



FIRST NEWFOUNDLAND REGIMENT

4094

ATTESTATION OF

No. 4094 Name Louis G. Bedford Corps Inf

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Louis G. Bedford
2. What is your full Address? 2. Little Bay Island, N.S.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 23 Years 2 Months
5. What is your Trade or Calling? 5. Black
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. { 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, Louis G. Bedford 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.

Louis G. Bedford SIGNATURE OF RECRUIT.

Robert [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Louis G. Bedford 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 Little Bay Island on this 10th day of Nov 1917.

Signature of Attesting Officer J. J. O'Keefe

† 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 10 1917 1917 J. J. O'Keefe Approving Officer.

Place Little Bay Island

† 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 Loewis G. Ouford
 Apparent age 23 years 2 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Ouford
Little Bay Islands | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards United Kingdom reckons from <u>10-11-17</u>									
Joined <u>1st Gren's</u> on <u>November 10/17</u>									
<u>Discharged</u> <u>July 12/19</u>									
<u>Embarked St. John's N. West Indies 11-12-17</u>									
<u>Admitted Magdalene Camp Hospital Winchester</u>									
<u>Transferred to Healds Camp Salsburgh 22/18</u>									
<u>Embarked for St. J. 20-1-18</u>									
<u>Joined 13th Regt 5-1-19</u>									
<u>Left for Germany 14-1-19</u>									
<u>Discharged 10-3-19</u>									
<u>Transferred from Queen 22/19</u>									
<u>Arrives Winchester 20-4-19</u>									
<u>to be informant for demobilization 22-5-19</u>									
<u>Arrives Hftl. 1-6-19</u>									
<u>No Active Service! Demobilization 1st Gren's 12-7-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 12-7-19 (date of discharge) 1 years 245 days
 " " Pensions " " " " " " " " " " " "

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

MEDICAL HISTORY

Surname Oxford Christian Name Lewis P.

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John Bay Islands, D. B. County St. John

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	9th day of Nov 1917	St. John	day of	191
Declared Age	20 years 2 days		years	days
Trade or Occupation	Clerk			
Height	5 feet 7 inches		feet	inches
Weight	114 lbs.		lbs.	lbs.
Chest Measurement	Girth when fully expanded...	36 inches		inches
	Range of Expansion..	3 inches		inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arms	✓		
	Number			
When Vaccinated				
Vision	R.E.—V=	6/10	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	Lammie Paterson			
(Rank)	Major			
	Medical Officer.		Medical Officer.	
Enlisted	at	St. John	at	
	on	9th day of Nov 1917	on	day of 191
Joined on Enlistment	Corps.		Corps.	Regtl. No.
Transferred to	1st Regt.	4094		
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				
Horsley Camp	2	3	18	12	4	18	Appendicitis	42	acute appendicitis & peritonitis abdomen full of pus jaundiced appendix tied drainage tube inserted & appendix removed 2000 grs. pus taken put into peritoneal cavity. wound nearly healed	H. J. Brown
			14	18	22	5	do	41	wound healed up very slowly after admission but patient very debilitated has improved but is still anaemic & below par. Transferred to Wash. Camp Salted. to recuperate	P. M. Quade Temp Capt R. M. C.
151st Cav. Hosp. Old Barracks, Camp	22	5	18	8	AUG	1918	- do -	79	Patient a little stronger. Remains very pale. Chest no definite physical signs. Weight has very slightly decreased in last month. To Duty	A. K. Miller Capt R. A. M. O.



Reg. No. 409d Rank Pl Name Oxford L.G.
Attested 10-11-17 Address Little Bay Island N.P. Bay.
Allotment 50⁴ Allotee Mr John Henry Oxford Mathe
Date of Allotment 16-12-17 Returned from Overseas _____
Embarked for Overseas 11-12-17 Cause _____

A.L. 16-11-17 to 26-11-17 Reta 30-11-17
Vac 29-11-17 Junior 1st 6-12-17

C.R. 4094

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's, July 16th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 12-7-19

4094 Pte. Lewis Oxford.

C.R. 4094

Extract from Daily Orders Part II Unit The Royal Welch
Regt. St. John's, June 19th, 1919.

