



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 126 Name Charles Taylor Corps Infantry

Questions to be put to the Recruit before Enlistment.

- | | |
|---|--|
| <p>1. What is your name?</p> <p>2. What is your full Address?</p> <p>3. Are you a British Subject?</p> <p>4. What is your age?</p> <p>5. What is your Trade or Calling?</p> <p>6. Are you Married?</p> <p>7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?</p> <p>8. Are you willing to be vaccinated or re-vaccinated?</p> <p>9. Are you willing to be enlisted for General Service?</p> <p>10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?....</p> <p>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?</p> | <p>1.</p> <p>2.</p> <p>3.</p> <p>4. Years Months</p> <p>5.</p> <p>6.</p> <p>7.</p> <p>8.</p> <p>9.</p> <p>10. { Name
Corps</p> <p>11.</p> |
|---|--|

I, Charles Taylor 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.

Charles Taylor SIGNATURE OF RECRUIT.

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Charles Taylor 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..... day of..... 191

Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

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

Date..... 191
Place..... } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, 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 Charles Jowles
 Apparent age 18 years 11 months. Height 5 feet 16 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Alfred Jowles
Living Sea | 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 _____									
Total Service forfeited as above.....									

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

C.R. 4346

extract from daily orders part II Royal Newfoundland Regiment
Depot St. John's dated 17-7-19.

The discharge of the undernoted on demobilisation has been
confirmed by officer i/c records from noted date
19-7-19.

4346, Pte. Chesley Rowlow.

C.R. 4346

Extract from Daily Orders West 11 Unit the Royal WFL. Regt.
St. John's, June 20th, 1919.

The discharge of the undersigned on disability has been
APPROVED by C.O. Winchberg D. 109 with effect from 1-9-19.

4346 Pte. Fowlow G.

C.R. 4346

Extract from Daily Orders Part II Depot, St. John's,

Date

June 18th 1919.

4346, Pte. C. Fowler.

Reported at Headquarters 1/6/19.

ex "Corsican"

which sailed Liverpool May 22/1919.

4346
C.R. 4364

Extract from Nominal Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

4364 Pte. C. Fowler.

C.R. 4346

mm January 24th 1919.

Mrs. Albert Fowlow;
Trinity East.

Dear Madam:

I beg to inform you that we have received an answer to the cable enquiry that we forwarded to our Pay and Record Office, London, regarding your son, No. 4346 Pte. Chas. Fowlow, which states that he is now with the First Battalion on active service, and in good health.

Any further information that we get concerning him will be at once communicated to you.

Yours faithfully,



Lieut.

CASUALTY OFFICER.

WVW/MP.

CR 4346

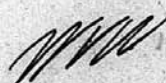
January 21st., 1919.

Mrs. Albert Fallow,
Trinity East, T.B.

Dear Madam:-

I am directed by the Minister of Militia, to acknowledge the receipt of your telegram of January 21st., in which you were making enquiries regarding the whereabouts of your son #1346 Pte. Chesley Fallow, and in reply I beg to state that we have forwarded your enquiry to our Pay and Record Office, and upon receipt of a reply I shall immediately communicate with you.

Yours faithfully,



Lieut.

CASUALTY OFFICER

WW/BG.

C.R. 4346

Extract from ~~Message~~ Telegram from ~~Gen.~~ to ~~Adm.~~ date Jan. 25/1919.

In answer to your telegram January 21st. 4346 Fowlow with
1st., Battalion.

C.R. 4346

Extract from Telegram from Military to Synoptical, dated Jan. 21st., 1919.

Inform whereabouts and condition

4346 Fowlow.

NEWFOUNDLAND POSTAL TELEGRAPHS

CR 4346

No. _____

OFFICIAL STAMP AND DATE

21
JAN 21 1919

Line No. 30 Place from Trinity East No. of Words 20

To Minister Militia
No inquiry respecting this message can be attended to without the production of this paper

Can you give me any information regarding 4346 pte Chesley Fowlow last letter dated second november then convalescent at France

Mrs Albert Fowlow

C.R. 4346

Extract from List of Sick and Wounded M.C.S. and Men of the
Expeditionary Force - France, dated 23 Nov. 1918.

