



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4496 Name James J. [unclear] Corps 1st Bn

Questions to be put to the Recruit before Enlistment.

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

I 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.

.....SIGNATURE OF RECRUIT.

.....Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at..... on this.....day of.....191

Signature of Attesting Officer [Signature]

†CERTIFICATE OF APPROVING OFFICER.

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

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

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

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.

‡ Here insert the "Corps" for which the Recruit has been enlisted.

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name George Bush

Apparent age 33 years 3 months. Height 5 feet 9 inches

Chest Measurement { Girth when fully expanded 67 inches
 Range of expansion 67 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr. J. Bush
33 W. 5th St. Wash. D.C. | Relationship Mother

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years'	Days	Years	Days	
Service towards limited engagement reckons from _____									<div style="font-size: 2em; margin-bottom: 10px;">1000</div> <div style="font-size: 2em;">100</div>
Joined at _____ on _____									
Total Service forfeited as above.....									

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

" " Pensions " _____ [" "] " " "



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4090 Name Geo. Lush Corps Inf 4090

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------------------|
| 1. What is your name? | 1. <u>George Lush</u> |
| 2. What is your full Address? | 2. <u>33 Water St. W. St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>27</u> Years <u>3</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. | { Name
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, George Lush 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.

George Lush SIGNATURE OF RECRUIT.
Robert Cook Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, George Lush do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 8th day of Nov 1917
Signature of Attesting Officer Walter J. ...

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st Bn.
If enlisted by special authority, such will be attached to the original attestation.
Date Nov 8 1917 } Approving Officer.
Place St. John's

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name George Bush
 Apparent age 23 years 3 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 6 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Martha Bush
33 Water St West | Relationship Mother

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>8-14-17</u>									
Joined at <u>St. John's</u> on <u>November 8-17</u>									
<u>Discharged April 17/1918</u>									
Embarked <u>St. John's N.S. Messanahie</u> <u>11-12-17</u> <u>Admitted</u>									
<u>Westfield Hosp. days 8-1-18. Discharged to 21st Br. Newcastle 1-22-18</u>									
<p style="font-size: small;">Disability: mental. Soldier cannot read or write, can recognize letters, to slow and stupid; it is reported that he is not likely to make an efficient soldier. He has fits and of fumbling. Sent to hospital camp for two days for St. Woodford from Liverpool to Halifax N.S. 23-2-18. Arrived Liverpool 25-3-18.</p> <p style="font-size: large; text-align: center;"><u>Discharged medically unfit 13-4-18.</u></p>									
Total Service forfeited as above.....									

Total Service towards Engagement to 13-4-18 (date of discharge) 157 days
 " " Pensions " " " " " " " " " " " "

C.R.

4090

Extract from list of men of the Royal Newfoundland Regiment dis-
charged on various dates

4090 Pte. G.Lush

Discharged 13 - 4 - 18, Medically unfit

C.R. 4099

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 16, 1918.

#4090 Pte. G. Lush.

Having been found Medically Unfit is discharged from
13/4/18.

C.R. 4090

Extract from Preliminary Report, from The Director of
Medical Services, To Officer Commanding Depot, dated
April 1st, 1918.

#4090 Pte.G.Lush.

Recommended Discharge as Permanently Unfit.

C.R. 4090

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, March 26, 1918.

The following men reports to Depot on 25/3/18 from
Overseas:-

#4090 Pte. G. Lush.

C.R. 4090

Extract from Nominal Roll of repatriation Draft No. 57
received from Pay and Record Office, London dated
25th., February, 1918.

4090 Pte. G. Lush.

FROM DEPOT
FOR DISCHARGE.
BCC.

Embarked South Liverpool 23/2/18.

C.R. 4090

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

#4090 PTE. G. LUSH.

• 1980 FEB 17 11:11 AM •

BLANDFORD

STATION

(1)

(1)

8

C.R!

4090

Extract from Daily Orders Part 11 Unit The Royal Hfld.
Regt., St. John's, Nov. 8th, 1917.

4090 Pte. A. Lush.

Attested for General Service with the Hfld. Regt., posted
to G. Coy, with effect from Nov. 8th, 1917.

