



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF *Hefforn*

No. *6260*

Name *Leonard Hefforn* Corps *Co of 8*

Questions to be put to the Recruit before Enlistment

- | | |
|--|----------------------------------|
| 1. What is your name? | 1. <i>Leonard Hefforn</i> |
| 2. What is your full address? | 2. <i>New Bedford N.S.</i> |
| 3. Are you a British Subject? | 3. <i>yes</i> |
| 4. What is your age? | 4. <i>19</i> Years |
| 5. What is your Trade or Calling? | 5. <i>Fisherman</i> Months |
| 6. Are you Married? | 6. <i>no</i> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <i>no</i> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <i>yes</i> |
| 9. Are you willing to be enlisted for General Service? | 9. <i>yes</i> |
| 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. <i>yes</i> |

I, *Leonard Hefforn* 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.

10/10/18

Leonard Hefforn SIGNATURE OF RECRUIT.

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Leonard Hefforn* 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 *10th* day of *Oct* 191*8*

Signature of Attesting Officer

P. S. Drisko Lieut

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date *Oct 11 1918* 191*8*

Place

Robertson Capt

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 Leonard Hefferman Hefforn
Apparent age 19 years months. Height 5 feet 4 $\frac{3}{4}$ inches
Chest Measurement { Girth when fully expanded 35 $\frac{3}{4}$ inches
Range of expansion 3 $\frac{3}{4}$ inches
Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Jacob Hefferman Hefforn
New Berkhampt | 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 <u> </u> on <u> </u>									

Total Service forfeited as above.....

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



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6260 Name Leonard Heffernan Corps 6 of 8

Questions to be put to the Recruit before Enlistment. Heffernan

- | | |
|--|-----------------------------|
| 1. What is your name? | 1. <u>Leonard Heffernan</u> |
| 2. What is your full Address? | 2. <u>New Harbour St.</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>19</u> Years |
| 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 |
| | 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, Leonard Heffernan Heffernan 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.

10/10/18 Leonard Heffernan SIGNATURE OF RECRUIT.
6 Heffernan Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Leonard Heffernan Heffernan 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 10th day of Oct 1918
 Signature of Attesting Officer C. B. Dickson Lieut.

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the rank of Private
 If enlisted by special authority, such will be attached to the original attestation.
 Date OCT 11 1918 1918
 Place ST. JOHN'S
Robertson Capt. for Commanding Officer } Approving Officer.
 The Royal Newfoundland Regiment, St. John's, Nfld.

† 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

6260

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

Name Leonard Hefferman Hefforn
 Apparent age 19 years months. Height 5 feet 4 ³/₄ inches
 Chest Measurement { Girth when fully expanded 35 ³/₄ inches
 { Range of expansion 3 ³/₄ inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Jacob Hefferman Hefforn
New Berlin, Wis | 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 _____									Discharged Feb 14/1919
Joined at _____ on _____									

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

C.R. 6260

Extract of DAILY ORDERS, PART II, Depot St. John's,
dated Feb. 17th 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records on noted date.
14/2/19.

#6260 Pte. Leonard Hefforn.

C.R. 6260

Extract from Daily Orders part 11, Depot St. John's dated
Jan. 20th., 1919.

The discharge of the undernated on demobilization have been
APPROVED/ by O. C. Discharge depot from 17-1-19.

6260 Pte. L. Heffern.

C.R. 6260

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland Regt.
dated October 12th 1918.

Strength Increases.

6260 Pte. Leonard Hefforn.

Attested for General Service with Royal Newfoundland Regiment
from 10/10/18.

Hefforn, L

6260

Ray & sept.

February 14, 1919

#6260 Pte. Leonard Hefforn,

New Perlican, T.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 224."

