



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2907 Name W. B. Wareham Corps Rec't

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

1. What is your name? ..... 1. Walter Bennett Wareham
2. What is your full Address? ..... 2. Rewisport
3. Are you a British Subject? ..... 3. yes
4. What is your age? ..... 4. 24 Years 5 Months
5. What is your Trade or Calling? ..... 5. fisherman
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 .....  
ON THE DURATION OF THE WAR
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. yes

I, Walter B. Wareham 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 B. Wareham SIGNATURE OF RECRUIT.  
Ac Steiner Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 26 day of June 1916.

Signature of Attesting Officer John A. [Signature]

### † 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).....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Waite Bennet Wareham  
 Apparent age 24 years 5 months. Height 5 feet 8 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 4 inches  
 Distinctive marks.....

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr. Jas. Wareham  
South Side, St. John's | Relationship father  
 Particulars as to Marriage.....

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

|     |     |     |     |
|-----|-----|-----|-----|
| (a) | (b) | (c) | (d) |
|     |     |     |     |

## Particulars as to Children

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
|                 |                         |

## STATEMENT OF THE SERVICES

| Corps in which served  | Rgt. or Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension |      | Service in Reserve not allowed to reckon towards G. C. Pay |      | Signature of Officers certifying correctness of entries |
|--|---------------|--|-----------|-------|--|------|--|------|---|
|  |               |  |           |       | Years  | Days | Years  | Days |   |
| Service towards limited engagement reckons from _____                                |               |  |           |       |  |      |  |      |   |
| Joined at _____ on _____   |               |  |           |       |  |      |  |      |   |
|  |               |  |           |       |  |      |  |      |   |
| Total Service forfeited as above.....  |               |  |           |       |  |      |  |      |   |
| Total Service towards Engagement to _____ [date of discharge] _____ years _____ days |               |  |           |       |  |      |  |      |   |
| " " " Pension " _____ [ " " ] _____ " _____ "  |               |  |           |       |  |      |  |      |   |



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

*neck*

No. *2907*

Name *W. B. Wareham* Corps

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

1. What is your name? ..... 1. *Walter Bennett Wareham*
2. What is your full Address? ..... 2. *Remisport*
3. Are you a British Subject? ..... 3. *yes*
4. What is your age? ..... 4. *24* Years *5* Months
5. What is your Trade or Calling? ..... 5. *fisherman*
6. Are you Married? ..... 6. *no*
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? ..... 7. *no*
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. *yes*
9. Are you willing to be enlisted for General Service? ..... 9. *yes*
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. { Name .....  
Corps .....
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. *yes*

I, *Walter B. Wareham* 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 B. Wareham* SIGNATURE OF RECRUIT.  
*W. B. Wareham*  
*A. C. Selous* SIGNATURE OF WITNESS.

*June 26/16*

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at *Remisport*

on this *26* day of *June* 191*6*

Signature of Attesting Officer *Charles Cope*

### †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 ..... } Approving Officer.  
Place .....

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

\* If so, Recruit is 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) .....

**DESCRIPTIVE REPORT ON ENLISTMENT**

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

Name Walter Bennett Warshaw  
 Apparent age 24 years 5 months. Height 5 feet 8 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 4 inches  
 Distinctive marks \_\_\_\_\_

**INFORMATION SUPPLIED BY RECRUIT**

Name and Address of next of kin Mr. Jas. Warshaw  
cut Side St. Johns | Relationship father  
 Particulars as to Marriage

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

| (a) | (b) | (c) | (d) |
|-----|-----|-----|-----|
|     |     |     |     |

**Particulars as to Children**

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
|                 |                         |

