



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3868.

Name Michael Hayes Corps R.C.

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

- |  |   |
|--|---|
| 1. What is your name? .....  | 1. <u>Michael Hayes.</u>                |
| 2. What is your full Address? .....  | 2. <u>Portugal Cove, C.B.</u>           |
| 3. Are you a British Subject? .....  | 3. <u>Yes.</u>                          |
| 4. What is your age? .....   | 4. <u>32</u> Years <u>1</u> Months      |
| 5. What is your Trade or Calling? .....  | 5. <u>no</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>Yes.</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 <u>R.C.</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? ..... | 11. <u>Yes.</u>                         |

I, Michael Hayes, 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.

7 22<sup>nd</sup> - 6-17.

Michael Hayes SIGNATURE OF RECRUIT.  
W. J. ... Signature of Witness.

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

I, Michael Hayes, 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 satisfactorily as replied to, and the said recruit has made and signed the declaration and taken the oath before me at .....

on this ..... day of ..... 191

Signature of Attesting Officer W. J. ...

### 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 compiled 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, 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 Michael Hynes.

Apparent age 24 years 7 months. Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 36 inches  
 Range of expansion 4 1/2 inches

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

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Andrew Hynes  
Enniscorthy Co. | Relationship Brother

### 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	Promotion, 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 _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
Pension _____									

3868



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3868. Name Michael Hynes Corps R.C

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Michael Hynes</u> .....                                  |
| 2. What is your full Address? .....  | 2. <u>Portugal Cove C.B.</u> .....                             |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....  |
| 4. What is your age? .....   | 4. <u>24</u> Years <u>7</u> Months .....                       |
| 5. What is your Trade or Calling? .....  | 5. <u>Miner</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 <u>THE</u> DURATION OF THE WAR ..... |
| 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, Michael 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.

Michael Hynes ..... SIGNATURE OF RECRUIT.  
J. Raymond ..... Signature of Witness.

7 22<sup>nd</sup> - 6 - 17

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

I, Michael 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 St. John's on this 22<sup>nd</sup> day of June 191 7

Signature of Attesting Officer N. J. ...

### 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, 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: vis:—(Name) ..... re-enlisted in the (Regiment) ..... on the (Date) .....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Michael Myers 24 7 5 7

Apparent age 24 years 7 months 35 Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 42 inches  
Range of expansion \_\_\_\_\_ inches

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

Andrew Myers

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Portugal Pine | Relationship Brother

Particulars as to Marriage Brother

(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	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for listing 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 <u>Enlisted engagement</u> reckons from <u>22-6-17</u>									
Joined at <u>St John's</u> on <u>June 22-17</u>									
<u>Discharged August 24 1919</u>									

Embarked St John's St. George to Halifax N.S. 4/27 Embarked for St. John's 12-18 Disembarked St. John's 12-18 Admitted 51<sup>st</sup> Gen. Hosp. Entable 14-2-18 Went to duty 12-6-18 Spent unit 31 6/8 Admitted 7<sup>th</sup> Gen. Hosp. Winnipeg 13-3-18 Discharged to detail 19-5-18

Joined 23<sup>rd</sup> Gen. Hosp. 22-2-18 Spent unit 24-8-18 Admitted 3<sup>rd</sup> Gen. Hosp. 25-11-18

Admitted to det. 2-11-18 Admitted to det. 3-11-18 Spent from 1-11-18 to 1-11-18

Admitted to 14<sup>th</sup> Gen. Hosp. 14-6-19 To hospital for dental which 1-4-19

Arrived in employment 1-7-19 Discharge 4-8-19

Total Service towards engagement to 4-8-19 Date of discharge 20 years 44 days

C.R. 3868

Extract from Daily Orders Part II by Lt. Col. G.T. Mathias, D.S.O.  
Commanding 1st Battalion Royal Newfoundland Regiment,  
dated 19/8/19.

The undermentioned has been evacuated and is struck off  
the strength of Unit.

3868, Pte. H. Hynes, B. Coy.

C.R. 3868

Extract from Orders by. Lt. Col. T.G. Mathias, D.S.O.  
Commanding 1st Batta. R. Mfld. Regt. 26--8-18.

The u/m was discharged to duty.

3868 Pte. M. Hynes

C.R. 3868

Extract from Orders by Major G.T. Mathias, B.S.O.  
Commanding 1st Batta, Royal Mfld. Regt. 13-8-18

The following men were admitted to Hospital this day

3868 Pte. H. Hynes.

C.R. 2868

Extract from Daily Orders Part III Unit The Royal Nfld.  
Regt. St. John's, July 3rd, 1919.

2868 Pte. M. Hynes.

Reported at Headquarters 1-7-19 on "Cassandra" which  
sailed Glasgow June 24th, 1919.



C.R. 2868

Extract from D.O.Pt. II, Unit the R. Mfld Regiment dated 16-5-19.  
by Lt.Col. B. J. BARTON, D.S.O. Officer Commanding 2nd. Bn.  
Royal Mfld. Regt.

2868 Pte. M. Hynes.

The a/m having reported at this Unit for duty is taken on the  
strength as from 14-6-19.

C.R. 3868

Extract from Casualties received from the R.C.A.O. London  
lxx 5-6-19.

The u/m was discharged from Quenn's Marys Conval. Hospl.  
Rochampton, on 5/6/19 and granted furlough to 14/6/19. Report  
No Depot for Repatriation..

3868 Pte. M. Hynes.

C.R. 3868

Extract from Casualties received from the P.&R.O. London dated  
25th. April 1919.

3868 Pte. M. Hynes, was transfreed from Cavalion Genl. Hosp.  
Brighton , to Q. M. Conval. Auxiliary Hospl. Roehampton  
S.W. on 23/4/19.

C.R. 3868

Extract from daily orders Part II Royal Newfoundland  
Regiment Depot St. John's dated July 22nd 1919.

The discharge of the undernoted on demobilisation has been  
APPROVED by C.O. discharge depot with effect from following

date

21-7-19  
~~19-7-19.~~

3868, Pte. Hynes, J.

C.R. 3868

Extract from Daily Orders Part II Royal Newfoundland Regt.  
Depot St. John's dated Aug. 12th 1919.

The discharge of the undernoted on demobilization has  
been CONFIRMED by Officer i/c Records from noted date  
3-8-19.

3868, Pte. M. Hynes.

C.R. 3868

Extract from Nominal Roll of Sick and wounded  
from France admitted to Military Hospital,  
Bethnal Green 3/11/18.

#3868 Pte. M. Hynes

G.S.W. Knee R.  
amp. above knee.

C.R. 3868

Extract from Service Medical Board held on Thursday July 17th,  
1919.

3868 Pte. M. Hynes

Recommended discharge from the Army.

C.R. 3868

Extract from preliminary report of a Medical Board  
held on Thursday evening July 17th the following  
was the finding.

Recommended discharge from the Army.

3868, Pte. M. Hynes.



Despatching Office Stamp.	NO 5 18 NEWFID	No. <u>414</u> From <u>Amherst</u>
Arrival Office Stamp.		Registered Letter Addressed <u>C.R. 3868</u> <u>Amherst Depot</u> <u>Portuguese Cove</u> Received by <u>J. Maclean</u>

No. 115

Received from

Received a Registered Postal Packet addressed as on the Receipt Form bearing the above No.

Office }  
Stamp }

A REGISTERED POSTAL PACKET

Addressed—

Received a Registered Postal Packet addressed as above...

*Andrew Hayes*  
*Portugal Ore*

C.R. 3868

May 10th, 1919

Mr. Andrew Hynes,  
Portugal Cove  
St. John's East

Dear Sir:-

I beg to inform you that communication has been received from the Record Office, London to-day concerning the condition of your brother No. 2868, Private Matthew Hynes who has had his right leg amputated on account of gun-shot wound received in November last, to the effect that he is now at Queen Mary's Hospital Roehampton progressing favourably.

Any further information received concerning him will be communicated to you.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 3868

Extract from Telegram from Syn., London to Military.

Dated May 7th 1919.

.....

#5868, Hynes progressing favourably, Queen Mary's  
Hospital, Roehampton.

.....

C.R. 3868

Extract of Telegram from Military to Syn., London.  
dated May 1st 1919.

-----

Whereabouts condition #3868, Hynes.

C.R. 3868

Dec. 17th 18

Mr. Andrew Hynes,  
Portugal Cove  
St. John's, East

Dear Sir:-

I beg to inform you that additional information has to-day been received from the Visiting Committee of the Newfoundland War Contingent Association concerning No. 3868, Private Matthew Hynes, to the effect that he is now progressing favourably.

Yours faithfully,

Lieut. Col

Chief Staff Officer.



