



# FIRST NEWFOUNDLAND REGIMENT

4100

## ATTESTATION OF

No. 4100 Name Neville Bugden Corps 6 of E.

### Questions to be put to the Recruit before Enlistment.

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Neville Bugden</u>           |
| 2. What is your full Address? .....  | 2. <u>21 Young St. St. John's</u>  |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>3</u> Months |
| 5. What is your Trade or Calling? .....  | 5. <u>Butcher</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 .....<br>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, Neville Bugden 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.

N. Bugden SIGNATURE OF RECRUIT.  
A. E. Edward Signature of Witness.

Neville Bugden 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 17 day of November 1915.

W. H. H. H. H. Signature of Attesting Officer

### †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 6 of E.

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

Date ..... 1915 }  
Place ..... } 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 Beville Bugden  
 Apparent age 18 years 3 months. Height 5 feet 8 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 4 inches

Distinctive marks \_\_\_\_\_  
 \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Serry Bugden  
21 Young St. Johns | 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 12-11-17  
 Joined at St. Johns on November 12-17  
Discharged July 8/19  
 Embarked St. Johns St. Messauville 11-12-17 Embarked for S.E.T. 25<sup>th</sup> 18  
joined Battr. France 31-5-18 Admitted 12 Co. R. 4th 17-8-18 Admitted 25  
St. John. Queen Alexandra 21-8-18 Dis to base depot 20-9-18 To base depot 14<sup>th</sup> 18  
Regiment unit 14-10-18 Transferred from Queen 22<sup>nd</sup> 19 Arrives Winchester 25<sup>th</sup> 19  
To be found dead for demobilization 22<sup>nd</sup> 19 Arrives Leamington 1-6-19  
Demobilization St. Johns 8-7-19

Total Service forfeited as above.....

Total Service towards Engagement to 8-7-19 (date of discharge) 1 years 239 days  
 " " Pensions " " " " " " " " " " " "

C.R.

4100

Extract from Daily OrdersvPart 11 Unit The Royal Nfld. Regt.  
St. John's, June 24th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 24-6-19.

4100 Pte. N. Bugden.

C.R. 4100  
Extract from Daily Orders Part II Depot, St. Johns,

Date 13/6/19.

4100, Pte. N. Bugden.

Reported at Headquarters 1/6/19. ex "Corsican"  
which sailed Liverpool May 22/1919.

C.R. 4100

Extract from Nominal Roll 1st. Battalion  
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left  
Rouen Camps 22/4/19, embarked at Havre 22/4/19  
disembarked at Southampton 23/4/19; and reached  
Hazeley Down Camp 23/4/19.

#4100 Pte. N. Bugden.

C.R. 4100

Extract from Orders by Lt. Col. G.F. Mathias, D.S.O.  
Commanding 1st Battn. Royal Wfld. Regt. 26-8-18

The u/m is admitted to hospital.

4100 Pte. R. Budgen.

## SICK AND WOUNDED N.O.O's and MEN OF THE EXPEDITIONARY FORCE - FRANCE

C.R.

4150  
400

## REGISTER RECORD OFFICE

LIST NO. H. A. 29748

42572 Pte Morrish C...	2/10 London.	. . . . .	.Dis. to Med. Bd. Base Dep. Rouen Class MB ex 2 Con. Dep. 30 September/18
30889 Pte Bromley J.	2/10 London.	. . . . .	.Dis. to Med. Bd. Base Dep. Rouen Class MB ex 2 Con. Dep. 30 September/18
421832 Pte Lane H.	2/10 London.	. . . . .	.Dis. to Med. Bd. Base Dep. Rouen Class MB ex 2 Con. Dep. 30 September/18
422872 Pte Springhall R.	8 Londons.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
A/302358 Pte Browning A.	9 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
R/28789 Pte Hobart E.	9 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
48737 Pte English C.	10 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
38127 Pte Myers J.	10 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
434443 Pte Tuck T.	2/10 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
471810 Cpl Smith J.	12 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
382743 Pte Cole F.	13 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
4005 Pte Jeffrey J.	17 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
76418 L/C Wharton R.	17 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
372393 Pte Ramsey H.	17 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
315435 Pte Haw H.	28. London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
4036 Pte Inker W.	13 K.R.R.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
573361 Pte Ettridge A.	17 London.	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18
41158 Pte Tweed W.	12 R. Bde. att 2/10 Ldn	. . . . .	.Dis. to Reinf. Harfleur Class A ex 2 Con. Dep. 30 September/18

## NEWFOUNDLAND EXPEDITIONARY FORCE

LIST NO. H. A. 29748

40100 Pte Bugden N.	R. Newfld Rgt.	. . . . .	.Dis. to Base Rouen Class A ex 2 Con. Dep. 30 September/18
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C.R. 4100

SICK AND WOUNDED N.C.O.'s AND MEN OF THE EXPEDITIONARY FORCE. - FRANCE.

