

THE ROYAL NEWFOUNDLAND REGIMENT

No. 5725 Name Lenge Ollio Corps SA.
Questions to be put to the Recruit before Enlistment.
I. What is your name? I. Heage Ollio
2. What is your full Address?
3. Are you a British Subject?
4. What is your age?
5. What is your Trade or Calling? 5.
6. Are you Married? 6 6.
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?
8. Are you willing to be vaccinated or re-vac- 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?
11. Are you willing to serve upon the conditions as emb died in the roll of service to be 11
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.
bear true allegies to His largesty King George the Fifth, His Heirs and Successors, and that I will be faithful and bound, honesty any 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 bettered.
as replied to, and the said recruits has made and signed the reclaration and taken the oath before me at
CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quired forms appear to have been complied with. I accordingly approve, and appoint him to the ‡
I enlisted by special authority, such will be attached to the original attestation.
Date 1919 Approving Officer.
The signature of the Approving Officer is to be affixed in the presence of the Recruit. Like 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,

.....re-enlisted in the (Regiment)......on the (Date)

viz:--(Name).....

DESCRIPTIVE REPORT ON ENLISTMENT

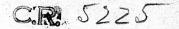
2220

Applicable to all ranks. To correspond with entries on the Medical History Sheet feet # Apparent age. Height Girth when fully expanded 35 Range of expansion. inches Distinctive marks INFORMATION SUPPLIED BY RECRUIT Name and Address of next of kin ho Elis Hants Hr J. Bay Relationship Particulars as to Marriage (a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
(c) Present address. (d) Initials of Officer verifying entry. (a) (6) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service not al-owed to reckon for fixing the rate of pension Service in Re-serve not allow ed to reckon to-wards G. C. Pay Signature of Officers certi-Corps in Rgt. or which served L'epot Promotion, Reductions, Casualties, &c. fying correctness of entries Army Rank Dates Days Years Days 28-11-18 Total Service forfeited as above. Idate of discha

Extract from Daily Orders Part II Royal Newfoundland Regt. Depot St. John's dated July 8th 1919.

The discharge of the undernoted on demobilization has been CONFIRMED by Officer i/c Records from noted date 4-7-19.

5225, rte. Geo. Ellis.



Extrast from Maminel Roll Scope 1st. Battalion Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st.Battalion left Rouse Carps 22/4/19, smbarked at Havre 22/4/19, disembarked at Southampten 23/4/19 and reached Hazeley Down Camp 23/4/19.

5225 Pte. G. Ellis.

Extract from Daily Orders Part 11 Unit The Royal Mfld. Regt. Depot St. John's, June 10th, 1919.

The discharage of the following on demobilisation has been APPROVED by O.C. Discharge Depot, with effect from These 20-6-19.

5225 Pte. Jos. Ellis.

Extract from Paily Orders Part 11 Depot, St. John's, Date x2-4-2-2.9-6-19.

5225 Pte. Geo. Ellis

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

BE "Corsican"

artrest from Nominel Holl of draft Do . 86, from the End.. Battalion, Windhester to the 1 st.. Battalian of the Ragiment By of Fr Emberged Southempton 85/11/16.

#5825 Pre. G. Ellis.

Entreet from Delly Order: part 11, from Unit The Royal Della & Rog St. John's, dated July 55, 1916.

To Sollowing non omberked for everyone on H.M.S. "Golumbella" July 22,1315.

#5225 Pte.George Ellis.

Extract from Daily Orders part 11, from Unit The Royal Mfld. Regt.St.John's, dated May 21,1918

#5225 Pte. C. Ellis

Attested for General Service with the Royal Nfld.Regt. from 20.5.18 to report 24.5.18 Il Ellis PHO

Medical Report on an Invalid.

Station Hazeley Socan
Date 30/4/19 7. Former Trade or Occupation pli Ellis Lerge 7a. If with previous service in Army, state-(a) Former Unit; (b) Regimental No.; (c) Date of Discharge;

(d) Cause of Discharge.

