



FIRST NEWFOUNDLAND REGIMENT 4229

ATTESTATION OF

No. 4229 Name John W Bowler Corps R.C.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John W Bowler
- 2. What is your full Address? 2. Parsons
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 29 Years 7 Months
- 5. What is your Trade or Calling? 5. Chartered
- 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? } II. yes

FOR THE DURATION OF THE WAR

20 Report Dec 19-17

I, John W Bowler 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.

H. 7-12-17

.....SIGNATURE OF RECRUIT.
.....Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John W Bowler 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 7th day of December 1917
Signature of Attesting Officer W. Bowler

†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..... } Approving Officer.
Place..... }

† 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 John W Fowler
 Apparent age 29 years 7 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 40 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Fowler
Chenews. | Relationship Brother

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 <u>7-12-17</u>									
Joined at <u>St John's</u> on <u>December 7-1917</u>									
<u>Discharged March 30/1919</u>									
<u>Embarked St John's St. Helier to Halifax N.S. 29-1-18.</u>									
<u>will be attached Hqs Jersey boys on probation for one month from 28th Inst. 27-1-18.</u>									
<u>Stuck off strength 31-5-18</u>									
<u>Having completed one month's trial is attached Hqs Jersey boys 31 8/8</u>									
<u>to be engaged to for demobilization 30-1-19</u>									
<u>Arrives Hqs 7-2-1919</u>									
<u>Demobilization St John's 30 3/19</u>									
<u>No Active Service -</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 30-3-19 (date of discharge) 1 years 114 days
 " " Pensions " [" "] " " " " " " " "

J. Fowler

C.R.

4229

~~FRG~~

14229

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 14229 Rank Pvt Name Fowler J. J.
 Date of Enlistment 7-12-17 Address Penews District Ferryland
 Occupation Railroader Classification for Discharge B Medical Category 1
 Recommendation S.M.B. permanently unfit Disability Rating Nil
 Passed to Demobilization Officer with following documents:—

N.F. P36	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 15-3-19 H. News Hunt
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

John Fowler

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Joseph A. Snowdon

Date 15-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R.H. 7* to his home at *Kenner* and Release Certificate No. *1534* issued.

Date *15-3-19* *R.H. 7*
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 *30-3-19*

Date *15-3-19* *R.H. 7*
Depot Paymaster.

Discharge approved for *16.3.19*

Forwarded with following documents to O.C Discharge Depot.

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 *15.3.19* *R.H. 7*
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

R.H. 7 Capt.

Date *MAR 16 1919* *R.H. 7*
O. C. Discharge Depot.

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

Date *March 11 1919* *R.H. 7*

OFFICE COPY

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17

Regtl No. 4229 Rank Private Name J. Fowler Unit R. Newfoundland who was transferred
to Mfld. Forestry Corps on 31/8/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

	PARTICULARS	£	s	d	PARTICULARS	£	s	d
PERIOD: From <u>3/5/18</u> To <u>30/5/18</u>	Balance Dr. from				Balance Cr. from			
	Allotment 28 days @ 50 ^o	1	4	6	Pay 28 days @ \$ 107	1	28	07
	Cash Payments:				Field Alice 28 days @ \$ 128 ⁰⁷	1	30	80
	by AFN 1510		1	3	Other Alices days @ \$			
	Other Debits:				Other Credits:			
	Total Debits			16	Total Credits			16
	Balance due by Paymaster			6	Balance due to Paymaster			6
				7				7
				6				6
				7				7

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

D. Coy
H. D. Corp. Overseas (Place) Sept 3rd 1918 (Date)

W. H. Long Capt.
O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office _____ to _____ and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

OFFICE COPY.

