



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6334 Name Gaden Noel Corps 6th

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------|
| 1. What is your name? | 1. <u>Gaden Noel</u> |
| 2. What is your full Address? | 2. <u>Harbor Grace</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>28</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, Gaden Noel 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.

Gaden Noel SIGNATURE OF RECRUIT.
28/10/15 Gaden Noel Signature of Witness.
Pte W. Spru

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Gaden Noel 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 28 day of October 1915.
 Signature of Attesting Officer P. B. Dickson

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 6th If enlisted by special authority, such will be attached to the original attestation.
 Date Oct 29 1915 1915
 Place St. John's
Robertson, Capt. } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
 ‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) re-enlisted in the (Regiment) on the (Date)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Gaden Noel
 Apparent age 21 years months Height 5 feet 4 inches

Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Eliager Noel
Harbor Grace South 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 <u> </u> on <u> </u>									
Total Service forfeited as above									
Total Service towards Engagement to					(date of discharge)				
Pensions									



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6334 Name Gaden Noel Corps 6 of C

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------|
| 1. What is your name? | 1. <u>Gaden Noel</u> |
| 2. What is your full Address? | 2. <u>Harbor Grace</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>21</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, Gaden Noel 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.

29/10/15 SIGNATURE OF RECRUIT.
Gaden Noel
Pte RA Spry Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Gaden Noel 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 25 day of October 1918
 Signature of Attesting Officer Ch. D. Dickson

↑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 29 1918 1918
 Place ST. JOHN'S
 The Royal Newfoundland Regiment
 Major } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
 ‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) re-enlisted in the (Regiment) on the (Date)

6334

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Gaden Noel

Apparent age 21 years months. Height 5 feet 4 inches

Chest Measurement { Girth when fully expanded 37 inches
Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Eleazer Noel
Harbor Grace Ark | 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 <u> </u> on <u> </u>									
<u>Discharged July 17/1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u> </u> [date of discharge] <u> </u> years <u> </u> days									
Pensions <u> </u> [" "] <u> </u> " <u> </u> "									

6334
C.R. 6344

Extract from Daily Orders part 11, Depot St. John's dated Jan.17/1919.

The discharge of the undernoted on demobilization have been APPROVED
by O. C. Discharge Depot on noted dates:- .

#6344 Pte. Madan Noel.

3

15-1-19.

C.R. 6334

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, dated October 30th. 1918.

Strength Increases.

6334 Pte. Gaden Noel.

Attested for General Services with the Royal Nfld. Regiment, 28/10/18.

C.R. 6334

Extract of DAILY ORDERS, PART II, Depot St/ John's, dated
14/2/19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records on noted date.

12/2/19.

#6334 Pte. Gaden Noel.

C.R. 6334

Extract from Daily Orders part 11, Depot
St. John's dated Nov. 6th., 1918.

#6334 Pte. G. Neel.

ADMITTED BARRACKS HOSPITAL 5/11/18

BC,

C.R. 6331

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

#6331 pte G. Noel.

Discharged from Barracks Hospital 9/11/18.

BC.

Coel. 4

6334

Ray rept

February 12th., 1919

#6334 Pte. Gaden Noel,
Harbor Grace.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 858."

Yours truly,

Captain,
Paymaster & O.i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6334 Rank Pvt Name Gaden Noel

Intended place of residence. St. John's

2. Occupation Fisherman

Classification of soldier C Medical Category 4th

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 JAN 15 1919

Date

W. H. L. 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. John's

15-1-19

Gaden Noel
Signature of soldier

W. H. L. Capt
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date Jan 15th 1919

ST. JOHN'S

Gaden Noel
Signature of soldier

W. H. L. Capt
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 28.10.18 No of days on Military

Discharged from service 15-1-19 plus 28 days Service 108 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

JAN 15 1919

Date

R. H. L. Capt
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 February 12/1919

W. H. L. Capt
Signature of witness
The Royal Newfoundland Regiment

2079/858

4
30
37
34
12
108

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6334 Rank Private Name nod Gaden
 Date of Enlistment 28.10.18 Address W Grace District W Grace
 Occupation Tradesman Classification for Discharge C Medical Category A II
 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 12/12/18

W. H. M. Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Gaden nod

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied *Joseph A. Snow*

Date 15-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 492R to his home at H. Quaker and Release Certificate No. 782 issued.

Date 15-1-19 C. D. Deeks 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 12-2-19

Date 13-1-19 Joseph H. Snowford
Depot Paymaster

Discharge approved for 15 1. 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	1 2 3 4 5 6 J. H. Snowford B
E 178	W 3494	B 122	Board 1st	" 2	
F 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 15 1. 19 C. D. Deeks Capt
Demobilization Officer.

APPROVED.

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

Date JAN 15 1919 R. H. J. Capt
O. C. Discharge Depot.

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

Date

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

MEDICAL HISTORY

Surname Holl

OF

Christian Name Gaden

Table I.—GENERAL TABLE

Birthplace:—Parish Harbour Grace S County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <u>28th</u>	day of <u>Oct</u>	on	day of
	at <u>St John's</u>		at	
Declared Age	<u>20</u>	years		years
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u>	feet <u>4</u>		feet
		inches		inches
Weight	<u>131</u>	lbs.		lbs.
Chest Measurement	Girth when fully expanded		Girth when fully expanded	
	<u>37</u>	inches		inches
	Range of Expansion		Range of Expansion	
	<u>3</u>	inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
Vision	R.E.—V=	<u>6/24</u>	R.E.—V=	
	L.E.—V=	<u>6/24</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)				
(Rank)	Medical Officer		Medical Officer	
Enlisted	at <u>St John's Nfld</u>		at	
	on <u>28th</u>	day of <u>Oct</u>	on	day of
		19 <u>18</u>		19 <u>11</u>
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<u>Royal Nfld Regt</u>	<u>6334</u>		
Transferred to				
Became non-effective by	on	day of	on	day of
		19 <u>11</u>		19 <u>11</u>
(Signature)				
(Rank)				

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 a miner

Gaden road

Signature of Man.