Lush G.

C.R. 4090

P. R. O.

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

MEDICAL HISTORY

Surname

Lush

OF

Christian Name

George

Table I.—GENERAL TABLE.

Birthplace:—Parish

St. John's

County

Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <i>8th</i> day of <i>Nov</i> 1917	at <i>St. John's.</i>	on _____ day of _____ 191	at _____
Declared Age	<i>27</i> years <i>3</i> days		years	days
Trade or Occupation	<i>Fisherman</i>			
Height	<i>5</i> feet <i>9</i> inches		feet	inches
Weight	<i>143</i> lbs.			lbs.
Chest Measurement	Girth when fully expanded...	<i>37</i> inches		inches
	Range of Expansion...	<i>6</i> inches		inches
Physical Development				
Vaccination Marks	Arms			
	Number			
When Vaccinated				
Vision	R.E.—V= <i>4/10</i>	L.E.—V= <i>6/6</i>	R.E.—V=	L.E.—V=
	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease			<div style="border: 1px solid black; padding: 5px; text-align: center;"> COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. No. <i>2911/12</i> DATED <i>22 FEB 1918</i> </div>	
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<i>Lamm Davidson</i>			
(Rank)	<i>Major</i>			
	Medical Officer.		Medical Officer.	
Enlisted	at <i>St. John's</i>	on <i>8th</i> day of <i>Nov</i> 1917	at _____	on _____ day of _____ 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<i>1st Nfld. Regt.</i>	<i>4090</i>		
Became non-effective by	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)				
(Rank)				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	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 case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Heatfield	8	1	18	1	2	18	Diphtheria	24	Swab negative on dismissal	W. Donoghue, L.R.C.P.

Medical Report on an Invalid.

Station Hazel Down Camp. Winchester

Date 7-2-18

1. Unit 2nd Royal Newfoundland Rgt
 2. Regimental No. 4090
 3. Rank Pte
 4. Name LUSH GEORGE

5. Age last birthday 32
 6. Enlisted { on 8 Nov 1917
 at St John's Newfoundland
 7. Former Trade or Occupation } Fisherman

8. Disability.

Mental Stupor
148

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. Constitutional
10. Place of origin of disability. N.A.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Diphtheria 8.1.18

Cannot read or write
Can recognise letter. D. slow
and stupid, it is reported
that he is not likely to
make a soldier
Has had fits of fainting

12. (a) Give your opinion as to the causation of the disability.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Constitutional
N.A.

COPY SENT TO
 O.C. H.Q.
 SGT. JOHNS, INFIL. CO.
 No. 29112
 22 FEB 1918
 DATED

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.

mentally slow
low voice. mouth
breather. Physical
condition fair

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

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

} n e

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

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

} n a

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

n a

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

n 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?

n a

19. Do you recommend

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

Discharge as permanently unfit

Richard *[Signature]*
CPT R. K. MC

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.

The A.O.

No 4090. J. Lusk.

The Soldier is in my opinion
mentally deficient and unable
to carry out any military duty.

J. M. Gunnison Jr.
O. C. C. Co.
2^d Bat^l Royal Ar^y Regt.

LAST PAY CERTIFICATE

N.F.P./94.

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

Regtl No. 4090 Rank Pte. Name Lush, J. Unit Royal Nfld. Regt. who was Repatriated.
to Newfoundland on 22/2/18. Authority _____ Cause _____
DR. STATEMENT OF ACCOUNT OR.

PERIOD: From	To	PARTICULARS					\$	£	s	d									
		\$	£	s	d	\$	£	s	d	\$	£	s	d						
		Balance Dr. from								Balance Cr. from									
		Allotment 7 days @ 70¢	4	90	1	0	1			Pay 7 days @ \$ 1.00	7	00	1	8	9				
		Cash Payments:								Field Allowance 7 days @ \$ 10¢		70		2	10				
		<i>loans. 20/2/18</i>				11	6			Other Allowances days @ \$									
		Other Debits:								Other Credits:									
		Total Debits								Total Credits									
		Balance due by Paymaster						≠	22	Balance due to Paymaster									
						1	11		7										

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of
16 days 16/2/18 - 15/3/18.
Wanchester 22/2/ 1918.
(Place) (Date)

J. J. Strong & Kent
for O.C. "C" 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

CHECKED
924 PRO
26-2-18

Pay & Record Office, London,
26 FEB 1918 191

Chief Paymaster & Officer i/c Records.

