



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3150

Name Lewis Pelgrim

Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Lewis Pelgrim</u> |
| 2. What is your full Address? | 2. <u>St. Anthony Beach</u>
<u>French Cove</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

FOR THE DURATION OF THE WAR

Lewis Pelgrim 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.

Lewis Pelgrim SIGNATURE OF RECRUIT.

A. A. Nakuma Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

Lewis Pelgrim 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 on this 4 day of Oct 1915.

Signature of Attesting Officer

Chas. N. Aye Capt

†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

Place

} Approving Officer.

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

* If so, 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)

3130



FIRST NEWFOUNDLAND REGIMENT

Johnnie

No. *3130*

Name *Lewis Pelgrim*

Corps

Questions to be put to the Recruit before Enlistment

- | | |
|--|--|
| 1. What is your name? | 1. <i>Lewis Pelgrim</i> |
| 2. What is your full Address? | 2. <i>St. Dunstons, Bells
Tranched Stone</i> |
| 3. Are you a British Subject? | 3. <i>yes</i> |
| 4. What is your age? | 4. <i>21</i> Years <i>7</i> Months |
| 5. What is your Trade or Calling? | 5. <i>fisherman</i> |
| 6. Are you Married? | 6. <i>no</i> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <i>no</i> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <i>yes</i> |
| 9. Are you willing to be enlisted for General Service? | 9. <i>yes</i> |
| 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. <i>yes</i> |

I, *Lewis Pelgrim* 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.

Lewis Pelgrim SIGNATURE OF RECRUIT.

Oct 4/16

Ac Noema Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Lewis Pelgrim* 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 *4* day of *Oct* 191*6*

Signature of Attesting Officer *Chas. Aye* *Capt*

† 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*6* } 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:—(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 James P. Pigrin
 Apparent age 21 years 7 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 35 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Rachael Pigrin
1100 1/2 Broadway Bldg. St. Louis, Mo. | 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 <u>4-10-16</u>									
Joined at <u>St John's</u> on <u>October 4th 16</u>									
<p><u>Discharged. St John's Dec 2/1918.</u></p> <p><u>Embarked St John's St. George for transit 31-1-17</u> <u>Embarked for B.C. 11</u></p> <p><u>Disembarked France 12-6-17</u> <u>Joined Battalion 2-7-17</u> <u>Admitted 63 Cpl.</u></p> <p><u>Northampton 18-9-17</u> <u>Admitted 12 Gen Hosp. Queen Mary's 20-9-17</u> <u>Transferred to</u></p> <p><u>England 27-9-17</u> <u>Admitted 4 London Gen Hosp. Denmark Hill 1/10</u> <u>1/10 Aug 28-9-17</u></p> <p><u>Further the report by Medical Officer 15-12-17</u> <u>to perform law of discharge 23-12-17</u></p> <p><u>Arrived home 20-1-18.</u></p>									
Total Service forfeited as above.....					<u>Discharged Medically unfit 27-12-18</u>				
Total Service towards Engagement to <u>27-12-18</u> (date of discharge) <u>2</u> years <u>85</u> days									
Pension									



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Lewis Pilgrim

aged 21 yrs. 7 months conducted at L L B.

Date: Oct 4/16 Recruiting Officer:

NO OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 eyes
- 9 no - no
- 10 cv
- 11 cv
- 12 cv
- 13 cv
- 14 cv
- 15 cv
- 16 cv
- 17 cv
- 18 cv
- 19 cv both.
- 20 cv
- 21 cv
- 22 cv
- 23 cv
- 24 cv
- 25 cv
- 26 cv
- 27 cv
- 28 cv
- 29 cv
- 30 cv
- 31 cv
- 32 cv

5 30

33 hear.
 34 5' 8"
 35 145 lbs
 36 35 1/2 - 39
 37 \$250 per six months.

38 Mother Rachel Pilgrim Sergeant Anthony Bright

39 Lu

Signature of Medical Examiner:

Lewis Pilgrim
Leit

E. Pilgum

C.R. 3130

P. 9 *P. 9*

Oct 29th 1917

Pls 2[£]
aw. 29/10/17
Receipt no

4th London General
Hospital
Denmark Hill
London S.E.



Sir,

Please advance me the
sum of two pounds (2 £)
off my account,

I oblige

Yours etc

L. Pilgrim (3130)
1st Newfoundland Regt L. Pilgrim

29/10/17

W. Keenan
A.O.C.

Receipt no
4298

16/11/17

D.K. 200.

Dear Sir

will you kindly forward me £3 from my credit and you will greatly oblige.

Yours faithfully

Pte Lewis Pilgrim

3130 1st Newfoundland Reg^t

17 R.P. Ward

4th London Gen^l Hosp

Denmark Hill

S.E.

W. Knapling

M.O. 7e

16/11/17

To Paymaster Genl

Newfoundland Records Office
58 Victoria Street

Sir

Please pay to Pte Lewis Pilgrim
1st Newfoundland Regt. the sum of
£2. (two pounds sterling)

3130 Pte L. Pilgrim

4th London Genl Hospital
Denmark Hill

27th November 1917.

W. King

N.O. Co.

27/11/17



OK £ 2-0-0

AW. 27/11/17

Recept no 4594

The Paymaster

Pay & Records Office

Newfoundland Regt

58 Victoria St

Please pay to 3130 Pte. Pelyrim
(the sum of £2 two pounds only)

London General Hospital
Denmark Hill

S. S.

10th Dec 1917

O.K. £.2. 1/17
A.C. 10/12/17
R. No 4674

W. King
M.O. 1/c.



No.

Regtl. No. 3130

Rank Pte

Name L. P. Pidgeon

Regiment

Date from 15-12-17 191

to 10 a.m. to 18-12-17 191

To proceed to Lomas

I/c Hospital

Station

Date

Address whilst on furlough to which any orders will be sent.

~~Disposal~~

.....
.....
.....

MEDICAL TRANSFER CERTIFICATE.

Army Book 172.

4th LONDON GENERAL HOSPITAL, R.A.M.C.

(To accompany a Man Transferred from one Hospital to another)

DENMARK HILL, S.E. 5.

Dec. 15 1917

Extract from Admission and Discharge Book of _____

Hospital at _____

Date _____

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME.			Completed Years of		DATES.		Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
				Surname first. If Married, write "M" under name.	Age last birthday.	Service.	Service in the command.	Admitted into Hospital.	Transferred.				
	1st. Newfoundland	a	8 3 0	Pte Pilgrim Lewis	22 22	1 1	6 6	9 9	14 14	Dec. 15 1917		Pulmonary I. B.	Newfoundland Depot. 68 Victoria St.

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

Ex France.
Entitled to leave.

MAJOR, R.A.M.C. (T.)

C. N. Bossie

Registrar, 4th London General Hospital.



Medical Officer in Charge.

MEDICAL CERTIFICATE BOOK.

London: Printed for H. M. Stationery Office by Henry Good & Son, Ltd.

32

Transfer Statement of Clothing and Necessaries.

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

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

Rank and Name) 3130 Pte Pilgrim
10th Newfoundlands.
proceeding from the 4th London General Hospital.

to the 58 Victoria St. S.H.

Date of Enlistment _____ Date of Transfer 15-12-1917.

FOR DETAIL OF ARTICLES, see overleaf.

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

(1) Station Denmark Hill, S.E.

[Signature]
LIEUT. & Q. M. R. A. M. C. T.
4th LONDON GENERAL HOSPITAL.
Commanding Squadron, Battery, &c.

Date 15-12-17.

Name of Unit man is leaving.

(2) Station _____

Commanding Squadron, Battery,
or Company

Date _____

Name of Unit man is joining.

Articles of Clothing & Necessaries in Possession.

