



# First Newfoundland Regiment

## ATTESTATION PAPER

Regimental No. 1309

Name in full Robert Hickey Age 21

Address 48 Barters Hill.

Married  
Single Dark Height Brown Weight Blue  
Color Dark Hair Brown Eyes Blue

Other distinguishing marks None

Nearest relative Mother (Katherine)  
Address 48 Barters Hill.

Dependents None

Occupation Painter Present Wage \$2.00 per day

Previous service \_\_\_\_\_

Decorations \_\_\_\_\_

General Remarks March 24/15

Date of Enlistment \_\_\_\_\_

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

Robert Hickey

Declared before me this 20<sup>th</sup> day of March 1914

W. J. [Signature]

**DESCRIPTIVE REPORT ON ENLISTMENT.**

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

**Reg. No. 1309**

Name Robert Hickey

Apparent age 21 years \_\_\_\_\_ months. Height \_\_\_\_\_ feet \_\_\_\_\_ inches.

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

Distinctive marks Colors Dark, Hairs Brown, Eyes Blue.

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin Katherine Hickey, 48 Barter's Hill, St. John's.  
| Relationship Mother.

**Particulars as to Marriage.**

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

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

**Particulars as to Children.**

Christian Names	Date and Place of Birth

**STATEMENT OF THE SERVICES.**

Corps in which served	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>March 24/15</u>									
Joined at <u>St. John's</u> on <u>March 24/15</u>									
<u>For White</u>									
<u>4/2/15</u>									
Total Service forfeited as above .. .. .									
Total Service towards Engagement to .. .. . (date of discharge) .. .. . years .. .. . days									
" " " Pension .. .. . ( " ) .. .. . " .. .. . "									

# DESCRIPTIVE REPORT ON ENLISTMENT.

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

**Reg. No. 1300**

Name Robert Hickey

Apparent age 21 years \_\_\_\_\_ months. Height \_\_\_\_\_ feet \_\_\_\_\_ inches.

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

Distinctive marks Colors Dark, Hairs Brown, Eyes Blue.

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Katherine Hickey, 40 Darter's Hill, St. John's.

| Relationship Mother

### Particulars as to Marriage.

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

### Particulars as to Children.

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension years    days	Service in Reserve not allowed to reckon towards G. C. Pay years    days	Signature of Officers certifying correctness of entries
Service towards limited engagement reckons from <u>March 24/15</u>							<div style="font-size: small;">                 I embarked at St. John's St. John's Harbour on 14<sup>th</sup> 33<sup>rd</sup> 15. Disembarked at 20<sup>th</sup> 15. Disembarked at 20<sup>th</sup> 15. Disembarked at 20<sup>th</sup> 15.                  Regt and embarked for Coirps 13. 8. 5. Embarked for Bellisle 13. 9. 15. Land on Sutor                  1301 night of 19. 20. Disembarked 1915. Disembarked 26<sup>th</sup> 15. GCS Frouville 26. 11. 15. Admitted                  Light Infantry 26. 4. 15. Transferred to England 26. 12. 15. Admitted Haverwest 3. 1. 16                  Hurlingham the attaché depot 13. 3. 16. Disembarked at Hampton 1. 2. 17. Disembarked                  Round 2. 2. 17. James Battalion 17. 2. 17. Wounded 15. 4. 17. Admitted 19 GCS. FSN head 15. 4. 17             </div>
Joined at <u>St. John's</u> on <u>March 24/15</u>							
<i>Loss of Wound 15-4-17</i>							
Total Service forfeited as above .. .. .							
Total Service towards Engagement to <u>15-4-17</u> <sup>DEATH</sup> (date of discharge) <u>2</u> years <u>23</u> days							)
" " " Pension " ( " ) " "							
" " " Pension " ( " ) " "							





HAVE YOU  
CONTRIBUTED  
TO THE  
WORLD WAR MEMORIAL  
ON HIS MAJESTY'S SERVICE.



OFFICER i/c RECORDS,

DEPARTMENT OF MILITIA,

ST., JOHN'S, Nfld.



