

FIRST NEWFOUNDLAND REGIMENT

	Questions to be put to the Recruit before Enlistment.
	· San Balla
1.	What is your name?
. 2	What is your full Address?
3.	Are you a British Subject? 3
4.	What is your age? 4. Zo Years Months
5.	What is your Trade or Calling? 5 feaching .
	Are you Married? 6
	Have you ever served in any Branch of His Ma) jesty's Forces, naval or military, if so,* which? 7.
8.	Are you willing to be vaccinated or re-vac-} 8.
9.	Are you willing to be enlisted for General Ser-
10.	Did you receive a Notice, and do you under-stand its meaning, and who gave it to you?}
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?
/	10.5-11 Place Dulling SIGNATURE OF RECRUIT
/,	9.5-17 SIGNATURE OF RECRUIT
Dou	OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I do make oath, that I will be faithful and the country of the cou
Dou	OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I
all	Signature of Witness. OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I do make oath, that I will be faithful are true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in due in the desiry and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity again 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 question
all	OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. It will be faithful as in duind, honestly and faithfully defend His Majesty, His Heira and Successors, and that I will, as in duind, honestly and faithfully defend His Majesty, His Heira and Successors, in Person, Crown and Dignity again enemies, according to the conditions of my service. CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
all	Signature of Witness. OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I do make oath, that I will be faithful are rirue allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in due and, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity again 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 question would be liable to be punished as provided in the Army Act.
he as 1	CATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I
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he as i	OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. It rue allegiance to His Majesty King George the Flith, His Heirs and Successors, and that I will be faithful and ind, honestly and faithfully defend His Majesty, His Heirs and Successors, and that I will, as in during 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 question 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 described to, and the said recruit has made and signed the declaration and taken the oath before me at this. 191 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 red forms appear to have been complied with. I accordingly approve, and appoint him to the: 1 tenlisted by special authority, such will be attached to the original attestation.
all he as I on Quit	OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. It was a consider that I will be faithful and 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 question 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 described to, and the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at this day of the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has a said that it will be attached to the original attestation.

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ame and	Addr	INFORMA	TION SI	lio		Di	CRU	II o	ither.
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4	(a)	an and Surname of Woman t	o whom married at address. (d)	, and whether Initials of O	mcer verify	widow ying ent	. (b) P	lace and	date of marriage.
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	Chr	istian Names					Date	and Pla	ce of Birth
STATEMENT OF TH			OF THE	E SERVICES Service not allowed to reckon for fixing the rate of pension wards G. C. Pay. Signature of Officers of fying correctness of fying correctness of the reckon to-					
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1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	AMOUNT (each pers
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FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF
No. 747. Name Sasa Butter Corps (01.6.
Questions to be put to the Recruit before Enlistment.
1. What is your name? 1. Saac Butter
2. What is your full Address?
3. Are you a British Subject? 3.
4. What is your age? 4
5. What is your Trade or Calling? 5
6. Are you Married? 6
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? } 7.
8. Are you willing to be vaccinated or re-vac-
9. Are you willing to be enlisted for General Ser-
10. Did you receive a Notice, and do you under- stand its meaning, and who gave it to you?} 10
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?
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
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 day entered
as replied to and the said recruit has made and signed the declaration and taken the oath before me at the control on this
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quired 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
Place.
† 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.

DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet. Name. months. Apparent age ...vears. (Girth when fully expanded Chest Measurement Range of expansion. Distinctive marks. INFORMATION SUPPLIED BY RECRUIT Butter Name and Address of next of kin Relationship 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) (d) Particulars as to Children Christian Names Date and Place of Birth THE SERVICES Service in Re-Signature of Officers certi-fying correctness of entries Total Service forfeited as above...... years 60

Extract from Orders by Major G.T. Mathias, D.S.O. Goundg. 1st Batta. Royal Mild. Regt. 19-8-18 putplyman

The following draft joined the Battalion 2016-18 and is posted to A. Coy.

3747 L/Cpl. I. Butler.

Extract of Nominal Roll of Braft for Repatriation, let Bm. Royal RflA. Regt. which arrived at Hemeley Down Comp. 19/4/19, from B.E.F.

3747 A/Sgt. I.Butler.

Extract from Daily Orders part II, Unit the Royal NewfoundLand Regiment, dated 9-7-19.

#5747 Sergt. Isaac Butler.

S. 3747

Extract from Daily Orders Part 11 Unit The Royal Mild. Regt. June 18th, 1919

The disogarge of the undernoted on demobilisation has been APPROVED by 0.0. Discharge Depot with effect from 25-6-19.

