



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3225 Name Richard A Hickey Corps RC

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Richard A Hickey
2. What is your full Address? 2. 38 St. John's Hill?
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 18 Years 1 Months
5. What is your Trade or Calling? 5. Seaman
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Richard A Hickey 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.

E. Nov 11/15 Richard A Hickey SIGNATURE OF RECRUIT.
Harold Knight Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Richard A Hickey 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 on this 11th day of November 1915.

Signature of Attesting Officer Chas. Aye

†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 1915

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:—(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 Richard Augustus [unclear]
 Apparent age 18 years 1 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 4 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Michael [unclear]
35 Flann Hill | Relationship Father
[unclear] 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 _____									<div style="font-size: x-small;"> Total Service forfeited as above..... </div>
Joined at _____ on _____									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pensions " _____ [" "] " " "									

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3225 Name Richard A. Hickey RC

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Richard Augustus Hickey
2. What is your full Address? 2. 38 St. James Hall!
3. Are you a British Subject? 3. yes
4. What is your age? 4. 18 Year 1 Months
5. What is your Trade or Calling? 5. Seaman
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. yes
9. Are you willing to be enlisted for General Service? 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service } II. yes
to be signed by you if you are accepted?

I, Richard A. Hickey 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.

E. Nov 11/12 Richard A. Hickey SIGNATURE OF RECRUIT.
Charles Knight Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 11th day of November 1912.

Signature of Attesting Officer Wm. R. C. Capt

†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 compiled with. I accordingly approve, and appoint him to the:

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

Date 191

Place

} Approving Officer.

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

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



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 *Richard Lichey*
 aged *18 yrs* conducted at *LAAB*
 Date: *Nov 10th /16* Recruiting Officer:

NO OF TEST	FINDING
1	<i>nd</i>
2	<i>nd</i>
3	<i>nd</i>
4	<i>nd</i>
5	<i>nd</i>
6	<i>nd</i>
7	<i>pls</i>
8	<i>pls</i>
9	<i>no</i>
10	<i>~</i>
11	<i>~</i>
12	<i>~</i>
13	<i>~</i>
14	<i>Enlarged Tonsils.</i>
15	<i>~</i>
16	<i>~</i>
17	<i>~</i>
18	<i>~</i>
19	<i>Both.</i>
20	<i>~</i>
21	<i>~</i>
22	<i>~</i>
23	<i>~</i>
24	<i>~</i>
25	<i>~</i>
26	<i>~</i>
27	<i>~</i>
28	<i>~</i>
29	<i>~</i>
30	<i>~</i>
31	<i>~</i>
32	<i>~</i>
33	<i>nd</i>
34	<i>5'8"</i>
35	<i>115 lbs</i>
36	<i>3 1/2" 3 1/2"</i>
37	<i>no</i>
38	<i>Father Mr Michael Lichey 58 Lower Hill</i>
39	<i>none</i>

*To get both certificate from
 eye. fr.
 Reported Nov 10/16
 C. G. G. @pt.*

LAAB

Signature of Medical Examiner: *L. W. Gordon*

70

3225
C.R. ~~2591~~

Extract from Casualties received from Bay and Record Office,
London, dated December 24th., 1918.

Ref. Cas. Rept. No. 2591.

3225 PTE. R. HICKEY, is granted extension of furlough to 25/12/18
by O. i/c Records, Mfld., Contgt. He stated that a telegram from
O. G. 2nd., Battn, granting him 7 days extension of leave has
been lost.

AUTHORITY AS ABOVE

C.R. 3225

Extract from telegram received from Synoptical Mar. List,
1919.

Remittances received as follows have not been
paid soldier repatriated You can adjust.

3225 Hickey, P.2.O.O.

C.R. 3225

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND
REGIMENT DEPOT ST. JOHN'S dated March 20/19.

The Discharge of the undernoted on Demobilisation has
been ~~CONFIRMED~~ by Officer i/o Records on noted date.

#3225 Pte. Richard Hickey.

17/3/19.

C.R.

3225

Extract of DAILY ORDERS, PART II, Depot St. John's,
dated March 5th/19.

The discharge of the undernoted on Demobilization has been
APPROVED by O.C. Discharge Depot on noted date.

#3225 Pte. R. Hickey.

3/3/19.

C.R. 3225

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

3225 PTE. R. Hickey.

Recommended Discharge as Permanently Unfit.

C.R' 3225

Extract from Daily Orders Part II Unit The Royal
Hull, Regts. No. 4, 1918, 12-1-18.

The following extracted from Orders and reported
to Dept 9-1-18.

BLANDFORD BOND
Registered on 1.7. 1879.

STRATHMORE QUALITY

322¹/₂ Pte. Rd. Hickey.

(3115)

C.R. 3225

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

3225 Hickey.

REPRODUCED FROM
THE ORIGINAL RECORDS
OF THE
RECORDS DEPARTMENT
OF THE
DEFENSE

C.R. 3225

Extract from Casualties received from Pay and Record Office, London,
dated 17th June 1918.