C.R. 3868

Extract of DAILY ORDERS PART II ROYAL NEW ZEALAND REGIMENT  
IN FRANCE DATED 21/11/18.

---

TO ENGLAND.

#3868 Pte. M. Hynes.

3/11/18.

C.R.

3868  
C.R. ~~3668~~

Nov. 15th, 18.

Mr. Andrew Hynes,  
Portugal Cove.

Dear Sir:-

I beg to inform you that additional information has to-day been received by this Department through The Visiting Committee of the Newfoundland War Contingent Association to the effect that your son No. 3868, Pte. Michael Hynes, is now progressing favourably.

Yours faithfully,

Lieut. Col.,  
Chief Staff Officer.



C.R. 3868

Nov 6th, 18

Dear Mr. Hynes:

*I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that*

**your brother, No. 3868, Private Michael Hynes is at Military Hospital Bethnal Green suffering from Gun-shot wound right knee, amputated above knee.**

*I trust that later reports will bring news of his convalescence.*

*Any further information received at this Office as to his condition will be at once notified to you.*

*Yours faithfully,*

**Mr. Andrew Hynes  
Portugal Cove**

*Minister of Militia.*

C.R. 3868

Nov 5th 18

Dear Mr. Hynes:

*I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that*

**your son, No. 3868, Private Michael Hynes was admitted to 3rd Canadian General Hospital, Boulogne October 28th suffering from gun-shot wound right knee mild.**

*I trust that later reports will bring news of his convalescence.*

*Any further information received at this Office as to his condition will be at once notified to you.*

*Yours faithfully,*

**Mr. Andrew Hynes  
Portugal Cove**

*Minister of Militia.*

SICK AND WOUNDED H.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 3868

FOOT GUARDS.

14727 Pte. Walker, J. 3rd S. ? Vincent's Angina Adm.3 Can.Gen.H. Boulogne 28th Oct'18. LIST No. H.A. 30964  
Slt.

CORNER RECORD OFFICE.

10895 Pte. Malfatti, H. 7th R.Tr.R. Myalgia Slt. Adm.3 Can.Gen.H. Boulogne 28th Oct'18. LIST No. H.A. 30964  
26278 " Hesney, W. 7th R.Tr.R. Influenza Do. Adm.3 Can.Gen.H. Boulogne 28th Oct'18.

INFANTRY RECORD OFFICE WARWICK.

42041 Pte. Olsen, A. 2nd Worc.R. Tachycardia Slt. Adm.3 Can.Gen.H. Boulogne 28th Oct'18. LIST No. H.A. 30964

MILITARY POLICE - ALDERSHOT.

87893 L/C. Stront, W.P. MPP. Boulogne Influenza Slt. Adm.3 Can.Gen.H. Boulogne 28th Oct'18. LIST No. H.A. 30964

2234

ACCOUNTS - 2, WAR OFFICE.

14363 Pte. Attwell, R. ADC. & R.D. (Base) Arterio-Sclerosis Adm.3 Can.Gen.H. Boulogne 28th Oct'18. LIST No. H.A. 30964  
? A.P.C.

BOARD OF TRADE.

Prmn. Moore, G. SS. "Smerdis" 2.076 Influenza Mild. Dis.to Duty ex 3 Can.Gen.H. Boulogne 28th Oct'18. LIST No. H.A. 30964

NEWFOUNDLAND EXPEDITIONARY FORCE.

3868 Pte. Hynes, M. 1st R. Newf'nd R. GSW.Rt.Knee Mild. Adm.3 Can.Gen.H. Boulogne 28th Oct'18. LIST No. H.A. 30964



C.R. 3868

Extract from Casualties received from P.&.R. Office  
London, Aug. 27th, 1918. List No. H.S. 27866.

3868 Pte. Hynes M.

1/Wfld. Ref. V . D . G. Dis. to Dtls. Boulogne ex 7 Gen.  
H. 19 Aug'18.

C.F. 3868

Extract from Daily Orders part 11, from Unit The  
Royal Wfld. <sup>A</sup>egt. In the field. dated June 29<sup>th</sup>, 1918.

#3868 Pte. H. Hynes.

Admitted Hosp. Venereal 14-2-18 dis. 13-6-18.

WOUNDED AND SICK N.C.O.'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 3868



1 RECORD OFFICE - H O U N S L O W.

LIST NO.H.A.27588.

ADMITTED 3 GEN.H. LE TREPONT 13 AUGUST 18.

738237 Pte. Berger J.A. 1/24 Lond.R Influenza Mild.  
695095 " Brown W. 22/Lond.R Influenza Mild.

ADMITTED 7 GEN.H. WIMEREUX 13 AUGUST 18.

206408 R/MS.Blake A.H 2/4 R/Sarr.R. VDG Mild.

ADMITTED 14 GEN.H. WIMEREUX 13 AUGUST 18.

354475 Pte. Elliff H.W 4 Mdx.R GSW Scalp Acc.Sev.  
33051 Pte. Greasley W.H 1/Cyc.Bn. Jaundice.Mild.

INFANTRY RECORD OFFICE - B I C H F I E L D (PART 1).

LIST NO.H.A.27588.

ADMITTED 14 GEN.H. WIMEREUX 13 AUGUST 18.

74126 L/C. Lees TB. 10 N & D.R. 10T Knee Sev.  
236210 Pte. Starnard H. 8/Linc.R GSW R Arm. L.Bttk.  
38878 Pte. Winton A.D 8/Linc.R GSW L.Leg L.Arm Sev.  
58951 Pte. Goss H. 1/5 N & D. GSW R Knee.Sev.

INFANTRY RECORD OFFICE - L I C H F I E L D (PART TWO).

LIST NO.H.A.27588.

ADMITTED 14 GEN.H. WIMEREUX 13 AUGUST 18.

201459 L/C. Rennie J.T 1/5 S.Staff. GSW Head Sev.  
201708 Pte. Stokes H. 6/Leic.R. GSW L.F'arm Sev.  
42774 Pte. Gower S.R 6/Leic.R GSW L.Ankle Sev.  
11610 Pte. Wesley R. 1/5 S.Staff. GSW L.Thigh R Ankle.  
200495 Pte. Mercer T.....1/5 -do.....GSW Head Sev.  
  
20139 Pte. Williams G.....1/5 -do.....GSW Head & L.Arm Sev.  
242497 Pte. Rogers E. 1/6 -do Gassed W Mild.  
241358 Pte. Rogers C. 1/6 -do -do-  
25015 Pte. Beckett W.G 1/6 -do -do-

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST NO.H.A.27588.

3868 Pte. Hynes H. 2/R.Nwrd.Inf. ? VDG Mild.....Adm.7 Gen.H.Wimereux 13 Aug.18.

1630A

W



SICK AND WOUNDED R.S.O.'s AND MEN OF THE EXPEDITIONARY FORCE

GR 3868

No. 1 RECORD OFFICE - Y. O. R. K.

No. H.A. 24915

Dis. to Base Dep. ex 24 Gen. H. Staples 13th June 1918

29513 Pte. Lotherington W. .... 7 E. Yorks. .... P. U. O.

Adm. 51 Gen. H. Staples 13 June 1918

10014: Pte. Salmon W. .... 28/D. L. I. .... V. D. S. Mild.

Adm. 57 Gen. H. Marseilles 11 June 18

45482	L/C. Brewis C. ....	15	D. L. I. ....	GSW Hand. L. Shdr R. Mild.
91823	Pte. Barber S. ....	17	"	Cont. Shdr & Jaw Mild.
9158	Sgt. Grisedale W. ....	12/13	North Fus.	GSW Batt. L. Mild.
75514	Pte. Haigh H. ....	15	D. L. I.	GSW Shdr L. Mild.
263026	" Hillman T. ....	5	North Fus. ....	G. S. P. Mild.
52717	Cpl. Hobson R. ....	1	E. Yorks. ....	"
40028	Bglr. Illingworth G. ....	22	D. L. I.	Cont. Knee R. Acc. Mild.
33857	Pte. Muldrew J. ....	14	North Fus.	GSW Shdr R. Mild.
42829	" Moore B. ....	14	D. L. I.	" Arms L. Mild.
61582	" Metcalf R. ....	5	North Fus. ....	G. S. P. Mild.
20780	" Nevin G. ....	15	D. L. I. ....	"
8132	" Oliver W. ....	15	"	"
56429	" Spiby B. ....	6	North Fus.	Spr. Ankle R. Mild.
19880	" Stobbs J. E. ....	15	D. L. I.	GSW Hand. L. & Head Mild.
200073	" Wragg C. H. ....	5	"	" Hand. L. Mild.