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 14229 Rank Private Name J. Fewell Unit R. Newfoundland who was transferred to Mfld. Forestry Corps on 31/8/18 Authority _____ Cause _____

DR.		STATEMENT OF ACCOUNT										CR.							
		PARTICULARS				\$	¢	£	s	d	PARTICULARS				\$	¢	£	s	d
PERIOD: FROM <u>3/8/18</u> TO <u>30/8/18</u>	Balance Dr. from										Balance Cr. from								
	Allotment 28 days @ 50 [¢]		1	14				1	2	17	6	Pay 28 days @ \$ 1 ⁰⁰							
	Cash Payments:										Field Allce 28 days @ \$ 1 ⁰⁰ 2 ⁰⁰		1	30	80		1	6	7
	by AFN 1510							1	3	9	1	Other Allces days @ \$							
	Other Debits:										Other Credits:								
	Total Debits							1	6	6	7	Total Credits						1	6
Balance due by Paymaster							1	6	6	7	Balance due to Paymaster						1	6	7

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

H. D. G. Dinkler Sept 3rd 1918.
(Place) (Date)

W. J. Long Capt
O.C. "D" Company.

Made up/Checked in accordance with information received in the Pay & Record Office _____ to _____ and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 4229 Rank Private Name J. Fowler Unit R. Newfoundland who was transferred to Newfoundland Ferry Co. on 31/8/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	£ s d				PARTICULARS	£ s d				CR.		
		£	s	d	£		s	d					
PERIOD: From <u>3/8/18</u> To <u>30/8/18</u>	Balance Dr. from					Balance Cr. from							
	Allotment 28 days @ 50¢	1	14	6		Pay 28 days @ \$ 1.007			1	28	07		
	Cash Payments:					Field Allce 28 days @ \$ 1.16 2 ⁸⁰	1	30	80		16	6	7
	by AFN 1510.			1	3	9	1						
	Other Debits:					Other Allces days @ \$							
						Other Credits:							
	Total Debits			1	6	7	Total Credits			1	6	7	
	Balance due by Paymaster					Balance due to Paymaster							
				1	6	7				1	6	7	

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

D. Company
Mag. D. Camp. Windsor Sept 3rd 1918
 (Place) (Date)

W. Long Cap
 O.C. "D" Company.

Made up/checked in accordance with information received in the Pay & Record Office _____ to _____ and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

C.R. 4229

Extract of Daily Orders Part II, Royal Newfoundland

Regiment Depot St. John's, dated March 19th/19.

The Discharge of the undernoted on Demobilization
has been APPROVED by Officer Discharge Depot from noted date.

#F 4229 Pte. John Fowlow.

16/3/19.

C.R. 4229

extract from Medical Board held on THURSDAY AFTERNOON

MARCH 18th, ¹⁹¹⁹ the following was the finding.

recommended discharge from the Army.

#4229 Pte. J. Fowlow.

C.R. 4229

Extract from Daily Orders part II,
Depot St. John's dated 11-2-19.

The unde noted returned from Overseas and reported
at depot 7-2-19-6

#4229 Pte. Jas. Fowlow.

C.R. 4229

Extract from Foresters Nominal Roll of Foresters
Embarked S.S. Corsican, Feb. 1st, 1919.

4229 Fowler.

C.R. 4229

Extract from Daily Orders Part 11 By. Lt. Col. J.B.
Barten, Commanding The Royal Nfld. Regt. dated
27-7-18.

The undermentioned man will be attached to the Forestry Corps
on probation for one month.

4229 Pte. Fowler.

4224

C.R.

Extract from Daily Orders War's II Unit The Royal Field
Regt., 32. Coy., Dec. 8th, 1917.

4229 Pte. J. Fowler.

Attested for General Service with the R.F.D. Regt. with
effect from Nov. Dec. 7th, 1917.

C.R. 4229

Extract from Daily Orders ~~sent~~ By. Lt. Col. B.J. Barton, D.S.O.
Commanding 2nd Bn. Royal Nfld. Regt. 31-8-18.

The undermentioned man who proceeded to the Nfld. Forestry Corps.
27-7-18. on one months probation is struck off the strength of
the Battn. from 31-8-18.

4229 Pte. Fowler.

C.R. 4229

Extract from ORDERS By major W.S. Sullivan dated 2/9/18 Commanding Newfoundland
Forestry Companies

#4229 Pte. J. Fowler.