List No: H.A. 31776.

4346 Pte. C. Fowlow

1 Newfoundland..... G.S.W. Face.

Dis. to 5 Rest Camp St. Martins Glass "A" ex 10 Gen. Dep. End Nov.
1918.

C.R.

4346

Extract from War Office List No. G. 1733. dated 1. 11. 19

#4346 Pte. G. Fowlow.

Wounded 10. 11. 19.

BO.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

C.R. 4346

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address **Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated

Oct 24th, 1918

To

Albert Fowles, Trinity East,

Regret to inform you that Record Office, London,
officially reports **No. 4346, Private Chesley Fowles**
at 83 General Hospital Boulogne Oct 15th suffering from
G.S.W. face, left shoulder ~~swore~~ mild

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

J. R Bennett

Chgo Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 4346

Extract from War Office List No. H. A. 31089.

ADM. 10 COB. DEP. ESCALT 26th. OCT. 1918.

#4346 Pte. C. Fowlow.

G.S.W. FACE.

SICK AND WOUNDED N.C.O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

C.R. 4346

No. 1 RECORD OFFICE - S H R E W S B U R Y.No. H.A. 30507Trans. to 5 Rest Camp 'Fit' ex 1 Con. Dep. Boulogne 19 Octr. 18.

320708 Pte. Harris E. 24 Welch

Adm. 1 Con. Dep. Boulogne 19 Octr. 18.12120 Pte. Cullen F.J.
29051 Pte. Fryer H.J.F.
53805 Pte. Davidson J.1/5 B. Lincs.
1/5 Herefords
6 S/W. Bdrs.Wounded
Wounded
SickNo. TWO RECORD OFFICE - S H R E W S B U R Y.No. H.A. 30507.Trans. to 5 Rest Camp 'Fit' ex 1 Con. Dep. Boulogne 19 Octr. 18.

290654 Pte. Robinson E.J. 7 Cheshires

Adm. 1 Con. Dep. Boulogne 19 Octr. 18.243273 Pte. Edwards J.D.
290197 Pte. Wilkinson F.1 Cheshires
7 ds.Wounded
SickNEWFOUNDLAND EXPEDITIONARY FORCENo. H.A. 30507

4346 Pte. Fowlow C.

Adm. 1 Con. Dep. Boulogne 19 Octr. 18.

N. Newfoundlands

Wounded

SOUTH AFRICAN RECORD OFFICE.No. H.A. 30507Adm. 1 Con. Dep. Boulogne 19 Octr. 18.X823 Spr. Hinton E.
243 Spr. Frinslee J.F.92 Sth. Afr. B.G.O.C.
1 S. Afr. Rly. Sec.Sick
Sick

208

C.R. 4346

Extract from War Office Listn No. H.A. 30387.

ADMITTED 83 GEN. H. BOULOGNE 15th OCTOBER 1918.

† 4346 Pte. C. Fowlow.

G.S.W., FACE SHOULDER L. MILD.

BC.

C.R. 4346

Extract from Nominal Roll Embarked for E.S.F. (Left Hasleby
Down Camp, 21-2-18).

2nd Lieut. N.J. Nugent, Conducting Officer.

4346 Pts. Fowlow, C.

HM.

C.R. 4346

Extract from Nominal Roll Embarked St. John's for Overseas,
Mar. 26, 1918.

4346 Pte. Fowlow G.

C.R. 4346

Extract of Daily Orders part 11, from Unit Royal
Newfoundland Regiment. February 16, 1918.

#4346 Pte. C. Fowlow.

Attested for General Service, with the 1st Nfld.
Regt. with effect from 16/2/18.

C. Howlow

C.R.

