



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 27910 Name Wm. Johnston Corps Pres.

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

1. What is your name? ..... 1. Wm. Johnston
2. What is your full Address? ..... 2. St. John's
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. None
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, John A. [Signature] do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

[Signature] SIGNATURE OF RECRUIT.  
[Signature] Signature of Witness.

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

I, [Signature] do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at..... on this..... day of..... 1915  
Signature of Attesting Officer [Signature]

### †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..... 191.....  
Place..... Approving Officer. [Signature]

† 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 Thomas W. Donaldson  
 Apparent age 18 years \_\_\_\_\_ months. Height 5 feet 7 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
                                     { Range of expansion 2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John W. Donaldson, Parkside  
100 S. 7th St. | 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.	
(a)	(b)	(c)	(d)

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [ " " ] _____ " _____ "									



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4370 Name Mr. Clouston Corps Inf.

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

1. What is your name? ..... 1. Mr. Clouston
2. What is your full Address? ..... 2. Quebec West Road  
St. Johns
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. Clerk
6. Are you Married? ..... 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? ..... 7. no
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. yes
9. Are you willing to be enlisted for General Service? ..... 9. 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, Thomas Clouston 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.

Mr. Clouston SIGNATURE OF RECRUIT.  
J. W. Pittman Signature of Witness.

27-3-18

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

I, Thomas Clouston do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. Johns on this 27 day of March 1918.

Signature of Attesting Officer J. W. Pittman

### †CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....191.....  
Place.....

Signature of Approving Officer J. W. Pittman Approving Officer.

† The signature of the Approving Officer is to be signed 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 Thomas R. Clouston  
 Apparent age 18 years — months. Height 5 feet 7 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 5 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John W. Clouston, Lusitania  
Avon, S. 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 <u>27-5-1918</u>									<u>Lance Corp. 4-5-18</u> <u>Departure of Base 6-12-18</u>
Joined at <u>M. John's</u> on <u>March 27, 1918</u>									
<u>Discharged by order Jan 8, 1919</u>									
<u>Admitted Barracks Hospital 17-10-1918</u>									
<u>Discharged from Hospital 27-10-1918</u>									
<u>Demobilization 8-1-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 8-1-19 (date of discharge) 288 years 288 days  
 Pensions " " " " " " " "

6  
C.R. 4370

Extract of Daily Orders Part II, Depot, St. John's, dated  
Jan. 8th 1919.

Demobilization.

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

4370 Pte. Thos. Clouston.

Discharged 8-1-19

C.R. 4370

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.  
St. John's, Dec. 13th, 1918.

The undernoted man Discharges on Demobilization has been approved  
By O.C. Discharge Depot. He is removed from Depot Strength to  
Discharge Depot pending confirmation by Officer i/c Records.

4370 Pte. Thos. Clouston.

C.R. 4390

Extract from Daily Orders Part 11, UNIT: The Royal Wfld. Regt.,  
dated Dec. 7th. 1918.

PUNISHMENT.

4370 L/Corporal T. Cleusten

Attempting to break into Canteen while on Guard : Deprived of Lance -  
Stripe from 6/12/18.

C.R. 4370

EXTRACT FROM DAILY ORDERS PART 11 DEPOT  
ST. JOHN'S DATED OCTOBER 24th., 1918.

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#4370 Pte. T. Clouston.

2 HOSPITAL & FORFEITURES.

DISCHARGED FROM BARRACKS HOSPITAL 22/10/18.

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BC.



C.R. 4370

Extract from Daily Orders part 11, Depot St John's  
dated October 19th., 1918.

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4570 Pte/ T. Cloyston

ADMITTED BARRACKS HOSP. 17-10-18.

C.R. 4320

Extract from Daily Orders part 11, from U it The Royal  
Newfoundland Regiment, St. John's, dated May 6th, 1918.

#4370 Pte. T. Clouston.

To be Lance Corporal from 4/5/18.

C.R. 4370

Extract of Daily Orders part 11, f.o. Unit The Royal  
Newfoundland Regiment, St. John's, dated March 30, 1918.

*J. R.*  
#4370 Pte. Clouston.

Attested for General Service, with effect from 25/3/18.

Clouston, Thos

4370

Ray Sept.

January 8th., 1919.

#4370 Pte. Thomas Clouston,  
Quidi Vide Road,  
City.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 248."

Yours faithfully,

Captain,  
Paymaster & Officer i/c Records.

