

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE .. 24-10-73

NAME NOM **HAFHEY THOMAS** Service No. Matricule No **1038 NFLD REGT 260683**

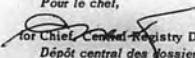
WVA No.
AAC No

Information Received from: **DEATH CERT. SEPT. 24, 1973**
Information reçue de:

Date of Death **SEPT. 14, 1973**
Date du Décès

Place **TAYLOR STREET AYR.**
Endroit

Distribution: WSR-DASG
VI - ASS
DO - BD
HO - BC

Pour le chef,

for Chief, Central Registry Division.
Dépôt central des dossiers.



PHYSICAL EXAMINATION

First Newfoundland Regiment

ATTESTATION PAPER



Regimental No. 1038

Name in full Thomas Patrick Hagey Age _____

Address 256 Water St. West - St. John's

~~Married~~ Single Height 5' 7 1/2 Weight 133

Color Fair Hair Brown Eyes Brown

Other distinguishing marks None

Nearest relative Richard Hagey (Uncle)

Address 50 Pleasant St - St. John's

Dependents None

Occupation Legislator Present Wage £8 50 per week

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment _____

I, Edward Wellman, 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.

Recruited for Newfoundland Contingent

Witness: Thomas Patrick Hagey

Declared before me this 13th day of Sept. 1914

Thomas Patrick Hagey
Witness: Edward Wellman

Edward Wellman

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1033

Name Thomas Patrick Hafey
 Apparent age 20 years _____ months. Height 5 feet 7 1/2 inches.
 Chest measurement { Girth when fully expanded _____ inches.
 { Range of expansion _____ inches.
 Distinctive marks Color: Fair, Hair: Brown, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Richard Hafey, 50 Pleasant St., St. John's
 Relationship Uncle

Particulars as to Marriage.

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

(a)	(b)	(c)	(d)

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of Pension	Service in Reserve not allowed to reckon towards G. C. Pay	Signature of Officers certifying correctness of entries.
					years | days	years | days	
Service towards limited engagement reckons from <u>16/1/15</u>							
Joined at <u>St. John's</u> on <u>16th January '15</u>							
		<u>Pyræxia</u>		<u>14/10/15</u>			
Total Service forfeited as above							
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days							
" " " Pension _____ (") _____ " _____							

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1038

Name Thomas Patrick Hefoy
 Apparent age 30 years months. Height 5 feet 7 1/2 inches.
 Chest measurement { Girth when fully expanded inches.
 Range of expansion inches.
 Distinctive marks Color: Fair, Hair: Brown, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Richard Hefoy, 50 Pleasant St., St. John's
 Relationship Uncle
 Particulars as to Marriage.

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

(a)	(b)	(c)	(d)

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of Pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries.
					years | days	years | days			
Service towards limited engagement reckons from <u>16/1/15</u>									<div style="text-align: right;"> <p>16 28 14 58</p> </div>
Joined at <u>St. John's</u> on <u>16th January '15</u>									
<p><i>Discharged March 14/1919</i></p> <p><i>Embarked Southampton Africa 20 '15 Embarked to Feb 20 '16. Disembarked Bos and returned to Cairo 31 '15. Embarked for Gallipoli 12 '15. Landed Silver Bay night of 12-20 Sept 15 1915. Admitted R.R. Garrison Garrison 9-3-15 Admitted High Colic Hospital Hospital to England 20-11-15 Admitted High Colic 20 '15. Embarked Harbottle 22 '16. Embarked B.C.H. 21-11-17. Arrived 22-2-17. Admitted 20 C.C.S. P.S.H. 21. Embarked B.C.H. 5-3-17. Admitted Harbottle 21-11-17. Admitted 21 C.C.S. P.S.H. 21-11-17. Embarked to Candahar 20 '17. Embarked B.C.H. 21-11-17. Admitted to England 24 '18. Admitted Harbottle 24 '18. Embarked from Harbottle to depot 4 '18. Admitted Harbottle 19 '18. Embarked to depot 12 '18. Embarked to depot 20-11-19. Attached Headquarters Harbottle 7-2-19.</i></p>									
Total Service forfeited as above <i>Devolved above St. John's 14-3-1919</i>									
Total Service towards Engagement to <u>14-3-1919</u> (date of discharge) <u>4</u> years <u>58</u> days									
Pension <u> </u>									

G. P. Haffey

C.R. 1038

Ref. O.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

Thomas Patrick Hapey, Regt. No. 38

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

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
842	Wife	Zobeleland Hapey in Bank of Montreal in Name of Self and Richard Hapey or either	50 Pleasant Street	50
		Cancelled 31/7/17		
Total Allotment, \$				

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.) *Wm. Murphy*
Officer Commanding
Company

(Sig.) *Thomas Patrick Hapey*
(Rank) *Private*
William Murphy

St. John's
Mar 14th 1917

MAR 6 1916
RECORD OFFICE

Two weeks furlough
Conalescent Estate

Army Form W. 3016.

No. _____

Date _____



(1) To the Officer i/c Records,

59 Victoria Street

Westminster

(Station).

(2) The Officer Commanding,

Newfoundland Contingent
Ayt

(Station).

(3) The Paymaster,

(Station).

Regimental No. _____

1038

Rank and Name _____

Pte Jeffrey J

Regiment or Corps _____

1st Newfoundland

has been granted a furlough from _____

March 7/16 to April 17/16

His address while on leave will be:—

Peel House, Regent Street
Westminster

Amending Slip, Army Form W. 3016.

Only for use with Men returned from an Expeditionary Force or from Garrisons Abroad.

I consider he is fit for*

(a) ~~Fit~~

(b) Light Duty, and likely to be fit for Service Overseas within three months.

(c) Light Duty, and not likely to be fit for Service Overseas within three months or requiring special medical treatment.

(d) Service at home, but unlikely ever to be fit for Service Overseas.

*Strike out that which is inapplicable.

24/Gen. No. 4515 (A. G. 7)
20th Amendment 1915
and A.C.I. 235 and 257/16

FORM W. 3016/206. LONDON. S.I. P.F.I.A.

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

(2385.) Wt. W3254-1876. 10,000 Books. 6/15. C. & G.

MAR 6 1916
RECORD OFFICE

Two weeks furlough
Congalescent Entero

Army Form W. 3016.

No. _____

Date _____



(1) To the Officer i/c Records,

59 Victoria Street
Westminster
(Station).

(2) The Officer Commanding,

Newfoundland Regiment
Ayr
(Station).

(3) The Paymaster,

(Station).

Regimental No. _____

1038

Rank and Name _____

Pte. Heffney J

Regiment or Corps _____

1st Newfoundland

has been granted a furlough from _____ to _____

March 7/16 to April 17/16

His address while on leave will be:—

Peel House, Regent Street
Westminster

I consider he is fit for * Duty.
 Light duty.

MAJOR, R.A.M.C. REGISTRAR

FOR OFFICER I/C ROYAL VICTORIA HOSPITAL

Officer in charge _____ Hospital,

NETLEY.

(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.

MAR 6 1916

Two weeks furlough
Convalescent Entitled
Army Form W. 3016.

No. _____

Date _____



(1) To the Officer i/c Records,

59 Victoria Street
Westminster
(Station).

(2) The Officer Commanding,

Newfoundland Regiment
Ayr
(Station).

(3) The Paymaster,

(Station).

Regimental No.

1038

Rank and Name

Pte. Heffney J

Regiment or Corps

1st Newfoundland

has been granted a furlough from

March 7/16 to April 17/16

His address while on leave will be:—

Peel House, Regent Street
Westminster

Amending Slip, Army Form W. 3016.

Only for use with Men returned from an Expeditionary Force or from Garrisons Abroad.

I consider he is fit for*

- (a) ~~Duty~~
- (b) Light Duty, and likely to be fit for Service Overseas within three months.
- (c) ~~Light Duty, and not likely to be fit for Service Overseas within three months of requiring special medical treatment.~~
- (d) Service at home, but unlikely ever to be fit for Service Overseas.

*Strike out that which is inapplicable.

(L. 600.) W. 1. W1267/226. 1.500m. 2/16. P.P.Ltd.

24/Gen. No./4518 (A. G. 1)
30th November, 1915,
and A.C.I. 238 and 255/16.

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

(2385.) Wt. W3254-1876. 10,000 Books. 6/15. C. & G.

1

From Oct 20/20

1ST NEWFOUNDLAND REGIMENT
PAY & RECORD OFFICE

Ref. No. ⁴³²⁸ ~~4328~~ Lincoln

Rec'd: 9/17/17

Act'd:

Enclosed ^{8/26/2} ~~8/26/2~~ ^{9/17/17} ~~9/17/17~~ ~~papers~~

File No.

~~papers of Pte. Jeffrey~~

could not be completed
as they were not rec'd here
before the draft left.

would you kindly
forward same to officer
Ye of 29th I. B. D. Roume

France with the request
that they be completed.

This man has just been
married and his wife
will need the money.

—
Ayr 20/20

7/18/17.
—

J. W. March Major

No. _____

(If replying please quote
above No.)

Army Form B. 104-80A.

Newfoundland Record Office,
58 Victoria St
London Station.

191 .

Sir, Kadama

I regret to have to inform you that a report has this day been
received from the War Office to the effect that (No.) 1038

(Rank) Cte (Name) Wafey T

(Regiment) 1st Newfoundland is ill at

The 47th General Hosp. Le Troport suffering

from gun shot wound Head & R hand

Any further information received in this office as to his condition
or progress will be at once notified to you. *if of a serious nature*

I am,

Sir, Kadama

Your obedient Servant,

Jos T. Wafey

26 Peebles St.

Ayr
Scotland

Officer-in-charge of Records.

8126/2

Form
O. 248

MEMORANDUM
 PAYMASTER & OFFICER I/C RECORDS,
 NEWFOUNDLAND CONTINGENT,
 60, VICTORIA STREET,
 LONDON, S.W. 1,
 ENGLAND.

From

To O. C.,
 29th. Infantry Base Depot,
 Rouen.

R. P.
 Newfoundland Regt.
 London. S. W.

FM/WF

ANSWER

Pay & Record Office,

Rouen.

9th, August 1917
 1039, PTE. T. HAFFEY,
 1st. NEWFOUNDLAND REGIMENT

14. 8. 1917.

With reference to the following memorandum from O. C. 2/1st. Newfoundland Regiment, Depot, Ayr,-

Herewith complete allotment forms.

"Enclosed allotment papers of Pte. Haffey could not be completed as they were not received here before the Draft left. Would you kindly forward same to Officer i/c of 29th. I. B. D. Rouen, France, with the request that they may be completed. This Man has just been married and his wife will need the money".

[Signature]
 Lieut Col.
 O.C. No. 29. Inf. B. Depot

Kindly complete and return the enclosed allotment forms, and make the necessary amendment in this Soldier's A. B. 64.

1st NEWFOUNDLAND REGIMENT
 PAY AND RECORD OFFICE
 No. 4576
 AUG 20 1917
 A.R.D.
 Ans'd *Cush*
 File No.

[Signature]
 Major,
 Paymaster & O i/c Records.

No. _____

(If replying please quote
above No.)

Army Form B. 104-80A.

Newfoundland Record Office,
58 Victoria Pl^s Station.
London
Feb 27 191 .

SIR,

I regret to have to inform you that a report has this day been received from the War Office to the effect that (No.) *1038*

(Rank) *O/C* (Name) *Hafey T.*

(Regiment) *1st B Newfoundlnd* is ill at

Addington War Hosp. Crozier suffering

from *Dysentery*

Any further information received in this office as to his condition or progress will be at once notified to you.

H. T. Hafey
26 Peebles St
Apr

I am,
SIR,
Your obedient Servant,

Officer-in-charge of Records.

Mrs. J. Haffey ?

Next of Kin Uncle: R. Haffey
Johns Hill

2 B. B. 2 - 8 Draft on 5.8.17.

at 29 J. B. Rowen
as at 18.8.17

1st	RECORDS OF
Ref. No.	5022
Rec'd.	SEP - 7 1917
As to	Mr. Ray and Record. Office
Ans'd.	9262
File No.	

42 George St.
Ayr. 5/9/17

Could you please forward details to the above address, of Pte. J. Haffey.

No. 1038

1/1 Newfoundland Reg.

on active service Having had no news of him for a disturbing period, and also, a rumour of his death in action, would like if you could give me news of him as soon as possible. Trusting you will oblige
Yours in Anticipation
Mrs. J. Haffey.

16100/P/P&A.

Mrs. M. Haffey,
26, Peebles Street,
Ayr. Scotland.
N.B.

October 9th,

1038, PTE. T. HAFPEY,

With reference to your letter 30/9/18, (8498): Notification of change of address was received in this office subsequent to posting of Draft for Allotment and Separation Allowance for period ended 27/9/18, which was mailed to the previous address. Alteration has now been made, please.

Chief paymaster & O i/c ^{Major,} Rcds.

FM/NM.

ENTERED.
PAY LEDGER
NUM. ROLL P. 2. 7
ALLOT. VOUCHER
REGISTER
EXAMINED

Tasuma *J*

26 Pebles St
Ayr
Scotland
30. 9. 18

1038 Pl. V. Haffey.

Dear Sir,

I am writing to say that I have not as yet received my Allowance for this month. I notified you of change of address eight days before the money was due but my letter was not acknowledged. Would you kindly send on cheques at your earliest convenience.

Yr Obedt
Yours sincerely,
Margaret Haffey

RECEIVED AND RECORDED,
PAYMENT OFFICE.
IN 18498
2 - OCT 1918
ACTED UPON
16100

Holt *W.H.*

16100/

BRANCH
<i>Rede</i>
ACTED UPON
BY <i>JH</i>
DATE <i>15/2/18</i>

26 Pictou St
Apr
St John
12.2.18

Dear Sirs,

As it is now a considerable period since I last heard from my husband, Private Thomas Haffey No. 1055 D Coy, 7th Newfoundland B.E.F. I shall be very grateful if you can give me any information regarding his whereabouts.

Oblige.
M^{rs} J. Haffey

Discharged to Base details 30/12/17
Presumed with 1st Batt
B.E.F. France

X

1ST NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	<i>1561</i>
Rec'd.	<i>14 FEB 1918</i>
Act'd.	<i>JHS/2/18</i>
Adm'd.	

REGISTER

No. 11725

1038 Plé. J. Haffey

NEWFOUNDLAND CONTINGENT

N.F.P./55.

Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

To: Mrs. J. Haffey
of Mrs. Burner

Hill Rise Twyford, Hants

July 19 1918

Herewith Marriage Certificate

Please acknowledge receipt hereon:

(Sig.) Margaret Haffey

(Date) 21 July 1918

A. D. ...
Chief Paymaster & Officer i/c Records.

Handwritten initials



3234

1816 400,000 (40) 9/16 HWV(gp1467)
373 12224 593,0.0 487

Forms/W.3288/2

Army Form W. 3288.

Hospital.

To O.C. Addington Park

Wm. H. H. Croxson Surrey

Station _____

Herewith Army Form B. 178 (Medical History Sheet)

In the case of Miss Daisy T. P. 1st Bn Royal Newfoundland Regt
NEWFOUNDLAND CONTINGENT.

Please acknowledge receipt hereon.

RECEIVED

W. H. H. Croxson

Signature

A. B. Anderson

Commanding

Commandant

CHIEF PAYMASTER & OFFICER IN CHARGE

Date _____

1038 Haffey
I

C/o Mrs. Purmer,
Hillside,
Clayfield,
Hants.
Winchester.

7081/1

Dear Sir,

Would you kindly send on my
allotment also my separation money to above
address as I expect to be staying here for
some time

Yr Obedt.

Yours truly,
Mrs J. Haffey

NEWFOUNDLAND CONTINGENT,
PAY & RECORD OFFICE.

RECEIVED IN 4126

RECEIVED 7 MAY 1918

NO 7081/1/8/5/18

Det. Nos. 00

118/5

Ack'd PK.

WPM
8/5/18

noted ar.

26 Pebles Street,

Ayr,

Scotland.

20.9.18.

1038 Ate J. Haffey.

Dear Sir,

As I have now returned home
to Scotland would you kindly forward
my Allowance to the above address.

NEWFOUNDLAND CONTINGENT	
PAY & RECORD OFFICE	
Rec'd	19 2017 18 134
Rec'd	SEP 1918
Ac'd	and
Ref	
WRH	
Bl	
Com'd	
T & F	
R & C	ask
D & F	
G S.	

Yr Obleg

Yours Sincerely

~~Margaret Haffey~~

ENTERED.
PAY LEDGERS <i>HE</i>
NUM. ROLL <i>P. & H.</i>
ALLOT. INDEX <i>PH</i>
REGIST.
EXAMINED

1038 Pte. T. Haffey

M. F. P/87a required

W.M.

2nd. Batt.

th

C/o Mrs. Purvis
Bell Lane
Newport
Glos

NEWFOUNDLAND CONTINGENTSEPARATION ALLOWANCETo be used in the case of men already marriedThe officer Commanding 2nd Batta Royal Newfoundland Regt.Hazley Down Camp, Whitechapel

I have the honour to request permission to my past marriage, and your recommendation for the issue of Separation Allowance to my wife,

Mrs. Margaret Heffleyof 26, Beeth Street, Ayr, Scotland. Mto whom I was married on 7th June 27/97 1917at St Thomas' Church, Ayr, Scotland.My wife's maiden name was Margaret Dainie McMillanAddress at time of marriage 26, Beeth St, Ayr ScotlandOccupation Shop WalkerName and address of Samuel McMillan,parents or guardian 26, Beeth St, Ayr Scotland

I attach herewith my marriage certificate, together with the necessary certificate as to my wife's character and general worthiness

from Rev. J. Hamilton, Ayr

I am not in receipt of a salary from the Newfoundland Government in addition to my military pay.

I have the honour to be,

Sir,

Your obedient Servant,

J. Heffley +W. Mackwood, Sgt.
Witness his mark Substantia O'SRegt No. 1038 Rank Pte

COMMANDING OFFICER'S APPROVAL OF MARRIAGE

Of No. 1038 Rank Pte Name J. Keffey

Reference reverse: I hereby approve of the marriage of the above-named soldier, and recommend that separation Allowance be granted to his wife.

I have personally investigated this application and am satisfied as to the wife's good character and consider her worthy to receive the benefits of Separation Allowance.

The soldier has allotted at least 50% of his pay in favour of his wife.

X CERTIFIED COPY OF PT II ORDERS No. 459 Dated 9/5/18.

PERMISSION TO MARRY. The marginally named is granted permission 1038 Pte J. Keffey to marry with effect 27th July 1918

X (Authority:)

The written evidence upon which my decision is based is enclosed for your disposal together with the marriage certificate.

Dated at

D. Bennett

LIEUT. COLONEL

I

Signature

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Commanding

23/3 1918

NOTE:- This document must be signed personally by the Officer Commanding the Unit and forwarded to the Chief Paymaster & Officer i/c Records, Newfoundland Contingent, 58 Victoria Street, London, S.W. 1

APPLICATION FORM (R.F.P./82) MUST ACCOMPANY THE ABOVE.

NEWFOUNDLAND CONTINGENT



SEPARATION ALLOWANCE

NOTICE

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question. Each statement is considered to be made on Oath and the form is to be signed before a Magistrate of your District, and returned to

Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

1. Name in full of Soldier <i>Thomas Patrick Haffey</i>	Rank <i>Private</i>	Regiment or Unit <i>Regal Newfoundland</i>	Regtl No. <i>1058</i>
2. Age of Soldier: <i>20</i>	Married or Single: <i>Married</i>		
3. Name in full of Dependent <i>Margaret McMillan Haffey</i>	Relationship: <i>Wife</i>		
4. Address in full	<i>26 Peablos Street, Cairn Scotland</i>		
5. Date of Marriage	<i>24th July 1914</i>		
6. Place of Marriage	<i>St James Parish Church, Peasebrook Bridge</i>		
7. Did marriage take place since Soldier's enlistment?	<i>Yes.</i>		
8. Was Commanding Officer's permission obtained? If not, why?	<i>Yes.</i>		
9. If not married, how long have you been dependent on the Soldier for your maintenance, and supported regularly by him on a bona fide domestic basis?	_____		
10. Were you living with your husband immediately prior to his enlistment? If not, how long have you been separated?	_____		
11. Is Separation a legal one?	_____		
12. If legal are you in receipt of Alimony? If so, state amount.	_____		
13. If not legal, how long since your husband contributed to your support? Explain fully.	_____		
14. State amount of Allotment received by you from Soldier.	<i>Ls. 9. per month.</i>		
15. From what date have you received Allotment?	<i>September 1st 1914.</i>		
16. Names of Children (Male)	Age last Birthday	Names of Children (Female)	Age last Birthday
<i>None</i>		<i>None</i>	

*Exp
L 10/1/15*

17. Are you already in receipt of Separation Allowance from any source? If so, state amount.	No
18. Are you in receipt of payment from any Patriotic Fund? If so, how much?	No
19. Have you made a previous claim for Separation Allowance? If not, why? Give particulars.	No. <i>My husband was on leave and I did not know that the bill had been passed.</i>
20. Was your husband at the time of his enlistment an employee of the Newfoundland Government?	No.
21. In what capacity and in what place?	
22. Is he in receipt of a salary as such while serving in The Royal Newfoundland Regiment? If so, how much?	No.

I herewith make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Acts 5 & 6, Will. IV., c. 62.

Signature Margaret Jeffrey Margaret Jeffrey
 Place of Residence 170 St. George's Hillside Clifton, Hawks

Declared and subscribed before me at Clifton
 this 21st day of May 1918

Signature of the Magistrate W. Burnell
 Place or County for which he acts JP for County Hawks

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Soldiers & Sailors Families Association or other recognised Society, certifying that to the best of their knowledge, after careful enquiry, the above statements are correct.

Signature of Clergyman Robt. Davison Minister of St. John's

Signature of representative Jean Wylie Secretary
Charity Organisation Society

State name of Society

N.B. Marriage Certificate must accompany this application, and will be returned after perusal. If marriage is after enlistment, Commanding Officer's permission in writing must be forwarded.



1ST. NEWFOUNDLAND REGIMENT

MEMORANDUMNo. 232

FROM-

HEADQUARTERS.
ST. JOHN'S
NEWFOUNDLAND.
October 9th.1917. 191

TO

The Paymaster,
London, England.

11010

SUBJECT.
Cancellation of Allotment

No.1038 Pte.T.Hafey
REFERENCE NOS. _____

REPLY

DATED 9th, November 1917

PLEASE RETURN ORIGINAL AND RETAIN DUPLICATE

Owing to non-receipt of N.F.P./L. cancelling this allotment, previous to date of mailing cheques for August 1917, cancellation can only be effected from Sept.1st.1917.inclusive.

Please make necessary adjustment.

Noted. Adjustment has been

[Signature] Major,
Chief Paymaster & P. i/c Records.

[Signature]
Lieut.
D/Paymaster

FM/WF

RECORDED AND INDEXED
POST OFFICE
Ref. No. <u>6257</u>
NOV - 3 - 1917
<i>[Signature]</i>

NOTED
<i>[Signature]</i>
Date <u>4/11/17</u>

ORIGINAL

300 20 1917 N.F./12.

Allotments.

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1038 (Rank) Private (Name) J. Hatfield
 hereby apply for cancellation of Allotment made by me on
 N.F. 5885 dated January 1918 in favour
 of Bank of Montreal St. John's for \$ — cts. 80⁵
 per Mem. Such cancellation to take place on the
Thirty first day of July 1917

I agree to accept all risks and consequences of this application
 failing to reach Headquarters, St. John's, by mail in time to become
 operative at above nominated cancelling date; and that in the event
 of such non-delivery by mail, and thereby the Allotment continuing to
 be paid to the Allottee, I also agree to such further stoppage as may
 be thereby necessary being made against me in the Pay Books, or other-
 wise to refund such overdrawn amount or amounts.

Dated at Racecourse, St. J., N.S.

Aug 2nd 1917

J. Hatfield } Witness
mark } Hutchings
 Allotter.

Approved and Witnessed,

J. P. [Signature] Lt. Col.
 O.C. "A" Company.
 No 29. Inf. Base Depot

NOTED in 2064
J. Castle Capt.
Aug 29 1917
 Date 14/8/17 Day

To be made out in TRIPLICATE and sent to the Paymaster & Officer
 in Charge of Records, who will forward Original to Headquarters by
 first mail, Duplicate by the following, and retain Triplicate.

NOTED
Paul M. [Signature]
 Date 20/8/17 Day

ORIGINAL

No. 4431

N.F.P./11

Aug 1917

NEWFOUNDLAND CONTINGENT

ALLOTMENT

I, (No.) 1038 (Rank) Private (Name) T. Haffey
 hereby agree, until further notification by me, and in required form,
 to make an allotment of _____ dollars and 60 cents
 per diem, from my pay, to and for the benefit of the undermentioned
 Person and/or Persons. Such payments to be made on proof of identity
 of the Person and/or Persons concerned, vizi:-

Whether Wife Child, other Relative or Friend	NAME (In Full.)	ADDRESS	AMOUNT (Each Person) \$
Wife	Mr. T. Haffey	26 Prables St. St. J.	60
			60

This Allotment to take effect from and including Aug 1st 1917.

NOTE:- This Form must be completed and signed by the Soldier, counter-
 signed by the Officer Commanding his Company, and forwarded to the
 Paymaster in accordance with P. & R.O. C.L./10, 9/12/16.

(Sig.) [Signature] Lt Col.
 Officer Commanding
 "A" Company.

Dated at No 29. Inf. Base Depot
St. J.
Aug 2nd 1917.

(Sig.) [Signature] } Witness
mark } [Signature] }
 Allotter.

NOTED
[Signature]
 DA 20/8/17

NOTED 20064
[Signature] Capt. asst.
 Paymaster
 Date 14/8/17 Coy

NEWFOUNDLAND CONTINGENT

SEPARATION ALLOWANCE

✓ 1. Regimental No. and Rank	1038 Private
✓ Name (in full)	Thomas Haffey
✓ Date of Enlistment	16th January 1915 at St Johns
✓ Unit	1st Royal Newfoundland Coy.
✓ 2. Name(s) of Dependent(s) (in full)	Margaret Haffey
✓ Relationship	Wife
✓ Address (If allowance is claimed for children, name and address of person with whom they reside should be stated)	26, Peebles Street Ayr, Scotland
3. Ages of Children: Girls under 17 years Boys " 13 "	
4. Children's Guardian. Address	
✓ 5. Particulars of Allotment Allottee Address Date effective from	\$.60 cents per day in favour of Mrs. M. Haffey 26, Peebles St. Ayr Scotland June 5th 1917
✓ 6. Date of Marriage	1st June 1917 27/1/17 97
7. Have you made previous claim, for Separation Allowance? If so, state particulars.	No.
8. Is Separation Allowance being paid on your account to anyone in Newfoundland or elsewhere?	No.

Edith
687

9. Name and address of your last Employer.	G. Browning & Sons Water Street, West St. John's, ^{Canada} Newfoundland.
10. The amount of your salary or wages immediately prior to Enlistment.	\$8.50 weekly
11. Are your wages or any portion being paid by your employer during your absence?	No.
12. If paid, what is the amount per month?	/
13. Name of Corps prior to Enlistment in the Newfoundland Contingent.	/

I CERTIFY that the above is a true statement

J. Haffey

+ Witness his mark) J. H. Ashworth
Sgt.
Munich

Signature of Officer forwarding this Application.

[Handwritten Signature]

LIEUT. COLONEL.

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Unit _____

Date 23 MAR 1918

FOR COMPLETION AT THE PAY & RECORD OFFICE.

Date Marriage Certificate examined _____

10/5/18.

Date Birth Certificates (in case of children) examined _____

If Soldier is sole support, does Statutory Declaration accompany this Application? _____

RE-FOUNDED CONTINGENT

N.F.P/33.

Temporary A/c.