Yours truly,

Captain,
Paymaster & Officer i/c Records

En^d 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6260 Rank Pte Name Leonard Jeffon
 Intended place of residence New Belair St Paul

2. Occupation Gasman
 Classification of soldier Medical Category

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

DEMOBILIZATION

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place JAN 16 1919 Holley Capt.
 Date JAN 16 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 and date St Johns 16-1-19
 Signature of soldier Leonard Jeffon
 Signature of witness C. Dicks Capt

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 Jan 16 1919 St. John's
 Signature of soldier Leonard Jeffon
 Signature of witness H. Raymond

STATEMENT OF SERVICE

7. Enlisted for service 10. 10. 18 No of days on Military
 Discharged from service 17. 1. 19 plus 28 days Service 128 days

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge of Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S R. H. Lait Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JAN 17 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St Johns, Nfld H. Howley Capt
 Officer in Charge of Records
 The Royal Newfoundland Regiment
 Date February 14 1919

ADB 2079/924

22
30
31
31
14
28

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6260 Rank Private Name Neilson Leonard
 Date of Enlistment 10/10/18 Address St. Peter's District Trinity
 Occupation Trimmer Classification for Discharge C Medical Category A.H.
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 10/12/18

M. W. M. Capt.
O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Leonard J. Neilson

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) Clothing Supplied _____

Joseph A. Brown

Date _____

O i/c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 510R to his home at Mr. Pesham and Release Certificate No. 825 issued.

Date 16-1-19 C.B. Dicks Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 14-2-19

Date 16-1-19 W. H. M. Capt.
Depot Paymaster.

Discharge approved for 17.1.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	1 2 2 1 1 1 1	1 1 1 1 1 1 1	1 1 1 1 1 1 1
F 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 16.1.19 C.B. Dicks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

JAN 17 1919

Date R. H. Sait Capt.
O. C. Discharge Depot.

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

Date

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

MEDICAL HISTORY

OF

Surname

Heffern

Christian Name

Leonard

Table I.—GENERAL TABLE

Birthplace :—Parish *New Bedford NB* County *Newfoundland*

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	10 th	Oct	1918	191
at	<i>St John's</i>		at	
Declared Age	19	years		
Trade or Occupation	<i>Fisherman</i>			
Height	5	feet	4 ³ / ₄	inches
Weight	125	lbs.		11 s.
Chest Measurement {	Girth when fully expanded	35 ³ / ₄	inches	inches
	Range of Expansion	3 ³ / ₄	inches	inches
Physical Development				
Vaccination Marks {	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R. E.—V=	<i>6/6</i>	R. E.—V=	
	L. E.—V=	<i>6/6</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)				
(Rank)		Medical Officer		Medical Officer
Enlisted	at	<i>St John's</i>	at	
	on	10 th	day of	Oct 1918
Joined on Enlistment	Corps	<i>Royal Nfld Regt</i>	Regtl. No.	<i>6260</i>
Transferred to				
Became non-effective by	on	day of	191	on
(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 at Fishing

Leonard Hoffmann

Signature of Man.

W. Dicks

Signature of the Vocational Officer or his Representative.

Reg. No.

6260

Place

ST. JOHN'S,

Date

16/1/19.

191



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 *Hefforn, Leonard James.*

Regiment from which discharged *1st. Newfoundland*

Regimental number *6260*

Intended address *Newberlican, Trinity Bay.*

Height on discharge Feet

Color of hair on discharge *Black.*

Complexion *Dark*

Color of eye *Brown.*

Descriptive Marks *Vaccination left arm.*

Figure on discharge *Normal.*

Christian name of Father *Jacob.*

Christian name of Mother *Elizabeth.*

Wife's maiden name in full

Date and place of marriage } *not married.*

Christian names of children }

Place and date of soldier's birth. *Newberlican, L.B., Nov. 13th 1898*

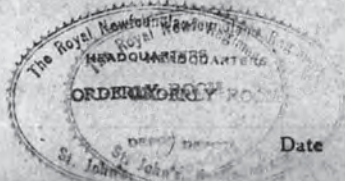
Nature and locality of civil employment required

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) *Leonard James Hefforn*

Station *Prince's Tank* Date *10/12/18.* (Rank) *Plt.*

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.