Lush, G.
3236743 C.A.M.C.

4090

THE BOARD OF
PENSION COMMISSIONERS
FOR CANADA



IN REPLY REFER TO
207192.

Ottawa December 20th 19 20.

The Secretary,
Board of Pension Commissioners,
Newfoundland.

Re: #3236743, Pte. G. Lush,
C. A. M. C.....

Sir:-

I have the honour to request that you will supply this Office with information with regard to the service of the marginally noted, who was discharged from the Newfoundland Contingent, said to have been fit. He re-enlisted with the Canadian Army Medical Corps and is now suffering from tubercular epididymitis.

2. This information is necessary for consideration of pension.

Yours truly,

SECRETARY.
BOARD OF PENSION COMMISSIONERS
FOR CANADA.

MA7/MB10.

PER *AMB*

	Date	Initials
Received.....	3-1-21	LeBS
Referred to.....		
Answered.....	3-1-21	LeBS

Jan. 3rd/21

The Secretary,
The Board of Pension Commissioners for Canada,
Ottawa.

3236743 Pte. G. Lush, C. A. M. C.
Fomerley 4090 Newfoundland Regt.

Dear Sir:-

I beg to acknowledge receipt of your communication of
Dec. 20th - 207192 relative to the above mentioned man.

You did not state his Newfoundland Regimental number
but we presume this is the same man, as he proceeded to Canada
after his Discharge from our Regiment. He was discharged on
March 13th 1918 owing to mental deficiency, but had no disability
due to service.

Trusting this information is satisfactory.

Yours faithfully,

Asst. Secy.

LBD.

February 28, 1919

Mr. George Lush,

#1198 Dovercourt Road,

Toronto, Ont.

Canada.

Dear Sir:-

Your letter of February 3rd was received after the regulations governing Post Discharge Pay were superseded by those concerning War Service Gratuity, and reply has been delayed on account of the time required to make the necessary calculations of the War Service Gratuity.

Payments of the Gratuity will commence on March 1st, 1919, and will be made in monthly installments until such time as the amount due has been paid.

The amount due is calculated on the basis of a soldier's services, and any amount paid as bonus at the time of discharge, and Post Discharge Pay if already paid, will be deducted from the total amount of the Gratuity.

It is necessary before payment is made, that the enclosed Statutory Declaration be completed and returned to me.

As soon as it is received the first payment on account of the War Service Gratuity will be forwarded.

Yours truly,

Paymaster & Officer i/c Records
Captain,

Feb 3rd 19

J M Howley Esq

Dear Sir

3965

I am informed there is a sum of money due me from the 1st Wfld Regiment for my service overseas and as I am now living in Toronto since my discharge I would be very thankful to you if you would kindly send it to me

I remain

yours truly

George Lusk

Late of. Water St. W.

St. John's

AJ

Now

Now living in Canada

My present address is

George Lush

1198 Dovercourt Rd

Toronto, Ont,

Canada

LAST PAY CERTIFICATE



DUPLICATE N.F.P. 194.
 MAIL CO. COPY
 21 MAR 1918

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.
 Regtl No 4090 Rank Pl Name Lush J
 to Newfoundland on 22/2/18 Authority _____ Cause _____ who was Revalued

STATEMENT OF ACCOUNT

PERIOD: FROM	TO	PARTICULARS					STATEMENT OF ACCOUNT					OR.				
		\$	£	s	d		\$	£	s	d		\$	£	s	d	
		Balance Dr. from					Balance Cr. from									
		Allotment 7 days @ \$1.70¢	1	90	1	0	Pay 7 days @ \$1.00	1	00	1	8	9				
		Cash Payments:					Field Allowance 7 days @ \$1.70¢	1	70	1	2	10				
		<i>Casual 00/00</i>					Other Allowances 1 days @ \$									
		Other Debits:					Other Credits:									
		Total Debits					Total Credits									
		Balance due by Paymaster					Balance due to Paymaster									
						1										

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of L. Lush 22/2/18 Windsor 22/2/1918
 (Place) (Date)

J. J. Strong
 O.C. "C" Company.

Made up/Checked in accordance with information received in the Pay & Record Office 26-2-18 to 15/3/18 and is therefore subject to amendment if and as may be found necessary.

