



# 4 THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5017 Name Herbert Chapman Corps Cof 8

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

- |  |                                     |
|--|-------------------------------------|
| 1. What is your name? .....  | 1. <u>Herbert Chapman</u> .....     |
| 2. What is your full Address? .....  | 2. <u>Fort Townsberg City</u> ..... |
| 3. Are you a British Subject? .....  | 3. <u>yes</u> .....                 |
| 4. What is your age? .....   | 4. <u>18</u> Years .....            |
| 5. What is your Trade or Calling? .....  | 5. <u>Letter Carrier</u> .....      |
| 6. Are you Married? .....  | 6. <u>no</u> .....                  |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>no</u> .....                  |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>yes</u> .....                 |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>yes</u> .....                 |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. Name .....                      |
|  | Corps .....                         |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>yes</u> .....                |

I, Herbert Chapman 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.

Herbert Chapman SIGNATURE OF RECRUIT.

13-5-18

J. Daymond Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Herbert Chapman 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 13 day of May 1918

Signature of Attesting Officer R. B. Dicks Lieut.

### †CERTIFICATE OF APPROVING OFFICER.

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

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

Date May 13 1918

Place St John's } Approving Officer.

\*The signature of the Approving Officer is to be affixed in the presence of the Recruit. † Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) ..... re-enlisted in the (Regiment) ..... on the (Date) .....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Herbert Chapman  
 Apparent age 18 years ..... months. Height 5 feet 2 1/2 inches  
 Chest Measurement { Girth when fully expanded 34 inches  
 Range of expansion 4 inches  
 Distinctive marks .....

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Chapman  
York Township City | 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 Re-serve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

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

W



# 4 THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5017 Name Herbert Chapman Corps Cof B

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

1. What is your name? ..... 1. Herbert Chapman
2. What is your full Address? ..... 2. Fort Townsend City
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years ..... Months
5. What is your Trade or Calling? ..... 5. Letter Carrier
6. Are you Married? ..... 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? ..... 7. No
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. Yes
9. Are you willing to be enlisted for General Service? ..... 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. Name ..... Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. Yes

I, Herbert Chapman 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.

Herbert Chapman SIGNATURE OF RECRUIT.

14-5-18

J. Raymond Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Herbert Chapman 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 13 day of May 1918

W. Dicks Signature of Attesting Officer Lieut

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the: .....  
 If enlisted by special authority, such will be attached to the original attestation.

Date May 13 1918  
 Place St John's } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
 ‡ Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) ..... re-enlisted in the (Regiment) ..... on the (Date) .....

# DESCRIPTIVE REPORT ON ENLISTMENT

5017

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

Name Herbert Chapman  
 Apparent age 18 years          months. Height 5 feet 2 1/2 inches  
 Chest Measurement { Girth when fully expanded 34 inches  
 Range of expansion 4 inches  
 Distinctive marks         

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Chapman  
York Townsend City | Relationship Father  
 Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.  
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

## Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>13-5-1918</u>									
Joined at <u>St. Louis</u> on <u>May 13-1918</u>									
<del>Discharged. St. Louis. Jan. 14/1919</del>									
Special duty Bay Lewis 14-9-18									
Returned to Headquarters 2-10-18.									
Granted leave without pay until recalled 1-12-18									
Demobilization <u>St. Louis 14/19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 14-1-1919 [date of discharge] X years 203 days  
 " " Pensions " " " " " " " " " " " "

C.R. 5017

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

confirmed  
Discharge on demobilisation

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

5017, Pte. Herbert Chapman

Discharged 14-1-19

C.R. 5017

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

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

5017 Pte. Herbert Chapman.

17-12-18.

C.R. 5017

Extract from Daily Orders Part 11 Unitt The Royal Nfld. Regt.,  
St. John's, Oct. 5th, 1918.

The following man returned from Special Duty at Dry Dock,  
2-10-18.

5017 Pte. G. Chaplin.

The

C.R. 5017

Extract from Daily Orders part 11 Depot, St. John's  
Dated September 16th 1898.

5017 Pte/ H. Chapman.

The above mentioned soldier proceeded on Special Duty  
to Reid Newfoundland Company's Dry Dock, 16-9-18.

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Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St John's, dated May 15, 1918.

#5017 Pte. Herbert Chapman

Attested for General Service with the Royal Nfld. Regt.  
from 14.5.18

Chapman, A

5017

Hay Dept.

January 14th., 1919

#5017 Pte. Herbert Chapman,  
Fort Townsend,  
City.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 473."

Yours faithfully,

Captain,  
Paymaster & O.i/c Records.

