



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

4071

No. 4071 Name Walter Wheeler Corps Meth.

### Questions to be put to the Recruit before Enlistment.

- 1. What is your name? ..... 1. Walter Wheeler.....
- 2. What is your full Address? ..... 2. Silverdale.....
- 3. Are you a British Subject? ..... 3. Yes.....
- 4. What is your age? ..... 4. 19 Years 8 Months.....
- 5. What is your Trade or Calling? ..... 5. Farmer.....
- 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 Wheeler.....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.

6/3/17

Walter Wheeler.....SIGNATURE OF RECRUIT.

James T. Donoghue.....Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Walter Wheeler.....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 Grand Falls

on this 3<sup>rd</sup> day of Nov.....1917 } Signature of Attesting Officer H J Fitzgibbon Sgt

### †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.....5/11/17.....1917 } Approving Officer.  
Place.....St. John's.....

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Walter Wheeler  
 Apparent age 19 years 8 months. Height 5 feet 5 inches  
 Chest Measurement { Girth when fully expanded 35 inches wt 120  
 { Range of expansion 2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Wheeler  
Jackson Cove | Relationship father  
Green Bay Particulars as to Marriage

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Re-serve 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>3-11-17</u>									
Joined at <u>St. John's</u> on <u>November 3-17</u>									
<u>Discharged August 11-11-19</u>									
Embarked <u>St. John's N.S. No. 11-12-17</u>									
Joined <u>Bethel 31-5-18</u> <u>Wounded 20-10-18</u> <u>Admitted 1<sup>st</sup> Lt. 21-10-18</u>									
Transferred to <u>Leopold 2-11-18</u> <u>Admitted 1<sup>st</sup> Lt. 2-11-18</u> <u>Transferred to</u>									
<u>Santon Nov 4-2-19</u> <u>to Brighton</u> <u>Queen Mary's Conv. Camp</u> <u>Southampton 12-2-19</u>									
<u>sent to Winchester 1-5-19</u> <u>to Newfoundland for demobilization 22-5-19</u>									
Arrived Newfoundland <u>1-6-1919</u>									
Total Service forfeited as above... <u>demobilization St. John's 11-8-1919</u>									

Total Service towards Engagement to 11-8-1919 (date of discharge) 1 years 282 days  
 " " Pensions " " " " " " " " " " " "

ST. JOHN'S, July 21<sup>st</sup> /19

# Royal Newfoundland Regiment.

**Billeting Account,**

To Pte. W. Wheeler

**Billeting Soldiers as undermentioned**

from June 5<sup>th</sup> /19 to July 20<sup>th</sup> /19

4071 - Pte. W. Wheeler 46 50

ACCOUNT	<u>B. &amp; M. Co.</u>
CH NO	<u>3545</u>
INITIALS	<u>EW</u>
IND LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN LEDGER	INITIALS

Certified correct for \$

R. J.

Billeting Officer.

W. Wheeler

C.R. 4071

extract from daily orders part II Royal Newfoundland Regt.  
Depot St. John's dated Aug. 22nd 1919.

The discharge of the undernoted on demobilisation has been  
CONFIRMED by officer i/o Records from noted date 11-8-19

4071, Pte. Walter Wheeler.

C.R. 4071

Extract from Daily Orders Part II Royal Newfoundland Regt.  
Depot St. John's dated Aug. 9th 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot from noted date  
28-7-19.

4071, Pte. W. Wheeler.

4071  
C.R. ~~237~~

July 22nd, 1919.

Major Knight,  
Empire Hospital,  
City.

Dear Sir:-

Am forwarding herewith two Artificial limbs  
which arrived per S.S. "Sachem" from Liverpool July 20th,  
the same belongs to 4087 Pte. R. Paul and 4071 Pte. W.  
Wheeler.

Kindly sign enclosed receipt and return by  
bearer.

Yours faithfully,

Casualty Officer.

1 copy.

RECEIVED FROM THE DEPARTMENT OF MILITIA  
TWO ARTIFICIAL LIMBS, ADDRESSED AS FOLLOWS:-

4087 Pte. R. Paul.

4071 Pte. W. Wheeler.

SIGNED..... *H. R. ...* .....

July 22nd, 1919.

C.R. 4071

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

Date

June 18th 1919.

4071, Wheeler.

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

NZ "Corsican"



C.R. 4071

Extract from D.O. pt. II, Unit the R.Nfld. R.  
dated 2-5-19. by Lieut.Col. B.J.Barton, D.S.O.  
Officer Commanding 2nd. Battalion.

The u/m having reported back from the 1st. Bn. is  
taken on the strength and posted to "H" Co. as  
from 1-5-19.

4071 Pte. R. Wheeler,

C.R. 4071

Extract from Casualties from Pay & Record Office, London  
dated 24/4/19.

The undermentioned was discharged from Queen Mary's  
Convalescent Auxiliary Hospital, Roehampton, S.W.  
on 24/4/19. He reported at the Pay & Record Office  
was granted furlough to 1/5/19.

4071, Pte. W. Wheeler.

Authority:

Memo from Hospital.

C.R. 4071

Feb. 18th, 1919

Mr. John Wheeler

Jackson's Cove

N.D.B.

Dear Sir:-

I beg to inform you that additional information has to-day been received from the Visiting Committee of the Newfoundland War Contingent Association to the effect that your son, No. 4071, Private Walter Wheeler is now progressing favourably

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R.

4071

Extract from Casalties received from Pay & Record  
Office, London. Feb. 18, 1919.

The undernoted was transferred from Pavilion General  
Hospital, Brighton, to Queen Mary's Conval. Aux. Hospital  
Roehampton, S.W., on 12-2-19.

4071 Pte. W. Wheeler.

C.R.

4071

Dec. 17th 18

Mr. John Wheeler  
Jackson's Cove  
N.D.B.

Dear Sir:-

I beg to inform you that additional information has to-day been received from the Visiting Committee of the Newfoundland War Contingent Association concerning No. 4071, Private Walter Wheeler, to the effect that he is now progressing favourably

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 4071

Nov 23rd 18

Mrs. John Wheeler  
Jackson's Cove

Dear Madam:- No. 4071, Pte. Walter Wheeler

I am directed to acknowledge receipt of your letter of Nov. 9th with reference to your son's casualty, and I might say in reply that this soldier was reported as having received a gun-shot in the left leg; if the leg had been broken, it would have been stated as fractured.

Since receiving your letter, a further report has been received to the effect that ~~the~~ Wheeler was progressing favourably, of which you were duly notified.

Yours faithfully,

  
Lieut.

Company Officer.

C.R. 4071

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT  
IN FRANCE DATED 21/11/18.

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TO ENGLAND.

#4071 Pte. W. Wheeler:

2/11/18..

C.R. 4071

Nov. 16th 18.

Mr. John Wheeler,  
Silverdale, N.D.B.

Dear Sir:-

In answer to your enquiry, I beg to inform you that information has been received by this Department from The Pay & Record Office, London, to the effect that your son, No. 4271, Pte. Walter Clarke, suffering from Gunshot Wound leg, progressing favourably.

Yours faithfully,



Lieut.

Casualty Officer,

For Minister of Militia.



C.R. 4071

Extract from telegram to Spnoptical London, Nov.15th,

Inform condition 4071 Wheeler.

MM.

C.R. 4071

Extract of Telegram from Synoptical, London, dated November 15th 1918.

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In answer your telegram November 13th 4071 Wheeler G.S.W. Left leg progressing favourably.

C.R. 4071

Nov. 13th 18.

Mr. John Wheeler,  
Silverdale, N.D.B.

Dear Sir:-

I beg to inform you that additional information has to-day been received by this Department through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that your son No. 4071, Pte. Walter Wheeler, is now progressing favourably.

Yours faithfully,

Lieut. Col.,  
Chief Staff Officer.

C.R. 4071

Extract from telegram to Synoptical London, Nov.13th,1918.

With reference my telegram of Sept.13th,

Please inform condition and particulars of wounds 4071 Wheeler.

MM.

Nov 9 1918

Mr J B Bennett

GR. 4071

NY

mineral of milerite  
deare sir with Regards  
to Privat Walter Wheeler  
No 4071 deare sir if you  
Please to <sup>let</sup> me know if his  
leg is Broken or is it will  
he lose his leg or not I  
would to no ill I want it  
for I do feel very sorry I want  
<sup>it</sup> and let me no how he is at  
Present sir dont forget to  
dreser my letter as soon as you  
can Mrs John F Wheeler  
I am at write my self

C.R. 4071  
October 1918

# 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 Dept of Militia.

Line Number	Rcd	By	Sent	by	Check
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Dated Nov 5th, 1918

To John Wheeler Jackson's Cove N.D.B.

Regret to inform you that Record Office, London, officially reports No. 4071, Private Walter Whahler at Military Hospital Bethnal Green, London suffering from G.S.W. left leg.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Chge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

**NEWFOUNDLAND POSTAL TELEGRAPHS.**

C.R. 4071

**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 Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

*Dated* Oct. 31st, 1918

To John Wheeler, Jackson's Cove, N.D.B.