**STATEMENT OF THE SERVICES**

| Corps in which served  | Rgt. or Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension |      | Service in Reserve not allowed to reckon towards G. C. Pay |      | Signature of Officers certifying correctness of entries |
|--|---------------|--|-----------|-------|--|------|--|------|---|
|  |               |  |           |       | Years  | Days | Years  | Days |   |
| Service towards limited engagement reckons from <u>26-6-16</u>   |               |  |           |       |  |      |  |      |   |
| Joined at <u>St. John's</u> on <u>June 26<sup>th</sup> 16</u>  |               |  |           |       |  |      |  |      |   |
| <u>Discharged St. John's May 30/17</u>   |               |  |           |       |  |      |  |      |   |
| <u>Embarked St. John's S.S. Train to Halifax 7<sup>th</sup> 17</u>   |               |  |           |       |  |      |  |      |   |
| <u>Embarked at 15<sup>th</sup> Sept. 7<sup>th</sup> Returns to St. John's from Halifax 28. 3<sup>rd</sup> 17</u> |               |  |           |       |  |      |  |      |   |
| <u>Discharged Medically Dept 30 5/17</u>   |               |  |           |       |  |      |  |      |   |
| Total Service forfeited as above.....  |               |  |           |       |  |      |  |      |   |
| Total Service towards Engagement to <u>30-5-17</u> [date of discharge] — years <u>339</u>                        |               |  |           |       |  |      |  |      |   |
| " " " Pension " [ " " ] " " "  |               |  |           |       |  |      |  |      |   |

C.R. 2907

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

2907 Pte. Walter Bennett Wareham,

Discharged May 30th 1917, Medically unfit

CR 2907

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

| Regtl. # | rank | name                   | date    | reason.     |
|----------|------|------------------------|---------|-------------|
| 2907     | Pte. | Wareham Walter Bennett | 30/5/17 | MED. UNFIT. |

C.R.

2907

Walter B. Wareham was attested for General service  
with the NEWFOUNDLAND REGIMENT on .. June 26th 1916.  
Regimental No 2907 was allotted to Pte. W.B. Wareham

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

W. B. Wareham

C.R.

2907

1880





**1st. NEWFOUNDLAND REGIMENT**

**ALLOTMENTS**

I, Walter B. Wareham, Regl. No. 2907  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
         Dollars and fifty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons  
 concerned, viz.:  
 Allotment begins April 1st 1917

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full)           | ADDRESS             | AMOUNT (each person) |
|--------------------------|---|--------------------------|---------------------|----------------------|
| 3043                     | Sister  | Mrs Johya (Mary) Wareham | South side St Johns | 50                   |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          |                     |                      |
|                          |   |                          | Total Allotment, \$ | 50                   |

*Conciling allotment made on form W 3410 & 3399*

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

(Sig.) Mark Ayr. Ppt.  
 Officer Commanding  
St Johns Company  
27-3-17 191

(Sig.) Walter B. Wareham  
 (Rank) pte  
with a Burgess

Warrham, W.B.

2907

Receipt

No 3410



*H* 1ST. NEWFOUNDLAND REGIMENT *H*

ALLOTMENTS

I, Walter Bennett Wareham, Regl. No. 2907

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

Allotment begins. April 1st 1917

| Identity Certificate No.                | Whether Wife, Child, other Relative or Friend | NAME (in full)                           | ADDRESS | AMOUNT (each person) |
|---|---|--|---------|----------------------|
| 3399                                    | Sister  | Mrs Stephen Lewisporte<br>(Elsie) Hodder | N.S.B   | 50                   |
| Cancelled of 3043<br>Replaced by K 3436 |   |  |         |                      |
| Total Allotment, \$                     |   |  |         | 50                   |

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

(Sig.) Charles R. Ouellet  
 Officer Commanding  
 Company  
St John's  
14-3-17 191

