

MEDICAL OFFICER'S REPORT
FINAL EXAMINATION



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 940

Name in full Mark Brown Hicks Age 21

Address Roling Cove - Bonavista

~~Married~~
Single
Color Dark Height 5'4" Weight 140 1/2
Hair dk. Brown Eyes Blue

Other distinguishing marks

Nearest relative (Father) George L. Hicks
Address Roling Cove - Bonavista -

Dependents none

Occupation Fisherman Present Wage \$400 per year

Previous service

Decorations

General Remarks

Date of Enlistment Jan. 29th 1915

I, Mark B. Hicks, 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.

Declared before me this 5th day of May, 1914
Em Shyrcapt

M. Hicks.

C.R.

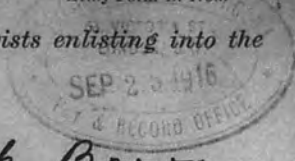
940

P. H. O.

ORIGINAL

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

MEDICAL HISTORY



Surname Hicks OF Christian Name Mark Brown

Table 1.—GENERAL TABLE.

Birthplace:—Parish	SPECIAL RESERVE.		REGULAR ARMY.	
	County			
Examined	on 27. day of Jan 1915	at Bonavista	on	day of 191
Declared Age	22. years	Fisherman	days	years days
Trade or Occupation				
Height	5 feet 4. inches		feet	inches
Weight	120½ lbs.			lbs.
Chest Measurement	Girth when fully expanded...	34. inches		inches
	Range of expansion...			inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
When Vaccinated				
Vision	R.E.—V=	no. 6/6	R.E.—V=	
	L.E.—V=	6/6	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)	Cluny Macpherson		L.P.	
(Rank)	Capt.			
	Medical Officer.		Medical Officer.	
Enlisted	at St Johns	at		
	on 29 day of Jan 1915	on	day of	191
Joined on Enlistment	Corps. 15 Nfld. Regt.	Regtl. No. 940	Corps.	Regtl. No.
Transferred to				
Became non-effective by				
(Signature)	on	day of	191	on
(Rank)				day of 191

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 Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8RD LONDON GENERAL HOSPITAL WANDSWORTH.	3	7	16	10	8	16	S.I.W. N: Pulchritudo 39. IX. 1. unres.	39.	From France. Three months case N: pulchritudo. Penetration by S.I.W. 7 by junction of lower & middle third. Warts, treated. See diagram.	J. J. Wood. Capt. R. H. M. L. T.

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
27, 4, 15 19. 9. 16	<p><i>J. V.</i></p> <p><i>Var</i> <i>Bulletin</i> ^{<i>Proposed</i>} <i>in</i> <i>Order</i> <i>Buttock</i>. <i>Recommended</i> <i>for</i> <i>perlong 3 months</i> <i>A. G. W.</i></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
<i>SE Johns Nfld.</i>	<i>Jan 29th 15</i>	<i>20 MAR 1915</i>			
<i>T.S. "Stephano"</i>	<i>20 MAR 1915</i>	<i>22 MAR 1915</i>			
<i>T.S. "Ordina"</i>	<i>22 MAR 1915</i>	<i>30 Mar. 15</i>			
<i>Edinburgh Castle</i>	<i>30 Mar. 15</i>				

Admitted 3.7.16

Army Form W. 3016.

No. _____

Date Aug 10th 1916

(1) To the Officer i/c Records,

58 Victoria St
S W (Station.)



(2) The Officer Commanding,

Newfoundland Contingent
Dep (Station.)

(3) The Paymaster,

58 Victoria St
S W (Station.)

Regimental No. 940

Rank and Name Pte Hickers M B

Regiment or Corps 1st Newfoundland Contingent

has been granted a furlough from Aug 10th to Aug 19th

His address while on leave will be:—

58 Victoria St S W

This man has been furnished with a warrant by Victoria and given an advance of £1 (one pound.)

I consider he is fit for ^{Duty.} ~~_____~~

Norman Tager Capt R.A.M.C.(T.F.)