Regtl No. 1038 rank Pt

Name L. Hafey

Pay	P. Alice Working	Total
1	10	10
Less Allotment.		50 ✓
Net Rate		60

Date	DEBITS	£	s	d	CREDITS	£	s	d
1917	Balance				Balance			
	P.R. ADVANCES:				16/12/17	2	4	0
	A.B. 64.	1	1	6 ✓	Pay & net rate:			
	Acquittance rolls				17/12/17 to 4/1/18 = 47 ✓ days			
	Hospital Advances	1	7	0 ✓	5/1/17 to 14/1/17 = 10 days 20 = \$2820 2750			
	<u>STOPPAGES:</u>							
	hospital dys =				5/1/17 to 14/1/17 = 10 days			
	Forfeited Pay dys =				3/0 = \$Ration Alice	1	0	0
	Miscellaneous	1	5	0 ✓	1/1 to 1/1 = days			
	Cables							
	P.&R.O. PAYMENTS:							
	Sundry Bills	2	15	0				
	Cash							
		6	19	0		8	19	0
	4/4/15							

No. 1038 Rank Pli Name J. P. Staffey

Pay	F.A.	Weg	Total
100	10		110
Less: Allotment			60
Net Rate			50

DEBITS	Date	£ s d	CREDITS	Period		Days	Rate	s	d	£ s d
				From	To					
Balance		1 16 8	Balance		21 ¹² / ₁₇					6 16 1
Acquittance Rolls		2 9 2	Pay @ Net Rate	22 ¹² / ₁₇	4 ⁴ / ₁₈	104	50	52	00	10 13 8
Hospital Advances		15 6								
A.B. 34		4 4 4								
P. & R.O. Payments			Rate accrued							19 3
Expended Pay		9 0	11 days @ 1/4							18-9-0
9 0 0 3-1-2			4 8 6							
Cheque 7962		15 0 0	18-9-0							
			3-1-2							
			<u>15-7-10</u>							

Bleched
4 3/18

Sp. M^{rs} Turner,
Hill-Place,
Cheyford,
Hants.

Dear Sir,

I now take the privilege of writing to ask if you received my application form for separation allowance which I sent off some time ago now. If so, I should feel greatly obliged to you, if you would forward the money to me at your very earliest convenience as owing to ill health I have been called upon to meet doctor's expences and find it impossible to do so on my present allowance of £8.9 per month. Trusting this note will meet with your approval.

Yours in anticipation,
M^{rs} J. Haffey.

NEWFOUNDLAND	PAID
REL. NO. 6343	ACK'D
REL. NOS. 7697/1	
ACK'D BY	
DATE	
BY	

SUSPENSE

CLEARLED

7697/1/P&A

Jessie Sophia Martin

CHIEF PAYMASTER & OFFICER I/C RECORDS,
NEWFOUNDLAND CONTINGENT
58, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

Mrs. Margaret Haffey,
C/o Mrs. Burners,
Hill Rise,
Twyford, Hants.

16th May 8

1038, Pte. T. Haffey,
Royal Newfoundland Regt.

Claim for Separation Allowance in your favour has been made by the above named soldier, and which in order to decide whether admissable you are requested to have the enclosed N.F.P. 87a completed before a Magistrate of your district and return to this Office as soon as possible.

Marriage and Character Certificates and permission of Commanding Officer have been received.

Marriage Certificate will be returned when claim has been dealt with.

Major,
Chief Paymaster & O. i/c Records.

FM/S

[Handwritten signature]

1038 Pte Thomas Jeffrey,
1st Royal Newfoundland Regt,
D Coy,
Addington Park War Hospital,
Croydon.
10 " 3 " 18

Dear Sir,

Would you please oblige me by
sending to the above address an official
Form for me for to obtain a Separation
Allowance for my Wife

and oblige
your obedient servant
Thomas Jeffrey.

DEPARTMENT.	Pay
Reference No.	246
Date Rec'd.	11 MAR 1918
" Ack'd.	
" Ans'd.	3/596/2/14/3/18
File	



Officer Commanding,
Addington Park War Hospital,
Croydon.

Pay & Record Office,

14th March 8

1038, Pte. T. Haffey,
Royal Newfoundland Regt.

With reference to the following
letter 10/3/18 (2416):-

"Would you please oblige me
"by sending to the above address
"an Official Form for me for to ob-
"tain a Separation Allowance for
"my Wife."

N. F. P. 82 and 83, are en-
closed for completion and should
be forwarded to the Officer Com-
manding, 2/Bn Royal Newfoundland
Regt. Hazeley Down Camp, Winchester,
Hants.

Major,
Chief Paymaster & O. i/c Records.

April 23rd 1918.

I certify that Mrs Heffey
is a respectable woman. She
belongs to a family long
connected with this parish
church. I have known her
since coming to be minister
here six years ago and
believe she is worthy to
receive the allowance

she is at present claiming

John W. Hamilton.

Minister of St. James's

Parish, Ayr.

TO, - The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.F.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on 1st July 1916.

Regtl. No.	Rank.	Name	Amount	Signature.
1038	Pte	Haffey	2.50 s ^{cts}	J. H

I have the honour to be, Sir,
~~Yours faithfully,~~
Your obedient servant.

Date 12-7-16

Thomas Haffey

Medical Report on an Invalid.

Station Hazley Down CampDate 28/11/18

1. Unit Royal Newfoundland Regt.
2. Regimental No. 1038
3. Rank PTE.
4. Name HAFEX
5. Age last birthday
6. Enlisted $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$
7. Former Trade }
or Occupation }
- 7A. If with previous service in Army, state—
- (a) Former Unit;
- (b) Regimental No.;
- (c) Date of Discharge;
- (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

D. A. H.

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.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

Treated in Hazley Down Hospital & discharged from Convalescent Hospital at employment. Uld. Sp. contracted in Dardanelles now cured.

Attrib. to active service conditions

2a

2a

13. What is his present condition?

Rapidly out of breath after slight exertion. Systolic heart right after.

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

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

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

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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—

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

Repatentation
MAK 23
Approved

ROYAL NEWFOUNDLAND REG.

Officer in medical charge of case.

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

Station _____

Date _____

Officer in charge of Hospital.

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

† Delete this word if no exceptions are to be made



APPLICATION FOR OVERSEAS TRANSPORT

1. Name in full

Surname HAFEXChristian Names Margaret

2. Postal and Telegraphic Address.

26 Peables StreetAggr. Scotland

3. Names and ages of all travelling with you except yourself.

4. Your last address in Newfoundland

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

6. If Relation or Dependent of a Member of the Newfoundland Contingent state relationship, Regtl No., and Rank

Wife of Private Thomas Haffey
No. 1038

7. Your Destination in Newfoundland.

St. Johns

8. What arrangements have you made for Passport.

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

Yes

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

Date

January 18th

Signature

Margaret Haffey

THIS FORM TO BE COMPLETED AND RETURNED TO:

Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,
55, Victoria Street, London, S.W. 1.

5-20 pm

PAY & RECORD OF
Ref. Nos. IN 577 ✓
17 JAN 1915

POST OFFICE  TELEGRAPHS.

This Form must accompany any inquiry respecting this Telegram.

Office of Origin and Service Instructions.



Charges to pay s. d.

Handed in at 7/3 Received here at 4.4W

TO

Synoptical

REC
P.S.

1038. ~~Hayes~~ residing 26 Beeble Street a yr desires repatriation by Corsican please arrange Newfoundland Hayes Camp

NFP 7/175
Sent 17-1-19
GRB

Hafey. T. B.

1038

Ray Sept.

Casualty Form—Active Service.

Regiment or Corps Newfoundland.

Regimental No. 1038 Rank Pte. Name Hafey, T.B.

Enlisted (a) Jan. 16/15 terms of Service (a) One year Service reckons from (a) Jan. 16/15.

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

Extended Duration of Re-engaged Aug. 15/15 war. Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 35, 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.	20/3/15	
			Disembarked Alexandria	1/9/15.	
			Embarked for Gallipoli	13/9/15.	
9/10/15	"Nevassa" Ill, Pyrexia	C 4038	H.S. "Nevassa" St. George's Hosp. Malta.	9/10/15	Auth. A 16276
9/10/15	Comdt., Admitted				
12/12/15	"Morea" Invalided to England		H.S. "Morea" Royal Victoria Hosp. Netley.	14/10/15. 13/11/15	" C 4518 B 694
	Admitted War Office			12/11/15	H 3327
			(sgt) W. L. S. Jackson, Captain, for Major, Officer i/c Records 11 & 12 Dists., 3rd Echelon, Base, Egypt.		



(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

1078 P. H. T. Naxey

Owing to cancellation papers
not reaching the office in ample
time to take effect from 31/7/17
it will therefore be necessary
to debit account of this Soldier with
allotment for period ending 31/7/17

J. S.

DUPLICATE ORIGINAL

AUG 20 1917 E.F./12.
Allotments.

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1038 (Rank) Private (Name) J. Haffey
hereby apply for cancellation of Allotment made by me on
N.F. 1885 dated January 1918 in favour
of Bank of Montreal, St. John's for \$ — cts 00³
per diem. Such cancellation to take place on the
Thirty-first day of July 1917.

I agree to accept all risks and consequences of this application
failing to reach headquarters, St. John's, by mail in time to become
operative at above nominated cancelling date; and that in the event
of such non-delivery by mail, and thereby the Allotment continuing to
be paid to the Allottee, I also agree to such further stoppage as may
be thereby necessary being made against me in the Pay Books, or other-
wise to refund such overdrawn amount or amounts.

Dated at Racecourse, Apr 1917
Aug 22 1917

J. Haffey } witness
mark } Whitney
Allotter.

Approved and Witnessed
J. G. [Signature]
St. Col.
O.C. No. 29, Inf. Base Depot.

NOTED 2064
J. G. [Signature] - Captain
Asst. No. 29, Inf. B. D.
14/8/17

Noted
14/8/17

To be made out in TRIPLICATE and sent to the Paymaster & Officer
in Charge of Records, who will forward Original to Headquarters by
first mail, Duplicate by the following, and retain Triuplicate.

NOTED
J. G. [Signature]
Date 20/8/17 Coy



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Thomas Patrick Hapey, Regl. No. 1038

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 ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
842	Uncle	To be placed to Credit in Bank of Montreal in Name of Self and Richard Hapey or either	50 Pleasant Street	50
		Approved <i>[Signature]</i> _____		
Total Allotment, \$				

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

(Sig.) *[Signature]*
 Officer Commanding
 Company

(Sig.) *Thomas Patrick Hapey*
 (Rank) *Private* Witness *William [Signature]*

St John's
Mar 4th 1915

No.

4890

Original
DUPLICATE.

NEWFOUNDLAND CONTINGENT

N.F.C./44

No. 209.

To: The Hon. The Minister of Militia.

St. John's,

" " Company.

Newfoundland.
MEMORANDUM OF STOPPAGES/CREDITS on Account of
Paymasters advances.

NOTE:- Charge under

Column.

Credit Pay & Record Office, London.

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT					
				£	s	d	£	s	d
1028	Pte	Haffey F.	Casual payment whilst at Mil Con Hospital Devon 30/8/18 as per P.M.A.229.					4	0
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> CHECK 17/8 17-3-19 </div>								4	0

Pay & Record Office,
58 Victoria Street,
London, S.W. 1.

27th March

1919

Chief Paymaster & O. i/c Records.

CERTIFIED that the above stoppages/Credits have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

191

O.C. " " Company,
Battalion.

Duplicate
ORIGINAL

No. _____ **NEWFOUNDLAND CONTINGENT**

H.F.P./84.
209.

To: **The Hon. The Minister of Militia.**

No. _____

St. John's, Newfoundland.

" " Company.

MEMORANDUM OF STOPPAGES/CREDITS on Account of
Paymasters advances.

NOTE: - Charge under _____ Column.
Credit **Pay & Record Office, London.**

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT						
				£	s	d	£	s	d	
1028	Pte	Haffey F.	Casual payment whilst at Mil Con Hospital Devon 30/8/18 as per P.M.A.229.				4	0		
							4	0		

CHECKED
C.M.
27-3-19

Pay & Record Office,
58 Victoria Street,
London, S.W. 1.

27th March

191

J.H. Moreton
Chief Paymaster & O. i/c Records.

CERTIFIED that the above stoppages/Credits have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

191

O.C. " " Company,
Battalion.

March 14.1919

#1038 Pte. Thomas P. Haffey,
Freshwater MI.,
City

Dear Sir:-

Please find enclosed "Discharge Certificate

No.1283."

Yours truly,

Captain,
Paymaster - C.I.C Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1038 Rank Private Name Haffey Thomas
 Intended place of residence Indreets St. John's

2. Occupation Seaman
 Classification of soldier B Medical Category 6

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 FEB 28 1919
 Date FEB 28 1919 W. H. L. Capt
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date St. John's 28-2-19
 Signature of soldier Thomas Haffey
 Signature of witness W. H. L. Capt

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date St. John's 28. 2. 19.
 Signature of soldier Thomas Haffey
 Signature of witness W. H. L. Capt

STATEMENT OF SERVICE

7. Enlisted for service 16.1.15 No of days on Military
 Discharged from service 28.2.19 Plus 14 days Service 1519 days

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 R. H. Lait Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment
 Date FEB 28 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld W. H. L. Capt
 Date March 14/1919 Officer in Charge
 The Royal Newfoundland Regiment

2079/1783

Casualty Form—Active Service

Regiment or Corps 7. Newfoundland
 Rank Pte Surname Hager Christian Name Mrs. S. 2344
 Religion Roman Catholic Age on Enlistment 20 years — months
 Enlisted (a) By John S. Terms of Service (a) War of WMS Service reckons from (a) 16. 1. 15
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____

Signature of Officer.

Report		Record of promotion, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or by other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 24, or other official documents.
Date	From whom received				
			Embarked <u>Shampton</u>	<u>12.14</u>	
			Disembarked... <u>Rouen</u>	<u>12.17</u>	
			Joined Battalion <u>France</u>	<u>17.2.17</u>	<u>B 215</u>
<u>24/2/17.</u>	<u>6 C Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>23/2/17</u>	<u>B 213</u>
	<u>34 C.I.S.</u>	<u>Ad., S.A.W. I. Hand</u>	<u>Do</u>	<u>24.2.17</u>	<u>EX 391</u>
	<u>1 Sqn Hoop</u>	<u>Adn. Gen. I. Hand.</u>	<u>Etretat</u>	<u>24/2/17</u>	<u>HA 4072</u>
	<u>"Essentially Pte."</u>	<u>Transferred to English</u>		<u>24.2.17</u>	
			<u>McBurchell</u>		<u>CAPTAIN.</u>
			for Officer i/c No. 1 Regular Infantry Section General Headquarters, 3rd Echelon.		

(a) In the case of a man who has re-engaged fit, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shipping-Staff, etc.

Casualty Form—Active Service

Regiment or Corps 1. Grenadier Guards
 Rank Plt Surname Hatley Christian Name John **2344**
 Religion Roman Catholic Age on Enlistment 20 years — months
 Enlisted (a) By John S. Terms of Service (a) War of War Service reckons from (a) 16. 1. 15
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____

Signature of Officer.

Report		Record of promotion, reductions, transfer, casualties, etc., during active service, as reported on Army Form B, 212, Army Form A, 26, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B, 212, Army Form A, 26, or other official documents
Date	From whom received				
			Embarked <u>Shempton</u>	<u>12/17</u>	
			Disembarked... <u>Raven</u>	<u>12/17</u>	
			Joined Battalion <u>France</u>	<u>17.2.17</u>	<u>B 213</u>
<u>24/2/17</u>	<u>6 C Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>23/2/17</u>	<u>B 213</u>
	<u>34 C S.D.</u>	<u>Ad. G.D.W. S. Hand</u>	<u>Do</u>	<u>29.2.17</u>	<u>E.S. 391</u>
	<u>1 Gen Hosp.</u>	<u>Adn. Gen. S. Hand.</u>	<u>Etretat</u>	<u>24/2/17</u>	<u>HA 4072</u>
		<u>"Essentially 6C" Wounded in Action</u>		<u>24/2/17</u>	<u>HA 4072</u>



CAPTAIN.

for Officer i/c No. 1 Regular Infantry Section

General Headquarters, 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) Signaller, Shooting-Brill, &c.

Casualty Form - Active Service.

Regiment or Corps Newfoundland 2/
 Rank Private Surname Jeffrey Christian Name Thomas
 Religion Roman Catholic Age on Enlistment 20 years — months.
 Enlisted (a) 1st Aug Terms of Service (a) Duration Service reckons from (a) 1st Aug
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate. _____
 _____ Worcester Capt Signature of Officer.

Report Date	Person whom received	Record of promotion, reduction, transfer, casualty, etc., during active service, as printed on Army Form B. 212, Army Form A. 24, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 212, Army Form A. 24, or other official documents
			Embarked <u>Shampton</u>	<u>5.8.17</u>	
			Disembarked... <u>Rouen</u>	<u>7.8.17</u>	
			Joined Battalion <u>28</u>	<u>AUG 1917</u>	<u>B 213</u>
		O.C. WOUNDED IN ACTION	<u>France</u>	<u>3/2/17</u>	<u>B 213</u>
		<u>Ad. G.S.W. Head</u>	<u>ex 897A</u>	<u>3/2/17</u>	<u>E 04510</u>
		<u>R.R. Hants</u>	<u>Le Havre</u>	<u>5/11/17</u>	<u>HA 711E.</u>
		<u>Arrives</u>	<u>Rouen</u>	<u>31.12.17</u>	<u>REV</u>
		<u>Adm. 2nd Lt. Mess & Mess Rm</u>	<u>Le Havre</u>	<u>12.12.17</u>	<u>401142</u>
		<u>Joined</u>		<u>10-1-18</u>	<u>B 213</u>
		<u>62 CCS</u>	<u>pld. Sub Deputy</u>	<u>ex 897A</u>	<u>5-2-18</u>
		<u>Ad. Sub Deputy</u>			<u>13-2-18</u>
		<u>To England</u>			<u>30-2-18</u>
					<u>A 3003</u>

[Handwritten signature]



[Handwritten signature]

(c) In the case of a man who has re-engaged for, or reduced into Section D, Army Reserve, particulars of such re-engagement or reduction may be entered.
 (d) Stapsler, Sholing-Smith, & Co.

Casualty Form—Active Service

Regiment or Corps Newfoundland

Regimental No. 1038

Rank Platoon

Name Safety T.B.

Enlisted (a) July 16/14

Terms of Service (a) 1 year

Service reckons from (a) January 16/15

Date of promotion to present rank

Date of appointment to lance rank

Numerical position on roll of N.C.Os.

Extended Duration of War

Re-engaged August 1/15

Qualification (b)

Date	Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	From whom received	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.			
		Entered St. John's, NFLD.		20/3/15.	
		1884th Coy Alexandria		1/9/15.	
		Detached for Gallipoli		13/9/15.	
9/10/15.	"Nevassa" Ill, Pyrexia	C 4038	H.S. "Nevassa"	9/10/15.	Auth. A 16276 <u>40</u>
9/10/15.	Comdt., Malta.	Admitted	St. George's Hosp., Malta.	14/10/15.	" C 4158. <u>40</u>
12/12/15.	"Morea" Invalided to England		H.S. "Morea"	13/11/15	B 694.
	War Office Admitted		Royal Victoria Hosp., Netley	12/11/15.	H 3327.



[Signature]

Captain
for Major,
Officer i/c Records 11 & 12 Dists.,
3rd. Echelon, Base, Egypt.

(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.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 1038 Rank Plt Name Haffey Thomas
 Date of Enlistment 16.1.15 Address St John's District St John's
 Occupation Teacher Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 40% 6.7.20
 Passed to Demobilization Officer with following documents:—

N.F. Pjs.	B 268	B 121	1	N.F. Med.	D.F. 1	
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	D 400A	B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 27.2.19

RM's Lt
 O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) Clothing Supplied Joseph A. Snowfield

Date 28-2-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
at _____ and Release Certificate No. 1281 issued.

Date 28-2-19 *ASD* ASD Duke Capt.
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 11-3-19

Date 18-2-19 ASD Duke Capt.
Depot Paymaster

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 28-2-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 258	B 121	1	N.F. Med	D.F. 1	<i>Grand</i>
E 178	W 3494	B 122		Board 1st	" 2	
B 178a	D 400A	B 1915		do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 126	M 93				

Date 1.3.19 ASD Duke Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date _____ R.H. Suit Capt.
O. C. Discharge Depot.

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

Date _____

8.339

610B

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^a to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Laffey Christian Name John

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 { Girth when fully Expanded. _____ inches.
Measurement { 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 .

Joined on Enlistment ...	Corps. <u>Westfordland Coy.</u>	Regt. No. <u>1038</u>
Transferred to ...		

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

(Signature) _____
(Rank) _____



Handwritten initials or mark at the bottom of the page.

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 must 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																																													
N. E. Key	20	11	15	4	9	16	Para B	109	<p>10-9-15 at the Dardanelles, patient complained of giddiness, pain in stomach & head, diarrhoea, shivering & sweats, with great thirst. He was treated in trucks till about 17-9-15 when sent to a clearing station and finally sent to Malta five weeks in Oct. 1915.</p> <p>Convalescent on Admission</p> <p>Temp normal. Bowels regular. Eats and sleeps well. Feels well. Never ill since 17/2/16. D. R. A. M. C.</p> <p>14/12/16 - Agglutinations</p> <table border="1"> <tr> <td></td> <td>1/30</td> <td>1/50</td> <td>1/100</td> <td>1/200</td> </tr> <tr> <td>B. Typh</td> <td>+++</td> <td>+++</td> <td>+++</td> <td></td> </tr> <tr> <td>B. Para A</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>B. Para B</td> <td></td> <td>+++</td> <td>+++</td> <td>+++</td> </tr> </table> <p>28/1/16</p> <p>For consecutive tests of Urine & Faeces</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Faeces</th> <th>Urine</th> </tr> </thead> <tbody> <tr> <td>28/1/15</td> <td>neg</td> <td>sterile</td> </tr> <tr> <td>21/1/16</td> <td>neg</td> <td>sterile</td> </tr> <tr> <td>4/2/16</td> <td>neg</td> <td>neg</td> </tr> <tr> <td>9/2/16</td> <td>neg</td> <td>neg</td> </tr> <tr> <td>14/2/16</td> <td>neg</td> <td>Calc.</td> </tr> <tr> <td>17/2/16</td> <td>neg</td> <td>neg</td> </tr> </tbody> </table> <p>Serology results Class B.</p> <p>7.3.16.</p>		1/30	1/50	1/100	1/200	B. Typh	+++	+++	+++		B. Para A					B. Para B		+++	+++	+++	Date	Faeces	Urine	28/1/15	neg	sterile	21/1/16	neg	sterile	4/2/16	neg	neg	9/2/16	neg	neg	14/2/16	neg	Calc.	17/2/16	neg	neg	J. A. Mescael 18/2/16.
	1/30	1/50	1/100	1/200																																															
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9/2/16	neg	neg																																																	
14/2/16	neg	Calc.																																																	
17/2/16	neg	neg																																																	

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 previous occupation
Boatswain

Thomas ^{his} ~~Wit~~ Haffey as ^{Wit} ~~Boatswain~~ _{Signature of Voc.}

C. D. Dick's Capt.

Signature of the Vocational Officer or his Representative.

Reg. No.

1038

Place

Date

St. Johns

28-2-19 191

Medical Report on an Invalid.

Station Hazelton CampDate 28/11/18

1. Unit Royal Newfoundland Former Trade or Occupation
2. Regimental No. 1038
3. Rank Pte
4. Name BISHOP HAFEEY
5. Age last birthday
6. Enlisted on at
7. If with previous service in Army, state—
 (a) Former Unit ;
 (b) Regimental No. ;
 (c) Date of Discharge ;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

D. A. HStatement 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.

10. Place of origin of disability.

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

Treated in Hazelton hospital and discharged from Convalescent hospital for employment. Old dysentery contracted in Gardenelle now cured.

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

Attributed to Active Services conditions

n an a

Rapidly out of breath
after slight exertion.
Systolic bruit right femoral

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.

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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—

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

Reputation

M.R.C. 1
Approved

ROYAL NEWFOUNDLAND REG.

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 Minister of Pensions should be in possession of the most reliable information to enable him 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, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 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.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war; *Yp*

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

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

*Acute
Has a marked typical
bruit. Pulsero*

Exposure & infection

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

40% out months

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England? *Yp*

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 114 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—

Station *Yp*

Date *24 Nov 19*

Station

Date

J. S. Lane President.

Wainwright
W. A. ... Members.

Cherry Macpherson Administrative Medical Officer *Major*





Descriptive Return of a Soldier Discharged on Account of Disability.

INSTRUCTIONS—This form is to be completed in the case of every di-charged 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. & 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 *Thomas Haffey*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *1038*
 Intended address *Greenwald Road*
 Height on discharge *5 Feet 9*
 Color of hair on discharge *Black*
 Complexion *Ruddy*
 Color of eyes *Brown*
 Descriptive Marks
 Figure on discharge *Medium*
 Christian name of Father
 Christian name of Mother
 Wife's maiden name in full
 Date and place of marriage *April 1917* *Arg. Scotland*
 Christian names of children
 Place and date of soldier's birth *St John. 31-3-1895*
 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)

Thomas Haffey Lt
 Rank

Station

St John

Date

18-1-19
John F. McDonald M.D.

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, Hospital,
 Unit, or Command Depot.



Station

Date

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

MEDICAL HISTORY

Surname Nafey OF Christian Name Thomas Patrick

10521 a Pae A Table 1.—GENERAL TABLE. 15 AUG 1917

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	15	Jan 1915		191
	at	St Johns.	at	
Declared Age	20	years		days
Trade or Occupation	Teamster.			
Height	5	feet 7½ inches		
Weight		139 lbs.		
Chest Measurement	Girth when fully expanded...		36	inches
	Range of expansion...		36	inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated	Never.			
Vision	R.E.—V=	1/6	R.E.—V=	
	L.E.—V=	1/6	L.E.—V=	



(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to Cause Rejection

(b) Slight L Varicocele

Approved by (Signature)

Cluny Macpherson
Capt.

(Rank)

Medical Officer.

Medical Officer.

Enlisted on 16 day of Jan 1915 at St Johns

Corps. _____ Regtl. No. _____

Joined on Enlistment ... 1st Infy B Coy 1038

Transferred to... Royal Newfoundland

Became non-effective by ...

on _____ day of _____ 1911 on _____ day of _____ 1911



(Signature)

(Rank)

PTC

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


Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and 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					
Nelby.	20	11	15	7	3	16	G.S.W. VIII. L. hand	109	Wounded to frame 2 1/2/17 - Punctures wound radial side of meta carpal phalangeal joint first finger, joint swollen & painful - Shrapnel. Col. and Hosp. Mitcham.	St. Murphy Capt RAMC	
ADDINGTON PARK WAR HOSPITAL.	24	2	15	15	3	15	Dysentery (B.Y.)	19	Admitted invalided from Overseas Bacteriological Tests: Feces- 27.2.18 - 6.3.18. Urino- 27.2.18 - 6.3.18 No Typhoid, Paratyphoid or Dysentery Organisms have been found in these specimens.	TRANSFERRED TO DYSENTERY DEPOT, BARTON-ON-SEA	
	15	3	18	3	4	18	Dysentery (Convalescent)	20	Test 18.3.18 At for duty; discharged to Unit, Hazley Down Camp, Winchester.	Protzological negative Bacteriological negative No Entamoeba histolytica found in either specimen, but Lankin Cysts were present in both specimens.	W. M. O. 116 W. M. O. 116 W. M. O. 116
Hazley Down	25	7	18	19	8	18	D.A. 26.	25.	Transferred to Derriford Mil. Convalescent Hosp. Systolic. heart at apex & up to side of sternum. Head when lying & standing after exertion. Apex beating hyperline L.B. just outside. Has not altered much. Readily out of breath & pulse late nil on exertion To Employments	W. M. O. 116 W. M. O. 116 W. M. O. 116	
Mil. Conv. Hosp. D. of Barton-on-Sea	19	8	18	1	10	19	- do -	44		W. M. O. 116 W. M. O. 116 W. M. O. 116	

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
20. 7. 16 3. 11. 16	2 Sinteri tests at 3 rd Coll's Gen. Hosp. Hospital N. 46. Dental treatment complete
	<p style="text-align: center;">T. A. B. } 4 MAY 1917. 2 } 18 MAY 1917 <i>W. C. M. G.</i> } <i>Capt. R. A. M. G.</i></p>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St. John's "Hful"	Jan. 16. 15	20 Mar. 15			
T. S. "Stephano"	20 Mar. 15	22 Mar. 15			
T. S. ORDUNA	22 Mar. 15	30 Mar. 15			
Edinburgh Castle	20 Mar. 15				

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

Hicks
Surname *Jeffrey*

Christian Name *J.*

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—

(b) Slight defects but not sufficient to cause rejection—

Approved by _____
Rank _____
Medical Officer.

