



FIRST NEWFOUNDLAND REGIMENT

3994

No. 3994 Name Walter Lidstone Corps Meth

Questions to be put to the Recruit before Enlistment.

- Walter Lidstone*
Laurenville
N.P.B.
1. What is your name? 1. *Walter Lidstone*
 2. What is your full Address? 2. *Laurenville N.P.B.*
 3. Are you a British Subject? 3. *yes*
 4. What is your age? 4. *20* Years *2* Months
 5. What is your Trade or Calling? 5. *Turnerman*
 6. Are you Married? 6. *no*
 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. *no*
 8. Are you willing to be vaccinated or re-vaccinated? 8. *yes*
 9. Are you willing to be enlisted for General Service? 9. *yes*
 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. *yes* { 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. *yes*

I, *Walter Lidstone* 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.

Walter Lidstone SIGNATURE OF RECRUIT.
James J. Wainch Signature of Witness.

15/10/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Walter Lidstone* 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 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 fully entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at *Grand Falls* on this *15th* day of *October* 191*7*.

St. J. H. [Signature] Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the:

If enlisted by special authority, such will be attached to the original attestation.

Date *15/10/17* Place *Meth* } Approving Officer. *[Signature]*

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

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

DESCRIPTIVE REPORT ON ENLISTMENT

3994

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

Name Walter Lidstone
 Apparent age 20 years 2 months. Height 5 feet 3 inches
 Chest Measurement { Girth when fully expanded 35 inches WT 118
 Range of expansion 2 inches
 Distinctive marks Hair brown eyes blue Complexion fair
Scar on Rt side of face of operation

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Lidstone
Lawendin | Relationship Father
N D Bay Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon forwards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>15-10-17</u>									
Joined at <u>St John's</u> on <u>October 15-17</u>									
<u>Discharged July 18. 1919</u>									
		<u>Embarked St John's N.S. Missinates 11-12-17.</u>							
		<u>Re-embarked France 27-5-18. Joined 13th Bn.</u>							
		<u>from Rouen 22-4-19. Arrived Winchester 23-4-19.</u>							
		<u>Demobilized at 22-5-19. Arrived Newfoundland 1-6-1919</u>							
		<u>Demobilized at St John's 18-7-19</u>							
Total Service forfeited as above.....									

Total Service towards Engagement to 18-7-19 [date of discharge] 1 years 277 days
 " " Pensions " " " " " " " " " " " "

~~378~~
C.R. ~~3887~~

Extract from Daily Orders Part II Royal Newfoundland Regiment,
in France, dated 28-2-19.

3994

LEAVE.

Leave to U.K. 27-2-19 to 14-3-19.

3994
~~3887~~, Pte. W. Lidstone.

C.R. 3994

Extract from Daily Orders Part 11 Unit The Royal WFLA.

Regt. St. John's, July 25/19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/o Records from 18-7-19.

3994 Pte. Walter Liastone.

C.R. 3994

Extract from Daily Orders Part 11 Unit The Royal Hfld.
Regt. St. John's, July 5th, 1919.

The discharge of the undersigned on demobilization has been
APPROVED by G.O. Discharge Depot with effect from 2-7-19.

3994 Pte. W. Lidstone.

C.R. 3994

Extract from Daily Orders Part 11. Depot. St. John's,

Date June 18th 1919.

3994, Pte. W. Lidstone.

Reported at Headquarters 1/6/19. RE "Corsican"
which sailed Liverpool May 22/1919.

C.R.

3994

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

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

#3994 Pte. W. Lidstone.

C.R. 3994

Extract from Casualties received from Pay and Record Office
London dated 24th., December 1917.

#0 C. Richmond Mil. Hosp. Richmond

Reports.

DISCHARGED JOSE. 29/12/17 to 'arlo' to 7/1/18

#3594 Pte. F. Burt. for I Duty.

C.R. 3994

Extract of Nominal Roll Draft (All Ranks) to 1st
Bn. B.E.F. Embarked Folkestone 8

3994 Pte. W. Lidstone.

25-5-18.

