



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1267

Name in full Stephen Wiseman Age 20

Address Fortune St. (at D. Bay)

Married Single Height 5'9" Weight 125
Color Dark Hair Auburn Eyes Blue

Other distinguishing marks none

Nearest relative Mother (Mary)

Address Fortune St. (at D. Bay)

Dependents none

Occupation Lumberer Present Wage \$26.00 per month

Previous service

Decorations

General Remarks March 25/15

Date of Enlistment

I, Stephen Wiseman 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.

Stephen Wiseman

Declared before me this 20th day
of March 1915

J. J. [Signature]
Lieut.

His witness
Stephen Wiseman
Witness

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1282

Name Stephen Wiseman

Apparent age 20 years months. Height 5 feet 9 inches.

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

Distinctive marks Color: Dark, Hair: Auburn, Eyes: Blue

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mary Wiseman, Fortune Harbour, N.S.B. Bay, Nfld.

| Relationship Mother

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 on | | Service in Re-serve not allowed to reckon towards G. C. Pay | | Signature of Officers certifying correctness of entries |
|--|----------------|---|-----------|-------|---|------|---|------|---|
| | | | | | years | days | years | days | |
| Service towards limited engagement reckons from <u>25/3/15</u> | | | | | | | | | |
| Joined at <u>St. Johns</u> on <u>25 March, 1915.</u> | | | | | | | | | |
| <u>Dischgd. St. Johns, May 9/17.</u> | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total Service forfeited as above | | | | | | | | | |
| Total Service towards Engagement to (date of discharge) years days | | | | | | | | | |
| " " " Pension " (") " " | | | | | | | | | |

Wiseman, S.

1262

Ray Sept.

St, John's, N. F.

May 28th, /17.

Lieut. Howley,
Paymaster, First Nfld. Regt.,
City.

Dear Sir:-

Some days ago I asked you not to send cheques
for Pte. Stephen Wiseman to Fortune Hr.,

He called in to see me this morning, and is now
located here definitely. His address is:

C/o Mr. John White,
Rocky Lane,
LeMarchant Rd.,

Be good enough to send him any cheques, papers,
or documents you have as soon as possible, and oblige.

Yours truly,

H. E. COWAN.

C O P Y.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1262, Pte. Wiseman, S
Company. From 23/12/16 To 10/4/17 (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P/36.
Embarked per S. S. Scotian
From Liverpool Date 10/4/17
Draft No. CR.

DR. Classification (See procedure)

| Date | Pay Book Col | Particulars | Rate | Dys | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | | |
|----------|--------------|------------------------------|------|-----|----|----|----|------|---------------|--------------------------|------|-----|-----|------|----|----|---|
| | 8 | Forfeited Pay | | | | | | | 1 | Pay | 1.00 | 109 | | | | | |
| | 0 | Allotments | .50 | 109 | | 54 | 50 | | 2 | Field Allowances | .10 | " | | 1090 | | | |
| | 10 | | | | | | | | 3 | Other Allowances | | | | | | | |
| | 11/12 | Total Stoppages | | | | 54 | 50 | | 4/5 | Total @ 4.86 2/3 | | | | | | | |
| | | | | | | 11 | | 4 | | | | | 119 | 90 | 24 | | |
| | 13 | Fines | | | | | | | 6a | | | | | | | | |
| | 14 | Clothing and Necessaries | | | | | | | | | | | | | | | |
| | 15 | Arms & Accoutrements | | | | | | | | | | | | 20 | 6 | 3 | |
| 9/4/17 | 16 | Barrack Damages Advs. Hosp. | | | 1 | 17 | 6 | | | | | | | | 14 | 0 | |
| 5/4/17 | 17 | Hospital Stoppages p & R. O. | | | 1 | 10 | 0 | | | | | | | | 1 | 0 | |
| 27/1/17 | 17a | Miscellaneous Stoppages do | | | 2 | 0 | 0 | | | | | | | | | | |
| 10/3/17 | 19 | Casual Payments | | | 5 | 9 | 6 | | | | | | | | | | |
| n10/3/17 | 20 | 1st Payment do | | | 10 | 0 | 0 | | | | | | | | | | |
| 13/3/17 | 21 | 2nd " do | | | 11 | 10 | 0 | | | | | | | | | | |
| 28/3/17 | 22 | 3rd " do | | | 2 | 0 | 0 | | | | | | | | | | |
| 31/3/17 | 23 | Final " do | | | 1 | 15 | 0 | | | | | | | | | | |
| 9/4/17 | 24 | Balance Debit Last Period | | | | | 10 | 0 | | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | | | 27 | Balance Due to Paymaster | | | | | 1 | 3 | 0 |
| | | | | | 47 | | 16 | 0 | | | | | | | 47 | 16 | 0 |

This account is in accordance with information received at the Pay & Record Office to 9/4/17 and is therefore subject to amendment if, and as may be found necessary.



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CERTIFIED CORRECT

J. H. Marshall
PAYMASTER OFFICER IN CHARGE

CHECKED.
[Signature]

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1282, Pte. Wiseman, S
 Company. From 23/12/16 To 10/4/17 (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P./36.
 Embarked per S. S. Scotian
 From Liverpool Date 10/4/17

DR. Classification (See procedure)

Draft No. CR.

| Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d |
|----------|---------------|--------------------------|------|-----|----|----|----|------|---------------|----------------------------------|------|-----|-----|----|----|
| | 8 | Forfeited Pay | | | | | | | 1 | Pay | 1.00 | 109 | 109 | 00 | |
| | 0 | Allotments | .50 | 109 | 54 | 50 | | | 2 | Field Allowances | .10 | " | 109 | 00 | |
| | 10 | | | | | | | | 3 | Other Allowances | | | | | |
| | 11/12 | Total Stoppages | | | | | | | 4/5 | Total @ 4.86 2/3 | | | | | |
| | | | | | 54 | 50 | 11 | | | | | | 119 | 90 | 24 |
| | | | | | | | | | | | | | | | 12 |
| | 13 | Fines | | | | | | | 6a | | | | | | 9 |
| | 14 | Clothing and Necessaries | | | | | | | | Cr. Balance 22/12/16 | | | 20 | 6 | 3 |
| | 15 | Arms & Accoutrements | | | | | | | | Ration Allice. 10/3/17 - 16/3/17 | | | | 14 | 0 |
| 9/4/17 | 16 | Barrack Damage | | | | | | | | " " 31/3/17 - 9/4/17 | | | 1 | 0 | 0 |
| 5/4/17 | 17 | Hospital Stoppage | | | | | | | | | | | | | |
| 27/1/17 | 17a | Miscellaneous | | | | | | | | | | | | | |
| 10/3/17 | 19 | Casual Payment | | | | | | | | | | | | | |
| n10/3/17 | 20 | 1st Payment | | | | | | | | | | | | | |
| 13/3/17 | 21 | 2nd " | | | | | | | | | | | | | |
| 26/3/17 | 22 | 3rd " | | | | | | | | | | | | | |
| 31/3/17 | 23 | Final " | | | | | | | | | | | | | |
| 9/4/17 | 24 | Balance Debit | | | | | | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | | | 27 | Balance Due to Paymaster | | | 1 | 3 | 0 |
| | | | | | 47 | 16 | 0 | | | | | | 47 | 16 | 0 |



191

CERTIFIED CORRECT
 NEWFOUNDLAND CONTINGENT

J. H. Marshall
 PAYMASTER'S OFFICER / RECORDS

CHECKED.
[Signature]

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1282, Pte. Wiseman, S
Company. From 23/12/16 To 10/4/17 (Dates inclusive)

Substituting A.F.O. 1625) N.F.P/36.
Embarked per S. S. Scotian
From Liverpool Date 10/4/17
Draft No. _____ CR.

DR. Classification (See procedure)

| Date | Pay Book Col | Particulars | Rate | Dys | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | |
|----------|--------------|------------------------------|------|-----|----|----|----|------|---------------|--------------------------|------|-----|-----|----|----|---|
| | 8 | Forfeited Pay | | | | | | | 1 | Pay | 1.00 | 109 | 109 | 00 | | |
| | 0 | Allotments | .50 | 109 | 54 | 50 | | | 2 | Field Allowances | .10 | " | 109 | 00 | | |
| | 10 | | | | | | | | 3 | Other Allowances | | | | | | |
| | 11/12 | Total Stoppages | | | 54 | 50 | 11 | 4 | 4/5 | Total @ 4.86 2/3 | | | | | 9 | |
| | | | | | | | | | 6a | | | | 119 | 90 | 24 | |
| | 13 | Fines | | | | | | | | | | | | | | |
| | 14 | Clothing and Necessaries | | | | | | | | | | | | | | |
| | 15 | Arms & Accoutrements | | | | | | | | | | | | | | |
| 9/4/17 | 16 | Barrack Damages Advs. Hosp. | | | 1 | 17 | 6 | | | | | | | | | |
| 5/4/17 | 17 | Hospital Stoppages p & R. O. | | | 1 | 10 | 0 | | | | | | | | | |
| 27/1/17 | 17a | Miscellaneous Stoppages do | | | 2 | 0 | 0 | | | | | | | | | |
| 10/3/17 | 19 | Casual Payments | | | 5 | 9 | 6 | | | | | | | | | |
| n10/3/17 | 20 | 1st Payment do | | | 10 | 0 | 0 | | | | | | | | | |
| 13/3/17 | 21 | 2nd " do | | | 11 | 10 | 0 | | | | | | | | | |
| 28/3/17 | 22 | 3rd " do | | | 2 | 0 | 0 | | | | | | | | | |
| 31/3/17 | 23 | Final " do | | | 1 | 15 | 0 | | | | | | | | | |
| 9/4/17 | 24 | Balance Debit Last Period | | | | | 10 | 0 | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | | | 27 | Balance Due to Paymaster | | | | 1 | 3 | 0 |
| | | | | | 47 | | 16 | 0 | | | | | | 47 | 16 | 0 |

This account is in accordance with information received at the Pay & Record Office to 9/4/17 and is therefore subject to amendment if, and as may be found necessary.



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CERTIFIED CORRECT
NEWFOUNDLAND CONTINGENT

J. H. Marshall
IN CHARGE
PAYMASTER & OFFICER IN CHARGE

CHECKED.
[Signature]

**DUPLICATE
MAIL COPY**

NEWFOUNDLAND CONTINGENT

Substituting A.F.O. 1625) N.F.P/36.