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

Joined on enlistment _____
 Corps 1st *Regt. No. 1038*

Transferred to _____

Became non-effective by _____
on _____ day of _____ 191____
(Signature) _____
(Rank) _____

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

W. F. GERRARD & SONS LTD., PRINTERS, Old Bailey, E.C.
[1273] W/15369/2/1364 500m 2/17n 45 59

TABLE II.—Only for Admissions 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 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				
37 LONDON GENERAL HOSPITAL WANDSWORTH.	4	3	17	22	MAR	1917	G.S.W. VIII. 1st hant	18	Wounded in France 24/2/17. Made puncture wound of radial side metacarpal phalanx 1st finger transferred to Hol. Mil. Hosp. Mitcham	S. H. Angley Capt R.A.M.C.
HOLBORN MILITARY HOSPITAL WESTERN ROAD, MITCHAM.	22	3	17	4	4	17	f.s. 10	13.	W. 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th 13th 14th 15th 16th 17th 18th 19th 20th 21st 22nd 23rd 24th 25th 26th 27th 28th 29th 30th 31st	J. P. M. M. S. S.

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.

1. Christian name *Thomas*..... 2. Surname *Huffey*.....

3. Rank *Private*..... 4. Regt. No. *1048*.....

5. Address in full to which future payments of gratuity are to be forwarded... *St. G. Browning's Lane*.....

..... *Water Street (west)*.....

6. Date of enlistment in the Regiment. *December 8th 1914*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

..... *Margaret Huffey*.....

8. Relationship of such dependents... *Wife*.....

9. Address in full of such dependent... *Michigan Walk, St. John's*.....

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

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.. *No*.....

11. Were you on active service only in field. If so, give dates, and particulars of such service... *No Overseas*.....

12. Give total length of time which you served on active service, whether in field, or Overseas. *Two months in Newfoundland and*.....

..... *four years Overseas*.....

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.....

Clayton J. Allowance 66
P.D. Pay 20.45

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

No

16. Have you, during the present war, served in the Imperial Forces?.....

Yes

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

No

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

No

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

19. Are you now serving in the Regt.?..... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

No..... If not give:- (a) Date of discharge *February 24th 1919* (b) Reason for discharge *Temporary Demobilization*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.....

Dardanelles 1915. France 1916. Belgium 1917. France 1918

21. (c) Are you receiving treatment from the Civil Re-Establishment Com.?

No

(d) If (c), 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:

Place of Residence:

Declared before me at:

This

3rd

day of

March 1919

his Haffey
Thomas W. Haffey
C/o Brownsville, Tex.
John J. McCarthy

Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, 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
			6.00	6.00

Certified Correct.

Bymaster.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 61 ⁴⁴/₁₀₀

July 18 1919

Received from the First Newfoundland Regiment
the sum of Sixty one ⁴⁴/₁₀₀ Dollars.
~~on account~~ of Pay. W.B.G.
balance

Ch. No. 3332	Initials. <u>Cev</u>
Pay Ledger. 36	Initials. <u>Wn</u>
Gen. Ledger.....	Initials.....

his
J. F. *W.B.G.*
max *W.B.G.*
Regl. No. Rank *W.B.G.* Lt.

No. 1038 Rank Pt

Name J. Haffey

1038 Hayfield

P.M.

Please pay balance W.S.E.

18/7/19

F. J. J.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

Thomas Patrick Hapey . Regl No. 38
 hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and _____ Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz. :

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
842		<i>Isabel Hapey</i>	<i>50 Pleasant Street</i>	50
		<i>in Parish of St. James</i>		
		<i>in Town of St. John's</i>		
		<i>Richard Hapey</i>		
Total Allotment, \$				

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.)

Thomas Patrick Hapey
 Officer Commanding

Company

(Sig.)

(Rank)

St. John's
 Mar 14th 1917

HIGH COMMISSIONER FOR NEWFOUNDLAND

Medical Documents

Subject

1038, Pt. 2. Haffey.

Royal Newfoundland Rest

REFERRED TO			

Copy

M.P.A. 36 C

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award

Awards Reference No. NEWFOUNDLAND

Surname HAFLEY Christian Names Thomas

Ship, Corps, or Regt. from which discharged } R. Navy Regt. Official or Regtl. Number } Pt. 1085

Date of discharge

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF— (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<i>Neck Stenosis</i>		28

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulters Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to—

MINISTRY OF PENSIONS,
MEN'S AWARDS BRANCH,
BROADWAY AVENUE,
ACTON, LONDON, W.3.

MS, X

Are you satisfied that the man before you is the Seaman, Soldier or Airman referred to in Discharge Documents sent herewith? (See instructions on page 1.)

Weight 165 lbs. Height 5 ft 9 1/2 lbs.

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

(a) % occasional faints over heart. Breathing on exertion.

Notes drawn by occupation

No treatment since last Board.

Gen. Cond.: V. Good: no anemia no edema. Tongue clean.
Teeth sufficient. Healthy looking man.

Heart: A.P. 5th space N.L. L⁶ from midsternal line.
S1t. Presystolic thrill, presystolic murmur at apex.
+ inconstant Systolic murmur below apex + 8cm
varying with respiration, reduplicated 2nd sound in
pulmonary area. Arteries just palpable B.P. 128/90
p. 104. 134. 104. No undue dyspnea

Lungs clear

Abdomen nil to note

CNS nil to note

Urine not available

(5)
(6)

- 3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? *No*
- (ii) If not, is re-examination advised, at the expiration of 6 months? *No*
- 12 months? *Yes*
- More than a year? *No*

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
<i>Mitral Stenosis</i>	—	—	<i>Forty per cent 40%</i>

(With regard to disabilities assessed at under 20 %, See M.P.M.S.D. 57 Supplement 8D).

(4)

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

N.A.

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

N.A.

(591) W.H. Hill
to Adams
5/7/33

Signatures

(591) W. Leslie Dyer

Chairman.

Place of Board

Glasgow

(591) T Kay Macdonald

Members.

Date

29. 7. 31

(Copy)

M.P.A. 36 C

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award

Awards Reference No. *Newfoundland*

Surname *H A F F E Y* Christian Names *Thomas*

Ship, Corps, or Regt. from which discharged } *Ryl Navys Regt.* Official or Regtl. Number } *Pt. 1038*

Date of discharge

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF:— (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<i>Nikol Stevanis</i>		<i>28</i>

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulters Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to—

MINISTRY OF PENSIONS,

MEN'S AWARDS BRANCH,

BROMYARD AVENUE,

ACTON, LONDON, W.3.

10/7/30.

1.—Are you satisfied that the man before you is the Seaman, Soldier or Airman referred to in Discharge Documents sent herewith? (See instructions on page 1.) *Yes*

Age 34 Ht. 5'9" Wt. 164 lb

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

a) *pain in L. Side on exertion.*

Shortness of breath.

Wet bases

No treatment since last Board.

Gen. cond. good: *No anemia or cyanosis.*
Tongue & teeth satisfactory.
Florid complexion.

Heart.

A.S. in 5th and 6th spaces,
maximum in 5th, inside N.L.

3/4 from m.s. 4" T.C.D.

V.S. at Apxl. Conducts to axilla.

† presystolic murmur appears
definitely after E.T.

P.R. 100/156/96: Slt. Dyspnea

Lungs: *clear*

Abdomen: *negative*

CNT: *normal*

Urine: *not available*

(3)
(8)

- 3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? No
- (ii) If not, is re-examination advised, at the expiration of 6 months? No
- 12 months? Yes
- More than a year? N/A

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
<i>Foot:</i> 40%	—	—	<i>Foot:</i> 40%

(With regard to disabilities assessed at under 20 %, See M.P.M.S.D. 57 Supplement 8D).

(4)

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

N.A.

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

NA.

(Sgt) with Nail
1.8.30.
F. O. M. P.

(Sgt) A. L. B. B. B. Chairman.
Signatures

Place of Board Glasgow (Sgt) J. W. W. W. Members.
Date 29. 7. 30. M. S. P.

Cover

M.P.A. 36 C

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award.....

Awards Reference No. *1000000000*

Surname *HAFFEY*

Christian Names *THOMAS*

Ship, Corps, or Regt. from which discharged } *Royal Navy Regt*

Official or Regtl. Number } *Pte. 1038*

Date of discharge.....

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF:- (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<i>Mitral Stenosis</i>		<i>28</i>

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to--

MINISTRY OF PENSIONS,
MEN'S AWARDS BRANCH,

BROMYARD AVENUE,

ACTON, LONDON, W.3.

16/8/29

1.—Are you satisfied that the man before you is the Seaman, Soldier or Airman referred to in Discharge Documents sent herewith? (See instructions on page 1.)

Wt. 162 lbs.
Hr 5' 9"

Yes

Apr 33

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

(a) 90% pain in left side on exertion
+ shortness of breath

works as a carter & has not lost any time. he is given an easy job & has no heart.

GC good no anaemia no cyanosis.

Teeth good Tongue clean & moist.

Heart A.P. in 6th R.C. — H.P. 4th R.C.

1st side - P.C.D. 5th There is a faint V.S.

bruit at apex slightly conducted towards axilla more marked - recurrent there

Erect position 2nd Pulmonic Sound is +

pulse 94 - 110. 80. No dysphasia. ET good

Arteries not thickened

No Tricuspidic bruit heard before or after examine

Lungs clear

Abdomen negative

Urine

3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? *no*

(ii) If not, is re-examination advised, at the expiration of 6 months?..... *no*

12 months?..... *no*

More than a year?..... *Yes*

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
<i>Forty per cent 40%</i>			

(With regard to disabilities assessed at under 20 %, See M.P.M.S.D. 57 Supplement 3D).

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

na.

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

*(Sgt) W.H. Nail
10. 9. 29*

Signatures

(Sgt) H. Richardson D.C.M.S. Chairman.

(Sgt)

J.W. Macpherson

Place of Board

Glasgow

Date

6/9/29

Med. Spec.

Members

COM

M.P.A. 36 C

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award

Awards Reference No. *Newfoundland*

Surname *HAFHEY*

Christian Names *THOMAS*

Ship, Corps, or Regt. from which discharged

Reg. Newfoundland

Official or Regtl. Number

Reg 1038

Date of discharge

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF :- (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<i>Tubercular Sclerosis</i>		<i>28</i>

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to--

MINISTRY OF PENSIONS,

MEN'S AWARDS BRANCH,

BROMYARD AVENUE,

ACTON, LONDON, W.3.

1.—Are you satisfied that the man before you is the Seaman, Soldier or Airman referred to in Discharge Documents sent herewith? (See instructions on page 1.)

Age 32

Ht. 155 lbs Wt. 5'9 1/2" Yrs.

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

a Pain in left side. Heart is OK.

b) General Condition good. Fresh complexion. No Anemia

Heart. R.R. 54 & 60. S2 & 60. S4. Murmurs in 6th position M.L.

Short. V. S. Murmurs slightly conducted towards axilla
increases after exercise

No accentuation of first pulmonary sound.

P.A. 116/136/90 and falling to 68 on lying down.

No suggestion of presystolic today.

Very marked sinus (respiratory) irregularity

No undue distress after exercise

c) D.A.R.C. enlargement. Good. No enlargement.

Lungs. Clear.

M.S. Nil found

C.N.S. Negative

Urine Normal.

3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? *No*

(ii) If not, is re-examination advised, at the expiration of 6 months?..... *No*

12 months?..... *Yes*

More than a year?..... *No*

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
<i>Tully 40%</i>	<i>/</i>	<i>/</i>	<i>Tully 40%</i>

(With regard to disabilities assessed at under 20 %, See M.P.M.S.D. 57 Supplement 3D).

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

Na

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

Na

Signatures—

W. Gairns-Dinsett ? Chairman.

Place of Board

Glasgow

W. Gairns-Dinsett ?

Date

14. 8. 28.

J. H. H. H. H. H. ?
Conv. Spec.

Members.

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award _____

Awards Reference No. WentpoundlandSurname HAFLEYChristian Names ThomasShip, Corps, or Regt. }
from which discharged } R.N. Regt.Official or Regtl. }
Number } Plg. 1038

Date of discharge _____

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF:— (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<u>Mitral Stenosis</u>		

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to—

THE REGIONAL DIRECTOR,
MINISTRY OF PENSIONS,

1.—Are you satisfied that the man before you is the Seaman or Soldier referred to in Discharge Documents sent herewith? (See instructions on page 1.)

Yes.

31 yrs.

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

(a) Pain in left chest. Shortness of breath on walking quickly.

(b) W. 152 lbs in tot. - no anaemia - no cyanosis - Heart not insp. 6th space outside N.6 - presystolic murmur. faint V.5. P. 96-120-100 - slight dyspnoea after moderate exercise. Lungs normal.

Urine normal

(c) Mitral stenosis with enlargement

(d) No.

3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? No

(ii) If not, is re-examination advised, at the expiration of 6 months? No

12 months? Yes

More than a year? No

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
60 % (Sixty)			

(With regard to disabilities assessed at under 20 %, See M.P.M.S.D. 57 Supplement 3D).

Has the man been informed of his Assessment? _____

(4)

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

na.

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

na

7.—If the man requires the constant attendance of another person in his home (other than skilled nursing) state whether a separate report has been rendered on M.P.A. 36 C.A.

(91) *Stewart Campbell* *apocms.*
Signatures _____ Chairman.

Place of Board

Glasgow (91) W Sutton Pratt

Date

13/9/27.

Members.

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award _____

Awards Reference No. NewfoundlandSurname HAFFEY Christian Names ThomasShip, Corps, or Regt. } R.N. Regt. Official or Regtl. } No 1038
from which discharged } Number }

Date of discharge _____

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF— (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<u>Mitral Stenosis</u>		<u>28</u>

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to—

THE REGIONAL DIRECTOR,
MINISTRY OF PENSIONS,

1.—Are you satisfied that the man before you is the Seaman or Soldier referred to in Discharge Documents sent herewith? (See instructions on page 1.)

Yes 30 years.

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

a Pain over chest. Shortness of breath.

b Nutrition good. Complexion florid
Tongue clean teeth good.

AB in 6th space outside N.L. Almost an inch

A.D. Murmur heard at apex also V.S. Murmur
Specially ~~over~~ Mucoid after exercise with man
recumbent

P. 108. R. 108. 108 High diaphragm

Lungs abdomen unsc. Normal

c V.D. A. Mitral Stenosis with enlargement
Ano for E. 7

3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? No

(ii) If not, is re-examination advised, at the expiration of 6 months? No

12 months? YES

More than a year? No

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
60% (Sixty)	—	—	60% (Sixty)

(With regard to disabilities assessed at under 20 %, See M.P.M.S.D. 57 Supplement 3D)

Has the man been informed of his Assessment? No

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

N.A.

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

N.A.

7.—If the man requires the constant attendance of another person in his home (other than skilled nursing) state whether a separate report has been rendered on M.P.A. 36 C.A.

NA

Signatures—

W. L. Martin

Chairman.

Place of Board

Eglasgow

Arundonquell Avenue

Date

7. 9. 26

Alvin Crawford

Members

Newfoundland

A

A⁵⁰/₀ Regional

Date of Expiry of Current Award.....

No.

Name and Address of Pensioner	Corps or Regiment from which Discharged.	Date of Discharge.	Chelsea or Regional No.
<i>Haffey.</i> <i>J.</i>	<i>R. N. Regt.</i> Regimental No. <i>1038.</i>		

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

Mitral Stenosis.

P. 25.

To prevent personation the Medical Officer is requested to identify the soldier before examination as to state of health. This can usually be done by comparison of signature, personal description or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or Offences in the Defaulter Sheets, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the present state of health of the Pensioner above named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned in the enclosed envelope, to—

THE REGIONAL DIRECTOR,

1—Are you satisfied that the man before you is the soldier referred to in Discharge Documents sent herewith?

Yes

Mitral Stenosis

2—The present state of the Disability or Disabilities shown on page one of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

- (a) Complaints of pain in left chest
- (b) Weight 150. lbs. Heart - Maximal impulse in 6th space, just outside nipple line: T.C. D. increased to left. Systolic bruit at apex.
- (c). Pulse 96-108-96. - Not breathless E.T. good

Conclusion - Mitral stenosis with hypertrophy.

Ureng - normal Urine - no albumen or sugar.
Abdomen - negative

M. S. D. 626 issued

3-(i) Is the Disability in a final stationary condition? *No*

(ii) If not, is re-examination advised, at the expiration of 6 months..... *No*

12 months..... *Yes*

More than a year..... *N.A.*

4—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability shown on p. 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

N.B.—Degrees of disablement should be expressed in one of the following percentages:—100, 90, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil. (Fide Instructions to Pensions Boards.)

50% (light) 12/12

5—If this is a case of aggravation by service of a disability which existed prior to entry, has the effect of the aggravation now passed away?

N.A.

6—Does the man require the constant attendance of another person in his home (other than skilled nursing)?

No

7—If there is any disability present other than those recorded on the man's documents as existing on discharge or discovered at any later examination, or if there is any disability now claimed or discovered to be causing disablement which was recorded as attributable to or aggravated by service in the war, but as not causing disablement at the time of discharge or discovery, state:

(i) The nature and condition of each disability, giving (a) the man's complaints, (b) the symptoms and physical signs, and (c) the effect of the disability on function.

N.A.

(ii) State whether the disability is—
(a) In a final stationary condition.

(b) If not, how soon re-examination is advised in respect of this further disability?

(iii) State the degree of disablement it would entail if there were no other disability.

(iv) State:—

(a) Whether or not it is attributable to or aggravated by service in the war.



(b) And if the disability is one aggravated by service the degree of disablement caused by it at the time of enlistment.

(v) State the degree of disablement caused by the further disability* and the already accepted disability combined.

* Only attributable or aggravated disabilities to be taken into account.

Signatures—

MINISTRY OF PENSIONS MEDICAL BOARDS. Address AYR A.R.E.A. BOARD No. 1 Date 11 SEP. 1924 AYR

 Chairman.

.....) Members.

Wesfoundlander

A

A²⁰_C Regional

Date of Expiry of Current Award.....

No.

Name and Address of Pensioner	Corps or Regiment from which Discharged.	Date of Discharge.	Chelsea or Regional No.
<i>Haffey.</i> <i>T.</i>	<i>R. N. Reg.</i> Regimental No. <i>1038.</i>		

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

P-28

Mitral Stenosis.

To prevent personation the Medical Officer is requested to identify the soldier before examination as to state of health. This can usually be done by comparison of signature, personal description or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or Offences in the Defaulter Sheets, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the present state of health of the Pensioner above named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned in the enclosed envelope, to—

THE REGIONAL DIRECTOR,

.....Region.

1—Are you satisfied that the man before you is the soldier referred to in Discharge Documents sent herewith?

Yes.

2—The present state of the Disability or Disabilities shown on page one of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

(a) Pain in precordium. + shortness of breath on exertion

(b) General condition good. Complexion healthy.
No anaemia. Weight in T.B. 150 lbs.

Heart max. Dimp. 6th space. 1st anterior N.I.
Regular. Presystolic murmur - mitral area.
P. 84. 120. 84.

Thump normal.

Urine:— No albumen
No Sugar.

(c) Somewhat breathless. E.T. good.

Conclusion:— V.D.H. mitral stenosis + hypertrophy

MP.NICD 62 same

NI

3-(i) Is the Disability in a final stationary condition?

No

(ii) If not, is re-examination advised, at the expiration of 6 months.....

No

12 months.....

Yes

More than a year.....

No

4-What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability shown on p. 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

N.B.—Degrees of disablement should be expressed in one of the following percentages:—100, 90, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil. (Vide Instructions to Pensions Boards.)

~~40% (of 70%)~~ 50% (of 70%) *Yam.*

5-If this is a case of aggravation by service of a disability which existed prior to entry, has the effect of the aggravation now passed away?

No

6-Does the man require the constant attendance of another person in his home (other than skilled nursing)?

No

7-If there is any disability present other than those recorded on the man's documents as existing on discharge or discovered at any later examination, or if there is any disability now claimed or discovered to be causing disablement which was recorded as attributable to or aggravated by service in the war, but as not causing disablement at the time of discharge or discovery, state:

(i) The nature and condition of each disability, giving (a) the man's complaints, (b) the symptoms and physical signs, and (c) the effect of the disability on function.

The.

(ii) State whether the disability is—
(a) In a final stationary condition.

(b) If not, how soon re-examination is advised in respect of this further disability?

(iii) State the degree of disablement it would entail if there were no other disability.

(iv) State:—

(a) Whether or not it is attributable to or aggravated by service in the war.

(b) And if the disability is one aggravated by service the degree of disablement caused by it at the time of enlistment.

(v) State the degree of disablement caused by the further disability* and the already accepted disability combined.

* Only attributable or aggravated disabilities to be taken into account.

Signatures—

James Amey Chairman.

James Amey Members.

Address.....

MINISTRY OF PENSIONS
MEDICAL BOARDS
AYR AREA
BOARD No. 1
Date *21 AUG 1923*
AYR.

Date.....

No.

Name of Pensioner.	Regiment.	Date of Discharge.	Chosen No.
<i>Happey Thomas.</i>	<i>Royal Newfoundland</i> Regimental No. <i>1038</i>		

DISABILITY IN RESPECT OF WHICH PENSION WAS GRANTED.

Utricular Stenosis

To prevent personation the Medical Officer is requested to identify the soldier before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheets, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the present state of health of the Pensioner above named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned, in the enclosed envelope, to—

THE DIRECTOR-GENERAL OF AWARDS,

MINISTRY OF PENSIONS,

BURTON COURT, KING'S ROAD,

LONDON, S.W. 3.

1.—Are you satisfied that the man before you is the soldier referred to in Discharge Documents sent herewith?

Yes

2.—The present state of the Disability shown on page 1 of this form.

- a) Shortness of breath, Pain in chest.
b) Complexion healthy, no anaemia

Heart Maximum pulse 64. Space in triple line
Drop diffuse. Mitral regurgitation, brunt
Praxystolic also.

Pulse 90-130. 94 irregular after exercise

- c) No undue breathlessness
Rt Good. Lungs normal.

Mitral Stenosis with good tolerance

3.—(i.) Is the Disability in a final stationary condition?

Yes

(ii.) If not, is re-examination before the expiration of the period of twelve months advised, and if so, how soon?

Yes.

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

N.B.—Degrees of disablement should be expressed in one of the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil. (Vide Royal Warrant of 17th April, 1918, issued as A.O. 162 of 1918, and Instructions to Pensions Boards.)

30% (Arthritis)

5.—If this is a case of the aggravation by service of a disability which existed prior to entry, has the effect of the aggravation now passed away?

No

6.—Does the man require the constant attendance of another person in his home (other than skilled nursing)?

No

7.—Is treatment being recommended on A²⁶/_c? No

- 8.—
- (a) Is he working at his own trade or occupation ?
 - (b) If not, what employment does he follow ?
 - (c) How long has he been so employed ?
 - (d) Does he lose time as a result of his disability ?

N.B.—The man is to be told that it is optional whether he replies or not to this question.

9.—If there is any other disability present than those recorded on the man's first Invaliding as existing on discharge state :

- (1) The nature of such disability.
- (2) Whether it is attributable to service during the present War or not.
- (3) The further degree of disablement (if any) it entails in addition to that stated in answer to question 4.
- (4) If the disability is in a final stationary condition.
- (5) If not in a final stationary condition, if re-examination before the expiration of the period stated in answer to question 3 (ii.) is specially advised in respect of this further disability, and if so, how soon ?

Signatures—

C Douglas President.

Station *Ayr* }
5th Sep 1922 } Members

A

Ag Regional

Date of Expiry of Current Award.....

No.

Name and Address of Pensioner.	Corps or Regiment from which Discharged.	Date of Discharge	Chelsea or Regional No.
HAFNEY. Thomas	Reg. Newfoundland Regt Regimental No. 1038 Plt		

MINISTRY OF PENSIONS
SCOTTISH REGION HEAD OFFICE
CENTRAL REG. DIV.
-7- SEP 1921
No.

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

Mitral Stenosis

25

To prevent personation the Medical Officer is requested to identify the soldier before examination as to state of health. This can usually be done by comparison of signature, personal description or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or Offences in the Defaulter Sheets, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the present state of health of the Pensioner above named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned in the enclosed envelope, to—

THE REGIONAL DIRECTOR,

487.

1—Are you satisfied that the man before you is the soldier referred to in Discharge Documents sent herewith?

Yp

Mitral Stenosis

2—The present state of the Disability or Disabilities shown on page one of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

- (a) Pain in left chest
- (b) Wt. in J+B. 145 lbs. Gen. Cond. good.
Complexion healthy. No ascites. Tongue clean
Heart more irregular C. irregular mitral stenosis
irregular diffuse. transverse cardiac dilation increased
Septal bulge in mitral area. Arteries normal at
left hand system about 4.4 mm -
Date 10 5 168. 84 irregular apical tachycardia
trastion on examination. E. T. good.

3-(i) Is the Disability in a final stationary condition? *no*

(ii) If not, is re-examination advised, at the expiration of 6 months *no*.....

12 months *no*.....

More than a year *no*.....

4—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability shown on p. 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

N.B.—Degrees of disablement should be expressed in one of the following percentages:—100, 90, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil. (Vide Instructions to Pensions Boards.)

30 % (Shirk)

5—If this is a case of aggravation by service of a disability which existed prior to entry, has the effect of the aggravation now passed away?

no.

6—Does the man require the constant attendance of another person in his home (other than skilled nursing)?

no

7—If there is any disability present other than those recorded on the man's documents as existing on discharge or discovered at any later examination, or if there is any disability now claimed or discovered to be causing disablement which was recorded as attributable to or aggravated by service in the War, but as not causing disablement at the time of discharge or discovery, state:

(i) The nature and condition of each disability, giving (a) the man's complaints (b) the symptoms and physical signs, and (c) the effect of the disability on function.

no

(ii) State whether the disability is—

(a) In a final stationary condition.

(b) If not, how soon re-examination is advised in respect of this further disability?

(iii) State the degree of disablement it would entail if there were no other disability.

(iv) State:—

(a) Whether or not it is attributable to or aggravated by service in the War.

(b) And if the disability is one aggravated by service the degree of disablement caused by it at the time of enlistment.

(v) State the degree of disablement caused by the further disability* and the already accepted disability combined.

* Only attributable or aggravated disabilities to be taken into account.

Signatures—

[Signature] Chairman.

Walter J. Brown
[Signature] Members.

Address



Date

Name and Address of Pensioner.	Corps or Regiment from which Discharged.	Date of Discharge.	Chelsea or Regional No.
Staffey Thomas	Royal Newfoundland Regimental No. Plt. 1038		

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

Mitral Stenosis

P
28

To prevent personation the Medical Officer is requested to identify the soldier before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheets, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the present state of health of the Pensioner above named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned, in the enclosed envelope, to—

THE REGIONAL DIRECTOR.

.....REGION.

W of P. HQ.
Edinburgh
1/2/16

1.—Are you satisfied that the man before you is the soldier referred to in Discharge Documents sent herewith?

