



FIRST NEWFOUNDLAND REGIMENT

4225

ATTESTATION OF

No. A 275 Name Edmund Hynes Corps C of E

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Edmund Hynes</u> |
| 2. What is your full Address? | 2. <u>Change Islands</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>10</u> Months |
| 5. What is your Trade or Calling? | 5. <u>fisherman</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 |
| | { 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> |

THE DEPARTMENT OF THE MILITARY

I, Edmund Hynes 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.

H. 7.12.17 Edmund Hynes SIGNATURE OF RECRUIT.
namonsley Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Edmund Hynes 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 Change Islands on this 7th day of December 1917.

Signature of Attesting Officer [Signature]

†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 [blank].

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

Date.....1917 } Approving Officer.
 Place..... }

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

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, 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 Edmund Hands
 Apparent age 18 years 10 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 33 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Hands
Clay's Hands | Relationship Father
 Particulars as to Marriage

<small>(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.</small>			
(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service 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>7-12-17</u>					
				Joined at <u>Walsby</u> on <u>September 4 1917</u>					
				<u>Discharged</u>					
				<u>Embarked S. Ship's St. Honoré to Halifax 29th 18.</u>					
				<u>Embarked for D.C.S. 2-7-18</u> <u>Disembarked</u> <u>Shore 5-7-18.</u>					
				<u>Joined Batta. 9-7-18</u> <u>Transferred from Power 22nd 19</u>					
				<u>Arrived Winchester 23rd 19.</u> <u>So. Newfoundland for demobilization 22nd 19.</u>					
				<u>Assumed Newfoundland 1-6-1919.</u>					
				<u>Demobilization S. Ship's 9 1919</u>					
Total Service forfeited as above.....									
Total Service towards Engagement to <u>9-7-1919</u> (date of discharge) <u>1</u> years <u>215</u> days									
Pensions " " " " " " " " " " " "									

Extract from Daily Orders Part II Royal Newfoundland
Regiment, Depot St. John's, dated July 12th 1919.

The discharge of the undernoted on demobilization
has been CONFIRMED by Officer i/c Records from noted
date 9-7-19.

4225, Pte. Edmund Hynes.

C.R. 4225

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 16th, 1919.

The discharge of the undernosed on demobilization has
been Approved by O.C. Discharge Depot with effect from

~~24-6-19.~~ 25-6-19

4225 Pte. Edward Hynes.

C.R.

4225

Extract from Daily Orders Part 11 Unit The Royal Mfld. Regt.
St. John's, June 14th, 1919.

4225 Pte. Edward Hynes.

Reported at Headquarters 1-6-19 Ex "Gersican" which sailed
Liverpool 22-5-19.

C.R. 4225

Extract from Memorial Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rover Camp 28/4/19, embarked at Havre 28/4/19,
disembarked at Southampton 28/4/19 and reached
Hazeley Down Camp 28/4/19.

#4225 Pte. E. Hinds.

C.R. 4225

Extract from Nominal Roll to B.E.F. embarked Folkestone
8-7-18.

#4225 Pte. E. Hinds.

C.R. 4225

Extracted from Michael Hill Draft "H" Company
Savannah S.C. "Floridal" Jan. 9th, 1918.

4225 Pte. Hinds E.

14225

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Dec. 8th, 1917.

4225 Pte. E. Hinds.

Attested for General Service with the Nfld. Regt. with
effect from ~~Nov.~~ Dec. 7th, 1917.

Estimate

C.R. 4225

Handwritten signature or initials

Medical Report on an Invalid.

Station Magley Down Camp
 Date 20 5 19

- 1. Unit Royal Newfd
- 2. Regimental No. 4225
- 3. Rank Pte.
- 4. Name Agnes E.
- 5. Age last birthday 20
- 6. Enlisted { on 20. 10. 17
 at St John
- 7. Former Trade or Occupation } Fisherman
- 7a. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

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

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

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.

All Complaints of no disability

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

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

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

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

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

no

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

no

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?

no.

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

no

Repatriation

20. Do you recommend—

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

W.E. Provenier *Capt Kane*

 Officer in medical charge of case.

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

Station *H. D. Camp*
 Date *2. 5. 19*

Officer in charge of Hospital.

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

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

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TO, - The Chief Quartermaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1916.

Regtl. No.	Rank	Name	Amount	Signature
4225	Pte	Hinds E.	\$2.50	

~~I have the honour to be, Sir,~~
for this committee,
Your obedient servant.

Date

28-6-16

E. Hinds

No. 4225

Name - *Hinds G*Sqn., Batty.,
or Company*C Royal Newfoundland Corps*Date of
enlistment*1-12-17*G.C.
BadgesService or
Proficiency PayDate of last entry in
Company Conduct SheetNo. and date
of last drunkPeriod not reckoning towards
freedom from extra fineSheet No.
*1*Signature O.C.
Company, etc.Character
1st. Fair.

