



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6322 Name Albert Wm James Corps Co B

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Albert Wm James
2. What is your full Address? 2. Remicouche F B
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 25 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. Yes 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

Albert Wm James 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.

Albert Wm James SIGNATURE OF RECRUIT.
me at Spring Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

Albert Wm James 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.....
 on this 15 day of Oct 1915

Signature of Attesting Officer [Signature]

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 16 1915 1915
 Place St. John's

[Signature] Approving 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. 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 Albert Wm James
 Apparent age 20 years months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 38½ inches
 Range of expansion 1½ inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Augustus James
Premcotre 7-13 | 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 _____									} Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
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. 6322 Name Albert Wray James Corps Cop 6.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Albert Wray James
2. What is your full Address? 2. B. Encourthe F. B.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 29 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, Albert Wray James 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.

12/10/15 Albert Wray James SIGNATURE OF RECRUIT.

W. A. Spry Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Albert Wray James 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 15 day of Oct 1915.

Signature of Attesting Officer C. P. 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
 If enlisted by special authority, such will be attached to the original attestation.

Date OCT 16 19151915

Place ST. JOHN'S Approving Officer. Richardson Capt.

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. 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 Albert von James

Apparent age 20 years months. Height 5 feet 6 inches

Chest Measurement { Girth when fully expanded 38½ inches
 Range of expansion 4½ inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Augustus James
Bremontire 71 B | 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 _____									
<u>Despatched to join Jan. 9/1919.</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
Pensions " " (" ") " " " "									

C.R. 6322

Extract from Daily Orders part 11, Depot, Nov. 14th., 1918.

HOSPITAL.

46322 Pte. A. James.

Discharged from Barracks Hospital 11/11/1918.

BC.

C.R. 6322

Extract from Daily Orders part 11, Depot. gt. John: stated Nov. 8th, 1918

ADMITTED BARRACKS HOSPITAL. 7/11/18.

#6322 Pte/ A. James.

C.R. 6322

Extract from Daily Orders, Part 11, Unit: The Royal Newfoundland
Regiment, dated October 17th 1918.

Strength Increases.

6322 Pte. Albert Wm. James.

Attested for General Service with the Royal Nfld. Regt. from 15/10/18.

C.R. 6322

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

Demobilisation

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

6322 Pte. Albert Jones

Discharged 9-1-19

C.R. 6322

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.

6322 Pte. Albert Jones.

12-12-18.

James, A.W.

6322

Ray sept.

January 9th., 1919.

#6322 Pte. Albert W. Janes,

Rencontre,

F.B.

Dear Sir:-

Please find enclosed "Discharged
Certificate No. 325."

Yours faithfully,

Captain,
Paymaster & O. i/c Records.

nc'1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6322 Rank Pvt Name James Albert W.
 Intended place of residence Penarth, Gwent
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 St John's Date DEC 9 1918
 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 9th 1918
 Signature of soldier Albert W. James
 Signature of witness C. P. Dickson A/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 Dec 9th 1918 St John's
 Signature of soldier Albert W. James
 Signature of witness Raymond Sgt

STATEMENT OF SERVICE

7. Enlisted for service 15. 10. 18 No of days on Military
 Discharged from service Dec 12th 1918 plus 28 days Service 87 days

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. Dait Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

Date DEC 12 1918

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St John's, Nfld A. Bowley, Capt
 Officer i/c Records
 The Royal Newfoundland Regiment

Date January 9/1919
2079/325

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6322 Rank Pte Name James Albert W
 Date of Enlistment 15-10-18 Address Beaconsfield District Fortune
 Occupation Fireman Classification for Discharge C Medical Category ATI
 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 7-12-18

W. C. Discharge Depot
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Albert W. James
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 H. Snowling*

Date 9-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R. 139 to his home at Bellorau and Release Certificate No. 214 issued.

Date 9-12-18

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 9-1-19

Date 9-12-18

Mooney 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	N.F. Med.	D.F. 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 9-12-18

Chadwick Capt.
Demobilization Officer.

APPROVED.

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

with following additional documents.

DEC 12 1918

Date

R.H. [Signature]
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

Surname James Christian Name Albert Wm

Table I.—GENERAL TABLE

Birthplace:—Parish		County	
<u>Parsons</u>		<u>Newfoundland</u>	
SPECIAL RESERVE			
Examined	on <u>15th</u> day of <u>Oct</u> 191 <u>8</u>	on	day of 191
	at <u>St John's</u>	at	
Declared Age	<u>20</u> years	days	years days
Trade or Occupation	<u>fisherman</u>		
Height	<u>5</u> feet	<u>6</u> inches	feet inches
Weight	<u>138</u> lbs. ll s.		
Chest Measurement {	Girth when fully expanded	<u>38 1/2</u> inches	inches
	Range of Expansion	<u>4 1/2</u> inches	inches
Physical Development			
Vaccination Marks {	Right	Left	Right Left
	Number		
When Vaccinated			
Vision	R.E.—V= <u>4/6</u>	R.E.—V=	
	L.E.—V= <u>1/6</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>Lammont Peterson</u>		
(Rank)		Medical Officer	Medical Officer
Enlisted	at <u>St John's</u>	at	
	on <u>15th</u> day of <u>Oct</u> 191 <u>8</u>	on	day of 191
Joined on Enlistment	Corps	Regtl. No.	Corps Regtl. No.
	<u>Royal Nfld Regt</u>	<u>6399</u>	
Transferred to			
Became non-effective by	on	day of 191	on day of 191
(Signature)			
(Rank)			

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.


Date	Brief Details, and Signatures
OCT 16 1918	<p><i>Vacc. #</i></p>
<p><i>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as</i> <u>C</u> <i>for Discharge on Demobilisation. Medical category</i> <u>AI</u> NOV 28.1918 <small>Date of T.M.B.</small>  <small>Discharge Depot—New Zealand</small></p>	

TABLE IV.—SERVICE TABLE

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">+</div>			<div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">~</div>		

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

Albert W. James.

Signature of Man.

Chas. Dick Ray

Reg. No. 6322

Signature of the Vocational Officer or his Representative.

Place *St. John's*

Date *9/12/18*

Fortune

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. *6322*

Name *James Albert (Pte)*

Address *Renouise Fortune Bay*

Present Medical Category *Aii*

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

Members of Board { *RH Lat*
O.C. Discharge Depot.
Shannon
Senior Medical Officer
See Borden
M. O. Depot



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 **Albert W. James**
 Regiment from which discharged *1st. Newfoundland*
 Regimental number **6322**
 Intended address **Rencontre, Fortune**
 Height on discharge **5** Feet **6**
 Color of hair on discharge **Light Brown**
 Complexion **Fair**
 Color of eyes **Blue**
 Descriptive Marks
 Figure on discharge
 Christian name of Father **Augustus**
 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.



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

Station

Date



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Albert James, Regl. No. 6322 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 15 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
7579	Mother	(Mary Ann) <u>McQuigley James</u>	<u>Penconche Fortune Bay</u>	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.) [Signature]
 Officer Commanding
5 Company
[Signature]
 17 - 10 1918

(Sig.) Albert Wm James
 (Rank) Pte

Report for service
No 2399

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at W. Dept on Oct 15 1918

1. Name Albert W James Age (a) Declared 20
(b) Apparent

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

What severe illnesses have you had? none

eyes
long
mouth

Brown
fair

6372

3. Height 5-6 Weight 158

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

5. Physical Defects (Examine after strenuous exercise) "

6. Examination of Lungs "

Measurement (a) Expiration 34 (b) Inspiration 38 1/2

7. Examination of Heart "

8. Examination of Urine ✓

9. Examination of Mouth—(Defective Speech)

Teeth Two Extractives

Throat

Nose

Ears—(Otorrhea)

(Deafness)

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

11. Name and address of next of kin Father Augustus Pennerie #13

12. Category

REMARKS—

A 11

Paterson
Stokenden
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.Regiment of *Royal Newfoundland*Number of Sheet *one*
Signature of O. C. Company *C. O. Dickson / i.c.*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay				
No.		Age on	years	months					
<i>6322</i>	<i>Albert Wey James</i>		<i>20</i>		<i>Fisherman</i>				
Joined	Date	Place and Date of Enlistment	<i>St Johns 18/10/15</i>		Religion				
Joined	Date	Period of	with Colours <i>11</i> years.		Place of Birth				
Joined	Date		with Reserve <i>35</i> years.			<i>Brantford</i>			
Place	Date of Offence	Rank	Charge of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order (preceding with trial)	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St Johns</i>	<i>9/19</i>			

To be carried over.

Army Form B. 121.

Sept 16 1932
Demobilization

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6322 Rank Pte Name James Albert W
 Date of Enlistment 15-10-18 Address Penquite District Fortune
 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	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	E 103	ME 2			" 6	
B 179c	B 120	M 93	1			

Date 7-12-18

W. A. C. Case
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Albert W James

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. 5.60.00
- (b) Clothing Supplied Joseph H. A. Snowling

Date 9-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.139..... to his home at Belloram..... and Release Certificate No. 2.14..... issued.

Date 9-12-18.....

C. S. 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. 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	Form B ✓
E 178	W 3494	B 122	✓ 1	Board 1st	" 2	✓ 1	
F 178a	D 400A	B 1915	✓ 2	do 2nd	" 3	✓ 12	
B 179	D 400B	Form L	✓ 1	do 3rd	" 4		
B 179a	D 400C	Form K	✓ 1	do 4th	" 5		
B 179b	B 103	ME 2	✓ 1		" 6		
B 179c	B 120	M 93	✓ 1				

Date 9-12-18.....

C. S. Dicks Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 12 1918.....

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

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

Date Dec. 12/1918.....

W. Howley Capt
Capt.

Reg. No. 6322 Rank Pte Name James Albert Lane
Attested 15-10-18 Address Boncourt
Allotment 60 Allottee Mrs Augustus James (Mother)
Date of Allotment 1-11-18 Returned from Overseas
Embarked for Overseas Cause

Recd 16th 15th Dec 31-10-18.
7-11-18 Admitted to Barracks Hosp.
12-11-18. Transferred to M. S. A. Hosp

7-12-18.

12 12 18.

**PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.**