CHECKED
 26-2-18

Pay & Record Office, London,
 26 FEB 1918 191

H. A. ...
 Chief Paymaster & Officer i/c Records.

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

Proceedings on Discharge.



(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No.	<u>H090</u>	Army Rank	<u>Private</u>
Name	<u>Lush George</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>		
Corps	<u>Royal Newfoundland Regiment</u>		
Battalion, Battery, Company, Depot, &c.	<u></u> <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>		
Date of discharge	<u>April 15th 1918</u>		
Place of discharge	<u>St. John's Nfld</u>		
1.	Description at the time of discharge.		
Age	<u>23</u> years <u>8</u> months	Descriptive marks.	
Height	<u>5</u> feet <u>9</u> inches		
Chest measurement	girth when fully expanded <u>37</u> ins.		
	range of expansion <u>6</u> ins.		
Complexion	<u>fair</u>		
Eyes	<u>gray</u>		
Hair	<u>dark brown</u>		
Trade	<u>Fisherman</u>		
Intended place of residence	<u></u>		
(To be given as fully as practicable)	<u></u>		
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>			
2.	The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>		
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>			
To be filled in on the soldier quitting the Colours.	3.	Military character:—	
	4.	Character awarded in accordance with King's Regulations:—	
	<u></u>		
	<u></u>		
	<u></u>		
	<u></u>		
	<u></u>		
	<u></u>		
	<u></u>		
	<u></u>		
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
			Initials of Commanding Officer.
Army Form B. 2068 has been issued to*			

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Battrn. _____ Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) John's Mld. George's Lust (Signature of Soldier.)
(Date) 13/4/18 C. C. Oke S.S.M. (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " "

Total " " "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No Reservations.

George ^{his} Lusk
_{mark}

L. C. Oke SSM



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 *Lush George*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *4090*
 Intended address *33 Water St West St Johns*
 Height on discharge *5* Feet *8 in*
 Color of hair on discharge *Dark Brown*
 Complexion *Fair*
 Color of eye *Grey*
 Descriptive Marks *Fair*
 Figure on discharge *medium*
 Christian name of Father *dead*
 Christian name of Mother *martha*
 Wife's maiden name in full *—*
 Date and place of marriage *—*
 Christian names of children *—*
 Place and date of soldier's birth. *Bruno. B.B. August 4 1895*
 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) *George Lush*
 Station *St Johns* Date *March 28/18*
 Rank *Private*

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.

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

Station *St Johns* Date *Mar. 28/18*

Duplicate

Medical Report on an Invalid.



Station Razley Down Camp

Date 7-2-18

- 1. Unit 2nd Royal Newfoundland Rgt.
- 2. Regimental No. 4090
- 3. Rank Pte
- 4. Name LUSH GEORGE
- 5. Age last birthday 22
- 6. Enlisted { on 8th Nov 1917
at St John's Newfoundland
- 7. Former Trade or Occupation } Fisherman

8. Disability.

Mental Stupor 148

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

Diphtheria 8-1-18
Cannot read or write. Can
recognise letters. Is slow
and stupid. It is reported
that he is not likely to make
a soldier
Has had fits of fainting
- 12. (a) Give your opinion as to the causation of the disability. Constitutional
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). N/a.

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.

Mentally slow
mouth breaths
condition fair
poor voice
Physical

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

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

} n/a

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

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

} n/a

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

n/a

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

n/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?

n/a

19. Do you recommend

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

Discharged as permanently unfit

Richard [Signature]
C/O. 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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

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

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

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

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

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

no
Constitutional

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

Heart rapid, very irregular, frequent murmur. Poor physique & stunted appearance

21. Has the disability been aggravated by

(a) Intemperance?

no

(b) Misconduct?

no

(c) Any of the conditions mentioned in question 20, and if so, which?

yes

22. Is the disability permanent?

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

To be stated in months.

