



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6215 Name William Ryan Corps Infantry

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------|
| 1. What is your name? | 1. <u>William Ryan</u> |
| 2. What is your full Address? | 2. <u>Adams Cove</u> |
| | <u>Bay de Verde</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years |
| | 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, William Ryan 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.

William Ryan SIGNATURE OF RECRUIT.
P. D. D. D. Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Ryan 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 3 day of October 1915.
 Signature of Attesting Officer P. D. D. D.

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the 1st Battalion.
 If enlisted by special authority, such will be attached to the original attestation.
 Date OCT - 4 1918

Robertson Capt. Approving Officer.
 Commanding Depot,
 The Royal Newfoundland Regiment.

† 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 Ryan
Apparent age 19 years months Height 5 feet 6 1/4 inches
Chest Measurement { Girth when fully expanded 35 inches
Range of expansion 3 inches
Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Michael Ryan
Adams Cove, R.I. 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.

Table with 4 columns: (a), (b), (c), (d) for marriage particulars.

Particulars as to Children

Table with 2 columns: Christian Names, Date and Place of Birth.

STATEMENT OF THE SERVICES

Large table for service statement with columns: 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.



THE ROYAL NEWFOUNDLAND REGIMENT

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No. 6215 Name William Ryan Corps Infantry

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|--|-------------------------------------|
| 1. What is your name? | 1. <u>William Ryan</u> |
| 2. What is your full Address? | 2. <u>Adams Cove</u> |
| | <u>Bay de Verbe</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> ^{Years} |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, William Ryan 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.

William Ryan SIGNATURE OF RECRUIT.
The D. D. Dowden Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Ryan 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 3 day of Oct 1915
 Signature of Attesting Officer C. B. Dickson, 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 rank of Private
 If enlisted by special authority, such will be attached to the original attestation.
 Date OCT - 4 1915 1915
 Place ST. JOHN'S
John J. ... Approving Officer.
 for Commanding Officer
 Royal Newfoundland Regiment.

† 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 Ryan

Apparent age 19 years months. Height 5 feet 6 1/4 inches

Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Michael Ryan
Adams Cove, B.I.V. 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 entrv.	
(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. 6218 Name William Ryan Corps Infantry

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>William Ryan</u> |
| 2. What is your full Address? | 2. <u>Adams Cove</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> <u>10</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, William Ryan 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.

William Ryan SIGNATURE OF RECRUIT.
The D. D. Dowden Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me on this 3 day of Oct 1915
C. B. Dick 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 OCT - 4 1915
 Place ST. JOHN'S
[Signature] Commanding Dept. } Approving Officer.
[Signature] The Royal Newfoundland Regiment.

† 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

6278

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

Name William Ryan
 Apparent age 19 years months. Height 5 feet 6 1/4 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Michael Ryan
Adams Cove, B. D. R. Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from									[Signature Area]
Joined at									
Total Service forfeited as above									

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

C.R. 6218

Extract from Daily Order Part 11 Unit The Royal Wfld.
Regt., St. John's, Dec. 19th, 1918.

The undernoted man discharges on Demobilization has been approved by O.C. Discharge Depot from noted date. He is removed from Depot Strength to Discharge Depot pending confirmation by Officer i/c Records.

6218 Pte. Wm. Ryan.

18-12-18.

C.R. 6218

Extract from Daily Orders part 11, Depot St. John's
dated Novr. 6th., 1918.

#6218 Pte. W. Ryan.

Discharged from Barracks Hospital 4/11/18.

BC.

C.R. 6218

Extract of Daily Orders Part II, Depot St. John's, dated
Jan. 16th 1919.

The discharge of the undernoted on demobilization has been
confirmed by the Officer i/c records on 15/1/19

6218 Pte. W. Ryan

Ryan, D.

6218

Sept

January 15th., 1919

#6218 Pte. William Ryan,

Adam's Cove,

Bay de Verde Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 501."

yours faithfully,

Captain,
Paymaster & O.i/c Records.

Enc'1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6218 Rank Pvt. Name Ryan, W. M.
 Intended place of residence. Adams Cove Bay de V.
 2. Occupation Fisherman
 Classification of soldier C Medical Category A. T.
 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 17 1918
 Date
Attky Capt
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place and date St Johns 17th Dec 1918
William Ryan
 Signature of soldier
C. Dicks A. 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 Johns Dec 17th 1918
William Ryan
 Signature of soldier
Raymond Sgt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 3. 10. 18 No of days on Military
 Discharged from service 10. 12. 18 plus 28 days Service 105 days

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.
R. H. Tait Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date DEC 18 1918

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place St Johns, Nfld
January 15/1919
M. Howley Capt.
 Officer i/c Records
 The Royal Newfoundland Regiment

W.F.S. 2079/501

29
30
31
15
105

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6218 Rank Private Name Ryan Wm
 Date of Enlistment 3.10.18 Address Adams Cove District Bay de V.
 Occupation Fisherman Classification for Discharge C 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	3
B 178a	D 400A	B 1915	2	do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	1			

Date 10/12/18

W. H. Capl
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

William Ryan

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$100.00
 (b) Clothing Supplied Joseph H. Smart

Date 17.12.18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 312 to his home at Adams Lane B.V. and Release Certificate No. 400 issued.

Date 17-12-18

C. Dicks Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 15-1-19

Date 17-12-18

W. H. Capt.
Depot Paymaster.

Discharge approved for 18.12.18

Forwarded with following documents to O.C Discharge Depot.

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

Date 17.12.18

C. Dicks Capt
Demobilization Officer.

APPROVED.

