



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4473 Name James D. White Corps 4th

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. James D. White
2. What is your full Address? 2.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 27 Years Months
5. What is your Trade or Calling? 5. Bank
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.
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, James D. White 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.

..... SIGNATURE OF RECRUIT.

..... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James D. White 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 on this day of 191

Signature of Attesting Officer James D. White

†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 1st 191

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 William S. Winters

Apparent age 7 years 5 months. Height 5 feet 8 inches

Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 1 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Winters
Bureau | 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 " [" "] " " "

4473



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4473 Name Oliver S. W. White Corps Meth

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Oliver S. W. White
2. What is your full Address? 2. Burin
3. Are you a British Subject? 3. yes
4. What is your age? 4. 27 Years 5 Months
5. What is your Trade or Calling? 5. clerk
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.
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. Name yes
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, Oliver S. W. White 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.

Oliver S. White SIGNATURE OF RECRUIT.
Frank R. Purvis Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Oliver S. W. White 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. Johns on this 18 day of April 1915

Signature of Attesting Officer James Hunt

†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 April 18 1915
 Place St. Johns

Signature of Approving Officer James Hunt

† 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)

Approved 1-6-18

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Olin S. Wether
 Apparent age 27 years 5 months. Height 5 feet 8 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 John Wether
Buvin | 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 L'epot	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>18-4-18</u>									
Joined at <u>St. John's</u> on <u>April-18-18</u>									
<u>Discharged: St. John's. Jan. 14/1919.</u>									
<u>To report for duty 1-6-1918</u>									
<u>Admitted Barracks Hospital 15-7-1918</u>									
<u>Discharged from Hospital 23-8-1918.</u>									
<u>Demobilization St. John's 14-1-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 14-1-1919 (date of discharge) 272 years 272 days
 " " Pensions " " " " " " " " " " " "

C.R.4473

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

confirmed
Discharge on demobilization

The discharge of the undernoted on demobilization has been
confirmed by the Officer i/s Records on noted date.

4473 Pte. Oliver Winter

Discharged 14-1-19

C.R. 4473

Extract from Daily Orders Part 11 Unit ~~the~~ ^{the} Royal Nfld.
Regt., St. John's, Dec. 18th, 1918.

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

4473 Pte. O. Winter.

17-12-18.

C.R. 4473

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

4473 Pte O. Winterer.

Discharged from Barracks Hospital 4/11/18.

10.

C.R. 4473

Extract from Daily Orders Part 11 Unit The Royal Mfld. Regt.
St. John's, dated 23 August 1918.

4473 Pte. O. Winter.

Discharged from Barracks hosp. 23-8-18

C.R. 4573

August 9, 1918.

From:- District Officer Commanding.
Newfoundland.

To:- Officer Commanding Depot,
City.

#4573 Pte. L. Batstone.

The mother of t is soldier reports that he is not physically strong, and considers him unfit for service.

She also advises me that the matter was before Major Carty some time ago, who told her that he would have the soldier bearded.

Will you please make a report on the matter.

Major.
District Officer Commanding.
Newfoundland.

CR. 4473

Extract from Daily Orders part 11, from Unit The Royal N
fld. Regt. St. John's, dated July 16, 1918.

#4473 Pte. O. Winter.

Admitted to Barracks Hospital 15-7-18

C.R. 4473

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 20, 1918.

#4473 Pte. O. Winter.

Attested for General Service, with the Royal Newfoundland
Regiment, from 18/4/18. to report. 1/6/18.

No. 4473 Name John House Sqn., Batty., } B Corps R. N. F. L. I. Date of enlistment } 26/4/18 } G.C. } Service or
 or Company } } } } } Badges } Proficiency Pay }
 Date of last entry in } No. and date } Period not reckoning towards } Sheet No. one Signature O.C. } Character
 Company Conduct Sheet } of last drunk } freedom from extra fine } } Mygarden lieut }

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Fines	7/1/19	126		def. of iron ration 2/-	Sgt Carter	adm. pay for same	10/1/19	Mygarden	
Rover	11-11-19	126		Deficiency of kit value 1/4	Camp Wardles	Pay for same	15-4-19	Mygarden	R 20

Winter, 10

4473

Ray Sept.

January 14th., 1919

#4473 Pte. Oliver Winter,
C/o Bishop sons Co.L'td.,
City.

Dear Sir:-

Please find enclosed "Discharge
Certificate No.475."

Yours faithfully,

Captain,
Paymaster & O.i/c Records.