No. TWO. RECORD OFFICE SHREWSBURY.

LIST No. H.A. 28392

ADM. 2 CON. DEP. ROMEN 30th AUGUST '18.



*Handwritten mark resembling a stylized 'M' or 'W'.*

1733

73488	Pte.	Twigg, F.	2nd R.W.F.	GW.Face
12607	"	Pozzi, J.	14th Do.	GW.Leg L.
29384	L/C.	Hughes, W.	16th Do.	GSW.Axilla R.
42329	Pte.	Marsden, G.	14th Do.	GSW.Hand R.
64089	"	Korgan, F.	10th Do.	GSW.F'arm R.
85402	"	Salter, C.	15th R.W.F.	Wd.Gas Shell
291420	"	Swinsob, L.	7th Ches.	W.Gas Poisoning
33784	Cpl.	Lloyd, W.	14th R.W.F.	Neurasthenia
69087	Pte.	Hamlin, J.	1st Ches.	P.U.O.
57994	"	Rees, E.	13th R.W.F.	SW.Face
27500	"	Viney, H.	17th Do.	SW.Arm R.
235590	"	Sullivan, D.	14th Do.	SW.Arm R.
58308	"	Rogers, D.	14th Do.	GSW.Leg L.
46790	"	Graham, J.	13th Do.	GSW.Wrist L.
235174	"	Harling, H.	14th Do.	GSW.Head & Back
45112	L/C.	Evans, W.	17th Do.	ICT.Arm R.
290890	Pte.	Hulley, H.	1/7th Ches.	Scabies Impetigo Ped.
204521	"	James, J.	4th R.W.Fus.	ICT.Ankle R.
242327	"	Hooley, H.	4th Do.	Pyoderma Pediculi

SOUTH AFRICAN RECORD OFFICE.

LIST No. H.A. 28392

17641	Pte.	Haw, J.	2nd S.A.Inf.	P.U.O.	Adm.2 Con.Dep. Romen 30th Aug'18.
11587	"	Sadler, B.	1st Do.	Diarrhoea	Adm.2 Con.Dep. Romen 30th Aug'18.

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST No. H.A. 28392

40180	Pte.	Bugden, N.	R.Newfoundland.	Clinical Dysentery	Adm.2 Con.Dep. Romen 30th Aug'18.
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H/50



WOUNDED & SICK N.C.O.s. & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 4100

No. 1 RECORD OFFICE - WARLEY.

LIST NO.H.A.27904.

40610 Pte. Locker N.Regt.  
or 41625 ? North'n R.  
206015 Sjt. Mitchell A. 5/Northants.

Frac. of ..... O.C.12 Sty.H.St. Col reports on 20th Aug.18. DIED OUT OF HQ.  
Mild. 20 Aug.18.  
Clin. Dysentery Adm.25 Sty.H.Rouen 21 Aug.18.  
Mild.



ORK - RECORD OFFICE.

LIS NO.H.A.27904.

5530 Sjt. Mohan M. 5/R.Ir.Regt.  
5106 Pte. Allen R. 5/R.Ir.R.  
3012 Pte. Gaskin C. 5/R.Ir.Regt.

NYD. ICT. Adm.5 sty.H.Dieppe 21 Aug.18.  
Mild.  
FUO.Mild..... Dis.ex 5 Sty.H.Dieppe 21 Aug.18.  
Appendicitis .. O.C.5 Sty.H.Dieppe reports (Trans.to Le Treport for  
Evac.to UK.21 Aug.18.

29668

DUBLIN - RECORD OFFICE.

LIST NO.H.A.27904.