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

Station _____ Date _____

9.

Trinity

Demobilization Form 1

The Royal Newfoundland Regiment

Class for Demobilization:—
C

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 28-11-18

Regimental No. 6260

Name Leonard Jeffery (9 Pt)

Address New Perlick Trinity Bay

Present Medical Category A ii

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

Members of Board {
R.H. [Signature] Capt.
O.C. Discharge Depot.
[Signature]
Senior Medical Officer
[Signature]
M. O. Depot



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Leonard Jas Hefforn, Regl. No. 6060
 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 Nov 1 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
7540	Mother	^(Elizabeth) Mrs Jacob Hefforn	New Perlican Brimley Bay	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.) J Cift Capt
 Officer Commanding
 Company

(Sig.) Leonard Hefforn
 (Rank) Pte

Sgt John
Oct 14 1918



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Leonard Jas Hefforn, Regl. No. 6260
 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} 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 Nov 1 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
		(Elizabeth)		
7540	Mother	M ^r Jacob Hefforn	New Perlican Family Bay	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.) J. C. Piff
 Officer Commanding
S. John
 Company
Oct 14 1918

(Sig.) Leonard Hefforn
 (Rank) Pt

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. Johns on Oct 10 1918

1. Name Leonard Heffernan? Age (a) Declared 19
 (b) Apparent
2. Do you know of anything wrong with you? no

What severe illnesses have you had? Plumey 1 year ago

sup Bwn
Comp back

62 60

3. Height 5 ft 4 3/4 Weight 125
 4. Eyesight (a) Left 46 (b) Right 46
 5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs
 Measurement (a) Expiration 32 (b) Inspiration 35 3/4

7. Examination of Heart

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

Teeth
 Throat enlarged tonsils
 Nose
 Ears—(Otorrhea)
 (Deafness)

10. Have you been successfully vaccinated, and when? no
11. Name and address of next of kin Father James New publican St. B.
12. Category

REMARKS—

A 11

Archibald
St. B. Surgeon
 Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet one

Regiment of Royal Newfoundland Regiment Signature of O. C. Company Asdick/lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>6266 Leonard Toefforn</u>	Age on	<u>19</u> years <u>11</u> months	<u>Fisherman</u>			
Joined	Date	Place and Date of Enlistment	<u>St John's 11/1/15</u>	Religion			
Joined	Date	Period of	with Colours <u>128</u> years.	Place of Birth	<u>New-perlicon NB</u>		
Joined	Date						

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized</u>	<u>St John's</u>	<u>14² 79</u>			

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

6260

DEMOBILIZATION OF

Reg. No. 6260 Rank Private Name Helforn Leonard
 Date of Enlistment 10:10:18 Address New Plymouth District Trinity
 Occupation Fisherman Classification for Discharge C Medical Category A.II
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 10/12/18

W. H. ... Capt.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Leonard J. Helforn

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) Clothing Supplied *Joseph A. ...*

Date

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 510R to his home at Newark and Release Certificate No. 825 issued.

Date 16-1-19 C.B. Dicks Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 14-2-19

Date 16-1-19 W. H. M. Capt.
Depot Paymaster.

Discharge approved for 17. 1. 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
R 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 16-1-19 C.B. Dicks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date JAN 17 1919 R.H. Sait Capt.
O. C. Discharge Depot.

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

Date Jan 20/1919 W. H. M. Capt.
Depot Records.

Reg. No. *6260* Rank *Pte* Name *Jeffery Leonard*
Attested *10-10-18* Address *60 St. Peterian*
Allotment *60 4* Allottee *Mrs Jacob Jeffery (Mother)*
Date of Allotment *1-11-18* Returned from Overseas.....
Embarked for Overseas Cause.....

Recd 11-10-18 1st Dec 31-10-18.

11-12-18. **PASSED TO DEMOBILIZATION OFFICER**

17-1-19. **DISCHARGE APPROVED ON DEMOBILISATION.**