



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 1670 Name Thomas Higgins Corps \_\_\_\_\_

### Questions to be put to the Recruit before Enlistment.

- |  |                                       |
|--|---------------------------------------|
| 1. What is your name? .....  | 1. <u>Thomas Higgins</u>              |
| 2. What is your full Address? .....  | 2. <u>Catalina St</u>                 |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                         |
| 4. What is your Age? .....   | 4. <u>19</u> Years <u>1</u> Months.   |
| 5. What is your Trade or Calling? .....  | 5. <u>Seaman</u>                      |
| 6. Are you Married? .....  | 6. <u>No</u>                          |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u>                          |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u>                         |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u>                         |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. _____ { Name _____<br>Corps _____ |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u>                        |

I, Thomas Higgins 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.

Thomas Higgins SIGNATURE OF RECRUIT.

E. June 26/15 A. Montgomery Capt Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

The above questions were then read to the Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at \_\_\_\_\_

on this 17<sup>th</sup> day of July 1915 A. Montgomery Capt  
Signature of the Attesting Officer.

### † Certificate of Approving Officer.

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

Date \_\_\_\_\_ 191 \_\_\_\_\_  
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, the Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz.—  
(Name) \_\_\_\_\_ re-enlisted in the (Regiment) \_\_\_\_\_ on the (Date) \_\_\_\_\_

**DESCRIPTIVE REPORT ON ENLISTMENT.**

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

Name Heggen, J. H.

Apparent age 30 years 1 months. Height 5 feet 7 inches.

Chest measurement { Girth when fully expanded 36 inches.  
 Range of expansion 4 inches.

Distinctive marks \_\_\_\_\_

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin Thomas Heggin  
Catalina Trinity Bay | Relationship Father

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	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 _____									
Joined at _____ on _____									
Disch'd.	A. J. H. H.			4/4/17					
Total Service forfeited as above ... ..									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ ( " ) _____ " _____									



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 1670 Name Thomas Higgins Corps \_\_\_\_\_

### Questions to be put to the Recruit before Enlistment.

- |   |  |
|---|--|
| 1. What is your name? .....   | 1. <u>Thomas Higgins</u>                       |
| 2. What is your full Address?.....  | 2. <u>Catalina</u>                             |
| 3. Are you a British Subject? .....   | 3. <u>Trinity Bay</u>                          |
| 4. What is your Age?.....   | 4. <u>yes</u>                                  |
| 5. What is your Trade or Calling?.....  | 4. <u>19</u> Years..... Months.                |
| 6. Are you Married?.....  | 5. <u>Fisherman</u>                            |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                            | 6. <u>no</u>                                   |
| 8. Are you willing to be vaccinated or re-vaccinated? .....   | 7. <u>no</u>                                   |
| 9. Are you willing to be enlisted for General Service? .....  | 8. <u>yes</u>                                  |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.....                                     | 9. <u>yes</u>                                  |
| 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?..... | 10. <u>-</u> { Name <u>-</u><br>Corps <u>-</u> |
|   | 11. <u>yes</u>                                 |

I, Thomas Higgins 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.

Thomas Higgins SIGNATURE OF RECRUIT.

E. J. ...

Montgomery Capt Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas Higgins 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 correctly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at St Johns Nfld on this 17th day of July 1915. Montgomery Capt Signature of the Attesting Officer.

### † 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, the Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz.— (Name) \_\_\_\_\_ re-enlisted in the (Regiment) \_\_\_\_\_ on the (Date) \_\_\_\_\_



# DESCRIPTIVE REPORT ON ENLISTMENT.

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

1670

Name Heggen, H. S.  
 Apparent age 36 years 7 months. Height 5 feet 7 inches.  
 Chest measurement { Girth when fully expanded 4 inches.  
 Range of expansion \_\_\_\_\_ inches.  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Thomas Heggen  
Catalina Trinity Bay | Relationship Father  
 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	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>26-6-15</u>									
Joined at <u>St John's</u> on <u>June 26/15</u>									
Embarked	St John's train	to Quebec	29/15	Lower Corporal	3-2-16				
Embarked	Shamilton	28-3-16	of Desm. Co. 8th						
		1-7-16	Admitted to 8 City Hosp.						
		4-7-16	Admitted to Hospital						
		26-2-17	to Newfoundland for dem.						
		March 1917							
Discharged Medically unfit									
Total Service forfeited as above									

Total Service towards Engagement to 4-4-17 (date of discharge) 1 years 283 days  
 " " " Pension " \_\_\_\_\_ ( " ) \_\_\_\_\_ " \_\_\_\_\_



Regimental Number 1670

Company F

THE  
1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's  
Forces under the following conditions:

For the duration of the present war, or until my  
discharge.

Subject to the Army Act, the King's Regulations,  
and to such ordinances as may apply or may  
be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act,  
5 George V., Chapter IV.

Signed Thomas Higgins

Witness Kevin Keegan  
2111

Dated at



191

COPY.

*For Original see File No. 3370.*

St. John's

Sept. 27th 1918.

The Secretary

Board of Pension Commissioners.

Dear Sir:

I am instructed by the Committee of Control of the Naval and Military Convalescent Hospital, to notify the Board of Pension Commissioners that the following Patients have been dismissed from the Institution, under the instruction of the Committee -

3370 Pte. S.M. Reid.  
1352 " R. Crummell.  
1670 L/Cpl. Thos. Higgins.  
1985 Pte. M. Fennell.  
3391 " King.

Yours Emaly

H.G. Harvey.

From Mrs. John Harvey

Hon. Secy. Hospital Committee.

C.R. 1670

Extract from Nominal Roll of Draft No. 3 from 2nd Bn.  
Depot to 1st Bn. B.M.F. Embarked 22-5-16

28-3-16

1670 L/Cpl. T.Higgins.



C.R. 1670

Thomas Higgans was attested for General service  
with the NEWFOUNDLAND REGIMENT on ..... June 26th 1915.  
Regimental No 1670 was allotted to Pte. T. Higgans.

AUTHORITY:

Record Ledger,

Depts. of Militia,

March 25th, 1919.

C.R. 1670

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

1670 Pte. Thos. Higgins, discharged Apr. 4th 1917, Medically  
unfit

C.R. 1670

Extract from roll of Officers  
N. C. O's and men DISCHARGED  
from the Royal Newfoundland  
Regiment.

Regtl.#	rank	name	date	reason.
1670	Pte.	HIGGINS Thos.	4/3/17	MED. UNFIT..



