



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1773 Name Thomas Joseph Lake Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Thomas Joseph Lake
2. What is your full Address? { 2. Boston
3. Are you a British Subject? 3. Yes
4. What is your Age? 4. 24 Years 1 Months.
5. What is your Trade or Calling? 5. Fisherman
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's } 7. No
Forces, naval or military, if so,* which? }
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 } 10. { Name
meaning, and who gave it to you? } { Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service } 11. Yes
to be signed by you if you are accepted? }

Thomas Joseph Lake 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.

Thomas Joseph Lake SIGNATURE OF RECRUIT.

August 13/15 1701. J. O'Connell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

Thomas Joseph Lake 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 14 day of August 1915.
W. J. O'Connell Signature of the 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 _____ 1915 _____
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, the 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) _____

REGIMENTAL NUMBER 1773

COMPANY A

THE
1st NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's
Forces under the following conditions.

For the duration of the present war, or until my discharge.

subject to the Army Act. The King's Regulations,
and to such ordinances as may apply or may be
made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act.

5 George V.

Chapter IV.

Signed

^{His}
J. J. x Lake
Munk

Witness

Wm. Churchill M.A.

Dated at Racepoint Apr

June 30 1916



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1773 Name Thomas Joseph Lake Corps _____

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------------|
| 1. What is your name? | 1. <u>Thomas Joseph Lake</u> |
| 2. What is your full Address? | 2. <u>Burin</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your Age? | 4. <u>24</u> Years <u>7</u> Months. |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? } | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? } | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. _____ { Name _____
Corps _____ |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, Thomas Joseph Lake 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.

Thomas Joseph Lake SIGNATURE OF RECRUIT.

August 13/15 1701. J. Oliphant Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas Joseph Lake 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 August day of August 1915.

Signature of the Attesting Officer. Montgomery

† 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 _____ 1915 _____
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, the 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.

1773

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

Name Thomas Janson

Apparent age 22 years 7 months. Height 5 feet 7 inches.

Chest measurement { Girth when fully expanded 37 1/2 inches.
Range of expansion 4 inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Mary Janson
Burin | Relationship mother

J.B. 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	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed 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>13-8-15</u>									
Joined at <u>St John's</u> on <u>August 13/15</u>									
<u>Discharged St John's 24/10/16.</u>									
<u>Embarked St John's train to Quebec 24-10-15</u> <u>Admitted 12th Regt Royal Rifles 21-7-16</u> <u>Admitted 12th Regt Royal Rifles 1-8-16</u> <u>Attached depot 22-8-16 to Newfoundland for discharge 8-9-16</u>									
<u>Discharged Medically 24-10-16</u>									
Total Service forfeited as above									

Total Service towards Engagement to 24-10-16 (date of discharge) 1 years 13 days

" " " Pension " " " " " " " "

C.R. 1773

Extract from Casualties received from Pay and Record Office

London, dated Aug. 7th., 1918

Admitted 3rd., London General Hospital Wandsworth.

#1773 Pte. S. Lake.

DEBILITY.

BC.

C.R. 1773

Deputy Paymaster.

I have the honour to return the papers forwarded under cover of your letter of 26th instant and to enquire whether Lake wears uniform or is entitled to wear it; and also whether he wears a "wound patch" and a XXIX Division ribbon on his uniform, the one representing that he was wounded (whereas he was not) and the other indicating that he has been on active service with the XXIX Division (whereas he has not been on active service at any front, never having been further than the Depot at Ayr.)

Governor.

27 Oct. 1916.



I h h h returns
& to enquire whether
Lake wears uniform or
is entitled to wear it:

1ST NEWFOUNDLAND REGIMENT

PAY DEPARTMENT

P. O. BOX No. 1242
TELEPHONE No. 361
CABLES AND TELEGRAMS TO
"PAYDEPT."
ST. JOHN'S, NEWFOUNDLAND
ALL COMMUNICATIONS TO BE
ADDRESSED TO THE
PAYMASTER

he wears a "wound patch"
on a "XXIX Div" ribbon on
his uniform, the one refer-
ST. JOHN'S, NEWFOUNDLAND.

sent to that he has wounds (unless

he has not) October 25th, 1916

to the other indicating that he has
been in active service with the

XXIX Div (unless he has

His Excellency,

Sir W.E. Davidson, K.C.M.G. has been on active service

Government House, at any point, never having

City. been further than the Depot

at Apr. W.S.D. 25.16.

Sir:-

I have the honour to acknowledge yours of the 24th.

re Lake, I enclose for your information Documents received
in connection with his case which I trust will give you all
the particulars that you require.