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

DEC 18 1918

Date

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

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

Date Dec. 19/1918

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

MEDICAL HISTORY

Surname Spens

OF William
Christian Name

Table I.—GENERAL TABLE

Birthplace :—Parish Adams Adv. County Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	3	Oct		
	1918			191
at	<u>St John's</u>		at	
Declared Age	19	years		days
Trade or Occupation	<u>Fisherman</u>			
Height	5	feet	6	inches
Weight	137	lbs.		lls.
Chest Measurement	Girth when fully expanded		35	inches
	Range of Expansion		3	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
Vision	R.E.—V=	<u>6/36 4/6</u>	R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lambert Peterson</u>			
(Rank)	<u>Major</u>	Medical Officer		Medical Officer
Enlisted	at	<u>St John's</u>	at	
	on	3 day of Oct	on	day of
		1918		191
	Corps	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	<u>Royal Nfld. Regt 6218</u>			
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)		191		191
(Rank)				

Civil Re-establishment Committee



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

To work as Labourer

William Ryan

Signature of Man.

Reg. No. *6248*

Charles R. Caff

Signature of the Vocational Officer or his Representative.

Place

St. John's

Date

17/2/18

191



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 *Ryan, William Fraser*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *6218*
 Intended address *Adam's Cove, Bay de Verde.*

Height on discharge Feet
 Color of hair on discharge *Black*
 Complexion *Fair*
 Color of eye *Brown*
 Descriptive Marks *Vaccination left arm*
 Figure on discharge *Normal*
 Christian name of Father *Michael*
 Christian name of Mother *Leinah*

Wife's maiden name in full }
 Date and place of marriage } *not married*
 Christian names of children }

Place and date of soldier's birth. *Adam's Cove, Acad., Oct. 2/1899*
 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)

William Fraser Ryan
 (Rank) *Pte.*

Station

Prince's Bank

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

Station

Date

Bay duRde

The Royal Newfoundland Regiment

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

Class for Demobilization:—
C

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 28/11/18

Regimental No. 6218

Name Ryan Mullan (Plt.)

Address Adams Cove C. B.

Present Medical Category A II

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

R. H. Lat Capt.

O.C. Discharge Depot.

Members of Board

J. Paterson

Senior Medical Officer

J. W. Borden

M. O. Depot

This is to certify, that William Ryan
of Admiral has been examined by me and found
Medically unfit for service in the Royal Naval Reserve.

Dated this 3 day of October 1918

Alfred Kison.

$$RV = \frac{6}{36}$$

$$LV = \frac{1}{6}$$

B. H. Danner,
Fleet Surgeon, R.N.,

H. M. S. "Briton,"

St. John's, N.F.

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Adapt on Oct 5 1918

1. Name William Ryan Age (a) Declared 19
 (b) Apparent

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

What severe illnesses have you had? None.

Eye Brown.
Comp. Deaf.
Months

6218

3. Height 5-6 1/4 Weight 135

4. Eyesight (a) Left 6/6 (b) Right 6/36 ?

5. Physical Defects (Examine after strenuous exercise) 7

6. Examination of Lungs 7

Measurement (a) Expiration 32 (b) Inspiration 33

7. Examination of Heart 7

8. Examination of Urine ✓

9. Examination of Mouth—(Defective Speech)

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

10. Have you been successfully vaccinated, and when? Yes 3 Months ago at home.

11. Name and address of next of kin Father Michael Adams Esq. D.D.

12. Category

REMARKS—

A 11

Acclidge
W. Gordon

Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland Regt

Signature of O. C. Company

Number of Sheet *One*
W. B. Dicks

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Wm Ryans</i>	Age on <i>19</i> years <i>0</i> months	<i>Masterman</i>	
Joined	Date	Place and Date of Enlistment	Religion	
Joined	Date	<i>St Johns 3-11-18</i>	<i>R.M.A.</i>	
Joined	Date	Period of } with Colours <i>105</i> years.	Place of Birth	
Joined	Date			

Place	Date of Offence	Rank	Charges of Disobedience	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
									<i>Demobilized St. Johns 15 '19</i>

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

6218

DEMOBILIZATION OF

Reg. No. 6218 Rank Private Name Ryan Wm
 Date of Enlistment 3.10.18 Address Adams Cove District Bay de L'Apres
 Occupation Fisherman Classification for Discharge C Medical Category A II
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	3
B 178a	D 400A	B 1915	2	do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	1			

Date: 10/12/18 *[Signature]*
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

William Ryan

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$100.00

(b) Clothing Supplied *Joseph & Sons*

Date: 17-12-18 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 312 to his home at Adams Ave East and Release Certificate No. 400 issued.

Date 17-12-18 Chadwick 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 15-1-19

Date 17-12-18 Howley Capt.
Depot Paymaster.

Discharge approved for 18. 12. 18

Forwarded with following documents to O.C Discharge Depot.

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

Date 17. 12. 18 Chadwick Capt
Demobilization Officer.

APPROVED. h

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

Date DEC 18 1918 R.H. Lant Capt
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
Date Dec. 19/1918 Howley Capt

Reg. No. *6218* Rank *Pte* Name *Ryans William*
Attested *3-10-18* Address *Adams Lane*
Allotment *60* Allottee *Michael Ryan* *Father*
Date of Allotment *1¹¹/₁₈* Returned from Overseas
Embarked for Overseas Cause

30-10-18. Admitted to barracks Hosp.
4-11-18. Discharged from " "

81-21-01 PASSED TO DEMOBILIZATION OFFICER

81-51-8 DISCHARGE APPROVED ON DEMOBILISATION.