C.R. 1670

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

#1670 L/Cpl. J. Higgins. ✓

Wounded 1/7/16. Reported by O.C. Unit 19/7/16.

C.R. 1670

Extract of Casualties received from Pay & Record Office,  
London, dated July 12, 1916.

#1670 Pte. T. Higgins. ✓

~~####~~ Gunshot wound Legs.

Admitted 8th Stationary Hospital, Winchester 4th July 1916.

To England per H.S. St. Andrew ex 8 Sty. Hos. 4th July 1916.

C.R. 16.70

Extract of Casualties received from Pay & Record  
Office, London, dated July 7, 1916.

#1670 L/C. T. Higgins. ✓

Gunshot wound LX. 4 Tibia.

Admitted 3rd London General Hospital, Wandsworth,  
July 5, 1916.



C.R. 1670

Copy of Cablegram to Governor St. John's Nfld.  
from P.&LR.O. 6/7/16.

1670, Higgins. ✓

Dangerously Ill Wandsworth Gunshot Wound Left Tibia.

1944



CASUALTIES.

O.C. 3rd.London General Hospital, reports by telephone 5.55 p.m.,  
6/6/16:-

DANGEROUSLY ILL. Gun Shot Wound Left Tibia:-

1670, Higgins, L/Corp. T. .  
✓

C.R. 1670

H(67) ✓

COPY OF TELEGRAM.

Dated  
July 6, 1916.

Mr. Thomas Higgins,

Catalina.

Regret to inform you that the Record Office,  
London, officially reports No. 1670, Private Thomas  
Higgins, is dangerously ill at Third London General Hospital,  
Wandsworth, suffering from gunshot wound left tibia.  
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. 1670

Extract from Nominal Roll of Sick and Wounded from France  
Expeditionary Force to the 3rd., London General Hospital  
admitted July 5th., 1916.

---

#1670 L/C. T. Higgins.

IX 4 TIBIA.

BC.

C.R. 1670

Extract from Nominal Roll 3rs Draft to B.E.F. arrived 29,  
A.B.D. Rouen 30-5-16. Joined Battalion 15-4-16.

#1670 L/Cpl. T.Higgins.

C.R. 1670

Extract from Nominal Roll, G. Co., entrained St. John's 27/10/15 for Overseas

---

1670 Pte. T. Higgins.



G. Higgins.

C.R.

1670

P.R.O.

This space to be left blank for the Chelsea Number.

# Proceedings on Discharge.

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

No. <u>1670</u>	Army Rank <u>Lance Corporal</u>		
Name <u>Higgins Thomas</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>			
Corps <u>1<sup>st</sup> Newfoundland Regiment</u>			
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>			
Date of discharge	COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. M.F.P. 38. No. <u>1182/1</u> DATE FEB. 9. 1918		
Place of discharge			
<p>1. <span style="float:right">Description at the time of discharge</span></p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; vertical-align: top;"> <p>Age <u>20</u> years _____ months</p> <p>Height <u>5</u> feet <u>10</u> inches</p> <p>Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.</p> <p>Complexion <u>Fair</u></p> <p>Eyes <u>Blue</u></p> <p>Hair <u>Light Brown</u></p> <p>Trade <u>Fisherman</u></p> <p>Intended place of residence { <u>Catalina</u> <u>Trinity Bay</u> <u>Newfoundland</u></p> <p><small>(To be given as fully as practicable)</small></p> <p><small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small></p> </td> <td style="width:50%; vertical-align: top; border-left: 1px solid black;"> <p style="text-align: center;">Descriptive marks.</p> <p><u>S.W. Scars both legs &amp; R. Hip</u></p> </td> </tr> </table>		<p>Age <u>20</u> years _____ months</p> <p>Height <u>5</u> feet <u>10</u> inches</p> <p>Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.</p> <p>Complexion <u>Fair</u></p> <p>Eyes <u>Blue</u></p> <p>Hair <u>Light Brown</u></p> <p>Trade <u>Fisherman</u></p> <p>Intended place of residence { <u>Catalina</u> <u>Trinity Bay</u> <u>Newfoundland</u></p> <p><small>(To be given as fully as practicable)</small></p> <p><small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small></p>	<p style="text-align: center;">Descriptive marks.</p> <p><u>S.W. Scars both legs &amp; R. Hip</u></p>
<p>Age <u>20</u> years _____ months</p> <p>Height <u>5</u> feet <u>10</u> inches</p> <p>Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.</p> <p>Complexion <u>Fair</u></p> <p>Eyes <u>Blue</u></p> <p>Hair <u>Light Brown</u></p> <p>Trade <u>Fisherman</u></p> <p>Intended place of residence { <u>Catalina</u> <u>Trinity Bay</u> <u>Newfoundland</u></p> <p><small>(To be given as fully as practicable)</small></p> <p><small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small></p>	<p style="text-align: center;">Descriptive marks.</p> <p><u>S.W. Scars both legs &amp; R. Hip</u></p>		
<p>2. The above-named man is discharged in consequence of <u>Guns hot. wound</u> <u>Left leg &amp;c. severe</u></p> <p><small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small></p>			
3. Military character :—			
4. Character awarded in accordance with King's Regulations :—			
<p>Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.</p> <p style="text-align: right;">Initials of Commanding Officer.</p>			
Army Form B. 2088 has been issued to*			

To be filled in on the soldier quitting the Colours.

(9 38 41) W 1 751-6539/1 75,000(6) 10/15 H W V(M 531)  
16.92-191 75,000 1/16

Forms/W. 3241/1  
Army Form W.  
(In packs of 50.)



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

Mr. Meld. (Regiment).

No. 1670, Rank Sgt., Name

Briggins, T.

is discharged from Hospital with orders to proceed to his home

(Address 58 Victoria St. S.W.)

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

~~2nd LONDON GENERAL HOSPITAL  
Place WANDSWORTH.~~

H. Jagan  
Officer Commanding,  
Capt. [Signature]

Registrar, R.A.M.C.T.  
Hospital,  
WANDSWORTH, S.W.

Date 22/2/17

2nd London  
WANDSWORTH, S.W.



*Original*

# Medical Report on an Invalid.



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

Date 26/1/17

- 1. Unit 1st Newfoundland
- 2. Regimental No. 1670
- 3. Rank Lt Cpl.
- 4. Name Higgins T.
- 5. Age last birthday 20
- 6. Enlisted { on 15/6/15  
at Botorod, Newfoundland
- 7. Former Trade or Occupation { Fishing (deep sea)

### 8. Disability.

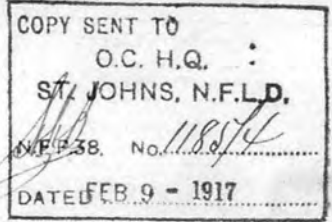
G.S.W. left leg  
ix. i. Service.