If there is anything further I can add kindly
advise me.

I have the honour to be,

Sir,

Your obedient servant.

2nd. Lieut. & D/Paymaster.

C.R. 1773

Extract from list of men discharged from the Royal Newfoundland Regiment on various dates.

#1773 Pte. Thomas J. Lake, discharged Oct. 24th 1916, Medically unfit.

C.R. 1773

Extract of Roll of Officers, N.C.Os. and Men Discharged from
The Royal Newfoundland Regiment.

Authority: Pay Office, St. John's.

<u>No.</u>	<u>Rank.</u>	<u>Name.</u>	<u>Date.</u>	<u>Reason.</u>
1773	Pte.	Thomas J. Lake	Oct. 24th. 1916.	Med. Unfit.

C.R. 1773

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P. & R. O. Aug. 14th 1916.

1773, Pte T. Lake.

✓
1st Newfoundland R. Gen. Debility To Eng. ex 12 Gen. Hos. 2nd Aug. 1916.

C.R. 1773

Extract of Casualties received from Pay & Record Office,
London, dated August 8, 1916.

#1773 Pte. T. Lake. ✓

Debility Admitted 12 General Hospital, Rouen, August 1, 1916.

C.R. 1773

NO. 1773 MAKE T. ✓

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAY & RECORD
OFFICE LONDON DATED AUGUST 7, 1916.

"DEBILITY WANDSWORTH." August 4,

C.R. 1773.

Extract of Casualties received from Pay & Record
Office, London, dated August 7th, 1916.

#1773 Pte. T. Lake. ✓

Debility. Admitted 3rd London General Hospital,
Wandsworth, August 4th.

L (52)

COPY OF TELEGRAM.

Dated

7th August, 1916.

To

Mrs. Mary Parsons,

Burin.

Regret to inform you that the Record Office,
London, officially reports No. 1773 Private Thomas
J. Lake admitted Wandsworth Debility.

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

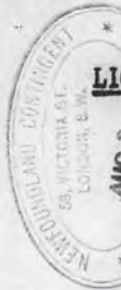
J. R. BENNETT,

Colonial Secretary.

1773 Lake

C.R. 1773

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



LICHFIELD RECORD OFFICE.

LIST NO. H.A. 1245

17677 Pte. Turner. S.T. 1st N. Staffs. att. V.D.G. Trans. to 39 Gen. Hos. Havre ex. 12 Gen. Hos. 24 July '16.
 1st Can. For. Pty.
 9936 Sgt. Geary. T.W. 6th Leicesters. G.S.W. Rt. Knee. To Eng. ex. 12 Gen. Hos. 24th July '16.
 23483 L.C. Lunt. G. 15th Notts & Dbys. Sh. Wd. Rt. Arm. do.
 23554 Pte. Fletcher. W. 15th do. G.S.W. Rt. Arm. do.
 25106 " Collins. J. 15th do. do. Chest. do.
 24659 " Martin. R. 15th do. Neurasthenia. do.
 24709 Sgt. Caldwell. M.L. 15th do. do. do.
 16153 " Newman. E. 8th Leicesters. Influenza. Dis. to Conv. Camp. ex. 12 Gen. Hos. Rouen 24th July '16.
 24981 Pte. Jesson. C.W. 15th Notts & Dbys. D.A.H. do.
 24890 Sgt. Mason. T. 15th do. G.S.W. Face. Rt. Thigh. do.
 13891 Cpl. Mayer. W. 8th N. Staffs. do. Back. Dis. to Conv. Dep. ex. 12 Gen. Hos. Rouen 24th July '16.
 24616 " Avey. H. 15th Notts & Dbys. do. Lt. Arm. do.
 19362 Pte. Finney. A. 8th N. Staffs. Contusion Legs. Dis. to Base Dep. ex. 12 Gen. Hos. Rouen 24th July '16.
 5799 " Ratcliffe. W. 1st Lincolns. Stricture. Adm. 12 Gen. Hos. Rouen 24th July '16.
 13839 " Gunthorpe. R.E. 2nd do. Influenza. do.
 (Prisoner.)

File 2117

CAVALRY RECORD OFFICE.- YORK.

LIST NO. H.A. 1245

3613 Pte. New. H. 18th Hussars. V.D.S. Trans. to 39 Gen. Hos. Havre ex. 12 Gen. Hos. 24 July '16.
 17435 " Spilberry. H. 18th do. att. 2nd N.Y.D.V. Adm. 12 Gen. Hos. Rouen 24th July '16.
 Life Gds.