42148 Pte. Bogie D. 9/R.Ir.Fus.  
2 R.T Camp.  
23462 Pte. Day R. 2/R.Dub. Fus.  
28314 Pte. Love F. 2/R.Dub. Fus.

Influenza. Adm.5 Sty.H.Dieppe 21 Aug.18.  
Mild.  
NYD.Chest ..... Adm.5 Sty.H.Dieppe 21 Aug.18.  
Mild.  
Chicken Pox. Adm.5 Sty.H.Dieppe 21 Aug.18.  
Mild.

ARMY VETERINARY CORPS.

LIST NO.H.A.27904.

31 QMS. Wellings P.J. AVC. 9 Sec.

Injury L. .... Adm.5 Sty.H.Dieppe 21 Aug.18.  
Knee Mild.

NEWFOUNDLAND EXPEDITIONARY FORCE

LIST NO.H.A.27904.

4100 Pte. Bogden B. 1/R.Newfld.

Clin. Dysentery Adm.25 Sty.H. Rouen 21 Aug.18.  
Mild.

C.R. 4100

Extract of Nominal Roll Draft (All Ranks) to 1st  
Bn. B.E.F. Embarked Folkestone 2

4100 Pte. N. Bugden.

25-5-18.

C.R. 4100

Extract from Nominal Roll of MFLA. Regt. Draft No.46  
from 2nd Bn. Depot Winchester to 1st Bn. B.E.F.  
Embarked Folkestone 25-5-18.

4100 Pts. N. Bugden.

C.R. 4100

NEWFOUNDLAND CONTINGENT.

Extract of Nominal Roll of Draft No. 46, -120 Other Ranks from 2nd.  
Bn., Depot, Winchester, to 1st. Bn., The Royal Newfoundland Regiment,  
B.E.F. Embarked Folkestone, 25/5/18.

4100 Pte. N. Bugden.

A.Po. B. 105 (one for  
each soldier) sent to  
3rd. Echelon, B.E.F.

C.R. 4100

Extract from Nominal Embarked St. John's For Overseas Per  
SS Florisel Dec II th 1917.

4100. Pte N. Bugden.

C.R. 4100

Extract from Daily Orders of the Royal Nfld. Regiment. Part II.

Nov ~~20~~th 1917.

15.

4100. Pte. N. Bugden.

Attached to the Strength. with effect from Nov 15th 1917.

C.R.

4100

Extract from Daily Orders Part II Unit The Royal  
Wilt. Regt., St. John's, Nov. 15th, 1917.

4100 Pte. N. Bugden.

This man is struck off Strength of drummers with effect  
from Nov. 11th, 1917.

C.R.

4100

Extract from Daily Orders Part 11 Unit The Royal Rifle  
Regt. St. John's, 11-7-19.

The discharge of the undersigned on demobilization has been  
CONFIRMED BY Officer i/c Records from 8-7-19.

4100 Pte. Neville Bugden.



C.R.

4100

Extract from Orders by LT. Col. G.T. Mathias, D.S.O  
Commanding 1st Battn. Royal Wfld. Regt. 27-8918.

The u/m has been evacuated and is struck off the Strength  
of the Unit:-

4100 Pte. N. Bugden

N. Bugden

C.R. 4100

P. & R. O.

**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps Royal Newfoundland } Former Trade or Occupation } Butcher
2. Regtl. No. 4th B.C. 3. Rank Plt. 7a. If the soldier claims previous service in Army, he should state—  
 (a) Former Regts. or Corps ; with Regtl. Nos.
4. Name Bugden Revell  
 (Surname) (Christian Names)
5. Age last birthday 20
6. Posted for duty on ..... at .....  
 in category (or grade) .....
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty ? (b) Date of Discharge ;  
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity (if any)  
 (b) Where  
 (c) Opinion of Court

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. nil
12. Place of origin of disability. nil
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. nil

14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                        | .....               | .....             |
| (ii.) Previous active service.. .. .                               | .....               | .....             |
| (iii.) Climate in pre-war service .. .. .                          | .....               | .....             |
| (iv.) Ordinary military service before the war .. .. .             | .....               | .....             |
| (v.) Serious negligence or misconduct on the man's part. } .. .. . | .....               | .....             |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } .. .. .

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

*He complains of no disability*

16. Was an operation performed? If so, when and what was its nature? .. .. .
17. If not, was an operation advised and declined? .. .. .
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? .. .. .
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? .. .. .

