



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. *5185*

Name *Thomas Shea*

R.O.

Corps

Questions to be put to the Recruit before Enlistment.

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

I, *Thomas Shea*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Thomas Shea SIGNATURE OF RECRUIT.

5 Oct 31/16

Thomas Shea Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Thomas Shea*, 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 was made and signed the declaration and taken the oath before me at *Ortery* on this *31* day of *Oct* 191*6*.

Signature of Attesting Officer *[Signature]*

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the:

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

Date 191*6* } Approving Officer.

Place

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

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

3185



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. *3185*

Name *Thomas Shea* Corps *Ab.*

Questions to be put to the Recruit before Enlistment.

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

I, *Thomas Shea*, do solemnly declare that the above answers made by me to the above questions are true and that I am willing to fulfil the engagements made.

Thomas Shea SIGNATURE OF RECRUIT.
S. O'Leary Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Thomas Shea*, 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 reported, and the said recruit has made and signed the declaration and taken the oath before me as follows:
on this *5 Oct 16* day of *October* 191*5*

Signature of Attesting Officer *J. H. Knight*

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

Date..... 191*5*
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).....



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Thomas Shea
aged 19 years conducted at OKB
Date: Oct 3/16 Recruiting Officer:

NO OF TEST FINDING

- 1 nd
- 2 nd
- 3 nd
- 4 nd
- 5 nd
- 6 nd
- 7 yes
- 8 yes
- 9 nd
- 10 n
- 11 n
- 12 n
- 13 n
- 14 n
- 15 n
- 16 n
- 17 n
- 18 n
- 19 6/16 1/2 pt.
- 20 n
- 21 n
- 22 n
- 23 n
- 24 n
- 25 n
- 26 n
- 27 n
- 28 n
- 29 n
- 30 n
- 31 n
- 32 n

218

5-8
walk
\$14.00 31-34/20
marks for Reddi Shea
parents

Signature of Medical Examiner:

Forbay
W. Burden
Leighton

C.R. 3185

Extract from Daily Orders part II, Depot St. John's
dated March 15th., 1919.

The discharge of the undernoted on demobilization has
been ^{Confirmed} approved by Officer i/c Records on 12-3-19.

3185 Pte. Thos. Shea.

C.R. 3185

Extract from Daily Orders part 11, Depot St. John's dated Feb. 28/1919.

The discharge of the undernoted on demobilization have been
APPROVED by Officer i c Records on 26-2-19.

#3185 Pte. Thos. Shea.

C.R.

3185

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. 11-2-19.

The Undernoted returned from Overseas and reported to
Depot 7-2-19.

Repatriated on a/s of Demobilization.

3185 Pte. Thos. Shea.

C.R. 3185

Extract from Hospital Roll of The Royal N.S.W. Regt.
~~.....~~
Richard S.S. Jarvis, Jan. 30th, 1919.

3185Shea.

C.R. 3185

Extract from Nominal Roll of the Royal MFLd.

24-1-19.

The undermentioned who was transferred
from B.E.F. to the 2nd Bn., Winchester 19-1-19
awaiting Repatriation.

3185 Pte. T. Shea,

C.R. 3185

9 November 1916.

Sir.

With reference to your letter of the 31st ultimo on the subject of Thomas Shea, I am directed by His Excellency the Governor to inform you that the matter was referred to the Officer Commanding Headquarters for disposal who reports, under date 8th instant as follows:-

" Pte. Thos. Shea enlisted Oct. 31st giving his age as 19 years. He is making an allotment of seventy cents (70¢) per day to his mother."

I have the honour to be,

Sir,

Your obedient servant,

Revd. John J. St. John P.P.
Holy Trinity Presbytery,
Torbay.

Private Secretary.



P.S.
Please send out the copy

W. P. S.
8-11-16

1st Newfoundland Regiment

HEADQUARTERS

St. John's, Newfoundland,

November 8th. 1916. 191

From Officer Commanding,
Depot.

To Governor.

Sir,

Private Thos. Shea enlisted Oct. 31/16, giving his age as 19 years. He is making an allotment of seventy-cents (70¢) per day to his mother. I return letter from Rev. J. J. St. John.

I have the honour to be,

Sir,

Your obedient servant,


MAJOR
Commanding Depot,
First Newfoundland Regiment,
ST. JOHN'S, N.S.

C.R. 3185

INVIOLABLE
OFFICER Commanding,

Headquarters.

