



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 12/13

Name in full William Gardner Lewis Age 22

Address 16 Colonial Street

Married Single Height 5-3 1/2 Weight 121
Color Fair Hair Brown Eyes Brown

Other distinguishing marks none

Nearest relative Father (Regimental) Richard Gardner Lewis
Address 16 Colonial Street

Dependents none

Occupation Railroading Present Wage \$35.00 per month

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment March 8/15

*Recruited for 1st Newfoundland Regiment
at St. John's Nfld
with 13 Coy 1st Battalion
Albany 1st 8/15*

I, William Gardner Lewis, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

William Gardner Lewis

Declared before me this 25th day
of March 1915

W. H. [Signature]

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet Reg. No. 1213

Name William Gardner Lewis

Apparent age 22 years months. Height 5 feet 3 1/2 inches.

Chest measurement { Girth when fully expanded inches.
 Range of expansion inches.

Distinctive marks Color: Fair, Hair: Brown, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Richard Gardner Lewis, 16 Colonial St., St. John

| 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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for firing the rate of pension		Service in Re-served not allowed to reckon towards G. O. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>8/3/15</u>									
Joined at <u>St. John's</u> on <u>8 March, 1915</u>									
Total Service forfeited as above									
Total Service towards Engagement to (date of discharge) years days									
" " " Pension " (") " "									

London
PARO



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *William Gardner Lewis*, Regl. No. *1213*

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and *50* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz :

Identity Certificate	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>1060</i>	<i>Father</i>	<i>Richard Lewis</i>	<i>16 Colborne Street</i>	<i>25</i>
<i>Cancelled copy of this form 4.4.1919</i>				
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) *[Signature]*
 Officer Commanding
 Company
Stephen H. F.
 1915

(Sig.) *Wm Gardner Lewis*
 (Rank) *Private*



No. _____

Date June 7th 1915

(1) To the Officer i/c Records,

58 Victoria St.
S.W. (Station.)

(2) The Officer Commanding,

Newfoundland Contingent
Avr. (Station.)

(3) The Paymaster,

58 Victoria St.
" S.W. (Station.)

Regimental No. 1213.

Rank and Name Pte. Lewis W.

Regiment or Corps 1st Newfoundland Contingent

has been granted a furlough from June 7th to June 16th.

His address while on leave will be:-

74 Friarstile Road
Richmond

This man has been furnished with a Warrant to Victoria and given advance of £1 (one pound) permanently until in service overseas. I consider he is ~~not fit for service~~ but fit for service at home.

A. Hope Gosse Capt R.A.M.C.T.

Officer in charge Registrar R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S.W. (Station.)

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

COPY

N.F/11.



NEWFOUNDLAND CONTINGENT

ALLOTMENT.

I, William G. Lewis Regtl No. 1213

hereby agree, until further notification by me, and in similar official form, to make an allotment of _____ dollars and 55 cents per diem, from my pay, to and for the benefit of the undermentioned Person and/or Persons, such payment to be made on proof of identity of the Person and/or Persons concerned, viz:-

Whether Wife, Child, Other Relative, or Friend.	NAME (In full.)	ADDRESS	Amount Each Person	
			£	¢
<u>Wife</u>	<u>Wm G. Lewis</u>	<u>4 News Lane Ayr Scotland</u>		<u>55¢</u>
	<u>See his Form No 177</u>			<u>55¢</u>

This allotment to commence from First March 1917

Note:- This form must be completed and signed by the soldier, countersigned by the Officer Commanding his Company, and forwarded to the Paymaster as authority to make the required payments on application.

(Sig.) Aspicks
Officer Commanding
"F" Company.

(Sig.) William G. Lewis

Ayr Scotland
Jan 30th 1917

(Rank) Private

NOTED <u>SP</u> C.Q.M.S.	NOTED <u>DM</u> C.Q.M.S.
<u>1/30/17</u>	<u>30/1/17</u>

ORIGINAL

N.F./12.



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1213 (Rank) Private (Name) Lewis, William G.

hereby apply for cancellation of Allotment made by me on

N.F. 1177 dated March 1915 in favour 557 Coy.

of H. G. Lewis, 16 Colonial St. St. John's for ~~\$40~~ cts

per diem. Such cancellation to take place on the

28th day of ~~March~~ February 1917

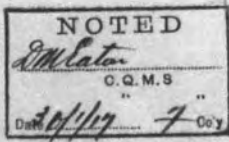
I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, by mail in time to become operative at above nominated cancelling date; and that in the event of such non-delivery by mail, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage as may be thereby necessary being made against me in the Pay Books; or otherwise to refund such overdrawn amount or amounts.

Dated at Race-course Cay
Jan 30th 1917

W. G. Lewis
Allotter.

Approved and Witnessed,

C. Dickson
O.C. "F." Company.



To be made out in TRIPLICATE and sent to the Paymaster & Officer in Charge of Records, who will forward Original to Headquarters by first mail, Duplicate by the following, and retain Triplicate.



SEPARATION ALLOWANCE

- | | |
|---|---|
| 1. Regimental No. and Rank | 1213. Private. |
| Name | W. G. Lewis |
| Unit | 2/1st Newfoundland Regiment |
| 2. Full Name of Dependent. | Mrs William Gardiner Lewis |
| 3. Address | 4 Mews Lane.
Ayr Scotland. |
| 4. Have you made previous claim for Separation Allowance? If so, state particulars. | No |
| 5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere? | No. |
| 6. Date of Marriage. | 11th January 1917 |
| 7. Name and Address of your last Employer. | Rice Newfoundland Co
St Johns Newfoundland |
| 8. The amount of your salary or wages immediately prior to Enlistment. | £10 per month |
| 9. Are your wages or any portion being paid by your employer during your absence? | No. |
| 10. If paid, what is the amount per month? | — |
| 11. Name of Corps prior to enlistment in the Nfld Contingent. | None |

I CERTIFY that the above is a true statement.

W. G. Lewis

Signature of Officer forwarding this application.

Unit

2/1st Newfoundland Regt.

Date

Dec. 18th 17.

JOHN S. STEWART,
Joiner and Builder.

Estimates Given.
TEL. 4X.

Orders promptly attended to.

