



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 489

Name in full Robert Haley Age 25

Address Bonavista

~~Married~~ S Single Height 5'5 1/2" Weight 160

Color Dark Hair Brown Eyes Grey

Other distinguishing marks Wound on side of left wrist

Nearest relative Mother, Mary

Address Bonavista

Dependents Mother solely

Occupation Fisherman Present Wage \$400⁰⁰ per year

Previous service -

Decorations -

General Remarks

Date of Enlistment

Robert Haley was J. Williams, witness. Signed Aug 13 1915 Alderbrook

I, Robert Haley, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland as the case may be) against all his enemies and opposers whatsoever according to the conditions of my service.

Robert Haley

Declared before me this 1st day of October 1914

Eric Skye

Sept 11

Originals

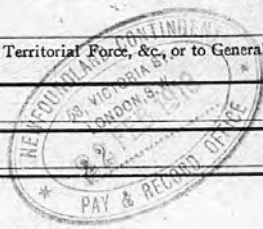
This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

| | |
|---|--|
| No. <u>489</u> | Army Rank <u>Private</u> |
| Name <u>Hayley Robert</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small> | |
| Corps <u>Royal Newfoundland Regiment</u> | |
| Battalion, Battery, Company, Depôt, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small> | |
| Date of discharge _____ | |
| Place of discharge _____ | |
| 1. <u>Description at the time of discharge.</u> | |
| Age <u>28</u> years _____ months Height <u>5</u> feet <u>5 3/4</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>Fair - dark</u> Eyes <u>Greyish</u> Hair <u>Brown</u> Trade <u>Fisherman</u> Intended place of residence { <u>1/2 Mr J Hayley</u> (To be given as fully as practicable) { <u>Bohavilla</u> <u>Newfoundland.</u> | Descriptive marks. <u>R.S.W Left Shoulder</u> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> COPY SENT TO O.C. H.Q. ST. JOHN'S, N.F.L.D. P.38. No. <u>2911/12</u> DATED <u>22 FEB 1912</u> </div> |
| 2. The above-named man is discharged in consequence of <u>Wounds received in Action</u> | |
| <small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small> | |
| 3. Military character:— | |
| 4. Character awarded in accordance with King's Regulations:— | |
| <div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small; margin-right: 5px;">To be filled in on the soldier quitting the Colours.</div> <div style="flex-grow: 1;"> <p>Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.</p> <p style="text-align: right;">Initials of Commanding Officer.</p> </div> </div> | |
| Army Form B. 2088 has been issued to* | |



* Strike out if not applicable.

[OVER.]

Casualty Form—Active Service.

Regiment or Corps Newfoundland

Regimental No. C.R. 489 Rank Pte. Name Haley, R.

Enlisted (a) 1/10/14 Terms of Service (a) One year Service reckons from (a) Enlistment

Date of promotion to } present rank } Date of appointment } Numerical position on }
 } August 13/15 } 1st Lt } roll of N.C.Os. }

Extended _____ Re-engaged Aug 13/15 Qualification (b) _____



[Handwritten signature]

| Report | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 86, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents. |
|--------|--|---|-------------|--|
| | | Embarked St. John's, Nfld. | 3.10.14 | |
| | | Disembarked Alexandria | 1.9.15. | |
| | | Des Manceville | 10.3.16 | |
| | | 887A ad 9.7.16. Myalgia transf | 13.7.16 | BO 288. |
| | | unit with Battalion | 4.7.16 | B 213. |
| | | With BATT. 23. I. 17 | | |
| | | Wounded in Action | 23 SEP 1917 | B 213, 24.9.17. |
| | | 874A ad. G.S.W.R. Shave der trous bices | 23-9-17. | E.D 1060 24-9-17. 601384 |
| | | " " " " " " " " " " " " | 24-9-17 | H.A. 14417. |
| | | " " " " " " " " " " " " | 25/10/17 | W 30 82. |



of "Vice de Liege" into Canada

[Handwritten signature]

2nd Lt
 for MAJOR
 Infantry Section
 G.H.Q. 3rd Echelon

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Original

Medical Report on an Invalid.

Station 3rd London General Hospital, WANDSWORTH, S.W.

Date 12/2/18.

- 1. Unit 1st R. nfld.
- 2. Regimental No. 489.
- 3. Rank Plt
- 4. Name Hayley, R.
- 5. Age last birthday 28.
- 6. Enlisted { on 8-9-1914.
at St Johns nfld.

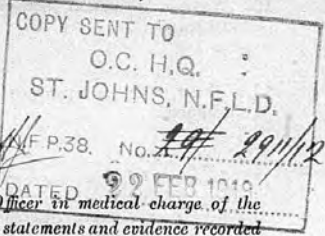
- 7. Former Trade } Fisherman
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No. ;
(c) Date of Discharge;
(d) Cause of Discharge.



8. Disability in respect of which invaliding is Proposed.

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

G S 2 of left Shoulder.



Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

Sept 23rd 1917

10. Place of origin of disability.

Flinders

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

Removed to No. 11. General Hospital.

Staphs. ~~from the removed~~ put in reports, removed to England, piece of metal removed. in Bulham Military Hospital.

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

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

G.S. 2.

Active service

13. What is his present condition?

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

Wound completely healed. Limited of movement at the shoulder joint. He cannot raise his arm above a right angle with his body owing to bone.

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

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

Yes.
Yes.
Yes
No.

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

If so—(a) When?

(b) Where?

(c) Opinion?

} Not applicable

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

Removal of metal.

17. If not, was an operation advised and declined?

Not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

} Not applicable

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

20. Do you recommend—

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

Temporarily unfit.

J. S. Andrew Thomas capt.
Officer in medical charge of case.

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

except †

3rd London General Hospital,
Station WANDSWORTH, S.W.

H. E. Duncanson
Officer in charge of Hospital S.

Date 13/7/18

Comdg. 3rd. London Gen Hospital.

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

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

Opinion of the Medical Board.

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

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

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

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

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

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

Yes
—
No
S. S. L.

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

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

23. Is the disability permanent?

Yes.

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

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

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

60 %
vide 26
Yes

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

27. Do the Board recommend—

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

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

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

as an out-patient for dressage and personal requirements

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

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

Signatures:—

Station WANDSWORTH, S.W.

Date 13-2-18

John Ogden Capt. R.A.M.C. President.
R. Howard Esq. Members.

Approved.
Station WANDSWORTH, S.W.

Date 13-2-18

John Ogden Capt. R.A.M.C. Administrative Medical Officer.

81

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

MEDICAL HISTORY

Surname Haley OF Christian Name Robert

Table I.—GENERAL TABLE.

| Birthplace:—Parish | | County | | | | | |
|---|---|------------------|---------------|---------------|------------|--------|------------|
| | | SPECIAL RESERVE. | | REGULAR ARMY. | | | |
| Examined | ... .. | on | day of | 191 | on | day of | 191 |
| | | at | | | at | | |
| Declared age | ... .. | 25 years | | days | years | | days |
| Trade or occupation | ... .. | Fisherman | | | | | |
| Height | ... .. | 5 | feet | 5 3/4 | inches | | |
| Weight | ... .. | 160 | | lbs. | | | |
| Chest Measurement | { Girth when fully expanded Range of expansion | | | inches | | | inches |
| | | | | inches | | | inches |
| Physical development | ... .. |  |  |  |  |  |  |
| Vaccination marks | { Arm ... Number | Right | | Left | Right | | Left |
| | | | | | | | |
| When vaccinated | ... .. |  |  |  |  |  |  |
| Vision | ... .. | R.E. - V = | | | R.E. - V = | | |
| | | L.E. - V = | | | 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 | St Johns N.S. | | at | | |
| | | on | day of | 191 | on | day of | 191 |
| Joined on enlistment | ... .. | Corps | | Regtl. No. | Corps | | Regtl. No. |
| | | 1st N.S.L.I. | | | | | |
| Transferred to | ... .. | Newfoundland | | 489 | | | |
| | | | | | | | |
| Became non-effective by | ... .. |  |  |  |  |  |  |
| | | on | day of | 191 | on | day of | 191 |
| (Signature) | ... .. |  |  |  |  |  |  |
| (Rank) | ... .. |  |  |  |  |  |  |

