



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6164 Name Alfred Squires Corps Left

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Alfred Squires</u> |
| 2. What is your full Address? | 2. <u>Chamberlands St</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>5</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 Squires 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.

16/9/15

Alfred Squires SIGNATURE OF RECRUIT.
George Walsh Signature of Witness.

DATE TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Alfred Squires 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 16 day of Sept 1915
Signature of Attesting Officer [Signature]

†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 SEP 17 1915
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 Squires
 Apparent age 18 years months. Height 5 feet 9 1/4 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Father Robert Squires
Chamberlands CB 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 " _____ [" "] _____ " _____ "									



83

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 10164 Name Alfred Squires Corps 1st Lt

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Alfred Squires</u> |
| 2. What is your full Address? | 2. <u>Chamberlands</u> |
| 3. Are you a British Subject? | 3. |
| 4. What is your age? | 4. <u>18</u> Years <u>5</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 Squires 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.

Alfred Squires SIGNATURE OF RECRUIT.
George Walsh Signature of Witness.

16/9/18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Alfred Squires 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 16 day of Sept 1918
Signature of Attesting Officer C. S. D. [Signature]

†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 Lt.
If enlisted by special authority, such will be attached to the original attestation.
Date SEP 17 1918 1918
Place St. John's } Approving Officer. [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

6164

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

Name: Alfred Squires

Apparent age: 18 years 0 months. Height: 5 feet 9 1/4 inches

Chest Measurement { Girth when fully expanded: 37 inches
 Range of expansion: 4 inches

Distinctive marks: _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin: Father Robert Squires
Chamberlands CB 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 _____									<div style="font-size: 2em; margin-bottom: 10px;">}</div>
Joined at _____ on _____									
Total Service forfeited as above: _____									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [" "] " " "									

Discharged Alford Jan. 3rd 1919.

C.R. 6164

Extract from Orders, Part 11, WFIS: The Royal Newfoundland Regt.,
dated Dec. 7th. 1918.

DEMobilIZATION.

The undernoted Discharged on DEMobilIZATION has been approved
by O.C. Discharge Depot, from noted date. He is removed from
Depot Strength and is transferred to Discharge Depot pending
confirmation by Officer i/c Records:

6164 Pte. A. Squires.

6/12/18.

C.R. 6164

Extract of Daily Orders Part II, Depot, St. John's dated
Jan. 6th 1919.

DEMOBILIZATION.

The discharge of the undernoted man has been confirmed
by the Officer i/c Records.

6164 Pte. A; Fred Squires. 3-1-19

C.R. 6164

Extract from Daily Orders Part 11 Depot, St. John's Dated 17/9/18

#6164 Pte. Alfred Squires

ATTESTED FOR GENERAL SERVICE WITH THE ROYAL NEWFOUNDLAND REGIMENT,
SEPTEMBER 17TH. 1918.

Sapines alfred

6164

Pay Dem

Jan. 3rd., 19

#6164 Pte. Alfred Squires,

Chamberlains,

Hr. Main Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 65."

Yours faithfully,

Captain,
Paymaster & O i/c Records.

Enc (1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6164 Rank Pte Name Squires Alfred
 Intended place of residence Chamberlains

2. Occupation Fisherman
 Classification of soldier A 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 St John's Date DEC 5 1918
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date St John's Dec 5th 1918
 Signature of soldier Alfred Squires
 Signature of witness C. B. Dicks Mapt

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 6-12-18
 Signature of soldier Alfred Squires
 Signature of witness W. H. Lewis Lt

STATEMENT OF SERVICE

7. Enlisted for service 16. 9. 18 No of days on Military
 Discharged from service 6-12-18 plus 28 days Service 109 110

APPROVAL OF DISCHARGE

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

Place S.T. JOHN'S Date DEC 6 1918
 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 January 3rd 1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

15
31
30
34
110

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6164 Rank. Pte Name Squires Alfred
 Date of Enlistment 16.9.18 Address Charbertains District St. John's
 Occupation Subaltern Classification for Discharge A Medical Category ATI
 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
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 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 28.11.18

W. H. ... Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Alfred Squires

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 Guaranteed as per

Date 5-12-18

for i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R60* to his home
 at *Mannels* and Release Certificate No. *37* issued.