3225 Pte. R. Hickey.

was transferred from 3rd. London General Hospital, from 3rd. London General
Hospital, to the Mil. Orthopaedic, Hosp., Shepards Bush, on 14/6/18.

December 26, 1917.

Dear Sir.

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 3225, Private Richard A. Hickey, has been admitted to Wandsworth.

Yours faithfully,

Mr. Michael Hickey,
38 Flower Hill.

Colonial Secretary.

C.R. 3225

#3225 Pte. Richard A. Hickey.

Extract of Casualty list received December 26, 1917.

Nature of Wounds previously reported.

At Sandsworth.

C.R. 3225

Extract of Casualties received from Pay & Record
Office, London, dated December 24, 1917.

#3225 Pte. R. Hickey.

Gunshot wound right Kne .

At 3rd London, General Hospital, Wandsworth, S.W.
22/12/17.

do

C.R. 3225

Extract of Casualties received from P y & Record
Office, London, dated 16/12/17.

#3225 Pte. R.A.Hickey. ✓

Wounded 3/12/17.

December 13, 1917.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 3225, Private Richard A. Hickey, was at the 47th General Hospital, LeTreport, December 5th, suffering from gunshot wound in the right knee.

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

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

Yours faithfully,

Colonial Secretary.

Mr. Michael Hickey,
38 Flower Hill.

3225 Pte. Richard A. Hickey.

Extract of Casualty list received December 13, 1917.

Gunshot Wound. right Knee.

At 47th General Hospital Le Treport December 5.

C.R. 3228-

Extract from Serial Roll Draft No. 22: All other ranks from 1/1st
Newfoundland Regt., ayr, 1/1st Bn. Sgt. E.H.F. Embarked
Southampton 6/11/17.

3225 Pte. Hickey, R.A.

MP.

C.R. 3225

Extract from Nominal Roll Draft embarked St. John's per
S.S. "GRAMPAAN" 31/1/17 sailed Halifax 16/4/17.

3225 Pte. R. Hickey.

C.R.

3225

Extract from Daily Orders Part II Unit the Royal
RFLB. Regt., St. John's, Nov. 16th, 1916.

3225 Pte. R. Hickey.

Attached to the Strength from. 11-11-16.

extract from statement of account to 31-1-19 from
Pay and Record Office, London

3225 Pte. Hickey, L. A.

Dr. Bal. 22-18-9

This transferred to Pay Office 26-3-19

R. Hickey

C.R. 3225

R.H.D.

8

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 362 (xvi. or xvii.) King's Regulations, and in cases of discharge under para. 392 (vi.) King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps... *Royal Newfoundland* Former Trade }
or Occupation }
2. Regtl. No. *3225* 3. Rank... *Pvt* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ;
with Regtl. Nos.
4. Name *Slippy* *R*
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
8. If the disability or injury was it caused
(a) in action (b) on held service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.
(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.

12. Place of origin of disability.

13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*Wounded in France 4-12-17
ISSW Regt + same front
Wound now healed*

Military Orthopaedic

HOSPITAL, at Shepherd's Bush, F.M.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
 admitted on 14.6.18 1918 disembarked at

* Here insert which Expeditionary Force.

NOTE.—Two copies of these Rolls to be forwarded, not later than the day after admission:

(i) One copy direct to the War Office, Alexandra House, Kingsway, W.C.I.

(ii) The other direct to the O. I/c Records of the Colonial Contingent concerned.

* The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

(a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.

(b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty * (See note in large type above).
3225	Pte	Hickey, Richard	1 Newfoundland	G.S.W. knee, rt. Transferred from 3rd London General
		<i>old</i>		<i>A. Z. [unclear]</i> <i>Cap. R.A.M.C.</i>
		<i>File</i>		



BRITISH RED CROSS SOCIETY.

COUNTY OF SURREY BRANCH.

PRESIDENT: THE HON. MRS. CURTIS.

NORTH SURREY DIVISION.

ASSISTANT COUNTY DIRECTOR & VICE-PRESIDENT: MRS. LOCKE KING.

TELEPHONE NO. 823 WEYBRIDGE.

From

**BROOKLANDS MILITARY HOSPITAL,
WEYBRIDGE.**

3225-

Mr. Hickey has permission
to draw (£5) five pounds
from his pay book

Cheque.
Watson

OK
£5.0.0
ORR
28/3/18
268

~~XXXXXXXXXXXXXXXXXXXX~~

28 MAR 1918



Military orthopaedic hospital

C.R. # 20-0 N.R. 13/11/18

Shepherd's Bush

Receipt No. 978

13-11-18

To Paymaster

Please remit the sum of
two pounds (£2) to the undersigned.

No. 3225 P.O. R. Pickers

Newfoundland Regt.

J.W. Van Dorder
1st Lt. M.C. U.S.A.