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>Field</i>	<i>5.12.18</i>	<i>Plie</i>		<i>Deficient of Iron Rations</i>	<i>1st Lieut. G. G. G. G.</i>	<i>Pay for same</i>	<i>8.12.18</i>	<i>Major A. S. Bernard</i>	<i>NSP</i>
<i>Brown</i>	<i>29/5/19</i>			<i>Def of kit</i>	<i>2nd Lieut. W. W. W. W.</i>	<i>Pay for same</i>	<i>1/4/19</i>	<i>Major Bernard</i>	<i>NSP</i>

Army Form B. 122.

Sykes, E

4225

Aug Sept.

July 9, 1919

#4225 Pts. Edmund Hynes,

Change Islands.

Dear Sir:-

Please find enclosed Discharge Certificate

No. 2842.

Yours truly

Raymaster & Officer i/w Records.
Captain

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former Occupation

E. Hynes.

Signature of Man.

J. P. Snowcraft.

Signature of the Vocational Officer or his Representative.

Reg. No. *4225*

Place

St. Johns

Date

11-6-19

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The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1228 Rank Plt Name Aynes E
 Date of Enlistment 7-12-17 Address Clancy St. St. John's District 700
 Occupation Fisherman Classification for Discharge 3 Medical Category A.I.
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 10-6-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

E. Aynes

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable [Signature]
- (b) Clothing Supplied [Signature]

Date 11-6-19 O. i. c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1731 to his home at Orange, Ill. and Release Certificate No. 2605 issued.

Date

11-6-19

J. H. Lawless
Demobilization Officer

Demobilization Officer

4. Pay and Allowances.

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

Date

11-6-19

9-7-19
J. H. Lawless
Depot Paymaster.

Depot Paymaster.

Discharge approved for

25-6-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 108	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date

11-6-19

J. H. Lawless
O. C. Discharge Depot.

O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

R. H. Sait Capt.

Date

JUN 25 1919

O. C. Discharge Depot.

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

Date

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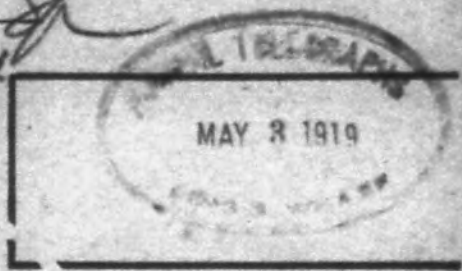
NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 40 Sent by u Rec'd by am Check JK No. _____

Place from Change Islds 181

To Min of Militia



Please cable 4225 Hands
Hazelty Camps ten pounds

John Hands

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4225 Rank Plt Name Hynes E
 Intended place of residence Orange Islands
 2. Occupation Fisherman
 Classification of soldier E Medical Category AI

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S for H. M. Leint
 Date JUN 11 1919 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date ST. JOHN'S JUN 11 1919
E. Hynes Signature of soldier
Arthur Leint Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S JUN 11 1919
E. Hynes Signature of soldier
W. J. Leint Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 9-12-17 No of days on Military
JUN 25 1919 Plus 14 days Service 580
 Discharged from service

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Leint Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JUN 25 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's, Nfld W. Bowley Capt
 Date July 9/1919 Officer i/c Records
 The Royal Newfoundland Regiment

at B 2079 / 2842

The Royal Newfoundland Regiment

Class for Demobilization: 2

Report of Demobilization
Travelling Board, held on soldier for
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 10.6.19

Regimental No. 4225

Name Wiggins

CA

Rank

Address Change Sold.

Present Medical Category A 1

Recommended for:—

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R. H. East

O.C. Discharge Depot.

H. Petersen

Senior Medical Officer

J. W. Burden

M. O. Depot

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

MEDICAL HISTORY

Surname Hinds OF Christian Name Edmund.

Table I.—GENERAL TABLE.

Birthplace:—Parish Champs St. Louis County Rifa.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	7 th	Dec		1917
	at	St. Louis	at	
Declared Age	18 years	10 Mos	years	days
Trade or Occupation	Fisherman			
Height	5 feet	6 inches	feet	inches
Weight		119 lbs.		lbs.
Chest Measurement	Girth when fully expanded...		33	inches
	Range of Expansion...		4	inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm	/		
	Number			
When Vaccinated				
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) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Peterson</u>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	St. Louis	at	
	on	7 th day of Dec	on	day of 1917
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	1st Regt	4325		
Transferred to	Regt			
Became non-effective by	on	day of	on	day of
		1917		1917
[Signature]				
[Rank]				

Casualty Form - Active Service.

Regiment or Corps Royal New Zealand 7-7-1892
 Rank Private Surname Blind Christian Name Thomas
 Religion C of E. Age on Enlistment 18 years 10 months
 Enlisted (a) 7-12-17 Terms of Service (a) 3 years Service reckons from (a) 7-12-17
 Date of promotion to present rank Date of appointment to lance rank
 Extended [.....] Re-engaged [.....] Qualification (b)
 or Corps Trade and rate
 Occupation 3 isleman [Signature] Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A. 36, or other official documents.
Date	From whom received				
		A I 78. 6. 18.	Embarked Disembarked .. Joined Battalion	2 JUL 1918 5 JUL 1918 Field	9. 7. 18 B. 13 d 13/7/18.
		Arrived in UK		23/1/19.	

