

# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. H575 Name Walter Bowe Corps Meth

### Questions to be put to the Recruit before Enlistment.

1. What is your name? ..... 1. Walter Bowe
2. What is your full Address? ..... 2. Cupido Bay
3. Are you a British Subject? ..... 3. yes
4. What is your age? ..... 4. 20 Years ..... Months
5. What is your Trade or Calling? ..... 5. mining
6. Are you Married? ..... 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? } 7. no
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. yes
9. Are you willing to be enlisted for General Service? ..... 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. Name ..... Corps
11. Are you willing to serve upon the conditions as embodied in the regulations signed by you if you are accepted? ..... yes

I, Walter Bowe do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Walter Bowe SIGNATURE OF RECRUIT

James Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Walter Bowe do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been fully explained as replied to, and the said recruit has made and signed the declaration and taken the oath before me on this 27 day of April 1918

Geo Hartley Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the: .....

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

Date.....191.....

Place..... } Approving Officer

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

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



C.R. 4575

Extract from Daily orders part 11, from 5 to the Royal Rifles Regt.  
St. John's, dated April 23, 1918.

4575

~~#4075~~ Pte. Walter Bowe.

Attested for General service with the Royal Rifles Regt.  
with effect from 23/4/18.

CR 4575

**Extract from Daily Orders by Major H.S. Sullivan,  
Commanding Newfoundland Forestry Companies, 6-8-18.**

**The undermentioned having reported for duty from  
the 2nd Bn. Royal Nfld. Regt. is attached to the strength  
for rations, from this date. And posted to "A" Company.**

4575 Pte. W. Dawe.

*Bow*

C.R. 4575

Extract from Daily Orders Part 11. from Unit The Royal Nfld.,  
Regiment, St. John's, dated June 14th 1918.

4575 Pte. W. Bowe.

Embarked for Overseas with draft 11-6-18.

used only for Special Reserve Recruits, and for Special Reservists of the Army.

# MEDICAL HISTORY

Surname *Bowe*

OF  
Christian Name *Walter*

Table I.—GENERAL TABLE.

Birthplace:—Parish *Cupidas, L. B.* County *Nfld.*

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	22 <sup>nd</sup>	April		1918
at	<i>St John's, Nfld.</i>		at	
Declared Age	20	years		days
Trade or Occupation	<i>mining</i>			
Height	5	feet		inches
Weight	125 lbs.			lbs.
Chest Measurement	35 inches			inches
	4 inches			inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/		/	
When Vaccinated				
Vision	R.E.V.	6/10	R.E.V.	
	L.E.V.	6/60	L.E.V.	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<i>Samuel J. Johnson</i>			
(Rank)	<i>Sgt.</i>			
	Medical Officer			Medical Officer.
Enlisted	at <i>St John's, Nfld.</i>		at	
	on	22 <sup>nd</sup> day of April 1918	on	day of 191
Joined on Enlistment	Corps	<i>The Royal Nfld. Regt.</i>	Corps.	Regtl. No.
		4575		
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
[Rank]				

[P.T.O.]





2008A



NEWFOUNDLAND CONTINGENT

~~CASUALTIES~~

C.R. 4575

4575 PTE. WALTER BOWE (2nd Battalion) was admitted to the Alexandra Hospital, Cosham, Hants., on 17/10/18, suffering from Corneal Ulcer. To be discharged from Hospital on 19/10/18.

Authority:-  
A.F. W. 3026A from Alexandra Hospital.

CR 4575

April 30th 1919

Mr. George Bowe

Captain, C.B.

Dear Sir:-

I beg to inform you that a report has been received from the Visiting Committee of the Newfoundland War Contingent Association concerning your son, No. 4575, L/Corpl. Walter Bowe, to the effect that he was admitted to the 3rd London General Hospital, ~~Wentworth~~ on 7th of March, and that he is now progressing favourably as we are not informed of the nature of his illness. I beg to say that we will make enquiries to-day from our Pay & Record Office, London, and I shall communicate reply to you when it is received.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 4575

Extract from telegram from Syn., London to Military.