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

Clothing.	Necessaries.
Aprons, kilt ..	Badge, cap ..
Boots, ankle, pairs..	Bag, Kit ..
Caps, Service Dress ..	Braces, pairs ..
Caps, Clangarry ..	Brass, Button ..
Drawers, pairs ..	Brush, Brass ..
Frocks, Canvas Blacking ..
Greatcoat, D.M. Clothes ..
Jackets, Service Dress Hair ..
Kilts Polishing ..
Pantaloons, cord, pairs Shaving ..
Pettico, pairs Tooth ..
Spurs, Jack, pairs ..	Cap, Comforter ..
Trousers, Service Dress, pairs	Comb, hair ..
Trousers, Canvas or Khaki	Disc, identity, with cord ..
Drill Overalls, pairs	Fork ..
Waistcoat, cardigan ..	Garters, Highland, pairs ..
Coat, waterproof ..	Holdall ..
Gloves, leather, pairs ..	Hose Tops, pairs ..
Gloves, Motor Cyclist, pairs	Housewife ..
Goggles, pairs ..	Knife, Clasp ..
	Knife, Table ..
	Laces, leather, spare, pairs ..
	Shirts, flannel ..
	Socks, worsted, pairs ..
	Spoon ..
	Tin, metal, pairs ..
	Towels, hand ..
	Wax Polish, tin ..
	<u>Razor</u> ..

I certify that this statement is correct.

Date 15-12-17.

Signature of the Soldier L. Pilgerim

14388/1./O.T.

PAYMASTER & OFFICER I/C RECORDS,
NEWFOUNDLAND CONTINGENT,
88, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

22nd December,

7.

3130, Pte. L. Pilgrim,
1st Newfoundland Regiment.

Overseas Transport.

As you are declared by a Medical Board to be unfit for active service you will be repatriated forthwith.

You will join the repatriation draft and report to the W.O. in charge at 10 a.m. on Sunday 23/12/17, at the Office of the Canadian Pacific Ocean Services, Ltd, Royal Liver Buildings, Liverpool.

Major,

Chief Paymaster & Officer i/c Records.

HA/JC

1914

21

Minister of Militia,
St. John's, Newfoundland,

Error in Statement of Account.

Pay & Record Office, London.

3150 Pte L. Pilgrim

Statement of a/c
dated 22/12/17,
Should show Dr. Bal.
of 2/6
Debit Difference

2 6

2 6

6th February 8

and Credit to Pay & Record Office, London, S. W. 1.

Sent to [unclear] 20/12/17 for discharge 5-46 Concordia Toronto Ont
Jan 6th 1918

To the record and
officer

DEPARTMENT
Reference No. 443
Date Rec'd. FEB 1918
Ack'd.
Ans'd.

Dear Sir

My Brother Mr. B 130

late L. Pelgram of
1st Newfoundland
A Company

BRANCH
ACTED UPON
BY
DATE 12/9/18

B. E. 7

was reported very sick
in France a couple
of months ago since
then I have heard
nothing My brother
came from St Anthony's
Point Newfoundland
and through my Mother
I have heard he was very

2

Sick but since then I
cannot get any word from
my Mother as the Mail
Service seems to be cut-off
now I am very worried
about my brother.
in Sep My Mother received
the following Messages
pte Le Pilgrim Seriously
ill suffering from tuberculosis
since then I have worried
day and night for news
of my brother.
that with worrying
over my own too Boris
who is fighting with the
Canadians my health is
suffering so I appeal to
you to help get some

3

tidings of my brother
let me know just what
there is to be done for
him and where he is
and all there is to
know and oblige
yours truly

Mrs Fred Jewer
546 Concord Ave
Toronto Ont -
Canada
a Newfoundland

No. 3130 Rank Rt Name Belgin

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

M.S. 5/53

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance					Balance	8/7						66
Acquittance Rolls		3	13	4	Pay @ Net Rate	9 ¹² / ₁₇	15 ¹² / ₁₇	190	50	95	00	19 10 5
Hospital Advances		10	0	0								
A.B. 34					Ration allow							
P. & R.O. Payments					15/12 - 18/12/17			4	2/			8 0
					Ration allow			3	4			6 0
					19-12-20 21-12-7			6	50	3	00	12 4 0
					6-11-7	16/12-17	21-12-17					12 4 0
					-19-"							
Cash	1313-4 4757	12/15/17	4	0								
Recd.	4768	18/12/17	2	10								
"	4837	21/12/17	1	0								

21-3-3

FIELD MEDICAL CARD.

No. 3130 Rank Pte
 Name PILGRIM L.
 Unit 1st NFLD

~~Battle Casualty~~ ~~Accidentally Wounded.~~ " Sick "
 (Strike out description which does not apply).

No. of F.A. 89.
 Date of admission, 18 9 17
 F.A. diagnosis

Haemoptysis
phidles
Major RAME
 Additional F.A. Notes to be written on back of card. 89 2A

C.C.S. diagnosis (if altered from above)

Tubercle Lung.

Base Hospital diagnosis (alterations or additional)

Tubercle of lung

A.T. Serum }
 Dose and date } 1st

2nd

FIELD AMBULANCE NOTES

Morphia }
 Dose and time }

Date of wound or }
 onset of illness }

Religion

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S. 63

Date of entry 18/9/47

3 days go before
at 1/2 coffee &
blood. Cough 3
months.

No. of Hospital 15 General Hospital

Date of entry 20-9-17

P.H. Health excellent until 3 mo
ago when cough began, followed
by pain in chest, shortness
breath, loss of weight, night
sweats. Hemoptysis on 13-9-17
Stratus Dim. expansion Lt upper.
Dulness in Lt. suprascapular
region & dim. br. rds + dimin vocal
rh. 13 tubercles found
in sputum

A. M. Cheaney
Lt MRC
USA

B. Satter
W. H. H. Cur

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

3130

C.R.

Extract of Daily Orders, Part II, Depot, St. John's, dated
Jan. 4th 1919.

STRENGTH DECREASES.

3130 Pte. Lewis Pilgrim.

Having been found medically unfit is discharged from ~~27~~ 12-18

C.R. 3130

Extract from Casualties received from pay & Record Office
London dated 24th., Dec. 1918.

Nominal Roll of Repatriation Draft No. 56, due to leave Great
Britain, 23/12/17.

1ST. NEWFOUNDLAND REGIMENT

3130 Pte. L. Pilgrim.

C.R. 3130

Extract from Medical Board held on Friday Dec. 13th., 1918.

3130 Pte. Pilgrám L.

2nd Board. Recommended remain in Jensen Camp and Discharge
from Army as permanently unfit.

C.R. 3130

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. St. John's, dated August 17th, 1918.

3130 Pte. M. Pilgrim.

Granted leave from 17-8-18 to 17-8-18.

C.P. 3130

Extract of Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, Headquarters dated February
11th, 1918.

#3130 Pte. L² Bilgrim

Returned from Overseas and reported to Depot with
effect from 10/1/18.

C.R. 3130

1914

DUPLICATE
MAIL COPY

Minister of Militia,
St. John's, Newfoundland

14 FEB 1918

21

Error in Statement of Account.



Pay & Record Office, London.

3130 Pte L. Pilgrim

Statement of a/c
dated 22/12/17,
Should show Dr. Bal.
of 2/6
Debit Difference

2 6

2 6

6th February 8

and Credit to Pay & Record Office, London, S, W. 1.

C.R. 3130

Extract of Casualties received from Pay & Record
Office, London, dated December 24, 1917.

#3130 Pte. L. Pilgrim. 1st. Mfld. Regt. ✓
from London.

Repatriated in Draft No. 54, / due to leave Great
Britain 23/12/17. Medically Unfir for Active Service.

C.R. 3130

Extract from Casualties from Pay and Record Office, London,
dated 18th. December 1917.

FOR DISCHARGE.