Yes

Mitral Stenosis

2.—The present state of the Disability or Disabilities shown on page 1 of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

- (a) Pains in region of heart + breathlessness
- (b) weight in boots + trousers 147 lb
complexion healthy, no anaemia
Heart: maximal impulse in 6th interspace outside
nipple line, impulse diffuse, transverse cardiac
diameter $\frac{3}{4}$ " beyond nipple line, presystolic bruit
mitral area
Pulse 72. 120 72 regular
- (c) slight breathlessness on exertion
exercise tolerances good.

3.— Is the Disability in a final stationary condition? *no*

(ii) If not, is re-examination advised, at the expiration of 6 months *no*

12 months *yes*

More than a year *NA*

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability shown on p. 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

N.B.—Degrees of disablement should be expressed in one of the following percentages:—100, 90, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil. (Vide Instructions to Pensions Boards.)

30% thirty

5.—If this is a case of the aggravation by service of a disability which existed prior to entry, has the effect of the aggravation now passed away?

NA

6.—Does the man require the constant attendance of another person in his home (other than skilled nursing)?

no

7.—If there is any disability present other than those recorded on the man's documents as existing on discharge or discovered at any later examination, or if there is any disability now claimed or discovered to be causing disablement which was recorded as attributable to or aggravated by service in the War, but as not causing disablement at the time of discharge or discovery, state:

(i) The nature and condition of each disability, giving (a) the man's complaints (b) the symptoms and physical signs, and (c) the effect of the disability on function.

nil

(ii) State whether the disability is —

(a) In a final stationary condition.

(b) If not, how soon re-examination is advised in respect of this further disability?

(iii) State the degree of disablement it would entail if there were no other disability.

(iv) State:—

(a) Whether or not it is attributable to or aggravated by service in the War.

(b) And if the disability is one aggravated by service the degree of disablement caused by it at the time of enlistment.

(v) State the degree of disablement caused by the further disability* and the already accepted disability combined.

* Only attributable or aggravated disabilities to be taken into account.

Signatures—

.....	<i>C. B. Syddall</i>	.....	Chairman.
Address	<i>A. F. Miesner</i>	} Members.	
Date	<i>J. Allan Thom</i>		

**MINISTRY OF PENSIONS
MEDICAL BOARDS
AYR AREA
BOARD**
18 AUG 1920
AYR.

26 Public Street
Ayr

Army Form 'B. 178A

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered ~~an~~ ^{an} injury to his health since his entry into military service or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve

- 1. Unit and Corps... Royal Newfoundland.....
- 2. Regt. No. 1088 3. Rank... Pte.....
- 4. Name Haffey Thomas
(Surname) (Christian Names)
- 5. Age last birthday... 23.....
- 6. Posted for duty on 16-1-15 at Newfoundland
in category (or grade)... A.I......
- 7. Former Trade or Occupation } Seaman Steer
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regt. Nos.
- 8. If the disability is an injury was it caused
(a) in action na (b) on field service na
(c) on duty (d) off duty?
- 9. If a Court of Inquiry was held on an injury state:—
(a) When n - a
(b) Where
(c) Opinion of Court
(d) Particulars of Pension or Gratuity (if any)

Note.—The foregoing particulars are to be filled in and A.F.B. 179 n (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

- 10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
- 11. Date of origin of disability.
- 12. Place of origin of disability.
- 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

Treated in Hazeley Down Hospital and discharged from convalescent Hospital for employment old Dysentery contracted in Dardanelles now cured

NO. OF PENSIONS K.O.
SCOTTISH REGIMENT 16
EDINBURGH
1-2-15

14. State whether the disabilities are
- | | | |
|--|---------------------------|-------------------|
| (i.) Service during the present war | (a) attributable to | (b) aggravated by |
| (ii.) Previous active service | Active Services condition | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. | H.A. | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it?

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

Rapidly out of breath after slight exertion systolic br bruit right apex.

*Complexion pale on left side of cheek, dentures of teeth on right side
 Height 146 lbs in trousers shorts - Complexion healthy*

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Repatriation

Note—(b) is only applicable to soldiers invaded at Foreign Stations.

J. ST. P. KNIGHT, CAPT. R.E.M.L. Regt

Station

Medical Officer in charge of case.

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

OPINION OF THE MEDICAL BOARD.

QUESTIONS.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being deceased, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. State whether the disabilities are:—

	YES	..	..	(a) Attributable to	(b) Aggravated by
(i.) Service during the present war	YES	..	..	.....	.....
(ii.) Previous active service
(iii.) Climate in pre-war service
(iv.) Ordinary military service before the war
(v.) Serious negligence or misconduct on the part of the soldier

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

Exposure & infection.....

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) ... is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as G.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).

40% for 6 months.

(b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement

OR

(b) In what other grade do the Board place him?

(c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form ~~R-179c~~ *R/36700*

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station ...	<u>St. John's</u>	.....	<u>N.S. Fraser.</u>	} President or Chairman.
Date	<u>Feb. 20th., 1919.</u>	.....	<u>J.S. Tait.</u>	
			<u>L. Paterson, Major</u>	} Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station

Date

Officer in charge, Central Hospital.

} Only applicable in case of Patients in Hospitals.

OR

Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T).)

Station

Date

O.C. Discharge Centre.

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award _____

Awards Reference No. 15757/4 P. 6 (MSIA)Surname HAFLEYChristian Names J.Ship, Corps, or Regt. from which discharged R. Newfoundland Regt. Official or Regtl. Number } 1038

Date of discharge _____

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF— (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<i>Mitral Stenosis</i>		<i>P. 28.</i>

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to—

THE REGIONAL DIRECTOR,
MINISTRY OF PENSIONS,

1.—Are you satisfied that the man before you is the Seaman or Soldier referred to in Discharge Documents sent herewith? (See instructions on page 1.)

Yes

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving:—

(a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

(a) Pain in chest. Shortness of breath.

(b) General condition good. No anaemia. Ht in B & T. 155 lbs.
 Head. A B in ^{neck.} 6th intercostal - ~~7th~~ ^{4th} ~~5th~~ ^{6th} ~~7th~~ ^{8th} ~~9th~~ ^{10th} ~~11th~~ ^{12th} ~~13th~~ ^{14th} ~~15th~~ ^{16th} ~~17th~~ ^{18th} ~~19th~~ ^{20th} ~~21st~~ ^{22nd} ~~23rd~~ ^{24th} ~~25th~~ ^{26th} ~~27th~~ ^{28th} ~~29th~~ ^{30th} ~~31st~~ ^{32nd} ~~33rd~~ ^{34th} ~~35th~~ ^{36th} ~~37th~~ ^{38th} ~~39th~~ ^{40th} ~~41st~~ ^{42nd} ~~43rd~~ ^{44th} ~~45th~~ ^{46th} ~~47th~~ ^{48th} ~~49th~~ ^{50th} ~~51st~~ ^{52nd} ~~53rd~~ ^{54th} ~~55th~~ ^{56th} ~~57th~~ ^{58th} ~~59th~~ ^{60th} ~~61st~~ ^{62nd} ~~63rd~~ ^{64th} ~~65th~~ ^{66th} ~~67th~~ ^{68th} ~~69th~~ ^{70th} ~~71st~~ ^{72nd} ~~73rd~~ ^{74th} ~~75th~~ ^{76th} ~~77th~~ ^{78th} ~~79th~~ ^{80th} ~~81st~~ ^{82nd} ~~83rd~~ ^{84th} ~~85th~~ ^{86th} ~~87th~~ ^{88th} ~~89th~~ ^{90th} ~~91st~~ ^{92nd} ~~93rd~~ ^{94th} ~~95th~~ ^{96th} ~~97th~~ ^{98th} ~~99th~~ ^{100th}

Lungs normal. Arteries & abdomen normal.
 Pulse 108/140/100 some dyspnea.

(c) Mitral stenosis - Cardiac Enlargement
 fair exercise tolerance

3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? no

(ii) If not, is re-examination advised, at the expiration of 6 months? no

12 months? yes

More than a year? N.A.

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
50%	— —	— —	50% (prop.)

(With regard to disabilities assessed at under 20 %, See M.P.M.S.D. 57 Supplement 3D).

Has the man been informed of his Assessment? no

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

NA.

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

NA.

7.—If the man requires the constant attendance of another person in his home (other than skilled nursing) state whether a separate report has been rendered on M.P.A. 36 C.A.

NA.



Signatures— *W. Lutton-Pratt* Chairman.

Place of Board *Gluegou.*

W. Bruce Lawson.

Date *23. X. 25*

Members.

FORM OF MEDICAL REPORT BY RE-SURVEY BOARD.

Date of Expiry of Current Award _____

Awards Reference No. 15757/4 P-6 (M.S.I.A)Surname HAFFEYChristian Names TShip, Corps, or Regt. }
from which discharged } R. Newfoundland Regt.Official or Regtl. }
Number } 1038

Date of discharge _____

DISABILITY OR DISABILITIES IN RESPECT OF WHICH PENSION WAS GRANTED.

DISABILITY	PENSION GRANTED IN RESPECT OF:- (a) ATTRIBUTABILITY or (b) AGGRAVATION (To be completed in Awards)	DISABILITY CODE NUMBER (To be completed by Board)
<i>Myocardial Stenosis</i>		<i>P. 28</i>

To prevent personation the Medical Officer is requested to identify the man before examination as to state of health. This can usually be done by comparison of signature, personal description, or marks on body. In cases of doubt questions should be asked, based on the records of service, the answers to which would not be known to a personator, such as the nature of illness mentioned in the Medical History Sheet, or offences in the Defaulter Sheet, &c., for which purpose the whole of his Discharge Documents are annexed.

The Minister of Pensions requires a Medical Report on the state of health of the Pensioner above-named, to assist him in determining on his claim to a further grant of Pension. The paper when completed, together with the Discharge Documents, to be returned to—

THE REGIONAL DIRECTOR,
MINISTRY OF PENSIONS,

1.—Are you satisfied that the man before you is the Seaman or Soldier referred to in Discharge Documents sent herewith? (See instructions on page 1.)

Yes

2.—Describe the present state of the disability or disabilities shown on page 1 of this form giving:—

- (a) Man's complaints. (b) Symptoms and Physical Signs. (c) Effect of disability or disabilities on function.

Also state (d) Whether any change of diagnosis is involved.

a Pain in chest: Shortness of breath

b General Condition good No Anaemia
Wt in best & tremors 155 lbs.

Heart A B in 6 interspace Dulcified supple heard
from apex Mmum & S Mmum (? presystolic) heard
at apex more pronounced when recumbent.

Lungs Normal. Urin & Abdomen Normal

Pulse 108/140/100 Some dyspnoea

c Mitral Stenosis

↳ Cardiac enlargement fair
Exercise tolerance

3.—(i) Is the condition of the Disability, or the Disabilities together, final and stationary? Yes

(ii) If not, is re-examination advised, at the expiration of 6 months? No

12 months? Yes

More than a year? No

4.—What is the degree of disablement at which, in the Board's opinion, he should be assessed in respect of the disability or disabilities shown on page 1, independent of Hospital or other treatment? (Assessment to be stated in words as well as figures.)

DISABILITIES			COMBINED ASSESSMENT FOR ALL DISABILITIES
1	2	3	
50%			50% (74%)

(With regard to disabilities assessed at under 20%, See M.P.M.S.D. 57 Supplement 3D).

Has the man been informed of his Assessment? Yes

(4)

5.—If this case has hitherto been accepted by the Ministry as a case of aggravation by service during the Great War, have the effects of aggravation passed away?

Na

6.—If the above Assessments have been arrived at after discounting any "other condition" (e.g. personal habits, misconduct, etc.) the facts should be fully stated and the method of arriving at the Assessment indicated. (See M.P.M.S.D. 57 Supplement 5).

Na

Approved: _____ % for _____ Months
by _____
Medical Adviser

7.—If the man requires the constant attendance of another person in his home (other than skilled nursing) state whether a separate report has been rendered on M.P.A. 36 C.A.

Na

Signatures

W. Latta Pratt

Chairman.

W. Bruce Lawson

Members.

Place of Board

Glasgow

Date

23 X 25

certified true copy

26 Rables Street
Alfred Campbell
Army Form B. 179A

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

- Unit and Corps. *Royal Newfoundland*
- Regtl. No. *1038*
- Rank. *Plt*
- Name *Haffey Thomas*
(Surname) (Christian Name)
- Age last birthday. *23*
- Posted for duty on. *16.1.15* at *Newfoundland*
in category (or grade) *A.I.*
- If the disability is an injury was it caused
(a) in action (b) on field service *h.a.*
(c) on duty (d) off duty?
- If a Court of Inquiry was held on an injury state:—
(a) When *h.a.*
(b) Where
(c) Opinion of Court
(d) Particulars of Pension or Gratuity (if any)

7. Former Trade or Occupation } *Yeomanster*
7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. No. *h.a.*
(b) Date of Discharge *h.a.*
(c) Cause of Discharge *h.a.*



NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 s (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

- If brought forward for ~~invaliding~~ *exam.*, disability in respect of which ~~invaliding~~ *exam.* is proposed to be stated here. (Other disabilities should be reported upon an answer to question No. 19). If no disability enter "nil." *P 28*
Central Stenosis.
- Date of origin of disability. *1918*
- Place of origin of disability. *United Kingdom*
- Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet—beginning on the case and in other relevant official documents.
Man states, He suffered from enteric fever in Gallipoli and Dysentery in France. No documents available.



1/2/1938

14. State whether the disabilities are
- | | | |
|--|---------------------|--------------------|
| (i.) Service during the present war | (a) attributable to | (b) aggravated by. |
| (ii.) Previous active service | ..... | ..... |
| (iii.) Climate in pre-war service | ..... | ..... |
| (iv.) Ordinary military service before the war | ..... | ..... |
| (v.) Serious negligence or misconduct on the man's part. | ..... | ..... |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it?

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact positions should be stated.

15. What is his present condition? *Complaint - Pain in left side of chest*
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.) Examination Wt. 146 lbs in trousers & boots
Complexion healthy, Maximal impulse in 6th interspace in nipple line, impulse diffuse, thrill on palpation.
Cardiac dullness increased to just beyond middle line.
Auscultatory bruit heard in initial aorta. Pulse, 84. Medium tension.
16. Was an operation performed? If so, when and what was its nature? *No.*
17. If not, was an operation advised and declined? *No.*
18. *In the case of loss or decay of teeth.—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *No. A.*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? *hil.*

Function
Slight breathlessness on exertion. Exercise tolerance good.

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations

Station

Date

Medical Officer in charge of case.

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

(b) The present condition thereof.

*Initial Stenosis.
as in 15.*

22. State whether the disabilities are:—

(i) Service during the present war

(ii.) Previous active service.. ..

(iii.) Climate in pre-war service

(iv.) Ordinary military service before the war ..

(v.) Serious negligence or misconduct on the part of the soldier

(a) Attributable to

(b) Aggravated by

.....	<i>Yes</i>
.....	}	<i>No</i>
.....		
.....		
.....		

Give details:

*Service Conditions
Enteric & dysentery.*

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

No *No*

23. Is the disability in a final stationary condition? If not

(a) How long is the present degree of disability likely to last?

No
Six months.

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

No.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

30% (Thirty percent.)

h. a.

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

no

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

already demobilised

Opinion of Military Member is case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

Yes

28. Is treatment being recommended on Army Form B-1700?

A-C-B no

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

no

MEDICAL BOARDS.
AYR AREA
BOARD No. 1
10 NOV 1919
AYR

Signature: (Sgd.)
G. Douglas
Walter G. Brown
G. W. Dwyer

President or Chairman.
Members.

Station

Date

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station

Date

Officer in charge, Central Hospital.

Only applicable in case of Patients in Hospitals.

OR
Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T).)

Station

Date

O.C. Discharge Centre.

MINISTRY OF PENSIONS.

Ref. No.

1/2/338

Date

13/11/19

BRANCH MEMORANDUM.

FROM "M" BRANCH.

To

Signature of Award Officer

MEDICAL BRANCH.

Name

Haffey

Regiment

New Zealand

The accompanying papers are forwarded to the Medical Branch for favour of advice on the following points:—

QUESTION.

(Delete any item which is not applicable.)

(1) Is the disability attributable to service in the present War ?

(2) Has the disability been aggravated by service in the present War ?

(3) At what degree of disablement should the man be assessed at present ?

(4) Is the disability permanent or temporary ? If permanent, is it in its final stationary condition ?

(5) If the disability was aggravated by service, have the effects of the aggravation passed away ?

(6)

For documents, please

(7)

*H. Kennedy
for Cms.*

(8)

12/11/19

REPLY.

Melanie Dyerline *Head -*
Unidentified *Services of*
Documents not available. *Malaysia &*
Department.

30 per cent. for *6* months.

Signature of Medical Officer

H. Kennedy

Date

18/11/19

for Cms.

The Board of Pension Commissioners for Newfoundland

Replying please mention Date and

No. _____

All communications should be addressed to the
DIRECTOR OF MEDICAL SERVICES,
DEPARTMENT OF MILITIA, N.F.L.D.

St. John's, Newfoundland.
October 4th., 1919.

To:—

From:—The Board of Pension Commissioners for Newfoundland,
St. John's, Newfoundland.

Sir:—

The Board of Pension Commissioners requiring a report on the Pensioner named in the margin, kindly notify him to appear before you AS SOON AS POSSIBLE.

Name

1038, Pte. Thomas Haffey You will find a form on which to record your examinations on pages 2 and 3.

Pensioner will be notified to appear before you on whatever date you will find convenient.

Address

26 Peebles, Street,
Syr, Scotland.

If another Registered Medical Practitioner is in your neighbourhood, or likely to be there during the week, it is preferable that you should both examine the Pensioner at the same time, and both sign report.

The form when fully completed, signed and dated, is to be returned by the president of the Board of Medical Examiners to the undersigned.

If the pensioner neglects to present himself for examination within a reasonable period, you will please telegraph the fact to the undersigned.

If it is necessary for the pensioner to travel, in order to present himself for examination, bills for Transport should be certified by you and forwarded to the undersigned.

The fee laid down by the Board of Pension Commissioners for such examination is ~~One dollar (\$1.00)~~ for each Doctor for each examination.

(\$3.00)

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

THE SECRETARY
BOARD OF PENSION COMMISSIONERS FOR N.F.L.D.

DIRECTOR OF MEDICAL SERVICES

TO THE MEDICAL BOARD, OR MEDICAL EXAMINER

The Board of Pension Commissioners for Newfoundland requires a report on the present condition of the pensioner named on page one of this form.

The object of the report is to enable the Board to decide the question of continuance of pension.

The identity of the pensioner should be established, to prevent personation; for that purpose the description of the pensioner follows:

(If incomplete or imperfect, amplification or correction is required)

DESCRIPTION OF PENSIONER:—

Apparent age.....24.....Height.....5' 9".....Colour of Eyes: BROWN
Complexion RUDDY.....COLOUR OF HAIR: BLACK.....Marks of Identification

A description of the disabling condition of the pensioner, as given by the Board of Medical Officers held on FEB. 20th 1919, and other necessary information, follows:—

Condition of Pensioner:—

RAPIDLY OUT OF BREATH AFTER SLIGHT EXERTION. SYSTOLIC BRUIT
RIGHT APEX. PULSE 120.

DISABILITY: DISORDERED ACTION HEART.

Signature (or mark) of the pensioner, for identification only, to be procured at the time of examination, and placed on page 4.

N.B.—The description of the pensioner should record all marks or peculiarities by which he may be identified. The description of the condition of the pensioner, history, &c. as given above contains the essential information available to assist the Medical Board in making its report.

The whole purpose of the Medical Report on page 3 is to give an accurate description of the condition of the pensioner.

PENSIONERS MUST NOT BE INFORMED OF THE EXTENT AT WHICH THEIR
DISABILITY IS ESTIMATED

I hereby acknowledge the receipt of the *World War and Victory Medals.*

Date October 5th 1921

Regtl. No. 1038

Rank Private

Signature Thomas Haffey

DUPLICATE

N.F. P/41.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 565/73/1 - C.R. 1038

OFFICE OF THE
HIGH COMMISSIONER
FOR NEWFOUNDLAND,
PAY & RECORD OFFICE.
55, VICTORIA STREET,
LONDON, S.W. 1.
11th. March, 1920. 121

To The Hon
The Colonial Secretary,
St John's,
Newfoundland.

SUBJECT:
Ex. 1038. PTE. THOMAS. HAFFEY.

REPLY

Reference Nos.

Dated March 29th. 1920 101

Exchange of telegrams
confirmed, please,-

Noted, please

(1)
"Military, St John's,
"Despatched 5/3/20 (29)
"With reference to your letter 14th
"February-telegraph date-from which-
"1038-Haffey-should be paid-by-this-
"office-haffey-claims-payments-
"should commence on-September 15th-
"RURALITY"

Lieut.-Col.
Chief Staff Officer
for Minister of Militia

(2)
"Ruralty, London,
"Received 9/3/20 (31):
"With reference to your telegram
"5th March-Haffey-pay-from-
"September 15th-
"MILITARY"

Pension is being paid
accordingly.

Lt-Col.
Chief Staff Officer (London).

BT/MN

C.R. 1038

Extract from telegram sent to Rurality, London March 8th/20.

In answer to your telegram 5th March Haffey pay from
Sept. 15th.

C.R. 1038

Extract from telegram received from Rurality, London March 5/20.

In answer to your letter Feb. 14th, telegraph date from which 1038 Haffey should be paid by this office. Haffey claims payments should commence Sept. 15th.

C.R.

1038

Extract from telegram from Rurality, London to
Military, St. John's. Dated February 27th 1920.

With reference to your letter September 26th
No. 1038, Haffey.

Department of Militia

MEMORANDUM

No. 283/1341

From

MINISTER OF MILITIA,
ST. JOHN'S,
NEWFOUNDLAND

Feb. 14th. 1920

To

Chief Staff Officer
Newfoundland Contingent
C/o Officer of the High
Commissioner for Newfoundland
58 Victoria Street
London S.W.(1)

SUBJECT:

1341 Thomas Haffey

1346.

REPLY

Dated 26th. October, 1920.

Please return ORIGINAL and retain DUPLICATE

Forwarded herewith is copy of letter from the Board of Pension Commissioners directing that pension be paid to the above noted man at the rate of 30% equal to \$15.00 per month for twelve months, at the expiration of which period he is to be re-boarded.

Obverse noted.

The Board of Pension Commissioners have been communicated with direct.

W. P. Rudell

Lieut.-Col.,

Chief Staff Officer.

W. Hutchings
Sov Secretary.

WH/MN.

NEWFOUNDLAND CONTINGENT.

f. Nos IN	487
Rec'd	-5 MAR 1920
Ans'd	
Ext. Nes. UU1	
APR 1920	
BRANCH	
Comd.	
P. & C.	
S. & C.	
S. & E.	
S. & S.	

C.R. 1038

Jan. 16th. 1920

Secretary

Board of Pension Commissioners

Sir:- 1038, Private Thomas Haffey

Forwarded herewith is copy of memorandum received from the Chief Staff Officer, London, together with Report of Medical Board held on the above mentioned at Ayr, 10/11/19, for your information and consideration, please.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.

C.R. 1038

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1038 Name Thomas Haffey

Witness. Margaret Haffey

Date 13th January 1920

Place 26 Dalrymple St. Glasgow Scotland

Department of Militia

MEMORANDUM

C.R. 1038

No. 218/1038

12702/P&A

From

MINISTER OF MILITIA,
ST. JOHN'S,
NEWFOUNDLAND

Sept. 26th,

1919

To

Chief Staff Officer
Pay & Record Office
Newfoundland contingent
58 Victoria Street

FM/FK.

SUBJECT:

1038, Pte. Thomas Haffey
26 Peebles Street
Ayr, Scotland

REPLY

Dated 20th December 1919

Please return ORIGINAL and retain DUPLICATE

I confirm my telegram of
25th inst. as follows:-

"Despatched 25/9/19 (No971)

"Synoptical, London

"Please arrange to have 1038 Haffey
"26 Peebles Street, Ayr reboarded"

Military

Forwarded herewith is copy
of medical document of this man,
and also copy of the Board of Pension
Commissioners Letter, please.

Reference obverse, 218/
1038, 26/9/19. Report of Medical
Board held on the above named
pensioner at Ayr, 10/11/19, is
enclosed for consideration of the
Board of Pension Commissioners.

Meanwhile payments of
£10.00 per month are being made
by this office, pending further
instructions, which please transmit
as early as possible.

H. J. ...
Lt.-Col,
Chief Staff Officer (London).

A. E. ...

Minister of Militia.

NEWFOUNDLAND GOVERNMENT
RECORDS OFFICE

5794
16 OCT 1919
1919
16 OCT 1919

C.R. 1038

Extract from telegram from Military to Syh., London
dated Sept. 26⁶th 1919.

PLEASE ARRANGE TO HAVE 1038 HAPPEY
26, PEEBLES STREET, AYR, REBOARDED.

C.R. 1038

Sept. 26th, 1919

Secretary

Board of Pension Commissioners

Sir:-

No. 1038 Pte. Thomas Haffey

I have the honour to acknowledge receipt of your letter of 25th inst. with attached copy of medical document of the above mentioned, which is being forwarded to the Chief Staff Officer, London with request to have this man reboarded.

I have the honour to be

Sir

Your obedient servant

C.R.B.

Captien

for Chief Staff Officer

THE BOARD OF
PENSION COMMISSIONERS
FOR NEWFOUNDLAND

Hon. Sir E. T. McGrath, K.B.E.
(President Legislative Council),
Chairman.

Hon. J. A. Clift, K.C., C.B.E.,
Major W. H. Parsons, M.C.,
R.A.M.C.



In reply refer to
C.R. 1038

St. John's

Sept. 25th., 1919.

Captain S.G. Byrne, M.C.
Chief Staff Officer,
City.

#1038 Pte. Thomas Haffey,
26 Peebles Street,
Ayr,
Scotland.

Sir:-

I have the honour to enclose copy of
Medical Document of the above noted, and
to request that you be good enough to make
arrangements with the Pay and Record Office,
London, to have him re-boarded.

I have the honour to be,
Sir,
Your Obedient Servant,

J. J. O'Connell
Captain,
For Secy.

ENCLOSURE.

JBO'R/GEC.

Telephone :
VICTORIA 4923 & 4.

NEWFOUNDLAND CONTINGENT.

Communications to be addressed to the
CHIEF POSTMASTER & OFFICER I/C. REGIONS.

MEMORANDUM.

No. 11280/659/PrA

1038

From
PAY AND RECORD OFFICE,
55, VICTORIA STREET,
LONDON, S.W.1.

To
The Minister of Militia,
St. John's,
NEWFOUNDLAND.

FM/PK. 17th September 1919

<p>SUBJECT : 1038 PTE. T. HAFHEY. ROYAL NEWFOUNDLAND REGIMENT. Reference Nos.</p>	<p>REPLY Dated Oct 2nd, 1919 Please return <u>ORIGINAL</u> and retain <u>DUPLICATE.</u></p>
<p>Exchange of telegrams is confirmed:-</p> <p>(1). Received 2/9/19 (310). "Synoptical, London. "Following from Pension Commissioners- begins- "1038-Haffey-proceeded to-United Kingdom-have you his address. MILITARY.</p> <p>(2). Despatched 8/9/19 (335). "Military, St. John's. "Reference your telegram "1st September-1038-Haffey- "address unknown. SYNOPTICAL. We have no record of Haffey's return to this country. Should he write to this office later you will be advised by telegram, please.</p> <p><i>H. C. Minnie</i> Major. Chief Staff Officer (London).</p>	<p>See our No. 218/1038 of Sept. 26th.</p> <p>Minister of Militia.</p>

C.R. 1038

Extract from telegram received from Synoptical, London
Sept. 8th, 1919.

In answer your telegram Sept 1st 1038#
Haffey address unknown.

C.R. 1038

Extract from telegram from Mil. to Syn. dated Sept. 1st. 1919.