MACHINE GUN CORPS RECORD OFFICE.

LIST NO. H.A. 1245

31242 Pte. Hailey. S.L. M.G.C. 56th Co. G.S.W. Lt. Hand. Sep. Pois: To Eng. ex. 12 Gen. Hos. 24th July '16.
 29389 " Bridgeman. F. do. do. Head. do.
 2045 " Sturrock. G.S. 4th R. Hdrs. att. MGC. Concussion Shell. Adm. 12 Gen. Hos. Rouen 24th July '16.
 154th Co.
 6399 Cpl. Raybould. T. 10th R. War. M.G.S. G.S.W. Rt. Thigh. do.
 4631 L.C. Rowley. G.E. 10th do. do. Thigh. Testicle. Knee. do.

NAVAL FORCE ADMIRALTY.

LIST NO. H.A. 1245

Seaman. Wheeler. A. R.N.R. Trans. 557 T. Dermatitis. slt. Adm. 30 Gen. Hos. Calais 24th July '16.

NEWFOUNDLAND CONTINGENT.

LIST NO. H.A. 1245

1773 Pte. Lake. T. 1st Newfoundland. R. Influenza. Dis. to Base Dep. ex. 12 Gen. Hos. Rouen 24th July '16.

✓

C.R. 1773

Extract of Casualties received from Pay & Record Office,
London, dated July 28, 1916.

#773 Pte. T. Lake. ✓

Rheumatism. Admitted 12th General Hospital, Rouen,
21st July 1916.

C.R. 1773

Extract from Nominal Roll Entrained St. John's for Overseas
27/10/15.

1773 Pte. T. Lake,

C.R. 1773

T.J.Lake

was attested for General Service

with the NEWFOUNDLAND REGIMENT on **.August.13th.1915**

Regimental No. **1773** was allotted to Pte **T.J.Lake**

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.

T. Lark.

C.R.

1713

P.L.O.

ORIGINAL.

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

MEDICAL HISTORY

OF

Surname *Lake*

Christian Name *Thomas*



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County *N. I.*

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <i>13</i> day of <i>Aug</i> 191 <i>5</i>	on	day of	191
	at <i>St John N.I.</i>	at		
Declared Age.....	<i>25</i> years	days	years	days
Trade or Occupation.....	<i>Fisherman</i>			
Height	<i>5'</i> feet	<i>8 1/2</i> inches	feet	inches
Weight		<i>126 1/2</i> lbs.		lbs.
Chest Measurement {	Girth when fully expanded...	<i>34 1/2</i> inches		inches
	Range of expansion..	<i>4</i> inches		inches
Physical Development... ..				
Vaccination Marks {	Arm			
	Number	<i>1</i>		
When Vaccinated				
Vision	R. E.—V== <i>4/9</i>		R. E.—V==	
	L. E.—V== <i>4/6</i>		L. E.—V==	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)	<i>Finger broken</i>	(b)	
Approved by (Signature)	<i>Samuel Paterson</i>			
(Rank)	<i>Capt.</i>			
	Medical Officer.			Medical Officer.
Enlisted	at <i>St John's</i>	at		
	on <i>18</i> day of <i>Aug.</i> 191 <i>5</i>	on	day of	191
	Corps. <i>1st N.I. Regt</i>	Regtl. No. <i>1773</i>	Corps.	Regtl. No.
Joined on Enlistment				
Transferred to... ..				
Became non-effective by.				
	on	day of	191	on
			day of	191
(Signature)				
(Rank)				

Table II.—Only for admission to hospital or to the sick list in case of Warrant officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Numbr. Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Military Hospital, Yales	22	Dec.	1915	12	Jan	1916	Haemoptysis	22	Wassermann Test for T. B. Result Negative. Sower Powder and Aet.	W. H. M. M. Major G. W. O. Yales Area.
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.	4	8	16	19	8	16.	Tubes Dorsalis.	10	R pupil \angle Left. K. J absent. No anaesthesia. No alarria. No history of syphilis. Visceral crises (Eardne & Reber). Wasserman -ve.	L. H. C. H. L. Capt.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
23.10.15	1 st Inoculation
19.11.15.	Vacc. R.P. Graham. H. Ramo.
6.7.16.	Fit for foreign Service.

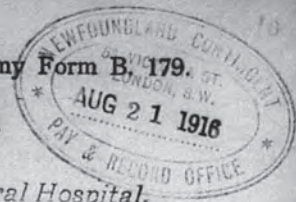
TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St John's Nfld					

Original

ORIGINAL.

Army Form B 179.