Officer in charge Registrar, R.A.M.C.T. Hospital,
57th London General Hospital,
WANDSWORTH, S. W. (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.

INVALID SOLDIER.

2/1st NEWFOUNDLAND REGIMENT.

I recommend for Purlidge 940 M. B. Hicks (Private)

for 3 months on account of Disability for active

Service due to bullet in situ in Buttock.
(Operation refused)

J. G. Holson
Lt. Col.

19.9.16

946 Pt. MB. Hurs

D Co
40.

Hospital	£ 1-0-0	Balance	17/3/1	
Surv Bay	3-7 1/2	From 18/3/1 - 10/8/16 =	146 days	15-11-9 1/2
Acq Roll	10-3-0	CH =	£58.40	12-0-0

£ 11-6-7 1/2

£ 27-11-9 1/2
<u>11-6-7 1/2</u>
£ <u>16-5-2</u>

Embarked 'Scandinavian'
FROM Liverpool 27-9-16

Army Form O. 1625.

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 940

Rank

Private

Name

M. Hicks

Died

On 27/9/16 at Furlough

on the

of 26/9/16

1916

Deserted at

on the

of

1916

I Certify to the correctness of above in every particular.

{ Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[FORM I.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month	7/9/16	11	11	Balance Cr. last month	27/9/16	11	8
	Cash issues (Date of each issue to be stated)				Pay 40 days at 1-10 from 27/9/16 to 7/10/16	19	0	10
		£ s. d.			Proficiency, Service or good conduct pay			
	29/9/16	10			days at from to			
	15 "	10			Messing allowance days at			
	27 "	10			from to			
	7/10	1	12	10	Clothing and kit allowance			
	Handwritten		27		Amount produced by the sale of Necessaries			
	Consolidated stoppage				Personal Clothing and Effects from Form 2...			
	Attachment				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	all money to 27/9/16	15	15	11	Deferred Pay or Gratuity			
	Balance due by the Paymaster		12	11	Balance due to the Paymaster			
		£	10	2				
			2	11				
								£10 2 6

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 10 2 6 is correctly chargeable against the Public (A) NEW ZEALAND CONTINGENT.

Dated at

this

day of

191

PAYMASTER & OFFICER Paymaster

(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 A.F.B. 2090 or Army Form O. 1815.

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

W. 9667-4002-750M. 9/15.
H. & J., Ltd., Bury St., E.C.

Forms
O. 1625
27

CHEQUE
10

COPY.



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

MEDICAL HISTORY

Surname

Aicks

OF Christian Name

Mark Brown

Table I.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	at	24 Jan 1915	at	191
Declared age		22 years		days
Trade or occupation		Featherman		
Height		5 feet 4 1/2		inches
Weight		120 1/2		lbs.
Chest Measure- ment { Girth when fully expan- ded Range of expansion ...		34		inches
				inches
Physical development	Right	Left	Right	Left
Vaccination marks { Arm Number				
When vaccinated		No		
Vision	R.E.—V.=	6/6	R.E.—V.=	
	L.E.—V.=	6/6	L.E.—V.=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
	(b)		(b)	
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<i>Glenn Macpherson</i>		<i>H.P.</i>	
(Rank)	Medical Officer.		Medical Officer.	
Enlisted	at	St Johns	at	
	on	29 day of Jun 1915	on	day of 191
Joined on enlistment	Corps	1 Nfld Regt 940	Corps	Regtl. No.
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of 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				
3rd Lt G Hosp Wentworth	3	7	16	10	8	16	G.S.W.R. Buttock by TR route	39	From France. 3 wounds over R buttock Penetrating G.S.W. R leg. junction of lower & middle tibia. Wounds healed for disposal	F. J. Medland Capt. R.A.M.C.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examination 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
	J.V.
27. 4. 15	Vax
19. 9. 16	Bullet suspected in Left Buttock. Recommended for furlough 3 months A.F.N.

