



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5179 Name Lewis Samson Corps C/8

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Lewis Samson
2. What is your full Address? 2. Flat 104 Bay
3. Are you a British Subject? 3. yes
4. What is your age? 4. 24 Years Months
5. What is your Trade or Calling? 5. Electrician
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, Lewis Samson do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Lewis Samson SIGNATURE OF RECRUIT.
J. B. Raymond Signature of Witness.

Lewis Samson I, 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 fully entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me on this 18 day of May 1918.

Signature of Attesting Officer A. A. Richards

†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 completed with. I accordingly approve, and appoint him to the

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

Date May 18 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)

C.R. 5179

Extract from Daily Orders Part 11 Unit The Royal 224.
Regt. St. John's, July 7th, 1919.

The discharge of the undernoted on demobilisation has been
CONFIRMED by Officer i/c Records with effect from 3-7-19.

5179 Pte. Lewis Samson.

C.R. 5179

Extract from Daily Orders Part 11 Unit The Royal Wilt.
Regt. Depot St. John's, June 9th, 1919

The discharge of the undernoted on demobilization has been
APPROVED By O.C. Discharge Depot with effect from 19-6-19.

5179 Pte. Lewis Samson.

C.R. 5179

Extract from Daily Orders Part A1 Depot, St. John's,
Date June 7th, 1919

5179 Pte. Lewis Samson

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

Extract from Nominal Roll 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

5179

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.

#5179 Pte. L. Samson.

C.R. 5-179

Extract from Nominal Roll of Draft No. 56, from the 2nd.,

Battalion, Winchester to the 1st., Battalion, Royal

Newfoundland Regiment, raised Embarked Southampton 23/11/18.

#5179 Pte L. Samson.

C.R.

5179

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

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

#5179 Pte. Lewis Samson.

Extract from Daily Orders part 11, from Unit The Royal
Rifles Regt. St. John's, dated May 20, 1918.

#5179 Ptel Lewis Samson.

Attested for General Service with the Royal Rifles Regt.
from 10.5.18

To Major Montgomery
Royal Mtd. Regiment.

C.R. 5129
St. John's College
St. John's
June 15/18.

Dear Sir,

I have two brothers, who own a schooner, and who have in the past been prosecuting the Labrador fishery. Their home address is "Flat Island, Bonaville Bay".

The older brother, about 35 years of age, is master of the schooner. The younger is under 25 yrs., and is now a private in the Royal Mtd. Regiment.

Since supplying for the fishery the older brother has contracted a heavy cold, which has developed into grippe, and later into pneumonia. He is at present very ill, and unable to go to Labrador. As the schooner is ready for the fishery, and the time has come when she should be sailing, a very great hardship will be imposed upon all those depending upon her voyage, unless another capable skipper can step on board.

I therefore beg to ask that this case be fully considered by those empowered to deal with it, with the hope that my younger brother, Pte. Lewis Samson, may receive an extended leave which will enable him to take charge of the schooner and prosecute the voyage in the place of my other brother who is unable to do so himself.

Unless the military authorities can see their way clear to permit this, it is difficult to see how a great hardship can be avoided. Nine other men, most of them with families, are depending upon that schooner for their means of support. There is not a man among the nine who would be held by the other eight as possessing the necessary qualities of enterprise and push which a skipper should have. Neither is it possible for another qualified skipper to be obtained in the neighbourhood at this date.

If leave can be extended to Pte. Lewis Samson, it is agreed, of course, that he report for military service as soon as the schooner arrives from Labrador, which would probably be not later than the middle or 20th. of September.

As I can reach my brother by telegram only once a week, viz. on Monday Afternoons, I should be very glad to have a definite decision upon this matter not later than Monday at midday, if such be at all within the bounds of possibility.

Yrs. sincerely,
J. J. Samson

ANSWERED

June 17, 1918.

Dear Sir:-

I have the honour to acknowledge receipt of your communication of 15th inst., with reference to leave of absence for your brother, now on service.