The discharge of the undersigned on demobilization has been
APPROVED BY C.O. Discharge Depot with effect from 12-6-19.

4094 Pte. Lewis Oxford.

C.R. 4094

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

Date June 18th 1919.

4094, Pte. L. Oxford:

Reported at Headquarters 1/6/19.

RE "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4094

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

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

#4094 Pte. L. Okford.

C.R. 4094.

Extract of War Office List, No. H.A. 34118.

Admitted to 7 General Hospl., Wimereux, 14th Jan.'19.

#4094 Pte. L. Oxford.

V.D.G. Mild.

C.R. 4094

Extract from Nominal Roll of Draft No. 56, from the
2nd., Battalion of the Newfoundland Regiment to the
1st., Battalion P. E. F. Embarked Southampton 23/11/18.

#4094 Pte. *W. Oxford*
~~L. G. Murphy.~~

C.R. 4094

Exracy from Casualties recieved from P. & R. O. London
dated 14th August 1918.

#4094 Pte. L. J. Oxford.

Officer Commanding Military Conv. Hospital Crownhill Barracks
reports 9/8/18 is being discharged from Hospital 9/8-18.

C.R. 4094

EXTRACT OF CASUALTY RECEIVED FROM LONDON OAY & RECORD

OFFICE DATED: 27/5/18

No. 4094, Private L.G .Oxford trans. from
Magdalen Camp Hospital Winchester to Military Convalescent
Hospital, Wearde Camp, Saltash on 22/5/18

C.R!

4094

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., St. John's, Nov. 10th, 1917.

4094 Pts. L.G. Oxford.

Attested for General Service with the Nfld. Regt. with
effect from Nov. 10th, 1917.

8

C.R. 4094

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

#4094 PTE. L. OXFORD.

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

C.R. 4094



INFANTRY RECORD OFFICE - H A N T E L L

LIST NO H.A.35411

34298 Pte. Gillman J. 1/10th(Lab Co. Def. Vision Mld. Adm. 83 Gen. H. Boulogne 10 Mar. 19.
 36252 Pte. Spitzer H. 7/ -do- -do- -do- Adm. 83 Gen. H. Boulogne 10 Mar. 19.
 38057 Pte. Rittmeyer G.W. 7/ -do- -do- -do- Adm. 83 Gen. H. Boulogne 10 Mar. 19.

INFANTRY RECORD OFFICE - LICHFIELD (PART 2)

LIST NO H.A.35411

39703 Pte. Cayless J. 11/Leicesters. Influenza Mld. Adm. 83 Gen. H. Boulogne 9 Mar. 19.
 43256 Pte. Nash J. 13/W. Staffs. att. -do- Dis. to Duty ex 83 Gen. H. Boulogne 9 Mar. 19.
 MFP. Boulogne.

LONDON INFANTRY RECORD OFFICE - LONDON E.C.

LIST NO H.A.35411

22341 Pte. Fitzwalters T. 13/K.R.R. V.D.E. Dis. to APM. Boulogne ex 7 Gen. H. 10 Mar. 19.
 101664 Pte. Rogers E. 43/R. Fus. V.D.G. Dis. to APM. Boulogne ex 7 Gen. H. 10 Mar. 19.
 375190 Pte. Davey J. 2/17 Londons. Bronchitis Md. Adm. 83 Gen. H. Boulogne 9 Mar. 19.

L I N C H E S T E R - RECORD OFFICE

LIST NO H.A.35411

22341 Pte. Fitzwalters T. 13/K.R.R. V.D.G. Dis. to APM Boulogne ex 7 Gen. H. 10 Mar. 19.
 375190 Pte. Davey J. 2/17 Londons. Bronchitis Md. Adm. 83 Gen. H. Boulogne 9 Mar. 19.