Enc'l 1.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. *5017* Rank *Pvt.* Name *Herbert Chapman*  
 Intended place of residence *Fort Townsend, City*  
 2. Occupation *Clerk*  
 Classification of soldier *A* Medical Category *A1*

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

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place *DEC 17 1918*  
 Date .....  
*W. H. L. Capt.*  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place and date *St John's* *17.12.18*  
*Herbert Chapman*  
 Signature of soldier  
*W. H. L. Capt.*  
 Signature of witness

## CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place and Date *St John's* *Dec 17th 1918*  
*Herbert Chapman*  
 Signature of soldier  
*W. H. L. Capt.*  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service *14. 5. 18* No of days on Military  
 Discharged from service *17. 12. 18 plus 28 days* Service *246 days*

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place *ST. JOHN'S*  
 Date *DEC 17 1918*  
*R. H. L. Capt.*  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place *St John's Nfld*  
 Date *January 14 1919*  
*W. H. L. Capt.*  
 Officer i/c Records  
 The Royal Newfoundland Regiment

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# The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5017 Rank Plt Name Chapman Herbert-  
 Date of Enlistment 14.5.18 Address St Johns District St Johns  
 Occupation Letter carrier Classification for Discharge A Medical Category AE  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

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

Date 17.12.18 O. C. Discharge Depot. St Johns

**PARTICULARS FOR DEMOBILIZATION**

**1. Civil Re-Establishment.**

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

*Herbert Chapman*

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

**2. Clothing.**

Certified that Clothing Regulations have been complied with:

(a) Clothing Allowance payable £ 60.00

(b) Clothing Supplied Joseph H. Snowling

Date 17-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *Wiel* to his home  
 at *St Johns* and Release Certificate No. *435* issued.

Date *17-12-18* *O. Dicks Capt.*  
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
 therewith settled. He has received pay and allowances to *14-1-19*

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

Discharge approved for *17.12.18*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	<i>Form B</i>
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	
B 179c	B 120	M 93			

Date *17.12.18* *O. Dicks Capt.*  
 Demobilization Officer.

APPROVED.

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

Date *DEC 17 1918*

*R. J. Last Capt.*  
 O. C. Discharge Depot.

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

Date *Dec. 19/1918*

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

# MEDICAL HISTORY

OF

Surname Chapman

Christian Name Herbert

Table I.—GENERAL TABLE.

Birthplace:—Parish St. Johns

County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	14	May		191
	at	St. Johns	at	
Declared Age	28	years		days
Trade or Occupation	Letter Carrier			
Height	5	feet 2 1/2 inches		
Weight		109 lbs.		
Chest Measurement	Girth when fully expanded	34 inches		
	Range of Expansion	4 inches		

Physical Development	Right	Left	Right	Left
	Vaccination Marks	/		
Arm				
	Number			

When Vaccinated				
Vision	R.E.—V=	6/30	R.E.—V=	
	L.E.—V=	6/6	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) Lammie Peterson  
 (Rank) \_\_\_\_\_ Medical Officer.

Enlisted	at	St. Johns	at	
	on	14 day of May	on	day of 191
		Corps.		Regtl. No.

Joined on Enlistment	<u>The Royal 2017</u>	
Transferred to	<u>Nfld Regt</u>	

Became non-effective by	on	day of	191	on	day of	191
(Signature)						
(Rank)						







*B*

## 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 *Herbert Chapman*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5017.*

Intended address *101 Townsend. 1 John's.*

Height on discharge          Feet

Color of hair on discharge *Dark*

Complexion *Dark*

Color of eyes *Grey.*

Descriptive Marks         

Figure on discharge *Thin*

Christian name of Father *William.*

Christian name of Mother *Julia*

Wife's maiden name in full         

Date and place of marriage         

Christian names of children         

Place and date of soldier's birth *1 John's. Sept 29<sup>th</sup> 1902.*

Nature and locality of civil employment required *Bank G.P.O.*

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)

*Herbert Chapman*

(Rank)

Station

*Prince Rupert*

Date

*Dec 17<sup>th</sup> 18*

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.

*W. A. [Signature]*  
 Medical Officer i|c Hospital,  
 Unit, or Command Depot.

Station

Date

# Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

*He works as clerk.*

*Herbert Chapman*

Signature of Man.

*Charles W. Kelly*

Signature of the Vocational Officer or his Representative.

Reg. No. *5017*

Place

*St John's n Y L D*

Date

*1-17/12/18*

191

## ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters May 14/181. Name Burlet Chapman Age (a) Declared 18 yrs  
(b) Apparent2. Do you know of anything wrong with you? noWhat severe illnesses have you had? none3. Height 5ft 2½ inWeight 109.4. Eyesight (a) Left 6/6(b) Right 6/30

5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs n

Measurement

(a) Expiration 30(b) Inspiration 347. Examination of Heart n8. Examination of Urine ✓

9. Examination of Mouth—(Defective Speech)

Teeth

Throat

Nose

Ears—(Otorrhea)

(Deafness)

10. Have you been successfully vaccinated, and when? no11. Name and address of next of kin Father William Fort Downsland City

REMARKS--

A IIwill likely put on  
weight very soon  
with training.Sturden  
A. B. G.