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. Johns Nfld	Jan 29/15	20 March 15			
T.S. Stephens	20 March 15	22 March 15			
T.S. Orduna	22 March 15	30 March 15			
Edinburgh Castle	30 March 15				



Medical Report on an Invalid.

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

Statement of Case

Station

Date

G. G. Jones
Jan 10/17

1. Unit *1st. Newfoundland*

5. Age last birthday.

*21.*2. Regimental No. *940*

6. Enlisted on

29 Jan. 1915

3. Rank.

Pte

at

G. Jones

4. Name.

Herb. Marks

7. Former trade or occupation

Fisherman

8. Disability

G. W. Buttock

9. History

France 1st July, 1916.

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

*Normal.
Slight limp.*

11. Was sanatorium operation advised and refused? *Yes.*

12. Do you recommend discharge as permanently unfit? *No*

Signature *JW Borden*
Rank or Qualification *Lieut*

Remarks if any by Officer i/c Hospital.

Place Signature
Date Rank

Opinion of the Medical Board.

In para. 13, the President should write "may" or "cannot" at x.
Erase inapplicable words.

13. For pension purposes, the disability x May be considered as aggravated by:—
due to
- (a) Service during this war.
 - (b) ~~Climata~~
 - (c) ~~Ordinary Military Service~~

Remarks if any:— *X-ray shows small bullet foreign body in the
tarsus below right hip joint. Complaint of weakness of leg
which causes lameness. General condition good*

14. At present his capacity for earning a full livelihood in the general labour market is lessened by:—
(Here the president should write in Total, 3-4, 1-2, or 1-4).

Remarks if any:—

1/2 for six months

15. The refusal of operation sanatorium is:—

- (a) Reasonable. *on account of difference of opinion
of surgeons at Wandsworth & at Leg.*
- (b) ~~Unreasonable~~

Remarks if any:—

16. We recommend discharge from retention in the Army

Remarks if any:—

N. S. Fran.

Signatures

President

W. Paterson Major

Parsons Lieut

Place

Date

*St. Johns
Jan 17th 1917*

APPROVED

Station

Date



Cluny Macpherson

Administrative Medical Officer. Major

-Certificate to be signed by the Soldier on Discharge.-

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date.

(Place) Bonavista

[Signature] Signatuer of Soldier

(Date) Jan. 24/1917

[Signature] Signatuer of Witness



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 *Mark Brown Hicks*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *940*
 Intended address *Bonavisla*
 Height on discharge *5* Feet *4 1/2*
 Color of hair on discharge *Dark Brown*
 Complexion *Fair*
 Color of eyes *Grey*
 Figure on discharge *Medium*
 Christian name of Father *George*
 Christian name of Mother *Deed*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Bonavisla 28 Jan. 1896.*
 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) *Mark Brown Hicks*
 Station *St Johns Rfd* Date *Jan 18 1917* (Rank) *Rte*

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.

St W. Borden Lieut.
 Medical Officer i/c Hospital.
 Unit, or Command Depot.

Station

St. Johns Rfd

Date

Jan 18/17

Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date.

Place Bonavista M B Hicks (Sig. of Soldier)

Date 12/3/17 _____ (Sig. of Witness)

Hicks, W. B.

940

Ray Sept

From

June 5/19

Ex 940

M B Dick

Banavisto

Capt Hawley

Dear Sir Please forward the
months Gratuity money
and oblige

Yours Truly

^{1st}
~~MAILED~~
mailed 20/6/19

STATEMENT OF ACCOUNT

No. 940

Name Aicks MB.