No. 3130 PTE. L. PILGRIM

Ex 4th. London General Hospital, 15/12/17, is granted furlough
to 10 a.m. 18/12/17 with orders to report at 58 Victoria St.,
on the latter date for disposal. To be repatriated.

Authority for Discharge: A.F. B.179.

C.R. 3749

3130
3130 Pte. Lewis Pilgrim. ✓

Ext. of Casualty list received Oct 2, 1917.
Tuberculosis lung severe, previously reported
12th General Hospital Rouen, and now reported at
4th ~~London~~ General Hospital.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, 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 Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. 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 Message, 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 N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of 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 **October 2, 1917.**

To **Mrs. Rachel Pilgrim,**
St. Anthony Bight.

Record Office, London, today reports No. 3130,
Private Lewis Pilgrim, is at Fourth London General
Hospital suffering from tuberculosis lung severe.

R.A. SQUIRES
Colonial Secretary

NE

Counter No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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

October 1, 1917.

To

Mrs. Rachel Pilgrim,

St. Anthony Bight.

Record Office, London, today reports No. 3130,
Private Lewis Pilgrim, was removed from
seriously ill list September twentyseventh.

R.A. SQUIRES

Colonial Secretary

FOR TYPEWRITER

Sept. 29th. 1917.

From Minister of Militia,

St. John's.

To Colonial Secretary,

St. John's.

The following telegram has been received from
London:-

"Removed from seriously ill list Sept."
"27th. 3130 Pilgrim." *Lewis Ste*

Major,
for Minister of Militia.

Pilgrim

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, 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 Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

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

September 28, 1917.

To

Mrs. Rachel Pilgrim,

St. Anthony Bight.

Regret to inform you that Record Office

London, officially reports

No. 3130, Private

Lewis Pilgrim, was seriously ill at twelfth

General Hospital Rouen, September twentyfourth

suffering from tuberculosis. Upon receipt of further information I shall immedi-

ately wire you and trust that next report will be

of his convalescence.

JOHN R. BENNETT, R.A. SQUIRES

Colonial Secretary.

FOR TYPEWRITER

C.R. 3704

3130 Pte. Lewis Pilgrim. ✓

Ext. of Casualty list received Sept 28, 1917.
Seriously Ill at 12th General Hospital,
Rouen. Sept 24. Tuberculosis.

C.R. 3130

Extract from General Roll of Draft No. 25 issued Southampton 11/6/17
from 2/1st Newfoundland Regiment, North-Canada, to 1/1st Newfoundland
Regiment, B.C.F.

3130 Pte. Pilgrim, L.

MF.

C.R. 3130

Abstract of Terminal Roll of Officers and men embarked St. Johns
SI-7-17 Sailed Halifax N. S. SUSONIA 16-8-17.

#3130 PTE. L. PILGRIM.

January 22nd. 1918.

From:- D. M. S.

To:- O. C. Depot.

3130 Pte. L. Pilgram.

The marginally noted man has been recommended for treatment in Jensen Camp by the Standing Medical Board.

Will you kindly furnish H.P. Horwood, Esq., Chairman, Jensen Camp Committee, with this man's city address in order that he may arrange for his removal to the Camp.

Signed Cluny MacPherson.

Major, D.M.S.

COPY

St John's, Nfld.

Jan. 6th, 1919

The Officer Commanding,
Royal Newfoundland Regt.
Headquarters

SIR:

The undermentioned men have been discharged
on the dates given.

Kindly note and post in Daily Orders Part II.

I have etc.

(sgnd) J. M. HOWLEY,

Capt etc.

404 CSM.	LaGrow, F.P.	Dec. 31/18	Med. unfit
301 Cpl.	Windsor, S.	26	"
396 "	McConnell, I.	27	"
37 Pte	White, Dougald	21	"
3130 "	Pilgrim, Lewis	27	"
3230 "	Finn, Peter	31	"
3879 "	West, Jos.	26	"

C.R. 3130

Lewis Pilgrim was attested for General Service
with the NEWFOUNDLAND REGIMENT on October 4th 1916
Regimental No. 3130 was allotted to Pte. L. Pilgrim

AUTHORITY:

Record Ledger,

Dept. of Militia.

March 25th 1919.

Palquies, S.

3130

Pay D^g

Statement of Accounts

No. 3120 Bank Pay to 3120/17
 Company, etc. Registered post 22/12/17 per A. S.
 From 2/8/17 to 22/12/17

CREDIT				DEBIT			
Period. 2/8/17 - 22/12/17				2/8/17 Balance			
allotment, 100 days @ 50/- \$118.00				Period. 2/8/17 - 22/12/17			
Acquittance Rolls (France)				Pay, 100 days @ 51.00 \$194.00			
Hospital Advances				Field allowance 100 days @ 10/- \$19.00			
P. & R.C. Payments				Station Allowance From 10/12/17 - 22/12/17, 9 days @ 2/-			
22/12/17							
Total £				Total £			

DUPLICATE
 MAIL COPY
 3 - JAN 1918
 Posted

checked
 This account is, in accordance with information received at the Pay & Record Office to 22/12/17 and is therefore subject to amendment if, and as may be found necessary



Corrected correct (REVENUE AND CONTINGENT)

[Handwritten signature]

THE BOARD OF
PENSION COMMISSIONERS
FOR NEWFOUNDLAND

Hon. Sir P. T. McGrath, K.B.E.,
(President Legislative Council),
Chairman.
Hon. J. A. Clift, K.C., C.B.E.,
Major W. H. Parsons, M.C.,
R.A.M.C.



In reply refer to

No.

St. John's,

November 26th., 1919.

To:- The Paymaster

3130, Ex-Pte. Lewis Pilgram.

Please note that the marginally noted man was
DISCHARGED from Jensen Camp NOVEMBER 26TH., 1919.

A. M. B.

AMB.

WA

Water Street, St. Johns, Newfoundland.

191

M Private Pilgrim No 3130



MARK CHAPLIN

KING OF TAILORS.

Mar. 30.	1 off. Cap.				
	1. P. trousers.				

				5
				35
				<hr/>
				850

Cheques correct for \$8⁵⁰

OK
WR

W. S. G.

L Pilgrim

COPY.

This space to be left blank for the Chelsea Number.

Proceedings on Discharge.

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

No. 1130 Army Rank Plt

Name Algernon Lewis
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Newfoundland Regiment

Battalion, Battery, Company, Depot, &c.
(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.)

Date of discharge December 27/1918

Place of discharge St. John's Nfld

1. Description at the time of discharge.

Age <u>22</u> years _____ months	Descriptive marks. <u>Scar right thigh</u>
Height <u>5</u> feet <u>9</u> inches	
Chest measurement { girth when fully expanded _____ ins.	
{ range of expansion _____ ins.	
Complexion <u>Fresh</u>	
Eyes <u>Blue</u>	
Hair <u>Dark</u>	
Trade <u>Fisherman</u>	
Intended place of residence (To be given as fully as practicable) <u>St. Anthony Nfld</u> <u>Newfoundland</u>	

(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.)

2. The above-named man is discharged in consequence of Tubercle of Lung.

(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.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

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. 2088 has been issued to*

* Strike out if not applicable.

[OVER.

January 8th.1918.

Private L. Pilgrim,
Jensen Camp,
Blackmarsh Road.

Dear Sir,-

I bge to enclose herewith Certificate
of discharge, dated December 27th.1918.

Yours faithfully,

Capt. & Paymaster. &
Officer i/c Records

Enc'l. L.

J/H.