4346

~~PRD~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps... *Royal Newfoundland*, Former Trade } *Fisher*
or Occupation } *man*
2. Regtl. No. *4046* 3. Rank... *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Howlow* (Surname) *B.* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday... *19*
6. Posted for duty on *16/2/18* at... *S. J. John's* in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (b) Where (c) Opinion of Court
(d) Particulars of Pension or Gratuity (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

- (i.) Service during the present war
- (ii.) Previous active service
- (iii.) Climate in pre-war service
- (iv.) Ordinary military service before the war
- (v.) Serious negligence or misconduct on the man's part. }

} na. na.

14 (a). If not due to any of these causes, to what specific condition do you attribute it ?

na.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition ?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

He complains of no disability.

16. Was an operation performed ? If so, when and what was its nature ?

na.

17. If not, was an operation advised and declined ?

na.

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable ?

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions ?

na.

20. Do you recommend—

(a) Discharge as permanently unfit ?

(b) Change to United Kingdom ?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation

W.E. Procter Capt R.A.M.C.

Medical Officer in charge of case.

Station Beazley Down

Date 30/4/19

* Loss of teeth on, or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

No. 11588/1155

N.F.P./79.

NEW FOUNDLAND CONTINGENT

From:

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

To

Officer Commanding,
2/Bn. Royal Nfld. Regt.,
Winchester.

18th, July 1918

Subject: 4346, Pte. C. Fowlow

With reference to the following telegram (6427) from the Hon. Minister of Militia, received

"Pay to 4346 Fowlow £5. 3. 0

Draft £5. 3. 0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. M. Wilson
Chief Paymaster & O. i/c Records.

17-7-1918

Receipt hereunder.

Kenn
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commandg. 2nd Bn. Royal Newfoundland Regiment

Received the sum of Five

Pounds Three Shillings on account of cable remittance from Newfoundland.

Charles Fowlow
No. 4346 Rank Private

Witness: - *A. M. Wilson*

No. 15077/1562

N.F.P. /79.

From:

NEWFOUNDLAND CONTINGENT

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

To:

Officer Commanding,
2/Bn. R. Newfoundland Regt.,
Winchester.

20th, September 1918

Subject: 4346, Pte. C. Fowlow

With reference to the following telegram (8207) from the Hon. Minister of Militia, received

"Pay to 4346 Fowlow £3. 2. 0

Draft £3. 2. 0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

Chief Paymaster & O. i/c Records.

Sep 21 1918

Receipt hereunder.

R. J. Barton LIEUT. COLONEL
COMMANDING 2/BN. ROYAL NEWFOUNDLAND REGT.
Royal Newfoundland Regiment

Received the sum of Three
pounds two shillings on account of
cable remittance from Newfoundland.

C. Fowlow

No. 4346 Rank P/6

TO,- The Chief Paymaster,
Royal Newfoundland Regiment,
59 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.F.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
43416	Pls	L. Low. C	\$2.50	

I have the honour to be, Sir,
~~for the Committee,~~
Your obedient servant,

Date

June 20th 18

L. Low

No 6425/973

B boy

899 329/30

W.M.H. 100.

From. NEWFOUNDLAND CONTINGENT

Chief Paymaster & O.i/c Records,
Newfoundland Contingent,
Pay & Record Office.
58, Victoria Street,
London, S.W. 1.

To: Officer Commanding,
5th Batt. / 4th Bde. Regiment
W
Winchester

29th April 1919

191

4346 Pte. C. Fowlow

With reference to the following
telegram from the Minister of
Militia / / (154)

"Pay 4346 C. Fowlow
£15. 0. 0.

Cheque £15. 0. 0. is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

Receipt hereunder.

Williams Lieut & Adjutant
Officer Commdg. Batt'n.

Received the sum of fifteen
pounds in respect of

telegraphic remittance from the
Minister of Militia.

A.C. Minshall Maj
Chief Paymaster & O. i/c Records.

C. Fowlow
No. 4346 Rank Pte.

Witness W. W. W. Li.

Jowlow, C

4346

Ray Sept.

July 21, 1919

#4346 Pte. Chesley Rowlow.

Trinity East, T.B.