1309

539320

To ensure that as far as may be possible none of the next of kin of those who have fallen in the War shall fail to receive the Memorial Plaque, it is requested that on receipt of the enclosed Plaque this card be signed at the bottom and posted. No stamp is required.

*Mrs Catherine Eichey*

(2249) Wt 21551/AP6599

10/7/40 900M 120 St.

**Casualty Form - Active Service.**

Regiment or Corps *1st Newfoundland*  
 Rank *Pte* Surname *Dickey* Christian Name *Robert*  
 Religion *Roman Catholic* Age on Enlistment *21* years *—* months.  
 Enlisted (a) *St John's* Terms of Service (a) *War of War* Service reckons from (a) *24. 3. 15*  
 Date of promotion to present rank..... Date of appointment to lance rank.....  
 Extended {.....} Re-engaged {.....} Qualification (b).....  
 or Corps Trade and Rate.....

Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 26, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 26, or other official documents
Date	From whom received				
			Embarked <i>Stampton</i>	<i>12.17</i>	
			Disembarked... <i>Rouen</i>	<i>2.2.17</i>	
			Joined Battalion <i>France</i>	<i>17.2.17</i>	<i>B 213</i>
<i>28.4.17</i>	<i>19.6.17</i>	<i>Ad. G.W. Head of thigh</i>	<i>do</i>	<i>15.4.17</i>	<i>ED 3422</i>
<i>30.4.17</i>	<i>do</i>	<i>Died of wounds</i>	<i>do</i>	<i>15.4.17</i>	<i>ED 3680</i>

*Robert Dickey*  
 FOR  
 O. i/c No. 1 Reg. Infantry Section  
 G.H.Q.. 3rd Echelon



COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 N.F.P.39. No.....  
 DATED **17 MAY 1917**

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoering-Smith, &c.

C.R. 1309

April 12th. 1920

Secretary

Board of Pension Commissioners

Sir:-

The attached from the mother of No. 1308 Private Robert Hickey is forwarded for your attention please. I should be glad if you will reply direct to Mrs. Hickey in this matter

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.





C.R. 1309

PRIME MINISTER'S OFFICE,  
ST JOHN'S, NEWFOUNDLAND.

21 February 1920

Dear Col. Rendell,

Enclosed is letter from Mr. Brownrigg, covering  
communication from Mrs. Catherine Hickey.

Would you kindly let me have a report upon this  
matter.

Sincerely yours,

A handwritten signature in dark ink, appearing to read "R. B. Brownrigg", written over a horizontal line.

Lieut-Col. Rendell,  
Chief Staff Officer,  
Militia Dept.

N<sup>o</sup>  
In replying the number & date  
of this letter should be quoted.



February 20th. 1920.

Dear Mr. Squires,

I beg to enclose application for assistance from the Military Department by a Mrs. Catherine Hickey, 48 Barter's Hill. The facts in this case, as known to me, would certainly warrant some action being taken. I have promised the applicant that I would look into the matter, and I therefore am forwarding it to you with the request that you kindly bring it before the proper military authorities,

Sincerely yours,

Minister Finance & Customs.

Hon R. A. Squires, K.C.,

Prime Minister.



Hon. A. J. Knowlton

Dear Mr Knowlton

Some time ago  
I wrote the authorities regarding  
the Pension of my Son Private  
Robert Hickey No 1309 but they  
seem to ignore my claim  
altogether. My Husband has  
been sick for months, my only  
Son is suffering from Tuberculosis  
of the Lungs and has not worked  
for years, with the result that  
I am without help of any kind.  
I would ask you Sir to kindly  
Place my case before the Pensions  
Board immediately.

kindly do this for me

and oblige yours

Catherine Hickey  
48 Carter Hill



C.R. 1309

**Robert Hickey** was attested for General Service  
with the NEWFOUNDLAND REGIMENT on **March 24th 1915**..  
Regimental No. **1309** was allotted to Pte **Robt. Hickey**

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.

CR. 1309

**Extract from Casualties: (Grave sites) received from the  
Pay and Record Office, London dated 2nd. May 1919.**

1309 Pte. R. Hickey (Report Agnez-les-Dousans 1.17)

Duisans British Cemetary 4 miles W.N.W. of Arras.