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4473 Rank No Name Oliver Winter
 Intended place of residence St. John's C/o Bishop Lane Rd
2. Occupation Telest
 Classification of soldier C Medical Category A-11
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 DEC 17 1918 Attesty 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 Oliver S. Winter
17-12-18 Signature of soldier
C. D. Kelly
 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 Oliver S. Winter
17-12-18 Signature of soldier
C. Kelly
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 18-4-18 No of days on Military
 Discharged from service 17-12-18 plus 28 days Service 272

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 ST. JOHN'S R. H. Lat 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 R. H. Lat Capt
 Officer in Charge
 The Royal Newfoundland Regiment
 Date January 14 1919
at 20-2079/475

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 44173 Rank Plt Name Walter Oliver
 Date of Enlistment 18 4 18 Address Burns District Burns
 Occupation Clk 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.....	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.....	1		" 6.....	
B 179c.....	B 120.....	M 93.....				

Date 17 12 18

Walter Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

i. Civil Re-Establishment.

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

Oliver J. Winter

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied

\$60.00
Joseph H. Snowling

Date 17-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *file* to his home at *St. Johns* and Release Certificate No. *411* issued.

Date *17-12-18* Demobilization Officer *C. Dicks RCM*

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 *1st - 12/18*

Date *17-12-18* Depot Paymaster *W. H. Capt.*

Discharge approved for *17. 12. 18*

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	
E 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 *17. 12. 18* Demobilization Officer *C. Dicks RCM*

APPROVED.

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

DEC 17 1918

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

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

OF

Surname Winters Christian Name Olin

Table I.—GENERAL TABLE.

Birthplace:—Parish <u>Barrin</u> County <u>Fla.</u>		SPECIAL RESERVE.		REGULAR ARMY.	
Examined	on <u>18</u> day of <u>April</u> 191 <u>8</u>	on	day of	191	
	at <u>St John</u>	at			
Declared Age	<u>25</u> years <u>5 mths</u> days		years		days
Trade or Occupation	<u>clerk</u>				
Height	<u>5</u> feet <u>8</u> inches		feet		inches
Weight	<u>135</u> lbs.				lbs.
Chest Measurement	Girth when fully expanded... <u>31</u> inches				inches
	Range of Expansion... <u>4</u> inches				inches
Physical Development					
Vaccination Marks	Right	Left	Right	Left	
	Arms	<u>15 yrs up</u>			
	Number	<u>3 clean</u>			
When Vaccinated					
Vision	R.E.—V= <u>6/20</u>		R.E.—V=		
	L.E.—V= <u>6/15</u>		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>L. M. [Signature]</u>				
(Rank)	<u>Major</u>				
	Medical Officer.				Medical Officer.
Enlisted	at <u>St John</u>	at			
	on <u>18</u> day of <u>April</u> 191 <u>8</u>	on	day of	191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.	
		<u>4473</u>			
Transferred to					
Became non-effective by	on	day of	191	on	day of
[Signature]					
[Rank]					

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
5-6-18	<i>U.S.A. 10</i>
9-9-18	<p><i>J. A. P. 18</i></p> <p><i>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>C</u> for Discharge on Demobilisation. Medical category <u>A II</u></i></p> <p><i>12.12.18</i> <i>[Signature]</i> <small>Captain</small></p> <p><small>Date of T.M.B. Discharge Depot—Newfoundland</small></p>

Table IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation



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 *Winter Oliver J.*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *4473*
 Intended address *C/o Bishop & Son's, St. John's.*
 Height on discharge Feet
 Color of hair on discharge *Light*
 Complexion *Fair*
 Color of eye *Blue*
 Descriptive Marks *Left thumb amputated.*
 Figure on discharge *Normal*
 Christian name of Father *John*
 Christian name of Mother *Adelaide*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Oct. 6th. 1890; Burin, P. Bay.*
 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)

Oliver Swiler

(Rank)

Pte

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.

H. J. Clax *Lieut.*

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 as Clerk.

Oliver J Winter

Signature of Man.

As Duke Kap

Reg. No. 4478

Signature of the Vocational Officer or his Representative.

Place St John's N.Y. Cd

Date 11/2/18.

191

6

John

The Royal Newfoundland Regiment

Class for Demobilization: 6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 12.12.18

Regimental No. 4473

Name Winter Oliver S.

Address 13 main (40 Bunker St. Co.)