Enc' 1 1.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4370 Rank lt Name Thos Blouster  
 Intended place of residence Linds Vids Rd Uky  
 2. Occupation blank  
 Classification of soldier A Medical Category All  
 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 11 1918 Commanding Discharge Depot Atkins Cap  
 Date DEC 11 1918 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 Johns J R Blouster  
11 12 18 Signature of soldier  
P. S. Dicks ACP! 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 Johns J R Blouster  
10 12 - 18 Signature of soldier  
J. Helton Lt Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 27 3 18 No of days on Military  
 Discharged from service 10-12-18 plus 28 days Service 287

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place ST. JOHN'S R. H. Lait Capt  
 Date DEC 11 1918 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 M. Howley Capt  
 Date January 8 1919 Officer in Charge  
2079/248 The Royal Newfoundland Regiment

5  
20  
21  
20  
31  
31  
30  
31  
30  
31  
31  
8  
288

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4370 Rank Platoon Name Clouston - Tho.  
 Date of Enlistment 27.3.18 Address St John's District St John's  
 Occupation Platoon Classification for Discharge A Medical Category AII  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. P[36].....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
B 178a.....	D 400A.....	B 1915.....	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.....	" 6.....
B 179c.....	B 120.....	M 93.....		

Date 9.12.18

W. H. Cap...  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

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

Platoon Clouston  
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. ...

Date 10-12-18

O i/c. Re-clothing.

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. 422 to his home  
at St John's and Release Certificate No. 269 issued.

Date 10-12-18

O. B. Smith 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 8-1-19

Date 11-12-18

Stouley Capt.  
Depot Paymaster.

Discharge approved for 11. 12. 18

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	1 2 3 4 5 6 <u>Form K</u>
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 11. 12. 18

O. B. Smith Capt.  
Demobilization Officer.

**APPROVED.**

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Date DEC 11 1918

R. J. Smith Capt.  
O. C. Discharge Depot.

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

Date Dec 11 1918



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

## MEDICAL HISTORY

Surname Clouston OF Christian Name Thomas

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's County Newfoundland

### SPECIAL RESERVE.

### REGULAR ARMY.

Examined .....	on <u>27</u> day of <u>March</u> 191 <u>8</u>	on	day of	191
	at <u>St. John's</u>	at		
Declared Age .....	<u>18</u> years		years	days
Trade or Occupation .....				
Height .....	<u>5</u> feet	<u>7</u> inches	feet	inches
Weight .....		<u>125</u> lbs.		lbs.
Chest Measurement {	Girth when fully expanded.....	<u>35</u> inches		inches
	Range of Expansion..	<u>5</u> inches		inches
Physical Development.....				
Vaccination Marks {	Right	Left	Right	Left
	Arm .....			
Number .....				
When Vaccinated .....				
Vision .....	R.E.—V= <u>6/6</u>		R.E.—V=	
	L.E.—V= <u>6/6</u>		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Watson</u>			
(Rank)	<u>Major</u> Medical Officer.			
Enlisted .....	at <u>St. John's</u>	at		
	on <u>27</u> day of <u>March</u> 191 <u>8</u>	on	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment.....	<u>The Royal 14370</u> <u>Nfld. Regt.</u>			
Transferred to .....				
Became non-effective by .....	on	day of	191	on
(Signature)			day of	191
(Rank)				





## 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 **Thos. Clouston**

Regiment from which discharged *1st. Newfoundland*

Regimental number **4370**

Intended address **Quidi Vidi Road**

Height on discharge **5 Feet 7**

Color of hair on discharge **Light**

Complexion **Fair**

Color of eyes **Grey**

Descriptive Marks

Figure on discharge

Christian name of Father **John**

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth.

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)

Station

Date

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

Station



Date

DEC 11 1918

Medical Officer i/c Hospital,  
Unit, or Command Depot.



## 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 **Thos. Clouston**  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number **4370**  
 Intended address **Quidi Vidi Road**  
 Height on discharge **5 Feet 7**  
 Color of hair on discharge **Light**  
 Complexion **Fair**  
 Color of eyes **Grey**  
 Descriptive Marks  
 Figure on discharge  
 Christian name of Father **John**  
 Christian name of Mother  
 Wife's maiden name in full  
 Date and place of marriage  
 Christian names of children

Place and date of soldier's birth.

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)

Station

Date

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

Station



Medical Officer i/c Hospital,  
Unit, or Command Depot.

