



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4574 Name James J. ... Corps ...

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------------------|
| 1. What is your name? | 1. |
| 2. What is your full Address? | 2. |
| 3. Are you a British Subject? | 3. |
| 4. What is your age? | 4. Years Months |
| 5. What is your Trade or Calling? | 5. |
| 6. Are you Married? | 6. |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. |
| 9. Are you willing to be enlisted for General Service? | 9. |
| 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? | II. |

I,, 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 OF RECRUIT.
..... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I,, 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..... 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 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.

† 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 James G. G.
Apparent age 15 years 7 months. Height 5 feet 7 inches
Chest Measurement { Girth when fully expanded 33.5 inches
Range of expansion 2.5 inches
Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Wm. G. G. 1015 - 10th St. N. W. Wash. D. C. | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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

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



FIRST NEWFOUNDLAND REGIMENT

4250

ATTESTATION OF

No. H7250 Name Samuel Cole Corps R.C.

Questions to be put to the Recruit before Enlistment

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Samuel Cole</u> |
| 2. What is your full Address? | 2. <u>B. W. Island C. B.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Carpenter</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> |

FOR THE DURATION OF THE WAR

I, Samuel Cole 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.

H. 18-12-17 Samuel Cole SIGNATURE OF RECRUIT.
Robert Cole Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Samuel Cole 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 18th day of Dec 1917.

Signature of Attesting Officer Robert Cole

†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 Dec 18th 1917 } Approving Officer.
Place St. John's

† 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).....

To Report: Jan'y 3/18

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Samuel Cota
 Apparent age 18 years 2 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 35 1/2 inches
 Range of expansion 3-2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Cota
Bill Grant C. Ray. | 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 18-12-17
 Joined at St John's on December 18-17
Discharged July 2/19
Embarked St John's S.I. Hospital to Halifax N.S. 29-1-18. Embarked for 1362 2-7-18. Disembarked Inverness 3-7-18. Attached 7 Coan Gen Hosp to Captain Macmillan's 3-7-18. Sent to base depot 10-7-18. Rejoined unit 12-7-18. Admitted Hosp. 12-10-18. Admitted 36 Co S. December 16/18. Sent to Detach Camp. Inverness 15-11-18. Rejoined 150th 5-1-19. Admitted 1st Hosp. Home 2-3-19. Rejoined unit Highly comm. Vancouver 1-5-19. Inverness Island for demobilization 22-5-19. Arrived H.Q. 1-6-19. Demobilization St John's 2-7-19
 Total Service forfeited as above _____

Total Service towards Engagement to 2-7-19 [date of discharge] 1 years 197 days
 " " Pensions " " " " " " " " " " " "

C.R. 4250

Extract from War Office List No. H. A. 31105.

ADMITTED 2 AUST. GEN. H. BOULOGNE 29 OCT. 1918.

#4250 Pte. S. Cole.

DIARRHOEA MILD.

C.R. 4250

Extract from Daily Orders part II, Unit the Royal Nfld.
Regiment dated 5-7-19.

The discharge of the underoed on demobilization has been
CONFIRMED by O. C. Discharge Depot on noted date.

#4250 Pte. Saml. Cole.

2-7-19.

C.R. 4250

Extract from Daily Orders Part II Unit The Royal WMA.

Regt. St. John's, June 20th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by C.O. Discharge Depot with effect from 17-6-19

4250 Pte. S.Cole.

C.R. 4250

Extract from Daily Orders Part 11 Depot. St. John's,

Date June 18th 1919.

4250, Pte. S. Cole.

Reported at Headquarters 1/6/19.

NZ "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4250

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



INFANTRY RECORD OFFICE - WARWICK.

LIST NO. H.A. 36116.