NEWFOUNDLAND EXPEDITIONARY FORCE.

No. H.A. 24916

Dis. to Duty ex 51 Gen. H. Staples 13 June 18

3868 Pte. Hynes M. .... 2/W'land Regt. .... V. D. G.

1340A



C.R. 3838

WOUND D & SICK N C O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE 3868ROYAL ENGINEERSLIST NO.H.A.19774.

386950 Spr. Thomas.C.G. R.R.Mon.1 Sg. ICT.Leg.L.....Adm 72 Gen.H.Trouville ex 13 Conv.Dep.13 Feb.18.  
 Coy.  
 59422 Spr. Vaughan.F. 923/ARS.AECO. Bronchitis, ... Adm.72 Gen.H.Trouville 15 Feb.18.

ARMY SERVICE CORPSLIST NO.H.A.19774.

T329878 Pte.Lamb.G. ASC.HQ.HQ Lac.Wd.Hand.L...Dis.to Duty ex 72 Gen.H.Trouville 15 Feb.18.  
 2615 Pte.East.V. ASC.(EFC) Boulogne. Acc.Cont.R.Eye. Dis.to Duty ex 83 Gen.H.Boulogne 14 Feb.18.

NEWFOUNDLAND CONTINGENTLIST NO.H.A.19774

3838 Pte. Hyndes.M 2/New Fld.att. VDG.Mild..... Adm51 Gen.H.Etaples 14 Feb.18.  
 8/Corps.Ryl.Cands.

EXPEDITIONARY FORCE CATERERSLIST NO.H.A.19774.

2615 Pte.East.W. ASC (EFC) Boulogne. ....Dis.to Duty ex 83 Gen.H.Boulogne 14 Feb.18.



315A



C.R. 3868

Extract from Nominal Roll Draft No. 56, 200 Other Ranks from  
2nd., (Reserve) Batta. Royal Newfoundland Regiment, and proceeded  
to join the 1st., Battalion, Royal Newfoundland Regiment  
B. E. F., Embarked Southampton 4/2/18.

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m #3868 Pte. M. Hynes.

BC.

C.R. 3868

Extract from Nominal Roll Embarked St. John's for Overseas,  
per S.S. "Floriel" Aug.4, 1917.

3868 Pte. C. Hynes.

C.R. 3868

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, June 22nd, 1917.

3868 Pte. M. Hynes.

Attested this day posted to F. Coy, and assigned number  
as shown.

M. Hayes

C.R.

3868

~~P.R.O.~~

No 3350



## 1st. NEWFOUNDLAND REGIMENT 8

## ALLOTMENTS

 I, Michael Hynes, Regl. No. 3868

 hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and 50 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> of Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> of Persons concerned, viz.:

Allotment begins

August 1/17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3114	Brother	Andrew Hynes	Portsmouth C.P.S.	50
			Total Allotment, \$	50

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

(Sig.)

[Signature]

Officer Commanding

Company

(Sig.)

Michael Hynes

(Rank)

[Signature]
Of 5th Coy 1/4  
July 31<sup>st</sup> 1917

**FORM K**

Nº 3350



1ST. NEWFOUNDLAND REGIMENT

**ALLOTMENTS**

I, Michael Hynes, Regl. No. 3868

hereby agree, until further notification by me, and in similar official form to make an Allotment of 5 Dollars and 50 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> or Persons concerned, viz.:

Allotment begins

*August 1/17*

Identity Certificate No.	Whether Wife, Child, othes Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3114	Brother	Andrew Hynes	Porterhouse L.A.S.	50
Total Allotment, \$			5	50

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

(Sig.) *[Signature]*  
 Officer Commanding  
 Company  
*[Signature]*  
 July 31<sup>st</sup> 1917

(Sig.) *Michael Hynes*  
 (Rank) *[Signature]*

**Notification to the Officer i/c Records that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.**

**NOTE.**—On receipt of this notification the Officer i/c Records is to ensure that he has all the documents of the soldier that should be in his possession, or prepare temporary documents in the event of absence or loss of the originals.

Army Form W. 3977c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/c Records after having filled in the particulars of the names and dates of birth of the soldier's children for whom separation allowance is being paid, on receipt of which the Army Form is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3977c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If the Army Form has not been received by the Officer i/c Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

## Part I.

A.F. W. 3977a has been sent to  
O.O.

The Officer i/c Records,

A.F. W. 3977c has been sent to  
The Regimental Paymaster,

58 Victoria St

58 Victoria St

SW

SW

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

You are requested to forward without delay Army Form B. 173, or temporary documents, for the soldier.\*

No. 3868 Rank

Name Hynes  
(Surname).

Unit and Corps

1st Newfoundland

Station ROEHAMPTON, S.W.

Date - 6 MAY 1919

191

\* Strike out if inapplicable.



(Christian names in full).

Lt. Officer in Charge, Queen Mary's Convalescent Hospital.

**NOTE.**—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/c Hospital is to complete such of the following particulars as the soldier can furnish before transmitting the Army Form to the Officer i/c Records:—

The soldier claims repatriation to \_\_\_\_\_ (Country). \_\_\_\_\_ (Place).

- (i) Where enlisted \_\_\_\_\_
- (ii) Date of arrival in United Kingdom \_\_\_\_\_
- (iii) Port of arrival \_\_\_\_\_
- (iv) Ship on which arrived \_\_\_\_\_
- (v) Name of Shipping Line or Agent \_\_\_\_\_
- (vi) Names and addresses of two references who can verify the above particulars \_\_\_\_\_

In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report on Part II, of this Form whether the claim is substantiated or not.

## Part II.

Officer i/c Hospital,

The soldier's claim to be repatriated abroad \_\_\_\_\_ accepted. { Insert "is" or "is not." }  
On termination of his leave he is to report to the Officer Commanding, \_\_\_\_\_ { Strike out if inapplicable. }  
at \_\_\_\_\_ (Station)

Station \_\_\_\_\_

Date \_\_\_\_\_ 191 \_\_\_\_\_

Officer i/c \_\_\_\_\_ Records.

QUEEN MARY'S CONVALESCENT AUXILIARY HOSPITAL.

Rochampton, 5 - JUN 1919 191

Patient 20512. R. M. Hynes. Portugal Cove, St. John's,  
Newfoundland.  
is discharged from the Queen Mary's Convalescent Auxiliary Hospital with effect from

the 5 - JUN 1919 191

JRM

Initials of Secretary of  
Employment Bureau.

W. H. Nicholas <sup>Comd. for</sup>  
Commandant.

Queen Mary's Convalescent Hospital.



To be attached to Page 2 of A.F. B. 179A. A.F. B. 179P. (Additional).

The answer to this question 16 should be copied from A.F. B. 179A and signed by the Officer in Medical charge of the case and the Officer in charge of Hospital before the papers are despatched from the Hospital.

16. Was an operation performed?

If so, what!

Ans: Right thigh  
shin

Date..... 30 APR 1919 .....

.....  
Officer in Medical charge of  
case

To be detached and handed to  
the man on his discharge  
from the Hospital.

Shining  
.....

.....  
Officer in charge of Central  
Hospital.

TREATMENT CARD.

Name Byrnes. M.

Late Regtl. No., Rank and Corps 3868 <sup>11</sup> 110

Home Address 1 Newfoundland  
Portugal Cove, St Johns East,  
Newfoundland.

Hospital from which discharged Queen Marys Convalescent Hospital,  
Roshampton.

Date of discharge 5 - JUN 1919

Nature of disability AMPUTATION R. Leg

This card is to be despatched to the Local War Pensions, etc., Committee, where the man proposes to reside when he is about to be invalided from the Service and discharged from Hospital.

In the case of a man who has previously been discharged from the Service, the card will be clearly endorsed in red ink—"Post-discharge case."

A copy of this card is to be given to the man on his discharge from Hospital.

II. Particulars of treatment recommended [in-patient or out-patient, and hospital at which it should be given, &c.—see A.C.I. on the subject].



hil

Mr. H. Nicholas

Place \_\_\_\_\_

Signature \_\_\_\_\_

Capt. for

*Lt. Col. Commandant,  
Officer i/c Hospital.*

Date \_\_\_\_\_

*Queen Marys Convalescent Hospital:*

On receipt of this card the Local Committee will arrange for the treatment above indicated with the appropriate hospital, and send the card to the Officer i/c that hospital.

III. Particulars of treatment given :—

Effect of treatment given :—

Place \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Officer i/c Hospital.

On completion of treatment this card is to be forwarded by the Officer i/c Hospital to the Local War Pensions, &c., Committee, who will retain it for record.

