

1004

ROYAL NEWFOUNDLAND REGT.

Received 30.11.58

1914-1918

J. Truway

1004

P.R.O.

Received 20.11.59

1004

Recruiting
Form A, 1914.



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1004

Name in full Thomas J. Dancy Age 25

Address 95 Springdale St

~~Married~~ ~~Single~~ Height 5'11" Weight 120

Color Fair Hair Dark Brown Eyes Brown

Other distinguishing marks Scar mark on left lower arm

Nearest relative Thomas J. Dancy (mother)

Address 95 Springdale St

Dependents None

Occupation None Present Wage \$1.50 per day

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment 26th January

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

Declared before me this 11th day

of Feb 1914

Recruited for Newfoundland Regiment at St. John's

Thomas J. Dancy
Thomas

Wm. J. Dancy
Wm. J. Dancy Capt

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1004

Name Thomas Ivimey

Apparent age 25 years months. Height 5 feet 7 inches.

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

Distinctive marks Color: Fair, Hair: Dark Brown, Eyes: Brown

Other distinguishing marks: Tattoo mark on left lower arm

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Susan Ivimey, 98 Springdale St., St. John's

| 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 to reckon for fixing the rate of pens on		Service in Re-allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>26/1/15</u>									
Joined at <u>St. John's</u> on <u>26th January '15</u>									
				<u>Discharged St. John's. Aug 1st 1918</u>					
				<p><i>Embarked St. John's 20/15 Embarked N. I. 20/15 Disembarked N. I. and embarked for Cairo 3/15 Embarked for Calicut 13/15 Landed Cairo 14th night of 15/20 Disembarked 22/15 Admitted 26 C.S. Jamaica 26-11-15 Admitted 4/12-15 with Battalion 14-1-16 Embarked for Hong Kong 14-3-16 Disembarked Jamaica 22-3-16 Admitted 29 C.C.S. Hyderabad 5-8-16 Embarked to Senegal 5-1-16 Admitted Hyderabad 15-5-16 Furlough N. I. attached about 21-7-16 to reinforce 4land 5-9-16 Returned N.I. 19-9-16 Arrived at St. John's 13-11-17 Admitted 11 x C Hospital 21-4-18 Red discharge and remain in Hospital 18-7-18</i></p>					
				<u>Discharged Redempt Unit</u>					
				<u>St. John's</u>				<u>1-8-18</u>	
Total Service forfeited as above									
Total Service towards Engagement to <u>1-8-18</u> (date of discharge)					<u>3</u>	<u>years</u>	<u>88</u>	<u>days</u>	
" " " Pension					(")	"	

Proceedings on Discharge.

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

No. 1004 Army Rank Private

Name Thomas Swimey
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps The Royal Newfoundland Regt

Battalion, Battery, Company, Depôt, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge August 1918

Place of discharge St. John's, Nfld.

1.		Description at the time of discharge.
Age	<u>29</u> years <u>30</u> months	Descriptive marks. <u>tattoo left lower arm</u> <u>operation scar appendix region</u>
Height	<u>5</u> feet <u>7</u> inches	
Chest measurement	girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion	<u>fair</u>	
Eyes	<u>dark brown</u>	
Hair	<u>dark brown</u>	
Trade	<u>Shoemaker</u>	
Intended place of residence (To be given as fully as practicable)	<u>98 Springdale St. St. John's.</u>	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 480 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2688 has been issued to*

6
28
31
30
31
32
32
188

To be filled in on the soldier quitting the Colours.

Squadron, Troop, Battery and Company Conduct Sheet.


Army

Regiment of Newfoundland

Number of

Signature of O. C. Company

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100,20,712-s.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>1004</u> <u>Trany J</u>	Age on	<u>28</u> years - months	<u>Shoe maker</u>		
Joined	Date	Date of Enlistment	<u>Jan 26 1915</u>	Religion		
Joined	Date	Period of	{ with Colours <u>3⁸⁶</u> years. with Reserve <u>3⁰⁶</u> years.	<u>Methodist</u>		
Joined	Date					
Joined	Date					

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
<u>Edinburgh Castle</u> <u>Stobs.</u>	<u>19/11/15</u> <u>29/15</u>	<u>Plt</u>		<u>Late on Sick Parade</u> <u>Interchanging places</u> <u>Deficient Carrier</u>	<u>St Warkfull</u>	<u>2 days C13.</u> <u>To make</u> <u>Good loss.</u>	<u>20/5/15</u> <u>29/7/15</u>	<u>Capt J W March</u> <u>R Coe Burton.</u>	<u>SR</u> <u>SR</u>
<u>Aug. Camp</u>	<u>Aug 29</u>	<u>"</u>		<u>Absent on 9pm Parade</u> <u>Medically Unfit</u>	<u>up. Sellers.</u> <u>St John's</u>	<u>2 days C13.</u> <u>1 1/2</u>	<u>30/8/15</u>	<u>Capt. Poin</u>	<u>115.</u>
To be carried over									

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

MEDICAL HISTORY

Surname *Irwin*

Christian Name *Thomas*



Table I.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE		REGULAR ARMY.	
	on	day of	on	day of
Examined	27 th	Jan 1911		191
	at	St John's	at	
Declared age	28	years	years	days
Trade or occupation	Shoe Make			
Height	5	feet	feet	inches
Weight		120 lbs.		lbs.
Chest Measure- ment { Girth when fully expan- ded Range of expansion		34 1/2 inches		inches
		3 1/2 inches		inches
Physical development				
Vaccination marks {	Right	Left	Right	Left
	Arm ...			
Number				
When vaccinated	No			
Vision	R.E.—V.—		R.E.—V.—	
	L.E.—V.—		L.E.—V.—	
(a) Marks indicating congenital peculiarities or previous disease			(a)	
(b) Slight defects but not sufficient to cause rejection	(b) Wears denture		(b)	
Approved by (Signature)	<i>Clay Macpherson</i>			
(Rank)	Capt.			
	Medical Officer.			Medical Officer.
Enlisted	at	St John's	at	
	on	26 th day of Jan 1911	on	day of 191
Joined on enlistment	Corps		Corps	
	Regtl. No.		Regtl. No.	
Transferred to	<i>14th Hussar Regt 1004</i>			
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>3rd London General Hospital Wandsworth</i>	<i>14</i>	<i>2</i>	<i>16</i>	<i>3</i>	<i>7</i>	<i>16</i>	<i>Appendicitis</i>	<i>50</i>	<i>Appendicitis. France. Operation. Recovery</i>	<i>Sgt J. P. Wheeler C.M.C.</i>

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

MEDICAL HISTORY

OF

Christine Name *Thomas*Surname *Turney*

OF

Christine Name *Thomas*

Table 1.—GENERAL TABLE.