COPY 3 feet TO
O.C. H.Q.
ST. JOHNS N.F.L.D.
No. 2911/12
DATED 18 FEB 1918



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

| Name of hospital | Admitted to hospital | | | Discharged from hospital | | | Disease | Number of days in hospital | Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of typhus, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special typhus case sheet | Signature of Medical Officer |
|--|----------------------|-------|------|--------------------------|-------|------|---|----------------------------|--|---|
| | Day | Month | Year | Day | Month | Year | | | | |
| Fullham Military Hospital | 26 | 10 | 17 | 15 | 1 | 18 | G. S. W. left shoulder 80 H. E. shell. | | Injury by remnant from another 9/11/17. Wound healing. Pain at shoulder with movement. Nothing to do except to account for it. In Convalescence. Mandy. | <i>J. G. Med.</i> |
| 3rd London General Hospital, WANDSWORTH, S.W. | 15 | 1 | 18 | | | | G. S. W. L. Shoulder. | | Board held — see covering Disability — G. S. W. L. shoulder. Cannot raise arm above R angle. No bone injury Cause — G. S. W. on Active Service Capacity — fit earning a discharge assessed by 60% | <i>S. W. M. Capl. R. A. M. S. 712</i> 3rd London General Hospital, WANDSWORTH, S.W. |

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of days in Hospital | Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|--------------------------|----------------------|-------|------|--------------------------|-------|------|-------------------------------|----------------------------|---|------------------------------|
| | Day | Month | Year | Day | Month | Year | | | | |
| Jutham Military Hospital | 26 | 10 | 17 | | | | P. S. W. W. Shoulder HE shell | | Frigo Co removed from shoulder. Removed: 5/14/17. Wound healing. Pain about shoulder on movement, sitting in chair, caused by inflammation. Convalescence with massage. | L. G. H. M. |
| | 14 | 1 | 18 | | | | | | Returned from convalescence. Some shell still. Shoulder pain, but not stiff, was relieved. Transferred to 3rd Genl H. H. M. | J. G. H. M. |



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 Commissioners of Chelsea Hospital.
Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer in Charge of Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital Chelsea, London, S.W.1.
Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

A Name in full Hayley, Robert.
Regiment from which discharged 1/ Nfld.
Regimental Number 489.
Where born (Parish, Town and County), and when Bona Vista Bay, Nfld. 25-5-1889
Intended address C/o Mrs J. Hayley, Bona Vista, Nfld.

Height on discharge 5 Feet 5.75 Inches
Colour of Hair on discharge Brown. **Colour of Eyes** greyish.
Descriptive marks 3rd L Child. **Complexion** fair-dark
Figure on discharge medium.
Christian name of Father Edw.
Christian name of Mother Mary.
Wife's Maiden name in full —
Date and Place of Marriage —
Christian names of Children —
Nature and locality of civil employment desired Uncertain.



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) Robert Hayley. **(Rank)** Private.
Station 3rd London Gen. Hospital. **Date** 12-2-18.

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 3rd London General Hospital, J.S. Andrew Tinsley Esq **Medical Officer in Charge**
WANDSWORTH, S.W. **Date** 12-2-18. **Hospital.**

B Period of Service and in what Corps ...

| Regiment | Years | Days | All Service Abroad with Stations | Years | Days |
|-----------------------------|-------|------|----------------------------------|-------|------|
| | | | India | | |
| | | | S. Africa | | |
| Disallowed ... | | | | | |
| Service towards Pension ... | | | | | |

COPY SENT TO
O.C.H.Q.
T. JOHNS, N.F.L.D.
M.F.S.B. NO. 29412
DATED 22 FEB 18

Date inclusive to which pay has been issued
Sums due on account of public debts ...

Sum due on account of advance of Pension }

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ **Officer in Charge**
Date _____ **Records.**

Notification by President of Medical Board of Approval of a Soldier's
Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records _____

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, see A.C.I. 1623 of 1916.)

Soldier's surname Hayley, Christian names Robert
(in full)

Regt. No. and Rank 489 Pte. Regt. or Corps 1. nged.
(If T.F. this should be stated.)

His address on discharge will be 4. Mrs. Hayley,
Roma Vista, nged.

This information is for the Central Army Pension Issue Office only. The Soldier states that* _____ allowance is being issued in respect of him.

* Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

Station 3rd London General Hospital,
WANDSWORTH, S.W.
Date 12/2/18
Wm. Roberts Capt RMC
President of Board
(Approving Officer)

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

**Notification that a Soldier has been sent Home from
Hospital to await Discharge under para. 392
(xvi.) King's Regulations. Admitted 15-1-18**

Soldier's
Regtl. No. 489 Rank Pte Name Hayley R.
(Surname first)

Corps or Regiment (also Unit if known) 1st R. Rfld

To OFFICER in charge of RECORDS 58 Victoria Street S.W.

REGIMENTAL PAYMASTER 58 Victoria Street S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service," was approved by the President of the Board on the 13-2-18, has been sent to ^{the address below,} ~~his home on warrant~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) February 15th 1918

to (full address) 58, Victoria Street, S.W.

Place 3RD LONDON GENERAL HOSPITAL
WANDSWORTH. Officer Comm.

Date 15-2-18 G. C. Hall Hospital.
Capt

Three copies to be made; one copy sent to each Officer mentioned above, and one copy filed in the Register, R.A.M.C.F.

(7 17 35) W9706-M1007 300,000 11/16 HWV(1187) Form W. 3202a General Hospital,
WANDSWORTH, S.W.

Notification that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations. Admitted 15-1-18.

Soldier's
Regtl. No. 489 Rank Pte Name Hayley R.
(Surname first)

Corps or Regiment (also Unit if known) 1st R. Rfd.

To OFFICER in charge of RECORDS 58 Victoria Street S.W.

REGIMENTAL PAYMASTER 58 Victoria Street S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service," was approved by the President of the Board on the 13-2-18, has been sent to ^{the address below} ~~his home on warrant~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes~~

He proceeded on (date) February 15th 1918.

to (full address) 58, Victoria Street, S.W.

Place 3RD LONDON GENERAL HOSPITAL WANDSWORTH. Officer Comm.

Date 15-2-18. G.C. Hall Hospital.
capt

Three copies to be made; one copy sent to each Officer mentioned above, and one copy filed in the Office of R.A.M.C.F.

No. _____

Regtl No. 789

Rank Private

Name Hayley R

Regiment R. Regt.

Date from 15-2-1918

to 10AM 22-2-1918

To proceed to _____



Address while on furlough to which any orders will be sent:

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN
EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.



1st Roy. Infd (Regiment).

No. 489, Rank Plé., Name Hayley, R.

is discharged from Hospital with orders to proceed to his

Address 58 Victoria St
L.W.

and there await further instructions as to his discharge from the
Service.

Officer Commanding,

Place WANDSWORTH.

H. Jagan

Capt. R.A.M.C.F. Hospital.
Registrar, R.A.M.C.F.

Date 15th FEB 1918

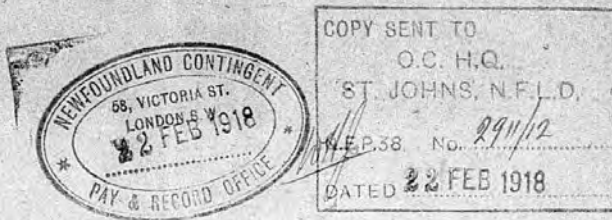
3rd London General Hospital,
WANDSWORTH, S. W.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 489 Rank private
Name (surname first) Robert Hayley
Regiment Royal Newfoundland

1. State what special qualifications you have for employment in civil life.

Fisherman



2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

Garment Hayley, Bonaville, Newfoundland
17 years

3. What is the nature and locality of the employment you desire?

Previous

4. What is the name of your Approved Society?

S.U.S.

5. Have you been employed whilst with the Colours? If so, in what capacity?

Date 11/2/18

Signature Robert Hayley

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No.....of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Medical Report on an Invalid.

Station 3rd London General Hospital
Wandsworth SW

Date 12/2/18

CERTIFIED TRUE COPY

- 1. Unit 1st R. Afld
- 2. Regimental No. 489
- 3. Rank Pte
- 4. Name Hayley R
- 5. Age last birthday 28
- 6. Enlisted { on 8.9.1914
at St Johns Afld

- 7. Former Trade } Fisherman
or Occupation }
- 7A. If with previous service in Army, state:
 - (a) Former Unit;
 - (b) Regimental No.;
 - (c) Date of Discharge;
 - (d) Cause of Discharge.



8. Disability in respect of which invaliding is Proposed.

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

l/s W of left shoulder

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. Sept 23rd 1917

10. Place of origin of disability. Flanders

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Removed to No 11 General Hospital Etaples, put in splints, removed to England, piece of metal removed at Fulham Military Hospital.

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

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

l/s W
Active Service

Wound completely healed. Limitation of movement at the shoulder joint. He cannot raise his arm above a right angle with his body. Injury to bone.

13. What is his present condition?

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

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

- (a) In action? *Yes*
- (b) On field service? *Yes*
- (c) On duty? *Yes*
- (d) Off duty? *No*

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

If so—(a) When?

