



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4606 Name Gilbert Squares Corps Rif

### Questions to be put to the Recruit before Enlistment

1. What is your name? ..... 1. Gilbert Squares
2. What is your full Address? ..... 2. St Phillips
3. Are you a British Subject? ..... 3. yes
4. What is your age? ..... 4. 18 Years 0 Months
5. What is your Trade or Calling? ..... 5. machinist
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, Gilbert Squares 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.

Gilbert Squares SIGNATURE OF RECRUIT.  
22 4 18 Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Gilbert Squares 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 Johns on this 22 day of April 1915

Signature of Attesting Officer Geo. Stuart King

### 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 April 22 1915 }  
 Place St Johns } 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) .....

Recd 29.4.15

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name John Squires  
 Apparent age 18 years     months. Height 5 feet 8 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 4 inches  
 Distinctive marks    

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Squires  
Sr Phillips | Relationship Father  
 Particulars as to Marriage

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

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

## Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

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



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4606 Name Gilbert Squires Corps Rif

### Questions to be put to the Recruit before Enlistment

1. What is your name? ..... 1. Gilbert Squires
2. What is your full Address? ..... 2. St Phillips
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years        Months
5. What is your Trade or Calling? ..... 5. Machinist
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, Gilbert Squires 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.

Gilbert Squires SIGNATURE OF RECRUIT.  
22.4.18 Gilbert Squires Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Gilbert Squires 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 Johns on this 22 day of April 1918

Signature of Attesting Officer Geo L Barty Magd

### † 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 1918  
Place St Johns } 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) .....

Received 29.4.18

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Julius Squires  
 Apparent age 18 years      months. Height 5 feet 8 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 4 inches  
 Distinctive marks     

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Squires  
St. Phillips | 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>									<i>Leave Capt. 13-7-18</i> <i>Reverts to Rank to own credit 17<sup>9</sup>/<sub>18</sub></i>
Joined at <u>St. Chris on April 22-1918</u>									
<u>Discharged June 19/19</u>									
<u>Report for duty 29-4-1918</u>									
<u>Embarked St. Chris SS. Colombella to Halifax N.S. 22-7-18.</u>									
<u>Embarked for B.C.S. 23-11-18</u>									<u>Keen injured France 28-11-18.</u>
<u>Joined Battalion in the field 5-1-19</u>									
<u>Admitted to Gen Hosp Queen "Influenza" 19-2-19</u>									<u>Transferred to Lt. 1<sup>3</sup>/<sub>19</sub></u>
<u>Admitted 3 Lt. 1st Waindworth 3<sup>3</sup>/<sub>19</sub> Luncheon Co 12-4-1919.</u>									
<u>Posted to Winchester 12-4-1919</u>									
<u>to Newfoundland for demobilization 22-5-1919.</u>									<u>Arrived Newfoundland 6<sup>6</sup>/<sub>1919</sub></u>
<u>Demobilization St. Chris 29-6-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 29-6-1919 (date of discharge) 1 years 62 days  
 " " Pensions " " " " " " " " " " " "

Extract from Daily Orders Part 11 Unit The Royal WFLD. Regt.  
St. John's, June 30th, 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by officer i/c Records from 29-6-19.

5  
4606 Pte. Gilbert Squires.

6  
C.R. 4606  
2



CR. 4604

Extract fro, Daily Orders part II, Depot Winchester by Lieut.  
Col. B.J. BARTON, D.S.O., Officer Commanding 2nd., Battalion.  
dated 14-4-19.

The following having reported back from the 1st Battalion is  
taken on the strength ~~of the~~ and posted to "H" Co from 12-4-19.

#4604 Pte. G. Squires.

C.R. 4606

Extract from Daily Orders Part 11 Unit The Royal Field Regt.  
St. John's June 19th, 1919.

The Discharge Of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 15-6-19.

4606 Pte. G. Squires.



C.R. 4606

Extract from Daily Orders Part XI Depot, St. Johns,

Date

June 18th 1919.

4606, Pte. G. Squires.

Reported at Headquarters 1/6/19. ex "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4606-

Extract of Casualties from Pay & Record Office, LONDON.

Dated April 5th/19.

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The undermentioned man was granted discharged from 3rd  
London General Hospital, on 3/4/19 and was granted furlough  
from that date to 12/4/19.

Classified I Duty.

#4606, Pte. G. Squires.

Authority:

A.F.W. 3016, from O.C. 3rd London General Hospital.