Date.	Particulars	Ch. No.	11/4/11		Bal.
			Dr.	Cr.	
Sept 29	Balance due by F.H. 12/11			3 14	3 14
Oct 9	By pay to date			11 00	14 14
31	" " "			35 20	49 34
Nov 30	By pay today @ 1.85			55 50	104 84
Dec 31	" " 31 @ do			57 35	162 19
Jan 31	" " 31 @ do			57 35	219 54
	Bonus			12 95	232 49
	Clothing			25 00	257 49
	Ration Allowance £1.00			4 86	262 35
Oct 10	To pay	22	15 00		247 35
17	" "	26	15 00		232 35
28	" "	32	10 00		222 35
Dec 13	" "	68	10 00		212 35
31	Allotment 93 days @ 70		65 10		147 25
Jan 2	To pay	86	20 00		127 25
20	" "	100	35 00		92 25
24	" "	104	81 09		11 16
Feb 1	" "	112	6 30		4 86
	War Service Punctuality 5ms @ 70 ⁰⁰			350 00	354 86
	Clothing			10 00	364 86
	Bonus		12 95		351 91
Dec 18	P.S. Pay.	7193	87 15		264 76
1919 Mar 1	To pay	10749	70 00		194 76
Apr 1	" "	15101	10 00		184 76
" "	" "	13674	70 00		114 76
May 1	" "	17751	70 00		44 78
June 1	" "	21468	39 90	67	4 86
				51	
			617.49	622 35	41 86

Signed

A. J. Lavery 88115



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name... Mark B. 2. Surname... Nicks

3. Rank... private 4. Regtl. No... 940

5. Address in full to which future payments of gratuity are to be forwarded... Bonaville

6. Date of enlistment in the Regiment... Jan'y. 29th 1915

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge... none

8. Relationship of such dependents... not applicable

9. Address in full of such dependents... not applicable

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? not applicable

11. Were you on active service only in Nfld. If so, give dates and particulars of such service... no. I went overseas in Feb. 1915

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... 2 years 3 days

Signature of Applicant:

M B Hicks

Place of Residence:

Bonavista

Declared before me at:

St. John's

This

fifth

day of

April

19*.19*

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

Charles E. Hunt
Notary Public

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>5.00</i>	<i>350.00</i>
.....
.....
Certified Correct.			Paymaster.	

10-8

So I trust you will
give my case your kind
consideration and if
possible to grant me
what ever belongs to
me. Thanking you
for your kind favour

I remain
your humble petitioner

George L. Hicks.

Bonaville

April 29. 20

Records
Regt. No. 940

over

To Lieut-Col.,
W. F. Randall,
Chief Staff Officer,
Hon. Sir.

I have the honor
to acknowledge the receipt
of a communication from
your Dept. I beg to
inform you that had
I known the time was
limited for separation
forms to be sent in
I would not have done
so. But under the circumstances
I think if you will look
my case up you will see
I did not take much
interest in the local papers
after my son's death

SEPARATION ALLOWANCE.

Claimant..... *Hicks, Lincy (sister)*

On account of *Mark B. Hicks* No. *940* Rank. *Pte*

Decision..... *Refused.*
Applicant self-supporting.
no allotment in her favour
.....

J. B. Bennett
W. R. Rudee Lieut. Col.
J. M. Bowley Capt.

Date..... *14/5/19*

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

Allotment of *70* [¢] per day payable to *George L. Hicks*
his *Father* from *27/3/15* to *31/12/16*.

Discontinued on account of *being discharged*

..... *L. H. S. J.*

W. J. ...

This is to certify that
Miss L. ...
on Jan 4 1917. for a severe
attack of ...
& that she has been under
my treatment continuously
till Oct 1918. She was
almost blind during a
considerable period of that
time & has not yet fully
recovered her sight.

S. W. ...

at 7,944

- 10. State amount earned by (a) Yourself *\$ 4.00 monthly*
(b) Your husband.