Medical Report on an Invalid.

Station 3rd London General Hospital,
WANDSWORTH, S.W.

Date August 14th - 1916

1. Unit 1st Newfoundland
2. Regimental No. 1773
3. Rank Pte.
4. Name Lake T.

5. Age last birthday 39
6. Enlisted { on Aug. 15th 1915
at St. John's, Newfoundland
7. Former Trade or Occupation { Fisherman

8. Disability.

Tales dorsalis

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

July

10. Place of origin of disability.

Rouen.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Departed sick with pains in both knees & ankles
& across abdomen.

Knee jerks absent.
Agyll Robertson pupil
Right pupil & left.
No choroid
perforated septum.

12. (a) Give your opinion as to the causation of the disability.

Not due to active service

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

18. What is his present condition ?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

*In statu quo
i.e. lightning pain
H.S. absent
Angele Robertson Jones*

14. If the disability is an injury, was it caused

- (a) In action ?
- (b) On field service ?
- (c) On duty ?
- (d) Off duty ?

15. Was a Court of Inquiry held on the injury ?

no

If so—(a) When ?

(b) Where ?

(c) Opinion ?

16. Was an operation performed ? If so, what ?

no

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

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ?

no

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) ~~Change to England~~ ?

yes

C. Gould. C.S.
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station 3rd London General Hospital, WANDSWORTH, S.W. Alfred Searle Gould
Date 18/1/16 Officer in charge of Hospital.

*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.

† Delete this word if no exceptions are to be made. A.M.C.T.F.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Not due to any of these causes

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance? *no*

(b) Misconduct? *no*

(c) Any of the conditions mentioned in question 20, and if so, which? *no*

22. Is the disability permanent? *yes*

23. If not permanent, what is its probable minimum duration?

To be stated in months. *✓*

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Disability due to military service

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act? *no*

25. If an operation was advised and declined, was the refusal unreasonable? *✓*

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) ~~Change to England?~~ *yes*

Signatures:—

W. Eloyuter Maj. RAMES President.

3rd London General Hospital, Station *WANDSWORTH, S.W.*

Date *18. 8. 16*

W. R. Head Capt. M. D. L. ?
R. P. Howard Es Members.

Approved.

Station *Head Qtrs. Lond Dist.*

Date *18/8/16*

Arthur J. Thomas
Administrative Medical Officer.

SURGEON-COLONEL,
for D.D.M.S.,
LONDON DISTRICT.

(On leaving Corps or Station where invalided.)

Transfer { Date _____
 or Station _____ } Name of { Conveyance _____
 Embarkation { Date _____
 Port _____ } { Vessel _____
 Officer in medical charge } _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____
 Hospital or Station _____ } _____ Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and Hospital } _____
 Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } _____

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
 INVALID.

Station *Regt.*
 Corps *1st Westford*
 Regimental No. *1773*
 Rank *Pte.*
 Name *Lake T.*
 Disability *Tuberercular*
 Date *18/1/16*

Hospital or Station transferred to for final disposal }
 Date of final disposal }
 How finally disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.
 Wt. W8530/2774 500M 9-15 M&C.L.D.
 Form B. 179 34

TEMPORARY

ORIGINAL

ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Lake Christian Name T.

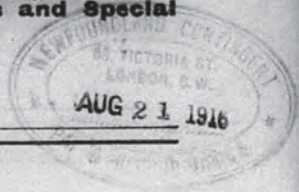


TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... { on _____ day of _____ 191 .
at _____

Declared Age ... years _____ days.

Trade or Occupation ... _____

Height ... feet _____ inches.

Weight ... lbs. _____

Chest Measurement { Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... { R.E.—V= _____
L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____
(Rank) _____

Medical Officer.

Enlisted ... { at _____
on _____ day of _____ 191 .

Corps.	Regtl. No.
<u>1st Newfoundland</u>	<u>1773</u>

Transferred to ...
Became non-effective by ...
on _____ day of _____ 191 .

(Signature) _____
(Rank) _____

Medically unfit

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *211 Newfoundland Regiment*
 No. *1773* Rank *Private* Name *J. Lake*
 Died^(a) at _____ on the _____ of _____ 191 .
Repatriated at *Ayr* on the *7* of *Sept* 191 *6*
 Deserted at _____ on the _____ of _____ 191 .

I Certify to the correctness of above in every particular.

Embarked per *S. S. Corsican*
Liverpool 8-9-16

Fred G. A. Leaded [Commanding Squadron, Troop,
 #. Battery or Company.]