- 1. Unit Royal Newfourstand 2. Regimental No. 5'225'
- 3. Rank
- 4. Name
- 5. Age last birthday 2 3
- 6. Enlisted on may rofe 8 at Holm
 - 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.
- Place of origin of disability.
- Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

- 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 condi-tion 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.

	What is his present condition? H Q	omplains. f. no
	Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.	auflains 7. no
ı.	If the disability is an injury, was it	
	caused—	
	(a) In action?	
	(b) On field service?	
	(c) On duty? (d) Off duty?	
5.	Was a Court of Inquiry held on the injury?	
	If so—(a) When?	;
	(b) Where?	
	(c) Opinion?	$\int \int $
6.	Was an operation performed? If so, what?	h a
7.	If not, was an operation advised and declined?	ha
	To see of loss on desay of teeth. Is the	
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?	h a
10	Give particulars of any other disabilities	
	to cause invaliding, and state whether	Na
	aggravated by service during the present war.	
		Reportration
		N. box
20	Do you recommend— (a) Discharge as permanently unfit, or (b) Change to England?	
	0 - 1	WE procuring Copy R
	2 gd 1	Officer in medical charge of case.
	I have satisfied myself of the gener.	al accuracy of this report, and concur therewith
e	ccept†	
S	tation Hazely bottom	Officer in charge of Hospital.
	Date 30/4/19	

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

Nº 4100



1ST. NEWFOUNDLAND REGIMENT

I. George Ellis

to, and f of ident concerne	ity of, and prod	ne undermentioned Person uction of the relative I	and Persons, su	Cents, per diem, f ch payment to be m cates by the Person	ade on	proof
Identity Certificate No.	Whether Wife, Child, other Relative or Friend	Name (in full)	741 52	Address	AMC (each	ount person)
+279	Mother	higns Elizabeth E	llis H.	ents Iff-		6
				4.		
					147 Th	
~"	IA.					
		1		Total Allotment, \$	y.ii	60
. 81	equired payments on	mpleted by the Officer Comm Commanding Company and application. 2444 cer Commanding Company	anding Company handed to the F	s, signed by the Volunt aymaster as authority	eer, coi to mak	unter- e the

Nº 4100



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

, Regl. No. 5 125 hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz.: Allotment begins. Identity Certificate No. Whether Wife, Child, other Relative or Friend AMOUNT (each person) Total Allotment, 5 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. Officer Commanding Company

No. 18326/2004

From:

Chief Paymaster & O. i/c Kepord Newfoundland Contingent Pay & Record Office 58, Victoria Street,

London, S.W.

13th November 191 8

Subject: 5225, Pte. G. Ellis

With reference to the following telegram (9656) from the Hon. Minister of Militia, received

Pay to 5225 Ellis £4:0:0

Draft £ 4:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Chief Paymaster & Q. i/c Records.

ONTINGENT

er Commanding, Royal Nfld. Regt.

Winchester.

Nov. 14 th 1918

Receipt Mereunder LIEUT, GOLONEL. MMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT. Officer Commdg. 2 nd Batt'n

Royal Newfoundland Regiment

Received the sum of Foul on account of

cable remittance from Newfoundland.

No. 5226 Rank Private

Company Condu	ct Sheet	1	of last	drunk f	freedom from	extra fine		Signature O.C. Company, etc.	77/1	07990061	Pacter
Place	Date of offence	Rank	Cases of Drunken- ness		Offence		Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remar
Field	8/1/19	lli He		Defect of a	aus shif, i prom	iks, sum tu in ferker	Sol Spiner Collis Water	Pay for same	8/1/14	They Berner	Ø 19
2	I was at				The Marian of Decigo	the second of the second	Tien and the second of the	A. L. Carrier		\mathcal{A}	
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]	<u> </u>	<u> </u>	1				<u> </u>				0 2. O
	.	10 0 000			incomina <u>e f</u> ugia		Se e .		de delan la	Commercial	Same how
••••••											••••••
And the second of the	1	A Committee	1								Sec. 2 11
	4		.,						A		ĮP.

Ellis, Leo 5225 Pay rouph.

#5225 Pto.Goorge Ellis.

lienvs Harbor, T.B.