96936 L/C. Owen, C.	1/Glouce."C" Co	VDS.....	Dis. to Camp Adj. Bruyeres Camp ex 1 Sty.H. 26 Apr. 19.
238079 Pte. Hammett W.	2/4 O & B.L.I.	Oedema Leg L Mild.....	Adm. 2 Sty.H. Abbeville 27 Apr. 19.
47758 Pte. Smith H.	2/4 -do-	Tonsillitis Mild.....	Adm. 2 Sty.H. Abbeville 27 Apr. 19.
37685 Pte. Wells, A.H.	2/5 Glouc. Rgt.	Influenza Mild.....	Adm. 2 Sty.H. Abbeville 27 Apr. 19.
33087 Sjt. Reeve F.J.	2/4 O & E.L.I.	Chr. PUO. Mild.....	Adm. 2 Sty.H. Abbeville 27 Apr. 19.
54112 Pte. Jackson, H.	2/4 R. Berk. R.	Scabies.....	Dis. to Unit ex 2 Sty.H. Abbeville 27 Apr. 19.
43577 Pte. Thompson, K.S.	2/4 O & B.L.I.	Scabies.....	Dis. to Unit ex 2 Sty.H. Abbeville 27 Apr. 19.
47074 " Sartain, F.J.	2/4 -do-	-do-	Dis. to Unit ex 2 Sty.H. Abbeville 27 Apr. 19.
21098 Pte. Forrester W.	6/ Dorsets att 2/4 O & B.	-do-	Dis. to Unit ex 2 Sty.H. Abbeville 27 Apr. 19.
42570 Pte. Tickle, J.	2/6 R. War. R.	Scabies.....	Dis. to ex 1 Nat. Lab. H. Dieppe 26 Apr. 19.

NO. 1 RECORD OFFICE - PRESTON.

LIST NO. H.A. 36116.

H 28 B

9747 Pte. Knight, D.	9/Manch. Rgt.	VDS.....	Dis. to Camp Adj. Bruyeres Camp ex 1 Sty.H. 26 Apr. 19.
36273 Pte. Callaghan, W.H.	7/Bord. Rgt.	Influenza.....	Dis. to Unit ex 2 Sty.H. Abbeville 25 Apr. 19.
46368 L/C. Cook, F.	19/Lanc. Fus.	Scabies.....	Dis. to Base Dep. ex 2 Sty.H. Abbeville 25 Apr. 19.
202310 Pte. Hodgkinson, R.	11/E. Lanc.	Scabies Mild.....	Adm. 2 Sty.H. Abbeville 26 Apr. 19.
51363 " Bamber, W.	11/ -do-	-do-	Adm. 2 Sty.H. Abbeville 26 Apr. 19.
235984 Pte. Boyle, J.	11/E. Lanc.	VD Mild.....	Adm. 2 Sty.H. Abbeville 27 Apr. 19.
37781 Pte. Clarke, S.	11/ -do-	Gleet Mild.....	Adm. 2 Sty.H. Abbeville 27 Apr. 19.
53744 Pte. Whitford, H.	11/ -do-	Scabies Mild.....	Adm. 2 Sty.H. Abbeville 27 Apr. 19.
57586 Pte. Sharples, T.	1/ -do- att. 95 PO7 Cp.	Scabies.....	Dis. to Unit ex 2 Sty.H. Abbeville 27 Apr. 19.
67868 Pte. Pepper, J.N.	23/Lanc. Fus. att. 167/Pt. Co.	VDG Mild.....	Adm. 10 Sty.H. Remy Siding 25 Apr. 19.

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST NO. H.A. 36116.

4250 Pte. Cole, S.	1/R. Nfld. Rgt.	VDS.....	? Adm. 1 Sty.H. Rouen 26 Apr. 19.
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C.R. 4250

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

ROYAL ARMY MEDICAL CORPS.

LIST NO. H.A. 35278.