Birthplace:—Parish.....	SPECIAL RESERVE.		REGULAR ARMY.	
	County.....			
Examined	on 22 nd day of Jan 1915	at St John's	on .. day of .. 191 ..	at ..
Declared Age.....	28 years	days	years	days
Trade or Occupation.....	Shoe maker			
Height	5 feet	7 inches	feet	inches
Weight	120 lbs.			lbs.
Chest Measurement {	Girth when fully expanded...	31 inches		inches
	Range of expansion.....	3 1/2 inches		inches
Physical Development, &c.				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
Number.....				
When Vaccinated	No			
Vision	R. E.—V=		R. E.—V=	
	L. E.—V=		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to Cause Rejection	Wears denture			
Approved by (Signature)	<i>Camy Macpherson</i>			
(Rank)	Capt.			
	Medical Officer.			Medical Officer.
Enlisted	at St John's	at ..		
	on 26 th day of Jan 1915	on .. day of .. 191 ..		
Joined on Enlistment	Corps. 1 st 74 th Regt.	Regt. No. 1004	Corps.	Regt. No.
Transferred to.. ..				
Became non-effective by.				
	on .. day of .. 191 ..	on .. day of .. 191 ..		
(Signature)				
(Rank)				

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

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8 th LONDON GENERAL HOSPITAL WANDSWORTH.	15	5	16	3	7	16	Appendicitis.	50	Appendicitis - hand Operative Mealy.	J. W. B. Kendall. Capt. R. H. M. C. T.

Admitted to hospital
15-5-16



No. _____

Date July 3rd 1916

(1) To the Officer i/c Records,

58 Victoria St

S.W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent

Quarters (Station).

(3) The Paymaster,

58 Victoria St

S.W. (Station).

Regimental No. 1004

Rank and Name Pte. Laimery T.

Regiment or Corps 10th Newfoundlands

has been granted a furlough from July 3rd to July 12th

His address while on leave will be:—

58 Victoria St. S.W.

This man has been furnished with a Warrant to Victoria and given an advance of £1 (one pound)

I consider he is fit for* Duty.
 ~~Light duty.~~

A. Hope Gosse Capt. R.A.M.C.

Officer in charge _____ Hospital Registrar, R.A.M.C.I.

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

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

COPY

April 6th., 1918

From:- D. M. S.
To:- O. C. Depot.

COA. Pts. Ivinex. T.

The marginally noted man was admitted to
the Naval & Military Convalescent Hospital April 4th.

Cluny Macpherson
Major, D. M. S.

Copy to Paymaster & Officer i/c Records.

Admitted to Hospital
15. 5. 16. 1887

Army Form W. 3016.

No. _____

Date July 3 191 4

(1) To the Officer i/c Records,

58 Victoria St.

S. W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent
Bay. (Station).

(3) The Paymaster,

58 Victoria St.

S. W. (Station).

Regimental No. 1004

Rank and Name

Pike Triney T.

Regiment or Corps

1st Newfoundland

has been granted a furlough from

July 3

to July 12

His address while on leave will be :-

58 Victoria St. S. W.

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

I consider he is fit for Duty.
 ~~Leave duty~~

A. H. Jones Capt RAMCT.

Officer in charge

Hospital

Registrar RAMCT.
Mr. Landon General H.
(Station)

* Strike out that which is inapplicable.

Wombourth

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.

THIRD BOARD

Report of Medical Board.

Station	St. John's, Nfld.	Date	July 18th., 1918.
No. and Rank	1004 - Pte.	Age	30
Name	IVIMEY THOMAS	Height	
Unit	ROYAL NFLD.	Complexion	
Address	98 SPRINGDALE STREET	Eyes	Hair
Former Trade	SHOEMAKER		
Enlisted at	ST. JOHN'S ON 26/1/15		
Disease or Disability	Original	APPENDICITIS	
	Subsequent	RHEUMATISM	

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

Present Condition (Compare with previous Board)

STILL COMPLAINS OF PAIN IN BACK BUT SEEMS TO BE IMPROVING SOMEWHAT

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

TOTAL WHILE IN HOSPITAL

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

REMAIN IN N. & M. CON. HOSPITAL

DISCHARGE AS PERMANENTLY UNFIT

Members of Board

(SGD) H. S. FRASER

(SGD) CLUNY MACPHERSON, Major

J. S. TAIT

JOHN G. DUNCAN

Approving Medical Officer.

CERTIFIED CORRECT COPY

CLUNY MACPHERSON, Major

Per *A. W. B.*



NEWFOUNDLAND.

REPORT OF MEDICAL BOARD

ON SOLDIER OR NAVAL RESERVIST RETURNED
FROM OVERSEAS

Station ST. JOHN'S NFLD. Date JANUARY 18th., 1918
 No. 1004 Age 30 Height
 Rank PRIVATE Complexion
 Name IVIMEY THOMAS Eyes Hair
 Unit 1ST NEWFOUNDLAND
 Address 98 SPRINGDALE STREET Former Trade SHOEMAKER
 Enlisted at ST. JOHN'S NFLD. on JANUARY 29th., 1915

Disease or disability APPENDICITIS

Rheumatism

Present condition

*Complains of pains in all his joints. Pulse 100
Heart normal.*

Estimated disability

Total limb in Hosp.

Recommendation of Medical Board

To enter 20m Cms. Hosp.

Class

Members of Board

*H. S. ...
J. M. ...*

Approving Medical Officer.

Clayton Macpherson, Major

4/1st. Newfoundland Regiment.
Report of Headquarters Classification Board held on
Soldier on Regimental Strength.