(b) Where?

(c) Opinion?

} Not Applicable

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

removal of metal

17. If not, was an operation advised and declined?

not applicable

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

} Not applicable

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

20. Do you recommend—

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

Temporarily unfit

(Sgd) J St Andrew Litmas Capt
Officer in medical charge of case.

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

~~except~~† *2nd London General Hospital*
Station *Wandsworth SW*

(Sgd) A C Bruce Porter

Date *13/2/18*

Officer in charge of Hospital

Col A C Bruce Porter
Comd'g 2nd London Gen. Hospital

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

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

Opinion of the Medical Board.

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

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

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

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

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

(i.) Service during the present war;

Yes

(ii.) Climate;

—

(iii.) Ordinary military service;

—

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

No

(v.) Whether it is constitutional or hereditary.

No

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

GSW

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

—

23. Is the disability permanent?

Yes

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

—

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

60%

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

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

vide 16

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

Yes

(b) Change to England?

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

as an outpatient for massage and passive movements.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

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

Station 3rd London Gen Hosp Wandsworth SW

Date 13/2/18

Approved 3rd London Gen Hosp Wandsworth SW

Station 3rd London Gen Hosp Wandsworth SW

Date 13/2/18

(Sgd) John Poynton Capt R.A.M.C. President.

(Sgd) R. Belmont CS Members.

(Sgd) John Poynton Capt R.A.M.C. Administrative Medical Officer.

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

MEDICAL HISTORY of

Surname Haley Christian Name Robert

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... { on _____ day of _____ 191 .
 at _____

Declared Age ... 25 years _____ days.

Trade or Occupation ... Fisherman

Height ... 5 feet, 5 3/4 inches.

Weight ... 160 lbs.

Chest Measurement { Girth when fully Expanded. _____ inches.
 Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... _____ Right _____ Left _____
 Number _____

When Vaccinated ... _____

Vision ... { R.E.—V= _____
 L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____

(Rank) _____ Medical Officer.

Enlisted ... { at St Johns A.F.
 on _____ day of _____ 191 .

| | | |
|--------------------------|----------------------|------------|
| Joined on Enlistment ... | Corps. | Regtl. No. |
| | <u>1st Btyld</u> | <u>489</u> |
| Transferred to ... | <u>Newfoundland.</u> | |

Became non-effective by _____

on _____ day of _____ 191 .

(Signature) _____

(Rank) _____

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

| Date | Brief details, and signature |
|-----------|--|
| Oct. 1914 | <u>TV</u> 2 |
| 22.4.15 | Vae |
| 13.8.15 | Fit for foreign service |
| 10.9.15 | <u>CV</u> 2 |
| 13.2.18 | <p>Board held Found - permanently unfit Board - Approved. 13/2/18 Used 1. E. H. Bingley Capt Rtd MC I J. G. 3rd London General Hospital Wpudsworth SW</p> |

Table IV.—Service Table.

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

Bonaville

March 14

1920

C.R. 489

H. C. Jones

St John's

Dear Sir

With reference to
the 1914-1915-Store I received it about
two weeks ago thank awfully

yours truly

489 C.R. Pte R Hayley
Bonaville

m. f.

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 Star.

C.R. 489

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

489 Name M. Hoyle.....

Date Mar. 28....

Place Bonawista....

CIRCULAR LETTER

C.R. 489

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

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

W. J. Rendell

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

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

I certify that I am entitled to this issue, having served on* *Egypt, Zanzibar, & Belgium* from *1st Sep* 1915 to *Jan'y* 1915.

(Date) *22.3.19* (NO) *489* (Rank) *Plt* (Name) *Robert Stanley*
(Place) *Bombay*

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

Witness
Shindler

A. Harley

Riband posted 24/3/19

not possible for applicant call for ribbon
JR

C.R. 489

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 18, 1918.

#489 Pte. R. Hayley.

Having been found Medically Unfit is discharged with effect
from 10/4/18.

C.R. 489

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

489 Pte. R/Haley,

Discharged 10- 4 - 18, Medically unfit

C.R. 489

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 12, 1918.

#489 Pte. R. Hayley.

Having been found Medically Unfit ~~and~~ is discharged with
effect from 10/4/18.

2489

March 28th. 1918.

From Officer Commanding,
Depot.

To Paymaster and Officer i/c Records,
Department of Militia.

489 Pte. R. Hayley,
3443 Pte. E. Spurrell.

Marginally noted men were recommended for discharge as permanently unfit by Medical Board held on March 27th. 1918.

I am sending them herewith for your attention and necessary action, please.

C.R. 489

Dec 9-3

Extract from Preliminary Report from The Director of
Medical Services, to Officer Commanding, Depot dated
March 28th, 1918.

#489 Pte. R. Hayley.

Recommended Discharge as Permanently Unfit.

CR 489

Extract of Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, March 25, 1918.

The following man reports to Depot on 25/3/18/-
from overseas:-

#489 Pte. Healey.

C.R. 489

Extract from Casualties from Pay & Record Office, London.

Dated Feb. 15th 1918.

.....

FOR DISCHARGE.

The undernoted, ex 3rd London General Hospital 15/2/18 is granted furlough to 10 a.m. 22/2/18, with orders to report at 58, Victoria Street on the latter date for disposal. To be repatriated.

#489, Pte. R. Haley.

AUTHORITY:

A.Fs. B. 179.

C.R. 489

Extract of Casualties received from Pay & Record Office,
London, dated January 17, 1918.

#489 Pte. R. Haley.

Transferred from Fulham Military Hospital, 15/1/18 to
3rd London General Hospital, S.W.18.

Auth: Memo from 3rd London General Hospital.

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 _____

| Line Number | Rcd | By | Sent | by | Check |
|-------------|-----|----|------|----|-------|
| | | | | | |

Dated 30th October, 1917.

To Mrs. Mary Haley,
Bonavista.

Record Office London today reports No. 489 Private Robert Haley at Fulham Military Hospital, Hammersmith.

R. A. SQUIRES,
Colonial Secretary.

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 _____

| Line Number | Rcd | By | Sent | by | Check |
|-------------|-----|----|------|----|-------|
| | | | | | |

Dated October 6, 1917.

To Mrs. Mary Haley,

Bonavista.

Regret to inform you that Record Office London, officially reports No. 489, Private Robert Haley, was at Harvard General Hospital, Dannes Camiers, September twentyfourth, suffering from mild gunshot wound in left shoulder. Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

JOHN E. BENNETT, R.A. SQUIRES
Colonial Secretary.

489 Pte. Robert Haley. ✓

Extract of Casualty list received October 6, 1917.

Gunshot Wound Left Shoulder mild. at Harvard General
Hospital, Dannes Camiers. September 24.

C.R. 489

*Are those already
filed?*

Extract of Daily Orders part 1, by Lieut. Col. A. L. Hedow,
C.M.G., Comdg. Infl. Regt. 25/9/17.

#489 Pte. R. Haley. B.Co.,

wounded (Shell shock)

C.R. 489

Extract from List of Officers, and
Men of the Newfoundland Regt. who
were employed as Transport on the
1st. 2nd., 3rd., Composite Battalions
engaged on the Western Frontier in Egypt.
Dec-----Feb.

#489 Pte. R. Haley.

The above man did not embark for Gallapoli
but were left behind at Alexandria when the
Battalion sailed on Sept. 13, 1915.

22/4/16.

C.R. 489

Extract from Nominal Roll Embarked ST. JOHN'S, per S.S.

"Florizel" Oct.4.1914.

489 Haley Fred.

C.R. 489

Robert Halley was attested for General service
with the NEWFOUNDLAND REGIMENT onSept. 11th. 1914.
Regimental No 489 was allotted to Pte. Robert Halley.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

R. Haley

#89

P.R.O.

12/12/17.

Sir

Kindly grant £5. out
of credit due to me and
oblige

Yours respectfully
489. St. St. Stephen.
1st. Newfoundland. Regt.

H.H. St
no.

O.K. Y.H.
12/14/17.



No.
1514

ANGLO-AMERICAN



WESTERN UNION

DIRECT UNITED STATES

CABLEGRAM

| | | | | | | | |
|---|--|--------|--|-------------------|--|------------|--|
| Prefix | | Code | | SENT | | FOR STAMPS | |
| WORDS | | CHARGE | | At | | | |
| 70 | | | | To | | By | |
| | | | | VIA ANGLO. | | | |
| THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS. | | | | | | | |

12/12/17. TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To E.F.M. MRS. JAMES HALEY,
BONAVISTA (NEWFOUNDLAND).DID YOU RECEIVE CABLE FOR TEN POUNDS THROUGH MINISTER
MILTIA NOT YET RECEIVED.