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>4/8/16</i>	<i>2</i>	<i>17</i>	<i>6 1/2</i>
	Cash issues (Date of each issue to be stated)				Pay <i>35</i> days at <i>110</i> from <i>7/5</i> to <i>5/9</i> <i>35-50</i> Proficiency, Service or good conduct pay	<i>7</i>	<i>18</i>	<i>3 1/4</i>
	<i>Aug 25 1916</i>	<i>10</i>	<i>0</i>		days at _____ from _____ to _____			
	<i>Sept 1 "</i>	<i>10</i>	<i>0</i>		Messing allowance _____ days at _____			
	<i>Sept 7 "</i>	<i>10</i>	<i>0</i>		from _____ to _____			
	<i>PRO 19/8 Cash</i>	<i>3</i>	<i>0</i>	<i>0</i>	Clothing and kit allowance			
	Consolidated stoppage.....		<i>1</i>	<i>11</i>	Amount produced by the sale of Necessaries			
	<i>allotment #</i> <i>35 Df C 60 21-00</i>	<i>4</i>	<i>6</i>	<i>3 1/2</i>	Personal Clothing and Effects from Form 2...			
	<i>5 Francs</i>		<i>3</i>	<i>7</i>	Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	<i>5 Francs</i>		<i>3</i>	<i>7</i>	Deferred Pay or Gratuity			
	<i>14/7</i> <i>25/7</i> <i>19/8</i> <i>for pitied advances</i> Balance due by the Paymaster	<i>1</i>	<i>0</i>	<i>5</i>	Balance due to the Paymaster.....			
		<i>£10</i>	<i>15</i>	<i>9 1/2</i>		<i>£10</i>	<i>15</i>	<i>9 1/2</i>

I hereby Certify that the above account is correct *As to* in every particular, *Advised to date* and that the debtor balance of £ _____ is correctly chargeable against the Public^(b).

Dated at _____ this _____ day of _____ 191 .



Paymaster.
 PAYMASTER & GRFIDER I/O RECORDS

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED.
 11/9/16

Admitted 4-8-16.

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

18th Newfoundland Regiment.

*The Officer Commanding

The Officer in Charge of Records

58 Victoria Street SW

The Regimental Paymaster

58 Victoria Street SW

With reference to No. *1773. PR Lake Y* of the above Regiment, who appeared before a Medical Board and was approved by the D.D.M.S., *London* Command, on the *18th August 1916* for discharge from the Service as permanently unfit, please note that this man has been sent to his home on warrant with orders to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes.~~

He proceeded to *58 Victoria Street SW*

on [date]

August 19th 1916

Horace Sagan Cap: R.A.M.C.(L.F.)

Officer Commanding

Registrar, R.A.M.C.I.

3rd London General Hospital Hospital.

WANDSWORTH, S.W.

Place

Wandsworth SW

Date

Aug 19/16

* In case of Territorial Force "Officer Commanding the Administrative Centre."
Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

Admitted 4-8-16

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

18th Newfoundland Regiment.

*The Officer-Commanding

The Officer in Charge of Records 58 Victoria Street SW

The Regimental Paymaster 58 Victoria Street SW

With reference to No. 1773. Pte Lake. Y of the above Regiment, who appeared before a Medical Board and was approved by the D.D.M.S., London Command, on the 18th Aug 1916 for discharge from the Service as permanently unfit, please note that this man has been sent to his home on warrant with orders to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded to 58 Victoria Street SW

on [date] Aug 19th 1916

Horace Jagan Capt R.A.M.C.(TF) Registrar, R.A.M.C. Officer Commanding 3rd London General Hospital, Hospital.

Place Wandsworth SW WANDSWORTH, S.W.

Date Aug 19/16.

* In case of Territorial Force "Officer Commanding the Administrative Centre." Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

Transfer Statement of Clothing and Necessaries.

INSTRUCTIONS.—This Statement will be made out by the Depot or Administrative Centre, and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units.

STATEMENT showing the Articles in possession of (*Regimental No., Rank*

and Name) 1773 PR LARK

proceeding from the 3RD LON GEN HPL to the
1st NZLF

Date of enlistment _____ Date of transfer _____ 191 .

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular.

(1) Station WANDSWORTH Thasbarnion Lieut. & Qr. Mr. R.A.M.C.T.
Commanding Squadron, Battery, Administrative Centre, &c.
3rd Gen. Hospital,

Date 19 AUG 1916 Royal Victoria Patriotic School,
Name of Unit man is leaving. WANDSWORTH.

(2) Station _____
Commanding Squadron, Battery or Company.

Date _____
Name of Unit man is joining.