Dear Sir:-

Referring to your application I enclose cheque for seventy dollars (\$70.00), being amount of first payment due you on account of the war Service Gratuity.

Yours truly,

Captain & Paymaster.

Service from date of entry into service until date of discharge or death
whether in field or overseas.....
June 17/19.....
From Feb. 16/18 to.....

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name..... *Chesley* 2. Surname..... *Fowles*

3. Rank..... *Pl* 4. Regt. No..... *4346*

5. Address in full to which future payments of gratuity are to be forwarded..... *Trinity East Mld.*

6. Date of enlistment in the Regiment..... *Feb. 26/18*

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

8. Relationship of such dependents.....

9. Address in full of such dependents.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

11. Were you on active service only in Mld. If so, give dates and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in Mld. or Overseas..... *From Feb. 16/18 to*

June 17/19..... 13

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

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

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

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

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

16. Have you, during the present war, served in the Imperial Forces?.....

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.....

.....

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....

(b) If so, was such reversion in consequence of Misconduct or inefficiency?.....

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

..... *No* *Temporary* *Due to illness*

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

France Belgium Germany - From Sept 27/18
Sept. 1919 - Legation

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.

-3- Charles Fowlow

Signature of Applicant:

Trinity East Wfld,

Place of Residence:

St. John's, Wfld,

Declared before me at:

This

17th

day of

June 1919

John M. Corbett

Signature of Barrister of the
Supreme Court, Stipendiary Magistrate,
Notary Public, Justice of the Peace,
or Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid Paid Paid
Soldier Dependents

War Service
Classify.

Net amount
due

.....
.....
.....
.....

Certified correct.

Paymaster

July 25, 1919

#4346 Pte. Chesley Fowlow,

Trinity East.

Dear Sir:-

Please find enclosed Discharge Certificate #3036.

Yours truly

Capt.,
Paymaster & O.i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4346 Rank Pte Name Towlow C
 Intended place of residence Trinity
 2. Occupation Fisherman
 Classification of soldier E Medical Category AI

3. The above named man is discharged in consequence of

DEMobilIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUN 17 1919

H. M. [Signature]
 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, ST. JOHN'S

Date JUN 17 1919

Charles Towlow
 Signature of soldier

J. A. [Signature]
 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, ST. JOHN'S

Date JUN 17 1919

Charles Towlow
 Signature of soldier

W. J. [Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 16-2-18 No. of days on Military
 Discharged from service 1-7-19 Plus 14 days Service 375

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 1 1919

R. H. [Signature] Major
 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

Date July 15/1919

C. H. [Signature] Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment

A 9 B 2019/3036

The Royal Newfoundland Regiment

Class for Demobilization: —

6/

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *16.6.19*

Regimental No *4346*

Name *Faulow, Lesky*

Rank *Plt*

Address *Trinity east*

Present Medical Category

E A1

Recommended for: —

- (a) ~~Immediate discharge~~ ✓
(b) ~~Standard Medical Board~~

Members of Board

R H Lint Major
O.C. Discharge Depot.

J. Robinson
Senior Medical Officer

Geo Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4346 Rank Private Name Howlow G
 Date of Enlistment 16-2-18 Address Trinity District Trinity
 Occupation Fireman Classification for Discharge E1 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 1/36	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	R 103	ME 2		" 6
B 179c	B 120	M 93		

Date 16-6-19 _____

 Q. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Phesley G. Howlow

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 None

Date 17-6-19 _____ O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 8770 to his home at Prinity and Release Certificate No. 2885 issued.

Date 17-6-19 *J.A. Snow 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 15-7-19

Date 17-6-19 *H. W. Smith*
Depot Paymaster.

Discharged approved for 1-7-19
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 Ist.	" 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
B179c	B 120	M 93.		

2 Form B

Date 17-6-19 *J.A. Snow Capt.*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

- Officer in Records.
- Board of Pension Commissioners.

with following additional documents:

Eligible for War Service Gratuity

Date JUL 1 1919 *R.H. Salt 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,

C Fowlow

Signature of Man.