FINEN BOND
I annex a letter received from Revd. J.J. St. John
P.P. Torbay on behalf of Mrs. Shea of that place
asking that her son Thomas Shea should be released
from his obligation.

For Disposal.

I have little doubt that the assignment from pay
would help the mother more than his earnings.

Governor.

6 Nov. 1916.

O.C. Orders for disposal.

I have little doubt that the assignment
from pay would help to ^{Thomas his earnings} ~~mother~~ ^{W.S.D.} ~~more~~
To his Excellency, the Governor. 5-11-16

Sir, May it please your Excellency

Mrs. Shea of Torbay complains
that her son, Thomas, has gone and joined
the Volunteers without her knowledge and
against her will. Her son Thomas is
her only support and she cannot manage
without him. Her husband has been
ailing the past nineteen years and
she struggled hard to keep the pot
boiling until her son should become
able to earn

Mrs. Shea humbly begs that your
Excellency will be pleased to release her

son from any obligation he may
have contracted and return him to
her.

Joining my voice to the prayer
of her petition

I have the honor to be

Your Excellency's faithful servant

Holy Trinity Presbytery

TORBAY.

NEWFOUNDLAND

OCT. 31st 1916.

John J. St. John P.P.

C.R. 3186-

Extract from Nominal Roll of Draft No.25: Embarked Southampton 11/6/17
from 2/1st Newfoundland Regiment Newton-on-Ayr, to 1/1st Newfoundland
Regiment B.E.F.

3185 Pte. Shea, T.

M.P.

C.R. 3185

Extract from Nominal Roll Draft Embarked St. John'S

Per S.S. "GRAMPIAN" 31/1/17 sailed Halifax 16/4/17.

3185 Pte. T. Shea.

C.R.

3185

Extract from Daily Orders Part 11 Unit ~~at~~ the Royal Mfld.
Regt., St. John's, Nov. 9th, 1916.

3185 Pte. T. Shea

Attached to the Strength from Oct. 31st, 1916.

EXTRACT FROM STATEMENT OF ACCOUNT TO 30-1-19 FROM PAY AND

RECORD OFFICE, LONDON

3185 Pte. Shea, T.

Dr. Bal. 24-8-0

plus 1 day's pay (31-1-19)

This transferred to Pay Office 9-4-19

215 A

Feb. 18 9

- 1 Suit Underwear.
- 1 Top Shirt
- 1 Pair Boots
- 1 " Socks.
- 1 Hat Bag
- 1 Great Coat.

} for \$35.00. Acas. Thomas.

J. Shea

3185

P. + R. Q



3 1st. NEWFOUNDLAND REGIMENT / 6

ALLOTMENTS

I, Thomas Shea, Regl. No. 9185

hereby agree, until further notification by me, and in similar official form to make an Allotment of 70 Dollars and 00 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.:

Allotment begins Nov 1/16.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
		Mrs Alice (Edwards) Shea.	Portbay.	70
Total Allotment, \$				

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.) Charles Ayré Capt.
 Officer Commanding
J. J. Jones Company
Nov 8 1916.

(Sig.) Thomas Shea
 (Rank) Private
John Matthews

86
40
3040

No. 3185 Rank Plt Name Shea J.

Pay I.P.A.	100	40	Total	140
Leas. Allowment		70		70
Net Rate		40		40

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance					Balance							619 10
Acquittance Rolls			3	98	Pay @ Net Rate	22 ³ / ₁₈	27 ³ / ₁₈	6	40	34 40		7 14
Hospital Advances			2	79	Ration accu							1 4 6
A.B. 64. 65 francs.												
P.&R.O. Payments												
<u>6178</u> Cash (5-13-8)	17/18	8		100	8-10-0	18 ³ / ₁₈	23 ³ / ₁₈	6	40	240		9 10
" 6218	25 ³ / ₁₈	1		50		24 ³ / ₁₈	26 ³ / ₁₈	3	40	120		4 11
14-7-4 E.F.M. wages				29		27 ³ / ₁₈	28 ³ / ₁₈	2	40	80		3 3
15-15-4 Cash 6258	26.3.18	0		50								
" 6274	28/1/18			7								

~~15-5-8~~
15-15-6
~~16-0-5~~
16-3-8

7

WESTERN UNION

ANGLO-AMERICAN  DIRECT UNITED STATES
CABLEGRAM

Prefix _____ WORDS <u>13</u> / Code _____ CHARGE _____	SENT At _____ To _____ By _____	FOR STAMPS THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.
--	---------------------------------------	--

17/3/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM EDWARD SHEA

TORBAY (Newfoundland)

PLEASE CABLE THIRTY DOLLARS THROUGH MINISTER MILITIA

3185 SHEA

Handwritten:
 13
 2 1/2
 2 1/2
 2 1/2
 3 2 1/2
 2 1/8 1/2 ✓

Stamp: CHECKED
 17-3-18

Stamp: CHARGED
 PAY BY Shea
 Date 18/3/18 by J.R.B.