10.11.18



3rd London General Hospital
11/5/18

To Paymaster

Please remit the sum of one pound £1 To

Cte R. Siskey # 3225

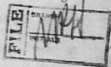
~~#25~~ Cte R. Siskey

11/5/18

O.K. R. S. 77 J. £1.0.0 type

M O Approval Receipt no 7088

W. H. S. M. G. W. / Captain



Military Orthopædic Hospital, Ducane Road, Shepherds Bush, W. 12.

To the Regimental Paymaster... *58 Victoria St.*

Please forward the sum of... *Two pound*to the undermentioned and debit my account.

Signed: Name... *R. Hickey* Rank... *Pte* Number... *3225*

Regt... *Kanfaundland* Coy... *D*

Remittance to be forwarded to:— Name... *R. Hickey*

Address... *Military orthopaedic hospital*

MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD,
SHEPHERD'S BUSH,
W.

OK 2-0-0
Receipt no
15/10/18
CH

Approved: *[Signature]*

INITIALS	<i>[Signature]</i>
NAME	<i>[Signature]</i>

Capt., R.A.M.C. (for Officer in Charge)

Military Orthopædic Hospital, Ducane Road, Shepherds Bush, W. 12.

To the Regimental Paymaster..... *55 Victoria St*

Please forward the sum of..... *one pound*to the undermentioned and debit my account

Signed: Name *H. C. Kee R.* Rank *P. Lt.* Number *2325*
 Regt..... *Kampfundband* Coy..... *9*



Remittance to be forwarded to:— Name *H. C. Kee*

Address *Military Orthopædic Hospital*

MILITARY
 ORTHOPÆDIC HOSPITAL
 DUCANE ROAD,
 SHEPHERD'S BUSH,
 W.

P.K. 1-0-0
7/10/18 M.R.
Receipt No. 902

Approved: *J. W. Van Dorder* (Lt. M.C. U.S.A.)

Capt., R.A.M.C. (for Officer in Charge)

3rd London General Hospital
Windsor
April 27 1868

The Paymaster
Royal 27th Regt

Sir
Would you kindly send me a Statement
of My Account

I am Dear Sir
Your Obedient Servant
3225 The R. Whiskey

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
No. Nos. by	3842
No. 2	1868
No. Nos. UDI	
AC	APW
SEARCH	
Ind.	
W. H. L.	
W. G.	
W. E.	
W. S.	

but all

6/5/18

9-0-92

M/C
7/5/18

Military Orthopædic Hospital, Ducane Road, Shepherds Bush, W.12.

To the Regimental Paymaster..... *58 Victoria St.*

Please forward the sum of..... *1/4*.....to the undermentioned and debit my account.

Name..... *Wickes R.*.....Rank..... *Pte.*.....Number..... *3225*.....

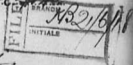
Regt..... *Royal West Surrey Regt.*..... Coy..... *D*.....

Remittance to be forwarded to: Name..... *Wickes R. of 7 I.D.*.....

Address..... *Military Orthopædic Hospital*.....

Approved:

Peter C. King
Capt., R.A.M.C. (for Officer in Charge).



MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.

OK 9/2/16 £2.00
5/2

9-2-16
3rd. Lon. 220
Hoops

ROYAL NEWFOUNDLAND REGT.
59, Victoria Street, London, S.W.

Please remit Mr. R. Hickery
the sum of £2. two pounds
which may be due to me.

No 3715 Rank. Private.
Name Hickery R.
Newfoundland, Regt.

Station. Wardsworth.

H. Wilson
Capt.

Dated 9-2-16

M. D. approval.

1981/159

3rd London Gen. Hospital,
Wandsworth

9th May 8

3225, Pte. R. A. Hickey,

3/5/8

4006

Pay to 3225 Hickey £2:0:0

11/24

CORD
1005 4000
The Paymaster,
Royal Newfoundland Regiment,
London, S.W.



Hazeley Down Camp,
5-5-18.

Reference attached, this man is not on full strength.

D. Deane

LIEUT. COLONEL.

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

No. 6911/552

NEWFOUNDLAND CONTINGENT

N.F.P./70.

From

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

To

Officer Commanding,
2/Bn Royal Newfoundland Regt.
Winchester.

Subject: 4th May 1918

191

Subject: 3225, Pte. R.A.Hickey,

Receipt hereunder.

With reference to the following telegram (4006) from the Hon. Minister of Militia, received 3/5 /18

Officer Comdg. South
1st Newfoundland Regiment

Pay to 3225 Hickey £2:0:0

Received the sum of

Draft £ 2:0:0 is enclosed for payment to this Soldier.

 on account of
cable remittance from Newfoundland.

Kindly obtain his receipt hereon.

J. S. Anderson
Chief Paymaster & O. i/c Records.
1/11/18

No. Rank

OK H.C.

£250-0
1/2/18

Receipt 5978

Brooklands

Military

Hospital

6/3/18

Please remit the sum of
two pounds (£2) to pte Bicker
which may be due to him
No 3225, Pte R. Bicker

Regt. Newfoundland Regt.