COPY

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

MEDICAL HISTORY

Surname Silgrin OF Christian Name Lewis

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	4 day of Oct 1916	St. Paul's	day of	191
Declared age	21 years	7 days	years	days
Trade or occupation	Fisherman			
Height	5 feet	8 inches	feet	inches
Weight	145 lbs.			lbs.
Chest Measurement { Girth when fully expanded	34 inches			inches
	Range of expansion		3 1/2 inches	
Physical development				
Vaccination marks { Arm	Right	Left	Right	Left
	Number			
When vaccinated... ..				
Vision	R.E.—V. = 4/6		R.E.—V. =	
	L.E.—V. = 4/6		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) _____ (Rank) _____	Lieutenant Colonel [Signature]		Medical Officer.	
Enlisted	at	at		
	on 4 day of Oct 1916	on day of 191		
Joined on enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	1st [Signature] 9130.			
Transferred to				
Became non-effective by				
	on day of 191	on day of 191		
(Signature) _____ (Rank) _____				

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the onset, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
1 H. G. H.	28	9	17	22	11	17	Pulmonary T.B.	55	Slight cough occasional expectoration. Gaining weight. T.B. trace in sputum. On exam. Infiltration of L upper lobe, capillary over base.	Medical Board J. D. [Signature] Capt. [Signature] OCHA 4 London [Signature] [Signature]
(2) H. G. H.	28	9	17	15	12	17	Tubercle of Lung	78	He has had a cough for last 3 months. No night sweats. Haemoptysis on 15th-19th Sept 17, while in Hosp in Room. On Examination - Infiltration of left upper lobe, pleuritic capillary over left base. Transferred to Headquarters 51 Victoria St.	J. D. [Signature] Capt. [Signature] [Signature] [Signature] [Signature] 4 [Signature] [Signature]

S E C O N D B O A R D

Form Z179 N. M. D.

Report of Medical Board.

Station	St. John's, Nfld	Date	December 13th., 1918
No. and Rank	3130 - Private	Age	22 Height 5'8½"
Name	PILGRAM, LEWIS	Complexion	Fair
Unit	Royal Newfoundland	Eyes	Blue Hair Dark Brown
Address	St. Anthony		
Former Trade	Fisherman		
Enlisted at	St. John's On 4/10/16	(The Board will please note how the soldier's appearance corresponds with above description.)	
Disease or Disability	Original T. B. PLEURISY		

Subsequent **T. B.**

Present Condition (Compare with previous Board)

PULSE 92. WEIGHT 144. PHYSICAL SIGNS SAME AS AT LAST BOARD

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market? **100%**

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service? **100% while in Hospital DISCHARGE AS PERMANENTLY UNFIT**

Recommendation of Medical Board **REMAIN IN JENSEN CAMP**

Members of Board

<p>(SGD) CLUNY MACPHERSON, Major</p> <p style="text-align: center;">.....</p> <p style="text-align: center;">D. M. S. NEWFOUNDLAND.</p> <p style="text-align: center;">.....</p>	<p>(SGD) H. S. FRASER</p> <p style="text-align: center;">.....</p> <p>J. SINCLAIR TAIT</p> <p style="text-align: center;">.....</p> <p>L. PATERSON, Major</p> <p style="text-align: center;">.....</p>
---	---

Approving Medical Officer.





Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Pilgrim Lewis*

Regiment from which discharged *1st. Newfoundland Forestry Co*

Regimental number *3130*

Intended address *St Anthony*

Height on discharge *5* Feet *8 1/2* in

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eye *Blue*

Descriptive Marks *none*

Figure on discharge *medium*

Christian name of Father *dead*

Christian name of Mother *Rachel*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth. *St Anthony March 22 1896*

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)

Pilgrim Lewis (Rank) *Pte*

Station

St Johns

Date

Jan 15/18

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. Burden

Medical Officer in Hospital,
Unit, or Command Depot.

Station

St Johns

Date

Jan. 15/18

COPY

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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

A Name in full Lewis Kilgum
Regiment from which discharged 1st Arty
Regimental Number 3130
Where born (Parish, Town and County), and when 22/3/1906 St. Anthony Bight Argy
Intended address St. Anthony Bight Argy
Height on discharge 5 Feet 9 Inches
Colour of Hair on discharge Dark
Descriptive marks Scar R. High
Figure on discharge Medium
Christian name of Father Mark
Christian name of Mother Rachel
Wife's Maiden name in full
Date and Place of Marriage
Christian names of Children
Nature and locality of civil employment desired Fisherman

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 Kilgum

Station 4th London General Hospital (Rank) Sgt. Date 24.10.17

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

Medical Officer i/c 4th London General Hospital

Station Station Date 20.11.17

Table with 7 columns: Regiment, Years, Days, All Service (Abroad with Stations), Years, Days. Rows include Period of Service and in what Corps, Disallowed, Service towards Pension, Date inclusive to which pay has been issued, Sums due on account of public debts.

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station Officer in Charge
Date Records

CERTIFIED TRUE COPY

Medical Report on an Invalid.

Station 11th London General Hospital

Date 24.10.17

1. Unit 1st Med
2. Regimental No. 9130
3. Rank Plt
4. Name Pilgrim Lewis

5. Age last birthday 22
6. Enlisted { on 24.10.16
at 1st Med
7. Former Trade or Occupation { Fisherman

8. Disability.

Subsiding Tuberculosis

Statement of Case.

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

9. Date of origin of disability. July 17
10. Place of origin of disability. France

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Had a cough since July 1917. Condition gradually getting worse. Admitted into Hospital on the 17th of September - I.D. was found in Sputum (12th Gen. Hosp Rouen) - sent to England on the 29th of September.

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

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.

Patient has a slight cough & occasional expectoration in the morning.
Is gaining weight. T.B. found in sputum.
On examination. Infiltration of left upper lobe.
Crepitations? over left base.
Wants to go to Sanatorium

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

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

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

If so—(a) When?

(b) Where?

(c) Opinion?

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

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

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

19. Do you recommend

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

Yes.
A. K. Kinnear
Capt for Major O.C.
Govt. Institution?

Officer in medical charge of case.

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

London General Hosp

J. H. de Souza, Capt for Major O.C.

Station 20, Nov 17.

Officer in charge of Hospital.

Date

4th London General Hospital.

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

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

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 invalidated, 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.

Due to (i)

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

Exposure

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

No

22. Is the disability permanent?

Yes

23a. Is he fit for discharge from the Service as an out-patient? and will he require out-patient treatment on discharge from Hospital?

Sanatorium

earn a livelihood, or total incapacity.

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

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) ~~Change to England?~~

Yes

Signatures:—

4 London General Hosp.
Station _____

Date *21. 11. 17.*

Approved.

Station _____

Date _____

J. D. Macdonald Capt. R.A.M.C. President.

McCracken Lt. " Members.

H. Kingman Civil Practitioner

J. D. Macdonald Capt. R.A.M.C. Administrative Medical Officer.

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 invalidated, 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 1163, 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.

*Due to (i)
Exposure*

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

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

No

22. Is the disability permanent?

Yes

If permanent, what is its probable duration?

_____ in months.

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

Total

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

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

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) ~~Change to England?~~

Yes

Signatures:—

J. Macdonald Capt. R.A.M.C. President.

McCrab Lt. " Members.

H. Kingman Civil Practitioner

J. Macdonald Capt. R.A.M.C. Administrative Medical Officer.

Station 4 London General Hosp.

Date 21. 11. 17.

Approved.

Station _____

Date _____

Telephone 403.

Accounts Rendered Quarterly.

281 AND 283 DUCKWORTH STREET

ST. JOHN'S, NFLD.

1919

M & Lewis Pilgrim

FOLIO

To John Haander

TAILOR AND CLOTHIER

40

1 Suit

65.00

1081

Wally

*OK
Wally*

No. 9130

Lewis Pilgrim

*Rec'd of Lewis Pilgrim for 10/10/19
10/10/19
Wally*

Certificate to be signed by soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowances) and all just demands up to the present date.

Date Jan. 12th 1919.

Sig. of Soldier W. J. Pelgrim

Place Jensen Camps. City

Sig. of Witness Thomas Waddleton

Writ began Dec-1-1916 for 604

MOTHER

ROYAL NEWFOUNDLAND REGIMENT

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.