NEWFOUNDLAND EXPEDITIONARY FORCE

LIST NO H.A.35411

4094 Pte. Oxford L. 1/R. Newfldrs. V.D.G. Dis. to Base Details Ambleteuse ex 7 Gen. H. 10 Mar. 19

315A

4094

L. G. Oxford

C.R. 4094

P. & R. O.

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

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

1. Unit and Corps *Royal Newfoundland*
2. Regtl. No. *409th* 3. Rank. *Pte*
4. Name *Joseph L.*
(Surname) (Christian Names)
5. Age last birthday *26*
6. Posted for duty on *2.17* at *St John*
 in category (or grade).....
7. Former Trade or Occupation } *Clerk*
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ; with Regtl. Nos.
 (b) Date of Discharge ;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (b) Where
 (c) Opinion of Court

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

Statement of Case.

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

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

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. } | | |

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

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

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

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

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

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

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

20. Do you recommend—
 (a) Discharge as permanently unfit?
 (b) Change to United Kingdom?

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

Repatriation

Station *Hazeley Camp*
 Date *29. 4. 19.*

Capt. Rams
 Medical Officer in charge of case.

* 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

To John Oxford

278

Little Bay Islands

Notre Dame Bay

Newfoundland

Cable nine pounds through

Melita.

494. Pt. L. Oxford

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

Sir:-

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

Commencing on 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
4094	Pte	D. G. Dyford. L.	\$2.50	

I have the honour to be, Sir,
~~Yours faithfully,~~
Your obedient servant.

Date

June 26/18

L. G. Dyford

No. 6406/936

099287

N.F.P. / 70.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2nd Batt. Ryl. Nfld. Regiment
Winchester

29th April 191 9

191

4094 Pte. L.G. Oxford

With reference to the follow-
ing telegram from the Minister of
Militia / / (154)

"Pay to 4094 L.G. Oxford
£9. 1. 0.

Cheque £. 1..0. is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

H.A. [Signature]

Chief Paymaster & O. i/c Records.

Receipt hereunder.

Williams [Signature] & Adjutant
Officer Commdg. Batt'n.

Received the sum of nine
pounds one shilling in respect of
telegraphic remittance from the
Minister of Militia.

L. G. Oxford

No 4094 of Rank Pte

Witness *[Signature]*

No. 16117/1733

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2nd. Bn. Royal Nfld. Rgt.,
Winchester.

October 7th, 1918

Subject: 4094, Pte. L.G. Oxford,

With reference to the following telegram (8580) from the Hon. Minister of Militia, received

"Pay to 4094, Pte. L.G. Oxford, £8.4.0."

Draft £8.4.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

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

Oct 9 1918

Receipt hereunder.

Received major for **LIEUT. COLONEL,**
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Comdg. *2nd* Batt'n
Royal Newfoundland Regiment

Received the sum of Eight Pounds
Seven Shillings on account of
cable remittance from Newfoundland.

L. G. Oxford

No. 4094 Rank Pte.

Witness: *J. Murphy Pte.*

FORM K

Nº 4494



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, L. H. Oxford, Regl. No. 4094

hereby agree, until further notification by me, and in similar official form to make an Allotment of 50 Dollars and 00 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 December 16th 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3208	Wife	Mrs. Howard Oxford	St. John's	50
			Lt. Capt. H. A. D.	
			Total Allotment, \$	50

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.) Howard 2/5
Officer Commanding
Company
Dec 8
1917

(S) L. H. Oxford
(Rank) Private

FORM K

N^o 4494



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, L. G. Oxford, Regl. No. 4094

hereby agree, until further notification by me, and in similar official form to make an Allotment of 50 Dollars and 00 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 December 16 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3408	Wife	Mrs John May Oxford	Lill Rapids	50
Total Allotment, \$				50

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
M. John SA Company
Dec 8 1917

(S) L. G. Oxford
 (Rank) *(Signature)*

No. 4094 Name Dixford, L. Sqn., Batty., or Company } D. Corp. P. Newfoundland Date of enlistment } 9/11/17 G.C. Badges } Service or Proficiency Pay } 8
 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. } W. L. Capt. Character Good
 Company, etc. }

Army Form B. 122.

