



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5057 Name Archibald Collins Corps C/6

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

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

I, Archibald Collins 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.

Archibald Collins SIGNATURE OF RECRUIT.  
J.R. Raymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Archibald Collins 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 and as replied to, and the said recruit has made and signed the declaration and taken the oath before me at Burgeo on this 15 day of May 1915 & Geo. Sharty, Mag. 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 compiled with. I accordingly approve, and appoint him to the.....

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

Date May 15 1915 } Approving Officer.  
Place Burgeo }

† 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 Archibald Collier  
 Apparent age 18 years      months. Height 5 feet 4 1/2 inches  
 Chest Measurement { Girth when fully expanded 36 1/2 inches  
                           Range of expansion 4 1/2 inches  
 Distinctive marks     

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Jermiah Collier  
Burgio | Relationship Sister

### 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									1
Joined at <u>    </u> on <u>    </u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>    </u> (date of discharge) <u>    </u> years <u>    </u> days									
" " Pension " <u>    </u> " " " " " " " " " " " "									



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5057 Name Archibald Collin Corps CofC

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

1. What is your name? ..... 1. Archibald Collin
2. What is your full Address? ..... 2. Burges
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 4 18 Years ..... Months
5. What is your Trade or Calling? ..... 5. Yachtman
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, Archibald Collin ..... 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.  
J. R. Raymond ..... Signature of Witness.

15/5/18  
 I, Archibald Collin ..... 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 15 day of May ..... 1918  
 Signature of Attesting Officer Geo. Liberty

### 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 15 ..... 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

2057

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

Name Archibald Collier  
 Apparent age 18 years 18 months. Height 5 feet 4 1/2 inches  
 Chest Measurement { Girth when fully expanded 36 1/2 inches  
 Range of expansion 4 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Jermias Collier  
Burgoes | Relationship Son  
 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 this engagement reckons from <u>15-5-18</u>									
Joined at <u>St Johns</u> on <u>Nov 15-1918</u>									
<u>Discharged Jan 21<sup>st</sup> 1919</u>									
<u>Special Duty Home defence St Johnsville Nov 29-18.</u>									
<u>Returns to Headquarters 22-11-1918</u>									
<u>Recommissioned St Johns 21-1-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 21-1-1919 (date of discharge) 252 years 252 days  
 Pension \_\_\_\_\_

C.R.

5057

Extract from Daily Orders part II, Report of Lt. J. G. G. dated  
January 22nd., 1919.

The discharge of the unaccommodated on disability have  
been continued by Officer A/c according to 22-3-19.

5057 Pte. Albert Collier.

C.R. 5057

Extract from Daily Orders part II, Depot St. John's dated Dec. 26/12  
1918.

The undernoted discharge on demobilization have been approved by Officer [redacted] commanding discharge depot from noted date. He is removed from Depot strength and transferred to discharge depot pending confirmation by Officer i/o Records.

24-12-18.

#5057 Pte. Arch Collier.

C.R. 5057

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland  
Regiment, dated Nov. 23rd. 1918.

SPECIAL DUTY.

5057 Pte. A. Collier.

Returned from SPECIAL DUTY at Stephenville 22/11/18.



C.R. 5057

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's, 3-9-18

5057 Pte. A. Callier.

Proceeded to Stephenville Crossing on Special Duty

3-9-18.

Extract from Daily Orders part 11, from Unit The Royal Wfld.  
Regiment, St. John's, dated May 16th, 1918.

#5057 Pte. A. Collier.