Following from Pension Commissioners begins 1038 Thomas
Haffey preceded to U. K. have you his address ends.

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 Star.

C.R. 1038

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

No.

Name.....

his
J. X. Hafey
mark

Date...*10/4/19..*

Place...*Dept. of Militia*

H. G. Jones

Please sign and return to Dept. of Militia.

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

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

W. J. Readell

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,

St. John's.

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

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

from *Jan. 18th* 1915 to *March 14th* 1919.

(Date) *Jan. 18th* (MO) *1915* (Rank) *Lt. Col.* (Time) *3^{1/2} yrs.*.....

(Place) *Russia*.....

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

C.R. 1038

Extract from Daily Orders part II, Depot St. John's
date March 19th., 1919.

The discharge of the undernoted on demobilization
has been **CONFIRMED** by Officer i/c Records on 14-3-19.

#1038 Pte. Thos. Haffey

C.R. 1038

Extract from Preliminary Report of Medical Board held on Thursday
Feb. 20th 1919.

1038 PTE. T. Haffey.

Recommended Discharge as Permanently unfit.

C.R. 1038

Extract from Daily Orders: Part 11 Unit The Royal Wfld.
Regt. St. John's, 1 1-2-19.

The undernoted returned from Overseas and reported to
Depot 7-2-19.

Repatriated on F.F. B179.

1038 Pte. Thos. Haffey.

C.R. 1038

Extract from telegram from Syn. to Mil. dated Feb. 3rd. 1919.

Cable five Corsican

Embarked at Liverpool Jan. 30th., 1919.

#Wife of 1038 Hafey.

C.R. 1038

Extract from Nominal Roll embarked By. U.S. Corsican
Jan. 30th, 1919.

1038 Haffey.

C.R. 1038

Extract from War Office, List. No. H. A. 17990

DIS. TO BASE DTLS. EX 3 CON. DEP. LE TREPORT 30 DEC/1918

1038 Pte. T. Haffey.

G.S.W. HEAD AND R. HAND.

C.R. 1038

Extract from Casualties received from Pay & Record
Office, London, Oct. 7th, 1918.

1038 Pte. T. Hafey,

Was discharged from Croynhill Barracks Hospital
Plymouth, on 4-10-18, and ordered to report direct
to the Depot, Winchester.

MM.

C.R. 1038

Extract from Casualties received from P.&.R.O. London.
22nd, Aug'18.

1038 Pte. T. Haffey.

Was admitted to Military Convalescent Hospital, Crown-
hill Barracks, Plymouth, on 19/8/18, ex Military Hospital
Hazley Down.
Authority... Officer of i/c Records, Mfld. Contgt.

C.R. 1038

Extract from Daily Orderd Part 2, by Lt. Col. R.A. Berners, D.S.O.
9-5-18.

The undermentioned is hereby granted permission to his past
marriage. He was married to Miss Margaret McMillian, 26 Peeble
St. with effect from 27th July 1917.

1038 Pte. F. Heffey.

Dear

Mr. Hafey:-

I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that

No. 1038 Private Thomas P. Hafey is at Addington Park War Hospital suffering from dysentery

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

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

Yours faithfully,

Mr. R. Hafey,

305 Water Street, West,

CITY

J. R. Bennett
Minister of Militia.

C.R. 1038

Extract from Casualties received from Pay and Record
Office London, dated Mar 22nd, 1918.

1638. Pte. ~~W. H. H. H. H.~~ Hefey.

Admitted to O.C. Dysentery Hospital, Barton on Sea.
from Addington War Hospital. 15/3/18.

C.R. 1038

Extract from CASUALTIES Expeditionary Force - France. Dated Mar 1 1918.

Extract from H.A. 19740 (Colonial) & H.A. 19854 (Colonial.)

Extract from No. H.A. 19740 (Colonial.)

O.C. 14 STY. H. BOULOGNE reports:-

1038 Pte. T. Haffey

1 Wfld..... Susp. Dysentery.....Adm. 13 Feb. 18.

Extract of Casus; received from Pay & Record Office,
London, dated March 1st, 1918.

Extracts from H.A. 19740 (Colonial) & H.A. 19854
(Colonial).

#1038 Pte. T. Heffey. ✓

Susp. Dysentery. O.C. 14 Sty.H. Boulogne reports
Admitted 13/2/18.

C.R. 1038

Extract of Casualties received from Pay & Record
Office, London, dated January 7, 1918.

#1038 Pte. T. Haffey. ✓

Gunshot wound Head and Right Hand.

Dis. to Base Dtls. as 3 Con.Dep. Le Treport 30 Dec/17.

C.R. 1038.

Extract of Casualties received from Pay & Record
Office, London, dated December 25, 1917.

#1038 Pte. T. Haffey. ✓

Gunshot wound Head and Right Hand.
Admitted 3 Con. Dep. Le Treport ex another Hospital
December 17, 1917.

C.R. 1038

Extract from War Office List. NO. H.A. 17592.

ADMITTED 3 CON. DEP. LE TREPORT EX ANOTHER
H. 17 DEC. 1917.

1038
#1005 Pte. T. Haffey.

G.S.W. Head and Hands

BC.

C.R. 1038

Extract of Casualties received from Pay & Record
Office, London, dated December 16, 1917.

#1038 Pte. T.P.Hafey. ✓

Wounded 3/12/17.

C.R. 1038

1038 Pte. Thomas P. Hafey. ✓

Extract of Casualty list received December 13, 1917.

Gunshot Wound. Right Hand.

At 47th General Hospital Le Treport December 5.

December 13, 1917.

Dear

Sir.

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 1038, Private Thomas P. Hafey, was Dec. 5th at the 47th General Hospital, LeTreport, suffering from gunshot wound in the right hand.

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

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

Yours faithfully,

Colonial Secretary.

Mr. Richard Hafey,
315 Water St. W.

C.R. 1038

Extract of Casualties received from War & Record Office,
London, dated December 10, 1917.

The following Casualty in the 1/1st Bn. Regt. with the
British Expeditionary Force, is reported under various
dates:-

#1038 Pte. T.P. Hafey.

Wounded.

C.R. 1038

Extract ed Nominal Roll Draft.(all Ranks) to 1st
Bn. B.E.F. Embarked ~~Polkestone~~ Polkestone.

1038

~~1898~~ Pte. T.B.Haffey.

5-8-17.

NEWFOUNDLAND CONTINGENT.

The following man has been transferred from the third London Military Hospital, Wandsworth S.W. to Holborn Military Hospital Mitchman
22/3/17.

1038, Pte T. Hafey.

C.R. 1038

Extract from Casualties received from P.&R. Office London,

March, 7th, 1917.

Wandsworth.

1038 Hafey.

G.

7th March, 1917.

Dear Sir,

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

No. 1038, Private Thomas P. Hafey, who was previously reported at Stretat, February 24th, suffering from Gunshot Wound in the Hand, slight, has now been admitted to Wandsworth.

Yours faithfully,

Colonial Secretary.

Mr. Richard Hafey,
305 Water Street West.

G.

10

6th March, 1917.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1038, Private Thos. P. Hafey, was at 1st General Hospital, Etretat, February 24th, suffering from Gunshot wound in the hand - slight.

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

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

Yours faithfully,

Mr. Richard Hafey,
50 Pleasant Street.

Colonial Secretary.

C.R. 1038

Extract from Casualties Received from P.&R. Office London,

March 6th, 1917.

1038 Hafey.

First Central Hospital, Etretat, Feb. 24th, Gunshot wound
hand slight.

APR 12 1916

Dear

Sir,

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

No. 1038, Private T. P. Hafey, who was previously reported at Netley, November 20th, suffering from pyrexia, is now fit for light duty and was granted furlough March 7th.

This information has been received by mail.

Yours faithfully,

Mr. Richard Hafey,
50 Pleasant St.

Colonial Secretary.

December 15, 1915

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1038, Private Thomas P. Hafey, who was previously reported as having arrived in England suffering from pyrexia, was admitted to Royal Victoria Hospital, Netley, on November 20th.

This information has been received by mail.

Yours faithfully,

Mr. Richard Hafey,
50 Pleasant Street.

Colonial Secretary.

(10) ✓

M

December 2, 1915.

Dear Sir,

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

No. 1038, Private Thomas P. Hafey, who was previously reported arrived in England sick (no particulars), is now reported suffering from Pyrexia.

This information was received by mail.

Yours faithfully,

Colonial Secretary

Mr. Richard Hafey,
50 Pleasant St.
City.

293



SICK & WOUNDED N.C.O.s, & MEN OF THE MEDITERRANEAN EXPEDITIONARY FORCE

LIST NO. H. 3426

YORK RECORD OFFICE

TRANSFERRED TO ENGLAND EX HOSPITAL IN MALTA PER H.S. "MOREA" 13 NOV. 15.

18372	Pte. Johnson, F.	8/attd 8/Northd Fus.	B. Vd. Head.
4631	Lee, J.	8/Northd Fus.	Dysentery.
12170	Russell, S. C.	-do-	Gastritis.
18100	Lumsden, R.	9/W. Yorks. R.	Enteric.
11536	L/C. Portwood, W.	-do-	Dysentery.
6991	Pte. Pragnall, J.	6/E. Yorks. R.	-do-
18203	L/C. Bde, J.	Yorks. R. 3/	Melancholia.
10744	Cpl. Dryden, W. H.	6/Yorks. R.	B. I. Thigh.
18059	Pte. Matthews, J.	11/attd	Dysentery.
15395	Flynn, D.	6/Yorks. R.	-do-
		3/attd	
		8/Duke of Well. R.	
15503	Bronley, A.	8/ -do-	G. S. W. L. Feet.
15563	Donoghue, R. H.	-do-	G. S. W. R. Thigh.
15854	L/C. Whitham, L. P.	-do-	Diarrhoea.
15561	Pte. Carlyon, W. H.	-do-	G. S. W. Liver.
11037	Dates,	6/Y. & L. R.	BW. Sacum.
114321	L/C. Dennett, A.	-do-	Shrap L. Foot.

LIST NO. H. 3426

WARLEY RECORD OFFICE

TRANSFERRED TO ENGLAND EX HOSPITAL IN MALTA PER H.S. "MOREA" 13 NOV. 15.

989	Pte. Rowe, C.	1/Norf. R.	Enteric.
8563	Cpl. Lodge, A.	1/Essex. R.	BW. Head & Shldr.
20243	Pte. Gadston, J.	-do-	G. S. W. Jaw.
19013	Boughtwood, C.	-do-	Dysentery.
20227	Sumpter, A.	-do-	-do-
1422	Gilbert, A.	-do-	-do-
20041	Worrist, H.	-do-	P. U. O.

LIST NO. H. 3426

NEWFOUNDLAND CONTINGENT

TRANSFERRED TO ENGLAND EX HOSPITAL IN MALTA PER H.S. "MOREA" 13 NOV. 15.

1038	Pte. Heffey, T.	1/Newfoundland. R.	✓ Pyrexia.
	<i>Italy</i>		

C.R. 1038

Extract of Sick and Wounded N.C.O.s and Men of the Mediterranean Expedition
-and Force, NO: H. 3537, dated Nov. 20th. 1915.

1038 Pts. T. Hafey.

1st Newfoundland..... Sick.....Adm. Royal Victoria Hospital
Netley, 20th. Nov. 1915.

✓
H (10)

November 24th, 1915.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1038. Private Thomas Patrick Hafey, has arrived in England sick, but no particulars as to nature of illness have been given.

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

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

Yours faithfully,

J. R. Bennett
Colonial Secretary

Mr. Richard Hafey,
50 Pleasant St.
City.

C. 1038

Extract of Communication from Netley Hospital to Officer i/c Records
Newfoundland Forces, dated Nov. 23rd. 1915:-

The undermentioned man arrived at this Hospital on 20/11/15 ex S.S. "Morea"
Embarked at Egypt.-

(Para. 1103, King's Regulations.)

1038 Pte. T. Halsey.

1st. Newfoundland..... Sick.

C.R. 1038

Copy of Cablegram to governor St. John's ~~fld.~~
from P.&R.O. Nov. 23rd. 1915.

1038, Pte Hafey. ✓

Arrived England Sick.

C.R. 1038

Extract of Sick and Wounded N.C.O.s/ and Men of the Mediterranean Expeditionary Force, NO: H. 3733, dated Nov. 5th. 1915.

1038 Pte. T. Hafey.

1-Newfoundland..... Pyrexia.....Adm. to
Hospital in Malta from H.S. "Nevasa" on 14th. October, 1915.

C.R. 1038

Extract from Nominal Roll of "D" Co. 1st Bn. Mfld. Regt.
Embarked at Devonport for Active Service; 20-8-15.

1038 Pt e. T.B. Haffey.

Disembarked Alexandria 30-8-15 Proceeded to Abbassia,
Cairo, same date Embarked Alexandria for Gallipoli
15-9-15.

C.R. 1038

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

NO. 7. Platoon.

1038 Pte. T.P. Hapey.

C.R. 1038

Thomas P. Hafey was attested for General Service
with the NEWFOUNDLAND REGIMENT on ... Jan. 16th 1915.
Regimental No. 1038 was allotted to Pte Thomas P. Hafey.

AUTHORITY:

Record Officer

Dept. of Militia,
March 25th. 1919.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. B. Griffin & Son, Ltd., Printers, Old Bailey, E.C. 4.
1215, W9940/1118 110m 127440 42 50Form
B. 121
A.

Regiment of

Newfoundland

Number of Sheets

Signature of O. C. Company

J. March
Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	1038	Age on	20 years - months	Teamster	
Joined	Date	Place and Date of Enlistment	St. John's Jan 16 1915	Religion	
Joined	Date	Period of	with Colours 4 1/2 years. with Reserve 3 1/2 years.	Place of Birth	
Joined	Date			St. John's	

Place	Date of Offence	Rank	Case of Discharge	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order discharging with effect	By whom awarded	REMARKS
Edinburgh Castle	3/4/15	Pte	1	Drunk in barracks ^{1038 P}	Pte. Scano	3 days CC	5/4/15	Lt. Col. Burton	SR
do	28/4/15		2	Drunk & making disturbance in barracks	Sgt. Ayle Lieut. Pettit Rowell	5 days CC fined 1/3	24/4/15	Capt. March	SR
Stobz Camp	22/5/15 23/15		3	Absent from church parade Drunk in camp arrested 9.15 pm.	Capt. Edwards Sgt. Greene Pte. Whelan	2 days CC Fined 5/- 7 days CC.	25/5/15 24/15	Capt. March Major Im Drou	F.H.V.
Ross Camp	Apr 26.5.17			absent from take roll call t. 11.30 pm.	Cpl Carter	2 days CC	28.5.17	Capt. March	
				Demobilized	St John's	14 1/19			

To be carried over

The Royal Newfoundland Regiment

1038

DEMOBILIZATION OF

Reg. No. 1038 Rank Plt Name Haffey Thomas
 Date of Enlistment 16.1.15 Address St Johns District St Johns
 Occupation Teacher Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 40% p.l.m.c.
 Passed to Demobilization Officer with following documents—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1.
B 178	W 3494	B 122	Board 1st	" 2.
B 178a	D 400A	B 1915	do 2nd	" 3.
B 179	D 400B	Form L	do 3rd	" 4.
B 179a	D 400C	Form K	do 4th	" 5.
B 179b	B 103	ME 2		" 6.
B 179c	B 120	M 93		

Date 27.2.19 H.M.ews Lick
 for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Thomas Haffey
Card paid out

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with—

(a) Clothing Allowance payable #6.00

(b) Clothing Supplied Joseph & Sons Ltd

Date 28-2-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
at _____ and Release Certificate No. 1281 issued.

Date

28-2-19Asst. Dir. Cpl.
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 14-3-19

Date

14-3-19Asst. Dir. Cpl.
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for.

28-2-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P126	B 268	B 121	N.F. Med.	D.F. 1		
F 178	W 3494	B 122	Board 1st	" 2	1	<u>Final</u>
B 178a	D 400A	B 1915	do 2nd	" 3	2	
B 179	D 400B	Form L	do 3rd	" 4		
B 179a	D 400C	Form K	do 4th	" 5		
B 179b	B 103	ME 2		" 6		
B 179c	B 120	M 93				

Date

1-3-19Asst. Dir. Cpl.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commission

with following additional documents.

Eligible for War Service Gratuity

FEB 28 1919

Date

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

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

Date

March 11/1919Approved
Gen. of Records

Department of Militia

MEMORANDUM

No. 283/1341

From

MINISTER OF MILITIA,
ST. JOHN'S,
NEWFOUNDLAND

Feb. 14th. 1920

To

Chief Staff Officer
Newfoundland Contingent
C/o Officer of the High
Commissioner for Newfoundland
58 Victoria Street
London S.W.(1)

SUBJECT:

1341 Thomas Haffey

REPLY

1346.

Dated 26th. October, 1920.

Please return ORIGINAL and retain DUPLICATE

Forwarded herewith is copy
of letter from the Board of Pension
Commissioners directing that pension
be paid to the above noted man at
the rate of 30% equal to \$15.00 per
month for twelve months, at the expiration
of which period he is to be re-boarded.

W.F. Readell

Lieut.-Col.,
Chief Staff Officer.

Obverse noted.

The Board of Pension Commissioners
have been communicated with direct.

W. H. Hatching
Secretary.

WEH/MH.

F. Nos IN 487 ✓	
Rec'd - 5 MAR 1920	
Amd	
No. Nes. UUI	
ACTED UPON	
SEARCHED	INDEXED
SERIALIZED	FILED
FILED	FILED
FILED	FILED
FILED	FILED
FILED	FILED

C O P Y.

St. John's,

Feb'y. 9th/20

Lt. Col. W.F. Rendell, C.B.E.
Chief Staff Officer,
City.

1341 Thos. Haffey.

Sir:-

I have the honour by direction to request that you instruct the Chief Staff Officer, London, to pay pension in the above mentioned case at the rate of 30% equal to \$15.00 per month for twelve months, at the expiration of which he is to be re-boarded.

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

C.C. OKE,

Asst. Secy.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

OFFICE OF THE
HIGH COMMISSIONER
FOR NEWFOUNDLAND
RAY- & RECORD-OFFICE.

58, VICTORIA STREET,
LONDON, S.W. 1.

11th. March, 1920. 100

No. 563/73/H

To The Hon
The Colonial Secretary,
St John's,
Newfoundland.

SUBJECT:

Ex. 1038. PTE. THOMAS. HAFFEY.

Reference Nos.

Exchange of telegrams
confirmed, please,-

(1)

"Military, St John's,
"Despatches" 5/3/20 (29)
"With reference to your letter 14th
"February-telegraph date-from which-
"1038-Haffey-should be paid-by-this-
"office-haffey-claims-payments-
"should commence on-September 15th-
"RURALITY"

(2)

"Ruralty, London,
"Received 9/3/20 (31):
"With reference to your telegram
"5th March-Haffey-pay-from-
"September 15th-
"MILITARY"

Pension is being paid
accordingly.

Lt-Col.,
Chief Staff Officer (London).

HT/MH

REPLY

Dated March 29th. 1920 101

Noted; please

W. A. Dundee
Lieut.-Col.
Chief Staff Officer
for Minister of Militia

Ref. Nos. MN	711
Rec'd	20 APR 1920
Ack'd	Ans'd
Ref. Nos. OUT	
ACCT'D	
BRANCH	VA.
Comd	
P.A.	
R. & C.	
B & E	
P.S.	

Department of Militia

MEMORANDUM

No. 218/1038

From

MINISTER OF MILITIA,
ST. JOHN'S,
NEWFOUNDLAND

Sept. 26th,

1919

To

12702/P&A
Chief Staff Officer
Pay & Record Office
Newfoundland Barracks
58 Victoria Street

EM/PK.

SUBJECT:

REPLY

1038, Pte. Thomas Haffey
26 Peebles Street
Ayr, Scotland

Dated

191

20th December 9

Please return ORIGINAL and retain DUPLICATE

I confirm my telegram of
25th inst. as follows:-

"Despatched 25/9/19 (No971)
"Synoptical, London
"Please arrange to have 1038 Haffey
"26 Peebles Street, Ayr reboarded"
Military

Forwarded herewith is copy \$10.00 per month are being made
of medical document of this man, by this office, pending further
and also copy of the Board of Pension instructions, which please transmit
Commissioners Letter, please. as early as possible.

A. G. Nickman
A & H
Minister of Militia.

[Signature]
Lt.-Col.
Chief Staff Officer (London).

PAY & RECORD OFFICE

5794

16 OCT 1919

M

11 025 107

Comd

Sept. 25th, 1919

Capt. G.G. Byrne

Chief Staff Officer

1038 Pte. Thomas Heffey
26 Peebles Street
Ayr, Scotland

Sir:-

I have the honour to enclose copy of
Medical Document of the above noted, and to request that you
be good enough to make arrangements with the Pay & Record
Office, London to have him reboarded.

I have the honour to be
Sir
Your obedient servant

Sgd. J.B. O'Reilly
Captain
for Secretary

ENCLOSURE

ORIGINAL.Cables and Telegrams:
"SYNOPTICAL," London.Telephone:
VICTORIA 4923 & 4.Communications to be addressed to the
BRIEF PAYMASTER & OFFICER IN CHARGE.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 11280/659/P+a

From

PAY AND RECORD OFFICE,

58, VICTORIA STREET,

LONDON, S.W.1.

FM/PK.

17th September 1919.

To

The Minister of Militia,

St. John's,

NEWFOUNDLAND.

SUBJECT:1038 PTE. T. HAFFEY.
ROYAL NEWFOUNDLAND REGIMENT.
Reference Nos.**REPLY**

Dated Oct 3rd, 1919 101

Please return ORIGINAL and retain DUPLICATE.

Exchange of telegrams is confirmed:-

(1).
Received 2/9/19 (310).
"Synoptical, London."
"Following from-Pension
"Commissioners- begins-
"1038-Haffey-proceeded
"to-United Kingdom-have
"you his address.

MILITARY.

(2).
Despatched 8/9/19 (335).
"Military, St. John's."
"Reference your telegram
"1st September-1038-Haffey-
"address unknown.

SYNOPTICAL.

We have no record of
Haffey's return to this country.
Should he write to this office
later you will be advised by
telegraph, please.

A. S. [Signature]
Major.
Chief Staff Officer (London).

See our No. 218/1038

of Sept. 26th.

A. E. [Signature]

Minister of Militia.

27 OCT 1919

5900

W. R. [Signature] 27/10/19



DEPARTMENT OF MILITIA

ST. JOHN'S Oct. 1st., 19 19.
NEWFOUNDLAND

Chief Paymaster & Officer i/c Records,
Newfoundland Pay & Record Office,
58, Victoria Street,
London, S. W.

- 1038, Ex-Pte. Thomas Haffey.
- 1543, Ex-Cpl. Harold Jackson.
- 1512, Ex-Pte. John Kennell.
- 129, Ex-Pte. E.J.B. Nicol.

Sir:-

Papers for the re-boarding of the
marginally noted man are enclosed herewith.

Will you kindly arrange to have them
re-boarded, and papers returned as soon as
convenient, please.

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

A. M. B.

FOR THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

AMB.

ENCLOSURE.

RECORD OFFICE.
5906
27 OCT 1919
ENCLOSURE

[Handwritten signature]

SUSPENSE

CLEARED

4th November 29.

12099/16/P&A.

The Secretary,
Ministry of Pensions (D.M.S.I.)
14, Great Smith Street,
MILLBANK. S.W.1.

Sir:-

EX 1038 PTE. T.HAFPEY.
ROYAL NEWFOUNDLAND REGT.

With reference to your letter 15760/D.M.S.I. 16/4/19:
The Board of Pension Commissioners of Newfoundland have asked that
the above named pensioner be reboarded.

Will you kindly arrange for a Medical Board to be held
as soon as conveniently possible.

N.M.D. Form 98, the only available document is enclosed.
Opinion of the Board should be indicated thereon, please.

Haffey's address is -

26, Peebles Street,
AYR, N.B.

I am, Sir,
Your obedient Servant,
Major.
Chief Staff Officer (London).

FM/PK.

Telephone: Victoria 6964.

Telegraphic Address:

"Mespensions, Vig, London."

MEG.

MINISTRY OF PENSIONS,

MEDICAL SERVICE DIVISION,

14, GREAT SMITH STREET,

WESTMINSTER, S.W. 1

In reply please quote:-

15760.

16th. December 1919.

Sir,

It is regretted that the original Board Report of Private Thomas Haffey, Royal Newfoundland Regiment has been mislaid in transit from the Office of the Scotland Region to this Department. Every effort is being made to discover the whereabouts of the same. In the meanwhile a certified true copy of the report is forwarded to you. As soon as the original comes to hand this will be dispatched.

I am, Sir,
Your obedient Servant,

J. Wallace

for Director General of Medical
Services.

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
RECEIVED BY	<i>L. W. J.</i>
NO.	18 DEC 1919
ACK'D	Ans'd
REF. NO.	
APPROVED BY	
CHIEF	
COMMITTEE	
P. & A.	✓
H. & G.	
B. & E.	
P.S.	

Chief Staff Officer,
Newfoundland Contingent,
Pay and Record Office,
58, Victoria Street,
London. S.W.

HC
- 8 JAN 1920
14972

No. 7

NEWFOUNDLAND CONTINGENT

N.F.P/55.

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

To: Thomas Haffey
26 Peebles Street
Ayr. W.S.

Dec 31st 1919

Reference: Pension 1038 Pte. T. Haffey

Herewith Money Order # 30322 £5.10.11 being amount
due you for period 10/11/19 - 31/11/20.

Please acknowledge receipt hereon.

(S) Thomas Haffey

J. H. Marshall
Chief Paymaster & O. i/c Records

Date) 7th January 1920

NEWFOUNDLAND CONTINGENT.

Ref Nos IN	39
Rec'd	8 JAN 1920
Acct'd	Am't
Ref Nos. OUT	
ACTED UPON	
DEPARTMENT	BY
Comd.	<input checked="" type="checkbox"/>
P. & A.	<input checked="" type="checkbox"/>
H. & C.	
B. & E.	
P. S.	

26 Cobles Street

Ayr,

Scotland.

Jan 7th 1920

Dear Sir:

I beg to acknowledge enclosed receipt and wish to ask if there has been some mistake made regarding the amount the last payment received by me was for the period ending Sep 30th and this one dates from Nov 15th which shows a lapse of almost two months that I did not receive any pension money for. If you will kindly explain the reasons to me I will be greatly obliged to you.

I am,

Yours Truly,

Thomas Jeffrey

106/1/P&A

58, Victoria Street, SW 1

14th. January 20

Mr. T. Haffey,
26, Peebles Street,
Ayr,
Scotland.

PENSION

Reference your letter 7/1/20 (39):

No statement of the amount of pension due to you having been received in this office from Board of Pension Commissioners, letter of enquiry was despatched concerning your case.

Meanwhile payments of £10.00 per month are being made to you from date of last board 10/11/19, and on receipt of reply to the enquiry referred to above, any further amount due to you will be adjusted.

Lt-Col.

FM/MN

No 273

NEWFOUNDLAND CONTINGENT

N.F.P/55.

~~Pay & Record Office,~~
58, Victoria Street,
London, S.W. 1.

To: 1038 Rg. 2 Happy
26 Peckham St.
Act

January 28th 1920

Reference: Pension

Here with Money order £2-1-1 being amount due
period 12/20 - 29 2/20

Please acknowledge receipt hereon.

(Signature) Thomas Happy

(Date) Jan 30 1920

R. A. Newman Col.
Chief Paymaster & O. i/c Records.

No 273

NEWFOUNDLAND CONTINGENT

N.F.P/55.

~~Pay & Record Office,~~
58, Victoria Street,
London, S.W. 1.

To: 1038 Re 2 Haffey
26 Peebles St.
Asy.

Jan 28th 1920

Reference: Pension

Here with Money order £2-1-1 being amount due
period 13/20 - 29 2/20

Please acknowledge receipt hereon.