The above mentioned having completed their month's trial with this
Unit are attached to the Strenghth from 31/8/18 and Posted to C.Co..

C.R. 4229

Extract from Honorary Roll Staff "H" company embarked
U.S. "Florissel" Jan 29th, 1918.

2229 Pte. Fowler J.

4229

Nov. 12th, 1922

Address: Renewals

Dept of Militia
St. John's

Returning medal sent me in error tomorrow's mail

J.W. FOWLER

NEWFOUNDLAND POSTAL TELEGRAPHS

Cable Connection with all the World



All messages sent are subject to the following conditions:

The Minister of Posts and Telegraphs may decline to forward the Telegram, 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 Telegram shall never reach its destination by reason of any neglect or default of the Minister of Posts and Telegraphs or his Servants whilst the Telegram remains under the control of the Minister of Posts and Telegraphs, he will refund the amount paid by the Sender for such Telegram.

The Minister of Posts and Telegraphs 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 Telegram, 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 Minister of Posts and Telegraphs over the Message shall be deemed to have entirely ceased for the purpose of these Conditions at any point where, in the course of the transit of the Telegram to its destination, it may be entrusted by the Minister of Posts and Telegraphs (and the Minister of Posts and Telegraphs shall have full power so to entrust the Telegram) for further transmission by or through any system belonging to or worked by any administration or authority not controlled by the Minister of Posts and Telegraphs exclusively, although worked as a part 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 _____ Address _____

LINE NUMBER	RCD	BY	SENT	BY	CHECK

DATED Oct. 31st., 1921.

TO 4229 Expts. J.W. Fowler,

Renews.

Return Registered Post medal forwarded you in error.

Yours at this office.

Rush.

Dept. of Militia.

Chg. Dept. of Militia.

Fowler, J. W.

4229

Aug Sept.

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 pursue former occupation
Fishing

John J. Sculor

Signature of Man.

C. B. Dukes Capt
Signature of the Vocational Officer or his Representative.

Reg. No. *4229*

Place

Pt Jones

Date

15-3-19

191

March 30, 1919

#4239 Pte. John W. Fowler,
Renews,
Ferryland Dist.

Dear Sir :-
No. 1532."

Please find enclosed "Discharge Certificate

Yours truly,

Captain,
Paymaster & O. I. O. Records

April 15, 1919

#4229 Pve. John W. Bowler,

Renews,

Ferryland Dist.

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 & O.i/c Records
Captain,

14224

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 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, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name... *John William* 2. Surname... *Fowler*

3. Rank... *Private* 4. Regt. No. *4229*

5. Address in full to which future payments of gratuity are to be forwarded... *John W. Fowler Renewes Ferryland Dist*

6. Date of enlistment in the Regiment... *December 20th 1917*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge... *Mrs A. O'Leary*

8. Relationship of such dependents... *Sister*

9. Address in full of such dependent... *Mrs A. O'Leary Renewes Ferryland Dist*

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... *No, was also overseas*

12. Give total length of time which you served on active service, whether in Nfld, or Overseas... *From Dec 20th 1917 until March 16th 1919*

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

..... *Yes*..... *Discharged*..... *Physically unfit*..... *in November*
1916..... *Regimental Number*..... *have forgotten*.....
Re-enlistment..... *Dec. 24th 1917*..... *Regimental no. 4229*

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.....

..... *Yes*..... *for*.....
Clothes..... *\$ 60.00*.....

15. Have you been issued with a War Service Badge?.....

..... *No*.....
16. Have you, during the present war, served in the Imperial Forces..... *Yes*

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?.....

