



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4542 Name Thomas McBarthy corps R.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Thomas McBarthy
2. What is your full Address? 2. Reveries
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 24 Years Months
5. What is your Trade or Calling? 5. Farmer
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 McBarthy 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 McBarthy SIGNATURE OF RECRUIT.

J. Raymond Signature of Witness.

Thomas McBarthy OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas McBarthy 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 stated 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 22 day of April 1915.

Signature of Attesting Officer W.M. Churchill, 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 compiled with. I accordingly approve, and appoint him to the If enlisted by special authority, such will be attached to the original attestation.

Date April 22 1915 W.M. Churchill, Lieut. Approving Officer.

Place St. John's

† 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 DeBarth
 Apparent age 24 years _____ months. Height 5 feet 11 inches
 Chest Measurement { Girth when fully expanded 39 inches
 Range of expansion 5 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr. Thomas DeBarth
Peruwa | 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 L'epot	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 <u>22-4-18</u>									<div style="font-size: 2em; font-family: cursive;"> Lt Colt. 10 6 Capt. 9 9 Coopt. 23 15 </div>
Joined at <u>St John's</u> on <u>April 22-1918</u>									
<u>Discharged July 10-1919</u>									
<u>Exchanged St John's train to Halifax N.S. 11-6-18</u>									
<u>Reports at St John's 13-1-19 for duty w/ High Commission Office.</u>									
<u>Disembarked for demobilization 22-3-1919</u>									
<u>Arrived Newfoundland 2-6-1919</u>									
<u>Demobilization St John's 10-7-19</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>10-7-19</u> (date of discharge)					<u>1</u> years	<u>80</u> days			
Pensions " " " " " " " " " " " "									

Reg. No. 4572 Rank Pte Name Mc Carthy Thos.

Attested 22.4.18. Address Buncrana,

Allotment 60 Allottee Thomas Mc Carthy

Date of Allotment _____ Returned from Overseas _____

Embarked for Overseas 11-6-18. Cause _____

Recd 23/8.

2nd Div 17-5-18.

NS 3-5-18 to 7-5-18
to be C/P 10/8

C.R. 4542

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, July 16th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 10-7-19

4542 Cpl. T. McCarthy.

C.R. 4542

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 16th, 1919.

The discharge of the undernoted on demobilization has
been APPROVED by O.C. Discharge Depot with effect from
26-6-19.

4542 Cpl. Thos. McCarthy.

C.R. 4542

Extract from Daily Orders Part 11 Unit The Royal Bfld. Regt
St. John's, June 14th, 1919.

4542 Cpl. Thos. McCarthy.

Reported at Headquarters 1-6-19. Ex "Corsican" which sailed
Liverpool, 22-5-19.

C.R. 4542 ✓

Extract of Orders by Lt. Col. B.J. Barton, D.S.O.,
Commanding 2nd Battalion Royal Newfoundland Regt.
12/2/19.

The following having proceeded to the Pay & Record
Office for duty is struck off the strength of this
Bn., from

#4542 Cpl. McCarthy.

14/2/19.

C.R. 4542

Extract from ~~Selected~~ Daily Orders part 11, from Unit The T
Royal Wfld Regt. St. John's, dated June 10, 1918.

#4542 Pte. T. McCarthy.

To be Lance Corporal from 10.6.18

C.R. 4542

Extract from Daily Orders Part 11. from Unit The Royal Newfoundland
Regiment, St. John's dated June 14th 1918.

4542 L/C T. McCarthy.

Embarked for Overseas with draft 11-6218.

C.R. 4542

Extract fr a Daily Orders part 11, from Unit The Royal Wfld. Regt
Coted 25, 1918.

#4542 Pte. Thomas McCarthy.

Attected for General Service with the Royal Wfld. Regt. from
22/4/18 ~~to 25/4/18~~ 2/8/18

McCarthy, T.

C.R. 4542

P.Y.R.O.

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

MEDICAL HISTORY

Surname McCarthy OF Christian Name Thompson Depot
4542

Table I.—GENERAL TABLE.