Articles of Clothing and Necessaries in Possession.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

Clothing.	No.	Necessaries.	No.
Aprons, kilt	/	Badge, cap	/
Boots, ankle, pairs	/	Bag, Kit	/
Caps, Service Dress	/	Braces, pairs	/
Caps, Glengarry	2	Brass, Button	
Drawers, pairs	/	Brush, Brass	
Frocks, canvas	/	" Blacking	
Greatcoat, D.M.	/	" Clothes	
Jackets, Service Dress	/	" Hair	
Kilts	/	" Polishing	
Pantaloons, cord, pairs	/	" Shaving	
Putties	/	" Tooth	
Spurs, Jack	/	Cap Comforter	/
Trousers, Service Dress, pairs	/	Comb, hair	
Trousers, Canvas or Khaki Drill } Overalls, pairs	/	Disc, identity, with cord...	
Waistcoat, cardigan	/	Fork	
Coat, waterproof... ..	/	Gaiters, Highland	
Gloves, leather, pairs	/	Holdall	
Gloves, Motor Cyclist, pairs	/	Hose Tops	
Gloves, Motor Cyclist, pairs	/	Housewife	
Goggles, pairs	/	Knife, Clasp	
		Knife, Table	
		Laces, leather, spare, pairs	W
		Shirts, flannel	
		Socks, worsted, pairs	
		Spoon	
		Titles, metal, pairs	
		Towels, hand	
		Wax Polish, tin	

I certify that this statement is correct.

Date 19 AUG 1916

Signature of the Soldier J. Wake

Wake
H/c

(9 38 41) W 11751—6539/1 75,000(6) 10/15 H W V(M 679) Army Form W. 3201.
ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN
EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

1st Wld. (Regiment).

No. 1773, Rank Pte, Name Lake. T.

is discharged from Hospital with orders to proceed to his ~~home~~
(Address 58 Victoria St. S.W.)

and there await further instructions as to his discharge from the
Service.

Horace Tapan Capt. R.A.M.C.(F) Officer Commanding,

Place _____

Registrar, R.A.M.C.T.

**3rd London General Hospital,
WANDSWORTH, S.W.**

} Hospital.

19 AUG 1916

Date _____

Hospital. 1-0-0 ✓

AB. 64. 7-0 ✓

1-7-0

No. 1773 The T. Law
From 8/7/16 to 9/19/16

43 days @ 50¢ = 21.50 ✓

O.K.
Mey

8th Draft. .60[¢]

4-8-4 ✓

1-7-0 ✓

3-1-4 ✓

Lake, Tho^s.

1773

Hay Sept



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

MEDICAL HISTORY

DUPLICATE COPY.

Surname

Lake

OF
Christian Name

Thomas

Table I.—GENERAL TABLE.

Birthplace:—Parish		County							
		<u>SPECIAL RESERVE.</u>		<u>REGULAR ARMY.</u>					
Examined	}	on	day of	191	on	day of	191	
			at				at		
Declared age			years	days		years	days	
Trade or occupation								
Height			feet	inches	feet	inches	inches	
Weight				lbs.		lbs.	lbs.	
Chest Measure- ment	{ Girth when fully expan- ded Range of expansion ...				inches			inches	
					inches			inches	
Physical development								
Vaccination marks	{ Arm ... Number ...		Right		Left		Right		Left
When vaccinated								
Vision	}	R.E. - V =			R.E. - V. =			
			L.E. - V =			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)	(Rank)								
						Medical Officer.		Medical Officer.	
Enlisted	}	at			at			
			on	day of	191	on	day of	191	
Joined on enlistment	}		Corps	Regtl. No.		Corps	Regtl. No.	
				<i>St Beofld</i>	<i>1773</i>				
Transferred to								
Became non-effective by								
			on	day of	191	on	day of	191	
(Signature)	(Rank)								

Table II.—Only for admissions to hospital or to the sick list in the case of Warrant Officers treated in quarters.

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 rd London General Hospital Wandsworth S.W.							Tubes. Dorsalis		Board held - see overleaf Disability - Tubes Dorsalis - lightning pains Knee jerks absent. Argyll Robertson Pupils. Spd	L.A. Gilbert Capt.
									Cause. 20(a) Not due to any of these causes. Capacity for earning a livelihood lessened by one half but not on account of Military Service.	for Ofc 3 rd London General Hospital Wandsworth S.W.

Medically unfit

PAY LIST. to 191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *2/1 Newfoundland Regiment*
 No. *1773* Rank *Private* Name *J. Lake*
 Died^(a) at _____ on the _____ of _____ 191 .
Reallocated to 4yr
 Deserted at _____ on the *7* of *Sept* 191*6*

I Certify to the correctness of above in every particular.