J D Snowball

Signature of the Vocational Officer or his Representative.

Reg. No. 4342

Place **ST. JOHN'S.**

Date 17-6-19 191

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

MEDICAL HISTORY

Surname Houlton OF Christian Name Leherley

Table I.—GENERAL TABLE.

Birthplace:—Parish Trinity East County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	16	Feb		
Declared Age	18	years		
Trade or Occupation	Tradesman			
Height	5	feet 10		
Weight	148	lbs.		
Chest Measurement	Girth when fully expanded			
	Range of Expansion			
Physical Development				
Vaccination Marks	Right	Left	Right	Left
		two.		
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	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>Samuel Paterson</u>			
(Rank)	Major			
Enlisted	at	Headquarters 2nd	at	
	on	16 day of Feb	on	
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.		Regtl. No.	
Transferred to	Royal WFLD	4306		
Became non-effective by				
(Signature)	on	day of	on	day of
(Rank)		191		191

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps *Royal Newfoundland* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4246* 3. Rank *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Lowlow G* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday *19*
6. Posted for duty on *16.2.18* at *St John*
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 b (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *Out*
12. Place of origin of disability. *Out*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Out*
Out

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i) Service during the present war
 - (ii) Previous active service
 - (iii) Climate in pre-war service
 - (iv) Ordinary military service before the war
 - (v) Serious negligence or misconduct on the man's part. }
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *Ch. a.*

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

The complaint of an instability

Ch. a.

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

Ch. c.

Ch. a.

Ch. a.

Repatriation

20. Do you recommend—
- (a) Discharge as permanently unfit?
 - (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Sig. Procurement
V. R. King Capt. R.M.C.

Medical Officer in charge of case.

Station *Hazeley D. Camp*
 Date *20. 11. 19*

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4346 Rank

Name Jowlsow

Warned for demobilization on

JUN 17 19

BOMB

JUN 17 1944



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 *Charles Fowlow*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4346*

Intended address *Trinity East.*

Height on discharge *5* Feet *10*

Color of hair on discharge *Dark*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Shrapnel, left shoulder*

Figure on discharge *Tall*

Christian name of Father *Albert*

Christian name of Mother *Amy*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Trinity East. 3rd Jan'y 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)

Charles Fowlow

Pte
(Rank)

Station

Date *16/6/19*

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

Station

Date

Newfoundland Regiment
Medical Officer i/c Hospital
Unit, or Command Depot
HEADQUARTERS

Army Form B. 103.

Regimental Number 4346**Casualty Form—Active Service.**Regiment or Corps. Royal NewfoundlandRank Cpl Surname Fowlow Christian Name ChesleyReligion C of G Age on Enlistment 18 years 1 monthsEnlisted (a) 16/2/18 Terms of Service (a) Duration Service reckons from (a) 16/2/18

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended { } Re-engaged { } Qualification (b).....
or Corps Trade and rate.....Occupation Fitter Signature of Officer. W. L. ...

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36 or other official documents.
Date	From whom received				
20-9-18	AI		Embarked ... Disembarked	23/9/18	
	Repairs unit	6/10/18	ARRIVED D.I.B.D.	25 SEP 1918	
		Wounded in Action	14-10-18		
	3rd Lt Col	No. 10000		14/10/18	Edwards
	83rd Gen. Inf			15/10/18	HA 30387
	1st Course			19/10/18	HA 30507
	W. J. ...			1/11/18	Kell
	O/C			10/11/18	15213
		Arrives			
		Revs. Coy			
		Act of Hon. Father: Albert Fowlow			
		2nd Lt East			
		Newfoundland			
		Arrived in UK		9/1/19	

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

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

W. 5327—M2093 1000m 7/17 (25986) C. P. & S., Ltd. Forms B. 103 E/1555.

[P.T.O.]

ST. JOHN'S, July 5th 189

Royal Newfoundland Regiment.