3747 Sgt. Isaac Butler

Extract from Pailty Orders Part 11 Depot, St. John's, Date 116-19

Bablica facilità del grace del 12 como, st. comis,

3747 Sgt. Isasc Butler

Reported at Headquarters 1-6-19. which sailed Liverpool May 22/1919.

BE "Corsican"

C.R. 3747

Extract of DAILY ORDERS PART II ROYAL DESFOUNDLAND REGIMENT IN FRANCE DATED Feb. 16th 1919.

Confirmed to rank & Appointed A/Sgt. 29/1/19.

#3747 A/Cpl. I. Butler.

C.R. 3747

Extract of DAILY ORDERS, PART 11, Jan. 6th 1919. ROYAL NEWFOUNBLAND REGIMENT in France.

Appointed Acting Corporal, paid 7/12/18.

#3747 1/Cpl. J. Butler

Regiment, dated Sept. 10th., 1918.

REVERSIONS.

3747 A/Cpl. J. Butler.

Reverts to rank of L/Cpl. 19/8/18.

Extract of Moninel Holl-Royal Neld-Regt. Embarked "Southwapton" 9-3-18. Draft #50 Hazley Down Camp. Winchester, to 1st, Bn. R.Nfld.R. E.B.F.

3747 A/Spi.Butlet, I.

Extract of Telegram to Syndptical london dated May 22nd. 1918.

Pay as follows:

3747 Butler

Royal Nfld. Regt.....4 pounds.

Extract from Daily Orders part 11, ffdp by Lieut.Col.

R.A Berners, D.S.O., Commanding 2nd, Bn., Royal

Newfoundland Regiment, dated 25/2/18.

#3747 L/Cpl. Butler.

To be Acting Corporal.

Extrast from Beckmal Bell Emberted St. John's for Sversoom,

3747 Pte. J. Butler.

a Butter C.R. 3747 Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment

In cases of s	oldiers not discharged or transferred to	transfer to Class P., or P. (T), of the Reserve. the Reserve as above, but who are qualified by length of be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.
Medical Rep	ort on a Soldier Bo	arded Prior to Discharge or P., or P. (T), of the Reserve.
1. Unit and Corps	3. Rank Degyt (Christian Names) Mass 9/17 at St John	7. Former Trade or Occupation } School Such or Occupation } 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.D. J. J. C. J.
(b) Where		(d) Particulars of Pension or Gratuity (if any)
(c) Opinion of Con	ırt	
	particulars are to be filled in and A.F.B.	179 B (statement by the soldier) completed before the soldier
them he will take care to con in the invalid's military and disease. 10. If brought f	nfine himself exclusively to the medical a medical documents. He will also careful orward for invaliding, disability in re	Case. In answering spect of the case. In answering spect of the case and to such information as may be recorded by distinguish and clearly state when cases are due to venereal spect of which invaliding is proposed to be stated here. to question No. 19). If no disability enter "nil."
	•	0'0
11. Date of origin of dis-	ability.	· ne
12. Place of origin of dis	sability.	nie
the disability in so fa	essential facts of the history of ar as it is recorded in the Medical ring on the case and in other uments.	no

	14.	State whether the disabilities are	(a) attributable to	(b) aggravated by
		(i.) Service during the present war		·
		(ii.) Previous active service	1. A. a.	
		(iii.) Climate in pre-war service	1 na.	
		(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?	. na.	
In all cases such as facial mjuries, eye, car, 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.		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.)	No compo	cains of to
	16.	Was an operation performed? If so, when and what was its nature?	na.	
	17.	If not, was an operation advised and declined?	na.	
. Profes		*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 treat- ment was unobtainable?	recommend	L dentures
5300		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?	na.	
			•	-
	20.	Do you recommend—	1	
		(a) Discharge as permanently unfit?	#1.7	1
		(b) Change to United Kingdom?	Repair	accon
		Note—(b) is only applicable to soldiers invalided at Foreign Stations.	Procumier.	Calt Pana
	Sta	ation Hazeley & Camp	Medical Officer in	charge of case.
	Da			
		· Loss of teeth on or immediately after active service, shows due to some other cause	ald be attributed thereto, ur	nless there is evidence that

it is due to some other cause

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

- (ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.
- 21. Give diagnosis and particulars of:-
 - (a) Any disability claimed or discovered.

ability likely to last?

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

(b) The present condition thereof.