C.R. 4606<sup>2</sup>

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.  
"In the Field" 31-3-19.

4606 Pte. G. J. Squires.

Invalided to U.K.. 2-3-19 Sick.

C.R. 4606

Mar. 6th, 19

Dear Mr. Squires :-

I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that No. 4606, Private Gilbert Squires at 3rd London General Hospital Wandsworth suffering from influenza

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Minister of Militia.

Mr. Geo. Squires

St. Philips

St. John's West

C.R. 4606

Extract from telegram from Syn. to Mil. dated March 5th., 1919.

Wandsworth Influenza 4606 Squires.

C.R. 4606

Extract from Casualties received from Pay & Record Office,  
London , admitted to Wandsworth Hospital on 3/3/19.  
suffering from Influenza.

*dated 30/3/19*

*4606*  
#4606 Pte. G. Squires.

C.R.

C.R. 4606

Extract of War Office List No. H.A. 35116 from  
Pay & Record Office, London, dated Feb. 28th/19.

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Admitted to <sup>6</sup>General Hospital Rouen Feb. 19th/19.

INFLUENZA SEVERE.

#4606 Pte. S.G. Squires.

C.R. 4606

Extract from Nominal Roll of draft No. 26, from the 2nd., Battalion  
of the Royal Newfoundland Regiment to the 1st., Battalion  
P. I. F., embarked Southampton 23/11/18.

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#4606 Pte. G. Squires.



C.R. 4606

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated July 25, 1918

The following man embarked for overseas on H.M.S.  
"Columbelle" July 22, 1918

#4606 B/Up1. Gilbert Squires.

C.F. 4606

2

Extract from Daily Order part 11, from Unit The Royal  
Mild.Regt.St.John's dated July 13, 1918.

#4606 Pte.G.Squires.

To be Lance-Corporal from July 13, 1918.

C.R. 4606

Extract from Orders from Lieut. Col., B. J. Barton  
Commanding 2nd. Battalion of the Royal Newfoundland  
Regiment.

The undermentioned reverts to Pte. at his own request.

4 4606 L/C. G. Squires.

G.R.

4606

Extract from Daily Orders part 11, from Unit The Royal  
Newfoundland Regiment, St. John's, dated May 1st, 1918.

#4606 Pte. Gilbert Squires.

To report 29/4/18 extended to 15/5/18.

C.R. 4606

Extract from Daily Orders part 11, from Unit The Royal Wfld.  
Regt. St. John's, dated April 23, 1918.

#4606 Pte. Gilbert Squires.

Attested for General Service with the Royal Wfld. Regt. from  
22/4/18 to report 29/4/18.

FORM K

No 4449



1ST. NEWFOUNDLAND REGIMENT

**ALLOTMENTS**

I, Gilbert Squires, Regl. No. 4606

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 75 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz.:

Allotment begins 16-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
<u>4242</u>		<u>Bank of Montreal</u>	<u>Water St.</u> <u>St. Johns</u>		<u>50</u>
			Total Allotment, \$		<u>50</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.) A. G. Summers  
Lieut.  
Officer Commanding  
B Company  
St. Johns  
10-6-1918

(S) L. J. ...  
(Rank) Private

*H. Squires*

C.R. 4606

*P. 180*

**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi. 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 Newfoundland* 7. Former Trade } *machinist*  
or Occupation }  
2. Regtl. No. *4606* 3. Rank... *plg* 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.  
4. Name *Spurna* (Surname) (Christian Names)  
5. Age last birthday. *19*  
6. Posted for duty on..... at..... 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 (if any)  
(b) Where  
(c) Opinion of Court

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 b (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. *2nd*  
12. Place of origin of disability. *nt*  
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. *nt*



14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                        | ✓                   |                   |
| (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, disabilities, &c., 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.)

*The Complaints of me  
Cataract of the throat Contracted on  
active Service.*

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.

*Repatriation*

*W.E. Prosser. Capt R.A.M.C.*

Medical Officer in charge of case.

Station *Hazeley Down* .. .. .

Date *26/4/19* .. .. .

\* 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



No. 18541/2032



*015193*  
*[Handwritten signature]*

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2/Bn Royal Nfld. Regt.  
Winchester.

16th November 1918

Nov. 18th 1918

Subject: 4606, Pte. G. Squires, D

With reference to the following telegram (9818 ) from the Hon. Minister of Militia, received

Receipt hereunder.

*Kara*

LIEUT. COLONEL,  
~~COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.~~  
Officer Comdg. 2nd Batt N  
Royal Newfoundland Regiment

Pay to 4606 Squires £6:3:3

Received the sum of Six pounds

Draft £ 6:3:3 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

three shillings three pence account of cable remittance from Newfoundland.

*[Handwritten signature]*

for Chief Paymaster & O. i/c Records.

G. Squires.  
No. 4606 Rank Pte.

Witness: A. L. Carter, Pte.

15/3/19

To: Chy Treasurer  
of R. Hfld Regmt.  
of those pay to (4606)  
Pte G. Squires

The sum of one pound  
and no pence  
account G. Squires

one pound approved  
J. Thomas Capt.  
15/3/19

W. K. £ 1-0-0 mR 15/3/19  
Receipt No 1680

KEEPED  
DIED

7-3-19

one  
pound  
offered  
to  
Capt

paymaster  
Royal N. Y. L. D.  
MAY 1919  
M. R. A. M. S.

Please pay to (4606)  
Pte Squires the sum of  
1 pound and deduct  
from account.

Dr. 1-0-0  
7/3/19 W. R. 1558  
U. S. Squire

Yea

O. R. # - 10-0

M.R. 2/2/19 Receipt No. 1871

31.3-19

To chief paymaster  
of Regt. Infld. Regt.  
of the 1st Regt. Cavalry  
(4666) the G. S. Squire the  
sum of \$2.50 and  
deduct from account  
G. S. Squire

Approved  
F. J. Thomas Capt  
2/2/19

A.N. £ 1-0-0 N.R. 4419

Receipt No. 1551

6/3/19

To Chief Paymaster  
of R. w/ld. Regmt. Those pay  
to, (4606) Pte G. S. [unclear]  
the sum of 4s [unclear] and  
deduce from [unclear]

~~HC~~ Pte G. S. [unclear]



affirmed  
[unclear]





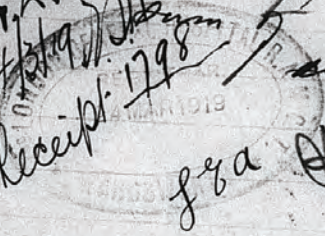
24/3/19

In Chief payment of  
Royal Dept. Rent.

Please pay to bearer  
U. S. Green the  
four pounds and  
pence from account.  
U. S. Green

gca ~~U.S. Green~~  
M. S. Green

24/3/19  
Receipt  
1798  
0.0  
Sgt.



No. 4464/42

From: NEWFOUNDLAND

CONTINGENT

N.F.P./80.

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

To: Officer, Commanding,  
3rd. London General Hospital,  
Wandsworth,  
S.W.

20th March 1919

4606 Pte. Squires G.

With reference to the following telegram from the Minister of Militia, / / ( 84 )

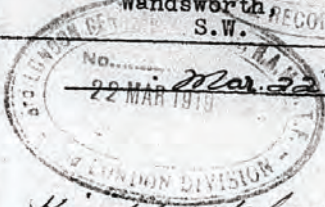
"Pay to- 4606 Squires,

£7. 0.0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

*R.A. Minnis*  
Chief Paymaster & O. i/c Records.



*Kindly place this remittance to the credit of 4606 Pte Squires G. etc Please*

*H. J. ...*

*for. C. C.*

3rd LONDON GENERAL HOSPITAL  
WANDSWORTH, S. W.

*Deposited*  
*20/3/19*

No 8388/942

N.F.P. /79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2nd Batt. Ryl. Nfld Regiment  
Winchester

29th April 191 9

4606 Pte G. Squires

With reference to the following  
telegram from the Minister of  
Militia / / (154.)

"Pay to-4606 Pte G. Squires

£5-0-0

Cheque <sup>4</sup> £5-0-0 is enclosed.

for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

*A. W. Munro*  
Chief Paymaster & O. i/c Records.

May 1<sup>st</sup> 1919

Receipt hereunder.

*J. Seymour*  
for **LIEUT. COLONEL**  
**COMMANDING 2ND BR. ROYAL NEWFOUNDLAND REGT.**

Received the sum of Five

Pounds in respect of  
telegraphic remittance from the  
Minister of militia.

*E. Squires*  
No. 4606 Rank Private

Witness *C. Kendall*

25/3/19

To Chief paymaster of  
Royal Infld Regt.

Please pay to the

(14606) ~~U. James~~ the sum

of one pound and  
no pence for account.

U. James

AC

approved

James Cuff

25/3/19



O.K.f - 15-0

M.R. 25/3/19

Receipt No. 1811

26/3/19

To Chief paymaster  
of Royal Nfld. Regt.  
Please pay to bearer.  
(4606) The Squire.  
The sum of two  
pounds and did not  
from account.  
E. Squire

Paid from No. 2 Accch

Mar. 26/19 E. Squire  
Wm. [unclear]



He

Squires, G.

4606

Hay Sept.

June 29, 1919

#4606 Pte. Gilbert Squires,

St. Philip's,

St. John's West.

Dear Sir:-

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

Yours truly

Captain,  
Paymaster & O.i/c Records.

25316

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 Gebery 2. Surname Senior

3. Rank Pte 4. Regt. No. H. 60. 6.

5. Address in full to which future payments of gratuity are to be forwarded St. Philips St John's West,

6. Date of enlistment in the Regiment April 23/18.

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 dependents DO

9. Address in full of such dependents 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 Hfld. If so, give dates and particulars of such service. Overseas

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. fourteen months and one week.



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

*Not 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.

*£ 79.04 Clothing Etc*

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 Regt.? *no*. If not give? - (a) date of discharge. *June 29/19.* (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.

*France & Germany*

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.

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.

*Gilbert Squires*

Signature of Applicant:

Place of Residence: *St Philips, St Johns West.*

Declared before me at: *St Johns Road,*

This *14<sup>th</sup>* day of *June* 19*19*.....  
*John McCarty*

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

POST DISCHARGE PAY.				
Date paid	paid	Paid	War Service	Net amount
	Soldier.	Dependant.	Gratuity.	due
.....	.....	.....	<i>4</i>	<i>280</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Paymaster

June 29, 1919

#4606 Pte. Gilbert Squires,  
St. Philips,  
St. John's West.

Dear Sir:-

Please find enclosed Discharge  
Certificate No. 2497.

Yours truly

Captain  
Paymaster & O.i/c Records.

# 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.~~  
To resume former Occupation.

*Robert Quinn*

Signature of Man.

*J. H. Crawford*

Signature of the Vocational Officer or his Representative.

Reg. No. 4606

ST. JOHNS

Place

Date 191

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4606 Rank Pte Name Squires G.  
 Intended place of residence St Phillips
2. Occupation Machinist  
 Classification of soldier 2 Medical Category AI
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 ST. JOHN'S.  
 Date JUN 14 1919 *J. H. News H.*  
 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 14 1919  
*Gerbert Squires*  
 Signature of soldier  
*J. H. News H.*  
 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 14 1919  
*G. Squires*  
 Signature of soldier  
*W. Featoy Quis.*  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 22-4-18. No of days on Military  
 Discharged from service 15.6.19. PLUS 14 DAYS Service 434

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c. Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place ST. JOHN'S.  
 Date JUN 15 1919  
*R. H. [unclear] Major*  
 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 June 29/1919  
*A. Bowley Capt*  
 Officer i/c Records  
 The Royal Newfoundland Regiment

*272 2079/2447*

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4606 Rank Plr Name Squires G  
 Date of Enlistment 22-4-18 Address Phillips District St. John's  
 Occupation Madmist Classification for Discharge E1 Medical Category A1  
 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	3
B 178a	D 400A	B 1915	1	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	1		" 6	
B 179c	B 120	M 93				

Date 14-6-19 O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

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

*G. Squires*

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 \_\_\_\_\_

*AMB Luster*

Date 14-6-19

O. i. c. Re-clothing \_\_\_\_\_

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 9,721 to his home at Sgt Phillips and Release Certificate No. 2753 issued.

Date 14-6-19

*J.A. Snow left*  
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 29-6-19

Date 14-6-19

*J.A. Snow left*  
for Depot Paymaster.

Discharged approved for 15-6-19

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

N.F. P136	B 268	B 121	N.F. Med	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	2 Form B
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			

Date 14-6-19

*J.A. Snow left*  
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 15 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:—

*6j*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*13.6.19*

Regimental No *4606*

Name *Squires Gilbert* Rank *Pte*

Address *St Phillips*

Present Medical Category

*A1*

Recommended for:— (a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

*Ret Lt Col*  
O.C. Discharge Depot.

*[Signature]*  
Senior Medical Officer

*[Signature]*  
M. O. Depot



**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 Artillery* Former Trade or Occupation } *Mechanic*
2. Regt. No. *4606* 3. Rank. *Private* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Squires* (Surname) *Christian Names* (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday. *19*
6. Posted for duty on..... at..... 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?
9. If a Court of Inquiry was held on an injury state:—  
 (a) When (b) Date of Discharge;  
 (b) Where (c) Cause of Discharge.  
 (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 B (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. *nil*

12. Place of origin of disability. *nil*

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. *nil*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war .. .. . ✓ .. .. .
  - (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 disabilities, 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.)

*to complaints of  
 Catarrh in throat contracted  
 in active service*

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 ?

*Repatriation*

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.

*W. E. P. ...*  
 Medical Officer in charge of case.

Station *Worcester*

Date *16-11-19*

\* 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



## 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 *Squires, Herbert*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4606*

Intended address *St Phillips*

Height on discharge *5 Feet 8*

Color of hair on discharge *Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *George*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St Phillips 19-5-1899*

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) *Herbert Squires*

*He*  
(Rank)

Station **ST. JOHN'S.**

Date *9-6-19*

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.

Station

Date



The Royal Nfld. Regiment

DEMOBILIZATION

No. 4606 Rank

Name Squire J

Warned for demobilization on

JUN 14 19

HAWKINS MILL  
BOND











Aug 29th 1919

2

Capt. Howley  
O. I. C. Records

Please pay to Gilbert Squires 4606  
the sum of ten dollars and twenty one cents  
in payment of eleven days allowance up to Aug 30th 1919  
and charge same to Civil Re-establishment Committee

\$10.21.

Pension Nil  
Wages \$7.50 weekly

*A. C. S.*

*W. B. McCall*

Vocational Officer

ACCOUNT	<i>C. R. C.</i>
CH. NO	<i>8723</i>
IND. LEDGER	INITIALS <i>EW</i>
PAY LEDGER	INITIALS
GEN LEDGER	INITIALS

*G. Squires*

# Civil Re-Establishment Committee.

( DEPARTMENT OF MILITIA. )

FORM R  
16-12-19-2000

April 17th 1920

MAJOR HOWLEY

Officer in Charge of Pay and Records.

Please pay to G. Squires, 4606  
the sum of six dollars and fifty cents  
in payment of allowance for week ended this date  
in connection with re-education.

\$6.50

Pension Monthly NIL

Wages Monthly \$7.50 weekly

*J. C. R.*

*J. W. Mitchell.*

ACCOUNT NO.	35222
DATE	
ISS. LEGAL	
PAY LEGAL	
GEN. LEGAL	

*[Signature]*

VOCATIONAL OFFICER.

*G. Squires*

Civil Re-Establishment Committee.  
(DEPARTMENT OF MILITIA.)

FORM R  
21-11-19-1000

April 10th 1920

MAJOR HOWLEY

Officer in Charge of Pay and Records.

Please pay to **G. Squires, 4606**  
the sum of **fourteen dollars**  
in payment of allowance for week ended this date  
in connection with re-education.

\$14.00

Pension Monthly

Wages Monthly

*A.C.S.*

*W. McCall.*

ACCOUNT	34532
DATE	
INITIALS	
PAY LEVY	
GEN LEVY	

VOCATIONAL OFFICER.

*G. Squires*

May 6th 1920

Major Howley  
O. I. C. Records

Please pay to G. Squires, 4606  
the sum of thirty two dollars and fourteen cents  
in payment of P. & A. Bonus  
and charge same to Civil Re-establishment Committee

\$32.14

Wages \$27.86

*J.C.A.*

*EW*

ACCOUNT	36952	TOTAL	
CASH LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

*[Signature]*

*W. McCall*  
Vocational Officer

*G. Squires*

ST. JOHN'S,

# Royal Newfoundland Regiment.

Billeting Account,

To 460 6 1/2 *Squires*

Billeting Soldiers as undermentioned

from June 1 to June 15

ACCOUNT  
CH. NO. 23738  
MID. LEDGER  
PAC. LEDGER  
GEN. LEDGER

*15.00*  
*15.00*

Certified correct for \$

*S. Squires*  
*J. H. [Signature]*  
Billeting Officer.

*Trans*

COUNT	<i>23275</i>	<i>19</i>
CH NO		
IND LEDGER		
AY LEDGER		
GEN LEDGER		

*Received from No 4606 - 12*

*Pte. G. Squires, the  
Sum of \$9.00 (Nine dollars)  
for passage to Broadport*



*John P. Thistle  
Captain*

CERTIFIED CORRECT.

*W. Lodge*  
*G. Squires*

The DEPARTMENT OF MILITIA,

The sum of *4 50* *Seven* Dollars and *fifty* cents is due *M. H. Bishop* for driving No. *4606*

Name *Phillips* from *A. Johns*

Voucher attached

*Account for 3-9/100*  
*11/19*



ACCOUNT	<i>Sears &amp;</i>
SH NO	<i>2399</i>
IND. LEDGER	<i>EW</i>
APPROPRIATE	<i>Liute</i>
GEN. EXP.	

No. 9721

TRAVELLING WARRANT

\$7. 50

Date 14-6-19 The Royal Newfoundland Regiment

General

Please issue 1st Class Passage and Meals for

No. 4606 Rank Tt Name F. S. Quirk

From - ST. JOHN'S - To St-Phillips

The Royal Newfoundland Regiment  
DEPOT ST. JOHN'S, N.F.

PLEASE QUOTE THIS WARRANT NUMBER  
ON STATEMENT AND MEAL CHECKS

abishop

[Signature]

SIGNATURE OF ISSUING OFFICER.  
Discharge Depot



Calvin Christ

for \$7.50

Seven Dollars & fifty

4606 Pte, J. Jones

SEP 20 '19

Capt. Howley,  
O. I. C. Records.

Please pay to **G. Squires 4607**  
the sum of **six dollars and fifty cents**  
in payment of allowance for week ended this date  
in connection with re-education.

**\$6.50**

**Wages \$32.14**

*W. W. McCall*  
Vocational Officer.

*G. Squires*

**Civil Re-Establishment Committee.**  
(DEPARTMENT OF MILITIA.)

FORM R  
26-9-19-2000

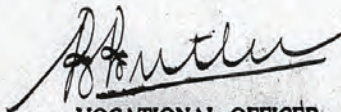
**MAJOR HOWLEY,**  
Officer in Charge of Pay and Records.

OCT 25 '19

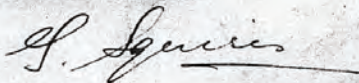
Please pay to G. Squires, 4607  
the sum of six dollars and fifty cents  
in payment of allowance for week ended this date  
in connection with re-education.

\$6.50

Pension (Monthly)	Nil
Wages (Monthly)	\$32.14
Allowance (Weekly)	
Dependents (Weekly)	



VOCATIONAL OFFICER.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*Royal Munster Fusiliers*

Number of Sheets *17A D*

Signature of O. C. Company

*J. James*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<i>1406 Squares Gilted</i>	Age on	19	years	months	<i>13.7.18 Promoted to Lance Corporal 17.8.18 Reverts to private at his own request 22th.</i>
Joined		Date	Place and Date of Enlistment		Religion	
Joined		Date	} with Colours		Place of Birth	
Joined		Date	} with Reserve			

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Kayley Camp</i>	<i>21/1/19</i>	<i>Plc</i>		<i>absent without leave from 11/1/19 to 22/1/19</i>	<i>Police</i>	<i>14 days</i>	<i>21/1/19</i>	<i>W. H. G. G. G.</i>	<i>2 1/2 days pay</i>

*Demobilized St John's 29<sup>th</sup> 19*

To be carried over

Army Form B. 121.

*4466*  
Demobilization Form 3

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4666 Rank Mr. Name Squires, G.  
 Date of Enlistment 22-4-18 Address St. Phillips, St. John's District St. John's  
 Occupation Maclinist Classification for Discharge 1-1 Medical Category A-1  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

N.F. 136	B 288	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 178b	D 400B	Form L	do 3rd	" 4
B 178a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2	" 6	
B 179c	B 120	M 93		

Date 1-6-19 O. C. Discharge Depot. *[Signature]*

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

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

*G. Squires*

Particulars passed to Vocational Officer for information and action.

Date ~~1-6-19~~ 14-6-19

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied *[Signature]*

Date 14-6-19

O i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 8721 to his home at Sgt. Phillips and Release Certificate No. 2753 issued.

Date 14-6-19

J.A. Snow  
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 14-6-19

Date 14-6-19

J.A. Snow  
Depot Paymaster

Discharge approved for 15-6-19

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

N.F. P135	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3404	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 14-6-19

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

**APPROVED.**

Documents as above forwarded to:-

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUN 15 1919

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

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

Date June 21/19

J.A. Snow  
H. J. Roberts

