



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 11-27 Name Gerald Harraden Corps R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Gerald Harraden</u> |
| 2. What is your full Address? | 2. <u>419 St. Johns St. St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years |
| 5. What is your Trade or Calling? | 5. <u>None</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 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. <u>Yes</u> |

I, Gerald Harraden 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.

SIGNATURE OF RECRUIT.

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Gerald Harraden 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 15-4-16 day of April 1916

Signature of Attesting Officer W.M. Churchill

†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

Place

Approving Officer.

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

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

re-enlisted in the (Regiment)

on the (Date)



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4437 Name Gerald Hamrahan Corps R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Gerald Hamrahan</u> |
| 2. What is your full Address? | 2. <u>49 Barbours Hill</u>
<u>St Johns</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years, Months |
| 5. What is your Trade or Calling? | 5. <u>Barber</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 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. <u>Yes</u> |

I, Gerald Hamrahan 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.

Gerald Hamrahan SIGNATURE OF RECRUIT.
Geo W Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
I, Gerald Hamrahan 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 Johns on this 15th day of April 1918
Signature of Attesting Officer Wm. Churchill 2nd

†CERTIFICATE OF APPROVING OFFICER.

* I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....
If enlisted by special authority, such will be attached to the original attestation.
Date.....191..... } Approving Officer.
Place..... }

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
‡ Here insert 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 Gerald Kenrokan

Apparent age years months. Height 5 feet 8 inches

Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 4 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mridgett Kenrokan
Hq Parkcreek | Relationship Mother

Particulars as to Marriage

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>15-4-18</u>									
Joined at <u>Mkris</u> on <u>April 15-1918</u>									
<u>Discharged Jan'y 31-1919</u>									
<u>Special duty Home defense Det'y 1st. 14-9-1918.</u>									
<u>Returns for Headquarters 2-10-1918</u>									
<u>Demobilization Mkris 31-1-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 31-1-1919 [date of discharge] 2 years 292 days

Pensions " " " " " " " " " " " "

C.R. 4432

Extract from Daily Orders Part II Unit from The Royal
Newfoundland Regt., St. John's, Jan. 4th, 1919.

The undermentioned discharges on Demobilisation has been
approved by O.C. Discharge Depot from noted dates. He is
removed from Depot strength and transferred to Discharge
Depot pending confirmation by Officer i/c Records.

4432 Pte. G. Hannrahan.

3-1-19

C.R. 4432

Extract from Daily Orders Part II Royal Newfoundland Regiment,
dated October 20th 1919. Depot St. John's.

The discharge of the undernoted on demobilisation has
been CONFIRMED by Officer i/c Records from noted date
31-1-19.

4432, Sgt, G. Hanrahan.

C.R. 4432

Extract Daily Orders, Part 11, Unit: The Royal Newfoundland Regiment,
Dated Oct 24th 1916.

THE FOLLOWING RETURNED FROM SPECIAL DUTY AT PETTY HARBOUR:

4432 Pte. G. Hanrahan.

OR 4432

Extract from Daily Orders part 11 Depot St. John's dated Sep. 16/.1918.

54432 Pte. G. Hanrahan

The above mentioned soldier proceeded on Special Duty to Petty
Harbour 14-9-18

C.R. 4432

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 16, 1918.

4432

#4432 Pte. G. Hanarahan

Attested for General Service with The Royal Newfoundland
Regiment, from 15/4/18 to report 22/4/18.

Harrahan, Gerald

H432

Hay sept.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4402 Rank Pte. Name Hannasham Gerald
 Intended place of residence 49 Parkers Hill City
2. Occupation Barber
 Classification of soldier A Medical Category A II
3. The above named man is discharged in consequence of Demobilization
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 W. H. Lait Capt
 Date JAN 3 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 Gerald Hannahan
3-1-19 Signature of soldier
W. H. Lait 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 Gerald Hannahan
3-1-19 Signature of soldier
W. H. Lait
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 15-4-18 No of days on Military
 Discharged from service 3-1-19 plus 28 days Service 292

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge of Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S R. H. Lait Capt
JAN 3 1919 Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.
- Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St John's W. H. Lait Capt
 Date January 31 1919 Officer in Charge
The Royal Newfoundland Regiment

January 31st., 1919

#4432 Pte. Gerald Hanrahan,

549 Barter's Hill,

City.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 662."

