



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4911

Name Michael Lewis Corps R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Michael Lewis</u> |
| 2. What is your full Address? | 2. <u>St. John's</u>
<u>White Bay</u>
<u>St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>20</u> Years <u>2</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Industrious</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Michael Lewis 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.

A. Michael Lewis SIGNATURE OF RECRUIT.
6.5.18 James Stewart Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Michael Lewis 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 6 day of May 1918
 Signature of Attesting Officer James Stewart

†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 8th Regiment when enlisted by special authority, 8 will be attached to the original attestation.
 Date May 6 1918
 Place St. John's } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Musical Lewis
 Apparent age 20 years 2 months. Height 5 feet 4 1/2 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Lewis
Flour de Sye Relationship Father
White Street 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 L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>6-5-1918</u>									
Joined <u>St. John's</u> on <u>May 6-1918</u>									
<u>Discharged July 11, 1919</u>									
<u>Embarked St. John's from S.S. Columella to Halifax N.S. 22-7-18</u>									
<u>Embarked for St. John's 23-11-1918</u>									
<u>Disembarked France 28-11-1918</u>									
<u>Joined 1st Bn. 5-1919 transferred from Queen 22-7-19</u>									<u>Arrives London 23-7-19</u>
<u>to be employed for demobilization 22-5-1919</u>									
<u>Arrives to be employed 1-6-1919</u>									
<u>Demobilization St. John's 11-7-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>11-7-1919</u> (date of discharge)					1	years	67	days	
" " Pensions " " " " " " " " " " " "									

C.R. 4911

Extract from Daily Orders Part II Royal Newfoundland Regiment
Depot St. John's dated 17-7-19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date
11-7-19.

4911, Pte. Ml. Lewis.

C.R. 4911

Extract from Daily Orders Part 11 Unit The Royal Rifles
Regt. St. John's, June 19th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.C. Discharge Depot with effect from 27-6-19.

4911 Pte. M. Lewis.

CR 4911
NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. _____ Sent by _____ Rec'd by _____ Check _____

Place from _____

To _____

10/10
JUN 10 1919
10

Flude Lys White Bay
Coachmans Cove
J. R. Bennett
men of matter
Desire knowing if
my son Michael
has returned from
England

Cas. Off.
& Rush reply R

Mrs George Louis
Lewis

4911 No. 1 Hamilton St.

Rememb. 10/10

C.R. 4911

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.

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 **June 10 1919**

To **Mrs. George Lewis**

Fleur De Lys, St. Barbe

In answer to your telegram of this date beg to inform you that ~~the~~ your son Pts. #4911 M. Lewis is now at St. John's, will be discharged June 16th.

A. H. Hickman

Minister of Militia.

FOR TYPEWRITER

C.R. 4911

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

Date June 18th 1919.

4911, Pte. N. Lewis.

Reported at Headquarters 1/6/19.

EX "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4911

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

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

#4911 Pte. M. Lewis.

C.R. 4911

Extract from Nominal Roll of draft No. 56, of the 2nd., Battalion
of the Royal Newfoundland Regiment, Winchester to the 1st.,
Battalion of the Royal Newfoundland Regiment, E. I. F.,
Embarked Southampton 25/11/18.

#4911 Pte. M. Lewis.

C.R. 4911

Extract from Daily Orders part 11, from Unit The Royal
WFLA, Regt. St. John's, dated July 25, 1918.

The following man embarked for overseas on H.M.S.
"Columbella" July 25, 1918

#4911 Pte. Michael Lewis.

Extract from Daily Orders part 11, from Unit The Royal Nfld.
Regt. St. John's, dated May 7, 1918.

#4911 Pte. M. Lewis.

Attested for General Service with the Royal Nfld. Regt.
from 6.5.18.

M Lewis.

C.R. 4911.

~~P.R.O.~~

Medical Report on an Invalid.

Station Wazley Lower
 Date 1/5/19

1. Unit Royal Newfoundland 7. Former Trade } Fisherman
 or Occupation }
 2. Regimental No. 4911
 3. Rank plte
 7A. If with previous service in Army, state—
 (a) Former Unit;
 4. Name Lewis Michael (b) Regimental No. ;
 5. Age last birthday 21 (c) Date of Discharge ;
 (d) Cause of Discharge.
 6. Enlisted { on May 1/18
 at St John

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

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

9. Date of origin of disability.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 - (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

nil
nil
nil
nil

na

13. What is his present condition?

He complains no disability

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

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

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

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

If so—(a) When?

- (b) Where?
- (c) Opinion?

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

na.

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

na

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

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na

20. Do you recommend—

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

Repatriation

W. E. Prosser

Sgt. R. J. M., Capt Rame

Officer in medical charge of case.

