



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6167 Name Thomas Fuller Corps S.A.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Thomas Fuller
- 2. What is your full Address? 2. Port Roman
R. S. B. (ANSON)
- 3. Are you a British Subject? 3. no
- 4. What is your age? 4. 18 Years 4 Months
- 5. What is your Trade or Calling? 5. Merchant
- 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, Thomas Fuller 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.

Thomas Fuller SIGNATURE OF RECRUIT.
W. P. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas Fuller 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 September 1915.
Signature of Attesting Officer W. P. [unclear]

†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
If enlisted by special authority, such will be attached to the original attestation.
Date SEP 17 1915 1915
Place St. John's } Approving Officer. W. P. [unclear]

† 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 Thomas Hillier

Apparent age 18 years — months. Height 5 feet 4 1/2 inches

Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Hillier
Post Office | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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



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THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6167 Name Thomas Fellee S.A.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Thomas Fellee</u> |
| 2. What is your full Address? | 2. <u>Box 1, St. John's</u>
<u>R. S. B. (ANSON)</u> |
| 3. Are you a British Subject? | 3. <u>no</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>2</u> 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 |
| | 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, Thomas Fellee 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.

Thomas Fellee SIGNATURE OF RECRUIT.

W. Laughton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas Fellee 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 16th day of September, 1918.

Signature of Attesting Officer W. Laughton

†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 SEP 17 1918 1918

Place St. John's } Approving Officer. W. Laughton

† 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

6167

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

Name Thomas Keller
 Apparent age 18 years — months. Height 5 feet 10 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Keller
Port Anson 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 to be allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from									
Joined at _____ on _____									

Total Service forfeited as above.....

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

Disch'd. As John. Jan 9/1919.

C.R. 6167

Extract of Daily orders Part II, Depot St. John's, dated
Jan. 10th 1919.

Demobilization

The discharge of the undernoted man on demobilization has
been confirmed by the Officer i/c records on noted date.

6167 Pte. Thos. Hillier

Discharged 9-1-19

C.R.

6167

Extract from Daily Orders Part 11 Unit The Royal Wfla.
Regt., St. John's, Dec. 12th, 1918.

The undernoted man discharges on Demobilisation has been approved by O.C. Discharge Depot from noted date. He is removed from Depot Strength to Discharge Depot pending confirmation by Officer i/s Records.

6167 Pte. Thos. Hillier.

12-12-18.

C.R. 6167

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Nov.15th, 1918.

THE FOLLOWING MAN RETURNED FROM SPECIAL DUTY AT BELL
ISLAND? 13-11-18.

6167 Pte. P. Hillier.

MM.

C.R. 6167

Extract from Daily orders part 11 Depot St. John's dated Sept. 25/1918

#6167 Pte. T.. Hillier

The above mentioned soldier proceeded on Special Duty to Bell Island C.B.
on 24/9/18

C.R. 6167

Extract from Daily Orders Part 11 Depot, St. John's Dated 17/9/18

#6167 Pte. Thos. Hillier.

ATTESTED FOR GENERAL SERVICE WITH THE ROYAL NEWFOUNDLAND REGIMENT,
16/9/18.

Hillier, T.

6167

Gay Sept.

Jan. 9th., 19

#6167 Pte. Thomas Hillier,
PortAnson,

Twillingate Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 297."

Yours faithfully,

Paymaster & O. i/c Records.
Captain,

Enc' 1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6167 Rank Pte Name Willie Thomas
 Intended place of residence Port Anson
2. Occupation Fisherman
 Classification of soldier A Medical Category A II
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 DEC 9 1918
 Date DEC 9 1918 W. H. L. [Signature]
 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 Dec 9th 1918
Willie Thomas His wife
 Signature of soldier W. H. L. [Signature]
 Signature of witness A. [Signature]

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 St Johns Dec 9th 1918
Willie Thomas His wife
 Signature of soldier W. H. L. [Signature]
 Signature of witness A. [Signature]

STATEMENT OF SERVICE

7. Enlisted for service 16. 8. 18. No of days on Military
 Discharged from service 12. 12. 18. plus 28 days. Service 116.

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
 Date DEC 12 1918 R. H. [Signature]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St Johns. Nfld
 Date January 9/1919
W. H. L. [Signature]
 Officer i/c Records
 The Royal Newfoundland Regiment

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6167 Rank Pte Name Hillier - Thomas
 Date of Enlistment 16.8.18 Address Port Anson District RFB
 Occupation Fisherman Classification for Discharge A Medical Category II
 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	2	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 26 11 18 W. Hillier Capt
for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Thomas Hillier
Wife: Margaret
Grandchildren

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 A. Lawrence

Date 5-12-18 DEC 13 1918
O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 48 to his home at T. Port. Anson and Release Certificate No. 62 issued.

Date 9 12 18

Osborne 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 9-1-19

Date 9-12-18

Money Capt.
Depot Paymaster.

Discharge approved for 12 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	
E 178	W 3494	B 122		Board 1st	" 2	1	Form B
B 178a	1 D 400A	1 B 1915	2	do 2nd	" 3	2	
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	1				

Date 9 12 18

Osborne Capt.
Demobilization Officer.

APPROVED.

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

Date DEC 12 1918

RH Last 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 Hillier

Christian Name Thomas

Table I.—GENERAL TABLE

Birthplace:—Parish Port-Arson.

County Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	16	Sept		191
Declared Age	18	years	60	days
Trade or Occupation	<u>Fisherman.</u>			
Height	5	feet	4 1/2	inches
Weight	120	lbs.		lbs.
Chest Measurement {	Girth when fully expanded		35	inches
	Range of Expansion		3	inches

Vaccination Marks {	Right		Left	
	Arm	Number	Arm	Number
When Vaccinated				

Vision	R.E.—V= L.E.—V=	<u>6/6</u>	R.E.—V= 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) Lamine Paterson
 (Rank) Major Medical Officer

Enlisted

at	on	day of	191	at	on	day of	191
	16	Sept					

Corps	Regtl. No.	Corps	Regtl. No.

Transferred to

Royal Nfld. Regt. 6167.

Became non-effective by

on	day of	191	on	day of	191

(Signature)
(Rank)



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 **Thomas Hillier**
 Regiment from which discharged *1st. Newfoundland*
 Regimental number **6167**
 Intended address **Sunday Cove Island**
 Height on discharge **5** Feet **4½**
 Color of hair on discharge **Light Brown**
 Complexion **Fair**
 Color of eyes **Blue**
 Descriptive Marks
 Figure on discharge
 Christian name of Father **George**
 Christian name of Mother
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth.
 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)

(Rank)

Station

Date

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.



Station

Date

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 resume previous occupation
(Fishing)*

*His
x
Thos. Hillier* *Witzel*
Max *W. K. K. K.*

Signature of Man.

C. D. Dick *Kapp*

Signature of the Vocational Officer or his Representative.

Reg. No. *6169*

Place *St Johns*

Date *Dec 9th* 191*8*

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

NOV 27 1918

Date

Regimental No. *6167*.....

Name .. *William Thomas*

Private

Address .. *Sgt Anson Sunday C. de Island St 1273*

Present Medical Category.....

A II

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~.....

Members of Board {

R. H. Lant Capt.

O.C. Discharge Depot.

P. Paterson

Senior Medical Officer

G. W. Burden

M. O. Depot

This is to certify, that Thomas Lister
of Sunderland has been examined by me and found
Medically unfit for service in the Royal Naval Reserve.

Dated this 16 day of September, 1918.

Real chest suspicious T.B.

P. D. ...
Fleet Surgeon, R.N.,

H. M. S. "Briton,"

St. John's, N.F.

— — — — —
— — — — —
— — — — —
— — — — —
— — — — —
— — — — —

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on Sept 16 1918

1. Name Thos Hillier Age (a) Declared 18
(b) Apparent

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

What severe illnesses have you had? none

eyes blue
complexion fair

marks seen on back left hand

6167

3. Height 5ft 4 1/2 Weight 120

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

5. Physical Defects (Examine after strenuous exercise) no

6. Examination of Lungs no

Measurement (a) Expiration 32 (b) Inspiration 35

7. Examination of Heart no

8. Examination of Urine no

9. Examination of Mouth—(Defective Speech)

- Teeth
- Throat
- Nose
- Ears (Otorrhea)
- (Deafness)

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

11. Name and address of next of kin Father George Port Anson
Sunday Cove St.
N.S.

REMARKS—

Aik

Archibald
St. Gerden

Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland Regt

Number of Sheet 1000

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>6167 Thomas Hillier</u>	Age on <u>18</u> years <u>2</u> months	<u>Fisherman</u>		
Joined	Date	Place and Date of Enlistment { <u>St John's</u> <u>16. 9. 19</u>	Religion		
Joined	Date		<u>S. U.</u>		
Joined	Date	Period of } with Colours <u>116</u> years. with Reserve <u>365</u> years.	Place of Birth		
Joined	Date		<u>St. John's.</u>	<u>Port: Anson</u>	

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 St. John's 9 '19</u>					

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6167 Rank Plt Name Miller - Thompson
 Date of Enlistment 16.8.18 Address Port Anson District 7.5.B
 Occupation Fisherman Classification for Discharge A 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	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 25-11-18

W. J. Miller Capt
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Thomas W. J. Miller
Mark J. ...
 Witness

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 A. Lawford

Date 5-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 48 to his home at Port Cusrow and Release Certificate No. 62 issued.

Date 9.12.18 Osborne 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 9-1-19

Date 9-12-18 Howley Capt.
Depot Paymaster.

Discharge approved for 12.12.18

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	Tom B ✓
B 178.	W 3494.	B 122.		Board 1st.	" 2.	✓ 1	
B 178a.	✓ 1 D 400A.	✓ 1 B 1915.	✓ 2	do 2nd.	" 3.	✓ 2	
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.	✓ 1				

Date 9.12.18 Osborne Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
Officer in Charge Records.
Board of Pension Commissioners.
with following additional documents.

Date DEC 12 1918 R.H. Last Capt.
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
Date Dec. 12/1918 Howley Capt.

Reg. No. *6167* Rank. *Pte* Name *Hillier Thomas W. Coy*

Attested *16-9-18.* Address *Port Anson*

Allotment..... Allottee

Date of Allotment..... Returned from Overseas.....

Embarked for Overseas Cause.....

<i>vac</i>	<i>17-9-18.</i>	
<i>24-9-18.</i>	<i>Special duty Bell Islands</i>	<i>held 13-11-18.</i>
<i>28-11-18</i>	<i>Passed to Demobilization Officer</i>	
<i>12-12-18</i>	DISCHARGE APPROVED ON DEMOBILISATION.	