



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5918 Name William Skanes Corps CofE.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|----------------------------------|
| 1. What is your name? | 1. <u>William Skanes</u> |
| 2. What is your full Address? | 2. <u>North River C.B.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>20</u> Years |
| 5. What is your Trade or Calling? | 5. <u>miner</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 Skanes 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 Skanes SIGNATURE OF RECRUIT.

P. T. Moulton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Skanes 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 5th day of August 1918.

Signature of Attesting Officer C. B. Dickson

†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 Aug 6th 1918

Place St. John's

Approving Officer. W. J. P. [Signature]

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) re-enlisted in the (Regiment) on the (Date)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William Skanes
 Apparent age 20 years months. Height 5 feet 6 1/2 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 4 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Patrick Skanes
North River C 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

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

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Questions to be put to the Recruit before Enlistment.

- | | |
|--|----------------------------------|
| 1. What is your name? | 1. <u>William Skanes</u> |
| 2. What is your full Address? | 2. <u>North River C.B.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>20</u> Years |
| 5. What is your Trade or Calling? | 5. <u>miner</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 Skanes 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 Skanes SIGNATURE OF RECRUIT.
W. H. Moulton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Skanes 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

on this 5th day of August 1918

Signature of Attesting Officer W. H. Moulton

† 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

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

Date Aug 6th 1918

Place St John } 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

5918

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

Name William Skanes
 Apparent age 20 years 0 months. Height 5 feet 6 1/2 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

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North River C 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

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>5-8-18</u>									
Joined at <u>St John's</u> on <u>August 5, 1918</u>									
<u>Discharged St John's, Jan. 14/1919.</u>									
<u>Special duty Home Defense Fort Chap Bays 9-9-18</u>									
<u>Returns to Headquarters 21-11-18</u>									
<u>Admitted Barracks Hospital 27-11-18</u>									
<u>Releases to do do 6-12-18</u>									
<u>Demobilization St John's 14-1-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>14-1-1919</u> (date of discharge) <u>163</u> years <u>163</u> days									
" " Pensions " [" "] " " " " " "									

C.R. 5918

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

The undernoted Man returned from Special Duty At P.A.B.
21-11-18.

5918 Pte. W . Skanes.

MM.

5918
C.R. ~~5918~~

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, dated Sept. 9-18.

The following man proceeded on Special Duty to Port-au-
Basque 9/9/18.

5918. Pte. W. Skeans,

C.R. 5-918

Extract of Daily Orders Part II, Depot St. John's dated
Jan. 15th 1919.

Discharge confirmed on demobilization

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

5918 Pte. Wm. Skanes.

Discharged 14-1-19

C.R.

5918

Extract from Daily Orders part 11, Depot. St. John's
dated december 18th., 1918.

#5918 Pte. Wm. Skanes.

The above mentioned discharge on demobilization have been approved
by O. C. Discharge depot from noted date. He is removed fro,
depot strength and transferred to Discharge depot pending confirmation
by Officer i/c Records.

17-12-18.

G.R. 5918

Extract from Daily Orders part 11, Depot. St. John's
dated December 9th., 1918.

#5918 Pte. W. Skanes.

Discharged from Barracks Hospital 6-13-18.

C.R. 5916

Extract from Daily Orders part 11, Depot St. Johns
dated November 29th., 1918.

45918 Pte. W. Shears.

ADMITTED TO BARRACKS HOSPITAL 27-11-18.

C.P. 5918

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

5918 Pte. Wm. Skanes.

Granted leave from 17/8/18 to 21/8/18.

C.R. 5918

Extract from Daily Orders Part 11 from Unit The Royal
Nfld. Regt. St. John's, dated August 9, 1918.

5918, Pte. Wm. Skanes.

Attested for General Service with The Royal Nfld. Regt.
from 5/8/1918



Kane, D^W

5918

Ray sept.

January 14th., 1919

#5918 Pte. William Skanes,
North River, C.B.

Dear Sir:-

Please find enclosed "Discharge
Certifixate No.462."

Yours faithfully,

Captain,
Paymaster & Officer i/w Records.