STATEMENT of ACCOUNT of No. 1232, Pte. Wiseman, S
From 23/12/16 To 10/4/17 (Dates inclusive)

Embarked per S. S. Section
From Liverpool Date 10/4/17
Draft No. 33 CR.

Classification (See procedure) *X*

DR.

| Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d |
|---------|---------------|---------------------------|------------|-----|----|----|----|------|------------------|----------------------------------|------|-----|-------|------|------|
| | 8 | Forfeited Pay | | | | | | | 1 | Pay | 1.00 | 109 | 10900 | | |
| | 0 | Allotments | .50 | 109 | 54 | 50 | | | 2 | Field Allowances | .10 | " | 1090 | | |
| | 10 | | | | | | | | 3 | Other Allowances | | | | | |
| | 11/12 | Total Stoppages | | | | | | 4/5 | Total @ 4.88 2/3 | | | | | | |
| | | | | | 54 | 50 | 11 | | | | | | 119 | 9024 | 12 9 |
| | 13 | Fines | | | | | | | 6a | | | | | | |
| | 14 | Clothing and Necessaries | | | | | | | | | | | | | |
| | 15 | Arms & Accoutrements | | | | | | | | | | | | | |
| | 16 | Barrack Damages | | | | | | | | Cr. Balance 22/12/16 | | | | 20 | 6 3 |
| | 17 | Hospital Stoppages | Adv. Hosp. | | 1 | 17 | 6 | | | Ration Allice. 10/3/17 - 16/3/17 | | | | | 14 0 |
| 9/4/17 | 17a | Miscellaneous Stoppages | P & R. O. | | 1 | 10 | 00 | | | " " 31/3/17 - 9/4/17 | | | | 1 | 0 0 |
| 5/4/17 | 19 | Casual Payments | do | | 2 | 00 | 00 | | | | | | | | |
| 27/1/17 | 20 | 1st Payment | | | 5 | 00 | 6 | | | | | | | | |
| 10/3/17 | 21 | 2nd " | do | | 10 | 00 | 00 | | | | | | | | |
| 10/3/17 | 21 | 2nd " | do | | 11 | 00 | 00 | | | | | | | | |
| 13/3/17 | 22 | 3rd " | do | | 2 | 00 | 00 | | | | | | | | |
| 26/3/17 | 23 | Final " | do | | 1 | 15 | 00 | | | | | | | | |
| 31/3/17 | 24 | Balance Debit Last Period | | | | 10 | 00 | | | | | | | | |
| 9/4/17 | 28 | " Due by Paymaster | | | | | | | 27 | Balance Due to Paymaster | | | | 1 | 3 0 |
| | | | | | 47 | 16 | 0 | | | | | | | 47 | 16 0 |



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CERTIFIED CORRECT.

NEWFOUNDLAND CONTINGENT,
Lt. W. Marshall, Lieut.

FOR O.C. " " Company, RECORDS
PAYMASTER & CLERK



349 AND 371 WATER STREET

JOHN ANDERSON
General Importer

St. John's, Newfoundland,

Sept 9 1917

Dear Mr. Redgrave,

Mr. [Name] who
 lost his right arm in
 [Location] and had been totally
 employed at [Location] on the
 left side. He cannot
 continue that work.
 Do you know of anything
 we can put him on to,
 messenger work in a
 fort. office or with one
 of the [Location] (or
 [Location]) offices. It seems
 to be what he would be
 best fitted for.

Yours truly
 H. E. Cowan

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 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... *Stephen* 2. Surname... *Wiseman*
3. Rank... *Private* 4. Regt. No. *1262*
5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded... *252 Water St. St. Johns*
6. Date of enlistment in the Regiment... *March 1915*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Mrs John Wiseman
8. Relationship of such dependents... *Mother*
9. Address in full of such dependent... *Fortune Harbour N. B. 13*
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... *in Dardnells + France*
- *Rt. Beaumont Hamel*
- *and wounded Dec. 12th. 1916*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *about 2 1/2 years*

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

enlisted only once

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.....

*received \$ 87 from the pay and record office
at Johns*

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.....

*None
not entitled to any*

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.?..... If not give:- (a) Date of discharge.....

no

(b) Reason for discharge.....

*May 1917
Invalided loss of right arm*

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.....

at Dardanelles in 1915 at Beaumont Hamel in France in 1916 wounded Oct 12.

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.....

receiving \$ 32 per month as pension

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: *S. Wimmer*
 Place of Residence: *252 Water St. St. John*
 Declared before me at: *St. John, Fla.*
 This *28th* day of *February* 19*19*.

John W. 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 |
|-----------------|--------------------|----------------|----------------------|----------------|
| <i>26.12.18</i> | <i>100.00</i> | | <i>5.00</i> | <i>350.00</i> |
| | | | <i>Less POP</i> | <i>100.00</i> |
| | | | | <i>249.90</i> |
| | Certified Correct. | | | Paymaster. |

Basque Brook
April 9th/15

The Paymaster; Wld Contingent
St. Johns

Dear Sir,

Enclosed please find
Order from Stephen Waeman
for four dollars & Eighty Cents
\$4⁸⁰/₁₀₀ Kindly collect the above
amt & Oblige

Yours faithfully
J D Coleman

No 1262

Name Wiseman S

| Date | Particulars | Ch. No. | Dr. | Cr. | Bal. |
|--------|---|---------|--------|--------|--------|
| 1917 | Apr 23 Pay 13 days @ 1.10 | | | 14 30 | 14 30 |
| 30 | " " 7 " @ 1.55 | | | 12 95 | 27 25 |
| May 9 | " " 9 " @ 1.55 | | | 16 65 | 43 90 |
| | Bonus | | | 12 95 | 56 85 |
| | Clothing | | | 25 00 | 81 85 |
| | Relief allowance to 338 - 87- | | | 1 94 | 83 79 |
| Apr 24 | 20 Pay | | 15 00 | | 68 79 |
| 30 | Allotment 20 days @ 51¢ | | 10 00 | | 58 79 |
| May 9 | 20 Pay | | 56 65 | | 1 94 |
| | " " | 2328 | 1 94 | | |
| 1918 | War Service Protective 5 mos @ 70.00 | | | 350 00 | 350 00 |
| | Clothing allowance | | | 35 00 | 385 00 |
| | Bonus | | 12 95 | | 372 05 |
| Dec 26 | 20 Pay | 7435 | 87 15 | | 284 90 |
| Jan 30 | " " | | 35 00 | | 249 90 |
| Mar | " " | 11287 | 70 00 | | 179 90 |
| Apr | " " | 14167 | 70 00 | | 109 90 |
| May | 6 1/2 Hunt. | | 70 00 | | 39 90 |
| June 1 | 20 Pay | 21904 | 39 90 | | |
| | | | 468 79 | 468 79 | |

Sis Anthony King

PAY LEDGER No 2031
Date 2/2/21 by.....

1262

St. John's, N. F.

May 28th, /17.

Lieut. Howley,
Paymaster, First Nfld. Regt.,
City.

Dear Sir:-

Some days ago I asked you not to send cheques
for Pte. Stephen Wiseman to Fortune Hr.

He called in to see me this morning, and is now
located here definitely. His address is:

C/o Mr. John White,
Rocky Lane,
LeMarchant Rd.,

Be good enough to send him any cheques, papers
or documents you have as soon as possible, and oblige.

Yours truly,

H. B. Cowan

1262

New Bray
May 28/16

A. A. Clift - Esq. K.C.
St. John's

Dear Mr. Clift

A few days ago a woman from Fortune St. Mrs. John Wiseman was enquiring from one who was pay-master for the volunteers who had left for England & going to the front - I told her I really did not know anything about it - but would enquire from you

She has a son gone away his name is Stephen Wiseman - will you please let me know particulars about this or you may write her direct - she is a widow woman her husband being dead some years her address is Mrs. John Wiseman Fortune St. N.B. - Bray

Yours sincerely
P. M. Jones

Darker. Ref. to
I will try kindly
forward this to the proper
authority and ask him
to communicate with
Mrs. Wiseman in answer to
her enquiry
Yours truly
P. M. Jones

50¢ per day
to no other
let payment
paid to P. L. Stevens will
be forwarded in a few days

[Faint, mostly illegible handwritten text, possibly bleed-through from the reverse side of the page.]

1877

James M. ...
to Government ...
with ...
in ...

1262
May 31st. 1915

P Moors Esq.,

New Bay N.D.B.

Dear Sir.--

Referring to your letter of May 25th. 1915 to Mr. Clift, I beg to state for the information of Mrs Wiseman, that her son has made her an allotment of 50¢ per day, and the first cheque less an amount of \$4.80 which he has ordered to be paid to another party, will be forwarded in a few days.

Yours truly,


Deputy Paymaster

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 87 ¹²/₁₀₀

Dec 26 1914

Received from the First Newfoundland Regiment
the sum of Eighty Seven ¹²/₁₀₀ Dollars.
on account of Pay. P.B.V.
balance *Wiseman*

| | |
|------------------|----------------|
| Ch. No. 7435 | Initials. EW |
| Pay Ledger. 203. | Initials. awl. |
| Gen. Ledger..... | Initials..... |

Regtl. No. Rank

[Handwritten signature]

No. 1262

Rank *PC*

Name *Weseman J.*

Dispatching
Office
Stamp.



No. 131

From

W. H. Regal

Registered Letter Addressed—

Mr. D. W. Wiseman

Rocky Lane

A. M. City

Arrival
Office
Stamp.

1262

Received by

S. Wiseman

1262

P.R.O.

No. _____

Date Feb 14th 1916.

(1) To the Officer i/c Records,

58 Victoria St
Westminster (Station.)



(2) The Officer Commanding,

Newfoundland Contingent
Qy's (Station.)

(3) The Paymaster,

58 Victoria St
Westminster (Station.)

Regimental No. 1262

Rank and Name Rt Wismar S.