Attested for General Service with the Royal Wfld. Regt.  
Date 15/5/19

Collier, Archibald

5057

Ray Sept

January 21st, 1919

#5057 Pte. Archibald Collier,

Burgeo.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 620 "

Yours faithfully,

Captain  
Paymaster & Officer i/c Records

Enc 1 l.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. *5957* Rank *Po.* Name *Archibald Collier*  
 Intended place of residence *Burgis*
2. Occupation *fisherman*  
 Classification of soldier *A.* Medical Category *A.ii*
3. The above named man is discharged in consequence of *Disembodiment*
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 **DEC 20 1918** *W. H. C. L.*  
 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* *Archibald Collier*  
*Dec 21<sup>st</sup> 1918* Signature of soldier  
 Signature of witness *Cap*

## 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 *10. 13. 15* *Archibald Collier*  
*St John's* Signature of Soldier  
 Signature of witness *W. H. C. L.*

## STATEMENT OF SERVICE

7. Enlisted for service *15. 5. 18.* No of days on Military  
 Discharged from service *24. 12. 18. plus 28 days* Service *352 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.** *R. H. Sait Capt*  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.
- Date **DEC. 24. 1918.**

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed *W. H. C. L.*  
 Place *St John's* Officer i/c Records  
 Date *January 21, 1919* The Royal Newfoundland Regiment

*ad B 2079/620*

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5057 Rank R16 Name Gollier - Archibald  
 Date of Enlistment 15.5.18 Address Burgos District Burgos  
 Occupation Fisherman Classification for Discharge A Medical Category AD  
 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.
B 179c	B 120	M 93.		

Date 28.11.18

W. C. Discharge Depot  
for W. C. Discharge Depot

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Archibald Gollier

Particulars passed to Vocational Officer for information and action.

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$65.00  
 (b) Clothing Supplied Joseph H. Snowling

Date 20-12-18

O i/c. Re-clothing.

3. **Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. 393 R to his home

*for [unclear]*

and Release Certificate No. 55446 issued.

Date 20-12-18

*O.B. Dicks Cpl.*  
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 21-1-19

Date 20-12-18

*W. S. [unclear] Capt.*  
Depot Paymaster.

Discharge approved for 24. 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
F 178	W 3494	B 122		Board 1st	" 2	1
F 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			" 6	
B 179c	B 120	M 93				

Date 23 12 18

*O.B. Dicks Cpl.*  
Demobilization Officer.

**APPROVED.**

Documents as above forwarded to—

Officer in Records.  
Board of Pension Commissioners.

with following additional documents.

Date DEC 24 1918

*R.H. [unclear] Capt.*  
O. C. Discharge Depot.

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

Date Dec. 30/1918

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

## MEDICAL HISTORY

Surname Collins OF Archibald  
Christian Name

Table I.—GENERAL TABLE.

Birthplace:—Parish <u>Burgess</u> County <u>Nfld</u>		SPECIAL RESERVE		REGULAR ARMY	
Examined	on <u>15</u> day of <u>May</u> 191 <u>8</u>	on	day of	191	
	at <u>S. Johns</u>	at			
Declared Age	<u>18</u> years	days	years	days	
Trade or Occupation	<u>Fisherman</u>				
Height	<u>5</u> feet <u>4 1/2</u> inches	feet	inches		
Weight	<u>124</u> lbs.	lbs.			
Chest Measurement	Girth when fully expanded	<u>36 1/2</u> inches	inches		
	Range of Expansion	<u>4 1/2</u> inches	inches		
Physical Development					
Vaccination Marks	Right	Left	Right	Left	
	<u>/</u>	<u>Wear</u>			
When Vaccinated	<u>8 30-2-20</u>				
Vision	R. E.—V= <u>66</u>	R. E.—V= <u>66</u>			
	L. E.—V= <u>46</u>	L. E.—V= <u>46</u>			
(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>Lemuel Peterson</u>				
(Rank)	<u>Major</u>		Medical Officer.		Medical Officer.
Enlisted	at <u>S. Johns</u>	at			
	on <u>15</u> day of <u>May</u> 191 <u>8</u>	on	day of	191	
	Corps	Regtl. No.	Corps	Regtl. No.	
Joined on Enlistment	<u>Returned Nov 7</u>				
Transferred to	<u>Nfld Regt</u>				
Became non-effective by	on	day of	191	on	day of
(Signature)					
(Rank)					





## 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 sailor*

*Archibald Collier*

Signature of Man.

