



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 6244 Name Thomas Willmann Corps A/S

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

1. What is your name? ..... 1. Thomas Willmann
2. What is your full Address? ..... 2. 136 Power St. City
3. Are you a British Subject? ..... 3. ....
4. What is your age? ..... 4. 18 Years 10 Months
5. What is your Trade or Calling? ..... 5. Student
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. ....
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. ....
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 Ypr
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, Thomas Willmann 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.

8/10/18 ..... Thomas Willmann SIGNATURE OF RECRUIT.  
..... George Walsh Signature of Witness.

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

I, Thomas Willmann 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 8 day of Oct 1918  
Signature of Attesting Officer W. D. Dickson

### † CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....  
If enlisted by special authority, such will be attached to the original attestation.  
Date OCT 9 - 1918 ..... 191  
Place ST. JOHN'S .....  
Signature of Approving Officer Robertson Capt.

† 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. St. John's, Nfld.

\* 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 Thomas Wellman

Apparent age 18 years 10 months. Height 5 feet 6 7/8 inches

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

Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Wellman  
136 Grand St. Cts. Relationship Widow

### Particulars as to Marriage

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

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

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ days  
 " " Pensions " [ " " ] " " "



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 6244 Name Thomas Wellmann Corps A/E

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

- |  |                                     |
|--|-------------------------------------|
| 1. What is your name? .....  | 1. <u>Thomas Wellmann</u>           |
| 2. What is your full Address? .....  | 2. <u>126 Lower St. John's</u>      |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                       |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>10</u> Months |
| 5. What is your Trade or Calling? .....  | 5. <u>Student</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 .....<br>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, Thomas Wellmann 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.

8.10.18 Thomas Wellmann SIGNATURE OF RECRUIT.  
George Walsh Signature of Witness.

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

I, Thomas Wellmann 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 8 day of Oct 1918.  
Signature of Attesting Officer C. B. Dickson, Lieut.

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the .....  
If enlisted by special authority, such will be attached to the original attestation.  
Date. OCT. 9. 1918 ..... 191  
Place. ST. JOHN'S .....  
Robertson, Captain } Approving Officer.  
Commanding Depot.

† The signature of the Approving Officer is to be marked in the presence of the Recruit.  
‡ Here insert the "Corps" for which the Recruit has been enlisted. St. John's, Nfld.

\* 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:  
vis:—(Name) ..... re-enlisted in the (Regiment) ..... on the (Date) .....

6244

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Thomas Wellmann  
 Apparent age 18 years 10 months. Height 5 feet 6 7/4 inches  
 Chest Measurement { Girth when fully expanded 34 inches  
 Range of expansion 4 inches  
 Distinctive marks \_\_\_\_\_

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Wellmann  
136 Cavour St. C. | Relationship Father

Particulars as to Marriage

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from									
Joined at _____ on _____									
				<u>Anchorage April 28 1919</u>					

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ days  
 " " Pensions " \_\_\_\_\_ [ " " ] " \_\_\_\_\_ "

C.R. 6244

Extract from Daily Orders Part 11 Unit <sup>T</sup>he Royal Nfld. Regt.,  
Nov. 4th, 1918.

6244 Pte. E. Wellman.

To be L/Cpl. from 4-11-18.

MM.

C.R.

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, dated 22, 8-18.

Drms. T. Wellman.

Discharged from M.I.D. hospital 21-8-18.

C.R. C.R.

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated August 1, 1918.

# Drmr. Thomas Wellman.

Admitted to M.I.D. Hospital 1-8-18

C.R! 6244

Extract from Daily Orders part II, Depot  
St. John's dated May 6th., 1919.

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

#6244 L/C. Thomas Wellman.

28-4-19.



C.R.

Extract of Daily Orders, Part 11, Unit: The Royal Newfoundland Regt.  
dated Oct. 11th 1918.

Strength Decreases:

Drmr. T. Wellman.

Struck off the strength of Drum & Bugle Band from 7/10/18, having  
been duly attested and taken on the strength of the Regiment.