**Notification to the Regimental Paymaster that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.**

**NOTE.**—This notification is sent in order that the Officer i/c Records, at the time the soldier's documents reach him from the Officer i/c Hospital, may be in possession of particulars of the soldier's children in respect of whom separation allowance is being paid.

This information is required by the Ministry of Pensions at the time of assessing the soldier's pension, and it is important that this Army Form should be returned to the Officer i/c Records in time for despatch to the Controller, Ministry of Pensions, with the soldier's documents.

To enable the Ministry of Pensions to make the assessment by the termination of the period covered by the temporary pension allowance and thereby avoid hardship to the soldier, it is essential that there should be no delay in completing and forwarding this Army Form to the Officer i/c Records.

**Part I.**

A.F.W. 3977a has been sent to O.C.	A.F.W. 3977a has been sent to The Officer i/c Records,	The Regimental Paymaster,
	58 Victoria St	58 Victoria St

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.



No. 3868 Rank Private

Name Thames (Surname) Thames (Christian name in full)

Unit and Corps 1st Newfoundland

Station ROEHAMPTON, S.W.

Date 6 MAY 1919 1919

Queen Marys Convalescent Hospital

**NOTE.**—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/c Hospital has been instructed to complete such of the following particulars as the soldier can furnish. This information is required by the Officer i/c Records to enable him to verify the claim.

The soldier claims repatriation to \_\_\_\_\_ (Country). \_\_\_\_\_ (Place).

(i) Where enlisted \_\_\_\_\_

(ii) Date of arrival in United Kingdom \_\_\_\_\_

(iii) Port of arrival \_\_\_\_\_

(iv) Ship on which arrived \_\_\_\_\_

(v) Name of Shipping Line or Agent \_\_\_\_\_

(vi) Names and addresses of two references who can verify the above particulars \_\_\_\_\_

In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report to the Officer i/c Hospital on Part II. of Army Form W. 3977a whether the claim is substantiated or not.

Part II. of this Army Form is to be completed by you, or if necessary by the Secretary, T.F. Association, and forwarded without delay to the Officer i/c Records.

Station ROEHAMPTON, S.W.

Date 6 MAY 1919 1919

Lt. Col. ... for  
Queen Marys Convalescent Hospital



To Chief Paymaster  
Royal Newfoundland Reg.  
please Slize 3868 Pte W. Hynes  
the sum of £5 pounds  
from my credit-

~~Accd 2-0-0  
2410  
13/5/19~~

Pte W. Hynes  
Royal N. F. S. D. Reg.

No Objection as a special case.  
The man informs me that he  
wishes to purchase a few  
articles.

H. H. Nicholson Capt. for  
Lt. Col. Commandant,  
Queen Marys Convalescent Hospital.

Roehampton

13 MAY 1919

19th March 9.

Bethnal Green Military,  
Bethnal Green N.E.

3868 Pte.

M. Hynes.

2. 0. 0

*Charge no*  
*Date*

*11740*

*20/3/19*

*H/*

Space

8406

**QUEEN MARY'S CONVALESCENT AUXILIARY HOSPITALS,  
ROEHAMPTON HOUSE.**

ROEHAMPTON, S.W.

THE OFFICER IN CHARGE OF RECORDS.

*Newfoundland Contingent  
58 Victoria St. S.W. 1.*

I beg to inform you that the undermentioned men have been admitted as patients to this Hospital.

Regt. No.	Rank and Name.	Unit.	Date of Admission.
<del>386810</del>	<del>Regmes. M.</del>	<del>1 Newfoundland Rgr.</del>	<del>23 14 19</del>



After these men have been fitted with artificial limbs, they will appear before a final Invaliding Board for the purpose of discharge from the Service.

*W. H. Nicholas*

Commandant.

Queen Mary's Convalescent Hospital.

210 10 1919

3868 Pte M. Hynes  
Prudence Ward  
Bethnal Green  
Military Hospital

Dear Sir

Would you kindly  
forward me the sum of  
two pounds £2 & oblige  
Yours truly

Pte M. Hynes  
R. Newfoundland Reg.



Approved please R. Hunt

A.K. 2.0-0  
M.R. 18/3/19

Registrar, Military Hospital,  
Bethnal Green, N.E.



Hynes, L

3868

Ray Sept.

August 4th 1919.

#3868, Pte. M.Hynes,  
Portugal Cove.

Dear Sir:

Enclosed please find Discharge Certificate #  
3490.

Yours truly,

Capt. & Paymaster.

RS).

# The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 3868 Rank Plt Name Agnes M  
 Date of Enlistment 22-6-17 Address Portugal Cove District P. St. Mary's  
 Occupation Mines Classification for Discharge B Medical Category 4  
 Recommendation S.M.B. fully fit Disability Rating 65%  
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1	3263A	1
B 175	W 3494	B 122	*	Board 1st	" 2	5	3263C	1
B 175a	D 400A	B 1915	1	do 2nd	" 3	5	3533	1
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 92						

Date 18-7-19O. C. Discharge Depot St. Mary's

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

I am Agnes in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date .....

### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable #6.00  
 (b) ~~Clothing Supplied~~ .....

Date 19-7-19O i/c. Re-clothing. Amobinski

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 3747 to his home  
 and Release Certificate No. 3747 issued to

Date 19-7-19

*Pratt*  
*3747*  
*Albion*  
 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 4-8-19

Date 19-7-19

*W. H. M.*  
 Depot Paymaster.

Discharge approved for 21-7-19

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

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	1	3463A1
E 178	W 3494	B 122	Board 1st	" 2	2	3463B1
B 178a	D 400A	B 1915	do 2nd	" 3		3553-1
B 179	D 400B	Form L	do 3rd	" 4		Form B
B 179a	D 400C	Form K	do 4th	" 5		
B 179b	B 103	ME 2	83972-1	" 6		
B 179c	B 120	M 93	83972-1			

Date 19-7-19

*Albion*  
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-  
 Officer i/c Records.  
 Board of Pension Commissioners.  
 with following additional documents.

Eligible for War Service Gratuity

Date JUL 21 1919

L. R. COOPER, CAPT.  
 O. C. Discharge Depot.

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

Date .....

## 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.

*H. Jones*

Signature of Man.

Reg. No. 386Y

*M. Brown*

Signature of the Vocational Officer or his Representative.

Place

*St. Johns*

Date

*19-7-19*

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✓  
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 Michael 2. Surname Hynd

3. Rank Rte 4. Regtl. No. 8868

5. Address in full to which future payments of gratuity are to be forwarded. Portugal Ave. St. Johns East.

6. Date of enlistment in the Regiment. June 22/17

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 dependents. no

9. Address in full of such dependents. no

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

11. Were you on active service only in Nfld. If so, give dates and particulars of such service. Overseas

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. Twenty five months

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?

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

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.

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

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

19. Are you now serving in the R.A.F.? *no* If not give:- (a) Date of discharge *Aug 2/19* (b) Reason for discharge *Remob*

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.  
*France and Belgium*

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.

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: *W. Hynes*  
 Place of Residence: *Portugal Cove, St. Johns East.*  
 Declared before me at: *St. John's,*  
 This *19* day of *July* 191*9*....

Signature of Barrister of the *John McArthur*  
 Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *J.P.*

POST DISCHARGE PAY.				Net amount due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Paymaster





Portugal Cove  
April 12/218

Mr. Howley

I would like to inform you of  
the allotment of the Mr. Bynes 3008  
is delayed this month 4 days now

would be very thankfull

to know from you the cause

of the delay

yours Truly Andrew Bynes

Portugal Cove C. 218

Logue 992<sup>20</sup>  
mailed on 12/21

to Amants  
of Portugal

October 30th.1920

Major Howley  
O. I. C. Pay and Records

Please pay to M. Hynes 3868  
the sum of twelve dollars and eighty three cents  
in payment of two weeks to date.  
Charge the same to the Civil Re-establishment Committee.

