



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6231 Name Robert Batten ~~Corps~~ S. G.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Robert Batten</u> |
| 2. What is your full Address? | 2. <u>Bay Roberts</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>20</u> Years <u>—</u> Months |
| 5. What is your Trade or Calling? | 5. <u>none</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, Robert A. Batten 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.

Robert A. Batten SIGNATURE OF RECRUIT.
W. K. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Robert Batten 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 October 1918.

Signature of Attesting Officer A. D. [unclear]

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the 1st Regiment.

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

Date OCT 30 1918 Place ST. JOHN'S

Robertson [unclear] Approving Officer.
 for Commandant
 The Royal Newfoundland Regiment,
 St. John's, Nfld.

* 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)

Conditional

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Robert Batts

Apparent age 20 years — months. Height 5 feet 8 inches

Chest Measurement { Girth when fully expanded 36 1/2 inches
 Range of expansion 3 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Batts
Bay Roberts | Relationship Father

Particulars as to Marriage

<small>(a) Christian and Surname of Woman to whom married, and whether spinster or widow.</small>		<small>(b) Place and date of marriage.</small>	
<small>(c) Present address.</small>		<small>(d) Initials of Officer verifying entry.</small>	
(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. 6234 Name Robert Batten S. A.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Robert Batten</u> |
| 2. What is your full Address? | 2. <u>Bay Roberts</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>20</u> Years <u>—</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Transport</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, Robert Batten 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.

Robert Batten SIGNATURE OF RECRUIT.

W. L. Loughlan Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Robert Batten 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 Bay Roberts on this 3rd day of October 1918.

Signature of Attesting Officer C. B. Dickson Lieut.

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the

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

Date OCT - 4 1918 1918

Place ST. JOHN'S

Robertson Capt. MAJOR
Commanding Officer } 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).....

Conditional

DESCRIPTIVE REPORT ON ENLISTMENT

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

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

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Patton
Bay Roberts | 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 _____									
<p style="font-size: 2em; font-family: cursive;">Discharged at John's Jan. 16/1919.</p>									
Total Service forfeited as above.....									

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

C.R. 6234

Extract from Daily Orders part II Depot St. John's dated Jan. 17/1919.

The discharges of the undernoted have been CONFIRMED by Officer
i/c Records from 16-1-19.

#6234 Pte. Robert Batten.

C.R. 6234

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

The undernoted discharges on demobilisation have been approved by O. O. Discharge Depot from noted date, he is removed from depot strength and transferred to Discharge Depot pending confirmation by Officer i/o No cords.

#6234 Pte. Robert Batten.

C.R.

6234

Extract from ~~Memorandum~~ Daily Orders Part 11 Unit The Royal
Hfld.Regt., St. John's Oct.5th, 1918.

6234 Pte. Robert Batten.

Attested for General Service With The Royal Hfld.Regt., from
3-10-18.

Batten, Robert.

6234

Ray Sept

January 16th., 1919

#6234 Pte. Robert Batten,
Bay Roberts.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 543."

Yours faithfully,

Captain,
Paymaster & O.i/c Records

Enc 1 1.
2

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6234 Rank Pvt. Name Robert A. Batten

Intended place of residence Bay Roberts

2. Occupation Carpenter

Classification of soldier C Medical Category A1

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 DEC 13 1918 W. Bowley Capt.

Date DEC 13 1918 W. Bowley 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 18th 1918 Robert A. Batten

Signature of soldier

W. Bowley 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 18th 1918 Robert A. Batten

Signature of soldier

J. Raymond Sgt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 3. 10. 18 No of days on Military

Discharged from service 19. 12. 18 plus 28 days Service 106 1/2 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. Lat

Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

Date DEC 19 1918

CONFIRMATION OF DISCHARGE

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

Place St. John's W. Bowley Capt.

Officer i/c Records

The Royal Newfoundland Regiment

Date January 16 1919
W. Bowley Capt.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6234 Rank Pte Name Batter Rolt
 Date of Enlistment 3.10.18 Address Bay Roberts District 14. St. John's
 Occupation Carpenter 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	3	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 12/12/18

W. J. C. O. C.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Robert Arthur Batter

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 A. ...*

Date 18-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 324 to his home at Bay Roberts and Release Certificate No. 442 issued.

Date 18-12-18 C. B. Dricks 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 16-1-19

Date 18-12-18 W. D. W. Capt.
Depot Paymaster.

Discharge approved for 19. 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	1	5 107-8
B 178	W 3494	B 122	Board 1st	" 2	1	
B 178a	D 400A	B 1915	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				

Date 19 12 18 C. B. Dricks Capt.
Demobilization Officer.

APPROVED.

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

Date DEC 19 1918 R. H. [Signature] Capt.
O. C. Discharge Depot.

