



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4164 Name Patrick Hammonds Corps R.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Patrick Hammonds
2. What is your full Address? } Madden Cove, St. John's, N.F.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 33 Years 9 Months
5. What is your Trade or Calling? 5. Sisterman
6. Are you Married? 6. Yes
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? } 8. Yes
9. Are you willing to be enlisted for General Service? } 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. Yes

I, Patrick Hammonds do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfill the engagements made.

Patrick Hammonds SIGNATURE OF RECRUIT.
Richard J. ... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 28th day of Nov 1915
 Signature of Attesting Officer Wm. J. ...

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st Bn.
 If enlisted by special authority, such will be attached to the original attestation.
 Date Nov 28 1915 }
 Place St. John's } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Patrick Hanford
 Apparent age 33 years 9 months. Height 5 feet 4 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Andrews Hanford
Madison Cross City St. | Relationship Son

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.
<u>Deceased</u>			

Particulars as to Children

Christian Names	Date and Place of Birth
<u>Clarence Hanford</u>	<u>Oct 4/14 City St.</u>
<u>Alice Hanford</u>	<u>July 2/17 Do.</u>

STATEMENT OF THE SERVICES

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



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. *4164* Name *Patrick Hannaford* Corps *R.C.*

4164

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. *Patrick Hannaford*
- 2. What is your full Address? } 2. *Madden Cove Petty H.*
- 3. Are you a British Subject? 3. *Yes*
- 4. What is your age? 4. *33* Years Months
- 5. What is your Trade or Calling? 5. *fisherman*
- 6. Are you Married? 6. *Yes*
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. *No*
- 8. Are you willing to be vaccinated or re-vaccinated? } 8. *Yes*
- 9. Are you willing to be enlisted for General Service? } 9. *Yes*
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. *Yes*

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

9-28-11-17

Patrick Hannaford SIGNATURE OF RECRUIT.

Robert J. ... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at on this day of 1911

Signature of Attesting Officer

W. J. ...

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date 1911 } Approving Officer.
Place }

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

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

Reg. No. 4164 Rank 1st Lie Name Hammond P.

Attested 28-11-17 Address Madden 6001 Betty St.

Allotment _____ Allottee _____

Date of Allotment _____ Returned from Overseas _____

Embarked for Overseas _____ Cause _____

Dec 7-12-17 Enr. 11-12-17, 2nd 9 mos. 17/12/17
Granted leave 2/11/17-1/11/18, Reto. 1/1/18
1st Lie. Effect 2/1/18

Army Form B. 192.

No. 4164 Name *Hannaford P.*

Sqn., Batty., or Company } *Royal Newfoundland* Corps

Date of enlistment } *28-11-17* G.C. 2 3/4 Badges

Service or Proficiency Pay } *Good* Character

Date of last entry in Company Conduct Sheet }

No. and date of last drunk }

Period not reckoning towards freedom from extra fine }

Sheet No. *1*

Signature O.C. } *[Signature]*
Company, etc. }

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
									<i>not 29/1/18</i>
									<i>[Signature]</i>
									<i>2/10/18</i>

4164

CD ~~4111~~

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

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

Repatriated on A.F.B179.

4164.

~~4161~~ Patrick Hannaford.

C.R. 4164

Extract of Daily Orders by LT. COL. B.J. BARTON, D.S.O.,
COMMANDING 2nd BATTALION ROYAL NEWFOUNDLAND REGIMENT.

17/1/19.

The following having reported back from the 1st. Battalion
is ~~taken~~ the strength and posted to "H" Co'y from 16/1/19.

#4161 Pte. P. Hannaford.

f

C.R. 4164

Extract of Daily Orders Part 11 Royal Newfoundland
Regiment Depot St. John's dated March 20th/19.

The Discharge of the unde noted on Demobilization has
been CONFIRMED by officer i/o Records on noted date

#4164 Pte. Patrk. Hannford.

18/3/19.

C.R. 4164

Extract from Daily Orders part II, Depot
St. John's dated March 6th., 1919.

The discharge of the undernoted on demobilization
has been APPROVED by C. C. Discharge Depot on 5-3-19.

4164 Pte. P. Hannaford.

C.R. 4164

Extract from Medical Board held on MONDAY AFTERNOON FEB. 24th., 1919
the following were the findings.