Birthplace:—Parish Renews County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>22</u> day of <u>April</u> 191 <u>8</u>	on	day of	191
Declared Age ...	at <u>St. Johns</u>	at	years	days
Trade or Occupation ...	<u>24</u> years — days		years	days
Height ...	<u>Fisherman</u>		feet	inches
Weight ...	<u>5</u> feet <u>11</u> inches		feet	inches
Chest Measurement {	Girth when fully expanded....	<u>178</u> lbs.		lbs.
	Range of Expansion...	<u>39</u> inches		inches
Physical Development ...	<u>5</u> inches		inches	inches
Vaccination Marks {	Right	Left	Right	Left
When Vaccinated ...				
Vision ...	R. E.—V= <u>6/6</u> L. E.—V= <u>6/6</u>		R. E.—V= <u> </u> L. E.—V= <u> </u>	
(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>James Paterson</u>			
(Rank)	Major			
Enlisted ...	at <u>St. Johns</u>	at		
Joined on Enlistment....	on <u>22</u> day of <u>Apr</u> 191 <u>8</u>	on	day of	191
Transferred to ..	Corps. <u>Medical</u>	Regtl. No. <u>4542</u>	Corps.	Regtl. No.
Became non-effective by	<u>Nfld Regt</u>			
[Signature]	on	day of	191	on
[Rank]				day of
				191

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W, (T), P., or P. (T), of the Reserve.

1. Unit and Corps *Royal New York*.....
2. Regtl. No. *484th* 3. Rank.....
4. Name *McCarthy J*.....
(Surname) (Christian Names)
5. Age last birthday *25*.....
6. Posted for duty on *Apr. 22/18* at *St. John's*.....
in category (or grade).....
7. Former Trade or Occupation } *Isleman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ; with Regtl. Nos.
(b) Date of Discharge ;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
(a) When
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 178 n (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.
(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

14. State whether the disabilities are
- | | | |
|--|---------------------|-------------------|
| (i.) Service during the present war | (a) attributable to | (b) aggravated by |
| (ii.) Previous active service. | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. } | | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, discharges, etc., a specialist's report is to be attached with radiology where possible and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.*

Station H. D. Camp

Date

Repatriation

Capt. R. A. Mc

Medical Officer in charge of case.

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—
- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. State whether the disabilities are:—
- | | | |
|--|---------------------|-------------------|
| (i.) Service during the present war | (a) Attributable to | (b) Aggravated by |
| (ii.) Previous active service. | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the part of the soldier | | |
- *Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not
- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *Hazebury P. Camp* } President or
Chairman.
Date } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station
Date
Officer in charge, Central Hospital.

} Only applicable in cases of Patients in Hospitals.

OR

Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
Date
O.C. Discharge Centre.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps *Royal New Fus.* 7. Former Trade or Occupation } *Ishe man*
2. Regtl. No. *4542* 3. Rank 7a. If the soldier claims previous service in Army, he should state—
4. Name *McCarthy T.* (a) Former Regts. or Corps ;
 (Surname) *25* (Christian Names) with Regtl. Nos.
5. Age last birthday.....
6. Posted for duty on *Apr 22/18* at *St. John's*
 in category (or grade).....
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 n (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

OPINION OF THE MEDICAL BOARD.

14. State whether the disabilities are
- | | | |
|--|---------------------|-------------------|
| (i.) Service during the present war | (a) attributable to | (b) aggravated by |
| (ii.) Previous active service | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. } | | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, discharges, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation, the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

16. Was an operation performed? If so, when and what was its nature?
 17. If not, was an operation advised and declined?
 18. *In the case of loss or decay of teeth.—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
 19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—
 (a) Discharge as permanently unfit?
 (b) Change to United Kingdom?

Repatiation

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Station *H. D. Lamb*
 Date

Edw. P. Williams
 Medical Officer in charge of case.

Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of :—
 (a) Any disability claimed or discovered.
 (b) The present condition thereof.