Date *5-12-18*
C.B. 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 *3-1-19*

Date *5-12-18*
W. Stanley Capt.
 Depot Paymaster.

Discharge approved for *Dec 6th 1918*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.	B 268.	B 121.	N.F. Med.	D.F. 1.	<i>Form B</i>
B 178.	W 3494.	B 122.	Board 1st.	" 2.	
B 178a.	D 400A.	B 1915.	do 2nd.	" 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 *6 12 18*
C.B. Dicks Capt.
 Demobilization Officer.

APPROVED.

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

Date *DEC 6 1918*
TRH Lat Capt.
 O. C. Discharge Depot.

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

Date *Dec 7/1918*

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

MEDICAL HISTORY

OF

Surname Squires Christian Name Alfred

Table I.—GENERAL TABLE

Birthplace :—Parish Chamberlands C.B. County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	16	Sept		
Declared Age	16	years	150	days
Trade or Occupation	Fisherman			
Height	5	feet 9/4		
Weight		147		11 s.
Chest Measurement {	Girth when fully expanded		57	inches
	Range of Expansion		4	inches

Vaccination Marks {	Right		Left	
	Arm	Number	Arm	Number
When Vaccinated				

Vision	R.E.—V= 4/6 4/6	L.E.—V=	R.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) Samuel Paterson
 (Rank) Major Medical Officer

Enlisted

at	on	day of	191	Corps	Regtl. No.
	16	Sept			

Joined on Enlistment

Royal Nfld Regt 6164

Became non-effective by

on	day of	191	on	day of	191

(Signature) _____
 (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 at Home

Alfred Squires

Signature of Man.

Reg. No. *6164*

W. D. Dickson

Signature of the Vocational Officer or his Representative.

Place

St Johns N. F. X. D

Date

Dec 5th 1918

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 **NOV 27 1918**

Regimental No. *6165*

Name *Squires Alfred Rte.*

Address *Charburnians Topsail*

Present Medical Category *A II*

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~

R. H. Lait Capt.

O.C. Discharge Depot.

Members of Board {

Harison

Senior Medical Officer

Sw Burden

M. O. Depot



THE ROYAL NEWFOUNDLAND REGIMENT
ALLOTMENTS

I, Alfred Squires, Regl. No. 6164
hereby agree, until further notification by me, and in similar official form to make an Allotment of
Twenty Dollars and no 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 Nov. 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
		<u>(Lamin)</u>		
<u>7139</u>	<u>Mother</u>	<u>Mrs Robert Squires - Mannells</u>	<u>CB</u>	<u>60</u>
Total Allotment, \$				<u>60</u>

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.) [Signature]
Officer Commanding
[Signature] Company
1915

(Sig.) Alfred Squires
(Rank) Pt

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Sdgpts on Sept 16 1918

1. Name Alfred Aguires Age (a) Declared 18
 (b) Apparent

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

What severe illnesses have you had? None.

Eyes Blue.
Comp Hair
Marks Scar on Left wrist.

6164

3. Height 5-9 1/4 Weight 147

4. Eyesight (a) Left 5/6 (b) Right 5/6

5. Physical Defects (Examine after strenuous exercise) ---

6. Examination of Lungs ---
 Measurement (a) Expiration 33 (b) Inspiration 37

7. Examination of Heart ---

8. Examination of Urine ---

9. Examination of Mouth—(Defective Speech)
 Teeth
 Throat
 Nose
 Ears (Otorrhea)
 (Deafness)

10. Have you been successfully vaccinated, and when? Yes 6 Months ago S. Ft Com.

11. Name and address of next of kin Father Robert Chamberlands C.P.

REMARKS—

Ait

A. Light
 J. Chamberlands

Medical Examiners.