*Repatriciation*  
*W. E. P. ...*  
*W. E. P. ...*  
*Capt. R. L. M. C.*

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Medical Officer in charge of case.

Station *Hazley Down*  
 Date *29/4/19*

\* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

0 38441

No. 7271/581

NEWFOUNDLAND CONTINGENT

N.F.P./70.

From

Chief Paymaster & O. i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

To

Officer Commanding,  
2/Bn Royal Nfld. Regt.  
Winchester.

Subject: 8th May 1918

10/5. 1918

Subject: 4100, Pte. N. Bugden,

C

Receipt hereunder.

With reference to the following telegram (4115) from the Hon. Minister of Militia, received

Officer Comdg. 1st Battalion Newfoundland Regiment

pay to 4100 Bugden £2:0:0

Received the sum of £2.0.0

Draft £2:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

\_\_\_\_\_ on account of  
cable remittance from Newfoundland.

N Bugden

Chief Paymaster & O. i/c Records.

No. 4100 Rank Pte

No. 4100 Rank Pte Name H Bugden

Pay 100 F.A. 10 Wks. 1.70  
 Less Allowance 50  
 Net Rate 60

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	Total	No. of Days				
						From	To								
Balance					Balance	20	12	18		15	78				
Acquittance Rolls		6	8	1	Pay @ Net Rate	21	12	4	19	105	60	6300	12	15	11
Hospital Advances					Rd	3	1	19	14	1	1	1	1	4	6
A.B. 64. 60 hrs.		2	6	0											
P.&R.O. Payments		8	14	1	<del>20.11.06</del>	5	4	19	17	13	60	780	1	12	1
<i>cash</i>		1	9	26											
<i>Other stoppages</i>		2	9	4											
<i>cash Re with</i>		7	1	9	<del>6.19.6</del>										

29.11.1

31.3.2

*Do*  
*1/19*

NEWFOUNDLAND GOVERNMENT

No. 4100 Rank Pfc

Name H Bugden

Pay	F.A.	Wes	1-70
100	10		
Less Allowance			50
Net Rate			60

DEBITS	Date	£ s d		CREDITS	Period From To	Days	Rate	Pay	No. of Sheets
Balance				Balance	20-12-18			15	78
Acquittance Rolls		6	8	1	21 <sup>12</sup> 4 <sup>4</sup> 19	105	60	6300	12 15 11
Hospital Advances				Pay @ Net Rate	3 <sup>4</sup> 7 <sup>19</sup> 18 <sup>4</sup> 19	14	1/9		14 6
A.B. 64. 60 hrs.		2	6	0					29-11-1
P.&R.O. Payments		8	14	1	<del>20-11-06</del>				
<i>cash</i>		19	26	20	5/4/19 17 <sup>4</sup> 19	13	60	780	1 12 1
<i>Other stoppages</i>		29	4	1					31-3-2
<i>cash. Re with</i>	7 <sup>4</sup> 19	1	9	6					

NEWFOUNDLAND GOVERNMENT

*1919*

No. 4100 Name

*Pl. Dugden, No.*

Sqn., Batty.,  
or Company

*2*

Corps

*2/1 Royal New Forest*

Date of  
enlistment

*12. 11. 19*

G.C.  
Badges

Service or  
Proficiency Pay

Date of last entry in  
Company Conduct Sheet

No. and date  
of last drunk

Period not reckoning towards  
freedom from extra fine

Sheet No.

Signature O.C.  
Company, etc.

Character

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
<i>Romen</i>	<i>21/3/19</i>	<i>PlG</i>		<i>Defacement of Kit</i>	<i>Supt French</i>	<i>Adm. expy. for same 9/19</i>	<i>29/3/19</i>	<i>Major Bernard</i>	<i>wrect</i>

*J. M. Guzman Capt.*





FORM K

N<sup>o</sup> 3858<sup>A</sup>



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *Neville Bugden*, Regl. No. *H100*

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and *fifty* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz :

Allotment begins *December 12-17*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend.	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>3277</i>	<i>Mother</i>	<i>Mrs H. (Berne) Bugden</i>	<i>21 Young Street</i>	<i>50</i>
Total Allotment, \$				

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

Sig.) *[Signature]*  
Officer Commanding  
Company  
*[Signature]*  
*1-12-17* 191

(Sig.) *Neville Bugden*  
*Private*  
(Rank) *Pte*

Budgen, L

4100

Hay Sept.

# 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 resume former occupation*

*OP Bugden*  
Signature of Man.  
4100

Reg. No. ....

*J. A. Snow Capt.*  
Signature of the Vocational Officer or his Representative.

Place

*St. Johns*

Date

*JUN 10 1918*

191

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4100 Rank PT4 Name Burghard W.  
 Date of Enlistment 12.11.17 Address St. John's District St. John's  
 Occupation Butcher Classification for Discharge B Medical Category A.I  
 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	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	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			

Date 9.6.19

O. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

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

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

Date 10-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. \_\_\_\_\_ to his home  
 at St Johns and Release Certificate No. 2582 issued.

Date 10-6-19 J.A. Newbapt  
 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 \_\_\_\_\_

Date 10-6-19 H. M. H.  
 Depot Paymaster.

Discharge approved for 10-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
F 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 10-6-19 J.A. Newbapt  
 Demobilization Officer.

APPROVED.

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

**Eligible for War Service Gratuity**  
 JUN 15 1910

Date \_\_\_\_\_ R.H. Sait Capt.  
 O. C. Discharge Depot.

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

Date \_\_\_\_\_

The Royal Wld. Regiment

DEMOBILIZATION

No. *H100* Rank \_\_\_\_\_

Name *Bugden*

Warned for demobilization on

JUN 10 1919

# The Royal Newfoundland Regiment

Class for Demobilization: E.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 9.6.19

Regimental No 4100

Name Burden

12

Rank PL

Address 21 Youngs St

Present Medical Category A1

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

RH Jait Capt  
O.C. Discharge Depot.

Members of Board

[Signature]  
Senior Medical Officer

[Signature]  
~~M. O. Depot~~



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4100 Rank Pte Name Bugden H.  
 Intended place of residence St Johns  
 2. Occupation Butcher  
 Classification of soldier 2 Medical Category A.I.

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

**Eligible for War Service Gratuity**

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 10 1919  
 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 JUN 10 1919  
 Signature of soldier H. Bugden  
 Signature of witness W. J. ...

### 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 JUN 10 1919  
 Signature of soldier H. Bugden  
 Signature of witness W. J. ...

### STATEMENT OF SERVICE

7. Enlisted for service 12-11-19 No of days on Military  
 Discharged from service JUN 15 1919 Plus 14 days Service 595

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S JUN 15 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

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

Place St Johns, Nfld  
 Date July 8/1919  
 Officer in Charge of Records  
 The Royal Newfoundland Regiment

2432079/5791

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

# MEDICAL HISTORY

Surname Bugden OF Christian Name Herrie

Table 1.—GENERAL TABLE.

Birthplace:—Parish St. John County Yorks.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	12th day of Nov 1917	St. John	day of	191
Declared Age	18 years 3 Mos		years	days
Trade or Occupation	Butcher			
Height	5 feet 8 1/2 inches		feet	inches
Weight	118 lbs.			lbs.
Chest Measurement	Girth when fully expanded...	35 inches		inches
	Range of Expansion...	4 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm	1 Scar		
When Vaccinated				
Vision	R.E.—V		R.E.—V	
	L.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)	<i>Samuel Peterson</i>			
(Rank)	Major			
Enlisted	at	St. John	at	
	on	15th day of Nov 1917	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	1st Regt Regt! 4100			
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				



**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland*
2. Regtl. No. *4100* 3. Rank. *Pte*
4. Name *Bugden* *Nevill*  
(Surname) (Christian Names)
5. Age last birthday *20*
6. Posted for duty on..... at.....  
in category (or grade).....
7. Former Trade or Occupation } *Butcher*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

**10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.**  
*(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."*

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*nil*  
*nil*  
*nil*  
*nil*

**Casualty Form—Active Service.**

Regiment or Corps *2/1st Royal Newfoundland*  
 Rank *Pte* Surname *Dugdon* Christian Name *Neville*  
 Religion *C of E* Age on Enlistment *18* years *3* months  
 Enlisted (a) *2.11.17* Terms of Service (a) *Duration* Service reckons from (a) *1.2.18*  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended [ ] Re-engaged [ ] Qualification (b) .....  
 Occupation *Butcher* *J. W. Munnion* of Corps Trade and rate *25 MAY 1918*  
 Signature of Officer *J. W. Munnion*