22. State whether the disabilities are :—
- | | | |
|--|---------------------|-------------------|
| (i.) Service during the present war | (a) Attributable to | (b) Aggravated by |
| (ii.) Previous active service | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the part of the soldier | | |
- Give details :

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not
 (a) How long is the present degree of disability likely to last?
 (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *Hazleby D Camp* } President or Chairman.
 Date } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station } Only applicable in cases of Patients in Hospital.
 Date } Officer in charge, Central Hospital.

OR
 Discharge Approved under Para. 392 () King's Regulations.
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
 Date
 O.C. Discharge Centre.

FORM K

Nº 4198



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Thomas Mc Carthy, Regl. No. 4542

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 60 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 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2965	Father	Thomas McCarthy	Renews Ferryland District	
Total Allotment, \$				60 ^c

Cancelled 31/1/19

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
B Company
St Johns
May 17 1918

(S) Thomas Mc Carthy
 (Rank) Plt.

FORM K

No 4198 D .



NEW FOUNDLAND CONTINENT
 58, VICTORIA ST.
 LONDON, S.W. 1
 10 JUL 1918
 PAY & RECORD OFFICE

1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Thomas McCarthy, Regl. No. 4542

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz.:

Allotment begins 1st June 1918.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3965	Father	Thomas McCarthy	Reneux Ferryland District	
			Total Allotment, 5	60 c

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
B Company
St Johns
May 17 1918

(Sig.) Thomas McCarthy
 (Rank) Plt

To, The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W. 1.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature.
4542	S/Cpl	McCarthy. 1. T	\$2.50	J. McCarthy

I have the honour to Be, Sir,

Your obedient servant.

J. McCarthy

Date July 12/1918

Capt. Marshall

for your informn. as

Notes

regards Pay arrangements

H. B. J.

27/1/19.

553/103/R. & C. Form
O. 248

MEMORANDUM.

From

From Officer Commanding,
2nd Bn. Royal Newfoundland Regt.
Hazeley Down Camp.

To Officer Commanding,
2/Bn. R. Newfoundland R.,
Hazeley Down Camp, Hants.

To The Chief Paymaster,
Royal Newfoundland Regiment,
ANSWER. London, S.W.

Pay & Record Office,

10th January, 1919

Jan. 13th 1919.

ORDERLIES.

The High Commissioner has asked if an orderly clerk could be obtained for his office.

Will you please choose a good, smart and suitable man and ~~please~~ send him here as early as possible?

I can recommend No. 4542
Cpl. McCarthy for this duty.

He is a smart reliable man, well educated, and anxious and available to go. Will you let me know when and where he is required to report please?

J. B. ...

Chief Paymaster & O. 1 *Records.*

NEWFOUNDLAND REGIMENT
PAY & RECORD OFFICE
Ref. Nos IN 394
Rec'd 14 JAN 1919
Ack'd
Asst
Lt. Col. UBY
J. B. ...
LIEUT. COLONEL
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Comd
R & C
R & C
R & C
Over

HA/JC

[Signature]

TO

Min. 3.

78

From C.P. & O. 1/c Records
To O.C. 2nd Bn.

Many thanks.
Please send Cpl. McCarthy

here at once.

A. J. Munnell
Major

Chief Paymaster & O.1/c Records

Pay & Record Office.
14/1/19.

(4)

*C.P. & O. Records
Cpl. McCarthy is
reporting to you today*

NEWFOUNDLAND CONTINGENT,
PAY & RECORD OFFICE.

493

Ref. Pos. No.

Recd. *A. J. Munnell* 16 JAN 1919

LIEUT. COLONEL,

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Ref. Pos. No.

15/1/19

[Handwritten signature]

Notes Cas...

FILED

Comd

P. & R.

R. & C.

S. & E.

P. S.

553/103/R.&C.

Vice

Officer Commanding.
2/Bn. R. Newfoundland R.,
Hazeley Down Camp, Hants.

Versa

Pay & Record Office,
10th January, 9

Jan. 13th, 1919.

ORDERLIES.

The High Commissioner has asked if an orderly clerk could be obtained for his office.

Will you please choose a good, smart and suitable man and please send him here as early as possible?

I can recommend No. 4542
Cpl. McCarthy for this duty.