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

Dated this 21 day of May 1918

W. Vanicasse

B. Dennis
Fleet Surgeon, R.N.,

H. M. S. "Briton,"

St. John's, N.F.

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 question 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... *Squires*.....

3. Rank... *Private*..... 4. Regt. No... *4164*.....

5. Address in full to which future payments of gratuity are to be forwarded... *St. Mrs Robert Squires Manuel Conception Bay*.....

6. Date of enlistment in the Regiment... *16th September 1918*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge...
None.....

8. Relationship of such dependents... *None*.....

9. Address in full of such dependent... *None*.....

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 Mfld. If so, give dates, and particulars of such service.....

12. Give total length of time which you served on active service, whether in Mfld or Overseas... *3 months + 23 days*.....

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

None.....
.....
.....

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.....

paid off with \$100.00 by the Institute Sep......
.....

15. Have you been issued with a War Service Badge?.....

Yes.....

16. Have you, during the present war, served in the Imperial Forces.....

Yes.....

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.....

None.....

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....

Yes.....

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

None.....

19. Are you now serving in the Regt.? *Yes*..... If not give:- (a) Date of discharge.....

6th December 1918..... (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.....

None.....

.....

.....

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.....

Yes.....

.....

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:

Alfred James Spruill
Chamberlain C.B.

Place of Residence:

Declared before me at:

M. St. John.

This *18th*

day of *March* 19*19*.

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

William James P.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	Service Contingency	Net amount due
-----------	-----------------	-------------------	------------------------	-------------------

.....
.....

Certified Correct.

Paymaster.

107

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland Regt.

Number of Sheet

One

Signature of O. C. Company

A. D. Dickson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	18 years 5 months	<i>Fisherman</i>	
6164	Alfred Aguiers	Place and Date of Enlistment	<i>Chamberlands 16. 9. 18</i>	Religion	
Joined	Date	Period of	with Colours 110. years. with Reserve 35. years.	Place of Birth	
Joined	Date				
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Dundas Regt	13-11-18	Pte		Breaking Barracks <i>at 8 o'clock</i> 48 hours <i>which under quarantine etc. & appears. etc. etc.</i>		48 hours		Capt R. H. Tailor	etc.
				Demobilized	St John's	23			19

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6164 Rank Pte Name Squires - Alfred
 Date of Enlistment 16.9.18 Address Chamberlains District St. John's
 Occupation Fisherman Classification for Discharge A Medical Category ATI
 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	!
B 178	W 3494	B 122		Board 1st	" 2	
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	!	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	!			

Date 28.11.18

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

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Alfred Squires

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 W. H. C. Discharge Depot

Date 5-12-18

W. H. C. Discharge Depot
 O. C. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R60 to his home at Manuelo and Release Certificate No. 37 issued.

Date 5-12-18

A.B. Dick 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 3-1-19

Date 5-12-18

W. Bowley Capt.
Depot Paymaster.

Discharge approved for Dec 6th 1918

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	Lora B ✓
F 178	W 3494	B 122		Board 1st	" 2	✓ 1	
B 178a ✓ 1	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 6-12-18

A.B. Dick Capt.
Demobilization Officer.

APPROVED.

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

with following additional documents.

DEC 6 1918

Date

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

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

Date Dec 7/1918

W. Bowley Capt.
i/c R

Reg. No. 6164 Rank *St* Name *Squires alfred H. Bay*

Attested *16-9-18* Address *Manuels. C. B.*

Allotment..... Allottee

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

Embarked for Overseas Cause.....

Vacc 17-9-18 1st inoc 11¹⁰/₁₄ 2nd Inoc 25-10-18

14-11-18 awarded 48 hours detention

29-11-18 Passed to Demobilization Officer

6-12-18 **DISCHARGE APPROVED ON DEMOBILISATION.**