CT PATRIME OF SUM

Dear Sir :-

Please fini enclosed "pischarge

Certificate No.2319."

Yours truly

Paymaster & O.i/ Rocords.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE
1. No. 5223 Rank Ple Name Ellis George
Intended place of residence. Heart Turing
Occupation Freduman Classification of soldier E Medical Category A
The above named man is discharged in consequence of
Eligible for War Service Gratuity
His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulational, S.
Place
CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE
i. 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 S.T. JOHN'S.
JUN 6 1919 UM Cloud The Signature of witness
CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER I hereby certify that I am in a position to resume civilian occupation immediately on discharge. Place and Date S.T. J.O.H.N.'S Signature of soldier JUN 6 1919 Signature of witness O P.
STATEMENT OF SERVICE
Enlisted for service 20-5-18 No of days on Militar Discharged from service 20-6-19 flue 14 days Service 4.1.1
APPROVAL OF DISCHARGE
3. 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 S.T. JOHN'S. Officer Commanding Discharge Depot The Royal Newfoundland Regiment.
Date JUN 20 1919
CONFIRMATION OF DISCHARGE
Place Officer ijc Records Date The Royal News Guider is hereby confirmed Nowley Caft Place The Royal News Guident Segment
a4 18 2 0 79/ 7 319

The Koval Mild. Regiment DEMOBILIZATION

No.5775 Rank ...

Warned for demobilization on

JUN 6 1919

on soldier for

Report of Demobilization

The Royal Newfoundland Regiment

ization:—	Travelling Board, held on soldier for discharge.	
Discharge Depot: Headquarters The R	oyal Newfoundland Regiment Date	
Regimental No 52.25:		
Name Ellis	Sevrae Pte	

Address .

Present Medical Category.

Hants Hr	
4-	
<i>!.Т.</i> /	
	(a) Immediate discharge
Recommended for:	(a) Immediate discharge
	R. H. Last Carl
	Lasason
Members of Boar	Medical Officer Burdea
	M . O. Depot

The Royal Newfoundland Regiment

/ DEMOBILIZATION OF
Reg. No 5.2 7.5 Rank PH Name Miles Terrige
Date of Enlistingut Zo. 5. 18 Address Hants At District Inches
Occupation Jestersno
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
B 178a
B 179a D 400C Form K do 4th " 5
B 179b B 103
B 179c
Harak .
Date5
O. C. Discharge Depot.
PARTICULARS FOR DEMOBILIZATION
I. Civil Re-Establishment.
I amin a position to resume civilian occupation. I Colla
Product.
Particulars passed to Vo cational Officer for information and action.
Date
2. Clothing.
Certified that Clothing Regulations have been complied with:-
(a) Clothing Allowance payable. # 6000
(b) Clothing Supplied (1 Welcouster)
Date6.—. 6.—. 1.9

3. Transportation and Release Certificate.	011.01 0 100
The above named has been provided with	Travelling Warrant No. 14.1443. 0 to his ho
at Hauts Hr and Relea	se Certificate No. 2376 issued.
The second secon	14 . 611
Date $6-6-19$	af mon cafil
	Demobilization Officer
. Pay and Allowances.	Helphon Control Control
The herein named soldier's accounts have	been correctly balanced and all matters in connecti
therewith settled. He has received pay and	allowances to
Date	1 Hilliws H
- ne	Depot Paymaster.
20 - 1	5-19 ()
Discharge approved for	
Forwarded with following documents to O.C	Discharge Depot.
V.F. P 36. B 268. B 121. 5	N.F. Med. D.F. 1
5 178 W 3494 B 122	Board 1st. " 2
178a. D 400A. B 1915	1 Tormie
3 179	
3 179a D 400C Form K	
B 179b B 103 ME 2	" g
В 179с В 120 М 93	1
and the second section of the	
6-6-19	W town tast
Oate	Demobilization officer.
, in the state of	<u>//</u>
PPROVED	
Documents as above forwarded to:-	
Officer i c Records. Board of Pension Commissioners	
with following additional documents.	1
	Cratnity
Higible	for War Service Gratuity
NOTIFICATION TO THE PROPERTY OF THE PROPERTY O	and the state of t
JUN 2.0 1919	Post of the
Date	O. C. Discharge Depot.
petd. at any	O. C. Discharge Debot.

