



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 8286 Name Llewelyn Hewlett Corps Infantry

Questions to be put to the Recruit before Enlistment.

1. What is your name? Llewelyn Hewlett
2. What is your full Address? Wards Harbour
Swillingate Dist
3. Are you a British Subject? Yes
4. What is your age? 18 Year 2 Months 15 Days 20 T.F.
5. What is your Trade or Calling? Fisherman
6. Are you Married? No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?
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? Yes

I, Llewelyn Hewlett 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.

Llewelyn Hewlett SIGNATURE OF RECRUIT.
N.W. Dowden Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Llewelyn Hewlett 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 14 day of October 1918
Signature of Attesting Officer C.B. Duke 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 15 1918 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)



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- 2. What is your full Address? } 2. Wards Harbour
Swillingate Dist.
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 Years 2 Months 10 Days
- 5. What is your Trade or Calling? 5. Fisherman
- 6. Are you Married? 6. No
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- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
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- 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

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Date OCT. 15. 1918 1918

Place ST. JOHN'S
The Royal Newfoundland Regiment.

Signature of Approving Officer C. B. Duke Commanding Depot, St. John's.

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‡ Here insert the "Corps" for which the Recruit has been enlisted.

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DESCRIPTIVE REPORT ON ENLISTMENT

6286

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

Name Llewelyn Hallett
 Apparent age 18 years 2 months. Height 5 feet 7 3/4 inches
 Chest Measurement { Girth when fully expanded 33 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Charlie Hewlett
Wards Harbour | 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 for reckon- ing the rate of pension | | Service in Re- served not allowed to reckon to- wards G. C. Pay | | Signature of Officers certi- fying correctness of entries |
|--|---------------|--|-----------|-------|---|------|---|------|---|
| | | | | | Years | Days | Years | Days | |
| Service towards limited engagement reckons from _____ | | | | | | | | | |
| Joined at _____ on _____ | | | | | | | | | |
| <u>Discharged Jan 24 1919</u> | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |
| Total Service towards Engagement to _____ [date of discharge] _____ years _____ days | | | | | | | | | |
| Pensions " _____ [" "] _____ " _____ | | | | | | | | | |

C.R. 6288

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

#6388 Pte. L. Hewlitt.

ADMITTED BARRACKS HOSPITAL. 22/10/18.

BC.

C.N. 6286

Extract from Daily Orders part 11, Depot St. John's dated December 28th.,
1918.

The undernoted discharge on demobilisation have been approved by Officer
Commanding discharge depot from noted date. He is removed from depot
strength and transferred to discharge depot pending confirmation by
Officer i/o Records.

26286 Pte. Llewellyn Hewlett.

27-12-18

C.R. 6286
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address **St. John's Dept. of Militia.**

| Line Number | Recd | By | Sent | by | Check |
|-------------|------|----|------|----|-------|
| | | | | | |

Dated **Nov. 8th, 1918.**
To **Mrs. Mary Clifford,**
Petites.

Beg to inform you that your son #6286 Pte. Smith, is now slightly improved.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6286

Extract from Daily Orders part 11, Depot St. John's dated Jan. 25/1919.

The und rested discharge on demobilization have been COMPLETED
by Officer i/o records on 21-1-19.

#6286 Pte. Llewellyn Howlett.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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Address St. John's Dep. of Militia

| Line Number | Rcd | By | Sent | by | Check |
|-------------|-----|----|------|----|-------|
| | | | | | |

Dated

Nov. 1st, 1918.

To

Mr. Charles Hewlitt,

Wards Hr,

I beg to inform you that your son # 6286 Pte. Hewlitt, is
~~was~~ still seriously ill.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

C.R. 6286
Counter No.

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(NOT TRANSMITTED)

Signature of Sender _____ Address Dept. of Militia. _____

| Line Number | Recd | By | Sent | by | Check |
|-------------|------|----|------|----|-------|
| | | | | | |

Dated Mr. Charles / Hewlett,

To Ward's Harbour.

Beg to inform you that your son #6286 Pte. L. Hewlett, is now convalescent.

J.R. BENNETT,
Minister of Militia.