### Statement of Case.

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

- 9. Date of origin of disability.
- 10. Place of origin of disability.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

July 1st, 1916.  
Sea.



Wounded in region of left knee and R. Buttock NR/10  
 July 5<sup>th</sup> Saw hole put in through incision into knee joint  
 July 11<sup>th</sup> Leg put on Thomas' splint. W. eight extension & Euseb fomentations  
 July 18<sup>th</sup> Two incisions made, pocket of pus opened. ✓  
 Aug. 9<sup>th</sup> Sputum. Tubercle Bacillus present  
 Aug. 24<sup>th</sup> Extension removed  
 Sept. 1<sup>st</sup> Large amount of pus discharging from popliteal space.  
 Nov 21<sup>st</sup> chest no sign of active mischief. Sputum  
 Dec 26<sup>th</sup> no TB present  
wound healed

- 12. (a) Give your opinion as to the causation of the disability.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Active Service  
G.S.W.

13. What is his present condition?

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

Wound of leg healed.  
Movements at knee joint limited  
No signs of active <sup>Tuberculosis (pts.)</sup> T.B. in chest

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

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

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

If so—(a) When? *no*

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what? *knee joint opened & disinfected*

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

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

19. Do you recommend

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

G. Gould C.S.  
Officer in medical charge of case.

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

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

H. E. Duncanson  
Officer in charge of Hospital.

Date 28/1/17

.....Lt. Col. R.A.M.C.T.

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, *London Gen Hospital*, other cause

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

## Opinion of the Medical Board.

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

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

(iii) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165 Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

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

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

*Active Service*

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

*E.S.W.*

21. Has the disability been aggravated by

- (a) Intemperance? *No*
- (b) Misconduct? *No*
- (c) Any of the conditions mentioned in Question 20, and if so which?

22. Is the disability permanent? *Yes*

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*Total at present.*

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{1}{3}$ ,  $\frac{1}{4}$ , or total incapacity.

24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act? *No*

25. If an operation was advised and declined, was the refusal unreasonable? *vide 16*

26. Do the Board recommend

- (a) Discharge as permanently unfit, *Yes*
- or
- (b) Change to ~~England~~

Signatures:—

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

*W. S. Rogers* Maj. General President.

*H. W. ...* (Capt. ...)  
Members.

Date 29. 1. 17

*R. P. Howard* Esq.

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

*W. S. Rogers* Maj. General  
Administrative Medical Officer.

Date 29. 1. 17



(On leaving Corps or Station where invalided.)

Transfer { Date \_\_\_\_\_  
 or Station \_\_\_\_\_  
 Embark- { Date \_\_\_\_\_  
 ation Port \_\_\_\_\_

Name of { Conveyance \_\_\_\_\_  
 Vessel \_\_\_\_\_  
 Officer in } \_\_\_\_\_  
 medical charge }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date \_\_\_\_\_  
 Hospital or } \_\_\_\_\_  
 Station } \_\_\_\_\_

Officer in medical charge. \_\_\_\_\_

(At Station or Hospital where finally disposed of.)

Station and } \_\_\_\_\_  
 Hospital } \_\_\_\_\_  
 Arrived from \_\_\_\_\_ Date \_\_\_\_\_

If admitted Date	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	From	To			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical }  
 Board, or decision } \_\_\_\_\_

Administrative Medical Officer. \_\_\_\_\_

ARMY FORM B. 179.

MEDICAL REPORT ON AN  
INVALID.

Station *44th*  
 Corps *1st Newfoundland*  
 Regimental No. *1670*  
 Rank *2nd Lt.*  
 Name *Hyman T.*  
 Disability *g. s. w. & l. leg*  
 Date *29/1/17*

Hospital or Station }  
 transferred to for }  
 final disposal }  
 Date of final }  
 disposal }  
 How finally }  
 disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.

(4736) W. 8530/2774, 500s. 9/15. C. P. Ltd.  
 Form B. 179.  
 31.

58 V.C.

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

# MEDICAL HISTORY

OF

Surname *Higgins*

Christian Name *Thomas*



Table 1.—GENERAL TABLE.

Birthplace:—Parish

County *Nfld*

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <i>25</i> day of <i>June</i> 191 <i>5</i>		on day of 191	
	at <i>St Johns Nfld</i>		at	
Declared Age	<i>19</i> years		years	
Trade or Occupation	<i>Fisherman</i>			
Height	<i>5</i> feet	<i>7</i> inches		
Weight		<i>137</i> lbs.		
Chest Measurement	Girth when fully expanded... <i>36</i> inches		inches	
	Range of expansion... <i>4</i> inches		inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated		<i>120</i>		
Vision	R.E.—V=	<i>6/15</i>	R.E.—V=	
	L.E.—V=	<i>6/15</i>	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)	<i>Samuel Osterson</i>			
(Rank)	<i>Capt</i>			
	Medical Officer.		Medical Officer.	
Enlisted	at <i>St Johns</i>		at	
	on <i>26</i> day of <i>June</i> 191 <i>5</i>		on day of 191	
Joined on Enlistment	Corps	<i>1<sup>st</sup> Nfld Reg</i>	Corps.	
	Regtl. No.	<i>1670</i>	Regtl. No.	
Transferred to				
Became non-effective by				
	on <i>2 Sept</i> day of 191		on day of 191	
(Signature)	<i>[Signature]</i>			
(Rank)				

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
No. 118274  
DATED FEB. 9 - 1917

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				
London General Hospital, WANDSWORTH, S.W.	5	7	16				g. s. w. L. leg <del>IX</del> i severe		<p>Board held - see overleaf</p> <p>Disability - g. s. w. L. leg <del>IX</del> i severe. movement of knee joint limited.</p> <p>Cause - g. s. w. active service.</p> <p>Total - inability at present to earn a livelihood.</p>	<p><i>[Signature]</i></p> <p>3rd London General Ho WANDSWORTH, S.W.</p>



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

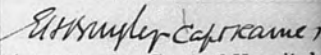
Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, 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				
3rd London General Hospital, WANDSWORTH, S.W.	5	7	16				G. S. W. L. leg IX iswene		Board held - see overleaf Disability - G. S. W. L. leg IX iswene. movement of knee joint limited. Cause - G. S. W. active service. Total - inability at present to earn a livelihood.	 E. H. Smyler, Capt R.A.M.C., 3rd London General Hospital, WANDSWORTH, S.W.