(Signed) Thomas Haffey

(Date) Jan 30th 1920

R. A. [Signature]
Chief Paymaster & C. i/c Records.

No. _____

N.F.P./55A.

NEWFOUNDLAND CONTINGENT

1038

Office of the High Commissioner
for Newfoundland,
58, Victoria Street,
London, S.W. 1.

To:

J. Haffey

26 Peckham Street

Clapham

28 FEB 1920

1920.

SUBJECT: Pension

Herewith

Money order 34029 £ 2-1-1 being amount

due for period 1³/₂₀ - 3³/₂₀

Please acknowledge receipt hereon.

J. L. Mansel Lt-Col.,
Chief Staff Officer (London).

Received.

Date:

28th Feb.

Signature:

Thomas Haffey

EDG
Telephone: Victoria 6964.
Telegraphic Address:
"Medpensions, Vic, London."

MINISTRY OF PENSIONS,
MEDICAL SERVICE DIVISION,
14, GREAT SMITH STREET,
WESTMINSTER, S.W. 1

15760

th
26 February, 1920.

Sir,

I am directed to forward to you copies
of Board reports relating to Thomas Haffey, who was boarded
by a Ministry of Pensions Medical Board on 10th November,
1919 at Ayr.

I am, Sir,

Your obedient servant,

J. Wallace

for Director General of Medical Services.

394
2 The Chief Staff Officer,
58, Victoria Street, S.W.1.

No. _____

N.F.P./55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
for Newfoundland,
58, Victoria Street,
London, S.W. 1.

Ex 1038 Rte 7 Staffer

26 Pettes St

Ayr

Mar 26th 1920.

SUBJECT: Pension

Herewith Money order 36013 £3-1-8 being amount
due for period 1/4/20 to 30/4/20

Please acknowledge receipt hereon.



Lt-Col.,
Chief Staff Officer (London)

RECEIVED.

Date: March 29th

Signature: Thomas Staffer

No. _____

N.F.P./55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
for Newfoundland,
58, Victoria Street,
London, S.W. 1.

No: En 1038 Rto Haffey?

26 Purses or


any

April 27th 1920.

SUBJECT: Pension

herewith Money order 38114 £ 3.-1.-8 being Advance
due for period 1/5/20 - 31/5/20.

Please acknowledge receipt hereon.



W. Hutchings Secretary.
~~Chief Staff Officer (London)~~

RECEIVED.

Date: 22nd April

Signature: Thomas Haffey

No. _____

N.F.P./55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
for Newfoundland,
5B, Victoria Street,
London, S.W. 1.

To: Ed 1038 Rte 7 Haffer
26 Peebles Street
Cap.

May 28th 1920.

SUBJECT: Pension

Herewith

Money order 110614 £ 3-1-8 being
Amount due for period 1/6/20-30/6/20

Please acknowledge receipt hereon.

W. Whiteing Lt Col.,
Secretary
Chief Staff Officer (London)

RECEIVED.

Date: 2/6/20

Signature: Thomas Haffer

No. _____

N.F.P/55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
for Newfoundland,
58, Victoria Street,
London, S.W.1.

To: Ex 10382 Haffey
26 Peebles St.
Ayr

June 28th 1920

SUBJECT: Pension

Herewith Money order 4256 £ 3.1.8 being amount
due for period 7/3/20 to 31/7/20

Please acknowledge receipt hereon.

W. Hutchings
for Secretary.

RECEIVED.

Date: 30/6/20.

Signature: Thomas Haffey

NEWFOUNDLAND CONTINGENT

N.F.P/55A

Office of the High Commissioner
for Newfoundland,
58, Victoria Street,
London, S.W.1.

To: En 1038 J Haffey
26 Paven Street
Calx

July 29th 1920

SUBJECT: Pension

Herewith Money order 44801 £3-1-8 being amount
due for period 1/8/20 to 31/8/20

Please acknowledge receipt hereon.

W Hutchings
for Secretary.

RECEIVED:

Date: _____

Signature: Thomas Haffey

No. _____

NEWFOUNDLAND CONTINGENT

N.F.P/55A

Office of the High Commissioner
for Newfoundland,
58, Victoria Street,
London, S.W.1.

To Gen. 10387 Haffey
26 Pables St
Ayr.

Aug 28th 1920

SUBJECT: Pension

Herewith Money Order 416896 £1-8-9 being amount
due for the period 1/7/20 to 11/9/20

Please acknowledge receipt hereon.

W. Hutchings
for Secretary.

RECEIVED.

Date: 28th Aug 1920.

Signature: Thomas Haffey.

26 Peebles Street,

Ayr.

Scotland.

Dear Sir,

As my pension money is now some
days overdue I am writing to ask if you will
kindly send on same by return of post

Yr Oblege,

Yours Truly,

(No 1038 000 private) Thomas Haffey.

E. Nos IN 1198 ✓	
cc'd - 5 OCT 1920	
ck'd	Am'd
Ref. Nos. 001	
ACFD	
CHG. DATE	
ENT	
REV.	
A.C.	

1280/2.

6th October, 1920.

Dear Sir,

I am directed by the High Commissioner to inform you that instructions have been received from the Board of Pension Commissioners, Newfoundland, to pay you a pension at the rate of \$15.00 (fifteen dollars) per month for twelve months from expiration of last period 14/9/20.

Cheque for £4:15:7 being amount due for the period 15/9/20 to 31/10/20 is enclosed herewith.

Yours faithfully,


Secretary.

Mr. T. Haffey,
26, Peebles Street,
Ayr, N.B.

WE/MN

NEWFOUNDLAND CONTINGENT

TELEGRAM full-text from THE BOARD OF PENSION COMMISSIONERS.

No. A4308/17/560. Dated 28/9/20. Received 29/9/20.

Decoded by W.H. Checked by M.N.

1038
Pay to- ~~1341?~~ Haffey- pension- rate of- 15 dollars- per month-
for 12 months- from- September 15th- 1920-

BOARD OF PENSION COMMISSIONERS.

NEWFOUNDLAND CONTINGENT

TELEGRAM extract to BOARD OF PENSION COMMISSIONERS

No. 84. Dated 29/9/20. Coded by W.H.

With reference to your telegram 28th of September- Haffey-
should it not be- 1038-

RURALITY

NEWFOUNDLAND CONTINGENT

TELEGRAM Bulltext from THE BOARD OF PENSION COMMISSIONERS.

No. A3542/13/309.

Dated 2/10/20. Received 3/10/20.

Decoded by W.H.

Checked by M.N.

With reference to your telegram 29th of September- Haffey- correct reading is- 1038- gave number of- pension- in error-

BOARD OF PENSION COMMISSIONERS.

1422/3.

23rd November, 1920.

Dear Sir,

You have not acknowledged on N.F.P/56 amount of pension sent you on 28th of October covering the period from 1/11/20 to 30/11/20.

It is strictly essential that this form be completed and returned to this office without delay.

In the event of the original having been mislaid duplicate copy is enclosed herewith.

I would add that failing acknowledgement of this receipt further pension will be withheld.

Yours faithfully,

High Commissioner for Newfoundland.

Mr. T. Haffey,
26, Peebles Street,
Ayr, Scotland.

WB/MS.

26 Public Street,

Ayr,

Scotland

24.11.20

Dear Sir,

Sorry for giving you this unnecessary trouble but the receipt was unfortunately mislaid and I failed to find same.

I remain,

Yours Truly,

Thomas Haffey

NO. 2

DUPLICATE

N.F.P./55A

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
For Newfoundland,
58, Victoria Street,
London, S.W. 1.
25th Nov 1920

To: Ex 1038 J Staffer
26 Pables St
Ayr

SUBJECT: Passport

herewith Money order 51123 £3-1-8 being amount
due for the passport 1/11/20 to 30/11/20

Please acknowledge receipt hereon.

W Hutchings
In Secretary.

RECEIVED.

Date: 24/11/20

Signature: Thomas Haffey

No. _____

N.F.P./55A

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
For Newfoundland,
58, Victoria Street,
London, S.W. 1.

To: Ex. 1038 J. Haffey
26 Peoples Street

28 NOV 1920

Apr

SUBJECT: Pension

Herewith Money Order 53999 £ 3-1-8 being amount
due for the period 1/12/20 to 31/12/20

Please acknowledge receipt hereon.

W. Hutchings
Secretary.

RECEIVED.

Date: 29/11/20

Signature: Thomas Haffey

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
 For Newfoundland,
 58, Victoria Street,
 London, S.W. 1.

To: Co: 1038 T. Haffey
26, Peebles Street
Aspx.

SUBJECT: Pension

herewith Money Order 54944 £3:1:8 being amount
due for the period 1/1/21 - 31/1/21.

Please acknowledge receipt hereon.

W. Hatchings
 for Secretary.

RECEIVED.

Date: 30th Dec. 1920.

signature: Thomas Haffey

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
for Newfoundland.

88, Victoria Street,
London, S.W. 1.

To: En 1038 J. Haffey

26 Peables Street

Calx.

SUBJECT: Pension

herewith Money Order 57054721-8 being amount due
for the period 1/2/21 to 28/2/21

Please acknowledge receipt hereon.

W. Hutchings
Secretary.

RECEIVED.

Date: 29th Jan 1921

signature: Thomas Haffey

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
 For Newfoundland,
 58, Victoria Street,
 London, S.W. 1.
 28 FEB 1921

To: En 1038 J. Haffey
26 Pebles Street

Rep.

SUBJECT: Pension.

Herewith Money order 59185 £3-1-8 being amount due
for the period 1/3/21 to 31/3/21.

Please acknowledge receipt hereon.

W. Hitchings
 2. Secretary.

RECEIVED.

Date: March 1st 1921

Signature: Thomas Haffey

74/1

1st April, 1921.

Dear Sir,

I am directed by the High Commissioner to inform you that a cable has been received from the Board of Pension Commissioners, Newfoundland, granting you an increase of ten per cent on pension paid to you during the year 1919.

The amount of pension paid to you from this office for the period 15/9/19 to 31/12/19 was £10.16. 9, and a Money Order for £11.1.6, being ten per cent of that amount, is enclosed herewith.

Kindly complete the enclosed form and return same to this office as soon as possible.

Yours faithfully,

Encls.

Secretary.

Mr. T. Haffey,
26, Peebles Street,
Ayr,
N.B.

H/E.

18th April, 1921.

265/2

Dear Sir,

I am directed by the High Commissioner to enclose herewith money order for £2.12.4 (two pounds, twelve shillings and fourpence) in adjustment of the increase of 10% authorised by the Board of Pension Commissioners, Newfoundland, for the year 1920.

Through inadvertence the increase was formerly stated to be payable for the year 1919, but recent instructions received show that it is payable in respect of pension paid during the year 1920, and the above adjustment is accordingly made.

Kindly sign and return the enclosed receipt form.

Yours faithfully,

Encl.

Secretary.

Mr. F. Haffey,
26, Ruelle Street,
AYR.

H/W

NO. _____

N.F.C./N.S.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
for Newfoundland,
88, Victoria Street,
London, S.W. 1.
8 O MAH 1921

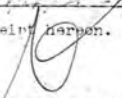
To: En 1038 J Haffey
26 Pikes Street

Aug

SUBJECT: Reserve

herewith Money Order 61048 £ 3-1-8 being amount
due to Newfoundland Contingent

Please acknowledge receipt hereon.



W. S. Haffey
Secretary.

RECEIVED.

Date: April 3rd 1921.

Signature: Thomas Haffey

No. _____

N.F.P/55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner
for Newfoundland,
55, Victoria Street.
London, S.W.1.

TO: Ex 1038 J Haffey
26 Peebles St

2nd Apr 1921.

Apr

SUBJECT: Pension

Herewith Money Order 61-81-1-1-8 being ten percent
increase on pension paid during the year 1919

Please acknowledge receipt hereon.

W. Hutchings
S. Secretary.

RECEIVED.

DATE: April 5th 1921

SIGNATURE:

Thomas Haffey

N.F.P./55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner,
Dominion of Newfoundland,
58, Victoria Street,
London, S.W. 1.

To: Ex 1038 J. Haffey
26. Peebles Street

18/4/21

Cypr.
Subject: Tension.

herewith Money Order 62564 £ 2.12.4 being difference
in pension in respect of 10% increase 1920.

Please acknowledge receipt hereon.

W. Hutchings
Secretary.

RECEIVED.

Date: April 19th 1921

Thomas Haffey
Signature.

N.F.P./55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner,
Dominion of Newfoundland,
59, Victoria Street,
London, S.W. 1.

28/5/21

To: Mr. 1038 J. Haffey

26, Pictou Street

Apr.

subject: Remission

herewith Money order 65708 £ 2-2-8 making amount
due for the period 1/4/21 - 30/6/21

Please acknowledge receipt hereon.

J. Hutchings

Secretary.

RECEIVED.

Date: June 1st 1921

Thomas Haffey
Signature.

N.F.P./55A.

NEWFOUNDLAND CONTINGENT

Office of the High Commissioner,
Dominion of Newfoundland,
59, Victoria Street,
London, S.W. 1.

To: Can 1038 J Haffey
26, Peoples Street

28 JUN 1921

Rep. Mtg

Subject: Pension

herewith Money Order 68223 £ 3-1-8 being amount
due for the period 1/7/20. 3/7/21

Please acknowledge receipt hereon.

Whitchings
Secretary.

RECEIVED.

Date: 29th June 1921.

J. Thomas Haffey
Signature

37/91.

23rd, August, 1921.

Ex 1038, T. Haffey.
Royal Newfoundland Regt.

Sir,

With reference to your letter 15760 D.M.S.I. of the 16th. of April, 1919; the Board of Pension Commissioners Newfoundland have asked that the above named man be reboarded.

Will you therefore kindly arrange for a medical board to be held as soon as possible.

The following documents are enclosed herewith,-

Army Form B170A

A 36/c Regional.

Mr. Haffey's address is,-

26, Peables Street,

Ayr, N.B.

I am, Sir,

Your Obedient Servant,

The Secretary,
Ministry of Pensions,
Millbank, S.W.1.

Secretary.

26 Peebles St.
Ayr,
Scotland
30th Aug.

Dear Sir,

I am, writing you regarding
my pension money received today.
Instead of the Order being for £3.1.8 it
is £1.8.9. Would you kindly write
me at your earliest convenience and give
an explanation why this reduction has
been made.

Y^r Obedt^l,
Thomas Haffey

1st September, 1921.

670/3

Dear Sir,

I am directed by the High Commissioner to acknowledge the receipt of your letter of the 30th ultime and in reply to inform you that your pension of \$15.00 (£3.1.8.) per month expires on the 14th of September, 1921.

Money for £1.8.9. which was forwarded to you on the 29th of August was the amount due for the period 1st September 1921 to 14th

Sept. 1921 I am to add that arrangements have been made with the Ministry of Pensions for your medical rebaud which will be forwarded to the Board of Pension Commissioners, Newfoundland, for assessment of any further pension that may be due to you, and upon receipt of their reply you will be advised.

Kindly complete the enclosed form and return same to this office as soon as conveniently possible.

Yours faithfully,

Secretary.

Encl.

Mr. T. Haffey,
26, Peebles Street,
Ayr, N.S.

H/T

714/115

26th September, 1921.

1038 T. Haffey,
Royal Newfoundland Regiment

Sir,

I have the honour to enclose herewith a copy of a report of a Medical Board held on the above named pensioner, 5th September, 1921.

I would add that his previous pension of \$15.00 (fifteen dollars) per month expired on the 14th instant, it is therefore requested that you will be good enough to advise me by telegraph the instructions of the Board of Pension Commissioners in this case.

I have the honour to be

Sir,

Your obedient servant,

Encl.

Secretary.

The Secretary,
The Board of Pension Commissioners,
St. John's,
Newfoundland.

CES/P.

Telephone: 8450.

Telegraphic Address:

"Medpension, Via, London."

Reply should be addressed to
The Secretary, Ministry of Pensions,
and the following number quoted:—

15757/4. Part 3. (M.S.L.A.)



MINISTRY OF PENSIONS,

MEDICAL SERVICE DIVISION,

5, MILLBANK, S.W. 1.

23 SEP 1921

Sir,

re - T.Haffey. No.1038.Pte. R.Newfoundland Rgt.

With reference to your letter 637/91 of the 23rd August, concerning the above named Ex member of the Newfoundland Forces, I have to inform you that Mr.Haffey was examined by a Medical Board at Ayr on the 5th September. As a result of this examination, the Board assessed his disablement on account of ~~Myocard~~ Stenosis at the rate of 30% for a period of 12 months.

The Medical documents relating to the case are enclosed herewith.

I am,

Sir,

Your obedient Servant,

for Director General of Medical Services.

Handwritten file number 451 and date 26/9/21 on a routing slip. The slip includes fields for 'Ref. No.', 'Ack'd', and 'Def. No.', along with a section for 'ACTING DIRECTOR'.

The Secretary,
Office of the High Commissioner
for the Dominion of Newfoundland,
High Commissioner's Office,
58, Victoria Street,
Westminster, S.W.1.

754/4

8th October, 1921.

Dear Sir,

I am directed by the High Commissioner to acknowledge the receipt of your letter of the 6th instant, and in reply to inform you that a copy of your medical Report was forwarded to the Board of Pension Commissioners, Newfoundland, on the 26th September, requesting them to advise me by cable, the award of pension granted to you.

A reply should be received in a few days, upon receipt of which, you will be advised.

Yours faithfully,

Secretary.

Mr. T. Haffey,
26, Peebles Street,
Ayr.
SCOTLAND.

H/W

26 Pebles Street,

Ayr,

Scotland.

6th October 1921.

Dear Sir,

Having received no further communication from you regarding my pension since my appearance before the Medical Board in the beginning of September would you kindly write me at your earliest convenience and let me know the result of same.

Yr Obligs,
Yours Sincerely,
Thomas Haffey.

803/5

1st November, 1921.

Dear Sir,

I would acknowledge the receipt of your letter of the 31st ultimo, and in reply would inform you that a reply is still awaited from the Board of Pension Commissioners, Newfoundland.

A further reminder is being despatched by cable to-day, and upon receipt of a reply you will be immediately advised.

Yours faithfully,

High Commissioner for Newfoundland.

Mr. I. Haffey,
54, Russell Street,
NYT,
N.B.

H/T

54 Russell Street

Ayr,
Scotland.

31st Oct.

Dear Sir,

It is now some time since I had your letter regarding my pension and as I am out of work would be greatly obliged to you if you would see further into the matter. Whatever money I am entitled to I will be thankful to receive at your earliest convenience

P.S.

Kindly note change of
address.

I am,
Yours Truly
Thomas Hayley

816/6

3rd November, 1921.

Dear Sir,

I would inform you that a telegram has to-day been received from the Board of Pension Commissioners, Newfoundland, notifying the award to you of a pension at the rate of \$15.00 (fifteen dollars) per month for 12 months from expiration of last period.

Cheque for £7.16.2. (seven pounds sixteen shillings and twopence) being the amount due for the period 15/9/21 - 30/11/21 is enclosed herewith.

Yours faithfully,

Encl.

High Commissioner for Newfoundland.

Mr. T. Haffey,
54, Russell Street,
Ayr,
N.B.

H/T

886/151

22nd November, 1921.

J. Kappes

Sir,

I would acknowledge the receipt of your letter P/GEN/419/7 of the 21st instant, and enclose herewith cheque for 10/- (ten shillings) being refund of amount disbursed by you in respect of the above named man in attending Medical Board during the quarter ending September 30th, 1921.

I am, Sir,

Your obedient Servant,

High Commissioner for Newfoundland.

Encl.

The Secretary,
Ministry of Pensions P.4
Chadwick Street,
S.W.1.

H/T

K.P.

Telephone: Victoria 8452.

Telegraphic Address:

"Warpenau, Vic, London."

Reply should be addressed to
The Secretary, Ministry of Pensions,
and the following number quoted —

F/Gen/419/7.



MINISTRY OF PENSIONS,

CROMWELL HOUSE,

MILLBANK,

LONDON, S.W. 1.

21st November, 1921.

Sir,

I am directed by the Minister of Pensions to forward herewith a statement of account supported by detailed schedule and relative vouchers of expenses incurred by a Man of the Newfoundland Expeditionary Force in attending a British Medical Board during the quarter ended 30th September, 1921, amounting to 10/-.

I am to request that you will be good enough to forward remittance for this amount to the Secretary, F.4. Ministry of Pensions, Chadwick Street, S.W.1. at your early convenience.

I am, Sir,
Your obedient servant,

H. Dupire
for Secretary (F).

The High Commissioner for Newfoundland,
High Commissioner's Office,
58, Victoria Street,
S. W. 1.

all

FOLD HERE

ON HIS MAJESTY'S SERVICE

57R

6.15 PM

5 SEP 21



Brown

FOLD HERE

FOLD HERE

FOLD HERE

ON HIS MAJESTY'S SERVICE

MINISTRY OF PENSIONS



*34 Newmarket St.
Ayr.*

FOLD HERE

FOLD HERE

ON HIS MAJESTY'S SERVICE.

AIR

6 15 PM

5 SEP 21



Provis.

FOLD HERE

FOLD HERE

FOLD HERE

ON HIS MAJESTY'S SERVICE.

MINISTRY OF PENSIONS



*34 Newmarket St.
Ayr.*

FOLD HERE

1/2/16

clock
No. 117/0

Newfoundland.

M.P.F. 60
(Late M.N.S.X. 60).

8/1

CLAIM FOR COMPENSATION BY PENSIONER FOR LOSS OF REMUNERATIVE TIME IN ATTENDING MEDICAL BOARD FOR THE PURPOSE OF REVIEW OF PENSION.

(1) I hereby declare that in consequence of attending a Medical Board at Apr. at 2.30 o'clock on 0 Sept. 1921.
I have lost 8 hours, for which I would have been paid, and I claim to be paid compensation for the loss of remunerative time incurred.

Signature of Pensioner W.M. Haffey
Late No. 1038 Rank Pt. Regiment (Ship) R. Newfoundland.
Address Thos. Haffey, 26 Peebles St., Apr.
Date 0. 9. 1921.

Capt. Read

(2) CERTIFICATE OF EXAMINING OFFICER.

I certify that the above-named man was medically examined this morning on 5. 9. 1921. at afternoon.
Date 5. 9. 1921. Signature [Signature]
* Strike out word not applicable. Chairman of Board.

(3) CERTIFICATE OF EMPLOYER.

I certify that the above-named Pensioner is in my employ, and that he suffered an actual short payment of wages as under by reason of his absence for the purpose of attending a Medical Board at Apr. on 0. 9. 1921.

Normal time for commencing work		Normal time for finishing work		Normal number of hours worked each day	Number of hours lost by attending Medical Board	Rate paid per hour		Total amount lost by Pensioner	
a.m.	p.m.	a.m.	p.m.			s.	d.	s.	d.
				8 1/2 hours	8 1/2 hours	1	4 1/2 p	11	1/2

Signature of Employer _____ For AYUSHIRE DOCKYARD CO., Lt
Address _____
Date 16- SEP 1921 1921

(4) CERTIFICATE OF FINANCE OFFICIAL.

I certify that the above claim has been examined and is assessed as follows:—

No. of hours	Rate per hour (must not exceed 1s.)		Total amount (must not exceed 10s.)		Paid by Postal Draft No.
	s.	d.	s.	d.	
8	1	4 7/8	10	-	4904436

Date 4- 9- 1921. Signature J. Lorraine
Finance Official.
Region 1000 Area Apr. Board 1

MINISTRY OF PENSIONS.

(Title of Account.)

No. 8143

23rd Nov. 1921

received from

The High Comm. for Newfoundland

the sum of

ten shgs refund

in respect of J. Haffey 1038

for

11/11/21

M.B.E. Johnson

NOTE.—Under 54 & 55 Vic, c. 39 no stamp is necessary on a receipt given by an officer of a Public Department of the State for money paid into an account where he derives no personal benefit therefrom.

853/7

12th November, 1921

Dear Sir,

I would acknowledge the receipt of your letter of the 10th instant, and in reply would inform you that under the Newfoundland War Pension Act, pension can only be paid monthly in advance.

This Office has no authority to pay pensions otherwise than as granted by the Board of Pension Commissioners, Newfoundland, and it is therefore regretted that your request cannot be granted.

Yours faithfully,

High Commissioner for Newfoundland.

H. H. H.
Mr. T. Haffey,
54, Russell Street,
AYR.

H/T

Ref. Nos IN	531
ask'd	11/16/24
ask'd	Ans'd
Ref. Nos. UUI	
PLACED UPON	
SEARCHED	INDEXED
BY	
P. & A.	
R. & C.	
B. & E.	
S.	

54 Russell Street,

Que.
Nov. 15th

Dear Sir,

Having been thrown out of employment and finding it impossible to get work anywhere I am writing to you if it would be at all possible for you to let me have my years bond on in a lump sum so as to enable me to set up a small business for myself. Trusting my request will meet with your approval.

I am
Yours Truly
Thomas Haffey.

NEWFOUNDLAND CONTINGENT

TELEGRAM full-text to the Board of Pension Commissioners

No 51

Dated 24/10/21

Coded by WJW

Checked by RP

With reference to my letter 26th. September - Haffey - Jackson -
With reference to my letter 1st. October - Jones. - with reference to my
letter 5th. October - Keel - with reference to my letter - 6th. -
October - Brodnick - ^{please} expedite reply.

RURALITY

NEWFOUNDLAND CONTINGENT

TELEGRAM full-text from the Board of Pension Commissioners

NoCX 168

Dated 2/11/21

Coded by WSD

Checked by [Signature]

With reference to your telegram 6th October - pension granted to -
643 - Jackson - 20 dollars - 1038 - Haffey - 15 dollars - ✓
3268 Hones - 10 dollars - 1951 - Brodnick - 20 dollars - ✓ for
12 months - from - date of expiration of - last period - 400 Keel -
pending decision of - board.

PENSION COMMISSIONERS

7
927/9

19th December, 1921.

Dear Sir,

I am directed by the High Commissioner to inform you that a cable has been received from the Board of Pension Commissioners, Newfoundland, granting you a seven per cent increase on pension paid to you during the year 1921.

The amount of pension paid to you from this Office for the period 1/1/21 - 31/12/21 was £37.0.0. (thirty-seven pounds) and a money order for £2.11.9. (two pounds eleven shillings and ninepence) being seven per cent of that amount is enclosed herewith. Kindly complete the enclosed form and return the same to this Office as soon as possible.

Yours faithfully,

Encls.

Secretary.

Mr. T. Haffey,
54, Russell Street,
AYR,
N.B.

H/T

1045/1.

29th December 1921.

Dear Sir,

I would inform you that a communication has to-day been received from the Board of Pension Commissioners, Newfoundland, to the effect that the Canadian Scale of Pensions is being adopted in Newfoundland, as from January 1st 1922, and that pensions are to be paid monthly in arrears, at the end of each month, instead of monthly in advance as heretofore.

Your account is being adjusted, and the amount of pension due to you will be sent at the end of each month, beginning January 31st 1922.

Yours faithfully,

Secretary.

Mr. T. Haffey,
54, Russell Street,
Ayr.

E/D.

54 Russell Street

Aggr.

July 1st 1922.

Dear Sir,

In reply to your letter dated the 2nd which only arrived this morning I am writing these few lines by return of post. It would appear that a mistake has been made in sending me the enclosed form as I already filled in and posted one exactly the same. It is now several weeks since I

sent it off together with the receipt
for my months pension. It may
have been mislaid in the office but
I can assure you it is through no
fault of mine that you have been
put to this unnecessary
trouble.

I am,

Yours Truly,

Thomas Waffey.

6th July 1922.

Dear Sir,

I am directed by the High Commissioner to enclose herewith a Pension Claim Form, and to request that you will be good enough to complete and return it to this Office as soon as possible.

Yours faithfully,

Secretary.

Encl.

Mr. T. Haffey,
24, Russell Street,
A Y R, N.B.

H/D.

10th August, 1922.