**Authority. Lists from War Office (D.G.G.R.&E)**

No. of Paper 591

PERSONAL EFFECTS.

C.R. 1309

Name Hickey P.  
 No. 1309 Rank Pte  
 Regiment 1st NEWFOUNDLAND REGIMENT.

Article	Where stored	Notified by
<p><u>Package</u>  <u>Containing</u>  <u>1 Razor</u>  <u>1 shaving brush</u>  <u>2 Cig. Cases</u>  <u>1 Com. b.</u>  <u>1 Prayer Book</u>  <u>1 Razor Strap</u>  <u>1 Memorial</u>  <u>Jodine</u></p>	<p style="text-align: center;">                       Final Disposal                 </p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);"> <i>Shipped to Newfoundland</i> </p>

Remarks:— Casualty Colours  
D. of W.  
15/4/17

Next of Kin: Catherine Hickey  
Mother 48. Barton Hill  
St. Johns.



C.R. 1309

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1309 Name Robert Hickey

Witness. John McCarthy, J. Catherine Hickey

Date Feb. 10, 1920

Place St. John's, Nfld

m. B.

C.R. 1309

June 12th. 1919.

Mrs. Catherine Hickey,  
48, Barter's Hill  
City.

Dear Mrs: Hickey:-

I am directed to inform you that information has been received concerning the burial place of your son, No. 1309 the late Private R. Hickey who died of wounds April 15th. 1917, this report shows that Private Hickey has been buried at Duisans British Cemetary four miles W.N.W. of Arras in Northern France.

Assuring you of my deepest sympathy in your bereavement and in the added sorrow which the receipt of this information must entail.

Yours sincerely,

Lient.  
Casualty Officer.

BC.

C.R. 1309

Extract from Nominal Roll of Mfld. Regt. Draft No.17  
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-  
ampton, 1-2-17.

1309 Pte. R. Hickey.



C.R. 1309

Extract from Nominal Roll of "D" Co. 1st Bn. RFLA. Regt.  
Embarked at Devonport for active service, 20-8-15.

1309 Pte. R. Hickey.

Disembarked Alexandria 31-8 -15 Proceeded to Abbassia,  
Cairo. same date. Embarked Alexandria for Gallipoli  
13-9-15.

C.R. 1309

Extract from Nominal Roll Draft ( All Ranks) to 1st  
Bn. B.E.F. Embarked Southampton.

1309 Pte. R. Hickey.

1-2-17.



✓  
H (30)

January 5, 1916.

Dear Madam,

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. 1509, Private Robert Hickey, was admitted to the Third London General Hospital, Wandsworth, suffering from frost bite.~~

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.

Mrs. Catherine Hickey,  
48 Barter's Hill.



NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&R.O.

January 5th 1916.

1309, Pte R. Hickey.

1 Newfoundland Asst. 3rd London General Hospital Wandsworth

3rd January 1916.

Frost Bite.

MAR 28 1916

Dear Madam,

*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. 1309, Private Robert Hickey, who was previously reported at Wandsworth, January 5th, suffering from frostbite, is now fit for duty and was granted furlough to Feb. 24.

This information has been received by mail.

*Yours faithfully,*

*Colonial Secretary.*

Mrs. Catherine Hickey,  
48 Barter's Hill.



May 8, 1917.

Dear Madam,

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. 1309, Private Robert Hickey, was at 19th Casualty Clearing Station, April 21st, wounded.

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.

Mrs. Catherine Hickey,  
48 Barter's Hill



M

May 10, 1917.

Dear Madam,

I Regret to inform you that the Record Office of the First Newfoundland Regiment, London, to-day reports that your son, No. 1309, Private Robert Hickey, died of wounds at 19th Casualty Clearing Station, April 15th.

Yours sympathetically,

Colonial Secretary.

Mrs. Catherine Hickey,  
48 Barter's Hill.

C.R. 1309

Copy of Cablegram to Governor St. John's Nfld.  
from P. & R. O. 5/1/16.

1309, Pte Hickey. ✓

Admitted Wandsworth, Frostbite.