122 George Street, AYR, 6th December 1917

This is to certify that I have known
Mrs W. Lewis for a long number of
years & I can testify to her good
Character

John S. Stewart

Senior Magistrate

Ayr

NEWFOUNDLAND CONTINGENT

SEPARATION ALLOWANCE

To be Used in the Case of Men Already Married

The Officer Commanding

Lt Col. C. W. Whitaker
4th Newfoundland Regt

I have the honour to request permission to my past marriage, and your recommendation for the issue of Separation Allowance to my wife, Mrs W. G. Lewis

of 4 Mevros Lane, Ayr, Scotland

to whom I was married on the 11 January 1917 at Kilbarnock.

My wife's maiden name was Mary Teresa Graham
 Address at time of marriage 4 Mevros Lane, Ayr Occupation Manager

Name and address of parents or guardian at time of marriage Mrs A Graham, 95 Green Street

I attach hereby my marriage certificate, together with the necessary certificate as to my wife's character and general worthiness from W. G. Lewis

I am not in receipt of a salary from the Newfoundland Government in addition to my Military Pay. no

I have the honour to be, Sir,
 Your obedient Servant.

W. G. Lewis

Regt No 1213 Rank Private

MARRIAGE CERTIFICATE

RETURNED 28/2/18.

I hereby approve of the marriage of the above named Soldier, and recommend that separation allowance be granted to his wife.

I have personally investigated the above application and am satisfied as to the wife's good character and consider her worthy to receive the benefits of Separation Allowance.

The Soldier has assigned at least 50% of his pay in favour of his wife.

* CERTIFIED COPY OF PT. II ORDERS No. 332 Dated Dec 19th 1917

PERMISSION TO MARRY

1213 Pte. W. G. Lewis

The marginally named is granted permission to marry with effect 6th Jan. 1917
 * (Auth.)

The written evidence upon which my decision is based is enclosed for your disposal together with the marriage certificate.

Signature

C. W. Whitaker Rank Lt Col.

Dated

Dec. 18th 17

Commanding

4th Newfoundland Regt.

This document must be signed personally by the Officer Commanding the Unit. Soldier's application must accompany this form.

NEWFOUNDLAND CONTINGENT

APPLICATION FOR OVERSEAS TRANSPORT

1. Name in full

Surname LEWISChristian Names Mary
Theresa

2. Postal and Telegraphic Address.

4 Mews LaneTelephone 136 Ayr.

3. Names and ages of all travelling with you except yourself.

Travel with husband

4. Your last address in Newfoundland

Have not been to
Newfoundland

5. When did you leave Newfoundland, and for what reason did you come here?

6. If Relation or Dependent of Member of the Newfoundland Contingent state relationship, Regtl No., and Rank.

Husband
1213 Sergeant

7. Your Destination in Newfoundland.

16 Colonize Street
St Johns

8. What arrangements have you made for Passport.

9. Can you leave for Newfoundland on 24 hours notice by telegram?

Impossible as I have
a home.

10. No Government or Department can accept responsibility for safety of passengers or baggage, but is understood that the usual ocean passengers' baggage may be carried.

Date 28 April 1919Signature Mary Theresa Lewis
Wife of W. G. Lewis

THIS FORM TO BE COMPLETED AND RETURNED TO:

Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,

59, Victoria Street, London, S.W. 1.

No. 7641/1

NEWFOUNDLAND CONTINGENT

N.F.P/55.

Pay & Record Office,
58, Victoria Street,
London, S.W.,

To: 1213 Ex a/SGT. W.W.G. Lewis

4, News Lane

17th May 1919

Ayr. Scotland

Reference: Remittance from Headquarters (191)

Herewith Postal Draft value £20. 0. 0. sent at the request of the
Minister of Militia.

Please acknowledge receipt hereon.

(Sig.) W. G. Lewis

(Date) May 22/19/19

A. O. Munroe Maj.
Chief Paymaster & O. i/c Records.

ENCLOSURE

No. 8340

NEWFOUNDLAND CONTINGENT

N.F.P/55.



Pay & Record Office,
58, Victoria Street,
London, S.W.

To: Mr. W. G. Lewis,

4, Mews Lane,

3rd June 1919

AYR, Scotland.

Reference: WAR SERVICE GRATUITY.

Herewith Cheque £15:6:2: in respect of War Service Gratuity due you
for period 1/6/19 to 30/6/19 less 50/- overpaid last period. Next
payment becomes due 1/7/19.

Please acknowledge receipt hereon.

(S.S.)

W. G. Lewis

(Date)

June 9th 19/19.

A. H. Munro

Chief Paymaster & O. i/c Records.

FM/FK.

NEWFOUNDLAND CONTINGENT

STATEMENT OF ACCOUNT

ALLOTMENT & SEPARATION ALLOWANCE :-

1213. a/Sergt. W. G. Lewis.

Dr. _____ Discharged Newfoundland 21/1/19 _____ Cr.

<u>Separation Allowance</u> (Overpaid)		<u>Retroactive Separation Allowance.</u>	
22/1/19 - 14/3/19 - 52 days @		11/1/17-31/8/17-233 days	
£3.16:0 per 28 days -	£. 1. 2	@ £3.16:0 per 28 days	£31.12.5
<u>Allotment.</u> (Overpaid)		7/12/18-21/1/19 - 46 days	
22/1/19 - 14/3/19 - 52 days		@ 19/- per 28 days	1.11.3
@ .55 per day - £28.60	5.17. 6	(Promoted a/Sergt 7/11/18)	
<u>Payments</u>			
23/5/19. Postal Drafts	20. 5. 0		

£33. 3. 8

£33. 3. 8



Medical Report on an Invalid.

Station Hazeley Down Camp
 Date 29/1/18

- 1. Unit ROYAL NEWFOUNDLAND REG.
- 2. Regimental No. 1213
- 3. Rank Serjt.
- 4. Name LEWIS
- 5. Age last birthday
- 6. Enlisted {
on
at
- 7. Former Trade }
or Occupation }
- 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

Dehility

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.
- 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.

*Sent back from France with Dehility, which was treated at Wandsworth 45 days.
 Dorrer B. J. 1918. HAZELEY DOWN CAMP.*

- 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 - (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 - (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.
- Due to strain of Active Service Conditions*
n.a.
n.a.

*He has been on light employment
at depot for last two years, and
condition shows great improvement*

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.*

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?

If so—(a) When?

(b) Where?

(c) Opinion?

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

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?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—

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

Repatriation

M. R. Capron

ROYAL NEWFOUNDLAND REG.

Officer in medical charge of case.

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

Station _____

Date _____

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

Medical Report on an Invalid.Station Hazelton Barracks,Date November 29th., 19181. Unit Regal Newfoundland2. Regimental No. 12153. Rank Sergeant.4. Name Lewis, W.