Depot. _____ Date. _____
 Regimental No. *1004* Age. _____
 Name. *Pte H. J. Jovine* Unit. _____
 Address. *98 Sprydale St.* Former Trade. _____
 Enlisted At. _____ Date. _____
 Disease or Disability. _____

Finding of last Standing _____
 Medical Board on..... *Leg 4 Aug. 13. 1-19.*

Present Condition. *Complain of Rheumatism*

Recommendation. *Med. Board*

Category. _____

Members of Board.	} <i>G. J. Coote</i>C.O. Depot.
	D.D.M.S.
	M.O. Depot.

Depot. _____

Headquarters Newfoundland Regiment..... *Jan 12* 1918.....



Medical Report on an Invalid.

NOTES:—

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

Statement of Case

Station

St. John's

Date

Jan 10/17

- | | |
|--|--|
| 1. Unit <i>1st. Newfoundland</i> | 5. Age last birthday. <i>30</i> |
| 2. Regimental No. <i>2004</i> | 6. Enlisted on <i>26 Jan. 1915</i> |
| 3. Rank. <i>Pte (C.M.)
L. L. L. L.</i> | at <i>St. John's</i> |
| 4. Name. <i>L. L. L. L. Thomas</i> | 7. Former trade or occupation <i>Shoemaker</i> |
| 8. Disability | |

Appendix

9. History *In France. May 1916. Operated on.*

10. What is his present condition?

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

Normal.
See appended case.
Seek med attention.

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

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

Signature

W. B. Burdon

Rank or Qualification

Lieut

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board.

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

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

Remarks if any:—

[Handwritten signature]

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

Remarks if any:—

[Handwritten checkmark]

15. The refusal of operation sanatorium is:—

- (a) Reasonable.
- (b) Unreasonable.

Remarks if any:—

[Handwritten checkmark]

16. We recommend ~~discharge from~~ retention in the Army

Remarks if any:—

with light duty and to have both attended to

Signatures.

[Handwritten signature] President
[Handwritten signature]
[Handwritten signature]

Place

Date

S. John's
Jan 12. 1917

APPROVED

Station

Date



[Handwritten signature]
 Administrative Medical Officer. Major

TENTH BOARD

Form Z179 B.P.C. 5M, 21-11-25

Pension No. 650

Report of Medical Board

Station St. John's, Nfld. Date FEBRUARY 16, 1926
No. and Rank 1004--PRIVATE Age 38 YEARS Height
Name THOMAS IVIMEY Complexion
Unit Royal Newfoundland Eyes Hair
Address 59, ALEXANDER STREET (The Board will please note how the soldier's appearance corresponds with above description).
Former Trade SHOEMAKER
Enlisted at ST. JOHN'S On 26/1/15
Disease or Disability Original APPENDICITIS
Subsequent RHEUMATISM.

Present Condition (Compare with previous Board) *Palce 84*

*162 lbs weight Abdomen large & prominent.
Gets a pain across abdomen in region of operation for
Appendicitis. Left arm is stiff and elbow painful*

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 ? *10% 2 or 3 months*

Recommendation of Medical Board

Members of Board

[Signature]

[Signature]

THIRD BOARD

Form Z179 N.M.D.

Report of Medical Board.

JUL 18 1918

Station **St. John's, Nfld.** Date

No. and Rank **1004 - Pte.** Age **39** Height

Name **IVIMEY, THOMAS** Complexion

Unit **Royal Nfld.** Eyes Hair

Address **98 Spriggdale Street**

Former Trade **Shoemaker**

Enlisted at **St. John's On 25/1/15** (The Board will please note how the soldier's appearance corresponds with above description.)

Disease or Disability Original **APPENDICITIS -**

Subsequent **RHEUMATISM**

Present Condition (Compare with previous Board)

Still complains of pain in back but seems to be improving somewhat

THE ENTIRE DISABILITY : To what extent is his capacity lessened at present for earning a livelihood in the general labour market ? *Not while in Hosp.*

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

*Remain in Hosp.
Discharge permanently unfit
Chas Macpherson
Major*

Members of Board

*J. G. [Signature]
J. M. Duncan
J. [Signature]*

Approving Medical Officer.

D. W. S. NEWFOUNDLAND.



THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

Pension No. 630.

Reg't. No. 004 Rank Pte. Name Thomas Sweeney

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board July 18th, 1918

Reasonable disability 100% whilst in Hospital. months

Pension granted:

\$40.00 per month whilst under treatment. months

or Gratuity granted:

payable in equal monthly instalments

Granted to:

Name Thomas Sweeney

Address 28 Springdale St.

City

Date same disposed of JUL 29 1918

Approved by:

Members of Board

[Signature]

[Signature] Chairman
[Signature]

Remarks:

Casualty Form—Active Service.

Regiment or Corps

Newfoundland

Registered No. **CR 1004**

Rank

Pvt

Name

Dooney J

Enlisted (a) *20/3/15*

Terms of Service (a) *1 year*

Service reckons from (a) *Jan 26/15*

Date of promotion to present rank

Date of appointment to lance rank

Numerical position on roll of N.C.O.s.

Extended *2 months*

Re-engaged *Aug 15/15*

Qualification (b)



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 30, 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. 30, or other official documents.
Date	From whom received				

		Embarked St. John's, NFLD.		20/3/15.	
		Landed Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
16/12/15.	26 C.C.S.	Admitted, Jambouze	26th. C.C.S.	26/11/15.	C 4981.
4/12/15.	1st Can. Mudros.	do	1st Can. Hosp. Mudros.	4/12/15.	E 2785.
<i>22/1/16</i>	<i>Mud</i>	<i>with Battalion.</i>	<i>unit</i>	<i>10/1/16</i>	<i>B 213</i>

		Embark'd Port Suez		14/3/16	
		Disembark'd MARSEILLE S		22/3/16	
		<i>29th. Am. Assaults.</i>	<i>29th. Am. S.</i>	<i>5/5/16</i>	<i>E 0486 6.5.16.</i>
		<i>"Asturias" Suez Canal</i>	<i>Asturias</i>	<i>13.5.16</i>	<i>M 3083</i>

G.H.P.
20/5/16

MT

Office of Adjutant General
Office of Adjutant General

(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.