Extract of Casualty List received from P&R.O? London Dated Jan. 30th. 1916

1309 Pte. R. Hickey

1st. Nfld. Regt. Frostbite Trans. to Base per H.S. Aquitania ex 16 S.H.  
Mudros 26th. Dec. 1915.



C.R. 1309

Extract of Casualty list received from Pay and Record office London  
dated Jan. 10th.1916.

1309 Pte. R. Hickey

1st. Nfld. Regiment Frostbite, Adm.16 SH. Mudros E. 2 December 1915.

C.R. 1309

Extract from Nominal Roll "B" Company Embarked S.S.  
Stephano. April 22/15.

1309 Pte. Hickey Robert.

C.R. 1309

Extract From Nominal Roll Embarked By. John's for Overseas per  
S.S. "Stephano" April 28, 1916.

1309 Pte. Hickey Robert.



R. Hickey.

1309

P. H. G.

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

# MEDICAL HISTORY

Surname Hickey OF Christian Name Robert

Table 1.—GENERAL TABLE.

Birthplace:—Parish St John's County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>23</u> day of <u>Mar</u> 19 <u>15</u> at <u>St John's</u>		on _____ day of _____ 19 <u>1</u> at _____	
Declared Age	<u>21</u> years _____ days		_____ years _____ days	
Trade or Occupation	<u>Painter</u>			
Height	<u>5</u> feet <u>7</u> inches		_____ feet _____ inches	
Weight	<u>147</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>32 1/2</u> inches		_____ inches	
	Range of expansion... <u>3 1/2</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated	<u>1905</u>			
Vision	R. E.—V=	<u>26</u>	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)	<u>Patterson</u>			
(Rank)	<u>Capt</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's</u> on <u>24</u> day of <u>Mar</u> 19 <u>15</u>		at _____ on _____ day of _____ 19 <u>1</u>	
Joined on Enlistment	Corps.	Regtl. No. <u>1309</u>	Corps.	Regtl. No.
Transferred to..				
Became non-effective by.	on _____ day of _____ 19 <u>1</u>		on _____ day of _____ 19 <u>1</u>	
(Signature)				
(Rank)				



445221

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 Cases 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				
4TH SCOTTISH GENL. HOSPITAL, GLASGOW	20	3	16	21	3	16	Gonorrhoea	1	Transferred to Workhouse Melny-Hoop, Newcastle	<i>J Hugh Walter</i> Major & Registrar, 4th Scottish General Hospital <i>Woodger</i> Capt. R A Kn C (T)
Workhouse Military Newcastle-on-Tyne	21	3	16	15	5	16	Gonorrhoea & Oculitis	56		



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

Date	Brief Details, and Signature

**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
<i>St John's No. 200</i>					

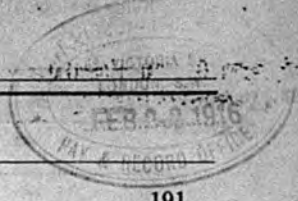
Temporary

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.  
Army Form B: 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Hickey Christian Name R.

TABLE I.—GENERAL TABLE.



Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191 ,  
at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height ... feet \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

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

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left \_\_\_\_\_  
Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
L.E.—V= \_\_\_\_\_

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

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

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

Medical Officer.

Enlisted ... { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Joined on Enlistment	Corps.	Regtl. No.
	<u>1st Newfoundland</u>	<u>1809</u>
Transferred to		

Became non-effective by ... \_\_\_\_\_

on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_





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



RYAN & GOSWICKS, Ltd., Lond.

# POST OFFICE TELEGRAPHS.

If the Receiver of an Inland Telegram doubts its accuracy, he may have it repeated on payment of half the amount originally paid for its transmission, any fraction of 1d. less than 1/2d. being reckoned as 1/2d.; and if it be found that there was any inaccuracy, the amount paid for repetition will be refunded. Special conditions are applicable to the repetition of Foreign Telegrams.

Office of Origin and Service Instructions.

*Edinburgh*

Charges  
to pay

s. d.

Handed  
in at

*1-28*

Received  
here at

*2-35*



TO

*Sergt Major Marshall  
Newfoundland Pay Office  
58 Victoria St. Ldn*

*Send me money due to  
date waiting <sup>#1309</sup>*

*Pls. H. Hickey  
Old Waverley Hotel Princes St*

*at 12-0-0*

683/1

February 28th.

