



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6093 Name Walter Wheaton Corps Meth

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Walter Wheaton</u> |
| 2. What is your full Address? | 2. <u>Redirection 4090 Dist</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</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 |
| |) Cbrps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Walter Wheaton do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Walter Wheaton SIGNATURE OF RECRUIT.
Walter Wheaton Signature of Witness.

24-8-18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 24 day of August 1918.

Signature of Attesting Officer J. H. Snow

†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 Corps.

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

Date 26-8-1918
 Place St. John's

Approving Officer [Signature]

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Walter Wheaton
 Apparent age 19 years months. Height 5 feet 4 1/2 inches
 Chest Measurement { Girth when fully expanded 35 inches
 { Range of expansion 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Isaac Wheaton
Frederickton Fogoduit 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 limited engagement reckons from _____									Total Service forfeited as above.....
Joined at _____ on _____									
<u>Discharged May 5, 1919</u>									

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

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6093 Name Walter Wheaton Corps Meth

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Walter Wheaton
2. What is your full Address? 2. Fredericton Logo Dist
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years Months
5. What is your Trade or Calling? 5. Fisherman
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, Walter Wheaton do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to hold the engagements made.

Walter Wheaton SIGNATURE OF RECRUIT.

24-8-15

John Moulton Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Walter Wheaton 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.

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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 answered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's

on this 24 day of August 1915

Signature of Attesting Officer J. H. Snow

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

Date 26-8-1915
Place St. John's

J. H. Snow Approving Officer.

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‡ 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)

C.R. 6098

Extract of Daily Orders Part II Royal Newfoundland Regiment
Depot St. John's dated April 11th/1919

#6098 Pte. W. Wheaton.

Admitted to Escasoni Hospital 9/4/19.

C.R. 6093

is sent from Daily Order part II, Depot St. John's
dated 12-4-19.

The discharge of the undersigned on demobilization has been
approved by G. O. Discharge Depot on 8-4-19.

#6093 Pte W Wheaton.

C.R. 6093

Extract from Daily Orders part II, Depot
St. John's dated May 8th., 1919.

The discharge of the undernoted on demobilization
has been CONFIRMED by Officer I/s Records on 5-8-19.

#6093 Pte. Walter Wheaton.

NEWFOUNDLAND POSTAL TELEGRAPHS.

CR 6093

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 **Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated

Feb. 18, 1919.

To

Isaac Wheaton,**Carmanville.**

Beg to advise you that ~~your~~ Pte. Walter Wheaton, is still at General Hospital St. John's, Condition improved.

J.R. Bennett**Minister of Militia.****FOR TYPEWRITER**

NEWFOUNDLAND POSTAL TELEGRAPHS.



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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 Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated Jan. 3, 1919.
 To Mr. Isaac Wheaton,
Frederickton, Pogo.

Beg to inform you that your son No. 6093 Pts. W.
 Wheaton, is now improved.

J.R. Bennett,
 Minister of Militia.

6093
Counter No. 13

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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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 Department of Militia.

Dec. 26th, 1918.

Line Number	Rcd	By	Sent	by	Check

Dated

Dec. 26th, 1918.

To

Mrs. Eliza Chaalk,
Carmarville.

Regret to inform you that there is no improvement in the condition of No. 6093. Pte. W. Wheaton.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

Receiving Form

C.R. 6093
Form 9

NEWFOUNDLAND POSTAL TELEGRAPHS

Received 0 m. By Carmanville 26/12
Sent out for delivery 57 No. Carmanville Place from 26/12 No. of Words



To

J. R. Bennett

please advise immediately
Walter wheatons Condition
Mrs Eliza Chaulk

C.R. 8093

Extract from Medical Board held on FRIDAY AFTERNOON
MARCH 28th., the following was the finding.

Recommended discharge from the Army.

ADMISSION TO JENSEN CAMP.

8093 PTE. W. WHEATON.

6

C.R. 6093

Extract of Daily Orders Part II Royal Newfoundland
Regiment Depot St. John's dated March 28th/19.

Discharged from General Hospital

6093 Pte. W. Weston.

27/3/19.

C.R. 6093

Extract from Daily Orders part 11, Depot. St. John's
dated November 11th., 1918.

HOSPITAL.

#6093 Pte. W. Wheaton.

Admitted Barracks Hospital 8/11/18.

BC.

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

No. 7 Sent by _____ Rec'd by _____ Check CR. 6093

are from Carmanville

To J R Bennett



please let me know how
pk Walter Wheaton is
anxious

Isaac Wheaton

Ans

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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(NOT TRANSMITTED)

Signature of Sender _____ Address Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated Dec. 18th, 1918.

To Isaac Wheaton,
Frederickton, Pogo.

Beg to inform you that your son No. 6093 Pte. W. Wheaton, is now Improved.

J.R. Bennett,
Minister of Militia

C.R. ⁶⁰⁹³ _{Number No.}

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(NOT TRANSMITTED)

Signature of Sender _____

Address Dept. of Militia.

Line Number	Recd	By	Sent	by	Check

Dated Dec 9th, 1918.

To Mr. Isaac Wheaton,
Frederickton, Pogo.

Regret to inform you that your son No. 6093 Pte. W. Wheaton,
is now seriously ill.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C. No. 6093
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address Dept. of Militia.

Line Number	Recd	By	Sent	by	Check

Dated Dec. 4, 1918.

To Mr. Isaac Wheaton,
Frederickton, Fogo.

Regert to inform you that your son # 6093 Pte. W. Wheaton, ~~xxxx~~ who was reported ~~xxxxxxxxxxxx~~ improved is now reported seriously ill.

J.R. BENNETT,
Minister of Militia.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS.

Cable Connection with all the World

C.R. 6093

All Messages Sent are Subject to the Following Conditions:

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(NOT TRANSMITTED)

Signature of Sender _____ Address **Dept. of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Dec. 2, 1913.**

To **Mr. Isaac Wheaton,
Fredericton, Fogo.**

Beg to inform you that No. 6098 Pte. W. Wheaton, is now improved.

**J.R. Bennett,
Minister of Militia.**

FOR TYPEWRITER

C.R. 6093
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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(NOT TRANSMITTED)

Signature of Sender _____

Address Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated

Nov. 25th 1918.

To

Mr. Isaac Wheaton,
Fredericton, Pogo.

Req to inform you that your son No. 6093 Pte. W. Wheaton, is now improved.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6093

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, dated October 30th. 1918.

Hospital.

6093 Pte. W. Wheaton.

Admitted Barracks Hospital 28/10/18.

C.R. 6093
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address St. John's Dept. of Militia.

Line Number	Recd	By	Sent	by	Check

Dated Nov. 11, 1918.
To Mr. Isaac Wheaton,
Frederickton, Pogo.

Regret to inform you that your son #6093 Pte. W. Wheaton, was admitted to Military Hospital ~~xxxxxx~~ Yesterday Nov. 10th, suffering from General Debility.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6093
Counter No. _____

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(NOT TRANSMITTED)

Signature of Sender _____ Address **St. John's Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Nov. 13, 1918.**

To **Mr. Isaac Wheaton,**
Frederickton, Fogo.

beg to inform you that your son #6093 Pte. W. Wheaton, is now improved.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6093

Extract from Daily Orders part 11, Depot. St. John's dated Nov. 2nd 1918

Discharged from Barracks Hospital I/II/18.

46093 Pte. W. Wheaton.

BC.

C.R. 6093

Extract from Daily Orders Part 11 Unit The Royal Nfld, Regt.,
St. John's Oct. 12/18.

The undermentioned Man R^{td} returned from Special Duty at Mt.
Pearl, 10-10-18.

6093 Pte. W. Wheaton.

C.R. 6093

Extract from Daily Orders Part 11 Unit The Royal Wfld. Regt.

Dated 26-18.

6093 Pte. Walter Wheaton.

Attested for General Service with the Royal Wfld. Regt.

24/8/18.

C.R. 6093
Counter No.

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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 Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated Nov. 18th, 1918.

To Mr. Isaac Wheaton,
Frederickton,
Fogo.

beg to inform you that your son No. 6093, Pte. W. Wheaton,
is now convalescent.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6093
Counter No.

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.

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(NOT TRANSMITTED)

Signature of Sender _____ Address Dept. of Militia.

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Dated Nov. 18th, 1918.

To Mr. Isaac Wheaton,
Frederickton,
Fogo.

beg to inform you that your son No. 6093, Pte. W. Wheaton,
is now convalescent.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6093

Extract/ from Daily Orders, Part 11, by UNIT: The Royal Newfoundland
Regiment, dated October 12th 1918.

SPECIAL DUTY.

THE UNDERMENTIONED RETURNED FROM SPECIAL DUTY AT MT PEARL 10/10/18.

6093 Pte. W. Wheaton.

C.R. 6093

Extract from Daily orders Part II Unit The Royal Wfld. Regt.,
St. John's Sept. 24-16.

The following was processed on special duty to Mount Pearl,
19-8-16.

6093 Pte. W. Wheaton.

U

Wheaton, W.

6093

Ray Sept.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS.

St. John's, Newfoundland,

April 7th, 1919 191

From Officer Comanding,
Discharge Depot

Office of D.M.S.
To ~~Board of Pension Commissioners,~~
Militia Bldngs

6098 Pte. Wheaton, W.

Above noted man was before the Standing Medical Board
on 28-3-19 and was recommended for discharge as perman-
ently unfit and admission to Jensen Camp.

His discharge on demobilization has been approved by the
Officer Commanding, effective from 8-4-19 and I am send-
ing him herewith for your attention and necessary action please.

Copy of his Medical Board will be forwarded you in due
course.

W. Bailey Case

Adjutant
Discharge Depot

Copy to Bd. of Pension Commissioners

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

MEDICAL HISTORY

Surname

Wheaton

OF

Christian Name

Walter

Table I.—GENERAL TABLE

Birthplace:—Parish

Frederickton


County

Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <i>24</i> day of <i>Aug</i>	191 <i>8</i>	on	day of 191
	at <i>St Johns</i>		at	
Declared Age	<i>19</i> years	days	years	days
Trade or Occupation	<i>Fisherman</i>			
Height	<i>5</i> feet	<i>4 1/2</i> inches	feet	inches
Weight		<i>125</i> lbs.		lls.
Chest Measurement	Girth when fully expanded	<i>35</i> inches		inches
	Range of Expansion	<i>3</i> inches		inches
Physical Development				
Vaccination Marks	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R.E.—V=	<i>6/6 6/6</i>	R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Lamm Peterson</i>			
(Rank)		Medical Officer		Medical Officer
Enlisted	at <i>St Johns</i>		at	
	on <i>24</i> day of <i>August</i>	191 <i>8</i>	on	day of 191
Joined on Enlistment	Corps		Corps	
	Regtl. No.	<i>6093</i>	Regtl. No.	
Transferred to	<i>Royal Nfld Regt</i>			
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of Syphilis, admissions and re-admissions to hospitals 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				
M. I. D. Hosp.	10	11	18	6	1	19	Measles	88	Discharged to General Hospital.	<i>Geo. Gordon</i>
N. John's Gen. Hospital	6	1	19	27	3	19	Stomachitis	70	Recommended Tonsure Camp.	<i>G. H. Ryan</i>



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station *St. John's Rifle*

Date *March 28th 1919.*

1. Unit *Royal Newfoundland*
2. Regimental No. *6093*
3. Rank *Plt.*
4. Name *Wheaton, Walter*
5. Age last birthday *20*
6. Enlisted on *24th August 1918*
at *St. John's*
7. Former trade or occupation

8. Disability

*Pleurisy
? T.B.*

9. History *Admitted Barracks Hq 7/11/18. Transferred to M.I.D. Hq. 10/11/17 & then to General Hq. 6/1/19. Discharged 27/3/19.*

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

Roughening & diminished breath
sands. Left Apex. Dullness
& some thickening.
Debility

11. Was sanatorium advised and refused? no
operation

12. Do you recommend discharge as yes.
permanently unfit?

Signature

Archibald
son

Rank or Qualification

M.O. Depot

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x may be considered as aggravated by:
due to
- (a) ~~Service during this war.~~ (b) ~~Climate.~~ (c) Ordinary Military Service.
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

*Deficient breath sounds all over left lung
Pulse 80*

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market?

- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?
(State in percentage.) *100% 3 months*

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperence (b) Misconduct

18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to } General Hospital,
Naval and Military Convalescent Hospital,
Jensen Tuberculosis Camp. *Yes*

20. We recommend discharge from retention in the Army

Remarks if any:—

.....
[Signature]
President

Signatures.....
[Signature]
.....
[Signature]

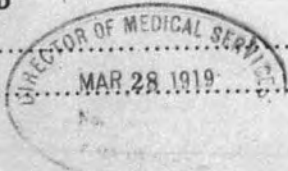
Place *S. Johns*

Date *Mar 28/19*

APPROVED

Station

Date



[Signature]
Administrative Medical Officer *Major*



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 *Wheaton Walter*

Regiment from which discharged *Royal Newfoundland*

Regimental number *6093*

Intended address *Fredrickton N. N. B.*

Height on discharge *5 Feet 4 1/2*

Color of hair on discharge *Light*

Complexion *Fair.*

Color of eyes *Blue.*

Descriptive Marks *Scar foot (left)*

Figure on discharge *Slight*

Christian name of Father *Isaac.*

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Fredrickton 10th August. 1899.*

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 *W*

(Soldier's signature in full)

Walter X Wheaton
Rank.

Sgt (Rank)

Station *S^t. John*

Date *March 20/19*

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

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

Station *S^t. John*

Date *25th March 1919*

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on Aug 24 1915

1. Name Walter ~~Wheaton~~ Age (a) Declared 19
Wheaton (b) Apparent

2. Do you know of anything wrong with you? Treated for D.B 5 months ago

What severe illnesses have you had? none

Eyes - Blue
Temp. - 98.6
Wounds -

6093

3. Height 5-4 1/2 Weight 125
 4. Eyesight (a) Left 4/6 (b) Right 4/6
 5. Physical Defects (Examine after strenuous exercise) ~

Nothing in Lung

6. Examination of Lungs -
 Measurement (a) Expiration 32 (b) Inspiration 35

7. Examination of Heart ~

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)
 Teeth
 Throat
 Nose
 Ears (Otorrhea)
 (Deafness)

10. Have you been successfully vaccinated, and when? Yes
 11. Name and address of next of kin Father Isaac Inedrocton
Fajo Dook

REMARKS—

A II

Archibald
McBride

Medical Examiners.

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. 6093.....

Name Wheaton Walter St.....

Address Frederickton N B.....

Present Medical Category E.....

Recommended for:— { (a) ~~Immediate discharge~~

(b) Standing Medical Board.....

Members of Board {

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

J. Patterson
Senior Medical Officer

D.W. Burden
M.O. Depot

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
(Fishing)

Walter H. Wheelon
Signature of Man.

Reg. No. 6093

J. A. Snow
Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date **APR 7 - 1919**

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6043 Rank Plt Name Wheaton Walter
 Date of Enlistment 24.3.18 Address Federated Fm. District Fogo
 Occupation Fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 100% 3700

Passed to Demobilization Officer with following documents:—

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

Date 14/19

H. M. H.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Walter X Wheaton
Mark

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied at Aldouster

Date 7-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R.1212 9448* to his home at *Fredericton* and Release Certificate No. *2008* issued.

Date *7-4-19* *J.A. Lawford*
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 *8-5-19 (6-5-19)*

Date *7-4-19* *H. W. H.*
Depot Paymaster.

Discharge approved for *8-4-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *7-4-19* *J.A. Lawford*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
Officer i/c Records.
Board of Pension Commissioners.
with following additional documents.

APR 9 1919

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

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

Date

May 5th., 1919

#6093 Pte. Walter Wheaton,
Frederickton,
Fogo Dist.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2005."

Yours truly

Captain,
Paymaster & Officer i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6093 Rank Pte Name Wheaton Walter
 Intended place of residence Dorchester

2. Occupation Ironman
 Classification of soldier B Medical Category 2

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

~~Eligible for War Service Gratuity~~
DEMORILIZATION!

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 H. M. St.
 Date APR 7 1919 J. A. Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S W. X. Wheaton J.A.S.
7-4-19 J. A. Snow
 Signature of soldier
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S Walter X. Wheaton
7-4-19 W. J. Wheaton
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 24-8-18 No of days on Military
 Discharged from service 8-4-19 Plus 28 days Service 256

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Lat
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

Date APR 9 1919

CONFIRMATION OF DISCHARGE

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

Place St. John's, Nfld. J. M. Bowley Capt.
 Date May 5/1919 J. M. Bowley
 Officer in Charge
 The Royal Newfoundland Regiment

A.F.B. 2079/2005



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Walker Wheaton, Regl. No. 6093

hereby agree, until further notification by me, and in similar official form to make an Allotment of — Dollars and Sixty 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 Sept. 1. 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6171	Father	Mr. Isaac Wheaton	Frederington Fogo Dist.	— 60
Total Allotment, \$				— 60

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

(Sig.) [Signature]

Officer Commanding
Company

St John's Mtd.

26/8/ 1918

(Sig.) his Sgt Andrew
Walker + Wheaton
(Rank) Private



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station **ST. JOHN'S NFLD.**

Date **MARCH 28th 1919**

1. Unit *Royal Newfoundland*
2. Regimental No. **6083**
3. Rank **PRIVATE**
4. Name **WHEATON WALTER**
5. Age last birthday **20**
6. Enlisted on **AUGUST 24th., 1918**
at **ST. JOHN'S**
7. Former trade or occupation

8. Disability

PLEURISY

? T. B?

9. History **ADMITTED BARRACKS HOSPITAL 8/11/18, TRANSFERRED TO M.I.D. HOSPITAL 10/11/18 AND THEN TO GENERAL HOSPITAL 6/1/19 DISCHARGED 27/3/19**

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

**ROUGHENING AND DIMINISHED BREATH
SOUNDS LEFT APPEL. MULLNESS AND SOME
THICKENING. DEBILITY**

11. Was sanatorium advised and refused?
operation

NO

12. Do you recommend discharge as permanently unfit?

YES

Signature **(SGD) A. C. TAIT**.....

Rank or Qualification

Remarks if any by Officer i/c Hospital.

Place Signature

Date Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x **MAY** be considered as aggravated by due to
- (a) ~~Service during this war.~~ (b) ~~Crime.~~ (c) Ordinary Military Service
- Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

DEFICIENT BREATH SOUNDS ALL OVER LEFT LUNG. PULSE 80

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **100%**

- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?

(State in percentage.)

100% for 3 months

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperence (b) Misconduct

18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to } General Hospital,
Naval and Military Con-
valescent Hospital,
Jensen Tuberculosis Camp. **YES**

20. We recommend discharge from retention in the Army

Remarks if any:—

(SGD) **N. S. FRASER**

President

J. S. TAIT

Signatures

L. PATERSON, MAJOR

Place **ST. JOHN'S**

Date **MARCH 28th., 1919**

APPROVED

Station

Date



(SGD) **CLYDE MACPHERSON, MAJOR**
Administrative Medical Officer

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6093 Rank Pte Name Wheaton, Walter
 Intended place of residence..... Frederickton

2. Occupation Fisherman
 Classification of soldier B Medical Category E

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

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

Place S. NHOP LS (sgnd) H. News, Lt.
 Date APR 7 1919 for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date S. NHOP LS (sgnd) Walter X Wheaton
APR 7 1919 Signature of soldier
 " H. H. Snow, Lt.
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date S. NHOP LS (sgnd) Walter X Wheaton
APR 7 1919 Signature of soldier
 " W. J. Eaton
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 24-8-18 No of days on Military
 Discharged from service..... 8-4-19 plus 28 days Service 256

APPROVAL OF DISCHARGE

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

Place S. NHOP LS R. H. Eaton
 Date APR 9 1919 Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

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

Place
 Date
 Officer in Charge Records
 The Royal Newfoundland Regiment

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland

Number of Sheet

One

Signature of O. C. Company

J. A. P. P.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>6093 Walter Wheaton</i>	Age on	<i>20</i> years <i>months</i>	<i>Fisherman</i>	
Joined	Date	Place and Date of Enlistment	<i>St John's</i> <i>2-4-5-18</i>	Religion <i>Meth</i>	
Joined	Date	Period of	with Colours <i>255</i> years. with Reserve <i>365</i> years.	Place of Birth <i>Fredericton</i>	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St John's</i>	<i>5</i> <i>19</i>			

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6093 Rank PLC Name Wheaton Walter
 Date of Enlistment 24.8.18 Address Frederickton District Fogo
 Occupation Fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Remain fit Disability Rating 100% 3 mos.

Passed to Demobilization Officer with following documents:—

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

Date 1.4.19

H. Mous St.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Walter Wheaton
Mark

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 M. Houston St.

Date 7-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *K12127* to his home at *Spencer* and Release Certificate No. *2078* issued.

Date *7-4-19*

J.A. Crawford
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 *62-5-1916-5-19*

Date *7-4-19*

H. News
Depot Paymaster.

Discharge approved for *8-4-19*

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

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

Date *7-4-19*

J.A. Crawford
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

APR 9 1919

Date

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

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

Date *10/4/19*

W. H. News
for Officer in Charge



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

April 9th., 1919.

From:- D. M. S.

To:- O. C. Depot.

6098, Pte. Wheaton, W.

Please note that the marginally noted man was admitted to Escasoni Hospital April 9th., 1919.

Cluny Macpherson

Major, D. M. S.



Copy to B. P. C. for information.

Reg. No. 6093 Rank Plt Name Wheaton Walter
 Attested 24-8-18 Address Fredington Fago
 Allotment 60 Allottee Isaac Wheaton (Father)
 Date of Allotment 1-9-18 Returned from Overseas.....
 Embarked for Overseas Cause.....

Vac 26-8-18 1st 2-9-18 2nd Proc 14-9-18 20-10-18
 28-10-18 Adm. to Barracks Hosp. returned 1-11-18.
 19-9-18 Proceeded on special duty with Lt Col to 10-10-18
 8-11-18 Adm. to Barracks Dept Mount Pearl
 10-11-18 Transferred from Barracks Hosp. to General
 27-3-19 Discharged from General Hosp.
 28-3-19 Rec. Dis. from the Army. Adm. to
 Jensen Camp.
 1.4.19 PASSED TO DEMOBILIZATION OFFICER
 9.4.19 DISCHARGE APPROVED ON REENTRY