..... *Not Applicable*.....
19. Are you now serving in the Regt.?..... *No*..... If not give:- (a) Date of discharge..... *March 16th*..... (b) Reason for discharge..... *In*
Consequence of 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 (a); 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: *J. W. Fowler*

Place of Residence: *Revere*

Declared before me at: *Ferryland*

This *twenty-third* day of *March* 191*9*

R. Jerome Freeman Esq

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>4 mos.</i>	<i>280.00</i>
.....
.....
Certified Correct.					Prvraster.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 229 Rank Pte Name Fowler J. J.
 Date of Enlistment 7-12-17 Address Pennew District Newfoundland
 Occupation Railroader Classification for Discharge B Medical Category E
 Recommendation S.M.B. permanent unfit Disability Rating Nil
 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
E 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 15-3-19

H. News
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

John Fowler

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$65.00
- (b) Clothing Supplied Joseph A. Lawrence

Date 15-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.H. 7 to his home at London, Ontario and Release Certificate No. 30-3-19 issued.

Date 15-3-19 Demobilization Officer R.H. Coff

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 30-3-19

Date 15-3-19 Depot Paymaster H. M. [Signature]

Discharge approved for 16.3.19

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
F 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 15 3 19 Demobilization Officer R.H. Coff

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAR 16 1919

R.H. Coff
O. C. Discharge Depot.

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

Date

WNB*EB

June 21st 1920.

LAND SETTLEMENT

Major Howley,
O. I. C. Pay & Records.

J. W. Fowler, 4229

Kindly furnish me with a cheque in favour of the man named above,
for the sum of eleven dollars and twenty cents for transportation.
Charge same to the Re-establishment Land Settlement.

\$11.20

J. C. D. G. W. H. K. Hall

Vocational Officer.

ACCOUNTS		
CH. NO.	39699	INITIALS <i>AB</i>
INL. LEDGER		INITIALS <i>AB</i>
PAY LEDGER		INITIALS <i>AB</i>
GEN. LEDGER		INITIALS <i>AB</i>

Edna Barnes



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 *James Fowler*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4229.*

Intended address *Renews*

Height on discharge *5 Feet 9.*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks

Figure on discharge *Tall*

Christian name of Father *—*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Renews 6-4-1888*

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) *John Fowler* *St*
 Station *St Johns* Date *10-3-19* (Rank)

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.



C.R. 4229

Extract of Daily Orders Part II Newfoundland Forestry Corps.
Depot St. John's dated April 10th/19.

The discharge of the un demoted on Demobilization has been
CONFIRMED by Officer i/c Records from noted date.

F4229 Pte. John Fowler.

30/3/19.

The Royal Newfoundland Regiment

Class for Demobilization:—

B

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 15-5-19.....

Regimental No. 4229.....

Name Fowler John Pre.....

Address Renew.....

Present Medical Category..... E.....

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

Members of Board {

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

H. Parsons
Senior Medical Officer

J. E. Burden
M. O. Depot

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4239 Rank Pte Name Dowler J.W.
 Intended place of residence Reverie

2. Occupation Fisherman
 Classification of soldier B Medical Category 2

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

Eligible for War Service Gratuity

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

Place
 Date MAR 15 1919
H. M. H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
15-3-19
John Dowler
 Signature of soldier
Joseph A. Snowling
 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
15-3-19
John Dowler
 Signature of soldier
W. J. Eaton
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 17-12-17 No of days on Military
 Discharged from service 16-3-19 Plus 14 days Service 469

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 MAR 16 1919
R. H. Sait
 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 March 30/1919
M. Bowley Capt.
 Officer in Charge
 The Royal Newfoundland Regiment

20 B 2079/1532

25
31
28
30
114

From. Ophthalmic Surgeon, Central Military Hospital

WINCHESTER.

To. Medical Officer in Charge,

2nd Royal Newfoundland Regt

11. 3. 1918

"REPORT OF VISION".

No. 4229 Pte Fowler J

Has ...	V.A.	R.E. $\frac{6}{60}$	With correcting lenses	R.E.
		L.E. $\frac{6}{60}$		L.E.

Both eyes Emmetropic
Macula choroiditis
Iris Pale.

Stammers
 Capt. R.A.M.S.
 Ophthalmic Surgeon.

Note..... This report should be attached to this man's
 Medical History Sheet for future reference
 please.....