Regret to inform you that Record Office, London,  
officially reports **No. 4071, Private Walter Wheeler**  
**at 8th Stationary Hospital Wimereux Coy. 22nd suffering from**  
**G.S.W. left thigh fracture severe**

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

**J.R. Bennett**

**Chge Dept of Militia.**

Minister of Militia.

**FOR TYPEWRITER**

C.R. 4071

Extract from Nominal Roll of Sick and Wounded admitted  
various Hospitals on various dates. Dated 4th. Nov. 1918.

4071 Pte. W. Wheeler

R. Wfld. Regt..... G.S.W. L. Reg.

Adm. Military Hospital, Bethnal Green, 2/11/18.



C.R. 4071

Extract from War Office List. No. H. A. 30725

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ADMITTED 8 STY. HOS. WIMEREUX 26 OCT. 1918.

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#4071 Pte. W. Wheeler.

G.S.W., THIGH L. FR. SEVERE.

BC.

C.R. 4071

Extract from War Office List No. C. 1737 dated 6/11/18.

WOUNDED 20/10/ 18.

#4071 Pte. W. Wheeler.

C.R.

4071

Extract from Nominal Roll of Mfld. Regt. Draft No.46  
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Folkestone  
25-5-18.

4071 Pte. W. Wheeler.

NEWFOUNDLAND CONTINGENT.

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C.R. 4071

Extract of Nominal Roll of Draft No. 48,- 100 Other Ranks from 3rd. Batta  
Depot, Winchester, to 1st. Batta., The Royal Newfoundland Regiment, B.E.F.  
Embarked Folkestone, 25/8/18.

4071 Pte. W. Wheeler.

A.Ps. B. 103 (one for  
each soldier) sent to 2  
3rd. Echelon, B.E.F.

C.R. 4071

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

#4071 Pte. W. Wheeler

C.R. 4071

Extract from Daily Orders Part 11 Unit The Royal  
Hfld. Regt., St. John's, Nov. 6th, 1917.

4071 Pte. W. Wheeler.

Attested for General Service with the Hfld. Regt., with  
effect from Nov. 3rd, 1917, Attested at Grand Falls.

C.R. 4071

**Extract from Medical Board held on Thursday July 24th 1919.**

**4071 Pte. W. Wheeler**

**Recommended discharge from the Army.**

W. Wheeler

G.R. 4071

P. & R.C.



5861/10

nd)

nd)

St. Mary's Con Aux. Hospital  
Roehampton.

15th April 9

4071 Pte. W. Wheeler

134

4071 W. Wheeler

£4. 0. 0.

**Notification to the Officer i/c Records of the Approval of a Soldier's Discharge under Paragraph 392 (xvi.), King's Regulations, by an Officer i/c Hospital, or under Paragraph 392 (xvi.) or (xvii.), King's Regulations, by an O.C. Discharge Centre.**

NOTE—Army Forms W. 3972A, B and C are issued in sets of three, and are so arranged that Part I. of each Army Form can be completed at the same time by the O.C. Discharge Centre or Officer i/c Hospital, and Part II. of Army Forms W. 3972B and C by the Officer i/c Records, with the use of carbon paper.

**PART I.**

To the Officer i/c Records 56 Victoria St SW.  
(for transmission to the O.C. unit).

The soldier named below has appeared before a Medical Board at this Station, and his discharge from the Service has **this day** been approved. The discharge will be confirmed for the date\* on this notification.

No. 4071 Rank Pte

Name Wheeler Dalter  
(Surname) (Christian names in full)

Unit and Corps 1st Newfoundland

His address † on } Jacksons Cove, Green Bay  
discharge will be } Newfoundland

Army Forms W. 3972C, B. 179A, A and C1, B. 178, D. 400, W. 3463A, W. 4463B, B. 122 or temporary documents, for the above-named soldier are forwarded herewith.  
Army Forms B. 103, B. 120 and B. 122 are to be struck out by Officers i/c Hospitals in cases where a soldier has been admitted to hospital from Overseas.

Discharge Centre § or Hospital St George's Hospital  
from which discharged

Date 24 APR 1919 Col. R.A.M.C.



O.C. Discharge Centre §  
or Officer i/c Hospital.  
(Approving Officer.)

NOTE 1. \* At the date of discharge in the case of soldiers entitled to repatriation abroad, who are prepared to embark at the first available opportunity, will be with effect from the date of embarkation, or approximate date of disembarkation, the Officer i/c Hospital or the O.C. Discharge Centre will amend this notification in such cases to read as follows:—"The discharge will be confirmed with effect from the date of embarkation or approximate date of disembarkation."

The address in such cases is to be the soldier's address on furlough.

NOTE 2. † The address given is to be that to which the soldier wishes his discharge documents, any pay that may be due to him, and any communication from the Ministry of Pensions, to be forwarded, except in the case of repatriation (see NOTE 1 above).

NOTE 3. ‡ Army Forms B. 179c and W. 3463B are only forwarded in cases of discharge from hospital.

§ Strike out whichever inapplicable.

**PART II.**

O.C. \_\_\_\_\_

Date for which discharge } \_\_\_\_\_ 191\_\_\_\_  
has been confirmed }

Para. and sub-para. of K.R. under } \_\_\_\_\_  
which discharge has been confirmed }

Passed to you for publication in Part II. Orders.

Station \_\_\_\_\_

Date \_\_\_\_\_ 191\_\_\_\_ Officer i/c \_\_\_\_\_ Records.

NOTE.—In the case of repatriation, when the soldier is prepared to embark at the first available opportunity, the Officer i/c Records is to retain this Army Form with the soldier's documents until he has confirmed the discharge.

**Notification to the Officer i/c Records of the Approval of a Soldier's Discharge under Paragraph 392 (xvi.), King's Regulations, by an Officer i/c Hospital, or under Paragraph 392 (xvi.) or (xvii.), King's Regulations, by an O.C. Discharge Centre.**

NOTE.—Army Forms W. 3972a, b and c are issued in sets of three, and are so arranged that Part I. of each Army Form can be completed at the same time by the O.C. Discharge Centre or Officer i/c Hospital, and Part II. of W. 3972a and c by the Officer i/c Records, with the use of carbon paper.

**PART I.**

To the Officer i/c Records 55 Victoria St SW.  
(for transmission to the Regimental Paymaster.)

The soldier named below has appeared before a Medical Board at this Station, and his discharge from the Service has **this day** been approved. The discharge will be confirmed for the date\* on this notification.

No. 4071 Rank Plt  
Name Wheeler Walter  
(Surname) (Christian names in full)

Unit and Corps 1st Newfoundland  
His address † on discharge will be Jacksons Cove, Green Bay  
Newfoundland

Army Form O. 18230 † } for the soldier has been sent direct to the Regimental Paymaster.  
.. .. 1823E }

Discharge Centre † or Hospital }  
from which discharged

Date 24 APR 1919



[Signature] COLONEL, R.A.M.C.  
O.C. Discharge Centre †  
or Officer i/c Hospital.  
(Approving Officer.)

NOTE 1. As the date of discharge in the case of soldiers entitled to repatriation abroad who are prepared to embark at the first available opportunity will be with effect from the date of embarkation, or approximate date of disembarkation, the Officer i/c Hospital or the O.C. Discharge Centre will amend this notification in such cases to read as follows:—"The discharge will be confirmed with effect from the date of embarkation or approximate date of disembarkation."

The address in such cases is to be the soldier's address on furlough.

NOTE 2. †The address given is to be that to which the soldier wishes his discharge documents, any pay that may be due to him, and any communication from the Ministry of Pensions, to be forwarded, except in the case of repatriation (see NOTE 1 above).

† Strike out whichever inapplicable.

**PART II.**

Regimental Paymaster \_\_\_\_\_

Date for which discharge } \_\_\_\_\_ 191\_\_  
has been confirmed }

Para. and sub-para. of K.R. under } \_\_\_\_\_  
which discharge has been confirmed }

Passed to you for adjustment of the soldier's accounts.

Station \_\_\_\_\_

Date \_\_\_\_\_ 191\_\_ Officer i/c \_\_\_\_\_ Records.

NOTE.—In cases of repatriation, when the soldier is prepared to embark at the first available opportunity, this Army Form is not to be sent to the Regimental Paymaster until the discharge has been confirmed.

To Chief Paymaster  
Royal Newfoundland Regt  
Please remit the sum of  
£ pound to W. Wheeler

~~4071 W. Wheeler~~



No Objection

W. H. Nicholas Capt. for  
Lt. Col. Commandant,  
Queen Mary's Convalescent Hospital.

Roehampton

O. R. F 1-0-0

M.R. 16/4/19  
Receipt No. 2037

*Pay*

N.F.P./106.