Embarked per S.S. *Consul*
 Liverpool *8-9-16*

Fred G. A. Rendell Commanding Squadron, Troop,
7/25/16 or *H* Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>7/18/16</i>	2	17	6 1/2
	Cash issues (Date of each issue to be stated)				Pay ^o days at <i>1.10</i> from <i>7/18</i> to <i>7/19</i> <i>7.18.50</i>	7	18	3
		£	s.	d.	Proficiency, Service or good conduct pay			
	<i>Aug 25 1916</i>	100			days at _____ from _____ to _____			
	<i>Sept 1 "</i>	100			Messing allowance _____ days at _____			
	<i>7 "</i>	100			from _____ to _____			
				200	Clothing and kit allowance			
<i>R.R.O. 1/8</i>	<i>Cash.</i>			300	Amount produced by the sale of Necessaries			
	Consolidated stoppage.....			1	Personal Clothing and Effects from Form 2...			
	<i>allotment</i>				Amount of Savings Bank balance, including			
	<i>35 Dyp C60 21-00</i>	4	6	3 1/2	interest (if no balance, to be so stated)			
<i>14/4</i>	<i>5 Francs</i>			3	Deferred Pay or Gratuity			
<i>28/4</i>	<i>5 Francs</i>			3	Balance due to the Paymaster.....			
<i>19/6</i>	<i>for pitied Advances</i>			100				
	Balance due by the Paymaster			5				
		£10	15	9 1/2		£10	15	9 1/2

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ - - *5* is correctly chargeable against the Public^(b).

Dated at _____
 this _____ day of *11/16*

191 .

As to. Advised to date
J. H. Marshall *g.m.g.*
 Paymaster. *ap*

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED
11/9/16

DUPLICATE COPY.

Army Form B. 179.

Medical Report on an Invalid.



Station 3rd London General Hospital
Waudsworth S.W.

Date August 14th 1916

1. Unit 1st Newfoundland
2. Regimental No. 1773
3. Rank Pte
4. Name Lake J.

5. Age last birthday 39
6. Enlisted { on August 15th 1915
at St John's Newfoundland
7. Former Trade { Fisherman
or Occupation

8. Disability.

Tubes Dorsalis

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

July
Boque

10. Place of origin of disability.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Reported sick with pains in both knees
& ankles & across abdomen.
Knee jerks absent
Argyll Robertson Pupils
Right pupil 1 left.
No Anomia
Perforated Septum

12. (a) Give your opinion as to the causation of the disability.

Not due to Active Service

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

In. Statu Quo.

*i.e. lightning pains
knee jerks absent
Argyll Robertson pupils*

14. If the disability is an injury, was it caused

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

No.

If so—(a) When?

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what?

No.

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

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

No.

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Sgd
res.

S. Gould. C.S.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

Sgd

except to
3 London General Hospital
Station *Wandsworth W.*

Alfred Pearce Gould

Date *18 August 1916*

Officer in charge of Hospital.
Commanding Officer

* 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.

† Delete this word if no exceptions are to be made.

H.A.M.C. 1/1

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Not due to any of these causes.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance?

No.

(b) Misconduct?

No.

22. Is the disability permanent?

Yes.

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*Lessened by one half.
but not on account of military service.*

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes.

Signatures:—

*3rd London General Hospital,
Station Wandsworth SW.*

Date

*Headquarters London District
Station*

Date

18 August 1916

*W. E. Deuter Major R.A.M.C. President.
J. J. Weddles Capt R.A.M.C.
R. B. Howard Esq. Members.*

*Althood J. Linn
Administrative Medical Officer,
Surgeon Colonel
for S.D.M.C.
London District*

(On leaving Corps or Station where invalided.)

Transfer { Date _____
 Station _____ } Name of { Conveyance _____
 or { Date _____
 Embark- { Port _____ } Vessel _____
 ation { } } Officer in }
 { } } medical charge } _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____
 Hospital or } _____ Officer in medical charge.
 Station } _____

(At Station or Hospital where finally disposed of.)

Station and } _____
 Hospital } _____
 Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical }
 Board, or decision }

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
 INVALID.

Station _____
 Corps _____
 Regimental No. _____
 Rank _____
 Name _____
 Disability _____
 Date _____

Hospital or Station transferred to for final disposal _____

Date of final disposal _____

How finally disposed of _____

The original Report is invariably to accompany the discharge documents of Invalids.