Handwritten:
 Charge to
 3185 Shea

Authorised.

**NOT TO BE
TELEGRAPHED.**

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

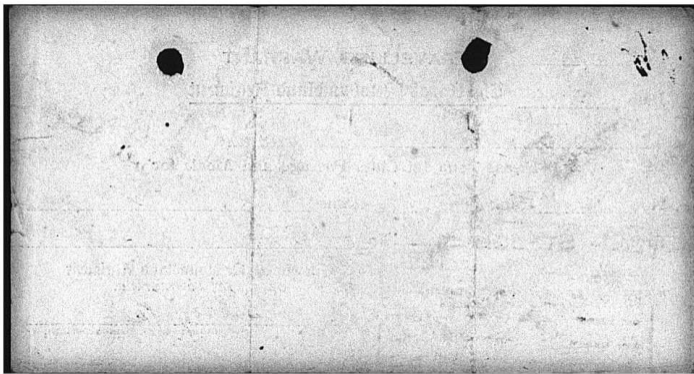
Signature _____ Address 58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

Shea, Thomas,

3185

Pay Dept.



No. 13

TRAVELLING WARRANT

Date 6-2-19 The Royal Newfoundland Regiment

Mailman P. Butler

*Pt Butler
mark
200
St John's*

Please issue 1st Class Passage and Meals for

No. 3155 Rank Pte Name Has Shea

From ST. JOHN'S To Torbay

CH. NO 9959 INITIALS _____

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S N.S.

PLEASE QUOTE THIS WARRANT NUMBER ON STATEMENT AND MEAL CHECKS

PAY ORDER INITIALS _____

CASH ORDER INITIALS _____

W.S.A.

[Signature]
SIGNATURE OF ISSUING OFFICER,

The Royal Newfoundland Regiment

Class for Demobilization: 7
6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 18.2.19

Regimental No. 3195

Name Smith Thomas 96

Address

Present Medical Category A.I.

Recommended for:— (a) Immediate discharge

(b) ~~Standing~~ Medical Board

Members of Board

R.H. Last Capt.
O.C. Discharge Depot.

H. Storer
Senior Medical Officer

Geo. Burden
M. O. Depot

March 12, 1919

#3185 Pte. Thomas Shea,

Torby,

St. John's Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 1154."

Yours truly,

Captain,
Paymaster & C.i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3185 Rank Pte. Name Shea Thos
 Intended place of residence Dorbay St Johns
2. Occupation Labourer
 Classification of soldier E Medical Category AE
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 Johns
 Date FEB 25 1919 W. H. S. Capt
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
- Place and date ST. JOHN'S
26. 2. 19
- SUBJECT TO ADJUSTMENT OF OVERLEAF PAY ETC.
Thos Shea
 Signature of soldier
R. H. S. Capt
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
- Place and Date ST. JOHN'S
26. 2. 19
- Thos Shea
 Signature of soldier
W. J. G. Capt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 31-10-16 No of days on Military
 Discharged from service 26-2-19 Plus 14 days Service 863

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S
FEB 26 1919
- R. H. S. Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St Johns
March 12/1919
- M. H. S. Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment

1
30
31
31
28
12
133

H. B. 2079/1341

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3185 Rank Plt Name Alfred Thomas
 Date of Enlistment 31.10.16 Address St. John's District St. John's
 Occupation Labourer Classification for Discharge F.F. Medical Category F.F.
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 25.2.19

W. M. M. Capt
D. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

i. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 26-2-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
 (b) Clothing Supplied Joseph A. Lawrence

Date 26-2-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 9183 to his home at 20 Bay and Release Certificate No. 1236 issued.