He is a smart reliable man well educated, and anxious and available to go. Will you let me know when and where he is required to report, please?

(Sgd) B. J. BARTON Lt.Col.

Major,
Chief Paymaster & O. i/c Records.

394
14/1/19

HA/JC



Min. 3.

708

From C.P. & O. 1/c Records
To O.C. 2nd Bn.

Many thanks.
Please send Cpl. McCarthy

here at once.

Major,

Chief Paymaster & O.1/c Records.

Pay & Record Office.

14/1/19.

No. _____

N.F.P./96.

NEWFOUNDLAND CONTINGENT

From:

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

To: Officer Commanding,

Cpl J. McCarthy

January 28 1919

ALLOTMENT

No. *4542 Cpl J. McCarthy*

With reference to the enclosed application for cancellation of Allotment of the above-named, / / (), kindly ascertain and advise:-

1. Whether the Allotment is payable to a dependent as a sole or contributory means of support?
- 2: Whether Separation Allowance (in addition to Allotment) is being paid to any person in Newfoundland or elsewhere on his behalf, and if so, to whom?
3. The reason for cancellation.

Should the Soldier's reply to "2" be in the affirmative he should be informed that Allotment may not be cancelled without reference to the Minister of Militia in Newfoundland, to whom reason for cancellation will require to be submitted.

F. W. Marshall
Major.

Chief Paymaster & O. i/c Records.

Jan. 28 1919

1 No

2 No

3 Insufficiency of funds

Cpl J. McCarthy

ORIGINAL

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

ENTERED
PAY LEDGER
NHM. ROLL
ALLOT. INDEX
REGISTERED
EXAMINED

1. I, (No) 4242 (Rank) Cpl (Name) McCarthy J
 hereby apply for cancellation of Allotment made by me on N.F.P./11
 No. 4198^d dated 1-6-18 in favour of
Father Thomas McCarthy Renew rfd
 for \$ — cts 60 per diem.

Such cancellation to take effect on the 31st day of
January 1919

2. I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, in time to become operative at above-nominated cancelling date, and that in the event of such non-delivery, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage in the Pay Books as may be necessary, or otherwise to refund such overpaid amount or amounts.

Dated at Pay & Record Office
Jan 23rd 1919 Cpl J. McCarthy
 Allotter.

Approved and Witnessed:
 NEWFOUNDLAND CONTINGENT,

J. J. Macleod
 CHIEF PAYMASTER & OFFICER IN CHARGE, RECORDS.

COPIES SENT.		
TO	NO.	DATE
M. G. M.	1937/31	3/2/19
O.C. 1st. Div.		
2nd. Div.		

N.B. - To be made out TRIPLICATE and delivered to the Pay & Record Office not later than the date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

To: Regimental paymaster,

R.N.F

On 2/1/19 an A.F. N.151C NO. SA/2/1354 was sent you for
acceptance for amount of £ 7:12: - on account of

2/RN Contg Regt., attached to SL Bombing Sch.
the first name being 4342 Cpl McCarthy.

The acknowledgement portion of the above not having been
returned to this office, will you please cause same to be returned
immediately or let me know when it may be expected.

Robert H. Malah

Actg., Paymr.,
for Command Paymaster, Southern Command.

SALISBURY.
25/1/1919.

NEWFOUNDLAND
PAY & OFFICE

Ref. Nos. *3262*

Rec'd *30 APR 1919*

Ack'd *Am'd*

Ref. Nos. *101*

DOMINION OF NEWFOUNDLAND



HIGH COMMISSIONER'S OFFICES.

CABLE ADDRESS
RURALITY
TELEPHONE
VICTORIA 2302

*58, Victoria Street.
Westminster, S.W.1.*

29th April, 1919.

Sir,

I am directed by the High Commissioner to make formal application for a passage to Newfoundland on the S/S "Corsican" for No.4542 Corporal T. McCarthy, at present employed in these offices.

Corporal McCarthy has business interests in Newfoundland in connection with the Fisheries that call for his early return to the Dominion, and the High Commissioner will be obliged by your reserving him accommodation as requested.