291A

- 175619 Pte. Beaumont W. RAMC. 12/13 Sty. Hos. Epilepsy.....O.C. 1 Sty.H. Rouen reports Dangerously Ill. No change. 2nd March '19.
- 22277 Sjt. Armstrong G.W. 2/13 Sty.H. RAMC. Lumbago.Mld....Adm. 2 Sty.H. Abbeville, 2nd March '19.
- 24771 Pte. Smith P.J. RAMC. 12 Sty.H. Pyrexia UD.....Dis. to Duty ex 12 Sty.H. St-Pol, 1 March '19.
- 40325 Pte. Livingstone A. RAMC. 76 Fld.A. 43 CCS. Dysentery Mld..Adm. 25 Sty.H. Rouen, 2nd March '19.
- 62272 Pte. Wooldrige E.J. RAMC. 54 Fld.A. Measles.Mld....Adm. 25 Sty.H. Rouen, 2 March '19.

DIS. TO DUTY EX 46 STY.H. STAPLES, 1 MARCH '19.

- 135830 Pte. Ellison G. RAMC. 46 Staty. Hpl. Staff. Tonsillitis.
- 73216 Pte. Hunter W.H. RAMC. 46th Sty. Hospl. Staff. Laryngitis.
- 545596 L/C. Westley F.W. RAMC. 27th San.Sectn. Obs. Influenza.Mld...Adm. 46 Sty.H. Staples, 2nd March '19.
- 23548 Pte. Jones E. RAMC. No. 1 Ambo Trn.Staff. -do-Adm. 46 Sty.H. Staples, 2nd March '19.
- 536091 Pte. Kiddell F. RAMC. 46 Stat. Hpl. Staff. Mumps..... Dis. to Duty ex 46 Sty.H. Staples, 2nd March '19.

CAVALRY - YORK.

LIST NO. H.A. 35278.

- 441752 Pte. Slade A. 14/Hussars. 221/ B-Coy. Mumps, Mild.....Adm. 25 Sty.H. Rouen, 2nd March '19.
- 71710 Pte. Gallepie W. N.I.Horse. VDSC.....Adm. 1 St. H. Rouen 2 March 19.

NEWFOUNDLAND CONTINGENT.

LIST NO. H.A. 35278.

- 4250 Pte. Cole S. 1/R.Newfound. VDSc.....Adm. 1 Sty.H. Rouen, 2nd March '19.

C.R. 4250

Extract from Casualties of sick and wounded N.C.O's and men
of the Expeditionary Force - France, dated Nov. 30th 1918.
List. No. H.A. 52195.

m 4250 Pte. S. Cole.

Diarrhoea..... Dis to Terlinctum Dile. Camp Boulonge on 10
Gen. Dep. Result 15th Nov'18.

C. 4250

Extract from Casualties List No. H.A. 51900.

4250 Pte. S. Cpl.

Am. 10 Gen. Dep. Escult 88h Nov'18. 1/Mfld.R.

Diarrhoea.

C.R. 4250

EXTRACT FROM TELEGRAM FROM SYNOPTICAL DATED NOV. 9th., 1918.

MILE END MILITARY HOSPITAL LONDON I. U. T. LEFT TOE 4250
JACKMAN STOP.

C.R. 4258

Extract from War Office List No. H.A. 31431.

ADMITTED 7 CON. DEP. H. BOULOGNE 6 NOV. 1918.

4250 Pte. S. Cole

DIARRHOEA SLT.



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

C.R. 4250

NEWFOUNDLAND BRANCH RECORD OFFICE - PERTH

No. H.A. 26228.

6/20736 Pte. McMillan R. 1/5 A. & S.H. Malaria. Adm. New Zealand Sty. H. Wisques 11 July '18.

63rd (ROYAL NAVAL) DIVISION

No. H.A. 26228.

R/6198 A. B. Gilbert F.	63 RND. Hood. Btn. A.	Scabies.	Adm. 2	Can. Gen. H. Le. Treport	10 July '18.
LZ2833 " Westbrook	do. att. MGC.	Impetigo	Adm. 2	Can. Gen. H. Le. Treport	10 July '18.
55043 Pte. Evans W.	do. Hood. att.	"	Adm. 2	Can. Gen. H. Le. Treport	10 July '18.
	Sig. Sch.				

