



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6113 Name Alpheus Warren Corps CofE

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Alpheus Warren
2. What is your full Address? 2. Open Hall B.B.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 24 Years Months
5. What is your Trade or Calling? 5. Miner
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, Alpheus Warren 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.

Alpheus WarrenSIGNATURE OF RECRUIT.

29-8-15 St. John'sSignature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Alpheus Warren 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 29 day of August 1915.
 Signature of Attesting Officer C. D. D. D. D.

†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 CofE.
 If enlisted by special authority, such will be attached to the original attestation.
 Date 30-8-1915 }
 Place St. John's } 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 Alpheus Warren

Apparent age 24 years months. Height 5 feet 14 inches

Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Warren
Open Hall BB | 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 _____									<div style="text-align: right; margin-bottom: 10px;"><i>[Signature]</i></div>
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days

" " Pensions " _____ [" "] _____ " _____ "

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Alpheus Warren

Apparent age 24 years months. Height 5 feet 4 inches

Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Warren
Open Hall 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 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 _____									<div style="font-size: x-small;"> Total Service forfeited as above..... </div>
Joined at _____ on _____									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [" "] _____ " _____ "									



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6113 Name Alpheus Warren Corps CofE

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- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 24 Years Months
- 5. What is your Trade or Calling? 5. Miner
- 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, Alpheus Warren 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.

Alpheus Warren SIGNATURE OF RECRUIT.
29-8-15 St. John's Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
I, Alpheus Warren 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 29 day of August 1915.
Signature of Attesting Officer C. B. Dickson

CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.
Date 30-8-1915
Place St. John's 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

6113

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

Name Alpheus Warren

Apparent age 24 years months. Height 5 feet 1/4 inches

Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Warren
Open Hall BB | 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. Pny		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									<div style="font-size: 2em; font-family: cursive;"> Deschamps Jan 31 19 </div>
Joined at _____ on _____									
Total Service forfeited as above.....									

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

" " Pensions " [" "] " " "

C.R. 6113

Extract from Daily Orders part II, Depot St. John's dated
February 1st., 1919.

The discharges of the undernoted on Demobilization have been
COMPLETED by Officer i/c Records of noted date 21-1-19.

#6113 Pte. Alpheus Warren.

C.R. 6113

Extract from Daily Orders part II, Depot St. John's dated Jan. 24/1919.

The discharges of the undrilled men on demobilization have been
APPROVED by D. G. Discharge depot on 20-1-19.

#6113 Pte. A. Warren

C.R. 6113

Extract from Daily Orders Part 11 from Depot St. John's Aug. 30/18

#6113 Pte. Alpheus Warren.

Attested for Service with the Royal Newfoundland Regiment

29-8-18.

U
Warren, A

6113

Ray Leeph

January 31st., 1919

#6113 Pte. Alpheus Warren,

Open Hall, B.B.

Dear Sir :-

Please find enclosed "Discharge
Certificate No. 794."

Yours faithfully,

Captain,
Paymaster & Officer i/c Records

Enc' 1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6113 Rank Private Name Warren - Alphaeus
 Intended place of residence Open Hall B.B.
 2. Occupation Fisherman
 Classification of soldier D Medical Category A-II *on date granted*
On date leave without pay granted.

3. The above named man is discharged in consequence of

DEMobilIZATION:

4. His accounts are correctly balanced and I have impartially inquired of all matters brought before me, in accordance with Regulations.
 ENLISTED under the MILITARY SERVICE ACT
 Place and granted leave without pay.
 Date 20-1-19 NOT ELIGIBLE for PAY and ALLOWANCES
 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 Commanding Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my name.
 ENLISTED under the MILITARY SERVICE ACT
 Place and date and granted leave without pay.
 NOT ELIGIBLE for PAY and ALLOWANCES
 Signature of soldier
 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.
 NOT APPLICABLE
 Place and Date Granted Leave without pay at his own request after attestation to continue in civilian occupation
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 29.8.18 No of days on Military
 Discharged from service 20-1-19 Service None

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge of Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place ST. JOHN'S
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JAN 20 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. Johns, Nfld.
 Date January 31 1919
 Officer in Charge of Records
 The Royal Newfoundland Regiment

at B 20191794

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 929 Marlo to his home
 at and Release Certificate No. issued.

Date 20-1-19-

CSD Wk Capt
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been directly balanced and all matters in connection
 therewith settled. He has **ENLISTED** under the **MILITARY SERVICE ACT** and received pay and **all leave without pay**
 and granted **NOT-ELIGIBLE for PAY and ALLOWANCES** to

Date Depot Paymaster.

Discharge approved for 20 1 19

Forwarded with following documents to O.C Discharge Depot.