M.C. approval

[Handwritten signature]

admitted 22.12.17.

Only for use with Men returned from an Expeditionary Force or from Garrison's Abroad.



No. _____ Date 14. 6. 18 1918

(1) To the Officer i/o Records, 58 Victoria _____ (Station)

(2) The Officer Commanding, R Mtd Cont. Hanley Down Winchester _____ (Station)

(3) The Paymaster, 58 Victoria St S.W. _____ (Station)

Regimental No. 3225 _____

Rank and Name Pte Hickey R. _____

Regiment or Corps Reg Mtd _____

has been granted a furlough from _____ transferred to on 14.6.18 to _____

His address while on leave will be: military Orthopaedic Hospital, Shepherds Bush, W

- I consider he is fit for _____
- (a) Duty.
 - (b) Light Duty, and likely to be fit for Service Overseas within three months.
 - (c) Light Duty, and not likely to be fit for Service Overseas within three months or requiring special medical treatment.
 - (d) Service at home, but unlikely ever to be fit for Service Overseas.
- * Strike out that which is inapplicable.

Officer in charge 9 Capt Registrar, R.A.M.C.I Hospital, 3rd London General Hospital, WANDSWORTH, S.W. _____ (Station)

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Engineers two copies of A.F.W. 3016 will be sent to the Officer in charge R.E. Records and one to the Paymaster, instead of one copy to the Officer i/o Records, the Paymaster, and O.C. shown in the Schedule.

No. 21468/2449

066376



NEWFOUNDLAND CONTINGENT

From:

Chief Paymaster & O.1/c Records,
Newfoundland Contingent,
Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

Officer Commanding,
2nd. Bn. R. Newfoundland Regt.
Hazeley Down Camp,
Winchester

27th. December, 1918.

December 31st 1918

Subject: 3225. Pte. R. Hickey.

With reference to the following telegram (11186) from the Hon. Minister of Militia, received

Pay to 3225 Hickey - £2:0:0

Draft £2:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. A. Minusell Maj.
Chief Paymaster & O. 1/c Records.

Receipt hereunder.

Chambers

LIEUT. COLONEL,
COMMANDING THE HOME NEWFOUNDLAND REGT.
Royal Newfoundland Regiment.

Received the sum of £2-0-0

Two Pounds on account of cable remittance from Newfoundland.

R. Hickey

No. 3225 Rank Pte

Witness *J. M. C.*

Special Military Surgical Hospital, Shepherds Bush, W. 12.

To the Regimental Paymaster.....*55 Victoria St*.....

Please forward the sum of.....*£200*.....to the undermentioned and debit my account.

Signed; Name.....*Dickens R.*..... Bank *£* No. Number.....*5225*.....

Regt.....*Royal Newfoundland*..... Coy.....*D*.....

Remittance to be forwarded to:— Name.....*Dickens R.*.....

Address.....*S.M.S. Hospital*.....

SPECIAL MILITARY
SURGICAL HOSPITAL
DUCANE ROAD
SHEPHERDS BUSH
W. 12

Approved:
A.R. Smith
27/11/18

Receipt No 10038

A.R. Smith
Capt., R.A.M.C. (for Officer in Charge)

P.D.

O.K. £1-0-5 half.
Receipts to ⁷¹³ 71674 London General pers.
10/6/18



do 3225 *W. B. Bishop*
W. B. Bishop
Capt Ramet

Military Orthopaedic Hospital, Ducane Road, Shepherds Bush, W.12.

To the Regimental Paymaster... *58 Victoria St*

Please forward the sum of... *1/2*to the undermentioned and debit my account.

Signed. Name... *R. Pickett* Rank *Pr* Number... *3225*

Regt... *R. W. 579* Coy... *2*

Remittance to be forwarded to: Name... *R. Pickett Royal Newfoundland*

Address... *Military Orthopaedic Hosp.*

MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.

Q.D. £ 1-0-0

27/6/18

Pro. No 7909

H.P.P.

Approved:

LONDON, S.W. 1

27/6/18 *Peter Phillips*

Capt., R.A.M.C. (for Officer in Charge).

Military Orthopædic Hospital, Ducane Road, Shepherd's Bush, W.12.

To the Regimental Paymaster..... *28 Victoria St*

Please forward the sum of..... *2 £*

Signed: Name..... *Hickes R*

Rank..... *Private* BOOK..... Number..... *3225*

Regt..... *R N 712* Coy..... *D*

Remittance to be forwarded to: Name..... *R Hickes*

Address..... *Military Orthopædic Hospital*

MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD,
SHEPHERD'S BUSH,
W.

Off. £2.0.0

Approved:

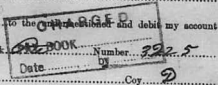
H.R.P.

12/7/18

Rec. No. 8102

B. S. Burnett

R. McUSA
(for Officer in Charge)



Military Orthopædic Hospital, Ducane Road, Shepherds Bush, W. 12.