2nd Edition B. 213

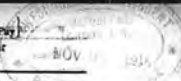
No. 1004 Name *Priney J.* Sqn., Batty., or Company *D.* Corps *Newfoundland* Date of enlistment } G.C. Badges } Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. Signature O.C. Company, etc. } Character } NOV 1915

Certified true copy

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

Army Form B. 123



Sailed per S.S. Corsican 8/9/16

DUPLICATE

Army Form O. 1625.

PAY LIST. *Sept 2nd to Sept 29th* 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

OCT - 3 1916

Regiment or corps *2^d Newfoundland Regt.*
 No. *1004* Rank *Pte.* Name *Finney J.*
 Died ^(a) at on the of 191 .
 Deserted at on the of 191 .

I Certify to the correctness of above in every particular.

R. Rodger *Adjutant*
 Commanding Squadron, Troop,
 or Battery or Company.

STATEMENT OF ACCOUNT.

[FORM I.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month			
	Cash issues				Pay 6 days at 1.00 from <i>7/16</i> to <i>7/16</i> ✓ 1 11 8			
	(Date of each issue to be stated)				<i>Field allowance</i>			
		£ s. d.			Proficiency, Service or good conduct pay			
	<i>Sept 7 1916</i>	10 0			6 days at 10s from <i>7/16</i> to <i>7/16</i> ✓ 2 6			
	"				Messing allowance days at			
	"				from _____ to			
	"				Clothing and kit allowance			
	<i>allot 6 days @ 60s = ✓ 14 10</i>				Amount produced by the sale of Necessaries			
	<i>1 per pension 2/-</i>				Personal Clothing and Effects from Form 2...			
	<i>1 Transport 9/9 = ✓ 11 9</i>				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	Consolidated stoppage.....				Deferred Pay or Gratuity			
	Balance due by the Paymaster				Balance due to the Paymaster..... ✓ 9 5			
		£ 1	16	7		£ 1	16	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.

Dated at this day of _____ 191 .



R. A. M. ...
 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.

CHEQUE *100*



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Thos Irvinny , Regl. No. 1004
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and Sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} or Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} or Persons
 concerned, viz. :

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
953	Mother	Mrs Susan Irvinny	98 Springdale St City	60
			Total Allotment, \$	

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

(Sig.) Eric St. John
 Officer Commanding
 Company

(Sig.) Thomas Irvinny
 (Rank) Private

No. *1004* Name *D. J. Quinn*
 Date of last entry in Company Conduct Sheet

D. J. Quinn
 No. and date of last drunk

Sgt. Paddy,
 Co. Company

10 Corps *Newfoundland*
 Period not reckoning towards freedom from extra fine

Date of enlistment
 Sheet No.

G.C. Badges

Service or Proficiency Pay
 Character

Signature O.C. Company, etc.

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

Army Form B, 122

Sailed for S. Crosscan 8/9/16

ORIGINAL

Army Form O. 1625.

PAY LIST. *Sept 22^d* to *Sept 29th* 1916. Voucher No.

OCT - 3 1916

NON-EFFECTIVE ACCOUNT.

Regiment or corps *2/1 Newfoundland Regt.* Name *James J. Forney J.*
 No. *100A* Rank *Pte.*
 Died ^(a) at on the of 191
 Deserted at on the of 191

I Certify to the correctness of above in every particular.
C. R. Odger *2nd Lieut*
 Commanding Squadron, Troop,
 or Battery or Company.

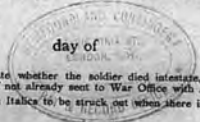
STATEMENT OF ACCOUNT.

[FORM I.]

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 100 from <i>2/9/16 to 7/9/16</i> 1 4 8				
	<i>Sept 4</i> 1916 <i>100</i>				<i>Field allowance</i> Proficiency, Service or good conduct pay 6 days at 100 from <i>2/9/16 to 7/9/16</i> 2 6				
	" " " "				Messing allowance days at from _____ to _____				
	<i>Allot 6 days @ 60 = 1 10 0</i>				Clothing and kit allowance				
	<i>1 for P. & H. 2/ = 1 14 10</i>				Amount produced by the sale of Necessaries				
	<i>1 - Forment 9/4 = 1 11 9</i>				Personal Clothing and Effects from Form 2...				
	Consolidated stoppage.....				Amount of Savings Bank balance, including interest (if no balance, to be so stated)				
	Balance due by the Paymaster				Deferred Pay or Gratuity				
		£	1	16	4	Balance due to the Paymaster.....	1	9	5
						£	1	16	4

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 1 16 4 is correctly chargeable against the Public.

Dated at this day of 1916. *R. P. ...* 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.

CHECKED. *He*

Fubergent

NEWFOUNDLAND CONTINGENT.

CREDIT VOUCHER.

WORKING PAY

SHOEMAKER.

No. 1994, Pte. T. Ivany

Period. '26/4/15 to '3/5/15.

Authority. D. O. 1st Battalion, '26/4/15, '4/5/15.

Rate. 50 cents per day.

CERTIFIED CORRECT.



F. H. Marshall
Paymaster & O. 1/c Records.

Ch CHECKED
PAY BOOK *Fubergent*
Date *10/4/17* by *Ch*

Swiney, Chas.

1004

Ray Sept.

STATEMENT OF ACCOUNT

No. 1004Name Journey J

Date.	Particulars	Ch. Nos	Dr.	Cr.	Dr.	Cr.
Sept 29	Pay to date			17 60	17 60	
30	" "			11 20	28 80	
Oct 31	By pay 31 days @ $1 \frac{60}{100}$			49 60	78 40	
Nov 30	" " 30 " @ $1 \frac{85}{100}$			55 50	133 90	
Dec 31	" " 31 " "			57 35	191 25	
Jan 9	" " 9 " "			16 65	207 90	
Sept 27	To pay	8	15 00		192 90	
Oct. 17	" "	25	20 00		172 90	
Sept 7	Balance due to m. 9/5		2 29		170 61	
30	To allotment		13 50		156 81	
Oct 15	To pay	22	20 00		186 81	
31	To allotment		18 60		118 21	
Nov 11	To pay	44	10 00		108 21	
18	" "	48	10 00		98 21	
24	" "		10 00		88 21	
30	To allotment	50	15 00		70 21	
Dec 2	To pay	58	10 00		60 21	
9	" "	64	10 00		50 21	
15	" "	70	10 00		31 61	
31	To allotment		18 60		21 61	
22	To pay	76	10 00		6 61	
28	" "	82	5 00		1 21	
Jan 9	To allotment	9	5 10		8 79	
14	To pay	94	10 00			
Jan 31	By pay 31 days @ $1 \frac{10}{100}$			24 20	15 41	
	To allotment @ 60		12 60		2 89	
	To pay		1 71		1 69	
Feb 28	By pay 28 days @ $1 \frac{10}{100}$			30 50	31 90	
	To allotment @ 60		16 50		15 10	
15	To pay		5 00		10 10	
28	" "		9 00		1 10	
			268 80	262 90	1 10	

Signed AJ Looney SSMO

STATEMENT OF ACCOUNT

No. 1004Name Journey T.