5. Age last birthday

6. Enlisted $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$ 7. Former Trade }
or Occupation }

7a. If with previous service in Army, state—

- (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.*(Other disabilities should be reported upon in answer to question No. 19).***DISABILITY**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.
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.

**Sent back from France with disability
 Treated Wandsworth 45 days.**

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

Due to strain of active service conditions

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.

He has been on light employment at Depot for last two years and condition shows great improvement.

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?

If so—(a) When?

(b) Where?

(c) Opinion?

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

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?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

Repatriation

(Sgd) J. S. KNIGHT, Capt., R. A. M. C.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

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 Minister of Pensions should be in possession of the most reliable information to enable him 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, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 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.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

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

**Pulse 100. Anaemic, sick looking
Nothing in lungs**

Yes

Strain of active service

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

60% for 6 months

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

No

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—

(Sgd) H. S. FRASER

President.

Station **St. John's,**

ARCH C. TAIT

Date **Dec. 27th., 1918**

L. PATTERSON, Major

Members.

Approved
Station

(Sgd) CLYDE MACPHERSON, Major H. S. NEWFOUNDLAND.

Administrative Medical Officer.

Date



COPY

Demobilisation Form 2

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1213 Rank Serjeant Name W. Lewis
Intended place of residence 16 Colonial St.

2. Occupation Railroader
Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of DEMOBILIZATION
ELIGIBLE FOR POST DISCHARGE PAY

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
Place (SGD) C. C. DULEY, CAPT.
Date DEC 30, 1918 for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S (SGD) W. LEWIS
30-12-18 Signature of soldier
(SGD) C. A. B. DICKS, CAPT.
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S (SGD) W. LEWIS
30-12-18 Signature of soldier
(SGD) (E. F. PETERS)
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 12-1-15 No of days on Military
Jan. 7th 1919 plus 14 days 1470
Discharged from service 30-12-18 Service

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S (SGD) J. MUNNS, CAPT.
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.
Date JAN. 7. 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
Place Officer i/c Records
Date The Royal Newfoundland Regiment

1141

Medical Report on an Invalid.

Station Hasleby Down Camp,

Date November 29th., 1918

1. Unit **Regal Newfoundland**
2. Regimental No. **1215**
3. Rank **Sergeant**
4. Name **LEWIS, W.**
5. Age last birthday
6. Enlisted { on
at

7. Former Trade }
or Occupation }

- 7A. If with previous service in Army, state—
- (a) Former Unit;
 - (b) Regimental No.;
 - (c) Date of Discharge;
 - (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

D E B I L I T Y

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.
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.

**Sent back from France with disability
Treated Wandsworth 45 days.**

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 - (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 - (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

Due to strain of active service conditions

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.

He has been on light employment at Depot for last two years and condition shows great improvement.

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?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

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

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?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—

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

Repatriation

(Sgt) J. S. KNIGHT, Capt., R. A. M. C.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

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 Minister of Pensions should be in possession of the most reliable information to **enable him 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, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 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.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

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

**False 100. Anæmia, sick looking
Nothing in lungs**

Yes

Strain of active service

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

60% for 6 months

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes

28. If discharge is recommended it should be stated whether further medical treatment (including orthopedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

No

29. With reference to Army Council Instruction No. 14 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—

St. John's,

Station

Dec. 27th., 1918

Date

(Sgt) H. E. FRASER

President.

ARCH C. TAIT

L. PATTERSON, Major

Members.

Approved

Station

DEC 27 1918

Date



(Sgt) CLUNY MACPHERSON, Major


D. N. S. NEWFOUNDLAND.

Administrative Medical Officer.

COPY

C. R. C. Form B.
25-10-18-500

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 WORK AT RAILROADING

(SGD) W. LEWIS

Signature of Man.

Reg. No. 1213

(SGD) C. B. DICKS, CAPT

Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S

Date DEC 30th, 1918 191

Lewis, W

1213

Ray Sept.

January 21st., 1919

#1213 Sergt. Walter G. Lewis,
- #16 Colonial St.,
City.

Dear Sir :-

Please find enclosed "Discharge
Certificate No. 628."

Yours faithfully,

Captain,
Paymaster & C. i/c Records

Em'1 1.

LAST PAY CERTIFICATE ORIGINAL

N.F.P./94

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

Regt No. 1213 Rank Sergt Name Lewis, W. Unit R. Newfoundland Regt. who was repatriated
to Newfoundland on 11/12/18 Authority _____ Cause _____

DR.

STATEMENT OF ACCOUNT

PERIOD:	PARTICULARS						PARTICULARS						OR.				
	\$	¢	E	s	d	\$	¢	E	s	d							
From 23/11/18 to 11/12/18	Balance Dr. from						Balance Cr. from										
	Allotment 19 days @ 55¢						Pay 19 days @ \$1.35						25	65			
	Cash Payments:						Field Allowance 19 days @ \$.15						2	85			
	1st. Pay												28	50	5	17	1
	2nd. "																
	Other Debits:						Other Allowances days @ \$										
							Ration Allowance								12	6	
	Barrack Damages																
	Misc. Stoppages																
	Total Debits						Total Credits								6	9	7
Balance due by Paymaster						Balance due to Paymaster											
														6	9	7	

*SSB
17/11/18*

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

Hazeley Down Camp, Winchester. 191 11/12/18.

(Signed) J. Nunns, Captain.

Made up/Checked in accordance with information received in the Pay & Record Office London to 11/12/18. and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
Dec. 19th. 1918.

*OK
WNS*

Chief Paymaster & Officer i/c Records.

LAST PAY CERTIFICATE

N.F.P./94.

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

Regt No. 1213 Rank Sgt. Name Lewis. W. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated

to Newfoundland on 11/12/15 Authority _____ Cause _____

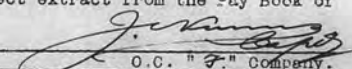
DR. _____ STATEMENT OF ACCOUNT _____ OR.

PARTICULARS	DR.					CR.				
	£	s	d	£	s	d	£	s	d	
Balance Dr. from						Balance Cr. from				
Allotment 19 days @ 55¢	10	45		2	2	11	Pay 19 days @ \$ 1.30	26	85	
Cash Payments:						Field Allow 19 days @ \$ 1.50	2	80		
1st Pay				1	5	0	Other Allowes	29	35	6
2nd do.				2	3	3	days @ \$			0
Other Debits:						ration allow.				12
Bar. Dgoe						6	Other Credits:			
Men. Stopf						1				
Total Debits				6	13	1	Total Credits			6
Balance due by Paymaster							Balance due to Paymaster			13

PERIOD: From 23/11/15 To 20/12/15.