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 38, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.38, or other official documents.
Date	From whom received				
			Embarked <i>25-5-18</i>		
			Disembarked <i>27-5-18</i>		
			<i>31-5-18</i>		
<i>17<sup>th</sup></i>	<i>12 C.C.S</i>	<i>Adm N.Y.D.</i>	<i>17</i>	<i>17.8.18</i>	<i>F.D. 5601</i>
<i>24<sup>th</sup></i>	<i>12 C.O.S</i>	<i>To 2.A.T. Clin. dispensary</i>	<i>~</i>	<i>20.8.18</i>	<i>F.D. 5662</i>
<i>3<sup>rd</sup></i>	<i>25 St. H.</i>	<i>Adm Clin. dispensary</i>	<i>~ Rouen</i>	<i>21.8.18</i>	<i>H.A. 27904</i>
	<i>2 Con Dep</i>	<i>~</i>	<i>~</i>	<i>30.8.18</i>	<i>H.A. 28392</i>
		<i>Regimental</i>	<i>14/10/18</i>		
		<i>Granted leave to R 3/4/19 to 18/4/19</i>			<i>B23</i>
		<i>Arrived in UK</i>		<i>13/4/19</i>	

*Int*

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing, Smith, &c.



## 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

*Reville Bugden*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*4100*

Intended address

*St John's*

Height on discharge

*5* Feet *9*

Color of hair on discharge

*Black*

Complexion

*Fair*

Color of eyes

*Blue,*

Descriptive Marks

—

Figure on discharge

*Medium*

Christian name of Father

*Henry*

Christian name of Mother

*Bessie*

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

*St John's, 10<sup>th</sup> July 1899*

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)

*R. Bugden*

*Yt*

(Rank)

Station

**ST. JOHN'S.**

Date

*9-6-19.*

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

Station

Date



✓  
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 questions 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 *Herille* ..... 2. Surname *Bugden* .....

3. Rank *Plt* ..... 4. Regtl. No. *4100* .....

5. Address in full to which future payments of gratuity are to be forwarded. *21 Young St. St. John's* .....

6. Date of enlistment in the Regiment. *Oct 17/17* .....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. ....

8. Relationship of such dependents. ....

9. Address in full of such dependents. ....

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 Nfld. If so, give dates and particulars of such service. *Overseas* .....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *From Oct 17/17 to* .....

*Jan 10/19* ..... 1.  $\frac{2}{4}$  .....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.  
..... *No* .....

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.....

15. Have you been issued with a War Service Badge?..... *No*

16. Have you, during the present war, served in the Imperial Forces?..... *No*

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..... *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *No*

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

19. Are you now serving in the R.C.S.T.?..... If not give? - (a) Date of discharge..... *June 15/19* (b) Reason for discharge..... *Temporary 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....  
*France, Belgium + Germany - From May, 1918 to Sept. 1919*

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..... *No*

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.



*- or Bugden*

Signature of Applicant:

Place of Residence:

Declared before me at:

This

*10th,*

day of

*June 1919*

*21 Young St. N. John's  
N. John's, Nfld  
John M. Carthy  
J.P.*

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

POST DISCHARGE PAY.

Date paid

Paid  
Soldier.

Paid  
Dependent.

War Service  
Gratuity.

Net amount  
due

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified correct.

Paymaster

July 8, 1919

#4100 Pts. Neville Bugden,  
#21 Young St.,  
City

Dear Sir:-

Please find enclosed Discharge Certificate  
No. 2791.

Yours truly

Captain  
Raymaster & O.i/c Records.

# Confidential Information

## For the use of the Civil Re-establishment Committee.

Report No.	Class	No. of C.R.C. File	No. of H. Q. File
------------	-------	--------------------	-------------------

Name Budger, N. No. 4100 Rank P.Fe R. N. R. or Regiment

Home Address St John's City Address 21 Young St

Age 20 Height 5-9 ft. ins Complexion fair Eyes blue Hair black Character

Date of enlistment 12-17-17 Where enlisted ST. JOHN'S Where seen service France

Ship returned by Corona Date of return JUN 1 1919 How Long 1 1/2 yrs

Birthplace St John's Date of discharge JUN 27 1919 Religion C.P.