W. Dicks Capt.

Signature of the Vocational Officer or his Representative.

Reg. No.

6334

Place

St John

Date

Jan 10th 1919

H. Grace

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

25-11-15

Regimental No.

6334

Name

Noel Gaden (Pte)

Address

H. Grace South

Present Medical Category

A ii

Recommended for:—

(a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board

R.H. Lat
O.C. Discharge Depot.

P. Peterson
Senior Medical Officer

Sed Burden
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 *Noel, Gaden.*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *6334*
 Intended address *Harbour Grace South, Nfld.*

Height on discharge Feet
 Color of hair on discharge *Light brown*
 Complexion *Fair*
 Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *Normal.*
 Christian name of Father *Eliazar*
 Christian name of Mother *Annie.*

Wife's maiden name in full
 Date and place of marriage
 Christian names of children } *not married.*

Place and date of soldier's birth. *Harbour Grace, Nov. 14th 1896.*
 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)

Station

Prince's Rank.

Date

Gaden Noel (Rank) *Plt.*
12/12/18.

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.

J. R. Steele Plt.
 Medical Officer i/c Hospital.
 Unit, or Command Depot.

Station

Date

FORM K

No 6687



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Gaden Noel, Regl. No. 6334 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 1 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6319	Mother	M. Elvayer Noel (Anne)	South Side St. John's	60
			Total Allotment, \$	60

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

(Sig.) Rosmith Lieut
for
Officer Commanding
B Company
St. John's
30-10-1918

(Sig.) Gaden Noel
(Rank) Pte

Report for Service
1941

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on Oct 28 1941

1. Name Gaston Noel Age (a) Declared 21
(b) Apparent

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

What severe illnesses have you had? none

Eyes brown
Hair fair

6334

Mark 5-4

Weight 131

4. Eyesight (a) Left 6/24

(b) Right 6/24

5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~

Measurement (a) Expiration 34 (b) Inspiration 37

7. Examination of Heart ~

8. Examination of Urine ~

9. Examination of Mouth—(Defective Speech)

Teeth Upper teeth
Throat
Nose
Ears—(Otorrhea)
(Deafness)

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

11. Name and address of next of kin Father, Cleaver Harbour, Grace
South

12. Category

REMARKS—

A11

Waterson
Swinden
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet

Army Form B. 121

Forms
B 121
39

Number of Sheet one
Signature of O. C. Company C. S. Dufresne

Regiment of Royal Newfoundland

Signature of O. C. Company C. S. Dufresne

Regimental Number and Name		Enlistment		Grade
No	<u>6334</u>	Age on	<u>21</u> years	<u>4</u> months
<u>Saden Noel</u>		Place and Date of Enlistment	<u>at St John's</u> <u>23/10/15</u>	
Joined	Date	Period of	with Colours	years
Joined	Date	with Reserve	<u>10 1/2</u>	<u>3 1/2</u> years
Joined	Date	Place of Birth <u>Harbour Grace</u>		

Good Conduct Badges, Service Pay or Proficiency Pay

Place	Date of Offence	Rank	Cases of Discharge	OFFENCE	Names of Witnesses	Punishment Awarded	Date of award or of order dispensing with trial	By Whom Awarded	REMARKS
				<u>Demobilized</u>	<u>St John's</u>	<u>12</u>	<u>2</u>		<u>19</u>

To be carried over

The Royal Newfoundland Regiment

6334

DEMOBILIZATION OF

Reg. No. 6334 Rank Private Name Noel Gaden
 Date of Enlistment... 28.10.18... Address... H. Grace... District H. Grace
 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. Pj36.	B 268.	B 121.	1	N.F. Med.	D.F. 1.	1
B 178.	W 3494.	B 122.		Board 1st.	" 2.	
B 178a.	1. D 400A.	1. B 1915.	2	do 2nd.	" 3.	3
B 179.	D 400B.	Form L.		do 3rd.	" 4.	
B 179a.	D 400C.	Form K.	1	do 4th.	" 5.	
B 179b.	B 103.	ME 2.		" 6.	" 6.	
B 179c.	B 120.	M 93.	1			

Date. 12/12/18

W. H. Kelly, Capt.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Gaden Noel

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~~

Joseph A. Snow

Date. 15-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 492 R to his home at 71 Grace and Release Certificate No. 782 issued.

Date 15-1-19

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 12-2-19

Date 15-1-19

Joseph H. Shaw
Depot Paymaster.

Discharge approved for 15-1-19

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
F 178a	D 400A	B 1215	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 15-1-19

Chadwick Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

JAN 15 1919

Date

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

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

Date January 20th 1919

Chadwick
Depot Paymaster

Reg. No. 6334 Rank Pte Name Noel Gaden
Attested 28-10-18 Address H 2 Grace.
Allotment 60 Allottee Mrs telegraph hort. Mother
Date of Allotment 1-11-18 Returned from Overseas
Embarked for Overseas Cause

Vacc 29-10-18
5-11-18 Admitted to Barracks Hosp, and transferred
to General Hosp.
9-11-18 Discharges from Barracks Hosp.

12-12-18 PASSED TO DEMOBILISATION OFFICER

15-1-19. DISCHARGE APPROVED ON DEMOBILISATION.