



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6149 Name James Wall Corps R. C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>James Wall</u> |
| 2. What is your full Address? | 2. <u>83 Pleasant St</u>
<u>St. Johns</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Macbride</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, James Wall

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.

James Wall

SIGNATURE OF RECRUIT.

Thos Soudern

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James Wall

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 9 day of September 1918

Signature of Attesting Officer

C. S. D. [Signature]

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the

If enlisted by special authority, such will be attached to the original attestation.

Date 10-9- 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)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name James Wall

Apparent age 19 years months. Height 5 feet 3 inches

Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 4 1/2 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Patrick Wall

Colonel - St. Marys Bay Relationship 7 other

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(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 " _____ [" "] _____ " _____									



JG

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. *6149* Name *James Wall* Corps *R. C.*

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. *James Wall*
- 2. What is your full Address? 2. *83 Pleasant St
St. Johns*
- 3. Are you a British Subject? 3. *Yes*
- 4. What is your age? 4. *19* Years Months
- 5. What is your Trade or Calling? 5. *Blacksmith*
- 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, *James Wall* 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.

James Wall SIGNATURE OF RECRUIT.

Thos. S. Soudan Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *James Wall* 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 *9* day of *September*, 191*8*

Signature of Attesting Officer *Asst. Dickson*

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.

Date *10-9-1918*
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)

C.R. 6149

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., Nov. 22nd, 1918.

Undernoted Man returned from Special Duty at P.A.B. 21-11-18.

6149 Pte. J. Wall.

MM.

C.R. 6149

Extract from Daily Orders Part 11 Unit The Royal Wfld. Regt.,
St. John's, Sept. 24/18/

PROCEEDED ON SPECIAL DUTY AT PORT-AUX-BASQUES 23-9-18.

6149 Pte. J. Wall.

C.R. 6149

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's , Dec. 16th, 1918.

The undernoted man discharges on Demobilization have
been approved by O.C. Discharge Depot from Noted date.
He is removed from Depot Strength and transferred to
Discharge Depot pending confirmation by Officer i/c
Records.

6149 Pte. Jas. Wall.

14-12-18.

C.R. 6149

Extract of Daily Orders Part II, dated Jan. 14th 1919, Dep t
St. John's. d

DISCHARGE CONFIRMED ON DEMOBILIZATION

The discharge of the undernoted man on demobilization
has been confirmed by Officer i/o Records on noted date.

6149 Pte. James Wall

Discharged 11-1-19

C.R. 6149

Extract from Daily Orders Part 11 Unit the Royal Nfld.
Regt., St..John's, Nfld.Regt., Sept.10th,1918.

6149 Pte. James Wall.

Attested for General Service With the Royal Nfld, Regt.,
from the 9-9-18.

U
Wall, James

6149

Gay Dept.

January 11th., 1919.

#6149 Pte. James Wall,

Whitbourne,

Trinity Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 423."

Yours faithfully,

Captain,
Paymaster & O.i/c Records.

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 61149 Rank Pte Name James Wall
 Intended place of residence Whitthouse

2. Occupation Mechanic
 Classification of soldier C Medical Category A. II.

3. The above named man is discharged in consequence of Demobilization

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

Place DEC 13 1918
 Date DEC 13 1918 *W. D. M. Capt.*
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date St. John's 13-12-18
 Signature of soldier James Wall
 Signature of witness C. Dicks Capt.

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date St. John's 13-12-18
 Signature of soldier James Wall
 Signature of witness C. Dicks Capt.

STATEMENT OF SERVICE

7. Enlisted for service 9-9-18 No of days on Military Service 125
 Discharged from service 14-12-18 plus 28 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S. *R. H. Sait Capt.*
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

Date DEC 14 1918

CONFIRMATION OF DISCHARGE

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

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

Date January 11/1919
2079/127

22
31
30
31
11
25

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4119 Rank PLC Name Wall James
 Date of Enlistment 9.9.18 Address Whitbone District County
 Occupation Mechanic Classification for Discharge C Medical Category A3
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1 D 400A	1 B 1915	2	do 2nd	" 3	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	1			

Date 13.17.18

Stanley Cash
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

James Wall

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$ 60.00

(b) Clothing Supplied Joseph H. Lawrence

Date 13-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 256* to his home at *Whitbourne* and Release Certificate No. *337* issued.