Date

DEC 11 1918

## Civil Re-establishment Committee.



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

*To work as Clerk.*

*J. P. Johnston*

Signature of Man.

*Andrew J. [unclear]*

Reg. No. 4370

Signature of the Vocational Officer or his Representative.

Place *St. John's*

Date *10/12/18*

191

*St John's*

# The Royal Newfoundland Regiment

Class for Demobilization:—

*A*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

NOV 29 1918

Date .....

Regimental No. *4370*.....

Name *C. Clouston Thomas*..... *R. G. P. E.*

Address *Boyer Road St John's*.....

Present Medical Category *A II*.....

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

Members of Board {  
*R. H. Lant Capt.*  
O.C. Discharge Depot.  
*L. Paterson*  
Senior Medical Officer  
*J. E. Burden*  
M. O. Depot



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

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

Examination of *Thomas R. Clouston*

aged *18* conducted at

Date: *March 27/18.* Recruiting Officer:

NO OF TEST FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no* - *no*
- 10 *n*
- 11 *n*
- 12 *n*
- 13 *n*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *b/lc tho th*
- 20 *n*
- 21 *n*
- 22 *n*
- 23 *n*
- 24 *n*
- 25 *n*
- 26 *n*
- 27 *n*
- 28 *n*
- 29 *n*
- 30 *n*
- 31 *n*
- 32 *n*
- 33 *no*

- 34 *5ft 4"*
- 35 *135 lbs.*
- 36 *30 - 35.*
- 37 *n*

38 *Father John W. Kuidi Vidi road St Johns*

39 *hobby*

*4370*

*Ji*

Signature of Medical Examiner: *Geo Burden*

## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121.  
39.Number of Sheet FirstRegiment of The Royal RiflesSignature of O. C. Company W. James Hunt

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>1270</u>	Age on	<u>18</u> years <u>0</u> months	<u>Clerk</u>	
Joined	<u>Head Clouston</u>	Place and Date of Enlistment	<u>St. Johns</u>	Religion	
Joined	Date	Period of	with Colours <u>2 1/2</u> years.	Place of Birth	
Joined	Date				
Joined	Date				

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>Quince Rank Co.</u>	<u>23-11-18</u>	<u>Capt.</u>		<u>neglect of duty.</u>	<u>Adj. Maloney</u>	<u>Reprimanded</u>	<u>26-11-18</u>	<u>Capt. R. H. Fairme. J.</u>	
	<u>4-12-18</u>	<u>Capt.</u>		<u>attempting to break into canteen, while on guard duty</u>	<u>Documentary</u>	<u>Deprived of lance stripes</u>	<u>6-12-18</u>	<u>Capt. R. H. Fairme. J.</u>	
<u>Demobilized at St. Johns, 8/19</u>									

To be carried over

Army Form B. 121.



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4370 Rank Pte Name Clauston - Thos.  
 Date of Enlistment 27.3.18 Address St John's District St John's  
 Occupation Clerk Classification for Discharge A Medical Category ATI  
 Recommendation S.M.B. ATI Disability Rating 21-51-11  
 Passed to Demobilization Officer with following documents:—

N.F. P38	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.
B 179c	B 120	M 93		

Date 9.12.18 Walter Cape O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### r. Civil Re-Establishment.

I am Pte J Clauston in a position to resume civilian occupation.

Refer to Vocational Officer for information and action.

Conditions have been complied with:—

payable \$60.00

Joseph A. Brown

0 i/c. Re-clothing.

DEC 11 1918

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. Nil to his home at St John's and Release Certificate No. 269 issued.

Date 10-12-18

W. B. 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 8-1-19

Date 11-12-18

W. B. Dicks Capt  
Depot Paymaster.

Discharge approved for 11. 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 ✓
F 178	W 3494	B 122	✓ 2	Board 1st	" 2	✓ 1	
R 178a	D 400A	B 1915	✓ 1	do 2nd	" 3	✓ 1	
B 179	D 400B	Form L		do 3rd	" 4		
B 179a	D 400C	Form M	✓ 1	do 4th	" 5		
B 179b	B 103	M 93			" 6		
B 179c	B 120						

Date 11. 12. 18

W. B. Dicks Capt  
Demobilization Officer.

APPROVED.

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

Date DEC 11 1918

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

Date Dec-13/1918

W. B. Dicks Capt  
Demobilization Officer.