6

1309 Pte R. Hickey,  
Old Waverley Hotel,  
Princes Street,  
Edinburgh.

Reference your telegram of to-day I enclose Money  
Order value £2-0-0. representing balance at credit  
of your account to date. Please sign and return  
the enclosed receipt.

Capt.,

Paymaster & O.I/c Records.

**ORIGINAL. FIELD SERVICE.**

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form B. 213 from other official documentary sources.



REGIMENT } NEWFOUNDLAND REGIMENT. Squadron, }  
 or } Troop, Battery }  
 CORPS } or Company }

Regtl. No. 1302 Rank Private

Name HICKEY, R.

**DUPLICATE.**  
 SET TO  
 O.C. H.Q. :  
 ST. JOHNS, N.F.L.D.  
 N.F.P. 38. No. 4869/45  
 DATED 17 MAY 1917

Date April 15th., 1917.

Died Place 19th. Casualty Clearing Station, France.

Cause of Death\* Died of Wounds received in Action.

Nature and Date of Report Memo, 30/4/17.

By whom made O.C., 19th. C.C.S.

\* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial Place \_\_\_\_\_  
 Date \_\_\_\_\_  
 By whom reported \_\_\_\_\_

State whether he leaves a will or not {  
 (a) in Pay Book (Army Book 64) \_\_\_\_\_ No. \_\_\_\_\_  
 (b) in Small Book (if at Base) \_\_\_\_\_ Not to hand. \_\_\_\_\_  
 (c) as a separate document \_\_\_\_\_ do \_\_\_\_\_

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge } [Signature]  
 of Section Adjutant-General's }  
 Office at the Base } Officer i/c Records Reg. Inf. Sec. 1,  
 3rd. Echelon, G.H.Q., B.E.F.

Station and Date 3rd. Echelon, 4/5/17.



# TRIPPLICATE FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.

REGIMENT } \_\_\_\_\_ Squadron, }  
or } \_\_\_\_\_ Troop, Battery }  
CORPS } **NEWFOUNDLAND REGIMENT.** } or Company } **D Company**

Regtl. No. \_\_\_\_\_ Rank \_\_\_\_\_  
**1309** **Private**

Name \_\_\_\_\_  
**HICKEY, R.**

Died { Date \_\_\_\_\_  
**April 15th., 1917.**

{ Place \_\_\_\_\_  
**19th. Casualty Clearing Station, France.**

{ Cause of Death\* \_\_\_\_\_  
**Died of Wounds received in Action.**

Nature and Date of Report \_\_\_\_\_  
**Memo, SD/4/17.**

By whom made \_\_\_\_\_  
**O.C., 19th. C.C.S.**

\* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial { Place \_\_\_\_\_  
Date \_\_\_\_\_  
By whom reported \_\_\_\_\_

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) \_\_\_\_\_ **No.**  
(b) in Small Book (if at Base) \_\_\_\_\_ **Not to hand.**  
(c) as a separate document \_\_\_\_\_ **do**

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge } \_\_\_\_\_  
of Section Adjutant-General's } **Officer in Charge for Lt. Col.,**  
Office at the Base } **Officer in Charge Records Reg. Inf. Sec. 1,**  
**3rd. Battalion, G.H.Q., B.E.F.**

Station and Date \_\_\_\_\_  
**3rd. Battalion, 4/15/17.**

No. 1309 Name *Plie Shierley R* Sq., Batty., or Company } *H B Corps 2, Newfield* Date of enlistment } *24. 2. 1914* G.C. Badges } Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet } *—* No. and date of last drunk } *—* Period not reckoning towards freedom from extra fine } *—* Sheet No. } *1* Signature O.C. } *A. J. Hender.* Character } *Good.*  
Company, etc. } *2<sup>nd</sup> Lieut.*

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks



*Recd of Bonds*  
*A. J. Hender*

ARMY FORM B. 199

*Missing*  
*41-4-41*



Army Form W. 3016.

No. \_\_\_\_\_

Date Feb 15<sup>th</sup> 1916

(1) To the Officer i/c Records,

58 Victoria Street

S.W. (Station.)