	The second secon		
22. State whether the disabilities	are:—	(a) Attributable to	(b) Aggravated by
(i) Service during the prese	ent war		
(ii.) Previous active service.			
(iii.) Climate in pre-war servi	ice		
(iv.) Ordinary military service	ce before the war		
(v.) Serious negligence or part of the soldier. Give details:		ne	
22 (a). If not due to any of specific condition do	these causes, to who the Board attribu	at +	
it̂?	• • •		
23. Is the disability in a final stat	ionary condition?	If .	And the second s
(a) How long is the	present degree of di	is-	

24. (a) What is the degree of disablement at which, in the Board s opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures). (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army? 25. If an operation was advised and declined, was the refusal unreasonable? If the Military 26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV, only? Opinion of Mili-tary Member in case of dishim in Grade IV. only? (b) In what other grade do the Board place him? (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)? inswered when he soldier is placed in other han Grade IV. 27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service? 28. Is treatment being recommended on Army Form B. 179c? 29. Does the soldier require :-(a) An attendant for his journey home? (b) Transport from railway station to his home? (c) The constant attendance of another person in his own home? Signatures :-President or Chairman. Vio cune Cap-Raine Date Discharge Approved under Para. 392 (xvi) King's Regulations. Only applicable Station in cases of Patients in Officer in charge, Central Hospital. Hospitals. OR Discharge Approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve. (insert sub-para, King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

O.C. Discharge Centre.

is to state

Nº 3562





HIST. NEWFOUNDLAND REGIMENT

Identity Certificate	Whether Wife, Child, other Kelative or Friend	NAME (in full)	Address	AMOUNT (each person
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			factory)	
	and the second		Total Allotment, \$	

14824/488/P&A 9948 Army Form C. 348. (3004) Wt. W6720/M2835. 10,000,0.0. 9/17. C. & Co. CHIEF PAYMASTER & OF THE CRIC TLEORUS. NEWFOUNDLAND CO MEMORANDUM From VICTORIA SIT. From Nos. OU LONDON, S.W. 1 OC 18 13 ENCLAUD. To Officer Commanding. 1/Bn.R.Newfoundland Regt., B. E. F. ANSWER. WF Pay & Record Office. Oct. 2/2 1018. 11th, Sept. 191 8 3747. Me 9 Bullers 3747, OPL. T. BUTLER. Reference attached werles with negard minutes: Kindly indicate your wishes hereon. to the money indicated as per allocked Ohief Paymaster & 0 1/c Recds. hate, segred by the Aco Pleas Attaleus 1st son layer ky

assist adj. Hease make money as PtRoffice sayable to bpt. a.m. wilson P. + R. Office Buile, 116.

CHIEF PAYMASTER & STEER LC. GECON No. 4768/205 TINGENT ASTREET. N. F. P. /80 NEWFOUNDLAND From: Chies Paymaster & U.i/c Records, To: Officer Commanding, Eve Newfoundland Contingent, 1/Bn. Royal Newloundland Regiment, 58, Wictoria Street. B.E.F. London, S.W. 1. 26th March 1919 1919 3747 A/Sgt Butler I. /sgl: Butter I With reference to the following telegram from the Minister of Militia, / / (98) "Pay to- 3747 Butler amount returned to £4. 0. 0. his account. Kindly advise whether this remittance should be (1) forwarded to you for payment to this Soldier: (2) retained to credit of his account: or (3) otherwise dealt with. Husedle Plas Chief Paymaster & O. i/c Records.

M. 7 18/4

12932/401

NEWFOUNDLAND CONTINGENT

Officer Commanding,

Chief Raymaster & U. i/c Records, Lewfoundland Contingent, 58, Victoria Street.

Royal Nfld. Regt.

London, S.W. 1.

B. E. F.

._____9th August 1918

Subject: 3747, A/Cpl. T. Butler

With reference to the following telegram (7081) from the non the Minister of Militia, received

pay to 3747 Butler £4:0:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier. retained to credit of his account, or otherwise dealt with.

Chief Paymester & U. i/c necords.

ALISWER

13/8 1918,000

not with the Battalu

attacky Capts Cod

In ve 10: R hold.

CHIEF PAYMACTE & OFFICER ICLINECTION. 13652 NEWFORTEDLAND LONDON. Chief Paymaster & O. 1/c. Records, Officer Commanding, R . Newfoundland Regt. Base Depot, Rouen. A/Cpl. Butler proceeded to join Reference 'reverse: This Soldier 1st.Bn. R.NFLD Regt. on 18th.inst. proceeded overseas 9/8/18. Is he with you, please? please. Chief Paymasterv& O i/c Records. Lt.Col. Commanding "D" Infantry Base Depot. London, S. W. 1, 27/8/18. A RECORD OFF

16421/516/P&REMINDER.

From Ch. Paymaster & O i/c Recds., Newfoundland Contingent, . 58, Victoria St, London, S.

To Officer Commanding,

1st. Bn Royal Nfld. Regt.,
FM/WF B. E. F.