Name and address next of kin Father, Harry, 21 Young St

Cause of disability

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Eng. Board ..... Newfoundland Board .....

Probable duration of incapacity .....

Is final disability likely to prevent return to previous occupation? .....

Recommendation of Newfoundland Board .....

Members of Board .....

### INFORMATION TO BE FURNISHED BY SAILOR OR SOLDIER.

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment Butcher

Regular trade or profession

Average earnings previous to enlistment \$2.50 <sup>or</sup> 22 yr Any other income

Name and address of last employer St John's Meat Coy

If in receipt of sick benefits or other insurance—name of society ..... Amt per mo \$

At what age left school? 14 What grade, standard, &c., was he in? III

Has he had any further education since leaving school, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

If unable to follow previous occupation, name preference

References

Witness W J Beaton, Qms I declare that the above statement is correct.

Date JUN 1 1919 Signature W P Budger

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

PENSION—Class ..... Amount per month, \$ ..... Period granted for ..... Dating from

First Payment date



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Neville Bayden, Regl. No. 4100  
hereby agree, until further notification by me, and in similar official form to make an Allotment of  
\_\_\_\_\_ Dollars and 50 Cents, per diem, from my Pay,  
to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof  
of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons  
concerned, viz.:

Allotment begins December 1<sup>st</sup> 17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3277</u>	<u>Mother</u>	<u>Mrs N. (Berne)</u> <u>Bayden</u>	<u>21 Young</u> <u>Street</u>	<u>50</u>
Total Allotment, \$				

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

Sig.) W. J. S.  
Officer Commanding  
Company  
A. Johns  
1-12-17  
191

(Sig.) Neville Bayden  
Prattomsky  
(Rank) Pte

Aug 16<sup>th</sup> / 19

Will you please give bearer  
my second months gratiuty money  
drawed first one 13<sup>th</sup> of last month.

b ity

Genl Bingham Reg No. 4100

~~John~~ O'Grady

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*1<sup>st</sup> Newfoundland.*

Signature of O. C. Company

Number of Soldiers *ONE*  
*Whaley J.*

Regimental Number and Name		Enlistment		Trade
No.	<i>Budgen G.</i>	Age on	<i>18 years 3 months</i>	<i>Butcher</i>
Joined	Date	Place and Date of Enlistment	<i>St. Johns 12-11-17</i>	Religion
Joined	Date			<i>C of C.</i>
Joined	Date	Period of	with Colours <i>239</i> years. with Reserve <i>365</i> years.	Place of Birth
Joined	Date			

Good Conduct Badges, Service pay or proficiency pay

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
				<i>Demobilized St. Johns, 8/79</i>					

To be carried over

# The Royal Newfoundland Regiment

4100

## DEMOBILIZATION OF

Reg. No 4100 Rank PTC Name Bugden R  
 Date of Enlistment 12.11.17 Address St John's District St John's  
 Occupation Butcher Classification for Discharge 6 Medical Category A I  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B 121	N.F. Med	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	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			

Date 9.6.19 for H. News H. O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

*OP Bugden*

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 \_\_\_\_\_

*Ch. Houston*

Date 10-6-19

O i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. \_\_\_\_\_ to his home at St Johns and Release Certificate No. 2582 issued.

Date 10-6-19 J.A. Snow 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 5-1-19

Date 10-6-19 J.A. Snow Capt  
Depot Paymaster.

Discharge approved for 15-6-19  
Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	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
B179c	B 120	M 93		

2 Form B

Date 10-6-19 J.A. Snow Capt  
O. C. Discharge Depot.

**APPROVED.**

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

with following additional documents.

**Eligible for War Service Gratuity**

Date JUN 15 1919 R.H. Sait Capt  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot  
Date June 17/19 Amelbath J/K  
Joseph C. Beesha



Reg. No. *4100* : Rank *Al* Name *bugden T.*

Attested ..... Address *21 Young St.*

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas *29.1.19.*

Returned on S.S. *Corisican* Cause *Discharge*

*10.6.19.*  
*15.6.19.*

PASSED TO DEMOBILIZATION OFFICER  
DISCHARGE APPROVED ON DEMOBILISATION.