*

(b) Reason for discharge. *Demobilization*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

*Dunes, Belgium - Somme*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant: *A Parrott*  
 Place of Residence: *Bonsucular, I.A.*  
 Declared before me at: *St John's*  
 This *9<sup>th</sup>* day of *June* 19*19*....

*John M. Carthy*  
 Signature of Barrister of the  
 Supreme Court, Stipendiary Magistrate,  
 Notary Public, Justice of the Peace,  
 or Commissioner of affidavits.

POST DISCHARGE PAY.				
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Paymaster

July 7, 1919

#4326 Pte. Alfred Parrott,

Bozaventure. T.B.

Dear Sir

Please find enclosed Discharge Certificate

No. 2750.

Yours truly

Captain  
Paymaster & Officer i/c Records



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4326 Rank Pte Name Parrott Alfred  
 Intended place of residence Bouaventure

2. Occupation Fisherman  
 Classification of soldier F Medical Category AI

3. The above named man is discharged in consequence of DEMOBILIZATION;  
Eligible for War Service Gratuity

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 JUN 9 1919  
 Date ST. JOHN'S JUN 9 1919 *J. H. Shaw 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 JUN 9 1919  
*J. P. Parrott A.*  
 Signature of soldier  
*J. H. Shaw 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 JUN 9 1919  
ST. JOHN'S  
*P. Parrott A.*  
 Signature of soldier  
*W. J. Leatoy Q.M.S.*  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 25-1-18 No of days on Military  
 Discharged from service JUN 23 1919 Plus 14 days Service 529

### 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 JUN 23 1919  
*R. H. Last Capt.*  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place St. John's, Nfld  
 Date July 7/1919  
*M. Bowley Capt.*  
 Officer i/c Records  
 The Royal Newfoundland Regiment

*21/2079/2750*

# The Royal Newfoundland Regiment

Class for Demobilization: *A*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *7.6.19*

Regimental No *4326*

Name *Samuel*

*Alfred*

Rank *SG*

Address *Trinity Bay*

Present Medical Category *A1*

Recommended for:—

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

*R.H. East Capt*

O.C. Discharge Depot.

*Paterson*

Senior Medical Officer

*W. Borden*

M.O. 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:

*Go resume former Occupation*

*Carrott*

Signature of Man.

Reg. No. *43764*

*J. P. Howlett*

Signature of the Vocational Officer or his Representative.

Place *St Johns*

Date *JUN 9 1919*

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**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *1st Royal Newfoundland*
2. Regtl. No. *4326* 3. Rank. *Pte*
4. Name *Parrott* *Alfred*  
(Surname) (Christian Names)
5. Age last birthday. *18*
6. Posted for duty on *Jan 25/16* at *St. Johns*  
in category (or grade).....
7. Former Trade or Occupation } *Fisherman*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—  
(a) When  
(b) Where  
(c) Opinion of Court
- (d) Date of Discharge ;  
(e) Cause of Discharge.  
(d) Particulars of Pension or Gratuity (if any)

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 b (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If forwarded for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war .. .. .
  - (ii.) Previous active service.. . . .
  - (iii.) Climate in pre-war service .. .. .
  - (iv.) Ordinary military service before the war .. .. .
  - (v.) Serious negligence or misconduct on the man's part. } .. .. .
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ? } .. .. .

h a  
h a

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition ?  
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

He complains of no disability

16. Was an operation performed ? If so, when and what was its nature ?
17. If not, was an operation advised and declined ?
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable ?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions ?

h a  
h a  
h a

20. Do you recommend—

- (a) Discharge as permanently unfit ?
- (b) Change to United Kingdom ?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriation*

Station *Hazley D. Camp* .. .. .  
Date *30-4-19* .. .. .

*Sgt W E Provenier Capt R.A.M.C*  
Medical Officer in charge of case.

\* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

# **DISCHARGE CERTIFICATE.**



**ANY PERSON finding this Certificate is  
requested to forward it in an unstamped  
envelope to the Secretary, War Office,  
London, S.W.1.**

NOTE—This Certificate is to be issued without any alterations in the manuscript.

Certificate of discharge of No. 4326 Rank Private  
 Name Parsons Alfred  
 Surname Christian Names in full.

Unit\* and Regiment or Corps Royal Newfoundland Regt  
 from which discharged  
 \*The unit of the Regiment or Corps such as Field Co. R.E., H.T., or M.T., A.S.C., etc., is invariably to be stated.

Regiment or Corps to which first posted Royal Newfoundland Regt  
 Also previously served in.....

Only Regiments or Corps in which the soldier served since August 4th, 1914, are to be stated. If inapplicable this space is to be ruled through in ink and initialled.

Specialist Qualifications (Military).....

Medals, Clasps, Decorations and Mentions in dispatches { Nil } Wound Stripes\* nil  
 To be inserted in words.

Has served Overseas on Active Service? Johnston

Enlisted at Johnston on 25 January 1918

\*Each space is to be filled in and the word "nil" inserted where necessary.  
 †To be struck out in ink if not applicable.