Yours faithfully,

Captain,
Paymaster & O.1/c Records

Enc'l 1.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4437 Rank Plt Name Hanrahan - Gerald
 Date of Enlistment 15.4.18 Address 49 Bader Street District St. John's
 Occupation Barber Classification for Discharge H Medical Category III
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1 D 400A	1 B 1915	2	do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2	1		" 6	
B 179c	B 120	M 93				

Date 28.11.18

W. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Gerald Hanrahan

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~~ Joseph H. [Signature]

Date 3-1-19

O i/c Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. Nil to his home at _____ and Release Certificate No. 675 issued.

Date 3-1-19 Demobilization Officer Esposito

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 31-1-19

Date 3-1-19 Depot Paymaster Albany Capt.

Discharge approved for 3. 1. 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.....
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. 1. 19 Demobilization Officer Ch. Dicks Capt.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

JAN 3 1919

Date O. C. Discharge Depot. R.H. Sait Capt.

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

Date Jan. 6/1919

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

MEDICAL HISTORY

OF

Surname Kennan

Christian Name Gerald

Table I.—GENERAL TABLE.

Birthplace:—Parish S. Johns County Newfoundland

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>15th</u> day of <u>April</u> 191 <u>8</u>	on	day of	191
	at <u>S. Johns</u>	at		
Declared Age	<u>18</u> years	<u>—</u> days	years	days
Trade or Occupation	<u>Barber</u>			
Height	<u>5</u> feet	<u>8</u> inches	feet	inches
Weight	<u>138</u> lbs.			lbs.
Chest Measurement	<u>35</u> inches			inches
	<u>4</u> inches			inches
Physical Development				
Vaccination Marks	Arms	<u>1 scar</u>		
	Number	<u>7 yrs ago</u>		
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)				
(Rank)				
Enlisted	at <u>S. Johns</u>	at		
	on <u>15th</u> day of <u>April</u> 191 <u>8</u>	on	day of	191
Joined on Enlistment	Corps. <u>The Royal Newfoundland</u>	Regtl. No. <u>4432</u>	Corps.	Regtl. No.
Transferred to				
Became non-effective by				
	on	day of	191	on
			day of	191
[Signature]				
[Rank]				

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 work as a barber

Gerald Hanrahan
Signature of Man.

Reg. No. 4432

Edwicks Caff

Signature of the Vocational Officer or his Representative.

Place

Date

St. John's

January 3rd 1919

The Royal Newfoundland Regiment

Class for Demobilization:—

A.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

NOV 27 1918

Date

Regimental No. *11432*

Name *Hanahan Gerald* *Pte. P*

Address *49 Baiters Hill S. John's*

Present Medical Category *A-1*

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board {

R. H. Lait Capt.

O.C. Discharge Depot.

Peterson

Senior Medical Officer

Geo. Gordon

M. O. Depot



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Gerald Hamrahan, Regl. No. 11432
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and sixty 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.:

Allotment begins August 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6493	<u>Mother</u>	<u>Bridget Hamrahan</u>	<u>49 Banters Hill</u> <u>Sally</u>	<u>60</u>
Total Allotment, \$				<u>60</u>

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
[Signature]
 1918

(Sig.) Gerald Hamrahan
 (Rank) Private



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Gerald Henochan
aged 18 yrs. conducted at Headquarters
Date: April 15/18. Recruiting Officer:

NO OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 yes
- 9 no
- 10 n
- 11 n
- 12 n
- 13 to get top plate.
- 14 n
- 15 n
- 16 n
- 17 n
- 18 n
- 19 — b/b both
- 20 n
- 21 n
- 22 n
- 23 n
- 24 n
- 25 n
- 26 n
- 27 n
- 28 n
- 29 n
- 30 n
- 31 n
- 32 n

VH 307

33 yes 7 yrs ago. 1 scar left arm.
34 5 f 8
35 13 & 14
36 31 - 35

37 n
38 Mother Bridget #9 Bostons Hill St Johns
39 Mother

21

Signature of Medical Examiner: J. W. Burden



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 *Gerald Hamahan*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *4443*
 Intended address *Barboursville Johns*

Height on discharge Feet
 Color of hair on discharge *Dark*
 Complexion *Light*
 Color of eyes *Grey*
 Descriptive Marks
 Figure on discharge *Trawl*
 Christian name of Father *Patrick (deceased)*
 Christian name of Mother *Bridget*
 Wife's maiden name in full *Henkeip*
 Date and place of marriage _____
 Christian names of children _____

Place and date of soldier's birth. *St. John's, May 28th 1900*
 Nature and locality of civil employment required *Barbering*

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)

Gerald Hamahan

(Rank) *Private*

Station

St. John's

Date

Dec 15/1918

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.



Station

Date

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



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Gerald Hamrahan, Regl. No. 4432
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
60 Dollars and sixty 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.:

Allotment begins August 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6493	<u>Mother</u>	<u>Bridget Hamrahan</u>	<u>49 Barters Hill City</u>	<u>60</u>
Total Allotment, \$				<u>60</u>

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]
Capt.
 Officer Commanding
 Company
St John's
July 27 1918

(Sig.) [Signature]
 (Rank) Private

SEPARATION ALLOWANCE.

Claimant *Budget Hanrahan*..... *Mother*
On account of *Gerald Hanrahan* No. *4432*, Rank *Pte*

Decision..... *Approved*.....
.....
.....
.....

Date..... *April 7th 1920*.....
W. R. Keene Lieut. Col
M. D. Cowley Major

Instructions.....
.....
.....
.....

Allotment of *60* £ per day payable to *Budget Hanrahan*
his *mother* from *1/8/18* to *31/1/19*.

Discontinued on account of *being discharged*.

R. Hennumey
.....

170. ²⁰/₄

ROYAL NEWFOUNDLAND REGIMENT
(Separation Allowance Branch)

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, Nfld.

- 649
Noted correct by 602
signature of 1st
- Name in full of soldier, Rank, Reg't. or Unit, Regt. No.
Gerard Hanrahan, Private Royal N.F. Cd., 4452
 - Age of soldier, Married or single.
18 years & 6 months Single
 - Name in full of mother, Age, Occupation, Permanent address.
Bridget Hanrahan, 46, Housewife 49 Barts Hill
 - Give name of your husband, Age, Occupation, Where employed.
Patrick Hanrahan 44, Police Constable, Deceased
 - If your husband is not supporting you, state the reason.
Deceased.
 - If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue.)
 - If you are a widow, state date and place of death of your husband.
May 10, 1912, St. John's
 - Have you married again since death of above mentioned husband.
No
 - Names of your other children, Address in full, Age, Occupation, Married or single.

<i>Madge</i>	<i>49 Barts Hill,</i>	<i>20,</i>	<i>Sewing, Barts Hill,</i>	<i>Single</i>
<i>Stan.</i>	<i>49 "</i>	<i>16</i>	<i>Labourer</i>	<input checked="" type="checkbox"/>
<i>Bertie</i>	<i>49 "</i>	<i>11</i>	<i>none</i>	<input checked="" type="checkbox"/>

10. State amount earned by (a) Yourself *average 50^{ct} week.* 3-
 (b) Your husband. *nothing*
-
11. State amount and source of any other income. *\$18 every two weeks from Stan.*
-
12. State value of real property belonging to you and your husband. *\$750*
-
13. State value of personal property belonging to you and your husband. *—*
-
14. If husband is dead, state value of real and personal property left by him. *—*
-
15. Actual amount contributed by soldier during the year prior to enlistment *\$598⁰⁰*
-
16. Was this amount contributed weekly or monthly. *Weekly*
-
17. Did this amount include payment of son's board, etc. *yes*
-
18. State your son's trade or occupation prior to enlistment *Barber*
-
19. State amount of his wages per week. *\$11.50*
-
20. State name and address of his last employer. *Richard Harris*
-
21. State amount of monthly support from son since enlistment. *\$30*
-
22. State amount of allotment received by you from son monthly. *\$18.60*
-
23. State from what date did you receive allotment. *1st Sept.*
-
24. Actual amount contributed by other children. Weekly. Monthly.
Madge none none
Stan, Average 9.00
-
25. Are any of these children in the employ of you or husband. *No*
-

26. If not receiving support from other children, state cause. Explain fully. *Mother deceased. Others are too young*
27. With whom are you residing at present? *At Home, with Children*
28. Have you made a previous claim for Separation Allowance? If not, why? Give particulars. *No. Knew nothing of it*
29. Are you already in receipt of Separation Allowance from any source? If so, how much? *No*
30. Are you in receipt of payment from any Patriotic Fund? If so, how much. *No*
31. Was the soldier at the time of his enlistment an employee of the Nfld. Newfoundland. *No*
32. In what capacity and in what place _____
33. Is he in receipt of a Salary as such while serving in the Royal Nfld. Regt? *No.*

34. 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. *Mr. Bridget Hanaghan*

Place of residence. *49 Baster Hill St. John's Nfld*

Declared and subscribed before me at. *St. John's Nfld*

this. *30th* day of *Sept* 191*8*

signature of barrister of
 supreme court, stipendiary magistrate,
 Notary Public or Justice of the Peace) *John McCarthy*

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 investigation the above statements are correct and the soldier first mentioned is the sole support of the applicant.

signature of clergyman. *J. J. Greene*

Signature of Member of Patriotic Fund Committee.

April 21, 1920

Mrs. Bridget Hanrahan,
749 Barbers Hill,
City

Dear madam:-

Referring to your application
for Separation Allowance, I enclose
cheque for One hundred and twenty
dollars (\$120.00) in payment of same.

Yours truly

Major

Paymaster.

Sept. 25th., 1918.

Mrs. Bridget Hanrahan,
49 Barbers Hill,
City.

Dear Madam:-

Application has been made by your
son Pts. Gerald Hanrahan, #4452 to have Separation
Allowance granted to you.

I enclose Statutory Declaration in
connection with same, which kindly have completed in
the presence of a Magistrate or Justice of the Peace
and return to me at your earliest convenience.

Yours faithfully,

Capt. & Paymaster.

The Royal Newfoundland Regiment

9443 ✓

DEMOLIBIZATION OF

Reg. No. 14437 Rank Private Name Hannahan - Gerald
 Date of Enlistment 15.4.18 Address 49 Bates Hill District St. Johns
 Occupation Barber Classification for Discharge A Medical Category ATI
 Recommendation S.M.B. Disability Rating

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 28.11.18

W. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Gerald Hannahan

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 Joseph A. Snowdon

Date 3-1-19

O i.c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. Nil to his home at _____ and Release Certificate No. 675 issued.

Date 3-1-19
C. S. 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 31-1-19

Date 3-1-19
Alley Capt.
 Depot Paymaster.

Discharge approved for 3. 1. 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	E 268	B 121	✓ 1	N.F. Med.	D.F. 1	✓ 1	Form B
F 178	W 3494	B 122	✓ 1	Board 1st	" 2	✓ 1	
R 178a	✓ 1 D 400A	✓ 1 B 1915	✓ 2	do 2nd	" 3	✓ 2	
B 179	D 400B	Form L		do 3rd	" 4		
B 179a	D 400C	Form K	✓ 1	do 4th	" 5		
B 179b	B 103	ME 2	✓ 1		" 6		
B 179c	B 120	M 93					

Date 3-1-19
C. S. Dicks Capt.
 Demobilization Officer.

APPROVED. *h.*

Documents as above forwarded to:—
 Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

Date JAN 3 1919
R. H. Sait Capt.
 O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
 Date Jan. 6/1919
M. Bowley, Capt.
2508 - 1 - E

Reg. No. 4432 Rank Pvt. Name Hannah G. C.
Attested 15.4.18. Address Hq. Bakers Hill
Allotment 60 Allotee Bridget Hannaham (mother)
Date of Allotment 1-8-18. Returned from Overseas _____
Embarked for Overseas _____ Cause _____

22.4.18. Report
Disc. 23 $\frac{1}{2}$

^{1st} Invc. 4-5-18. 2nd 9-9-18.
14-9-18. Special Duty Petty Harbour. Sold 1-10-18
48-11-18. Passes to Demobilization Officer

3-1-19.

DISCHARGE APPROVED ON DEMOBILISATION.

S. }
A. }SEPARATION ALLOWANCE.
1st NEWFOUNDLAND REGIMENT.A. 4432

1. Name of Soldier in Full (Surname first) Hamahan Gerald
2. Rank and Regimental Number Pte. 4432
3. Date of Enlistment April 15th 1918
4. ~~Full Name of Wife~~ or
Widowed Mother Mrs Bridges Hamahan or
Children's Guardian
5. Address 49 Batters Heel
S. Johns.
6. State ages of Children: Girls under 17 Boys under 10
7. With whom do your Children reside?
8. Amount of Allotment 60 9. Name of Allottee Mrs Bridges Hamahan
10. Address 49 Batters Heel
S. Johns

11. From what date is Allotment effective? August 1st 1918
12. Date of Marriage _____
13. Date Marriage Certificate examined by Paymaster _____
14. Date Birth Certificates (in case of guardian) examined by Paymaster _____
15. If soldier is sole support, does Statutory Declaration accompany this application? no
16. Have you made a previous claim for Separation Allowance? Give particulars no
17. Is Separation Allowance being paid on your account to any person? no
18. Were you at the time of enlistment an employee of the Newfoundland Government? In what capacity, and in what place? no
19. Will you be in receipt of a salary as such, while serving? If so paid, how much per month? no
20. Name of Corps prior to enlistment in the Nfld. Regt. _____

I hereby certify that the above is a true statement.

G. Harrahan

Name of Soldier.

Signature of Officer forwarding this application.

Unit Royal Nfld Regt St John's

Date Sept 1st 1918 O.C. Coy.