



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1283

Name in full Samuel Hiscock Age 20

Address Barbours

~~Married~~ Single

Height 5ft 10 1/2 Weight 166 brown

Color Dark complexion Hair Black Eyes Blue

Other distinguishing marks Dark mark under right eye.

Nearest relative Mother (Father)

Address Barbours

Dependents Fisher

Occupation Fisher Present Wage 1400 per year

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment March 15th 1915

Samuel Hiscock
Witness

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

Samuel Hiscock

Declared before me this 30 day
of March 1915

J. Kinnear
Lieut.

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1283

Name Samuel Hiscock
 Apparent age 20 years months. Height 5 feet 10 1/2 inches.
 Chest measurement { Girth when fully expanded inches.
 { Range of expansion inches.
 Distinctive marks Birth mark near right eye

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Eather Hiscock
Carbonsar | Relationship Mother

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension		Service in Re-served not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>March 15/1915</u>									
Joined at <u>St. John's</u> on <u>March 15/1915.</u>									
Total Service forfeited as above									
Total Service towards Engagement to (date of discharge) years days									
" " " Pension " (") " "									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1283

Name Samuel Hiscock

Apparent age 30 years _____ months. Height 5 feet 10 1/2 inches.

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

Distinctive marks Birth mark near right eye

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Father Hiscock
Carbonsar | Relationship Mother

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension on		Service in Reserve not allowed to reckon towards G. O. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>March 15/1915</u>									
Joined at <u>St. John's</u> on <u>March 15/1915.</u>									
<u>Died at Gallipoli Nov 4/15</u>									
<u>Embarked St John's Nfld. 22/15 Embarked for Gallipoli 20/15 Disembarked Nov and entrained for Cairo 3/8/15 Embarked for Gallipoli 12/15 Landed Suda Bay night of 19-20 Sept 1915.</u>									
<u>Bullet Wound Chest 4-11-15</u>									
<u>Killed in Action 4/15.</u>									
Total Service forfeited as above									
Total Service towards Engagement to <u>4-11-15</u> (date of discharge) — years <u>235</u> days									}
" " " Pension " " " " " " " " " " " "									

S. Hiscock.

C.R. 1283.

P.H. ©

2

21

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

MEDICAL HISTORY

OF

Surname Hiscock

Christian Name Samuel

Table 1.—GENERAL TABLE.

Birthplace:—Parish Carleton County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 13 day of Mar 1915	at St John's	on _____ day of _____ 191	at _____
Declared Age	20 years	_____ days	_____ years	_____ days
Trade or Occupation	Fisherman			
Height	5 feet 10 inches		_____ feet	_____ inches
Weight	166 lbs.			_____ lbs.
Chest Measurement	Girth when fully expanded	33 1/2 inches		_____ inches
	Range of expansion	37 1/2 inches		_____ inches
Physical Development				
Vaccination Marks	Arm			
	Number	8		
When Vaccinated	1913			
Vision	R. E.—V=	M	R. E.—V=	
	L. E.—V=	M	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>W. Patterson</u>			
(Rank)	Capt			
	Medical Officer.			Medical Officer.
Enlisted	at St John's	on 15 day of Mar 1915	at _____	on _____ day of _____ 191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	1st Nfld	1783		
Transferred to				
Became non-effective by				
	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)				
(Rank)				

FIELD SERVICE.

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

REGIMENT } NEWFOUNDLAND REGIMENT. Squadron, Troop, Battery or Company } C COMPANY

Regtl. No. 1285 Rank Private

Name Hiscock, S.

Died { Date November 4th. 1915.

Place Dardanelles.

Cause of Death* Killed in Action.

Nature and Date of Report B 213, 5/11/15.

By whom made Unit.

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



Burial { Place Not known.

Date Not known.

By whom reported _____

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) Not known.

(b) in Small Book (if at Base) Not known.

(c) as a separate document Not known.

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

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

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

Signature of Officer in charge of Section Adjutant-General's Office at the Base } H. Parkhouse Captain,
Officer i/c Records T. F. S.,
3rd. Echelon, M. E. F.

Station and Date ALEXANDRIA. 5/11/15

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

1st Newfoundland

No. *1283*

Rank

Private

Name

Skisoch

Died (a)

at

Gallipoli

on the

11 of *November* 191*1*.

Deserted at

on the

of

191 .

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....			
	Cash issues (Date of each issue to be stated)				Pay days at from to.....			
		£	s.	d.	Proficiency, Service or good conduct pay			
	191				days at from to.....			
	"				Messing allowance days at			
	"				from to			
	"				Clothing and kit allowance			
	Consolidated stoppage				Amount produced by the sale of Necessaries			
					Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity.....			
	Balance due by the Paymaster				Balance due to the Paymaster.....			
		£				£		

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ *5 27* is correctly chargeable against the Public.

Dated at

this

day of

31 AUG 1916

191 .