1. Name in full of soldier. Rank. Regt. or Unit. Regt. No.

Lewis Pilgrim Pte Regt. No. 40 3130

2. Age of soldier. Married or single.

23 yrs. 2 mos. single

3. Name in full of mother. Age. Occupation. Permanent Address

Rachel Pilgrim 64 none St. Anthony's

4. Give name of your husband. Age. Occupation. were employed.

Mark Pilgrim 73 Fishermen St. Anthony's

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

dead

Collected of 60 cents commencing 1 Dec 1916

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.

Oct-22 1913 St. Anthony'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.

all other children married and unable to allow anything for m support

*OK. 1590
deposited by*

11/9/17

10. State amount earned by (a) Yourself. *Nil*
(b) Your husband.

11. State amount and source of any other income.

Nil

12. State value of real property belonging to you and your husband.

Nil

13. State value of personal property belonging to you and your husband.

Nil

14. If husband is dead state value of real and personal property left by him.

Nil

15. Actual amount contributed by soldier during the year prior to enlistment.

50 cents per day

16. Was this amount contributed weekly or monthly.

Monthly

17. Did this amount include payment of son's board, etc.

No

18. State your son's trade or occupation prior to enlistment.

Fishing

19. State amount of his wages per week.

—

20. State name and address of his last employer.

—

21. State amount of monthly support from son since enlistment.

50 cents per day

22. State amount of allotment received by you from son monthly.

No

23. State from what date did you receive allotment.

Since enlistment

24. Actual amount contributed by other children. weekly. monthly.

Nil

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.

See Circumstances

27. With whom are you residing at present.

Gas Bridges son in law

28. Have you made a previous claim for Separation Allowance? If not, why? Give Particulars.

No

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 the time of his enlistment an employee of the Nfld. Govt.

No

32. In what capacity and in what place?

No

33. Is he in receipt of a salary as such while serving in the Royal 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.. *Mrs Rachel Plys...*

Place of residence..... *St Anthony Bay*

Declared and subscribed before me at... *St Anthony*

this... *Thirtieth* ...day of... *June* ...1918

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

Frank Simms, J.P.

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 support of the applicant.

Signature of Clergyman... *Capt G. S. O'Brien, S.A.*

Signature of Member of Patriotic Fund Committee... *Frank Simms*

Member of P.F. Committee

Approved W.A. [Signature]

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... *Lewis* 2. Surname... *Pilgrim*

3. Rank... *Pvt* 4. Regtl. No... *3130*

5. Address in full to which future payments of gratuity are to ~~for~~ be forwarded.....

..... *J. Enson Camp*

6. Date of enlistment in the Regiment... *Oct. 4/16*

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

..... *Mrs. Rachel Pilgrim*

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

9. Address in full of such dependent.....

..... *St. Anthony's Bright*

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

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

..... *Not Applicable*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *Served from Oct. 4/16*

... *to Nov. 27/18 (Overseas)*

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

..... *Enlisted once under Res. No. 3170*

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.....

..... *Have recd \$70.00 of Post Discharge Pay*

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

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.....

..... *Not Applicable*

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... *No. 27/18*

..... (b) Reason for discharge..... *Due to being no longer physically fit for war service*

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.....

..... *Y. Es. Belgium Langemark*

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. *(a) Y. Es. (b) Y. Es.*

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: *Lewis P. Lyrim*

Place of Residence: *J Enstn Camp*

Declared before me at: *St John's*

This *11th* day of *March* 19*49*.

Chas O'Neill Curry

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *Not Pub.*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>5.45.01</i>	<i>500.00</i>
.....
.....

Certified Correct.

Paymaster.

Aug. 12th. 18.

Pte. L. Pilgrim,
Jensen Camp,
Blackmarsh Road.

Dear Sir,-

I enclose herewith cheque for \$10.00
as pay on account.

Yours truly,

Capt. & Paymaster

22

Sept. 1. 1919.

To the Paymaster.

Militia Dept.

Please pay from my account the sum of
\$48.45 (Forty-eight Dollars and forty-five cents). to the
Canada Life Assurance Co.

3130. Lewis Pilgrim

F. C. R.

We Sell
**NO-SEW
 MENDING
 TISSUE.**
 The only article
 that will mend a
BAD RENT
 in Woollen or
 Cotton Goods.
 Price **10 cts.**
 per Pkg. By mail
13 cts.

243 Theatre Hill,

St. John's, N.F.,

Sep. 1st 1919.

Mr. *L. Pilgrim*



C. M. HALL,

TAILOR AND CLOTHIER.

Nice Selection of Serge and Tweed Suitings always on hand. Customers' own Cloth, also made up, or cut only.

<i>To:</i>	<i>One Tweed Suit</i>	<i>\$ 45 00</i>
	<i>" " Overcoat</i>	<i>40 00</i>
		<i>\$ 85 00</i>

3130 . . . *L. Pilgrim*

C. M. H.

Sept. 11, 1919

C.M. Hall, Esq.,
Theatre Hill,
City

Dear Sir:

I enclose cheque for \$85.00
amount due you on account of Pte. L. Pilgrim.

Yours truly

Capt.
Paymaster.

A. C. R.

LW/
Enc. 1

3130

Oct. 26, 1918.

Dr. Arch Tait,
C i t y.

Dear Sir:

Enclosed is a bill for Board contracted by Pte. L. Pilgrim during his absence on leave from Jensen Camp.

Can you certify as having granted him permission of leave from the Camp for this period. If it is correct, kindly certify and return to this office, so that we make payment.

Yours truly,

Lieut.
For Paymaster

October 31st, 1918.

Pte. L. Pilgrim,
Jensen Camp,
Blackmarsh Road.

Dear Sir:

I enclose herewith cheque for \$10.00
being amount due you as pay on account.

Yours truly,

Capt.
Paymaster

Fol.

STATEMENT.

St. John's, Nfld., June 29th 1918
Lewis Pilgrims

To


James Baird
LIMITED

Dr.

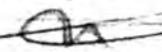
GENERAL IMPORTERS.

1 Trench Coat R. Par 2.00



paid
Charge to my James Baird

ACCOUNT	R. Par	2.00
CH. NO.	8398	INITIALS
IND. LEDGER	9	INITIALS
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS

Ch. to
C. H. S. M.


for B. H. Norman

ACCOUNT	30m	INITIALS	EW
CH. NO.	5906	INITIALS	
IND. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

St. Anthony Right
 Sept. 16/18

Mrs. Rachel Pilgrim.

\$ 21 Days Board \$21.60

Pte. L. Pilgrim

Certified correct.
 leave granted through
 O.C. Report



If man was on strength
 OR King

Archivist
 4c Green Camp



Jensen Camp
Oct 20th 18

To Capt. J. M. Howley:-

Sir,

Enclosed, please

find Board-Bill which
occurred during my leave
of absence from
Jensen Camp.

Please forward amount
to Mr. Rachel Pilgrim
St. Anthony Bight
N. C. Coast
M.C.

2

and oblige

Yours Faithfully

#3130.

Re. L. Pilgrim



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND,

Oct. 26, 1918.

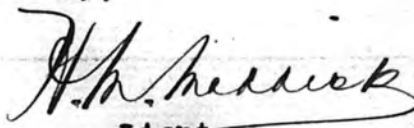
Dr. Arch Tait,
C i t y.

Dear Sir:

Enclosed is a bill for Board contract-
ed by Pte. J. Pilgrim during his absence on leave from
Jensen Camp.

Can you certify as having granted him
permission of leave from the Camp for this period..
If it is correct, kindly certify and return to this
office, so that we make payment.