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
<u>Field</u>	<u>8-4-19</u>	<u>Pvt</u>		<u>deprived of shoulder titles 1/2</u>	<u>Camp & Co.</u>		<u>8-5-19</u>	<u>Maj. E. ...</u>	

Oxford, L

4094

May sept.

July 22, 1919

#4094 Pte. Lewis Oxford,

Little Bay Islands.

Dear Sir :-

Please find enclosed Discharge Certificate #2988.

Yours truly

Capt.
Paymaster & O.i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4094 Rank Pvt. Name L. Oxford Lewis
 Intended place of residence Little Bay Falls

2. Occupation blank
 Classification of soldier E Medical Category A 1

3. The above named man is discharged in consequence of **DEMORILIZATION.**

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date JUN 14 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 and date ST. JOHN'S
JUN 14 1919
 Signature of soldier L. Oxford
 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 and Date ST. JOHN'S
JUN 14 1919
 Signature of soldier L. Oxford
 Signature of witness James O'Brien

STATEMENT OF SERVICE

7. Enlisted for service 9-11-17 No of days on Military
 Discharged from service 28-6-19 plus 14 days Service 611

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
 Date JUN 28 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 Nfld.
 Date July 12/1919
 Officer in Charge of Records
 The Royal Newfoundland Regiment

A. J. Brogan 7/29/1919

The Royal Newfoundland Regiment

Class for Demobilization: —

86.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

13.6.19

Regimental No *4094*

Name *Oxford* *Lutis. 9.* Rank

Address *Little Long Islands.*

Present Medical Category

A1

Recommended for: —

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R.H. East Capt

O.C. Discharge Depot.

Robinson

Senior Medical Officer

Swinden

M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4094 Rank Plt Name Clifford Lewis
 Date of Enlistment 9-11-17 Address Fuller Bay Sts District Gate
 Occupation Clerk Classification for Discharge A Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med	D. F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 14-6-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

L. Dufford

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$165.00

(b) Clothing Supplied _____

[Signature]

Date 14-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 8731 to his home at Little Bay Island and Release Certificate No. 2789 issued.

Date

14-6-19

J.A. Brown left
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

Date

14-6-19

12-6-19
H. M. News
Depot Paymaster.

Discharged approved for

28-6-19

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

N.F. 136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date

14-6-19

J.A. Brown left
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

JUN 28 1919

R.H. Sait Capt.
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former Occupation.

Signature of Man. *L. Oxford*

Reg. No. *4094*

J. P. Snowcraft
Signature of the Vocational Officer or his Representative.

Place *at Johns*

Date *14-6-29*

191



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 George Offord*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4094*

Intended address *Little Bay Islands.*

Height on discharge *5* Feet *7*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks *scar of Appendicitis*

Figure on discharge *medium*

Christian name of Father *John*

Christian name of Mother *Mary*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Little Bay Islands, Sept 11, 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) *Lewis George Offord* *Pte*

(Rank)

Station **ST. JOHN'S.**

Date *13. 6. 19*

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

Station _____

Date _____



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

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

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Clerk*
2. Regtl. No. *4094* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Oxford* *L.* (a) Former Regts. or Corps ; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday *25*
6. Posted for duty on *9/14/17* at *St. John's* in category (or grade).....
8. If the disability is an injury was it caused
- (a) in action (b) on field service
- (c) on duty (d) off duty? (b) Date of Discharge ;
9. If a Court of Inquiry was held on an injury state :— (c) Cause of Discharge.
- (a) When (d) Particulars of Pension or Gratuity (if any)
- (b) Where
- (c) Opinion of Court

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
- Appendix*

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

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

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

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

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

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

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

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

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Repatriation

Station *Weyley Down*

Date *29/4/19..*

Capt Ranc
Medical Officer in charge of case.