BOB HALEY.

CHECK
H.O.P.

Authorised:

Change of 489 R. Haley

20
2 1/2
40
40
80
4-2

CHARGED
PAY BOOK 12-
12/17 by *YHS*

NOT TO BE
TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature

Address 58, Victoria St., S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

No. _____

12/11/17

N.F.P./45.

NEWFOUNDLAND CONTINGENT

OK £2-0-0
Ad. 16/11/17

Pay
19/11/17

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

Please remit to Fulham Military Hospital, Ward F. 1.
D. Dundas Road, Hammersmith, W. 6

the sum of Two (2) pounds _____ shillings, on
account of any balance that may be due to me.

(£2/0/0).

Regtl No. 489. Rank Private

Name Robert Hayley

6883

16 NOV 1917 Approved W. K. Parbury
Officer i/c.

12/11/17 19/11/17

Hospital.

Dated at Fulham Military Hospital



. 12418/4

19th, November

Fulham Military

Hammersmith, W. 5.

489 Pte. Robert Hayley

2. 0. 0.

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT



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

*OK £ 3-0-0 =
AW. 19/11/17
Receipt to 476*

Please remit to No 469. Pte. Hayley. 1st Newfoundland
E.1 Ward Fulham Military Hospital
the sum of Three pounds _____ shillings, on
account of any balance that may be due to me.

(£3-0-0).

Regtl No. 469 Rank Pte

Name Hayley, R. X.

Approved W. R. Parbury
Officer i/c.,

_____ Hospital.

Dated at 19-11-17



No.

1157

ANGLO-AMERICAN

WESTERN UNION DIRECT UNITED STATES
CABLEGRAM



| | | | |
|--------|--------|-------------------|---|
| Prefix | Cods | At | FOR STAMPS |
| WORDS | CHARGE | To | By |
| 15 ✓ | | VIA ANGLO. | |
| | | | THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS. |

14/11/17 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

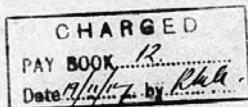
To , EFM MRS JAMES HALEY
BONAVISTA (Newfoundland)

PLEASE CABLE TEN POUNDS THROUGH MINISTER MILITIA



489 R HALEY

15
2 1/2
30 1/2
37 1/2
3 1/2



Charge to R. Haley
489

(Authorised)

NOT TO BE
TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature

Address

58 Victoria St. S.W. I.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

To the Paymaster.

Ok 2nd
aw 29/10/17

Please send £2 to R. H. Haley
489 1st Newfoundland, patient Fulham Military
Hospital and E-1 - Hammer
pay book with name -



C. Parsons Lt Col R. H. Haley
D. J. M. H.

| | |
|------------------------|-------------|
| STEWART & CO. PRINTERS | |
| RECORDS OFFICE | |
| Ref. No. | 6942 |
| Rec'd. | 29 OCT 1917 |
| Aut'd. | [Signature] |
| Ans'd. | 11563/1 |
| File No. | 11472 |

11563/1

1st, November

Fulham Military

St. Dunstan's Road, Hammersmith, W. 6

489 Pte R. H. Haley

6970

2. 0. 0.



For God, For King & For Country



PATRON
Y.M.C.A. NATIONAL COUNCIL
H.M. THE KING.



PATRON
MILITARY CAMP DEPT.
H.R.H. DUKE OF CONNAUGHT.

Pte Hayley R.
Reply to No 489 Company B. Bar. 1st Regt Newfoundland
Stationed at Military Hospital Gulham
St Dunstons Rd. E.I. Ward. 31-10-17 1917

To the Paymaster

Sir

Have you received my pay-book, which I sent to the pay-master's office a few days ago, also did you get my note asking for the sum of £2-0-0, if you did would you kindly forward same as quickly as possible as I am in great need of it, owing to small petty debts, I have to pay, and oblige Please

Pte Hayley R.

No 489

1st Batt Newfoundland's

| | |
|------------------------|-----------------|
| NEWFOUNDLAND REGIMENT | |
| PAY & RECEIVING OFFICE | |
| Ref. No. | 6437 |
| Rec'd. | 1 NOV 1917 |
| Acc'd. | |
| Ans'd. | 11/26/17 1/1/17 |
| File No. | |

| | |
|------------|-------------|
| BRANCH | |
| ACTED UPON | |
| BY | [Signature] |
| DATE | 30 11 17 |

Gulham Military Hospital
Dunstons Rd
Gulham.

9185/1

- 6 SEP 1917

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

Paymaster i/c Clearing House,
Base,
B. E. F.

FM/WF

489, PTE. R. HALEY,
1st. NEWFOUNDLAND REGIMENT.

With reference to your memorandum Lon/1st.
Newfoundland Regt. B.C.C, 28/8/17: The following
P. M. A's were charged against the above Soldier for
February,-

| | |
|---------|------------|
| 8/2/17 | 20 Francs, |
| 11/2/17 | 15 " |
| 15/2/17 | 15 " |
| 15/2/17 | 15 " |

Major,
Chief Paymaster & O i/c Records.

IN REPLY
PLEASE QUOTE

MEMORANDUM.

1301/2 Newfield Regt
12/66

1
Aug 28th 1917

From Paymaster i/c Clearing House, Base,
British Expeditionary Force in France.

To *Regt Paymaster*
London District

Would you please forward for my information
a copy of all charges made in the undermentioned
soldier's *Ac* during the month of February 1917.

Cash payments to —
No 484 Pte Haley P. B Co — Newfoundland Regt.

REGIMENTAL PAY
LONDON DISTRICT

31 AUG 1917
188, REGENT ST

C. O. Miller

2/p/

for ~~Paymaster~~ *Regt.*
Paymaster i/c Clearing House, Base,
British Expeditionary Force in France.

2

Paymaster & O/E Records
Newfoundland Contingent
58 Victoria St
SW1.

Passed to you please for necessary action.

| | |
|-----------------------|----------------|
| NEWFOUNDLAND REGIMENT | |
| P.M. RECORD OFFICE | |
| Ref. No. | 4938 |
| Rec'd. | SEP - 4 1917 |
| Acc'd. | |
| Ans'd | 9/6/17, 6/9/17 |
| File No. | |

| |
|------------------------|
| COMMAND PAY OFFICE |
| LONDON DISTRICT |
| 3 SEP 1917 |
| 168, REGENT STREET, W. |
| No. |

M. J. ...
COLONEL,
COMMAND PAYMASTER,
LONDON DISTRICT.

SPA

Received the sum of two pounds (2)
from O/C Fulham Military Hospital as per
letter from ~~Comd~~ Paymaster & O/C Records
Newfoundland Contingents. N.F.P./48
No 11563/1 Dated 4/4/17.

Cheque 206970.

no 6970⁴⁸⁹ Pke.



J. Hoyle

No 489

To:- Officer in charge,
Newfoundland Contingents,
58, Victoria Street, S.W.



With reference to your communication No. 11563/1
N.F.P./48 dated the 1st inst. herewith please find No. 489
Bte. R.H.Haley's receipt for £2/-/- (two pounds) as requested
therein.

D.K. Parlan

Capt. R.A.M.C.
For O. i/c

Fulham Military Hospital.
St. Dunstan's Road.
Hammersmith W.
Nov. 2nd 1917.

Cher 6970

No. 489 Rank MC Name Healey R.

| | | | | |
|----------------|------|-----|-------|-----------|
| Pay | F.A. | Wkg | Total | N.E. 1933 |
| 100 | 10 | | 110 | ARS |
| Less Allotment | | | 60 | |
| Net Rate | | | 50 | |

| DEBITS | Date | £ | s | d | Period | | Days | Rate | £ | s | d | |
|-------------------|---------|---|----|---|--------|----------------------------------|---------------------------------|------|----|----|----|------------------|
| | | | | | From | To | | | | | | |
| Balance | | | | | | 21 ¹² / ₇₇ | | | | 4 | 3 | 6 ✓ |
| Acquittance Rolls | | | | | | 22 ¹² / ₇₇ | 15 ² / ₇₇ | 56 | 50 | 28 | 00 | 5 15 1 - |
| Hospital Advances | | 1 | 10 | 6 | | | | | | | | 16 0 ✓ 10-14-7 ✓ |
| A.B. 64. | | | | | | | | | | | | |
| P.&.R.O. Payments | | | | | | | | | | | | |
| cheque 756r | 15/7/18 | 9 | 0 | 0 | | | | | | | | |

1-10-6 ✓

Rating allow
15²/₇₇ to 22¹²/₇₇
8 days @ 2/

~~8-10-1~~
9-14-1

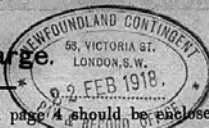
ARS
15/7/18

Hayley R

-489

Ray Dept

Proceedings on Discharge.