1492

ARMY SERVICE CORPS

No. H.A. 26228.

091813 Dvr. Swan J.	ASC. HT. 21 Dv. Tr. 1 Co.	Scabies.	Adm. 2	Can. Gen. H. Le. Treport	10 July '18.
M2/103926 Pte. Woolner G.	" MT. 21 " MT. Co. Cont. Face Knee Hands.	Acc.	Adm. 2	Can. Gen. H. Le. Treport	10 July '18.
M2/050557 " Mellor G.	" 10 Motor. Air.	P. U. O.	Dis. to. Base. Dep. Staples ex. 7	Can. Gen. H. 10 July '18.	
	Line Secn.				

GUERNSEY BRANCH RECORD OFFICE

No. H.A. 26228.

945 Pte. Brehaut E. J.	1 RGLI. att. GHQ. 1st. P. U. O.	Dis. to. Base Dep. Staples ex. 7	Can. Gen. H. 10 July '18.
	Echelon.		
400 " LePage C. E.	1 G. L. I. Pleurisy.	Dis. to. Base Dep. Staples ex. 7	Can. Gen. H. 10 July '18.

NEWFOUNDLAND EXPEDITIONARY FORCE

No. H.A. 26228.

4250 Pte. Cole S. 1 R. Newf. Rgt. Haematemesis. Dis. to. Base Dep. Staples ex. 7 Can. Gen. H. 10 July '18.

W
C.R. 4250

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

No. TWO RECORD OFFICE S H R E W S B U R Y

No. H. A. 25921



Adm 7 Can Gen H Staples 1 July.18.

242885 Pte Barrett T.....5 Res.Cheshires, A.Grp....N.Y.D.Mild.

Adm 7 Can Gen H Staples 3 July.18.

72566 Pte Angliens L.....	3 Garr.Bn.RWF. A.....	Influenza.Mild.
76879 Pte Bradley W.	RWF.Garr.Bn.	Influenza.Mild.
76885 Pte Brooks W.G.	3 Garr.Bn.RWF. A.	do.
72601 Pte Chesterman W.H.	3 do. B.	Influenza.Mild.
72319 " Claypole A.....	3 do. B.....	do.
72784 " Coulson T.S.....	3 do. A.....	do.
72671 " Croft J.	3 do. B.	do.
39781 " Darbyshire G.	2 RWF. D.	do.
10661 Pte Davis J.	3 Cheshires B.	do.
72685 Pte Dutton C.....	3 Garr.Bn.RWF. A.....	do.
10408 Pte Flood A.....	3 Cheshires. B.....	do.
72676 Pte Glynn R.	3 Garr.Bn.RWF. B.	do.
292204 Pte Hibbett G.W.	4 Monmouths.att.3.Garr. Bn.RWF.	do.
71220 " Jemmett J.	3 Garr.Bn.RWF. A.	do.
78872 " Jones L.N.....	3 do. A.....	do.
76708 Pte Keen W.....	3 do. A.....	do.
72696 Pte McLintock J.	3 R.W.F. A.	do.

1463

N E W F O U N D L A N D EXPEDITIONARY FORCE

No. H. A. 25921

Adm 7 Can Gen H Staples 3 July.18.

4250 Pte Cole S.....1 Roy.Newfoundland. D...Haematemesis Mild.

C. 4250

Extra et from Nominal Roll to B. E. F. embarked
Folkestone 2-7-18

#4250 Pte. S. Cole.

G.R. 4250

Extract from Hospital Bill Draft "F" Category Submitted
U.S. Hospital, Jan. 29th, 1918.

4250 Pte. Cole S.

C.R.

4250

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. St. John's, Dec. 19th, 1917.

4250 Pte. S. Cole.

Attested for General Service with the 1st Wfld. Regt.
to take effect from 13-12-17.

S. Cole.

4250

P. & P. Co.

BRITISH
MANUFACTURE

POST CARD

May 5



Mansion House and Cheapside, London.
On the left of the picture is the Mansion House,
the official residence of the Lord Mayor of London.
The church spire in distance is of Bow Church,
celebrated for its chime of bells. Cheapside is
noted as being one of the oldest shopping places
in the city of London.

Valentine's Series

The Address to be written
here

3419

MAY 1914
Jag Master n. 7. 20
Pay & Record office
58 Victoria Street
London S.W
W

Please Sit when
my money comes
from home would
you kindly send
it to Mr Bat
Winchester 4250 S. Cole

899924

No. 6814/1113.

N.F.P. 176

From: NEWFOUNDLAND CONTINGENT

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

To: ~~Officer Commanding,~~
~~1st Bn Royal Newfoundland Regiment.~~
~~Wanchester.~~

9th May 1919

May 18th 1919. &

4250 Pte Cole S.

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / 19 (176):

J. M. Morrison
Officer Commdg. 1st Batt'n.

"Pay to- 4250 Cole
£8:0:0:

Cheque £8:0:0: is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of Eight pounds (£8.00) in respect of telegraphic remittance from the Minister of Militia.

J. H. M. ...
Chief Paymaster & O. i/c Records

S. Cole
No. 4250 Rank Pte
Witness: b. Green

FORM K

Nº 4624



4 1ST. NEWFOUNDLAND REGIMENT,

ALLOTMENTS

I, S. Cole, Regl. No. 4250

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

Allotment begins Feb. 1. 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3703	Father	S. Cole	Bell Island	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.) W. H. King
Officer Commanding
H Company
St. John's
Jan'y 26 1918.

(S) Samuel Cole
(Rank) Pte.

FORM K

Nº 4624



4 1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, S. Cole, Regl. No. 4250

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

Allotment begins Feb. 1/18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3703	Father	James Cole	Bell Island	60
Total Allotment, \$			60	

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.) W. H. K.
 Officer Commanding
H Company
St. John's
Jan'y. 26 1918

(S) Samuel Cole
 (Rank) Pte.

Medical Report on an Invalid.

Station Hayesley A. Camp
 Date 2 5 19

1. Unit Royal Newfld
 2. Regimental No. 4200
 3. Rank Pte
 4. Name Cole. A.
 5. Age last birthday 21.
 6. Enlisted { on 18 11 17
 at St John

7. Former Trade } Miner
 or Occupation }
 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
 10. Place of origin of disability. nil
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 (b) constitutional or hereditary, and not aggravated by service during the present war.
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

} na

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

The complainant of his disability

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

na

17. If not, was an operation advised and declined?

na

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Repatriation

W. E. Proctor

Capt Ramo

Major

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *H A Camp*

Officer in charge of Hospital.

Date *2 5 19*

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

† Delete this word if no exceptions are to be made.

TO, - The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir;-
Please charge the amounts set opposite my name to my account and
pay it to the N.W.S.A. "Prisoners of War Fund" in quarterly instalments
for the period of one year,
Commencing on 1st July 1918.

Regtl. No.	Rank,	Name	Amount	Signature.
4250	PL	Coles. P.	£2 50	

I have the honour to be, Sir,
~~for the Committee,~~
Your obedient servant.

P. Cole

Date 28-6-18

Cole, S

4250

Ray Sept.

July 2., 1919

#4250 Pte. Samuel Cole,

Bell Island.

Dear Sir:-

Please find enclosed discharge
Certificate No. 2580.

Yours truly

Captain,
Paymaster & O.i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4250 Rank Pte Name Bole S
 Intended place of residence Beel Isld
 2. Occupation Engineer
 Classification of soldier 2 Medical Category M

3. The above named man is discharged in consequence of
DEMobilIZATION
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place, ST. JOHN'S
 Date JUN 17 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place, ST. JOHN'S
 Date JUN 17 1919
 Signature of soldier J. Bole
 Signature of witness Am. L. ...

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, ST. JOHN'S
 Date JUN 17 1919
 Signature of soldier J. Bole
 Signature of witness W. Frealey Qms

STATEMENT OF SERVICE

7. Enlisted for service 18-12-17 No. of days on Military Service 561
 Discharged from service 17-6-19 Plus 14 days

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place, ST. JOHN'S
 Date JUN 17 1919
 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
 Date July 11/1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

a 7029/2500

The Royal Newfoundland Regiment

Class for Demobilization:

76

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

16.6.19

Regimental No *4250*

Name

Cole S.

Rank

Address

Bell Island

Present Medical Category

A1

Recommended for:—

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

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

L. Peterson
Senior Medical Officer

Geo. Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No 4250 Rank Plt Name Robt P. Cole
 Date of Enlistment 18.12.17 Address Billings District St. John's
 Occupation Engineer Classification for Discharge 6 Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 1736	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 16.6.19 _____
 _____ O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Robt P. Cole
 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~~

Date 17-6-19 _____ O i/c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 37735774 to his home at Bell Field and Release Certificate No. 2878 issued.

Date 17-6-19

J.H. [Signature]
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 17-6-19

Date 17-6-19

J.H. [Signature]
Depot Paymaster.

Discharge approved for 17-6-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

Date 17-6-19

A.M. [Signature]
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 17 1919

R.H. [Signature]
O. C. Discharge Depot.

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

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:

To resume former Occupation.

S. Cole

Signature of Man.

J. D. Newcomb

Signature of the Vocational Officer or his Representative.

Reg. No. 4250

Place ST. JOHN'S.

Date 17-6-19 191

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

MEDICAL HISTORY

OF

Surname

Colly

Christian Name

Samuel

Table I.—GENERAL TABLE.

Birthplace:—Parish

Bell Island

County

Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	18 th day of <i>Dec</i>	<i>St. John's</i>		
Declared Age	19 years	<i>2 Months</i>		
Trade or Occupation	<i>Engineer</i>			
Height	5 feet	7 inches		
Weight		133 lbs.		
Chest Measurement	Girth when fully expanded	35 1/2 inches		
	Range of Expansion	3 1/2 inches		
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arms			
When Vaccinated				
Vision	R.E.—V=	<i>15</i>	R.E.—V=	
	L.E.—V=	<i>5</i>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Samuel Paterson</i>			
(Rank)	<i>Major</i>			
		Medical Officer.		Medical Officer.
Enlisted	at	<i>St. John's</i>	at	
	on	18 th day of <i>Dec</i>	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<i>1st Nfld Regt 4250</i>			
Became non-effective by	on	day of 191	on	day of 191
[Signature]				
[Rank]				

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.

Date	Brief Details, and Signature
31-12-17	Vacc. <i>HP</i>
12-1-18	T.M.B. <i>HP</i>
18-1-18	do <i>HP</i>
26. 1. 18.	Do. <i>HP</i>

It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as 8 for Discharge on Demobilisation. Medical category HP
16. 6. 19
Date of T.M.B.

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

Medical Report on an Invalid.

Station Hazelley, D. Camp
 Date 7 5 19

1. Unit Royal Newfld
 2. Regimental No. 4250
 3. Rank Pte
 4. Name Cole S.
 5. Age last birthday 21
 6. Enlisted { on 18. 11. 17
 at St John

7. Former Trade or Occupation } Miner
 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
 10. Place of origin of disability. nil
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 (b) constitutional or hereditary, and not aggravated by service during the present war.
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

} n.d.

13. What is his present condition?

No complains of no disability.

Weight should be given in all cases when it is likely to afford evidences of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

na.

17. If not, was an operation advised and declined?

na.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na.

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Repatriation

W.E. Proctor *Capt. Rams*
Major

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *H D Camp*

Date *2 5 19*

Officer in charge of Hospital.

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

† Delete this word if no exceptions are to be made.



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 *Samuel Cole*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4250*

Intended address *Beth Island,*

Height on discharge *5* Feet *8*

Color of hair on discharge *Black.*

Complexion *Fair*

Color of eyes *Blue.*

Descriptive Marks —

Figure on discharge *Medium*

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 *Colliers, 25th Sept. 1899*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full)

Station

St John's

Date

16-6-19

(Rank)

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



The Royal Nfld. Regiment

DEMOBILIZATION

No. 4250 Rank _____

Name Coburn S.

Warned for demobilization on

JUN 17 1957



NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 12 Sent by Bell Ltd Rec'd by 8/8 Check 1/8 No. _____

Place from _____

To Mr. Militia



Please cable 4250 pte
Samuel Cole Eight
pounds call Money
Order office for
amount John Cole. J.C.

June 11, 1919

Mr. J. Cole,
HELL ISLAND.

Dear Sir:

With reference to your telegram of May 8th. I beg to advise you that I have cabled \$8 to No. 4250, Samuel Cole.

Yours truly,

Lieut.
For Paymaster

July 3, 1919

#4250 Pte. Samuel Cole,

Bell Is and, C.B.

Dear Sir:-

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

Yours truly

Captain,
Paymaster & U.I.C. Records.

537

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 *Samuel* 2. Surname *Bole*

3. Rank *Pte* 4. Regt. No. *4250*

5. Address in full to which future payments of gratuity are to be forwarded. *Bell Island, C. B.*

6. Date of enlistment in the Regiment. *Dec 18/17*

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

8. Relationship of such dependents.

9. Address in full of such dependents.

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?

11. Were you on active service only in Nfld. If so, give dates and particulars of such service. *Overseas.*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *From Dec 18/17 to June 17/19.*

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

..... *No!*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

..... *No*

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

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

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled..... *No*

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

(b) If so, was such reversion in consequence of misconduct or inefficiency?..... *No*

19. Are you now serving in the Res?..... If not give? - (a) date of discharge..... *No* Reason for discharge.....

..... *Temporary, Demobilization*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service....

France, Belgium + Germany - from July 18 to April 1919 - 4 years

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee..... *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Samuel Cole

Signature of Applicant:

Place of Residence:

Declared before me at:

This

17th

day of

*Belle Island, C. B.
St. John's, Nfld.
June 19, 1911*

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

John M. Cahill

POST DISCHARGE PAY.			War Service Gratuity.	Net amount due
Date paid	Paid Soldier.	Paid Dependent.		
.....
.....
Certified correct.			Paymaster

Tamp Hall

Regional No..... MEDICAL HISTORY of— A.F. B.178
 Regimental No. *4250* Region..... *R.C.*
 Surname..... *Cole* Christian Names..... *Samuel*

TABLE I.—General Table

Birthplace { Parish *Colliers Bay - N.F.W.I.*
 County

Examined { on day of 191
 at

Declared Age *49* years days.

Trade or Occupation *Miner.*

Height feet inches. Weight lbs.

Colour of Hair Complexion

„ Eyes

Chest Measurement { Girth when fully expanded inches.
 Range of expansion inches.

Physical Development

Vaccination Marks { Arm, RIGHT | LEFT
 Number |

When Vaccinated

Vision { R.E.—V = With Glasses { R.
 L.E.—V = L.

Identification Marks, such as Tattoo, Moles, Scars, etc :—

Defects or Ailments :—

Examined and found—
Fit for Grade { I.
 II.
 III.
 IV.

(Strike out those which do not apply.)
 Signature _____
 Chairman of Medical Board.

Re-examined for posting at _____
 On day of 191.
 Enlisted { at *St John's*
 on *18* day of *Oct* 1917.

Joined on enlistment	Corps	Regtl. No.
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date	Brief details and Signature

Special Remarks: state if a discharged Soldier

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

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

2527

ST. JOHN'S, June 17 /19

Royal Newfoundland Regiment.