Int

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing Smith, &c. W 2625 M2734 26/06/17 (35/11), C. P. & S., Ltd., Form B.103 E/1597. P.T.O.

NEXT OF KIN: Joseph Blind Father

Medical Report on an Invalid.

Station Harzeley D Camp
Date 2 2 19

1. Unit Royal Newfed
2. Regimental No. 4225
3. Rank Plt
4. Name Kyros. G.
5. Age last birthday 20
6. Enlisted { on 20. 10. 17
at St Johns
7. Former Trade } Fisherman
or Occupation }
- 7a. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

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

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

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

He complains of no disability.

13. What is his present condition?

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

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

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

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

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

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

na.

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

na.

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?

na.

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

na.

20. Do you recommend—

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

Repatriation
W.S. Proctor. Capt. Rame.
Major
 Officer in medical charge of case.

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

Station *F. D. Camp.*

Officer in charge of Hospital.

Date *20 5 19*

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

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

The Royal Nfld. Regiment

DEMOBILIZATION

No. 472 Rank

Name

Lynne E

Warned for demobilization on

JUN 11 1919



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 *Edmund Hynes*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *4225*
 Intended address *Change Islands N.B.S.*
 Height on discharge *5* Feet *7*
 Color of hair on discharge *Dark Brown*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks _____
 Figure on discharge *medium*
 Christian name of Father *John*
 Christian name of Mother _____
 Wife's maiden name in full _____
 Date and place of marriage _____
 Christian names of children _____
 Place and date of soldier's birth *Change Islands March 30th, 1899*
 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) *Edmund Hynes.*

Pte

(Rank)

Station **ST. JOHN'S.**

Date *9-6-19*

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

Station

Date



July 11, 1919

#4225 Pte. Edmund Hynes,
Change Islands.

Dear Sir:-

Referring to your application I enclose cheque for
seventy dollars (\$70.00), being amount of first payment due
you on account of the War Service Gratuity.

Yours truly

Paymaster & O.i/c Records.
Captain.

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 *Edward* 2. Surname *Hayes*
3. Rank *Pte* 4. Regtl. No. *4225*
5. Address in full to which future payments of gratuity are to be forwarded *Change Bldg. N.B.B.*
6. Date of enlistment in the Regiment *Dec. 4/17*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.
8. Relationship of such dependants.
9. Address in full of such dependants.
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?
11. Were you on active service only in *Overseas* field, or give dates and particulars of such service.
12. Give total length of time which you served on active service whether in field, or overseas *From Dec. 4/17 to June 11/19*

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

No

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

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

No

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

No

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

No

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

No

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

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

*June 11/19
Temporary*

Reassignment

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.

*Belgium - from June 5/18 to
Apr 16/19*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee?

No

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

May 9, 1919

Mr. John *P.*
Change Islands.

Dear Sir:

With reference to your telegram
of May 3rd. I beg to state that I have cabled £10 to
No. 4225, Pte. H

Yours truly,

Lieut.
For Paymaster.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
32.

Number of Sheet One

Regiment of 1st Newfoundland

Signature of O. C. Company W. H. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	Name	Age on	18 years 10 months	Siderman	
Joined _____ Date _____		Place and Date of Enlistment		Religion	
Joined _____ Date _____		St. John's 7-12-17		C. of E.	
Joined _____ Date _____				Period of	
Joined _____ Date _____		with Colours 1 ²⁵ / ₃₆₅ years.			
Joined _____ Date _____		with Reserve 3 ⁶⁵ / ₃₆₅ years.			

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order disposing with trial	By whom awarded	REMARKS
Hazley down Camp	3.5.18	Pte		" Dirty Equipment " Inattention on parade	Sgt French	7 days' C.B.	4.5.18	2/21. Edens	<u>W.H.</u>
"	10.5.18	"		" Absent from 3.15 p.m. parade " Telling a lie to an N.C.O.	Cpl Christian	5 days' C.B.	11.5.18	2/21. Edens	<u>W.H.</u>
"	17.5.18	"		" Causing disturbance in hut	Pt. Short.	2 C.B.	18.5.18	2/21. Edens	
"	8.6.18	"		" Absent from 11.45 a.m. parade Demobilized St John's 9/79	Capt Christian	3 days' C.B.	9.6.18	2/21. Edens	

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4225 Rank Ar. Name Hynes, E.

Date of Enlistment 7-12-17 Address Clancy St. District Fogo

Occupation Fisherman Classification for Discharge B Medical Category A.I.

Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 10-6-19 *J. H. Mansford*
No. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

E. Hynes

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$ 65.00

(b) Clothing Supplied /

Date 11-6-19

O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. N. 1731 to his home at Change, 35ed and Release Certificate No. 2605 issued.

Date 11-6-19 *J. A. Lawless*
Demobilization Officer

4. Pay and Allowances.

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

Date 11-6-19 *J. A. Lawless*
Depot Paymaster.

Discharge approved for 25-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 11-6-19 *J. A. Lawless*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 25 1919 *R. H. Sait Capt.*
O. C. Discharge Depot.

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

Date June 25 1919 *W. S. D. [Signature]*
[Signature]