



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6243 Name Waldemar Hillier Corps Cof 6
 Questions to be put to the Recruit before Enlistment.

- | | |
|--|----------------------------|
| 1. What is your name? | 1. <u>Waldemar Hillier</u> |
| 2. What is your full Address? | 2. <u>North Side</u> |
| 3. Are you a British Subject? | 3. <u>Barnabine</u> |
| 4. What is your age? | 4. <u>22</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, Waldemar Hillier do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

..... SIGNATURE OF RECRUIT.
Waldemar Hillier
 Signature of Witness.
Pte D Dowden

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Waldemar Hillier 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, honour, and manfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at.....
 on this..... day of..... 191.....
7 October 1918
 Signature of Attesting Officer Pte D Dowden

† 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. 9 - 1918 ... 191.....
 Place ST. JOHN'S.....
Superior Bapt } 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, St. John's, Nfld.

* 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 Waldemar Hillier
 Apparent age 22 years months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 35 1/2 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin _____
Joseph Hillier Relationship _____
North Side Lamaline Particulars as to Marriage Brother

(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 " _____ { " " } _____ " _____									



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6243 Name Waldemar Hillier Corps CofE

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Waldemar Hillier
- 2. What is your full Address? 2. North Side
Lamarkine
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 22 Years Months
- 5. What is your Trade or Calling? 5. Fisherman
- 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, Waldemar Hillier 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.

Waldemar Hillier SIGNATURE OF RECRUIT.
P. D. Dowden Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Waldemar Hillier 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 8 day of October 1918

Signature of Attesting Officer P. D. Dowden

†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 Corps.

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

Date OCT 9 - 1918 1918
Place ST. JOHN'S

Robert Campbell } Approving Officer.
Commanding Officer
The Royal Newfoundland Regiment.

† 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).....

6243

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Waldemar Hillier

Apparent age 22 years months. Height 5 feet 8 inches

Chest Measurement { Girth when fully expanded 36 1/2 inches
 Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Joseph Hillier
North Side Lamaline | Relationship Brother

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>									
<u>Discharged A. Hillier Jan. 9/1919.</u>									
Total Service forfeited as above.....									}
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [" "] _____ " _____									

C.F. 6243

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

The undernoted man discharges on Demobilization 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/c Records.

6243 Pte. W. Hillier.

12-12-18.

C.R. 6243

Extract of Daily Orders Part II, Depot at 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.

6243 Pte. Walderman Hillier

Discharged 9-1-19

C.R. 6243

Extract from Daily Orders Part II Unit The Royal Nfld. Regt.,
St. John's Dated Oct. 10th, 1918.

6243 Pte. Waldemas Hiller.

Attested for General Service with the Royal Nfld. Regt.,
8-10-18.

Lillier, W. G.

6243

Ray sept.

January 9th., 1919.

#6243 Pte. Walderman G. Hillier,
North Side Lemaline.

Dear Sir:-

Please find enclosed "Discharge
Certificate "o.327."

Yours faithfully,

Captain,
Paymaster & U. i/c Records.

Enc '1-1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6243 Rank Plt Name Waldemar Hillier
 Intended place of residence North Side Lamaline
2. Occupation Fisherman
 Classification of soldier C 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. G. Hillier Capt.
 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 W. G. Hillier
Dec 9th 1918 Signature of soldier
W. G. Hillier
 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 St Johns W. G. Hillier
9-12-18 Signature of soldier
W. G. Hillier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 8.10-18 No of days on Military
 Discharged from service 12-12-18 plus 28 day Service 94

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S R. H. Dail Capt.
 Date DEC 12 1918 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 M. Bowley, Capt.
 Date January 9th 1919 Officer i/c Records
2079/527 The Royal Newfoundland Regiment

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6243 Rank Pte Name Heller Waldeman
 Date of Enlistment 8-10-18 Address The Side Hamlets District Burin
 Occupation Fisherman Classification for Discharge C Medical Category 011
 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	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 6.12.18

H. Kelly Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

W. G. Miller

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable 8 60/100

(b) Clothing Supplied *Joseph H. Snow*

Date Jan 12 18

© i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.147 to his home at Lanvaline and Release Certificate No. 222 issued.

Date 9-12-18

C. B. Dicks
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

W. H. M. 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	1	do 4th	" 5		
B 179b	B 103	ME 2			" 6		
B 179c	B 120	M 93	1				

Date 9-12-18

C. B. Dicks
Demobilization Officer.

APPROVED.

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

Date DEC 12 1918

R. H. Hart
O. C. Discharge Depot.

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

Date Dec. 12/1918

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.147 to his home at Lanualine and Release Certificate No. 222 issued.