Recommended discharge from the Army. A III

~~1919~~ Pte. P. Hannaford.

4164

C.R. 4164

Extract from Medical Board held Saturday Feb. 22, 1919.

4164 Pte. P. Hannaford.

Did not present himself.

C.R. 4164

Extract from Preliminary Report of the Medical Board held on Friday
Feb. 21st 1919.

4164 Pte. Hannaford, P.

Did not present himself.

HANFORD BOND

STRAIGHTMORE QUALITY

4164

C.R. 4164

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

4164 PTE. P. Hannaford.

Did not present himself.

C.R. 4164

Extract from Nominal Roll of the Royal Nfld. Regt.
Embarked S.S. "Corsican" Jan. 30th, 1919.

4164 Hannaford.

C.R. 4164

Extract of Casualties from Pay & record Office, London, dated
Nov. 5/11/18.

#4164 PTE. P. HANNAFORD.

Was discharged from 3rd London G. Hospital on 4/11/18 and granted
furlough to 10/11/18. Fit for 11 Command Depot.

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

C.R. 4164

Extract of Casualties from Pay & Record Office, London, dated

#4164 Pte. B. Hannaford

Discharged from special Div. Mil. Hospital, Chisleton. Classified
1. Duty. No furlough granted.

A.F.W.3016, No.10/36.

C.R. 4164

Oct. 16th, 1918

Mr. Andrew Hannaford
Maddox Cove, Petty Har

Dear Sir:-

I beg to inform you that additional information concerning No. 4164, Private Pat. Hannaford, has been received through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that he is now progressing favourably,

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 4164

Extract from War Office List. No. G. 1710 dated 10/30/18.

#4164 Pte. P. Hannaford.

WOUNDED 28/3/18.

BQ.

HANNAFORD BOND

G.R. 4164
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T., or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address _____ Dept of M^t

Line Number	Rcd	By	Sent	by	Check

Dated

Oct 5th, 1918

To Andrew Hamford, Maddox Cove, Petty Hr.

Regret to inform you that Record Office, London, officially reports No. 4164, Private Patrick Hamford at 3rd London General Hospital Wandsworth suffering from G.S.W. right shoulder

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Minister of Militia.

C.R. 4164

Extract from Casualties received from Pay & Record
Office, London.

Admitted to ~~the~~ 3rd London General Hospital, Wandsworth.
2-10-16.

4164 Pte. P. Hannaford.

G.S.W. R. Sloulder.

51
4164

Extract from Casualties List No. H.A. 29631.

4164 Pte. P. Hannaford.

1st Nfld. R. Ad. 8 Sty. H. Wimereux 29 Sept. 18

G.S.W. Shldr. R. Sev.

M.M.

C.R. 4164

Extract from Daily Orders, UNIT, in the field, dated 31/7/18.

#4164 L/C P. Hanaford

REVERTED TO RANKS AT HIS OWN REQUEST 15/7/18.

C.R. 4164

Extract from Nominal Roll to B.E.F. embarked
Folkestone, 2-7-18

#5164 L/Cpl. P. Hannaford.

C.R. 4164

Extract of Nominal Roll Draft H. Company embarked S.S.

"Florizel" Jan. 29th. 1918.

4164 L/Cpl. Hanaford. J.

C.R. 4164

Extract of Daily Orders part 11, from Unit
4/1st Royal Newfoundland Regiment, Headquarters.
dated January 24, 1918.

#4164 Pte. P. Hannaford.

To be Lance Corporal, with effect from 24/1/18.

4164
C.R.

Extract from Daily Orders Part 11 Unit The Royal
Mfld. Regt. Nov. 29th, 1917.

4164 Pte. P. Hannaford.

Attested for General Service with the Mfld. Regt. With
effect from Nov. 26th, 1917.

P. Hanniford

.R. 4164

P. RE

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.

1. Unit and Corps. *Royal N.F. 2 B*
2. Regt. No. *H.164* 3. Rank. *Pvt*
4. Name *Hannaford P. A.*
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade or Occupation }
 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps; with Regt. Nos.
 (b) Date of Discharge;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (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. *Y.S.W Right arm Oct 1918*
12. Place of origin of disability. *Belgium*
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. *simple flesh wound right shoulder*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | yes | |
| (ii.) Previous active service | N.Y. | |
| (iii.) Climate in pre-war service | N.Y. | |
| (iv.) Ordinary military service before the war | N.Y. | |
| (v.) Serious negligence or misconduct on the man's part. } | N.Y. | |

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

scar right shoulder
 healed no sensibility

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.)