- 11. State amount and source of any other income. *no other*

- 12. State value of real property belonging to you and your husband. *brother* *none*

- 13. State value of personal property belonging to you and your husband. *brother* *none*

- 14. If husband is dead state value of real and personal property left by him. *not applicable*

- 15. Actual amount contributed by soldier during the year prior to enlistment. *\$ 8 to \$ 10 monthly*

- 16. Was this amount contributed weekly or monthly. *monthly*

- 17. Did this amount include payment of ^{brother's} ~~son's~~ board etc. *no*

- 18. State your ^{brother} ~~son's~~ trade or occupation prior to enlistment. *fisherman*

- 19. State amount of his wages per week. *Varied according to voyage*

- 20. State name and address of his last employer. *Algoma Steel Corporation
Sales St. Marie
Ont.*

- 21. State amount of monthly support from ~~son~~ ^{brother} since enlistment. *\$ 20.00 monthly*

- 22. State amount of allotment received by you from ~~son~~ ^{brother} since enlistment. *none*

- 23. State from what date did you receive allotment? *not applicable*

- 24. Actual amount contributed by other children. *Weekly Monthly.
not applicable*

- 25. Are any of these children in the employ of you or your husband? *not applicable*

- 26. **If not receiving support** from other children, state cause. Explain Fully. *not applicable*

- 27. With whom are you residing at present? *% Mrs. Price Mundy Pond Road, St. John's*

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

- 29. Are you already in receipt of Separation Allowance from any source? If so, how much? *no*

- 30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much. *no*

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

- 32. In what capacity and in what place? *not applicable*

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

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

Signature of Applicant..... *Lindsay Hicks*

Place of Residence..... *% Mrs. Price Mundy Pond Road, St. John's*

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

this..... *seventh*day of..... *April*191 *9*.

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace.) *Chas. G. Mann*

----- *Notary Public*

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman.....

Signature of member of the Patriotic Fund Committee.

May 28.1919

Miss Liney Hicks,
C/o Mrs. Price,
Mundy Road Road,
City.

Dear Miss Hicks:-

Referring to your application for
for Separation Allowance, I have been directed
to inform you that same has not been granted,
because according to your application you are
self-supporting, and consequently you are not
dependent upon your brother.

Yours truly

Captain,
Paymaster & O.i/c Records

In replying the date of this
letter should be quoted

B.



April 22, 1920.

1057

Sir:

The following is an extract from a letter received
by me from Magistrate Roper, Bonavista:

"In the Autumn of 1914 a young man named
Mark B. Hicks of this place enlisted and went over-
seas with, I think, the second draft. Before leaving
he informed his sister that he had made a Will leaving
his belongings to her, and that it was deposited at
Headquarters for safe-keeping."

#940
The above named soldier was accidentally killed during
the past Winter, and his sister wishes to know if the Will
referred to is in existence.

I have the honour to be,
Sir,
Your obedient servant,

M. Sweeney
Deputy Minister of Justice.

Major J. M. Howley,
Pay & Record Office.

October 30th

6

Pte. M. B. Hicks,

Bonavista.

Dear Sir,-

Referring to your telegram of October 27th, I
enclose herewith Cheque for \$10.00 on account of pay.
Please sign the attached voucher in the space provided
for same, and return.

Yours very truly,

9/10



2nd. Lieut. & D/Paymaster.



1st Newfoundland Regiment

HEADQUARTERS

St. John's, Newfoundland,

Aug. 14th 1917

L. Howley
ofc. Records.

Dear Sir -

We are in receipt of a letter from an ex soldier # 940 Mark B. Hicks asking for his discharge badge. We find same was sent to you 3-8-16 engraved & ready for delivery. Will you please arrange to have it sent to the undivided address.

I have the honour to be Sir

Your obedient servant

W. H. J. G. COY.
1st NEWFOUNDLAND REGIMENT,
ST. JOHN'S, Nfld.

Address.

Mark B. Hicks

Sydney Mine

Nova Scotia

Canada.

Sydney Morris

Lieut Hawley

14/7/17

Dear Sir

Please forward
me an active service
badge

& oblige

Yours

truly

M B Healy

U. No. 100
for war badge
if not already
I applied for
M B Healy

Mark

Reg. no. 940

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10⁰⁰/₁₀₀

Apr 4 1919

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

W. B. Dickson

Ch. No.	<u>15101</u>	Initials	<u>E. W.</u>
Pay Ledger	<u>115</u>	Initials	<u>J. K.</u>
Gen. Ledger		Initials	

Regtl. No.