* 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

Casualty Form - Active Service.

Regiment or Corps 1st Royal Newfoundland
 Rank Pte Surname Oxford Christian Name Leo S.
 Religion Methodist Age on Enlistment 23 years 2 months
 Enlisted (a) 10.11.17 Terms of Service (a) Duration Service reckons from (a) 10.11.17
 Date of promotion to present rank: Date of appointment to lance rank:
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate
 Occupation Clerk Signature of Officer J. M. Cunningham

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			
		Disembarked	<u>28 NOV 1918</u>		
		Joined Batt.		<u>JAN 1919</u>	
<u>21.1.19</u>	<u>Platoon</u>	<u>Adm. Gonorehea</u>	<u>Sold.</u>	<u>9.1.19</u>	<u>D. 1499</u>
	<u>36 Coy</u>	<u>a.</u>	<u>a.</u>	<u>9.1.19</u>	<u>D. 1501</u>
	<u>7 Coy</u>		<u>Wauirua</u>	<u>4/1/19</u>	<u>A.A. 3411 D</u>
		<u>Admitted Sep. 9/1/19</u>			<u>B. 213</u>
		<u>Discharged Sep.</u>		<u>14/3/19</u>	<u>803</u>
		<u>Arrived in UK</u>		<u>9/3/19</u>	

Smt
Next of Kin

(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.

Father: John Oxford Little Bay Islands Nfld

The Royal Nfld. Regiment

DEMOBILIZATION

No. *H094* Rank

Name *Cyford L*

Warned for demobilization on

JUN 14 19

July, 12, 1919

#4094 Pte Lewis Oxford,

Little Bay Islands.

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 & O.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 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 *J. Lewis* 2. Surname *Offord*
3. Rank *Pte* 4. Regtl. No. *4094*
5. Address in full to which future payments of gratuity are to be forwarded *Little Bay Islands, N.B.*
6. Date of enlistment in the Regiment *Nov. 9/17*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.
8. Relationship of such dependents.
9. Address in full of such dependents.
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier.
11. Were you on active service only in 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. *From Nov. 9/17 to June 14/19* 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.

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*

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?

19. Are you now serving in the Regt.? *No* If not give - (a) date of discharge, *since 1.4.19* (b) Reason for discharge

Temporary 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 - From Feb 1918 to April 1919

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee. *No*

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

Lewis Offord

Signature of Applicant:

Place of Residence: Little Bay Islands, N.B.A.

Declared before me at: St. John's, Nfld.

This 14th day of June 1919.

John M. Caghey

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

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

July 8 1920

Major Howley
O. I. C. Records

Please pay to L. Oxford, 4094
the sum of sixty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$60.00

Pension Nil

ACCOUNT		
CHK. NO.	411	INITIALS <i>[Handwritten Signature]</i>
INL. LEDGER...		INITIALS
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS <i>[Handwritten Signature]</i>

[Handwritten Signature]
C. J. B.

[Handwritten Signature]
W. W. Mackall
Vocational Officer

[Handwritten Signature]
L. Oxford

ST. JOHN'S, June 23rd 1919

Royal Newfoundland Regiment.

Billeting Account,

To Mr. A. Shaw
Shaws Lane

Billeting Soldiers as undermentioned

from June 1st 1919 to June 20th 1919

4094 - Mr. L. Bedford 21 00

ACCOUNT	<u>BVM</u>
CH NO	<u>24758</u>
IND LEDGER	INITIALS
PAY LEDGER	INITIALS
CERT LEDGER	<u>00</u>

Certified correct for \$

A. J. M. Blenkins

R. J.

Billeting Officer.