11th, October 1811 191.8

The reply to this office memo.

No. 14624/468/P&A, 11/9/18, relating
to telegraphic remittance 3747, a/Cpl.

T. Butler

not having been received, you are requested to expedite the same, and to state on the reverse when it may be expected.

Major,

Ohief Paymaster & O i/c Recds.

CHIEF PAYMASTER & OFFICER UC TOTOENS. NEWFOUNDLAND CO:

Officer Commanding, 1/Bn.R.Newfoundland Regt.,

B. E. F.

Pay & Record Office, 11th, Sept. 8.

3747, CPL. T. BUTLER.

Reference attached minutes: Kindly indicate your wishes hereon.

Chief Paymaster & 0 1/c Recds.

Kemer S.

10424/516

CANADIAN PACIFIC-ALLAN LINES.

THE CANADIAN PACIFIC OCEAN SERVICES LTD.,
Managers and Agents.

To be surrendered when ombarking on

Steamship R.M.S	. Carrie an Date 25/5/ 1919
No. 3747 9	Rank Singt
Name Alth	a f
Res Unit	Orig. Unit of R. Tofls.
Sign here	1. Buster

This Card must be given up when going on board ship.

No. 8322/718

NEWFOUNDLAND CONTINGEN

N.F.P. /70.

From

Chief Paymaster & O. i/c Records, Newfoundland Contingent, 58, Victoria Street,

London, S.W. 1.

Subject:

27th May

1918

Subject: 3747, A/Opl. A. Butler,

With reference to the following tolegram (4698) from the Hon. Minister of Militia, received

Pay to 3747 Butler £4:0:0

Draft £ 4:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

Chief Paymaster & O. i/c Records.

Officer Commanding,

2/Bn Royal Nfld. Regt.

Winchester.

may . 21 2 1918.

Karu LIEUT. COLOUET.

OMMANDING OFFICE BOOM OF THE LATTER OF THE L

heceived the sum of Tompound

on account of

cable remattance from Newfoundland.

J.Butter

No 374) Rank 444

Last murchael an amount of £40-0 Was pard both wilson Och 4th from a server M 3947 Butler withouty hondrets. All b

Signature O.C Date of last entry in Company Conduct Sheet freedom from extra fine Company, étc. Cases of Drunken Date of Names of Witnesses Punishment awarded By whom awarded Remarks Place Offence offence (P.T.O. Buller, S.

3747

Hay Loeph

July 8,1919

#3747 Stegt. Isaso Butler,

Port Hexton T.B.

Dear Sir :-

Referring to your application I enclose chaque for seventy dollars (\$70.00), being amount of first payment due you on account of the war service Gratuity.

Yours truly

raymaster & Officer i/c Records.

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
3. Rank Jergeaut
6.Address in full to which fiture payments of gretuity are to be
forwardod. Port Resolon OB.
Mer ala
6. Date of enlistment in the Regiment. May 9/17.
7. Name of dependent, if any, to whom Separation A Lowance is being
issued, or was being issued, immediately prior to your discharge
hat applicable
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 mother soldier?
11. Were you on active service only in Nfld, II so, give dates and
particulars of such service. Ourseas
••••••
12. Give total length of time which you served on active service,
whether in 11fld.or Oversees. I wenty fine
Months and Figher dans

13. Have you had more than one enlistment? If so, give particulars
of discharge and re-onlistments, and under what regimental numbers.
not applicable
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
\$ 101. Sq. Clothuis C.
15. Have you been issued with a War Service Badge?
16. Have you, during the present war, served in the I perial Dorces. The
어전에 아르는 경에 휴대를 가게 되었다. 이 사용에 대한 경기 때문에 가장 하는 것이 되었다. 그 사용 이 사용 이 사용 이 사용 사용 사용 사용 사용 기계 등을 받았다. 그는 것은 사용 기계 등을 다 되었다.
17. Are you entitled to receive, or have you received my Gratuity
in the nature of Post Discharge Pay from the Imperial Forces? If
so, state amount received, or to which you are entitled

18. Did you revert Overseas to a rank lower than the substantive
renk held by you on your errivel in England?
(b) If so, was such reversion in consequence of Misconduct or
inefficiency?
19. Are you now serving in the Rost.?
of discharge
bemobilization
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
Lana Belguin and Ternaug
21.(a) Are you receiving treatment from the Wivil Ro-Establishment
Com.(b) If so are you in receipt of full pay and allowances from
that Cormittee
And I take 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.

	nture of Applicants
Place	of Residence:
Docla	red before me at:
This	day of June 19. 19 19
	Signature of Berrister of the
	Supreme Court, Stipendiary Magis-
	trate Notary Public Nastice of the Peace or Cornissioner of affidevits.