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

*As due to Mil. Service nil
As not due to Mil. Service 60%*

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

24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

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

26. Do the Board recommend

(a) Discharge as permanently unfit, or

yes

(b) Change to England?

Signatures:—

[Signature] President.
[Signature] Members.
[Signature] Members.

Station *[Signature]*

Date *Mar 20/18*

Station _____

Date _____



[Signature]
Administrative Medical Officer. Major

D. N. S. NEWFOUNDLAND.

The U.O. No 4090 G Lusk.

This soldier is in my opinion
mentally deficient and unable
to carry out any military duties



Duplicate

J. M. Emerson Lt.
O. E. C. Coy
2nd Batt Royal Dep't Regt

April 23, 1919

#4090 Pte. George Lush,
#3 Weaver Avenue,
Toronto, Canada.

Dear Sir:-

Referring to your application for "War Service
Gratuity," I beg to state that you are not entitled to same,
as you have not served in the Royal Newfoundland Regiment
Twelve months (12), and you were not on the strength 11th
November 1918.

Yours truly

Captain
Haymaster & O.I/c Records

ml

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

- Christian name... *George* ... 2. Surname... *Lush*
3. Rank... *Private*
4. Regt. No. *40.90*
5. Address in full to which future payments of gratuity are to be forwarded. *3 Beaver Ave Toronto Canada*
6. Date of enlistment in the Regiment. *Nov 8 - 1917*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.
Mrs Wm Lush
8. Relationship of such dependents... *my mother*
9. Address in full of such dependent... *3 Beaver Ave Toronto Canada*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? .. ~~Yes~~ *No*
11. Were you on active service only in Nfld. If so, give dates, and particulars of such service... *December arrived in Scotland then to Whitcher was sick with diphtheria & sent back*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *5 months*

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

..... *only ~~two~~ one*

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. *\$40.45*

..... *of my Discharge Paid by J. M. Hooley, Capt. Officer's Records*

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

..... *no*

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

..... *no*

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 service with Imperial Forces*

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

..... *no*

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

..... *not applicable*

19. Are you now serving in the Regt.?

..... *no*

If not give:- (a) Date of discharge. *April 4, 1918*

..... (b) Reason for discharge. *medically*

..... *"Medically Unfit"*

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

..... *no*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.

..... *no*

(b) If so, are you in receipt of full pay and allowances from that Committee?

..... *not applicable*

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:

George X Lush
Mark John G. Rowan, Witness
3 Beaver ave Toronto Can

Place of Residence:

Declared before me at:

Toronto

This

14th day of *April* 19*19*

Deed of Trust

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
11.11.1918		<i>9/8 W.M.B.</i>		

Certified Correct.

Pryster.

Signature of Applicant:
Place of Residence:
Declared before me at:
This

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

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Signature of Applicant:
Place of Residence:
Declared before me at:
This

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

April 5th., 1919

#490 Pte. George Lush,

#1198 Dovercourt Road,

Toronto, Ont. .

Dear Sir:-

Referring to your application for "War Service Gratuity," I beg to state that you are not entitled to same, as you have not served in the Royal Newfoundland Regiment Twelve months (12), and you have not been Overseas."

Yours truly,

Capt.
Paymaster & U.i/c Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name..... *George*..... 2. Surname..... *Rush*.....

3. Rank..... *Pte*..... 4. Reg't. No. *490*.....

5. Address in full to which future payments of gratuity are to ~~for~~ be forwarded... *1198 Flowercourt Rd. Toronto. Ont.*.....

6. Date of enlistment in the Regiment... *Nov. 1917*.....

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

..... *Mrs. Martha Rush*.....

8. Relationship of such dependents..... *Mother*.....

9. Address in full of such dependent... *1198 Flowercourt Rd.*.....

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

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service... *Yes - in England - Dec. 1917 -*

March 1918.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *From Dec. 1917 to Apr. 1918*.....