Regiment or Corps 1st Newfoundland

has been granted a furlough from Feb 14th to Feb 23rd

His address while on leave will be:—

58 Victoria St
Westminster

This man has been furnished with a warrant to Victoria & an advance of £1. (one pound)

I consider he is fit for* ^{Duty.} ~~Light duty.~~

A. Hope Gosse Capt. R.A.M.C.T.

Officer in charge Registered Hospital, R.A.M.C.T., S. & London General Hospital, WANDSWORTH, S. W. (Station.)

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1262, Pte. Wiseman, S
 Company. From 23/12/16 To 10/4/17 (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P./36.
 Embarked per S. S. Section
 From Liverpool Date 10/4/17
 Draft No. _____ CR.

DR. Classification (See procedure)

| Date | Pay Book Col | Particulars | Rate | Dys | £ | ¢ | £ | s | d | Date | Pay Book Col | Particulars | Rate | Dys | £ | ¢ | £ | s | d |
|----------|--------------|---------------------------|------|-----|---|----|----|----|---|------|--------------|--------------------------|------|-----|---|-------|------|----|---|
| | 8 | Forfeited Pay | | | | | | | | | 1 | Pay | 1.00 | 109 | | 10900 | | | |
| | 9 | Allotments | .50 | 109 | | 54 | 50 | | | | 2 | Field Allowances | .10 | " | | 1090 | | | |
| | 10 | | | | | | | | | | 3 | Other Allowances | | | | | | | |
| | 11/12 | Total Stoppages | | | | 54 | 50 | 11 | 4 | 0 | 4/5 | Total @ 4.86 2/3 | | | | | | | |
| | | | | | | | | | | | | | | | | 119 | 9024 | 12 | 9 |
| | 13 | Fines | | | | | | | | | 6a | | | | | | | | |
| | 14 | Clothing and Necessaries | | | | | | | | | | | | | | | | | |
| | 15 | Arms & Accoutrements | | | | | | | | | | | | | | | | | |
| | 16 | Barrack Damages | | | | | | | | | | | | | | | | | |
| 9/4/17 | 17 | Hospital Stoppages | | | | 1 | 17 | 8 | | | | | | | | | | | |
| 5/4/17 | 17 | Hospital Stoppages | | | | 1 | 10 | 0 | | | | | | | | | | | |
| 27/1/17 | 17a | Miscellaneous Stoppages | | | | 2 | 0 | 0 | | | | | | | | | | | |
| 10/3/17 | 19 | Casual Payments | | | | 5 | 9 | 8 | | | | | | | | | | | |
| n10/3/17 | 20 | 1st Payment | | | | 10 | 0 | 0 | | | | | | | | | | | |
| 13/3/17 | 21 | 2nd " | | | | 11 | 10 | 0 | | | | | | | | | | | |
| 26/3/17 | 22 | 3rd " | | | | 2 | 0 | 0 | | | | | | | | | | | |
| 31/3/17 | 23 | Final " | | | | 1 | 15 | 0 | | | | | | | | | | | |
| 9/4/17 | 24 | Balance Debit Last Period | | | | | | | | | | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | | | | | 27 | Balance Due to Paymaster | | | | | | | |
| | | | | | | 47 | 16 | 0 | | | | | | | | | | | |



CERTIFIED CORRECT NEWFOUNDLAND CONTINGENT.

Sgd. F. W. Marshall, Lieut.

FOR O.C. PAYMASTER & COMPANY RECORDS



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.)



10984



To the Officer in Charge of Records, Newfoundland Contingents,
58, Victoria Street, S.W. 1.

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 ²¹ ~~14~~ days after the date on this notification, see A.C.I. ⁽⁴¹⁾ ~~1028~~ of 1916.)

Soldier's surname Wiseman, Christian names Stephen
(in full)

Regt. No. and Rank 1262. Pte. Regt. or Corps 1st Newfoundland.
(If T.F. this should be stated)

His address on discharge will be Officer in Charge of Records,
Newfoundland Contingents,
58, Victoria Street, S.W..

The Soldier states that* Dependant's 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 also Army Forms B.178 and W.3494.

Station The King George Hospital,
Stamford Street, S.E. 1.
Date 31st
28th March, 1917.

A.C. Smith
Lt. Col. R.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.

N.B.—This Form must accompany any inquiry respecting this Telegram.



POST OFFICE TELEGRAPHS.

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Office Stamp.



St Johns N.F. 8th

Charges } s. d.
to pay }

Handed } Received }
in at *10.20^{M.}* here at *2.29^{P.}*

TO { *- WSM- Synoptical*
London
For *1262 Wese man wife condition*
anxious Mother

Colonial Secretary

3rd Y. A.

| | |
|---------------------------|---------------------|
| 1ST NEWFOUNDLAND REGIMENT | |
| PAY & RECORD OFFICE | |
| Ref. No. | <i>4229</i> |
| Date | <i>NOV - 8 1916</i> |
| Transmitted | <i>6/11/16</i> |
| File No. | <i>4707/11</i> |

3rd Lan Gen Hos
Ward 75
Room 10

Dear Sir

Referring to your
letter No 8th will
you please wire W.S.M
as follows

Mrs J Wiseman
Colonial Secretary
Wound Healing feeling
well.

Stephen Wiseman

NO 1262

4266

NOV 11 1916

No.

850/145

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES
CABLEGRAM



| | | | | | |
|-------------------------|--------|--------------------------|----------|--|--|
| Prefix _____ Code _____ | | At _____ | | FOR STAMPS | |
| WORDS | CHARGE | To _____ | By _____ | THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS. | |
| | | VIA WESTERN UNION | | | |

11/11/18

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To W. S. M., COLONIAL SECRETARY. ST. JOHN'S.
(NEWFOUNDLAND)

FOR MRS. WISEMAN WOUND HEALING FEELING WELL FROM 1862 WISEMANS

Synoptical.

**NOT TO BE
TELEGRAPHED.**

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

58, Victoria St., S. W.

Signature _____

Address _____

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

Ind. Gen. Pass.
Pay Ward B5
NOV 10

B
ACTED UPON
BY
DATE

The Paymaster
1st. Inf'd Regt.

Please pay no 1262
Pte Stephen Wiseman
£1. (One pound)

M. Schwartz

1351

4281
NOV 13 1916
449
14/11/16

4757/2

739/22 to o.c. 1/1

November 14th 6.

4797/2.

1262., Pte. S. Wiseman .
1/1st. Newfoundland Regt..
3rd. London General Hosp..
Wandsworth,
S. W..

F.M/W.F.

.. POSTAL MONEY ORDER. £1. 0. 0.

Reference your request, dated 10/11/16, Postal Money Order .
for. £1. 0. 0, enclosed together with receipt form which
please sign and return to this Office.

7

1733/11
26/11/17
S. Wiseman

.. Capt..
Paymaster & O. i/c. Records

759/22

O. O.,

1/1st. Newfoundland Regt.

B. E. F.

Feb'y. 12th/17.

FM/WF

January 24th

7

1262, PTE. S. WISEMAN.

Duplicate receipt form
for this soldier's signature is
forwarded to you for necessary action.
The amount of £1. 0. 0. was remitted
to him whilst in Hospital in
London, but acknowledgement has
not so far been received, please.

This soldier is not with
the Battalion, please.

We have no way of knowing if
he is among recent draft now at
Base. (Sd.) S. Robertson, Capt.
a/Adjutant,
2/1st Newfoundland Regiment,
Newton-on-Ayre, N.B.
(Sd.) N. A. Outerbridge,
2/Ht. & A/Adjutant,
1st Newfoundland Regiment.

Major,
Paymaster & O i/c Records.

| | |
|---------------------------|---------|
| 1ST NEWFOUNDLAND REGIMENT | |
| PAY & RECORD OFFICE | |
| Ref. No. | 934 |
| Rec'd. | 21/2/17 |
| Ack'd. | |
| Ans'd. | |
| File No. | |

*This man has been
at 310 of 9/17 since
24/10/16 -*



NEWFOUNDLAND CONTINGENT

No. 17231

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

26/2/17

To: 1262, Pte. S. Wiseman,

1st. Newfoundland Regt.,

3rd. London General Hospital.

At the request and on account of

No. Yourself

Postal Money Order ~~no.~~ for £1-.-. was mailed to you per N.F.P/4,
(4797/2), dated 14/11/16 for which acknowledgement has not so
far been received.

Duplicate Receipt Form is enclosed for your SIGNATURE and
RETURN to this Office, please.

H. K. Pinnevell Major,
Assistant Officer i/c Records.

492/17

Ward B. 5.

London General Hosp
Wandsworth

Dear Sir.

15 1-17

Please forward two pounds
(£2) at earliest convenience. Oblige

Yours truly

1262 S. Wiseman

M. Schwarty C. S.

| | |
|---------------------------|-------------|
| 181 NEWFOUNDLAND REGISTRY | |
| PAY & RECORDS OFFICE | |
| Ref. No. | 586 |
| Rec'd. | JAN 16 1917 |
| Ack'd | |
| Ans'd | |
| File No. | |

N.F.P/47.

NEWFOUNDLAND CONTINGENT

No. 492/7

Pay & Record Office,
58, Victoria Street,
London, S.W.,
17th January 1917

To: Medical Officer in Charge,
3rd London General Hospital,
Wandsworth, S.W.

Postal Money Order No. 32453 for £ 2 : 0 : 0

is enclosed at request of No. 1262, Pte. S. Wiseman,
1st Newfoundland Regiment.

Attached receipt form to be signed and returned, please.

A. J. Guinness Major,
Paymaster & Officer i/c Records.

N.B.—This Form must accompany any inquiry respecting this Telegram.



RYER & SPOTTISWOODE, Ltd., Lond.

POST OFFICE TELEGRAPHS.

If the Receiver of an Inland Telegram doubts its accuracy, he may have it repeated on payment of half the amount originally paid for its transmission, any fraction of 1d. less than ½d. being reckoned as ½d.; and if it be found that there was any inaccuracy, the amount paid for repetition will be refunded. Special conditions are applicable to the repetition of Foreign Telegrams.

Office of Origin and Service Instructions.

Office Stamp.



Charges } s. d.
to pay }

Handed }
in at } 3 15 p.

Received }
here at } 4 5 p.

Hawick
OK £1-10-0

TO {

Newfoundland Pay Office St. John's
Can

Please advance me two pounds

618
FEB 23 1916

G. Wiseman Postoffice Hawick

1262

610/1

February 24th.

