



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6208 Name Albert Weir Corps S. A.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Albert Weir
2. What is your full Address? 2. Billeys Isld.
3. Are you a British Subject? 3. yes
4. What is your age? 4. 30 Years Months
5. What is your Trade or Calling? 5. Fisherman
6. Are you Married? 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
8. Are you willing to be vaccinated or re-vaccinated? 8. yes
9. Are you willing to be enlisted for General Service? .. 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? } 10.) Name
) Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. yes

I, Albert Weir 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.

Albert Weir SIGNATURE OF RECRUIT.
The D. Dowden Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Albert Weir 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 30 day of September, 1915

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.....

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

Date 1 OCT - 1 1915 1915
 Place ST. JOHN'S Robertson Approving Officer.
 The Royal Newfoundland Regiment, }
 St. John's, Nfld.

† 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 Albert Weir
 Apparent age 20 years months. Height 5 feet 8 1/2 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Clayton Weir
Pulleys Island | 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.	
(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. 6208 Name Albert Weir Corps S. A.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------------|
| 1. What is your name? | 1. <u>Albert Weir</u> |
| 2. What is your full Address? | 2. <u>Pilleys Isld.</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>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 <u> </u> |
| | Corps <u> </u> |
| 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, Albert Weir

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.

Albert Weir

SIGNATURE OF RECRUIT.

W. D. Dowden

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Albert Weir

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 30 day of September, 1915.

Signature of Attesting Officer C. B. Dick

†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 - 1 1918

Place ST. JOHN'S

Robertson

Approving Officer.

The Royal Newfoundland Regiment, St. John's, Nfld.

† 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

6208

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

Name Albert Weir
 Apparent age 20 years _____ months. Height 5 feet 8 1/2 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Elias Weir
Pelley's cld | 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 " [" "] " " " "									

Discharged 10/1/1919 Jan 9/1919

C.R. 6008

Extract from Daily Orders part 11, Depot St. John's dated Dec. 21st. 1918.

#6008 Pte. J. McCarthy

App. in D. O. Pt. II, #232 of 19-12-18, as "Discharge on demobilisation
approved 17-12-18" should read "approved 19-12-18."

C.R. 6208

Extract of Daily Orders Part II? Depot St. John's

Date Jan. 10th 1919

Demobilization

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

6208 Pte. Albert Weir.

Discharged 9-1-19

C.R. 6208

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Dec.12th, 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/w Records.

6208 Pte. Albert Weir.

12-12-18.

C.R. 6208

Extract of Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, dated Oct. 2nd 1918.

Strength Increases.

6208 Pte. A. Weir

Attested for general service with the Royal Nfld. Regiment
30/9/1918.

Weir, Albert.

6208

Ray Dept.

Jan 9th., 19

#6208 Ptelbert Weir,

Pilleys Island,

Twillingate Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 296."

Yours faithfully,

Captain,
Paymaster & Officer i/c Records.

Enc' 1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6208 Rank Private Name Weir, Albert
 Intended place of residence St. John's Island, Twill
2. Occupation fisherman
 Classification of soldier Q 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 9 1918
 Date DEC 9 1918 W. Howley Capt
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date St John's

Dec 9th 1918

Albert Weir ^{His wit}
 Signature of soldier
W. Howley Capt
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date St John's

Dec 7th 1918

Albert Weir ^{His wit}
 Signature of soldier
Raymond Sgt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 30.9.18
 Discharged from service Dec 12th 1918 plus 28 days No of days on Military Service 102 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. Sait Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

Date DEC 12 1918

CONFIRMATION OF DISCHARGE

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

Place St John's, Nfld

Date January 9/1919

W. Howley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6208 Rank. Pte Name Went Albert
 Date of Enlistment. 30.9.18 Address Palley's Falls District D. Wolfe
 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	
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		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	2			

Date... 4.12.18

Albert Went
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Albert Went
Joseph H. ...

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. ...*

Date... 5-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R34 to his home at Pulleys Gals and Release Certificate No. 108 issued.

Date 9. 12. 18 C.B. Dukes 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 9-1-19

Date 9-12-18 Money Capt.
Depot Paymaster.

Discharge approved for 12 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	
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	1	Form B
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.....		do 4th.....	" 5.....		
B 179b.....	B 103.....	ME 2.....			" 6.....		
B 179c.....	B 120.....	M 93.....	2				

Date 9. 12. 18 C.B. Dukes Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 12 1918 T.R.H. Sant Capt.
O. C. Discharge Depot.

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

Date Dec. 12/1918

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

MEDICAL HISTORY

OF

Surname

Ward

Christian Name

Albert

Table I.—GENERAL TABLE

Birthplace :—Parish

Pilley's Sld. County Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
Examined	on <i>30</i> day of <i>Sept</i> 191 <i>8</i>	on	day of	191
	at <i>St Johns.</i>	at		
Declared Age	<i>20</i> years	days	years	days
Trade or Occupation	<i>Fisherman</i>			
Height	<i>5</i> feet <i>1/2</i> .	inches	feet	inches
Weight	<i>132.</i> lbs.			ll a.
Chest Measurement	Girth when fully expanded	<i>36.</i> inches		inches
	Range of Expansion	<i>3.</i> inches		inches
Physical Development				

Vaccination Marks	Right		Left	
	Arm	Number	Arm	Number

When Vaccinated				
Vision	R.E.—V=	<i>6/6</i>	R.E.—V=	
	L.E.—V=	<i>6/6</i>	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)

Lancelot Paterson

(Rank)

Medical Officer

Medical Officer

Enlisted

at *St Johns.*
on *30* day of *Sept* 191*8*

at

on day of 191

Corps

Regtl. No.