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

		2 011	1.
	•	Signature of Reg. No. 5975	O Man.
Signature of the Vo	Inaw cational Officer or his Representati	h.	
Place Lat Jo	hus	1	
)ate	191		

[P.T.O.

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

Lieis	MEDICAL	OF	· 0	Julipost to some
Surname		Christian Nat	me 700	rge
- 1,	Table I.—GEN	JERAL TABL	E	1 6
Birthplace:—Parish	nto At I	12. Coun	ty MIC	N.
. /	SPECIAL	RESERVE	- REGULA	R ARMY
Examined	on 20 day of	may 1918	on day	of 191
	at S	ruo	at	· · · · · · · · · · · · · · · · · · ·
Declared Age	years years	days	year	rs days
Trade or Occupation	Taken	nan		
Height ···· ····	o feet	tnches	feet	inches
Weight		/2/ lbs.		lbs.
Chest Girth when fully expanded	}	Job inches		inches inches
		J inches	And the second s	
Physical Development	Right	Left	Right	Left
Vaccination Marks Arm				
When Vaccinated				
	R.FV= 96		R.E.—V=	
Vision }	L.EV= 6/6		1,.B.—V=	
,		and the second		
(a) Marks indicating congenital peculi- arities or previous disease	(a)		(a)	
arities or previous disease				
e e e e e e e e e e e e e e e e e e e	(b)		(6)	
(b) Slight defects but not sufficient to	162 862	14:	(6)	
cause rejection	Car High	· (4)		***
	~	O as		
Approved by (Signature)	amos	atteron		
(Rank)	17	Medical Officer.		Medical Officer.
	at Joh	up	at	A STATE OF THE STA
Enlisted	on 20 day		on day	Table 1
, ,	Of Corps.	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	nerozal	1225		10. ************************************
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	yearegr	percent or according to a		
Transferred to				1
	•			
Became non-effective by		of 191	on day	
(Signature)	on day o	191	on day	of 191
(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 (TOD)	and all to restrict a	Brief Det	ails, and Signatures	meals or fire writtens or year feet, will be go	
PM - 101 1	•				
21-5-18	Vaco 4	2 1			
13-6-18	Inoe 1	2			
27-6-18	· · · · /	,			
4-7-K	" 18				
4					•
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	•		eby certified tha before a Travel		
			nd has been o		
*		1	for Discharge on		
		tion. Me	dical oategory	MA	
		Date of T.M.B.	9 July Ju Disch	A Musti	
		Date of 1.Ri.D.	h Dischi	er spanishes and	
* 1			U		

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
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			9		

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				1.	
				-	
•				100	
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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

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 occuring in the description subsequent to the date of admission to pension should be noted in red ink.

Seorge Ellis Name in full Regiment from which discharged Royal Dewfoundland Regimental number 5555 Intended address Hants Str. Height on discharge Color of pair on discharge Golden Complexion Jair Color of eves Descriptive Marks Figure on discharge ' Meduin Christian name of Father James
Christian name of Mother
Christian name of Mother Wife's maiden name in full Date and place of marriage

Place and date of soldier's birth Hanks Str., aug. 32 1896

Nature and locality of civil employment required

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

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 Joseph Ellis (Rank)

(Soldier's signature in full)

Christian names of children

IN Oshi Date June 11 - 1919

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above

	Station Date 30 4 19
Unit Ofal Newfoundland Regimental No. 5215 Rank Name bellis George Age last birthday 23 Enlisted on hay 2015 Late of the second	7. Former Trade or Occupation for Occupation for Occupation for I state of Discharge; (a) Former Unit; (b) Regimental No.; (c) Date of Discharge; (d) Cause of Discharge.

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.

10. Place of origin of disability.

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
nil
nil

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 condi-tion 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, a.g., intemperance, misconduct, &c.