C.R. 6256
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____

Address St. John's Dept. of Militia.

| Line Number | Rcd | By | Sent | by | Check |
|-------------|-----|----|------|----|-------|
| | | | | | |

Dated **Nov. 11, 1918.**

To **Mr. Charles Hewlitt,
Ward 36 Hr.,
N.B.D.**

6
Beg to inform you that your son #26285 Pte. L. Hewlitt, is now improved.

**J.R. Bennett,
Minister of Militia**

FOR TYPEWRITER

C.R. 6286
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address Dept. of Militia.

| Line Number | Rcd | By | Sent by | Check |
|-------------|-----|----|---------|-------|
| | | | | |

Dated Dec. 9th, 1918.

To Mr. Charles Hewlitt,
Ward's Harbour.

Regret to inform you that your son No. 6286 Pte. Hewlitt, is now suffering from Mumps.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITEN

C.R. 6286

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

HOSPITAL.

6286: Pte. L. Hewlett.

Transferred from Escasoni to MID. 5/12/18.

C.R. 6286

Extract from Daily Orders, Part 13, UNIT: The Royal Newfoundland
Regiment, dated Nov. 23rd. 1916.

Hospital.

6286 Pte. L. Hewlett

Transferred from H.I.D. to Messonsi 21/11/16.

C.R. 6286

Extract from Daily Orders part 11 Depot. St. John's
dated December 18th., 1918.

Discharged from M. I. D., Hospital 16-18-18.

6286 Pte. L. Hewlett.

C.P. 6286
Counts No. 286

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Address St. John's Dept. of Militia

Signature of Sender _____

| Line Number | Rcd. | By | Sent | by | Check |
|-------------|------|----|------|----|-------|
| | | | | | |

Dated **Nov. 4, 1918.**

To **Mr. Charles Hewlitt,**

Wards Harbour, N.B.S.

Regret to inform you that your son #6286 Pte. L. Hewlitt, is still seriously ill.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

C.R. 6286
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address St. John's Dept. of Mill

| Line Number | Red | By | Sent | by | Check |
|-------------|-----|----|------|----|-------|
| | | | | | |

Dated

Oct
~~Jan~~ 28, 1918.

To

Mr. Charlie Hewlitt,
Walds Harbour

Regret to inform you that your son #6286 Pts. L. Hewlitt,
is now seriously ill at Military Hospital St. John's.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

C.R. 6286

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 01 Sent by Cutwell Recd by 31 Check 9 No. Place from To J R Bennett

please wire conditions
 of 6286 pte Hewlett
 immediately anxious

Mrs Chas Hewlett

will seriously ill

NEWFOUNDLAND POSTAL TELEGRAPHS.



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St. John's Dept. of Militia.

Signature of Sender _____

Address _____

| Line Number | Rcd | By | Sent | by | Check |
|-------------|-----|----|------|----|-------|
| | | | | | |

Dated Nov. 5, 1918.

To Charles Hewlitt,

Wards Hr. N.B.B.

Req to inform you that your son #6286 Pte. L. Hewlitt, is now improved.

J.R. Bennett,

Minister of Militia.

C.R. 6286

Extract from Daily Orders, Part 11, UNIT~~S~~The Royal Newfoundland Regt.
dated October 16th 1918.

Strength Increases.

6286 Llewellyn Howlett.

Attested for General Service with Royal Newfoundland Regiment
from 14/10/18.

Hewlett, Lt.

6286

Ag rept.

January 21th., 1919

#6286 Pte. Llewellyn Hewlett,

Ward Harbor,

Twillingate.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 576."

Yours faithfully,

Paymaster & O.I/c ^{Captain} Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6286 Rank Pte. Name Shewelln Hewlett
 Intended place of residence. Ward St. St. John's

2. Occupation fisherman
 Classification of soldier A Medical Category A.I.

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 St. John's
 Date DEC. 24 1918 W. H. Cass
 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 Dec 24th 1918
S. Hewlett
 Signature of soldier
C. Brooks Capt
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date Dec 25th 1918 St. John's
Shewelln Hewlett
 Signature of soldier
J. Raymond Sgt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 14. 10. 18 No of days on Military
 Discharged from service. 27. 12. 18 plus 28 days Service 105 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Gail Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