Present Medical Category A II

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

Members of Board {
..... R. H. Dax Capt.
O.C. Discharge Depot.
..... Paterson
Senior Medical Officer
..... W. Burdett
M. O. Depot



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Oliver P. Winter*

aged *25 years*

conducted at *Headquarters*

Date: *April 18/19*

Recruiting Officer:

HW 713

NO OF TEST

FINDING

- 1 *yes*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *Left thumb off amputated*
- 10 *n*
- 11 *n*
- 12 *n*
- 13 *n*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *420 R. 6/15 left*
- 20 *n*
- 21 *n*
- 22 *n*
- 23 *n*
- 24 *n*
- 25 *n*
- 26 *n*
- 27 *n*
- 28 *n*
- 29 *n*
- 30 *n*
- 31 *n*
- 32 *n*

~~6/20~~

33 *Yes 15 years ago. 3 years left arm.*
34 *5789.*
35 *135ms.*
36 *31-35*

37
38 *Father John Durin*
39 *nobodies.*

HW

Signature of Medical Examiner:

HW Berden



THE ROYAL NEWFOUNDLAND REGIMENT HEADQUARTERS

ST. JOHN'S, NEWFOUNDLAND.

.....Dec. 9th. 1918.....

The Royal Newfoundland Regiment'

To # 4473. Pte. O. Winter.

Board and Lodgings while proceeding on Home Leave.....\$ 3.15.

B. P. Attached.



OK.

[Handwritten signature]

Asst Adjutant
Depot The Royal Newfoundland Regiment
St. John's, Nfld.



B. P. m.
6991
Dec 10 1918
aw

JERSEY SIDE

PLACENTIA, N.F., Dec 9 1917

4473

Ok
M. O. Winter

To the **WILCOX HOTEL**

MRS. ED. WILCOX, Proprietress

Board & Lodging

3 15

Paid Dec 9/17.
Mrs. E. Wilcox

4473

REID-NEWFOUNDLAND COMPANY

PASSENGER DEPARTMENT.

Trans Form 48

CH. NO. 2450 INITIALS [Signature]

IND. LEDGER --- INITIALS

PAN. RECEIPT --- INITIALS

GEN. LEDGER --- INITIALS

AGENTS', CONDUCTORS' & PURSERS' RECEIPT.



Sept Winters

Dollars *Twenty* Agents, being the amount of *1st* Class Fare

From *Clarke Beach to St Johns*

and have issued him Ticket No. *3268* Form No. *Car*

Date *July 2* 191*9* *Winter*

235 Agent, Conductor or Purser *[Signature]*

This form to be used when requested to give receipt for amount paid for tickets.

Certified correct for \$2.35

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet 1
Signature of O. C. Company James Hunt

Regiment of Royal Newfoundland

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>473 Oliver S. Whites</u>	Age on	years	months	
Joined		Date		Trade	
Joined		Date		Religion	
Joined		Date		Place of Birth	
Joined		Date			
		Place and Date of Enlistment			
		Period of			
		with Colours			
		with Reserve			

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St. John's, 14 / 19</u>					

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 14473 Rank Plt Name Winter Oliver
 Date of Enlistment 18. 4. 18 Address Burn District Burn
 Occupation Clerk 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	/	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	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	E 103	ME 2	/		" 6	
B 179c	B 120	M 93				

Date 17. 12. 18

W. A. C. Capt
O/C Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Oliver & Winter

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) Clothing Supplied Joseph H. Snowling

Date 17-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *file* to his home at *St John's* and Release Certificate No. *4-11* issued.

Date *17-12-18* *C. S. Dick's 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 *17-12-18* *Howley 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	
F 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	✓ 1		" 6		
B 179c	B 120	M 93					

Date *17. 12. 18* *C. S. Dick's Capt.*
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. Lat Capt*
O. C. Discharge Depot.

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

Date *Dec. 19/1918* *M. Howley Capt.*
O.C.D.

Reg. No. 4473 Rank Plt Name Winter, O.

Attested 18-4-18 Address Burino

Allotment Allottee

Date of Allotment Returned from Overseas 1/2/18

Embarked for Overseas Cause

1st Groe 9-9-18.
1-6-18 To report, 1-6-18 reported for duty
27-6-18. Sick leave 7-6-18. to 17-6-18 Extended to 2-7-18.
S. leave 4-7-18 to 6-7-18. Returned 6-7-18.
S. leave 8/7/18 to 15/7/18 Reto 16/7/18.
15-7-18. Admitted to Barracks Hospital
23-8-18. Discharged from Barracks Hospital
4/11/18.
S. leave 26/11/18. to 6-12-18. Held 10-12-18
17-12-18 PASSED TO DEMOBILIZATION OFFICER