(2) The Officer Commanding,

Newfoundland Contingent

Ayr (Station.)

(3) The Paymaster,

58 Victoria Street

S.W. (Station.)

Regimental No. 1309

Rank and Name Pte Hickey P.

Regiment or Corps 1<sup>st</sup> Newfoundland

has been granted a furlough from Feb. 15<sup>th</sup> to Feb. 24<sup>th</sup>

His address while on leave will be:—

58 Victoria Street

Westminster S.W.

*This man has been furnished with a warrant to Victoria + given an advance of £1 (one pound)*

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

A. Hope Gosse Capt. R.A.M.C.T.

Officer in charge Registrar R.A.M.C.T.

3rd London General Hospital,  
WANDSWORTH, S. (Station).

\* Strike out that which is inapplicable.

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





# 1ST NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, Robert Hickey, Regl. No. 1309

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

Identity Certificate	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1078	Mrs	Catherine Hickey	45 Banters Hill	60
Total Allotment, \$				60

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

(Sig.) Eric Sheppard  
 Officer Commanding  
 Company

(Sig.) Robert Hickey  
 (Rank) private

April 14 1915

**PAY LIST.**

to

191 . Voucher No.

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps

No. *1309*

Rank

*Pte*

Name

*August R*

Died<sup>(a)</sup>

*Intestate* at

*France*

on the

*15<sup>th</sup>* of

*April*

191 *7*

Deserted at

on the

of

191 .

I Certify to the correctness of above in every particular.

{ *Commanding Squadron, Troop,  
Battery or Company.*

**STATEMENT OF ACCOUNT.**

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month .....				Balance Cr. last month <i>15. 11. 17</i> .....	<i>3</i>	<i>19</i>	<i>5</i>
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	191				Messing allowance . days at _____			
	"				from _____ to _____			
	"				Kit allowance .....			
	"				Amount produced by the sale of Effects from Form 2 .....			
	Consolidated stoppage .....				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity .....			
	Balance due by the Paymaster			<i>3 19 5</i>	Balance due to the Paymaster .....			
		£		<i>3 19 5</i>		£		<i>3 19 5</i>

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 3 19 5 is correctly chargeable against the Public Contingent.

Dated at  
this



191

Paymaster:

PAYMASTER & OFFICERS RECORDS

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

CHECKED.  
*11.6.17*  
*He*

Hickey, R

1309

Ray Sept.



**PAY LIST**

to **191** Voucher No.

**NON-EFFECTIVE ACCOUNT**

Regiment or corps.

No. **1309**

Rank **Pte.**

Name **Hickey, R.**

Died<sup>(\*)</sup> Intestate

at **France**

on the **15th** of **April,**

**1917**

Deserted at

on the of

**191**

I Certify to the correctness of above in every particular.

*(Commanding Squadron, Troop, Battery or Company)*

**STATEMENT OF ACCOUNT**

[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month .....				Balance Cr. last month ..15/A/17.....	5	19	5
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at /			
	"				from to			
	"				Kit allowance .....			
	"				Amount produced by the sale of Effects from Form 2 .....			
	Consolidated stoppage .....							
	Balance due by the Paymaster	5	19	5	Balance due to the Paymaster .....			
		5	19	5		5	19	5

This account is in accordance with information received at the Pay & Record Office to 17 / 7 / 17 and is therefore subject to amendment if, and as may be found necessary.

I hereby certify that the above account is correct in every particular and that the

Debtor's balance is correctly chargeable against the Public.

Date at **27 JUL 1917**

**NEWFOUNDLAND CONTINGENT**

*(Signature)*  
PAYMASTER & OFFICER IN CHARGE

CHECKED  
11/11

Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Offices with Army Form B. 3023 or Army Form O. 1215.

(\*) Verbs in Italics to be struck out when there is no debtor balance.

**PAY LIST.** to **191** . Voucher No.

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps

No. 1309 Rank Pte. Name Hickey, R.  
 Died<sup>(a)</sup> Intestate at France on the 15th of April, 1917.  
 Deserted at on the of 191 .