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?.....

Yes

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

Yes

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

Yes

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

Yes

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

No

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

Apr. 1918

No

(b) Reason for discharge.....

Medically unfit

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

No - in England

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?

No

(b). If so, are you in receipt of full pay and allowances from that Committee?.....

No

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

Signature of Applicant: *George Ruske + his mark*
 Place of Residence: *1198 Clovercroft Rd. West. E. London*
 Declared before me at: *Windsor* *Toronto*
 This *twentieth* day of *March* 19.19

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

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>Nil</i>
.....
.....

Certified Correct. Paymaster.

No 3805



1ST. NEWFOUNDLAND REGIMENT.

ALLOTMENTS

I, Geo. Lusk, Regl. No. 4090
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 _____ Dollars and Seventy 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 Dec 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
327	mother	Mrs Mrs (Martha) Lusk	38 Water St West	70
Total Allotment, \$				70

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
St Johns
Nov 24th 1917

(Sig.) Geo Lusk
 (Rank) Pte

(Separation Allowance Branch.)

Notice.

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply, must be given to each question.

Each statement is considered as being made on Oath and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace, and returned to.

THE PAYMASTER
Separation Allowance Branch,
St. John's Nfld.

1b. Name in full of Soldier. Rank Reg't. or Unit Reg't. No.
George Lush Private 1st N. F. Hd. 4090

2. Age of Soldier Married or Single.
22 Single

3. Name in full of Mother Age Occupation Permanent Address.
Mary Lush 56 — 33 Wake St. West.

4. Give name of your husband. Age Occupation Where employed.
Dead — — —

5. If your husband is not supporting you state the reason.
Dead

6. If your husband is a chronic invalid and totally incapacitated state nature of malady. (A medical certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue)

7. If you are a widow, state date and place of death of your husband. *April 30th 1904*
Killed at Sydney N.S.

8. Have you married again since death of above mentioned husband?
No

9. Names of your other Children Address in Full. Age. Occupation Married or Single.
*Alexander Lush 33 Wake St. W. 25 { Unable to work continuously } Single
Solomon Lush ditto 18 Epileptic Single*

J.P.H.

(2)

10. State amount earned by (a) yourself (b) Your husband (a) ~~No work~~ (b) ~~Dead~~
11. State amount and source of any other income. Widows Pay 3⁰⁰ P^r Month
12. State value of Real Property belonging to you and your husband. None
13. State value of personal property belonging to you and your husband. None
14. If husband is dead state value of Real and personal Property left by him. None
15. Actual amount contributed by soldier during the year prior to enlistment. None \$ 350⁰⁰ work irregular.
16. Was this amount contributed weekly or monthly. Weekly
17. Did this amount include payment of son's Board etc. Yes.
18. State your son's trade or occupation prior to enlistment. Longshoreman
19. State amount of his wages per week. Irregular, sometimes as high as \$14⁰⁰
20. State name and address of his last employer. No. Permanent Employee
21. State amount of support monthly from son since enlistment. Rec'd \$ 30⁰⁰ including his Board
22. State amount of allotment received by you from son monthly. No amt. Yet rec'd. - Son has just gone overseas. Has allotted \$ 24⁰⁰ P^r Month
23. From what date did you receive Allotment?
24. Actual amount contributed by other children } Weekly Monthly. Nothing. Nothing.
25. Are any of these children in the employ of you or husband? No
26. If not receiving support from other children state cause. Explain fully. One is an Epileptic and cannot work, the other is almost no good.
27. With whom are you residing at present. Living at home # 33 1/2 St. W.
28. Have you made a previous claim for Separation Allowance? If not, Why? Give particulars. No. Son has just gone overseas
29. Are you already in receipt of Separation Allowance from any source? If so, how much? No

30. Are you in receipt of any payment from any Patriotic Fund? If so, How much.

No

31. Was the Soldier at time of his enlistment an employee of the Newfoundland Government.

No

32. In what capacity and in what place.

33. Is he in receipt of a salary as much while serving in the 1st. Nfld. Regt. If so, how much? No

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in virtue of the Evidence Act.