Date DEC 27 1918

CONFIRMATION OF DISCHARGE

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

Place St. John's, Nfld. M. Bowley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

Date January 24, 1919

2019/676

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. *4246* Rank *Pte* Name *Newlett Slewellyn*
 Date of Enlistment *14-10-18* Address *Ward 11* District *St. J.*
 Occupation *Fisherman* Classification for Discharge *A* Medical Category *A₂*
 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 | 3 |
| B 179 | D 400B | Form L | do 3rd | " 4 | |
| B 179a | D 400C | Form K | do 4th | " 5 | |
| B 179b | E 103 | ME 2 | | " 6 | |
| B 179c | E 120 | M 93 | | | |

Date *19-12-18*

Monney Camp
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Slewellyn Newlett

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *\$60.00*

(b) Clothing Supplied *Joseph H. Brown*

Date *23-12-18*

O. i. c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 578 to his home at Ward St and Release Certificate No. 23-12-18 issued Chadwick Capt

Date

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 24-12-18 Widley Capt.

Date

Depot Paymaster.

Discharge approved for 27.12.18

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

| | | | | | | |
|-----------|--------|--------|-----------|--------|---|---------|
| N.F. P/36 | B 268 | B 121 | N.F. Med. | D.F. 1 | 1 | Journ B |
| F 178 | W 3494 | B 122 | Board 1st | " 2 | 2 | |
| F 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

Demobilization Officer.

APPROVED.

Documents as above forwarded to—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

DEC 27 1918

Date

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

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

Date Dec 28/1918

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

MEDICAL HISTORY

Surname Newlett OF Lewellyn
 Christian Name

Table I.—GENERAL TABLE

Birthplace:—Parish Woods County Newfoundland

SPECIAL RESERVE

REGULAR ARMY

| | | | | |
|---|--|------------------|--------|--------|
| Examined | on <u>14th</u> day of <u>Oct</u> 191 <u>8</u> | on | day of | 191 |
| | at <u>St Johns</u> | at | | |
| Declared Age | <u>18</u> years <u>Aug 1918</u> | years | days | |
| Trade or Occupation | <u>Fisherman</u> | | | |
| Height | <u>5</u> feet <u>7³/₄</u> inches | feet | inches | |
| Weight | <u>117</u> lbs. | lbs. | ll s. | |
| Chest Measurement | Girth when fully expanded | <u>33</u> inches | inches | inches |
| | Range of Expansion | <u>3</u> inches | inches | inches |
| Physical Development | | | | |
| Vaccination Marks | Arm | Right | Left | Right |
| | Number | | | |
| When Vaccinated | | | | |
| Vision | R. E.—V= <u>6</u> / <u>6</u> | R. E.—V= | | |
| | L. E.—V= <u>6</u> / <u>6</u> | L. E.—V= | | |
| (a) Marks indicating congenital peculiarities or previous disease | (a) | (a) | | |
| (b) Slight defects but not sufficient to cause rejection | (b) | (b) | | |
| Approved by (Signature) | <u>L. J. Peterson</u> | | | |
| (Rank) | <u>Medical Officer</u> | Medical Officer | | |
| Enlisted | at <u>St Johns</u> | at | | |
| | on <u>14th</u> day of <u>Oct</u> 191 <u>8</u> | on | day of | 191 |
| Joined on Enlistment | Corps <u>1st</u> | Corps | | |
| | Regtl. No. <u>6286</u> | Regtl. No. | | |
| Transferred to | | | | |
| Became non-effective by | | | | |
| (Signature) | on | day of | 191 | on |
| (Rank) | | | | day of |
| | | | | 191 |

Table II.—Only for admission to hospital or to the sick

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number Days in Hospital | Remarks bearing on Syphilis, admission or treatment |
|-------------------|----------------------|-------|------|--------------------------|-------|------|-----------|-------------------------|---|
| | Day | Month | Year | Day | Month | Year | | | |
| M. I. D. Hospital | 26 | 10 | 18 | 21 | 11 | 18 | Influenza | 26 | |
| Excelsior | 21 | " | 15 | " | " | 15 | | | |
| M. I. D. Hospital | 2 | 12 | 18 | 12 | 18 | 18 | Mumps | 14 | |

the cause, nature or treatment of the case likely to be of interest or of future use. In case of readmissions to hospitals will be shown. The subsequent progress, including particulars of out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