C.R. 6244

Extract from Daily Orders Part ~~II~~ <sup>I</sup> ~~Exit~~ The Royal Nfld. Regt.,  
St. John's Dated Oct. 10th, 1918.

6244 Pte. Thomas Wellman.

Attested for General Service with the Royal Nfld. Regt.,  
8-10-18.

Wellman, Chas

6244

Ray sept.

April 28, 1919

#6244 L/Cpl. Thomas Wellman,  
#136 Gower St.,  
City.

Dear Sir:-

Please find enclosed "Discharge Certificate  
No. 2131."

Yours truly

Paymaster & U.I/O Records  
Captain,

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 6244 Rank Private Name William Thomas  
 Intended place of residence 136 Lower St. John's  
 2. Occupation Student  
 Classification of soldier A Medical Category A

3. The above named man is discharged in consequence of... **DEMOBILIZATION**  
~~Service for War Service~~

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place ST. JOHN'S  
 Date 14-4-19  
 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  
 Signature of soldier Thos. Willman  
 Signature of witness Amelouston St.

### 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  
14-4-19  
 Signature of soldier Thos. Willman  
 Signature of witness James B. Leonard Det.

### STATEMENT OF SERVICE

7. Enlisted for service 9-4-17 No of days on Military Service 750  
 Discharged from service 14-4-19 from 14 days

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place ST. JOHN'S  
 Date APR 14 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed  
 Place St. John's, Nfld  
 Date April 28 1919  
 Officer in Charge  
 The Royal Newfoundland Regiment

Apr. 30 1919 6151

54  
30  
31  
35  
38  
31  
24  
77

Taken on the  
Sept. as summer  
9-4-19

# The Royal Newfoundland Regiment

DEMobilIZATION OF  
 Reg. No. 6244 Rank S/Cpl Name Wellman, Thomas  
 Date of Enlistment 8-10-18 Address St. John's District St. John's  
 Occupation Plumber Classification for Discharge A Medical Category A II  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	
B 178a.....	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.....			" 6.....	
B 179c.....	B 120.....	M 93.....	1			

Date 14-4-19

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

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

I am Wellman in a position to resume civilian occupation.

Thos Wellman

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 Ambloust

Date 14-4-19

O. i. c. Re-clothing.

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. me to his home at ..... and Release Certificate No. 2129 issued.

Date 14-4-19 .....  
*J.A. Crawford*  
 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 28-4-19

Date 14-4-19 .....  
*W. H. Capt.*  
 Depot Paymaster.

Discharge approved for 14-4-19 .....

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
E 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 14-4-19 .....  
*J.A. Crawford*  
 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**

**APR 14 1919**

Date .....  
*R.H. Sait Capt.*  
 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*  
*Student*

*Thos Wellman*

Signature of Man.

*J. A. Crawford*

Signature of the Vocational Officer or his Representative.

Reg. No. *6244*

Place **ST. JOHN'S.**

Date **APR 14 1918**

191



# The Royal Newfoundland Regiment

Class for Demobilization:

*A 2*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *14. 11. 19* .....

Regimental No. .... *624* .....

Name ..... *Thomas Wellman L/Cpl.* .....

Address ..... *136 Lower Street* .....

Present Medical Category..... *A1 A II* .....

Recommended for:— { (a) Immediate discharge .....

(b) ~~Standing Medical Board~~ .....

Members of Board {

*R.H. Lait Capt.*  
O.C. Discharge Depot.

*Peterson*  
Senior Medical Officer

*T.W. Burden*  
M. O. Depot

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

# MEDICAL HISTORY

OF

Surname Wellman Christian Name Thomas

Table I.—GENERAL TABLE

Birthplace :—Parish 136 Grand St City County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY		
	on	day of	on	day of	
Examined .....	8	Oct	1918	191	
at .....	<u>St John's</u>		at		
Declared Age .....	18	years 10	days	years days	
Trade or Occupation .....	<u>Student</u>				
Height .....	5	feet 6 3/4	inches	feet inches	
Weight .....	134		lbs.	ll s.	
Chest Measurement {	Girth when fully expanded .....		34	inches	
	Range of Expansion .....		2	inches	
Physical Development .....					
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)	<u>L. J. Peterson</u>				
(Rank)	Medical Officer		Medical Officer		
Enlisted .....	at	<u>St John's</u>		at	
	on	8	day of Oct	1918	on day of 191
Joined on Enlistment .....	Corps	<u>Royal Nfld Regt</u>		Corps	
	Regtl. No.	<u>6244</u>		Regtl. No.	
Transferred to .....					
Became non-effective by .....	on	day of	191	on day of 191	
(Signature)					
(Rank)					