Signature of Applicant..... *Martha X. Leah*

Place of Residence *33. Kelly St. West*

Declared and subscribed before me at..... *St. Johns, Nfld.*

this *14th* day of *December* 191*7*
Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. *J. M. [Signature]*
Barrister at Law

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation, the above statements are correct, and the above Soldier, first mentioned, is the ~~sole~~ *main* support of the applicant.

Signature of Clergyman *Norman M. Gump*

Signature of Member of Patriotic Fund Committee. *[Signature]*

approved 15/1/18

[Handwritten signatures]

MEDICAL Certificates.

(For information of Separation Allowance Department.)

Alex. Lusk

1. Name and regimental number of soldier in respect of whom Separation Allowance is claimed. } Geo Lusk

2. Name and age of ~~father~~ }
of said soldier. *brother* } Alex. Lusk

3. Is said ~~father~~ a chronic }
invalid and totally }
incapacitated? } Yes

4. Of what nature is disability? } Idiot, insanity (has been in asylum)

5. From what has this total }
incapacity been existent? } Always

6. How long is total incapacity }
likely to continue, and what }
will be effect of his earning }
power? } Always

7. If not totally incapacitated }
by what percent in your opinion }
is capacity for work reduced }
and from what date? } —

8. Are you the regular attending }
physician? } Yes

9. Relationship to soldier of }
applicant? } Brother

I certify that the above statements are correct.

M. M. M. M. M.
.....
Physician

S. J. J. J. J.
.....
Place

Dec 14. 1917
.....
Date.

Solomon Lusk

MEDICAL Certificates.

SECTION

(For information of Separation

Allowance Department.)

1. Name and regimental number)
of soldier in respect of) *Geo. Lusk.*
whom Separation Allowance)
is claimed.)

2. Name and age of ~~father~~)
of said soldier. *brother*) *Sol. Lusk. 18 yrs*
brother)

3. Is said ~~father~~ a chronic)
invalid and totally) *Yes.*
incapacitated?)

4. Of what nature is disability?) *Dist.*

5. From what has this total)
incapacity been existent?) *Always*

6. How long is total incapacity)
likely to continue, and what) *Always*
will be effect of his earning)
power.?)

7. If not totally incapacitated)
by what percent in your opinion)
is capacity for work reduced)
and from what date?) *—*

8. Are you the regular attending)
physician?) *Yes.*

9. Relationship to soldier of)
applicant?) *Brother*

I certify that the above statements are correct.

[Signature]
.....
Physician

S. John Held
.....Place

Dec 14 1917
.....Date.

4719

3 Beaver Ave., Toronto, Ont.
April 14th, 1919.

Paymaster & O.C. i/c Records,
St. Johns, NFLD.

Sir,-

In reply to your letter of the
5th inst., relative to my War Service Gratuity,
I have to advise that I enlisted in the Royal
Newfoundland Regiment on the 8th of November, 1917,
and proceeded overseas about one month later.

I was taken ill in Scotland and
entered Hospital, and was discharged the
13th April, 1918, being no longer physically
fit for war service.

I am enclosing herewith declaration
duly completed as requested in your letter of the
28th February, 1919. I would respectfully point
out that my regimental number as referred to in
your letter is incorrect, the correct number being
4090, please.

Signed -

his
George X Lush
mark
John C Rowke
witness

Eden

St. John's,

MAR 25 1918

(Date)

1st Newfoundland Regiment

BILLETING ACCOUNT

To *M^{rs}. Lush*

Billeting soldiers as undermentioned

from *Mar 25th / 18* to *Mar 29th / 18*

4090. Pte. G. Lush. 3 00

3 days 1 meal.