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

Date Dec. 23/1918

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

MEDICAL HISTORY

OF

Surname

Batten

Christian Name

Robert

Table I.—GENERAL TABLE

Birthplace :—Parish

Bay Robert

County

Newfoundland

SPECIAL RESERVE

REGULAR ARMY

Examined	on	<i>5</i> day of <i>Oct</i>	191 <i>8</i>	on	day of	191
	at	<i>St John's</i>		at		
Declared Age		<i>20</i> years	days		years	days
Trade or Occupation		<i>Carpenter</i>				
Height		<i>5</i> feet	<i>8</i> inches		feet	inches
Weight		<i>155</i>	lbs.			lbs.
Chest Measurement	Girth when fully expanded	<i>36 1/2</i>	inches			inches
		<i>3 1/2</i>	inches			inches
Range of Expansion						

Physical Development

Vaccination Marks	Arm	Right	Left	Right	Left
	Number				

When Vaccinated

Vision	R. E.—V=	<i>6/12</i>		R. E.—V=	
	L. E.—V=	<i>6/9</i>		L. E.—V=	

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by (Signature)

Lamm Parsons

(Rank)

Major

Medical Officer

Medical Officer

Enlisted

at

St John's

at

on

3 day of *Oct*

191

on

day of

191

Joined on Enlistment

Royal Nfld Regt 16234

Transferred to

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 as carpenter

Robert A. Batten

Signature of Man.

Adrian Call

Signature of the Vocational Officer or his Representative.

Reg. No. *6234.*

Place *St Johns N.F.Z.D.*

Date *18/12/18.* 191

Harbour Grav.

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. *6234*...

Name ... *Battin Robert (Pte)*

Address ... *Bay Roberts*

Present Medical Category ... *A II*

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

Members of Board {

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

P. A. ...
Senior Medical Officer

L. W. ...
M. O. Depot

9



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 *Batten, Robert Arthur.*

Regiment from which discharged *1st. Newfoundland*

Regimental number *6234*

Intended address *Bay Roberts, Conception Bay.*

Height on discharge Feet

Color of hair on discharge *Light brown.*

Complexion *Light*

Color of eye *Blue.*

Descriptive Marks *Mole on left side of neck.*

Figure on discharge *Normal.*

Christian name of Father *John*

Christian name of Mother *Annie.*

Wife's maiden name in full

Date and place of marriage } *not married.*

Christian names of children }

Place and date of soldier's birth. *Bay Roberts, C.B., Sept. 5th 1898.*

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) *Robert Arthur Batten*

Station *Prince's Link.* Date *11/12/18.* (Rank) *Pte.*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

J. R. Steele / *St*
Medical Officer i/c Hospital,
Unit, or Command Depot.

Nº 7384



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Robert Batter, Regl. No. 6234

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 Nov 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>7384</u>	<u>Father</u>	<u>John Batter</u>	<u>Country Rd Bay Roberts</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 Company

(Sig.) Robert Batter
(Rank) Plt

S. Johns.
Oct 2nd 1918



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Robert Batten, Regl. No. 6234

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 Nov 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>7501</u>	<u>Father</u>	<u>John Batten</u>	<u>Canning Rd. Bay Roberts</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
 Company
S. Johns.
Oct 7th 1918

(Sig.) Robert Batten
 (Rank) Pvt

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Halifax on Oct 9 1918 1918

1. Name Robert Batten Age (a) Declared 20
(b) Apparent

2. Do you know of anything wrong with you? Left foot Street

What severe illnesses have you had? None

Eyes Blue
Scalp Fair
Mark

6234

3. Height 5ft 8 Weight 135

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

5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~

Measurement (a) Expiration 33 (b) Inspiration 36 1/2

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

11. Name and address of next of kin Father John

Bay Roberts

12. Category

REMARKS—

A II

Archibald
W. Borden

Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet

One
CB Dickson

Regiment of

Royal Newfoundland

Signature of O. C. Company

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>6234</u>	Age on <u>20</u> years <u>4</u> months	<u>fisherman</u>	
Joined	<u>Robt Batten</u>	Place and Date of Enlistment	Religion	
Joined		<u>St Johns</u>	<u>S.A.</u>	
Joined		Period of	Place of Birth	
Joined		with Colours <u>10 1/2</u> years.	<u>Bay Roberts</u>	
		with Reserve <u>3 1/2</u> years.		

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
				<u>Demobilized</u>	<u>St Johns</u>	<u>16/19</u>			

To be carried over.

The Royal Newfoundland Regiment

6234

DEMOBILIZATION OF

Reg. No. 6234 Rank Pte Name Batten Robt.
 Date of Enlistment 3.10.18 Address Bay Roberts District H. Chase
 Occupation Carpenter Classification for Discharge C Medical Category A II
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P 36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	3
B 178a.....	D 400A.....	B 1915.....	3	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 12/12/18

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

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Robert Arthur Batten

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$65.00

(b) ~~Clothing Supplied~~ *Joseph H. Snowling*

Date 18-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 324* to his home at *Bay Roberts* and Release Certificate No. *442* issued.

Date *18-12-18*

C. 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 *16-1-19*

Date *18-12-18*

M. Bowley Capt.
Depot Paymaster.

Discharge approved for *19.12.18*

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	<i>Form B</i>
B 178a	✓ 1 D 400A	✓ 1 B 1915	✓ 3	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 *19.12.18*

C. S. Dicks Capt.
Demobilization Officer.

APPROVED. *h.*

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

DEC 19 1918

Date

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

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

Date *Dec. 23/1918*

M. Bowley Capt.
R. C. P.

Reg. No. *6234* Rank *Pte* Name *Batten Robert*
Attested *3-10-18* Address *Bay Roberts*
Allotment *60* Allottee *John Batten Father*
Date of Allotment *1¹¹/₈* Returned from Overseas.....
Embarked for Overseas Cause.....

1st June 15¹⁰/₁₈ 2nd June 25-10-18

15-12-18 PASSED TO DEMOBILIZATION OFFICER

DEC 19 1918 DISCHARGE APPROVED ON DEMOBILISATION.