He is discharged in consequence of.....

after serving\* One years\* 163 days with the Colours, and  
 \* nil years\* nil days in the Army Reserve or Territorial Force† } Strike out whichever inapplicable.

\*Each space is to be filled in and the word "nil" inserted where necessary; number of years to be written in words.

†Service with Territorial Force to be shown only in cases of soldiers serving on a T.F. attestation.

Date of discharge July 7 1919

Signature and Rank.

Officer in Charge Johnston Records.

(Place).

Description of the above-named soldier when he left the Colours.

Year of Birth 1901 Marks or Scars.....

Height 5 ft. 6 in.

Complexion Fair

Eyes Blue Hair Brown

WARNING.—If this Certificate is lost a duplicate cannot be issued. You should therefore on no account part with it or forward it by post when applying for a situation.



## 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 *Fred Andrew Parrott*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4326*

Intended address *Trinity Bay,*

Height on discharge *5 Feet 6"*

Color of hair on discharge *Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks \_\_\_\_\_

Figure on discharge *medium*

Christian name of Father *Samuel*

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 *Britannia Cove 1901 Aug 10<sup>th</sup>*

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) *A Parrott*

(Rank) *Private*

Station *ST. JOHN'S*

Date *5.6.19*

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 \_\_\_\_\_





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

# MEDICAL HISTORY

Surname Parott OF Christian Name Alfred G.

Table I.—GENERAL TABLE

Birthplace:—Parish Sanaventure B. County Mayfouthern

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined ....	on <u>25</u> day of <u>Jan.</u> 191 <u>8</u> at <u>819 John's.</u>		on _____ day of _____ 191	
Declared Age ...	<u>18 1/2</u> years		_____ years	_____ days
Trade or Occupation ...	<u>fisherman</u>		_____	_____
Height ....	<u>5</u> feet <u>6</u> inches		_____ feet	_____ inches
Weight ....	<u>125</u> lbs.		_____ lbs.	_____ lbs.
Chest Measurement {	Girth when fully expanded... <u>37</u> inches		_____ inches	_____ inches
	Range of Expansion... <u>4 1/2</u> inches		_____ inches	_____ inches
Physical Development....				
Vaccination Marks {	Arm ....			
	Number....			
When Vaccinated ....				
Vision ....	R.E.—V= _____ L.E.—V= _____		R.E.—V= _____ L.E.—V= _____	
	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>Lamm Parott</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted ....	at <u>819 John's</u>		at _____	
	on <u>25</u> day of <u>Jan.</u> 191 <u>8</u>		on _____ day of _____ 191	
Joined on Enlistment....	Corps. <u>15th Regt. Ar.</u>	Regtl. No. <u>1326</u>	Corps. _____	Regtl. No. _____
Transferred to ..				
Became non-effective by	on _____ day of _____ 191		on <u>Spain</u> day of <u>Ital</u> 191	
[Signature]				
[Rank]				

Table II.—Only for admission to hospital or to the sick list in case of

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature, syphilis, admissions and re-admissions, and of treatment out of hospital
	Day	Month	Year	Day	Month	Year			
<i>Spanow Hall Mil Isolation Hospital</i>	<i>20</i>	<i>4</i>	<i>18</i>	<i>13</i>	<i>5</i>	<i>18</i>	<i>German Measles</i>	<i>24</i>	
<i>Hageley Down.</i>	<i>16</i>	<i>5</i>	<i>18</i>	<i>22</i>	<i>6</i>	<i>18</i>	<i>Scarlet Fever</i>	<i>37</i>	<i>Treated in Cen</i>

tal or to the sick list in case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

*Albion*

*Treated in Civil Isolation J.P. Cured.*

*Allore, Capt. R.M.S.*



**Casualty Form - Active Service.**

Regiment or Corps Royal Newfoundland  
 Rank Plt. C. Surname Sarrett Christian Name Alfred G.  
 Religion C.E. Age on Enlistment 18 years 6 months  
 Enlisted (a) 25/1/18 Terms of Service (a) Duration Service reckons from (a) 25/1/18  
 Date of promotion to present rank..... Date of appointment to lance rank.....  
 Extended  Re-engaged  Qualification (b).....  
 or Corps Trade and rate.....  
 Occupation Fisherman J. W. Curran Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ...	26 OCT 1918	
			Disembarked ...		
			Joining ...	8 NOV 1918	
5. 1. 19	71. Elmslie M.A.	Adm.	26. J. Foot R.	Field.	11. 12. 18. } SO. 497
4. 1. 19	44. C.C.S.	Adm.	26. J. Foot L.	d.	13. 12. 18. } SO. 673
		Duty.			21. 12. 18. }
		Arrived in UK		13/4/19	

*Ami*

(a) In the case of a man who has been engaged for, or enlisted into Section C, Army Reserve, particulars of such re-engagement or enlistment will be entered in the appropriate column of the form.

(b) Signature, Successor, Smith, & Co.

Next of kin, Father, Samuel Sarrett Smith Pound St. Nfld.

5. m o. 9/18.