Rank

J. C. S.

No. 940

Rank

PL-

Name

M. B. Hicks

April 23

20

Deputy Minister of Justice
City

re #940 Mark B. Hicks

Sir:-

I have the honour to acknowledge receipt of your letter of April 22nd., regarding the above mentioned soldier. The only "will" which I can find any record is, that which is enclosed herewith.

I have the honour to be,
Sir,
Your obedient servant.

Major

Magister.

From

Received

To

Delivered

OFFICE STAMP

Received from Pte W B Hicks. Six Dollars & sixty five cents for one first class ticket Bonavista to St. Johns

C. T. Apple
Agent R. N. Co

Please Refund
money including
tickets issued here
S. J. Carby
Mayno



No. _____



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with Pte. M.B. Hicks,

Voucher No. 26756.

Cheque No. 26756.

Reg'l A/c No. _____

Name _____

C.B. Folio No. _____

Date		Req'n No.	Invoice No.	Particulars.	Amount.
Jan.	2	265		A/c pay	\$20
					\$20

CERTIFICATION

Dissectⁿ Sheet No. _____

Recap. Sheet No. 265.

M. Bowley
PAYMASTER

Checked by _____

RECEIPT

January 2nd 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of

Twenty Dollars

and _____ Cents in Payment as above stated.

January 1917.

\$20.00

[Sig.] *M.B. Hicks*

FORM K

No 857



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Mr B Hicks, Regl. No. 740
hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and 5 Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and} 1 Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and} 1 Persons
concerned, viz. :

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>574</u>	<u>other</u>	<u> </u>	<u> </u>	<u> 1.0 </u>

Total Allotment, £

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.)
Officer Commanding
Company

(Sig.) Mr B Hicks
(Rank) Private

St John's
Mar 30 191

Bonavista 1/11/16

Leut Howley

Dear Sir

Your letter of the 30 received

thanks very much
it encloses the vouchers
signed as you required

yours truly

Pt M B Hicks



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. _____ Sent by _____ Rec'd by _____ Check ✓ No. 27

Place from Bonnavista

To Ltut Howley

Colonial Bldg

OCT 27 1916

Please wire ten dollars
and oblige

No 948 Lt M B Hicks
voucher 25900

RECEIPT.

C.R.

940

I hereby certify that I have received the 1914-1915

STAR.

No 940

Name

MVB Hicks

Witness.

Lincy Hicks

Date

Dec 16/19

Place

Bonnarista

P.O. Box 35

Bonavista

Wfld

Nov 8/19

C.R. 940

Onb room 38 Military Dept

Dear Sir

will you please send me the
victory ribbons
and oblig

Ex No. 940

Pls M B Dickes

Sent 6/11/19.

C.R. 940

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 STAR.

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

Name.....*M. P. Dick*.....

Date.....*4/4/19*.....

Place.....*St. Johns*.....

Please sign this and return to Dept. of Militia.

CIRCULAR LETTER

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

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

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND

of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star, *Gallipoli*

I certify that I am entitled to this issue, having served on* *Gallipoli* from *Sept 19* 1915 to *Nov* 1915.

(Date) *4/4/19* (NO) *940* (Rank) *Plt* (Time).....
(Place).....

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

Mark B Rider
Bananista

OP filed

C.R. 940

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

#940 Pte. Mark B. Hicks, discharged, Jan. 3rd 1917, Medically
unfit

C.R. 940

Extract from Roll, of Officers and
N. C. O.'S and men DISCHARGED
from the Royal Newfoundland
regiment.

Regt k.	Rank	Name	Date	Reason.
	Y	S		
940	Pte.	Hicks Mark B.	31/1/17	Med. Unfit.

940

C.R.

Extract from Daily Orders Part II Unit The Royal
Mfld. Regt., St. John's, Jan. 11th, 1917.

940 Pte. M. Hicks.

Attached to the strength from Jan. 10th, 1917.