5297

ACCOUNT	<i>R. M. Messing</i>
CH. NO.	<i>5297</i>
<i>[Signature]</i>	

Certified correct for \$ *3.00*

R. M.

[Signature]

Paid
Solomon X Lush
Mar 30

Billeting Officer

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 42 ⁴⁰/₁₀₀

Apr 15th 1918

Received from the First Newfoundland Regiment
the sum of Forty two ⁴⁰/₁₀₀ Dollars.
~~on account~~ of Pay when discharged.
balance ⁷⁵

Ch. No. <u>562</u>	Initials <u>[Signature]</u>
Pay Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>
Gen. Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>

Regtl. No. [Signature]

No. 4090

Rank. Pte

Name G. Lush

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.⁰⁰/₁₀₀

Apr 8th - 19¹⁸

Received from the First Newfoundland Regiment
the sum of Ten ⁰⁰/₁₀₀ Dollars.
on account of Pay.
balance

for
Pte L. X. Lush
mark.

Ch. No.	5465	Initials	EW
Pay Ledger	100	Initials	EW
Gen. Ledger	100	Initials	EW

Regtl. No. _____ Rank _____

EW

No. 4090

Rank Pte

Name G Lush

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15⁰⁰/₁₀₀

Mar. 25th 1918

Received from the First Newfoundland Regiment
the sum of Fifteen ⁰⁰/₁₀₀ Dollars.
on account of Pay.
balance

Pte ^{his} Lush
mark

Ch. No. 5101	Initials...
Pay Ledger <i>[Signature]</i>	Initials <i>[Signature]</i>
Gen. Ledger...	Initials <i>[Signature]</i>

Regtl. No. Rank

[Handwritten initials]

No. 4090

Rank Pte

Name G. Lush

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 15

1921.

The accompanying ~~Victory Medal~~ ~~and~~ British War Medal

is/are forwarded herewith to

George Lush

in respect of his service as No. 4090 Rank Pte.

Name G. Lush

Royal Nfld. Regt.

Nfld. Fusiliers

Receipt of the same should be acknowledged hereon.

Received

Wm. A. O'R.

Signature

George + Lush
^{his}

mark Joseph
^{witness}

Date

Oct 22/21

Address

10 Cabot St. City

[P.T.O.]

COPY

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
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Forms
B. 121.
41.

Regiment of

St Leonards

Number of Sheet

One

Signature of O. C. Company

Edley

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	<i>4090</i>	Age on	<i>22</i> years <i>3</i> months	Trade			
Joined _____ Date _____		Place and Date of Enlistment		Religion			
Joined _____ Date _____		<i>St Johns</i> <i>18-11-17</i>		Religion			
Joined _____ Date _____				Religion			
Joined _____ Date _____		Period of					

FORWARDED TO THE REGIMENT

14 FEB 1918

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>Discharged Medically Unfit</i>					
					<i>St. Johns, 13/18</i>				

To be carried over

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

1st Newfoundland

Number of Sheet

ONE

Signature of O. C. Company

W. B. [Signature]

Regimental Number and Name		Enlistment		Trade
No.	<i>4090 Lusk Geo.</i>	Age on	<i>22</i> years <i>3</i> months	<i>Fisherman</i>
Joined	Date	Place and Date of Enlistment	<i>St. Johns</i> <i>8-11-17</i>	Religion
Joined	Date			<i>Meth.</i>
Joined	Date	Period of	with Colours years.	Place of Birth
Joined	Date			with Reserve years.

Good Conduct Badges, Service pay or proficiency pay

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
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. No. <i>2911/12</i> DATED, <i>22 FEB 1918</i> </div>									

To be carried over

8 4090
March. 1st. 1918.

From Officer Commanding,
Depot.

To Paymaster and Officer i/c Records,
Department of Militia.

989 Pte. Rowe, C.
4090 Pte. Lush, G.
4188 Pte. Hopkins, E.
2300 Pte. Ryan, J.
1349 Pte. Cummins, F.

Marginally noted men were recommended for
Discharge as permanently unfit by Medical Board held on
March 30th. 1918.

I am sending them herewith for your attention
and necessary action, please.

2 4090

April. 1st. 1918.

From Officer Commanding,
Depot.

To Paymaster and Officer i/c Records,
Department of Militia.

989 Pte. Rowe, C.
4090 Pte. Lush, G.
4188 Pte. Hopkins, E.
2300 Pte. Ryan, J.
1349 Pte. Cummins, F.

Marginally noted men were recommended for
Discharge as permanently unfit by Medical Board held on
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