I have placed this matter before the authorities, and while they fully appreciate the position, it is regretted that in view, of the present circumstances, it is impossible to comply with your request.

I have the honour to be,
Sir,
Your obedient servant,

Major.
District Officer Commanding.
Newfoundland.

I. J. Sanson Esq.,
Bishop Field College,
City.

L. Samson

C.R. 5179

1870

Medical Report on an Invalid.

Station Agley Down CampDate 30. 11. 19

1. Unit Royal Welch
 2. Regimental No. 5179
 3. Rank Lieut
 4. Name Sampson L.
 5. Age last birthday 25
 6. Enlisted { on 18. 5. 18.
 at 50 John

7. Former Trade or Occupation } Fisherman.

7A. If with previous service in Army, state—

- (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (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).

nil

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— *nil*

- (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.

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.

He 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?

u

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

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

u

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

u

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

u

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?

u

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.

u

Repatriation

20. Do you recommend—

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

None

Major D.P.S.

Officer in medical charge of case.

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

Station *A. D. Green*

Date *20.4.19*

Officer in charge of Hospital.

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

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

No. 18319/2014

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn Royal Nfld. Regt.
Winchester.

13th November 1918

Subject: 5179, Pta. L. Samson

With reference to the following telegram (9723) from the Hon. Minister of Militia, received

pay to 5179 Samson £5:0:0

Draft £ 5:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

L. F. H. Marshall
Chief Paymaster & O. 1/c Records.

Nov. 14th 1918

Receipt hereunder.

Cham
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commanding 2nd Bn, Royal Newfoundland Regiment.

Received the sum of Five
pounds on account of

cable remittance from Newfoundland.

L. Samson

No. 5179 Rank Private

Witness

A. L. Carter, Pte.

No. 86/1005

099357

N.F.P. /79.

From: NEWFOUNDLAND CONTINGENT

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

To: ~~Officer Commanding,~~
~~2nd Batt. Nyl. Nfld. Regiment~~
~~Winchester~~

2nd May 1919

May 18th 1919

5179 Pte L. Samson

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / (160)

H.M. Almond, Lt Col
Officer Comdg. 1st Batt'n.

"Pay to- 5179 L. Samson.

£5-0-0

Received the sum of Five

Cheque £5-0-0 is enclosed for payment to this Soldier.

pounds (£5-0-0) in respect of

Kindly obtain his receipt hereon.

telegraphic remittance from the Minister of Militia.

A.A. Minard
Chief Paymaster & O. 1/c Records.

L. Samson

No. 5179 Rank Pte

Witness J.D. Deeks Sgt

18319/2014

2/Bn Royal Wfld. Regt.
Winchester.

13th November 8

5179, Pte. L. Samson

9723

pay to 5179 Samson £5:0:0

5:0:0

Sawson, Lewis

5179

May 1891.

The Department of Militia.

\$ 5⁰⁰

The sum of five Dollars is due

Mr ~~..... for driving~~

Reg No. 5179. Rank Pte. Name L. Sanson

From Alexander Bay, Flat Island

Account for \$ 5⁰⁰/₁₀₀

Voucher Attached.

J. A. Brown

Captain

Demobilization Officer



11-8-19

No. *g. 579*

TRAVELLING WARRANT

\$5.00

Amount Granted

Date *3-6-18*

The Royal Newfoundland Regiment

At J. Samson

General

Please issue 1st Class Passage and Meals for

No. *5179*

Rank *1st*

Name *Samson G.*

From

~~ST. JOHN'S~~

To

St. John's Isld.

Alexander Bay

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S, N.F.

PLEASE QUOTE THIS WARRANT NUMBER
ON STATEMENT AND MEAL CHECKS

A. M. [Signature]

SIGNATURE OF ISSUING OFFICER.