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.

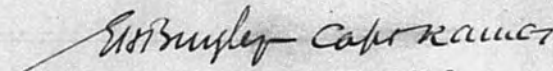
Date	Brief Details, and Signature
<p>12.10.15 19.11.15 Vacc. 23.10.15</p>	<p>R.P. Graham Lt. R.A.M.C.</p>
<p>20.3.16.</p>	<p>Fit for active Service. Dignin</p>
<p>29.1.17</p>	<p>Board held Found - permanently unfit Board - approved.</p> <p style="text-align: right;">               G. B. Rusley - Capt R.A.M.C.              43rd London General Hospital,              WANDSWORTH, S.W.           </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
<p>St Johns 10.14.16</p>					



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

No. 1670

Rank 4/cpl.

Name (surname first) Higgins - Thomas

Regiment 1<sup>st</sup> Newfoundland

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P. 38. No. 118854  
DATED FEB. 9. 1917

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

*Prior to enlistment, I was principally employed, in the avocations of fishing and mining, and spent several years at each, chiefly, however at the former. During that time I attained a fair degree of proficiency in each, but apart from that, I do not consider myself as possessing any special qualifications for employment in civil life.*

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

*My last civil employers were, Messers Alan Goodridge Sons, of St John's, Newfoundland, with whom I was engaged as a fisherman. I had completed three months in their employ, when I enlisted.*

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

*If, owing to my wound, I am physically incapable of taking up my former avocations of fishing and mining, I, really ~~at~~ at this present moment, unable to express definitely what <sup>form of</sup> employment, I desire as <sup>being</sup> suitable. It is my fervent wish and desire, though, that I may secure some form of employment, in my home country of Newfoundland.*

4. What is the name of your Approved Society?

*The Fishermen's Union Protective Society.*

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

*No.*

Date Jan 26<sup>th</sup> 1917.

Signature Sgt. Thomas Higgins

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

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





### Descriptive Return of a Soldier discharged on account of Disability.

**INSTRUCTIONS.**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer in Charge, Records, when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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



**A Name in full** *Higgins Thomas*  
**Regiment from which discharged** *1st Newfoundland*  
**Regimental Number** *1670*  
**Where born (Parish, Town and County), and when** *Catalina, Newfoundland 23/6/1896*  
**Intended address** *Catalina, Trinity Bay Newfoundland*  
**Height on discharge** *5 Feet 10 Inches*  
**Colour of Hair on discharge** *Light brown* **Colour of Eyes** *Blue*  
**Descriptive marks** *G.S.W. Scar both legs & R. hip* **Complexion** *Fresh*  
**Figure on discharge** *Sturdy*  
**Christian name of Father** *Thomas*  
**Christian name of Mother** *Sarah*  
**Wife's Maiden name in full** \_\_\_\_\_  
**Date and Place of Marriage** \_\_\_\_\_  
**Christian names of Children** \_\_\_\_\_  
**Nature and locality of civil employment desired** *Uncertain any*

COPY SENT TO  
 O.C. H.Q.  
 ST JOHNS, N.F.L.D.  
 1185/14  
 DATED FEB. 9. - 1917.

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) *Thomas Higgins* (Rank) *S/Plt*

Station *3rd B. Coy. 4th Wiltshire* Date *27 1 17*

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.

*G. Gould* Medical Officer i/c Hospital.

Station \_\_\_\_\_ Date *27 1 17*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations		
				Years	Days	Days
				India		
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued	Sum due on account of advance of pension }					
Sums due on account of public debts ...						

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

Medals

Other distinguishing marks

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

Station \_\_\_\_\_ Officer in Charge  
 Date \_\_\_\_\_ Records.



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

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

To the Officer i/c Records 58 Victoria St. Sw.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date <sup>21</sup> 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Higgins, Christian names Thomas  
(in full)

Regt. No. and Rank 1670 2192. Regt. or Corps 1st Newfoundland  
(If T.F. this should be stated)

His address on discharge will be Catalina, Trinity Bay  
Newfoundland

This information is for the Central Army Pension Issue Office only. The Soldier states that no allowance is being issued in respect of him.

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

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

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

Date 29/1/17

Walter Hay Ramet  
President of Board  
(Approving Officer).

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

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



2st March,

7.

1739/1

No. 1670, L/Cpl. T. Higgins,

~~1st Newfoundland Regiment.~~

HA/NW

OVERSEAS TRANSPORT.

You, together with:

No. 1425, Moyles, Pte. E.,  
1681, Sheppard, " H.,  
1874, Payne, " B.,

will report at Allan Bros. & Co.'s Office, 19, James Street, Liverpool on the morning of Friday, 2/3/17. You will proceed to Canada by the S.S. Scotian.

When you arrive at St. John, N.B., you will report to Allan's agent, who will arrange for your journey to Nfld., as provided by the authorities, St. John's, Nfld.

When you reach St. John's you will at once report to the O.C. Depot, Headquarters, Newfoundland Regiment.

Paymaster & O. i/c Receptor.

CASUALTIES.

FOR DISCHARGE.

No. 1670, L/OPL. HIGGINS, J.

Ex 3rd London General Hospital,

February 22nd, 1917,

Is granted Furlough to February 26th, with instructions  
to report at the Record Office on the latter date  
for disposal.

To be repatriated 27/2/17.

Authority for Discharge:  
A.F. B.127  
A.F. W.3201.

*[Handwritten signature]*



NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1670, L/Cpl. Higgins, T.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 2/3/17 (Dates inclusive)

Embarked per S.S. SCOTIAN

From Liverpool Date 2/3/17.

DR. Classification (See procedure) A

Draft No. 29 CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	£	s	d
	8	Forfeited Pay									1	Pay	1.05	70		73	50		
	9	Allotments	60	70	42	00					2	Field Allowances	10	70		7	00		
	10										3	Other Allowances							
	11/12	Total Stoppages			42	00	8	12	7	4/5	Total @ \$4.86 2/3				80	50	16	10	10
	13	Fines								6a									
	14	Clothing & Necessaries																	
	15	Arms & Accoutrements																	
	16	Barrack Damages																	
22/2/17	17	Hospital Advance Hospital Stoppages			1	0	0										24	13	0
	17a	Miscellaneous Stoppages																	
	19	Casual Payments																	
	20	1st Payment Razor per W.C.A.			1	1	0												
22/2/17	21	2nd " P & R.O.			29	0	0												
27/2/17	22	3rd " do.			1	0	0												
	23	Final "																	
	24	Balance Debit Last Period																	
	28	" Due by Paymaster					10	5		27	Balance Due to Paymaster								
					41	3	10								£	41	3	10	

CHECKED.