(Sig.) Walter B Wareham  
 his mark  
 (Rank) PTC  
with A. Burgess

# Proceedings on Discharge.

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

|   |   |                |
|---|---|----------------|
| No. <u>2907.</u>  | Army Rank   | <u>Private</u> |
| Name <u>Walter Wareham</u><br><small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>  |   |                |
| Corps <u>1st &amp; Newfoundland Regiment</u>  |   |                |
| Battalion, Battery, Company, Depot, &c.<br><small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>  |   |                |
| Date of discharge <u>May 30<sup>th</sup> 1917</u>   |   |                |
| Place of discharge <u>St John's Nfld</u>  |   |                |
| 1. <small>Description at the time of discharge.</small>   |   |                |
| Age <u>25</u> years <u>1</u> months   | Descriptive marks.  |                |
| Height <u>5</u> feet <u>8</u> inches  |   |                |
| Chest measurement { girth when fully expanded _____ ins.<br>range of expansion _____ ins.   |   |                |
| Complexion <u>Fair</u>  |   |                |
| Eyes <u>Brown</u>   |   |                |
| Hair <u>Brown</u>   |   |                |
| Trade <u>Fisherman</u>  |   |                |
| Intended place of residence <u>Southern</u><br><small>(To be given as fully as practicable)</small>   |   |                |
| <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> |   |                |
| 2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>  |   |                |
| <small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>   |   |                |
| To be filled in on the soldier quitting the Colours.  | 3. Military character :—                                      |                |
|   | 4. Character awarded in accordance with King's Regulations :— |                |
|   |   |                |
|   |   |                |
|   |   |                |
|   |   |                |
|   |   |                |
|   |   |                |
| Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.   |   |                |
| Initials of Commanding Officer.   |   |                |
| Army Form B. 2068 has been issued to*   |   |                |

8. 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 \_\_\_\_\_ Batta. \_\_\_\_\_ 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 John's Field Walter B. Marchant (Signature of Soldier.)  
(Date) June 1<sup>st</sup> 1917 D. C. [Signature] (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) \_\_\_\_\_

(Date) \_\_\_\_\_

Signature \_\_\_\_\_

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.)

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No Reservations;  
his  
Walter B. Wareham.  
mark

C. COKE

Account taken from sheet No. 1  
Draft of 'E. Co.

Form P/K.

1ST NEWFOUNDLAND REGIMENT.

Statement of Account of No. 2907 Private W.B. Wareham

Company. From 1-4-17 to 30-4-17 (both days inclusive)

| Date | Pay Book Col. No. | Particulars                            | No. of days. | @ per day. | Dr. |    | Cr.   |    | Dr. |    |    | Cr. |    |          |
|------|-------------------|--|--------------|------------|-----|----|-------|----|-----|----|----|-----|----|----------|
|      |                   |  |              |            | \$  | c. | \$    | c. | £   | s. | d. | £   | s. | d.       |
|      |                   | <b>Cr.</b>                             |              |            |     |    |       |    |     |    |    |     |    |          |
| 1    |                   | Pay ... ..                             | 30           | 1 00       |     |    | 30 00 |    |     |    |    |     |    | \$       |
| 2    |                   | Field Allowance ... ..                 |              | 10         |     |    | 3 00  |    |     |    |    |     |    |          |
| 3    |                   | Other Allowances ... ..                |              |            |     |    |       |    |     |    |    |     |    |          |
| 4    |                   | Total Pay & Allowances ... ..          |              |            |     |    | 33 00 |    |     |    |    |     |    | \$ 33.00 |
| 5    |                   | Converted into Sterling @ \$4.86 2/3   |              |            |     |    |       |    |     |    |    |     |    |          |
| 6    |                   | Balance from previous Pay Book         |              |            |     |    |       |    |     |    |    |     |    |          |
| 7    |                   | Total Credits (in £ s. d.) ... ..      |              |            |     |    |       |    |     |    |    |     |    | \$ 33.00 |
|      |                   | <b>Dr.</b>                             |              |            |     |    |       |    |     |    |    |     |    |          |
| 8    |                   | Forfeited Pay ... ..                   |              |            |     |    |       |    |     |    |    |     |    |          |
| 9    |                   | Allotments ... ..                      | 30           | 50 15 00   |     |    |       |    |     |    |    |     |    |          |
| 10   |                   |  |              |            |     |    |       |    |     |    |    |     |    |          |
| 11   |                   | Total Stoppages (in \$ c.) ... ..      |              |            |     |    | 15 00 |    |     |    |    |     |    | \$ 15.00 |
| 12   |                   | Converted into Sterling @ \$4.86 2/3   |              |            |     |    |       |    |     |    |    |     |    |          |
| 13   |                   | Fines ... ..                           |              |            |     |    |       |    |     |    |    |     |    |          |
| 14   |                   | Clothing and Necessaries ... ..        |              |            |     |    |       |    |     |    |    |     |    |          |
| 15   |                   | Arms and Accoutrements ... ..          |              |            |     |    |       |    |     |    |    |     |    |          |
| 16   |                   | Total Stoppages (in £ s. d.) ... ..    |              |            |     |    |       |    |     |    |    |     |    |          |
| 19   |                   | Casual Payments ... ..                 |              |            |     |    |       |    |     |    |    |     |    |          |
| 20   |                   | 1st Payment ... 16-4-17 ... ..         |              |            |     |    |       |    |     |    |    |     |    |          |
| 21   |                   | 2nd " ... 24-4-17 ... ..               |              |            |     |    |       |    |     |    |    |     |    |          |
| 22   |                   | 3rd " ... 26 ... ..                    |              |            |     |    |       |    |     |    |    |     |    |          |
| 23   |                   | Total Cash Payments ... ..             |              |            |     |    |       |    |     |    |    |     |    | 2 00     |
| 24   |                   | Balance from previous Pay Book ... ..  |              |            |     |    |       |    |     |    |    |     |    |          |
| 25   |                   | Total Stoppages & Cash Payments ... .. |              |            |     |    |       |    |     |    |    |     |    | 27 45    |
| 26   |                   | Final Cash Payment ... ..              |              |            |     |    |       |    |     |    |    |     |    |          |
| 27   |                   | Balance (debit) ... ..                 |              |            |     |    |       |    |     |    |    |     |    |          |
| 28   |                   | " (credit) ... ..                      |              |            |     |    |       |    |     |    |    |     |    | 5 55     |
|      |                   |  |              |            |     |    |       |    |     |    |    |     |    | \$ 33.00 |
|      |                   |  |              |            |     |    |       |    |     |    |    |     |    | \$ 33.00 |