C.R. 3994

NEWFOUNDLAND CONTINGENT.

Extract of Nominal Roll of Draft No. 46, - 120 Other Ranks from 2nd. Bn., Winchester to 1st. Battrn., The Royal Newfoundland Regiment, B.E.F. Embarked Folkestone, 25/5/18.

3994 Pte. W. Lidstone.

A.Ps. B. 103 (one for each soldier) sent to 3rd. Echelon, B.E.F.

C.R. 3994

Extract from Nominal Roll Embarked St. John's for Overseas,
per S.S. "Florissel" Dec. 11, 1917.

#3994 PTE. W. LIDSTONE.

C.R. 3994

Extract from Daily Orders Part II Unit The Royal
Nfld. Regt., St. John's, Oct. 15th, 1917.

Attested at Grand Falls.

3994 Pte. W. Lidstone.

Attached for General Service with the Nfld. Regt
posted to G. Company with effect from Oct. 15th.

Lidston, W.

C.R. 3994

P. & R. Co.



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Walter Lidstone, Regl. No. 3994

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Twenty 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.:

Allotment begins November 1/17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3046	Wife	Elizabeth (Eliz)	Lidstone	60
			Laurentown	
			St. John's	
Total Allotment, \$				60

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

(Sig.) [Signature]
Officer Commanding
Company
[Signature]
7-11-17

(Sig.) Walter Lidstone
(Rank) Co

Russell

No. 21012/670

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
Royal Nfld. Regt.
B. E. F.

18th December 1918

Dec 28th

1918

Subject: 3994, Pte. W. Lidstone,

ANSWER.

With reference to the following telegram (10957) from the Hon. Minister of Militia, received

Retained to his credit please

Pay to 3994 Lidstone £5:2:10

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

NEWFOUNDLAND CONTINGENT,
PAY & RECORD OFFICE,
REFUGES IN 1610
JAN 1919
Ack'd
COMMANING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.
LIEUT. COL.

BRANCH	Li.
Cmd.	
A. & A.	
R. & C.	
B. & E.	
P. S.	

2000
10/11/19

H. A. Russell Pay.
Chief Paymaster & O. i/c Records.

credit

Nb 5387/257

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
1st Batt. Ryl. Nfld. Regt.
B. E. F.

7th April 1919

Subject: 3994. Pte. W. Lidstone

With reference to the following telegram (119) from the Hon. Minister of Militia, received

3994. W. Lidstone

£9. 17. 6.

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

W. P. Hunt

Chief Paymaster & O. i/c Records.

17-4-1919

ANSWER.

3994. Pte W. Lidstone

This man wishes the amount retained to credit of his account

Dep 5/4/19
Major
LIEUT. COL.

COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.

No. 3994 Rank Pvt Name Linstone W.

Pay	F.A.	Wkg	Total
100	10		110
Less Allotment			60
Net Rate			50

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	\$	£	s	d
						From	To						
Balance					Balance <u>Pt Batt</u>								
Acquittance Rolls				11		2012-18					10	16	6
Hospital Advances				1	Pay @ Net Rate	20-12-18	1-2-19	70	50	3500	7	3	10
A.B. 64.50				1	<u>R.A.B.C.F.</u>								4
P.&R.O. Payments				3	<u>£13 3 0</u>								19
					<u>Pay</u>	1-2-19	14-3-19	14	50	7.00	1	8	9
					<u>£19-7</u>								20
													12
													7

Ab-0-0

19-3-0 Cash Receipt 1470 28 2/9 13 3 0

Clare
20/2/19

REFOUNDED CONTINGENT

21042 To CM

Medical Report on an Invalid.

Station Hazley BarronDate 30/4/19

1. Unit Royal Newfoundland
2. Regimental No. 3994
3. Rank plc
4. Name Lidstone Walter
5. Age last birthday 21
6. Enlisted { on oct 15/17
at St Johns
7. Former Trade } Tradesman
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).

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. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
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.
- nil.

He complains of no disability

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?

na.

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

na.

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?

na.

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.

na.