July 7, 1919

#3747 Sgt. Isaac Butler.

Port Rexton, T.B.

Dear Sir:-

Flease find enclosed Discharge Certificate Bo. 2734.

Yours truly

Captein, Paymaster & Officer i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3.74.7 Rank St. Name Butter See
2. Occupation Deachers Classification of soldier — Medical Category — — —
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 Comanding 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 destr. JOHN'S. Signature of soldier 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 Signature of soldier Signature of witness Signature of witness
STATEMENT OF SERVICE 7. Enlisted for service 7-5-17 No of days on Military Discharged from service 23-6-19 flu-14 days Service 790
APPROVAL OF DISCHARGE 8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer is Records The Royal Newfound Megadent, twenty-eight days from date. Place Officer Commanding Discharge Depot The Royal Newfoundland Regiment. Date
ONFIRMATION OF DISCHARGE 9. The discharge of above mentioned solder is hereby confirmed. How ley last Place Durio, 1988 Date
a 373 2079 / 2734

Report of Demobilization

The Royal Newfoundland Regiment

Class for Demobil-

ization:—	discha	
167		Garage :
Discharge Depot: Headquarters	The Royal Newfoundland Regiment	1
	Date	e: 1.9
Regimental No. 3747		
Name Buller	Joseph	
Address . Solt 12 wel	fore.	
A	1;	
I'resent Medical Category	··· / ······	
	(a) Immediate discharge	
Rec	commended for:— $\begin{cases} (a) \text{ Immediate discharge } \dots \\ (b) \text{ Standing Medical Board.} \end{cases}$	
	경우를 하는 것 않는데 하는 것이 없는데 없는데 보다면서 하는 것이 없는데 없었다면 하는데 살아가는 것이 없다.	ant Corfer
	(as confi
	O.C. Dischar	ge Depot.
	Lost.	ram
	Members of Board Senior Medic	
	Ducke	A
	arcour,	acc.
	M. O. E	repot .

The Royal Newfoundland Regiment

DEMOBILIZATION OF
Reg. No. 37 y Mank. Millergt Name Butlet Jagas
Date of Ephstman 9.5 17 Address Irently District Innity
Occupation Jecucher Classification for Discharge Eq Medical Category . H
Recommendation S.M.B. Disability Rating
Passed to Demobilization Officer with following documents:—
N.F. P 36. B 268. B 121. I N.F. Med. D.F. 1. I
B 178 W 3494 B 122 Board 1st " 2 " 2
B 178a
B 179 D 400B Form L do 3rd " 4 "
B 179a
B 179b B 103 ME 2 " 6 " 6
B 179c
· Hilling H
Date
PARTICULARS FOR DEMOBILIZATION
I. Civil Re-Establishment.
I amin a position to resume civilian occupation.
R Ho
Distriction of the second of t
Particulars passed to Vocational Officer for information and action.
Date
2. Clothing.
Certified that Clothing Regulations have been complied with:
41 02 0 0
(a) Clothing Allowance payable.
(b) Clothing Supplied
Date 4 6 - 19
DateO ilc. Re-clothing.

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrant No. 1.7.12.9.2 to his home
at
a-6-10 go inwelsel
Date
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 9-1-19 Depot Paymaster.
23-6-19
Discharge approved for
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36 B 268 B 121 N.F. Med D.F. 1
Б 178 W 3494 В 122 Board 1st " 2 Том
B 178a D 400A B 1915 do 2nd " 3
B 179
B 179b
В 179с В 120 М 93
9 / 19 How boff-
Date
APPROVED.
Documents as above forwarded to:—
Officer ilc Records. Board of Pension Commissioners.
with following additional documents.
www. Service Gratuly -
Figible for War Service Gratuity
JUN 23 1919 - 17. H. Jail Capl.
Date O. C. Discharge Depot.
C. G. Distribution
Received the above noted documents from O. C. Discharge Depot.

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Ø

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:

少.	V pesu	me ze	ormes 6	cropa	tion
			JB	ufler	
ga,	Snau	vlaff.	Reg. 1	sig vo. 374	nature of Ma
Signature	e of the Vocationa	l Officer or his Rep			
re JUN 9	1-90h 1919	191			

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

MEDICAL HISTORY

Surname Butter

Christian Name

Saac.