not received until after Wareham had been paid off

PAY & RECORD OFFICE,  
58, VICTORIA STREET,  
LONDON, S.W.

Apr. May 9 1917

Robertson Capt.  
O.C.C. 2/1st Regt

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

# MEDICAL HISTORY

OF

Surname Wareham Christian Name Walter Bennett

Table I.—GENERAL TABLE.

Birthplace:—Parish \_\_\_\_\_ County \_\_\_\_\_

|   | SPECIAL RESERVE.                  |                                   | REGULAR ARMY.    |            |
|---|-----------------------------------|-----------------------------------|------------------|------------|
|   | on                                | at                                | on               | at         |
| Examined  | 26 <sup>th</sup> day of June 1916 | St Johns.                         | day of           | 191        |
| Declared Age  | 24 years                          | 5 months                          | years            | days       |
| Trade or Occupation   | Fisherman                         |                                   |                  |            |
| Height  | 5 feet                            | 8 inches                          | feet             | inches     |
| Weight  | 157                               | lbs.                              |                  | lbs.       |
| Chest Measurement   | Grith when fully expanded         | 38 inches                         |                  | inches     |
|   | Range of Expansion                | 4 inches                          |                  | inches     |
| Physical Development  |                                   |                                   |                  |            |
| Vaccination Marks   | Right                             | Left                              | Right            | Left       |
|   | Arm                               |                                   |                  |            |
|   | Number                            |                                   |                  |            |
| When Vaccinated   |                                   |                                   |                  |            |
| Vision  | R.E.—V=                           | 4/6                               | R.E.—V=          |            |
|   | L.E.—V=                           | 4/6                               | L.E.—V=          |            |
| (a) Marks indicating congenital peculiarities or previous disease | (a)                               |                                   | (a)              |            |
| (b) Slight defects but not sufficient to Cause rejection          | (b)                               |                                   | (b)              |            |
| Approved by (Signature)   | <i>W. Dunder</i>                  |                                   |                  |            |
| (Rank)  | Lieut                             |                                   |                  |            |
|   | Medical Officer.                  |                                   | Medical Officer. |            |
| Enlisted  | at                                | St Johns nfld                     | at               |            |
|   | on                                | 26 <sup>th</sup> day of June 1916 | on               | day of 191 |
| Joined on Enlistment  | Corps.                            |                                   | Corps.           |            |
|   | Regtl. No.                        | 2907                              | Regtl. No.       |            |
| Transferred to  |                                   |                                   |                  |            |
| Became non-effective by   |                                   |                                   |                  |            |
|   | on                                | day of 191                        | on               | day of 191 |
| (Signature)   |                                   |                                   |                  |            |
| (Rank)  |                                   |                                   |                  |            |



Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

| Name of Hospital.                        | Admitted to Hospital |           |           | Discharged from Hospital |          |           | Disease             | Number Days in Hospital | Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet. | Signature of Medical Officer          |
|--|----------------------|-----------|-----------|--------------------------|----------|-----------|---------------------|-------------------------|--|---------------------------------------|
|  | Day                  | Month     | Year      | Day                      | Month    | Year      |                     |                         |  |                                       |
| <i>Station <sup>gills</sup> Hospital</i> | <i>17</i>            | <i>4</i>  | <i>17</i> | <i>11</i>                | <i>5</i> | <i>17</i> | <i>Tuberculosis</i> | <i>24</i>               | <i>Condition came on after an attack of measles, patient well nourished &amp; in fairly good condition slight cough. Physical signs not marked</i>   | <i>W. H. Christie<br/>Capt. M.C.</i>  |
| <i>Trinity Disease</i>                   | <i>29</i>            | <i>12</i> | <i>16</i> | <i>12</i>                | <i>2</i> | <i>17</i> | <i>Rheumatism</i>   | <i>45</i>               | <i>Rheumatic condition increasing trouble in site of old fracture, and causing lameness. Lameness quite disappeared under treatment</i>  | <i>Clay Macpherson, M.D.<br/>name</i> |



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

## MEDICAL HISTORY

Surname Wareham

OF

Christian Name Walter Bennett

Table 1.—GENERAL TABLE.

| Birthplace:—Parish.....   |                              | SPECIAL RESERVE.            |                          | REGULAR ARMY.    |             |
|---|------------------------------|-----------------------------|--------------------------|------------------|-------------|
|   |                              | on                          | 1916                     | on               | 191         |
| Examined .....  |                              | at                          | <u>26 day of June</u>    | at               | day of      |
|   |                              |                             | <u>St John's P.S.</u>    |                  |             |
| Declared Age.....   |                              |                             | <u>24 years 5 months</u> |                  | years days  |
| Trade or Occupation.....  |                              |                             |                          |                  |             |
| Height .....  |                              |                             | <u>5 feet 8 inches</u>   |                  | feet inches |
| Weight .....  |                              |                             | <u>151 lbs.</u>          |                  | lbs.        |
| Chest Measurement {   | Girth when fully expanded... |                             | <u>38 inches</u>         |                  | inches      |
|   | Range of expansion..         |                             | <u>4 inches</u>          |                  | inches      |
| Physical Development.....   |                              |                             |                          |                  |             |
| Vaccination Marks {   | Arm .....                    | Right                       | Left                     | Right            | Left        |
|   | Number.....                  |                             | .                        |                  |             |
| When Vaccinated .....   |                              |                             |                          |                  |             |
| Vision .....  |                              | R. E.—V==                   | <u>4/6</u>               | R. E.—V==        |             |
|   |                              | L. E.—V==                   | <u>4/6</u>               | 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>Armed Peterson</u>       |                          |                  |             |
| (Rank)  |                              | <u>Major</u>                |                          |                  |             |
|   |                              | Medical Officer.            |                          | Medical Officer. |             |
| Enlisted .....  |                              | at                          | <u>St John's</u>         | at               |             |
|   |                              | on                          | <u>26 day of June</u>    | on               | day of      |
|   |                              |                             | 1916                     |                  | 191         |
| Joined on Enlistment .....  |                              | Corps.                      | Regtl. No.               | Corps.           | Regtl. No.  |
|   |                              | <u>1st Bn. 1st Regiment</u> |                          |                  |             |
| Transferred to.....   |                              |                             |                          |                  |             |
| Became non-effective by.....                                      |                              |                             |                          |                  |             |
|   |                              | on                          | day of                   | on               | day of      |
|   |                              |                             | 191                      |                  | 191         |
| (Signature)   |                              |                             |                          |                  |             |
| (Rank)  |                              |                             |                          |                  |             |



List in case of Warrant officers treated in quarters.

on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of  
and re-admissions to hospital will be shown. The subsequent progress, including particulars  
ment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

3  
photograph showing fracture of acetabulum

T. W. Burden

# HALIFAX HOTEL



**E. L. Macdonald**  
MANAGER



Halifax, CANADA May 12 1917

From Capt. A. A. Ross  
Halifax N.S.