W. P. Parnes Major

W. P. Parnes



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 *Slewelyn Hewlett*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *6286*
 Intended address *wards No Long Island No 13.*

Height on discharge *Feet*
 Color of hair on discharge *Light*
 Complexion *Light*
 Color of eyes *Blue*
 Descriptive Marks *—*
 Figure on discharge *Good*
 Christian name of Father *Charles*
 Christian name of Mother *Henrietta*
 Wife's maiden name in full *—*
 Date and place of marriage *—*
 Christian names of children *—*

Place and date of soldier's birth *wards No 20 August 1900.*
 Nature and locality of civil employment required *Fishing*

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) *Slewelyn Hewlett* *Pte*

Station *James Rank* (Rank)
 Date *Dec 19 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.

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

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

Slovelyn Hewlett

Signature of Man.

Reg. No. *6286*

Chas. W. Cuff

Signature of the Vocational Officer or his Representative.

Place

St. John's N.Y.L.D.

Date

23/12/18. 191

[Handwritten signature]

Guelphgate

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 *14.12.18*

Regimental No. *6286*

Name *Newell* *Llewellyn*

Address *Wards St* *N. N. 73*

Present Medical Category *A 1/1*

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

Members of Board { *R. H. Lat*
O.C. Discharge Depot.
..... *J. P. Mason*
Senior Medical Officer
..... *W. Burden*
M. O. Depot

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on Oct 14 1918

1. Name Stewelyn Hewlett Age (a) Declared 18 Aug 1918
 (b) Apparent

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

What severe illnesses have you had? none.

Jays
Comp
Ward's
Seas

62 86

3. Height 5' 7 3/4" Seas on Rt. thigh Weight 117

4. Eyesight (a) Left OK (b) Right OK

5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~

Measurement (a) Expiration 30 (b) Inspiration 33

7. Examination of Heart ~

8. Examination of Urine ~

9. Examination of Mouth—(Defective Speech)

Teeth attention
 Throat ~
 Nose
 Ears—(Otorrhea)
 (Deafness)

10. Have you been successfully vaccinated, and when? no

11. Name and address of next of kin Sister Charlie Ward's

12. Category Long Sea
2 Wellington Road

REMARKS—

A 11

Archibald
Geo Gordon
 Medical Examiners.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6286 Rank Pte Name Newlett Llewellyn
 Date of Enlistment 14-10-18 Address Ward H District Twillingate
 Occupation Fisherman Classification for Discharge A Medical Category AII
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

| | | | | | | |
|----------|-----------|-----------|---|-----------|--------|---|
| N.F. P36 | 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 19-12-18

W. J. Campbell
 O/C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Llewellyn Newlett

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 A. Snow*

Date 23-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. Ch 5..... to his home
at Went 28/18..... and Release Certificate No. 5-78..... issued.

Date 28-12-18.....

Chadwick 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 24-1-19.....

Date 24-12-18.....

Woolley Capt.
Depot Paymaster

Discharge approved for 27.12.18.....

Forwarded with following documents to O.C Discharge Depot.

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

Date 24.12.18.....

Chadwick Capt
Demobilization Officer.

APPROVED. ✓

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 27 1918.....

RH Last Capt
O. C. Discharge Depot.

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

Date Dec 28/1918.....

Woolley Capt
Depot Paymaster

Reg. No. 6286 Rank 9th Name Hewlett Clevely
Attested 14-10-18 Address Wagon H^q 7th Gate Det
64 Allotment Mrs Chas Hewlett (Mother)
Date of Allotment 1-11-18 Returned from Overseas
Embarked for Overseas Cause

Vacc 15th 18
22-10-18 Adm. to barracks Hosp.
26-10-18 Transferred to M. I. D. Hosp.
21-11-18 Transferred from M. I. D. to Escasoni
1-12-18 " " Escasoni to C. I. D.
16-12-18 Discharged from M. I. D. Hosp.

PASSED TO DEMOBILIZATION OFFICER

DEC 27 1918 DISCHARGE APPROVED ON DEMOBILISATION.