\$12.83

*J. Butler*

Vocational Officer

ACCOUNT	3868	INITIALS	<i>GH</i>
CHK. NO.		INITIALS	
INTL. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

*Michael Hynes*

*J. C. R.*

Oct 16 1920

Major Howley  
O. I. C. Records

Please pay to M. Hynes 3868  
the sum of twelve dollars and eighty three cents  
in payment of allowance for two weeks to date  
and charge same to Civil Re-establishment Committee

\$12.83

Pension \$32.50

ACCOUNT	
CHK. NO. 3296	INITIALS <i>MS</i>
INL. LEDGER	INITIALS <i>MS</i>
PAY LEDGER	INITIALS <i>MS</i>
GEN. LEDGER	INITIALS <i>MS</i>

*J.C.R.*  
*B. Butler*  
Vocational Officer

*Michael Hynes*

Oct 2 1920

Major Howley  
O. I. C. Records

Please pay to M. Hynes, 3868  
the sum of twelve dollars and eighty three cents  
in payment of allowance for two weeks to date  
and charge same to Civil Re-establishment Committee

\$12.83

Pension \$32.50

ACCOUNT _____	INITIALS <i>[Signature]</i>
CK NO. <u>2920</u>	INITIALS <i>[Signature]</i>
INL. LEDGER _____	INITIALS <i>[Signature]</i>
PAY LEDGER _____	INITIALS <i>[Signature]</i>
GEN. LEDGER _____	INITIALS <i>[Signature]</i>

*J. C. Butler*

Vocatiojal Officer

for

*Michael Hynes*

Nov 20 1920

Major Howley  
O. I. C. Records

Please pay to M. Hynes 3868  
the sum of twelve dollars and eighty three cents  
in payment of two weeks allowance to Nov. 13th 1920  
and charge same to Civil Re-establishment Committee

\$12.83

Pension \$32.50

ACCOUNT		
CHK. NO.	3954	INITIALS <i>JA</i>
INL. LEDGER		INITIALS
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS

J. C. R.

B. Bricker

Vocational Officer

*Michael & Hynes*

BR/KR

November 27th, 1920.

Major Howley,  
O. I. C. Pay & Records.

Kindly pay to M. Hynes, 3868,  
the sum of twelve dollars and eighty six cents,  
in payment of two weeks allowance to date. Charge same to the  
Civil Re-establishment Committee.

\$12.86

ACCOUNT	_____	<i>CH</i>
AM. NO.	<i>4136</i>	INITIALS
INTL. LEDGER	_____	INITIALS
PAY LEDGER	_____	INITIALS
OWN. LEDGER	_____	INITIALS

*A. C. S.*  
*B. Butler*  
\_\_\_\_\_  
Vocational Officer.

*M. Hynes*

BB/ME

December 11, 1929

Major Howley  
O.I.C. Pay and Records.

ACCOUNT _____	INITIALS <i>R. H.</i>
CHK. NO. <i>4344</i>	
INCL. LEDGER _____	INT. A.C. _____
PAY LEDGER _____	INT. A.C. _____
GEN. LEDGER _____	RETTING _____

Please pay to Michael Hynes, 3868  
the sum of twelve dollars and eighty three cents  
in payment of two week's allowance up to this date  
Charge to the Civil Re-establishment Committee.

\$12.83

*A.C.R.*

Pension

\$32.50

*for*

*G. J. Carthy Lt.-Col*  
*Michael Hynes*  
Vocational Officer.



December 27th.1920

Major Howley  
O.I.C. Pay and Records

Please pay to M.Hynes 3868  
the sum of nineteen dollars and twenty six cents  
in payment of allowance to January 1st.1921  
Charge the same to the Civil Re-establishment Committee.  
\$19.26

*F.C.P.*

*B. Butler*  
Vocational Officer

ACCOUNT		
OR NO.	4570	<i>Eed</i>
HE. LEGAL		
REV. LEGAL		
CR.	BE/GP	

*[Handwritten scribble]*

*Michael Hynes*

January 15th, 1920.

Major Howley,  
O. I. C. Pay \_ Records.

Kindly pay M. Hynes, 3868,  
the sum of twelve dollars and eighty three cent  
in payment of two weeks allowance. Charge same  
the Civil Re-establishment Committee.

*C.R.*

\$12.83

Pension 32.50

*H. Howley*

ACCOUNT	Vocational Officer.
CH NO <i>4768</i>	INITIALS <i>SH</i>
INL LEDGER	INIT. REC
PAY LEADER	INITIALS
GEN LEDGER	INITIALS

*Michael Hynes*

BB/EB

January 29th, 1921.

Major Howley,  
O. I. C. Pay & Records.

Kindly pay to M. Hynes 3868,  
the sum of twelve dollars and eighty-three cents,  
in payment of allowances for two weeks ended this date. Charge  
same to the Civil Re-establishment Committee.

\$12.83

AMOUNT	4919	INITIALS	E. A. Hunter	F. C. R.
CHEQUE NO.		INITIALS		
INT. LEDGER		INITIALS		Vocational Officer.
PAY LEDGER		INITIALS		
GEN. LEDGER		INITIALS		

M. Hynes

February 12th 1921.

Major Howley,  
O. I/C. Pay Office.

Please pay M. Hynes 3868 the sum of twelve dollars and eighty-three cents in payment of two weeks allowance to date. Charge same to the Civil Re-establishment Committee.

\$12.83.

*Frank J. Jones*  
*A. J. [unclear]*  
Vocational Officer,

ACCOUNT		
CH. NO.	5081	INITIALS <i>[Signature]</i>
INV. LEDGER		INITIALS <i>[Signature]</i>
PAY LEDGER		INITIALS <i>[Signature]</i>
GEN. LEDGER		INITIALS <i>[Signature]</i>

*Michael Hynes*

Feb 26th 1921

Major Howley  
O. I. C. Records

Please pay to M. Hynes, 3868  
the sum of twelve dollars and thirty three cents  
in payment of allowance for two weeks ended this date  
and charge same to Civil Re-establishment Committee

\$12.83

Pension \$32.50

*Fred L. Jones*

*Michael Hynes*

Vocational Officer

ACCOUNT		
CH. NO.	5211	INITIALS <i>PH</i>
INT. LEDGER		INIT
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS

March 12th 1921

Major Howley  
O. I. C. Records

Please pay to M. Hynes, 3868  
the sum of twelve dollars and eighty three cents  
in payment of allowance for two weeks ended this date  
and charge same to Civil Re-establishment Committee

\$12.83

Pension \$32.50

*A.C.R.*

ACCOUNT	
CH. NO.	5384
INR. LEDGER	
PAY LEDGER	
GEN. LEDGER	

*Eew*

*B. Butler*  
Vocational Officer

*Michael Hynes*

April 9th 1921

Major Howley  
O. I. C. Records

Please pay to M. Hynes, 3868  
the sum of twelve dollars and eighty three cents  
in payment of allowance for two weeks to date  
and charge same to Civil Re-establishment Committee

\$12.83

Pension

\$32.50

F. C. R.

*F. C. R.*

Vocational Officer

*Michael Hynes*

ACCOUNT	_____	INITIALS	<i>CH</i>
CHK. NO.	<i>5704</i>	INITIALS	
INL. LEDGER	_____	INITIALS	
PAY LEDGER	_____	INITIALS	
GEN. LEDGER	_____	INITIALS	

April 30th 1922

Major Howley  
Cl. I. C. Records

Please pay to M. Hynes, 3868  
the sum of ~~nineteen~~ nineteen dollars and twenty three cents  
in payment of allowance for three weeks to date  
and charge same to Civil Re-establishment Committee

\$19.23

Pension \$32.50

ACCOUNT	
OK. NO. 5931	INITIALS <i>MB</i>
INS. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

*J. C. R.*  
*H. A. Butler*

Vocational Officer

*Michael Hynes*



May 14th 1921.

M

Major Howley,  
i/c Pay Office

Account	6104	See
Col. No.		
1st. Class		
2nd. Class		
3rd. Class		
4th. Class		

Please pay Michael Hynes 3865 the sum of  
twelve dollars and eighty-three cents in payment of allowances  
to date. Charge same to the Civil Re-establishment Committee  
\$12.83

*J. C. R.*  
Vocational Officer. J. C. R.

*Michael Hynes*

May 28th 1921.

Major Howley,  
i/c Pay Office

Please pay M. Hynes 3868 the sum of twelve dollars and eighty three cents in payment of allowances for two weeks ended this date. Charge same to the Civil Re-establishment Committee.

\$12.83

*J. C. [Signature]*  
Vocational Officer.

ACCOUNT	6226	2
CK NO.	6226	2
INTL. [unclear]	[unclear]	[unclear]
PAY [unclear]	[unclear]	[unclear]
GEN. [unclear]	[unclear]	[unclear]

*Michael Hynes*

June 14th 1921

ACCOUNT	6380	INVEST	8
NO.			
PAY			
DATE	5868		

Major Howley  
O. I. C. Records

Please pay to M. Hynes, the sum of twelve dollars and eighty three cents in payment of allowance for two weeks to date and charge same to Civil Re-establishment Committee

\$12.83

Pension \$32.50

Michael Hynes

*J. C. R.*  
*J. C. R.*  
.....  
Vocational Officer



Receipt for Army Book 64

No. 3868 Name James Hynes

To Certify that I have received the AB 64 of the above  
named soldier.

Name W. F. Hynes

Date Aug 18 / 1920

Place Portugal Cove St. John's East

N.B. For completion and return to the Department of Militia  
Insert in corner of envelope "AB 64"

*W*

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Fold Here

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

**The Royal Nfld Regt.,**

**Dept of Militia,**

**St. John's Nfld.**

Fold Here

July 8th. 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 1300), is forwarded herewith to

Michael Hynes,

in respect of his service as No. 3868 Rank Pvte,

Name Michael Hynes, Corps Royal Field Regt.

Receipt of the same should be acknowledged hereon.

Received

July 9th 1921 *MH*

Signature

Michael Hynes

Date

July 22nd

Address

Portugal Cove

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 3868 Rank PLG Name Thynes M.  
 Intended place of residence Portugal Cove
2. Occupation Mine  
 Classification of soldier B Medical Category E
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

Date 21-7-19

*[Signature]*  
 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, ST. JOHN'S

Date JUL 19 1919

*[Signature]*  
 Signature of soldier

*[Signature]*  
 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, ST. JOHN'S

Date JUL 19 1919

*[Signature]*  
 Signature of soldier

*[Signature]*  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 22-6-17 No. of days on Military  
 Discharged from service JUL 21 1919 Plus 14 days Service 407

## APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 21 1919

*[Signature]*  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

Date August 4/1919

*[Signature]*  
 Officer in Charge  
 The Royal Newfoundland Regiment

*[Handwritten]*  
 Dis B 2029/1490

9  
31  
4  
24



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

## MEDICAL HISTORY

Surname

*Byres*

Christian Name

*Michael*

Table I.—GENERAL TABLE

Birthplace:—Parish

*Conception Bay*

County



		SPECIAL RESERVE.		REGULAR ARMY.	
		Right	Left	Right	Left
Examined	on <i>22</i> day of <i>June</i> 191 <i>7</i>	on	day of	191	
	at <i>Headquarters</i>	at			
Declared Age	<i>24</i> years <i>7</i> days	years	days		
Trade or Occupation	<i>Miner</i>				
Height	<i>5</i> feet <i>7</i> inches	feet	inches		
Weight	<i>137</i> lbs.	lbs.			
Chest Measurement	Grith when fully expanded	<i>39 1/2</i> inches	inches		
	Range of Expansion	<i>4 1/2</i> inches	inches		
Physical Development					
Vaccination Marks	Arm				
	Number		<i>1 Scar</i>		
When Vaccinated					
Vision	R.E.—V=	<i>4/946</i>		R.E.—V=	
	L.E.—V=			L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)			(a)	
(b) Slight defects but not sufficient to Cause rejection	(b)			(b)	
Approved by (Signature)	<i>Liam Patterson</i>				
(Rank)	<i>Major</i>				
		Medical Officer.		Medical Officer.	
Enlisted	at <i>St Johns N.F.</i>	at			
	on <i>22</i> day of <i>June</i> 191 <i>7</i>	on	day of	191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.	
	<i>H. K. F. D.</i>	<i>3868</i>			
Transferred to	<i>Regt</i>				
Became non-effective by					
	on	day of	191	on	day of
(Signature)					
(Rank)					

Table II.—Only for admission to hospital or to the sick list in 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 case of syphilis, admissions and readmissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
General Green Military Hospital, Cambridge Road, <sup>1</sup> / <sub>2</sub>	3	11	18	27	3	19	<sup>12</sup> / <sub>11</sub> G. S. K. Knee joint & shoulder	145	Amputation lower's Femur healed.	W. Hill Esq.
Carlisle Gen. Hospital, Carlisle	27	3	19	23	4	19	amp. R <sup>t</sup> Thigh	27	No treatment here	H. J. Mannick Esq.
	23	6	19	5	6	19	Amputation Right Leg.	106	ARTIFICIAL LIMB PROVIDED.	W. H. Nicholls <sup>C.M.D.</sup> Captain, Adjutant Queen Mary Convalescent Hospital.

Table II.—Only for admission to hospital or to the sick list in 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, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Bethnal Green Military Hospital, Cambridge Road, E.	3	11	18	27	3	19	<sup>12 months</sup> G. Sw. Knee joint R. shattered	145	Amputation lower's Femur healed.	W. Fell <i>Ward</i> .
Pavilion Co., Brighton	27	3	19	23	4	19	Amp. R. Thigh	27	No treatment here	H. J. <i>Ward</i> .
	23	4	19	5	6	19	Amputation Right Leg.	1060	ARTIFICIAL LIMB PROVIDED.	W. H. <i>Nichols</i> <sup>O.M.</sup> <i>For</i> Captain, Adjutant Queen Marys Convalescent Hospital.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121  
29.

Regiment of 1<sup>st</sup> Newfoundland

Number of Sheet First

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	3968. Hynes. M.	Age on	24 years 7 months	Miner	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	St. John's 22-6-17	R. C.	
Joined		Date	Period of	Place of Birth	
		with Colours	44 years.		
		with Reserve	2-365 years.		

Place	Date of Offence	Rank	Case of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Ayr.	22 <sup>13</sup> / <sub>17</sub>	Pte		Out of bounds without a Pass.	Sgt. M. Lidstone	2 days C.B.	24 <sup>13</sup> / <sub>17</sub>	Capt. J. G. Fox	R.M.B
<p style="font-size: 1.2em; font-family: cursive;">Demobilized St. John's, 4 <sup>13</sup>/<sub>17</sub></p>									

To be carried over

## Report of Medical Board.

Station St. John's, Nfld.

Date

No. and Rank **3868 Pte.**Age **July 17/19.** HeightName **Hynes Michael**Complexion **26.** **5'7".**

Unit Royal Newfoundland

Eyes **Dark** HairAddress **Conception Bay****Brown Dark**Former Trade **Farmer**Enlisted at **St. John's.** On

(The Board will please note how the soldier's appearance corresponds with above description).

Disease or Disability **Original 22/6/17.****G.S.W. Leg.**

Subsequent

Present Condition (Compare with previous Board)

**Amputation R. Leg at level lower third Femur.**

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

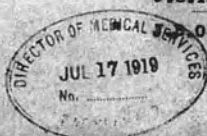
Recommendation of Medical Board

**65%.**

Members of Board

**(SGD) L. PATRICK. MAJOR.****(SGD) CLUNY MURPHY. MAJOR.****J.S. TAIT.**

Approving Medical Officer

**O'RINILLY. CAPT.**

# The Royal Newfoundland Regiment

Class for Demobilization:—

*B*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*18.7.49*

Regimental No.

*3868*

Name

*Hynes, Mike*

Address

*Conception Bay*

Present Medical Category

*E*

Recommended for:—

- (a) ~~Immediate discharge~~ )  
(b) Standing Medical Board

Members of Board

O.C. Discharge Depot.

*W. P. Brown*  
Senior Medical Officer

*Dev. Berden*  
M.O. Depot





Army Form B. 103.

Regimental Number 5868

**Casualty Form—Active Service.**

Rank Plt Regiment or Corps Royal Newfoundland  
 Surname Hynes Christian Name Michael  
 Religion R.C. Age on Enlistment 24 years 1 months  
 Enlisted (a) 22-6-17 Terms of Service (a) Duration Service reckons from (a) 22-6-17  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate Plt  
 Occupation Miner Signature of Officer. B

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 103, 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. 103, Army Form A. 36 or other official documents.
Date	From whom received				
			Embarked	3 FEB 1918	
			Disembarked	6 FEB 1918	
12-2-18	2. C.C. S	Ad. Guorthosa n. 507A	Field	11-2-18	A 36
	51 Gen Hp	28		14-2-18	RA 19779
	D.P. 110	Arrived	Houses	15-6-18	RA 19779
	Unit	Regained unit	Field	24-6-18	1973 24/6/18
18/8	O.C.	To hospital		13.8.18	B 213
23/7	7. S.H.	40m ~ ? V.D.C. m	Winnarsac	13.8.18	HA. 27585
2/7	7. S.H.	Back 8		19.8.18	HA. 27366
22/7	O.C.	ARRIVED D.I.B.D.	Rowen	22.8.18	Lil
26/7	D. 308	To unit	Field	26.8.18	
30/7	O.C.	Reformed unit		28.8.18	B 213

*Emt*

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







Notification to the Officer i/c Records of the Approval of a Soldier's Discharge under Paragraph 392 (xvi.), King's Regulations, or of an Officer i/c Hospital, or under Paragraph 392 (xvi.) or (xvii.), King's Regulations, as shown on Discharge Centre.

Note—Army Forms W. 3072a, b and c are issued in sets of three and are so arranged that Part I. of each Army Form can be completed at the same time by the O.C. Discharge Centre or Officer i/c Hospital, and Part II. of Army Forms W. 3072a and c by the Officer i/c Records, with the use of carbon paper.

**PART I.**

To the Officer i/c Records 53, Victoria St. SW  
(for transmission to the O.C. unit).

The soldier named below has appeared before a Medical Board at this Station, and his discharge from the Service has **this day** been approved. The discharge will be confirmed for the date\* on this notification.

No. 38108 Rank Pte  
Name Hynes Michael Francis  
(Surname) (Christian names in full)

Unit and Corps 1st Newfoundland

His address † on } Portugal Cove. St Johns East  
discharge will be } Newfoundland

Army Forms W. 3072a, b, 179a, b and c, ~~179c~~, B. 175, D. 400, W. 3453a, W. 445 a1, B. 100 and 1000 or temporary documents, for the above-named soldier are forwarded herewith.  
Army Forms B. 168, B. 169 and B. 163 are to be struck out by Officer i/c Hospitals in cases where a soldier has been admitted to hospital from Overseas.

Discharge Centre ‡ or Hospital from which discharged }  
Date 5 JUN 1919 191 A.L.C. Cottell



COLONEL R.A.M.O.  
O.C. Discharge Centre ‡  
or Officer i/c Hospital.  
(Approving Officer.)

NOTE 1. \*As the date of discharge in the case of soldiers entitled to repatriation abroad, who are prepared to embark at the first available opportunity, will be with effect from the date of embarkation, or approximate date of disembarkation, the Officer i/c Hospital or the O.C. Discharge Centre will amend this notification in such cases to read as follows:—"The discharge will be confirmed with effect from the date of embarkation or approximate date of disembarkation."

NOTE 2. † The address given is to be that of the soldier's address on furlough.  
‡ The address given is to be that to which the soldier wishes his discharge documents, any pay that may be due to him, and any communication from the Ministry of Pensions, to be forwarded, except in the case of repatriation (see Note 1 above).

NOTE 3. † Army Forms B. 179a and W. 3453a are only forwarded in cases of discharge from hospital.  
‡ Strikes out wherever inapplicable.

**PART II.**

O.C. \_\_\_\_\_

Date for which discharge } \_\_\_\_\_ 191  
has been confirmed } \_\_\_\_\_

Para. and sub-para. of K.R. under } \_\_\_\_\_  
which discharge has been confirmed } \_\_\_\_\_

Passed to you for publication in Part II. Orders.

Station \_\_\_\_\_

Date 191 Officer i/c \_\_\_\_\_ Records.

NOTE.—In the case of repatriation, when the soldier is prepared to embark at the first available opportunity, the Officer i/c Records is to retain this Army Form with the soldier's documents until he has confirmed the discharge.

Notification to the Officer i/c Records of the Approval of a Soldier's Discharge under Paragraph 392 (xvi.), King's Regulations, by an Officer i/c Hospital, or under Paragraph 392 (xvi.) or (xvii.), King's Regulations, by an O.C. Discharge Centre.

Notes—Army Form W. 3972a, b and c are issued in sets of three, and are so arranged that Part I. of each Army Form can be completed at the same time by the O.C. Discharge Centre or Officer i/c Hospital, and Part II. of W. 3972a and c by the Officer i/c Records, with the use of carbon paper.

## PART I.

To the Officer i/c Records

58, Victoria St. SW

(for transmission to the Regimental Paymaster.)

The soldier named below has appeared before a Medical Board at this Station, and his discharge from the Service has **this day** been approved. The discharge will be confirmed for the date\* on this notification.

No. 3868 Rank Pte

Name

HynesMichael Francis

(Surname)

(Christian names in full)

Unit and Corps

1st Newfoundland

His address † on discharge will be

Portugal Cove. St Johns East  
Newfoundland

Army Form O. 18230† for the soldier has been sent direct to the Regimental Paymaster.  
" " " 18232

Discharge Centre or Hospital  
from which discharged

Date

191

M. L. Cottell

COLONEL, R.A.M.C.

O.C. Discharge Centre  
or Officer i/c Hospital.

(Approving Officer.)

NOTE 1. \*As the date of discharge in the case of soldiers entitled to repatriation abroad who are prepared to embark at the first available opportunity will be with effect from the date of embarkation, or approximate date of disembarkation, the Officer i/c Hospital or the O.C. Discharge Centre will amend this notification in such cases to read as follows:—"The discharge will be confirmed with effect from the date of embarkation or approximate date of disembarkation."

The address in such cases is to be the soldier's address on furlough.

NOTE 2. † The address given is to be that to which the soldier wishes his discharge documents, any pay that may be due to him, and any communication from the Ministry of Pensions, to be forwarded, except in the case of repatriation (see Note 1 above).

† Strike out whichever inapplicable.

## PART II.

Regimental Paymaster

Date for which discharge  
has been confirmed

191

Para. and sub-para. of K.B. under  
which discharge has been confirmed

Passed to you for adjustment of the soldier's accounts.

Station

Date

191

Officer i/c

Records.

NOTE.—In cases of repatriation, when the soldier is prepared to embark at the first available opportunity, this Army Form is not to be sent to the Regimental Paymaster until the discharge has been confirmed.

# STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179a, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 9555Rank PltName Hynes Michael

(Surname)

(Christian Names)

Unit and Corps 1st Inf. Coy. Ryl

Note.—Before answering the questions below, the soldier is to note that

(a) The statements made by him will be checked by official records.

(b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

1 enlisted June 22<sup>nd</sup> 1914

(b) In what capacity?

Driver of mks.

etc.

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

Q 3 W. 25/10/18.

causing loss of sight

high.

3 Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

Gen Hosp  
War Hosp

Rover.  
Winchester.

4 Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No.

5 Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

—

6 Give the name of your National Health Approved Society, and (if possible) your Membership Number.

—

7 What is the name and address of your last employer before joining the Army?

Gen E-employer.

8. (a) What was your occupation before joining the Army?

Miner

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station .....



Signed (Soldier) .....

M. Hynes

Date .....

Signed .....

D. Black [Signature]



## 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. 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 *Hynes, Michael*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3868.*

Intended address *Conception Bay.*

Height on discharge *5* Feet *4"*

Color of hair on discharge *Dark.*

Complexion *Dark.*

Color of eyes *Brown.*

Descriptive Marks *wound, right leg.*

Figure on discharge *medium*

Christian name of Father *—*

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 *Conception Bay 1894. Nov 27<sup>th</sup>*

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) *Michael Hynes*

(Rank)

*Pte.*

Station

*ST. JOHN'S*

Date

*16.7.19.*

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.

Medical Officer i/c Hospital.  
Unit or Command Depot.



Date

## Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

**INSTRUCTIONS.**—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or P.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer (i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as if a wronged pensioner, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.2.

Part A. of Army Forms W. 3463A and W. 3463B are to be completed by the soldier or by the O.C. of his unit.	<b>PART A.</b> Soldier's Name	HYNES		Michael Francis		
		(Surname)		(Christian names in full)		
	Unit from which discharged	1st Bn. Buffs. (London)				
	Regimental Number	2968	Rank on discharge	Plt	Age on discharge	26
	Married, widower with children, or single	Single				
	Occupation before enlistment	Miner				
	Special qualifications (if any) for employment in civil life	ditto				
Nature and locality of employment desired	Undesired					
Full postal address to which proceeding on discharge	Portugal Ave. St. Johns East NEWFOUNDLAND					
Name of Approved Society (if any)	None					

Part B. and C. are to be completed by the officer in Records.	<b>PART B.</b> Period of service, and in what Corps ... ..	Regiment	Years	Days	All service abroad, with Stations	Years	Days
	Disallowed ... ..				India		
	Service towards pension ... ..				South Africa		
<b>PART C.</b> Number of G.C. badges	medals						
Wounds and actions in which received							

PART D.	Where born (parish, town and county), and date	St. Johns		27/11/1892
	Colour of hair on discharge	Dark	Colour of eyes	Brown
	Christian name of father	} deceased		
	Christian name of mother			

NOTE.—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Elements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Forms W. 3463A and B are to be completed by the Officer i/c Hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the departure of a soldier to the Discharge Centre.

Wife's maiden name in full \_\_\_\_\_  
Date and place of marriage \_\_\_\_\_

Christian names of children and dates of birth \_\_\_\_\_

Date and place of 1st enlistment 22/6/17 St Johns

Figure on discharge medium 5th 7mm

Descriptive and other distinguishing marks amp Rt thigh

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full) Michael Francis Jones

Rank Private

Station Eschampton Date 30/11/19

I certify that the above-named soldier signed the foregoing declaration in my presence

[Signature] (Rank) Cpl for  
O.C. unit or Officer i/c Hospital,  
The Col. Commandant

THE CONTROLLER,

MINISTRY OF PENSIONS,  
BURTON COURT,  
KING'S ROAD,  
LONDON, S.W.3.

Queen Mary's Convalescent Hospital

The soldier named overleaf was

Discharged under para. \_\_\_\_\_ King's Regulations

or

Transferred to Class \* \_\_\_\_\_ of the Reserve.

Strike out  
whichever  
inapplicable.

Military character \_\_\_\_\_

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

Station \_\_\_\_\_

Officer i/c Records.

Date \_\_\_\_\_



### Report to the Local Committees of the War Pensions Committee on Soldiers Discharged.

- (a) From Central Hospitals or Discharge Centres, as no longer physically fit for war service, under para. 392 (xvi.), King's Regulations.
- (b) From Discharge Centres, as surplus to military requirements (having suffered impairment since entry into the Service) under para. 392 (xvi.a), King's Regulations.

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Local Committee of the Area in which the man intends to reside.

**PART** Soldier's Name HYNES Michael Francis  
(Surname) (Christian names in full)

**A.** Unit from which discharged 1st Newfoundland

Regimental Number 2268 Rank on discharge Pte Age on discharge 26

Married, widower with children, or single Single

Occupation before enlistment miner

Special qualifications (if any) for }  
employment in civil life } ditto

Nature and locality of employment desired Undecided

Full postal address to which proceeding on discharge } Portugal Cove, St Johns East  
NEWFOUNDLAND

Name of Approved Society (if any) None

**PART** Nature of medical unfitness \_\_\_\_\_

**B.** Service with Colours \_\_\_\_\_ years \_\_\_\_\_ days, of which \_\_\_\_\_ years  
\_\_\_\_\_ days were served abroad during the present war.

Military character \_\_\_\_\_

Anything against the soldier to render his recommendation undesirable \_\_\_\_\_

Date of discharge \_\_\_\_\_ 191 \_\_\_\_\_

Station \_\_\_\_\_

Date \_\_\_\_\_ Officer i/c Records \_\_\_\_\_

NOTE 1.—Part B of this Army Form and Army Form W. 3463a can be completed at the same time by the use of carbon paper.

NOTE 2.—Part A of this Army Form is to be completed by the O.C. unit in all cases of soldiers sent to a Discharge Centre with a view to discharge or transfer to the Reserve, as it will not be known until a soldier is medically boarded whether he may not be discharged under Para. 392 (xvi.) or (xvi.a), King's Regulations.

**CONFIDENTIAL.**

Army Form W. 3463B.

**Report to the Employment Department, Ministry of Labour, on a Soldier's Discharge from a Central Hospital as physically unfit for further War Service under para. 392 (xvi.), King's Regulations.**

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Director of the Employment Department, Ministry of Labour, 1, Queen Anne's Chambers, Westminster, London, S.W.1.

**PART A.** Soldier's Name HYNES Michael Francis  
(Surname) (Christian names in full)

Unit from which discharged 1st Newfoundland

Regimental Number 7969 Rank on discharge Plt Age on discharge 26

Married, widower with children, or single Single

Occupation before enlistment miner

Special qualifications (if any) for employment in civil life ditto

Nature and locality of employment desired Undecided

Full postal address to which proceeding on discharge Portugal Cove. St Johns East NEWFOUNDLAND.

Name of Approved Society (if any) None

**PART B.** Nature of medical unfitness \_\_\_\_\_

Service with Colours \_\_\_\_\_ years \_\_\_\_\_ days, of which \_\_\_\_\_ years \_\_\_\_\_ days were served abroad during the present war.

Military character \_\_\_\_\_

Anything against the soldier to render his recommendation undesirable \_\_\_\_\_

Date of discharge \_\_\_\_\_ 191 \_\_\_\_\_

Station \_\_\_\_\_

Date \_\_\_\_\_ Officer i/c Records \_\_\_\_\_

To be completed by the Officer i/c Records.

**NOTE 1.**—As there is a representative of the Employment Department, Ministry of Labour, attached to each Discharge Centre, this Army Form is not to be sent to the Ministry of Labour, except in cases of discharge from Central Hospitals.

TREATMENT CARD.

Name Byrnes. M.

Late Regtl. No., Rank and Corps 3868. R.

Home Address 1 Newfoundland.  
Portugal Cove, St. Johns East,  
Newfoundland.

Hospital from which discharged Queen Marys Convalescent Hospital,  
Roehampton.

Date of discharge 5 - JUN 1919

Nature of disability AMPUTATION Right leg

This card is to be despatched to the Local War Pensions, etc., Committee, where the man proposes to reside when he is about to be invalided from the Service and discharged from Hospital.

In the case of a man who has previously been discharged from the Service, the card will be clearly endorsed in red ink—"Post-discharge case."

A copy of this card is to be given to the man on his discharge from Hospital.

II. Particulars of treatment recommended [in-patient or out-patient, and hospital at which it should be given, &c.—see A.O.I. on the subject].



*hil*  
*W. H. Nicholas*

Place \_\_\_\_\_

Signature Lt. Col. Commandant,

Date \_\_\_\_\_

Queen Marys Convalescent Hospital:

On receipt of this card the Local-Committee will arrange for the treatment above indicated with the appropriate hospital, and send the card to the Officer i/c that hospital.

III. Particulars of treatment given :—

Effect of treatment given :—

Place \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Officer i/c Hospital.

On completion of treatment this card is to be forwarded by the Officer i/c Hospital to the Local War Pensions, &c., Committee, who will retain it for record.

# The Royal Newfoundland Regiment

D  
386

## DEMOBILIZATION OF

Reg. No. 386 Rank Private Name James M. [unclear]  
 Date of Enlistment 22-6-17 Address Portugal Cove District St. Mary's  
 Occupation Mason Classification for Discharge B Medical Category 1  
 Recommendation S.M.B. permitted to [unclear] Disability Rating 65%

Passed to Demobilization Officer with following documents:-

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	3463A	1
B 178	W 3494	B 122	Board 1st	" 2	3463C	1
B 178a	D 400A	B 1915	do 2nd	" 3	3235	1
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 18-7-19

O. C. Discharge Depot. [Signature]

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am [unclear] in a position to resume civilian occupation.

916 Dynes

Particulars passed to Vocational Officer for information and action.

Date [unclear]

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:-

(a) Clothing Allowance payable #6.00

(b) Clothing Supplied [unclear]

Date 19-7-19

O i/c. Re-clothing.

## 3- Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 19040 to his home  
at Portland, Ore. and Release Certificate No. 3747 issued.

Date 19-7-19

Alb. Conner  
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 4-8-19

Date 19-7-19

J. Thomas  
Depot Paymaster.

Discharge approved for 21-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	/	N.F. Med.	D.F. 1	3468A
B 178	/ W 3494	B 122	/	Board 1st	" 2	3463C
B 178a	/ D 400A	2 B 1915	/	do 2nd	" 3	3553
B 179	D 400B	Form L		do 3rd	" 4	Form B
B 179a	/ D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2		B 3972	" 6	
B 179c	B 120	M 93		C 3972		

Date 19-7-19

Alb. Conner  
Demobilization Officer.

## APPROVED.

Documents as above forwarded to—

Officer in Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service 1919Date JUL 21 1919

L. R. COOPER, CAPT.

O. C. Discharge Depot.

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

Date Aug 1 1919

J. H. K.

Reg. No. 3868 Rank Pfc Name Hayes W.

Attested ..... Address Portugal Congo

Allotment ..... Allottee ..... JUL 1 1919

Date of Allotment ..... Returned from Overseas .....

Returned on S Cassandra Cause Discharge

18.7.19 Res purchase from the Army

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION





## DEPARTMENT OF VETERANS AFFAIRS

Copy for H.O. File

To

Ottawa, Ont.

FEB 23 1966

Date.....

Attention of

NAME HYNES, Michael

SERVICE 3868 ROY.NFID C.P.C. No. 260119  
NUMBER REGT. WWI W.V.A. No.NAVY  
ARMY ~~XXX~~  
R.C.A.F.

The DEPARTMENT has received information from

Senior Pension Medical Examiner, C.P.C. St. John's, Nfld. d/ Feb. 18, 1966

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death February 15, 1966  
Cause of Death.....  
Place of Death not stated

Name and Address of next of kin (if known).....

Copies to: W.S.R.  
V. I.  
~~W.S.R.~~  
~~W.S.R.~~  
H.O.

} Destroy form if advice of death already received.

E.C. Richards  
for  
Chief, Central Registry