To O.C. Headquarters  
St. John's Newfoundland

Sir.

Herewith papers in connection with 2907 pt. to B. Wauham. The A. S. M. S. M. S. #6 has recommended his being sent home. He has been paid a total of \$700.00 since leaving St. John's. The above mentioned soldier was a member of Lieut. Goodyear's draft. There is a Webb Belt of mine in the Adjutants office would you please have it sent to my home 14 Victoria St. I have the honour to be  
 Sir.  
 Your obedient servant  
 Hector A. A. Ross Capt.



## Descriptive Return of a Soldier Discharged on Account of Disability

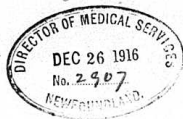
**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

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 *Walter Bennett Warham*  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number *2907*  
 Intended address *Southside. St. Johns.*  
 Height on discharge *5* Feet *8*  
 Color of hair on discharge *brown*  
 Complexion *fair*  
 Color of eyes *brown*  
 Figure on discharge *medium*  
 Christian name of Father *James*  
 Christian name of Mother *Agnes*  
 Wife's maiden name in full }  
 Date and place of marriage } *not married*  
 Christian names of children }



Place and date of soldier's birth. *Southside St. Johns. 24 April. 1892*  
 Nature and locality of civil employment required

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

(Soldier's signature in full)

*Walter Bennett Warham*  
 (Rank) *Pte*

Station

*St. Johns*  
 Date *Dec 18/16*

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

Station

*St. Johns N.F.*

Date

*Dec 18/16*

*Written  
3047 P. E. Stokes*







✓  
AT 7:30 AM  
malinger

This is man mac-  
pherson put in measles  
top with bad foot. Heat  
26 at eye but said  
nothing of foot  
pm

## Medical Report on an Invalid.

Station

St. Johns Nf.

Date

Dec. 18/16.

- |   |  |
|---|--|
| 1. Unit <i>15 Hfed Rf.</i><br>2. Regimental No. <i>2907</i><br>3. Rank <i>Ole</i><br>4. Name <i>Worslaw Wals.</i> | 5. Age last birthday <i>28</i><br>6. Enlisted { on <i>26 June 1916.</i><br>{ at <i>St. Johns Nf.</i><br>7. Former Trade or Occupation { <i>Fishing</i> |
|---|--|

### 8. Disability.

*Lame leg foot.*

### 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. *Oct. 1916.*10. Place of origin of disability. *St. Johns.*

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *About 4 yrs ago walked on a chisel & cut his foot badly. Foot was tender.*

*Could not walk any well for sometimes after wound healed. Has felt very little of this since till Oct. 1916. When he became lame again. and leg feel dead below knee.*

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 3).

*Not due to active service*

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Foot very tender. Chances for weight on it. leg several dead below knee.

X-ray examination at Geneva Hosp. shows old fracture of metatarsal base.

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

- (a) In action?
- (b) On field service? ✓
- (c) On duty?
- (d) Off duty?

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

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

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

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 P.~~ ✓ Yes.

*J. W. Burden Lieut*

Officer in medical charge of case.

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

Station \_\_\_\_\_

Officer in charge of Hospital.

Date \_\_\_\_\_

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

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

Opinion of the Medical Board.

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

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

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

*no but aggravated by*

(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*

22. Is the disability permanent?

*no*

23. If not permanent, what is its probable minimum duration?

*3 months*

To be stated in months.

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

*Total 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.

*for 3 mos. <sup>on</sup>*

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

*—*

26. Do the Board recommend

(a) Discharge as permanently unfit, or

*no*

(b) Change to England?

Signatures:—

*R. S. Shaw*

President.

*J. Hindle Pat*

Members.

Station \_\_\_\_\_

Date DEC 22 1916

Approved



*Clay Macpherson, Major*  
Administrative Medical Officer.