To the Regimental Paymaster.....*55 Victoria St.*.....

Please forward the sum of.....*one pound*.....to the undermentioned and debit my account.

Signed: Name *Wickes P.*.....Rank *Pt*.....Number *3725*.....

Regt.....*1st Buffs*.....Coy *D*.....

Remittance to be forwarded to:— Name.....*P. Wickes*.....

Address.....*Military Orthopædic Hsp.*.....

Approved:

H.A. Smith
A.M.C. U.S.A.
Capt., R.A.M.C. (for Officer in Charge)

O.K. £1.00
W.R. 13/7/8
Receipt No. 8808

MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD,
SHEPHERD'S BUSH,
W.

W.R.

Military Orthopædic Hospital, Ducane Road, Shepherds Bush, W.12

To the Regimental Paymaster... *17th Bde. Regt. 58 Victoria St. S.W.*

Please forward the sum of... *One pound*... to the undermentioned and debit my account

Signed: Name... *Shickey R* Rank... *Pte* Number... *3225*

Regt... *Newfoundland Regt.* Coy... *D*

Remittance to be forwarded to:— Name... *Shickey Pte R Military Ortho-*
Address... *Hospital Shepherds Bush*

MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD
SHEPHERD'S BUSH,
W.



Approved:

H. Smith
Capt. M.C. (for Officer in Charge)

J.R.
G.I.
Receipt
8/4/41

Military Orthopædic Hospital, Ducane Road, Shepherds Bush, W.12.

To the Regimental Paymaster.....*58 Victoria St.*.....

Please forward the sum of.....*one pound*.....to the undermentioned and debit my account

Signed: Name.....*Hickey, R.*.....Rank.....*Pte.*.....Number.....*2225*.....

Regt.....*Royal Artillery*.....Coy.....*D*.....

Remittance to be forwarded to:— Name.....*R. Hickey*.....

Address.....*Military orthopædic hospital*.....

Approved:

B.W. Van Doores, Lt. M.C. U.S.A.

Major, R.A.M.C. (for Officer in Charge.)

Receipt
8725
**MILITARY
ORTHOPÆDIC HOSPITAL
DUCANE ROAD,
SHEPHERD'S BUSH,
W.**
H-9-K
MPH

The Paymaster:
R. W. West
58 Victoria St.

OK $\frac{10}{19}$ 1-0-0
OK $\frac{21}{19}$ Receipt No. 203

No. 3226 Mr. Hickey R. is on leave and can
you pay him balance due to this date
please. Dr. H. Coy pay Bank £ 1.10.0

Wm. J. L. and Hunt



60. 111 007.
2nd. BATT. ROYAL NEWFOUNDLAND REGT.

No. 3225 Rank Pte Name Lacey R.A.

Pay	F.A.	Wkr	Total	R.F.P/33
100	10		110	<i>[Signature]</i>
Less Allotment			50	
Net Rate			60	

[Signature]
9-17-18
33-13-0

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£	s	d		
						From	To							
Balance				Balance		2/1/18					3	17	11	
Acquittance Rolls		6			Pay @ Net Rate	22/1/18	2/2/18	353	60	211	80	43	10	5
Hospital Advances		X	13	0	R.A.	9/2/18	13/2/18	10	2/1			1	0	10
A.B. 04.					Gravel Proc.									
P.&R.O. Payments		27	0	0	£ 1 4 - 16 - 2									
Cheque 11168		14	10	0										

[Signature]
£ 48 - 9 - 2

Hickey R

3225

Ray Sept.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 9225 Rank Plt Name Stickey P
 Intended place of residence 38 Lower Hill St John's
 2. Occupation Seaman
 Classification of soldier B Medical Category E

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

Eligible for War Service Gratuity

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

Place
 Date MAR 3 1919 H. Mous H.
 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
3-3-19
 Signature of soldier [Signature]
 Signature of witness C. B. Dicks Capt

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S
3-3-19
 Signature of soldier [Signature]
 Signature of witness [Signature]

STATEMENT OF SERVICE

7. Enlisted for service 10-11-16 No of days on Military
 Discharged from service 3-3-19 plus 14 days Service 55 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
MAR 3 1919
 Date
R. H. Lait Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St John's Med.
 Date March 17/1919
[Signature]
 Officer in Charge Records
 The Royal Newfoundland Regiment

39.6.20/1919
12886

21
31
30
38
17
128

March 17, 1919

#3225 Pte. Richard Hickey,

#38 Flower Hill,

City

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1285."

Yours truly,

Captain,
Paymaster & O.i/c Records

f

6

The Royal Newfoundland Regiment

DEMOLIBIZATION OF

Reg. No. 3225 Rank Private Name Heckey R
 Date of Enlistment 11-16 Address St. John's District St. John's
 Occupation Seaman Classification for Discharge B Medical Category F1
 Recommendation S.M.B. Physically unfit Disability Rating 20% 6 mths.
 Passed to Demobilization Officer with following documents:—

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

Date 1-3-19
 H. Miers
 O. C. Discharge Depot.