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

F. Co.
Winchester. Dec. 11th 1917.
(Place) (Date)


O.C. "F." Company.

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary. t5 11

Pay & Record Office, London,

DM
WOK

Chief Paymaster & Officer i/c Records.

DUPLICATE
ORIGINAL



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1213 (Rank) Private (Name) Lewis, William G.
hereby apply for cancellation of Allotment made by me on
N.F. 1147 dated March 1915 in favour
of R. G. Lewis, 16 Colonial St. St John for ~~40~~ ⁵⁰ cts ~~40~~
per diem. Such cancellation to take place on the
28th ~~first~~ day of March February 1917

I agree to accept all risks and consequences of this application
failing to reach headquarters, St. John's, by mail in time to become
operative at above nominated cancelling date; and that in the event
of such non-delivery by mail, and thereby the Allotment continuing to
be paid to the Allottee, I also agree to such further stoppage as may
be thereby necessary being made against me in the Pay Books, or other-
wise to refund such overdrawn amount or amounts.

Dated at Race-course Cys
Jan 30th 1917

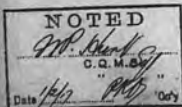
W. G. Lewis
Allotter.

Approved and Witnessed,

C. A. Hicks
O.C. "F." Company.



To be made out in TRIPLICATE and sent to the Paymaster & Officer
in Charge of Records, who will forward Original to Headquarters by
first mail, Duplicate by the following, and retain Triplicate.



COPY

N.F./12.



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1213 (Rank) Private (Name) Lewis, William G.

hereby apply for cancellation of Allotment made by me on

N.F. 1177 dated March 1915 in favour of R. S. Lewis, 16 Colonial St. St. John's for \$ ~~4~~ ^{55 Cts.} cts. ~~40~~ ⁵¹

per diem. Such cancellation to take place on the 28th Feb day of March February 1917

I agree to accept all risks and consequences of this application failing to reach headquarters, St. John's, by mail in time to become operative at above nominated cancelling date; and that in the event of such non-delivery by mail, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage as may be thereby necessary being made against me in the Pay Books, or otherwise to refund such overdrawn amount or amounts.

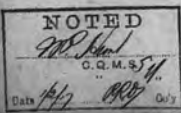
Dated at Race Course, Ayl
Jan. 30th 1917

W. G. Lewis
Allotter.

Approved and Witnessed,
C. B. Nickerson
O.C. "F." Company.



To be made out in TRIPLICATE and sent to the Paymaster & Officer in Charge of Records, who will forward Original to Headquarters by first mail, Duplicate by the following, and retain Triplicate.



The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1213 Rank Serjeant Name W. Lewis
 Intended place of residence 16 Colonial St

2. Occupation Roadworker
 Classification of soldier B Medical Category 1

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

ELIGIBLE for POST DISCHARGE PAY

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 DEC 30 1918 for W. Lewis Capt
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date St. John's W. Lewis

30-12-18

Signature of soldier

W. Lewis Capt

Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date St. John's W. Lewis

30-12-18

Signature of soldier

W. Lewis

Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 12.1.15 No of days on Military
 Discharged from service 30-12-18 plus 14 days Service 1470

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S J. V. ...

Date JAN 7 1919 Office Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's W. Bowley, Capt

Date January 21 1919 Office in Charge
 The Royal Newfoundland Regiment

Q B 209/608

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1215 Rank Sergeant Name Lewis W.
 Date of Enlistment 12.1.15 Address 16 Colymbath District H. Johns
 Occupation Railroading Classification for Discharge B Medical Category 1C
 Recommendation S.M.B. permit unfit Disability Rating 60% for 6 wks.
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1		
B 178	W 3494	B 122	Board 1st	" 2	3	
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 30.12.18 W. Lewis
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment

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

W Lewis

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable £10.00
 (b) Clothing Supplied £10.00

Date 30-12-18 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *hel* to his home
 at *John* and Release Certificate No. *658* issued.

Date *30-12-18* *CS Drisko 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 **-*-19*

Date *30-12-18* *Wesley Capt*
 Depot Paymaster.

Discharge approved for *Jan 7 1919*

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1916	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 *31.12.18* *CS Drisko Capt*
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
 Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date *JAN 7 1919* *J. K...*
 O. C. Discharge Depot.

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

Date *Jan 8/1919*

Discharged U.K. 12/12/18

LAST PAY CERTIFICATE

ORIGINAL

N.F.P./94.

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

Regtl No. 1213 Rank Sgt

Name Lewis W G

Unit Royal Nfld. Regt

who was repatriated

Newfoundland

on 24/6/19 Authority Draft 91

Cause

29°

STATEMENT OF ACCOUNT

PERIOD: From	To	PARTICULARS			PARTICULARS						
		£	s	d	£	s	d				
		Balance Dr. from			Balance Cr. from						
		Allotment days @			HQ.R S (Gratuity)	283	50	58	5	1	
		Cash Payments:			Pay days @ £						
		W S Gratuity Cheque 3709			Field Alice days @ £						
		23/5/19			Other Allcés days @ £						
		cheque 3855 3/6/19	18	5	9						
		Other Debits:	15	6	2						
		Total Debits									
		Balance due by Paymaster	33	11	11	Total Credits					
			24	13	2	Balance due to Paymaster			58	5	1
			58	5	1				58	5	1

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

(Place) _____ (Date) _____ 191

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

Pay & Record Office, London, S.W. 1.
June 23rd 1919

O.C. " " Company.

London to 23/6/19

Chief Paymaster & O. 1/c Records.

EAH
23-6-19

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 work at railroading

W. Lewis

Signature of Man.

Reg. No. 1213

W. H. Call

Signature of the Vocational Officer or his Representative.

Place

St. Johns

Date

Dec 30 11

1918

To be used only for Special Reserve Recruits, and for Special Reservists in Regular Army.

MEDICAL HISTORY

Surname Lewis OF Christian Name Wm Gardner

Table 1.—GENERAL TABLE.