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.

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?

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

Repatriation

Worthington Capt
 Rouse

Station *Hazleydown*

Medical Officer in charge of case.

Date *18-12-19*

* 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

Form to be filled in by the Issuer of Warrant.

When the names of the party are too numerous, the name of the person in charge and the number (in words) of the men of each rank need only be entered in these columns.

Wives and families of Warrant Officers, Non-Commissioned Officers and Men on the MARRIED ROLL.

Regiment or Corps.	Squadron, Battery, or Company.	REG. NOS., RANK AND NAMES.	NAMES.	Children.	
				Sex.	Age.
<u>4164</u>		Plc Hammalord R. Agel.	7		

Authority for journey:—

all 500 gnaie
S. H. W. Angley
Capt Rame

Registrar, R.A.M.C.F.
3rd London General Hospital,
WANDSWORTH, S. W.

(Signature of Officer)

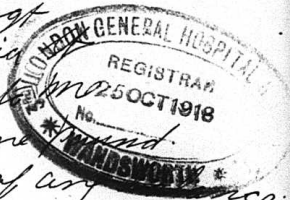
THIRD LONDON GENERAL HOSPITAL.

TELEPHONE:
BATTERSEA 3085.

WANDSWORTH, S.W. 18.

To Paymaster Oct 25th.
R W Newfoundland. 1918.

Regt
58 Victoria



Please permit to pay
the sum of one pound
on account of any
that may be due to me.

No 4164.

Pte W P. Ganaferd

Received
25/11/18
9/12/18
33/12/18
approved

Small cap
JHC

FILE
BRANCH
INITIALS
P.L.D.

Registrar, R.A.M.C.
3rd London General Hospital
WANDSWORTH, S.W.

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

POST OFFICE TELEGRAPHS.



BYRKA SPOTTISWOODE, LTD., Lond.

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

Office of Origin and Service Instructions.

NEWFOUNDLAND CONTINENT

PAY BY RECEIPT

15 JAN 1919

Charges } s. d.
to pay }



5/Jan
14-1-19
8720

OHM

Chisleton Camp

Handed in at 2.45^M Received here at 4.22^M

TO

Records Newfoundland Regt
58 Victoria St London

N 8676/18 14/1/19 aaa wire immediately
instructions as to disposal of
Rte ~~Hannaford~~ P 4164 1st newfound-
land Regt W 3016 sent st ulto ofc
Special Hospit Chisleton

(Admitted ex Southern Command Sept 16th 18 ~~Steno~~ O.S. S.C. 16th 18

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 consider 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.

1. Unit and Corps..... **ROYAL NEWFOUNDLAND.**.....
2. Regt. No. **4264** 3. Rank..... **PTB.**.....
4. Name **HANNAFORD P.**.....
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade }
 or Occupation }
- 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 (b) on field service
 (c) on duty (d) off duty ?
- (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (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 B (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. **G.S.W. RT. ARM.**
OCT. 1918.
12. Place of origin of disability. **BELGIUM.**
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. **SIMPLE FLESH WD. RT. SHOULDER.**

14. State whether the disabilities are (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 }
 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, &c., 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? **SCAR RT. SHOULDER HEALED NO DISABILITY.**

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

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— **REPATRIATION.**

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

J. B. O'RIELLY, CAPT. R.A.M.C.

Medical Officer in charge of case.

Station

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.

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. **G.S.W. RT. SHOULDER.**

(b) The present condition thereof.

SEE SECT 15. SHOULDER FEELS DEAD WHEN FIRST WAKING. GETS ALL RIGHT AFTER.

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
- Give details :

(a) Attributable to

(b) Aggravated by

YES.

NO.

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

G.S.W.

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) 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).

LESS THAN 20%

(c) 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?

YES.

Opinion of Military Member in case of disagreement.

OR

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

"Alli"

(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. 179c?

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:—

H.S. FRASER

{ President or Chairman.

J.B. TAIT

Station ... ST. JOHN'S.