Dear Sir,

I am directed by the High Commissioner to inform you that authority has been given by the Board of Pension Commissioners, Newfoundland, for the payment of a pension allowance in respect of your wife at the rate of \$7.50 per month as from 1st January 1922 to 14th September 1922.

A cheque for £10.15.9. (ten pounds fifteen shillings and ninepence), being the amount due for the period 1/1/22 - 31/7/22 is enclosed herewith. Your next monthly payment will be at the rate of £6.3.3. instead of £4.12.6. as heretofore. Kindly complete the enclosed form and return the same to this Office as soon as possible.

Yours faithfully,

Encl

Secretary.

Mr. T. Haffey,
64, Russell Street,
AYR, N.B.

H/T

1038 T. Haffey
Royal Newfoundland Regiment

23rd August, 1922.

Sir,

With reference to your letter 1560 D.M.S.I. of the 16th April 1919 the Board of Pension Commissioners have asked that the above named pensioner may be reboarded. Will you, therefore, be good enough to arrange for a Medical Board to be held as soon as possible.

The following documents are enclosed herewith:-

Army Form 179a.
A. 36/c (2)

Mr. Haffey's address is :- 54, Russell Street,
AYR.

I am, Sir,

Your obedient Servant,

Encls.

High Commissioner for Newfoundland.

The Director-General of Medical Services,
Ministry of Pensions,
2, Sanctuary Buildings,
Westminster, S.W.1.

Telephone: 874.

Telegraphic Address:

"Medpension, Vic, London."

Reply should be addressed to
The Secretary, Ministry of Pensions,
and the following number quoted:—

15757/4. Pt. 4.

(M.S. 1.A.)



MINISTRY OF PENSIONS,

MEDICAL SERVICE DIVISION,

1 & 2, SANCTUARY BUILDINGS,

GREAT SMITH STREET,

WESTMINSTER, S.W.1.

13 SEP 1922

Sir,

Re. T. Haffey, No. 1038,
Royal Newfoundland Regiment.

I am directed to enclose herewith the Medical documents relating to the above named ex-member of the Royal Newfoundland Regiment, who was examined by a Medical Board at Ayr on the 5th September, in accordance with your request of the 23rd August.

AS a result of this examination the Board assessed his disablement on account of Mitral Stenosis at the rate of 30% for a period of 12 months.

I am, Sir,
Your obedient Servant,

J. Wallace
for Director General of Medical Services

The High Commissioner for the Dominion
of Newfoundland,
High Commissioner's Office,
56, Victoria Street,
S.W.1.

1038 T. Haffey
Royal Newfoundland Regiment

14th September, 1922.

Sir,

I have the honour to enclose herewith a copy of a report of a Medical Board held on the above named man on the 5th September 1922. As a result of this examination the Board assessed a disablement on account of Mitral Stenosis at the rate 30% for a period of twelve months.

Mr. Haffey's pension at the rate of \$30.00 per month expires on the 14th instant and it is therefore requested that further instructions may be transmitted as soon as possible.

I have the honour to be,

Sir,

Your obedient Servant,

Encl.
The Secretary,
Board of Pension Commissioners,
St. John's,
NEWFOUNDLAND

High Commissioner for Newfoundland.

H/T

NEWFOUNDLAND CONTINGENT

TELEGRAM full-text to Board of Pension Commissioners, St. John's

No. _____ Dated 2/10/22 Coded by £ _____ Checked by _____

With reference to your telegram 29th September - Haffey - should he
●ot - receive - allowances - in respect of - wife -

RURALITY

NEWFOUNDLAND CONTINGENT

TELEGRAM full-text to the Board of Pension Commissioners, St. John's,
No. _____ Dated 7/10/22 Coded by _____ Checked by _____

With reference to your telegram 7th October - Haffey - claim form -
sent - September 8th - fullstop - Reference to - Brown - please advise -
date of commencement.

RURALITY

9th October, 1922.

Dear Sir,

I would inform you that a cable has to-day been received from the Board of Pension Commissioners, Newfoundland, notifying to you the award of a pension at the rate of \$30.00 per month, for 12 months, from the expiration of last period.

A cheque for £3.5.9. (three pounds five shillings and nine pence) being the amount due for the period 15/9/22 - 30/9/22 is enclosed herewith.

Kindly acknowledge receipt.

Yours faithfully,

Encl.

High Commissioner for Newfoundland.

Mr. T. Haffey,
26, Peebles Street,
AYR,
N.B.

H/T

NEWFOUNDLAND CONTINGENT

TELEGRAM full-text from Board of Pension Commissioners St. John's
No. _____ Dated 7/10/22 Decoded by _____ Checked by _____

Reference to - Haffey - entitled to - allowances for wife -
claim form - should be forwarded - 1565 Brown has been granted -
15% - plus - allowances for wife - and child - 1951 - Brodniek -
if - disability - due to service you are - authorised to treat
with.

PENCOM

54 Russell Street,

Agx.

Oct. 10th

Dear Sir,

As the sender of my
pension money omitted to put
in a receipt to sign I now
write to acknowledge cheque
for £5 5.9. Trusting this will
do just as well.

I am,

Yours Truly,

Thomas Haffey.

PENFOUENLAND CONTINGENT

TELEGRAM full-text from Board of Pension Commissioners, St. John's

No. _____ Dated 29/9/22 Decoded by _____ Checked by _____

T

22 dollars - 50 cents - each month - for 12 months - granted to -
1038 Haffey .

PENCOM

7th November, 1922.

Dear Sir,

I am directed by the High Commissioner to inform you that authority has been given by the Board of Pension Commissioners, Newfoundland, for the payment to you of an allowance in respect of your child at the rate of \$4.50 per month as from 1/1/22.

A cheque for £9.5.0. (nine pounds five shillings) being the amount due for the period 1/1/22 - 31/10/22, is enclosed herewith

Kindly complete the enclosed form and return the same to this Office as early as possible.

Yours faithfully,

Encl.

Secretary.

Mr. T. Haffey,
26, Peebles Street,
A.Y.E.
N.B.

H/T

THE BOARD OF
PENSION COMMISSIONERS
FOR NEWFOUNDLAND

J. A. CLIFT, K.C., C.B.E., CHAIRMAN
MAJOR W. H. PARSONS, M.C.,
R.A.M.C., MEDICAL ADVISER
LIEUT. C. C. OKE, SECRETARY



In reply refer to

No. _____

St. Johns,

October 17th 1922.

1038 Thos. Haffey,
Royal Newfoundland Regiment.

Sir:

I have the honour to forward herewith Approval Form relative to the above mentioned case, and would be glad if you would compare same with your records.

I am, Sir,
Your obedient servant,

[Signature]
Secretary.

Per *[Signature]*

The High Commissioner for Nfld.,
58 Victoria Street,
Westminster,
London, S. W. 1.

BOARD OF PENSION COMMISSIONERS FOR N.F.L.D.

Pension No. 1341

Regt. No. 1036 Rank Pte. Name Thomas Haffey


Pensionable Disability 30 % for _____ Months.

Particulars of Pension:-

Self	\$ <u>15.00</u>	Per month ending	<u>14-9-22.</u>
Bonus	\$ <u>7.50</u>	" " "	<u>14-9-22.</u>
Wife	\$ <u>7.50</u>	" " "	"
First Child	\$ <u>4.50</u>	" "	"
Second "	\$ <u>XXXXX</u>	" "	"
_____ Children @ \$ _____ each =	\$ <u>XXXXX</u>	" "	"
Total monthly rate	\$ <u>34.50</u>	" " from	<u>1-1-22.</u>

Approved:-

Date 17-10-22.

 Secretary.

1038 T. Haffey
Royal Newfoundland Regiment

15th August, 1922.

Sir,

With reference to your letter of the 16th April 1919, the Board of Pension Commissioners have asked that the above named man may be reboarded.

Will you be good enough to arrange for a Medical Board to be held as soon as possible. The following documents are enclosed herewith:- Army Form B.179A
A.36/c (3)
M.P.X9

Mr. Haffey's address is:- 26, Peebles Street,
AYR.

I am, Sir,

Encl.

Your obedient Servant,

The Director-General of Medical Services,
Ministry of Pensions,
3, Sanctuary Buildings,
66, Smith Street,
S.W.I.

AM.

Telephone: Victoria 8740.

Telegraphic Address:

"Warpension, Parl, London."

Reply should be addressed to
The Secretary, Ministry of Pensions,
and the following number quoted:—

15757/4. Part 4.



MINISTRY OF PENSIONS,

MEDICAL SERVICES DIVISION,

2, SANCTUARY BUILDINGS,

GREAT SMITH STREET,

WESTMINSTER, S.W.1.

SEP 5 1923

Sir,

re Thomas Haffey, 1038, Royal Newfoundland Regt.

I am directed to enclose herewith the medical documents relative to the above named ex-member of the Royal Newfoundland Regiment who was examined by a Medical Board at Ayr on the 31st August in accordance with your request of the 15th August.

As a result of this examination the Board assessed the degree of disablement on account of Mitral Stenosis at 50% for a period of 12 months.

I am, Sir,
Your obedient Servant,

J. Wallace
for Director General of Medical Services.

14/9
The High Commissioner
for Newfoundland,
Dominion of Newfoundland,
58, Victoria Street,
S.W.1.

1038 T. Haffey
Royal Newfoundland Regiment

6th September, 1923.

Sir,

I have the honour to enclose herewith copy of a report of a Medical Board held on the above named pensioner on 31st August. As a result of this examination the Board assessed the degree of disablement, on account of Mitral Stenosis, at 50% for a period of 12 months.

Mr. Haffey's pension expires on 14th September and I would ask that you will be good enough to transmit further instructions as soon as possible.

I have the honour to be,

Sir,

Your obedient servant,

Encl.

The Secretary,
Board of Pension Commissioners,
ST. JOHN'S,
NEWFOUNDLAND.

October 8th., 1923.

Dear Sir,

I would inform you that instructions have been received from the Board of Pension Commissioners, Newfoundland notifying the award to you of a pension at the rate of \$46.00 per month for 12 months.

A cheque for £5. 0. 10d., being the amount due for the period 15/9/23 to 30/9/23, is enclosed.

Kindly acknowledge receipt,

Yours faithfully,

Mr. T. Raffey,
54, Russell Street,
St. John's,
Newfoundland.

34 Russell Street

Agy.

Oct 9th 1928.

Dear Sir,

As you have omitted
to enclose receipt I am I am
writing by return of post to
acknowledge cheque received
abright

I am,
Yours Faithfully
Thomas Hasler

NEWFOUNDLAND CONTINGENT

TELEGRAM full-text from Board of Pension Commissioners, St. John's,
No. _____ Dated 3/10/23 Decoded by _____ Checked by _____

with reference to your letter 6th. September 1938 Haffey pay 46
dollars per month for one year including allowances for wife and
child 3266 Jones 15 dollars per month for one year fullstop enquire
from Ministry of Pensions if anything has been done regarding transfer
of Mrs. Annie Knight pension to her husband their reference D N R
436.

PENCOM.

20th August, 1924.

1038 T. HAFFEY.
Royal Newfoundland Regiment.

Sir,

With reference to your letter of the 5th September, 1923, the Board of Pensions Commissioners, Newfoundland have asked that the above-named man may be rewarded.

Will you therefore kindly undertake to arrange for a medical examination to be held as soon as possible.

Medical documents relating to this case are enclosed herewith.

Mr. Haffey's address is:- 54, Russell Street, Ayr, Scotland.

I am, Sir,

Your obedient servant,

Encl.

Secretary.

The Director-General of Medical Services,
Ministry of Pensions,
2, Sanctuary Buildings,
Great Smith Street, S.W.1.

1038 T. HAFFEY.
Royal Newfoundland Regiment.

20th September, 1924.

Sir,

I have the honour to enclose herewith a copy of the Report of a Medical Board held on the above-named man on the 11th September.

As a result of this examination the Board assessed the degree of disablement on account of Mitral Stenosis at the rate of 50% for a period of twelve months.

Mr. Haffey's pension expired on the 14th September, and I am to ask that you will be good enough to transmit further instructions by cable.

I have the honour to be,

Sir,

Your obedient Servant,

Encl.

Secretary.

The Secretary,
Board of Pensions Commissioners,
St. John's,
NEWFOUNDLAND.

34 Russell Street

Ayr.

Oct 1st 1924

Dear Sir,

I would like to draw your attention to the enclosed cheque which is made out for £4.8.3 instead of £9.9. as stated on receipt form trusting you will put this matter right and return same to me at your convenience

Yr Obedt
Yours Respectfully
Thomas Hayley

SEL

Telephone: Victoria 8740.

Telegraphic Address:

"Warpension, Post, London."

Reply should be addressed to
The Secretary, Ministry of Pensions,
and the following number quoted:-

(H.S.I.A.) 15757/4. Part 4.



MINISTRY OF PENSIONS,

MEDICAL SERVICES DIVISION,

2, SANCTUARY BUILDINGS,

GREAT SMITH STREET,

WESTMINSTER, S.W.1.

19 SEP 1924

Sir,

HAFFEY, T. Pte. No. 1038. Royal
Newfoundland Regiment.
54, Russell Street, Ayr, Scotland.

I am directed to enclose herewith medical documents relating to the case of the above-named ex-member of the Newfoundland Regiment, who was examined by a Medical Board at Ayr on 11th September, in accordance with your request of the 20th August.

As a result of this examination the Board assessed the degree of disablement on account of Mitral Stenosis at the rate of 50% for a period of twelve months.

Treatment was not recommended by the Board.

I am, Sir,
Your obedient Servant,

J Wallace

for Director General of Medical Services.

The High Commissioner for Newfoundland,
Dominion of Newfoundland,
58, Victoria Street, S.W.1.

(M.S.L.A.) 15757/4. Part 4.

19 SEP 1924

Sir,

HAPPEY, T. Pte. No. 1038. Royal
Newfoundland Regiment.
54, Russell Street, Ayr, Scotland.

I am directed to enclose herewith medical documents relating to the case of the above-named member of the Newfoundland Regiment, who was examined by a Medical Board at Ayr on 11th September, in accordance with your request of the 20th August.

As a result of this examination the Board assessed the degree of disablement on account of Mitral Stenosis at the rate of 50% for a period of twelve months.

Treatment was not recommended by the Board.

I am, Sir,
Your obedient Servant,

(Sgd.) J. WALLACE.

for Director General of Medical Services.

The High Commissioner for Newfoundland,
Dominion of Newfoundland,
58, Victoria Street, S.W.1.

34 Russell Street

Lyon

Oct. 28th 1924

Dear Sir,

As it is now almost seven weeks since I was up before the Medical Board and so far have not been notified as to the result of same would you kindly let me know at your earliest convenience how things have gone

Obligo,

Yours Respectfully,

Thomas Haffey

29th October, 1924.

Dear Sir,

I am directed to acknowledge the receipt of your letter of the 28th October, and to inform you that a copy of the report of your Medical Board, was forwarded to the Board of Pensions Commissioners, Newfoundland for assessment of pension.

To date no reply has been received from the Board but it is hoped to be able to advise you further within a few days.

Yours faithfully,

Secretary.

Mr. T. Haffey,
34, Russell Street,
AYR.

4th November, 1924.

Dear Sir,

I am directed to inform you that authority has to-day been received from the Board of Pensions Commissioners, Newfoundland for the payment to you of a pension at the rate of 50% for the period of twelve months.

A cheque for £18.2.4., (eighteen pounds two shillings and fourpence) being the amount due for the period 15/9/24 to 31/10/24 is enclosed herewith.

Kindly acknowledge receipt.

Yours faithfully,

Ehol.

Secretary

Mr. T. Haffey,
54, Russell Street,
Ayr,
Scotland.

34 Russell Street

Que.

Nov. 8th 1924

Dear Sir,

As no receipt form was enclosed for
me to sign I beg to acknowledge cheque received
today. Thanking you for same

I am,

Yours Respectfully,
Thomas Haffey

6
60 12 06
5 1 1/2 0 1
9 5 8 1/2 11 0 0
0 1 2 0 11 1/2 0 1 4
2 0 0 0 0 1
2 0 0 0 0 1

450
150
600
90
690

34 Russell Street

Ayr

4 11 24

Dear Sir,

It would appear that a mistake has been made with this month's pension money. According to the enclosed letter (which I am returning for you to see) the cheque should be for £12 instead of £9.9. It seems strange that six weeks' money amounts to £18.2.4 and four weeks only to £9.9. I will be pleased if you will

450
 110
 600
 90
 690

34 Russell Street

Age

4 11 24

Dear Sir,

It would appear that a mistake has been made with this month's pension money. According to the enclosed letter (which I am returning for you to see) the cheque should be for £12 instead of £9.9. It seems strange that six weeks' money amounts to £18.2 and four weeks only to £9.9. I will be pleased if you will

6
 62 2/6
 5 1/2 1/2
 9 5/8 1/2 1/2
 5 1/2 1/2 1/2
 2 1/2 1/2 1/2
 2 0 0 0 1/2

Kindly explain to me how this
comes about. Trusting to hear
from you again.

I am,
Yours Respectfully
Thos Haffey

9th December, 1924.

Dear Sir,

I am directed to acknowledge the receipt of your letter of the 4th December, and to inform you that the monthly pension should have read £11.14.3.

I am accordingly enclosing herewith a cheque for £2.5.0., (two pounds five shillings) being the difference due to you, and regret if you have been caused any inconvenience.

Yours faithfully,

Encl.

Secretary.

Mr. T. Haffey,
34, Russell Street,
Ayr,
Scotland.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO

N^o 1341

March 13, 1925.

The High Commissioner for Nfld.,
55 Victoria Street,
Westminster, London,
England.

1138
Re:- 1636 T. Haffey.
.....

For attention of: Wm. Hutchings, Esq.,

Sir:-

Pension in favour of the above noted should be at the rate of \$57.50 per month. It would appear that he was paid at this rate from Sept. 15th, 1924 to Oct. 31st, 1924 and at \$57.00 per month for the months of November and December 1924 and January 1925, according to the statements furnished by you.

Kindly inform this Office if FIFTY CENTS per month has been deducted on account of overpayment; if not, please pay at \$57.50 per month from November 1st, 1924 to the date of expiration of pension, 14. 9.25.

I am, Sir,
Your obedient servant,

J. Melnick
Secretary.

JAMCG/BT.

12th May, 1925.

1038 T. Haffer
Royal Newfoundland Regiment

Sir,

I have the honour to acknowledge the receipt of your letter of the 13th March, relating to the case of the above named pensioner. In reply, I am to inform you that payment of 50 cents per month was inadvertently omitted to be paid to this man for the period 1st November 1924, to 30th April last. A cheque for 12/4 has to-day been sent to him, covering the amount due for that period.

I have the honour to be,

Sir,

Your obedient Servant,

Secretary.

The Secretary,
Board of Pension Commissioners,
St. John's,
Newfoundland.

12th May, 1925.

Dear Sir,

I am directed to enclose herewith a cheque for 12/4 (twelve shillings and fourpence) being difference in pension due to you for the period 1st November 1924 to 30th April, 1925. I am to add that the amount of your pension should be at the rate of 57.50 dollars per month, whereas payment from the period 1st November, was made to you at the rate of 57 dollars per month.

Yours faithfully,

Secretary.

Encl.

Mr. T. Haffey,
34, Russell Street,
Ayr.

29th September, 1925.

1038 T. Haffey
Royal Newfoundland Regiment

Dear Sir,

I am directed to ask that you will be good enough to arrange for a medical examination of the above named pensioner. Mr. Haffey's pension expired on the 14th September and I am to request that you will kindly have the medical board held as soon as possible. Medical documents relating to this case are enclosed herewith.

Mr. Haffey's address is:-

34, Russell Street,
Ayr. N.B.

Yours faithfully,

Secretary.

Encls.

Director General of Medical Services,
Ministry of Pensions,
2, Sanctuary Buildings,
Great Smith Street,
S.W. 1.

34 Russell Street,

Que.

October 1st 1925

Dear Sir,

I am writing to ask if my paper to attend the Medical Board was sent. As it is almost a month now since it was due I am beginning to think it has either been mislaid or lost in the post. I will be pleased to hear from you re my pension at your earliest convenience.

Yours Respectfully,
Thomas Shepley.

2nd October, 1925.

Dear Sir,

I am directed to acknowledge the receipt of your letter of the 1st October and in reply to inform you that the matter has been taken up with the Ministry of Pensions for your medical re-examination. On receipt of their report, we will communicate with the Board of Pension Commissioners, concerning a re-award of pension.

Yours faithfully,

Secretary.

T. Haffey Esq.,
34, Russell Street,
Ayr.

3rd November, 1925.

1038 T. Haffey
Royal Newfoundland Regiment

Sir,

I am directed to enclose herewith medical board report held on the above named pensioner on the 23rd October. As a result of this examination the Board assessed the degree of disablement on account of Mitral Stenosis at the rate of 50% for a period of 12 months.

Mr. Haffey's pension expired on the 24th September and I shall be glad to have further instructions as soon as possible.

I am, Sir,

Your obedient Servant,

Encl.

Secretary.

The Secretary,
Board of Pension Commissioners,
St. John's,
NEWFOUNDLAND.

K.T. . .

M.S.I.A/15757/6.

30 OCT 1925 October, 1925.

Sir,

HAFLEY, T. late No.1038, Royal Newfoundland Regt.
34, Russell Street, Ayr, N.B.

I am directed to enclose the medical documents relative to the case of the above named ex-member of the Newfoundland Forces, who was examined by a Medical Board at Glasgow on the 23rd instant, in accordance with your request of the 29th September, 1925. As a result of the examination the Board assessed the degree of disablement on account of Mitral Stenosis at the rate of 50% for a period of twelve months.

I am, Sir,

Your obedient Servant,

(Sgd.) J. WALLACE,

for Director General of Medical Services.

The High Commissioner for Newfoundland,
Dominion of Newfoundland,
58, Victoria Street,
London. S.W.1.

NEWFOUNDLAND CONTINGENT

Telegram full-text from the Board of Pensions Commissioners, St. John's.

NO _____ Dated the 3rd November, 1924, Decoded By _____ Checked By _____

With reference to your despatch 20th September Haffey awarded 50%
12 months Major Greene 50% 12 months board cannot be responsible for
treatment by officers' doctor.

PENGOM.

CABLEGRAM

No. _____



No. of Message _____

Date, _____

Telephone _____

The following **CABLEGRAM** received, at 6107 M. "**Via Commercial Cables,**"

AJM 33 GOVT STJOHNS NF 14/13

HANDLED IN ON 7³⁰ AT London

RURALITY LONDON

YSMAYHAFFEY BEPOSWACIU VAKXYVUXEK MUPFALYMNNS IKARRWACIU
 VAKXYVUXEK MUPFACAXTI DASBEPLATH UANILCUAGY OBIADEYFVV
 PENCOM

*With reference to your despatch 20th September Haffey
 awards 50% 12 months Major Greene 50% 12 months
 boards cannot be responsible for treatment by
 Officers doctor*

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

November 20, 1925.

IN REPLY REFER TO

N^o N-1038

The High Commissioner for Nfld.;
58, Victoria Street,
Westminster, S.W.1.

1038 T. Haffey.

Sir:

I have the honour to refer to the attached report regarding the above noted, dated 23/10/25.

It is noted that his assessment has been increased to 50%, a 20% increase over last year. Both reports appear to be about the same with the exception that in last year's report there is good exercise tolerance, while this year's report says fair.

It would seem that last year's assessment is too little, or this year's too much.

I have the honour to be,

Sir,

Your obedient Servant,


Secretary.

VLD

34 Russell Street,

Ayr.

Dec. 11th 1925

Dear Sir

Just a line to ask if you have received any word from Newfoundland re. my pension. Hoping I am not putting you to too much trouble.

I am,

Yours Respectfully,

Thomas Haffey

34 Russell Street,

Apr.

26th Dec. 1925

Dear Sir,

As there was no receipt form enclosed in my letter I am writing by return of post to acknowledge cheque and at the same time to thank you for all the trouble you have had over it.

I am,

Yours Respectfully,
Thomas Haffey.

TRANSLATION OF CABLE SENT TO BOARD OF PENSION COMMISSIONERS, ST. JOHN'S

DATED 9/12/25

With reference to your letter 20th November 1924 - Haffey - not understood no increase of - award over - last year see - your telegram 3rd November - 1924 fullstop - Please forward as soon as possible supply of - forms Monthly - Statement of Accounts men -

RURALITY

CABLEGRAM

Line No. _____

No. of M. _____



Prefix. ●	Code.	(Office of Origin and Service Instructions.) Via Commercial	For Postage Stamps.
	Words.			Charge.
	£	s.	d.
	9/12/25		
Sent At.....		To.....	By.....

This form will be accepted
at any Post Office.

To **PENCOM
ST. JOHN'S
(NEWFOUNDLAND)**

ON NEWFOUNDLAND GOVERNMENT SERVICE**HIGH COMMISSIONER FOR NEWFOUNDLAND**

**YSUETWOYIK HAPPEY NUXIONIZSO BEPOSOGCSI LARHERATSY SWOKOYALXU
KEEDSIBYTA ALLSYSPULO HUREEMUELS SHOLCHMDPO**

MURALITY**(Charge to Military Section)**

**Office of the High Commissioner for Newfoundland,
58, Victoria Street, S.W.I.**

**NOT TO BE
TELEGRAPHED.**

Having read the Conditions printed upon the back of this form, I request that the above Telegram may be forwarded according to the said Conditions, by which I agree to abide.

Signature.....

Address.....

**CABLE ADDRESSES, REGISTERED IN ANY PART OF THE WORLD (OR WITH ANY COMPANY),
ARE AVAILABLE OVER THE COMMERCIAL CABLES.**

[For List of Stations r.r.o.]

YMYKIWOYIK

Reference my
telegram 9th Decemb
1038

HAFLEY

Haffey

OLLEM

Please expedite reply

34 Russell Street

NYC.

Dec. 21st 1925.

Dear Sir,

As my last letter to you was not
acknowledged I am writing once more
to ask if there is any word from
Newfoundland re my pension.

I am,
Yours Respectfully,
Thomas Haffey

23rd December, 1925.

Dear Sir,

I am directed to acknowledge the receipt of your letter of the 21st December and to inform you that a reply is still awaited from the Board of Pension Commissioners, Newfoundland, regarding your pension.

A further cable is being sent to-day and upon receipt of a reply I shall get in touch with you again.

Yours faithfully,

Secretary.

T. Haffey, Esq.,
34, Russell Street,
AYR.
N.B.

CABLEGRAM

Line No.

No. of M.



Refix.	Code.	(Office of Origin and Service Instructions.) Via Commercial	For Postage Stamps.
	Charge.		
Words.	£	25/12/25	This form will be accepted at any Post Office.
	s.		
	d.		
Sent At.....		To.....	By.....

To **PENCOM**
ST. JOHN'S
(NEWFOUNDLAND)

ON NEWFOUNDLAND GOVERNMENT SERVICE**HIGH COMMISSIONER FOR NEWFOUNDLAND****YMYKIWOYIK HAFFEY OLLEM****RURALITY****(Charge to Military Section)****TRANSLATION**

Reference my telegram 9th December 1938 - Haffey - Please expedite
reply

**Office of the High Commissioner for Newfoundland,
58, Victoria Street, S.W.I.**

NOT TO BE
TELEGRAPHED. }

Having read the Conditions printed upon the back of this form, I request that the above Telegram may be forwarded according to the said Conditions, by which I agree to abide.

Signature.....

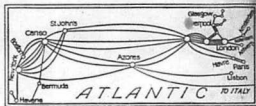
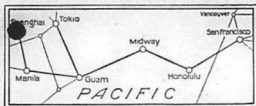
Address.....

**CABLE ADDRESSES, REGISTERED IN ANY PART OF THE WORLD (OR WITH ANY COMPANY),
ARE AVAILABLE OVER THE COMMERCIAL CABLES.**

[For List of Stations r.r.o.]