Date.	Particulars	Ch. No.	Dr.	Cr.	Rs.
	Brought forward		268 80	262 90	1 10
Mar 31	By Pay 31 days @ 1 ¹⁰			34 10	35 20
	To Allotment		18 60		16 60
15	To Pay		10 00		6 60
31	" "		5 50		1 10
Apr 30	By Pay 30 days @ 1 ¹⁰			33 00	34 10
	To allotment		18 00		16 10
15	To Pay		5 20		1 10
30	" "		10 00		
May 31	By Pay 31 days @ 1 ¹⁰			34 10	35 20
	To allotment		18 60		16 60
15	To Pay		10 00		6 60
31	" "		5 50		1 10
June 30	By Pay 31 days @ 1 ¹⁰			33 00	34 10
	To Allotment		18 00		16 10
15	To Pay		9 50		8 60
30	" "		7 50		1 10
July 31	By Pay 31 days @ 1 ¹⁰			34 10	35 20
	To Allotment		18 60		16 60
	To Pay		7 00		9 60
31	To Pay		8 50		1 10
Aug 31	By Pay 31 days @ 1 ¹⁰			34 10	35 20
	To Allotment		18 60		16 60
	To Pay		7 00		9 60
31	" "		8 50		1 10
Sept 30	By Pay 30 days @ 1 ¹⁰			32 00	34 10
	To Allotment		18 00		16 10
15	To Pay		7 00		9 10
30	" "		8 00		1 10
			497 20	498 30	1 10

Signed

A. J. J. J. J.

STATEMENT OF ACCOUNT

No. 1004

Name

Journey J.

Date.	Particulars	Ch. No.	Dr.	Cr.	Pa.
	Brought forward		497 20	498 30	1 10
Oct 31	Pay 31 days @ 1 ¹⁰ / ₂			34 10	35 20
15	To allotment		18 60		16 60
31	To pay		7 00		9 60
			8 50		1 10
Nov 30	Pay 30 days @ 1 ¹⁰ / ₂			33 00	34 10
15	To allotment		18 00		16 10
30	To pay		9 00		7 10
			6 00		1 10
Dec 31	Pay 31 days @ 1 ¹⁰ / ₂			34 10	35 20
15	To allotment		18 60		16 60
31	To pay		8 00		8 60
			7 50		1 10
Jan 31	Pay 31 days @ 1 ¹⁰ / ₂			34 10	35 20
15	To pay		7 00		28 20
31	To allotment		18 60		9 60
			8 50		1 10
Feb 28	Pay 28 days @ 1 ¹⁰ / ₂			30 30	31 90
15	To pay		7 00		24 90
28	To allotment		16 80		8 10
			7 00		1 10
Mar 31	Pay 31 days @ 1 ¹⁰ / ₂			34 10	35 20
15	To allotment		18 60		16 60
31	To pay		8 00		8 60
			7 50		1 10
Apr 30	Pay 31 days @ 1 ¹⁰ / ₂			33 00	34 10
15	To allotment		18 00		16 10
30	To pay		9 00		7 10
			6 00		1 10
May 31	Pay 31 days @ 1 ¹⁰ / ₂			34 10	35 20
15	To allotment		18 60		16 60
31	To pay		8 00		8 60
			7 50		1 10
			764 50	765 60	1 10 Cr

31 mod

A. J. J.

STATEMENT OF ACCOUNT

No. 1004Name Journey 1

313/1

Date	Particulars	Ch. No.	Dr.	Cr.	Pa.
June 30	Brought forward		764 50	765 60	1 10
	By pay 30 days @ 1 ¹ / ₂			33 00	34 10
	To allotment 20				16 10
15	To pay		18 00		9 10
30	"		7 00		1 10
			8 00		
July 31	By pay 31 days @ 1 ¹ / ₂			34 10	35 20
	To allotment 60 ⁴				16 60
15	To pay		18 60		9 60
30	"		7 00		1 10
			8 50		
Aug 1	By pay 1 day @ 1 ¹ / ₂			0	2 20
	Bonus			13 70	15 98
	to allowance			25 00	40 98
12	To pay	1057	39 80		1 10
	Wan Service Privilege				
	6 mo. @ \$188 ⁷ / ₁₂			600 00	601 10
	to allowance			85 00	636 10
	Bonus				62 240
Dec 23	To pay	7251	86 40		536 00
Feb 14	To pay	9755	35 00		501 00
Mar 1	"	10812	70 00		431 00
	Id.	2471	30 00		401 00
April 1	To pay S. A.	2970	20 00		371 00
May 1	do	3126	30 00		341 00
June 1	do	3741	30 00		311 00
July 1	do	4194	30 00		281 00
Aug 1	do	4615	30 00		251 00
Mar 1	To pay	30905	249 90		1 10
					br
			1506 40	1507 50	11 10

17/1920

Signed

J. J. J. J. J.



INSPECTOR GENERAL'S OFFICE.

ST. JOHN'S Nov 14th 1919

Forwarded to Jas M. Howley, Captain & Paymaster
of the Royal Newfld Regiment, for his information.

Chas S. Hurrell
Inspector General Constby.

Captain James Howley.,
Royal Newfld Regiment.

Station No 1.

Nov the 13th 18.