*Asdrick Capt.*

Reg. No. *5057*

Signature of the Vocational Officer or his Representative.

Place *St. John's*

Date *10/12/18*

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## 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 *Archibald Collier*  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number *5057*  
 Intended address *Buycos*

Height on discharge  Feet  
 Color of hair on discharge *dark*  
 Complexion *dark*  
 Color of eyes *grey*  
 Descriptive Marks *Scar on hand*  
 Figure on discharge *Tan*  
 Christian name of Father *John Beccard*  
 Christian name of Mother *Jemima*  
 Wife's maiden name in full *Watt*  
 Date and place of marriage   
 Christian names of children

Place and date of soldier's birth. *Buycos 26 July 1900*  
 Nature and locality of civil employment required *Tailor*

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) *Archibald Collier*

(Rank) *BC*

Station *Pines Point* Date *26 July 1918*

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.



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

Station

Date

No. 6444



# THE ROYAL NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, Archibald Bellis, Regl. No. 5057

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

Allotment begins August 1st 1914

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
6444	Mother	Mrs. James Bellis	Burling West Coast		60
				Total Allotment, \$ <u>60</u>	

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

(Sig.) \_\_\_\_\_  
 \_\_\_\_\_  
 Officer Commanding  
 \_\_\_\_\_  
 Company  
 \_\_\_\_\_  
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(Sig.) Archibald Bellis  
 \_\_\_\_\_  
 (Rank) Private

# 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

 Date NOV 27 1918

 Regimental No. 5057

 Name Lester Archibald

 Address Burgess

 Present Medical Category A.ii

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

Members of Board {

R.H. Lait Capt.  
 Q.C. Discharge Depot.

L. Peterson  
 Senior Medical Officer

Geo. Burden  
 M. O. Depot

This Form is to be used in connection with Pamph. M. E. (1)  
N. F. 1914

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 *Archibald L. Collier*

aged *18 years* conducted at *Burges*

Date: *April 25<sup>th</sup> 1918* Recruiting Officer: *Joseph Small S. M. C.*

NO. OF TEST

FINDING

- 1 *No*
- 2 *No*
- 3 *No*
- 4 *No*
- 5 *No*
- 6 *No*
- 7 *Yes*
- 8 *Yes*
- 9 *No*
- 10 *not colour blind*
- 11 *No impediment in speech*
- 12 *No varicose veins legs feet in good order*
- 13 *Teeth good*
- 14 *Tonsils & throat in good order*
- 15 *No ear trouble of any kind*
- 16 *Chest normal*
- 17 *Heart and lungs in good condition*
- 18
- 19 *Vision good*
- 20 *No deformities or stiffness of fingers hands or*
- 21 *Shoulder joints in good order*
- 22
- 23 *Ankles & feet strong & in good condition*
- 24 *No impairment of hip joint*
- 25 *Feet and toes in good condition*
- 26 *No hemorrhoids or fistula*
- 27 *Hearing good*
- 28 *No physical weakness or deformity*
- 29
- 30
- 31 *Not ruptured*
- 32 *No Varicella*
- 33 *Yes*
- 34 *5ft-5 inches*
- 35 *130 lbs*
- 36 *33 in - expansion 3 1/2*
- 37 *2350 cc*
- 38 *Mrs Jennina Collier Burges, Nfld*
- 39 *Help to support mother & sister*

Signature of Medical Examiner: *E. M. Donald M. D.*

## ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at

Sto Quintus May 15/18

1. Name Archibald Collins Age (a) Declared 18  
(b) Apparent

2. Do you know of anything wrong with you? no

What severe illnesses have you had? none.