COMMERCIAL CABLES 934

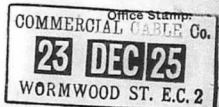
No. _____



Please send your reply

"Via COMMERCIAL,"

Messages may be handed in at the Company's own offices or at any Postal Telegraph Office in the United Kingdom.



The following CABLEGRAM received, at

9:55 PM

M. **"Via Commercial Cables,"**

J/S UX101 GOVT STJOHNSMF 10/9 BE

RURALITY LONDON

YSZURWOYIK HAFFEYCAXTI AINLUAXLYU WACIUQJDYC HIEOTVUXEK

MUFFA

PENCOM

(telegram)
With reference your letter 23rd December #1038
Haffey agrees agree with assessment 50
percent for 12 months

18/13 11/12

RECEIVED IN ON

23rd

AT

5.15 pm

No Inquiry respecting this Message can be attended to without the production of this paper. Repetitions of doubtful words should be obtained through the Company's Offices, and not by **direct** application to the Sender.

24th December, 1925.

Dear Sir,

I am directed to inform you that authority has been received from the Board of Pension Commissioners, Newfoundland, for the payment to you of a pension at the rate of 50% for a period of twelve months. A cheque for £29.19.9 (twenty-nine pounds nineteen shillings and nine-pence) being the amount due for the period 15th September to ^{30th} 13th Nov. 1925, is enclosed herewith. Kindly acknowledge receipt.

Yours faithfully,

Encl.

Secretary.

T. Haffey Esq.,
34, Russell Street,
Ayr. N.B.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO
No M-1038

December 16, 1925.

The High Commissioner for Nfld.,
58 Victoria Street,
Westminster, S.W.1.

1038 T. Haffey.

Sir:

I have the honour to refer to your cable of the 9th inst.
regarding assessment of pension in respect of the marginally
named man, and to state that the Board agrees with the assessment
made at his recent re-examination, that is, 50% for 12 months.

I have the honour to be,

Sir,

Your obedient Servant,


For Secretary,

VMD

1038 T. Haffey
Royal Newfoundland Regiment

10th Friday, 1926.

Sir,

I have the honour to enclose herewith copy of a Medical Board Report held on the above named pensioner on 7th September. As^a result of this examination the Board assessed the degree of disablement on account of Mitral Stenosis at the rate of 60% for a period of twelve months.

Mr. Haffey's pension expired on 14th September and it is requested that further instructions may be transmitted as early as possible.

I have the honour to be,

Sir,

Your obedient Servant,

Encl.

The Secretary,
Board of Pension Commissioners,
St. John's,
NEWFOUNDLAND

Secretary.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.
September 30, 1926

IN REPLY REFER TO
N^o W-1038

The High Commissioner for Nfld.,
58, Victoria Street,
Westminster, S.W.1

1038 Thomas Haffey,
Royal Newfoundland Regiment

Sir:

See handle 41.
only

I have the honour to acknowledge receipt of your letter of the 10th instant, enclosing report of Medical Board held on the marginally noted man, and to state that the Medical Adviser to our Board approves of assessment of disability at 60% for a period of twelve months.

I have the honour to be,

Sir,

Your obedient servant,

W. J. P. Ke.
Secretary

\$69.⁰⁰
10/19
27. 11. 2

VMD

October 14th., 1926.

Dear Sir,

I am directed to inform you that authority has been received from the Board of Pension Commissioners, Newfoundland, authorising the payment to you of a pension at the rate of 60 per cent. (\$69.00 per month) for the period of 12 months.

A cheque for £7.11.2d., being the amount due for the period 15/9/26 to 30/9/26, is enclosed herewith. Kindly acknowledge receipt.

Yours faithfully,

Secretary.

T. Haffey, Esq.,
54, Russell Street,
Ayr,
Scotland.

63 Woodfield Crescent,

Avon

Nov 25th 1926.

Dear Sir,

Would you kindly send on my pension
to the above address as I have now taken up
my abode here.

Yours^{tr} Respectfully
Thomas Haffey

1038 T. Haffey
Royal Newfoundland Regt.

27th August, 1927.

Sir,

I am directed to enclose herewith Medical Board Reports relating to the case of the above named pensioner and to ask that you will be good enough to arrange for his medical re-examination as early as possible.

Mr. Haffey's address is 63, Woodfields Crescent
AYR.
SCOTLAND.

I am, Sir,

Your obedient Servant,

Encl.

Secretary.

The Director-General of Medical Services,
Ministry of Pensions,
Sanctuary Buildings,
18, Great Smith Street,
S.W.1.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO
N^o M-1038.

October 11th, 1927.

The High Commissioner for Nfld.,
58, Victoria Street,
Westminster, S W 1.,
London, ENGLAND.

Re:- 1038, Thomas Haffey,
Royal Nfld., Regt...

Sir:-

I have the honour to acknowledge receipt of your letter of September 16th., enclosing report of Medical Board held on the marginally named man, and to state that the Medical Adviser to our Board approves of the assessment of disability at 60%, for a period of twelve months.

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

W. A. P. H.
Secretary.

15/9/27 - 31/10/27
BT:

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO
N^o M-1038.

October 11th, 1927.

The High Commissioner for Nfld.,
58, Victoria Street,
Westminster, S W 1.,
London, ENGLAND.

Re:- 1038, Thomas Haffey,
Royal Nfld., Regt...

Sir:-

I have the honour to acknowledge receipt of your letter of September 16th., enclosing report of Medical Board held on the marginally named man, and to state that the Medical Adviser to our Board approves of the assessment of disability at 60%, for a period of twelve months.

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

[Handwritten signature]
Secretary.

15/9/27 - 31/10/27

BT:

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

Pension No.

Awards renewals etc.,

Newfoundland pensioners residing in the United Kingdom.

Name: THOMAS HAFLEY
Rank: PRIVATE Regt. No. 1038
Address:
Date of Medical Re-Board: SEPTEMBER 13th, 1927
Disability for which pensioned: MITRAL STENOSIS
Degree of Disablement: 60% Period: 12
New award expires: September 14th, 1928
Marital Status: MARRIED

Pension awarded as follows:

Allowance for self.....	\$	<u>45.00</u>	per month
" " Wife.....	\$	<u>15.00</u>	"
" " 1st child....	\$	<u>9.00</u>	"
" " 2nd Child....	\$	_____	"
" " _____ Childrer.	\$	_____	each. \$ _____
Total monthly allowance.....	\$	<u>69.00</u>	

Remarks:


Secretary.

31st October, 1927.

Dear Sir,

I am directed to inform you that authority has been received from the Board of Pension Commissioners, Newfoundland, notifying the award to you of a pension at the rate of 60% (\$69.00 per month) for a further period of twelve months.

I am accordingly enclosing herewith cheque for £21. 14. 10. being amount due for the period 15/9/27-31/10/27.

Yours faithfully,

Encls.

Secretary.

Mr. T. Haffey,
63, Woodfields Crescent,
Ayr, N.B.

Sp Mc Stewart Ward,
Cape County Hospital,
March 25th 1928

Dear Sir,

Would you please forward my letter containing
cheque for pension to me at the above address

+ Oblige
Yours Respectfully
Thomas Haffey

63 Woodfield Crescent,

Ayr.

Monday 23rd Apr.

Dear Sir,

I am writing to ask if you would do me a great favour. My wife is just recovering from a serious operation and the Doctor deems it necessary for her to get away for a change. After meeting Doctor's bills, expenses for nourishments, taxes, etc. funds are very low, so I am appealing to you to ask if you would advance me three months pension money to enable me to get my wife away for a good holiday.

Should you see your way to grant me this favour I will be eternally grateful to you for same.

I am,

Yours in anticipation,
Thos. Haffey.

26th April, 1928.

Dear Sir,

I am directed to acknowledge receipt of your letter of the 23rd April and to inform you that under the Newfoundland War Pensions Act, pension can be only paid monthly at the end of each month and the High Commissioner therefore regrets that he is unable to accede to your request.

Yours faithfully,

Secretary.

Mr. T. Haffey,
63, Woodfield Crescent,
Ayr,
Scotland.

28th July, 1923.

Sir, 1038, T. Haffey,
Royal Newfoundland Regiment.

I am directed to enclose herewith Medical Board report relative to the case of the above named pensioner and to ask that you will be good enough to arrange for his medical re-examination as early as possible. Mr. Haffey's address is 63, Woodfield Crescent, Ayr, Scotland.

I am, Sir,

Your obedient Servant,

Encls.

Secretary.

The Director General Medical Services,
Ministry of Pensions,
Sanctuary Buildings,
18, Great Smith Street,
S.W. 1.

20th August, 1928.

1038 T. Haffey
Royal Newfoundland Regiment

Sir,

I have the honour to enclose herewith medical board report held on the above named at Glasgow on 14th August, as a result of which disability was assessed at the rate of 40% for a further period of twelve months.

Mr. Haffey's pension expires on the 14th September and I am to ask that your further instructions may be transmitted in due course.

I am, Sir,

Your obedient Servant,

Encl.

The Secretary,
Board of Pension Commissioners,
St. John's,
NEWFOUNDLAND.

Secretary.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO
No. M-1038.

September 7th., 1928.

The High Commissioner for "fld.,
58, Victoria Street,
Westminster, S W 1.,
London, ENGLAND.

Re:- 1038, Thomas Haffey:
Royal Newfoundland Regt:;;;

Sir:-

I have the honour to acknowledge receipt of your communication of August 20th., enclosing Report of Medical Board held on the marginally named on August 14th., 1928, and to state that the Medical Adviser to this Board has approved of the assessment of disability at 40%, for a period of twelve months.

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


Secretary.

BT:

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

Pension No.... 1341

Awards renewals etc.,

Newfoundland pensioners residing in the United Kingdom.

Name: THOMAS HAFPEY.

Rank: PTE: Regt. No. 1038

Address: c/o High Commissioner for Nfld.,

Date of Medical Re-Board: 14.8.28

Disability for which pensioned: MITRAL STENOSIS

Degree of Disablement: 40% Period: 12 MONTHS.

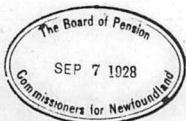
New award expires: 14. 9.29

Marital Status: MARRIED.

Pension awarded as follows:

Allowance for self.....	\$	30.00	per month
" " Wife.....	\$	10.00	"
" " 1st child....	\$	6.00	"
" " 2nd Child....	\$		"
" " Children.	\$		each. \$
Total monthly allowance.....	\$	46.00	

Remarks :



[Handwritten Signature]
Secretary

17th September, 1928.

Dear Sir,

I am directed to inform you that authority has to-day been received from the Board of Pension Commissioners Newfoundland for the payment to you of a pension at the rate of 40% (\$46.00 per month) for a further period of twelve months expiring on the 14th September, 1929.

Yours faithfully,

Secretary.

Mr. T. Haffey,
63, Woodfield Crescent,
Ayr, Scotland.

10th August, 1929.

Sir, 1038, T. Haffey,
 Royal Newfoundland Regiment.

I am directed to enclose herewith Medical documents relating to the case of the above named pensioner and to ask that you will be good enough to arrange for his medical re-examination as early as possible. Mr. Haffey's address is 63, Woodfield Crescent, Ayr, Scotland.

I am, Sir,

Your obedient Servant,

Encls.

Officer Paying Newfoundland Pensions.

The Director General
of Medical Services,
Ministry of Pensions,
Sanctuary Buildings,
18, Great Smith Street,
S.W. 1.

Ref. Pension No. 1341.

11th September, 1929.

Sir,

1038, T. Haffey,
Royal Newfoundland Regiment.

I have the honour to enclose herewith medical board report held on the above named pensioner at Glasgow on 6th September, as a result of which pension was assessed at the rate of 40% in respect of his disability, Mitral Stenosis, for a period of more than one year.

Mr. Haffey's pension expires on the 14th September and I am to ask that your further instructions regarding payment may be transmitted as early as possible.

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

Encl.

Officer Paying Newfoundland Pensions.

The Secretary,
Board of Pension Commissioners,
St. John's,
Newfoundland.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

IN REPLY REFER TO

N^o 11-1038.



ST JOHN'S,
NEWFOUNDLAND.

October 14th., 1909.

The High Commissioner for Nfld.,
53, Victoria Street,
Westminster, S W 1.,
LONDON, ENGLAND.

Re:- 1038, Thomas Hiffey,
Royal Newfoundland Regt:

Dear Sir:-

I have the honour to acknowledge receipt of your communication of September 11th., enclosing Report of Medical Board held on the marginally named on September 6th., 1909, and to state that the Medical Adviser to this Board has approved of the assessment of disability at 40%, for a period of twelve months.

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


Secretary.

BT:

26 Peablos Street.

Agv

Dec. 24th 1929.

Dear Sir,

Kindly note change of address.

+ Oblige,
Yours Truly,
Thos. Hafey.

9th July, 1930.

Sir, 1038, T. Haffey,
 Royal Newfoundland Regiment.

I am directed to enclose herewith Medical Documents relating to the case of the above named pansioner and to ask that you will be good enough to arrange for his medical re-examination as early as possible. Mr. Haffey's address is 26, Peebles Street, Ayr, N.B.

I am, Sir,

Your obedient Servant,

Encl.

Officer Paying Newfoundland Pensions.

The Director General
of Medical Services,
Ministry of Pensions,
Sanctuary Buildings,
18, Great Smith Street,
S.W. 1.

Ref. Pension No. 1341.

5th August, 1930.

Sir, 1038, T. Haffey,
Royal Newfoundland Regiment.

I have the honour to enclose herewith report of Medical Board held on the above named pensioner at Glasgow on the 29th July, as a result of which pension was assessed at the rate of 40% in respect of his disability, Mitral Stenosis, for a period of twelve months.

Mr. Haffey's pension expires on the 14th September and I shall be glad to have your further instructions regarding this case as early as possible.

Encl.

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

The Secretary,
Board of Pension
Commissioners,
St. John's,
Nfld.

Officer Paying Newfoundland Pensions.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO
No 1038

September 19th., 1930.

Officer Paying Mfld., Pensions,
Office of the Commissioner,
88, Victoria Street,
Westminster, S W 1.,
London, ENGLAND.

Re:- 1038, Thomas Maffey,
Royal Mfld Regiment.....

Sir:-

I have the honour to acknowledge receipt of your letter of August 5th., enclosing report of Medical Board held on the marginally named on July 29th., 1930, and to advise you that the assessment of disability at 40% for a period of twelve months has been approved.

Authority for payment of pension is enclosed herewith.

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


Secretary.

BT:

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

1038

Pension No.

awards renewals etc.

Newfoundland pensioners residing in the United Kingdom.

Name: **THOMAS HAFPEY**

Rank: **PTE** Regt. No. **1038**

Address: **C/O HIGH COMMISSIONER'S OFFICE**,

Date of Medical Re-Board: **JULY 29, 1930**

Disability for which pensioned: ... **MITRAL STENOSIS**

Degree of Disablement: ... **40%** Period: **12 months**.

Now award expires: ... **SEPTEMBER 14, 1931**,

Marital Status: **MARRIED**

Pension awarded as follows:

Allowance for self.....	\$	<u>30.00</u>	per month
" " Wife.....	\$	<u>10.00</u>	"
" " 1st child....	\$	<u>6.00</u>	"
" " 2nd Child....	\$	<u> </u>	"
" " Children. \$		<u> </u>	each..\$
Total monthly allowance.....	\$	<u>46.00</u>	

Remarks:

Sept., 19, 1931.



Secretary.

1st October, 1930.

Dear Sir,

I am directed to inform you that authority has to-day been received from the Board of Pension Commissioners for Newfoundland for the payment to you of a pension at the rate of 40% (\$46.00 per month) for a further period of twelve months expiring on the 14th September, 1931.

I am accordingly enclosing herewith cheque for £5. 0. 9. being balance due to you for the month of September, namely from the 15th to the 30th September. Kindly acknowledge receipt.

Encls.

Yours faithfully,

Officer Paying Newfoundland Pensions.

Mr. T. Haffey,
26, Peebles Street,
Ayr, N.B.

26 Peables Street

Ayr.

July 2nd 1951

Dear Sir,

During a conversation with one of our boys it came to my knowledge for the first time that I ought to have notified you of the birth of my second child Margaret. She is now eight years of age and I was not aware of the fact that I was entitled to pension allowance for her. I am enclosing birth certificate and will feel greatly obliged to you if you will kindly give the matter your attention.

Thanking you for your kind consideration in the past and hoping to hear from you at your convenience

I am,
Yours Truly
Thomas Claffey

23rd June, 1931.

Dear Sir,

I am directed to acknowledge receipt of your letter received to-day (undated) enclosing Birth Certificate of your second child. I don't know how you gathered the erroneous impression that you are only entitled to pension allowances for your first child only and I would advise you that your letter under reference is the first intimation I have received of your having more than child. All the certificates which you completed and sent to this Office (at least since I took charge of pensions in November, 1928) give details of one child only, and you have been paid pension accordingly.

I am now enclosing herewith a blank form of certificate which kindly complete, giving full particulars of your two children besides filling in the remaining details and return to me at your earliest convenience. I am taking this matter up with the Board of Pension Commissioners at St. John's, but before doing so I wish to draw your attention to the irregularity of your papers insofar as the spelling of your surname is concerned. Your surname is recorded at this Office as "HAFFEY" whereas your name is given in your latest letter as "HAFETY" and the spelling of the surname on the Birth Certificate of your daughter Margaret is "HEFFEY". I am returning the Birth Certificate and your letter herewith for you to have your correct surname stated and when this has been done, kindly return both documents to me, so that I may take up the matter with the pension authorities at Newfoundland as early as possible.

Encls.

Yours faithfully,

Mr. T. Haffey,
26, Peebles Street,
Ayr, N.B.

Officer Paying Newfoundland Pensions.

3rd July, 1931.

Sir, 1038, T. Haffey,
 Royal Newfoundland Regiment.

I am directed to enclose herewith Medical Documents relating to the case of the above named pensioner and to ask that you will be good enough to arrange for his medical re-examination as early as possible. Mr. Haffey's address is 26, Peebles Street, Ayr, N.B.

I am, Sir,

Your obedient Servant,

Encls.

Officer Paying Newfoundland Pensions.

The Director General
of Medical Services,
Ministry of Pensions,
Sanctuary Buildings,
18, Great Smith Street,
S.W. 1.

Ref. Pension No. 1341.

14th July, 1931.

Sir,
1038, T. Haffey,
Royal Newfoundland Regiment.

I have the honour to enclose herewith copy of a letter dated 2nd July, 1931, received from the above named pensioner, together with a Birth Certificate in respect of his second child, namely Margaret Dempster Wilson Haffey, who was born on the 11th March, 1928. This case is similar to those of Pensioners Abbott, Kennell, Redinott and others, as Mr. Haffey's letter, under reference, is the first intimation I received of the existence of his second child, and all Life Certificates, excepting the last one, received from him, incorrectly showed one child only.

I am now to ask that you will let me have your instructions regarding the payment of an allowance to pensioner in respect of his second child at your earliest convenience and at the same time kindly return Birth Certificate when finished with to me, for transmission to Mr. Haffey.

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

Encls.

Officer Paying Newfoundland Pensions.

The Secretary,
Board of Pension Commissioners,
St. John's,
Newfoundland.

Ref. Pension No. 1341.

7th August, 1931.

Sir, 1038, T. Haffey,
 Royal Newfoundland Regiment

I have the honour to enclose herewith report of Medical Board held on the above named pensioner at Glasgow on the 29th July, as a result of which pension was assessed at the rate of 40% in respect of his disability, Mitral Stenosis, for a period of twelve months.

Mr. Haffey's pension will expire on the 14th September and I shall be glad to have your further instructions regarding this case as early as possible.

I have the honour to be,

Sir,

Your obedient Servant,

Encl.

Officer Paying Newfoundland Pensions.

The Secretary,
Board of Pension Commissioners,
St. John's,
Newfoundland.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO

N^o 1341

August 10th., 1931.

J.L. Murphy, Esq.,
Officer Paying Nfld., Pensions,
58, Victoria Street,
Westminster, S W 1.,
London, ENGLAND.

Re:- 1038, Thomas Haffey:

Dear Sir:-

With reference to the application of Mr. Haffey for allowance for a child, Margaret, born March 11th., 1923, I have to inform you that the Board has ordered that the sum of \$6.00 per month be paid, but same is to be paid from July 1st., 1931 only, as this is the first application made for an allowance for this child.

The Birth Certificate is returned herewith .

Yours very truly,


Secretary.

BT:

25th August, 1931.

Dear Sir,

I am directed to inform you that instructions have to-day been received from the Board of Pension Commissioners for Newfoundland to pay you an additional allowance in respect of your second child, Margaret, at the rate of \$6.00 per month as from the 1st July, 1931, and I am accordingly enclosing herewith cheque for £1. 4. 8. (equivalent of \$6.00) being amount due to you in this connection for the period 1-31.7.31. Kindly acknowledge receipt.

In accordance with these instructions your pension will be increased from \$46.00 to \$52.00 per month as from the 1st August; a cheque for £10. 13. 8. (equivalent of \$52.00) will be sent you on the 31st August, and thereafter monthly at the end of each month while your present award remains unchanged. Birth Certificate in respect of your second child is also enclosed.

Encls.

Yours faithfully,

Officer Paying Newfoundland Pensions.

Mr. T. Haffey,
26, Peebles Street,
Ayr, N.B.

24 Peables Street,

Ux
August 26th

Dear Sir,

I have today received your letter also enclosed
cheque for £1.4.8. The amount granted by you per month
for my child Margaret In view of the fact that I have
not drawn any pension money for my child during the past
eight years and five months I think I am entitled to be
recompensed for that period. Would you kindly write me at
at your convenience

+ Oblige,
Yours Truly,
Thomas Haffey

27th August, 1931.

Dear Sir,

I am in receipt of your letter of yesterday's date regarding your second child's allowance and in reply would inform you that my instructions from the Board of Pension Commissioners for Newfoundland in this connection are as follows:-

"With reference to the application of Mr. Haffey for allowance for a child, Margaret, born March 11th, 1923, I have to inform you that the Board has ordered that the sum of \$6.00 per month be paid, but same is to be paid from July 1st, 1931 only, as this is the first application made for an allowance for this child."

As I have carried out the Board's instructions in this matter, it is regretted that nothing further can be done. Please return receipt for £1. 4. 8. sent you on 25th instant.

Yours faithfully,

Officer Paying Newfoundland Pensions.

Mr. T. Haffey,
26, Peebles Street,
Ayr, N.B.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO
No. _____

September 7th., 1931.

Officer Paying Newfoundland Pensions,
58, Victoria Street,
Westminster, S W 1.,
LONDON, ENGLAND.

Re:- 1038, T. Haffey,
Royal Nfld., Regiment.

Dear Sir:-

I have to acknowledge receipt of your letter of August 7th., enclosing a completed Medical Examination in the case of the marginally named, and to advise you that the assessment of disability at 40% for a period of twelve months has been approved.

Authority for payment of pension is enclosed herewith.

Yours very truly

Secretary.

BT:

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

Pension No...1341

Awards renewals etc.

Newfoundland pensioners residing in the United Kingdom.

Name: ... THOMAS HAFREY

Rank: ... PTE:..... Regt. No. ... 1038

Address: ... c/o HIGH COMMISSIONER'S OFFICE,

Date of Medical Re-Board: ... JULY 29, 1931

Disability for which pensioned: .. MITRAL STENOSIS ..

Degree of Disablement: ... 40% .. Period: ... 12 months ..

Now award expires: ... SEPTEMBER 14, 1932

Marital Status: ... MARRIED

Pension awarded as follows:

Allowance for self.....	\$ 30.00	per month
" " Wife.....	\$ 10.00	"
" " 1st child....	\$ 6.00	"
" " 2nd Child....	\$ 6.00	"
" " Children.....	\$ each.....	\$
Total monthly allowance.....	\$ 52.00	

Remarks:

September 7th., 1931.


Secretary.

24th September, 1931.

Dear Sir,

I am directed to inform you that as a result of your last Medical Board, authority has to-day been received from the Board of Pension Commissioners for Newfoundland for the payment to you of a pension at the rate of 40% (\$52.00 per month) for a further period of twelve months expiring on the 14th September, 1932.

Yours faithfully,

Officer Paying Newfoundland Pensions.

Mr. T. Haffey,
26, Peebles Street,
Ayr, N.B.

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.



ST JOHN'S,
NEWFOUNDLAND.

IN REPLY REFER TO

No. _____

September 25th.,
1931.

J.L. Murphy, Esq.,
Officer Paying Nfld., Pensions,
58, Victoria Street,
Westminster, S W 1.,
London, England.

Dear Sir:-

With reference to the application of 1038 Thomas Haffey for allowance for a child Margaret, born on March 11th., 1923, I have to inform you that the Board has authorized that the allowance be paid from the date of birth at the appropriate rate.

I would be glad if you would adjust this Account and notify Mr. Haffey accordingly.

Yours very truly,

Secretary.

CCO)BT:

15th October, 1931.

Dear Sir,

With further reference to my letter to you dated 25th August regarding allowances in respect of your second child, I have just received instructions from the Board of Pension Commissioners for Newfoundland to pay you allowances for your second child as from the date of birth, namely, 11th March, 1923, at the appropriate rates up to and including 30th June, 1931, as you have already been paid allowances in this connection as from the 1st July, 1931.

I am accordingly enclosing herewith cheque for £135. 15. 7. being amount due to you for your second child from 11.3.23 to 30.6.31. made up as per the attached statement. Kindly return statement after perusal together with receipt for this amount, duly signed and completed, at your earliest convenience.

Encls.

Yours faithfully,

Officer Paying Newfoundland Pensions.

Mr. T. Haffey,
26, Peables Street,
Ayr, N.B.

Amount		to	with	rate	#	¢
30%	11/2/23	to 14/9/23	6 1/20	@ \$50 =	27.60	
40%	15/9/23	to 14/9/24	12	@ \$600 =	72.00	
50%	15/9/24	to 14/9/26	24	@ \$700 =	168.00	
60%	15/9/26	to 14/9/28	24	@ \$800 =	192.00	
40%	15/9/28	to 30/6/29	33 1/20	@ \$600 =	201.20	
					<u>660.80</u>	= <u>135-15-7</u>

J. H. H. H. H.
 back all as
 2nd child

123.5.9
 512.6.7
 3.3.12

135-15-7

Ref. Pension No. 1341.

15th October, 1931.

Sir, 1038, T. Haffey,
 Royal Newfoundland Regiment

I have the honour to acknowledge receipt of your letter of 25th September authorizing the payment of allowance in respect of his child Margaret to the above named pensioner, as from the date of the child's birth, 11th March, 1923, at the appropriate rate. A cheque for £135. 15. 7. has to-day been sent to Mr. Haffey, and the attached account shows how this amount is made up.

On account of this payment it will be necessary for me to cable the Auditor General for extra credit for October, and towards the end of the month I will ascertain what the excess over £500 will amount to and govern myself accordingly. Trusting this is satisfactory.

Encl.

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

The Secretary,
Board of Pension Commissioners,
St. John's,
Newfoundland.

Officer Paying Newfoundland Pensions.

DEPARTMENT OF VETERANS AFFAIRS

Dept. of Veterans Affairs
War Service Records

Ottawa Ont

Date March 5/63To **●** Copy for H.O. FILE

Attention of

NAME JUDGE, Joseph.

MAR - 6 1963

SERVICE ~~1039~~ ~~ROY. NPID~~ G.P.C. No. 260299
NUMBER ~~REGT.~~ WW1 W.V.A. No.NAVY
ARMY X
R.C.A.F.The DEPARTMENT has received information from
S.P.M.E. St. John's Newfoundland. Feb 26/63

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Feb 13/63
Cause of Death _____
Place of Death Grand Falls, Nfld.Name and Address of next of kin (if known) _____
_____Copies to: W.S.R.
V. I.
~~P.V.~~
~~D.C.~~
H.O.

} Destroy form if advice of death already received.

for
Chief, Central Registry*m j w y e l l*