PAYMASTER & OFFICER IN CHARGE
Paymaster

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

107

61

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **1st NEWFOUNDLAND REGIMENT.**
 No. **1283** Rank **Private** Name **J. Miscock**
 Died (a) at **Gallipoli** on the **4th** of **November** 191**5**.
~~Deserted at~~ on the of 191 .

I Certify to the correctness of above in every particular.

 Commanding Squadron, Troop,
 Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....			
	Cash issues (Date of each issue to be stated)				Pay 6 days at 1.00 from 29/10/15 to 4/11/15	7	1	2 1/2
	Proficiency, Service or good conduct pay				Proficiency, Service or good conduct pay			
	191				days at from to			
	"				Field allowance 6 days at 10⁺			
	"				from 29/10/15 to 4/11/15 60⁺			2 5 1/2
	<i>Allotment</i> <i>6 day @ 50⁺ \$3.00</i>	3	5	9	Clothing and kit allowance			
	Consolidated stoppage				Amount produced by the sale of Necessaries			
	<i>1st week November</i>				Personal Clothing and Effects from Form 2...			
	Balance due by the Paymaster	5	2	7	Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
		£	8	8	Deferred Pay or Gratuity.....			
					Balance due to the Paymaster.....			
						£	8	8
								4

I hereby Certify that the above account is correct in every particular, and that the debtor balance of **£ 8 8 4** is correctly chargeable against the Public^(b)

Dated at this day of **31st** 191 . Paymaster.



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

Hirock, S.

1283

Ray Sept

27

Casualty Form—Active Service.

Regiment or Corps NewfoundlandRegimental No. 1283 Rank Pte. Name S. HiscockEnlisted (a) 15/3/15 Terms of Service (a) One year Service reckons from (a) _____Date of promotion to } _____ Date of appointment } _____ Numerical position on } _____
present rank } to lance rank } roll of N.C.Os. }Extended _____ Re-engaged 15/8/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 86, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
		Embarked St. John's, Nfld.		30/4/15	
		Disembarked Alexandria		1/9/15	
		Embarked for Gallipoli		13/9/15	
5/11/15	Unit	Bullet W., Chest, Killed in Action, B 213	Dardanelles	4/11/15	

(Sgd.) H. Parkhouse, Captain,
Officer i/c Records, T.F. 6,
3rd Echelon, M. E. F.(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

FIELD SERVICE.

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



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

Regtl. No. 1283 Rank Private

Name Hiscock, S.

Died { Date November 4th. 1915.
 Place Dardanelles.
 Cause of Death* Killed in Action.



Nature and Date of Report B 213, 5/11/15.

By whom made Unit.

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

Burial { Place Not known.
 Date Not known.
 By whom reported _____

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) Not known.
 (b) in Small Book (if at Base) Not known.
 (c) as a separate document Not known.

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

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

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

Signature of Officer in charge of Section Adjutant-General's Office at the Base } H. Parkhouse Captain
 Officer i/c Records T. F. 6,
 3rd. Echelon, M. E. F.

Station and Date ALEXANDRIA.

167

PAY LIST. to 191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps 1st Newfoundland
 No. 1283 Rank Private Name S. Hiscock
 Died (a) at Gallipoli on the 4th of November 1915.
 Deserted at on the of 191 .

I Certify to the correctness of above in every particular.

_____ } Commanding Squadron, Troop,
 Battery or Company.

STATEMENT OF ACCOUNT. [FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.	
	Balance Dr. last month.....				Balance Cr. last month.....	5	2	7	
	Cash issues (Date of each issue to be stated)				Pay days at from to.....				
	191	£	s.	d.	Proficiency, Service or good conduct pay				
	"				days at from to.....				
	"				Messing allowance days at				
	"				from to				
	Consolidated stoppage				Clothing and kit allowance				
					Amount produced by the sale of Necessaries				
					Personal Clothing and Effects from Form 2...				
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)				
					Deferred Pay or Gratuity.....				
	Balance due by the Paymaster	5	2	7	Balance due to the Paymaster.....				
		£	5	2		£	5	2	7

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public AND CONTINGENT

Dated at this day of _____ 191 .
 _____ PAYMASTER & OFF. Paymaster.

(a) Here state whether the soldier died intestate or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 1090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

$\$40 \frac{56}{100}$

Nov 9th 1917

Received from the First Newfoundland Regiment
the sum of forty $\frac{56}{100}$ Dollars.
~~on account~~ of Pay Estate
balance

Ch. No. <u>1361</u>	Initials <u>C.W.</u>
Pay Ledger <u>53</u>	Initials <u>[Signature]</u>
Gen. Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>

Regtl. No. Rank

[Signature]

No. 1283

Rank Pte.

Name S. Kiscock.

Thomas Kiscock.

Carbonear

C.B.

27

November 22nd, 1917.

Thomas Hiscock, Esq.,

Carbonear, C.B.