20. Do you recommend—

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

Repatriation

W.E. Procnier

Capt Rame

Officer in medical charge of case.

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

Station *Hazelton Barr*

Officer in charge of Hospital.

Date *30/4/19*

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

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

No. 3994 Name *Pte Lidstone W.*, Sqn., Batty., or Company } *C* Corps *2, Royal Newfld* Date of enlistment } *15. 10. 17* G.C. Badges } *1* Service or Proficiency Pay } *1*

Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. } Signature O.C. Company, etc. } *Fl. M. Curran* Character } *Wm. H.*

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>Roseau</i>	<i>29/3/19</i>	<i>Pte</i>		<i>Def. of kit</i>	<i>Col. M. S. Watson</i>	<i>Pay for same.</i>	<i>1/4/19</i>	<i>Mag. Bernard</i>	<i>Wm. H.</i>

Army Form B. 199

Lidstone, W.

3994

Hay Sept.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3994 Rank Plt Name Lidstone W
 Intended place of residence Lawrenceton

2. Occupation Serviceman
 Classification of soldier E Medical Category A 2

3. The above named man is discharged in consequence of
DEMOBILIZATION
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place, ST. JOHN'S
 Date JUL 2 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place, ST. JOHN'S
 Date 2-7-19
 Signature of soldier W. Lidstone
 Signature of witness J. A. [unclear]

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
 Place, ST. JOHN'S
 Date 2-7-19
 Signature of soldier W. Lidstone
 Signature of witness James O. Sheehan

STATEMENT OF SERVICE

7. Enlisted for service 12-10-17 No. of days on Military
 Discharged from service 4-7-19 Plus 14 days Service 642

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
 Date JUL 4 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place, ST. JOHN'S
 Date July 18/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

at B2079/3116

The Royal Newfoundland Regiment

Class for Demobilization: Goj

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 30.6.19

Regimental No 3994

Name Lidstone H. Rank Pte.

Address Launcetown

Present Medical Category A7

Recommended for:— (a) Immediate discharge
(b) Standard Medical Board

Members of Board

R.H. East Major
O.C. Discharge Depot.

J. Paterson
Senior Medical Officer

J.W. Burden
M. O. Depot

July 21, 1919

#3994 Pte. Walter Lidstone,
Lawrenston, N.D.B.

Dear Sir:-

Please find enclosed Discharge Certificate #3116.

Yours truly

Captain & Paymaster.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 3994 Rank Plt Name Lieutenant Col
 Date of Enlistment 15-10-17 Address Laurensmiter District St John's
 Occupation Lumberman Classification for Discharge F1 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 1/36	B 268	B 121	1	N. F. Med	D. F. 1	1
B 178	W 3494	B 122	1	Board 1st	" 2	
B 178a	D 400A	B 1915	1	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B-103	ME 2		<u>D256-1</u>	" 6	
B 179c	B 120	M 93				

Date 30-6-19

L. O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

W. L. Lidstone

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) ~~Clothing Supplied~~ _____

Date 2-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. ^{A2113} 4814 to his home at Saxmenceton and Release Certificate No. 3116 issued.

Date 2-7-19

J.A. Sawbott
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 18-7-19

Date 2-7-19

H. M. ...
Depot Paymaster.

Discharged approved for 4-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st.	" 2
B 178a	D 400A	B 1915	do 2nd.	" 3
B 179	D 400B	Form L.	do 3rd.	" 4
B 179a	D 400C	Form K.	do 4th.	" 5
B 179b	B 103	ME 2.	<u>B256-1</u>	" 6
B179c	B 120	M 93.		

2 Form B

Date 2-7-19

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

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

R.H. ... MAJOR

Date JUL 4 1919

O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former Occupation.

W. Lidstone

Signature of Man.

Reg. No. *3996*

J. H. Newcomb

Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date *2-7-19.* 191

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

MEDICAL HISTORY

OF

Surname

Linton

Christian Name

Walter

Table I.—GENERAL TABLE.

Birthplace:—Parish

St Lawrence H.D.D.