Medical Examiners.

LEAVE OF ABSENCE WITHOUT PAY

In consideration of having been granted leave of absence without pay from the Royal Newfoundland Regiment for I agree to free the Royal Newfoundland Regiment from any responsibility or claim whatsoever on my behalf arising during that period of absence without pay on account of my service in the Regiment since attestation.

This leave of absence is subject to my reporting for duty at any time when ordered within the period mentioned.

Date 30-11-18.

Signature of soldier Herbert Chapman

Witness R. Edward

.....

REPORT OF DEPOT MEDICAL OFFICER

Examination on No. 5017 Rank Pte Name Chapman H.

Held Princes Park at S. John's Nfld. 30-11-18.

This is to certify that the above mentioned soldier has been medically examined and that he suffers from no disability whatsoever on account of Military Service in the Royal Newfoundland Regiment.

W. Paterson  
Medical Officer, Depot.

✓ 4688 <sup>Stafford</sup> Ple to ~~Stackley~~ of St John's wants to begin  
work Monday morning at Raiter and Monahan  
West End.

✓ 4687 Ple of Beer. of St John's. Monday morning  
w/ J. B. Houston's patent.

✓ 5017. Ple of Chapman of Central Fire Hall. to work  
at G. P. O. Monday morning

Above are granted leave without pay  
till further orders.

R. H. Hart Cash

O. C. D. Reper

30/11/18.





THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Herbert Chapman, Regl. No. 5017

hereby agree, until further notification by me, and in similar official form to make an Allotment of  
   Dollars and Sixty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person  $\frac{\text{and}}{\text{or}}$  Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person  $\frac{\text{and}}{\text{or}}$  Persons  
 concerned, viz. :

Allotment begins August 8<sup>th</sup> 1918.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6637	wife	M <sup>rs</sup> Herbert (Gertrude) Chapman	Central Fire Hall. St Johns.	60
Total Allotment, \$				60.

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  
St Johns Company  
August 12<sup>th</sup> 1918

(Sig.) Herbert Chapman  
 (Rank) Private

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Number of Sheet 1

Regiment of Royal Newfoundland Signature of O. C. Company Chadwick Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>5017 Chapman Hebut</u>	Age on	<u>18</u> years <u>      </u> months	<u>Seller Carrier</u>			
Joined		Date	Religion				
Joined		Date	Place and Date of Enlistment	<u>St John</u>	<u>C.P.E.</u>		
Joined		Date	Period of	<u>14.5.14</u>	Place of Birth		
Joined	Date	with Colours	<u>24.5 years.</u>	<u>St John</u>			
Joined	Date	with Reserve	<u>36.5 years.</u>				

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

To be carried over

Army Form B. 121.



# The Royal Newfoundland Regiment

15017

## DEMOBILIZATION OF

Reg. No. 5017 Rank Plt Name Chapman Herbert  
 Date of Enlistment 14.5.18 Address St John's District St John's  
 Occupation Letter Carrier Classification for Discharge A Medical Category AE  
 Recommendation S.M.B. [Signature] Disability Rating [Signature]  
 Passed to Demobilization Officer with following documents:—

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

Date 17.12.18

Money Caps

for O.C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**i. Civil Re-Establishment.**

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

Herbert Chapman

Particulars passed to Vocational Officer for information and action.

Date .....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. £ 60.00

(b) Clothing Supplied Joseph A Snowling

Date 14-12-18

O i/c. Re-clothing.

DEC 13 1918

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. Neil to his home at St John's and Release Certificate No. 435 issued.

Date 17-12-18 W.D. Deeks A.Capt.  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 14-1-19

Date 17-12-18 W.D. Deeks A.Capt.  
Depot Paymaster.

Discharge approved for 17.12.18

Forwarded with following documents to O.C Discharge Depot.

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

Date 17.12.18 W.D. Deeks A.Capt.  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

Date DEC 17 1918 R.J. Last Capt.  
O. C. Discharge Depot.

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

Date Dec. 19/1918 W.D. Deeks A.Capt.

Reg. No. 5017 Rank Pte Name Chapman Herbert  
Attested 14-5-18 Address Fort Townsend (City)  
Allotment 60<sup>4</sup> Allottee Mrs Gertrude Wothe (Wife)  
Date of Allotment 8-8-18 Returned from Overseas  
Embarked for Overseas Cause

22-5-18 Vack. 1<sup>st</sup> Inc 6-7-18, 2<sup>nd</sup> Inc 15-7-18, 3<sup>rd</sup> Inc 14-9-18  
12-8-18 application for separation allowance  
sent to paymaster 13-8-18  
14-9-18 special duty pay back. Colld 2-10-18.  
G. Leard W.P. 12-8-18  
**PASSED TO DEMOBILIZATION OFFICER**  
17-12-18  
17-12-18  
**DISCHARGE APPROVED ON DEMOBILISATION.**