CERTIFIED CORRECT  
NEWFOUNDLAND CONTINGENT.

O.C. " " Company  
PAYMASTER & OFFICER IN CHARGE RECORDS





Admitted 5.7.16.

Army Form W. 3202.

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

10<sup>th</sup> Infd Regiment.

\*The Officer Commanding Infd Coy - Ayr-  
The Officer in Charge of Records 58 Victoria St - SW  
The Regimental Paymaster 58 Victoria St - SW

With reference to No. 1670 Sgt. Higgins. T. of the above Regiment, who appeared before a Medical Board and was approved

~~the D.D.M.S.~~ Command, on the 29.1.17. for discharge from the Service as permanently unfit, please note that this man has been sent to ~~his home~~ on warrant with orders to await instructions as to his final discharge; he has been given £1 (one pound) advance and ~~a suit of plain clothes.~~

He proceeded to 58 Victoria St - SW. on [date] 22 Feb 1917

H. Jagan  
Capt. R.A.M.C.(F) Officer Commanding

Place Wandswoth Registrar, R.A.M.C.F. Hospital.  
Date 22/2/17 3rd London General Hospital,  
WANDSWORTH, S. W.

\* In case of Territorial Force "Officer Commanding the Administrative Centre."  
Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

NEWFOUNDLAND CONTINGENT.

N.F.P/35.

5526/1

1670, L/C. T. Higgins,  
1/1st. Newfoundland Regiment,

Red Cross Hospital, Esher  
Reference your request dated 18th inst. Postal money

Order for £ 2. 0. 0. enclosed, together with receipt form,  
which please sign and return to this Office.

*10/26581*

Pay & Record Office,  
58, Victoria Street,  
London, S.W.,

Capt.,  
Paymaster & O. i/c Records.



M. L. 200/6  
20/12/16

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

Please remit the sum of £2.00 pounds — shillings

to J Higgins

on account of Pay & Allowances that may be due to me.

4936  
DEC 20 1916

Regtl No. 1670 rank L/Cpl.

Name J. Higgins

Approved R. Flower

Medical Officer i/c

Hospital.

Dated at Lammas Hospital Boston

18/12/16 191



Report to be rendered under paragraph 205, Regulations for  
the Army Medical Service.

Regtl. No. 1670

Rank L/Cpl.

Name Higgins. J.

Troop, Battery, or Company } D Coy.

Corps 1<sup>st</sup> Newfoundland

Location in Hospital.

Division \_\_\_\_\_

Ward B 10

Bed \_\_\_\_\_

MILITARY HOSPITAL,  
3<sup>rd</sup> London General Hosp.  
Wandsworth, S. W.  
July 6<sup>th</sup> 1916.

I regret to report that the soldier named in the margin is  
suffering from gun shot wound leg l. Tibia  
and is dangerously ill

H. Jagan Capt. R.A.M.C.  
In charge Military Hospital.

To† Officer i/c Records N.F.L.D. Contingent  
(Address) 58 Victoria St. S. W.

\* Seriously ill. Insane. About to be invalided.  
† Officer Commanding or Chaplain.

DUPLICATE

M-41

February 28th., 1918.

From:- The Director of Medical Services,  
St. John's, Newfoundland.

To:- The Chief Paymaster & Officer i/c Records,  
Pay & Record Office,  
London, S. W.

Sir:-

The report of "Disease and Disability" in various men's boarding papers are often followed by numbers, thus in the case of 1670 L/Cpl. Thomas Higgins: Gun shot wound Right leg lX.1, severe. These figures evidently refer to some table or category which is not in possession of this department.

I should be very glad if you will make enquiries and furnish me with a half dozen copies of this Category.

I have the honour to be,

Sir,

Your obedient servant,

*Cluny Macpherson*

Major, D. M. S.

Higgins, T.

1670

Ray Sept

1670

16th. September

5

W.N.Snelgrove Esq,  
Catalina.

Sir,-

I just received your of the 10th inst on Tuesday morning, and as the Volunteers ~~have~~ had returned from the North, and I was paying them on Tuesday afternoon, I showed your letter to Higgins, and I gave him a larger amount than I paid to the others, and requested him to send some money to his father. The additional amount that I gave him for this purpose was \$15.00. kindly let me know if the father receives same, and oblige,

Yours very truly,

J.M.H/B.M.W.



Deputy Paymaster.



1670

Catalina  
Sept 21/15

John. Howley Esq  
St Johns

Dear Sir

In reply to yours  
of 16<sup>th</sup> I beg to say that  
George Higgins told me  
the other day that he had  
received twenty dollars  
from his son by telegraph.  
I thank you very much  
for kind interest in the  
matter as the old man was  
no doubt in great need.

Yours sincerely,  
W. N. Sulgrove

June 26 1920

Major Howley  
O. I. C. Records

Please pay to T. Higgins, 1670  
the sum of thirty dollars  
in payment of P. & A. Bonus  
and charge same to Civil Re-establishment Committee

\$30.00

Pension \$30.00

ACCOUNT	
CH. NO. 40016	INITIALS <i>TH</i>
INL. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

*J. C. A.*  
*Low MacCall.*

Vocational Officer

*T. Higgins.*  
*Le*

April 28th 1920

Major Howley  
O. I. C. Records

Please pay to Thos Higgins Esq  
the sum of eight dollars and forty cents  
in payment of arrears of allowance for two weeks to Apr 17th  
and charge same to Civil Re-establishment Committee

\$8.40

*A.C.R.*

ACCOUNT	
CHK NO	36385
INITIALS	<i>[Signature]</i>
PAID LEDGER	INITIALS
PAY LEDGER	INITIALS
CASH LEDGER	INITIALS

*W. W. Marshall*  
.....  
Vocational Officer

*Chas. M. Grath*



Civil Re-Establishment Committee.  
(DEPARTMENT OF MILITIA.)

FORM R  
16-12-19-2000

MAJOR HOWLEY

Officer in Charge of Pay and Records.

April 10th 1920

Please pay to **T. Higgins, 1670**  
the sum of **six dollars and thirty cents**  
in payment of allowance for week ended this date  
in connection with re-education.