I Certify to the correctness of above in every particular.

\_\_\_\_\_  
 { Commanding Squadron, Troop,  
 Battery or Company.

**STATEMENT OF ACCOUNT.**

[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month .....				Balance Cr. last month ..15/4/17.....	3	19	5
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at			
	"				from to			
	"				Kit allowance .....			
	"				Amount produced by the sale of Effects from Form 2 .....			
	Consolidated stoppage .....							
	Balance due by the Paymaster	3	19	5	Balance due to the Paymaster .....			
	£	3	19	5	£	3	19	5

This account is in accordance with information received at the Pay & Record Office to 17/7/17 and is therefore subject to amendment if, and as may be found necessary.

I hereby certify that the above account is correct in every particular and that the debtor balance of **NEWFOUNDLAND CONTINGENT** correctly chargeable against the Public.

Dated at **27 JUL 1917**  
 this day of **JULY**  
 PAY & RECORD OFFICE

191

*[Signature]*  
 PAYMASTER & OFFICER IN CHARGE

Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.  
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED  
 11.6.17



**PAY LIST.** to **191 . Voucher No.**

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps

No. 1309 Rank Pte. Name Hickey, R.  
 Died<sup>(a)</sup> Intestate at France on the 15th of April, 1917.  
 Deserted at on the of 191 .

I Certify to the correctness of above in every particular.

\_\_\_\_\_  
 { Commanding Squadron, Troop,  
 Battery or Company.

**STATEMENT OF ACCOUNT.**

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month .....				Balance Cr. last month ..15/4/17.....	3	19	5
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at			
	"				from to			
	"				Kit allowance .....			
	"				Amount produced by the sale of Effects from Form 2 .....			
	Conso				of Savings Bank balance, including rest (if no balance, to be so stated)			
					Pay or Gratuity .....			
	Balance				Balance due to the Paymaster .....			
		£	3	19		£	3	19
				5				5

I hereby certify that the above account is correct in every particular, and that the ~~debtor balance of~~ **NEWFOUNDLAND CONTINGENT.** correctly chargeable against the Public.

Dated at **27 JUL 1917**  
 this day of **JULY**  
 PAY & HEAD OFFICE

191 *H. J. Russell Maj.*  
 PAYMASTER & OFFICER IN CHARGE

Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.  
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED: 11/6/17



re-Richard Hickey.

Discharged from Regiment Sept.28th.1916

Boarded and Pension granted Aug.21st.1917.

Pension @ \$8.00 per month from Sept.29th.1916.  
to August 20th.1917.

\$86.13

*RR*  
*AD*

**DUPLICATE** FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.

REGIMENT } NEWFOUNDLAND REGIMENT. Squadron, Troop, Battery or Company } D Company  
or  
CORPS }

Regtl. No. 1309 Rank Private

Name HICKEY, R.

Died { Date April 15th., 1917.

Place 19th. Casualty Clearing Station, France.

Cause of Death\* Died of wounds received in action.

Nature and Date of Report Memo, 20/4/17.

By whom made O.C., 19th. C.C.S.

\* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.



Burial { Place \_\_\_\_\_  
Date \_\_\_\_\_  
By whom reported \_\_\_\_\_

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) No.  
(b) in Small Book (if at Base) Not to hand.  
(c) as a separate document do

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge of Section Adjutant-General's Office at the Base } [Signature]  
Lieut. for Lt. Col.,  
Officer i/c Records Reg. Inf. Sec. 1,  
Srd. Bohelon, G.H.Q., B.E.F.

Station and Date Srd. Bohelon, 4/5/17.

**Casualty Form—Active Service.**

Regiment or Corps 2/1<sup>st</sup> Newfoundland

Regimental No. 1309 Rank Pte Name Hickey Robert.