	Table I.—GENER	AL TABLE.			
Birthplace:-Parish /min	ity Bay	Count	У		
	SPECIAL RESI	ERVE.	REGULAR ARMY.		
	on 9 day of h	cay 1917	on day of	191	
Examined	at Meadqua	iters	nt		
Declared Age	20 years	// days	years	days	
Trade or Occupation	Teache	2			
Height	5 feet	7. inches	feet	inches	
Weight	/	27 lbs.		lbs.	
Chest Grith when fully expanded	. 3.	51/2 inches		inches	
Measure- ment Range of Expansion	3	3/2 inches		inches	
Physical Development					
(Arm	Right	Left	Right	Left	
Vaccination Marks Number	<u> </u>				
When Vaccinated					
Vision	R.EV= 6/9		R.E.—V==		
	L.EV=		T.E.—V==		
ſ	(a)	4.1	(a)		
(a) Marks indicating congenital peculi- arities or previous disease	(")				
arties of previous disease					
	(b)		(b)		
(b) Slight defects but not sufficient to Cause rejection					
Challe rejection					
Approved by (Signature)	Vannux Pate	yS my	A		
(Rank)	major				
	01 1-	Medical Officer.		Medical Officer	
Enlisted	at St.	ent	at		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	on day of Corps.	Part No	on day of	191	
Joined on Enlistment		Régtl. No.	Corps,	Regtl. No.	
	44/s n. 4. L.D.	3747			
Transferred to	and the			·	
A CALLED TO THE	•	Arron Arron	And the state of the	4 4 6 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	
Became non-effective by					
	on day of	191	on day of	191	
(Signature)					
(Rank)	V AND TO SEE			[P.T.O.	
		SPARKET STATES		[P.T.O.	

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.

WHEN THE TANK	
Date	Brief Details, and Signature
01	V 3 10
16-17	Vasc. Don. SP
1-5-17	1,413,20
6-17	40
0 10	3 0
-1-1	1 60
	Trial 1 Trials of the state of
	It is hereby cortified that this sole
	nas oren bif we a Translling Med
	has been by five a Travelling Medi Board, and has boar o miled
	for Dischargeon anyobile
	tion, Medical calcium, MI
·	tion. Medical category Man 1
	Date of T.lu.B.
	The state of the s

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
	•				
					1000
					10000
	Mercond Co.				
			. 1	•	
		. 19			

Name in full

Station



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 $I_{\rm C}$ 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.

Isaac Butter

above description and details are, to the best of my knowledge correct.

Regiment from which discharged Royal Newfoundland

Regimental number 3747
Intended address Rout Renton, 18.

Height on discharge 5 Feet 8
Color of hair on discharge . Black
Complexion & air
Color of eyes & lue
Descriptive Marks
Figure on discharge Meduum
Christian name of Father Willis
Christian name of Mother ann maria
Wife's maiden name in full
Date and place of marriage
Christian names of children
Place and date of soldier's birth Bt. Rexton, June 21, 1896.
Nature and locality of civil employment required
I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct (Soldier's signature in full)
(Rank), Aq.
Station ST. JOHN'S. Date 5-6-19
I certify that the above named soldier signed the foregoing declaration in my presence, and that the

Date

Medical Officer ic Hospital. Unit, or Command Depot.

The Koval Afild. Regiment DEMOBILIZATION

No.37	4 / Rank	
	a de	1
Name	Butter	V

Warned for demobilization on

JUN 8 1919

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), 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. (I), 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 P., or P. (T), of the Reserve. Former Trade 1. Unit and Corps or Occupation 7a. If the soldier claims previous service in Army, he should state-(a) Former Regts. or Corps; 4. Name with Regtl. Nos. (Christian Names) 5. Age last birthday. 6. Posted for duty on in category (or grade) 8. If the disability is an injury was it caused (b) on field service (a) in action (b) Date of Discharge: (d) off duty? (c) on duty (c) Cause of Discharge. 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. 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. Sui

		Crowd great	
		State whether the disabilities are	(a) attributable to (b) aggravated by
		(i.) Service during the present war	na ma
		(ii.) Previous active service	
		(iii.) Climate in pre-war service	
		(iv.) Ordinary military service before the war	na
44		(v.) Serious negligence or misconduct on the man's part.	na
	14	(a). If not due to any of these causes, to what specific condition do you attribute it?	o Parino Ano
In all cases such	15.	What is his present condition?	e confirming
as fecial injur- /es, eye, ear, nose and throat, disabilities, &c., a specialist's re- port is to be strached with radiographs where possible; and in cases of amputation the eract position		(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)	De Congraino Ano Aisabiliz
should be stated.			
	16.	Was an operation performed? If so, when and what , was its nature?	Na .
	17.	If not, was an operation advised and declined?	Mg.
	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 treat- ment was unobtainable?	Jecimis Dentures
. 100 cm	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?	Ma O
41.4			(\mathcal{N})
	•		Floh 1-1-1
			I Cepatriation
	20.	Do you recommend—	/
	1	(a) Discharge as permanently unfit?	
		(b) Change to United Kingdom? Note—(b) is only applicable to soldiers invalided at Foreign Stations.	nocumes. Call Para
		ation Hazely Many.	Medical Officer in charge of case.
	Da	ate///////	
	it	 Loss of teeth on or immediately after active service, show is due to some other cause. 	ald be attributed thereto, unless there is evidence that

OPINION OF THE MEDICAL BOARD.

