



CANADA

WAR VETERANS' ALLOWANCE BOARD

URGENT

IN YOUR REPLY REFER TO FILE NO.
AND PLEASE QUOTE
YOUR REGIMENTAL NUMBER

DALY BUILDING.

OTTAWA, May 26th, 1950

Director of Records, (Army)
Department of National Defence.

Re SPARKS Lewis P. Regt. No. 1052
(Surname) (Christian Names)

Veteran states he served in the following units: Nfld. Regt.

Dear Sir:

To enable the War Veterans' Allowance Board to determine the eligibility of the above named, will you kindly furnish the following particulars concerning his service during the Great War.

- 1. Did the applicant serve in the C.E.F. No
- 2. If Permanent or Non-Permanent Active Militia Service, did any part of his service constitute service in the C.E.F. as under P.C. 1569 dated June 22, 1918. N.A.
- 3. Field of service in Great War. FRANCE & GALLIPOLI
- 4. If in France, unit and period of service. R. Nfld. Regt., 10 Mos.
- 5. Date and place of all enlistments. 23 Jan 1915, St. John's, Nfld.
- 6. Date of all discharges and reason. 24 Oct 1917, Med. Unfit.
- 7. Rank on discharge. Pte.
- 8. Date and place of birth as per attestation paper. 21 Years of age.
- 9. Domestic status, and if married, name in full of wife. Married during service, name of wife not stated except on W.S.G. form - Amy Sparkes.
- 10. Military Service prior to Great War, (or prior to enlistment in C.E.F.) Nil
- 11. Has he received any special Medals or Decorations. Nil

H.M. JACKSON
 Nil
 H.M. Jackson

2098/PS 30-5-50

for

Director of Records

XXXXXX
Colonel

MEDICAL OFFICER'S REPORT
EXAMINATION



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1157

Name in full Louis Sparks Age 21

Address Lower Island Conception Bay

Married Single Height 5-6 Weight 132

Color Dark Hair Dark Eyes Brown

Other distinguishing marks None

Nearest relative Mr. Mary Snelgrove (Aunt)

Address Lower Island Conception Bay

Dependents None

Occupation Fisherman Present Wage 300 per year

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment Jan. 23 1914

I, Louis Sparks, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Declared before me this 15th day of Feb. 1914

Louis Sparks

Wm. Sheppard

DESCRIPTIVE REPORT ON ENLISTMENT.

(To correspond with Entries on the Medical History Sheet.) **Reg. 1052**
Applicable to all ranks.

Name Louis Sparks

Apparent age 21 years months. Height 5 feet 6 inches.

Chest measurement { Girth when fully expanded inches.
Range of expansion inches.

Distinctive marks Color: Dark, Hair: Dark, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Mary Snelgrove, Lower Island Cove, Nfld.

Relationship Aunt

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	Regt. or Depot	Promotions, 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>23/1/15</u>									
Joined at <u>St. John's</u> on <u>23rd January '15</u>									
<i>Embarked Southampton 20th 15</i>									
<i>entrained for Cairo 31st 15. Embarked for Gallipoli 13th night of 19th September 1915.</i>									
<i>Admitted 4th Hosp. Malta 26th 15. Admitted 4th Hosp. Malta 21.12.15.</i>									
<i>Embarked S. I. 20-5-16. Embarked Liverpool 27.5.16. Joined 13th Bn 9-6-16</i>									
<i>Wounded 1-7-16. Admitted C.S. 3-7-16. Invalide to long land 5-7-16. Admitted 11th</i>									
<i>Hospital 4th S. I. 7-7-16. Furlough then attached depot 7-9-17. Embarked for Nfld 13-9-17</i>									
<i>Arrived Headquarters Newfoundland 28-9-17.</i>									
<i>Discharged Medical Benefit 24-10-17</i>									
<i>St John's</i>									
Total Service forfeited as above									

Total Service towards Engagement to 24-10-17 (date of discharge) 2 years 2/5 days

Pension

L. Starkes.

C.R.

1052.

P.L.O.

17th December, 7.

13993/220/R.&MC.

The Hon. the Minister of Militia,
St. John's,

HA/NWV

Newfoundland.

1052, PTE. L. SPARKS.

In accordance with your letter dated
8/11/17 (7732) I enclose herewith the Marriage
Certificate of above named man.

Chief Paymaster & O. i/c Records.



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND.

Nov. 8th, 1917.

From:- Minister of Militia

To:- Chief Paymaster & Officer i/c Records

LONDON

Sir:- 1052 Pte. L. Sparks

In reply to your ~~9737/33~~ dated 22nd Sept.,
I have the honour to inform you that it is requested
that the marriage certificate which was left at your
office on 13/17 should be forwarded to this Dept. to
be sent to the parties concerned.

I have the honour to be

Sir,

Your obedient servant,

J. P. B. Derrill

Minister of Militia.

13993/220 Rab

12 DEC 1917

B&F

P.S.

NEWFOUNDLAND CONTINGENTApplication for Overseas Transport

1. Name in full.

Surname SpokesChristian Names Amy

2. Postal and Telegraphic Address.

13 Leesker Gardens
Richmond Surrey

3. Your last Address in Newfoundland.

4. When did you leave Newfoundland, and for what reason did you come here?

5. If relation or dependant of a member of the Newfoundland Contingent state relationship, Regtl.No., and Rank.

1052 Pte. L. Spokes

6. Your Destination in Newfoundland.

Lower Island Cove
Carleton Place
Newfoundland

7. What arrangements have you made for passport?

Arranged by
Newfoundland Office

8. Can you leave for Newfoundland on 24 hours' notice by telegram?

Yes.

9. No Government or Department can accept responsibility for safety of passengers or baggage, but it is understood that the usual ocean passengers' baggage may be carried.

Date: 7-9-17Signature: Amy Spokes

To: Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. I.

13 Ellerker Gardens
Richmond
Surrey

Sep. 4th 1917

Sir:

I wish to inform you that I was
married to-day. & enclose you certificate & I will
report on Friday.

Yours Truly,
L. Sparkes.

Thomas L. Sparkes

181 N. WINDLAND ROAD - N.W.	
PAY & RECORD OFF.	
Ref. No.	4955
Rec'd.	SEP - 5 1917
Acc'd.	
Ans'd.	
File No.	

Marriage Certificate
Supt. Min of Militia
22.9.17

22nd September, 7.

9737/33

The Hon. the Minister of Militia,
St. John's,
Newfoundland.

Sir,

No. 1052, Pte. L. Sparks

I have the honour to inform you that Certificate of Marriage of this Soldier who proceeded to Newfoundland in company with his wife on 13/9/17 was left at this office.

Will you kindly ascertain and direct as to its disposal?

I have the honour to be,

Sir,

Your obedient servant,

Major,

Chief Paymaster & O. i/c Records.

HT/NW

The Paymaster

1st Newfoundland Regt.

London, S.W.



1st NEWFO. The attached is passed to you, please.

PAY & RECORD OFFICE

Ref. No. **500A**

Rec'd. **DEC 21 1916**

Ack'd.

Ans'd.

File No.

Racecourse
Ayr
20-12-16.

P. H. Kern **Capt.**

1st NEWFOUNDLAND REGIMENT
NEWTON-CR-AYR N.S.

B. 2.

Military Orthopaedic Hospital,
Ducane Road,
Shepherd's Bush, W.

To The Regimental Paymaster,

O. J. L. O'J
21/10/16

1st. Newfoundland Regt.

Please forward the sum of £5 (five pounds)

to the undermentioned, and debit to my account.

(Signed). No. 1052 Rank Pte. Name Sparks Louis
Regt. 1st Newfoundland Coy. D

Remittance to be forwarded to:-

Name Mrs L. Sealey

Address 17 Montague Street

Hammersmith, W.

5756/11.

5757/11 APPROVED.

Walter Hill

Capt., R.A.M.C.,
for Officer in Charge.

MILITARY
ORTHOPAEDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.

5756/1

December 23rd 6.

1052, Pte. Louis Sparkes,
1/1st. Newfoundland Regiment,
Military Orthopaedic Hospital, Shepherd's Bush

With reference to your letter of the ~~the~~ updated

the sum of _____ pounds _____ shillings

and five..... pence has been remitted to

.....

at

rs. L. Sealey, 17, Montague St, Hammersmith, W.

and charged to your account.

Capt.,

Paymaster & O. i/c Records.

10/2 27877

December 23rd 6 . .