	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.		
	injury?	0
	If so—(a) When?	
	(b) Where?	
	(c) Opinion?	
10	W	· na.
16.	Was an operation performed? If so, what?	
		7.4
17.		
	declined?	
18	In case of loss or decay of teeth - Is the	\mathcal{M} .
10.	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?	
19	. Give particulars of any other disabilities	74,
	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.	
	A	
		Repatrialier
		1 Jaluar
		(2 barr
20). Do you recommend—	
	(a) Discharge as permanently unfit, or (b) Change to England?	
		180
		W > Vrocimies. last XV.
	The second second second second	Office is a discloburge of the
	en la companya de la	Officer in medical charge of case.
	I have satisfied myself of the	general accuracy of this report, and concur therewith,
		general accuracy of the roport, and
e	accept t	
S	tation Handly W. Camb	
		Officer in charge of Hospital.
Ι	Date 30-4-14	
	· · · · · · · · · · · · · · · · · · ·	
9]	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.

13. What is his present condition?

Weight should be given in all cases when

He compleins of no disability-

⁽a) In the case of a man who has re-engaged for, or enlisted in Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

July 5,1919

#5225 Pte. George "llis,

Hents Harbor, T.B

Dear Dir :-

chaque for seventy dollars (\$70.00), being amount offirst payment due you on account of the mar service tratuity.

ours truly

seymaster & U.i/c necords.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Decleration required of officers and men of the Royal Newfoundland Regiment, who claims War Service Gracuity under Order-in-Council dated January 28th.1919.

A complete reply must be given to every question in this Declaration There has be no blanks and no dakhes. If any questions are not applicable, the words "HOT APPLICABLE" hust be written out.

On completen this Declaration is to be returned to THE OPPLICED I/O

On elaphotica this Declaration is to be returned to MME OFFICER I/C
RECORDS, RAY & RECORD OFFICE, ST., JOHN 3.
Christian property of lorge Recovered Ellis
3. Rent
8. Address in full to which future three throng and the tree to be
forwarded, Hauf Str. J. B.
•••••••••••••••••••••••••••••••••••••••
6. Dave of enlistment in the Regiment. May 20/18
7. Name of dependent, if any, to whom Saparation Allowance is being
issued, or was being issued, irmedictally prior to your discharge
- No
8. Relationship of such dependents
9. Address in full of such dependents
•••••••••••
10. Is said dependent, now, or was said dependent at my time in receipt
of Soperation Allowance on account of mother soldier?
Il. Were you on active service only in Hfld II so, give dates and
particulars of such service
12. Give total length of time which you served or active service,
hether in Mild. or Oversegs. V. Tom May 20/18
to kune 6/19

13. Have you had more than one enlistment? If so, give particulars
of discharge and re-enlistments, and under what regimental numbers.
1.00
,
14. Have you already received any payment of Post Discharge pay or
War service Contuity? If so, stars amount you and your dependents
here circuly received and by whom paid to the fray 77.13
15. Have you been issued with a War service Badge?
16. Have you, during the present wer, served in the Imperial Derces. Live
17. Are you entitled to receive, or have you received any Gratuity
in the nature of Pest Discharge Pay from the Esperial Forces? If
so, state emount received or to which you are entitled
18.Did you revert Overseas to a rank lower than the substantive
ronk held by you on your arrival in England?
(b) If so, was such reversion in consequence of Misconduct or
inofficiency?
19. Are you now gerving in the Rost.? If not give?- (a) date
of discharge Mue 6/19.(b) Forsen toy discherge.
Leufsorary of consoreigness
20. Did you at any time serve at the front in an actual theatre of
Mar? If so give particulars of places, and dates of such sorrige
Och 22/18 to apl 1919
21.(c) Are you receiving treatment from the Tavil Re-Establishment
Com.(b) If so are you in receipt of fail pay and allowences from
that Cormittee
And I take this solenn decleration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant:

Place of Residence: Hauf Mr. 1989

Declared before me at: St. Churs, Infla

Signature of Berrister of the

Supreme Court, Stipsadiary Heristrate, Hotary Febre, Missice of the

Pecce, or Commissioner of affidevits.

Post Discharge PAY.