Date 9-12-18

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 9-1-19

Date 9-12-18

W. H. Kelley 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	1	do 4th	" 5		
B 179b	B 103	ME 2			" 6		
B 179c	B 120	M 93	1				

Date 9-12-18

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 DEC 12 1918

R. H. Hart Capt
O. C. Discharge Depot.

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

Date Dec. 12/1918

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

MEDICAL HISTORY

OF

Surname Shillit

Christian Name Waldemann

Table I.—GENERAL TABLE

Birthplace :—Parish North Side Lunenburg County Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	8	Oct		191
Declared Age	20	years		days
Trade or Occupation	Fisherman			
Height	5	feet 5		inches
Weight	126	lbs.		lls.
Chest Measurement {	Girth when fully expanded	35 1/2		inches
	Range of Expansion	3 1/2		inches
Physical Development				
Vaccination Marks {	Arm	Right	Left	
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	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>Lambert Petersen</u>			
(Rank)	2nd Lt. Medical Officer			Medical Officer
Enlisted	at		at	
	on	day of Oct	on	day of
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
Transferred to	<u>Royal Nfld. Regt 6243</u>			84
Became non-effective by	on	day of	on	day of
(Signature)		191		191
(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 **W. Hillier**
 Regiment from which discharged *1st. Newfoundland*
 Regimental number **6243**
 Intended address **North Side, Lamaline**
 Height on discharge **5** Feet **5**
 Color of hair on discharge **~~Dark~~ Brown**
 Complexion **Medium**
 Color of eyes **Grey**
 Descriptive Marks
 Figure on discharge
 Christian name of ~~brother~~ **Joseph**
 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:

No work at Festung

W. G. Hillier

Signature of Man.

C. B. Dicks R. Capt.

Reg. No. *6243*

Signature of the Vocational Officer or his Representative.

Place *St. John's*

Date *9/12/18*

*Placentia
Burn*

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 *25/11/48*

Regimental No. *6243*

Name *Willist Waldemar (Plt)*

Address *North side Limaline*

Present Medical Category *A II*

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

Members of Board {
RH Jant Capt
O.C. Discharge Depot.
L Paterson
Senior Medical Officer
Geo Burden
M. O. Depot

No 7508



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Waldemar Hillier, Regl. No. 6243

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}/_{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. 20 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1522	Brother	Joseph Hillier	Paradise North Side	60
Total Allotment, \$				60

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

(Sig.) J. Hillier
 Officer Commanding
 Company
S. Johns
 191 8

(Sig.) Waldemar Hillier
 (Rank) Pte

FORM K

No 7508



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Waldemar Hillier, Regl. No. 6243

hereby agree, until further notification by me, and in similar official form to make an Allotment of Five Dollars and no 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 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
				6
7522	Brother	Joseph Hillier	Lumabue North Side	
Total Allotment, \$				6

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

(Sig.) W. Hillier Capt
 Officer Commanding
B. Company
St John
Oct 14 1918

(Sig.) Waldemar Hillier
 (Rank) Pte

Report for Service 2834

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. Johns on OCT 8 1918

1. Name

Waldemar MillerAge (a) Declared 22

(b) Apparent

2. Do you know of anything wrong with you? No.What severe illnesses have you had? None.Eyes Blue
Comp. Fair!
Marked62433. Height 5-5Weight 1264. Eyesight (a) Left 6/6(b) Right 6/6

5. Physical Defects (Examine after strenuous exercise) ?

6. Examination of Lungs "

Measurement

(a) Expiration

32(b) Inspiration 33 1/2

7. Examination of Heart "

8. Examination of Urine ✓

9. Examination of Mouth—(Defective Speech)

Teeth

Throat

Nose

Ears—(Otorrhea)

(Deafness)

10. Have you been successfully vaccinated, and when? Yes 10 years ago

11. Name and address of next of kin

Brother Joseph North Side
Lamaline
Burns Dist.

12. Category

REMARKS—

A "Archibald
McRuerden

Medical Examiners.

452
✓

This is to certify, that William Waldemar George
of Samaline has been examined by me and found
Medically unfit for service in the Royal Naval Reserve.

Dated this 21st day of November 1916

Rejection No 452
was made 2/10
Bedington St.

Deficient Teeth
Reported again
Passed Repl. 1/11

P. P. [Signature] 1918
Fleet Surgeon, R.N.,
H.M.S. "Briton,"

St. John's, N.F.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland Regt.

Number of Sheet One
Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>6243</u>	Age on	<u>20</u> years	<u>Fisherman</u>	
	<u>Waldemar Hillier</u>		months	Religion	
Joined	Date	Place and Date of Enlistment		<u>CofE</u>	
Joined	Date	Period of	} with Colours <u>9 1/2</u> years.	Place of Birth	
Joined	Date			} with Reserve <u>3 1/2</u> years.	<u>North Side, St. John's.</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.