Sir

I respectfully report that as directed by you I made inquiries into the circumstances of Mrs Susan Dwyer 98 Springdale Street and found the following she is a Widow 63 years of age and mother of four children three of them are married. Thomas who is her only support is at Present very sick at the Waterford Hall Hospital he was discharged from the Regiments on August the 1st 1918. Before he was discharged she received his allotment which was \$18.00 per month since his discharge she received nothing she is the owner of her house and is living with her married son she has been very sick for the past five months and had to go to an out-patient by order of her doctor to regain her health. She is a Maternity Nurse.

Chas Hutchings Esq R.C.I.P.
Inspector General

herself and when so employed
she earns from \$15.00 to \$20.00
per month but for the past five
months on account of ill health
she have not done any work.
and as her sons allotment is
stoped she finds it very difficult
to live and is in need of some
assistance

Edw. H. L. L.
Constable

SEPARATION ALLOWANCE BRANCH

(Separation Allowance Branch)

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

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

THE PAYMASTER,
Separation Allowance Branch,
St. John's Hospital Rd.

*Recd
1918
Application for
August 1918
What men
any current
1915 to
Aug. 12/1918
1918
1918*

1. Name in full of soldier. **Regt.** **Reg't or Unit.** **Reg't No.**
Soldier
 Thomas Iwamy *Regt 101* *Regt 101* *1004*

2. Age of soldier. **Married or Single.**
 32 *Single*

3. Name in full of mother. **Age.** **Occupation** **Residence Address**
 Susan Iwamy *63* *Midwife* *98 Sprydale St*

4. Give name of your husband. **Age.** **Occupation** **When employed.**
 [Noah Iwamy, deceased]

5. If your husband is not supporting you, state the reason.

6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue)

7. If you are a widow, state date and place of death of your husband. *died St John's 24 Aug. 1903*

8. Have you married again since death of above mentioned husband. *No*

9. Names of your other children. **Address in full.** **Age.** **Occupation.** **Married or Single.**

Edith Hendrickson -	Pt du Chêne N.B.	41	Housewife	Married
Noah Iwamy -	98 Sprydale St St John's	34	Cooper	Married
Laura Garland -	76 Brazil St St John's	33	Housewife	Married

10. State amount earned by (a) Yourself *Probably average \$20 per week*
(b) Your Husband. —
-
11. State amount and source of any other income. *None*
-
12. State value of real property belonging to you and your husband. *^*
-
13. State value of personal property belonging to you and your husband. *^*
-
14. If husband is dead, state value of real and personal property. *1/2 house 98 Spruigdale probable value of interest \$900.*
-
15. Actual amount contributed by soldier during the year prior to enlistment. *Average about \$7 per week*
-
16. Was this amount contributed weekly or monthly. *Weekly*
-
17. Did this amount include payment of son's board, etc. *Board included.*
-
18. State your son's trade or occupation prior to enlistment. *Worked at Revolver Bro & Shoe Fcty*
-
19. State amount of his wages per week. *Earned about \$7.00 per week average*
-
20. State name and address of his last employer. *Wfld. Bro & Shoe Mfg Co 123 Job's Lane, City*
-
21. State amount of monthly support from son since enlistment. *Allotment only*
-
22. State amount of allotment received by you from son monthly. *60¢ per day*
-
23. State from what date did you receive allotment. *7 May 1915*
-
24. Actual amount contributed by other children. *Weekly. Monthly. Nothing*
-
25. Are any of these children in the employ of you or husband. *No.*

26. If not receiving support from other children state cause. Explain fully. Son Noah married, has 3 children, gives me partial board.

27. With whom are you residing at present. Son Noah

28. Have you made a previous claim for Separation Allowance? If not, why? Give particulars. No, know nothing about it.

29. Are you already in receipt of payment from any Patriotic Fund? If so, how much? Have been paid £25 for maternity work

30. Are you already in receipt of Separation Allowance from any source? If so, how much? No

31. Was the soldier at the time of his enlistment an employee of the H.M. Government. No

32. In what capacity and in what place? -

33. Is he in receipt of a salary as such while serving in the Royal H.M. Regiment. If so, how much? No.

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

Signature of the applicant... *Arthur James*

Place of residence... *98 Springdale Street St. John's*

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

this... *fifteenth* day of... *October* 1918

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. *Geo. H. Hill Esq. Not. Pub.*

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

Signature of Clergyman... *W. B. Bugden*

Signature of Representative of Patriotic Fund Committee... *[Signature]*

Approved *[Signatures]*

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name... *Thomas*.... 2. Surname... *Wimsey*.....

3. Rank... *Rt.*..... 4. Regtl. No... *1004*.....

5. Address in full to which future payments of gratuity are to ~~be~~ forwarded..... *98 Spingdale Street*.....

6. Date of enlistment in the Regiment..... *Jan. 26th 1916*.....

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..... *Mrs. Susan Wimsey Spingdale Street*
received my allotment before the Separation Allowance
(see account & receipt?)
Matthew has been issued.

9. Address in full of such dependent..... *Mrs. Susan Wimsey*
98 Spingdale Street

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 Mld. If so, give dates, and particulars of such service.....

..... *not applicable*.....

12. Give total length of time which you served on active service, whether in Mld. or Overseas. *from Jan. 26th 1916*.....

..... *until Aug. 1st 1918*.....

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.....

have received slightly six dollars & forty cents \$ 6.40

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

yes

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

no

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

no

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

no

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

not applicable

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

Aug 11 1918 Medical unfit for further service with the colon

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.....

Bastonnelle, France from Aug 20 1918 Montell May 1914

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

(b). If (a), are you in receipt of full pay and allowances from that Committee.....

no on full pension

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

Signature of Applicant: *Thomas Trimes*

Place of Residence: *98 Spruiddal Street*

Declared before me at: *Saul Sobin's*

This *fourth* day of *March* 19*18*

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

*John Finlow
Barrister at Law
Notary Public*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>6.00</i>	<i>420.00</i>
Certified Correct,			Pymaster,	

November 4th., 1918

Charles H. Hutchings, Esq.,

Inspector General of Constabulary,
City.

Dear Sir:-

Will you kindly furnish
me with report of the circumstances of Mrs. Susse
Iveny of 98 Springdale Street.

Yours faithfully,

Captain & Paymaster.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$249⁹⁰

Mar 1 19 20

Received from the First Newfoundland Regiment
the sum of two hundred & forty nine ⁹⁰ Dollars.
~~on account~~ of Pay. W. S. L.
balance

Thomas Irimley

Ck. No.	30905	Initials.	T. I.
Pay Ledger.	313	Initials.	W. S. L.
Gen. Ledger.		Initials.	