Enc'1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5918 Rank 16 Name Wm Skanes
 Intended place of residence Southview, St. John's

2. Occupation Fisherman
 Classification of soldier C Medical Category A II

3. The above named man is discharged in consequence of **DEMOBILIZATION.**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place DEC 16 1918 Wm Skanes Capt
 Date DEC 16 1918 Comanding 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 Wm Skanes
Dec. 16-12-18 Signature of soldier
W. H. Peter Lt
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 Wm Skanes
16-12-18 Signature of soldier
W. H. Peter Lt
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 5-8-18 No of days on Military
 Discharged from service 17-12-18 plus 28 days Service 163

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 R. H. Satt Capt
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.
 Date DEC 17 1918

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St John's Med W. H. Peter Lt
 Date January 14/1919 Signature of soldier
2079/462 The Royal Newfoundland Regiment

27
30
31
30
31
14
163

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5918 Rank Privates Name Skanes Wm
 Date of Enlistment 5-8-18 Address North River District Port de Grave
 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.....	1 D 400A.....	1 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 13/12/18

W. P. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

William Skanes

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. Knowlton

Date 16-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 285* to his home
 at *Blakes Beach* and Release Certificate No. *366* issued.

Date *16. 12. 18*
W. D. Dicks ACapt
 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 *14-1-19*

Date *16-12-18*
W. D. Dicks ACapt
 Depot Paymaster.

Discharge approved for *17. 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
F 178	W 3494	B 122	2	Board 1st	" 2	2	
B 178a	D 400A	B 1915	2	do 2nd	" 3		
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	1		" 6		
B 179c	B 120	M 93	1				

Date *16. 12. 18*
W. D. Dicks ACapt
 Demobilization Officer.

APPROVED.

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

Date *DEC 17 1918*
R. H. Laint ACapt
 O. C. Discharge Depot.

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

Date *Dec 18/1918*

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

MEDICAL HISTORY

Surname

Skane

OF most distinguished lineage

Christian Name

William

Table I.—GENERAL TABLE

Birthplace :—Parish *North River CB* County *Newfoundland*

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	5	Aug		
Declared Age	20	years		
Trade or Occupation	<i>Yeoman</i>			
Height	5	feet $\frac{6}{4}$ inches		
Weight		183 lbs.		
Chest Measurement {	Girth when fully expanded	35		
	Range of Expansion	4		
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
When Vaccinated				
Vision	R.E.—V=	$\frac{6}{19}$	R.E.—V=	
	L.E.—V=	$\frac{6}{19}$	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)	<i>Lamm Peterson</i>			
(Rank)	Medical Officer			Medical Officer
Enlisted	at	<i>St John's</i>	at	
	on	day of <i>Aug</i> 1918	on	day of 191
Joined on Enlistment	Corps	<i>Royal Nfld Regt</i>	Corps	
		Regtl. No. <i>5918</i>		Regtl. No.
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. & C. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Skane William*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *5918*
 Intended address *North River, C. Baf.*

Height on discharge Feet
 Color of hair on discharge *Dark*
 Complexion *Dark*
 Color of eyes *Blue*
 Descriptive Marks *vaccination. Scar on left knee.*
 Figure on discharge *Normal*
 Christian name of Father *Patrick*
 Christian name of Mother *Susannah*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children

Place and date of soldier's birth. *March 2nd, 1898, North River, C. B.*
 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 Skane*

(Rank) *Plt*

Station

Date

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

Thomas H. Reiger
 Medical Officer in 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 Miner

W. Skanes

Signature of Man.

Charles Kahl

Reg. No. *5918*

Signature of the Vocational Officer or his Representative.

Place *St. John's*

Date *16/12/18*

191

E

Port de Grave

Demobilization Form 1

400A

The Royal Newfoundland Regiment

Class for Demobilization:—
C

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

DEC 9 1918

Date

Regimental No. 5918

Name James William

Address 400
Conception Bay, Brigno Dist

Present Medical Category A II

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

Members of Board { R.H. Lant Capt. O.C. Discharge Depot.
J. Paterson Senior Medical Officer
J.W. Burden M. O. Depot



**THE ROYAL NEWFOUNDLAND REGIMENT
ALLOTMENTS**

I, Wm Skanes, Regl. No. 5918

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 ^{and}/_{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 September 1st 1915

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6729	father	Patrick Skanes	North River C. B.	— 60
Total Allotment, \$			— 60	

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

(Sig.) H. A. James
 Officer Commanding
 Company

(Sig.) Wm Skanes
 (Rank) Pte

St Johns
August 15th 1915

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on Aug 5 1918

1. Name William Skanes Age (a) Declared 20
 (b) Apparent

2. Do you know of anything wrong with you? Flat foot.

What severe illnesses have you had? None

eye Brown
Comp marks
marks scar on left knee

5918

3. Height 5-6 1/2 Weight 138
 4. Eyesight (a) Left 6/12 (b) Right 6/9
 5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~
 Measurement (a) Expiration 31 (b) Inspiration 35

7. Examination of Heart ~

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

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

10. Have you been successfully vaccinated, and when? no

11. Name and address of next of kin Father Patrick North River C.B.

REMARKS—

AH

St. W. Burden
Arch. G. Galt
 Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland

Signature of O. C. Company

Number of Sheet *one*
D. D. K. K. K.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>5918</i>	Age on <i>20</i> years <i>1</i> months		<i>Miner</i>	
Joined _____ Date _____		Place and Date of Enlistment		Religion	
Joined _____ Date _____		<i>St John's</i>		<i>C of E.</i>	
Joined _____ Date _____		Period of } with Colours <i>163</i> years. with Reserve <i>365</i> years.	Place of Birth		
Joined _____ Date _____			<i>North River CB.</i>		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order discharging with trial	By whom awarded	REMARKS
				<i>Demobilized St John's 14/19</i>					

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5918 Rank Private Name Skanes Wm
 Date of Enlistment 5-8-18 Address North River District Port de Grave
 Occupation Fisherman Classification for Discharge C Medical Category ATI
 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			" 6	
B 179c	B 120	M 93	1			

Date 13/12/18

W. Skanes Capt
O/C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

William Skanes

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 16-12-18

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 285* to his home at *Blakes Beach* and Release Certificate No. *366* issued.

Date *16. 12. 18*

P. S. 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 *14-1-19*

Date *16-12-18*

M. Bowley Capt.
Depot Paymaster.

Discharge approved for *17. 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	✓ 1	
B 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			" 6		
B 179c	B 120	M 93	✓ 1				

Date *16. 12. 18*

P. S. Dicks Capt.
Demobilization Officer.

APPROVED. *4*

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date *DEC 17 1918*

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

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

Date *Dec 18/1918*

M. Bowley Capt.
O. C. R.

Reg. No. 5918 Rank Pte Name BKanes Wm
Attested 5-8-18 Address North River CB
Allotment 60 Allottee Patrick Kanes (Father)
Date of Allotment 1-9-18 Returned from Overseas
Embarked for Overseas Cause

Recd 9-5-18 1st Lt 1878

S. leave 17-5-18 to 21-5-18.

9-9-18 Special duty Mount Harb.

7-10-18 Sick at Port-aux-Basques Guard.
attended by Dr. Grant.

9-9-18 Special duty Port-aux-Basques, held 31/18

27-11-18 Admitted to Barracks Hosp.

6-12-18 Discharged from Barracks

13-12-18

PASSED TO DEMOBILIZATION OFFICER

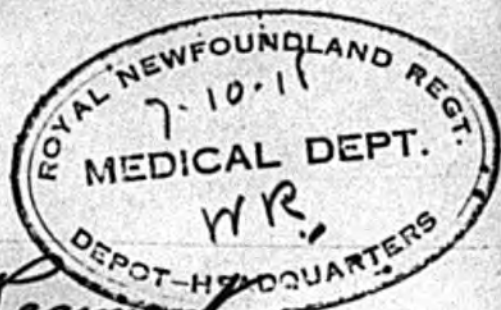
17-12-18.

DISCHARGE APPROVED ON DEMOBILISATION.

Med Dept.
To be Noted

Part II. Orders
Card Index
Nominal Roll

1918
No. 4.



To O.C.

Royal Nfld. Regiment
Depot.

Sir,

I beg to make the following report re the Fort aux Basques Guard & the Channel Head Guard.

Everything connected with both Guards is O.K. Men enjoying perfect health, with the exception of one man at Channel Hd. Pte. W. Shanes who is sick, and being attended to by Dr. Grant, he is steadily improving & will soon resume his duties.

Nothing of importance to report.

I beg to remain Sir,

Your obedient servant,
L/Cpl. Wm. Knox

Form No. _____



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To _____

Asst adft
Infld Regt,

Pte William Skeans
ill not serious &
attend him.

Dr Wm Grant

Med Dept

To be Noted

Part II. Orders _____
Nominations _____
Nominations _____

OCT 2 1918



No enquiry respecting this Message will be attended to without the production of this paper.