Yours truly,


Lieut.
For Paymaster

*Cheques mailed
December 6/18*

1914

ORIGINAL DUPLICATE

~~Minister of Militia~~ AND CONTINGENT

To: **St. John's, Newfoundland.**

No. _____

" " Company.

Error in Statement of Account.

MEMORANDUM of STOPPAGES/CREDITS on Account of

Pay & Record Office, London.

NOTE:- Charge under
Credit

Column

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Paymaster & O. 1/c Records
Newfoundland Contingent, 58 Victoria Street, London, S.W. 1.
DUPLICATE to accompany PAY BOOK as VOUCHER.

Regtl No.	Rank & Name	Particulars And Authority	AMOUNT				
			£	s	d	s	d
5180	Pte L. Pilgrim	Statement of a/c dated 22/12/17, should show Dr.Bal. of 2/6 Debit Difference				2	6
						2	6

*pk.
bill
28/18*

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

191

Chief Paymaster & Officer i/c Records.

CERTIFIED that the above Stoppages/Credits have been made in
and Credit to Pay & Record Office, London, S. W. 1.

the Pay Book of " " Company for Period / / to / /

Dated at

Mar. 1. 1918

O.C. " " Company,
Battalion.

St. John's, Newfoundland,

Pte L. Pilgrim

May 29 1918

No. 2



H. G. Chislett's Marble Works,

MANUFACTURERS & DESIGNERS

In All the Best Grades of Marble, Granite and Freestone

1 Headstone

\$10.00

June 6

Received Payment in full

Ten dollars Paid F. Chislett

[Signature]

12/30

Pte. Lewis. Pilgrim

[Handwritten initials]

[Handwritten signatures and dates]

Sept. 3, 1918.

#3130, Pte. L. Pilgrim,
Jensen Camp,
Blackmarsh Road.

Dear Sir:

I enclose cheque for \$10.00 being the
amount due you as pay on account.

Yours truly,

Lieut.
For Paymaster

May 1st, 1918.

Pte. L. Pilgram,
Jensen Camp,
Blackmarsh Rd.

Dear Sir,-

I enclose herewith cheque for \$10.00,
as pay on account.

Yours truly,

Capt. & Paymaster

Sept. 30th, 1918.

Pte. L. Pilgrim,
Jensen Camp
Blackmarsh Road.

Dear Sir,-

I enclose herewith cheque for \$10.00
as Pay on account.

Yours faithfully,

Capt. & Paymaster

The Royal Newfoundland Regiment

DEMOBILIZATION

CIVILIAN CLOTHING GUARANTEE

I, No. 3130 Rank Pvt Name L. Pilgrim

hereby undertake to supply myself with civilian clothing, consisting of one suit of clothes, one cap, one tie, one collar, one overcoat, within 14 days from date, in consideration of being issued with clothing allowance

to the amount of \$ 60⁰⁰

Date Dec 21/18

St. John's

L. Pilgrim
Signature of Soldier

J. M. Maddick
Signature of Witness

1917—1918

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 100

Aug. 9th 1918.

Received from the First Newfoundland Regiment

the sum of 100 Dollars.

on account of Pay.
~~balance~~

Ch. No. ...	8597	Initials. ...	EW
Pay Ledger ...	9	Initials. ...	WV
Gen. Ledger ...		Initials. ...	

Regtl. No. Rank

No. 31.30

Rank PL

Name *Pelgum L.*

Jenston Camp.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$21⁵⁵

Nov 26 1919

Received from the First Newfoundland Regiment
the sum of twenty one ⁵⁵ Dollars.
~~amount~~ of Pay. W.L.G.
balance

L. Pilgrim

Ch. No. 20557	Initials L.P.
Pay Ledger 369	Initials L.P.
Gen. Ledger	Initials

Regtl. No.

Rank

AS

No. 3130

Rank

Pt

Name

L. Pilgrim

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 65⁰⁰/₄.

June 22 19 19

Received from the First Newfoundland Regiment
the sum of Sixty five ⁰⁰/₄ Dollars.
on account of Pay. W.S.G.
~~Balance~~

John M. [Signature]
Regtl. No. Rank

Ch. No. 2016	Initials. EW
Pay Ledger 869	Initials. W.S.G.
Gen. Ledger.....	Initials.....

J.C.S.

No. 3130

Rank

Pt

Name

L. Pilgrin

Inman

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 48 ⁴⁵/₁₀₀

Sept 1 19 19

Received from the First Newfoundland Regiment
the sum of Forty Eight & ⁴⁵/₁₀₀ Dollars
on account of Pay. W. L. G.
balance

Ch. No. 8839	Initials. W.L.G.
Pay Ledger 369	Initials. W.L.G.
Gen. Ledger	Initials.

Regtl. No. 7
Rank
A. H. ...
Canada Life Ins. Co.

No. 3130

Rank Pt

Name L Pilgrim

Per Canada Life Insurance Co

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 85⁰⁰

Sept 24 19 19

Received from the First Newfoundland Regiment
the sum of Eighty five ————— Dollars.
on account of Pay. W.S.L.
balance

Ch. No. 5904	Initials. <u>EW</u>
Pay Ledger. 369	Initials. <u>WR</u>
Gen. Ledger.....	Initials.....

Regtl. No. Rank

F.C

No. 3130

Rank Pfc

Name

L. Pilgrim

Va C.M. Hall

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10⁰⁰ -

Oct. 31st 1918

Received from the First Newfoundland Regiment
the sum of ten Dollars.
on account balance of Pay.

Ch. No.	4704	Initials.	EW
Pay Ledger	9	Initials.	EW
Gen. Ledger		Initials.	

Regtl. No. Rank.

No. 3130

Rank PL-

Name Pilgrim L.

Jenson Camp

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.00

June 29th 1918

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

C. J. B. H. Cheque mailed 2/7/18

Ch. No. <u>8172</u>	Initials <u>ew</u>
Pay Ledger <u>RN</u>	Initials <u>RN</u>
Gen. Ledger <u>RN</u>	Initials <u>RN</u>

Regtl. No. Rank

No. 3130

Rank Pte.

Name L. Pilgram

J. Camp.

1910-1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 18.00

Aug 31st 1912

Received from the First Newfoundland Regiment

the sum of ten ⁰⁰ Dollars.

on account of Pay.
~~balance~~

Ch. No. <u>1826</u>	Initials <u>EW</u>
Pay Ledger <u>9</u>	Initials <u>W</u>
Gen. Ledger	Initials

Regtl. No. Rank

No. 3130

Rank Pl-

Name Pilgrim, J.

J. Camp.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.⁰⁰

May 31st 1918

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

Ch. No. <u>7271</u>	Initials <u>ew</u>
Pay Ledger <u>34</u>	Initials <u>MA</u>
Gen. Ledger <u>34</u>	Initials <u>MA</u>

Regtl. No. Rank

MA

No. 3130 Rank Pte.

Name L. Pilgram

J. Camp

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10⁰⁰

Apr 30 1918

Received from the First Newfoundland Regiment
the sum of *ten* Dollars.
on account of Pay.
balance *4*

Ch. No. <i>6153</i>	Initials <i>EW</i>
Pay Ledger <i>309</i>	Initials <i>EW</i>
Gen. Ledger <i>181</i>	Initials <i>EW</i>

Regtl. No. *101st* Rank.....

No. 330

Rank

Name

L. Riegum

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.⁰⁰/₁₀₀

Mar. 29th 18

Received from the First Newfoundland Regiment
the sum of 10 Dollars.

on account
balance of Pay.

Cheq. mailed Apr. 1/18

Ch. No. 5281	Initials JH
Pay Ledger 59	Initials JH
Gen. Ledger 20	Initials JH

Regtl. No. Rank

JH

No. 3130 Rank Pte

Name L. Pilgram

J. Camp

1918-1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15⁰⁰ / -

Sept 30 - 1918 ^{LT}

Received from the First Newfoundland Regiment
the sum of ~~ten~~ ⁵⁰ ~~ten~~ Dollars.
on account of Pay.
balance

Ch. No. 3333	Initials EW
Pay Ledger 92	Initials LW
Gen. Ledger 4	Initials [Signature]

Regtl. No. Rank

[Handwritten signature]

No. 3130

Rank PL-

Name Pilgrim L.

Jensen Camp

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 65⁰⁰

Dec 21 1912

Received from the First Newfoundland Regiment

the sum of Sixty 00 Dollars.

on account
balance of Pay. clothing

Pte - L. Pilger

[Handwritten initials]

Ch. No. <u>7321</u>	Initials.....
Pay Ledger..... <u>9</u>	Initials <u>Len</u>
Gen. Ledger.....	Initials.....

Regtl. No. Rank.....

No. 3130

Rank

06-

Name

Pilgrim L

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.

Army Form B. 268.

This space to be left blank
for the Chelsea Number.



N.F.P.38, No. 14389/154
22/12/17

Proceedings on Discharge.

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

No. 3130 Army Rank Plt.

Name Silgrim Lewis
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 1st Newfoundland Regt.

Battalion, Battery, Company, Depot, &c. _____
(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.)

Date of discharge _____

Place of discharge _____

1. Description at the time of discharge.

Age <u>22</u> years _____ months	Descriptive marks. <u>Scar. Right thigh</u>
Height <u>5</u> feet <u>9</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Fair</u>	
Eyes <u>Blue</u>	
Hair <u>Dark</u>	
Trade <u>Fisherman</u>	
Intended place of residence (To be given as fully as practicable) { <u>St. Anthony Light</u> <u>Newfoundland</u>	

(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.)

2. The above-named man is discharged in consequence of Tubercle of Lung.

(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.)

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

To be filled in on the soldier quitting the Colours.

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. 2088 has been issued to* _____

* Strikes out if not applicable.

[OVER.]

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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

A Name in full Lewis Pilgrim
 Regiment from which discharged 1st Newfoundland
 Regimental Number 9130
 Where born (Parish, Town and County), and when 22-3-1896, St Anthony Bight Newfoundland
 Intended address St Anthony Bight Newfoundland
 Height on discharge 5 Feet 9 Inches
 Colour of Hair on discharge Dark Colour of Eyes Blue
 Descriptive marks Scar at thigh Complexion Fresh
 Figure on discharge Medium
 Christian name of Father _____
 Christian name of Mother Mark
 Wife's Maiden name in full Rachel
 Date and Place of Marriage _____
 Christian names of Children _____
 Nature and locality of civil employment desired Fisherman



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 Pilgrim (Rank) Pte
 Station London General Hospital Date 24-10-17

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 MARK HILL, S.E. 5. Date 20-11-17
 for Major B.A.M.C., T., Medical Officer i/c
 for Officer Commanding 4th London General Hospital, B.A.M.C. Hospital.

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	
				Years	Days
				India	
				S. Africa	
Disallowed		
Service towards Pension		
Date inclusive to which pay has been issued				Sum due on account of advance of pension)	
*Sums due on account of public debts ...					

Rank on Discharge _____
 Character (as on Certificate of discharge) _____
 Where born, and on what date _____
 Date and Place of first Enlistment _____
 Trade on Enlistment _____
 Cause of Discharge _____
 Number of G.C. Badges _____ Medals _____
 Wounds, and Actions in which received _____

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38, No. 14389/154
 DATED 22/12/17

Other distinguishing marks _____

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge _____
 Date _____ Records _____

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records

58 Victoria St.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date ~~14~~ ²¹ days after the date on this notification, see A.C.E. 1028 of 1916.)

Soldier's surname

Pilgrim

Christian names

Lewis

(in full)

Regt. No. and Rank

Plt. 3130.

Regt. or Corps

1st Newfoundland Regt.

(If T.F. this should be stated.)

His address on discharge will be

St Anthony's Bight,

Newfoundland.

This information is for the Central Army Pension Issue Office only.

The Soldier states that*

Dependants

allowance is

being issued in respect of him.

* Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.



Station



Date

D. H. Jones

President of Board

Captain, R.A.M.C.T.

(Approving Officer).

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38, No. 14389/154
DATED 22/12/17

Army Form B. 179.

Medical Report on an Invalid.

Station London General Hospital

Date 24/10/17

1. Unit 1st Newfoundland Regiment 5. Age last birthday 22
2. Regimental No. 9190
3. Rank Pte
4. Name Pilgrim Lewis
6. Enlisted { on 24/10/16
at St Johns Newfoundland
7. Former Trade or Occupation { Fisherman

8. Disability.

Pulmonary Tuberculosis:

Statement of Case.

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

9. Date of origin of disability. July 1917
10. Place of origin of disability. France
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.



had a cough since July 1917.
Condition gradually getting worse.
admitted into hospital on the 12th of September — T.B. was found in Sputum (12th General Hosp. Rouen) — Sent to England on the 29th of Sept.

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).

Due to active service
Stress & exposure

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.

Patient has a slight cough & occasional expectoration in the morning.
Is gaining weight.
T. B. found in sputum

In examination: Infiltration of left upper lobe - Cristations over left base.
Wants to go to Sanatorium

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

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

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

If so—(a) When?

(b) Where?

(c) Opinion?

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

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

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

19. Do you recommend

(a) Discharge as permanently unfit,

(b) ~~Change to England?~~

Yes.

W. W. W. W. W.
Officer in medical charge of case.

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

except

4th LONDON GENERAL HOSPITAL, R.A.M.C.

Station

DENMARK HILL, S.E. 5.

Date

2d Nov 1917

for Major R.A.M.C., T.,
for Officer Commanding
4th London General Hospital, R.A.M.C.
Officer in charge of Hospital.

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

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

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

*Due to (i)
exposure*

21. Has the disability been aggravated by

- (a) Intemperance? *no*
- (b) Misconduct? *no*
- (c) Any of the conditions mentioned? *✓*

23a. Is he fit for discharge from the Service, as an out-patient, and will he require out-patient treatment on discharge from hospital?

Sanatorium

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.

Total

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?

yes

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

✓

26. Do the Board recommend

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

Signatures:—

4th LONDON GENERAL HOSPITAL, R.A.M.C.
Station DENMARK HILL, S.E. 5.
Date 21 NOV 1917

D. H. Souza
Imperial
W. M. P. G.

President,
Captain, R.A.M.C.
Members,
Lieut. Col.

Approved. _____

4th LONDON GENERAL HOSPITAL, R.A.M.C.
Station DENMARK HILL, S.E. 5.
Date 21 NOV 1917

D. H. Souza

Administrative Medical Officer, Captain, R.A.M.C.

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 invalidated, 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 1166, 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.

Due to (i)

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

exposure

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?

22. Is the disability permanent? *yes*

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

To be stated in months.

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

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? *yes*

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

26. Do the Board recommend

(a) Discharge as permanently unfit, *yes*
or

(b) ~~Change to England?~~

Signatures:—

4th LONDON GENERAL HOSPITAL, R.A.M.C.
Station DENMARK HILL, S.E. 5.
Date 21 NOV 1917

D. H. de Souza
Imp. Smith
W. Simpson

President,
Captain, R.A.M.C.T.
Members,
Lieut. Frank

Approved. GENERAL HOSPITAL, R.A.M.C.
Station DENMARK HILL, S.E. 5.
Date 21 NOV 1917

D. H. de Souza

Administrative Medical Officer.
Captain, R.A.M.C.T.

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

MEDICAL HISTORY

Surname Pelgrim OF Christian Name Lewis *Plt.*

Table I.—GENERAL TABLE.