Billeting Account,

To W. S. Cole

Billeting Soldiers as undermentioned

from June 2nd /19 to June 16th /19

4250 - W. S. Cole

14 40

ACCOUNT	<u>B. M. E.</u>
CH. NO.	<u>33813</u>
INITIALS	<u>W</u>
IND. LEDGER	INITIALS
PAY LEDGER	<u>70</u>
INITIALS	
GEN LEDGER	INITIALS

Certified correct for

W. S. Cole

Billeting Officer:

Casualty Form - Active Service.

Regiment or Corps *Royal Newfoundland*
 Rank *Pte* Surname *Cole* Christian Name *Samuel*
 Religion *R.C.* Age on Enlistment *19* years *2* months
 Enlisted (a) *18.12.17* Terms of Service (a) *duration* Service reckons from (a) *18.12.17*
 Date of promotion to present rank Date of appointment to lance rank
 Extended Re-engaged Qualification (b)
 or Corps Trade and rate
 Occupation *Engineer* Signature of Officer *W. J. ...*

Date	Report	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, 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, or other official documents.
		AI 28-6-18	Embarked .. Disembarked ..	2 JUL 1918 5 JUL 1918	
14.7.18	7 Gen G 1100	Adm. D. Haematensis hills	Steffs	3/7/18	1425921
15.7.18	do.	dis to there	do.	10.7.18	1426218
18.7.18	06. unit	Joined ex-hospital	Field	12.7.18	14213
	36 Cals	to "Dianhosa"	Fues	26/10/18	EA 2607
	2 Aus. push		Boulogne	29/10/18	1423105
	D F CD	Arrived	Rouen	19/11/18	1423105
	do	D 2 M.P.S.	"	3/12/18	Recd.
	do	Arrived	"	5/12/18	"
		Joined Batt.			
	104. Hop	Adm. M.S.		2/1/19	143528

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.
 W 8625-312731 20/000 9/17 (35011) C. P. & S., Ltd., Form B.103 5/1907. P.T.O.
 NEXT OF KIN *John Cole. Bee Island. C. Bay Nfld.*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, 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, or other official documents.
Date	From whom received				
	<i>6/c. Rees to M R. for release. London.</i>			<i>1-5-19.</i>	<i>Memo.</i>
<i>28-4-19.</i>			<i>Major</i> Captain for O. i/c. M.I. Sub Section Record Office, British Troops in France & Flanders.		
	<i>Am</i>				

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland

Number of Sheet One

Signature of O. C. Company W. H. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>606 B</u>	Age on	<u>19</u> years <u>7</u> months	<u>Engineer</u>	
Joined	Date	Place and Date of Enlistment	<u>St. John's</u> <u>18-12-17</u>	Religion	
Joined	Date			<u>R.C.</u>	
Joined	Date	Period of	with Colours <u>197</u> years. with Reserve <u>365</u> years.	Place of Birth	
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>Demobilized St. John's, 2 2/9</u>					

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4250 Rank Plt Name Cole S
 Date of Enlistment 18.12.17 Address Bill Lake District St John's
 Occupation Engineer Classification for Discharge 6 Medical Category AI
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 16.6.19 for O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

[Signature: S. Cole]

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 [Signature]

Date 17-6-19 O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 57733774 to his home at 1304 17th St and Release Certificate No. 121870 issued.

Date

17-6-19

J.A. Newell
Demobilization Officer

4. Pay and Allowances.

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

Date

11-6-19

J.H. [unclear]
Depot Paymaster.

Discharge approved for

17-6-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P[36]	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date

17-6-19

Al [unclear]
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

JUN 17 1919

Eligible for War Service Gratuity

Date

R.H. [unclear]

O. C. Discharge Depot.

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

Date

June 26/19

[Signature]
Records

Reg. No. *4450* Rank *He* Name *W. L.*

Attested Address *Bell Island.*

Allotment Allottee

Date of Allotment Returned from Overseas *1.6.49*

Returned on S.S. *Conrad* Cause *Discharge*

16-6-49

PASSED TO DEMOBILIZATION OFFICER

17-6-49

DISCHARGE APPROVED ON DEMOBILISATION.