5757/1

Mrs. L. Sealey,

. . . 17, Montague St.,

Hammersmith, W..

POSTAL MONEY ORDER £5. 0. 0..

Herewith enclosed Postal Money Order .
£5. 0. 0. remitted at the request and on account of number
1052, Pte. Louis Sparkes, 1/1st. Newfoundland Regiment..
Kindly acknowledge receipt on the attached form.

2/Lieut..

For Paymaster & Co. /

The Paymaster

1st Newfoundland Regt.

London, S.W.

The attached is passed to you, please.

Racecourse

Ayr

March 10th/17.

2057/11
2157/11



E. Hann
Capt

LT.-COL.,
COMMANDING, 2nd/1st N.F.L.D. REGT.,
NEWTON-ON-AYR, N.B.

The Paymaster

1st Newfoundland Regt.

London, S.W.



The attached is passed to you for necessary
action, please,

1st NEWFOUNDLAND REGIMENT	
RECORD OFFICE	
Ref. No.	1963
Rec'd.	APR 26 1917
Act'd.	3997/3 1963
Ans'd.	
File No.	

Racecourse

Ayr

April 25th/17.

Cham
ap/17

LT.-COL.,
COMMANDING, 2nd/1st N.F.L.D. REGT.,
NEWTON-ON-AYR, N.B.

MILITARY
ORTHOPAEDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.



Military Orthopaedic Hospital

Ducane Road,

Shepherds Bush, W.

OK
12/3/17

To The Regtl. Paymaster.

Please forward the sum of 1st Newfoundland Regt.
£5 (five pounds)
to the undermentioned and debit my account.

Signed. No 1052 Rank Plai. Name Sparks, L.
Regt. 1st Newfoundland Regt. Coy. D.

Remittance to be forwarded to:

Name Mrs. L. Sealey
Address 14 Montague St.

Approved.....

W. J. [Signature]
Capt. R.A.M.C.

1 ST NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	<u>1179</u>
Rec'd.	<u>MAR 12 1917</u>
Ans'd.	<u>M. [Signature] 12/3/17</u>
File No.

for Officer in Charge.

2909/2

Mrs. L. Seeley,
17, Montage Street,
Hammersmith, W.

1st, April, 1917

1052, Pte. L. Sparks, 1st. Newfoundland Regiment.

44175

2156

12 3 17

401914

FILE	BRANCH	<i>Pay</i>
	INITIAL	<i>SM</i>

MILITARY
ORTHOPAEDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.

3796/2

3797/3

Military Orthopaedic Hospital,
Ducane Road,
W.12.

To the Regt. Paymaster,

1st Newfoundland Regt.

Please forward the sum of

£5 (five pounds)

to the undermentioned and debit to my account

Signed:

No. 1002

Rank

Plt.

Name

Sparks, Louis

Re t.

1st Newfoundland

Coy.

D.

Remittance to be forwarded to:-

Name

Mrs. L. Sealey

Address

17 Montague Street

Hammer Smith, W.

APPROVED:

Naughton

Capt. R.A.M.C.
for O.I/c.

M.R.S. O.
Sh
26/17

3707/3

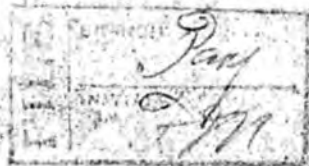
Mrs. L. Seeley,

17, Montague Street,

Hammersmith, W.

5. - . - .

1052, Pte. L. Sparks,



3796/2.

1052, Pte. L. Sparks,
Military Orthopaedic Hsp,
Duncane Road, W.13

5. - . - .

Mrs. L. Seeley.

4019/4.

Mrs. L. Seeley,
17, Montage Street,
Hammersmith, W. 1.

May 2nd., 1917

1052 Pte. L. Sparks , 1st Newfoundland Regiment.

~~44175~~

2909/2

12 3 17

A large, stylized handwritten mark, possibly a signature or initials, consisting of a long horizontal stroke with a large loop above it and a shorter horizontal stroke below it.

NEWFOUNDLAND
58, VICTORIA ST.,
LONDON, S.W.
MAY 28 1917
PAY & RECORD OFFICE

21st NEWFOUNDLAND REGIMENT
26 MAY 1917
ORDERLY ROOM

1057
To the Paymaster
5048/3

The Paymaster

1st Newfoundland Regt.
London, S.W.

The attached is passed to you
for necessary action . please.

Racecourse

Ayr

May 26th/17.

Cham Coffin
ADJUTANT,
1st/1st NEWFOUNDLAND REGIMENT,
NEWTON-ON-AYR, N.P.

MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.

Military Orthopaedic Hospital,
Ducane Road,
W.12.



To the Rect. Paymaster,

1st Newfoundland Regt.

Please forward the sum of

£5.00 five Pounds

to the undermentioned and debit to my account

Signed:

No. 1052

Rank Platoon

Name

Sparks L.

Re t.

1st Newfoundland

COY.

D.C.

Remittance to be forwarded to:-

Name

Mrs L. Sealey

Address

17 Montague Street - Hammersmith W

APPROVED:

W. J. Smith
Capt. R.A.M.C.
for O.I.C.

28/5/17

180 WFC INDIA
PAY RECORD OFFICE
Ref. No. <u>2658</u>
Rec'd. <u>MAY 28 1917</u>
Acct. <u>78/5/17 5031/5</u>
File No.

5043/3.

1052 Pte L. Sparks,

1st Newfoundland Regiment,

Military Orthopaedic Hospital, Ducane RD.W. 12.

Cheque

24/5/17

2658

5: 0: 0

Mrs. E. Seeley, 17, Montage Street,
Hammersmith, W. 1.



NEWFOUNDLAND CONTINGENTNO. 5031/5.Pay & Record Office,
58, Victoria Street,
London, S.W.,

28th May 1917

To: Mrs. L. Seeley,17, Montage Street,Hammersmith, W.1.Cheque ~~Postal money order~~ No. _____ For £5: 0: 0is enclosed at request of no. 1052, Pte L. Sparks,1st Newfoundland Regiment,~~Attached receipt form to be signed and returned, please.~~Kindly complete receipt form on back of cheque before
presenting at a Bank, please.*A. J. ...* Major,
Paymaster & Officer i/c Records.

MILITARY
ORTHOPAEDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH.
W.

Military Orthopaedic Hospital,
Ducane Road,
W.12.

To the Ret. Paymaster,

Please forward the sum of

1/21 Suffolkland Regt
£.0.0. five pounds.

to the undermentioned and debit to my account.

Signed:

No. 1052

Ran' Ret

Name Spencer L.

Regt. 1/21 Suffolkland

Gov. D

Remittance to be forwarded to:

Name Mrs L. Sealey

Address 17 Montague Street Hammersmith W.

Handwritten notes:
O.K.
£ 0.0.0
B. M. M.

Handwritten numbers:
2667/0
2668/4

APPROVED:

Handwritten signature: W. J. D. C. C. C.

Capt. R.A.F.C.
for O.C.

RECEIVED
4072
JUL 30 1917
File No.

7867/6

30th, July

Mrs. L. Seeley,

17, Montage Street,

Hammersmith, W.

S. O. O.

1052, Pte. L. Sparkes, 1st. Newfoundland

Regiment

7668/4

30th, July

1052, Pte. L. Sparkes,

1st. Newfoundland Regiment,

Military Orthopaedic Hospital,

Ducane Road, W.12

----- undated

S. O. O.

Mrs. L. Seeley, 17, Montague Street, Hammersmith, W.

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)



To the Superintendent,
 Central Army Pension Issue Office,
 33, Baker Street, London, W.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, see A.C.I. 1623 of 1916.)

Soldier's surname Sparke, Christian names Louis
(in full)

Regt. No. and Rank 1052 Pte Regt. or Corps 11 New Found Company
(If T.F. this should be stated.)

His address on discharge will be 90 Record Office 58 Victoria Street
London. S.W. 1.

The Soldier states that* Dependent allowance is being issued in respect of him.

*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

MILITARY
 ORTHOPÆDIC HOSPITAL
 DUCANE ROAD
 SHEPHERD'S BUSH,
 W.

Station _____

Date 1-9-17

Peter Hill R.A.M.O.

President of Board
 (Approving Officer).

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records 1/ Newfound Canada.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, see A.C.I. 1623 of 1916.)

Soldier's surname Sparks., Christian names Louis
(in full)

Regt. No. and Rank 105-2 P.O. Regt. or Corps 1/ Newfound Canada.
(If T.F. this should be stated.)

His address on discharge will be No Record Off. 58 Rectory Street
London. W.C.

This information is for the Central Army Pension Issue Office only.

The Soldier states that* Dependent. allowance is being issued in respect of him.

* Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.

Station _____

Date 1-9-17

Peter O'Neil Major, N.A.M.C.
President of Board
(Approving Officer).

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

MILITARY ORTHOPAEDIC HOSPITAL,
Ducane Road,
SHEPHERD'S BUSH, W., 12.

To Officer ^{Records} Commanding, ^{18th New South Wales Regt} 1/9/17.

58 Victoria Street &c
.....

Please note that No. 1057 Rank. Pl Name Spencer L

Coy. D, was discharged from Hospital this day. 1/9/17

He will proceed to his Unit for ~~Class~~ Medical Board duty.

1ST WEST INDIA BATTALION
PAY & RECORD OFFICE
Def. No. 4892
Rec'd. SEP - 2 1917
A/d. ✓
S/d. ✓
File No.

[Handwritten signature]

Pictor Phillip
CAPT. R.A.M.C.
REGISTRAR.

MILITARY ORTHOPAEDIC HOSPITAL,
Ducane Road,
SHEPHERD'S BUSH, W., 12.

To Officer ^{Records} Commanding, ^{1st Newfoundland Regt}
.....
..... 58 Victoria Street SW.

Please note that No. ¹⁰⁵² Rank. ^{PC} Name ^{Sparkes L.}
Coy. ^A, was discharged from Hospital this day. ^{11/9/17}

He will proceed to his Unit for ~~Class~~ ^{Medical Board} duty.

Pictor Phillip
Capt., R.A.M.C.
REGISTRAR.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service

ORIENTAL HOSPITAL
DUCANE ROAD
SHEPHERD BAG
LONDON, E.C. 4



No. 1052

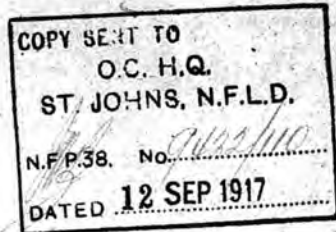
Rank

Name (surname first) Sparkes Lewis

Regiment 1st Newfoundland.

1. State what special qualifications you have for employment in civil life.

Nil:



2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

Nil:

3. What is the nature and locality of the employment you desire.

Newfoundland.

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? If so, in what capacity?

Date 25.8.17.

Signature L. Sparkes

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class P. or P(T) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 3 (il), item 8, of Army Council Instruction No. 1912, of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Transfer Statement of Clothing and Necessaries.

INSTRUCTIONS.—This Statement will be made out by the Depot or Administrative Centre, and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units.

STATEMENT showing the Articles in possession of (*Regimental No.*,

Rank and Name) 1052. Pte. Sparkes, Louis

proceeding from the blandon Park Hospital

to the Orthopaedic Hosp. Hammeconville.

Date of enlistment Dec 19/15 Date of transfer 11th Nov 1916.

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular.

(1) Station _____

Commanding Squadron, Battery,
Administrative Centre, &c.

Date _____

Name of Unit man is leaving.

(2) Station _____

Commanding Squadron, Battery,
or Company.

Date _____

Name of Unit man is joining.

Articles of Clothing & Necessaries in Possession.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

Clothing	No.	Necessaries	No.
Aprons, kilt ...		Badge, cap ...	
Boots, ankle, pairs ...	/	Bag, Kit ...	
Caps, Service Dress ...	/	Braces, pairs ...	/
Caps, Glengarry ...		Brass, Button ...	
Drawers, pairs ...	/	Brush, Brass ...	
Frocks, Canvas ...		„ Blacking ...	
Greatcoat, D.M. ...	/	„ Clothes ...	
Jackets, Service Dress ...	/	„ Hair ...	/
Kilts ...		„ Polishing ...	
Pantaloon, cord, pairs ...		„ Shaving ...	/
Putties ...	/	„ Tooth ...	/
Spurs, Jack ...		Cap, Comforter ...	
Trousers, Service Dress, pairs ...	/	Comb, hair ...	/
Trousers, Canvas or Khaki } Drill Overalls, pairs ... }		Disc, identity, with cord ...	/
Waistcoat, cardigan ...	/	Fork ...	
Coat, waterproof ...		Gaiters, Highland ...	
Gloves, leather, pairs ...		Holdall ...	
Gloves, Motor Cyclist, pairs ...		Hose Tops ...	
Goggles, pairs ...		Housewife ...	
		Knife, Clasp ...	
		Knife, Table ...	
		Laces, leather, spare, pairs ...	/
		Shirts, flannel ...	/
		Socks, worsted, pairs ...	/
		Spoon ...	
		Titles, metal, pairs ...	
		Towels, hand ...	
		Wax Polish, tin ...	
		<i>razor</i> ...	/

I certify that this statement is correct.

Date 11. 11. 16.

Signature of the Soldier Sparks

Transfer Statement of Clothing and Necessaries.

INSTRUCTIONS.—This Statement will be made out by the Depot and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it as a voucher to the unit's Clothing Account. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units.

STATEMENT showing the Articles in possession of—(Regimental No.,

1052

Rank and Name) Pt. L. Sparks, 1 New Brunswick

proceeding from the _____

to the _____

Date of enlistment _____ Date of transfer 1-9 191)

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular.

MILITARY
(1) ORTHOPAEDIC HOSPITAL
Station
DUCANE ROAD
SHEPHERD'S BUSH.
W.

Pictor Phillip

Commanding Squadron, Battery, &c.
Capt. R.A.M.C.

Date _____

Name of Unit man is leaving.

(2) Station _____

Commanding Squadron, Battery,
or Company.

Date _____

Name of Unit man is joining.

Articles of Clothing & Necessaries in Possession.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

Clothing.	No.	Necessaries.	No.
Aprons, kit		Badge, cap	
<i>Etc.</i> Boots, ankle, pairs ..	X /	Bag, Kit	
Caps, Service Dress ..	/	Braces, pairs	/
Caps, Glengarry		Brass, Button	
Drawers, pairs	/	Brush, Brass	
Frocks, Canvas		„ Blacking	
Greatcoat, D.M.	/	„ Clothes	
Jackets, Service Dress ..	/	„ Hair	/
Kits		„ Polishing	
Pantaloon, cord, pairs ..		„ Shaving	//
Putties, pairs	/	„ Tooth	//
Spurs, Jack, pairs		Cap, Comforter	
Trousers, Service Dress, pairs	/	Comb, hair	//
Trousers, Canvas or Khaki } Drill Overalls, pairs } ..	/	Disc, identity, with cord	//
Waistcoat, cardigan	/	Fork	
Coat, waterproof		Gaiters, Highland, pairs ..	
Gloves, leather, pairs		Holdall	
Gloves, Motor Cyclist, pairs		Hose Tops, pairs	
Goggles, pairs		Housewife	
		Knife, Clasp	
		Knife, Table	
		Laces, leather, spare, pairs	
		Shirts, flannel	/
		Socks, worsted, pairs	/
		Spoon	
		Titles, metal, pairs	
		Towels, hand	
		Wax Polish, tin	

I certify that this statement is correct.

Date 1-9-17

Signature of the Soldier Spencer Z

Wh

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1052, Pte. L. Sparks

(Substituting A.F. J. 1325). N.F.P./33.

Company. From 0/6/17 To 15/9/17 (Dates inclusive).

Embarked per S.S. _____

DR. Classification (See Procedure).

From Liverpool Date 15/9/17

Draft No. 48 CR.

Date	Pay Book Col.	PARTICULARS	Rate	Days	£	s	d	Date	Pay Book Col.	PARTICULARS	Date	Days	£	s	d
	8	Forfeited Pay							1	Pay					
	9	Allotments	.60	97	58	20			2	Field Allowance	1.00	97	97	00	
	10								3	Other " "	.10	"	9	70	
11/12		Total Stoppages			58	20	11 19 2		4/5	Total @ 4.86 2/3			106	70	81 18 6
13		Fines							6	Balance Credit Last Period				50	13 3
14		Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>					
15		Arms & Accoutrements								Ration Allice, 5/9 17 - 15/9 17					
16		Barrack Damages								= 11 days @ 2 /				1	2 0
17		Hospital Stoppages													
17a		Miscellaneous Stoppages													
19		Casual Payments per P & R. O.					59 10 0								
20		1st Payment													
21		2nd "													
22		3rd "													
23		Final "													
24		Balance Debit Last Period													
28		" Due by Paymaster					2 4 7		27	Balance Due to Paymaster					
							55 13 9								55 13 9

CERTIFIED CORRECT.

NEWFOUNDLAND CONTINGENT

CHECKED
RMA
12/9/17

NEWFOUNDLAND CONTINGENT
12 SEP 1917
191
PAY & R.

O. J. " " Company
PAYMASTER & OFFICER IN CHARGE

No. 1052 Rank Pvt Name Sparks L.

Pay	F.A.	Wkg	Total
1.00	10		1.10
Less: Allotment			60
Net Rate			50

M.M.B./53.

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To			£	s	d		
Balance					Balance						30	13	3	
Acquittance Rolls					Pay @ Net Rate	9/6/17	3/9/17	87	50	43	50	8	18	9
Hospital Advances														
A.B. 34														
P. & R.O. Payments		5	0	0										
Forfeiture of pay 2 days @ 1.10		9	0	0	Return allsee									
<i>cheque</i>		25	0	0	5 days @ 7/-									
11/9/17 <i>cheque (6801)</i>		9	10	0										

CHECKED
 R.H. 31/8/17

40-2.0

1052, Pte. L. Sparks

9/6/17

15/9/17

Liverpool

15/9/17

A

48

.60 97 58 20

1.00 97 97 00

.10 " 9 70

58 20 11 19 2

106 70 21 18 6

30 13 3

3 9 17 13 9 17

11 2 1 2 0

per P & R. O. 39 10 0

9 4 7

53 15 9

53 13 9

NEWFOUNDLAND CONTINGENT



R.M.C.
12/9/17

Sparks, L.

1052

Ray Sept.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim 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 question 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... *Lewis* 2. Surname... *Sparks*
3. Rank... *Private* 4. Regtl. No... *1052*
5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded... *153 Barry St. St. John's*
6. Date of enlistment in the Regiment... *January 23rd 1915*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Amy Sparks
8. Relationship of such dependents..... *Wife*
9. Address in full of such dependent... *153 Barry St. St. John's*
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 Nfld. 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 Nfld, or Overseas... *2 years 275 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. *Yes. \$ 8.50*

Wife. \$ 60.00

Dept. of Militia

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

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 Regt.? *No* If not give:- (a) Date of discharge. *Oct. 24th 1917*

(b) Reason for discharge: Physically unfit for further service due to wounds received in action.

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.....

Gallipolia. 19th Sept. 1915 to March 2nd 1916

France. 2nd March 1916 to July 1st 1916

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b). If so, are you in receipt of full pay and allowances from that Committee. *No*

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

Signature of Applicant: *Lewis Sparkes*
 Place of Residence: *153 ~~Amwell~~ St*
 Declared before me at: *St John's*
 This *10th* day of *March* 19*17*.

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

POST DISCHARGE PAY.					
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity		Net amount due
<i>18.12.18</i>	<i>100.10</i>	<i>60.10</i>	<i>5.00</i>		<i>500.00</i>
			<i>Less P.D.P.</i>		<i>160.10</i>
					<i>339.90</i>

Certified Correct. Pymaster.

at.
107 Springdale St.
St. Johns.

Po.

Record Office.
Pay Dept:

Sir.

Will you kindly forward
me my discharge badge or
please say how I may procure
one.

Yours obediently,
Louis Sparkes.

1052 Pte.

ex- 1st Newfoundland Regt.

O.K. [Signature]

352

April 6th 1920

Major Howley
O. I. C. Records

Please pay to zL. Sparkes, 1052
the sum of forty five dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$45.00

Pension \$15.00

A. C. R.

W. M. McNeill

Vocational Officer

ACCOUNT	
CHK NO. <i>34012</i>	INITIALS <i>Leid</i>
ISS. LEDGER	INITIALS
PAY LEDGER	INITIALS <i>[Signature]</i>
GEN LEDGER	INITIALS

L. Sparkes

No. 1052

Rank Pte.

Name A. Sparks.

Lower Sold to me

C.B.

7

12

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$65¹⁴/₁₀₀

Oct 25th 1917

Received from the First Newfoundland Regiment
the sum of Sixty five ¹⁴ Dollars.
on account of Pay.
balance

Cheque mailed - 29/10/17.

Ch. No.	552	Initials	C.C.
Pay Ledger	254	Initials	C.C.
Gen. Ledger	127	Initials	J.V.

Regtl. No. Rank

1712

No. 1052 Rank Pte.

Name L. Sparks

October 9th, 7

Pte. L. Sparks,
Lower Island Cove, C.B.

Dear Sir,-

I enclose herewith cheque for \$10.00,
as Pay on account.

Yours truly,

D/Quaymaster Lieut.

AUG 30 '19

Capt. Howley,
O. I. C. Records.

Please pay to L. Sparks 1052
the sum of sixteen dollars and thirty three cents
in payment of allowance for week ended this date
in connection with re-education.

\$16.33

Pension	\$10.00
Allowance	11.66
Dependent	4.67

W W Stuchell
Vocational Officer.

L Sparks

SEP 13 '19

Capt. Howley,
O. I. C. Records.

Please pay to L. Sparks, 1052
the sum of sixteen dollars and thirty three cents
in payment of allowance for week ended this date
in connection with re-education.

16 3/4
\$16.83

Pension	\$10.00
Allowance	11.66
Dependent	4.67

L Sparks

W. H. Ketchall
Vocational Officer.

SEP 20 '19

Capt. Howley,
O. I. C. Records.

Please pay to **L. Sparks 1052**
the sum of **sixteen dollars and thirty three cents**
in payment of allowance for week ended this date
in connection with re-education.

\$16.33

Pension \$10.00
Allowance \$11.66
Dependent \$ 4.67

Woodhall
Vocational Officer.

L Sparks

October 25th. 1917.

1052

Pte. Louis Sparks,

Lower Island Cove.

Dear Sir,-

I enclose herewith Certificate of Dis-
charge dated October 24th. 1917.

Yours faithfully.

Capt.
Officer i/c Records.

JH/.

This space to be left blank for the Chelsea Number.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>1052</u>	Army Rank <u>Private</u>
Name <u>Sparks Louis</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>Newfoundland Regiment</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Army, it should be so stated.)</small>	
Date of discharge	COPY SENT TO G.C. H.Q. ST. JOHNS, N.F.L.D. N.F.P.38. No. <u>9422/110</u> DATED <u>12 SEP 1917</u> Descriptive marks.
Place of discharge	
<p>1. Description at the time of discharge</p> <p>Age <u>22</u> years _____ months</p> <p>Height <u>5</u> feet <u>6</u> inches</p> <p>Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.</p> <p>Complexion <u>Fair</u></p> <p>Eyes <u>Brown</u></p> <p>Hair <u>Dark Brown</u></p> <p>Trade <u>Farmer</u></p> <p>Intended place of residence { _____ _____</p> <p><small>(To be given as fully as practicable)</small></p> <p><small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small></p>	
<p>2. The above-named man is discharged in consequence of <u>Wounds received in Action</u>.</p> <p><small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small></p>	
<p>3. Military character :—</p>	
<p>4. Character awarded in accordance with King's Regulations :—</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p><small>To be filled in on the soldier quitting the Colours.</small></p> <p>Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.</p> <p style="text-align:right">Initials of Commanding Officer.</p>	
<p>Army Form B. 2088 has been issued to*</p>	



CERTIFIED TRUE COPY

Casualty Form—Active Service.

Regiment or Corps Newfoundland

Regimental No. 1052 Rank Plt Name Sparks L

Enlisted (a) 23.1.15 Terms of Service (a) One year Service reckons from (a) 23.1.15

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended Duration of War Re-engaged 15.8.15 Qualification (b) _____

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	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
14.12.15	Comd Malta	Embked Spoko's Hft		20.2.15	
		Disembkd Alexandria		1.9.15	
		Embkd for Gallipoli		12.9.15	
		Adm Jaundice at Nevada	St George's Hosp Malta	26/11/15	2 242
87 Z.A. N.S. Marama	Unit	Embkd Alex		20.5.16	
		Disembkd Marseilles		27.5.16.	
		Joined Battalion	Field	9.6.16	B213 11.6.16
		Ad. P.A.W. from 2. High Camp	C.C.S.	3.7.16.	Ed. 11968
		Inv. to England	St George's	5.7.16	

W. C. Clark
for the Infantry records
Capt
Ed. 11968

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment shall be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form—Active Service.

Regiment or Corps Newfoundland

Regimental No. C.R. 1052 Rank Pte Name Spokes H

Enlisted (a) Jan 23/15 Terms of Service (a) 1 year Service reckons from (a) Jan 23/15

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended Discharge of War Re-engaged Aug 10/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, Army Form A. 86, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 218, Army Form A. 86, or other official documents.
Date	From whom received				

14/12/15 Comd. Malta
 Embarked St. John's, N.F.L.D.
 Disembarked Alexandria
 Embarked for Gallipoli
Arrived Jamaica
in Havana
St George Bay
Malta

20-3-15
1-9-15
13-9-15
16/11/15

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.B. 38, NO. 1122/110
 DATED 12 SEP 1917

Jan 1
 Disembk'd MARSEILLE
sent James Barratton
877A as S.W. fine Lough trout
St Marins Sw to Eng
Field
tele. S.

29-5-16
27-5-16
9-6-16
3-7-16
5-7-16
B213-116-16
8011968
W 3083

FOR THE INFANTRY RECORDS
 G.H.Q.
 CAPTAIN.
 See ECHELON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

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

MEDICAL HISTORY

Surname Sparks OF Christian Name Louis

Table 1.—GENERAL TABLE.



Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>22</u> day of <u>Jan</u> 191 <u>5</u> at <u>St Johns</u>		on _____ day of _____ 191 <u>1</u> at _____	
Declared Age	<u>22</u> years _____ days		_____ years _____ days	
Trade or Occupation	<u>Fisherman</u>		_____	
Height	<u>5</u> feet <u>6</u> inches		_____ feet _____ inches	
Weight	<u>132</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>33</u> inches		_____ inches	
	Range of expansion... <u>36 1/2</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	_____
	Number	_____	Left	_____
When Vaccinated	_____		_____	
Vision	R. E.—V== _____		R. E.—V== _____	
	L. E.—V== _____		L. E.—V== _____	
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to Cause Rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>Cluny Macpherson</u>		_____	
(Rank)	<u>Capt.</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u> on <u>23</u> day of <u>Jan</u> 191 <u>5</u>		at _____ on _____ day of _____ 191 <u>1</u>	
Joined on Enlistment	Corps.	<u>1st Newfoundland Regt</u>	Corps.	_____
	Regtl. No.	<u>1052</u>	Regtl. No.	_____
Transferred to	_____		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 191 <u>1</u>		on _____ day of _____ 191 <u>1</u>	
(Signature)	_____		_____	
(Rank)	_____		_____	

COPY OF 1915
O.S.H.Q.
ST. JOHNS, N.F.L.D.
N.F.P. 33. No. 1052/110
DATED 12 SEP 1917

Table II - Only for admissions to hospital or to the sick list in the case of Warrant Officers treated in quarters

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Clarendon Park, Guildford.	7	7	16	11	11	16	G.S.W. left leg.	127	Fractured femur - comminuted - upper third - very weak union - recommended for osteoplastic operation by Lt Col. C. E. Kendrick M.D.	J.P. Gordon.
MILITARY ORTHOPÆDIC HOSPITAL DUCANE ROAD SHEPHERD'S BUSH, W.	11	11	16	1	9	17	Fract. left thigh & dist. femur.	294	Lower plaster.	W. H. Quail. Lieut. R.R. Hill

Temporary

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Sparkes Christian Name Louis



TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... { on _____ day of _____ 191 _____
at _____

Declared Age ... _____ years _____ days.

Trade or Occupation ... _____

Height ... _____ feet _____ inches.

Weight ... _____ lbs.

Chest Measurement { Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... { R.E.—V= _____
L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____
(Rank) _____
Medical Officer.

Enlisted ... { at _____
on _____ day of _____ 191 _____

Corps.	Regtl. No.
<i>1/ New Foundland.</i>	<i>1052.</i>

Transferred to ... _____

Became non-effective by _____
on _____ day of _____ 191 _____

(Signature) _____
(Rank) _____

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
							Gaw left thigh compound fracture of femur		at	
MILITARY ORTHOPÆDIC HOSPITAL DUCANE ROAD SHEPHERDS BUSH.	11.	11.	16	1.	9.	14.	Gaw left thigh compound fracture of femur	992.	Walks with attend boot and aid of sticks	W. J. [Signature] Lieut. R. [Signature]

Medical Report on an Invalid



Station Military Orthopaedic Hospital.

Date Sept. 1st 1917

- | | |
|----------------------------------|---|
| 1. Unit <u>1st Newfoundland.</u> | 5. Age last birthday <u>22.</u> |
| 2. Regimental No. <u>1052.</u> | 6. Enlisted { on <u>January 22nd, 1915.</u> |
| 3. Rank <u>Pte.</u> | { at <u>St. John's, Newfoundland.</u> |
| 4. Name <u>Sparks, Louis.</u> | 7. Former Trade } <u>Farmer.</u> |
| | or Occupation } |

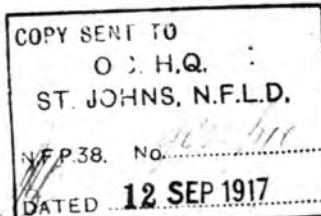
8. Disability.

G.S.W. Left femur compound fracture.

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. **July 1st, 1916.**
10. Place of origin of disability. **Somme.**
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.



Entrance wound 6" below anterior surface spine - no exit wound. 4" real shortening.

Upper third femur. Upper fragment prominent in front. Displacement upper fragment outwards and forwards. Operation Lanes plate 8". 45 degrees passive movement knee. Muscula control poor. 3 1/2" real, 1" apparent shortening. Walking caliper. Fracture soundly united. 25 degrees controlled movement knee joint. Knee flexed under anaesthetic. Screw splint applied. Knee flexed at angle.

12. (a) Give your opinion as to the causation of the disability. **G.S.W.**
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). **Active service.**

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.

Now has free controlled movement for 70° from extension. Wears altered boot and cannot walk for any distance without the aid of two sticks.

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

- (a) In action? **Yes.**
(b) On field service? **Yes.**
(c) On duty? **Yes.**
(d) Off duty? **No.**

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, **Bone plating of femur.**
what? **Mobilisation of knee.**

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?

19. Do you recommend

- (a) Discharge as permanently unfit, **Permanently unfit.**
or **(Newfoundland farmer).**
(b) Change to England?

W. H. Smith, Lieut R.A.M.C.
Officer in medical charge of case.

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

Station *Military Orthopaedic Hospital* *Peter O'Leary* **Captain R.A.M.C.**
Officer in charge of Hospital.

Date *1.9.17.*

* 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.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913.)
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

G.S.W. left femur with Compound Fracture.

21. Has the disability been aggravated by

- (a) Intemperance?
- (b) Misconduct?
- (c) Any of the conditions mentioned in question 20, and if so, which?

} no
Is
-

22. Is the disability permanent?

If not permanent, what is its probable minimum duration?
_____ stated in months.

To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Totally at present.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

no

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

Eide 16.

26. Do the Board recommend

- (a) Discharge as permanently unfit. or
- (b) Change to ~~England~~

Ys.

Signatures:—

Peter O'Connell President.
H. W. ... Captain R.A.M.C.

Station *Military Orthopaedic Hospital* }
Physicists' Quarters }
Date *1. 9. 17.* }
Captain R.A.M.C. Members.

Approved.

Station *Mil. Orthopaedic Hospital* }
Date *1. 9. 17.* }
Peter O'Connell Captain R.A.M.C.
Administrative Medical Officer.

Descriptive Return of a Soldier discharged on account of Disability.

INSTRUCTIONS.—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

Changes occurring in the description subsequent to the date of admission to pension should be noted in Red Ink.



A Name in full *Sparkes Lewis*
Regiment from which discharged *1/11th Buffs*
Regimental Number *1052*
Where born (Parish, Town and County), and when *Lower Island Cove, New Jamaica*
Intended address *80 Rensselaer Office, 58 Victoria Street, S.W. 1*
Height on discharge *5 Feet 6 Inches*
Colour of Hair on discharge *Dark Brown* **Colour of Eyes** *Brown*
Descriptive marks *—* **Complexion** *Fair*
Figure on discharge *Upright with legs of statures*
Christian name of Father *James*
Christian name of Mother *Beata*
Wife's Maiden name in full *—*
Date and Place of Marriage *—*
Christian names of Children *—*
Nature and locality of civil employment desired *—*

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38. No. *922/110*
 DATED 12 SEP 1917

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) *Sparkes L* (Rank) *Pvt*
 Station *Military Dispensary* Date *17*

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 *MILITARY ORTHOP. HOSPITAL DUCANE ROAD SHEPHERD'S BUSH, W.* Date *1.9.17*
Patrol Officer Medical Officer i/c
Captain R.A.M. Hospital.

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India	
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of pension }		
Sums due on account of public debts ...						

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

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

Station _____ Officer in Charge
 Date _____ Records.

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 Commissioners of Chelsea Hospital. The form should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his signing 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, to be completed by the Secretary, Royal Hospital, Chelsea, London, S.W.



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

A Name in full *Sparked Louis*
Regiment from which discharged *Newfoundlanders*
Regimental Number *1052*
Where born (Parish, Town and County), and when *Lower Island Co. Me. 25. 12. 1894*
Intended address *C/o Record Office 58 Victoria St. Ld.*
Height on discharge *5* Feet *6* Inches
Colour of Hair on discharge *Dark Brown* **Colour of Eyes** *Brown*
Descriptive marks *Uprightly with help of sticks* **Complexion** *Fresh*
Figure on discharge
Christian name of Father *James*
Christian name of Mother *Berta*
Wife's Maiden name in full *—*
Date and Place of Marriage *—*
Christian names of Children *—*
Nature and locality of civil employment desired

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) *Sparked L* (Rank) *Ser*
 Station *Military Orthopaedic Hosp.* Date *1.9.17*

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 *Medical Officer i/c* *Military Orthopaedic Hosp.* *Victor Phillips* *Capt. R.A.M.* *Hospital.*
 Station *Queen's Road, Shepherd's Bush W.* Date *1.9.17*

B Period of Service and in what Corps ...

Regiment	Years	Days	All Service Abroad with Stations	Years	Days
			India		
			S. Africa		
Disallowed					
Service towards Pension					
Date inclusive to which pay has been issued	Sum due on account of advance of pension }				
Sums due on account of public debts ...	}				

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges **Medals**
Wounds, and Actions in which received

Other distinguishing marks

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

Station _____ Officer in Charge _____
 Date _____ Records. _____

CERTIFIED TRUE COPY

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to General Service Section W or W(T) in substitution for a man fit for



No. 1052 Rank _____
Name (surname first) Sparkes Lewis
Regiment 1st Newfoundland

1. State what special qualifications you have for employment in civil life.

Nil.

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

Nil

3. What is the nature and locality of the employment you desire?

Newfoundland

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? It so, in what capacity?

Date 25.8.17

Signature [Signature]
Sparkes

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

N.P.P./54

No.417.

From Pay & Record Office,
London

To Minister of Militia,
St. John's, Nfld.

#1052 Pte. L. Sparkes

Overcredited Ration Allowance as per claim 156. 2s. 9d.

October 29th, 1917.

Private L. Sparkes,

Lower Island Cove, C.B.

Dear Sir,-

I enclose herewith cheque for \$65.14, being the balance due you, (including bonus & clothing) when discharged..

I also enclose special form, which kindly sign and return to this office.

Yours faithfully,

Capt. & Paymaster.

Enclosures 2.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1052, Pte. L. Sparks

(Substituting A.F. J. 1325). N.F.P./33.

Company. From 9/6/17 To 13/9/17 (Dates inclusive).

Embarked per S.S. _____

DR.

Classification (See Procedure). A

From Liverpool Date 13/9/17

Draft No. 48

CR.

Date	Pay Book Col.	PARTICULARS	Rate	Days	£	s	d	Date	Pay Book Col.	PARTICULARS	Date	Days	£	s	d	
	8	Forfeited Pay							1	Pay	1.00	97	97	00		
	9	Allotments	.60	97	58	20			2	Field Allowance	.10	"	9	70		
	10								3	Other " "						
	11/12	Total Stoppages			11	19	2		4/5	Total @ 4.86 2/3			106	70	21 18 6	
	13	Fines							6	Balance Credit Last Period			30	13	3	
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>						
	15	Arms & Accoutrements								Ration Allce, 3/9/17-13/9/17						
	16	Barrack Damages								= 11 days @ 2/			1	2	0	
	17	Hospital Stoppages								<p>This account is in accordance with information received at the Pay & Record Office to <u>12/9/17</u> and is therefore subject to amendment if, and as may be found necessary.</p>						
	17a	Miscellaneous Stoppages														
	19	Casual Payments per P & R. O.			39	10	0									
	20	1st Payment														
	21	2nd "														
	22	3rd "														
	23	Final "														
	24	Balance Debit Last Period														
	28	" Due by Paymaster			2	4	7		27	Balance Due to Paymaster						
					53	13	9						53	13	9	

CHECKED
R.M.A.
12/9/17



191

CERTIFIED CORRECT.

NEWFOUNDLAND CONTINGENT

J. H. Marshall
O.S. Company.
PAYMASTER & OFFICER

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1052, Pte. L. Sparks
 Company. From 9/6/17 To 13/9/17 (Dates inclusive).
 DR. Classification (See Procedure).

(Substituting A.F. J. 1625). N.F.P./35.
 Embarked per S.S. _____
 From Liverpool Date 13/9/17
 Draft No. _____ CR.

Date	Pay Book Col.	PARTICULARS	Rate	Days	£	s	d	Date	Pay Book Col.	PARTICULARS	Date	Days	£	s	d	
	8	Forfeited Pay							1	Pay						
	9	Allotments	.30	97	58	20			2	Field Allowance	1.00	97	97	00		
	10								3	Other " "	.10	"	9	70		
	11/12	Total Stoppages			58	20	11 19 2		4/5	Total @ 4.86 2/3			106	70	21 18 6	
	13	Fines							6	Balance Credit Last Period			30	13	5	
	14	Clothing & Necessaries							6a	OTHER CREDITS:						
	15	Arms & Accoutrements								Ration Allice,	5 / 9 17	13 / 9 17				
	16	Barrack Damages								= 11 days @ 2 /			1	2	0	
	17	Hospital Stoppages								This account is in accordance with information received at the Pay & Record Office to 12/9/17 and is therefore subject to amendment if, and as may be found necessary.						
	17a	Miscellaneous Stoppages								27	Balance Due to Paymaster					
	19	Casual Payments														
	20	1st Payment	per P & R. O.			59	10	0								
	21	2nd "														
	22	3rd "														
	23	Final "														
	24	Balance Debit Last Period														
	28	" Due by Paymaster					2 4 7									
							55 13 9									

CHECKED.
Rma.
 12/9/17

NEWFOUNDLAND CONTINGENT
 VICTORIA
 12 SEP 1917
 PAY & RECORD OFFICE

DUPLICATE
 MAIL COPY
 Posted 20 SEP 1917

CERTIFIED CORRECT.
 NEWFOUNDLAND CONTINGENT
F. H. M. ...
 O.C. " " Company.
 PAYMASTER & OFFICER IN CHARGE

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

I hereby acknowledge that I have received all my pay and allowances (including clothing allowances) and all just demands up to the present date.

Date Oct 30th 1917 Louis Sparker Sig. Soldier.

Place Lower Island Cove: M. J. Gentry Sig. Witness.

This space to be left blank for the Officer's Number.

CERTIFIED TRUE COPY

Proceedings on Discharge



(When forwarded for confirmation the documents named on page 4 should be enclosed)

No. <u>1052</u>	Army Rank <u>Private</u>	
Name <u>Sparks Louis</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>		
Corps <u>1st Newfoundland Regiment</u>		
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>		
Date of discharge <u>October 24th 1917</u>		
Place of discharge <u>St. John's, Nfld</u>		
1. Description at the time of discharge.		
Age <u>22</u> years <u>10</u> months Height <u>5</u> feet <u>6</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>Fair</u> Eyes <u>Brown</u> Hair <u>Dark Brown</u> Trade <u>Farmer</u> Intended place of residence _____ <small>(To be given as fully as practicable)</small>	Descriptive marks. <u>Long scar outer side left thigh</u>	
2. The above-named man is discharged in consequence of <u>Wounds received in Action</u>		
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>		
3. Military character:—		
4. Character awarded in accordance with King's Regulations:—		
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.		
Initials of Commanding Officer.		
Army Form B. 2068 has been issued to*		

To be filled in on the soldier quitting the Colours.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,



Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here



SEP 28

1921.

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

Louis Sparks

in respect of his service as No. 1052 Rank Pte.

Name L. Sparks

Royal Nfld. Regt.

Mtd. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received

L. Sparks. Victory &

Signature

British War Medal

Date

October 14th 1921.

Address

153 Carey St
City.

[P.T.O.]

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Newfoundland Regiment,

Department of Militia,

St. John's Newfoundland,

Fold Here



June 20th 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 404), is forwarded herewith to

Pvte Louis Sparks,

in respect of his service as No. 1052 Rank Pvte.

Name Louis Sparks Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received King's Certificate

Signature Louis Sparks R.F.

Date Sept 1st 19 21

Address 153 Basy St.
City.

Receipt for Army Book 64

No. 1052 Name .. *L. Sparke*

To Certify that I have received the AB 64 of the above
named Soldier.

Name. *L. Sparke* ..

Date. *August 5th* 1920.

Place. *153 Casey St.* -
City

N.B. For completion and return to the Department of Militia
insert in corner of envelope "AB 64"



RECEIPT.

1052

FOR ISSUE OF RIBAND OF VICTORY MEDAL/1914-1919.

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

NO. 1052...NAME... Louis... Sparkes

DATE. 20. 1. 20.

PLACE.. 15. 3. 1915
bany St
city

C.R. 1052

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1052 Name L Sparks

Witness. A. H. Jones

Date Dec. 4/19.

Place St. John's

C.R. 1052

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 STAR.

I certify that I have received an issue
of 3 inches of Riband of 1914-15 Star.

Name *L. Sparkes*.....

Date *3/13/19*.....

Place.....

PLEASE SIGN, AND RETURN TO DEPT. OF MILITIA.

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. J. Readell

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND

of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue, having served on* *Gallipoli.*

from *Sept:* 1915 to *Dec:* 1915.

(Date) *29th 3/19* (NO) *1052* (Rank) *Pte.* (Name) *Louis Spake*

(Place) *153 Casey St. St. Johns.*

*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. F. Readell

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

I hereby make claim for issue of Riband of
1914-15 Star.

I certify that I am entitled to this issue,
having served on* *Gallipoli*.
from *Sept*: 1915 to *Dec*: 1915.

(Date) *29th / 3 / 19* (NO) *1052* (Rank) *Pte.* (Name) *Louis Sparks*
(Place) *153 Basey St. St. Johns.*

*Fill in theatre of War where you served in
Gallipoli, Mudros, Lemnos, or Western Egyptian
Frontier.

Jan. 16, 18

Mrs. Amy Sparks,

Mrs. Snelgrove,


Lower Island Cove.

1052, private L. Spraks

Dear Madam:-

With further reference to my letter of 8 Nov. concerning your marriage certificate, I have the honour to inform you that such certificate has been received and I am forwarding it to you.

Yours faithfully,



Major, C.S.O.

C.R. 1052

211

DUPLICATE
MAIL COPY
Posted
8 - JAN 1918



17th December, 7.

13993/220/R.&MC.

The Hon. the Minister of Militia,
St. John's,

Newfoundland.

HA/NWV

1052, PTE. L. SPARKS.

In accordance with your letter dated
8/11/17 (7732) I enclose herewith the Marriage
Certificate of above named man.

Chief Paymaster & O. i/c Records.

N.F. P/39.



NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

C.R. 1052

CABLES AND TELEGRAMS:
"SYNOPTICAL,"
LONDON.

TELEPHONE:
VICTORIA 147.

COMMUNICATIONS TO BE ADDRESSED TO THE
PAYMASTER & OFFICER I/c RECORDS.
AND THE FOLLOWING NO. QUOTED:

13993/220/R.&MC.

PAY & RECORD OFFICE.

58, VICTORIA STREET,

LONDON, S.W..

17th December, 1917.

To The Hon. the Minister of Militia,
St. John's,
Newfoundland.

HA/NWV

SUBJECT: 1052, PTE. L. SPARKS.

In accordance with your letter dated
8/11/17 (7732) I enclose herewith the Marriage
Certificate of above named man.

J. B. Anderson
for Chief Paymaster & O. i/c Records.

Nov. 8th, 1917.

Mrs. Amy Sparks,
C/o Mrs. Snelgrove,
Lower Island Cove.

1052 Pte. L Sparks

Dear Mrs. Sparks:-

Your letter Nov. 6th has been received,
and I am instructed to inform you that a letter has been
written to the Pay & Record Office, London requesting
that your certificate of marriage should be sent to this
Dept. and same will be forwarded to you immediately
upon receipt.

Yours faithfully,


Major, C.S.O.

Nov. 8th, 1917.

From:- Minister of Militia

To:- Chief Paymaster & Officer i/o Records

LONDON

Sir:- 1052 Pte. L. Sparks

In reply to your 9737/33 dated 22nd Sept.,
I have the honour to inform you that it is requested
that the marriage certificate which was left at your
office on 13/17 should be forwarded to this Dept. to
be sent to the parties concerned.

I have the honour to be

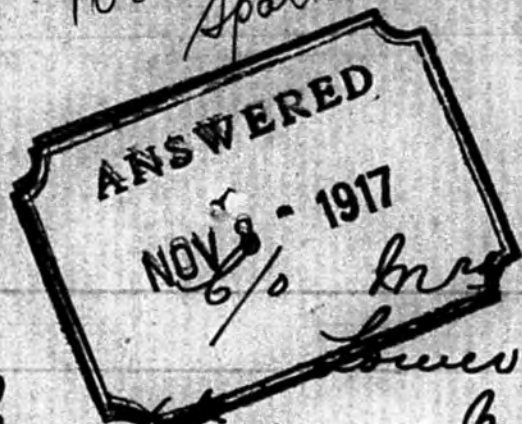
Sir,

Your obedient servant,


Minister of Militia.

1052 Sparkes

C.R. 4936



Mrs Sulgrave
Lower Island Cove
Nov: 6th 1917. Newfoundland.

Sir.

Will you kindly forward
me my marriage certificate
that was required by the
Mfld. headquarters in England.

And Oblege

Yours truly.

Amy Sparkes.

To.

The Dept: of Militia.

Nov. 2nd, 1917.

From:- Dept of Militia,

C I T Y.

To:- #1052 Pte. L. Sparks,

Lower Island Cove, C.B.

Sir:-

I am informed by the Pay& Record Office,
London that your certificate of marriage was left at that
office when you proceeded to Nfld. on 13th Sept., 1917.
Please inform me as soon as possible what you wish done
with this certificate.

I am,

Yours faithfully,

Major, C.S.O.

C.R. 1052

Extract from list of men of the Royal Newfoundland Regiment
discharged on various dates.

1052 Pte. Louis Sparks,

Discharged Oct. 24th 1917, Medically unfit

C.R. 1052

Abstract from Roll of Officers, N.C.O.s and Men Discharged from The
Royal Newfoundland Regiment.

Authority: Pay Office, St. John's.

<u>No</u>	<u>Rank</u>	<u>Name</u>	<u>Date</u>	<u>Reason.</u>
1052	Pte.	Louis Sparkes	Oct. 24th 1917	Med. Unfit.

C.R.

1052

Extract from Daily Orders Part II Unit The Royal
Wld. Rgt., St. John's, Sept. 29th, 1917.

The following man having returned from Overseas is
attached to H.Q's from Sept. 28th, 1917.

1052 Pte. L. Sparkes.

NEWFOUNDLAND CONTINGENT. **C.R. 4409**

CABLES AND TELEGRAMS:
"SYNOPTICAL"
LONDON.

TELEPHONE:
VICTORIA 147.

COMMUNICATIONS TO BE ADDRESSED TO THE
PAYMASTER & OFFICER i/c RECORDS.

AND THE FOLLOWING NO. QUOTED:

9737/33

The Hon. the Minister of Militia,
St. John's,
Newfoundland.

PAY & RECORD OFFICE,
58, VICTORIA STREET,

LONDON, S.W. 1.

22nd September, 1917.

Sir, No. 1052, Pte. L. Sparks

I have the honour to inform you that Certificate of Marriage of this Soldier who proceeded to Newfoundland in company with his wife on 13/9/17 was left at this office.

Will you kindly ascertain and direct as to its disposal?

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



Major,

Chief Paymaster & O. i/c Records.

HT/NW

N. W. FOUNDLAND 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)

Ed M. Shirley

Signature of Sender _____

Address _____

Line Number	Rcd	By	Sent	by	Check

Dated 14th November, 1916.

To Mrs. Mary Snelgrove,
Lower Island Cove.

Record Office London today reports No. 1052 Private
Louis Sparks at Military Orthopaedic Hospital Shepherd's
Bush, London, Gunshot Wound Left Leg Fractured Femur.

J. R. BENNETT,
Colonial Secretary.

1052 Sparks

C.R.

1052

Extract of Casualty List received from P.&M.O.
November 13th. 1916.

1052, Pte L Sparkes.

Military Orthopaedic Hospital Bush W., Nov. 11/6.

G S.W. L. Leg. Frac Femur. from Guildford Mil. Hosp.

C.R. 1052

Extract from Casualty of Nominal Roll of sick and wounded admitted
on various dates to various Hospitals.

Military Orthopaedic Hospital, Shepherds Bush, W Nov. 11th 1916 .

1052 Pte. Sparkes, L. G.S.W.L. Leg
from Guildford Military Hospital.

C.R. 1052

Extract of Casualty List received from P&O., London

Dated Aug. 1st. 1916.

The following Casualties in the Newfoundland Contingent
are reported under various dates:-

1052 Pte. S. Sparks.

Wounded.

C.R. 1052

Extract ~~Extract~~ of Casualties received from Pay & Record
Office, London, dated July 31, 1916.
(Extract from Army Form B 215, from O.C. 1st Hfld. Regt.
dated 11/7/16.)

#1052 Pte. L. Sparkes. ✓

Wounded in action 1/7/16.

C.R. 1052

Extract of Casualty List received from P.&.R.O.
20th. July 1916.

1052, Pte S. Sparkes. ✓

1st Nfld. First Line Hospital Claudon Park Guildford from
Hosp. Ship 7th. July 1916. GSW I Leg Severe.

NEWFOUNDLAND POSTAL TELEGRAPHS.

Cable Connection with all the World



All Messages Sent are Subject to the Following Conditions:

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The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender

Frederick M. Snelgrove

Address

Line Number

Rcd

By

Sent

by

Check

Dated

20th July, 1916.

To

Mrs. Mary Snelgrove,

Lower Island Cove.

Regret to inform you Record Office First Newfoundland Regiment London reports No. 1052 Private Louis Sparkes at Clandon Park Hospital Guildford Gunshot Wound Leg severe.

J.R.BENNETT,

Colonial Secretary.

FOR TYPEWRITER

C.R. 1052

Extract of Casualty List received from P.&R.O.
June 12th. 1916.

1052, Pte L. Sparkes. ✓

The following man has rejoined the unit from the
Egyptian Expeditionary Force, and is cleared from
the Casualty List.

FEB 18 1916

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1052, Private Louis Sparks, who was reported at Convalescent Camp, Malta, on December 21st following an attack of jaundice, was transferréd for duty, St. David's Hospital, Malta, on January 4th.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

1052 Sparks

Mrs. Mary Snelgrove,
Lower Island Cove.

February 1, 1916.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 1052, Private Louis Sparks, who was previously reported as suffering from jaundice at Malta on November 26th, was transferred to All Saint's Convalescent Camp on December 21st.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mrs. Mary Snelgrove
Lower Island Cove.

1052 Sparks

C.R. 1052

Extract of Casualty list received from Pay and Record office London
dated Jan. 19th. 1916.

1052 Pte. L. Sparks

1st. Newfoundland Regiment.....Trans. for duty St. David's Hospital
Malta ex All Saints C.C.4th. Jan.'16.

46.
January 14, 1916.

Dear Madam,

I am in receipt of your letter of the 11th instant, regarding your son Private Louis Sparks, No. 1052, and beg to say that we have no official record here of his being ill with jaundice in hospital. As soon as I receive official intimation concerning him, I shall at once transmit the same to you.

I expect that if he is ill, his illness is of so slight a nature that they have not officially reported it. I do not think, therefore, there is any need to worry, as, if his illness takes a serious or dangerous turn, the official intimation will be at once sent.

Yours truly,

Colonial Secretary.

1052 Sparks
Mrs. Mary J. Snelgrove,
Postal Telegraphs,
Lower Island Cove.

January 14, 1916

Dear Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1052, Private Louis Sparks, was admitted to St. George's Hospital, Malta, on November 26th, suffering from jaundice. This information has been received by mail.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Colonial Secretary.

Mrs. Mary Snelgrove,
Lower Island Cove.

1052 Sparks

S (46)

Postal Telegraphs 26
John Island Core
Jan 11-1916

Hon. J. R. Bennett
St. Johns.

Dear Sir:-

I have heard by private letters that my Nephew 1052 Private Louis Sparks is ill with Jaundice in Hospital. Can you kindly inform me if you have received any knowledge of same from Recd Office London. Am very anxious concerning my nephew's condition and would feel very grateful if you had any news of same.

Yours respectfully
(Mrs) Mary J. Snellson

1052 Sparks

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&.R.O.

January 5th 1916.

~~2082~~, Pte L Sparks. ✓

1082

1 Newfoundland R. Sick Trans. to All Saints ex St George's
H. Malta 21st December 1915.

Extract from Casualties received from Pay & Record Office,
London, dated December 23, 1915.

#1052 Pte. L. Sparks.

Jaundice severe.

Transferred ex 54 C.C.S. Sulva 18th November 1915.

C.R. 1052

Extract of Sick and Wounded F.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3993, dated Dec. 20th. 1915.

1052 Pte. L. Sparkes

Newfoundland Contingent..... Jaundice..... Adm to
Hospital in Malta ex H.S. "Nevasa" 25th. November 1915.

C.R. 1052

Extract of Sick and Wounded N.C.O.s. and Men of the Mediterranean Expeditionary Force, No: H. 3981, dated Dec. 30th. 1915.

1052 Pte. L. Sparks

1/Newfoundlanders..... Jaundice Ser..... Adm. 54th. Cas. Cl.
Station Suvla 16th. Nov. 1915.

GR. 1052

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3955, dated Dec. 18th. 1915.

1052 Pte. L. Sparks.

1st. Newfoundland R..... Jaundice...../.....Adm. St. George H.
Malta ex H.S. Nevasa 26th. Nov. 1915.

C.R. 1052

Extract from Service Roll of "D" Co. 1st En. MFA. Regt.
Embarked Demerport for Active Service, 20-8-15.

1052 Pte. L. Sparks.

Disembarked Alexandria 21-8-15 Proceeded to Albania,
Gairo, same date Embarked Alexandria for Gallipoli
15-9-15.

C.R. 1052

Extract from Nominal Roll of Draft embarked for
Overseas per S.S. Stephano March 20th 1915.

No. 8. Platoon.

1052 Pte. L. Sparkes.

C.P. 1052

Louis Sparks. was attested for General Service
with the NEWFOUNDLAND REGIMENT on ..Jan23rd,1915....
Regimental No. 1052 was allotted to Pte Louis Sparks.

AUTHORITY:

Record Officer

Dept. of Militia,
March 25th. 1919.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of Newfoundland

Number of Sheet _____

Signature of O. C. Company D. M. G. [Signature]
Capt.

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.20,712-s.

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>1052 Sparkes Lt</u>	Age on <u>22</u> years - months	<u>Fisherman</u>	
Joined	Date	Date of Enlistment <u>Jan 23 1915</u>	Religion	
Joined	Date	Period of { with Colours <u>2 1/2</u> years. with Reserve <u>3 1/2</u> years.	<u>Methodist</u>	
Joined	Date			

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>St John's Camp</u>	<u>3 7/15</u>	<u>Pte.</u>		<u>Absent 2 at 00 Roel.</u>	<u>Cpl News</u>	<u>4 days c.c.</u>	<u>7 7/15</u>	<u>Capt J. W. M. O.</u>	<u>24K</u>
	<u>4 1/15</u>			<u>do.</u>	<u>Capt News</u>	<u>5 days c.c.</u>	<u>8 7/15</u>	<u>do.</u>	<u>24K</u>
	<u>7 7/15</u>			<u>Refusing to obey an order.</u>	<u>Sgt Green</u>				
	<u>15 7/15</u>			<u>Absent 2 at 00 Roel until 12.20 am 16 7/15</u>	<u>Cpl Mervin</u>		<u>16 7/15</u>	<u>do.</u>	<u>Forfeit 1 days pay. 24K</u>
				<u>Medically unfit 24 10 77</u>					

COPY SENT TO
O.C. H.Q.
ST. JOHNS. N.F.L.D.
N.F.P.38. No. 2422/1110
DATED 12 SEP 1917

To be carried over

Army Form B. 121.