\$6.30

Pension Monthly

\$33.00

Wages Monthly

*J. C. A.*  
*W. B. Macdell,*

ACCOUNT	
CHK. NO.	34507
INITIALS	<i>J. C. A.</i>
ISS. LEDGER	INITIALS
PAY LEDGER	INITIALS
Q-44 LEDGER	INITIALS

VOCATIONAL OFFICER.

*T. Higgins,*  
*L*



Nov 18th 1919

Major Howley  
O. I. C. Records

Please pay to T. Higgins, 1670  
the sum of ninety eight dollars and forty eight cents  
in payment of arrears of dependents allowance to Nov 15th 1919  
and charge same to Civil Re-establishment Committee

\$98.40

AMOUNT	
NO. 20046	<i>Red</i>
DATE	
PAY TO THE ORDER OF	
FOR DEPOSIT ONLY	

*T.C.R.*

*Hunter*  
.....  
for Vocational Officer

*T. Higgins*  
*LC*

August 22nd, 1921

Mr. Thomas Higgins,  
Catalina.

Dear Sir:-

I enclose herewith cheque for \$120.00 representing amount of Separation Allowance due you on account of War Service Gratuity of your son, Private Thomas Higgins.

Yours faithfully,

Major,

Paymaster

21 John St  
St John  
June, 2<sup>nd</sup>  
1907

Dear Sir

I have  
applied for a discharged  
Badge about a month  
ago and have not  
received it yet please  
send it up by Mr  
Burrsey if it is ready  
if not please answer  
and oblige

yours sincerely  
Thos Higgins

21 John St.

St. John's,

May 7 <sup>th</sup> 1917.

Capt J. O'Grady,  
P.O. Field H'd Qrs,  
St. John's,

Dear Sir,-

I hereby beg to  
apply for one of these passes for  
discharged soldiers, as I am now  
discharged being permanently  
unfit for further war services on  
account of wounds received in action.

respectfully yours,

Thomas Higgins,

Rgt No. 1670.

Rank. Lance Corporal.

Name Thomas Higgins

Co'y "G"

Rgt. 1st Newfoundland.





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

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

Christian name... *Thomas*... 2. Surname... *Higgins*.....

3. Rank... *Lt. Corporal*..... 4. Regtl. No... *1.670*.....

5. Address in full to which future payments of gratuity are to ~~be~~ forwarded..... *Catalina... Trinity Bay*..... *No. 6 Adelaide Street St. John's*..... *RF*

6. Date of enlistment in the Regiment. *June 24<sup>th</sup> 1915*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *Mr. Thomas Higgins*.....

8. Relationship of such dependents... *father*.....

9. Address in full of such dependent... *Mr. Thomas Higgins*..... *Catalina... Trinity Bay*.....

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

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service... *I was on active service in France from March 1916 until July 1916*.....

12. Give total length of time which you served on active service, whether in Nfld, or Overseas... *I served 1 year 283 days with the R. F. L. D. Regt*.....

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

..... *OKo.* .....

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.....

..... *I received one hundred dollars Post Discharge pay. Paid by Capt. Howley, Pay master.* .....

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

..... *Yes.* .....

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.....

..... *No.* .....

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

..... *OKo.* .....

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

..... *Not applicable.* .....

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

..... *April 16<sup>th</sup> 1917.* (b) Reason for discharge.....

..... *Owing to wounds received in action.* .....

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.....

..... *I served in France at Beaumont Hamel from March 1914 until July 1<sup>st</sup> same date (i.e. 1916)* .....

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

..... *No* (b). If (a), are you in receipt of full pay and allowances from that Committee?..... *I am receiving full Pension at present from the Pensions Board, but nothing from the Civil Re-Establishment Committee.* and I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.



Signature of Applicant: *Thomas Higgins*  
 Place of Residence: *No 6 Adelaide St. City*  
 Declared before me at *Saint John's*  
 This *28<sup>th</sup>* day of *February* 19*42*

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

*John J. Fenelon*  
*Barrister at Law*  
*Notary Public*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>18.12.18</i>	<i>104.65</i>		<i>4.00</i>	<i>280.00</i>
			<i>Exp. P.D.P.</i>	<i>104.65</i>
				<i>175.35</i>

Certified Correct.

Paymaster.

*[Faint, mostly illegible text and lines, possibly bleed-through from the reverse side of the page]*



This space to be left blank for the Chelsea Number.



Army Form B. 268.



# Proceedings on Discharge.

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

No.	1670	Army Rank	Lance Corporal	
Name	Higgins Thomas			
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)				
Corps	Newfoundland Regiment			
Battalion, Battery, Company, Depot, &c.				
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)				
Date of discharge	April 4 <sup>th</sup> 1917			
Place of discharge	St. John's, Nfld.			
1.	Description at the time of discharge.			
Age	20	years	10	
			months	
Height	5	feet	10	
			inches	
Chest measurement	girth when fully expanded		ins.	
	range of expansion		ins.	
Complexion	Fresh			
Eyes	Blue			
Hair	Light Brown			
Trade	Fisherman			
Intended place of residence	Catalina			
(To be given as fully as practicable)	Trinity Bay Newfoundland			
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)				
2.	The above-named man is discharged in consequence of <u>Gunshot wound</u>			
	<u>Left Leg</u> <u>IX-1</u> <u>Severe</u>			
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)				
To be filled in on the soldier quitting the Colours.	3.	Military character :—		
	4.	Character awarded in accordance with King's Regulations :—		
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.				
			Initials of Commanding Officer.	
Army Form B. 2088 has been issued to*				

5  
31  
31  
30  
31  
30  
31  
31  
28  
31  
4  
283

JUN 21 1919

Capt. Howley,  
O. I. C. Records.

Please pay to T. Higgins, 1670.  
the sum of two dollars and thirty three cents.  
in payment of allowance for week ended this date  
in connection with re-education.

\$2.33

Pension. \$50

*Low MacCall*  
Vocational Officer.

*T. Higgins*

JUN 28 1919

Capt. Howley,  
O. I. C. Records.

Please pay to **T. Higgins 1670**  
the sum of **two dollars and thirty three cents.**  
in payment of allowance for week ended this date  
in connection with re-education.

\$2.33

Pension \$50.00

Allowance 2.33

*W. B. Ketchell.*  
Vocational Officer

*T. Higgins*

WWB/EB

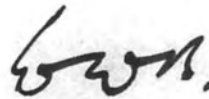
January 29th 1920.

To:- Major Howley,  
O. I. C. Pay & Records.

From:- V. O.

T. Higgins 1670.

This is to inform you that the man named in the margin completes his course under the Civil Re-establishment Committee on February 29.



Vocational Officer.