Birthplace:—Parish 16 Colonial St County

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>12</u> day of <u>Jan'y</u> 191 <u>0</u>	on	day of	191
	at <u>St Johns</u>	at		
Declared Age.....	<u>22</u> years	days	years	days
Trade or Occupation.....	<u>Railroading</u>			
Height	<u>5</u> feet	<u>3 1/2</u> inches	feet	inches
Weight		<u>121</u> lbs.		lbs.
Chest Measurement {	Girth when fully expanded...	<u>31 1/2</u> inches		inches
	Range of expansion...	<u>34</u> inches		inches
Physical Development.....				
Vaccination Marks {	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>1910</u>		R.E.—V= <u>18/20</u>	
	L.E.—V= <u>19/20</u>		L.E.—V= <u>19/20</u>	
(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>Spencer</u>			
(Rank)	<u>Capt</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St Johns</u>	at		
	on <u>8</u> day of <u>Nov</u> 191 <u>0</u>	on	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st Wfls 1213</u>			
Transferred to.. ..				
Became non-effective by				
	on	day of	191	on
(Signature)				
(Rank)				



Table H.—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 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				
8 th LONDON GENERAL HOSPITAL WANDSWORTH.	24	4	16	7	6	16	Achility	45	Reported well at Rowen. Now complains of being sleepy & pain in left side of chest. Shows evidence of great exhaustion. Improved.	W. J. G. Col RAN(R)
Hazeley Down	23	7	18	29	7	18	J. C. T. Rt. Arm	6	Discharged to duty.	G. S. P. V. J. R. A. M. G.

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
5 JUL 1918	Boarded at Hg. by Down Camp checked BI W. J. [unclear] Major Rank W. J. [unclear] Capt. Rank
30 NOV 1918	[REDACTED] DOWN CAMP. Recommended for discharge W. J. [unclear] APPROVED ROYAL NEWFOUNDLAND REG.
<p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>E</u></p> <p>27.12.18 <small>Date of M.M.B.</small> <small>Captain Assistant Adjutant General Discharge Depot-Newfoundland</small></p>	

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 Johns 77					

Casualty Form—Active Service.

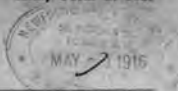
Regiment or Corps Newfoundland

Regimental No. 1213 Rank plc. Name Lewis W.

Enlisted (a) 8.3.15 Terms of Service (a) one year Service reckons from (a) 8.3.15

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

Extended _____ Re-engaged duration of war Qualification (b) _____



Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 26, or other official documents.
Date	From whom received			

Embarked St. John's, NFLD. 30/4/15.

Disembarked Alexandria 1/9/15.

Embarked for Gallipoli 13/9/15.

26/9/15. "Valdivia" Ill, Dysentery "Valdivia" 26/9/15. Auth. A 36, 26/9/15. JP

29/9/15. 5th.Can. Admitted 5th.Can.Hosp., 29/9/15. A 12197.
 Cairo. Cairo.

29/11/16 and with detention record 29/11/16 B72

Embarked Port Suez 27.3.16

Disembarked MARSEILLES 27.3.16

6.4.16 2 C.C. Myalgia 31.3.16 ED 837

20.4.16 11 Scurvy 9.4.16 87 7584

27.4.16 3 Swallow to England 27.4.16 71 3083

all clerk
Office to be kept
Capt. H. Cal
3rd Echelon

(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) Ag. Tailor, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Medical Report on an Invalid.

Station HAZELEY DOWN CAMP.Date 29 NOV 1918

1. Unit ROYAL NEWFOUNDLAND REG.
2. Regimental No. 1213
3. Rank Sgt
4. Name LEWIS. W
5. Age last birthday
6. Enlisted on
 at
7. Former Trade }
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.*(Other disabilities should be reported upon in answer to question No. 19).**Debility*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.
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.

Sent back from France with debility which treated, recovered with 45 days

Ordered B1 Jan 518 HAZELEY DOWN CAMP.

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

Due to strain of Active Service conditions

2a

2a

13. What is his present condition?

He has been on light employment at Depot for last two years & condition shows great improvement.

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

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?

If so—(a) When?

(b) Where?

(c) Opinion?

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

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?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—

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

Reputation
Reputation
Appras.
ROYAL NEWFOUNDLAND REG.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, and, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him 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, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 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.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

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

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Phlebotomy, Angemia, sick looking nothing on being

yes

strain of active service

loop six months

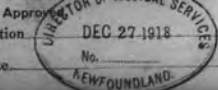
yes

no

Signatures:—

Station *S. Johns*

Date *Dec 27 1918*



[Signature] President.

[Signature] Members.

[Signature] Members.

Station _____

Date _____

[Signature]
Administrative Medical Officer.



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 *Lewis, William, Gardner*

Regiment from which discharged *Royal Newfoundland*

Regimental number *1213*

Intended address *16 Colonial St. St. John's, Nfld.*

Height on discharge *5* Feet *4"*

Color of hair on discharge *Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *-*

Figure on discharge *Medium*

Christian name of Father *Richard*

Christian name of Mother *-*

Wife's maiden name in full *Mary Theresa Graham*

Date and place of marriage *Jan. 11, 1917. Kilmarnock*

Christian names of children *-*

Place and date of soldier's birth *St. John's, April 13, 1892.*

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) *William Gardner Lewis*

Station *St. John's*

Date *Dec. 27th*

(Rank) *Serjt.*

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.

H. H. H. H.
Medical Officer in Hospital.
Unit, or Command Depot.

Station *St. John's, Nfld.*

Date *Dec. 27/18.*

4039.

Copy.

N.F.P./11.

NEWFOUNDLAND CONTINGENTALLOTMENT

I, (No.) 1213, (Rank) Sergt. (Name) Lewis M. G.
 hereby agree, until further notification by me, and in required form,
 to make an Allotment of _____ dollars and fifty five cents
 per diem, from my pay, to and for the benefit of the undermentioned
 Person and/or Persons. Such payments to be made on proof of identity
 of the Person and/or Persons concerned, viz.:

Whether Wife, Child, other Relative, or Friend.	NAME (In full)	ADDRESS	AMOUNT (Each Person)	
			\$	c
<u>Wife</u>	<u>Mrs. M. G. Lewis</u>	<u>4 News Lane, Ayr. N.S.</u>		<u>55</u>
<u>05/11</u>				<u>55</u>

This Allotment to take effect from and including 1st Mar. 1917

NOTE:- This Form must be completed and signed by the Soldier, counter-
 signed by the Officer Commanding his Company, and forwarded to the
 Chief Paymaster in accordance with P.&R.O. C.L./10, 2/12/16.

(Sig.) _____
 Officer Commanding,
 " " Company.

Dated at _____

(Sig.) Sd/ M. G. Lewis
 Allotter.

P.M.