Bonavista

20/12/16

Depot
940

Col Nfld Reg

Dear Sir

My leave finished on
the 7th of January
I would like to know
if I am to report or wait
until I am called up

Yours sincerely

Lt M B Hicks

N^o 940

Headquarters
Newfoundland Regiment

Lt

C.R. 940

Copy of Cablegram to Governor St. John's Nfld from P.&.R.O 30 Sep.1916

940, Pte Hicks.

Left Liverpool on Scandinavian Passage has been provided for
to Quebec. For Discharge.

C.F. 940

Extract from Telegram received from London, dated
September 30, 1916.

~~What follows~~ Leaving Liverpool, Scandinavia, September
27th passage has been provided, Quebec, following on
furlough:

#940 Pte. Hicks.

C.R. 940

1st NEWFOUNDLAND REGIMENT

Extract of Casualty List received from P. & R. O. Aug 11th 1916.

940, Pte M. B. Hicks.

Discharged from Hospital and granted furlough from 10/8/16 to, 19/8/16.

Fit for Duty Class A. ✓

C.R. 940

Extract of Casualties received from Pay & Record Office,
London, dated July 31, 1916.

(extract from Army Form B. 813, from C.O. 1st. Bfld. Regt.
dated 11/7/16.)

#940 Pte. M.B.Hicks. ✓

Wounded in Action 1/7/16.

NEW ZEALAND POSTAL TELEGRAPHS.

Cable Connection with all the World



All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender *Geo. A. Murray* Address _____

Line Number	Rcd	By	Sent	by	Check

Dated July 26, 1916.

To Mr. George L. Hicks,
Rolling Cove, B.B.

In reply to my enquiry Record Office, London,
reports No. 940, Private Mark B. Hicks, at Wandsworth
getting along splendidly.

COLONIAL SECRETARY.

TRANSLATION OF MESSAGE SENT TO SYNOPTICAL
July 22, 1916.



Report by telegraph present condition of
Capt. Rawsell, Lieut. Bemister, 1500 Mitchell,
441 Waterman, 1420 Sheppard, 252 Hickey, 996
O'Driscoll, 1340 Dawson, 1814 Carter, 1088 Dunn,
490 Kehl, 1293 Ryder, 940 Hicks, 1271 Guy,
630 Cuff, 488 Meuland, 524 Cuff, 1917 Wade,
742 Mifflin, 1411 Gosse, 682 Rowe, 1368 Brasil,
1320 Chyman.

COLONIAL SECRETARY.



C.R. 940

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&R.O.
July 10th. 1916.

940, Pte M.B. Hicks. ✓

1/Newfoundland R. Adm. 1 Gen. Hos. Etretat 2nd July 1916
G.S.W. Leg. R .

44

COPY OF TELEGRAM.

Dated

July 5, 1916.

To

Mr. George L. Hicks,

Benavista.

Regret to inform you that the Record Office,
London, officially reports No. 940, Private Mark B. Hicks,
is at Third London General Hospital, Wandsworth, with
bullet in leg and hip.

Upon receipt of further information I shall immedi-
ately wire you and trust that the next report will
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 940

Extract of Casualties received from Pay & Record
Office, London, dated July 5, 1916.

#940 Pte. M.B.Hicks. ✓

Bullet wound left leg and hip.

At 3rd London, General Hospital, Wandsworth,
July 3, 1916.

WH

February 26, 1916.

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. 940, Private Mark B. Hicks, who was previously reported at Mudros West, December 18th, suffering from rheumatism, was discharged to Base Depot on December 29th.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mr. George L. Hicks,
Rolling Cove, B.B.

H 44 ✓

February 8. 1916

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. 940, Private Mark B. Hicks, was admitted to Eighteenth Stationary Hospital, Madros West, on December 18th suffering from rheumatism. This information has been received by mail.

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. George L. Hicks,
Rolling Cove, B.B.

C.R. 940

Abstract of Sick and Wounded N.C.Os. and Men of the Mediterranean
Expeditionary Force, dated Feb. 2nd 1916.

List No: H. 5895.