3. Height 5ft 4 1/2 in Weight 124

4. Eyesight (a) Left 6/6 (b) Right 6/6

5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs

Measurement

(a) Expiration 32

(b) Inspiration 36 1/2

7. Examination of Heart

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

Teeth

Throat

Nose

Ears—(Otorrhea)

(Deafness)

10. Have you been successfully vaccinated, and when? Yes 8 yrs ago (Scar 1/2 in)

11. Name and address of next of kin Mother James M. Burgeo

REMARKS--

A 11

Sto Quintus  
Archibald Collins

No. 6444



# THE ROYAL NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, Archibald Bellis, Regl. No. 5057  
 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 <sup>and</sup> or Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> or Persons  
 concerned, viz.:

Allotment begins August 1<sup>st</sup> 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6444	Mother	Mrs. Gemina Bellis	Burgess West Coast	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. L. Somerville)  
Capt.  
 Officer Commanding  
 Company

(Sig.) Archibald Bellis

(Rank) Private

St. John's 74th  
July 6<sup>th</sup> 1918





November 16th. 1921

Mr. Arch. Collier,

Burgeo.

Dear Sir:-

The enclosed cheque for \$12.60, representing the amount of your allotment from January 1st to January 21st. 1919, was mailed to Mrs Jemima Collier, on February 7th. 1919, but was returned undelivered. It has been overlooked in this office for a considerable time.

I have now made it payable to you. Please cash it at your earliest convenience.

Yours truly,

Major  
Paymaster

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B-121  
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Number of Sheet one

Regiment of Royal Newfound Land

Signature of O. C. Company Edwards Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>5857 Collier Arch</u>	Age on	18 years	months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment	<u>St John's</u>		Religion	
Joined	Date		<u>15.5.14</u>		<u>C.W.</u>	
Joined	Date	Period of	with Colours <u>252</u> years.		Place of Birth	
Joined	Date		with Reserve <u>365</u> years.			<u>Bungo.</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 April 21 1919</u>					

To be carried over

Army Form B. 121.

# The Royal Newfoundland Regiment

9507

## DEMobilIZATION OF

Reg. No. 5057 Rank Plt Name Gollier - Archibald  
 Date of Enlistment 15.5.18 Address Burgis District Burgis  
 Occupation Labourer Classification for Discharge A Medical Category AD  
 Recommendation S.M.B. [Signature] Disability Rating [Signature]  
 Passed to Demobilization Officer with following documents:—

N.F. P/38	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 28.11.18

[Signature]  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

**1. Civil Re-Establishment.**

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

Archibald Gollier

Particulars passed to Vocational Officer for information and action.

Date.....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$65.00

(b) ~~Clothing~~ Supplied Joseph H. Lawford

Date 20-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 393 R to his home  
W. S. [unclear] and Release Certificate No. 50446 issued.

Date 20-12-18 C. B. [unclear] 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 21-1-19

Date 20-12-18 W. S. [unclear]  
 Depot Paymaster.

Discharge approved for 24 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	21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000
F 178	W 3494	B 122		Board 1st	" 2	
F 178a	D 400A	B 1915	12	do 2nd	" 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	1		" 6	
B 179c	B 120	M 93	1			

Date 23 12 18 C. B. [unclear] Capt.  
 Demobilization Officer.

APPROVED.

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

Date DEC 24 1918 R. H. [unclear] Capt.  
 O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.  
W. S. [unclear] Capt.  
 Date Dec 30/1918 exp [unclear]

Reg. No. 5057 Rank Pte Name Walker Archibald  
 Attested 15-5-18 Address Burgess  
 Allotment 60 Allotee Mrs Gemina Collie (Mother)  
 Date of Allotment 1-8-18 Returned from Overseas \_\_\_\_\_  
 Embarked for Overseas \_\_\_\_\_ Cause \_\_\_\_\_

16-5-18 Recd, 1<sup>st</sup> Dec 20 1/8, 2<sup>nd</sup> Dec 6-7-18, 3<sup>rd</sup> Dec 15-7-8  
 3-9-18. Special Duty Stephenville King, 6th 55 1/8  
 Moved to Demobilization Office

24-12-18. DISCHARGE APPROVED ON DEMOBILISATION.