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

Date 24.1.19

CSD Wk Capt
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

JAN 20 1919

Date

R.H. Sait Capt.

O. C. Discharge Depot.

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

Date

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

MEDICAL HISTORY

OF

Surname Warren

Christian Name Alpheus

Table I.—GENERAL TABLE

Birthplace :—Parish Open Harbour County Newfoundland

SPECIAL RESERVE

REGULAR ARMY

Examined	on <u>29</u> day of <u>Aug</u> 191 <u>8</u>	on	day of	191
	at <u>St John</u>	at		
Declared Age	<u>24</u> years	days	years	days
Trade or Occupation	<u>Yachtsman</u>			
Height	<u>5</u> feet	<u>4</u> inches	feet	inches
Weight		<u>114</u> lbs.		ll s.
Chest Measurement	Girth when fully expanded	<u>34</u> inches		inches
	Range of Expansion	<u>3</u> inches		inches

Vaccination Marks	Arm	Right	Left	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) Lamm Patterson
 (Rank) Major Medical Officer

Enlisted at St John on 29 day of Aug 1918

Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
Transferred to	<u>Royal Nfld Regt 6113</u>			
	<u>Regiment</u>			

Became non-effective by on day of 191 on day of 191

(Signature)
(Rank)

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on Aug 29 1918

1. Name Alpheus Warren. Age (a) Declared 24
(b) Apparent
2. Do you know of anything wrong with you? Trouble in Leg & Back.

What severe illnesses have you had? None.

Eyes Blue
Temp Jan
Flank Scarred

6113

3. Height 5ft 14 1/2 Weight 114
4. Eyesight (a) Left 6/6 (b) Right 6/6
5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~
Measurement (a) Expiration 31 (b) Inspiration 34

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? Yes. 6 Days ago
11. Name and address of next of kin Father William Wood Hall St B

REMARKS—

A 11

Archibald
Ed. Burden
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet One

Regiment of Royal Newfoundland Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>6113</u>	Age on	24 years	months		<u>Menu</u>
Joined	Date	Place and Date of Enlistment	<u>St Johns</u>	Religion		<u>Col E</u>
Joined	Date	Period of	with Colours <u>156</u> years.	Place of Birth		<u>Open Hall B B</u>
Joined	Date		with Reserve <u>365</u> years.			

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
				<u>Demobilized St Johns 31/19</u>					

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6113 Rank Plt Name Warren Alphaeus
 Date of Enlistment 29.8.18 Address Open Hall District Bonaville
 Occupation Fisherman Classification for Discharge A Medical Category AII
 Recommendation S.M.B. Disability Rating on 24th Feb leave without pay

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

Date 24.12.18

W. A. Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

NOT APPLICABLE.
 Granted Leave without pay at his own request after
 attestation of his own civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable **ENLISTED** under the **MILITARY SERVICE ACT**
 and granted leave without pay.....
- (b) Clothing Supplied **NOT ELIGIBLE** for **PAY** and **ALLOWANCES**.....

Date.....

O i/c. Re-clothing.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6113 Rank Private Name Warren Alphaeus
 Date of Enlistment 29.8.18 Address Open Hall District Bonaville
 Occupation Fisherman Classification for Discharge A Medical Category AII
 Recommendation S.M.B. Disability Rating on his last leave without pay

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.....	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.....
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Date 24.12.18

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 Granted Leave without pay at his own request after
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Particulars passed to Vocational Officer for information and action.

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Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable **ENLISTED** under the **MILITARY SERVICE ACT**
 and granted leave without pay.....
- (b) Clothing Supplied **NOT ELIGIBLE** for PAY and ALLOWANCES.....

Date.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
 at and Release Certificate No. 929 issued.

Date 20-1-19-

[Signature]
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
ENLISTED under the MILITARY SERVICE ACT
 therewith settled. He has received pay and allowances to and granted leave without pay.

Date **NOT ELIGIBLE for PAY and ALLOWANCES.**
 Depot Paymaster.

Discharge approved for 20 1 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	1	N.F. Med.	D.F. 1	
F 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		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	1			

Date 24 1 19

[Signature]
 Demobilization Officer.

APPROVED.

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

JAN 20 1919

Date

[Signature]
 O. C. Discharge Depot.

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

Date 25 1 19

[Signature]

Reg. No. *6113* Rank *He* Name *Warren Alpheus*
Attested *29-8-18* Address *Open Hall BB. (B Key)*
Allotment..... Allottee.....
Date of Allotment..... Returned from Overseas.....
Embarked for Overseas..... Cause.....

9. Leave Without Pay 29-8-18 to 15-10-18.

20-1-19

20-1-19

DISCHARGE APPROVED ON 1 FEBRUARY