I have the honour to be,

Sir,

Your obedient servant,

H. Gordon
Secretary.

Chief Paymaster & O.i/c Records,
Newfoundland Contingent,
58, Victoria Street,
S.W.1.

H. L. Lathrop, Jr.

4542

May 1891.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4542 Rank Cpl Name J. Mc Carthy Thomas
 Date of Enlistment 2-24-18 Address Renewy District Newfoundland
 Occupation Fisherman Classification for Discharge E Medical Category H1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	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		do 2nd	" 3	3
B 178b	D 400B	Form L		do 3rd	" 4	
B 178c	D 400C	Form K		do 4th	" 5	
B 179a	B 103	ME 2			" 6	
B 179b	B 120	M 93				

Date 11-6-19 O. C. Discharge Depot. J. Mc Carthy

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

J. Mc Carthy

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 Ambleton

Date 12-6-19

O. i. c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1748 to his home at Romieux, Fennyland and Release Certificate No. 2670 issued.

Date 12-6-19

J. A. Snowball
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 12-1-19 SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACT

Date 12-6-19

J. A. Snowball
Depot Paymaster.

Discharge approved for 26-6-19

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

N.F. 1 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
B179c	B 120	M 93		

2 Form B

Date 12-6-19

J. A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 26 1919

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

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

Date

The Royal Newfoundland Regiment

Class for Demobilization
 6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

 Date 10.6.49

 Regimental No. 4542

 Name Mr. C. Arthur Thomas Corp

 Address R. ...

 Present Medical Category A.1

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

Members of Board

R.H. Jant Corp
 O.C. Discharge Depot.

P. ...
 Senior Medical Officer

De ...
 M. O. Depot

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4542 Rank Cpl Name The Earlly, T. Ross
 Intended place of residence Remount, Newfoundland
2. Occupation Fisherman
 Classification of soldier E Medical Category A'
3. The above named man is discharged in consequence of..... **DEMOBILIZATION**.....

Eligible for War Service Gratuity

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

Place JUN 12 1919
ST. JOHN'S
 Date

for [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. JOHN'S
JUN 12 1919

SUBJECT TO SETTLEMENT OF OVERSEAS PAY
[Signature]
 Signature of soldier
[Signature]
 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. JOHN'S
JUN 12 1919

[Signature]
 Signature of soldier
[Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22-4-18 No of days on Military
 Discharged from service JUN 26 1919 plus 14 days Service 445

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
 Date JUN 26 1919

[Signature]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St. John's, Nfld
 Date July 10/1919
- [Signature]
 Officer in Charge
 The Royal Newfoundland Regiment

a. G. B. 2079 / 2883

July 010, 1919

#4242 Cpl. Thomaw McCarthy,

Renews,

Frederick Dist.

Dear Sir:-

Please find enclosed Discharge Certificate
No. 2863.

Yours truly

Captain
Paymaster & U.i/c Records

July 12, 1919

#4542 Cpl. Thomas McCarth.,

renews,

Perryland Dist.

Dear Sir:-

Referring to your application I enclose cheque for
Seventy dollars (\$70.00), being amount of the first payment
due you on account of the War Service Gratitude.

Yours truly

Paymaster & C. I. O. Records Captain,

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name..... *Thomas* 2. Surname..... *McCarthy*
3. Rank..... *Corporal* 4. Regtl. No..... *4542*
5. Address in full to which future payments of gratuity are to be forwarded..... *Regimentary Barracks*
6. Date of enlistment in the Regiment..... *April 22/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Not applicable
8. Relationship of such dependants..... *do*
9. Address in full of such dependants..... *do*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No*
11. Were you on active service only in field, if so, give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service, whether in field or overseas..... *Fourteen months and four days* 1.1

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

No applicable

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

116.50 Cashm, Co

15. Have you been issued with a War Service Badge? *no*

16. Have you, during the present war, served in the Imperial Forces? *no*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *no*

19. Are you now serving in the Res? *no* If not give- (a) date of discharge *June 26/19* (b) Reason for discharge

Demobilization

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places and dates of such service.