Dete paid Peid Peid War Sorvice Ret amount

Soldier. Dependent: Gretuity.

Paymaster

4 mas

Cortified correct.

Nº 4100



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

hereby agree, until further notification by me, and in similar official form to make an Allotment of

to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof

Dollars and Suffer

, Regl. No. 525

Cents, per diem, from my Pay,

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	AM (each	OUNT person)
279	Gotter	hy s Elizabeth Ellis	Houts Her. G. B.		60
140					
		* ************************************			
		V			
			Total Allotment, §		60
si	gned by the Officer equired payments on	mpleted by the Officer Commanding Commanding Company and handed application. (Sig. Company (Rank)	George Elle	teer, co	ounter ke the

\$50 mo follio -tants Had Ats Contrat Cantain ion officer.

No. 3 587 TRAVEL	ING WARRANT
Date 6-6-19 The Royal P	ewfoundland Regiment
Server	1
#XVX	ass Passage and Meals for
No. J. R. No. J. TE	Name Ellis &
From - ST. JOHN'S - T	· Kauls Hr. \$500
Hearts content-	The Koyal Bewfoundland Kegiment
PLEASE QUOTE THIS WARRANT NUMBER ON STATEMENT AND MEAL CHECKS	Ja Just Cafel.
	SIGNATURE OF ISSUING OFFICER. Demobilituation Officer

mr George Eller Harts Flarlos Tunty Bay

Hants Harlos June 11 19.9 Dear Sen of am Sended to tell you as hy f had to hap fige dollars to get from particontino I wired for a mon afin of Leaved and he had his carage, broke and had to hire a nother one. he charge four for. going and one for the hire of the carage. the mans grand mr about short. pt & Elli

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms B 121.

Regiment of Royal Newfound low

Number of Sheet The Signature of O. C. Company DBD into Lieut

	mental Numb			Enlistment	Trade	Good Conduct Badges, S			
No.	mental Numb	er and Ival	ne .		1.		ervice pay c	r pronciency pay	
5225	Ellio	Yes	Te		Toherman Religion				10
Joined	AND DESCRIPTIONS OF THE PROPERTY OF THE PARTY OF THE PART	ate		Place and Date Seffeture of Enlistment 20.5.18	S.a.				
Joined	Da		52	- Period of	Place of Birth	\mathbb{L}_{z}			
Joined	Da	ite		with Reserve 363 years.	Hout M.	B.			
Place	Date of Offence	Rank	Cases of Drunk- enness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
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200						trafficulties to the second of the			

115220

Demobilization Form 8

The Royal Newfoundland Regiment

DEMOBILIZATION OF
Reg. No 5225 Rank MR Name Calleg Llorge
Date of Enlistment 20.5 18 Address Hand Hy District January
Occupation
Recommendation S.M.B
Passed to Demobilization Officer with following documents:—
N.F. P 36
B 178 W 3494 B 122
B 178a D 400A
B 179s. A D 400C. Form K. do 4th. "5.
B 179b B 103
B 179c B 120 M 93
Date 5. 6.19 PARTICULARS FOR DEMOBILIZATION 7. Civil Re-Establishment. I am
Particulars passed to Vocational Officer for information and action.
Date
2. Clothing.
Certified that Clothing Regulations have been complied with:
(a) Clothing Allowance payable.
(b) Glothing Supplied
Date 6-6-19 Oilc Re-clothing.

3. Transportation and Release Certificate. The above named has been provided with Travelling Warrant No. 1493.8.587: to his home
at Hants Hand Release Certificate No issued.
Date 6 - 6 - 19 A Show East 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 1-19 Depot Paymaster.
Discharge approved for.
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36. B 268. B 121. R.F. Med. D.F. 1
B 179a D 400C Form K do 4th 5 B 179b B 103 ME 2 6
Date B 120 M 93 Date Demohilization Officer.
APPROVED. Documents as above forwarded to:—
Officer i c Records. Board of Pension Commissioners.
with following additional documents.
Higible for War Service Gratnity
JUN 20 1919
Date O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
11 aprica
Date June 1. 1.1919.

Reg. No.... Allo Allottee Date of A Consicair