A. Shaw



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

L.H. Bay

OCT 20 1921

1921.

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

is/are forwarded herewith to

Lewis G. Oxford

in respect of his service as No. 4094 Rank Pte.

Name L.G. Oxford Royal Nfld. Regt.
~~Nfld. Forestry Corps~~

Receipt of the same should be acknowledged hereon.

Received British War Medal

Signature L. G. Oxford

Date Dec. 14, 1921

Address Mahone, N.S.

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

1st Newfoundland

Number of Soldiers

0

Signature of O. C. Company

W. A. G. P.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>4094. Oxford Co. 2^d</i>	Age on	<i>23</i> years <i>2</i> months	<i>Clerk</i>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<i>St. John's</i> <i>10-11-17</i>	<i>Meth</i>	
Joined		Date	Period of	Place of Birth	
Joined	Date	with Colours	<i>245</i> years.		
		with Reserve	<i>365</i> years.		

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>Demobilized St. John's, 12/79.</i>					

To be carried over

The Royal Newfoundland Regiment

4094

DEMOBILIZATION OF

Reg. No. 4094 Rank Plt Name Walter Lewis
 Date of Enlistment 9-11-17 Address 7-11-17 District Gate
 Occupation Clerk 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
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 14-6-19

[Signature]
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

L. Offord

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$65.00

(b) ~~Clothing Supplied~~

[Signature]

Date 14-6-19

i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 8731 to his home at Little Bay 22nd and Release Certificate No. 2789 issued.

Date 14-6-19

J.A. Snowlett
Demobilization Officer

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 14-6-19

Date 14-6-19

J.A. Snowlett
Depot Paymaster.

Discharge approved for 28-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	B 268	B 121	<input checked="" type="checkbox"/>	N.F. Med	D.F. 1	<input checked="" type="checkbox"/>	
B 178	W 3494	B 122	<input checked="" type="checkbox"/>	Board 1st	" 2	<input checked="" type="checkbox"/>	
B 178a	D 400A	B 1915	<input checked="" type="checkbox"/>	do 2nd	" 3	<input checked="" type="checkbox"/>	2 Form B
B 179	D 400B	Form L		do 3rd	" 4		
B 179a	D 400C	Form K		do 4th	" 5		
B 179b	B 103	ME 2			" 6		
B179c	B 120	M 93					

Date 14-6-19

J.A. Snowlett
O. C. Discharge Depot.

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 JUN 28 1919

R.H. Sait Capt.

O. C. Discharge Depot.

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

Date July 10 19

Handwritten signature for records

Reg. No. *4094* Rank *Pfc* Name *Joseph H.*

Attested Address *Little Bay Islands.*

Allotment Allottee

Date of Allotment Returned from Overseas *29. 1. 19.*

Returned on S.S. *Consuean* Cause *Discharge*

14. 6. 19

PASSED TO DEMOBILIZATION OFFICE

29. 6. 19

DISCHARGE APPROVED ON DEMOBILIZATION

NEWFOUNDLAND POSTAL TELEGRAPHS



Cable Connection with all the World

All messages sent are subject to the following conditions :

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

In case the Telegram shall never reach its destination by reason of any neglect or default of the Minister of Posts and Telegraphs or his Servants whilst the Telegram remains under the control of the Minister of Posts and Telegraphs, he will refund the amount paid by the Sender for such Telegram.

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____

Address _____

LINE NUMBER	RCD	BY	SENT	BY	CHECK

DATED

Oct. 31st., 1921.

TO

4094 Expts. L.G. Oxford

Little Bay Islands.

Return by Registered Post Medal forwarded you in error.

Yours at this office.

Rush.

DEPT. OF MILITIA.

Chg. Dept. of Militia.

FOR TYPEWRITER