1219 Sgt Lewis

Proceeding to U.K. on private affairs.
Discharged to be confirmed on Jan. 7th
Please pay P.D. Pay now, if possible, in one
cheque, otherwise on Jan. 7th

W.F.R.

3/12/18

O.K. ~~W.F.R.~~

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 136 $\frac{50}{4}$

Dec 31 1918

Received from the First Newfoundland Regiment
the sum of one hundred & thirty six Dollars.
~~on account~~
balance of Pay. P. D. O.

W. G. Lewis Sgt.

Ca. No. 7687	Initials E. W.
Pay Ledger 405	Initials A. W. L.
Gen. Ledger	Initials

Regtl. No. 1213 Rank

17/12/18

No. 1213

Rank

Sgt.

Name

Lewis W.G.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 7⁰⁰

July 14 19 17

Received from the First Newfoundland Regiment
the sum of Seventy Dollars.
on account of Pay. with
~~balance~~

W. G. Lewis *W. G. Lewis*

Ck. No. <u>2945</u>	Initials. <u>EW</u>
Pay Ledger <u>29</u>	Initials. <u>W</u>
Gen. Ledger.....	Initials.....

Regtl. No. 1213 Rank Sergt.

No. 1213

Rank

Sgt

Name

M. G. Lewis

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$49 $\frac{1}{2}$

Aug st 6 1919

Received from the First Newfoundland Regiment
the sum of forty nine $\frac{1}{2}$ Dollars.
on account of Pay. *W. Lewis*
balance

A. C. P.
W. Lewis

Ch. No. 4331	Initials <i>J.P.</i>
Pay Ledger 290	Initials <i>W.L.</i>
Gen. Ledger	Initials

Regtl. No. 1213 Rank *Sgt.*

No. 1213

Rank

Name

W. G. Lewis

C.R. 1213

Extract from telegram from Rurality, London to
Military, St. John's, dated August 5th 1920.

Following embarked "Sachem" August 4th.

Wife of 1213 Lewis.

6

16 Colonial Street
St. Johns N.F.
March 8th 1930.

C.R. 1213

To

278 Lieut H. C. Jones
Casualty Officer
Department of Militia
St. Johns.

Dear Sir:-

I have your letter of Feb.
16th instant Re. "1914-1915 Star" I beg to
acknowledge receipt of same.

I am Sir,

Yours Faithfully
W. G. Lewis Ex. Sgt.



C.R. 1263

RECEIPT FOR ISSUE OF
RIBAN D OF 1914-15 STAR.

I certify that I have received an issue
of 3 inches of Riband of 1914-15 Star.

NAME..... *W Lewis*

DATE.....

PLACE..... *St. Johns*

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

Lieut. Colonel.

Chief Staff Officer.

- CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

I hereby make claim for issue of Riband of
1914-15 Star.

I certify that I am entitled to this issue,
having served on* *Gallipoli*.

from 1915 to 1915.
(Date) *3/9/19* (NO) *1213* (Rank) *Sgt* (Name) *W Lewis*
(Place) *St John's*

*Fill in theatre of War where you served in
Gallipoli, Mudros, Lemnos, or Western Egyptian
Frontier.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 12487/831/P&A.

C.R. 1213

From

PAY & RECORD OFFICE.

88, VICTORIA STREET,

LONDON, S.W.

3rd December 1919

FM/FK.

To

ORIGINAL.

The Minister of Militia,

St. John's,

NEWFOUNDLAND.

SUBJECT:EX NO.1213 SERGT. W. G. LEWIS.
ROYAL NEWFOUNDLAND REGIMENT.

Reference Nos.

REPLY

Dated December 27th. 1919 101

With reference to the minuted copies of correspondence herewith, as the statement also enclosed shows Mrs. Lewis has received all Separation Allowance and Allotment she is entitled to. It is not understood whether Mrs. Lewis refers to a letter from your department or her husband.

Meanwhile, this is written to prevent the possibility of payment of retroactive Separation Allowance being duplicated, please.

Noted, please.

Lt. Col.
C.S.O.
for Minister of Militia.

G. A. Munnell
Lt.-Col.
Chief Staff Officer (London).

MINUTES OF CORRESPONDENCE.

(1)

Letter from Mrs. Lewis.
4, News Lane, Ayr.
Dated 16/10/19. to
P. & R.O. London.

There is nine months back Separation Allowance at £4. per month due to me, makin £36:0:0 in all. I would be much obliged if you will forward same at your earliest convenience and oblige.

(2)

Letter from P. & R.O. London
11858/1/P&A dated 21/10/19.
to Mrs. M. Lewis. 4, News Lane,
Ayr. Scotland.

EX 1213 SGT W.G. LEWIS.
ROYAL NEWFOUNDLAND REGIMENT.

With reference to your letter 16/10/19: (5803), it is understood that this refers to re-tractive Separation Allowance due to you as follows for which Postal Drafts £20:8:0: were mailed to you 23/5/19.

11/1/17 to 31/8/17 - 233 days at £3.16.0	
for 28 days.	£31.12.5
<u>Less Separation Allowance and allotment overpaid</u>	
22/1/19 - 14/3/19 - 52 days	12.18.8
	<hr/>
	£18.13.9
<u>Plus Increase in Rate for rank of Sergt</u>	
7/12/18 to 21/1/19 - 48 days	1.14.3
	<hr/>
	<u>£20. 5.0</u>

The Postal Drafts referred to were cashed at Ayr 27/5/19 and bear your signature.

(3)

Letter from Mrs. M. Lewis.
4, News Lane, Ayr. dated
27/10/19 to P. & R.O. London.

Thanks so much for letter received on 22nd inst. I may tell you I had a letter from Newfoundland asking me to put in a claim for £36:0:0: due to me for back allotment money, and I was to write on receipt of same. I have sent your letter to Newfoundland and will let you know what answer I get in return.

NEWFOUNDLAND CONTINGENT

STATEMENT OF ACCOUNT

ALLOTMENT & SEPARATION ALLOWANCE :-

1213. a/Sergt. W. G. Lewis.

Dr. _____ Discharged Newfoundland 21/1/19 _____ Cr.