6

1262 Pte. G. Wiseman,
C/o Post Office,
Hawick.

Reference your telegram of the 23rd. inst I enclose
Postal Money Order value £2.0.0. This is slightly
in excess of the amount due you to date which is
£1.10.0. Please sign and return the enclosed receipt

Capt.,

Paymaster & O.I/c Records.

2071


QUEEN MARY'S CONVALESCENT AUXILIARY HOSPITALS,
ROEHAMPTON HOUSE.

ROEHAMPTON, S.W.

THE REGIMENTAL PAYMASTER.

Newfoundland Contingent
58 Victoria St S.W.

I beg to inform you that the undermentioned men have been admitted as patients to this Hospital.

| Regt No. | Rank and Name. | Unit. | Date of Admission |
|---|----------------|--------------|-------------------|
| 1262 | Mc Wiseman S. | Newfoundland | 19.3.17 |
|  | | | |

After these men have been fitted with artificial limbs, they will appear before a final Invaliding Board for the purpose of discharge from the Service.

Mar. 25th 1917.

W. H. Nicholls *Commandant*
Commandant.

Queen Mary's Convalescent Hospital.

From
Officer Commanding
3rd London General Hospital



To
Officer I/C Records
58 Victoria Street

1262 Pte Wiseman -----

No 2 Roehampton Form has been lodged for the above-named man whose stump is now ready for the fitting of an artificial limb. He has been granted a pass, if you concur, for a week, to stay with relations at 151 Elsley Road, Lavender Hill S. W.

Wandsworth S. W.
March 10th 1917.

H. Fagan Capt.
Registrar, R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S. W.

amp right arm
Army Form W. 3201
(in pads of 50.)

FOR USE IN THE CASE OF ALL SOLDIERS SENT TO THEIR HOMES UNDER
A.C.I. 1011 OF 1916, PARAGRAPH 2(ix.)

Discharged Service

No. 1262, Rank Private, Name Worsman 21 APR 1917
Newfoundland (Regiment).

is discharged from*
with orders to proceed to his home:

(Address 68 Victoria St SW Inlough to
57.4/12)

and there to await further instructions as to his discharge from the Service.



Place _____ Officer Commanding.
Worsman CAPT., R.A.M.C.

Date 31 MAR 1917 } *
THE KING GEORGE HOSPITAL,
STAMFORD STREET, LONDON, S.E.

*Here enter name of Hospital or Unit from which the Soldier is discharged.

No. _____

Regtl. No. 1262

Rank Pte

Name Wiseman S.

Regiment 1st York

Date from 31/3/17 191

to 5/4/17 191

To proceed to _____

I/c _____ Hospital

Station _____

Date 31/3/17

Address whilst on furlough to which any
orders will be sent.

No. _____

Regtl. No. 51262

Rank Pvt

Name Museman S

Regiment 1st West

Date from 5/4/19 191

10 anno 9/4/19 191

To proceed to _____

London Hospital

Station _____

Date _____

Address whilst on furlough to which any orders will be sent.

OFFICER IN CHARGE

9th April, 7.

No. 1262, Pte. S. Wiseman,
1st Newfoundland Regt.

3131/2

HA/NW

OVERSEAS TRANSPORT.

You, together with No. 1954, Pte. W. Caines, will travel to Liverpool tonight and report at the office of Messrs. Allan Bros. & Co. Ld., 19 James St., Liverpool not later than 10 o'clock tomorrow (Tuesday - 10/4/17) morning.

You will join the draft, also proceeding to Newfoundland, at Liverpool.

Major,
Paymaster & Officer i/c Records.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.No. 739/22

From
 PAY & RECORD OFFICE,
 55, VICTORIA STREET,
 LONDON, S.W.
 FM/WF January 24th 1917

To
 O. O.,
 1/1st. Newfoundland Regt.
 B. E. F.

SUBJECT:

1262, PTE. S. WISEMAN.

Reference Nos,

REPLY

Dated

Feb 14th

1917.

Duplicate receipt form
 for this soldier's signature is
 forwarded to you for necessary action.
 The amount of £1. 0. 0. was remitted
 to him whilst in Hospital in
 London, but acknowledgement has
 not so far been received, please.

W. A. Dunne
 Major,
 Paymaster & O i/c Records.

This Soldier is
 not with the
 Battalion, please.

We have no way of
 knowing if he is among
 recent draft now at Base.

W. A. Dunne

*9/11/17
 1st Newfoundland Regt*

| | |
|---|-------------|
| 1ST N. WFOUNDLAND REGIMENT PAY & RECORD OFFICE | |
| Ref. No. | <i>934</i> |
| Rec'd. | FEB 21 1917 |
| Ack'd. | |
| Ans'd. | |
| File No. | |

C.R. 1262

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 *D. Wiseman*

Date *2/3/19*

Place *St. John*

CIRCULAR LETTER

St. John's,

March 15th 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, Mudros, Egypt*

from *Sept. 10th* 1915 to *Nov. 29th* 1915.

(Date) *21/3/19* (NO) *1226* (Rank) *Private* (Name) *D. Berman*

(Place) *St. John's*

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

C.R.

1262

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

1262 Pte. Stephen Wiseman, discharged May 9th 1917,
Medically unfit

C.R. 1262

Extract from roll of Officers
N. C. O's and men of the
DISCHARGED from the Royal
Newfoundland Regiment.

| Regtl. # | rank | name | date | reason |
|----------|------|-----------------|---------|-------------|
| 1262 | PTE. | Wiseman Stephen | 9/5/17. | MED. UNFIT. |

C.R.

1262

Extract from Daily Orders Part II Unit The Royal Wfld.
Regt. St. John's, Apl. 24th, 1917.

1262 Pte. S. Wiseman.

Attached to the Strength from April 23rd, 1917.

SICK AND WOUNDED N.O.O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

PRESTON RECORD OFFICE

LIST No. H.A. 3583

| | | | |
|--------------------------|--------------------------------|------------------------|--|
| 48881 Pte Edgecombe W. | 12/L'pool R. | NYD Mental Good. | Adm 8 Gen H. Rouen 23/Oct/16. |
| 14491 Pte Nolan M. | 12/ do. | Bomb Wd. Thigh R. & R. | Trans to Con Dep ex 8 Gen H. Rouen 23/Oct/16. |
| | | Knee Sick Good. | |
| 29448 Pte Briggs A. | 18/ do. | GSW Face Good. | To Eng ex 8 Gen H. 23/Oct/16. |
| 22862 Pte Forbes W. | 1/Bord. R. a. Ind Vet Hospl | Talipes. | Trans to another H. ex 12 Gen H. Rouen 23/Oct/16. |
| 16897 Pte Knowles A. | 1/E. Lanc R. | GSW Leg L. | do. |
| 16859 L/C Nickson S.F. | 18/L. pool R. | GSW Fingers Hand L. | do. |
| 24284 L/C Dodd A. | 18/ do. | GSW Foot R. | do. |
| 16878 L/C Willcox J.H. | 18/ do. | GSW Thigh R. | do. |
| 33671 Pte Newstead J. | 16/Manch R. | GSW Arm L. | do. |
| 27110 Pte Baxter T.H. | 1/R. Lanc R. | IOT Neck Carbuncle | do. |
| 15392 Pte Richards E.M. | 17/L'pool R. | GSW Arm L. | To Eng ex 12 Gen H. 23/Oct/16. |
| 9756 Pte Carson W. | 1/E. Lanc R. | Inj to Thumb. | Dis to Base Dep ex 12 Gen H. Rouen 23/Oct/16. |
| 1913 Pte Penkethman A. | 19/Manch R. | GSW Hand L. Shock. | Adm 12 Gen H. Rouen 23/Oct/16. |
| 27155 Pte McGaughey A. | 11/Lanc Fus | GSW L. F'arm. | Adm 23 Gen H. Etaples 23/Oct/16. |
| 5908 Cpl Butterworth J. | 11/ do. | GSW R. Shldr & Face | do. |
| 27172 Pte Wilde F. | 11/ do. | GSW Scalp | do. |
| 23830 Pte Nock J. | 9/L. N. Lances | GSW Face | do. |
| 27411 Pte Jopson J. | 8/Border Rgt | GSW R. Arm & R. Shldr | do. |
| 15005 Sgt Wallace F. | 8/ do. | GSW L. Hand | do. |
| 27403 Pte Etherington J. | 8/ do. | GSW Mouth and Neck | do. |
| 11930 Pte Smith H. | 18/Manch att AOC | Bronchitis Acute. | Trans to 6 Con Dep Etaples ex 23 Gen H. 23/Oct/16. |
| 22839 Pte Simms C. | 20/K. L'pools | Enteritis | do. |

TERRITORIAL FORCE PRESTON RECORD OFFICE

LIST No. H.A. 3583

| | | | |
|--------------------|--------------|--------------|--|
| 2713 Pte Kinsey H. | 4/S. Lanc R. | IOT L. Knee. | To Eng ex 12 Gen H. 23/Oct/16. |
| 5239 Pte Bayley T. | 1/5/ do. | Influenza. | Dis to Con Dep ex 12 Gen H. Rouen 23/Oct/16. |

TERRITORIAL FORCE SHREWSBURY RECORD OFFICE

LIST No. H.A. 3583

| | | | |
|---------------------|--------------|--|--------------------------------|
| 15525 Pte Bethel A. | 1/5/Ches R. | Nephritis Good. | To Eng ex 8 Gen H. 23/Oct/16. |
| 15623 Pte Davies H. | 1/6/Welsh R. | Bomb W. Head Arms & R. Hand Sick Good | do. |
| 7313 Pte Maloney J. | 4/R. W. Fus | GSW Head C. Fr. Leg L. | To Eng ex 12 Gen H. 23/Oct/16. |

NEW FOUNDLAND CONTINGENT

LIST No. H.A. 3583

| | | | |
|---------------------|-------------------|------------------------|--------------------------------|
| 1262 Pte Wiseman S. | 1/Newfoundland R. | GSW C. Fr. R. Humerus. | To Eng ex 12 Gen H. 23/Oct/16. |
|---------------------|-------------------|------------------------|--------------------------------|

C.R.

1262

Extract of Casualties received from Pay & Record
Office, London, dated October 30, 1916.

#1262 Pte. S. Wiseman. ✓

Wounded 12/10/16 and reported by O.C.Bn, 14/10/16.

C.R. 1262

Extract of Casualties received from Pay & Record
Office, London, dated October 28, 1916.

#1262 Pte. S. Wiseman. ✓

Wounded.

C.R. 1262

NEWFOUNDLAND CONTINGENT

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

October 27th 1916.

1262, Pte S. Wiseman.

1. Newfoundland R. GSW C. Fr. R Arm Adm. k2 Gen. Hdq.

Reten 19th October 1916.

C.R. 1262

Extract from Casualties received from P.A.R. Office, London,
Oct. 27, 1916.

At Wandsworth:

1262 Wiseman.

Amputation right arm.

C.P. 1262

Extract of Casualty List received from P.&R.O.
October 26th. 1916.

1262, Pte S. Wiseman. ✓

At 3rd London General Hospital Wandsworth 24/10/16
G.S.W. R Arm Amp frac humerus.

C.R. 1262

Extract of Casualty List received from P.&.R.O.
October 26th, 1916.

1262, Pte S. ~~Williams~~ ✓

O.C. 12 General Hospital Rouen Reports 25th October
Removed from Dangerous List No. 1262, Pte S. Williams.
Authority Telegram from PROELICAS 26/10/16.

1262
C.R.



PROGRESS REPORTS.

Nos. P. 36204, P. 36208, P. 36209.

No. P. 36204.

O.C. 5 GEN. HOS. ROUEN reports 24th October 1916.

| | | | |
|---------------------------|----------------|--|-------------------------|
| 704084 Pte. Palmer, T. | 102/Canadians. | GSW.Face, arms, chest. (Adm. 24th Oct. 16) | <u>DANGEROUSLY ILL.</u> |
| 43454 Pte. Daynes, F.R. | 8/Norf.R. | GSW.Arm, Shldr. (Adm. 24th Oct. 16) | <u>SERIOUSLY ILL.</u> |
| 841265 Pte. Higgins, F.H. | 87/Canadians. | GSW.face, arm. (Adm. 24th Oct. 16) | -do- |
| 27814 Pte. Coleman, H.G. | 17/N. & D.R. | GSW.arms, legs. (Adm. 24th Oct. 16). | |

No. P. 36208.

O.E. 3 CAN. STAT. HOS. BOULOGNE reports 25th October 1916.

| | | | |
|---------------------------|--------------------|------------------|--------------------------------|
| 174855 Pte. Bidgood, W.A. | ASC. 1/Army Corps. | <u>IMPROVED.</u> | <u>OFF SERIOUSLY ILL LIST.</u> |
| 16692 Pte. Slocombe, J. | 10/Welsh Regt. | -do- | -do- |

No. P. 36209.

O.C. 12 GEN. HOS. ROUEN reports 25th October 1916.

| | | | |
|---------------------------|---------------|---|---|
| 26068 Pte. Nelmes, J. | MSG. 11 Coy. | Fr. Ribs, L. side. (Adm. 24th Oct. 16). | <u>SERIOUSLY ILL.</u> |
| 12236 Pte. Taylor, E. | 3/Worc.R. | | <u>REMOVED FROM SERIOUSLY ILL LIST.</u> |
| 10481 Pte. Read, H. | 2/Wilts.R. | | -do- -do- |
| 67619 Pte. Mitchell, A. | 28/Canadians. | | -do- -do- |
| 18927 Pte. Johnson, E. | 10/W. Rid. R. | | -do- -do- |
| 192305 Pte. Paynter, J.W. | 13/Canadians. | | -do- -do- |
| 18486 Pte. Yates, R. | 6/Yorks.R. | | -do- -do- |
| 432939 Pte. Rea, T. | 49/Canadians. | | <u>Removed from Dangerously Ill List.</u> |

| | | | |
|----------------------------|-----------------|------|------|
| X 24604 Pte. Jerome, W. | 15/Hamps.R. | -do- | -do- |
| 1262 Pte. Wiseman, S. | 1/Newfld. Regt. | -do- | -do- |
| 488686 Pte. Taylor, A.E.M. | 16/Canadians. | -do- | -do- |
| 414867 Pte. Robb, J.W. | 25/ -do- | -do- | -do- |
| 1/2001 L/C. Shepherd, P.T. | 24/ -do- | -do- | -do- |
| 7313 Pte. Maloney, J. | 4/R.W.Fus. | -do- | -do- |
| 11287 Pte. Willis, J. | 1/Cold.Gds. | -do- | -do- |
| 5462 Pte. Beaton, L. | 25/London Regt. | -do- | -do- |

3250

C.R. 1262

PROGRESS REPORTS.

Nos. P. 35507 & P. 35526.

No. P. 35507.

O.C. 12. GEN. HOS. ROUEN, reports 19th October, 1916.

4647 Pte. Brazier, H.W.
17257 Pte. Sage, T.E.
2955 Pte. Turner, W.J.
11804 Pte. Jack, J.

6th London Regt. G.S.W. Thigh L Arm. L. DIED.
11th W. York Regt. REMOVED FROM DANGEROUSLY ILL LIST.
H.G.C. 168 Coy. MAY BE VISITED.

10th A & S. Highrs. G.S.W. Frac. Thigh. R. Arm. R. (Adm. 17th October, 1916)

10491 Pte. Read H.
5771 Pte. Walker, C.C.
1262 Pte. Wiseman, S.

2nd Wilts Regt. G.S.W. Legs. Comp. Frac. Leg. R. (Adm. 19th October, 1916) SERIOUSLY ILL.
4th S.A. Inf. G.S.W. Chest. (Adm 17th October, 1916). SERIOUSLY ILL.
1st Newfoundland Regt. G.S.W. Arm. (Adm. 19th October, 1916) DANGEROUSLY ILL.

No. P. 35526.

O.C. 8. BRIT. RED CROSS HOS. LE TOUQUET, reports 20th October, 1916.

2146 Spr. Gemble, A.
20491 Pte. Watts, R.
10184 Pte. Clifford, C.
10445 Pte. Davis, W.
24998 Pte. Weir, C.
13766 L/C. Fisher, W.J.
43827 Pte. Blinkhorn, A.
78272 Gnr. Bush, T.W.

R.E. 2/2 W. Riding Fld. Coy. G.S.W. Amptn. both Legs. DIED 19th October, 1916.
10/att. 9/Suffolks D. Coy. G.S.W. Frac. R. Shldr. & Hand & L. Arm. SERIOUSLY ILL.
2/Trans 1/R. Irish Fus. B. Coy. G.S.W. Abdomen & L. Arm. SERIOUSLY ILL.
14/Essex Trans. 169 H.G.C. G.S.W. Abdomen. R SERIOUSLY ILL.
16/Trans 14/D.L.I. D. Coy. G.S.W. R. Knee. SERIOUSLY ILL.
9/Suffolks D. Coy. G.S.W. Neck. SERIOUSLY ILL.
7/att. 2/Notts & Derby D. Coy. G.S.W. A. ptn. L. Leg. SERIOUSLY ILL.
R.F.A. 32 Bde. 134 Bty. G.S.W. Head. SERIOUSLY ILL.



3108



C.R. 1262

CASUALTIES

O.C. 12th GENERAL HOSPITAL. ROUEN.

Reports, 19th October 1916.

DANGEROUSLY ILL.

No. 1262 Pte. S. Wiseman. G.S.W. Arm.

Authority:-

Telegraph Message
from PROELICAS
20th October 1916

C.R. 1262

Extract of Casualties received from Pay & Record Office,
London, dated October 21, 1916.

The following Casualty in the 1st. thfld. Regt. with the
British Expeditionary Force is reported under various
date:-

#1262 Pte. S. Wiseman.

Wounded. ✓

C.R. 1262

Extract from Code Telegram from Pay and Record Office, London
dated 20 October 1916.

Dangerously ill, gunshot wound arm, 12th General Hospital
Rouen, Oct. 19th. 1262 Wiseman,

C.R. 1262

Extract from London District No. 07 007, dated 27-10-16

#1262 Pte. S. Wiseman

FOUNDED

13-10-16

BU.

AUTHORITY: * O. C. Bn. 14-10-16.

1262
C.R. ~~26~~

Extract from Nominal Roll 3rd Draft to S.M.F. arrived
29, I.B.D. 30-3-16 Joined Battalion 15-4-16

#1262 Pte .S. Wiseman.

C.R. 1262

Extract from Nominal Roll of Royal WFLA. Regt.
Draft No.3. from 2nd Bn., Depot to 1st Bn., B.E.F.
Embarked 28-3-16.

1262 Pte. S.Wiseman.

C.R. 1262

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 5279, dated Jan. 31 1916.

1262 Pte. S. Wiseman.

1st Newfoundland.....Trans. to Base per "Aquitania" ex Lowland
C.C.S. Mudros W. 24 Dec 1915.

NEWFOUNDLAND CONTINGENT

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

January 10th 1916.

1262, Pge F. Wiseman.

1st Newfoundland Scabies Adm. Lowland C.D.H. Mudros West

18th December 1915.

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&.R.O.
January 7th 1916.

1262, Pte S. Wissman.

1 Newfoundlanders Trans. to C.C. Mudros W. pending transfer
to Base ex 2 Aust S.H. 17th December 1915.

NEWFOUNDLAND CONTINGENT

Extract of ²_C casualty List received from P.&.R.O.
January 5th 1916.

1262, Pte S. Wiseman.

1 Newfoundland Adm. 3rd London General Hospital Wandsworth
January 3rd 1916/ G.S.W. Finger.

C.R. 262

Copy of Cablegram to Governor St. John's Nfld.
from P. & R. O. 5/1/16.

1262, Pte Wiseman. ✓

Admitted Wandsworth. Gunshot Wound Finger.

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

#1262 Pte.S.Wiseman.

Sep. Finger.

Admitted 2nd Australian S.H. Mudros W. 30th Nov. 1915.

C.R. 1262

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

#1262 Pte. S. Wiseman.

Septic Hand. severe

Admitted 54 C.O.S. Sulva, November 26th, 1915.

C.R.

1262

Extract from Nominal Roll of Co. 1st Bn. Nfld. Regt.
Embarked at Devenport for Active Service 20-8-15.

1262 Pte. SP Wiseman.

Disembarked Alexandria, 31-8-15. Proceeded to Abbassia,
Cairo, same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 1262

Extract from Nominal Roll Draft "E" Company Embarked
per S.S. Stephano April 22/15.

1262 Pte. Wiseman S.

G.R.
1262

Stephen Wiseman was attested for General Service
with the NEWFOUNDLAND REGIMENT on March 25th 1915
Regimental No. 1262 was allotted to Pte S. Wiseman

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th 1915.

St. John's,

Mch. 21st, 1919.

The Paymaster,
Militia Department.

Dear Sir:-

I have received from my solicitor, Mr. C. E. Hunt, an amount equal to that due to me by your Department, on the understanding that future payments be made to him on my behalf.

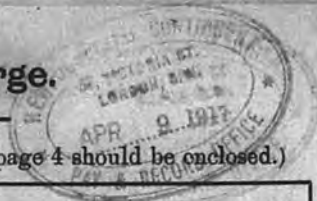
I shall be glad, therefore, if you will issue all future cheques to me in his name. I hereby agree to accept this arrangement as binding upon myself.

Yours faithfully,



W. W. W.
62
1226

Proceedings on Discharge.



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

| | |
|--|---|
| No. <u>1262</u> | Army Rank <u>Private</u> |
| Name <u>Wiseman Stephen</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>May 9th 1917</u> | |
| Place of discharge <u>St Johns, Nfld</u> | |
| 1. <small>Description at the time of discharge.</small> | |
| Age <u>20</u> years <u>5</u> months Height <u>5</u> feet <u>9</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>Fair</u> Eyes <u>Blue</u> Hair <u>Fair</u> Trade <u>Lumbering</u> Intended place of residence { <u>Portune Harbour</u> <u>St. John's Bay</u> <u>Newfoundland</u> <small>(To be given as fully as practicable)</small> | Descriptive marks. <u>Left Light Arm</u> |
| <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> | |
| 2. The above-named man is discharged in consequence of <u>Gunshot wound</u> <u>Amputation of Light Arm</u> | |
| <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> | |
| 3. Military character :— | |
| 4. Character awarded in accordance with King's Regulations :— | |
| <div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small; margin-right: 5px;">To be filled in on the soldier quitting the Colours.</div> <div style="border: 1px solid black; flex-grow: 1;"></div> </div> | |
| 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. | |
| _____ <small>Initials of Commanding Officer.</small> | |
| Army Form B. 2088 has been issued to* _____ | |

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay Class _____

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Battn. _____ Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St Johns Stephen W. Messurei (Signature of Soldier.)

(Date) May 9/17 F. E. Le Messurei (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

_____ (Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service ,, ,, _____ (the date of confirmation of discharge) ,, ,,

Total ,, ,,

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____ Signature _____

(Date) _____

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

No Reservations
Stephen ^{his} Wiseman
mark

Witness. J. E. Le Messurier

Medical Report on an Invalid.

Original
2597
902
1/5 to
1871/12
duplicate
w/ original
C/O



3rd London General Hospital
Station WANDSWORTH, S.W.

Date 28th Nov 1916



- 1. Unit *1st Newfoundland*
- 2. Regimental No. *1262*
- 3. Rank *Private*
- 4. Name *Wiseman, S.*
- 5. Age last birthday *20*
- 6. Enlisted { on *15th Oct. 1914*
at *St Johns*
- 7. Former Trade or Occupation { *Lumbering*

8. Disability.

*12nd. S. S. W. w/ of Right Arm
(amputated at shoulder ft)*

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. *14th October 1916*
- 10. Place of origin of disability. *On the Somme*
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *Patient was wounded during an attack on German line. He was taken to the C.I.S where the rt. arm was amputated through shoulder joint on same night. Arrived here on October 26th. Wound healed.*

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
No. *3108/20*
APR 9 1917
DATED

- 12. (a) Give your opinion as to the causation of the disability.
- (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 8).

*Active Service
S. S. W.*

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.

Arm has been amputated so high as to leave socket flush with side of body. Wound has healed.

General Condition fairly good
Received artificial limb on 29/3/17
Is comfortable.

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 ?

Yes

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

No

If so—(a) When ?

(b) Where ?

(c) Opinion ?

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

Yes. Amputation of arm

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,

or

(b) Change to England ?

Yes

M. Schwartz C. S.

Officer in medical charge of case.

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

except†

3rd London General Hospital,
Station WANDSWORTH, S.W.

H. E. D. ...

Officer in charge of Hospital.

Date 9/1/17

* 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, 1918).

(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.

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

G. S. Wood in action in France

21. Has the disability been aggravated by

(a) Intemperance? *No*

(b) Misconduct? *No*

(c) Any of the conditions mentioned in question 20, and if so, which?

Active Service

23A. Is he fit for discharge from the Service as an out-patient, and will he require out-patient treatment on discharge from hospital?

No

For earning a full livelihood in the general labour market lessened at present?

Slightly at present

In defining the extent of his inability to earn a livelihood, estimate it at 1, 1/2, 2, 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?

See no 16

26. Do the Board recommend

(a) Discharge as permanently unfit,

or

(b) Change to England?

Discharge as permanently unfit for both War and Home Service

KING GEORGE HOSPITAL—
LONDON, S.E.

3rd London General Hospital,
Station WANDSWORTH, S.W.

Date *3/3/17*

A. L. Cottell President.

W. G. Lamb

G. Staphord Jones

W. G. Lamb

Members.

Approved.

3rd London General Hospital,
Station WANDSWORTH, S.W.

Date

A. L. Cottell Administrative Medical Officer.

SURGEON-COLONEL.

for D.D.M.S.,

LONDON-DISTRICT.



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, 1918).

(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.

G.S. Trench in action in France

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

21. Has the disability been aggravated by

(a) Intemperance? *No*

(b) Misconduct? *No*

(c) Any of the conditions mentioned in question 20, and if so, which?

Active Service

Is the disability permanent?

Permanent

If not permanent, what is its probable minimum duration?

to be 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 $\frac{1}{2}$, $\frac{1}{3}$, $\frac{2}{3}$, 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?

See no 16

26. Do the Board recommend

(a) Discharge as permanently unfit,

or

(b) Change to England?

Discharge as permanently unfit for both War and Home Services

KING GEORGE HOSPITAL,
LONDON, S.E.

3rd London General Hospital,
Station WANDSWORTH, S.W.

Date *3/3/17*

A.L. Cottell President.

W. C. Lamb
W. S. Stokes Members.
W. S. Stokes

Approved:
Station *3rd London General Hospital,*
WANDSWORTH, S.W.

Date

A.L. Cottell Administrative Medical Officer.
SURGEON-COLONEL,
for D.D.M.S.,
LONDON DISTRICT.



Casualty Form—Active Service.

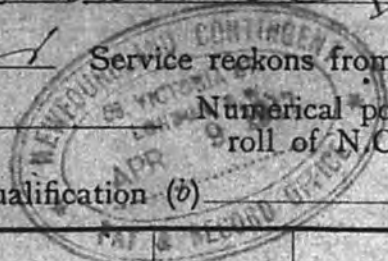
Regiment or Corps Newfoundland

Regimental No. 1262 Rank Pte Name Wiemann J

Enlisted (a) 25/2/15 Terms of Service (a) one year Service reckons from (a) _____

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

Extended _____ Re-engaged 15/8/15 Qualification (b) _____



Casualty Form Copy

| 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 | | | | |
| | | Embarked for St John's Nfld | | 30.4.15 | |
| | | Disembarked Alexandria | | 1.9.15 | |
| | | Embarked for Gallipoli | | 13.9.15 | |
| 16.12.15 | S4 C.C.S. | Admitted Septic Trench | S4 C.C.S. | 26.11.15 | C 4951 |
| 17.12.15 | 2nd Aust Medics | D.O. | No 2 Aust Hosp Medics | 29.11.15 | C 5012 |
| 22.1.16 | 'Aquitania | Invalided to England | 'Aquitania' | 26.12.15 | B 884 |
| | | <p><i>Sgt W. L. Jackson</i> <i>Capt for Major</i> <i>Records 11 + 12 Districts</i> <i>3rd Echelon</i></p> | | | |

(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.

Casualty Form—Active Service.

Regiment or Corps

Newfoundland

Regimental No

1262

Rank

Plt

Name

Wilmann S

Enlisted (a)

25.2.15

Terms of Service (a)

One year

Service reckons from (a)

25.2.15

Date of promotion
to present rankDate of appointment
to lance rankNumerical position on
roll of N.C.Os.

Extended

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 | | | | |
| | | Embarked Southampton | | 28.3.16 | |
| | | Disembarked France | | 30.3.16 | |
| | | Unit joined Battalion | France | 15.4.16 | B 213 |
| | | " Attached Brig. M.G.C. | | 18.6.16 | B 213, 24.6.16 |
| | | " With Battalion | France | 4.7.16 | B 213 |
| | | 15 Ch.D.S. Ad. L.W. Arm. Fracture transf | C.C.S. | 13.10.16 | ED 4489 |
| | | " West Australia" Transferred to England | | 23.10.16 | W 3083 |
| | | See W. Leinidge Reg. Reg. Inf. Section No 1 3rd 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.

I.P.T.O.

Casualty Form—Active Service.



Regiment or Corps Newfoundland
 Regimental No. 1267 Rank Pte Name S. Wiseman
 Enlisted (a) 25/2/15 Terms of Service (a) one year Service reckons from (a) _____
 Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____
 Extended _____ 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 | | | | |
| | | Embarked St. John's, Nfld. | | 30/4/15. | |
| | | Disembarked Alexandria | | 1/9/15. | |
| | | Embarked for Gallipoli | | 13/9/15. | |
| 16/12/15. | 54 C.C.S. | Admitted, Sceptic Finger | 54th. V.C.S. | 26/11/15. | C 4951. |
| 17/12/15. | 2nd. Aust. Mudros. | do | No. 2 Aust. Hosp., Mudros. | 29/11/15. | C 5012. |
| 22/1/16. | "Aquatania" | Invalided to England | H.S. "Aquatania" | 26/12/15. | B 884. |

ms

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 3108/20
 DATED _____ 1917

[Signature]
 Captain
 for Major,
 Officer i/c Records 11 & 12 Dists.,
 3rd. Echelon, G.H.Q., M.E.F.

(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. [P.T.O.]

Casualty Form—Active Service.

Regiment or Corps 1st Newfoundland 1042

Regimental Number CR. 262 Rank Pte Name A. Wiseman

Enlisted (a) 20-2-15 Terms of Service (a) Duration Service reckons from (a) 20-2-15

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

Extended _____ Re-engaged _____ 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 | | | | |
| | | Emb'k'd Southampton | | 28.3.16 | |
| | | Emb'k'd ROUEN | | 30.3.16 | |
| | | Unit Attached Brig. Mach. Gun Coy. | France | 15.4.16 | B 213 |
| | | With Battalion | France | 18.6.16 | B 213, 24.6.16. |
| | | 15 weeks ad. sw arm fracture. | | 4.7.16 | B 213 |
| | | transf | celeb | 13.10.16 | CD 4489. |
| | | Transferred to England | | 23.10.16 | W 3083 |
| | | | | | LIEDT. COLONEL. Officer i/c Regular Infantry Section No. 1 General Headquarters, 3rd. Echelon. |

West Australia

JMS

Q.D. H.Q.
ST. JOHNS, N.F.L.D.
3108/30
APR 9 1917

(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.

Squadron, Troop, Battery and Company Conduct Sheet.

Forms
B. 121.
29.

Regiment of

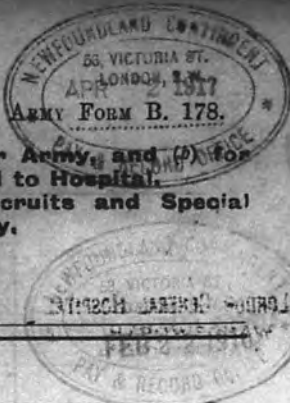
First Newfoundland

Signature of O. C. Company

| | | | | | | | |
|----------------------------|---------------------|------------------------------|---|------------------|---|--|--|
| Regimental Number and Name | | Enlistment | | Trade | Good Conduct Badges, Service Pay or Proficiency Pay | | |
| No. | <i>1262 Wiseman</i> | Age on | <i>20</i> years <i>12</i> months | <i>Lumberman</i> | | | |
| Joined | Date | Place and Date of Enlistment | <i>St John's 25-3-15</i> | Religion | <i>R. C.</i> | | |
| Joined | Date | Period of | { with Colours <i>2</i> ^{<i>46</i>} years. with Reserve <i>36</i> years | Place of Birth | <i>Notre Dame Bay</i> | | |
| 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 |
|--|-----------------|------------|----------------------|---------|--------------------|--------------------|---|-----------------|---------|
| | | <i>Pte</i> | | | | | | | |
| <div data-bbox="600 517 977 786" data-label="Text"> <p>COPY SENT TO C.O. H.Q. ST. JOHN'S N.F. 3108/20 DATED APR 2 1917</p> </div> <div data-bbox="483 786 1360 947" data-label="Text"> <p><i>Medically Unfit St John's 9-5-17</i></p> </div> | | | | | | | | | |
| To be carried over | | | | | | | | | |

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. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname W. Seman Christian Name S

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. | Regt. No. |
|------------------------------|-----------|
| 1 st Newfoundland | 1262 |
| 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 | | | | |
| 8 th LONDON GENERAL HOSPITAL WANDSWORTH. | 3 | 1 | 16 | 14 | 2 | 16 | J. W. D. Hand | 43 | Cont. Active service (Standard). Receives J. S. W. middle finger of R. hand. Small Wound healed. No permanent disability. | J. W. D. Hand Capt. R. H. H. T. |
| 8 th LONDON GENERAL HOSPITAL WANDSWORTH | 24 | 10 | 16 | 19 | 3 | 17 | G. S. W. VIII 4. Right amput. the shoulder joint | 146 | Wounded in France on 12 th Oct. & right arm amputated the shoulder joint. | M. W. W. W. W. Capt. RAMEY |
| Queen Marys Convalescent Hospital, Rochester, Mich. | 19 | 8 | 17 | 21 | 8 | 17 | do | 12 | ARTIFICIAL LIMB PROVIDED. | W. H. Nicholson Captain Adjutant Queen Marys Convalescent Hospital |

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

MEDICAL HISTORY

Surname Wiseman

OF
Christian Name Stephen



Table 1.—GENERAL TABLE.

Birthplace:—Parish Fortune Harbour County N.S. Bay

| | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|--|------------------------|--|------------------|
| | Right | Left | Right | Left |
| Examined | on <u>22</u> day of <u>March</u> 191 <u>5</u> at <u>St John's</u> | | on _____ day of _____ 191 <u>1</u> at _____ | |
| Declared Age | <u>26</u> years _____ days | | _____ years _____ days | |
| Trade or Occupation | <u>Lumberer</u> | | | |
| Height | <u>5</u> feet <u>9</u> inches | | _____ feet _____ inches | |
| Weight | <u>165</u> lbs. | | _____ lbs. | |
| Chest Measurement | Girth when fully expanded... <u>34</u> inches | | _____ inches | |
| | Range of expansion... <u>39</u> inches | | _____ inches | |
| Physical Development | | | | |
| Vaccination Marks | Arm | | | |
| | Number | | | |
| When Vaccinated | <u>never</u> | | | |
| Vision | R.E.—V= <u>1/6</u> | | R.E.—V=_____ | |
| | L.E.—V=_____ | | L.E.—V=_____ | |
| (a) Marks indicating congenital peculiarities or previous disease | (a) _____ | | (a) _____ | |
| (b) Slight defects but not sufficient to cause Rejection | (b) _____ | | (b) _____ | |
| Approved by (Signature) | <u>L. Patterson</u> | | | |
| (Rank) | <u>Capt</u> | | | |
| | Medical Officer. | | Medical Officer. | |
| Enlisted | at <u>St John's</u> on <u>25</u> day of <u>Mar</u> 191 <u>5</u> | | at _____ on _____ day of _____ 191 <u>1</u> | |
| Joined on Enlistment | Corps. <u>1st Nfld</u> | Regtl. No. <u>1761</u> | Corps. _____ | 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 SENT TO
(a) O.C. H.Q.
ST. JOHN'S, N.F.L.D.
3105/50
APR 5 1915

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 in Charge of 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 *Stephen Wiseman*
Regiment from which discharged *1/ Newfoundland*
Regimental Number *1262*
Where born (Parish, Town and County), and when *Fortune Harbour Newfoundland*
Intended address *Fortune Harbour N.D.B.* APR 2 1917
Height on discharge *5* Feet *9* Inches
Colour of Hair on discharge *Fair* **Colour of Eyes** *Blue*
Descriptive marks *Lost arm* **Complexion** *Fair*
Figure on discharge *Normal*
Christian name of Father *Deed*
Christian name of Mother *Mary*
Wife's Maiden name in full }
Date and Place of Marriage } *Single*
Christian names of Children }
Nature and locality of civil employment desired *Undecided*

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 3108/20
 APR 9 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) *Stephen Wiseman*
 Station *Roehampton Hse* (Rank) *Pte*
 Date *29/3/17*

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.

W. B. Nicholas Captain
 Medical Officer in Charge
 for Lt. Col. Commandant
 Hospital.
 Station *Queen Marys Convalescent Hospital, Roehampton.* Date *Queen Marys Convalescent 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.

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.



No. 1262.

Rank PLC.

Name (surname first) Wisman S.

Regiment 11 Newfoundland.

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

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.S. No. 3108/150
DATED APR 9 1917

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?

In Paper Factory. Lord Northcliffe, Grand Falls.
Newfoundland.

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

Has re-employment.

4. What is the name of your Approved Society? _____

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

_____ Machine Gunner.

Date 30. 3. 17.

Signature S Wisman

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.



Medical Report on an Invalid.

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

Statement of Case

Station

Date

A. Johnson M
April 24, 1917

1. Unit *1st. Newfoundland*

5. Age last birthday. *21*

2. Regimental No. *1262*

6. Enlisted on *Feb. 1915*

3. Rank. *Pte*

at

A. Johnson M

4. Name. *Wiseeman Stephen*

7. Former trade or occupation

Labourer

8. Disability

Shell wound R. Arm.

9. History

*Active Service France Oct. 12, 1916. Arm
 was taken off by shell.*

10. What is his present condition?

wound healed.

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

11. Was sanatorium advised and refused?
operation

✓

12. Do you recommend discharge as permanently unfit?

Yes.

Signature

J. W. Gordon

Rank or Qualification

Lieut

Remarks if any by Officer i/c Hospital.

Place

.....

Signature

.....

Date

.....

Rank

.....

Opinion of the Medical Board.

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words.

13. For pension purposes, the disability x *may* be considered as aggravated by:—
due to
- (a) Service during this war.
 - (b) ~~Glimate.~~
 - (c) ~~Ordinary Military Service~~

Remarks if any:—

Vide Sect 9.

14. At present his capacity for earning a full livelihood in the general labor market is lessened by:—
(Here the president should write in Total, 4-5, 3-5, 2-5, 1-5).

Remarks if any:—

80%

15. Is the disability permanent?

Yes

16. Has the disability been aggravated by

- (a) Intemperance. *No*
- (b) Misconduct. *No*

17. The refusal of operation ~~sanatorium~~ is:—

- (a) Reasonable. ✓
- (b) Unreasonable.

Remarks if any:—

18. We recommend discharge from ~~retention in~~ the Army

Remarks if any:—

Signatures.

R. S. Grant
President
Suburban Power & Light Co. Paterson
L. Robert J. ...

Place

Date

S. Johns
Apr 25 / 17

APPROVED

Station

Date



Clay Macpherson
Administrative Medical Officer. *Maj.*

Medical Report on an Invalid.

Army Form B. 179.

APR 9 1917

PAY & RECORD OFFICE

Copy of true copy

Station 5th London General Hospital, Manswood St.

Date 28 November 1916

1. Unit Newfoundland

2. Regimental No. 1262

3. Rank Private

4. Name Wiseman S.

5. Age last birthday 20

6. Enlisted

{ on 15 Oct 1914, 28.2.15
at St John's

7. Former Trade or Occupation { Lumbering

8. Disability.

G.S.W. III. R of Right Arm
Amputation at Shoulder joint.

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.

12 October 1916

10. Place of origin of disability.

On the Somme

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Patient was wounded during an attack on German line. He was taken to the C.B. where the right arm was amputated through shoulder joint on same night. Arrived here on October 24th. Wound healed.

12. (a) Give your opinion as to the causation of the disability.

Active Service

(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).

G.S.W.

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.

Arm has been amputated, so high as to leave socket flush with side of body. Wound has healed. General condition fairly good. Received Artificial limb on 29.3.17. It is comfortable.

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

(a) In action?

(b) On field service?

(c) On duty?

(d) Off duty?

} Yes

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

No

If so—(a) When?

(b) Where?

(c) Opinion?

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

Yes Amputation of arm

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, or

(b) Change to England?

Yes

Age M. Schwartz, C.S.

Officer in medical charge of case.

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

Station

Wandsworth Lab. A. C. Bruce Porter

Officer in charge of Hospital.

Date

9.1.17

* 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 1163, 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.

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

G.S.W. Action in France

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

No

Active Service Permanent

23a. Is fit for discharge from the service as an out-patient, and will he require out-patient treatment on discharge from Hospital?

No

24. In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{4}$, $\frac{1}{8}$, or total incapacity.

Totally at Present

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

See No 16.

26. Do the Board recommend

(a) Discharge as permanently unfit,

or

(b) Change to England?

Discharge as Permanently Unfit for both War & Home Service

Signatures:—

King George Hospital
Station *London S.E.*

Date *31. 3. 17*

J. A. Cottell L.D.S. President
W. P. Drake Brockman L.D.S. Members

King George Hospital
Station *London S.E.*

Date *31. 3. 17*

J. A. Cottell L.D.S. Administrative Medical Officer

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 1163, 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.

G.S.W. in Active in France

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

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

No

c. Any of the conditions mentioned in question 20 & if so which

Is the disability permanent?

Active Service Permanent

If not permanent, what is its probable minimum duration?

to be 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 $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

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

See No 16.

26. Do the Board recommend

(a) Discharge as permanently unfit,

or

(b) Change to England?

Discharge as Permanently Unfit for both War & Home Service

Signatures:—

King George Hospital
Station *London S.E.*

A. Cottell L.D.S. President

Station *London S.E.*

W. G. Drake Brockman L.D.S. Members

Date *31. 3. 17*

King George Hospital
Station *London S.E.*

A. Cottell L.D.S. Administrative Medical Officer

Station *London S.E.*

Date *31. 3. 17*

NEWFOUNDLAND.

CLAIM FOR PENSION

PENSION No 249. EUROPEAN WAR.

NOTICE:—This Certificate is to be completed and returned IMMEDIATELY you receive it or payment of your pension will be delayed.

Name in full

I hereby solemnly declare that my name is Stephen Wiseman

and that I was

Fill in rank and force

a (rank) Private (1st. Nfld. Reg.)
in or (R. N. R.)

and that I am entitled to a Pension from the Colony of Newfoundland

Fill in place giving full postal address

I am residing at (Street and number) Rocky Lane off
Town of St Johns Be marchant Road

and request my next pension cheque be sent to this address.

Please send to this address
John M. McCarthy SIGNATURE or mark of Pensioner.

Witness

John M. McCarthy Stephen X Wiseman
next

It is only during the months January and July that the following certificate MUST be completed.

This is to certify that the foregoing declaration and signature (or mark) were

made by the above named pensioner in my presence this

day of July 1st 1917, and I believe

him to be the person he represents himself to be.

To be signed by a Police, Magistrate, or Notary Public, or Justice of the Peace, or Clergyman.

John M. McCarthy, J.P.
John M. McCarthy Signature.

Clerk of the Peace Rank or position.

St. John's, N.F. Postal Address.

Add any Remarks

\$ _____

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 the 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 in Charge 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 by red ink.

A Name in full Stephen Wiseman
Regiment from which discharged Newfoundland
Regimental Number 1262
Where born (Parish, Town and County), and when Fortune Harbour Nfld 24.12.96
Intended address Fortune Harbour N.S.B.

Height on discharge 5 Feet 9 Inches
Colour of Hair on discharge Fair **Colour of Eyes** Blue
Descriptive marks All R. Arm. **Complexion** Fair
Figure on discharge Normal
Christian name of Father (Dec'd)
Christian name of Mother Mary
Wife's Maiden name in full
Date and Place of Marriage Single
Christian names of Children
Nature and locality of civil employment desired Undecided

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) Stephen Wiseman
 (Rank) Private

Station Roehampton House Date 29.3.17

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.

Queen Mary's Convalescent Hospital W. Nicholson Medical Officer i/c
 Station Roehampton Date 30.3.17

| 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 | } | |
| Sums due on account of public debts ... | | | | of advance of pension | } | |

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.

No. 1262 Private S. Wiseman.

Wiseman's case is that of an amputation of right arm through the shoulder joint. In our Pensions Regulations the percentage of disability for the loss of an arm is not stated. In the older large Canadian report, published April 20th. 1916, the percentage of disability for the loss of an arm by disarticulation at the shoulder joint is rated as 80%. This scale rates the disarticulation of the leg at the hip at 80%. The loss of a leg is not usually considered so disabling as the loss of an arm.

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

APR 9 1917

MEDICAL HISTORY

Surname Wiseman OF Christian Name Stephen

Enlisted into Special Reserve

Table GENERAL TABLE

Birthplace: Parish Portune Harbour County N.S. Bay.

| | SPECIAL RESERVE | | REGULAR ARMY | |
|---|---|---------------------|--------------|------------------|
| | on | at | on | at |
| Examined | on <u>22</u> day of <u>March</u> 191 <u>5</u> | at <u>St John's</u> | on | day of 191 |
| Declared age | <u>20</u> years | days | years | days |
| Trade or occupation | <u>Lumberer</u> | | | |
| Height | <u>5</u> feet | <u>9</u> inches | feet | inches |
| Weight | | <u>165</u> lbs. | | lbs. |
| Chest Measurement | Girth when fully expanded | <u>39</u> inches | | inches |
| | | <u>5</u> inches | | inches |
| Physical development | Right | Left | Right | Left |
| Vaccination marks | Arm | | | |
| | Number | | | |
| When vaccinated | <u>Never</u> | | | |
| Vision | R.E.—V.= | <u>6/6 N.</u> | 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>Sgt L. Paterson</u> | | | |
| (Rank) | <u>Capt</u> | | | Medical Officer. |
| Enlisted | at <u>St John's</u> | at | | |
| | on <u>25</u> day of <u>March</u> 191 <u>5</u> | on | day of 191 | |
| | Corps | Regtl. No. | Corps | Regtl. No. |
| Joined on enlistment | <u>17th Sept 1912</u> | | | |
| Transferred to | | | | |
| Became non-effective by | on | day of 191 | 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 readmissions 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 | | | | |
| 3rd London General Hospital Wandsworth, W. | 3 | 1 | 16 | 14 | 2 | 16 | R. & M. of Hand | 43 | Cause - Active Service (Dardanelles) Nature - R. & M. Middle Finger of R. Hand Result - Wound healed, no permanent disability | See J. Wethered, Capt. A.M.C.D. |
| 3rd London General Hospital Wandsworth, W. | 24 | 10 | 16 | 19 | 3 | 17 | R. & M. of Right Arm Amputation through shoulder joint | 146 | Wounded in France on 12 October - Right arm amputated thro. shoulder joint | See Capt. Dingley A.M.C.D. |
| Queen Marys Convalescent Hospital, Southampton | 19 | 3 | 17 | 31 | 3 | 17 | Do | 12 | Artificial Limb Provided | See W.D. Nicholson, Capt. A.M.C.D. Queen Marys Convalescent Hospital |



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 *Wiseeman Stephen*

Regiment from which discharged *1st. Newfoundland*

Regimental number *1262*

Intended address *Fortune Hbr.*

Height on discharge *5 Feet 8 1/2*

Color of hair on discharge *L. Brown*

Complexion *Fair*

Color of eyes *Grey*

Figure on discharge *Medium*

Christian name of Father *deas*

Christian name of Mother *Mary*

Wife's maiden name in full *✓*

Date and place of marriage *✓*

Christian names of children *✓*

Place and date of soldier's birth. *Fortune Hbr. 24 Mar. 1896.*

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)

Stephen Wiseeman

(Rank)

Pte.

Station

A. Johns

Date

Apr. 24/19

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

Geo Borden Lieut.

Medical Officer i/c Hospital.
Unit, or Command Depot.

Station

A. Johns

Date

Apr. 24. 1917

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.

No. 1262

Rank Plt

Name (surname first) Wiseman S.

Regiment 1st Newfoundland

APR 9 1917

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

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?

In Tapes Factory, Lord Northcliffe
Grand Falls Newfoundland

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

Asst. Re-employment

4. What is the name of your Approved Society?

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

Machine Gunner

Date 30.3.17

Signature Sgt. S. Wiseman

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.

Report of Medical Board.

| | | | |
|-----------------------|---------------------------------------|---|-------------------------------------|
| Station | St. John's, Mfld. | Date | April 20th., 1918 |
| No. and Rank | 1262 - Private | Age | 22 Height 5'8½" |
| Name | Wiseman, Stephen | Complexion | Fair |
| Unit | Royal Mfld. | Eyes | Grey Hair Light Brown |
| Address | 30 Lime Street | | |
| Former Trade | Labourer | | |
| Enlisted at | St. John's On Feb. 1915 | (The Board will please note how the soldier's appearance corresponds with above description.) | |
| Disease or Disability | Original | SHELL WOUND RIGHT ARM - AMPUTATION | |

Subsequent

Present Condition (Compare with previous Board)

Complains of pain in shoulder. Cannot bear weight of clothes, loses 3 or 4 days every week. Sea more tender.

Has he been employed, and by whom? *Yes Agri Sons*

Average Weekly Earnings *\$6.00*

To what extent is his capacity for earning a full livelihood at his employment, or in the general labour market, lessened at present? *80%*

Recommendation of Medical Board

Members of Board

[Signatures]

[Signature]

[Signature]

Approving Medical Officer

[Signature]

Major.