(x) (88579) Wk. 1896 475M S-16 W B & L

STATEMENT OF ACCOUNT

No. 1773

Name Lake Thomas

142/1

Date	Particulars	Ch. No.	Dr.	Cr.	Bal.
Sept 7	Bal due by RM <u>5⁰⁰</u>				
23	Pay to date @ <u>1⁰⁰</u>			10	10
30	Pay to date @ <u>1⁶⁰</u>			17 60	17 70
				11 20	28 90
Oct 24	Pay to date @ <u>1⁶⁰</u>			38 40	67 30
	Bonus				
	clothing			11 20	78 50
				25 00	103 50
Sept 25	To Pay	8	5 00		98 50
	" "	8	10 00		88 50
30	To allotment		13 80		74 70
Oct 16	clothing	26	25 00		49 70
20	To Pay	30	20 00		29 70
26	To Balance	32	29 70		0
	Post Discharge Pay 91 days @ <u>1⁰⁰</u>			100 10	100 10
	To Bonus		12 95		87 15
			11 6 00		
			116 45	303 60	87 15

br

Signed AJ Evans SSM

9
1
1920

30360
11645
9715



GOVERNMENT HOUSE,
ST. JOHN'S,
NEWFOUNDLAND.

Lieut. Howley,
Deputy Paymaster.

Please give me particulars about terms of
discharge of

1778 Lake (of Burin District)

W. E. Davidson
Governor.

24 October 1916.

Thomas J. Lake

\$29.70

Bonus
Clothing

11.20

25.00

36.20

6.50

less overpaid.

29.70

Dis St Johns

444

WILL

No. 1773,

T. Lake.

Mrs Mary ^M Parsons
Burrin

D

WILL.

444

In the event of my death. I will
 leave my property and money
 to my Mother,
 Mrs Mary Parsons.

Burin, N.S.
 Newfoundland

1773

Signature Thomas Lake.

Burin
 Nfld.

Date 8th July 1916.
 Nfld. Reg.

NEWFOUNDLAND CONTINGENT

COPY OF WILL

of

No. 1273, Thomas Lake.

In the event of my death I will leave my property and
mony to my Mother Mrs. Mary Parsons Burin N.S.
Newfoundland.

Signature Thomas Lake
Burin Nfld.

Date 8th July 1916.
Nfld Reg.

Certified True Copy.

NEWFOUNDLAND CONTINGENT

COPY OF WILL

of

No. 1773, Thomas Lake.

In the event of my death I will leave my property and
mony to my Mother Mrs. Mary Parsons Burin N.S.
Newfoundland.

Signature Thomas Lake
Burin Nfld.

Date 8th July 1916.
Nfld Reg.

Certified True Copy.

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



June 27th., 1921. 1919.

The accompanying King's Certificate, on his discharge,

(No. 655), is forwarded herewith to

Private Thomas J. Lake

in respect of his service as No. 1773 Rank: Pvte.

Name Thos., J. Lake Corps Royal Nfld. Reg

Receipt of the same should be acknowledged hereon.

Received October 17th 1921

Signature Mrs Mary Carson

Date 1921

Address Burton North

Casualty Form—Active Service.

Regiment or Corps 1st Newfoundland Regt.Regimental No. 1773 Rank Pte Name Lake, V. J.

Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) _____

Date of promotion to present rank } _____ Date of appointment to lance rank } _____ Numerical position on roll of N.C.Os. }

Extended Duration Re-engaged Aug. 13/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., 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	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
<u>thru</u>	<u>Joined Base Depot.</u>	<u>Shance</u>	<u>10/7/16</u>	<u>St. A. 1163</u>	
<u>12. G. H.</u>	<u>Ad. Rheumatism.</u>	<u>Rouse</u>	<u>21/7/16</u>	<u>W 3083</u>	
<u>"</u>	<u>Trans to Eng. (H.S. "St George")</u>	<u>2/8/16</u>	<u>W 3083</u>		

A. E. Clerk, Cpt.
for G.C. Inf. Records.
3rd Ech.

(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) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

C.R. 1773

Extract from Nominal Roll of Mfld. Regt. Draft No.8.

from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton,

9-7-16.

1773 Pte. T. Lake.

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



DOT 5

1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Thomas J. Lake

in respect of his service as No. 1973 Rank Pte

Name T.J. Lake Royal Nfld. Regt.
~~Infantry Corps.~~

Receipt of the same should be acknowledged hereon.

Received November 4th

Signature Mrs Mary Parsons

Date 1921 Nov 4th

Address Burns North Ryed

[P.T.O.]