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

No. 489 Army Rank Private

Name Hayley Robert
(The name must agree exactly with that on enlistment, unless changed subsequently by authority.)

Corps Royal Newfoundland Regiment

Battalion, Battery, Company, Depot, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge April 10th 1918

Place of discharge St John's, Nfld.

1. Description at the time of discharge.

Age 28 years 10 months
 Height 5 feet 5 3/4 inches
 Chest measurement { girth when fully expanded _____ ins.
 range of expansion _____ ins.
 Complexion Fair-dark
 Eyes Greyish
 Hair Brown
 Trade Fisherman

Descriptive marks.
OSW Left Shoulder.

Intended place of residence
(To be given as fully as practicable)
1/2 Mrs J Hayley
St John's
Newfoundland

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Wounds received in Action.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2068 has been issued to*

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 Commissioners of Chaises Hospital.
Statement X should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming the 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, to be completed by the Officer i/c Records when referred by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.
Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.



A Name in full *Hayley Robert Alfred*
Regiment from which discharged _____
Regimental Number *489*
Where born (Parish, Town and County), and when *Bonavista Bay, Alfred 25.5.1884*
Intended address *Of Mrs J Hayley Bonavista Alfred*
Height on discharge *5 Feet 5 3/4* Inches
Colour of Hair on discharge *Brown* **Colour of Eyes** *Greyish*
Descriptive marks *YSW L. Shoulder* **Complexion** *Fair-dark*
Figure on discharge *Medium*
Christian name of Father *dead*
Christian name of Mother *Mary*
Wife's Maiden name in full _____
Date and Place of Marriage _____
Christian names of Children _____
Nature and locality of civil employment desired *Uncertain*

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) *Robert Hayley X*
Station *3rd London Gen Hospital* **(Rank)** *Private*
Date *12/2/18*

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 *3rd London General Hospital* **(Sgt) J St Andrew Titmas** *Capt* **Medical Officer i/c**
Date *12.2.18* **Hospital.**

B Period of Service and in what Corps ...

| Regiment | Years | Days | All Service Abroad with Stations | Years | Days |
|----------|-------|------|----------------------------------|-------|------|
| | | | India | | |
| | | | S. Africa | | |
| | | | | | |

Disallowed

Service towards Pension

Date inclusive to which pay has been issued

Sums due on account of public debts ...

Sum due on account of advance of Pension }

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ **Officer in Charge**
Date _____ **Records.**

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 489

Rank Private

Name (surname first) Robert Hayley

Regiment Royal Newfoundland



1. State what special qualifications you have for employment in civil life.

Fisherman

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

Ernest Hayley, Bonavista, Newfoundland
14 years

3. What is the nature and locality of the employment you desire.

Previous

4. What is the name of your Approved Society? S.M.S.

5. Have you been employed whilst with the Colours? If so, in what capacity?

Date 11/24/18

Signature Robert Hayley

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class P. or P(T) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 2 (1), para. 3, of Army Council Instruction No. 1912, of 1915.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Statement of Accounts

No. 488 Rank Pfc Name H. Emley
 Company, etc. Repatriated per S. S. 23/2/18 Class A
 From 22/12/17 to 23/2/18 (date)

| DEBITS | | | | CREDITS | | | |
|---------------------|----|----|-----|--------------------|---------|----|-----|
| Date | | | | Date | | | |
| Period | | | | 21/12/17 | Balance | 4 | 3 6 |
| 22/12/17-23/2/18 | | | | Period, | | | |
| Allotment 60¢ for | | | | 22/12/17-23/2/18 | | | |
| 64 days = \$38.40 | 7 | 17 | 10 | Pay & P. Allowance | | | |
| Hosp. Advances | 3 | 1 | 0 | 64 days @ \$1.10 | | 14 | 0 4 |
| P. & R. G. payments | 9 | 0 | 0 | \$70.40 | | | |
| " " " | | | 120 | Ration Allow. | | | |
| | | | | 15/2/18-23/2/18 | | | |
| | | | | 9 days @ 2/- | | 18 | 0 |
| Creditor Balance | | | | Debtor Balance | | | |
| | 19 | 10 | 10 | Total | | 18 | 0 |

Checked

This account is, in accordance with information received at the Pay & Record Office to 22/2/18 and is therefore subject to amendment if, and as may be found necessary.

CHECKED.
18/2/18

WILLIAMSON CONTROLS
122 FEB 1918

Statement of Accounts

No. 489 Rank _____ Pte _____ OF _____ Name R. Hayley ✓

Company, etc. Repatriated per S. S. 23/2/18 Class A

From 22/12/17 to 23/2/18 (dates).

| DEBITS | | | | CREDITS | | | |
|-------------------|----|----|------|--------------------|---------|----|-------|
| Date | | | | Date | | | |
| Period | | | | 21/12/17 | Balance | 4 | 3 6 |
| 22/12/17-23/2/18 | | | | Period. | | | |
| Allotment 60p for | | | | 22/12/17-23/2/18 | | | |
| 64 days = £38.40 | 7 | 17 | 10 | Pay & F. Allowance | | | |
| Hosp. Advances | 2 | 1 | 0 | 64 days @ £1.10 | | 14 | 9 4 |
| P.&R.O. payments | 9 | 0 | 0 | £70.40 | | | |
| " " " | | | 12 0 | Ration Allow. | | | |
| | | | | 15/2/18-23/2/18 | | | |
| | | | | 9 days @ 2/- | | 18 | 0 |
| Creditor Balance | | | | Debtor Balance | | | |
| | 19 | 10 | 10 | | | 19 | 10 10 |
| | | | | Total £ | | | |



CHECKED.
J.P.S.
200/1/18

NEWFOUNDLAND CONTINENT
88, VICTORIA ST.
LONDON E.C.1
22 FEB 1918
PAY & RECORD OFFICE

Certified correct, NEWFOUNDLAND CONTINENT

J. H. H. Marshall
CHIEF CLERK
Paymaster

Station _____
Date _____

DUPLICATE
FILED
No. 100
No. 100

Statement of Accounts OF

No. 458 Rank Plt Name R. Bayley
Company, Co. Repatriated per G. H. 23/2/18 Class 1
From 22/12/17 to 23/2/18 GRADE

| DEBITS | | | CREDITS | | |
|--------|--|-----------------|-----------------|--|-----------------|
| Date | | | Date | | |
| | Period <u>22/12/17-23/2/18</u> | | <u>21/12/17</u> | Balance | |
| | Allowment 60% for 64 days = <u>138.40</u> | 7 17 10 | | Period, <u>22/12/17-23/2/18</u> | |
| | Hosp. Advances | 8 1 0 | | Pay & F. Allowance 64 days @ <u>21.10</u> | 16 0 0 |
| | P. R. C. payments | 9 0 0 | | <u>270.40</u> | |
| | | <u>12 0</u> | | Ration Allos. | |
| | | | | <u>15/2/18-23/2/18</u> | |
| | | | | 9 days @ <u>2/-</u> | 18 0 0 |
| | Creditor Balance | <u>12 0 0</u> | | Debtor Balance | |
| | Total | <u>19 10 10</u> | | Total | <u>19 10 10</u> |

Checked
This account is in accordance with information received at the Pay & Record Office to 24/2/18 and is therefore subject to amendment if, and as may be found necessary.

CHECKED
27/2/18

WINDLAND CONTRACTS
22, VICTORIA ST.
LONDON, E.C. 1.
22 FEB 1918

Certified
[Signature]

DUPLICATE
 MAIL COPY
 Army Form W15008
 Issued 21 MAR 1918

Statement of Accounts

OF

No. 486 Rank Pte Name R. Hayley
 Company, etc. Repatriated per S. S. 23/2/18 Class A
 From 22/12/17 to 23/2/18 (dates).

| DEBITS | | | | CREDITS | | | |
|--------|-------------------|----|-----------------|------------------|--------------------|--------|--------|
| Date | | | | Date | | | |
| | Period | | | 21/12/17 | Balance | | 4 3 6 |
| | 22/12/17-23/2/18 | | | | Period. | | |
| | Allotment 60p for | | | 22/12/17-23/2/18 | Pay & F. Allowance | | |
| | 64 days = 38.40 | 7 | 17 10 | 64 days @ 1.10 | | | |
| | Hosp. Advances | 2 | 1 0 | 270.40 | | 14 9 4 | |
| | P.R.O. payments | 9 | 0 0 | Ration Allow. | | | |
| | " " " | | 12 0 | 15/2/18-23/2/18 | | | |
| | | | | 9 days @ 2/- | | | 18 0 |
| | Creditor Balance | | 12 0 | | Debtor Balance | | |
| | Total £ | 19 | 10 10 | | Total £ | 19 | 10 9 2 |

This account is, in accordance with information received at the Pay & Record Office to 21/2/18 and is therefore subject to amendment if, and as may be found necessary.

CHECKED

S.H.
 27/2/18



Station

Date

Certified correct

NEWFOUNDLAND CONTINENTAL
 CHIEF PAYMASTER
 Paymaster.

DUPLICATE

MAIL COPY
Army Form W. 3226

dated 21 MAR 1918

Statement of Accounts
OF

No. 486 Rank Pte Name R. Hayley

Company, etc. Repatriated per S. S. 23/2/18 Class A

From 22/12/17 to 23/2/18 (dates).

| DEBITS | | | | CREDITS | | | |
|-------------------|---|----|------|--------------------|---------|----|-------|
| Date | | | | Date | | | |
| Period | | | | 21/12/17 | Balance | | 4 3 6 |
| 22/12/17-23/2/18 | | | | Period. | | | |
| Allotment 60% for | | | | 22/12/17-23/2/18 | | | |
| 64 days = 458.40 | 7 | 17 | 10 | Pay & F. Allowance | | | |
| Hosp. Advances | 2 | 1 | 0 | 64 days @ 21.10 | | | |
| P.&R.O. payments | 9 | 0 | 0 | 270.40 | | 14 | 9 4 |
| " " " | | | 12 0 | Ration Allow. | | | |
| | | | | 15/2/18-23/2/18 | | | |
| | | | | 9 days @ 2/- | | | 18 0 |
| Creditor Balance | | | | Debtor Balance | | | |
| Total £ | | | | Total £ | | | |
| 19 10 10 | | | | 19 10 10 | | | |



CHECKED
[Signature]
m 11/18

NEWFOUNDLAND CONTINENT
58, VICTORIA ST.,
LONDON, S.W.
22 FEB 1918
PAY & RECORD OFFICE

Certified correct
[Signature]
CHIEF PAYMASTER
Paymaster.

Station _____
Date _____

Certificate to be signed by Soldier on Discharge.

I hereby acknowledge that I have received all my Pay and Allowances
(including Clothing Allowances) and all just demands up to the present

Date April 22nd 1918

Date April 27, 1918

Sig. of Soldier

R. Hayley

Place

Tomball

Sig. of Witness

John Roper

R. Hayley

Despatching
Office
Stamp



No. 22

From Johnston

Registered Letter Addressed--

[Faint handwritten text, possibly "Johnston" and "B. B."]

Arrival
Office
Stamp

[Handwritten signature]

Received by Johnston B. B.



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND.

March 27th., 1918.

Capt. J. M. Howley.

Paymaster.

Sir:

I hereby apply for the cancellation of my allotment
made out in favor of Mrs. James Hayley, such cancellation to take
effect from March 1st.

I have the honour to be

Sir,

Your obedient servant.

B. Hayley

489. Royal Nfld Regt

6333.

Bonaville, Sept 2/19

Capt J. M. Howley.

St. Louis.

Dear Sir:

By ~~the~~ ~~way~~ I inform you that
since ~~you~~ ~~have~~ discharged I
have ~~not~~ received three
payments of War Service
Credit ^{one in} March, June
and May. I have served over
three years with the Regiment
and am entitled to six months
Credit.

You would oblige by
looking up my records

and have balance of
money due me past on.

Thanking you in
advance, I am,

Yours truly,

459 Robert Hardy

July 14
1919

Cpt Stouley

Dear Sir

I havent
received my Pay of seventy
dollars for june I have
only received three months
Pay and I understood
we were to received
six months Pay

yours truly
489 Pte R Hayley
Bonavista
P.O. Box 11
R.F.D.

Chas. M. [unclear]
[unclear]

| | |
|--------------|------------------|
| Bonus | 137 ⁰ |
| over C Ralfe | 54 |
| Jan 4 to pay | 8556 |
| Mar 1 | 70 ⁰⁰ |
| Apr 1 | 75 ⁰⁰ |
| May 1 | 70 ⁰⁰ |
| Jun 1 | 75 ⁰⁰ |
| July 1 | <u>39.90</u> |

5867

Bonaventura
July 23 1919

Dear Sir

I thought that I was
titled to six months War Service
Gratuity but I have only received
three so far and it looks to
me that it is took from me
so I havent received any for
june I should think that
I am titled to as well as
the rest of the boys after
serving three years and seven
months I wrote Capt Howley
but got no answer yours Truly
489 Plt R Hayley
Bonaventura

P.O. Box 11
N.Y.C.

allent
H.H.

5983

Bonavista
Aug 7th 1919.

W.A.E. Hickman
St Johns.

Dear Sir:

As I understand it, a man who has served in the war for 3 years or over is entitled to receive as a kind of Bonus of full pay for six months. Now Sir I had served 3 years and 7 months and I have only received 3 months pay. Other boys of my town who had served with me and some a little less than me have received theirs but I have only received 3 months. which thing I can't understand and I would like to hear from you why it is that I was cut off after 3 months. I am also entitled to receive a pension but I have not yet received it this month. of course this is not a long bit overdue but I thought I would mention it in case of an oversight.

Yours very truly
Wm Robert Hayley No 489.
Bonavista

Mar

Apr

May

June

July

mailed Sep 16

Completing payments

[Signature]
3

April 3rd, 1919

#489 Pte. Robert Hayley,
Bonavista.

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,

Captain,
Paymaster & Officer in Charge Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

10737

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 inshes, if any question are not applicable, the words "NOT APPLICABLE" must be written out.

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

- 1. Christian name..... *Robert*..... 2. Surname..... *Hayley*.....
- 3. Rank..... *Private*..... 4. Regtl. No..... *H. 89*.....
- 5. Address in full to which future payments of gratuity are to ~~for~~ be forwarded..... *Robert Hayley*
Bonaville.....
- 6. Date of enlistment in the Regiment... *9 Sept 1914*.....
- 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
No separation allowance paid on my acc
- 8. Relationship of such dependents..... *Mother*..... *Sister*.....
- 9. Address in full of such dependent..... *Mary Hayley*
Bonaville.....
- 10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
- 11. Were you on active service only in Nfld. If so, give dates, and particulars of such service..... *Egypt Sept 1915*..... *France*
Belgium.....
- 12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *3 years & 7 months*.....

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

..... only one enlistment.....
..... Royal W. Regiment.....

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.....

..... none received.....

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

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

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

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

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

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

..... (b) Reason for discharge.....

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..... Beaumont Hamel..... 7 July 1916..... Yes.....
..... Somme 12th Oct 1916..... other places.....

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.....

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

Signature of Applicant:

A. Hayley

Place of Residence:

Barrington

Declared before me at:

Barrington Mass

This

21st

day of

March 1919.

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

J. H. [Signature]
J.P.

POST DISCHARGE PAY.

| Date paid | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
|--------------------|-----------------|-------------------|-------------------------|-------------------|
| | | | <i>6.00</i> | <i>420.00</i> |
| | | | | |
| | | | | |
| Certified Correct. | | | Paymaster. | |

March 26, 1919

#489, Pte. R. Hayley,
P.O. Box 11,
BONAVISTA.

With reference to your
letter of March 18th. I enclose form of Claim
for War Service Gratuity.

Lieut.
For Paymaster

7474

November 24, 1919

489
Robt. Hayley,
Bonavista,
E. E.

Dear Sir:

With reference to
your letter of recent date, I have to inform
you that War Service Gratuity has been paid
you in full, and is computed as follows:

| | |
|------------------------------|----------------|
| Over Cr. Ration Alice. 2/3d. | .54 |
| Bonus at date of discharge | 13.70 |
| Jan. 4. Post Discharge Pay | 85.86 |
| March | 70.00 |
| Apr. | 70.00 |
| May | 70.00 |
| June | 70.00 |
| July | 39.90 |
| | <u>3420.00</u> |

Yours truly,

Lieut.
For Paymaster

Bonovistē March 21st 1919

Hon JRBennett

Minister of Militia

S John.

Dear Sir.

I am told that some of our boys have been paid something extra and that all the soldiers are allowed the same. I am also told that there are certain forms to be filled in by the applicant. As I have not been informed from your department re this matter I am rather puzzled why I have been overlooked. I served a longer term than many and did my duty. I shall be pleased to receive the blank form by return of mail

and oblige

Yours respectfully

Robert Hayley

RB

~~Dear form~~

April 4, 1919

Mr. Robert Haylet,
Bonavista.

Dear Sir:

With reference to your letter of March 31st. I beg to inform you that I am forwarding you herewith, as requested, a form of claim for War Service Gratuity, which kindly have filled in before a Magistrate or Justice of the Peace and returned.

Yours truly,

Lieut.
For Paymaster

Bonaville
Dec 10/14

Capt Hawley
St. John's

Dear Sir.

I am now writing you with regards to my Gratuity Pay. So far I have only received 4 months of 70^{00} & 1 month of 39^{00} making a total of 319^{00} .

Therefore I think there is another 101^{00} due me on account of Gratuity Pay.

I would also like to say there is another 55^{00} due me for balance of out of clothes as I only received 25 for out.

There is also two months pension due me for September & October. I trust to hear from you at an early date.

Yours
Sincerely yours
Edw. Robert Hawley
Bonaville

| | | |
|--------|------------------|---------|
| Bonus | dat of discharge | 13.70 |
| over | Raebe | .54 |
| | 2/3 | |
| Jan 1 | 1 Day | 85.86 |
| Mar 1 | | 70.00 ✓ |
| Apr 1 | | 70.00 ✓ |
| May 1 | | 70.00 ✓ |
| June 1 | | 70.00 ✓ |
| July 1 | | 39.90 ✓ |

\$ 420.00

Wj
Paymaster

March
18 1918

S. C. C. Oke

Dear Sir

I am
informed by the Regiment
that you got to have
a form to fill in before
you can get the money
that is due to you
of what. Please send
me one your truly

W. S. Hayley
P. O. Box 11 Bonaville

N. Y. L. D.

~~W. S. Hayley~~
W. S. Hayley

| | Date | Initials |
|-------------|---------|----------|
| RECEIVED | 21.3.18 | W. S. H. |
| REFERRED TO | | C. O. |
| FORWARDED | | |

Bonavesti

March
30th 1920

10350

Sent- Colonel Kandell

Dear Sir

Will you

Please be kind enough to send my
Mother a seperation allowance form
to fill in,

Yours Truly

489 Pte Robert- Hayley
Bonavesti P.O. Box 11
N. Y. L. D

April 10. 20

Ex Pte. Robert Hayley
Bonavista,
(P.O. Box 11)

Dear Sir:

With reference to your letter of March 30th. I enclose form which kindly have your mother complete in the presence of a Magistrate or a Justice of the Peace and return to this Office to be considered by the Board of Review.

Yours truly,

Capt.
For Paymaster.

LM/Enc.

Apr.
Feb. 15th. 18

Private Robert Halcy,
Bonavista, B.B.

Dear Sir,-

I enclose herewith cheque for \$51.30,
being the balance of pay due you to the date
of discharge, also a Certificate of Pay.

I also enclose Certificate of Discharge,
dated April 10th. 1918, together with special form,
which kindly sign and return to this Office.

Yours faithfully,

Capt. & Paymaster &
Officer i/c Records.

Enclosures 4.
JMH/JH.

Jan 2
1919

Capt Howley

363 Dear Sir

I am sending for the
balance of money that is due to
return soldiers as I was discharged
10 of April 1918

489 Pte Robert Hayley
Bonarville

P.O. Box 11
N.Y.S.D.

2.0
New

Jan. 7th. 1919.

Pte. Robert Hayley.
Benavista, B.B.

Fred. J. Owen

Dear Sir,-

Referring to your letter of Jan. 2nd.
I beg to enclose cheque for \$85.86, being three
months pay due you after Discharge.

Yours faithfully,

Capt. & Paymaster.

ENCLOSURE 1.

To: The 4164

Board of Pension Commission
for Newfoundland

Dear Sirs.

Having been discharged
in April, ¹⁹¹⁸ I only received \$25.00
for a suit of clothes. I am
expecting a Balance on the
same. Your Truly

489 Robert Hayley
Bonaville
N. F. I. D.

Pension number 468.

A. C. J.

April 5, 1919

489, Pte. R. Hayley
Bonavista.

I enclose herewith cheque for
\$35.00, balance in Clothing Allowance due
you.



Eapt.
Paymaster.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 51³⁰/₁₀₀

Apr. 10th 1918

Received from the First Newfoundland Regiment
the sum of Fifty One 30/₁₀₀ Dollars.
on account
balance of Pay when Discharged.

| | |
|-----------------------|--------------------|
| Ch. No. <u>5196</u> | Initials <u>ew</u> |
| Pay Ledger <u>SP</u> | Initials <u>ew</u> |
| Gen. Ledger <u>SP</u> | Initials <u>SP</u> |

Regtl. No.

~~DATE~~
ew

No. 489 Rank 1st

Name R. Bayley

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15.⁰⁰/₁₀₀

Mar 25th 1918

Received from the First Newfoundland Regiment
the sum of Fifteen 00/₁₀₀ Dollars.
on account of Pay.
balance

R - Hogley

| | | |
|--------------|----------|-------------|
| Ch. No. 5078 | Initials | [Signature] |
| Pay Ledger | Initials | [Signature] |
| Gen. Ledger | Initials | [Signature] |

Regtl. No. Rank

[Signature]

No. 489

Rank Pte

Name R. Bayley

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$20.⁰⁰/₁₀₀

Mar 29th 1918

Received from the First Newfoundland Regiment
the sum of *Twenty* *00*/₁₀₀ Dollars.
on account
balance of Pay.

| | |
|-----------------------|--------------------|
| Ch. No. <i>5263</i> | Initials <i>HL</i> |
| Pay Ledger <i>HL</i> | Initials <i>HL</i> |
| Gen. Ledger <i>HL</i> | Initials <i>HL</i> |

HL
R. Hayley
Regtl. No. _____ Rank _____

No. 489

Rank Pto.

Name R. Bayley

No. 489

Rank

Pl

Name

R Hayley

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰

Mar 28 1919

Received from the First Newfoundland Regiment
the sum of Thirty Five Dollars.
on account of Pay. Clothing
balance

| | |
|----------------|----------------|
| Ch. No. 14957 | Initials J. K. |
| Pay Ledger 108 | Initials J. K. |
| Gen. Ledger | Initials |

Regtl. No.

A. C. S.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 85⁸⁶/₁₀₀

Jan^y 4 19 18

Received from the First Newfoundland Regiment
the sum of Eighty Five ⁸⁶/₁₀₀ Dollars.
on account of Pay. D. P.
balance

| | |
|----------------|--------------|
| Ch. No. 7933 | Initials EW |
| Pay Ledger 108 | Initials AWL |
| Gen. Ledger | Initials |

Regtl. No. 108 Rank Serjeant

No. 489

Rank

06

Name

Hayley

HAYLY ROBERT N/R ~~CHK~~
N/R ~~TR~~ ~~HAYLY~~

SEPARATION ALLOWANCE.

NFLD Regt. ⁸⁵

Claimant. Mary Hayly..... mother.

On account of Robert Hayly..... No. 489..... Rank. Pte.....

Decision. Approved -
Payable from date of Leonard's
enlistment

Date July 27/1920

W. J. Rendell, Lieut. Col.
McDowley, Major

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

Allotment of 60¢ per day payable to Mary Hayly
his mother from 8/12/14 to 10/4/18
Discontinued on account of being discharged.

R. J. Summers

Σ 2-15 26-10
10 4-18 10 12
 36 12
 3
 3.7
 38-6

760.00
400
764.00 1150.00

57
81.2

12. State value of real property belonging to you and your husband *practically no value*
13. State value of personal property belonging to you and your husband *none*
14. If husband is dead state value of real and personal property left by him. *none of any value*
15. Actual amount contributed by soldier during the year prior to enlistment *\$600⁰⁰*
16. Was this amount contributed weekly or monthly *Monthly*
17. Did this amount include payment of son's board, etc. *his full wages*
18. State your son's trade or occupation prior to enlistment *Fisherman*
19. State amount of his wages per week *according to Voyage*
20. State name and address of his last employer *fishing with his Brother's boat*
21. State amount of monthly support from son since enlistment *\$18⁰⁰*
22. State amount of allotment received by you from son since enlistment *—*
23. State from what date did you receive allotment? *Enlisted 9th Sept 1904
1st allotment some time in Nov.*
24. Actual amount contributed by other children *Weekly Monthly*
Leonardi allotments for one year
25. Are any of these children in the employ of you or your husband? *No*
26. If not receiving support from other children, state cause, explain fully *all enough to do to look after themselves*
27. With whom are you residing at present? *Son Robert*

(28) Have you made a previous claim for Separation Allowance. If not, why? Give particulars? *no*

(29) Are you already in receipt of any payment from any Patriotic Fund? If so, how much? *no*

(30) Are you already in receipt of Separation Allowance from any source? If so, how much? *no*

(31) Was the soldier at the time of his enlistment an employee of the Nfld. Government? *no*

(32) In what capacity and in what place? _____

(33) Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much? *no*

I herewith make this solemn Declaration conscientiously believing the same to be true and 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 *Mary Hayley* ^{her} *John Rowsett* ^{Witness to Signature}

Place of Residence *Bonavista*

Declared and subscribed before me at *Bonavista* this *20th* day of *April* 1920

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. *John Rowsett J.P.*

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 above mentioned is the sole support of the applicant.

Signature of member of the Patriotic Fund Committee *Augustus C. Bayly M.A.*
Daniel Field

JMH/LM.

July 10, 1920

Mrs. Mary Hayly
Bonavista.

Dear Madam:

With reference to your application for Separation Allowance, will you kindly furnish me with the Marriage Certificate of your son, Ernest, and the Birth Certificate of your son Gilbert, also inform me if your son Gilbert offered for enlistment, if so, on what date and what is the number of his Rejection Badge.

Yours truly,

Major
Paymaster.

July 15th 1920. (1)

The Cherry House
Conasiate. B.B.

Unable to trace the entry of Gilbert
Hayley's Birth in our Register, but we
have the entry of his sister who is two
years older ^{only 1881} and a sister who is
younger Sept 23. 1883. He must come
somewhere between.

In our Marriage Register his age is
Recorded as 30 years on the day of his
Marriage Feb 14th 1914.

Ernest-J. Jones.

Assistant Priest

P.S.

I herewith enclose copy of
Marriage certificate of Ernest Hayley

(2)

Mrs Hayley informs me that
Gilbert did not offer for enlistment
being a married man at the
time, he therefore has no badge
of rejection.

Ernest J. Jones.

Assistant President

In answer to letter of Mrs May Hayley
of B. B. B. B. B.

Marriage Solemnized at Christ Church in the Parish of Bonavista in the Diocese of Newfoundland.

| No. | When Married | Name and Surname | Age | Condition | Rank or Profession | Residence at the Time of Marriage | Father's Name and Surname | Rank or Profes'n of Father |
|-----|----------------------------|------------------|-----|-----------|--------------------|-----------------------------------|---------------------------|----------------------------|
| 4 | Thirtieth Day of June 1900 | Ernest Hayley | 23 | Bachelor | Fisherman | Bonavista | James Hayley | Fisherman |
| | | Agnes Fisher | 22 | Spinster | — | Bonavista | Joseph Fisher | Fisherman |

Married in the Christ Church according to the Rites and Ceremonies of the Church of England.

By me Augustus C. Bayley (B. C. Priest)

This Marriage was solemnized between us

^{his Mark}
Ernest + Hayley
^{her Mark}
Agnes + Fisher

In the presence of us,

Thomas Roll
^{his Mark}
Phoebe + Hayley

I Certify the foregoing is a true Extract from the Register of Marriages belonging to Christ Church in the Mission of Bonavista

Witness my hand, this Fifteenth day of July 1920

Ernest-John Jones.
Designation Assistant Priest

11184

The Bank of Nova Scotia

ESTABLISHED 1822
BONAVISTA, NFLD. July 9th., 1920.

The Officer in Charge,
Regimental Pay Office,
St. John's.

Dear Sir:-

Private Robert Hayley 489 has asked me to write you regarding a claim he has made to you for Separation Allowance which he states should have been paid to his mother during his active service.

He left St. John's about Oct. 4th., 1914 and either returned or was discharged in April of 1918. He states that he was unmarried while away and that he made an allotment of 60¢ per day in his mother's, Mrs Mary Hayley's, favor and that she received same but that as he was her sole support she should have received the separation allowance as well. He claims to have written your office in the matter before this date but has received no reply.

Will you kindly look up your records and inform me if Mrs. Hayley was entitled to the separation allowance and if so whether your office will now make an adjustment covering the amount to her or to her son. I will be glad to supply you with further information regarding Pte. Hayley should you require it.

Yours faithfully,



Manager.

JMH/LM.

September 6, 1920

Mrs. Mary Hayly,
Bonavista.

Dear Madam:

With reference to your application for Separation Allowance, I beg to state that same has been approved, payable from date of your son Leonard's enlistment.

I am enclosing cheque for \$764.00 being amount due you to date of Robert's discharge, also cheque for \$180.00 representing payments on account of War Service Gratuity.)

Yours truly,

Major

Paymaster.

Enc. 2

Department of Veterans Affairs

Ottawa 4,

19

TO Supervisor,
War Service Records, Ottawa.

Mark Your Reply:

For attention of

For attention of

SUBJECT

File No.

(1)

The Department is authorized to place a memorial on the grave of the above named. Therefore, will you kindly insert the particulars requested on this form and return it to this office.

CEF

Departmental Secretary:

- (1) Service number 489
- (2) Surname HAYLEY
- (3) Christian names Robert
- (4) Date of Birth 25 May 1889
- (5) Religion Cof E
- (6) Unit of enlistment Royal Rifled Regt
- (6a) Highest corresp. rank Pte
- (7) Units overseas Royal Rifled Regt
- (7a) Highest corresp. ranks Pte
- (8) Rank on day of discharge Pte
- (8a) Corresp. unit -
- (9) Military honours Nil



(2)

Departmental Secretary,
OTTAWA.

The particulars have been added to this form and it is returned as requested.

Date

for Supervisor, War Service Records.

DEPARTMENT OF VETERANS AFFAIRS

Dept. of Veterans Affairs
War Service Records

Ottawa Ont

MAY 14 1962 Date May 11/62

Released to

To Copy for H.O. FILE

Attention of

NAME HAYLEY, Robert.

SERVICE CH 489 ROY. Nfld C.P.C. No. 260231
NUMBER REGT. W.V.A. No.NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

S.P.M.E. St. John's Newfoundland. May 2/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death April 14/62
Cause of Death
Place of Death Bonavista, B.E.s. Nfld.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~PAK~~
~~DO~~
H.O.

Destroy form if advice of death already received.

for
Chief, Central Registry

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet.
Reg. No. 490

Name Fred Keel

Apparent age _____ years _____ months. Height 5 feet 6 inches.

Chest measurement { Girth when fully expanded _____ inches.
Range of expansion _____ inches.

Distinctive marks Color: Fair, Hair: Light Brown, Eyes: Blue.

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Elizabeth Keel, Bonavista, Nfld.

| 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) Signature of Officer verifying entry from certificate.

| | | | |
|-----|-----|-----|-----------------------------------|
| (a) | (b) | (c) | (d) Verified from certificate. |
| | | | |

Particulars as to Children.

| Christian Names | Date and Place of Birth | (d) Verified from certificate. |
|-----------------|-------------------------|-----------------------------------|
| | | |

STATEMENT OF THE SERVICES.

| Corps in which served | Regt. or Depot | Promotions, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension | | Service in Reserve not allowed to reckon towards G. C. Pay | | Signature of Officers certifying correctness of entries |
|---|----------------|---|-----------|-------|--|------|--|------|---|
| | | | | | years | days | years | days | |
| Service towards limited engagement reckons from <u>11/9/14</u> | | | | | | | | | |
| Joined at <u>St. John's</u> on <u>11th September '14</u> | | | | | | | | | |
| <i>Embarked S.S. Hazel for G. H. S. in</i> | | | | | | | | | |
| <i>Embarked Halifax & landed Sable Bay 1-12-15.</i> | | | | | | | | | |
| <i>Embarked 15th. Proceeded to, Aug 16th.</i> | | | | | | | | | |
| <i>Embarked Harcourt 22nd. S. H. H. 4000</i> | | | | | | | | | |
| <i>Transferred to C.P.S. 21-6-16. Admitted No. 1.</i> | | | | | | | | | |
| <i>Embarked to England 1-7-16. Admitted Royal 7th.</i> | | | | | | | | | |
| <i>Transferred to Harcourt 16-2-17. Furloughed then</i> | | | | | | | | | |
| <i>Granted demobilization leave from 21-4-19 to 19-5-19.</i> | | | | | | | | | |
| <i>Embarked to be confirmed by 4th Term 19-5-19.</i> | | | | | | | | | |
| <i>Demobilization Approved 5³/₁₉ Confirmed 19⁵/₁₉</i> | | | | | | | | | |
| <i>H. O. Camp Winchester Barb</i> | | | | | | | | | |
| Total Service forfeited as above | | | | | | | | | |
| Total Service towards Engagement to <u>19-5-19</u> (date of discharge) <u>4</u> years <u>251</u> days | | | | | | | | | |
| " " " Pension " (") " " " | | | | | | | | | |