## 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 *Thomas Wellman*

Regiment from which discharged *Royal Newfoundland*

Regimental number *6244*

Intended address *136 Lower Street City*

Height on discharge *5 Feet 7*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks \_\_\_\_\_

Figure on discharge *Medium*

Christian name of Father *Moss*

Christian name of Mother *Emily*

Wife's maiden name in full \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

Christian names of children \_\_\_\_\_

Place and date of soldier's birth *St. Johns 19-11-~~1896~~ 1900*

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) *Thomas Wellman*

*W. Lavo*

Station *St. Johns*

Date *1-1-1919*

(Rank)

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



## ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on OCT 8 19181. Name Thomas Wellman Age (a) Declared 18 — 7 Oct / 18  
(b) Apparent2. Do you know of anything wrong with you? noWhat severe illnesses have you had? noneEyes Blue  
Comp FairHands3. Height 5 ft 6 3/4 Weight 1344. Eyesight (a) Left 6/6 (b) Right 6/65. Physical Defects (Examine after strenuous exercise) —6. Examination of Lungs —

Measurement

(a) Expiration 30(b) Inspiration 347. 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 mths ago at Larin11. Name and address of next of kin Father Moses 136 Lower St City

12. Category

REMARKS—

A11

Archibald  
St. John's  
Medical Examiners.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim 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 question 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, MAY & RECORD OFFICE, ST. JOHN'S.

Christian name... **Thomas**..... 2. Surname... **Wellman**.....

3. Rank.... **Lance-Corporal**..... 4. Regtl. No.. **6244**.....

5. Address in full to which future payments of gratuity are to fax be forwarded.... **136 Gower Street, St. John's, NF**.....

6. Date of enlistment in the Regiment... **April 9th, 1917**.....

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

**Not Applicable**

8. Relationship of such dependents.... **Not Applicable**.....

9. Address in full of such dependent.. **Not Applicable**.....

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 Nfld. If so, give dates, and particulars of such service.. **Yes.. In Bugle Band from April 9th, 1917 and**

**as an attested man from October 8th, 1918.**

12. Give total length of time which you served on active service, whether in Nfld or Overseas... **2 years and 5 days**.....

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

..... In Bugle Band from April 9th, 1917.....

..... Attested into Regiment October 8th, 1918 Number 6244.....

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..... **No**.....

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?.... **Not Applicable**.....

(b). If so, was such reversion in consequence of misconduct or inefficiency?..... **Not applicable**.....

19. Are you now serving in the Regt.? .. **No**.... If not give:- (a) Date of discharge. **April 14th, 1919** .. (b) Reason for discharge.....

**Demobilization**.....

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.....

**No**.....

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: *Thos Wellman*  
 Place of Residence: *St John's*  
 Declared before me at: *St. John's*  
 This *15<sup>th</sup>* day of *April* 19*19*

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits, *Chas. O. Hunt*  
*Barrister at Law*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified Correct.			<i>W. J.</i>	Byraster.



C.R. 6244

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Oct. 16th, 1917.

The following man proceeded on Special Duty RECRUITING  
as Drummer on Oct. 16th, 1917.

6244 Drummer T. Wellman.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of *Royal Newfoundland Regiment*

Number of Sheet *100*  
Signature of O. C. Company *A. B. Dickson*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>6244</i>	Age on	<i>18</i> years <i>10</i> months	<i>Student</i>	
Joined	Date	Place and Date of Enlistment	<i>St John's N.S.</i>	Religion	
Joined	Date	Period of	with Colours <i>203</i> 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
				<i>Demobilized</i>	<i>St John's</i>	<i>28</i>	<i>19</i>		

To be carried over.