Corps

Regtl. No.

Joined on Enlistment.....

Royal Nfld. Regt. 6208

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. 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 **Albert Weir**
 Regiment from which discharged *1st. Newfoundland*
 Regimental number **6208**
 Intended address **Pilleys Island**
 Height on discharge **5** Feet **8½**
 Color of hair on discharge **Brown**
 Complexion **Fair**
 Color of eyes **Blue**
 Descriptive Marks
 Figure on discharge
 Christian name of Father **E.**
 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.
 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)

(Rank)

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.



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

Station

Date

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 Fishing

Albert ^{His} Weir, ^{ditto} ^{at} ^{St John's} ^{N.F.I.D.}
_{Mark} _{Signature of Man.}

Reg. No. 6208

Alfred A. ...
Signature of the Vocational Officer or his Representative.

Place St John's N.F.I.D.

Date Dec. 5th 1911

21
1

Jullingate

Demobilization Form 1

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

Date *28-11-18*

Regimental No. *6208*

Name *Weir Albert (Pte)*

Address *Pilley's Island N. V. Bay*

Present Medical Category *A. II*

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

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

ROYAL NEWFOUNDLAND REGIMENT.

93

Medical Examination held at Phillips Island

Date 191 8

1. Name Albert wear. Age (a) Declared 21 yrs
(b) Apparent " "

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

What severe illnesses have you had? none

3. Height 5. 10 Weight 140

4. Eyesight (a) Left 6/9 P (b) Right 6/9

5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs n
Measurement 33 1/2 (a) Expiration 36 1/2 (b) Inspiration

7. Examination of Heart n

8. Examination of Urine n

9. Examination of Mouth—(Defective Speech)

Teeth Defective
Throat n
Nose n
Ears—(Deafness, Otorrhea) n

10. Have you been successfully vaccinated, and when? n

11. Name and address of next of kin Father Klayser. Phillips Island N.S.B

REMARKS—

We consider this man { Fit
~~Temporarily unfit for Military Service~~
~~Permanently unfit for Military Service~~

(If unfit, Form M.S.B., 10 A, should be filled and attached).

Att
Cm

J. Peterson
A. Killum

Medical Examiners.

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Adgpts on Sept 25 1918

1. Name Albert Wain Age (a) Declared 20
(b) Apparent

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

What severe illnesses have you had? None.

Eyes Grey
Comp Dark
Mark.

6208

3. Height 5-8 1/2 Weight 132

4. Eyesight (a) Left 1/6 (b) Right 4

5. Physical Defects (Examine after strenuous exercise) ✓

6. Examination of Lungs ✓
Measurement (a) Expiration 33 (b) Inspiration 36

7. Examination of Heart ✓

8. Examination of Urine ✓

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

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

11. Name and address of next of kin Father Glasgow, Pellys Isld.
Elroy

REMARKS—
Re-examined 30/9/18.
No trace of hernia to be found.
A11

W. C. ...
Archie ...
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Loyal Newfoundland Coy

Number of Sheet

Amr
C. D. Dick / *Lieut*

Signature of O. C. Company

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>6208 Albert Dabrid</i>	Age on	<i>20</i> years <i>0</i> months	<i>Fisherman</i>	
Joined	Date	Place and Date of Enlistment	<i>St Johns</i>	Religion	
Joined	Date	Period of	with Colours <i>102</i> years.	Place of Birth	
Joined	Date				

Place	Date of Offence	Rank	Class of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
	<i>1</i>			<i>Demobilized St Johns</i>	<i>9</i>	<i>1/19</i>			

To be carried over.

The Royal Newfoundland Regiment

26708

DEMOBILIZATION OF

Reg. No. 6208 Rank Plt Name Weir Albert
 Date of Enlistment 30.9.18 Address Pulleys T. Rd District St. John's
 Occupation Fisherman Classification for Discharge C Medical Category AII
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 4.12.18
 O. C. Discharge Depot. Albert Weir Capt

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Albert Weir
Wm. P. P. Weir

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 A. ...

Date 5-12-18 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R34 to his home at Pelleys Island and Release Certificate No. 108 issued.

Date 9-12-18 C. S. Dickes 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 9-1-19

Date 9-12-18 W. Bowley Capt.
Depot Paymaster.

Discharge approved for 12-12-18

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	D 400A	B 1915	✓ 2	do 2nd	" 3	✓ 2	
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	✓ 2				

Date 9-12-18 C. S. Dickes Capt.
Demobilization Officer.

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

Date DEC 12 1918 R. H. Lant Capt.
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
Date Dec 12/1918 W. Bowley Capt.
W. R.

Reg. No. 6208 Rank Pte Name Witt Albert

Attested 28-9-18 Address Pilleys Island

Allotment..... Allottee

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

Embarked for Overseas Cause.....

Vacc 1-10-18. / Pte Witt 15¹⁰/18 2nd Innoc 25-10-18.

9-12-18 **PASSED TO DEMOBILIZATION OFFICER**
12-12-18 **DISCHARGE APPROVED ON DEMOBILISATION.**