*Demobilization Officer
Discharge Depot - Newfoundland*

James Samson

P.S. I paid the man that brought
us home myself please forward money
to me

By J. Samson
Flat Island
Bonaville Bay

July 3, 1919

#5179 Pte. Lewis Samson,

Flat Island, B.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 & Officer i/c Records.

587

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.

- 1. Christian name..... *Lewis* 2. Surname..... *Samson*
- 3. Rank..... *Pte* 4. Regt. No. *5179*
- 5. Address in full to which future payments of gratuity are to be forwarded..... *Flat Island, Bonavista Bay*
- 6. Date of enlistment in the Regiment..... *May 1st 18*
- 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..... *Sp*
- 9. Address in full of such dependents..... *do*
- 10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No*
- 11. Were you on active service only in Mfld. If so, give dates and particulars of such service..... *Overseas*
- 12. Give total length of time which you served on active service, whether in Mfld. or Overseas..... *Thirteen months and one day* 1. *2*

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.

£ 80.94 Clothing & Ration money

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? *no*

19. Are you now serving in the Regt.? *no* If not give - (a) date of discharge *June 19/19* (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.

France 1918 and 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.

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

Signature of Applicant: Lewis Samson

Place of Residence: Plaquemine, B.B.

Declared before me at: St Johns river

This

5th

day of

June

1919

John H. Carthy

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
-----------	---------------	-----------------	-----------------------	----------------

.....

.....

.....

Certified correct.

Paymaster

July 3, 1919

#5179 Pte. Lewis Samson,

Flat Island, B.B.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2304.

Yours truly

Master & Officer i/c Records.
Captain.

The Royal Nfld. Regiment

DEMOBILIZATION

No. 5179 Rank Private

Name Samson L

Warned for demobilization on

JUN 5 1919

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5179 Rank Pte Name Samson Lewis
 Intended place of residence. Deaf Island

2. Occupation Fisherman
 Classification of soldier P. Medical Category HT

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 5 1919 *for* W. Messer
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
JUN 5 1919
Lewis Samson
 Signature of soldier
W. Messer
 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
5-6-19
Lewis Samson
 Signature of soldier
W. Messer
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 18-5-18 No of days on Military
 Discharged from service 19-6-19 Plus 14 days Service 412

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 JUN 19 1919
R. H. Last Capt
 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, Nfld
 Date July 3/1919
W. Bowley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

RFB 79/2204

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. *5179*.....

Name *S. J. ...*.....

Address *Kat Is. B.B.*.....

Present Medical Category *A-1*.....

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~.....

Members of Board {

R. H. Lat Capn.
O.C. Discharge Depot.

S. P. ...
Senior Medical Officer

W. Borden
M. O. Depot.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5179 Rank Plt. Name Lewis Samson
 Date of Enlistment 5-5-18 Address Plat. Hld. District Bonaville
 Occupation Fisherman Classification for Discharge Eq Medical Category A1
 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	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 4-8-19 O. C. Discharge Depot #11111

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Lewis Samson

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..... *Amblin*

Date 5-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R.1471.9.579* to his home at *Flat Isld.* and Release Certificate No. *2331* issued.

Date *5-6-19*

John W. Smith
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 *7-19*

Date *5-6-19*

Amel Smith
Depot Paymaster.

Discharge approved for *14-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1.	2 Form B
F 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 *5-6-19*

J.A. Brown Capt.
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 19 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

Signature of Man.

W. J. Samson Reg. No. 5179 *W. J. Samson*

Signature of the Vocational Officer or his Representative.

Place *St Johns*

Date *5-6-19* 1919

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

MEDICAL HISTORY

Surname Samson

Christian Name Rewis

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	18 day of May 1918	St. John's	day of	191
Declared Age	24 years	days	years	days
Trade or Occupation	Fireman			
Height	5 feet 9 1/2	inches	feet	inches
Weight	143	lbs.		lbs.
Chest Measurement	Girth when fully expanded	37	inches	inches
	Range of Expansion	4	inches	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
Number				
When Vaccinated				
Vision	F.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)	<u>Samson</u>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	St. John's	at	
	on	18 day of May 1918	on	day of 191
	Corps.		Corps.	Regtl. No.
Joined on Enlistment	<u>Medical N 179</u>			
Transferred to	<u>Nfld</u>			
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

Medical Report on an Invalid.