Separation Allowance (Overpaid)		Retroactive Separation Allowance.	
22/1/19 - 14/3/19 - 52 days @		11/1/17-31/8/17-233 days	
£3:16:0 per 28 days -	£7. 1. 2	@ £3:16:0 per 28 days	£31.12.5
Allotment. (Overpaid)		7/12/18-21/1/19 - 46 days	
22/1/19 - 14/3/19 - 52 days		@ 19/- per 28 days	1.11.3
@ .55 per day - £28.60	5.17. 6	(Promoted a/Sergt	
Payments		7/11/18)	
23/5/19. Postal Drafts	20. 5. 0		
	<u>£33. 3. 8</u>		<u>£33. 3. 8</u>



C.R. 1213

Extract from Newark telegram sent to Synoptical,
London, May 31st, 1919.

Reference your telegram May 23rd gratuity
1213 Lewis \$283.50 .

C.R. 1213

Extract from Telegram from Syn., London to Military.
dated May 23rd 1919.

Please expedite reply to my telegram of April 30th

1213 Lewis.

C.R. 1213

Extract from Telegram from Syn., London to Military.
dated May 23rd 1919.

Please expedite reply to my telegram of April 30th

1213 Lewis.

C.R. 1213

Extract from telegram from Synoptical to Mil. dated April 30/1919

What are the amounts due 1213 Lewis.

on account of War Service Gratuity.

1213
C.R.

Extract of Daily Orders, Part II, Depot. St. John's dated
Jan 7th 1918

DEMOBILIZATION.

The discharge of the undernoted man has been approved by O.C.
Discharge Depot from noted dates. He is removed from Depot
Strength and transferred to Discharge Depot pending con-
firmation by Officer i/o Records.

1213 Sgt. W.G. Lewis

Discharged. 7y1-19

C.R. 1213

Extract from Medical Board held on Friday Afternoon Dec. 27th,
1918.

1212 Sgt. W. Lewis.

Recommended Discharge as Permanently Unfit.

C.R. 1213

Extract of EYE PRELIMINARY REPORT of a Medical Board
held on Friday Afternoon December 27th/19, the following was the
finding.

Recommended Discharge as Permanently Unfit.

#1213 Sgt. W. Lewis.

C.R. 1213

Extract from Daily Orders part 11, Depot St. John's
dated December 23rd., 1916.

The u/m returned from Overons and reported to Depot 21-12-16

#1213 Pte. W. G. Lewis.

C.R. 1213

Extract from Nominal roll of repatriation draft No.79 per
S.S. "CORSIKAN" which embarked at Tilbury Docks, 18/12/16.
from the 2nd., Battalion.

FIELD A/SGT. W.G. Lewis.

CR 1213

Extract from Daily Orders part II, 2nd., Battalion of the
Royal Newfoundland Regiment by Lt. Col., B. J. Barton, DSO.
Officer Commanding.

4-11-18

The undernoted to be acting Sergt. from 7-11-18.

#1215 L/Sgt. D. Lewis.

C.R. 1213

Extract from Schedule of Separation Allowance, payable
as U.K. from P.R.O. London.

#1213 Pte. W.G. Lewis.

Married 1-9-17

C.R. 1213

Extract of Casualties received from Pa. Record
Office, London dated June 8. 1916.

1213 Pte. W. Lewis.

Discharged from Wandsworth. 7/6/16 to 16/6/16.

Class Home Service only.

C.R.
1213

SICK & WOUNDED N.C.O.s. & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

HAMILTON RECORD OFFICE.

LIST NO.H. 7939.

14401 Pte. Mitchell, V.	13/R.Scots.	Inf.Mid.Ear.....Dis.ex 5 Gen.H.Rouen 22nd April 16.
17968 Pte. Williamson, W.	1/K.O.S.B.	Sycoosis. do
2935 Pte. Lauder, A.D.	17/High.L.I.	Jaundice.....To Eng.per HS Aberdonian ex 5 Gen.H. 22nd April 16.
3953 Pte. McGregor, W.	1/R.Sco.Fus.	ICT. -do-
13813 Pte. McCutcheon, I.S.	15/High.L.I.	Ulcer Cornea.....Adm.5 Gen.H. Rouen 22nd April 16.
15168 Pte. Hamner, A.	8/K.O.S.B.	Nephritis..... To Eng.ex 3 Sty.H. 22nd April 16.
13561 Pte. Wood, W.S.	15/High.L.I.	GSW,L,Leg & R,Shldr.Adm.11 Sty.H. Rouen 22nd April 16.
10701 Cpl. Griffiths, S.	2/Cameronians.	Debility. -do-
11999 Pte. Meehan, P.	2/Scot.Fus.	Bronchitis. -do-
5358 Pte. Brannan, J.	2/Scot.Fus.	Frac.R.Fibula. -do-
13283 Pte. Hyndman, D.	15/High.L.I.	GSW,Neck. -do-
16919 Cpl. Rogers, A.	10/Cameronians.	GSW,both Legs,& R..To Eng.ex 11 Sty. H.Rouen 22nd April 16.
17724 Pte. Ferguson, P.	12/High.L.I.	Thigh with Frac.L.Tib.
15642 Pte. Simpson, J.H.	8/K.O.S.B.	ICT.R.Arm. -do-
7545 Pte. Boyd, A.	7/R.Sco.Fus.	Piles.....To Eng.ex 23 Gen.H. 22nd April 16.
		Strict,Urethra Cystitis. -do-

TERRITORIAL FORCE HAMILTON RECORD OFFICE.

LIST NO.H. 7939.

5152 Pte. Berry, J.	8/R.Scots.	Pneumonia..... To Eng.per HS Aberdonian ex 5 Gen.H.22nd April,16.
5230 Pte. Moffat, J.	8/R.Scots.	Myalgia. -do-

AUSTRALIAN IMPERIAL FORCE

LIST NO.H. 7939.

2335 Pte. Bell, H.	AASC, C 1 Aust.Div, Fd.Bky.	Influenza.....Dis.to Duty ex 3 Sty.H. Rouen 22nd April 16.
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NEWFOUNDLAND CONTINGENT

LIST NO.H. 7939.

1213 Pte. Lewis, W.	Newfoundland R. 29 Div. 88 Bde.	Debility.....To Eng.ex 11 Sty.H.Rouen 22nd April 16.
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APR 28 1916



1474

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form 100 (1916)

3rd London General HOSPITAL, at Wandsworth, S.W.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
 admitted on April 24th, 1916 from Hospital Ship "Abardonian"
* Here insert which Expeditionary Force.
 Southampton or Dover.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

(a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.

(b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., not later than the day after admission; envelopes to be marked C. 2, Casualties; rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
1213	Pte.	Lewis, W.	1st NFLD.	Debility

A. Hope Gosse, Capt., R.A.M.C.T.,

Registrar, "

3rd London General Hospital,

Wandsworth, S.W.