May 10th., 1919

Mr. Thomas Higgins

Catalina.

Dear Sir:-

Referring to your claim for Separation Allowance, I beg to state that same has been approved, and I enclose cheque for Three hundred and eight dollars (\$380.00) in payment thereof.

Yours truly

Captain,  
Paymaster & O.i/c Records

Royal Newfoundland Regiment  
(Separation Allowance Branch)

*Capt Hawley  
Parent to you please  
W.M.P.*

Notice

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

THE PAYMASTER,  
Separation Allowance Branch,  
St. John's, Nfld.

1. Name in full of soldier, Rank. Reg't. or Unit. Reg't. No.  
Thomas Higgins, 2/ser, R.N.R., 1670.

---

2. Age of soldier. Married or Single  
23 years. Single

---

3. Name in full of father Age. Occupation. Permanent address of soldier.  
Thomas Higgins, age 60, <sup>mus</sup> Fisherman, Catalina.

---

4. If you are a chronic invalid and totally incapacitated, state nature of maady (Medical Certificate must be enclosed with this document, stating from what date applicant has been totally incapacitated, and for how long incapacity is likely to continue.)  
Tramatic Paralysis

---

5. Names of your other children. Address in full. Occupation  
George James Higgins, Catalina, Sailor.

---

6. State amount earned by yourself per month.  
Nothing for a number of years

---

7. State date and place of death of your wife.  
June 7/14 at Catalina.

---

8. State amount and source of any other income.  
\$24<sup>00</sup> per year as Poor Relief.

---

9. What is the value of your real property.  
about Three Hundred Dollars.

---

10. State actual amount contributed by soldier during year prior to enlistment  
about Fifty Dollars

11. Was this amount contributed weekly or monthly.

2 Payments

12. Did this amount include payment of son's board, etc.

No

13. State your son's trade or occupation

Labourer

14. State amount of his wages per week

Five Dollars

15. State name and address of your last employer.

Hon P Templeman

16. State amount of support monthly from son since enlistment

Eighteen Dollars & Sixty cents

17. State amount of support monthly from son since enlistment

Eighteen Dollars & Sixty cents

18. From what date have you received "Assigned Pay"

27 November 1915 - until March 1917.

19. Actual amount contributed by other children. Weekly. Monthly.

None

20. If not receiving support from other children, state cause. Answer fully.

can only support his own family  
son George Jr. wife 5 children

21. Are any of these children in your employ.

No

22. Have you made a previous claim for Separation Allowance? If not, why, Give Particulars.

No did not know any allowance given

23. What is the value of your personal property.

nothing

24. With whom do you reside at present

son George living with me

25. Are you already in receipt of ~~some~~ Separation Allowance? If not, why, Give particulars.

No. did not know any allowance given

26. Are you in receipt of assistance from any Patriotic Fund, If so, how much?

None



27. Was the soldier at the time of enlistment an employee of the Nfld. Government.  
*no*

28. In what capacity and in what place.

*in no capacity a place*

29. Is he in receipt of a salary as such while serving in the Royal Nfld. 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..... *Thomas Higgins*.....

Place of residence..... *Catalina, Trinity Bay*.....

Declared and subscribed before me at..... *Catalina*.....

this..... *11<sup>th</sup>*..... day of *March*..... 191*9*.....

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

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

Signature of Clergyman..... *George Seymour Chamberlain*.....

Signature of member of the Patriotic Fund Committee..... *James S. Courage*.....  
*(Clerk in Holy Orders)*



SEPARATION ALLOWANCE.

Claimant..... *Higgins, Thomas (Father)* .....

On account of *Thomas Higgins* No. *1670* ... Rank. *Lt. Col.*

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

.....  
.....  
.....

*W. J. Russell Lt. Col.*  
*M. Howley Capt.*

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

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

Allotment of *60<sup>4</sup>* per day payable to *Thomas Higgins*  
*his father* from *1/9/13* to *3/3/17*

Discontinued on account of *his being discharged*  
*L. P. Spt.*

**NEWFOUNDLAND CONTINGENT**

STATEMENT of ACCOUNT of No. 1670, L/Cpl. Higgins, T.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 2/3/17 (Dates inclusive)

Embarked per S.S. SOOTIAN

From Liverpool Date 2/3/17.

DR. Classification (See procedure) A

Draft No. 29

CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1.05	70	73	50	
	9	Allotments	60	70	42	00			2	Field Allowances	10	70	7	00	
	10								3	Other Allowances					
	11/12	Total Stoppages			42	00	8 12 7		4/5	Total @ \$4.86 2/3			80	50	16 10 10
	13	Fines							6a						
	14	Clothing & Necessaries													
	15	Arms & Accoutrements								Credit Balance 22/12/16			24	13	0
22/2/17	16	Barrack Damages			1	0	0								
	17	Hospital Advance													
	17a	Hospital Stoppages													
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
	20	1st Payment Razor per W.C.A.			1	1	0								
22/2/17	21	2nd " P & R.O.			29	0	0								
27/2/17	22	3rd " do.			1	0	0								
	23	Final "													
	24	Balance Debit Last Period					10 3								
	28	" Due by Paymaster							27	Balance Due to Paymaster					
					41	3	10						£	41	3 10

This account is in accordance with information received at the Pay & Record Office to 1/3/17 and is therefore subject to amendment if, and as may be found necessary.

CHECKED.



191

CERTIFIED CORRECT NEWFOUNDLAND CONTINGENT.

*[Signature]*  
O.C. " " Company  
PAYMASTER & OFFICER IN CHARGE

**NEWFOUNDLAND CONTINGENT**

STATEMENT of ACCOUNT of No. 1870, L/Cpl. Higgins, T.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 2/3/17 (Dates inclusive)

Embarked per S.S. SCOTIAN

From Liverpool Date 2/3/17.

DR. Classification (See procedure) A

Draft No. 29

CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1.05	70	73	50	
	9	Allotments	60	70	42	00			2	Field Allowances	10	70	7	00	
	10								3	Other Allowances					
	11/12	Total Stoppages			42	00	8 12 7		4/5	Total @ \$4.86 2/3			80	50	16 10 10
	13	Fines							6a						
	14	Clothing & Necessaries								Credit Balance 22/12/16			24	13	0
	15	Arms & Accoutrements													
	16	Barrack Damages													
22/2/17	17	Hospital Stoppages			1	0	0								
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
	20	1st Payment Razor													
22/2/17	21	2nd " P & R.													
27/2/17	22	3rd " do.													
	23	Final "													
	24	Balance Debit Last F													
	28	" Due by Payma							27	Balance Due to Paymaster			£	41	3 10
					41	3	10								

CHECKED.  
*[Signature]*



CERTIFIED CORRECT  
NEWFOUNDLAND CONTINGENT.