Station Hazley Down
Date 30-4-19

1. Unit Royal Newflod.
2. Regimental No. 5179
3. Rank Pte
4. Name Samson J.
5. Age last birthday 25.
6. Enlisted $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$ 18-5-18
St Johns
7. Former Trade } Fisherman.
or Occupation }
7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(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
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 condition to which it is attributed should be stated, see Notes on page 3). na
(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.

13. What is his present condition?

No complaints of 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?

na

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

If so—(a) When?

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

na

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

na

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.

na

20. Do you recommend—

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

Repatriciation

na

Officer in medical charge of *the hospital*

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

Station *Stazley Down*

Officer in charge of Hospital.

Date *30-4-19*

*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 *Samson Lewis*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5179*

Intended address *Flat 40, B.B.*

Height on discharge *5 Feet 10.*

Color of hair on discharge *Dark.*

Complexion *Fair.*

Color of eyes *Blue.*

Descriptive Marks _____

Figure on discharge *Tall.*

Christian name of Father *William*

Christian name of Mother *Emmily.*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Flat 40, Sept 25 - 1892.*

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), *Samson Lewis*

(Rank) *Plu.*

Station **ST. JOHN'S.**

Date **JUN 4 1919**

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



Station

Date



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



OCT 20 1921

1921.

The accompanying ~~Victory Medal and/or~~ British War Medal

is/are forwarded herewith to

Lewis Samson

in respect of his service as No. 5179 Rank Pte.

Name L. Samson Royal Nfld. Regt.
Nfld. Pioneer Corps.

Receipt of the same should be acknowledged hereon.

Received _____

Signature Lewis Samson

Date Oct 21st / 21

Address Lewis Samson Flat Island

Bonavista Bay

[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 C. Dicks Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>5179 Samson, Lewis</u>	Age on	months	<u>Fisherman</u>		
Joined		Date	Place and Date of Enlistment	Religion		
Joined		Date	}	<u>1881</u>		<u>C. of C.</u>
Joined		Date	} with Colours	} years.		Place of Birth
Joined		Date	} with Reserve	} years.	<u>Hal Isl. N.B.</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>3 7/19</u>				

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 779 Rank (Sgt) Name Samson, Lewis
 Date of Enlistment 5-5-18 Address Flat 4th District St. John's
 Occupation St. John's Classification for Discharge 1/1 Medical Category A1
 Recommendation S.M.E. Disability Rating
 Passed to Demobilization Officer with following documents:-

N.F. P36	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	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 4-8-19 O. C. Discharge Depot # Miss St

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Lewis Samson

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 Am G Const

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 14718 379* to his home at *Flar 9sed* and Release Certificate No. *2331* issued.

Date *5-6-19* *J. H. 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 *3-7-19*

Date *5-6-19* *J. H. Brown*
Depot Paymaster.

Discharge approved for *14-19*

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

N.F. P/36	B 268	Form	do 1st	D.F. 1	From B
F 178	W 3404	Form	do 2nd	" 2	
F 178a	000A	Form	do 3rd	" 3	
B 179	D 600	Form	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	M 2		" 6	
B 179c	B 120	M 93			

Date *5-6-19* *J. H. Brown*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUN 19 1919* *J. H. Brown*
O. C. Discharge Depot.

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

Date *June 19 19* *J. H. Brown*

Reg. No. 5179 Rank. Pfc Name. Samson L.

Attested Address. Flat Island

Allotment Allottee

Date of Allotment Returned from Overseas. 29-5-79

Returned on S.S. Corsican Cause. Discharge

4-5-19
19-6-19

PASSED

OFFICER