Date 26-2-19 OSDicks Off
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 12-3-19

Date 26-2-19 W. H. Capt.
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 26.2.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	1 Frank
B 178a	D 400A	B 1915	do 2nd	" 3	2
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2	<u>1176</u>	" 6	
B 179c	B 120	M 93			

Date 26.2.19 OSDicks Off
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

FEB 26 1919

Date R. H. Sait Capt.
O. C. Discharge Depot.

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

Date

✓
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... *Shea*

3. Rank... *Private* 4. Regtl. No. ... *3185*

5. Address in full to which future payments of gratuity are to ~~be~~ forwarded... *Thomas Shea Torbay*

6. Date of enlistment in the Regiment... *27 Oct. 1916*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge...
Mrs. Alice Shea

8. Relationship of such dependents... *Mother*

9. Address in full of such dependent... *Mrs. Alice Shea Torbay*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

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

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *2 years and 4 months*

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

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. *£100*

15. Have you been issued with a War Service Badge? *No*

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? *No*

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

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

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 Aug 16th 1917. Oct 9th 1917. Nov 20th 1917.
April 14th 1918. Sep 28th 1918. Oct 14th 1918.*

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

(b). If so, are you in receipt of full pay and allowances from that Committee. *No*

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

Signature of Applicant:

Thomas. Shea

Place of Residence:

Toronto

Declared before me at:

St. John's, Nfld.

This *12th.* day of *March 1919*

1919

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

John McCarthey

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>5 mos.</i>	<i>350.00</i>
.....
.....
Certified Correct.			Paymaster.	

REPRODUCED FROM ORIGINAL RECORDS

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 take a position as labourer

Thomas ^{his} Shea
made Signature of Man.

Reg. No. 3185

J. Butler

Signature of the Vocational Officer or his Representative.

Place St John's nfld

Date Feby 26th 1919

SEPARATION ALLOWANCE.

Claimant Alice Idee (Mother)

On account of Thomas Idee No. 3188 Rank Pvt.

Decision Approved

~~Witness of~~
W. F. Kendeel Capt. Co.
W. Bowley Major

Date Dec. 10/1919

Instructions

Allotment of 70⁰⁰ per day payable to Alice Idee
his mother from 1/11/16 to 12/31/19
Discontinued on account of being discharged

3786

W. F. Kendeel Capt. Co.

#568⁰⁰/₁₀₀

NOTICE.ROYAL NEWFOUNDLAND REGIMENT.WIDOWER.

(Separation Allowance Branch)

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

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

"The Paymaster"
Separation Allowance Branch,
St. John's, Nfld.

1. Name in full of soldier. Rank. Reg't. or Unit. Regt. No.
Thomas Shea *Cte.* *Royal N. F.* *3185*
2. Age of soldier. Married or Single.
22 *Single*
3. Name in full of mother. Age. Occupation. Permanent Address.
Alice Shea *50* *Torbay*
4. Give name of your husband. Age. Occupation Where Employed.
Edward Shea *65* *—* *Invalid*
5. If your husband is not supporting you state the reason.
Incapacitated being a chronic invalid
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.
—
8. Have you married again since death of above mentioned husband?
—
9. Names of your other children. Address in full. Age. Occupation Married or Single.
Anastasia Shea *Torbay* *19* *Washing Machine* *Single*
Annice Shea *16* *Widow's job*
William Shea *12* *Elementary School*

10. State amount earned by (a) Yourself *60¢ Wk. 2/-*
 (b) Your husband. *Nothing*
-
11. State amount and source of any other income.
-
12. State value of real property belonging to you and your husband. *a bit of ground and tenement house*
-
13. State value of personal property belonging to you and your husband. *A small farm*
-
14. If husband is dead state value of real and personal property left by him.
-
15. Actual amount contributed by soldier during the year prior to enlistment.
-
16. Was this amount contributed weekly or monthly. *according as he got work*
-
17. Did this amount include payment of son's board, etc. *Yes*
-
18. State your son's trade or occupation prior to enlistment. *Fisherman and labourer*
-
19. State amount of his wages per week.
-
20. State name and address of his last employer.
-
21. State amount of monthly support from son since enlistment. *Twenty one dollars and seventy five cents per month \$21.75*
-
22. State amount of allotment received by you from son since enlistment.
-
23. State from what date did you receive allotment?
-
24. Actual amount contributed by other children. *Nothing* Weekly Monthly.
-
25. Are any of these children in the employ of you or your husband?
Both in help at home.