Dated May 7th 1919.

.....

#4575, Bowe, progressing favourably 3rd London General.

.....

C.R. 4575

Extract from casualties from Pay & Record Office, London  
dated 23/5/19.

The undermentioned, ~~W.H.~~ was transferred from the  
3rd London General Hospital to 1st Western G.  
Hospital, Liverpool, on 18/5/19.

4575, Pte. W. Bows.

Authority:

A.Fs. W.3016 from 3rd L.G.H.

C.R. 4575

Extract from Daily Orders Part II Royal Newfoundland  
Regiment dated June 18th 1919.. Depot St. John's.

Admitted to Escasoni Hospital 1/6/19.

4575, Pte. W. Powe.

C.R. 4575

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.  
St. John's, July 25th, 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from 18-7-19

4575 Pte. Walter Rowe.

July 22, 1919

#4575 Pte. Walter Bove,  
Cupids, C.B.

Dear Sir:-

Please find enclosed Discharge Certificate #3181.

Yours truly,

Captain & Raymond er.

# 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 *Bowe, Walter*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4575*

Intended address *Cupid Port de Grav*

Height on discharge *5 Feet 8*

Color of hair on discharge *Leach Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Scar Throat*

Figure on discharge *Medium*

Christian name of Father *George*

Christian name of Mother \_\_\_\_\_

Wife's maiden name in full \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

Christian names of children \_\_\_\_\_

Place and date of soldier's birth *Cupid 20-10-1899*

Nature and locality of civil employment required \_\_\_\_\_

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

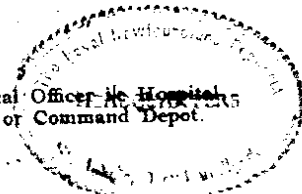
(Soldier's signature in full) *Walter Bowe*

(Rank) *PL*

Station \_\_\_\_\_

Date *20-6-19*

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

  
 Medical Officer of the Hospital  
 Unit, or Command Depot

Station \_\_\_\_\_

Date \_\_\_\_\_

08 enluy . . . . .  
. . . . .  
. . . . .  
. . . . .  
. . . . .

**Department of Militia, Newfoundland**

**Medical Department**

*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..... **St. John's**.....

Date..... **24/6/19**.....

- |                                   |   |
|-----------------------------------|---|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday <b>20.</b>             |
| 2. Regimental No. <b>4575.</b>    | 6. Enlisted on <b>April 1918.</b>           |
| 3. Rank <b>Pte.</b>               | at <b>St. John's.</b>                       |
| 4. Name <b>Bowe Walter.</b>       | 7. Former trade or occupation <b>Miner.</b> |

8. Disability

**Tuberculosis, Pulmonary?**

9. History

In March 1918 developed sore eyes, & this followed by Influenza. Was in No. 1000 Coy Royal Newfoundland Militia, & later Discharged to duty. Subsequent to this became ill & was admitted to Wandsworth P. when T.B.C. Bacilliferous in sputum & was sent to St. John's, Nfld.

10. What is his present condition?  
General appearance fair. Special  
(This is the important question. Be  
brief—the clearer the case the less  
need be written. Read note f above).

Specialist Report.

11. Was sanatorium advised and refused?  
operation

12. Do you recommend discharge as  
permanently unfit?

Signature J. B. O'RIELLY CAPT.

Rank or Qualification M.O.

Remarks if any by Officer in Charge 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) ~~Climate~~ (c) Ordinary Military Service  
Remarks if any:--
14. Does the Board concur in preceding report? (see Sect. 10). If not give differing opinion and additional findings.