Station \_\_\_\_\_

Date \_\_\_\_\_

## MEDICAL HISTORY OF AN INVALID.

1. Station. **Halifax, N.S.**

2. Regiment or Corps. **1st Nfld. Bn.**

3. Regimental No. and Rank. **2907 Pte**

4. Name. **W.B. Wareham**

5. Age last Birthday. **33**

6. Enlisted on **June 3rd 1916**  
at **St. John's Nfld.**

7. Former trade or occupation. **Trader**

8. General remarks on his:—

(a) Conduct. **Conduct**

(b) Habits. **Sheets**

(c) Temperance. **Not**

(For this purpose the Company defaulters sheets will be obtained from the man's Commanding Officer.)

Date. **28.4.17**

| 9. Service.          | Years.               | Days. | PERIODS |    |
|----------------------|----------------------|-------|---------|----|
|                      |                      |       | FROM    | To |
| <b>1st Nfld. Bn.</b> | <b>June 3rd 1916</b> |       |         |    |

10. (a) Disease or disability. **?Pulmonary Tuberculosis**

(b) Date of origin. **1915**

(c) Place of origin. **Nfld**

(d) Cause. **unknown**

11. Present condition. (Most Important.)

(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e. debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Well developed, well nourished, pale; but not particularly so. Complains of weakness on exertion, pain in chest, on exertion, dyspnoea on exertion, capricious appetite. Pains in feet & back at times. Frequent cough & with frothy expectoration at times, blood tinged. Occasional night sweats, losing weight (1 lb a mo.) Pulse 70 (standing) Lungs shows nothing except a few doubtful rales at lt. apex ant. & possible friction at rt base post.

12. (a) Is the disability the result of service or climate? **No**

(b) Has it been aggravated by intemperance, vice or misconduct? **No**

MEDICAL HISTORY OF AN INVALID

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Small scar across 3 lt. toe

- (b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

Not applicable

- (c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not so attributed

14. Treatment.

Hospital

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

$\frac{1}{2}$  at most

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

? Permaent

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

$\frac{1}{2}$

18. State if for discharge on account of Unfitness for Service.

No; for treatment & observation

*Harney*  
*Capitane*

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. **Yes**

11. **Yes**

12. **Yes**

15. **Yes**

16. **Yes**

17. **Yes**

18. Is he unfit for Military Service. **Yes**

Recommendations :

The Board recommend that 2907  
Pte. W.B. Wareham be given  
the benefit of sanatorium treatment  
under class 2.

Signatures :-

*M. Schwartz* President.

Station **HixNS**

Date **28.4.17**

*J. Churchill* Major

Members.

Date **30/4/17**

Approved.



MAJOR

Assoc. Director of Medical Services.

Date.

Director-General of Medical Services.



# NEWFOUNDLAND.

## REPORT OF MEDICAL BOARD

ON SOLDIER OR NAVAL RESERVIST RETURNED  
FROM OVERSEAS

Station ST. JOHN'S NFLD.

Date MAY 16th., 1917.

No. 2907

Age 24 Height 5ft8"

Rank PRIVATE

Complexion FAIR

Name WAREHAM, WALTER

Eyes BROWN Hair BROWN

Unit 1ST NEWFOUNDLAND

Address SOUTHSIDE, ST. JOHN'S

Former Trade FISHING

Enlisted at ST. JOHN'S NFLD.

on JUNE 26th., 1916

Disease or disability LAME LEG AND FOOT

Present condition *Weight with clothes 160 lbs, Stropped 149 lbs.  
Body well nourished. Breathing bronchial in character  
exaggerated in spots. Has harsh bronchial cough P.S.T.  
Can not find any cause in lungs for his Complaints  
Says nothing now about his lame feet. P.S.T. & S.B.*

Estimated disability

*Nil*

Recommendation of Medical Board

*Discharge*

Class

Members of Board

*H. S. ...  
V. ...*

Approving Medical Officer.