NOTES.—(I) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

- (ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.
- 21. Give diagnosis and particulars of:-
 - (a) Any disability claimed or discovered.
 - (b) The present condition thereof.

•				
22. State whether the disabilities a	ге:—		(a) Attributable to	(b) Aggravated by
(i) Service during the presen	t war			
(ii.) Previous active service				
(iii.) Climate in pre-war servic	e			
(iv.) Ordinary military service	before the war			
(v.) Serious negligence or part of the soldier Give details:	misconduct on	the		······································
22 (a). If not due to any of the	nese causes, to w	hat		
specific condition do it?	the Board attrib	oute 		
23. Is the disability in a final station of	onary condition?	If		
(a) How long is the pability likely to la	resent degree of st?	dis-		
(b) If the present degree likely to last 12 n assessment at a rewith reasonable coperiod of 12 months.	nonths can a furt educed rate be m onfidence to cove	ade er a	n de seus de la company Seus de la company Seus de la company de la company	

reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures). (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army? 25. If an operation was advised and declined, was the refusal unreasonable? Opinion of Mili-tary Member in case of disthe Military 26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only? (b) In what other grade do the Board place him? (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)? Only to be answered when the soldier is 27. Do the Board find that the soldier has suffered any p'aced in other than Grade IV. impairment in health since his entry into the Service? 28. Is treatment being recommended on Army Form B. 179c? 29. Does the soldier require:-(a) An attendant for his journey home? (b) Transport from railway station to his home? (c) The constant attendance of another person in his own home? Signatures :-President or Chairman. Date . Discharge Approved under Para. 392 (xvi) King's Regulations. Only applicable in cases of Patients in Officer in charge, Central Hospital. Hospitals. OR Discharge Approved under Para. 392 () King's Regulations. of the Reserve. or Transfer Approved to Class (insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)). Station O.C. Discharge Centre.

No 3562



NEWF

Nō	3562			
	HIST. N	IEWFOUNDLAND	REGIMEN	TG
	0	ALLOTMENT	'S	
ı,`	Saac	Butter	, Regl.	No.3/4
hereby a	gree, until further	notification by me, and in similar	official form to make	an Allotment 6
to, and f	or the benefit of t	Dollars and the undermentioned Person and or Person	Cents, per die	
		duction of the relative Identity		
concerne	ed, viz.: Allotment begins	Clupers	1/17.	
Identity Certificate No.	Whether Wife, Child, other Relative or Friend	AME (in full)	Address	AMOUNT (each person)
2/3	mother.	A Commencial	Willia But	the (
			Tol Jexte	<u> </u>
			0	

Total Allotment, \$ 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.) Officer Commanding

Company

(Rank)

No....374.2... Name... Sattler.

To Certify that I have received the AB 64 of the above named soldier.

None of sage Butler

Place July 16th Reston

N.B. For completion and return to the Department of Militian Insert in corner of envelope "AB 64"

C.R. 374)

RECEIPT,

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches of Riband of British War Medal-1914-1919.

Place Post Rection, 7.3.