24. Is not receiving support from other children, state cause. Explain fully.

27. With whom are you residing at present? *With husband and children*

28. Have you made a previous claim for Separation Allowance. If not, why? Give particulars. *No. Did not know separation allowance existed*

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

30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much? *No.*

31. Was the soldier at the time of his enlistment an employee of the Nfld. 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 Newfoundland Regiment? If so, how much. *No.*

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

Signature of Applicant..... *Charles S. Sh...*

Place of Residence..... *Torbay*

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

this *18th* day of *October* 191*9*

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. } *Chas. O'Neill Curry Notary Public*

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..... *Rev. John Ashley, P.P.*
Signature of member of the Patriotic Fund Committee..... *H. T. Donahue, M.P.; W. B. Burke; Henry Seay, P.M.*

MEDICAL CERTIFICATE.

For Information of Separation Allowance Department.

1. Name and regimental number of soldier in respect of whom Separation Allowance is claimed } *Pte. Thomas Shea*
3185
2. Name and age of said soldier's father or other relative. } *Edward Shea - age 65.*
3. Is said father or other relative a chronic invalid and totally incapacitated. } *Yes.*
4. Of what nature is disability ? } *Chronic asthma*
5. From what date has this total incapacity been existent ? } *Twenty years.*
6. How long is total incapacity likely to continue and what will be the effect on earning power. } *Until death.*
7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced and from what date. } *Totally incapacitated*
8. Are you the regular attending physician ? } *Yes.*
9. Relationship to soldier of applicant ? } *Father.*

I certify that the above statements are correct.

Forbay Place,

Oct. 15th / 19 Date.

..... *H. T. Donahue*
Physician.

*OK
W. J. Parsons*

Dec.17,1919

Mrs. Alice Shea,
Terbury.

Dear Madam:-

Referring to your
application for Separation Allowance, I
beg to state that same has been granted,
and I enclose cheque for Five hundred
and sixty eight dollars (\$568.00) in
payment of same.

Yours truly

Major

Paymaster.

May 14th 1920

Major Howley
O. I. C. Records

Please pay to T. Shea, 3185
the sum of sixty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment C ommittee

\$60.00

Pension

Nil

J. C. Howland

Shea

Vocational Officer

ACCOUNT	
CHK. NO. 37560	INITIALS J.C.H.
INV. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Spet 6 1920

Major Howley
O. I. C. Records

Please pay to Mrs Alice Shea
the sum of one hundred eight dollars and sixty cents
in payment of arrears of allowance due on A/ct . T. Shea 3185
and charge same to Civil Re-establishment Committee

\$108.60

ACCOUNT _____	INITIALS _____
CHK. NO. <u>2284</u>	INITIALS _____
INL. LEDGER _____	INITIALS _____
PAY LEDGER _____	INITIALS _____
GEN. LEDGER _____	INITIALS _____

J.B.A.
W. B. McNeill
Vocational Officer

Alice Shea

No. R 13

TRAVELLING WARRANT

\$ 00 / 00

Date 6-2-19

The Royal Newfoundland Regiment

Maitland

ASBEST	<u>Jans</u>
OR. NO.	<u>10034</u>
INITIALS	<u>EW</u>
IND. LEDGER	_____
INITIALS	_____
PAY LEDGER	_____
INITIALS	_____
ISS. LEDGER	_____
INITIALS	_____

Please issue 1st Class Passage and Meals for

No. 3115 Rank Pte Name John Street

To - **ST. JOHN'S** - From Port

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S, N.F.

PLEASE QUOTE THIS WARRANT NUMBER
ON STATEMENT AND MEAL CHECKS

The Major

W.P.A. [Signature]

SIGNATURE OF ISSUING OFFICER.

Reg. No. *3181* Rank *Pte* Name *Shea, Thomas*
Attested Address *Lorhay*
Allotment Allottee
Date of Allotment Returned from Overseas *2-79*
Embarked for Overseas Cause *Discharge*

FEB 25 1919 PASSED TO DEMOBILIZATION OFFICER

26-2-19

DISCHARGE APPROVED ON DEMOBILISATION.

Casualty Form—Active Service.

Regiment or Corps Newfoundland

Rank Pvt. Surname Shea Christian Name Thomas

Religion Roman Catholic Age on Enlistment 19 years — months.