County

Wales

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <i>15</i> day of <i>Oct</i> 191 <i>7</i>	on	day of	191
	at <i>Grand Falls</i>	at		
Declared Age	<i>30</i> years	<i>2</i> years	years	days
Trade or Occupation	<i>Carpenter</i>			
Height	<i>5</i> feet	<i>5</i> inches	feet	inches
Weight		<i>118</i> lbs.		lbs.
Chest Measurement	Girth when fully expanded...	<i>35</i> inches		inches
	Range of Expansion...	<i>2</i> inches		inches
Physical Development				
Vaccination Marks	Arm			
	Number			
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)	<i>Samuel Waterson</i>			
(Rank)	<i>Major</i>			
	Medical Officer.			Medical Officer.
Enlisted	at <i>Grand Falls</i>	at		
	on <i>15</i> day of <i>Oct</i> 191 <i>7</i>	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<i>1st Welsh Regt</i>	<i>3994</i>		
Transferred to				
Became non-effective by	on	day of	191	on
			day of	191
(Signature)				
(Rank)				



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Walter Lidston*

Regiment from which discharged **Royal Newfoundland**

Regimental number *3994*

Intended address *Laurenceton.*

Height on discharge *5 Feet 7*

Color of hair on discharge *dark*

Complexion *Fair*

Color of eyes *Gray.*

Descriptive Marks *— Appendicitis*

Figure on discharge *medium*

Christian name of Father *Moses*

Christian name of Mother *Elizabeth*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Laurenceton. 16-8- age. 22. 1897*

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) *Walter Lidston*

(Rank) *GTE*

Station *St Johns*

Date *June 30 6-19*

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

Medical Officer i/c Hospital.
Unit, or Command Depot.

Station

Date

Medical Report on an Invalid.

Station Lazely Camp
 Date 30-4-19

1. Unit Royal Newfoundland
 2. Regimental No. 3994
 3. Rank 5th
 4. Name Lidstone Walter
 5. Age last birthday 21
 6. Enlisted { on Oct 15/17
 at St Johns

7. Former Trade } Fisherman
 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).

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.

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

n i e
 h i e
 n i e
 n i e

n a

13. What is his present condition? *He complains of no disability*

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?

h a

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

h a

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?

h a

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.

h a

Repatriation

20. Do you recommend—

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

Sgt R.S.

W E [unclear] 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 *Beagle N Camp*

Officer in charge of Hospital.

Date *30-4-19*

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

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

Casualty Form—Active Service.

Regiment or Corps *1st Royal Newfoundland*
 Rank *Pte* Surname *Pidstone* Christian Name *Walter*
 Religion *Meth* Age on Enlistment *20* years *2* months
 Enlisted (a) *15.5.17* Terms of Service (a) *Duration* Service reckons from (a) *15.5.17*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate
 Occupation *Lumberman* *J. M. Curran* Signature of Officer



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked	<i>25-5-18</i>		
		Disembarked	<i>27-5-18</i>		
		Joined Battalion	<i>31-5-18</i>		
		<i>Granted leave 15 wk, 27/2/18 to 13/3/18</i>			<i>B213</i>

Am

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing Smith, &c.
 W. 4645 M2733 20-000 9/17 (35011) C.P. & S., Ltd., Form B.103 E/1907. P.T.O.

MORNING SICK REPORT
 MEDICAL INSPECTION REPORT *

Army Form B 256

Unit 7th Newfoundland Lt
 Squadron, battery, or company C

Station and date Newton Park School Asp. 5-1-1919

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married.)		Completed Years of		Religion.	* If for duty †	Whether a defaulter.	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's remarks and signature.
			Age	Service.							
3994	Pte	Lidstone W.	20	7/12	Meth	no	no	"C" Coy	-	Mumps	Heathfield J.D. Hoopl.

Handwritten signature: Cecil Duff
Handwritten signature: Cecil Duff

† State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.
 * Strike out whichever is not applicable.

Orderly
 N.C.O.