Enlisted (a) St. Johns Terms of Service (a) Duration of War Service reckons from (a) 24.3.15

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

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_



*Certified true copy*

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
		<i>Embarked</i>	<i>Shampton</i>	<i>1.2.17.</i>	
		<i>Disembarked</i>	<i>Rouen</i>	<i>2.2.17.</i>	
		<i>Joined Batt.</i>	<i>FRANCE</i>	<i>7.2.17</i>	<i>B 213.</i>
<i>28.4.17</i>	<i>19 G. Co.</i>	<i>Ad. I.B.W. Head of Thigh</i>	<i>Do</i>	<i>15.4.17</i>	<i>FD 3422.</i>
<i>30.4.17</i>	<i>Do</i>	<i>Died of Wounds</i>	<i>Do</i>	<i>15.4.17</i>	<i>FD 3680.</i>

*S. Lushill*  
*Lieut*  
*Inf.*  
*o/c No. 1 Reg. Inf. 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.





### Casualty Form—Active Service.

Regiment or Corps Newfoundland.

Regimental No. 1309. Rank Pte Name Hickey R.

Enlisted (a) Mar. 24/15 Terms of Service (a) 1 year. Service reckons from (a) Mar. 24/15

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

Extended Duration of War Re-engaged Aug 15/15. Qualification (b) \_\_\_\_\_

*Certified true copy*

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
26.6.15	26 C.C.C.	Embarked St John's N.F.L.D.	N.F.L.D.	30/4/15	
		Disembarked Alexandria		1/9/15	
		Embarked for Gallipoli		13/9/15	
24/12/15	26 C.C.C.	Admitted Hospital	26 <sup>th</sup> C.C.C.	30/11/15	(B) 91.
30/11/15	16 Staly. Mudros.	do do	16 <sup>th</sup> Staly Mudros.	30/11/15	(B) 100.
22/1/15	Aquatania	Invalided to England	Aquatania	26/12/15	B. 884.

*W. Jackson*  
*Capt.*  
*for Major*  
*0 40 Records H 22 Dist.*  
*3rd Echelon G.H.Q. M.E.F.*

(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.







February 26th. 1918.

Mr. James Hickey,  
48 Barter's Hill,  
City.

Dear Sir,-

I enclose herewith cheque for \$26.82,  
being the balance of the estate of the late Pri-  
vate R. Hickey, payable to you as Administrat-  
or. I also enclose Letters of Administration.

Yours faithfully,

Captain & Paymaster &  
Officer i/c Records.

Enclosures 2.

JH/.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$26.<sup>82</sup>/<sub>100</sub>

Feb. 23<sup>rd</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Twenty Six  $\frac{82}{100}$  Dollars.  
on account of Pay Estate.  
balance

Ch. No. ....	1368	Initials .....	aw.
Pay Ledger .....	181	Initials .....	lclcl
Gen. Ledger .....	Est	Initials .....	AW

Regtl. No. .... Rank .....

AW

No. 1309 Rank Pte.

Name R. Mickey

James Mickey

48 Baxter's Hill





Casualty Form—Active Service.



Regiment or Corps Newfoundland  
 Regimental No. 1309 Rank Pte Name Trickett R  
 Enlisted (a) Mar 24/15 Terms of Service (a) 1 year Service reckons from (a) Mar 24/15  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_ Numerical position on roll of N.C.Os. \_\_\_\_\_  
 Extended Duration of War Re-engaged Aug 12/15 Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<u>26 Dec 24/15</u>	<u>26 CCL</u>	Embarked St. John's, N.F.L.D.		<u>30/11/15</u>	
		Disembarked Alexandria		<u>19/15</u>	
		Embarked for Gallipoli		<u>12/9/15</u>	
<u>24/12/15</u>	<u>26 CCL</u>	<u>Admitted Hospital</u>	<u>26 CCL</u>	<u>30/11/15</u>	<u>65197</u>
<u>30/11/15</u>	<u>16 5th Coy</u>	<u>Admitted Hospital</u>	<u>16 5th Coy</u>	<u>30/11/15</u>	<u>65100</u>
<u>27/1/16</u>	<u>16 5th Coy</u>	<u>Involuntarily Discharged</u>	<u>16 5th Coy</u>	<u>26/1/15</u>	<u>B 284</u>

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS. N.F.L.D.  
 No. 4569/43  
 DATED 17 MAY 1917

W. J. ...  
 Captain  
 for Major,  
 Officer i/c Records 11 & 12 Dists.,  
 3rd. Echelon, G.H.Q., M.E.F.

(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.]