Enlisted (a) 31.10.16 Terms of Service (a) Duration Service reckons from (a) 31.10.16

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
or Corps Trade and Rate _____

Sabauer _____ Signature of Officer. B. J. Frost

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked <u>Shampton</u>	<u>11.6.17</u>	
			Disembarked <u>Rouen</u>	<u>12.6.17</u>	
			Joined Battalion	<u>2 JUL 1917</u>	<u>B 213</u>
<u>11.8.17</u>	<u>87 F.A.</u>	<u>Ad. Stra. Wal. Eye "S" 14 B.R.A.</u>		<u>11.8.17</u>	<u>E.D. 8977</u>
<u>18.8.17</u>	<u>88 F.A.</u>	<u>Discharged to Duty</u>		<u>16.8.17</u>	<u>E.D. 9562</u>
		<u>WITH. En. 30-13-17.</u>			
		Transferred to U. K.			
		<u>for Re-patriation</u>			<u>Part 2 of</u>
					<u>Caps for Lt Col</u>
					<u>Not Infantry Section</u>
					<u>C.H.O. 2nd Echelon</u>
		<u>mt</u>			

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
29.

Number of Sheets *1354*
Signature of O. C. Company *Chas. C. C. Capt.*

Regiment of *1st Newfoundland*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>3785 Shea J.</i>	Age on	19 years - months	<i>Labourer</i>	
Joined	Date	Place and Date of Enlistment	<i>St. John's Mt. 31.10.16</i>	Religion	
Joined	Date	Period of	with Colours <i>2 2/3</i> years.	Place of Birth	
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized St. John's 12⁵/₁₉</i>					
				To be carried over					

Army Form B. 121.

The Royal Newfoundland Regiment

9/31/85

DEMobilIZATION OF

Reg. No. 3186 Rank Pls Name Shea Thomas
 Date of Enlistment 31.10.16 Address Parboy District St John's
 Occupation Labourer Classification for Discharge FE1 Medical Category FE1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	1	Board 1st	" 2	
B 178a	1. D 400A	1. B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2		11782	" 6	
B 179c	B 120	M 93				

Date 25.2.19

O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 26-2-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00(b) Clothing Supplied Joseph BrownDate 26-2-19

O i/c. Re-clothing.

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 3185 Rank Pte Name Shea Thomas

Former Occupation Labourer Address Torbay District St Johns

Class E Medical Category A1 Disability Rating

O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Student His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 26-2-19

To be forwarded Orderly Room in Duplicate.

Joseph A. Lawrence
Demobilization Officer

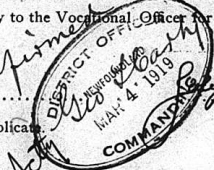
The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 3185 Rank Pte Name Shea Thos
 Former Occupation Labourer Address Torbay District St Johns
 Class E Medical Category A1 Disability Rating
O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Student..... His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 26-2-19 Confirmed
 To be forwarded Orderly Room in Duplicate.



Thos Shea
 Demobilization Officer



Descriptive Return of a Soldier Discharged on Account of Disability.

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. I. C. Records together with the remainder of the man's documents.

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

Name in full

Thomas Shea

Regiment from which discharged

Royal Newfoundland

Regimental number

3185

Intended address

Torbay.

Height on discharge

5 Feet 9

Color of hair on discharge

Black

Complexion

Fair

Color of eyes

Grey.

Descriptive Marks

—

Figure on discharge

medium

Christian name of Father

Albert

Christian name of Mother

Alice

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

Torbay N. 2. 1897

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)

Thomas Shea witness
marks *Baruchal* (Rank) *Plt*

Station

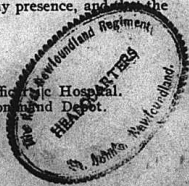
S. John's

Date

18. 11. 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, Hospital,
 Unit, or Command Depot.



Station

Date

War Veterans Allowance

Name:

Thomas Shea

No:

3185

1. THEATRES OF SERVICE

(1) South African War

Date and port of disembarkation:

(2) World War I

Wfld U.K. France

IF CANADA
AND
U.K. ONLY

} Date(s) disembarked in U.K.

} Date(s) S.O.S. in U.K. for Canada

} Period(s) of desertion in U.K.

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments:

31 October 1916 St. Johns. Wfld.

3. Date of all discharges and reason:

12 March 1919. Demob.

4. Date and place of birth as per
attestation paper:

15 February 1897. Torbay. Wfld.

5. Marital status: If married,
name in full of wife:

Single

6. Any other military service:

Nil

7. Decorations, if any.

Nil

St John's Wfld.

1/8/58

Clerk's Initials: