



4 THE ROYAL NEWFOUNDLAND REGIMENT 4

No. 4589 Name Walter Lewis Corps Inf.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Walter Lewis
2. What is your full Address? 2. 16 Colonial St
3. Are you a British Subject? 3. yes
4. What is your age? 4. 36 Years Months
5. What is your Trade or Calling? 5. Pilot
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 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.

Walter Lewis SIGNATURE OF RECRUIT.
Walter Lewis
Bay mod. Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Walter 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 answered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St John's on this 22 day of April 1918

Signature of Attesting Officer Geo L Hartly Maj. R.

†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 April 22 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)

Report 29-4-18

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Walter Lewis
 Apparent age 36 years months. Height 5 feet 3 1/2 inches
 Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr Richard Lewis
16 Colonial St | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or 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>22-4-18</u>									<u>Lewis Capt. 4 5/8</u>
Joined at <u>St. Helier</u> on <u>April 22-1918</u>									
<u>Discharged June 29-1919</u>									
<u>To report for duty 29-4-18</u>									
<u>Embarked with 1st Lt. Col. Latta to Halifax N.S. 22-7-18</u>									
<u>Embarked for F.O.S. 23-11-18</u>									
<u>Given up by France 28-11-1918</u>									
<u>Given Battle. France 5-1-19</u>									
<u>Attended International Boat Race Paris 17-4-1919</u>									
<u>Returned to UK and reported R.R.O. 29-4-19 en route to Winchester</u>									
<u>Left for disembarkation 22-5-19</u>									
<u>Arrived Southampton Island 1-6-1919</u>									
<u>Remobilization of this 29-7-19</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>29-6-1919</u> (date of discharge)					1		62		days
Pensions									

C.R. 4589

Extract from Daily Orders Part 11 Unit The Royal BFLA.
Regt. St. John's, June 30th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 29-6-19.

4589

~~4596~~ Cpl. Walter Lewis.

C.R. 4589

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

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Dis charge Depot with effect from 15-6-19.

4589 Cpl. Lewis, Walter.

C.R. 4589

Extract from Daily Orders Part A1 Depot, St. John's,
Date June 18th 1919.

4589, Cpl. W. Lewis.

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

C.R. 4589

Extract from Casualties received from the Chief Staff
Office London, Dated Sat. May 23rd 1914.

The undermentioned who was attending the International Boat
Race in Paris (27/6/19) returned to U.K. and reported at
the Pay and Record Office 29/4/19 en route to Winchester
to rejoin their Unit.

#4589 A/Cpl. W. Lewis.

AUTHORITY: Officer i/c Records Newfoundland Contingent.

C.R. 4589

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND
REGIMENT IN FRANCE DATED FEBRUARY 16th 1919.

Appointed A/Cpl.

#4589 L/Cpl. W. Lewis.

4/2/19.

C.R. 45-89

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

#4589 L/C W. Lewis.

C.R. 4589

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

The following man embarked for overseas on H.M.S.
"Columbella" July 22, 1918.

#4589 L/Cpl. Walter Lewis.

C.R. 4588

Extract from Daily Orders part II, para U of The Royal
Newfoundland Regiment, St. John's, dated May 6th, 1916.

#4589 Pte. W. Lewis,

To be Lance Corporal from 4/5/16.

C.R. 4589

2
Extract of Daily Orders part 11, from Unit The Royal Wfld.
Regt. St. John's, dated April 25, 1918.

4589 Ptes. Walter Lewis.

Attested for General Service with the Royal Wfld. Regt. from
22/4/18 to report. 29/4/18.

No. 4589

Name

Lewis W L M

Sqn.: Batty. }
or Company } D.

Corps R. Newfoundland

Date of enlistment

27/4/18

O.C. Hedges

Service or Proficiency Pay

Date of last entry in Company Conduct Sheet

No. and date of last drink

Period not reckoning towards freedom from extra fine

Barr No.

Signature O.C. Company, etc.

W L M Lewis

Character

11.33

1919

Army Form B. 122

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award of order dispensing with trial	By whom awarded	Remarks
Feld	8.3.19			Deficient, 9 1/2	C2MS Mear	Pay for same	8.3.19	St. C. H. Hedges	

(P.T.O.)

to Lewis

C.R. 4589

1810

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class F., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps. *1st Royal New York*..... 7. Former Trade or Occupation } *Pilot*
2. Regtl. No. *4189* 3. Rank. *Capt*..... 7a. If the soldier claims previous service in Army, he should state—
4. Name *Lewis*..... (Surname) *Walter*..... (Christian Names)
5. Age last birthday. *37*.....
6. Posted for duty *27/1/18* at *St. John's* in category (or grade).....
8. If the disability is an injury was it caused
- (a) in action (b) on field service
- (c) on duty (d) off duty? (b) Date of Discharge ;
9. If a Court of Inquiry was held on an injury state :— (c) Cause of Discharge.
- (a) When (d) Particulars of Pension or Gratuity (if any)
- (b) Where
- (c) Opinion of Court

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

Statement of Case.

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

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

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

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

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

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

no complaint of no Disability

16. Was an operation performed? If so, when and what was its nature? *na*
17. If not, was an operation advised and declined? *na*
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *na*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? *na.*

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

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

W. S. Premier
Repatiation
Soft P. Army
 Medical Officer in charge of case.

Station *Harley D. Camp*
 Date *18/11/19*

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. State whether the disabilities are:—

	(a) Attributable to	(b) Aggravated by
(i) Service during the present war
(ii) Previous active service..
(iii) Climate in pre-war service
(iv) Ordinary military service before the war
(v) Serious negligence or misconduct on the part of the soldier

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
 (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
 (b) Transport from railway station to his home?
 (c) The constant attendance of another person in his own home?

Signatures:—

Station *Harley, D. Camp* } President or
 Date *18-5-19* } Chairman.
 } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station } Only applicable
 Date } in cases of
 Officer in charge, Central Hospital. } Patients in
 Hospital.

OR
 Discharge Approved under Para. 392 () King's Regulations.
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
 Date O.C. Discharge Centre.



THE ROYAL NEWFOUNDLAND REGIMENT
ALLOTMENTS

I, Walter Lewis, Regl. No. 4589

hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and 50 Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and}_{or} Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and}_{or} Persons
concerned, viz :

Allotment begins 1-7-15

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>4455</u> 4458	Father	Mr Richard Lewis	16 Colonial St St Johns.	50
			Total Allotment, \$	<u>50</u>

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

(Sig.)

W. A. Field

Officer Commanding

A. Company

Royal Nfld Regt
June 26th 1915

(Sig.)

Walter Lewis

(Rank)

L/c.

FORM K

No. 6102



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Walter Lewis, Regl. No. 4159

hereby agree, until further notification by me, and in similar official form to make an Allotment of 50 Dollars and 0 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz :

Allotment begins 1-7-15

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>4455</u>	<u>Father</u>	<u>Mr Richard Lewis</u>	<u>16 Colonial St. St Johns.</u>	<u>50</u>
Total Allotment, \$				<u>50</u>

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
B Company
 Royal Newfoundland Regt
June 26th 1915

(Sig.) [Signature]

(Rank) [Rank]

Lewis, W

4589

Hay Sept.

June 29, 1919

#4589 Cpl. Walter Lewis,

#16 Colonial St.,

City.

Dear Sir:-

Please find enclosed discharge
Certificate No. 2471.

Yours truly

Paymaster & U.I/c records, Captain,

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4589 Rank Cpl Name Lewis Waller
 Intended place of residence 16 Colborne St St John's

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

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 JUN 13 1919
 Date ST. JOHN'S J. M. Lewis Lt
 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 Walter Lewis
 Signature of soldier
J. H. Snow Capt
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S
JUN 13 1919 Walter Lewis
 Signature of soldier
James Newman
 Signature of witness SP1 -

STATEMENT OF SERVICE

7. Enlisted for service 22-4-18 No of days on Military
 Discharged from service 15-6-19 plus 14 days Service 4.3.4

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Lt Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JUN 15 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld J. H. Snow Capt
 Officer in Charge of Records
 The Royal Newfoundland Regiment
 Date June 29/1919

A.F.B. 2019/2471

The Royal Newfoundland Regiment

Class for Demobilization: —

6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 12.6.19

Regimental No 4559

Name Lewis Walter Rank Cpl

Address ~~16 Colonial St~~ 16 Colonial St

Present Medical Category A1

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

Members of Board {

Ret Lt Col Capt
O.C. Discharge Depot.