Date *13-12-18*

Chadwick Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *11-1-19*

Date *13-12-18*

Stobley Capt
Depot Paymaster.

Discharge approved for *14.12.18*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	1	N.F. Med	D.F. 1	1	Forms B
B 178	W 3494	B 122	2	Board 1st	" 2	2	
B 178a	D 400A	B 1915	X	do 2nd	" 3		
B 179	D 400B	Form L	X	do 3rd	" 4		
B 179a	D 400C	Form K	1	do 4th	" 5		
B 179b	B 103	ME 2	1		" 6	✓	
B 179c	B 120	M 93					

Date *14.12.18*

Chadwick Capt
Demobilization Officer.

APPROVED.

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

with following additional documents.

Date *DEC 14 1918*

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

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

Date *Dec. 18/1918*

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

MEDICAL HISTORY

OF

Surname

Wall.

Christian Name

Jamer.

Table I.—GENERAL TABLE

Birthplace :—Parish

Colnet

County

Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	at		at	
Declared Age	19	years		years
Trade or Occupation	<i>franklin Electrician</i>			
Height	5	feet 3		feet inches
Weight		111		lbs.
Chest Measurement	Girth when fully expanded		inches	
	Range of Expansion		inches	
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Number			
When Vaccinated				
Vision	R.E.—V=	<i>4/6</i>	R.E.—V=	
	L.E.—V=	<i>1/6</i>	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)	<i>Lammie Palson</i>			
(Rank)	Medical Officer		Medical Officer	
Enlisted	at		at	
	on	day of	on	day of
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<i>Royal Nfld Regt</i>	<i>6149</i>		
Transferred to	<i>Regiment</i>			
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				

*83
14
28
135*



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 *Wall, James John.*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *6149*
 Intended address *Whitbourne, Nfld.*

Height on discharge Feet
 Color of hair on discharge *Black.*
 Complexion *Dark.*
 Color of eyes *Dark brown.*
 Descriptive Marks *Vaccination left arm, 4 marks.*
 Figure on discharge *Normal.*
 Christian name of Father *Patrick*
 Christian name of Mother *Bridget.*
 Wife's maiden name in full
 Date and place of marriage } *not married.*
 Christian names of children }

Place and date of soldier's birth. *St. John's, Nfld., Aug. 1898.*
 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)

James John Wall (Rank) *Pte*

Station *Prince's Rank* Date *11/12/18.*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

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

Station

Date

21

400A

Trinity

The Royal Newfoundland Regiment

Class for Demobilization:—
C

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 25-11-18

Regimental No. 6149

Name Wall James (Gte)

Address Mitbourne

Present Medical Category A II

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

R H Dart Capt
O.C. Discharge Depot.

Members of Board } P. Paterson
Senior Medical Officer

J W Burden
M. O. Depot

Civil Re-establishment Committee.



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To work as Fireman:

James Wall
Signature of Man.

C. W. Murphy
Signature of the Vocational Officer or his Representative.

Reg. No. *6149*

Place *St. John's*

Date *13/12/18* 191



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.

~~1064~~

10 12

Examination of James Hall.
aged _____ conducted at Hdqs.
Date: 19 yrs -
16/4/17. Recruiting Officer:

NO OF TEST FINDING

Boots

1 no
2 no
3 no
4 no
5 no
6 no
7 yes
8 yes.
9 no

6/6 Boots

Rejection Badge 1072
issued 16/4/17
1072

33 no.

35 101 lbs

37 \$1.00 per year.
38 father. Patrick,
39 no. Sydney.