L.PATERSON. MAJOR

} Members.

Date ... FEB. 24TH. 1919.

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

Station ... FEB 24 1919

(SGD) CLUNY MACPHERSON, MAJOR

} Only applicable in cases of Patients in Hospitals.

Date ... No: ...

Officer in charge, Central Hospital.

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

O.C. Discharge Centre.

Date

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.
4169	7/c	Hannaford P.	£2 50	

I have the honour to be, Sir,
~~for ever, your obedient servant,~~
Your obedient servant.

Date

28-6-16

P Hannaford

No. 10/36 Date 31-12-1918

- * (1) To the Officer i/c Records } 56 Victoria
 - * (2) The Officer Commanding } 131st
 - * (3) The Paymaster } 57 Victoria
- * Strike out that which is inapplicable.



Regimental No. 4164

Rank and Name Pte Hannaford V (Admitted 16/11)

Regiment or Corps 10th New Frontiers Regt

has been granted a furlough from No furlough granted
Re-admitted from a Comm. Depot

His address while on leave will be _____

- I consider he is fit for
- * I. DUTY.
 - * II. COMMAND DEPOT.
 - * III. EMPLOYMENT.
- * Strike out that which is inapplicable.

Officer in charge C. J. de L... Hospital

SPECIAL DIV. MIL. HOSP., CHISELDON Station.

Four copies to be made, and one copy sent to each Officer mentioned above and one filed in the office.
In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance, two copies of Army Form W. 3016 will be sent to the Officer in charge Records and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. shown in the Schedule.

I, the undersigned, do hereby
certify that I did not
revert to the ranks in
order to avoid a
Court-martial.

~~7~~
15-7-18.

~~to [unclear]~~

NO 4164

Hannaford, T

4164

Ray Sept.

March 18, 1919

#4164 Pte. Patrick Hannaford

Maddox Cove,

St. John's West.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1280."

Yours truly,

Captain,
Paymaster & Officer i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 41164 Rank Pte Name Hammings P
 Intended place of residence Coastal Cove St John's
2. Occupation Fisherman
 Classification of soldier B Medical Category A III
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
 Date MAR 4 1919
 J. W. H. News Lt.
 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
4-3-19
 Patrick Hammings Pte
 Signature of soldier
 Charles Coghlin
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S
4. 3. 19
 Patrick Hammings Pte
 Signature of soldier
 J. W. H. News Lt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 25. 11. 17 No of days on Military
 Discharged from service 4. 3. 19 Plus 14 days Service 476 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
 Date MAR 5 1919
 R. H. Sait Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St John's, Nfld
 Date March 18 1919
 J. W. Howley Capt.
 Officer in Charge
 The Royal Newfoundland Regiment

Att. 2079/1950

3
31
31
28
18
11

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 416 Rank Pte Name Hammond P
 Date of Enlistment 28.11.17 Address Madison Ave District A. St. John's
 Occupation Fisherman Classification for Discharge B Medical Category A-11
 Recommendation S.M.B. Typically unfit Disability Rating Less than 30%
 Passed to Demobilization Officer with following documents:—

N.F. P/36	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 3-3-19 O. C. Discharge Depot H. M. H.

PARTICULARS FOR DEMobilIZATION

i. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Patrick Hammond

Particulars passed to Vocational Officer for information and action.

Date.....

a. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$6.00
- (b) Clothing Supplied Joseph A. Hammond

Date 4-3-19 O/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. K 668 to his home
 at 1280 and Release Certificate No. 1280 issued.

Date 4-3-19 SA ASD Cooks 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 19-3-19

Date 4-3-19 H Mews Lt
 Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ALLOWANCE

Discharge approved for 5-3-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
F 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 4-3-19 ASD Dicks 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

MAR 5 1919

Date R. H. [Signature]
 O. C. Discharge Depot.

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

Date

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

MEDICAL HISTORY

OF

Surname H. Cunningham

Christian Name Patrick

Table I.—GENERAL TABLE.

Birthplace:—Parish Madras Cove City St. County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	29th day of Nov 1917	St. John	day of	191
Declared Age	30 years	9 Mos	years	days
Trade or Occupation	3. <u>Shipherman</u>	4		
Height	5 feet	4 inches	feet	inches
Weight		126 lbs.		lbs.
Chest Measurement	Girth when fully expanded	38 inches		inches
	Range of Expansion	4 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	—	1 Scar		
When Vaccinated				
Vision	R.E.—V	<u>6/6</u>	R.E.—V=	
	L.E.—V=	<u>6/6</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Samuel Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at	St. John Nfld	at	
	on	28th day of Nov 1917	on	day of 191
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.		Regtl. No.	
Transferred to	ROYAL NEWFOUNDLAND REGIMENT.			
	<u>Regt 4164</u>			
Became non-effective by	on	day of 191	on	day of 191
[Signature]				
[Rank]				

1917
1884

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>3rd London Rec. Hpt. Wandsworth</i>	<i>2</i>	<i>10</i>	<i>18</i>	<i>4</i>	<i>11</i>	<i>18</i>	<i>Gen. Right arm</i>	<i>33</i>	<i>wounded in France 28/9/18</i>	<i>S. H. Rusby, Capt. R.A.M.C.</i>

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>3rd London General Hospital Bancroft.</i>	<i>2</i>	<i>10</i>	<i>18</i>	<i>11</i>	<i>11</i>	<i>18</i>	<i>GSW. Right arm</i>	<i>33</i>	<i>wounded in France 28/9/18</i>	<i>S. H. M. [Signature]</i>

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
7-12-17	Vacc. SP
11-12-17	T.M.B. SP
18-12-17	T.M.B. SP
7 2 18	T.M.B. (500 million) C.M.K.
18-7-19	Recommendation Refutation C.M.K. my - Dadna

It is hereby certified that this soldier has been before the Standing Medical Board and he has been classified as B for discharge on Demobilisation. Medical category B
 24-2-19
 Date of S.M.B. *[Signature]*
 Discharge Report-*[Signature]*

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

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
Fishing

Patrick Hamaker
Signature of Man

Reg. No.

4164

AB Dickson
Signature of the Vocational Officer or his Representative.

Place

St John

Date

3-19

191

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.

1. Unit and Corps... *Royal New Zealand* 7. Former Trade }
or Occupation }
2. Regtl. No. *1144* 3. Rank... *P-5* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Hannaford P.* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (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.

*G.S.W. Right arm
October 1908 Belgium
Simple flesh wound Right
Shoulder*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. | No | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? *NA*

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., 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? *Scar Right Shoulder healed*
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.) *no disability*

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— *Repatriation*
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

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

W. H. H. H.
name

Station *Hazley*

Medical Officer in charge of case.

Date *18-1-19*

* 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.

G. S. W. right shoulder

See sect 15:

*Shoulder feels dead when first waking
Gets all right afterwards*

22. State whether the disabilities are:—

(a) Attributable to

(b) Aggravated by

(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

Yes

No

Give details:

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

G. S. W.

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) 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). *less than 20%*
- (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?

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)?

Opinion of Military Member in case of disagreement.

Yes
ATII

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. 179c?

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?

Signature:

Station *S. Johns*

Date *Feb 24/19*

[Signature]
 { President or Chairman.
 Members.

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

Station

Date

[Signature]
 Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

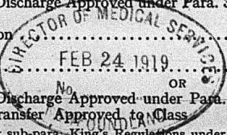
Discharge Approved under Para. 392 () King's Regulations.
 or Transfer Approved to Class of the Reserve.

(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.





Descriptive Return of a Soldier Discharged on Account of Disability.

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

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

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

Name in full

Patrick Hannaford

Regiment from which discharged *Royal Newfoundland*Regimental number *4164.*Intended address *St. John's*Height on discharge *5 Feet 4.*Color of hair on discharge *Brown*Complexion *Leak*Color of eyes *Brown*

Descriptive Marks

Figure on discharge *Heel*Christian name of Father *Andrew.*Christian name of Mother *—*Wife's maiden name in full *— wife dead.*Date and place of marriage *—*Christian names of children *Ann.*Place and date of soldier's birth *St. John's, Newfoundland*

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)

Patrick Hannaford

(Rank)

ST. JOHN'S.

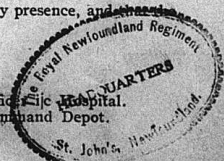
Station

Date

17-2-19

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

Medical Officer, S. J. Hospital.
Unit, or Command Depot.



Station

Date

4164 P. Hannaford.

He & wife he desires
Repatriation w/ wife
family reasons -
wife
~~mother~~ head of father
in Lunatic asylum -
and two children to be
looked after.

work 2/1
- Mrs. Hannaford

March 31, 1919

#4164 Pte. Patrick HannaFord,
Petty Harbor,
Maddax Cove,
St. John's West.

Dear Sir:-

Referring to your application I enclose
cheque for Seventy dollars (\$70.00), being amount of first
payment due you on account of the "War Service Gratuity."

Yours truly

Raymaster & V. i/c Records Captain.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

13221

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, M.Y. & RECORD OFFICE, ST. JOHN'S.

Christian name *Patrick*..... 2. Surname *Hannaford*.....

3. Rank *Private*..... 4. Regtl. No. *4164*.....

5. Address in full to which future payments of gratuity are to fax be forwarded. *Petty Harbor Madrox Cove*.....

6. Date of enlistment in the Regiment. *29 November 1917*.....

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

8. Relationship of such dependents... *Aunt*.....

9. Address in full of such dependent... *Petty Harbor Madrox Cove*.....

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

11. Were you on active service only in Nfld. if so, give dates, and particulars of such service. *NO Served in France 1918*.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *About fifteen months*.....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers. *No*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No*

15. Have you been issued with a War Service Badge? *No*

16. Have you, during the present war, served in the Imperial Forces. *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

(b). If so, was such reversion in consequence of misconduct or inefficiency? *No*

19. Are you now serving in the Regt.? *No* If not give:- (a) Date of discharge. *March 4th* (b) Reason for discharge. *Time up*

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. *Yes*
Cyprus Sept. 18th 1918

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

(b). If so, are you in receipt of full pay and allowances from that Committee. *No*

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

Bapts at City Fr on Oct: 9th 1914.

Ann of

Patrick Hammond & Alice Healy.
Spous: David Hammond & Vera'Brien.
(Baru Oct 4th) P. O. Quay

I have on this date Copied the above from
the Register of Baptisms kept at St. Josephs
R. C. Church, City Harbor.

I signed P. O. Quay, P.
Dec. 4th 1915.

Certificate of
Baptism of
Gene Hammonds

Born Oct 4th 1914

Q I Patrick Hannaford number 4164
of the First Newfoundland Regiment
hereby appoint Mary Watch of
Malaga Cove, in the District of
St. John's West, ^{widow (Deceased)} my trustful guardian
dated at St. John's January 4th 1918.

Witness.
John McCarthy.
J.M.

Patrick Hannaford

FIRST NEWFOUNDLAND REGIMENT.
Separation Allowance Branch.
(Information for Board of Review)

GAUARDIAN.

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 as being made on Oath, and the Form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:-
THE PAYMASTER,

SEPARATION ALLOWANCE BRANCH,

ST. JOHN'S.

-
1. Name in full of soldier. Rank. Regt. Reg. No.
6. *Hannaford, Patrick, Pte. 1st N.F.L.D. 4164.*
2. Age of soldier. *33, years* Married or single. *Widower.*
-
3. Name in full of Guardian. *Mary Walsh.*
-
4. Address in full. *Maddox Cove, Petty Hr.*
-
5. By what authority are you acting as Guardian? (if not verbal enclose written document) *Patrick Hannaford.*
-
6. Name of Child(ren) Age last Birthday Occupation Married or Single.
6. *Annie Hannaford 3 years*
-
7. Are all the above children in your care, and living with you? Explain fully. *Yes*
-
8. Are any of the above children suffering from Mental or Physical incapacity? *No.*
-
9. Give names of children of soldier not in your care. Age last Birthday Occupation Permanent Address.
- None.*

MS

10. Have you made a previous claim for Separation Allowance, If not, why? Give particulars.

No.

11. Are you already in receipt of Separation Allowance from any source? If so, state amount.

No.

12. Are you in receipt of payment from any Patriotic Fund, If so, state amount?.

No.

13. Was the soldier at the time of his enlistment, an employee of the Nfld. Government?

No.

14. In what capacity and in what place?

*Fisherman
Petty Harbor, Maddox Cove*

15. Is he in receipt of a salary as such, while serving in the 1st Nfld. Regiment. If so, how much?

No.

16. From what date have you received "allotment" and state amount per month.

*from Nov. 28th 1916
\$20 per mth.*

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath, and in virtue of the Evidence Act.

Signature of Applicant *Mrs. Mary Walsh*.....

Place of Residence..... *Maddox Cove*.....

Declared and subscribed before me at..... *St. John's, Nfld.*
January 4, 1918

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace.) *John McGearty*)

This application must be signed by two responsible Parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying, that to the best of their knowledge after careful enquiry, the above statements are correct.

Signature of Clergyman..... *[Signature]*.....

Signature of Member of Patriotic Committee..... *[Signature]*.....

N.B. Birth certificate must accompany this application, and will be returned after perusal.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

Sept. 5 1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Pte. P. Hannaford

in respect of his service as No. 4164 Rank Pte.

Name P. Hannaford **Royal Nfld. Regt.**
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received British War & Victory Medals

Signature P. Hannaford

Date March 27-22

Address 120 Water Street West

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121
39.

Number of Sheets One

Regiment of 1st Newfoundland

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>Hampden Co.</u>	Age on	<u>33</u> years <u>9</u> months	<u>Cookman</u>	<u>appointed lance corporal 24.1.18</u>	
Joined		Date	Place and Date of Enlistment	Religion		
Joined		Date	}	<u>St. John's</u>	<u>R.C.</u>	
Joined		Date	with Colours	<u>28-11-17</u>	Place of Birth	
Joined		Date	with Reserve	<u>111</u> years. <u>365</u> years.		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St. John's,</u>			<u>18 ³/₁₇</u>		
				To be carried over					

The Royal Newfoundland Regiment

9 4164

DEMOBILIZATION OF

Reg. No. 4164 Rank Private Name Samuel J. ...
 Date of Enlistment 28.11.17 Address Madame Ave. ... District St. John's
 Occupation Fisherman Classification for Discharge B Medical Category H.IV
 Recommendation S.M.B. Superiorly Disability Rating Assistant 20%
 Passed to Demobilization Officer with following documents—

N.F. P/36	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	5
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 5-3-19 W. O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am Patricius Glanville 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 \$60.00
 (b) Clothing Supplied Patricius Glanville

Date 4-3-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R. 668 to his home at July 26 and Release Certificate No. 1320 issued.

Date 4-3-19 J.A.S. Ab. Dicks 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 19-3-19

Date 4-3-19 H. Mans H.
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY LOSS.

Discharge approved for 5-3-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1.	
F 178	W 3494	B 122	Board 1st.	" 2.	1
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 4. 3. 19 Ab. Dicks 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 MAR 5 1919 R.H. Sait Capt.
O. C. Discharge Depot.

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

Date March 7/1919 Handwritten Signature
Handwritten Signature

EXTRACT FROM STATEMENT OF ACCOUNT TO 31-1-19 FROM PAY
AND RECORD OFFICE, LONDON

4164 Pte. Hannaford, J.

Gr. Bal. £5-6-7

This transferred to Pay Office 11-4-19

Reg. No. *4164* Rank *Pte* Name *Hannaford. Pat.*

Attested Address *Maddox Lane Petty Hq.*

Allotment Allottee

Date of Allotment Returned from Overseas *2-19*

Embarked for Overseas Cause *Discharge*

MAR 4 1919 PASSED TO DEMOBILIZATION OFFICER

✓ 3. 19.

DISCHARGE APPROVED ON DEMOBILISATION.

COPY The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4164 Rank Pte Name Hannaford, P.
 Intended place of residence Maddox Cove, St John's

2. Occupation Fisherman
 Classification of soldier B Medical Category A111

3. The above named man is discharged in consequence of DEMOBILIZATION

Eligible for War Service Gratuity

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

Place ST. JOHN'S for W. Saley Capt
 Date MAR 4 1919 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 (sgnd) Patrick Hannaford
 Signature of soldier
MAR 4 1919 " C. B. Dicks, Capt.
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S (sgnd) Patrick Hannaford
 Signature of soldier
MAR 4 1919 " J. Raymond
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 28-11-17 No of days on Military
 Discharged from service 4-3-19 plus 14 days Service 476

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S W. Saley Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment
 Date MAR 5 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place
 Date
 Officer i/c Records
 The Royal Newfoundland Regiment