Billeting Account,

To Mrs G. Fowlow
Gilbert. Mat

Billeting Soldiers as undermentioned

from June 11th 189 to June 16th 189

4346 Pte. C. Fowlow 5 50

ACCOUNT	137m
CH. NO	2436
INITIALS	Red
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 5 50

R.J

Albton
Billeting Officer.
May Fowlow

ST. JOHN'S, June 20th /19

Royal Newfoundland Regiment.

Billeting Account,

To M^{rs} G. Fowlow

send to C. Gilbert ~~that~~

Billeting Soldiers as undermentioned

from June 6th /19 to June 11th /19

4346 - H. C. Fowlow 5 50

ACCOUNT B+m

CH NO 25735

IND. LEDGER

PAY LEDGER

GEN LEDGER

INITIALS EW

INITIALS

INITIALS

Certified correct for

5 50

J.A. Howlett
R.S. Billeting Officer.


July 3, 1919

Mrs. G. Fowlow,
6, Gilbert Street.

Dear Madam:

I enclose cheque for \$5.50
amount due you for boarding Pte. C. Fowlow from
June 6th. to June 11th.

Yours truly,


Capt.
Paymaster.

LM/

Enc. 1

C.R. 4346

RECEIPT,

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name..... *C. Lowlow*

Date *17/11/19:*

Place..... *Trinity East*

RECEIPT.

C.R.

4346

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

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

NO. 4346 NAME *C. Fowlow.*

DATE *15/1/20.*

PLACE *Trinity East.*

Receipt for Army Book 64

No. *4346* Name *Fowler*

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

Date *Oct 16 1920*
Place *Trinity Park*

Name *L. Fowler*

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

SS 20-15/2

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here



Sept 21st 1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Chesley Fowlow,

in respect of his service as No. 4346 Rank Private

Name Chesley Fowlow Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received

Victory Medal British War *medal*

Signature

C. Fowlow

Date

Sept 21st 21

Address

Trinity East.

[P.T.O.]

Reg. No. *4346*. Rank *1st* Name *Bowling, E.*

Attested Address *Trinity E.*

Allotment Allottee

Date of Allotment Returned from Overseas *29.11.19*

Returned on S.S. *Consear* Cause *Discharge*

4.5.19
1.7.19

PASSED TO DEMOBILIZATION

DISCHARGE APPROVED ON DEMOBILISATION

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 346 Rank Private Name Howland C
 Date of Enlistment 16-2-18 Address Trinity District Trinity
 Occupation Fisherman Classification for Discharge H Medical Category H15
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. P. 136	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 16-6-19 for Mr Howland
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Sheslay Howland

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 None

Date 17-6-19 O i/c. Re-clothing _____

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1346 Rank Private Name Howlow
 Date of Enlistment 16-2-18 Address Trinity District St. John's
 Occupation Fisherman Classification for Discharge 1st Medical Category A1
 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	5
B 178	W 3494	B 122	/	Board 1st	" 2	
B 178a	D 400A	B 1915	/	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 16-6-19 _____
 O. C. Discharge Depot. H. M. S. Levent

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Shesley Howlow

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 17-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 8770 to his home at Trinity and Release Certificate No. 2887 issued.

Date 17-6-19 *J.A. Brown*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 15-7-19

Date 17-6-19 *H. W. ...*
Depot Paymaster.

Discharge approved for 17-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1	2 Form B
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	
B179c	B 120	M 93			

Date 17-6-19 *J.A. Brown*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity.

Date JUL 1 1919
O. C. Discharge Depot.

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

Date July 1 1919 *J.A. Brown*

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 8770 to his home at Trinity and Release Certificate No. 2887 issued.

Date 17-6-19

J.A. Sawbott
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 13-7-19

Date 17-6-19

H. W. ...
Depot Paymaster.

Discharge approved for 1-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	A.F. Med	D.F. 1	2 Form B
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 17-6-19

J.A. Sawbott
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity.

Date JUL 1 1919

O. C. Discharge Depot.

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

Date July 1 1919

Ameloth ...
For ...