Dear Sir,-

I enclose herewith cheque for \$40.66, being the balance due you as Administrator of the Estate of the late Pte. S. Hiscock. I also enclose a letter of Administration.

Yours faithfully,

Capt. & Paymaster

ON HIS MAJESTY'S SERVICE

ST. JOHN'S, Nfld.
AUG 10
7 30 AM
1921



To the Officer in Charge of Records,

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

NO STAMP REQUIRED

Dept. of Militia,

St. John's.

August 9 1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. 1285 Rank Pte.

Name Samuel Hiscock

Royal Newfoundland Regt.

received Memor. (S)

Mrs Esther Hiscock Mother Relationship.

Address Carbonear

N 2 L D

ST. JOHN'S
AL 10
21



Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,



Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

[1078]

SEP 6 1921 1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Mrs. Esther Hiscock (Mother)

in respect of his service as No. 1283 Rank Pte.

Name S. Hiscock (D) Royal Nfld. Regt.
Nfld. Forestry Corps

Receipt of the same should be acknowledged hereon.

Received I. Received 2 medals

Signature Mother Mrs Esther Hiscock

Date Sept 12 1921

Address Carbonear New Foundland

[P.T.O.]

Casualty Form Active Service.

Regiment or Corps Newfoundland

Regimental No. CR. 1280 Rank P/O Name P. Shiock

Enlisted (a) 15/3/15 Terms of Service (a) one year Service reckons from (a) _____

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

Extended _____ Re-engaged 15/8/15 Qualification (b) _____

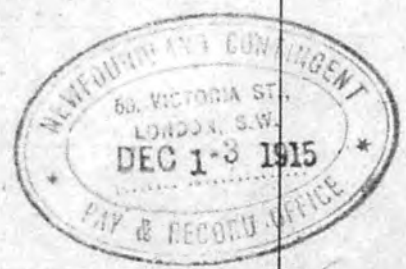
Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

5/11/15.

Unit

Bullet W. Chest, Killed in Action B 213 Dardanelles 4/11/15. *HP*

Embarked St. John's, NFLD. *8/2* 29/4/15.
Disembarked Alexandria 1/9/15.
Embarked for Gallipoli 13/9/15.



H. Parkhouse.
Captain,
Officer i/c Records, T.F. 6,
3rd. Echelon, M. E. F.

Jms

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

Carbonear Oct 6 / 1921

1283

Mrs Esther Hirock

Dear sir in answer to your
photograph letter & cards I received a day or
two ago thanking you very much
yours truly

Mrs Esther Hirock Carbonear

C.R. 1283

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1283 Name ^{Pte} Samuel Hiseck

Witness. Mr Esther Hiseck

Date. Dec 5th 1919

Place Carbonear, N. F. L. I.

C.R. 1283

Extract of Daily Orders Part II from Unit: Newfoundland Regiment, Station:
Alexandria, dated Nov. 27th, 1915.....Received Dec. 13th, 1915

1283 Pte. S. Hiscock, C Co.

Killed in Action, 4/11/15.

C.R. 1283

Copy of Cablegram to Governor St. John's Nfld.
from P. & R. O. Nov 26th. 1915.

1283, Pte Hiscock. ✓

Killed in Action November 4th.

C.R. 1283

Extract of Mediterranean Force Casualties, No: M. 15760, dated Nov. 26th. 1915

Telegram from 3rd. Echelon Alexandria, dated 23rd. November, 1915. (No. M.F.C. 28097). Received 24th. November 1915.

Killed in Action 4th. November 1915.

1283 Pte. S. Niscock.

C.R. 1283

Extract from Nominal Roll of 60. 1st Bn. Nfld. Regt.
Embarked at Devenport for Active Service 20-8-15.

1283 Pte. S. Hiscock

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

C.R. 1283

Extract from Nominal Roll Draft "E" Company Embarked
S.S. Stephane April 22/15.

1283 Pte. Hiscock S.

C.R. 1283

Saml. Hiscock was attested for General service
with the NEWFOUNDLAND REGIMENT on .March 15th, 1915.
Regimental No 1283 was allotted to Pte. Saml. Hiscock

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th, 1919.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[313] W9043/1106 100m 12/14as 93 56

Forms
B. 121.
29.

Number of Sheet 1

Regiment of West Newfoundland

Signature of O. C. Company _____

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>1253 Huerck, A.</u>	Age on	<u>20</u> years <u> </u> months	<u>Fisherman</u>	
Joined _____ Date _____		Place and Date of Enlistment	<u>H. Glas</u> <u>15.3.15</u>	Religion <u>Meth.</u>	
Joined _____ Date _____		Period of	{ with Colours <u>235</u> ^{years} <u>days</u>	Place of Birth <u>Cartonac</u>	
Joined _____ Date _____			{ with Reserve <u> </u> ^{years} <u> </u>		

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
		<u>Pte</u>		<u>Killed in Action 4/15</u>					
To be carried over									

Army Form B. 121.