Walter
Senior Medical Officer

W Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4 389 Rank Cpl Name Lewis Walter
 Date of Enlistment 22-11-18 Address 3rd Buchanan St. John's
 Occupation Pilot Classification for Discharge E Medical Category A.1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 1/36	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	R 103	ME 2		" 6
B 179c	B 120	M 93		

Date 12-6-19 for O. C. Discharge Depot. Walter Lewis

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation. Walter Lewis

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £12

(b) Clothing Supplied know best

Date 13-6-19

O. i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home
at 16 Colonial St. St Johns and Release Certificate No. 2746 issued.

Date 13-6-19

J.A. Snow Capt.
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 29-6-19

Date 13-6-19

H. J. [unclear]
Depot/Paymaster.

Discharged approved for 13-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P[36]	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	1/2
B 178a	D 400A	B 1915	1	do 2nd	" 3	2 Form B
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
E 170b	B 103	ME 2	1		" 6	
B170c	B 120	M 93				

Date 14-6-19

J.A. Snow Capt.
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratiuity

Date JUN 15 1919

R.H. [unclear] 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.

Walter Lewis

Signature of Man.

J. P. Snow Capt.

Signature of the Vocational Officer or his Representative.

Reg. No. *45-89*

Place

21 - Johns

Date

13-6-19

191

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

MEDICAL HISTORY

Surname Lewis OF Christian Name Walter

Table I.—GENERAL TABLE.

Birthplace:—Parish St John's County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	22 nd day of April 1918	St John's Nfld.	day of	191
Declared Age	36 years		years	days
Trade or Occupation	Pilot			
Height	5 feet 3 $\frac{1}{2}$ inches		feet	inches
Weight	124 lbs.			lbs.
Chest Measurement	Girth when fully expanded... 34 $\frac{1}{2}$ inches			inches
	Range of Expansion... 3 $\frac{1}{2}$ inches			inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Three			
When Vaccinated	Twelve years ago			
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	Samuel Paterson			
(Rank)	Major			
Enlisted	at St John's, Nfld.			
	on	22 nd day of April 1918	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	The Royal Nfld Regt., 4589			
Transferred to				
Became non-effective by				
[Signature]	on	day of 191	on	day of 191
[Rank]				

Table II.—Only for admission to hospital or to the sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing syphilis, admission of treat
	Day	Month	Year	Day	Month	Year			
Hazeley Down	27	8	18	14	9	18	Mumps	18	Disch

al or to the sick list in case of Warrant Officers treated in quarters.

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.

Discharged to duty.

Signature of Medical Officer

6877111111

CAPT., R. A. M. C.

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4580 Rank

Name Lewis W

Warned for demobilization on

JUN 13 1919

EMI

HAMMERMILL
BOND



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Lewis, Walter.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4589.*

Intended address *34 Lockhart Street*

Height on discharge *5 Feet 7.*

Color of hair on discharge *Grey*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks

Figure on discharge *Short.*

Christian name of Father *Richard*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St Johns 21-12-1880*

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 Lewis

Lt.
(Rank)

Station

Date

10-6-19

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 i/c Hospital.
Unit, or Command Depot.

Station

Date

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps *Royal Newfoundland* 7. Former Trade or Occupation } *Pilot*
2. Regtl. No. *4589* 8. Rank *Capt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Jervis* *Walter* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday *37*
6. Posted for duty on *Apr 1/18* at *St Johns* in category (or grade).....
8. If the disability is an injury was it caused
- (a) in action (b) on field service
- (c) on duty (d) off duty? (b) Date of Discharge;
9. If a Court of Inquiry was held on an injury state:— (c) Cause of Discharge.
- (a) When (d) Particulars of Pension or Gratuity (if any)
- (b) Where
- (c) Opinion of Court

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

Statement of Case.

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

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

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

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

na.

no complaint of no disability

15. What is his present condition ?

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

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

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

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

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

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

na.

Repatriation

20. Do you recommend—

(a) Discharge as permanently unfit ?

(b) Change to United Kingdom ?

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

W.S. Proctor Capt R.A.M.C
 Medical Officer in charge of case.

Station *St. D. B. Camp*

Date *10-5-19*

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. State whether the disabilities are:—

	(a) Attributable to	(b) Aggravated by
(i) Service during the present war
(ii.) Previous active service..
(iii.) Climate in pre-war service
(iv.) Ordinary military service before the war
(v.) Serious negligence or misconduct on the part of the soldier

Give details :

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *Loxley D. Camp* } President or
 Date *18-5-19* } Chairman.
 } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station } Only applicable
 Date } in cases of
 Officer in charge, Central Hospital. } Patients in
 Hospital.

OR
 Discharge Approved under Para. 392 () King's Regulations,
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
 Date O.C. Discharge Centre.

Casualty Form - Active Service

Regiment or Corps Newfoundland
 Rank 1st Lt. Surname Lewis Christian Name W.
 Religion none Age on Enlistment 36 years — months
 Enlisted (a) 22/4/18 Terms of Service (a) Duration Service reckons from (a) 22/4/18
 Date of promotion to present rank not known Date of appointment to lance rank appointed 70 at 1st Lt.
 Extended — Re-engaged — Qualification (b) —
 Occupation Pilot or Corps Trade and Rate 1st Lt. Royal Air Force Signature of Officer W. Lewis

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...		28 NOV 1918.	
		Joined Batt.		5 JAN 1919	
		Appointed to 1st Lt. 4/2/19		B 213	8/2/19
		Attended Boat Race Paris		27.4.19	
		Joined Boat Club		29.4.19	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered (b) Signatur, Shoeing-Smith, & Co (17591). Wk. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B/103, (E. 1256.)

Next of Kin: Father: Richard Lewis! 76 Colonial St! St Johns! N. F. I.

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... *Malter* 2. Surname... *Lewis*

3. Rank... *Corporal* 4. Regtl. No. *4589*

6. Address in full to which future payments of gratuity are to be forwarded... *16 Colonial St*

6. Date of enlistment in the Regiment... *March 28th 1918*

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... *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? *Not Applicable*

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

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *One year 114 days*

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.

Not Applicable

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.

Not Applicable

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *Not Applicable*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *Not Applicable*

19. Are you now serving in the Regt.? *No* If not give - (a) date of discharge *29/1/19* (b) Reason for discharge

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. *Yes*

Eastern 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. *Not Applicable*

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:

Walter Lewis

Place of Residence:

Declared before me at:

This 14th

day of

1919.....

Wesley Knight, Barrister, Notary and S.O.

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

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

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.

Number of Sheet 621

Regiment of Royal Newfoundlands

Signature of O. C. Company G. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay <u>4. 4. 18 Promoted Lance Corporal 7. 11. 18</u>
No.	<u>4589 Lewis Walter</u>	Age on	years	months	
Joined		Date		Religion	
Joined		Date		<u>R.C.C.</u>	
Joined		Date			
Joined	Date		Place of Birth		
		Period of } with Colours / <u>69</u> years. with Reserve / <u>35</u> years.		Place of Birth	
				<u>St Johns</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</u>	<u>St Johns</u>	<u>29</u>	<u>6</u>		<u>79</u>

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 589 Rank Cpl Name Lewis Walter
 Date of Enlistment 22-11-18 Address 3rd Buchanan St. H. John
 Occupation Pilot Classification for Discharge 17 Medical Category H.1.
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 208	B 121	N. F. Med	D. F. 1
B 178	W 3494	B 122	Board Ist	" 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 12-6-19 J. H. Lewis
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation. Walter Lewis

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable 1960

(b) Clothing Supplied know best

Date 13-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home
 at Almond St. 27 years and Release Certificate No. 2746 issued.

Date 13-6-19

J.A. Snowball
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 14-1-19

Date 13-1-19

J.A. Snowball
 Depot Paymaster.

Discharge approved for 15-6-19

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

N.F. P[36]	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board Ist.	" 2
B 178a	D 400A	B 1915	do 2nd	" 3 <u>2 Form B</u>
B 179	D 400B	Form L.	do 3rd	" 4
B 179a	D 400C	Form K.	do 4th	" 5
B 179b	B 103	ME 2.		" 6
B179c	B 120	M 93.		

Date 14-6-19

J.A. Snowball
 O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
 Board of Pension Commissioners.

with following additional documents:

Eligible for War Service Gratuity

Date JUN 15 1919

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

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

Date June 24/19

J. Melchior
 Depot Records

Reg. No. *4889* Rank *Cpt.* Name *Lewis Walker*

Attested Address *16. Colonial St.*

Allotment Allottee

Date of Allotment Returned from Overseas *29.5.19.*

Returned on S.S. *Loisican* Cause *Discharge*

12.6.19 PASSED TO DEMOBILIZATION OFFICER

15.1.19 DISCHARGE APPROVED ON DEMOBILIZATION