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

Station *Mazeley brown*

Officer in charge of Hospital.

Date *1/6/19*

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

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

No. 5156/233

From: NEWFOUNDLAND

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

CHIEF PAYMASTER & OFFICER N.F.C. 82.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
Office Commanding V. 1.
1/Bn. Royal Newfoundland Regt.,
B.E.F.

A. 1st April 1919

4911 Pte. Lewis M.

With reference to the following telegram from the Minister of Militia, / / (111)

"Pay to- 4911 Lewis

£4. 17. 4.

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. O. Guinness Maj.

Chief Paymaster & O. i/c Records

9-4-1919

4911 Pte Lewis M.

This man wishes this amount retained to credit of his account please.

*Deposited
1/4/19 JW*

Lewis, L

4911

Ray Sept

July 11, 1919

#4911 Pte. Michael Lewis,

Fleur de Lys,

Labrador.

Dear Sir:-

Please find enclosed Discharge Certificate #2950.

Yours truly

Captain,
Paymaster & O.i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4911 Rank Pte Name Lewis M
 Intended place of residence St. John's
 2. Occupation Dishwasher
 Classification of soldier E Medical Category A.I

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 JUN 13 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date JUN 13 1919
ST. JOHN'S
 Signature of soldier M. Lewis
 Signature of witness J. B. [unclear]

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date JUN 13 1919
ST. JOHN'S
 Signature of soldier Michael Lewis
 Signature of witness W. [unclear]

STATEMENT OF SERVICE

7. Enlisted for service 6-5-18 No of days on Military Service 232
 Discharged from service 27-6-19. Plus 14 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S Date JUN 27 1919
 Officer i/c Records
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place St. John's Date July 11/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

29192079/2950

The Royal Newfoundland Regiment

Class for Demobilisation: 7/6/

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 12.6.19

Regimental No 4911

Name Lewis Michael Rank Plt

Address Steu - de - Lys

Present Medical Category A1

Recommended for :— (a) Immediate discharge
(b) Standard Medical Board

Members of Board

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

H. Paterson
Senior Medical Officer

J.W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOLIBIZATION OF

Reg. No. 4911 Rank Pvt Name J. Lewis ml
 Date of Enlistment 6.5.18 Address Fleur Baie District St. John's
 Occupation Fadernant Classification for Discharge 16 Medical Category AI
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P138	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	3
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 12.6.19

J. Lewis ml
 O. C. Discharge Depot.

PARTICULARS FOR DEMOLIBIZATION

1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

Michael Lewis ml
 with wife & children

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

Michael Lewis ml

Date 13-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 21699..... to his home at Flower St 28 and Release Certificate No. 2721 issued.

Date 13-6-19 J.A. Lawless
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 11-7-19

Date 13-6-19 J.A. Lawless
Depot Paymaster.

Discharge approved for 27-6-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 13-6-19 J.A. Lawless
Demobilization Officer.

APPROVED.

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

with following additional documents.

Eligible for War Service Gratiuity

Date JUN 27 1919 R.H. Sait Capt.
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former occupation

Lewis Ak

Signature of Man.

Reg. No. *4911*

J. H. Snowliff

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

191

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

MEDICAL HISTORY

Surname Lewis OF Michael Christian Name

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	6	May		191
Declared Age	20	years		days
Trade or Occupation	Fisherman			
Height	5	feet 4 1/4		inches
Weight		155		lbs
Chest Measure-ment	Girth when fully expanded	38		inches
	Range of Expansion	3 1/2		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/			
When Vaccinated				
Vision	R.E.—V=	6/10	R.E.—V=	
	L.E.—V=	6/10	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>Lamm Peterson</u>			
(Rank)	Medical Officer.			Medical Officer.
Enlisted	at	<u>St. John's</u>	at	
	on	6 day of May	on	day of 191
		Corps.		Corps
		Regtl. No.		Regtl. No.
Joined on Enlistment	<u>The Royal Nfld Regt</u>			
Transferred to				
Became non-effective by				
(Signature)	on	day of 191	on	day of 191
(Rank)				

Medical Report on an Invalid.

Station Hazelton Down

Date 1/5/19

1. Unit Royal Newfoundland Former Trade or Occupation } Fisherman
2. Regimental No. 4911
3. Rank Pte
- 7A. If with previous service in Army, state—
4. Name Lewis Michael (a) Former Unit;
5. Age last birthday 21 (b) Regimental No.;
6. Enlisted { on May 1/18 (c) Date of Discharge;
- { at St John's (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

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

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

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific contribution to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

na.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

de complains of no disability

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

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

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

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

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

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

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

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

Repatriation

20. Do you recommend—

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

W.E. Lawrence

Capt Rams

Officer in medical charge of case.

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

Station *Hazeleydown*

Officer in charge of Hospital.

Date *1/5/19*

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

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



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 *Michael Lewis*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4911*

Intended address *St. John's*

Height on discharge *5* Feet *5*

Color of hair on discharge *Dark Brown*

Complexion *Dark*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *George*

Christian name of Mother *Elizabeth*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St. John's, Mar. 27, 1895*

Nature and locality of civil employment required *—*

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

(Soldier's signature in full)

Michael Lewis *MP*

(Rank)

Station **ST. JOHN'S.**

Date

11-6-19

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

Medical Officer, Hospital, Regimental
Unit, or Command Depot.

HEADQUARTERS

St. John's, Newfoundland

Station

Date

July 12, 1919

#4911 Pte. Michael Lewis,

Fleur de Lys, H.D.B.

Dear Sir:-

Referring to your application I enclose cheque for Seventy dollars (\$70.00), being amount of first payment due you on account of the War Service Gratuity.

Yours truly

Captain,
Paymaster & O.i/c Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 26th. 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..... *Michael* 2. Surname..... *Lewis*

3. Rank..... *Private* 4. Regtl. No..... *4911*

5. Address in full to which future payments of gratuity are to be forwarded..... *Flour. De Sees. N. S. B.*

6. Date of enlistment in the Regiment..... *May 6th 1918*

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

not applicable

8. Relationship of such dependents..... *not applicable*

9. Address in full of such dependents..... *not applicable*

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 Mfld, if so, give dates and particulars of such service..... *not applicable*

12. Give total length of time which you served on active service, whether in Mfld. or Overseas..... *one year and one month* 1. ³

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

not applicable

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

no

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

no

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

no

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

no

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

no

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

not applicable

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

June 13th 1919

no

Demobilized

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, Germany

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

'a' no - 'B' no

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

Signature of Applicant: *Michael X Lewis*
 Place of Residence: *Flower. St. Seed. N. D. B.*
 Declared before me at: *St Johns*
 This *13th* day of *June* 19...*19*....

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

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

ST. JOHN'S, June 17th /19

Royal Newfoundland Regiment.

Billeting Account,

To Mr - A. Bishop
21 Hamilton St

Mr A. Bishop

Billeting Soldiers as undermentioned

from June 1st /19 to June 17th /19

4911 Mr. M. Lewis 17 70

ACCOUNT	B 911
SH. NO.	28848
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 17 70

A. M. [Signature]
for Billeting Officer.

RJ

J. C. [Signature]

C.R. 4911

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL, 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal-1914-1919.

Name *4911 Capt. M. Lewis*

Date *Dec 4 1919*

Place *Fulham W. G. S.*

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

1921.

The accompanying ~~Victory Medal~~ British War Medal
is/are forwarded herewith to

Michael Lewis

in respect of his service as No. 4911 Rank Pte.

Name M. Lewis Royal Nfld. Regt.

~~Nfld. Constabulary~~

Receipt of the same should be acknowledged hereon.

Received 26th October

Signature M. Lewis

Date 19 21

Address Fleur-de-Lys

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet one

Regiment of Royal Newfoundland

Signature of O. C. Company G. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>1911 Lewis M.</u>	Age on	20 years / months	Fisherman			
Joined	Date	Place and Date of Enlistment	<u>St John's 6.5.18</u>	Religion	<u>R.C.</u>		
Joined	Date	Period of	with Colours	Place of Birth			
Joined	Date		with Reserve	<u>16 1/2 years.</u>	<u>St John's White St.</u>		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St John's</u>		<u>11 7/19</u>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOLIBIZATION OF

Reg. No. 4911 Rank Pte Name Lewis M. J. C.
 Date of Enlistment 6.5.18 Address Flour Ridge District Labrador
 Occupation Indoorman Classification for Discharge 6 Medical Category A3
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 12.6.19 for Mrs. Lewis O. C. Discharge Depot.

PARTICULARS FOR DEMOLIBIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Michael Lewis
has more work to do

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

Michael Lewis

Date 13-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 2699 to his home at Flown and Release Certificate No. 2721 issued.

Date 13-6-19 J.A. Brown
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 11/2/19

Date 13-6-19 H. H. H.
Depot Paymaster.

Discharge approved for 27-6-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 13-6-19 J.A. Brown
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 JUN 27 1919 R.H. Jait
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
Date June 30/19 [Signature]

Reg. No. 4911 Rank Pte Name Lewis, Wm
Attested Address 24 St. St. Lys
Allotment Allottee
Date of Allotment Returned from Overseas 29.8.19.
Returned on S.S. Corsican Cause Discharge

12.6.19.
27.6.19.

DISCHARGE APPROVED ON DEMOBILISATION.

PASS TO DEMOBILIZATION OFFICER