Signature of Medical Examiner: DW Borden

W. J. ...

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on Sept. 9 1918

1. Name James Wall Age (a) Declared 19
(b) Apparent

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

What severe illnesses have you had? none

typh Burn
Comp Fain

6149

3. Height 5' 3" Weight 111 1/2 was for on weight
4. Eyesight (a) Left 4/6 (b) Right 4/6
5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~
Measurement (a) Expiration 30 (b) Inspiration 34 1/2

7. Examination of Heart ~

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

- Teeth
- Throat
- Nose
- Ears (Otorrhea)
- (Deafness)

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

11. Name and address of next of kin Patrick, father, Colinet

REMARKS—

ATT

[Signature]
[Signature]
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland

Number of Sheet One
Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	Wall, James	Age on	19 years	months	Mechanic	
Joined	Date	Place and Date of Enlistment	Sep 9-15		Religion	
Joined	Date		with Colours 125 years.		R.C.	
Joined	Date	with Reserve 365 years.		Place of Birth		
Joined	Date					

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				Demobilized Sep 11 '19					

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6149 Rank R1E Name Wall James
 Date of Enlistment 9.9.18 Address Whitbourne District County
 Occupation Mechanic Classification for Discharge C Medical Category A3
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	/	N.F. Med.	D.F. 1	/
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	D 400A	B 1915	2	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2	/		" 6	
B 179c	B 120	M 93	/			

Date 13.12.18

Abelley Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

James Wall

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

Date 13-12-18

Joseph H. Snow
O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 256 to his home at Whittouree and Release Certificate No. 337 issued.

Date 13-12-18 Chadwick Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 11-1-19

Date 13-12-18 Howley Capt
Depot Paymaster.

Discharge approved for 14.12.18

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	✓ 1	N.F. Med.	D.F. 1.	✓ 1	Form B
B 178	W 3494	B 122		Board 1st.	" 2.	✓ 1	
B 178a	D 400A	B 1915	✓ 2	do 2nd.	" 3.	✓ 2	
B 179	D 400B	Form L.	X	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	✓ 1				✓

Date 14.12.18 Chadwick Capt
Demobilization Officer.

APPROVED. W

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

with following additional documents.

Date DEC 14 1918 R.H. East Capt
O. C. Discharge Depot.

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

Date Dec 18/1918 M. Howley Capt
o/c R.



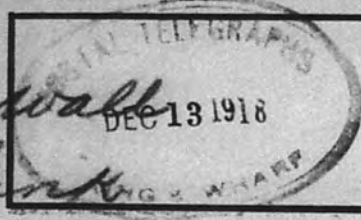
NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 7 Sent by _____ Rec'd by _____ Check 9pd No. _____

Place from Whitbourne 13

To 6149 ste Jas wall
princes Rupert



*Your brother peter died this
morning at two oclock*

Mrs John wall

Reg. No. *6149* Rank. *Plt* Name *Wall James*
Attested *9/9/18* Address *83 Pleasant Street*
Allotment *604* Allottee *Mrs John Wall (Grandmother)*
Date of Allotment *1-10-18* Returned from Overseas
Embarked for Overseas Cause

Vacc 10-9-18
23-9-18 Special Duty Port-aud. Laques, Beld 41-118
13-12-18 PASSED TO DEMOBILIZATION OF
14-12-18 DISCHARGE APPROVED ON DEMOBILISATION.

C.R. 6149 Grand Falls

Dear Sir

Aug 4th 1922

through some over look
I have not yet received my
war medals I would like to
know the reason why or I
never received any ribbon or
of any kind

6149 Rt James Wall

~~32~~ Monchy Rd

Never O'Seas.
not Entitled

C.R. 6149

August 7th, 22

No. 6149 Pte. James Wall,
32 Monchy Rd.,
Grand Falls.

Dear Sir:-

Reference your letter of 4th inst.,
relative to Service Medals, please be advised
that you are not entitled to receive same, as
you did not proceed overseas.

Yours faithfully,

Lieut.-

Officer i/c Records.