*W. Borden - Major, Pattern  
Clay Macpherson  
Major*









1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Walter B. Wareham, Regl. No. 2907

hereby agree, until further notification by me, and in similar official form to make an Allotment of                      Dollars and fifty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz.:

Allotment begins: April 1st 1917

| Identity Certificate No.                                  | Whether Wife, Child, other Relative or Friend | NAME (in full)           | ADDRESS             | AMOUNT (each person) |
|---|---|--------------------------|---------------------|----------------------|
| 3043  | Sister  | Mrs Johya (Mary) Wareham | South side St Johns | 50                   |
| <p><i>Canelling allotment made on forms 3410 3399</i></p> |   |                          |                     |                      |
| Total Allotment, \$                                       |   |                          |                     | 50                   |

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

(Sig.) Chas. R. Ayle Capt.  
 Officer Commanding  
St Johns Company  
27-3-17 191

(Sig.) Walter B. Wareham  
 Rank pte  
with an Burgess

No 2907.

No/No Waschem W

17/3/17

| Date   | Particulars             | Ch.No. | Dr.    | Cr.    | Bal.           |
|--------|-------------------------|--------|--------|--------|----------------|
| Mar 31 | By Pay 1st days @ 19    |        |        | 15 40  | 15 40          |
| Apr 30 | 30 . . . . .            |        |        | 33 00  | 48 40          |
| May 30 | 30 . . . . .            |        |        | 33 00  | 81 40          |
|        | Bonus                   |        |        | 12 75  | 94 35          |
|        | Clothing                |        |        | 25 00  | 119 35         |
|        | To Pay at Halifax       |        | 7 00   |        | 112 35         |
| Mar 31 | Allotment 1st days @ 60 |        | 7 00   |        | 105 35         |
| Apr 30 | 30 . . . . .            |        | 15 00  |        | 90 35          |
| May 30 | 30 . . . . .            |        | 15 00  |        | 75 35          |
| 31     | To Pay                  | 20     | 73 35  |        | 2 00 <i>br</i> |
|        | War Service Gratuity    |        |        |        |                |
|        | - Nil -                 |        |        |        |                |
|        |                         |        | 117 35 | 119 35 | 2 00 <i>br</i> |

PAY LEDGER 1917 - 115  
 Date 4/1/17 by *[Signature]*

Sigs *Aplvany Lth*





ST. JOHN'S,

(date)

Mar. 13/17

**1st NEWFOUNDLAND REGIMENT,**

**Billeting Account,**

To *Joshua Warcham*

*Gunners Cove  
South side.*

*Billeting soldiers as undermentioned*

*from Feb'y 23. - to Mar. 9. -*

*Per W. B. Warcham*

*10*

*Certified correct for \$10<sup>00</sup>*

*H. S. [Signature] Capt.  
Billeting Officer.*



# Squadron, Troop, Battery and Company Conduct Sheet,

Army Form B. 121.

Forms  
B. 121.  
30.

Number of Sheets 1  
Signature of O. C. Company Chas. C. Capt.

Regiment of Newfoundland

|                            |                    |                              |  |                |   |
|----------------------------|--------------------|------------------------------|--|----------------|---|
| Regimental Number and Name |                    | Enlistment                   |  | Trade          | Good Conduct Badges, Service pay or proficiency pay |
| No.                        | 2907. Wareham W.B. | Age on                       | 24 years 5 months                                | Fisherman      |   |
| Joined                     | Date               | Place and Date of Enlistment | St. John's Mlt.                                  | Religion       |   |
| Joined                     | Date               |                              | 26.6.16  | Weth.          |   |
| Joined                     | Date               | Period of                    | with Colours 299 days<br>with Reserve 2418 days. | Place of Birth |   |

| Place      | Date of Offence | Rank | Cases of Drunkenness | OFFENCE  | Names of Witnesses                    | Punishment awarded  | Date of award or of order disposing with trial | By whom awarded  | REMARKS                                |
|------------|-----------------|------|----------------------|--|---------------------------------------|---------------------|--|------------------|--|
| St. John's | 20/7/17         | Pte  |                      | Absent without leave until March 5th.<br>(1) Personation, wearing red stripes + crown<br>(2) dirty buttons on band of t/c. Watson. | H.C. Knight<br>a/c. S.<br>Pte. Stone. | 168 hours detention | 10/8/17  | Major G.S. Carty | Forfeits 13 days pay<br>Rev.<br>C.O.A. |
|            | 10/3/17         |      |                      | Medically unfit St. John's 30/7  |                                       |                     |  |                  |  |



To be carried over

Army Form B. 121.