**Yes. Pulse 76. Weight 135½ Lbs.**

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **100%.**
- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?  
(State in percentage.) **100% while in Hp.**
- Remarks if any:--

16. Is the disability permanent?
17. Has the disability been aggravated by (a) Intemperance (b) Misconduct
18. The refusal of operation is:-- (a) Reasonable (b) Unreasonable  
sanatorium
- Remarks if any:--

19. If fit subject for Hospital do you recommend admittance to **ESCASONI, YES.**  
General Hospital  
Naval and Military Convalescent Hospital,  
Jensen Tuberculosis Camp.
20. We recommend discharge from the Army  
retention in

Remarks if any:--

..... **H.S. FRAZER** .....  
President

Signatures ..... **J.S. TAIT** .....

..... **L. PATERSON, MAJOR** .....

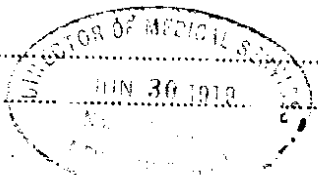
Place ..... **St. John's** .....

Date ..... **June 30/1919** .....

APPROVED

Station .....

Date .....



(SGD) **CLUNY MACPHERSON, MAJOR** .....  
Administrative Medical Officer.

# The Royal Newfoundland Regiment

Demobilization Form 1

Class for Demobilization: —  
*B*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Regimental No. *4575* Date *30.6.19*

Name *Bowls Wallis* Rank *Pvt.*

Address *C. S. Richards*

Present Medical Category *F*

Recommended for: —  
(a) ~~Immediate discharge~~  
(b) Standard Medical Board *B 7-13*

Members of Board

O.C. Discharge Depot.  
*J. Paterson*  
Senior Medical Officer  
*J. O. Borden*  
~~M. O. Depot~~

## Civil Re-establishment Committee

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

To resume former Occupation.

*W P Bow*

Signature of Man.

*J J Newell*

Reg. No. 4575

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

4-7-19.

191

# The Royal Indian Army

## DEMOBILIZATION OF

Reg. No. 4575 Rank Plt. Name Brown W.  
 Date of Enlistment 22-4-18 Address Carpenter District Phelan  
 Occupation Mining Classification for Discharge B Medical Category E  
 Recommendation S. M. B. permitted to leave Disability Rating 100% while in the  
 Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3404	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2	1237-1	" 6
B 179c	B 120	M 93	172-1	

Date 3-7-19 O. C. Discharge Depot. M. Brown

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am..... in a position to resume civilian occupation.

M. Brown

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £40.00

(b) Clothing Supplied permitted to leave

Date 4-7-19

O i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 12176 to his home at Cambridge and Release Certificate No. 5196 issued.

Date 4-7-19

*J.A. Crawford*  
Demobilization Officer

**4. Pay and Allowances.**

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 20-7-19

Date 4-7-19

*H. M. ...*  
Depot Paymaster.

Discharged approved for 6-7-19  
Forwarded with following documents to O.C. Discharge Depot.

N.F. 1136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L.	do 3rd	" 4
B 179a	D 400C	Form K.	do 4th	" 5
B 179b	B 103	ME 2.	<u>1237-1</u>	" 6
B179c	B 120	M 93.	<u>172-1</u>	

*2 Form B*

Date 4-7-19

*J.A. Crawford*  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

Officer in Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

**JUL 6 1919**

Date .....

*R.H. Jait* MAJOR

O. C. Discharge Depot.

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

Date .....

PROCEEDINGS ON DISCHARGE

1. No. 4575 Rank Pte Name Bowe, W.  
Intended place of residence Cupido,  
2. Occupation miner  
Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of  
**DEMOBILIZATION**  
**Eligible for War Service Gratuity**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
Place, ST. JOHN'S  
Date JUL 4 1919  
*[Signature]*  
Commanding Discharge Depot  
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
Place, ST. JOHN'S  
Date JUL 3 1919  
*[Signature]*  
Signature of soldier  
*[Signature]*  
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
Place, ST. JOHN'S  
Date JUL 3 - 1919  
*[Signature]*  
Signature of soldier  
*[Signature]*  
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 23-4-18  
Discharged from service 6-7-19 Plus 14 days  
No. of days on Military Service 455

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.  
Place, ST. JOHN'S  
Date JUL 6 1919  
*[Signature]*  
Officer Commanding Discharge Depot  
The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed  
Place, ST. JOHN'S  
Date July 20/1919  
*[Signature]*  
Officer in Charge  
The Royal Newfoundland Regiment

23 N 2179 / 3181

July 26th 1919.