*[Signature]*  
O.C. " " Company  
PAYMASTER & OFFICER IN CHARGE

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1670, L/Cpl. Higgins, T.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 2/3/17 (Dates inclusive)

Embarked per S.S. SCOTIAN

From Liverpool Date 2/3/17.

DR. Classification (See procedure) A

Draft No. 29

CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1.05	70	73	50	
	9	Allotments	60	70	42	00			2	Field Allowances	10	70	7	00	
	10								3	Other Allowances					
	11/12	Total Stoppages			42	00	8 12 7		4/5	Total @ \$4.86 2/3			80	50	16 10 10
	13	Fines							6a						
	14	Clothing & Necessaries								Credit Balance 22/12/16			24	13	0
	15	Arms & Accoutrements													
22/2/17	13	Barrack Damages													
	17	Hospital Advance			1	0	0								
	17a	Hospital Stoppages													
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
	20	1st Payment Razor per W.C.A.			1	1	0								
22/2/17	21	2nd " P & R.O.			29	0	0								
27/2/17	22	3rd " do.			1	0	0								
	23	Final "													
	24	Balance Debit Last Period				10	3								
	28	" Due by Paymaster							27	Balance Due to Paymaster					
					41	3	10						£	41	3 10

This account is in accordance with information received at the Pay & Record Office to 1/3/17 and is therefore subject to amendment if, and as may be found necessary.

CHECKED.



191

CERTIFIED CORRECT NEWFOUNDLAND CONTINGENT.

*[Signature]*  
O.C. " " Company  
PAYMASTER & OFFICER IN CHARGE RECORDS



STATEMENT OF ACCOUNT

No. 1670.

Name Higgins J.

115/1

Date.	Particulars	Ch. No.	Dr.	Cr.	Bal.
Mar 2	Bal due by Rm 10/3			2 49	2 49
20	By Pay 18 days @ 1 1/2			20 70	23 19
31	" " " @ 1 70			20 90	44 09
Apr 4	" " " @ 20			7 60	51 69
	Ration allowance 18/-			4 38	56 07
	Supp. " 10/-			2 43	58 50
	Bonus			13 30	71 80
	Clothing			25 00	96 80
Mar 22	To Pay	146	15 00		81 80
31	To Allowment 29 days Clos.		17 40		64 40
Apr 5	To Pay	160	57 59		6 81
" "	" "	2333	2 43		4 38 <i>br</i>
	War Service Gratuity 4 mos @ 70.00			280 00	284 38
	Clothing			20 00	304 38
	Bonus		13 30		291 08
Dec 18	To Pay		91 35		199 73
20	To Pay	10113	20 00		179 73
Mar 1	" "	10750	70 00		109 73
Apr 1	" "	13675	70 00		39 73
May 1	" "	17752	35 35		4 38 <i>br</i>
			392 42	396 80	4 38 <i>br</i>

Signed Alvany LSM

ans Sept 16/15

1670

Catbering  
Sep 10/15

Mr James Howley Jr  
Regimental Paymaster  
St John's

Dear Sir

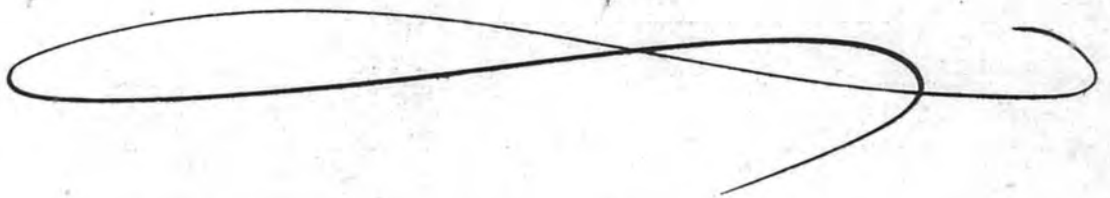
Thomas Higgin  
the father of Thomas Higgin Jr  
now serving with a detachment  
of A.M. Army somewhere  
said to be North, came to  
me complaining of being in  
need of some assistance.  
He says his son wrote to  
him, which letter cannot  
be found, and also sent  
him by word of mouth that  
he was leaving some of his  
money to help his father.

I may say the old man  
is in very poor circumstances  
and is unable to work and  
has no one else to help him.

From a letter to me from  
Mr. Russell late payment  
it seems that this chap made  
no allotment to his father and  
in this case it is hardly likely  
you would care to help the  
old man.

Will you kindly, if not contrary  
to your instructions, send it  
some address to the father so  
that he may write him and  
try and get some help from  
him.

Yours obediently  
W. U. Sulgrove













DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 20<sup>00</sup>/<sub>100</sub>

Feb 28 1917

Received from the First Newfoundland Regiment

the sum of Twenty 20 Dollars.

~~on account~~  
balance of Pay. Account

Thomas Higgins

Ch. No.	10113	Initials	TH
Pay Ledger	115	Initials	TH
Gen. Ledger		Initials	

Regtl. No.

Rank  
A. Rank

No. 1670

Rank P6-

Name Higgins - J

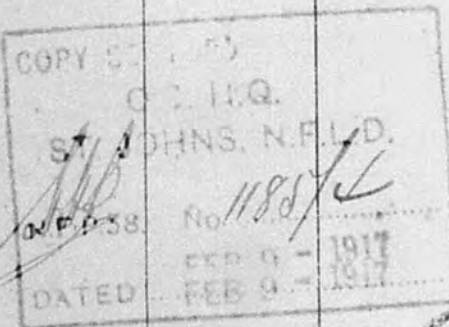


## Casualty Form—Active Service.

Regiment or Corps 2/1st. Newfoundland  
 Regimental No. C.R. 1670 Rank L. Corp. Name Higgins, Thomas.  
 Enlisted (a) 26.6.15 Terms of Service (a) War. Service reckons from (a) \_\_\_\_\_  
 Date of promotion } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on }  
 to present rank } \_\_\_\_\_ to lance rank } \_\_\_\_\_ roll of N.C.Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

420

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				
		Emb'k'd Southampton		28.3.16	
		Disemb'k'd ROUEN		30.3.16	
				4716	



Transferred to England

Allen  
 CAPTAIN.  
 FOR O.I.C. INFANTRY RECORDS  
 G. H. Q.; 3<sup>RD</sup> 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.