Army Form B. 103.			e tal N m	der 3 747
111 2/4/00	Casualty Form—Active S	2017年至18年2日 - 1845年 - 18454年 - 184544 - 184544 - 184544 - 18454 - 18454 - 18454 - 184		
	4. 在10.00 经产品的 19.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00	foundly	ad.	
Rank grame		tian Name .	e a a	¢
Religion C. Z.				months
	epos of Service (a) Nurs tien			
Date of promotion to present	Date of app		e rank .a.	a
Extended	Re-engaged	fication (b)	Data	
()	() or Co	rps Trade and		A
Occupation . Alacke.	<u> </u>	Carlota Same	a.f. sign	ature of Officer.
Report	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.215, Army Form A. 36, 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:36,
Date From whom received	The authority to be quoted in each case.		J. //	documents 1
	Embarked	9.8.1	0 14	LOHDON, S.W.
	Disembarked		1/4/	24 APR 1919
	ARRIVED D I. B	D. 13.8.1	8	Pa Report OFFICE
	Joined Battalion-	19.81	8	
2%5 ac B.	Reverte la Hope		19.8.18	Rais
2/9/10 Pg 7a	R. S. T. L.		21-9-18	80.7055
- 214/10 07/12	Dante.		26/0/18	BD 7311 28/
		13/1/2:	~0797 4	
21.12.8 06 linis.	apple alto Corporal	Jula.	141218	623 Fave 1/2
Confirmas to	1900	` x	Blen	1/2/15
- signas -	how to Eus for Der	1156 800	14/1/10	W8 42 810
- Am	The case of the ca	200	tain for	mst = A.
	Omis	r vo intentry	Section 1	No. 1
/ . In the case of a man who the re-enga	pro for or sulisted uto Section D. Appro Reserve, philosophi	Cor sich Se all Lane	chalanu	vill be entered.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms B 121.				Regiment of	1st hewfo	oundland.		Signature of O. C. Company	lask ayely
Regimental Number and Name			Enlistment Trade	Good Condust Redges Service pay or proficiency pay					
20117	Bitte			Age on 20 years // months	Teacher	appointed L	ans. C	orporal 22.10.	1.
Joined	Date	, væa	ac	Place and Date St John's	Religion	homoles a	/ent	ordi : of a	7
Joined	Date			Manual Control of the	Place Birth			7. 2. 7	
Joined	Date	Marine Street,		Period of with Colours 60 years. with Reserve 365 years.	Trace of Ditti				
Place	Date of Offence	Rank	Cases of Drunk- eness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
4									
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				(Semobile	ged of	1. John, 7 19			
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			1	BORE TO THE RESERVE OF THE PERSON OF THE PER		4		PRACTICAL CONTRACTOR	
									Army Form
									n B
					AND WAR				
				To be carried over					

The Royal Newfoundland Regiment &

DEMOBILIZATION OF						
Reg. No. 57 12 Pearle Mark Dutter Jagus						
Date of Entistinge 9 5 17 Address Irinity District Innity						
Occupation Legicles Classification for Discharge Medical Category. H. T						
Recommendation S.M.B						
Passed to Demobilization Officer with following documents:—						
N.F. P 36 B 268 B 121 N.F. Med D.F. 1						
B 178 W 3494 B 122 Board 1st " 2						
B 178a D 400A B 1915 do 2nd " 3 3						
B 179 D 400B Form L do 3rd " 4						
B 179a D 400C Form K do 4th " 5 " 5						
B 179b B 103 ME 2 " 6 " 6						
B 179c B 120 M 93						
Date. 7-6-19 Jn O. C. Discharge Depot.						
1						
PARTICULARS FOR DEMORYLIZATION						
PARTICULARS FOR DEMORILIZATION						
1						
PARTICULARS FOR DEMORILIZATION 1. Civil Re-Establishment.						
PARTICULARS FOR DEMORILIZATION 1. Civil Re-Establishment.						
r. Civil Re-Establishment. I amin a position to resume civilian occupation.						
PARTICULARS FOR DEMORILIZATION 1. Civil Re-Establishment.						
r. Civil Re-Establishment. I amin a position to resume civilian occupation.						
PARTICULARS FOR DEMORPLIZATION 1. Civil Re-Establishment. I amin a position to resume civilian occupation. Particulars passed to Vocational Officer for information and action. Date.						
PARTICULARS FOR DEMORYLIZATION 1. Civil Re-Establishment. I am						
PARTICULARS FOR DEMORPLIZATION 1. Civil Re-Establishment. I am						
PARTICULARS FOR DEMORPLIZATION r. Civil Re-Establishment. I am						
PARTICULARS FOR DEMORPLIZATION 1. Civil Re-Establishment. I am						
PARTICULARS FOR DEMORPLIZATION r. Civil Re-Establishment. I am						

3. Transportation and Release Certificate. The above named has been provided with Travelling Warrant No. 19.11.4.2 to his home
at
ON I TO THE Smart of the
Date Demobilization Officer
anad hit is
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
(1-1-19)
Date
93-6-19
Discharge approved for
Forwarded with following documents to O.C Discharge Depot.
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
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 " 6
В 179с В 120 М 93
9 / 10 ta full-
Date
Demobilization Officer.
APPROVED.
Documents as above forwarded to:—
Officer i c Records.
Board of Pension Commissioners.
with following additional documents.
Fligible for War Service Gratulty
RHATTIC
JUN 23 1919
O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
()
Date Janes4/19 fortecords

		147. Rank Marie Buffler Louise. Address Post Nexton Allottee	
Date o	of Allo	S.S. Returned from Overseas 29.5.	9-
21-6	19 19	PASSED TO LONG OF THE	
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