13 JUN 1917

Birthplace:—Parish _____ County _____


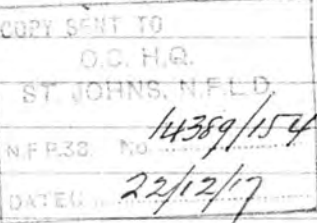
	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>4</u> day of <u>October</u> 191 <u>6</u> at <u>Saint John's</u>		on _____ day of _____ 191____ at _____	
Declared Age	<u>21</u> years <u>7</u> days		years _____ days _____	
Trade or Occupation	<u>fisherman</u>			
Height	<u>5</u> feet <u>8</u> inches		feet _____ inches _____	
Weight	<u>145</u> lbs.		lbs. _____	
Chest Measurement	Grith when fully expanded ... <u>39</u> inches		inches _____	
	Range of Expansion .. <u>3 1/2</u> inches		inches _____	
Physical Development				
Vaccination Marks	Arm		Right	Left
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/64</u> L.E.—V=		R.E.—V= L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a) 	
(b) Slight defects but not sufficient to Cause rejection	(b)		(b) 	
Approved by (Signature)	<u>Lewis Peterson</u>			
(Rank)	<u>major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>Saint John's</u> on <u>4</u> day of <u>October</u> 191 <u>6</u>		at _____ on _____ day of _____ 191____	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>Newfoundland 330</u> <u>Pvt</u>			
Transferred to				
Became non-effective by	on _____ day of _____ 191____		on _____ day of _____ 191____	
(Signature)				
(Rank)				

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



Signature of Medical Officer

MAJOR, R.A.M.C. (T.S.)
Registrar, 4th London General Hospital

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.
	Day	Month	Year	Day	Month	Year			
4. L. G. H. A. 25	9	17	15	12	17		Tubercle of Lung	78	<p>PT has had a cough for last 3 months. No night sweats. Haemoptyses on 18th & 19th Sep: 1917, while in Hpl. in Rouen</p> <p>On exam. - Infiltration of left upper lobe, pleuritic crepitations over left base.</p> <p>Trans. to Headquarters 58 Victoria St.</p>

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

Date	Brief Details, and Signature
10-10-16.	Macc. LD
6-11-16.	LD
16-11-16.	} TAB. LD
23-11-16.	} 3. LD

TABLE IV.—SERVICE TABLE.


Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St. Floris	Jan 31	Feb 3/17			
Windsor Bk	Feb 3/17	16.4.17			
D.S. Alsonia	16.4.17				

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.		Age	
Station and Date.	Disease			

3130 R. Pilgrim 12
 1917 1st hfd. 22

Station and Date: *Sep 29 - R.I. 16*
 Disease: *44 Tubercle of lung*
had a cough for the past 3 months.
no night sweats.
Haemoptysis on the 18th 19th of September 1912 while in hospital in Rouen.
about 43 on occasion.
On examination
Infiltration of left upper lobe; pleuritic crepitations over left base.
21 NOV 1914
Medical Board Approved
Permanently Unfit.
Transferred to Headquarters
58 Victoria St
Sw.



*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

R16

MEDICAL CASE SHEET.

Sgt Conroy

No. in Admission and Discharge Book.
8-94513
Year
1914

Regimental No.

3130

Rank.

Pte

Surname.

Pelgrim

Christian Name.

Unit.

1. Newfoundland A.



Station and Date.

H. L. G. H.

28. 9. 14.

Disease

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 1st Lt. M.L.

No. 8130

Rank and Name Pt. Lewis Tilgner

Age 22

Military Hospital 1.

Disease

Date of admission 29. 9. 17

Date of discharge



Dates of Observation	Days of Disease																																
	29	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29		
Temperature Fahrenheit	Time																																
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	
107°																																	
106°																																	
105°																																	
104°																																	
103°																																	
102°																																	
101°																																	
100°																																	
99°																																	
98°																																	
97°																																	
Pulse per Minute	82	88	82	80	82	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80		
Respirations per Minute																																	
Motions per 24 hours																																	

92. 136x.

100. 54 lbs.

100. 54 lbs.

100. 54 lbs.

Reg. No. 3130 Rank Pvt. Name Pelgrin S.

Attested H. 10. 16. Address _____

Allotment _____ Allottee _____

Date of Allotment _____ Returned from Overseas 10-1-18.

Embarked for Overseas _____ Cause _____

19.1.18.	Rec. adm. Jensen Camp	
23.1.18	adm. Jensen Camp.	
	L. leave. 17-8-18. 17-9-17.	
	AMB 2nd Board.	
20-1-18	Recommended Remain in Jensen Camp + Discharge from the Army as Permanently unfit.	
27-1-18		DISCHARGED—MEDICALLY UNFIT

Casualty Form—Active Service.

Regiment or Corps 1st Newfoundland

Regimental No. 3130 Rank Pte Name Pilgrim Lewis

Enlisted (a) 4.10.16 Terms of Service (a) Duration Service reckons from (a) 4.10.16

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked	Shampton	11.6.17	
		Disembarked	Rouen	12.6.17	
		Joined Battalion		2.7.17	B 213
24.9.17	63 CCS	Ad. Haemthysis		18.9.17	A 36
	12th Coy	" "	Rouen	20.9.17	H.A. 14269
24/5 Andrew		Invalided to Eng.		27.9.17	EW 3083
		"Tubercle of Lung"			E. Aldridge Major of No 1 Inf Section 42nd Bn 3rd Echelon

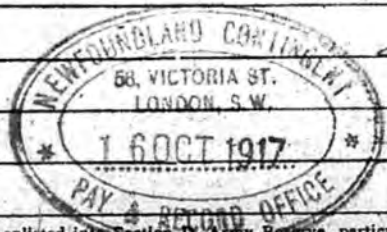
(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

COPY

Casualty Form - Active Service.

Regiment of Corps 1st Newfoundland
 Rank Pte Surname Pilgrim Christian Name Lewis
 Religion SA Age on Enlistment 21 years 7 months
 Enlisted (a) 4-10-16 Terms of Service (a) Duration Service reckons from (a) 4-10-16
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation Fisherman Signature of Officer [Signature]

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 <u>Hampton</u>	<u>11.6.17</u>	
			Disembarked... <u>Rouen</u>	<u>12.6.17</u>	
			Joined Battalion	<u>2 JUL 1917</u>	<u>B 213</u>
<u>30.9.17</u>	<u>636.8.A.</u>	<u>Ad. Haemorrhages</u>		<u>18.9.17</u>	<u>A 36</u>
	<u>12 Gen H.</u>	" "	<u>Rouen</u>	<u>20-9-17</u>	<u>H.A. 14269</u>
	<u>12 Andrew</u>	<u>Inwarded to Camp</u>		<u>27-9-17</u>	<u>W 3083</u>
		<u>"Presence of lung"</u>			
			<u>[Signature]</u>		
					MAJOR
					O. i/c No. 1 Infantry Section
					G.H.Q., 3rd Echelon



COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38, No. 14389/154
 DATED 22/12/17

(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.
 (E. 858) W. 13863/M1477 2,400,000 1/17 McA & W Ltd. Forms B.103/4 (E. 858) [P.T.O.]

DEPARTMENT OF VETERANS AFFAIRS

OTTAWA 4, ONTARIO
NOV 14, 1968

To COPY FOR H.O. FILE

Date.....

Attention of

NAME PILGRIM LEWIS

SERVICE 3130 C.P.C. No. 260920
NUMBER ROYAL Nfld REGT W.V.A. No.

NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

SPME CPC DVA ST JOHNS Nfld NOV 6, 1968

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death..... Nov 3, 1968
Cause of Death.....
Place of Death..... ST JOHNS GENERAL HOSPITAL

Name and Address of next of kin (if known).....

Copies to: W.S.R.
V. I.
~~XRAY~~
~~DOX~~
H.O.

} Destroy form if advice of death already received.

E. C. Richards

for
Chief, Central Registry