PARTICULARS FOR DEMOLIBIZATION

1. Civil Re-Establishment

 I am not in a position to resume civilian occupation.

R Heckey

Particulars passed to Vocational Officer for information and action.

Date 3-3-19
Crowley

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00(b) Clothing Supplied Joseph A. LawrenceDate 3-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
at _____ and Release Certificate No. 1346 issued.

Date 3-3-19 *J.H.* *C. Dicks Cpl*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
therewith settled. He has received pay and allowances to 17-3-19

Date 3-3-19 *H. W. H.*
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY

Discharge approved for 3-3-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
F 178	W 3494	B 122	Board Ist.	" 2
R 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 3.3.19 *C. Dicks Cpl*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAR 3 1919 *R.H. Dait Cpl*
O. C. Discharge Depot.

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

Date _____

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

MEDICAL HISTORY

Surname Lickey Christian Name Richard

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>10th</u> day of <u>November</u> 191 <u>6</u> at <u>St John's Rfld</u>		on _____ day of _____ 191 <u>1</u> at _____	
Declared Age	<u>18</u> years <u>1</u> mo <u>0</u> days		_____ days	
Trade or Occupation	<u>seaman</u>			
Height	<u>5</u> feet <u>8</u> inches		_____ feet _____ inches	
Weight	<u>115</u> lbs.		_____ lbs.	
Chest Measurement	Grith when fully expanded	<u>36</u> inches	_____ inches	_____ inches
	Range of Expansion	<u>4 1/4</u> inches	_____ inches	_____ inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated	<u>never</u>			
Vision	R.E.—V=		R.E.—V=	
	L.E.—V=	<u>1/6</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects, but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Patterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's Rfld</u> on <u>11</u> day of <u>Nov</u> 191 <u>6</u>		at _____ day of _____ 191 <u>1</u>	
Joined on Enlistment	Regtl. No. <u>1st Rfld Reg 3220</u>		Corps.	Regtl. No.
Transferred to				
Became non-effective by	on _____ day of _____ 191 <u>1</u>		on _____ day of _____ 191 <u>1</u>	
(Signature)				
(Rank)				



and in case of Warrant Officers treated in quarters.

the cause, nature or treatment of the case likely to be of interest or of future use. In cases of admission and re-admission to hospital will be shown. The subsequent progress, including particular treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

... somewhat severe case which
rapidly cleared up

William C. ...

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

Date	Brief Details, and Signature
12-12-16	Vacc 1P
2-1-16	TAB 1P
4-1-16	TAB 1P
9-1-17	S 1P
<p>Recommended for discharge</p> <p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on demobilization. Medical category <u>F</u></p> <p>30-3-19</p> <p><i>[Signature]</i> Captain Assistant Adjutant General Inspector-General</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
S. L. Hanzel Winnipeg	Jan 31 1917	Feb 3 1917			

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 learn Printing

R. Hickey

Signature of Man.

Reg. No. 3225

Hutter

Signature of the Vocational Officer or his Representative.

Place

St John's

Date

March 3rd

1919

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

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

1. Unit and Corps. *Royal Artillery* 7. Former Trade or Occupation }
2. Regt. No. *3225* 3. Rank. *Pte.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Hickey* (Surname) *R. R.* (Christian Names) (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday.....
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *South Africa 1901*
12. Place of origin of disability. *Wounded in France 4/12/17*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *G.I. in right knee joint - wound how healed.*

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

In all cases much as local injuries, etc., are now and then, disability, etc., a specialist's report is to be attached with radiographs where possible and in cases of amputation the exact position should be stated.

15. What is his present condition? *I & D wound, right knee joint. Circular scar on outer surface right leg, above knee joint, slightly posterior. Both scars painful on pressure. Appearance of weakness in knee joint & weakness on walking.*
- (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)
16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth.—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

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

M. Kelly

ROYAL NEWFOUNDLAND REG.

Medical Officer in charge of case.

Station *H. N. Camp.*

Date *17-1-19*

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

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

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

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

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. *G.S.W. knee (right)*
- (b) The present condition thereof.

See act 15. Slight limitation of movement in flexion.

22. State whether the disabilities are:—

- | | (a) Attributable to | (b) Aggravated by |
|--|---------------------|-------------------|
| (i) Service during the present war | <i>Yes</i> | |
| (ii.) Previous active service | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the part of the soldier | <i>No</i> | |
- Give details:

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

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

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

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

20% Exp months

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

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalidated at a foreign station)?

Opinion of Military Member in case of disagreement.

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

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

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

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

Signature

[Handwritten Signature]

President or Chairman.

Station *[Handwritten: L. Plus]*

Date *[Handwritten: Feb. 20. 1919]*

[Handwritten: J. J. ...]

Members.

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

Station *[Handwritten: S]*

Date *[Handwritten: FEB 20 1919]*

[Handwritten: ...]
Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospital.

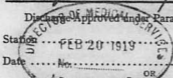
Discharge Approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve.

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

Station

Date

O.C. Discharge Centre.





Descriptive Return of a Soldier Discharged on Account of Disability.

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

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

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

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

Name in full *Hickey, Richard.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3221.*

Intended address *St. John's.*

Height on discharge *5* Feet *4.*

Color of hair on discharge *Fair*

Complexion *Fair.*

Color of eyes *Brown.*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father *Michael*

Christian name of Mother *Mary.*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *St. John's, N.S.W. 1891.*

Nature and locality of civil employment required _____

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

(Soldier's signature in full)

P. R. A. Hickey

(Rank)

Private

Station **ST. JOHN'S**

Date

FEB 17 1919

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

Medical Officer in Charge Hospital,
Unit, or Command Depot

Station

Date



DEPARTMENT OF MILITIA

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 28th, 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any question are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, 82, MOHNS'S.

Christian name *Richard* 2. Surname *Nickey*

3. Rank *Private* 4. Regt. No. *3425*

5. Address in full to which future payments of gratuity are to be forwarded. *38 Howe Hill, St. John's*

6. Date of enlistment in the Regiment. *November 11th 1916*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge. *Not applicable*

8. Relationship of such dependents. *Not applicable*

9. Address in full of such dependent. *Not applicable*

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

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *Two years 117 days*

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

No

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

No

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

No

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

No

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

Not applicable

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

No

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

Not applicable

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

March 2 '19

Re-employment

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.....

Cambrin November - December 1917

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

(b) If so, are you in receipt of full pay and allowances from that Committee.....

No

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

Signature of Applicant: *R. Nichols*
 Place of Residence: *38 Flaming Hill*
 Declared before me at: *St Johns*
 This *4th* day of *March* 19*19*.

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>5.65</i>	<i>150.00</i>

Certified Correct.

By master.

STANFORD BOND

STANFORD BOND

STANFORD BOND

STANFORD BOND

ST. JOHN'S, FEB 28 1919

Royal Newfoundland Regiment.

Billeting Account,

To Pte. R. Hickey

Billeting Soldiers as undermentioned

from Feb 21st /19 to Feb 28th /19

<u>3225. Pte. R. Hickey</u>	<u>7</u>	<u>20</u>
-----------------------------	----------	-----------

Certified correct for \$ 7. 20

J. H. Lawrence
Billeting Officer.

Reg. No. 3225 Rank *Plt* Name *Hokey R. A.*

Attested Address. *38 Flower Hill*

Allotment Allottee

Date of Allotment Returned from Overseas. *2-19*

Embarked for Overseas Cause *Discharge*

20-2-19 *Sec. Dir. Permanently unfit*

13-19

PASSED TO DEMOBILIZATION OFFICER

3.3.19

DISCHARGE APPROVED ON DEMOBILISATION.

Casualty Form—Active Service.

Regiment or Corps Newfoundland
 Rank Pvt Surname Keating Christian Name Richard
 Religion Roman Catholic Age on Enlistment 18 years 1 months
 Enlisted (a) 11.11.16 Terms of Service (a) Duration Service reckons from (a) 11.11.16
 Date of promotion to present rank Date of appointment to lance rank
 Extended (.....) Re-engaged (.....) Qualification (b)
 or Corps Trade and Rate
 Occupation Teamster Signature of Officer Harold Stanger

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
			Embarked, <u>Suez</u>	<u>1917</u>	
			Disembarked, <u>Rouen</u>	<u>1917</u>	
			Joined Battalion <u>1917</u>		
<u>9/17</u>	<u>37 FA</u>	<u>REMOVED IN ACTION</u>	<u>Kaous</u>	<u>7/17</u>	<u>B.213</u>
<u>9/17</u>	<u>Ad. G. O'Connell</u>	<u>trans</u>	<u>21 Cal. S</u>	<u>4/17</u>	<u>B.213 4.528</u>
	<u>Apollonia</u>	Transferred to England		<u>20/17</u>	<u>W.3083</u>
			<u>0176 Hq. I</u>		
			<u>Industry Section</u>		
			<u>G.H.Q. 3rd Escheion</u>		



(1) 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.

(2) Signaller, Shoeing-Smith, &c.

W. 1181-M1188 Room 3717 (1922) G.P.S. Co. Ltd. Finsbury Park, London, E.C.2.

(P.T.O.)

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
H. 121
3A.

Regiment of 1st Newfoundland

Signature of O. C. Company Frank Taylor

Number of Sheet 1st
Frank Taylor

Regimental Number and Name	
No.	<u>3225 Hickey R</u>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
Age on	<u>18</u> years <u>1</u> months	<u>Seaman</u>	
Place and Date of Enlistment	<u>St. John's Nfld.</u> <u>11.11.16</u>	<u>R.C.</u>	
Period of	with Colours <u>127</u> years. with Reserve <u>565</u> years.	Place of Birth	

Place	Date of Offence	Rank	Charge of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
St. John's Nfld.	9.11.16.	Pte.		Absent without leave pass. bee. pt. 10 days bee. 11th. Refusing obey an order	Sgt. Hara. Acting Cos. Sgt. baby	Admonished	14/1/16	C. C. Gage Capt.	Forfeit 5 days pay R.W. C.A.
	11.12.16.								
St. John's Nfld.	16.12.16	Pte		Dirty Buttons on sarkade	Sgt. Neuman	Extra Sequest	9.12.16	P. H. Knight Lt.	
St. John's	31.12.16	Pte		Absent from Church pass. cpl. Hesper Absent from 9 A.M. until 9 A.M. 3.1.7.	Sgt. Conick	2 days C.B.	4.11.17	G. P. Barbey Major	Forfeits 2 days pay R.W. C.A.
	3.1.17								
Winnon	21.2.17	Pte.		Staying in bed 7.15 P.M.	Sgt. Conick	Admonished	21.2.17	Major Montgomery	
Camp.	1-5-17	..	1	1. Drunk. 2. Creating a disturbance in barracks about 10 p.m. To be carried off.	G.S.A. Williams	120 hrs. detn.	3-5-17	Major W. F. Reubell	J.P.P.
				Demobilized St. John's 17 ³ / ₁₇					

Form B. 121

Brought Forward

Apr.	29.6.17	Pte	Untidy kit	Lt. Gardner	2 days C.B.	30.6.17	Capt. Robertson	
"	11.7.17	"	In bed after Quiville	Sgt. Winton	forfeit & clapping	14.7.17	Capt. March	ACN
"	2.8.17	"	Absent from 6.30 am parade	Pte Lewis	3 days C.B.	9.8.17	ACN	forfeit & 1 day pay
W.P. School	15-10-17	-	Absent from early parade not reported 8 ³⁰ am	Cpl. Truman	3 days C.B.	15.10.17	Capt. Robertson	At.
Apr.	18.10.17	-	Absent from working party, from 8.30 P.M. till 10.55 ³⁰ P.M.	Lt. Radford	5 days C.B.	20.10.17	Capt. E. Robertson	Forfeit 1 days pay by R.W.
Apr.	20/10/17	Pte	Not answering defaulters calls from 2.30 P.M. till 9.30 P.M.	Cpl. Woodles				
	21/10/17	-	Failing to answer defaulters calls from 2.30 P.M. till 9.30 P.M.	Lt. Stein				
					F.P.C.P.2			Forfeit 2 days pay by R.W. & 1
					21.10.17	22.10.17	Lt. Col. Whitaker	168 Ls. bet 1455

J.M.

The Royal Newfoundland Regiment

3225

DEMOBILIZATION OF

Reg. No. 3225 Rank Pr Name Heckey R
 Date of Enlistment 10.11.16 Address St. John's District St. John's
 Occupation Seaman Classification for Discharge B Medical Category F1
 Recommendation S.M.B. Physically unfit Disability Rating 20% 6 months

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 1-3-19

H. Mears
O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment

I am not in a position to resume civilian occupation.

R. Heckey

Particulars passed to Vocational Officer for information and action.

Date 3-3-19

Chowlsap

2. Clothing.

Certified that Clothing Regulations have been complied with:-

(a) Clothing Allowance payable \$65.00

(b) Clothing Supplied Joseph A. Shaw

Date 3-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home at _____ and Release Certificate No. 1346 issued.

Date 3-3-19 *J.H.S.* *C.P. Dick's 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 17-3-19

Date 3-3-19 *H. News H.*
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF PAY ACCOUNTS
3-3-19

Discharge approved for 3-3-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P126	B 265	B 121	1	N.F. Med.	D.F. 1	1
F 178	W 3494	B 122		Board Ist	" 2	1
B 178a	D 400A	B 1915	1	do End	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 3.3.19 *C.P. Dick's Capt.*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
Officer in Records.
Board of Pension Commissioners.
with following additional documents.

Eligible for War Service Gratuity

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

Received the above noted documents from O. C. Discharge Depot.
Date MARCH 7/1919 *For Officer in Records*

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 3225 Rank Private Name Hickey R.
 Former Occupation Seaman Address 38 Flower Hill District St John's
 Class B Medical Category 2 Disability Rating 20% 6 mths
O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Cruiser. His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 3-3-19 Compensation
 To be forwarded Orderly Room in Duplicate



Andrik Capt
 Demobilization Officer

The Royal Newfoundland Regiment

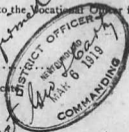
CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 3225 Rank Private Name Hickey R.
 Former Occupation Seaman Address 38 Flower Hill District St Johns
 Class B Medical Category F Disability Rating 20% 6 mths
O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Canteen. His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 3.3-19 Confined 6 mths

To be forwarded Orderly Room in Duplicate



Andrik Capt
 Demobilization Officer