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station *St. Johns Nfld*

Date *March 12th 1919*

1. Unit *Royal Newfoundland*
2. Regimental No. *4229*
3. Rank *Private*
4. Name *Fowler John.*
5. Age last birthday *30*
6. Enlisted on *Dec 1917*
Jan 1918
- at *St. Johns.*
7. Former trade or occupation *mail-carrier*
8. Disability.

9. History *went across to Depot in Jan 1918. & transferred to Forestry Battalion in Aug. 1918, because of deficient eye-sight. never sick or in hospital whilst across.*

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

Complaints of poor eye sight & headaches occasionally

11. Was sanatorium operation advised and refused?

no

12. Do you recommend discharge as permanently unfit?

yes

Signature

Archibald

Rank or Qualification

on M.O. Report

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x *is not* be considered as aggravated by:—
due to
- (a) Service during this war. (b) Climate. (c) Ordinary Military Service
- Remarks if any:—
14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

Yes

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? *nil*
- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?
(State in percentage.) *nil*

Remarks if any:—

16. Is the disability permanent?
17. Has the disability been aggravated by (a) Intemperance (b) Misconduct
18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to
- General Hospital,
 - Naval and Military Convalescent Hospital,
 - Jensen Tuberculosis Camp.

20. We recommend discharge from retention in the Army

Remarks if any:—

.....
 Signatures *[Signature]* President
 *[Signature]*
 *[Signature]*

Place *[Signature]*
 Date *March 13 19*

APPROVED
 Station
 Date
 DIRECTOR OF MEDICAL SERVICE
 MAR 13 1919
 No.
 NEWFOUNDLAND

.....
 Administrative Medical Officer *[Signature]*

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

MEDICAL HISTORY

6136

Surname Jowles OF Christian Name John W.

Table I.—GENERAL TABLE.

Birthplace:—Parish R News County R.N.S.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>7th</u> day of <u>Dec</u> 191 <u>7</u>	at <u>St John's</u>	on	day of 191
Declared Age	<u>29</u> years	<u>7</u> Mos	years	days
Trade or Occupation	<u>Railroads</u>			
Height	<u>5</u> feet	<u>9</u> inches	feet	inches
Weight	<u>150</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded... <u>40</u> inches			inches
	Range of Expansion... <u>4</u> inches			inches
Physical Development				
Vaccination Marks	Arm	<u>1 Scar</u>		
	Number			
When Vaccinated				
Vision	R.E.—V <u>6/20</u>		R.E.—V=	
	L.E.—V= <u>1/30</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. M. Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. John's</u>	at		
	on <u>7th</u> day of <u>Dec</u> 191 <u>7</u>	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st R.N.S.</u>	<u>4239</u>		
Transferred to	<u>R.N.S.</u>			
Became non-effective by	on	day of	191	on
				day of
[Signature]				
[Rank]				

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
29.

Regiment of 1st 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.	<u>4229 Fowles J.W.</u>	Age on	<u>29</u> years <u>7</u> months	<u>Railroad</u>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<u>St. John's</u> <u>7/12-17</u>	<u>R.C.</u>	
Joined		Date	Period of } with Colours <u>114</u> years. with Reserve <u>565</u> years.	Place of Birth	
Joined		Date			

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
				<u>Demobilized St. John's, 30th 19¹⁹</u>					

To be carried over

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS
DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

REF.

DATE .. **FEB. 24, 1971.** ..

NAME **FOWLER JOHN**
NOM

Service No. **4229 ROW NFLD**
Matricule No **REGT.**

CPC No. **261111**
CCP No

WVA No.
AAC No **59733**

Information Received from **PME ST. JOHN'S NFLD FEB. 17, 1971.**
Information reçue de:

Date of Death **FEB. 4, 1971.**
Date du Décès

Place **NOT STATED.**
Endroit

Distribution: WSR-DASG

~~VI - ASS~~
DO - BD
HO - BC

Pour le chef,
A. F. Goulas
for Chief, Central Registry Division.
Dépôt central des dossiers.