12. 7 fls. Ryl-

This man has a few stumps but they are  
fairly good. and give no pain. and he states he can  
masticate his food quite well. This being so I recommend  
he carries on. as he is

J. H. Anderson. Capt.  
Dental Office.



**MORNING SICK REPORT**

**MEDICAL INSPECTION REPORT\***

Unit 1st Cavalry Regt. 1st Div. { Squadron,  
Battery, or  
Company.

Station Wagley Post Date 10-7-18

Regtl. No. 4326 Rank Private

Name Parrill Gordon  
(Christian Name in full; Surname first)

Married? \_\_\_\_\_ Religion \_\_\_\_\_

Completed years of Age 17 Service 5/12

If for duty † \_\_\_\_\_

Whether a defaulter \_\_\_\_\_

Lines or barracks \_\_\_\_\_ Room \_\_\_\_\_

Disease For Dental Treatment Plus

Disposal—Medical Officer's Remarks and Signature—

Dental officer Winchester

not Orderly  
and

\* Strike out whichever is not applicable.  
† State nature of duty for which sworn. In the case of men for medical inspection, the reason, such as "Soldiers for trial by Court-Martial," or "Joining the station," &c., should be stated against their names.

DEPARTMENT OF MILITIA.

WAR SERVICE GRANT.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration there must be no blanks and no omissions. If any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *Alfred*..... 2. Surname..... *Parrott*

3. Rank..... *Chef*..... 4. Regtl. No..... *4326*

5. Address in full to which future payments of gratuity are to be forwarded..... *Petley, N. B.*

6. Date of enlistment in the Regiment..... *Jan. 25/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

8. Relationship of such dependents.....

9. Address in full of such dependents.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas.....

*From Jan. 25/18*

*to June 1919*..... 1. 2



13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

*No.*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

15. Have you been issued with a War Service Badge? *No*

16. Have you, during the present war, served in the Imperial Forces? *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

(b) If so, was such reversion in consequence of misconduct or inefficiency?

19. Are you now serving in the Regt.? *No* If not give - (a) date of discharge *June 1919* (b) Reason for discharge

*Demobilization*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

*France - from Oct 1918 to May 1919*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee. *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

his

Alfred X Parrott & Mark

Signature of Applicant:

Place of Residence:

Parkley, T. B.  
St. John's, Nfld.

Declared before me at:

This 29th day of

Sept 1919  
John M. McCarthy

Signature of Barrister of the  
Supreme Court, Stipendiary Legis-  
trate, Notary Public, Justice of the  
Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.			War Service Gratuity.	Net amount due
Date paid	Paid Soldier.	Paid Dependant.		
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.			.....	.....

Registrar

**The Royal Nfld. Regiment**

**DEMOBILIZATION**

No. 4326 Rank \_\_\_\_\_

Name: Parrott R

Warned for demobilization on

**JUN 9** 1919

BOND

JUN 9 1919





Geo. Cunningham Esq. MAJOR  
First Newfoundland Regiment,  
St. John's, Nfld.

St. John's, Nfld.

Pte A. G. Farrell +374  
(Home leave)

4476

OK.

W. H. Kelly Adjutant  
Depot, First Newfoundland Regiment,  
1-3-18 - St. John's, Nfld.

For Board



5 meals 50 cts per meal \$2.50

Feb 25 & 26<sup>th</sup> - 1918  
William Long

~~Wm. Long~~  
Centre Hotel  
Clarenville

Receipt for Army Book 64

No. 4326 Name A. G. Parrott.


To Certify that I have received the AB 64 of the above  
named Soldier.

Name A. B. Parrott

Date July 31, 1920

Place P. etley

N.B. For completion and return to the Department of Militia  
insert in corner of envelope "AB 64"



# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4326 Rank Pte Name Parrott Alfred  
 Date of Enlistment 25/1/15 Address Barravente District Familly Bay  
 Occupation Fitter Classification for Discharge E Medical Category AI  
 Recommendation S.M.B. .... Disability Rating 1119

Passed to Demobilization Officer with following documents:—

N.F. P/36	D 268	B 121	N.F. Med.	D.F. 1.	1	A.F.B.
B 178	W 3494	B 122	Board 1st.	" 2.	2	256
B 178a	D 400A	B 1915	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				

Date 7/4/19 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment

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

Parrott a

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 9-6-19

O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. .... to his home  
at Bannockburn and Release Certificate No. 2513 issued.

Date 9-6-19 ..... J.A. Snowcroft  
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 9-6-19

Date 9-6-19 ..... J.A. Snowcroft  
Depot Paymaster.

Discharge approved for 13-6-19 .....  
Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	
F 178	W 3494	B 122	Board 1st	" 2	2 Form B
B-178a	400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	400C	Form K	do 4th	" 5	
B 179b	B 103	HE 2		" 6	
B 179c	B 120	M 93			

Date 9-6-19 ..... J.A. Snowcroft  
Demobilization Officer.

APPROVED.

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

Eligible for War Service Gratuity

Date JUN 23 1919 .....  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.  
Date June 19/19 ..... J. McEachern  
Jos. P. Records