England

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

22. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? If so, was such reversion in consequence of Misconduct or inefficiency?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

(b) If so, was such reversion in consequence of Misconduct or inefficiency?

19. Are you now serving in the Res? If not give- (a) date

Signature of Applicant: *Thos Mc Carthy*
Place of Residence: *Renews. Derry Lane. District.*
Declared before me at: *D John. Neph,*
This *12th* day of *June* 191*9.*

Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of affidavits.

John Mc Carthy

POST DISCHARGE PAY.	War Service Gratuity.	Net amount due
Date paid <i>£11</i> Paid <i>£11</i>	Soldier. Dependent	
.....
.....
.....
Certified correct.	Paymaster	

Signature of Applicant:
Place of Residence:
Declared before me at:
This day of

Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.	War Service Gratuity.	Net amount due
Date paid	Paid	
Soldier. Dependent		
.....
.....
Certified correct.	Paymaster	

Signature of Applicant:
Place of Residence:
Declared before me at:
This day of

Signature of Barrister of the

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 former Occupation

J. Mc Carthy

Signature of Man.

Reg. No.

4542

J. H. Snowball

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S

Date

191

The Royal Nfld. Regiment

DEMOBILIZATION

No. 1542 Rank

Name McCarthy

Warned for demobilization on

JUN 12 1919

HAMMERMILL
BOND



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 Office 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 *Thos McBarthly*

Regiment from which discharged **Royal Newfoundland**

Regimental number *11542*

Intended address *Renews*

Height on discharge *5* Feet *10*

Color of hair on discharge *Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *large*

Christian name of Father *Thomas*

Christian name of Mother *Elizabeth*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Renews, Jan. 19th 1894*

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)

T. McBarthly

Cpl.
(Rank)

Station

Date

10-6-19

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

FORM K

No 4198



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Thomas Mc Carthy, Regl. No. 4542

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz. :

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3965	Father	Thomas McCarthy	Renews Ferryland District	
Total Allotment, \$				<u>60⁰⁰</u>

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
B Company
St Johns
May 17 1918

(Sig.) Thomas Mc Carthy
 (Rank) Plt

C.R. 4542

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal-1914-1919.

Date.....*Nov 19th 1919*.....
Place.....*Keweenaw*.....

Name.....*Thos. McCarthy*.....

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of Victory Medal 1914-1919.

NO. *4134* .. NAME. *Samuel Snow*

DATE *Jan. 20*
PLACE *Lewisporte*

please let me know
if there is any
money. Tell us

July 13-18

2/11/18

5488
5733
5737



Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here



OCT 20 1921 1921.

The accompanying ~~Victory Medal~~ and/or British War Medal

is/are forwarded herewith to

Thos. McCarthy

in respect of his service as No. 4542 Rank A/Cpl.

Name T. McCarthy Royal Nfld. Regt.
Infantry Corps.

Receipt of the same should be acknowledged hereon.

Received British War Medal

Signature Thos McCarthy

Date Oct 26th 1921

Address Renews

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 15242 Rank Cpl. Name J. McCarthy Honus

Date of Enlistment 2-2-18 Address St. John's District Newfoundland

Occupation Postman Classification for Discharge E1 Medical Category H1

Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	B 208	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board Ist.	" 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 11-6-19 J. McCarthy O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

J. McCarthy

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) Clothing Supplied Ambleton

Date 12-6-19

O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 11148 to his home at and Release Certificate No. 2670 issued.

Date 12-6-19

J. A. Snow 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.....
SUBJECT TO ADJUSTMENT OF PAYABLES BY ACC.

Date 12-1-19

J. A. Snow Capt.
Depot Paymaster.

Discharge approved for 26-6-19

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

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
B179c	B 120	M 93		

2 Form B

Date 12 6 19

J. A. Snow Capt.
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 26 1919

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

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

Date June 19/19

J. A. Snow Capt.
Records

Reg. No. 4542 Rank Cpl. Name McCarthy, J.

Attested _____ Address Renews,

Allotment _____ Allottee _____

Date of Allotment _____ Returned from Overseas 1-6-19

Returned on S.S. Cossican Cause Discharge

12-6-19
26-6-19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED