



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2311 Name W. Sullivan Corps

Questions to be put to the Recruit before Enlistment.

- | | | |
|--|----------|---------------------------------|
| 1. What is your name? | 1. | <u>William Sullivan</u> |
| 2. What is your full Address? | 2. | <u>Wings Case B. B.</u> |
| 3. Are you a British Subject? | 3. | <u>Yes</u> |
| 4. What is your age? | 4. | <u>23</u> Years <u>1</u> Months |
| 5. What is your Trade or Calling? | 5. | <u>Clerk.</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> |

FOR THE DURATION OF THE WAR

I, William Sullivan 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.

William Sullivan SIGNATURE OF RECRUIT.

E. March 24 R. P. Hallaway Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Sullivan do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at

on this 25 day of March 191

Signature of Attesting Officer R. P. Hallaway

† 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 191
Place } 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 William Sullivan
 Apparent age 23 years 1 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Thomas Sullivan
Kings Cove B.B. | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed 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>24-3-16</u>									
Joined at <u>St John's</u> on <u>March 24th 16</u>									
<u>Embarked St John's S.P. Battalion for UK 28th 16</u>									
<u>Embarked 3.3.17 admitted 2/2 London Oct. 3rd 17</u>									
<u>Embarked to Cayland 6th 17 admitted 3rd 11 Waudsworth 7th 17</u>									
<u>Embarked for B.C.F. 8th 18</u>									
<u>Admitted 20-2-18</u>									
<u>Discharged to duty 3rd 18</u>									
<u>With B.C.F. held 13-10-18</u>									
<u>Admitted 12-10-18</u>									
<u>Confirmed rank 14-1-1919</u>									
<u>Transferred from B.C.F. to</u>									
<u>Winchester 19th 19</u>									
<u>to be transferred for demobilization 30-1-19</u>									
<u>Demobilization St John's</u>									
<u>23-4-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 23-4-19 (date of discharge) 3 years 31 days
 Pension _____



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 2311 Name W. Sullivan Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. William Sullivan
2. What is your full Address?..... } 2. Kings Cove B. B.
3. Are you a British Subject? 3. Yes
4. What is your Age?..... 4. 23 Years 1 Months.
5. What is your Trade or Calling?..... 5. Clark
6. Are you Married?..... 6. No
7. Have you ever served in any Branch of His Majesty's } 7. No
Forces, naval or military, if so,* which?
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 } 10. _____
meaning, and who gave it to you?..... } { Name _____
Corps _____
11. Are you willing to serve upon the conditions as embodied in the roll of service } 11. Yes
to be signed by you if you are accepted?..... }

I, William Sullivan 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.

William Sullivan SIGNATURE OF RECRUIT.

E. March 24 R.P. Halloway Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Sullivan 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 March 1916
R.P. Halloway
Signature of the Attesting Officer.

† 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 _____ 191____
Place _____ } 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, the 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.

2311

Name William Sullivan

Apparent age 23 years 1 months. Height 5 feet 9 inches.

Chest measurement { Girth when fully expanded 38 inches.
Range of expansion 3 inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Thomas Sullivan
Bridge Cove B.B. | Relationship Father.

Particulars as to Marriage.

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

Particulars as to Children.

Christian Names.	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Re-serve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
<u>Walter O'Connell 4/2/1919</u>									
Total Service forfeited as above									

Total Service towards Engagement to _____ (date of discharge) _____ years _____ days

" " " Pension " _____ (") " " "

Sullivan, Pte W/m

CR. 2311

P. Y. R. Q.

1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, William Sullivan, Regl. No. 2311

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 May 1st 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>2033</u>	<u>mother</u>	<u>Ann Thomas Sullivan</u>	<u>King Cross RR</u>	<u>60</u>
		<u>commencing</u>		
		<u>1/9/16 2/9/16</u>		
			Total Allotment, £	

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.)

R. P. Hollaway
 #
 Officer Commanding
 Company

Sig.)

Wm. Sullivan
 #
 (Rank) Private

April 20th 1916

St. Johns Nfld

No. 2311 Rank Plt Name Sullivan W.

Pay	F.A.	%kg	Total
100	10		110
Less: Allotment			60
Net Rate			50

M.M.W./58

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d	c	s	d
						From	To								
Balance					Balance		8/6/17						13	17	6 1/2 ✓
Acquittance Rolls					Pay @ net Rate	9/6/17	29/10/17	143	50	71	50	14	13	9 1/2 ✓	
Hospital Advances		3	7	6 ✓	Ration allow-10dys	29/10/17	7/11/17	10	2			1	0	0 ✓	
A.B. 34 (15 frs)			11	0 ✓	" 2f	30/10/17	7/11/17	9	50	4	50		18	6	29-11-4 ✓
P. & R.O. Payments		2	0	0 ✓	23-12-10										
5-15-10 Cheque 6945	29/10/17	10	0	0	(4-11-4)										
Cost 4320	1/11/17	10	0	0											
25-18-6 Receipt No. 4353	6 11/17	4	10	0											

CHEQUE B.
P.C.
29-10-17

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT

35/5

To: Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

Please remit to _____

the sum of 2 pounds — shillings, on
account of any balance that may be due to me.

*P. K. O.
£2 paid*

Regtl. No. 2311 Rank Pte

Name W^m Sullivan

Approved *W. H. Shaw*
Officer i/c. Contingent

3rd London General Hospital.

Dated at _____

July 10th 1917.

Admitted 7-3-17
Only for use with Men returned from an Expeditionary Force or from
Garrisons Abroad.

Army Form W. 3016.
(In Books of 200.)

No. _____ Date July 18th 1917

(1) To the Officer i/c Records, 58 Victoria St
SW. (Station).

(2) The Officer Commanding, ~~Infld Contingent~~
Avy (Station).

(3) The Paymaster, 58 Victoria St
SW (Station).

Regimental No. 2371

Rank and Name Pvt Sullivan W.

Regiment or Corps 1st Infld.

has been granted a furlough from transferred on July 18th

His address while on leave will be: 6 The Entrance Depot
Shirley.

I consider he is fit for*

* Strike out that which is inapplicable.

~~ii~~ iii ~~iv~~
i. Duty.
ii. Command Depot.
iii. Employment.

G. C. Hall Officer in charge _____ Hospital,

(Station).

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.
In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps two copies of A.F.W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Regimental, R.A.M.C.

[MT2635] W13581/M1452 12m bks. 1/17r G & S E. 842 3rd London General Hospital

WANDSWORTH, S. W.

No.

Regt. No. 2311

Rank *Pir*

Name *Sullivan*

Regiment

Date from 29-10-1917

to 7-11-1917

To proceed to *India. Gen.*

at 22/11/17

I/c. Hospital

Station

Date 29-10-17

Address whilst on furlough to which any orders will be sent.

61 Battersea

Rm

Clapham

J. Furlough
Empire 7/11/17
Now with 2nd Batt
A.Y.

13. Springfield Rd
Wimbledon
S. W. 19.

Dear Sir.

Can you oblige me with the
present address of: -

Private to Mr Sullivan
No. 2311.

1st New Foundland Regt.

He was wounded in Wandsworth Hospital
last July, & then sent to the Caterie
Depot. Shirley. Croydon.

I have written to Shirley but had no
reply.

Any information you can give
will be esteemed by

Yours faithfully,
W. E. Staller

Major Timewell.

Pay & Record Office
58. Victoria St
S.W.

BRANCH
Rd.
FILED UPON
BY J.H.
DATE

Ref. No.	✓ 6642
Rec'd.	- 8 NOV 1917
Act'd.	
Ans'd.	9-11-17
File No.	

C.R. 2311

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT
IN FRANCE DATED 20/11/18.

Appointed A/Cpl.

#2311 Pte. W. Sullivan.

13/10/18.

C.R. 2311

Extract from Hospital Roll of The Royal W.M. Regt.
November 21-1-19.

The Undersigned who was transferred from
B.M.F. to the 2nd Bn., Winchester 19-1-19 awaiting
repatriation.

2311 Cpl. W. Sullivan.

C.R. 2311

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt. 21-2-19.

The Undernoted returned from Overseas and reported
to Depot 7-2-19.

Repatriated on A/C of Demobilization

2311 Cpl. Wm. Sullivan.

C.R. 2311

Extract from telegram from Synoptical to Military dated Jan. 11/1919

In answer to your telegram Jan, 9th.,

Cpl. 2311 Sullivan/

B.E.F.,

C.R. 2311

Jan. 13th 1919.

Dear Sir:

I beg to inform you that we have received a reply to the cable we sent to our Pay and Record Office London, enquiring the whereabouts of your son #2311 Cpl. Wm. Sullivan, which states that he is now with the First Battalion on Active Service and in good health. Any further information we get concerning him will be at once communicated to you.

Yours faithfully,



Lieut.

CASUALTY OFFICER.

Thos. Sullivan Esq.,
King's Cove, B.B.

WWW/MP.

C.R. 2311

Extract of Telegram from Military St. John's, to
Synoptical London, dated Jan. 9th 1919.

Inform whereabouts 2311 Sullivan.

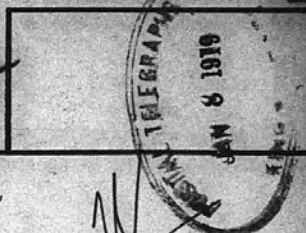
NEWFOUNDLAND POSTAL TELEGRAPHS

No. _____

Received _____ m. By _____

Sent out for delivery _____ m. By _____

No. 57 Place from Keels No. of Words 1165



To via Kings Cove 8

J. R. Bennett

Please locate 2311 pte William Sullivan no letters since October

anxious

Mrs Thos. Sullivan

CR 2311

Extract of Daily Orders Part II The Royal Newfoundland Regiment
Depot St. John's dated April 25th 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date.
23/4/19.

2311, Cpl. Wm. Sullivan.

C.R. 2311

Extract f rom Nominal Roll of Nfld. Regt. Draft No.14
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-
ampton 30-11-16.

2311 Pte. W.Sullivan.

C.R. 2311

Extract from Daily Orders Part 11 Unit The Royal Newf.
Regt^s St. John's, April 19th, 1919.

The discharge of the undernoted on demobilization
has been APPROVED By O.C. Discharge Depot 9-4-19.

2311 Cpl. WM. Sullivan

C.R. 2311

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND
REGIMENT IN FRANCE DATED 31/1/19.

CONFIRMED TO RANY.

2311 A/Cpl. W. Sullivan

14/1/19.

C.R. 2311

Extract from Nominal Roll of the Royal WFLC. Regt
Embarked S.S. CORNICAN, Jan. 30, 1919.

2311 Cpl. Sullivan.

C.R. 2311

in

Jan. 9th 1919.

Dear Madam:-

I am directed by the Minister of Militia to acknowledge receipt of your telegram of Jan. 8th, in which you are making enquiries regarding the whereabouts of your son, Pte. Wm. Sullivan, and in reply I beg to state that we have forwarded your enquiry on to our Pay and Record Office, London, and upon receipt of an answer we will immediately communicate with you.

Yours faithfully,



Lieut.

CASUALTY OFFICER.

Mrs. Thos. Sullivan.

King's Cove, B.B.

WVW/MP.

C.R. 2311

Extract from Nominal Roll of Draft No.57 embarked Southampton 8/2/18
from 2/1st Newfoundland Regiment, to 1st Batta, Royal Newfoundland
Regiment B.E.F.

2311 Pte. Sullivan, W

MP

NEWFOUNDLAND POSTAL TELEGRAPHS.

Cable Connection with all the World



All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender

Frederick M. Sullivan

Address

Line
Number

Recd

By

Sent

by

Check

Dated

10th March, 1917.

To

Mr. Thos. Sullivan,

King's Cove, B.B.

Regret to inform you that Record Office,

London, officially reports No. 2311 Private

William Sullivan admitted Wandsworth Gunshot

Wound Left Leg.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

C.R. 2311

Extract from Casualties received from P.&R. Office London,
Mar. 9th, 1918.

At. Wandsworth.

2311 Sullivan.

Gunshot wound left leg.

C.R. 2311

Extract from General Roll indexed St. John's for Veterans,
28/8/10.

2311 Pte. W. Sullivan.

**EXTRACT FROM STATEMENT OF ACCOUNT TO 30-1-19 FROM PAY AND
RECORD OFFICE, LONDON**

2311 Cpl. Sullivan, W. Cr. Bal. £12-10-11 plus 1 day's pay (31-1-19)

This transferred to Pay Office 9-4-19

C.R. 2311

Wm. Sullivan was attested for General Service with
the NEWFOUNDLAND CONTINGENT on March 24th 1916
Regimental No. 2311 was allotted to Pte Wm. Sullivan

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th 1919

No. 2311 Name Sullivan, W. Sqn., Batty., or Company } CA Corps 2/1 w/flat Rest' Date of enlistment } 29/3/18 G.C. Badges } Service or Proficiency Pay }
 Date of last entry in Company Conduct Sheet } Clean } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. } 1 Signature O.C. } Subaltern } Character } good
 Company, etc. } CAP.

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
				Invalidated to England	6-3-17. H.G.				

W. J. ...
 Army Form B. 122
 P.F.O.

No. 2311

Name W. M. Sullivan

Squad, Battery, or Company

H.

Regt
Corps

Royal Newfoundland

Date of enlistment

24/3/16

G.C. Badges

Service or Proficiency Pay

Date of last entry in Company Conduct Sheet

No. and date of last drunk

Period not reckoning towards freedom from extra fine

Sheet No. 1

Signature of Company etc.

for Fredk. G. A. Russell

Character

V. Good

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

Army Form B. 129



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *William Sullivan*

aged *23 yrs* conducted at *C. O. B.*

Date: *March 21/16* Recruiting Officer:

NO OF TEST FINDING

- 1 *No.*
- 2 *No.*
- 3 *No.*
- 4 *No.*
- 5 *No.*
- 6 *No.*
- 7 *Yes.*
- 8 *Yes.*
- 9 *No.*
- 10 *u*
- 11 *u*
- 12 *u*
- 13 *u*
- 14 *u*
- 15 *u*
- 16 *u*
- 17 *u*
- 18 *u*
- 19 *6/8 Beit*
- 20 *u*
- 21 *u*
- 22 *u*
- 23 *u*
- 24 *u*
- 25 *u*
- 26 *u*
- 27 *u*
- 28 *u*
- 29 *u*
- 30 *u*
- 31 *u*
- 32 *u*
- 33 *No.*
- 34 *5'9"*
- 35 *184 pds.*
- 36 *32/38.*
- 37 *135° mouth.*
- 38 *parents.*
- 39 *Name.*

2311

Thomas Sullivan, King's Cove.

Tit

Signature of Medical Examiner: *W. H. Watson*

Sullivan Wm.

2311

Ray Dept.

April 23rd., 1919

#2311 Cpl. William Sullivan,

Kings Cove, B. B.

Dear Sir:

Please find enclosed "Discharge Certificate

No. 1926."

Yours truly

Captain,
Paymaster & O. i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2311 Rank Capt Name Sullivan Wm
 Intended place of residence Kings Cove

2. Occupation Coast Guard
 Classification of soldier E Medical Category A1

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 H. Mous H.
 Comanding Discharge Depot

Date APR 5 1919
 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 William Sullivan
 Signature of soldier

5-4-19

J. H. Snowfoot
 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 William Sullivan
 Signature of soldier

5-4-19

W. J. Eaton
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 24.3.16 No of days on Military

Discharged from service 9.4.19 Plus 14 days Service 1126

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S R. H. Lait Capt
 Officer i/c Records

Date APR 9 1919
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's Nfld R. H. Lait Capt
 Officer i/c Records

Date April 27/1919
 The Royal Newfoundland Regiment

W. B. 5097/1926

8
23
3

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. 2511 Rank Cpl Name Sullivan, William
 Date of Enlistment 24-3-16 Address King's Ave District St. John's
 Occupation Clerk Classification for Discharge A1 Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P136	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. <u>3</u>
B 179	D 400B	Form L	do 3rd.	" 4.
B 179a	D 400C	Form K	do 4th.	" 5.
B 179b	B 103	ME 2	<u>237-1</u>	" 6.
B 179c	B 120	M 93	<u>3172-1</u>	

Date 2-11-19

H. Mans
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

William Sullivan

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 _____

A.M. Clouston

Date 5-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 11968443* to his home at *Kunjee Chow* and Release Certificate No. *1902* issued

Date *5-4-19* *J.A. Snowford*
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 *up to 23 MAY 1919*

Date *5-4-19* *H. H. [unclear]*
Depot Paymaster.

Discharge approved for *9-4-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	1	N.F. Med.	D.F. 1	1	
F 178	W 3494	B 122	1	Board 1st	" 2	1	<i>trans</i>
B 178a	D 400A	B 1915		do 2nd	" 3	1	<i>trans</i>
B 179	D 400B	Form L		do 3rd	" 4		
B 179a	D 400C	Form K		do 4th	" 5		
B 179b	B 103	ME 2		<i>15.3.7</i>	" 6		
B 179c	B 120	M 93		<i>3.17.2</i>			

Date *5-4-19* *J.A. Snowford*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *APR 9 1919* *R.H. Sait*
O. C. Discharge Depot.

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

Date

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
(Clerk)

William Sullivan
Signature of Man.

J. H. Crawford
Signature of the Vocational Officer or his Representative.

Reg. No. *2311*

Place **ST. JOHN'S**

Date **APR 5 - 1910**

191

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

MEDICAL HISTORY

OF

Surname Sullivan Christian Name William Revised 7

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	on _____ day of _____ 191____	at _____	on _____ day of _____ 191____	at _____
Examined	on <u>24th</u> day of <u>March</u> 191 <u>6</u>	at <u>Saint John's</u>	on _____ day of _____ 191____	at _____
Declared Age	<u>23</u> years <u>1 month</u> days		_____ years _____ days	
Trade or Occupation				
Height	<u>5</u> feet <u>9</u> inches		_____ inches	
Weight	<u>154</u> lbs.		_____ lbs.	
Chest Measurement {	<u>38</u> inches		_____ inches	
	<u>3</u> inches		_____ inches	
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>		R.E.—V= _____	
	L.E.—V= <u>6/6</u>		L.E.—V= _____	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<u>James Paterson</u>			
(Rank)	<u>Capt.</u>		Medical Officer.	Medical Officer.
Enlisted	at <u>S. John's</u>		at _____	
	on <u>24</u> day of <u>March</u> 191 <u>6</u>		on _____ day of _____ 191____	
Joined on Enlistment	Corps. <u>Revised</u>	Regtl. No. <u>2311</u>	Corps. _____	Regtl. No. _____
Transferred to				
Became non-effective by	on _____ day of _____ 191____		on _____ day of _____ 191____	
(Signature)				
(Rank)				



Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, etiology or treatment of the case likely to be of interest or of further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
LONDON GENERAL HOSPITAL WANDSWORTH.	4	3	14	18	7	14	Paratyphoid Fever/33 g. s. w. 1 1 S Lij L L'am IX 1 severe L thigh F. 1 Slight forehead Paa: 28 (fundaloesent)	114	Wounded in France 3.3.17. Wounds septic. Whilst in hospital found to be suffering from above fever. Buttocks badly incised. To Shirley Entonic Depot } THESE TESTS WERE NEGATIVE OF TYPHOID BACILLI AND DYSENTERY ORGANISMS. } Staecal test. 28.7.17 Urinary test. 28.7.17 (Admitted with a record of 2 negative Staecal & 2 negative Urinary tests at Wandsworth)	G. C. Hall Capt Emtd. J. H. Murray Head: R. B. S. J. H. S.



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

Date	Brief Details, and Signature
7-8-16	1st Inoculation SP
21-8-16	2nd " SP
30-8-16	3rd " SP
25-8-16	Vaccination SP
13-11-16	Fit for Foreign Service <i>H. H. W.</i>

It is hereby certified that this soldier has been before a Travelling Medical Board, and has been classified as 6 for Discharge on Demobilisation. Medical category A 1

5. 11. 19
Date of T.M.B.

[Signature]
Discharge Inspector

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation

MEDICAL CASE SHEET.

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
	2311	Pte	SULLIVAN	W.
Year	Unit.	Age.	Service.	
	1. N. F. L. D. Parglathia B.	24	/	
Station and Date.	Disease			
NO. 10. NON GENERAL WANDSWORTH. Mar 8	Wounded by Bomb. at Sauby. A great many superficial wounds & 4 small a small one on forehead " " " " left arm. Two large deep on left thigh and two smaller on left leg The leg and thigh wounds were much more severe and one of the He had operation to remove F.B. at S.S.			
	Amputation		A 78	
March 13	Out to Telave Prison 500 units A 78			
March 16	Hand opened up. Operation.			
March 17	x Ray (No 24387.)		A 78.	
	2. Sand. Bul. B+C dead to be rep'd 3. Metallic Frag ⁴⁶ in Upper Arm. 4. Metallic " " Fore arm 5. " " " Lt Thigh 6. " " " Outer side Lt Leg			
24.3.17	Lungs normal Abdomen tympanitic Spleen not Enlarged. Needs to be Examd for typhoid organisms. P.A.C.			
24.3.17	Spinal B. Typhosum positive 1 in 125. negative higher B. Para T A " 1 in 125 " " B. Para T B " 1 in 250 " " 921			

Station
and Date.

- March 27. abdomen distended - spleen not full
Temp falling. 3 circulations.
a few crops base of both lungs.
- 28-5-17 Stool contains no amebae. No dysenteric or Bacteric
organisms.
Urine. Negative. 5. 70 K.
- Apr. 3-17 No symptoms: T. 98.6:
3 insignificant spots in abdomen
Spleen not +.
3 hits in left chest lungs
2 in front 2 in back.
- Apr. 6-17. Thin base: no spots: no splenic enlargement
Bile healthy.
- " 9-17 trial: B. Typhosa positive 1 in 125
B. Parat A. " 1 in 50
B. Parat B. " 1 in 5,000 etc.
- Apr. 10-17. Feels better: stool loose: pulse 97 per minute
14-17. low T° normal for 3 days. Spleen - with
prominent tip.
- Apr. 17-17. Stools by loose: T° not quite steady yet:
with mucus.
- 24-17. Loose stools - fine imp: emulsion: 6 hours child
dig: no abd. pain: spleen not +: bile and
latter.
- 15-5-17 Stool urine received, no Amebae, no Bacteric ure.
Dysentery organisms etc.
2 some my stools
etc.
- 23-6-17 Dr. Baur's
NSD

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

MEDICAL HISTORY

OF

Surname Sullivan Christian Name William Recd 7

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>24th</u> day of <u>March</u> 191 <u>6</u>		on _____ day of _____ 191_____	
	at <u>Saint John's</u>		at _____	
Declared Age	<u>23</u> years <u>1 month</u> days		_____ years _____ days	
Trade or Occupation	_____		_____	
Height	<u>5</u> feet <u>9</u> inches		_____ inches	
Weight	<u>154</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>38</u> inches		_____ inches	
	Range of expansion... <u>3</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	Left
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V= <u>6/6</u>		R.E.—V=_____	
	L.E.—V= <u>6/6</u>		L.E.—V=_____	
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to Cause Rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>Lamm & Paterson</u>		_____	
(Rank)	<u>Capt.</u>		_____	
Enlisted	at <u>S. John's</u>		at _____	
	on <u>24</u> day of <u>March</u> 191 <u>6</u>		on _____ day of _____ 191_____	
Joined on Enlistment	Corps. <u>Newfound</u>	Regtl. No. <u>2511</u>	Corps. _____	Regtl. No. _____
Transferred to	_____		_____	
Became non-effective by	_____		_____	
(Signature)	_____		_____	
(Rank)	_____		_____	



Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of syphilis, admissions and readmissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
LONDON GENERAL HOSPITAL WANDSWORTH.	4	3	14 18	7	14	14	Paratyphoid Fever G. S. W. 1 Slight L'am IX 1 severe L thigh To 1 Slight forehead Para: "B" (pudicissimus)	33 114	Wounded in France 3-3-17. Wounds septic. Whilst in hospital found to be suffering from above fever. Buttock boil incised. To Shirley Enteric Dept. } THESE TESTS WERE NEGATIVE OF TYPHOID FEVER AND DYSENTERY ORGANISMS. } } (Admitted with a record of 2 negative Faecal & 2 negative Urinary tests at Wandsworth)	G. C. Hall Capt Emtd. J. H. Murray leave Recd: R. M. S. S. H.



The Royal Newfoundland Regiment

Class for Demobilization

8/6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

5.4.19

Regimental No. *2311*

Name

W. Sullivan

Address

Kemp's Cove

Present Medical Category

A7

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

Members of Board

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

H. Parsons
Senior Medical Officer

H. Colman
— M. O. Depot

Witcher
3rd Genl. Hospital.

Ward A2 No. of Bed 19 Date 19/3/17

Regt. No.	Rank and Name	Corps	Part to be X-Rayed
<u>7511</u>	<u>Pte Sullivan</u>	<u>1st H.-F L.-D.</u>	<u>Rt. Thigh & Leg, Head & Lt. Hand</u>

SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case)

*G.S.W. Head, Lt Hand
& Arm, Lt Thigh & Leg*

REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

No. of Plate 2438 y A (B C D E F G)

A Hand nail -
B & C Head bolts separated.

- D metallic fragments in forearm.
- E metallic fragments in upper arm
- F main metallic fragments in left
- G Right Hand
Metallic fragments on the side of left leg.

H. Tegan
Capt. R.A.M.C. (D)

Signature of M.O. W. Wareham

Date 19/3/17

Signature of Radiographer A.W. Bowie

Date 4 MAR 1917.

Capt.

April 26, 1919

#2311 Cpl. William Sullivan,
King's Cove, B.B.

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

Paymaster & C. i. c Records ^{Captain,}

17362
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 *William* 2. Surname *Sullivan*

3. Rank *Corporal* 4. Regtl. No. *2311*

6. Address in full to which future payments of gratuity are to be forwarded *Kings Cove B.B.*

6. Date of enlistment in the Regiment *Mar 22/16*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge

8. Relationship of such dependents *No*

9. Address in full of such dependents

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 *From Mar 22/16 to
Apr 5/19 date of temporary discharge*

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

No

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.

Clothing allowance 60
Post Pay 48.60
Board allowance 63.10

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?.....

19. Are you now serving in the Res.?..... If not give:- (a) date of discharge..... (b) Reason for discharge.....

No
All 5/19
Temporary 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, Belgium & Germany - from Nov. 1916
Jan. 15, 1918, Arras, Valenciennes, Cambrai
Comblès

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.....

No

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.

Signature of Applicant: *William Sullivan*

Place of Residence: *Kings Cove B. B.*

Declared before me at: *N. John, Nfld.*

This *5th* day of *April* 191*9*

John McCarthy
J.P.

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 Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>6 mos.</i>	<i>6.20 00</i>
.....
.....

Certified Correct.

Paymaster.

Wye



2

21 1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, William Sullivan, Regl. No. 2311

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 May 1st 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>2033</u>	<u>mother</u>	<u>Mrs Thomas Sullivan</u>	<u>King Cross BR</u>	<u>60</u>
			Total Allotment, \$	

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. R. P. Hallaway
lieut
Officer Commanding
H Company

Sig. Wm Sullivan
Rank Private

April 20th 1916
St John's N.S.

No. _____



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with ^{Sullivan} ~~Pte. W.A. Lawrence~~, _____

Voucher No. 27172.

Cheque No. 27172

Reg'l A/c No. _____ Name _____

C.B. Folio No. _____

Date	Req'n No.	Invoice No.	Particulars.	Amount.
Jan. 13	276		A/s pay	\$10
				\$10

CERTIFICATION

Dissect^o Sheet No. _____

Recap. Sheet No. 276.

M. Howley
PAYMASTER

Checked by _____

RECEIPT

January 13th 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of

Ten _____ Dollars
and _____ Cents in Payment as above stated.

January 1917.

\$ 10.00

[Sig.] *W A Sullivan*

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with Pte. W. Sullivan, Voucher No. 26978.
First Newfoundland Regiment. Cheque No. 26978.

Reg'l A/c No. _____ Name _____ C.B. Folio No. _____

Date	Reg'n No.	Invoice No.	Particulars	Amount.
Jan. 9	271		A/c pay	\$15
				\$15 00

CERTIFICATION

Dissectⁿ Sheet No.Recap. Sheet No. 271.

Checked by _____

W. Howley
 PAYMASTER

RECEIPT

January 9th 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of
Fifteen ----- Dollars
 and ----- Cents in Payment as above stated.

January 1917.

\$ 15.00

[Sig.] *W. A. Sullivan*

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with Lieut. J. M. Howley

Voucher No. 207.

Cheque No. 207.

Reg'l A/c No.

Name

C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount
July 9	7.		Refund a/c Pte. W. Sullivan	\$5
				\$5 00

CERTIFICATON

Dissect^a Sheet No. _____

Recap. Sheet No. 7

H. McMahon
PAYMASTER

Checked by *[Signature]*

RECEIPT

July 9th, 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of

Five _____ Dollars

and _____ Cents in Payment as above stated.

July 1917.

\$ 5.00

[Sig.] *J. M. Howley*

Louie seven or eight months
ago W.A. Sullivan arrived
home with a number of others
and cheques were drawn for
them some of which I cashed
for them after hours. Sullivan's
cheque was one of the number
and without thinking of the

cheque, I handed Miss Walshe
\$15.00 (the usual amount paid).

Whilst Sullivan was endorsing
cheque & signing voucher, I was
busy at the time & did not see
the cheque until Sullivan had
gone. The cheque was for \$10.00
only. As I thought Sullivan's
account would be along from

London anyway, I did not bother
Sullivan about it, as I figured that
I would be able to get it when I
paid him off. His account however
waited a tray, and only after considerable
correspondence, did I manage to
get a copy of it and a number of
others. In squaring him off I made
a cheque for \$5⁰⁰ for myself. I think

Miss Walsh can verify this
statement.

M. Bowley

This is quite correct as I
remember the incident quite
well E. Walsh.

ST. JOHN'S, April 5 / 19

Royal Newfoundland Regiment.

Billeting Account,

To Cpl. - W. Sullivan

Billeting Soldiers as undermentioned

from Feb 8th / 19 to April 9th / 19

W. C. J.

2311 - Cpl. W. Sullivan

63 10

BAM	
NO. 15320	INITIALS Ew
ISSUED TO	ISSUED BY
PAY	ISSUED
CITY	NO.

Certified correct for \$ 63 10

J. B. Crawford
Billeting Officer.

William Sullivan

2311

July 17th.

7.

Pte. W. Sullivan,
Pouch Cove.

Dear Sir,-

I enclose herewith cheque for £47.21, being the amount due you, made up as follows:-

Balance of pay	£9.26
Bonus 1 week @ £1.65	12.95
Civilian clothes	<u>25.</u>
	<u>£47.21</u>

Kindly sign the special form attached, and return.

Yours truly,

Lieut.
B/Paymaster

S/W.

Reg. No. *234* Rank *Cpl.* Name *Sullivan W²⁴*
Attested Address *King's Cove BB*
Allotment Allottee
Date of Allotment Returned from Overseas *2-19*
Embarked for Overseas Cause *Discharge*

1.4.19
9.4.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION

C.R. 2311

RECEIPT.

FOR ISSUE OF RIBBON OF VICTORY MEDAL/1914-1919.

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

NO. *2311*.....NAME.....*William Sullivan*

DATE. *16-2-19*.....

PLACE. *Trinity*.....

C.R. 2311

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.....

Dec. 5th 1919

Place.....

Trinity.....

Name.....

William Seelivan (2311)

Receipt for Army Book 64

No. 2311 Name L. Sullivan 2

To Certify that I have received the AB 64 of the above
named soldier.

Name W. Sullivan

Date 31-7-20

Place Trinity

N.B. For completion and return to the Department of Militia
Insert in corner of envelope "AB 64"

Rank Plt Surname Sullivan Christian Name W. 2208
 Religion Rel. Age on Enlistment 23 years 1 months.
 Enlisted (a) 24/3/15 Terms of Service (a) Duration Service reckons from (a) 24/3/15
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 _____ or Corps Trade and Rate _____
 Signature of Officer i/c Records. _____



Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc. during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked	Shampton	30 NOV 1916	
		Disembarked	Queen	1-DEC 1916	
	<i>Unit</i>	Joined Battalion	France	12/12/16	B213
			With BATT. 25. I. IV		
3/3/17	G.C. Hill	Wounded in Action	France	3/3/17	B213
	60 F.A.	Trans. G.I.W. Army by 7/2	London & S.E.	3.3.17	E.A. 881
	"Essentially W.B."	Invalidated to E. 1/1		6.3.17	W. 2085
		in 11. Stat A, Rome			
			<i>W. Birchall</i>		CAPTAIN.
			for Officer i/c No. 1 Regular		Infantry Section
			General Headquarters, 3rd Echelon.		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

Casualty Form—Active Service.Regiment or Corps *Royal Newfoundland*

Rank *Pte* Surname *Sullivan* Christian Name *William*
 Religion *R.C.* Age on Enlistment *33* years *1* months
 Enlisted (a) *St. John's* Terms of Service (a) *Duration* Service reckons from (a) *3.4.16*
 Date of promotion to present rank Date of appointment to lance rank
 Extended (.....) Re-engaged (.....) Qualification (b)
 or Corps Trade and Rate
 Occupation *Clerk* *Fredk. G. A. Russell* Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 35, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.35, or other official documents.
Date	From whom received				
		Embarked ...		9 FEB 1918	
		Disembarked...		11 FEB 1918	
		<i>3rd Battalion</i>		20 FEB 1918	
	<i>29 P.A.</i>	<i>Ad Comd. Coy 2nd P.A. Trans</i>	<i>S. C.S.</i>	<i>1/3/18</i>	<i>CO 8790</i>
	<i>15 C.S.</i>	"	"	<i>27/3/18</i>	<i>CO 9431</i>
	<i>Plum</i>	<i>to duty</i>	<i>Unit</i>	<i>3-4-18</i>	<i>CO 9766</i>
		<i>app of Coy</i>	<i>Unit</i>	<i>13/10/18</i>	<i>CO 213 1/18</i>
		Transferred to U.K.			
		<i>for Re-formation</i>			<i>Part 2 3/E</i>
					<i>Capt for Col</i>
					<i>Order 1/c Not Infantry Section</i>
					<i>G.H.O. 3rd Echelon</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Skoeling-Smith, &c.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

 W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (698) W-0172121 1000m 6/15s 53 56

 Form
 B. 121.
 32.

Regiment of

Newfoundland

Number of Sheet

First
J. H. Cunningham
1 Capt

Signature of O. C. Company

Regimental Number and Name <i>25th Sullivan's</i>		Enlistment		Trade <i>Clerk</i>	Good Conduct Badges, Service Pay or Proficiency Pay
Age on <i>25</i> years <i>1</i> months		Place and Date of Enlistment <i>17 Sep 16</i> <i>24 / 7 / 16</i>		Religion <i>R.C.</i>	
Joined <i>Depot</i> Date <i>5/9/16</i>	Joined Date	Period of { with Colours <i>3 1/2</i> years. with Reserve <i>3 3/4</i> years.		Place of Birth <i>Kingston</i>	
Joined Date	Joined Date				

Place	Date of Offence	Rank	Case of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>23⁴ 79</i>				

To be carried over

Army Form B. 121.



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 *William Sullivan*

Regiment from which discharged *Royal Newfoundland*

Regimental number *2311*

Intended address *King's Cove*

Height on discharge *5* Feet *9*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *Thomas*

Christian name of Mother *Mary M.*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *King's Cove, Feb 22nd, 1893*

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)

William Sullivan

Spl

(Rank)

Station

St Johns

Date

5-11-19

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

The Royal Newfoundland Regiment

2311

DEMobilIZATION OF

Reg. No. 2311 Rank Sgt Name William Sullivan
 Date of Enlistment 24-3-16 Address Kings Lane District St. John's
 Occupation Clerk Classification for Discharge H Medical Category H
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	3
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	<u>1237-1</u>	" 6	
B 179c	B 120	M 93	<u>3172-1</u>		

Date 5-4-19 H. News Servt.
O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

William Sullivan

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 5-4-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. H. G. 111* to his home at *Kingsland* and Release Certificate No. *1919* issued.

Date *5-4-19* *J. A. Brown*
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 *11-19* SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACT.

Date *5-4-19* *H. H. Smith*
Depot Paymaster.

Discharge approved for *9-4-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P[36].....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	1	
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	1	<i>forwarded</i>
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	1	
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 *5-4-19* *J. A. Brown*
Demobilization Officer.

APPROVED.

Documents as above forwarded to—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *APR 9 1919* *R. H. Sait Capt.*
O. C. Discharge Depot.

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

Date *April 12 1919* *J. A. Brown*
for O.C. Depot