Att. No. 10014 Rank Plt

No. 1004

Rank

Pt

Name

J. L. Vany

1918-1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 39⁰⁰/₁₀₀

Aug 12th 1918

Received from the First Newfoundland Regiment
the sum of thirty nine ⁰⁰ Dollars.
~~the amount~~
balance of Pay.

Ch. No. 1057	Initials E.W.
Pay Ledger 142	Initials W.H.
Gen. Ledger	Initials J.

Regtl. No. _____ Rank _____

No. 1004

Rank

PL-

Name

Jamy J.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰/₁₀₀

Feb 14 1919

Received from the First Newfoundland Regiment
the sum of Thirty Five ⁰⁰/₁₀₀ Dollars.
~~on account~~ of Pay. Clothing

Thomas Jimmy

Ch. No.	9755	Initials.....	EW
Pay Ledger.....	313	Initials.....	W.P.
Gen. Ledger.....		Initials.....	

Regtl. No.

Rank
J. C. P.

No. 1004

Rank

Pt.

Name

Jermey, J.

JOHN FENELON

BARRISTER, SOLICITOR AND
NOTARY PUBLIC

CABLE ADDRESS
"MEMOR", NEWFOUNDLAND

BANK OF MONTREAL BUILDING

ST. JOHN'S, NEWFOUNDLAND

March 1st 1920

Mr. Thomas Lundy

Esq.

Dear Sir,

I beg to confirm the purchase on
your account for \$1000⁰⁰ of the
freehold house belonging to Mrs. Angel
situated on Alexander Street, St. Johns,
as arranged with Mr. Fred J. Rail
on Saturday last.

Yours truly

John Fenelon

To C.D.
1004
Rec. Lundy was paid
Service gratuity be paid
P.M. W.T. Parsons
Authorized
W.F.F.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Thos Griny, Regl. No. 1004

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

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>955</u>	<u>Mother</u>	<u>Mrs Susan Griny</u>	<u>98 Spriggdale City</u>	<u>60</u>
Total Allotment, \$				

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

(Sig.)

Officer Commanding

Company

(Sig.)

(Rank)

MAR - 8 1915

August 17th.1918.

Pte. T. Ivamy,
Convalescent Home,
Waterford Bridge Road,
City.

Dear Sir,-

I beg to enclose herewith cheque for \$39.80,
being the amount due you (including Bonus & Clothing) to
the date of Discharge.

I also enclose Certificate of Discharge, dated
August 1st.1918 together with special form, which kindly sign
and return to this Office.

Yours faithfully,

Capt. & Paymaster &
Officer i/c Records.

Encl. 3.

J/H.

C.R. 1004

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1004 Name Thomas Quimby

Witness. A. G. Jones

Date Feb 9th. 1920

Place St. John's

C.R. 1004

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 STAR.

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

Name..... *J. Finley*

Date.....

Place.....

Please sign, and return to Dept. of MILITI A.

CIRCULAR LETTER

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

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

W. P. Rendell
Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue, having served on* *Gallipoli, Mudros* from *Sept 19th* 1915 to *Jan^y* 1916.

(Date). *33/3/17* (NO). *1904*. (Rank) *Pte.* (Name) *W. P. Rendell*
(Place) *St. John's.*

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

Δ 1004

ST JOHN'S, NEWFOUNDLAND.

August 13th, 1918.

To C.O.,
Royal Newfoundland Regiment,
Headquarters.

SIR:

The undermentioned men have been discharged
on the dates given.

Kindly note and post in Daily Orders Part II.

I have etc.

(sgnd) J.M. HOWLEY,
Capt. etc.

2188	Pte. Fenney, J.	23-7-18	Med. Unfit
1653	" Brake, E.	Do.	Do.
1778	" Goulding, A.	Do.	Do.
694	Cpl. Barrington, W.	Do.	Do.
2960	Pte. Heulton, J.A.	9-8-18	Do.
5244	" Parsons, H.	Do.	Do.
1904	" Iviney, Theo.	1-9-18	Do.

August 10th 1918

From :- Officer Commanding Depot.
To :- Paymaster and Officer i/c Records
Dept. of Militia.

1004, Pte. T. Ivory.

Above mentioned man was recommended for discharge as permanently unfit by Medical Board held on July 31st 1918. ~~I am sending him herewith for your attention and necessary action, please.~~

His account has been cleared up to and including July 31st. 1918. He has an allotment current of sixty cents per day.

C.R. 1004

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

1004 Pte. T. Ivany,

Discharged 1-8-18, Medically unfit

GR 1004

Extract from Daily Orders Part 11 Unit The Royal
Hfld. Regt. St. John's, 1918 August 9, 1918.

1004, Pte. Ivamy, T.

Having been found Medically unfit are struck off strength
from 1/8/1918.

St John's, Newfoundland.

August 6th, 1918.

The O.C.

Royal Newfoundland Regiment.

Headquarters.

Sir :

The undermentioned men have been discharged on the dates given :

Kindly note and post in Daily Orders Part II.

I have the honour to be,

Sir :

Your obedient servant.

(SGD). J.M.HOWLEY.

Capt & Paymaster &
Officer i/o Records.

NO. 2620.	Pte.	Gulliver.R.(Beatt).	August 1st/18.	Med Unfit.
NO. 2567.	"	Chauk.L.	do	do
NO. 1352.	"	Strumell.R.	do	do
NO. 3397.	"	Dart.R.W.	do.	do
NO. 613.	"	Koess.H.J.	do	do
NO. 1112.	L/C.	Knight.J.M.	do	do
NO. 3467.	Pte	Juko.P.	do	do
NO. 1004.	"	Ivenoy.T.	do	do
NO. 3325.	"	Baldwin.W.	do	do
NO. 1935.	"	Fennell.L.M.	do	do
NO. 1553.	"	Hillier.R.	2nd.	do
NO. 1505.	"	Haines.E.G.	do	do
NO. 72.	"	Heardigan.J.	do	do
NO. 2334.	"	Jones.H.	do	do
NO. 2145.	Cpl.	Stick.M.	do	Escaped P.O.W.