C.R. 1213
 RECEIVED BY THE EDITOR
 APR 15 1916

SICK & WOUNDED N.C.Os. & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

EXETER RECORD OFFICE.

LIST NO. H. 7584

9643 Pte. Plummer L.	1/Som.L.I.	Infl.Stomach.....Adm. 5 Gen.H.Rouen 9th April 16.
11389 Pte. Steer S.	2/Devons.	Pleurisy. -do-
15238 Pte. Hopkins A.R.	8/Som.L.I.	Sprn.Ankle R.Acc. -do-
7067 Pte. Jacobs S.J.	8/Som.L.I.	Nephritis Ac. -do-
7149 Pte. Bolt F.	1/Devon.R.att.1.Sty. Hos.	Stricture.....Adm.12 Gen.H.Rouen 9th April 16.
6485 Sjt. Smith C.F.	1/Som.L.I.	GSW.Thigh.....Seriously Ill in 12 Gen.H.Rouen 9th Apl. 16.Improving.
9533 Pte. Hawkins P.	1/Som.L.I.	GSW.Neck Legs L.& R.Seriously Wounded in 9 Gen.H.Rouen 9th April 16. Improving Slowly.
9563 Cpl. Matthews F.	1/Dorset R.	Bronchitis.....Adm. 11 Sty.H.Rouen 9th Apl.16.
6925 Pte. Carr A.S.	1/Wilts.R.att.11 Sty.Hos.	Inf.Knee Jnt.L. -do-

ROYAL HORSE GUARDS, REGENT'S PARK.

LIST NO. H. 7584

1826 Tpr. Needham J.	R.H.Gds.	N.Y.D.....Adm. 9 Gen.H.Rouen 9th April 16.
1988 Cpl. Blackledge T.W.	R.H.Gds.	Infl.Larynx.....Dis.ex 9 Gen.H.Rouen 9th April 16, to Conv. Camp.

AUSTRALIAN IMPERIAL FORCE.

LIST NO. H. 7584

3009 Dvr. Lofthouse N.	ASC.HT.466 Co. 49/ Aust.Div.	Psoriasis.....Adm. 5 Gen.H.Rouen 9th April 16.
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NEWFOUNDLAND CONTINGENT.

LIST NO. H. 7584

1213 Pte. Lewis W.	Newfoundland R.29/ Div.88/Bde.	Debility.....Adm.11 Sty.H.Rouen 9th April 16.
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BRITISH RED CROSS SOCIETY.

LIST NO. H. 7584

1846 Ord. Menzies R.	BRCS.Sco.Hos.att.11 Sty.H.	Colitis.....Adm.11 Sty.H.Rouen 9th April 16.
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M.P.S.C.

LIST NO. H. 7584

1512 Sjt. Tilyard J.	MPSC.1/Prison.	Haematuria (693)..Dis.ex 10 Gen.H.Rouen 9th Apl.16.
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1404

C.R. 1213

Extract of Casualty List received from P. & R. O. Nov 18th. 1915

1815. Pte W. G. Lewis. ✓

Dysentery 5th. Can. H. Cairo.

C.R. 1213

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3246, dated Oct. 18th. 1915.

1213 Pte. Lewis....

1st. Newfoundland..... Dysentery.....Adm. 5 Can. B.H. Cavalry
Barracks Abbassia Cairo 29th. Sept. 1915.

C.R. 1213

Extract from Nominal Roll Co. 1st. In. Mfld. Regt.

Embarked, at Devonport for Active Service 20-8-15

Disembarked Alexandria, 31-8-15, Proceeded to Abbassia,
Cairo, same date, Embarked ~~xxx~~ Alexandria for Gallipoli
13-9-15.

1213 Pte. W. Lewis.

C.R. 1213

Extract from Hospital Roll embarked St. John's, for overseas,
per U. S. "Stephano" April 28, 1918.

1213 Pte. Lewis W.

C.R. 1213

Wm G. Lewis was attested for General service
with the NEWFOUNDLAND REGIMENT on March 8th. 1915.
Regimental No 1213 was allotted to Pte. W.G. Lewis

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

 Number of Sheet 1

 W. F. Child & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (25) WINDYMOOR 4004 2/12-1 30 56

 Form
 B. 121
 B.

 Regiment of Ford. Newfoundland

 Signature of O. C. Company Lewis A. [unclear]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badge, Service Pay or Proficiency Pay	
No.	<u>Lewis Tom</u>	Age on <u>22</u> years <u></u> months		<u>Laborer</u>		
Joined	Date	Place and Date of Enlistment		Religion	<u>Asseyle</u>	
Joined	<u>11-11-14</u>	<u>Nfld. D. 8-3-15.</u>		<u>Cats.</u>		
Joined	Date	Period of		Place of Birth		
Joined	<u>2-11-14</u>	<u>Nfld. D. June 17-1915.</u>	(with Colours <u>9</u> years with Reserve <u>3</u> years)	<u>St. John's.</u>		

Place	Date of Offence	Rank	Case of Disobedience	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
		<u>Plt</u>		<u>Demobilized</u>	<u>St John's</u>	<u>21</u>	<u>19</u>		

To be carried over

The Royal Newfoundland Regiment

1213

DEMOBILIZATION OF

Reg. No. 1213 Rank Sergeant Name Lewis, W.
 Date of Enlistment 12.1.18 Address 16, Carleton Place District St. John's
 Occupation Railroading Classification for Discharge B Medical Category 1C
 Recommendation S.M.B. permit unfit Disability Rating 60% for 6 yrs.
 Passed to Demobilization Officer with following documents:-

N.F. P35	B 268	B 121	N.F. Med.	D.F. 1		
B 178	W 3494	B 122	Board 1st	" 2		
B 178a	D 400A	B 191E	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 30.12.18

W. Lewis
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:-

- (a) Clothing Allowance payable \$160.00
- (b) Clothing Supplied Joseph H. Snow, Agent

Date 30-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 711 to his home
 at St John and Release Certificate No. 679 issued.
 Date 30-12-18
C. B. Dicks 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 31-12-19
 Date 30-12-18
W. H. H. Capt.
 Depot Paymaster.

Discharge approved for: Jan. 7, 1919

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

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 178	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 31.12.18C. B. Dicks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records,
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAYDate JAN 7 1919J. H. H. Capt.
O. C. Discharge Depot.

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

Date Jan. 8/1919W. H. H. Capt.
O.C. R.