NEWFOUNDLAND WAR CONTINGENT ASSOCIATION,

No. 1

34, Victoria Street,  
London, S.W. 1,

7662

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

*15th March 1919*

The following purchases have been made and E.F.Ms. despatched  
at the request and on account of (Regtl No) 4071 (Rank) \_\_\_\_\_  
(Name) Wheeler of The Royal Newfoundland Regt.,  
on the understanding that cost of such is to be recovered from his  
account

*Ret  
PMA 2*

*Cable*

£    s.    d.

12. 0

£ 12. 0

This amount will be included in claim to be forwarded to you  
at the end of the month.

CHECKED.  
*WR*  
*27/3/19*

PAY BOOK  
*18/1/19*  
*27/3/19*  
*MR*

*S. Knox*

Secretary.

**CONFIDENTIAL**

Army Form W. 3463a

**Report to the Employment Department, Ministry of Labour, on a Soldier's Discharge from a Central Hospital as physically unfit for further War Service under para. 392 (xvi.), King's Regulations.**

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Director of the Employment Department, Ministry of Labour, 1, Queen Anne's Chambers, Westminster, London, S.W.1.

**PART** Soldier's Name WHEELER Wallin  
(Surname) (Christian names in full)

**A.** Unit from which discharged 1st P Newfoundland  
Regimental Number 4041 Rank on discharge PL Age on discharge 19  
Married, widower with children, or single single  
Occupation before enlistment Fisherman  
Special qualifications (if any) for }  
employment in civil life }  
Nature and locality of employment desired undecided

Full postal address to which } Jackson Cove Green Bay  
proceeding on discharge } Newfoundland  
Name of Approved Society (if any) \_\_\_\_\_

**PART** Nature of medical unfitness \_\_\_\_\_

**B.** Service with Colours \_\_\_\_\_ years \_\_\_\_\_ days, of which \_\_\_\_\_ years  
\_\_\_\_\_ days were served abroad during the present war.

Military character \_\_\_\_\_

Anything against the soldier to render his recommendation undesirable \_\_\_\_\_

Date of discharge \_\_\_\_\_ 191 \_\_\_\_.

Station \_\_\_\_\_

Date \_\_\_\_\_ Officer i/c Records \_\_\_\_\_

To be completed by the Officer i/c Records.

**NOTE 1.**—As there is a representative of the Employment Department, Ministry of Labour, attached to each Discharge Centre, this Army Form is not to be sent to the Ministry of Labour, except in cases of discharge from Central Hospitals.

No. 15861/10

From:

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

NEWFOUNDLAND CONTINGENT

N.F.P./80.

To: Officer Commanding,  
Queen Mary's Con Aux. Hospital  
Rochampton.

15th April 1919

4071 Pte. W. Wheeler

With reference to the following telegram from the Minister of Militia, / / ( 134 )

"Pay to- 4071 W. Wheeler  
£4. 0. 0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

*A. D. Minnend*  
Chief Paymaster & O. i/c Records

ROEHAMPTON, S.W. 191

*2*  
16 APR 1919

I would suggest that the amount in question should be retained to the credit of the account of the man referred to in Minute /

*Deposited*  
*13/11/19*  
*W. H. Nicholls*  
Capt. for  
Lt. Col. Commandant,  
Queen Marys Convalescent Hospital.  
Rochampton  
16.4.19.

Ld Chief Paymaster

Newfoundland Post

Class remit to  
W. Wheeler. The

sum of £ 2 pounds

4071

W. Wheeler



Q.T. £2.0.0  
Receipt 1922

No objection, as a  
Special case. This man  
has been granted a  
week-end pass. -

H. H. Nicholson  
Capt. for  
Lt. Col. Commandant,  
Queen Marys Convalescent Hospital.

Roehampton

4-4-19.



Queen Marys Convalescent Hospital,  
Rochampton. 25-3-19

To Chief Paymaster

Newspaper and Pay Office

Please permit the  
sum of £2 pounds

To 40 N W Wheeler



No objection, as a  
special case

O.K. f2-0-0

M.R. 25/3/19

Receipt No. 1819

Rochampton

25.3.19.

W. B. Nicholas

Capt. for

Lt. Col. Commandant,

Queen Marys Convalescent Hospital.

No. \_\_\_\_\_

N.F.P./45

NEWFOUNDLAND CONTINGENT

To: Chief Paymaster and Officer i/c Records,  
Newfoundland Contingent  
53 Victoria Street,  
London, S.W.1

Please remit to W Wheeler.

the sum of £ 3 (three) pounds \_\_\_\_\_ s. (2. )  
on account of any balance that may be due to me.

Regtl. No. 4011 Rank Pte

Name W Wheeler

Approved No Objection



W. H. Nicholls Officer i/c  
Capt. for  
Lt. Col. Commandant, Hospital  
Queen Marys Convalescent Hospital.

Dated at Roehampton  
21. March 1919

*Handwritten signature/initials*

*Handwritten notes:*  
OK F 3-0-0  
Receipt 1763  
21-3/19

*Handwritten initials:* fya



Queen Mary's Auxiliary Hospital,  
Roehampton, S.W. 15

4th March, 1919.

The Paymaster,  
Sir,

Kindly allow me to draw from the credit due to me the sum  
of £2 for the purpose of purchasing a few articles.



The Master X of 4941, W. Wheeler  
1 Royal Newfoundland Regt  
Witness V. A. Dawson.

No Objection in this case, as a very  
usual case

W. H. Nicholson Capt. for  
Lt. Col. Commandant,  
Queen Mary's Convalescent Hospital.

Roehampton.  
4. 3. 19.

OK £2-00  
4/3/19  
R-1512

gca



Queen Mary's Auxiliary Hospital,  
Roehampton, S.W. 15

4th *March*, 1919.

The Paymaster,  
Sir,

Kindly allow me to draw from the credit due to me the sum  
of £2 for the purpose of purchasing a few articles.



*The Mark X of 4041, W. Wheeler  
1 Royal Newfoundland Regt  
Witness V. A. Dawson.*

*No Objection in this case, as a reg  
should care*

*W. H. Nicholson* Capt. for  
Lt. Col. Commandant,  
Queen Mary's Convalescent Hospital.

*Roehampton.  
4. 3. 19.*

*OK £2-00  
4/3/19  
R-1512*

*gca*

To Paymaster  
Royal Newfoundland Regt

Please remit To W Wheeler  
Sum of £. 10



OK £1.10.0  
P. 1962 MAR

~~To W Wheeler~~

No Objections.

W. A. Nicholas  
Capt. for  
Lt. Col. Commandant,  
Queen Marys Convalescent Hospital.

Roshampton. 8 - APR 1919

To Chief P. Master

Royal Newfoundland Regt.

Please forward the sum of 2 pounds

on account due to me 4071

OK f 2-0-0 W.R. 1919



Mr W. Wheller

Receipt No. 1330

Royal Newfoundland Regt

No objection in this case

W. H. Nicholson

Capt. for

Lt. Col. Commandant,

Queen Marys Convalescent Hospitals

Roehampton

15  
2  
19

NEWFOUNDLAND CONTINGENT.  
PAY & RECORDS OFFICE.  
Ref. Nos. IN 847  
Rec'd 25 JAN 1919  
Ack'd Jan 24<sup>th</sup> 1919.  
Ref. Nos. OUT 1863/10/Pra  
Chq. 11587

P/48.

To  
Regimental Paymaster  
1st Royal Newfoundland

Sir  
Will you please supply  
me with £2. (two pounds)  
out of my credits

I am,

Sir,

Yours Obediently  
The Wheeler W.

Wheeler  
Wheeler

4071

1st. Batt. R. N.F.L.D.

O.K. £2.0.0 N.R.  
27/1/19



Approved please

G. J. Smith

Registrar, Military Hospital,  
Bethnal Green, N.E.



No. 1863/10/P&A

NEWFOUNDLAND CONTINGENT

N.F.P/48.

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

To: Officer Commanding,

Military Hospital,  
Bethnal Green.

31st Jan: 1919.

With reference to request of (No) 4071 (Rank) Pte.

(Name) W. Wheeler

Cheque No. 11587 for

£ 2-0-0 is enclosed for payment to this Soldier as may  
be deemed fit.

Kindly complete receipt form on back of cheque before  
presenting at a Bank.

on account of any balance that may be due to me.

Regt No. \_\_\_\_\_ Rank \_\_\_\_\_

Chief Paymaster & O. i/c Records.

Approved \_\_\_\_\_  
Officer i/c.,

Hospital.

Dated at \_\_\_\_\_

3645/5/P&A

Forms  
C. 248  
03

**ENCLOSURE**  
**MEMORANDUM.**

From CHIEF PAYMASTER & OFFICER I/C. RECORDS.  
NEWFOUNDLAND CONTINGENT,  
83, VICTORIA STREET,  
LONDON, S.W. 1.  
ENGLAND.  
To O.i/c. Q.M. Aux. Hospital,  
Roehampton.

From *Commandant,*  
*Queen Marys Convalescent Hospital,*  
*Roehampton.*  
To *Paymaster, N.C.*  
*58 Victoria Street,*  
*ANSWER. Sw.*

FM/FK.

Pay & Record Office.

*Roehampton.*

5th March 1919.

*1919*  
*5th March 1919.*

4071. PTE. W. WHEELER.  
R. NEWFOUNDLAND REGT.

With reference to the attached Minutes: Cheque £2:0:0: (two pounds) is enclosed for payment to the above named soldier. Kindly acknowledge receipt.

*Received Cheque*  
*value £2. (Two pounds)*  
*number 11587.*

*4071 R W Wheeler*

~~*The amount of*~~  
~~*number 11587 Pte. W. Wheeler*~~

*J. B. Anderson*

Capt.

Asst. Paymaster.

For Chief Paymaster & O.i/c. Recds.

*3*

*Receipt of Pte Wheeler*  
*herewith.*

*H. A. Nicholas*  
Capt. for  
Lt. Col. Commandant,  
Queen Marys Convalescent Hospital.

To:-

Chief Paymaster

Newfoundland Contingent

58. Victoria Street.

Attached Cheque No. 11587 is  
returned to you please as  
4071 Pte. Wheeler has now  
been transferred to  
Roehampton Hospital.

*R. A. M. C.*

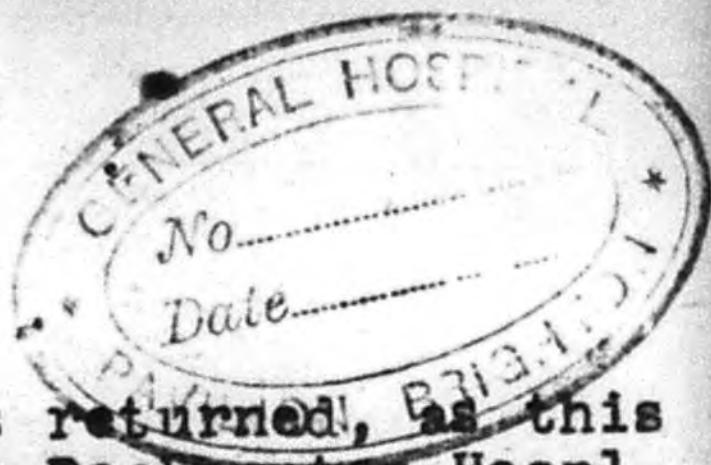
Capt. R. A. M. C.  
Registrar  
for Officer Commanding  
Military Hospital  
Bethnal Green

28.2.19.

E2.



O.C., Military Hospl.  
Bethnal Green.  
London E.2.



The attached is returned, as this man was transferred to Reehampton Hospl. 12-2-19. kindly acknowledge receipt, please.

*[Handwritten Signature]*  
Colonel A.M.S. for.  
O.C. Pavilion General Hospl.  
Brighton.

Brighton.  
27-2-19.



To: -

Officer Commanding

The Pavilion Hospital

Brighton.



Attached Cheque No.11587 for £2.0.0.  
is passed to you please as the man  
referred to is in the hospital under  
your charge. Kindly obtain the  
signature of Pte.Wheeler on the back  
of attached memo and return to this  
office.

*R.A.M.C.*

Capt.R.A.M.C.  
for Officer Commanding  
Military Hospital  
Bethnal Green  
E2.

11.2.19.

To: -

Officer Commanding

The Pavilion Hospital

Brighton.

Attached Cheque No. 11587 for £2.0.0.  
is passed to you please as the man  
referred to is in the hospital under  
your charge. Kindly obtain the  
signature of Pte. Wheeler on the back  
of attached memo and return to this  
office.

*R. A. M. C.*

Capt. R. A. M. C.  
for Officer Commanding  
Military Hospital  
Bethnal Green  
E2.

11.2.19.



No. 1863/10/P&A

NEWFOUNDLAND CONTINGENT

*Pavilion Hospital*  
*Brighton* N.F.P/48.

To: Officer Commanding,  
Military Hospital,  
Bethnal Green.

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

31st Jan: 1919.

With reference to request of (No) 4071 (Rank) Pte.

(Name) W. Wheeler

Cheque No. 11587 for

£ 2-0-0 is enclosed for payment to this Soldier as may  
be deemed fit.

Kindly complete receipt form on back of cheque before  
presenting at a Bank.



*J. H. Marshall*  
Chief Paymaster & O. i/c Records

3645/5/P&A

SUSPENSE | CLEARED

1901 - 2  
1/3/18

O.i/c. Q.M. Aux.Hospital,  
Rochampton.

FM/FK.

Pay & Record Office.

5th March 9.

4071. PTE.W.WHEELER.  
R.NEWFOUNDLAND REGT.

With reference to the  
attached Minutes: Cheque  
£2:0:0: (two pounds) is enclosed  
for payment to the above named  
soldier. Kindly acknowledge  
receipt.

Capt.  
Asst. Paymaster.  
For Chief Paymaster & O.i/c. Recds.





1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Walter Wheeler, Regl. No. 4071

hereby agree, until further notification by me, and in similar official form to make an Allotment of        Dollars and Twenty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Allotment begins December 1<sup>st</sup> 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
	Mother	Mrs John (Grace) Wheeler	Jackson's Cove Green Bay		60
Total Allotment, \$					60

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

Sig.) Walter Wheeler  
 Officer Commanding  
9 Company  
21 John's  
Nov 24<sup>th</sup> 1917

(S) Walter Wheeler  
 (Rank) Oke

Nº 3834 <sup>A</sup>



# 1ST. NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, Walter Wheeler, Regl. No. 4071

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and 25¢ Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Allotment begins December 1<sup>st</sup> 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3253	Mother	Mrs John (Grace) Wheeler	Jacksons Cove Green Bay	60
			Total Allotment, \$	60

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

Sig.) [Signature]  
Officer Commanding  
G. Company  
[Signature]  
1917

(Sig.) Walter Wheeler  
(Rank) O/C

Wheeler W.

4071

Pay Dept

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. *4071* Rank *Plt* Name *Wheeler W*  
 Date of Enlistment *3.11.17* Address *Silverdale* District *Lodge*  
 Occupation *Miner* Classification for Discharge *B* Medical Category *E*  
 Recommendation S.M.B. *Permanent Unfit* Disability Rating *65%*

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	1	Board 1st	" 2	
B 178a	1 D 400A	B 1915	2	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	1 B 103	ME 2	1		" 6	
B 179c	B 120	M 93		<i>34630 1</i>		

Date *July 26 1919*

O. C. Discharge Depot. *[Signature]*

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am *not* in a position to resume civilian occupation.

*W Wheeler*

Particulars passed to Vocational Officer for information and action.

Date *26-7-19*

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *£100.00*

(b) Clothing Supplied *[Signature]*

Date *28-7-19*

O i/c. Re-clothing.

54071

3. Transportation and Release Certificate. Warrant issued 20<sup>8</sup> 21 to ~~John~~ <sup>N.D.B. R.R.</sup> to his home  
The above named has been provided with Travelling Warrant No. ....  
at Richdale Travelling and Release Certificate No. 3774 issued.

Date 28-7-19 .....  
J.A. Snow  
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 11-8-19

Date 28-7-19 .....  
H. W. H.  
Depot Paymaster.

Discharge approved for 28-7-19 .....  
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
E 178	W 3494	B 122	1	Board 1st	" 2	1
B 178a	D 400A	B 1915		do 2nd	" 3	2 from B
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93			34639	1

Date 28-7-19 .....  
J.A. Snow  
Demobilization Officer.

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

Eligible for War Service Gratuity

Date JUL 28 1919 .....  
L. R. COOPER, CAPT.  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.  
Date Aug 15 1919 .....

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 071 Rank PLC Name Wheeler W  
 Date of Enlistment 3.11.17 Address Silverdale District Trinity  
 Occupation Miner Classification for Discharge B Medical Category SE  
 Recommendation S.M.B. Permanent Benefit Disability Rating 65%

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	1	Board 1st	" 2	
B 178a	D 400A	B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	34630.1			

Date July 26 1919

O. C. Discharge Depot. [Signature]

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

W Wheeler

Particulars passed to Vocational Officer for information and action.

Date 26-7-19

J. A. Snowball

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied [Signature]

Date 28-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. .... to his home  
 at Schweidale Travelling and Release Certificate No. 3774 issued.

Date 28-7-19 ..... J.A. Snow  
 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 11-8-19

Date 28-7-19 ..... J.A. Snow  
 Depot Paymaster.

Discharge approved for 28-7-19

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
F 178	W 3494	B 122	1	Board 1st	" 2	1
B 178a	1 D 400A	2 B 1915		do 2nd	" 3	2
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	1 B 103	1 ME 2			" 6	
B 179c	B 120	M 93			34639	1

Date 28-7-19 ..... J.A. Snow  
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
 Officer i/c Records.  
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

JUL 28 1919

Date ..... L. R. COOPER, CAPT,  
 O. C. Discharge Depot.

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

Date .....

**Report to the Local Committees of the War Pensions Committee  
on Soldiers Discharged.**

- (a) From Central Hospitals or Discharge Centres, as no longer physically fit for war service, under para. 392(xvi.), King's Regulations.
- (b) From Discharge Centres, as surplus to military requirements (having suffered impairment since entry into the Service) under para. 392 (xvi.a), King's Regulations.

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Local Committee of the Area in which the man intends to reside.

**PART** Soldier's Name WHEELER Walter  
(Surname) (Christian names in full)

**A.** Unit from which discharged 1<sup>st</sup> B Newfoundland  
 Regimental Number 4641 Rank on discharge PL Age on discharge 19  
 Married, widower with children, or single Single  
 Occupation before enlistment Fisherman  
 Special qualifications (if any) for }  
 employment in civil life } —  
 Nature and locality of employment desired Undecided

Full postal address to which } Jackson Cove Green Bay  
 proceeding on discharge } Newfoundland  
 Name of Approved Society (if any) —

**PART** Nature of medical unfitness \_\_\_\_\_  
**B.** \_\_\_\_\_

**To be completed by the Officer i/c Records.**

Service with Colours \_\_\_\_\_ years \_\_\_\_\_ days, of which \_\_\_\_\_ years  
 \_\_\_\_\_ days were served abroad during the present war.

Military character \_\_\_\_\_  
 Anything against the soldier to render his recommendation undesirable \_\_\_\_\_  
 Date of discharge \_\_\_\_\_ 191\_\_\_\_.  
 Station \_\_\_\_\_  
 Date \_\_\_\_\_ Officer i/c Records \_\_\_\_\_

NOTE 1.—Part B. of this Army Form and Army Form W. 3463B can be completed at the same time by the use of carbon paper.  
 NOTE 2.—Part A of this Army Form is to be completed by the O.C. unit in all cases of soldiers sent to a Discharge Centre with a view to discharge or transfer to the Reserve, as it will not be known until a soldier is medically boarded whether he may not be discharged under Para. 392 (xvi.) or (xvi.a), King's Regulations.



# The Royal Newfoundland Regiment

Class for Demobilization:—

*B*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*26.7.19*

Regimental No.

*4071*

Name

*Wheeler W.*

Address

*Jackson's Cove Green Bay*

Present Medical Category

*E*

Recommended for:—

(a) ~~Immediate discharge~~

(b) Standing Medical Board

Members of Board

O.C. Discharge Depot.

*Johnson*

Senior Medical Officer

*D.W. Borden*

M.O. Depot

August 18, 1919

#4071 Pte. Walter Wheeler,  
Silverdale,  
Tgate Dist.

Dear Sir:-

Please find enclosed Discharge Certificate #3774.

Yours truly,

Captain & Paymaster.



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name *Walter* 2. Surname *Wheeler*

3. Rank *Pte* 4. Regtl. No. *4071*

5. Address in full to which future payments of gratuity are to be forwarded. *Jackson's Cove, N.T., B*

6. Date of enlistment in the Regiment. *Aug 21/17*

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

8. Relationship of such dependents.

9. Address in full of such dependents.

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

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

12. Give total length of time which you served on active service, whether in Nfld. or overseas. *From Aug 21/17 to July 21/19*

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

*No.*

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

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

*No.*

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

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

*No.*

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

*No.*

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

19. Are you now serving in the Regt.? If not give - (a) date of discharge; (b) Reason for discharge.

*No.*  
*July 21/19*  
*Blueberry*      *Demobilization*

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

*France - from May 1/18 to Dec 28/18*

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

*No.*

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

## 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 attend the re-establishment  
school

*W. Wheeler*  
Signature of Man.

Reg. No. 4071

*A. Hunter*

Signature of the Vocational Officer or his Representative.

Place

*St. Johns.*

Date

*July 28th* 191*9*

## 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 attend the re-establishment  
school

*W. Wheeler*  
Signature of Man.

Reg. No. 4071

*A. Hunter*

Signature of the Vocational Officer or his Representative.

Place St. Johns.

Date July 28th 1919



**DEPARTMENT OF MILITIA**

ST. JOHN'S, NEWFOUNDLAND

September 19th., 1919.

To:- The Paymaster.

4071, Pte. W. Wheeler.

Please note that the marginally noted man  
was DISCHARGED from the General Hospital  
September 19th., 1919.

A. M. B.

WWB/ME

February 19<sup>th</sup> 1920

To:- Major Howley  
O. I. C. Pay and Records  
Captain Murphy  
Employment Officer  
G. Pomeroy )  
( Accountants  
C. McGrath )

From:- V. O.

Walter Wheeler 4071

This is to certify that the man named  
in the margin will complete his course at  
on the 28th of February. If any extension is,  
in the meantime granted I will notify you.

*W. W. Blackall*  
Vocational Officer.





SEPARATION ALLOWANCE.

Claimant *John J. wheels* ..... father:  
On account of *Walter J. M. wheels* No. *4071* Rank *Pte.*

Decision *Refused*  
*applicant not totally incapacitated*  
.....  
.....

Date *June 28/1920*

*W. R. Rendell* ..... Col.  
*M. Howley* ..... Major

Instructions.....  
.....  
.....

Allotment of *60* <sup>¢</sup> per day payable to *Mrs John wheels*  
his mother from *11/12/17* to *11/8/19*.  
Discontinued on account of *being discharged*.

*R. G. Sumner*.....  
.....

Jacksons Cove  
Green Bay

10531

April 15<sup>th</sup> 1920

This is to Certify, That

John J. Wheeler. Who's name is  
Signed to Accompany Refutations  
have made this Declaration before me,  
and that I am personally acquainted  
with him & his Family, Having known <sup>him</sup> for  
the past 40 years, and that the answers  
to the questions I see correct as far as I  
know, and I know as much about it as  
anyone beside himself. I am attaching the  
note, as it is impossible for him to get  
a Magistrate, Notary public, Barrister, or  
Justice of the Peace's signature at this time.  
Any other questions put to me concerning  
him that I can answer, I will gladly  
do so

Signed

John W. Knight  
Jacksons Cove

ROYAL NEWFOUNDLAND REGIMENT

(Separation Allowance Branch.)

FATHER

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:

The Paymaster  
Separation Allowance Branch  
St. John's, Nfld.

(1) Name in full of soldier Walter James Milligan Wheeler Rank Private Reg't or Unit Newfoundland Reg't No 4071

(2) Age of soldier Twenty one years Married or Single Single

(3) Name in full of father of soldier John James Wheeler Age 70 Occupation At present No Employment Permanent Address Silverdale via Jacksons Cove G.B.

(4) If you are a chronic invalid and totally incapacitated, state nature of malady (Medical Certificate must be enclosed with this document, stating from what date applicant has been totally incapacitated, and for how long incapacity is likely to continue.

(5) Names of your other children in full Occupation Married or single

<u>William Wheeler</u>	<u>Jacksons Cove</u>	<u>Manned</u>
<u>Edward S. Wheeler</u>	<u>Pelley Island</u>	<u>" "</u>
<u>Vivian Wheeler</u>	<u>Jacksons Cove</u>	<u>" "</u>
<u>Herbert John Wheeler</u>	<u>Halifax</u>	<u>Widow</u>
<u>Mary Ann Bennett</u>	<u>"</u>	<u>married</u>
<u>Lily J. Snow</u>	<u>"</u>	<u>"</u>

(6) State amount earned by yourself per month  
About 10 Dollars per month for past six months

(7) State date and place of death of your wife.  
Jan'y 7th 1920 Silverdale

(8) State amount and source of any other income  
None

(9) What is the value of your real property.  
Have no property except House and Small lot land when I live

(10) State actual amount contributed by soldier during year prior to enlistment.  
Cannot say. I was away from home myself at time

(11) Was this amount contributed weekly or Monthly?

Registered in Registrar's Office  
 Ernest Wheeler  
 Married. June 8 1920

(12) Did this amount include payment of son's board, etc?

(13) State your son's trade or occupation prior to enlistment.

*Working at Lilt Cove Mine*

(14) State amount of his wages per week. *I dont know*

(15) State name and address of his last employer.

*J. M. Jackman Lilt Cove*

(16) State amount of support monthly from son since enlistment. *From \$16<sup>60</sup> to \$18<sup>60</sup> for 16 months*

(17) State amount of "Assigned Pay" received by you from son monthly

*as last answer*

(18) From what date have you received "Assigned Pay"?

*Jan'y 15th 1918 to May 18th 1919*

(19) Actual amount contributed by other children

Weekly

Monthly

*None*

(20) If not receiving support from other children, state cause. Answer fully.

*Other Children have all they can do to support themselves & families*

(21) Are any of these children in your employ?

*no*

(22) Have you made a previous claim for Separation Allowance? If so, why. Give particulars.

*no*

(23) What is the value of your personal property?

*no value*

(24) With whom do you reside at present?

*alone*

(25) Are you already in receipt of Separation Allowance from any source. If so, how much?

*no*

(26) Are you in receipt of assistance from any Patriotic Fund. If so, how much? *No*

(27) Was the soldier at the time of enlistment an employe of the Newfoundland Government? *No*

(28) In what capacity and in what place.

(29) Is he in receipt of a salary as such while serving in the 1st Nfld. Regt. If so, how much? *No*

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

Signature of applicant *John J. Wheeler*

Place of Residence *Silverdale via Jacksons Cove Green Bay*

Declared and subscribed before me at-----  
this-----day of-----19

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

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 soldier first mentioned above is the sole support of the applicant.

Signature of Clergyman *Captain Janet Pihl. C.A.*

Signature of member of Patriotic Fund Committee-----

gmt / SMOR

July 24, 1920.

Mr. John J. Wheeler,  
Silverdale, Via  
Jackson's Cove  
Green Bay.

Dear Sir:-

With reference to your application for Separation Allowance I beg to state that same cannot be granted you because you are not totally incapacitated, and consequently not totally dependent on your son.

Yours faithfully,

Major  
Paymaster.

Feb. 7th. 18

Mrs. J.J. Wheeler,  
Jackson's Cove,  
Green Bay.

Dear Madam:

With reference to your recent enquiry regarding your son's allotment, I beg to inform you that your son, No. 4071, Pte. Walter Wheeler, declared his allotment to start from Dec. 1st. 1917, not from November, which was the date of his enlistment, therefore that accounts for you only receiving one cheque on his account up to the date of your letter.

Yours truly,



4071 Wheeler

P.M.

Please make one pay to S.Y.

3/7/19

A. J. [Signature] to S.Y.

December 23rd 1919.

Major Howley  
O. I. C. Records

Please pay to W. Wheeler, 4071  
the sum of four dollars  
in payment of arrears of allowance to January 3rd 1920  
and charge same to Civil ReOestablishment Committee

\$4.00

Pension \$22.50

ACCOUNT	
CH. NO.	25059
INITIALS	JW
INL. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

*W. Wheeler*

*W. Wheeler*

*W. Wheeler*

.....  
Vocational Officer

Capo Byrne.

Re:

4071. W. Wheeler:-  
undergoing treatment  
at Turpin Hoop.

I received the  
check ~~in~~ amount  
he paid from  
his war gratuity

W. H. Bosson  
Lieutenant

14.00.00



Per

Payment of Turkey Land  
Dollars (\$200) on  
account of W's gratuity  
authorized by Dept  
Ch. B.  
pres.

14/10/19

P. O. Box 220

314 WATER STREET

ST. JOHN'S, N.F.,

Oct 11 1919

Mr. Walter Wheeler

ex Pot. no 4071

Bought of

**WYLAN BROTHERS**

WHOLESALE AND RETAIL

GENERAL IMPORTERS OF LADIES' AND MEN'S WEAR

SPECIALTIES IN LADIES' AND MEN'S SUITS

1 Overcoat

42 00

I hereby agree to have  
same paid for from  
my War Gratuity money.

Walter Wheeler 4071

Received Payment  
Oct 27/19

Wylan



WWB/CGM

Oct 7th 1919

Major Howley  
O. I. C. Records

Please pay to Messrs WYLAN BROS.  
the sum of forty five dollars  
in payment of account of Walter Wheeler, No 4071  
and charge same to Civil Re-establishment Committee

\$45.00

ACCT. NO.	
ACCOUNT	
CH. NO.	14328
IND. LEDGER	INIT. LG.
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

*J. C. S.*  
*G. W. McCall.*  
Vocational Officer

Received Payment  
Julius Wylan  
Oct-7/19



Feb 28th 1920

Major Howley  
O. I. C. Records

Please pay to W. Wheeler, 4071  
the sum of four dollars  
in payment of arrears of allowance for week ended this date  
and charge same to Civil Re-establishment Committee

*J.B.A.*

\$4.00

Pension, \$32.50

*W. Wheeler*  
Vocational Officer

30877	<i>Fee</i>

*W. Wheeler*

March 20th 1920

Major Howley  
O. I. C. Records

Please pay to W. Wheeler, 4071  
the sum of two dollars and thirty three cents  
in payment of allowance for week ended this date  
and charge same to Civil Re-establishment Committee

\$2.33

Pension

\$50.00

ACCOUNT	
CHK. NO.	32559
INITIALS	Jaw
INL. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

*W. B. Marshall*

Vocational Officer

*W. Wheeler*

March 13th 1920

Major Howley  
O. I. C. Records

Please pay to W. Wheeler, 4071  
the sum of two dollars and thirty three cents  
in payment of allowance for week ended this date  
and charge same to Civil Re-establishment Committee

\$2.33

Pension \$50.00

ACCOUNT	32010	INITIALS	Jew
CR. NO.			
INL. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

*W. Wheeler*

*Woodhall*

Vocational Officer

*W. Wheeler*



Major Howley,  
O.I.C. Pay and Records.

March 6, 1920.

Please pay W. Wheeler, ~~442x~~ 4071  
the sum of six dollars and forty two cents,  
in payment of allowances for week ending this date,  
and charge same to Civil Re-establishment Committee.

\$6.42

*[Handwritten signature]*

.....  
for Vocational Officer.

ACCOUNT	<i>Lut</i>
CHK NO. 31421	INITIALS
INV LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN LEDGER	INITIALS

*[Handwritten signature]*  
*W. Wheeler* *[Handwritten initials]*

May 29th 1920

Major Howley  
O. I. C. Records

Please pay to W? Wheeler, 4071  
the sum of seven dollars  
in payment of allowance for week ended this date  
and charge same to Civil Re-establishment Committee

\$7.00

Pension \$30.00

A.C.S.

W. B. McCall,

Vocational Officer

ACCOUNT	38542	INITIALS	
CHK. NO.		INITIALS	
TRK. LEADER		INITIALS	
PAY LEADER		INITIALS	
GEN. LEADER		INITIALS	

W. Wheeler

**Civil Re-Establishment Committee.**  
( DEPARTMENT OF MILITIA. )

**FORM R**  
**16-12-19-2000**

May 22nd 1920

**MAJOR HOWLEY**  
Officer in Charge of Pay and Records.

Please pay to **W. Wheeler, 4071**  
the sum of **seven dollars**  
in payment of allowance for week ended this date  
in connection with re-education.

\$7.00

Pension Monthly \$30.00

Wages Monthly

*A.C.A.*

ACCOUNT	
CHK NO	38046
INTL. LEDGER	
PAY LEDGER	
GEN. LEDGER	

*J. B. Mitchell*  
VOCATIONAL OFFICER.

*W. Wheeler*

**Civil Re-Establishment Committee.**  
( DEPARTMENT OF MILITIA. )

FORM R  
16-11-19-300

December 23rd., 1919.

**MAJOR HOWLEY**

Officer in Charge of Pay and Records.

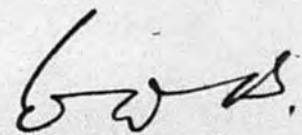
Please pay to **W. Wheeler,** 4071  
the sum of five dollars and eighty two cents  
in payment of allowance for two weeks ended January 3rd., 1920.  
in connection with re-education.

\$5.82

Pension Monthly \$32.50

Wages Monthly

**CANCELLED.**



VOCATIONAL OFFICER.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70<sup>00</sup>.

July 31 1919

Received from the First Newfoundland Regiment

the sum of Seventy Dollars.

on account of Pay. W. S. G.  
~~balance~~

W. Wheeler

Ch. No. 4223	Initials. EW
Pay Ledger 316	Initials. W
Gen. Ledger	Initials.

Regtl. No.

Rank



No. 4071

Rank Pfc

Name W Wheeler

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 42<sup>00</sup>

Oct 14 1919

Received from the First Newfoundland Regiment

the sum of Forty two Dollars.

on account of Pay. W.L.G.  
~~balance~~

Ch. No. 14753	Initials... Ew
Pay Ledger... 316	Initials... Ew
Gen. Ledger.....	Initials.....

Julius Weylan  
Regtl. No. Rank  
Oct 27/19

No. 4071

Rank

Pl

Name

W Wheeler



**Casualty Form - Active Service.**

Regiment or Corps *21. Royal Newfoundland*

Rank *Pte* Surname *Wheeler* Christian Name *Walter*

Religion *Meth-* Age on Enlistment *19* years *8* months

Enlisted (a) *2.11.17* Terms of Service (a) *Duration* Service reckons from (a) *2.11.17*

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
or Corps Trade and rate *25 MAY 1918*

Occupation *Miner* *W. H. Currier* Signature of Officer



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked	<i>25-5-18</i>		
		Disembarked	<i>27-5-18</i>		
		Joined Battalion	<i>31-5-18</i>		
		Wounded in Action		<i>20/10/18</i>	
	<i>11 C.C. Co. Dukes</i>		<i>File</i>	<i>21/10/18</i>	<i>E 28538</i>
	<i>80th (L) Coy. New Brunswick (F.C.)</i>		<i>Winnipeg</i>	<i>22/10/18</i>	<i>W 3034 7/18</i>
	<i>Jan Brydel Transferred to England</i>		<i>"</i>	<i>24/11/18</i>	<i>W 3038</i>
			<i>Med Capt</i>		
			<i>For Officer i/c No 1 Infantry Section</i>		
			<i>3rd Echelon, General Headquarters</i>		

(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.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4071 Rank Pte Name Wheeler W.  
 Intended place of residence Silverdale  
 2. Occupation Mines  
 Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of

### DEMOBILIZATION

*Eligible for War Service Gratuity*

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

Place, ST. JOHN'S .....  
 Date 28-7-19 .....  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S .....  
 Date 28-7-19 .....  
 Signature of soldier W. Wheeler  
 Signature of witness J. A. Howcroft

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S .....  
 Date 26-7-19 .....  
 Signature of soldier W. Wheeler  
 Signature of witness W. Beaton

### STATEMENT OF SERVICE

7. Enlisted for service 3-11-17 ..... No. of days on Military  
 Discharged from service 28-7-19 ..... Plus 14 days Service 647

### 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 .....  
 Date JUL 28 1919 .....  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S .....  
 Date August 11/1919 .....  
 Officer in Charge  
 The Royal Newfoundland Regiment

*2079/3774*

28  
31  
31  
28  
31  
20  
31  
20  
31  
11

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

# MEDICAL HISTORY

OF

Surname Wheeler Christian Name Wallis

ch  
F.A.T.


34 2/11/18

Table I.—GENERAL TABLE.

Birthplace:—Parish Selkirk N. D. Bay. County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 3 day of Nov 1917		on	day of 191
	at Grand Falls		at	
Declared Age	19 years	8 Mos.	years	days
Trade or Occupation	Miner			
Height	5 feet	5 inches	feet	inches
Weight		120 lbs.		lbs.
Chest Measurement	Girth when fully expanded... 35 inches			inches
	Range of Expansion... 3 inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=		R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>L. Munro Parsons</u>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at Grand Falls		at	
	on 3 day of Nov 1917		on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	1st Nfld Regt 4071			
	ROYAL NEWFOUNDLAND REGIMENT			
Became non-effective by	on	day of 191	on	day of 191
(Signature)	<u>[Signature]</u>			
(Rank)				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Bethnal Green Military Hospital Cambridge Road, E.	2	11	18	4	7	19	<i>J.S.W.</i> Amp. leg L,	94	Amp. above knee. Healed.	<i>W. Bell</i>
<b>General Hospital Pavilion, Brighton</b>	4	2	19	12	2	19	Amp. L thigh	8	Transferred to Prochaupton	<i>J. Brown</i> Capt. R.A.M.C.
	12	2	19	24	4	19	Amp. left leg	72	ARTIFICIAL LIMB PROVIDED.	<i>J. J. Barrow</i> Q.M. for Captain, Adjutant Queen Mary's Convalescent Hospital.

**Table III.—Boards: Courts 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
6-11-17	Vacc 20
10-11-17	TAB 20
21-11-17	" 20

*It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as B for discharge on Demobilisation. Medical category*

24.7.19.  
Date of S.M.B.

*[Signature]*  
Assistant Adjutant  
Discharge Dept. New Brunswick

**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

**TREATMENT CARD.**

Name Whuler

Late Regtl. No., Rank and Corps 404 Pto

Home Address Newfoundland  
Newfoundland

Hospital from which discharged Queen Mary's Convalescent Hospital,  
Roehampton.

Date of discharge 24 APR 1919

Nature of disability Amputation left leg

This card is to be despatched to the Local War Pensions, etc., Committee, where the man proposes to reside when he is about to be invalided from the Service and discharged from Hospital.

In the case of a man who has previously been discharged from the Service, the card will be clearly endorsed in red ink—"Post-discharge case."

A copy of this card is to be given to the man on his discharge from Hospital.

[P.T.O.]

II. Particulars of treatment recommended [in-patient or out-patient, and hospital at which it should be given, &c.—see A.C.I. on the subject].



Nil

W. H. Nicholson  
ant. for

Place \_\_\_\_\_

Signature \_\_\_\_\_  
M. Col. Commandant,

Date \_\_\_\_\_

Queen Marys Convalescent Hospital  
Officer i/c Hospital

On receipt of this card the Local Committee will arrange for the treatment above indicated with the appropriate hospital, and send the card to the Officer i/c that hospital.

III. Particulars of treatment given:—

Effect of treatment given:—

Place \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Officer i/c Hospital.

On completion of treatment this card is to be forwarded by the Officer i/c Hospital to the Local War Pensioners, &c., Committee, who will retain it for record.

Reg. No. 4071 Rank Plt Name Wheeler W. F.

Attested 3-11-17 Address St Clouds R.D. Bay.

Allotment 60¢ Allottee Mrs. John Wheeler Moore

Date of Allotment 1-12-17 Returned from Overseas \_\_\_\_\_

Embarked for Overseas 11 | 12 | 17 Cause \_\_\_\_\_

Vac. 7-11-17 since 1. 10-11-17 2<sup>nd</sup> 21-11-17  
M.L. 25-11-17 to 2-12-17



# STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 1271.....

Rank. Pte......

Name. W. Hasler W. Carter.....  
(Surname) (Christian Names)

Unit and Corps } 1st R. Newfoundland

Note.—Before answering the questions below, the soldier is to note that

- (a) The statements made by him will be checked by official records.
- (b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?
- (b) In what capacity?

Enlisted Oct. 1914.  
France 6 mths.  
Pte.

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

G.S.W. 9<sup>th</sup> Oct 1918.  
then 1/2 mths causing loss  
of left leg above knee.  
wound in left side over  
right toe causing pain.

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

P. P. S. Yates  
25 Jan

sector  
Rover

Bethnal Green War Hosp

London

Pavilion

Brighton

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

✓

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

✓

7. What is the name and address of your last employer before joining the Army?

Iron Employer

8. (a) What was your occupation before joining the Army?

fisherman

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

ROEHAMPTON, S. W.

Station .....

Signed (Soldier) *W. Wheeler* .....

Date .....

Signed *J. Blank Sgt* .....

## Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

**INSTRUCTIONS.**—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or P.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.3.

<b>PART</b>	Soldier's Name	<u>WHEELER</u>	<u>Wallis</u>
		(Surname)	(Christian names in full)
<b>A.</b>	Unit from which discharged	<u>1st B Newfoundland</u>	
	Regimental Number	<u>4041</u>	Rank on discharge <u>Pl</u> Age on discharge <u>19</u>
	Married, widower with children, or single	<u>Single</u>	
	Occupation before enlistment	<u>Fisherman</u>	
	Special qualifications (if any) for employment in civil life	}	
	Nature and locality of employment desired	<u>Undecided</u>	
	Full postal address to which proceeding on discharge	} <u>Jackson Cove Green Bay</u> <u>Newfoundland</u>	
	Name of Approved Society (if any)	<u>—</u>	

<b>PART</b>	Period of service, and in what Corps	Regiment	Years	Days	All service abroad, with Stations	Years	Days
	Disallowed				India		
	Service towards pension				South Africa		

**PART C.** Number of G.C. badges — medals —

Wounds and actions in which received —

**PART D.** Where born (parish, town and county), and date as above 23/9/1899

Colour of hair on discharge Fair Colour of eyes Brown Complexion Fair

Christian name of father John

Christian name of mother Grace

**NOTE.**—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Forms W. 3463A and B are to be completed by the Officer i/c hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

[P.T.O.]

Wife's maiden name in full  
Date and place of marriage

Christian names  
of children and  
dates of birth

Date and place of 1st enlistment

1917

St John's Newfoundland

Figure on discharge

Medium

Weight 57-5

Descriptive and other distinguishing marks

Left eye missing

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full)

Walter Wheeler

Holder under a reg  
Witness A. Wilson

ROEHAMPTON, S.W.

Rank P4

Station

Date 14 FEB 1919

F/C  
Remy

I certify that the above-named soldier signed the foregoing declaration in my presence

S. C. Rigg

(Rank) Capt

O.C. unit or Officer i/c Hospital. for

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

St. Mary's Convalescent Hospital  
Lt. Col. Commandant

The soldier named overleaf was

Discharged under para. \_\_\_\_\_ King's Regulations

or

Transferred to Class \* \_\_\_\_\_ of the Reserve.

Strike out  
whichever  
inapplicable.

Military character \_\_\_\_\_

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

Officer i/c Records.

Station \_\_\_\_\_

Date \_\_\_\_\_ 191 .

\* Insert P., or P.(T).

# Report of Medical Board.

Station St. John's, Nfld. Date **JULY 24th., 1919.**  
 No. and Rank **4071 PRIVATE** Age **21** Height **5'8"**  
 Name **WHEELER. W.** Complexion **FAIR**  
 Unit Royal Newfoundland Eyes **BROWN** Hair **DARK BROWN**  
 Address **JACKSONS COVE. N.D.B.**  
 Former Trade  
 Enlisted at On (The Board will please note how the soldier's appearance corresponds with above description).  
 Disease or Disability Original **G.S.W. LEFT LEG. AMPUTATION BELOW KNEE.**

Subsequent

Present Condition (Compare with previous Board)

**WEARING ARTIFICIAL LIMB WHICH IS BROKEN. UNABLE TO WEAR OTHER LIMB AS HE STATES IT IS TOO TIGHT. COMPLAINS OF PAIN IN GREAT TOE OF RIGHT FOOT ON WALKING (SHRAPNEL WOUND)**

**(LEG AMPUTATED ABOVE KNEE ABOUT LOWER THIRD OF THIGH) NOT AS ABOVE.**

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

**65%**

**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?

**65%**

Recommendation of Medical Board

Members of Board

**(SGD) S. B. O'REILLY.****(SGD) CLUNY MACPHERSON MAJOR****J. S. TAIT****L. PATTERSON. MAJOR.**

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 *Walter Wheeler*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4071*

Intended address *Jacksons Cove, Green Bay*

Height on discharge *5* Feet *8*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *Left Leg Amputated*

Figure on discharge *medium*

Christian name of Father *John*

Christian name of Mother *Grace*

Wife's maiden name in full \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

Christian names of children \_\_\_\_\_

Place and date of soldier's birth *Jacksons Cove, March 23<sup>rd</sup>, 1898*

Nature and locality of civil employment required \_\_\_\_\_

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full)

*Walter Wheeler*

*Pt*  
(Rank)

Station **ST. JOHN'S.**

Date *21-7-19*

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.

Date

## C. 2.—Casualties.

## COLONIAL CONTINGENTS ONLY.

CR 4071  
Army Form W. 3026A

(Continuation Sheets are supplied separately.)

The Military

HOSPITAL, at Bethnal Green, E.2.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the \* **French** Expeditionary Force~~admitted or transferred~~ from Hospital Ship **4/2/19**, disembarked at

\* Here insert which Expeditionary Force.

NOTE.—Two copies of these Rolls to be forwarded, not later than the day after admission :

(i) One copy direct to the War Office, **FINSBURY COURT, FINSBURY PAVEMENT, E.C.2.**

(ii) The other direct to the O. i/c of Records of the Colonial Contingent concerned.

\* The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases :

(a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.

(b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty * (See note in large type above).
		Transferred to the Pavilion Hospital, 4/2/19.		
4071	Pte	Wheeler, Walter	1 R. Newfoundland "D" Co.	G.S.W. in leg

No. 4071 Name *Pte Wheeler W* Sqn., Batty., or Company } *P* Corps *Royal Norfolk* Date of enlistment } *3. 11. 19* G.C. Badges } Service or Proficiency Pay }

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

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>Field</i>	<i>24.7.18</i>	<i>Pte.</i>		<i>Intoxication in parade</i>	<i>Cap Wheeler</i>	<i>2 days, C13</i>	<i>26.7.18</i>	<i>Capt Rendell</i>	<i>wd 21/10/18</i>



Army Form B. 122.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121.  
39.

Regiment of 1<sup>st</sup> Newfoundland

Number of Sheet one

Signature of O. C. Company Whaley

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>4071 Wheeler W.</u>	Age on	<u>19</u> years <u>8</u> months	<u>miner</u>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<u>3-11-17</u>	<u>Presb.</u>	
Joined		Date	Period of	Place of Birth	
Joined		Date			with Colours <u>28 2</u> years.

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or order dispensing with trial	By whom awarded	REMARKS
<u>Hayley Down camp</u>	<u>20-2-18</u>	<u>Pte.</u>		<u>Absent from Tattoo until Reville 21-2-18</u>	<u>Cpl. O'Rielly</u>	<u>Admonished</u>	<u>21/2/18</u>	<u>Lieut. G. Emerson</u>	<u>For full 1 day pay by <u>[Signature]</u></u>
"	<u>28-2-18</u>	"		<u>Talking in ranks while on night march</u>	<u>Sgt. Metcalfe</u>	<u>3 days C.B.</u>	<u>1/3/18</u>	<u>Lieut. G. Emerson</u>	
"	<u>3-4-18</u>	"		<u>Mitigating to obey an order</u>	<u>Sgt. Lang</u>	<u>5 days C.B.</u>	<u>4/4/18</u>	<u>Lt. Col. Kemmer D.C.O.</u>	
				<u>Demobilized Pt. Johns 11/19</u>					

To be carried over

Army Form B. 121.

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

Royal Nfld. Regt.,

Dept. of Militia,

St. John's, Nfld.

---

Fold Here

July 9th., 1921 1919.

The accompanying King's Certificate, on his discharge,  
(No. 1329), is forwarded herewith to

Private Walter Wheeler

in respect of his service as No. 4071 Rank Pvte.

Name W. Wheeler Corps Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received King's Certificate

Signature W. Wheeler *WJ*

Date 20/8/21 *W*

Address Jacksons Cove

*W.D.B.*

[P.T.O.]

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

*Royal Nfld. Regt.*

*Dept. of Militia,*

*ST. JOHN'S. Nfld.*

---

Fold Here

SEP 28 1921.

The accompanying **Victory Medal** and/or **British War Medal**  
is/are forwarded herewith to

**Walter Wheeler**

in respect of his service as No. **4071** Rank **Pte.**

Name **W. Wheeler** **Royal Nfld. Regt.**  
~~Nfld. Forestry Corps.~~

Receipt of the same should be acknowledged hereon.

Received *Medal*

Signature *Walter Wheeler*

Date *Jacksons Cove, N.D.B.*

Address *30/9/21*

[P.T.O.]

August 11 1920

4071

I wish you would not  
send any more  
letters here to me  
& have double  
a nub of my  
one the Guards  
to Youngs Street  
No 19  
John F Wheeler

4071 Wheeler  
address; 9 Young  
St

AW

Gaskrons Coze

Oct 18

1922

Dear Sir I received your  
letter and I have not received  
the things I bought at Knoxville  
yet and he told me that  
she should keep back one  
can of oil to pay the \$200  
and 26¢ will you please go  
and see Knoxville for me  
and tell them to send it  
on as I need it bad  
please do my best for  
me and oblige your  
try Mr Walter Wheeler

Gaskrons Coze

~~George D. Gaskron~~

N J B

C.R. 4071

Oct. 13th, 22

Mr. Walter Wheeler,  
Jackson's Care,  
H.D.B.

Dear Sir:-

As I have not yet received the Money Order for \$2.26 which you said you would forward, I am writing to remind you of it. It would be a pity to have to break into your pension cheque for the 1st December in order to settle this small account. Will you therefore please forward a Money Order as requested as soon as possible.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.

4071



C.R.

4071

Oct. 23rd, 1923

Mr. Walter Wheeler,  
Jackson's Cove.  
N.D.B.

Dear Sir:-

Your letter of 18th instant is acknowledged,  
on receipt of which I enquired of Knowlins regarding  
your order. They explained that they had a short shipment  
of flour, but that your order is now ready and is being  
shipped.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.

C.R. 4071

Nov. 18th 22

Mr. Walter Wheeler,  
Jackson's Cove,  
N.D.B.

Dear Sir:

I am forwarding herewith receipted bill from George Knowling's, showing goods purchased by you to the amount of \$58.17. Balance for your November pension has been paid to Knowlings, and I am sending you herewith Money Order for \$1.78, which, together with the five cents cost of same, makes up the balance of \$60.00

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer

C.R.

4071

Apr. 16 23

Walter Wheeler Esq.  
Jacksons Cove,  
N.D.B.

Dear Sir,

I acknowledge receipt of your letter of 5th April. I have written to the Dept. of Agriculture & Mines in relation to the matter you write about, they will write you direct.

Yours truly,

Lieut.Col.  
Chief Staff Officer.

Apr. 16 23

Deputy Minister of Agriculture & Mines,  
City.

Dear Sir,

The attached letter is forwarded for your attention please. I have replied, stating that I have referred the matter to you, and that you would reply direct.

Yours Faithfully,

Lieut.Col.  
Chief Staff Officer.

THE CANADIAN PENSION COMMISSION

MEMORANDUM

TO Director of War Service Records.

OTTAWA, June 27, 1949.

FROM The Canadian Pension Commission.

#4071 Pte. - Walter Wheeler.  
Royal Nfld. Regt.

*Send Do's. File with  
Area*

*R+B*

The marginally named

Died

April 19, 1947.

Next of Kin

Mrs. Lillian Wheeler (widow),  
Corner Brook, Nfld.

In the opinion of the Commission,  
death was not related to service with the forces. (The deceased  
was a Class 8 pensioner at the time of death).

*E. Lacey*

*Noted  
R+B*

mb  
Not on strength

for  
Secretary.