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S. NEWFOUNDLAND.

April 6th., 1918

From:- D. M. S.
To:- O. C. Depot.

1004, Pte. Ivimey, T.

The marginally noted man was admitted to
the Naval & Military Convalescent Hospital April 4th.

Cluny Macpherson
Major, D. M. S.

Copy to Paymaster & Officer i/c Records.

COPY.

January 19th. 1918.

From:- D. M. S.

To:- Adjutant, Depot.

1004 Pte. T. Ivimey.
28 Springdale Street.

833 Pte. G.B. Snow.
183 Water St. East.

The Naval and Military Convalescent Hospital is at present full, and the marginally noted men will be notified at the addresses given when there is a vacancy.

Signed, Cluny MacPherson,
Major, D.M.S.

Jan 18th

S.

From Adjutant Depot.
To D. H. S.

1004 Pte T. Ivany

836 Pte G. Snow

Marginally noted men were recommended for admission to M.H.C.H. by Medical Board held on 18-1-18. I am sending them herewith for your attention and necessary action please.

C.R. 1004

NEWFOUNDLAND CONTINGENT?

Extract of Casualty List received from P. & R.O. May 21st 1916.

1004 Pte T. Ivimsy.

1/Newfoundland AppendicitisTo Eng. per H.S. Asturias ex 16 GEN.H.
13ht May 1916.

M

May 18, 1916.

Dear Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1004, Private Thomas Ivimey, has been admitted to the Third London General Hospital, Wandsworth, suffering from appendicitis.

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

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

Yours faithfully,

Colonial Secretary.

Mrs. Susan Ivimey,
98 Springdale St.

C.R. 1004

EXTRACT OF CASUALTY LIST RECEIVED MAY 17, 1916

1004 Pte T. Ivimey.

3rd London Gen. Hospital Wandsworth. May 15th 1916. Appendicitis.

C.R. 1004

Extract of Casualties received from Pay & Record Office
London dated May 15, 1916.

#1004 Pte. T. Ivimey,

1st Newfoundland Regiment.

Appendicitis.

Admitted 16th General Hospital, Le Treport May 6, 1916.

C.R.

1584

Extract from Daily Orders part II, Unit
the Royal Newfoundland Regiment, dated
May 20th. 1916 from 3rd. Echelon, B.E.F.

1004 Pte. T. Ivany.

Inv. to Eng. H.S. DIEPPE 10/5/16.

February 8, 1916.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, Bandon, to the effect that No. 1004, Private Thomas Ivamy, who was reported at Convalescent Depot, Mudros West, on December 4th, suffering from jaundice, was discharged to Base Depot, on December 11th.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mrs. Susan Ivamy,
93 Springdale Street.

February 1, 1916.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1004, Private Thomas Ivamy, who was reported at Madres on November 30th suffering from jaundice, was transferred to Lewland Convalescent Depot on December 4th.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mrs. Susan Ivamy,
96 Springdale Street.

January 20, 1916.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1004, Private Thomas Ivamy, who was reported at Suva on November 26th suffering from jaundice, serious, was admitted to First Canadian Stationary Hospital, Madras West, on November 30th, suffering from jaundice.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mrs. Susan Ivamy,
98 Springdale Street.

C.R. 1004

Extract of Casualties received from Pay & Record Office,
London, dated January 8th, 1916.

#1004 Pte. T. Ivimey. ✓

Jaundice.

Admitted Lowland C.D. Mudros W. 14th December 1915.

NEWFOUNDLAND CONTINENT

Extract of Casualty List received from P.&R.O.
January 8th 1916.

1004, Pte. T. Ivimey.

1st Newfoundland Regiment Dis to Base Dep. ex Lowld CO
St. Mudros W. 11 December 1915.

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

January 2nd. 1916.

1004, Pte T Ivimey.

Newfoundland Btn. Jaundice Trans. to Lowld. C.D. ex 1 Can. SH.

Mudros West 4th December 1915.

C.R. 1004

Extract from Casualties received from Pay & Record
Office, London, dated December 27, 1918.

#1004 Pte. T. Ivaney. ✓

Jaundice.

Transferred ex 54 C.O.S. Bulva 1st, December 1918.

2
1 (2)

December 24, 1915

Dear Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1004. Private Thomas Ivany, was admitted to Fifty-Fourth Casualty Clearing Station, Seville, on November 26th, seriously ill of jaundice.

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,

Mrs. Susan Ivany,
98 Springdale Street.

Colonial Secretary

C.R. 1004

Extract of Cablegram received from London, dated
December 24, 1915.

#1004 Pte. Ivimy. ✓

Jaundice seriously ill at 54 Casualty Clearing Station,
Suvla November 26th.

C.R. 1004

Extract of casualties received from Pay & Record Office,
London, dated December 23, 1915.

#1004 Pte.. W. Ivimey.

~~XXXXXXXX~~

Jaundice, Admitted 1st Canadian Stationary Hospital, Mudros
Westp 30th November 1915.

C.R. 1004

Extract from Casualty list received from Pay & Record Office,
London, dated December 22, 1915.

#1004 Pte. T. Ivimey.

Jaundice.

~~Severely~~ severe.

Admitted 54 Casualty Clearing Station, Sulva, 26th Nov. 1915.

C.R. 1004

Extract from list of sick and wounded N.C.Os and men of the
Expeditionary Force - Mediterranean. Dated Jan. 8th 1918.

List.No. H.4659.

1004 Pte.Ivimey, T.

Jaundice.....Adm.Lowland C.D.Madros.W. 4th Dec.15.

C.R' 1004

Extract from Nomina ^{of} "D" Co. 1st Bn. MFLA.
Regt. embarked at Devonport for Active Service, 30-8-15.

1004 Pte. J. Ivimey.

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

C.R. 1004

Extract from Nominal Roll of Draft embarked for Overseas per S.S.

Stephane March 20th 1915.

No. 8. Platoon.

Pte. 1004 F. Ivinsky.

C.R. 1004

Thomas Iviney was attested for General service
with the NEWFOUNDLAND REGIMENT on Jan. 26th 1915.
Regimental No 1004 was allotted to Pte. Thomas Iviney.

AUTHORITY:

Record Ledger,

Depts of Militia,

March 25th. 1919.