940 Pte. M.B. Hicks

1st Newfoundland.....Rheumatic Fever.....Trans. ex 18 S.H. Mudros
West 22 Dec. 1915.

Extract of Casualty List received from P&R O, London, Dated Jan. 31st.
1916.

940 Pte. M.B. Hicks

1st. Nfld. Regt. Rheumatism.. Adm Lowland C.D.H. Mudros W. 26th. Dec 1915

C.R. 940

Extract of Sick and Wounded N.C.Os. and Men of the Expeditionary
Force -----Mediterranean, dated Jan. 29th 1916.

List No: H. 5277.

940 Pte. Hicks.

1st Newfoundland.....Dis. to Base Depot ex Lowland Cas. Clear.

Stat. Madras West 29, Dec. 1916.

NEWFOUNDLAND CONTINGENT.

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

January 9th, 1916

940, Pte. M.B. Hicks.

1/Newfoundland Rheumatism Adm. 18 S.H. Ludros W. 18th

December 1915.

C.R. 940

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

940 Pte. M.B. Hicks.

Disembarked Alexandria 21-8-15 Proceeded to Abbassia,
Cairo, same date. Embarked Alexandria for Gallipoli
13-9-15.

CR 940

Extract from Nominal Roll of Draft embarked for overseas
per S.S. Stephano March 20th, ~~1915~~ 1915

#940 Pte. M. B. Hicks.

C.R. 940

Mark B. Hicks was attested for General Service
with the NEWFOUNDLAND REGIMENT onJan. 29th. 1914

Regimental No. 940 was allotted to Pte Mark B. Hicks.

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

Casualty Form—Active Service.

388

Regiment or Corps Newfoundland
 Rank Plt Name Nicks M.B.
 C.R. No. 940
 Enlisted (a) Jan 29/15 Terms of Service (a) 1 year Service reckons from (a) Jan 29/15
 Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____
 Extended Dunthorpe Re-engaged Aug 15/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 35, 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				
		Embarked St. John's, NFLD.		20/3/15.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
31/12/15.	26 C.C.S.	Admitted, Diarrhoea			
		Transferred	H.S. "Somali"	17/12/15.	C 5292.
30/12/15.	18th. Stat. Mudros.	Admitted	18th. Stat. Hosp., Mudros.	18/12/15.	E 4681.
		<i>Embarked Port Suez</i>		<i>14.5.16</i>	<i>10213</i>
		<i>Disembk'd MARSEILLE</i>		<i>21.5.16</i>	
	<i>847A</i>	<i>Workley transf</i>	<i>bles</i>	<i>27.16</i>	<i>801968.</i>
	<i>ad. G. S. W. R. Reg</i>	<i>Etretat</i>		<i>27.16</i>	<i>H.A. 546</i>
	<i>France</i>	<i>Inv to England</i>		<i>3.4.16</i>	<i>W 3083</i>



CAPTAIN.
 FOR O. 116 INFANTRY RECORDS
 S. H. G.
 3rd ECHELON

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

ORIGINAL.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
 [251] W7026/996 250m 10/14as 53 56

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
E. 121
29.

Number of Sheet _____

Regiment of *Newfoundland*

Signature of *C. O. Conway*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>940 Hicks M.B.</i>	Age on	<i>22</i> years <i>—</i> months	<i>Fisherman</i>	
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	<i>St Johns Jan 29 1915</i>		<i>Methodist</i>	
Joined	Date	Period of		Place of Birth	
Joined	Date	with Colours <i>2³</i> years			
		with Reserve <i>3⁶</i> years			



Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Stobbs Camp</i>	<i>17/15</i>	<i>Plt</i>		<i>Absent from barracks untill Reviled 19/15</i>	<i>Cpl Fowles.</i>	<i>2 days cc.</i>	<i>19/15</i>	<i>L. C. O. Agre</i>	<i>Forfeit 21 days pay F.H.R.</i>
				<i>Medically Unfit</i>	<i>St Johns</i>	<i>31/15</i>			
To be carried over									

Army Form B. 121.