#4574 Walter Bowe, Pte.

Cupids.

Dear Sir:

referring to your application, I enclose  
cheque for seventy dollars (\$70.00) being amount  
of first payment due you on account of "War Ser-  
vice Gratuity.

Yours truly,

Capt. & Paymaster.

RS/.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th, 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to WEE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *Walter* ..... 2. Surname *Rowe* .....

3. Rank *Pte* ..... 4. Regtl. No. *4575* .....

5. Address in full to which future payments of gratuity are to be forwarded *Cupido* .....

6. Date of enlistment in the Regiment *Apr 20/18* .....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *No* .....

8. Relationship of such dependents *No* .....

9. Address in full of such dependents *No* .....

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 *England only* .....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas *1 year & 2 mos.* .....

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

..... *No* .....

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

..... *No* .....

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

..... *No* .....

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

..... *No* .....

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

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

19. Are you now serving in the Regt. 2. If not give: (a) Date of discharge. *July 4/19* (b) Reason for discharge. *Demob*

..... *Temp* .....

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.

..... *No England only* .....

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

..... *No* .....

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

Signature of Applicant: *W. B. Bowe*

Place of Residence: *Cuyahoga*

Declared before me at: *St. Johns*

This *7th* day of *July* 19*19*

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

*John M. Carthy*

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.	Not amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified correct.

Notary Public

April 11, 1921.

George Bowe,  
Cupids.

Dear Sir:

I beg to advise that I have a balance of \$34.93 due to the estate of your late son No.4575 Walter Bowe who died at "Esseasoni" Hospital in August last. This represents a balance found to be due to him on the closing of the books of the London Pay & Record Office.

Will you kindly make the necessary arrangements to administer for his estate, so that this amount may be paid.

Yours truly,

Major

Paymaster.

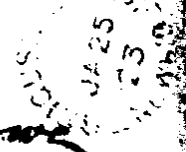
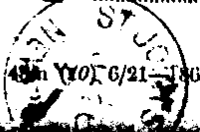
4575

950105

To ensure that as far as may be possible none of the next of kin of those who have fallen in the War shall fail to receive the Memorial Plaque, it is requested that on receipt of the enclosed Plaque this card be signed at the bottom and posted. No stamp is required.

*Received William [Signature]*

K. 1683.



45m (10) 6/21-1919 W3189/1108318 60m 1/22 (O.P. 17) 3507 G & S 198

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B 121

Regiment of Royal Newfoundland

Signature of O. C. Company [Signature]

Number of Sheet 1

Good Conduct Badges, Service pay or proficiency pay

Regimental Number and Name		Enlistment		Trade	
No.	<u>1175</u>	Age on	<u>20</u>	years	<u>months</u>
Joined	<u>Boyer, W.</u>	Place and Date of Enlistment	<u>St John's</u>	Religion	<u>Method</u>
Joined		Period of	<u>22.4.18</u>	Place of Birth	<u>St John's</u>
Joined		with Colours	<u>90</u>	years	
Joined		with Reserve	<u>36</u>	years	

Cupiers CB

Parishment: awarded

Date of award or service with rank

By whom awarded

REMARKS

Boyer, W. 30.9.18 4th Co.

Absent from 11.4.18 to 12.30.18 on 1st Gench. 1 day C. B. 1.10.18 Capt. C. M. 1.10.18

Demobilized 20.7.19

To be carried over