July 24, 1919

#3994 Pte. Walter Listone,
Lawrence, N.D.B.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

On completion this Declaration is to be returned to THE OFFICER I/C

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

Christian name..... *MacKen* 2. Surname..... *Liachore*

3. Rank..... *Pte* 4. Regtl. No..... *3994*

5. Address in full to which future payments of gratuity are to be forwarded..... *Lawrenceston, N. S. B.*

6. Date of enlistment in the Regiment..... *Sep. 15/17*

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

..... *no*

8. Relationship of such dependents..... *no*

9. Address in full of such dependents..... *no*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*

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

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Twenty Two months*

..... *1 1/2*

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

..... *no*

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

..... *no*

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

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

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

..... *no*

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

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

19. Are you now serving in the Regt.?..... If not give? - (a) Date of discharge.....

..... *no* *July 16/19* (b) Reason for discharge..... *Demobilization*

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

..... *France, Belgium & Germany*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant: Walter Lidstone

Place of Residence: Lawrenceston, N.B.

Declared before me at: St Johns Nfld

This 2 day of July 1919....

J.P. Haller

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

POST DISCHARGE PAY.

Date paid	paid Soldier.	paid Dependent.	War Service Gratuity.	Net amount due
.....
.....
Certified correct.			Paymaster	

ST. JOHN'S, JUL 2 - 1919

Royal Newfoundland Regiment.

Billeting Account,

To Plt W Lidstone

Billeting Soldiers as undermentioned

from June 2 / 19 to June 25 / 19

3994 Plt W Lidstone C.A.S. 27 10

ACCOUNT	<u>Btm</u>
CH. NO	<u>2034</u> INITIALS <u>W</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 27.10

J.A. Lawford
Billeting Officer.
W. Lidstone

W.L.S.

Receipt for Army Book 64

No. 3994 Name W. Ledstone

To Certify that I have received the 2 AB 64 of the above named soldier.

Name W. Ledstone

Date 8-10-20

Place Launceton

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

25/10/20
W

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121
39

Number of Sheet 802

Regiment of 1st Newfoundland

Signature of O. C. Company W. H. [Signature]

Regimental No. and Name	
No. <u>3994</u>	<u>Lidstone Walter</u>
Joined _____	Date _____
Joined _____	Date _____
Joined _____	Date _____
Joined _____	Date _____

Enlistment	
Age on <u>20</u> years <u>2</u> months	
Place and Date of Enlistment	<u>St. John's</u>
Period of <u>with Colours 277</u> years.	
<u>with Reserve 365</u> years.	

Trade <u>Landman</u>
Religion <u>Method</u>
Place of Birth

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of drunk-ness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS	
<u>Demobilized St. John's 18th 19th</u>										
				To be carried over						

Army Form B. 121

23994

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5994 Rank Plt. Name Lidstone W.
 Date of Enlistment 15-10-17 Address Laurenston District V. Gate
 Occupation Woodsman Classification for Discharge E Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	/	N.F. Med	D.F. 1	/
B 178	W 3494	B 122	/	Board 1st	" 2	
B 178a	D 400A	B 1915	/	do 2nd	" 3	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		<u>B256-1</u>	" 6	
B 179c	B 120	M 93				

Date 30-6-19 L O. C. Discharge Depot. W. Lidstone

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

W. Lidstone

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied McClouster

Date 2-7-19 O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. ⁴²¹¹³₄₈₁₄ to his home at Lawrenceston and Release Certificate No. 3116 issued.

Date 2-7-19

J.A. Newbapt
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 18-7-19

Date 1-7-19

[Signature]
Depot Paymaster.

Discharge approved for 4-7-19

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

N.F. P136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 108	ME 2	<u>B256-1</u>	" <u>pr 2-00</u>
B179c	B 120	M 93		

2 Form B

Date 2-7-19

J.A. Newbapt
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 4 1919

[Signature]
O. C. Discharge Depot.

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

Date July 18/1919

[Signature]
for records

Reg. No. *3,994*. Rank *Plt* Name *Redstone W.*

Attested Address *Lawrenceham*

Allotment Allottee

Date of Allotment Returned from Overseas *29.1.19.*

Returned on S.S. *Conman* Cause *Discharge*

27.19
47.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.