

# First Newfoundland Regiment

## ATTESTATION PAPER

Regimental No. 864

Name in full Augustus James Tracy Age 20

Address Lorbury Rd

Married  Single  Height 5'7" Weight 133

Color Slight Hair Brown Eyes Slight blue

Other distinguishing marks \_\_\_\_\_

Nearest relative Mom Tracy (Hatter)

Address Lorbury

Dependents \_\_\_\_\_

Occupation Draper Present Wage 2.50 per Annum

Previous service \_\_\_\_\_

Decorations \_\_\_\_\_

General Remarks \_\_\_\_\_

Date of Enlistment \_\_\_\_\_

I, Augustus James Tracy, 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.

Augustus James Tracy

Declared before me this 14 day  
of \_\_\_\_\_ 1914

Enlistment

**DESCRIPTIVE REPORT ON ENLISTMENT.**

(To correspond with Entries on the Medical History Sheet.)  
Applicable to all ranks.

Reg. No. 554

Name Augustus James Tracey  
 Apparent age 35 years        months. Height 5 feet 7 inches.  
 Chest measurement { Girth when fully expanded        inches.  
                           { Range of expansion        inches.  
 Distinctive marks Color: Light, Hair: Brown, Eyes: Light Gray

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin William Tracey, Torbay, St. John's East  
 Relationship Father

**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 Pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries.
					years	days	years	days	
Service towards limited engagement reckons from <u>8/1/15</u>									
Joined at <u>St. John's</u> on <u>2nd January '15</u>									
	<u>Prosbite</u>			<u>9/12/15</u>					
<i>Embarked S.S. Dominion St. John's 3-2-15. Embarked to S.F. 20<sup>th</sup> 8<sup>th</sup>. Disembarked West                  And embarked for Cairo 31<sup>st</sup> 8<sup>th</sup>. Embarked for Gallipoli 13<sup>th</sup> 8<sup>th</sup>. Landed Suez Bay                  night of 19-20<sup>th</sup> 15. Admitted 26<sup>th</sup> C.C.S. PROSBITE 3<sup>rd</sup> 8<sup>th</sup>. To duty 20<sup>th</sup> 1<sup>st</sup> Battalion 1<sup>st</sup>.                  Embarked Port Suez 14<sup>th</sup> 16. Disembarked Alexandria 22<sup>nd</sup> 16. Wounded 1-7-16                  Admitted 4. S.G.S. 9. S. 4. Legs 3-7-16. Invalids Cyprus 9-7-16. Admitted Mil. Hosp. Cyprus 19<sup>th</sup>.                  Embarked at Liverpool per S.S. Transport 13<sup>th</sup> 17. Arrived H.M.S. February 1917.</i>									
<i>Discharged Medically Unfit 28.3.17</i>									
Total Service forfeited as above ... ..									

Total Service towards Engagement to 28 3 17 (date of discharge) 2 years 85 days  
 Pension

A. Tracey

C.R. 864

P.L.O.

Newfoundland

Medical Report on an Invalid.



Station Ontario Military Hospital, Orpington.

Date 2nd January, 1917.

- 1. Unit 1st Regiment, Newfoundland.
- 2. Regimental No. 864.
- 3. Rank Pte.
- 4. Name Tracey, Augustus.
- 5. Age last birthday 22
- 6. Enlisted { on 25/11/1914.  
at St John's.
- 7. Former Trade or Occupation { Draper.

8. Disability.

G.S.W. R.Leg. Fracture Tibia and Fibula. 9-4 tibia(R) and fibula(R).  
G.S.W. L.Leg. Fracture Tibia. 9-4 tibia (L).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. July 1st. 1916.
- 10. Place of origin of disability. Near Beaumont Hamel. France.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

COPY SENT TO  
O.C. H.Q. :  
ST JOHNS, N.F.L.D.  
N.F.B.38. No. 1279/6  
DATED FEB 12 1917

Patient states that on above date during an attack, he was struck in both legs by machine-gun bullets; was taken through 88th F.A. to 2nd Stationary Hospital, where operated upon, being sent on the following day to No;12, Stationary Hospital, remaining two days, then through Le Havre to Bethnal Green Hospital (July 11th '16) Remained there until sent to this hospital where arrived October 21st, 1916. Operated upon at Bethnal Green about August 20th, 1916. Patient states that he has pain in both legs and ankles after walking one mile.

- 12. (a) Give your opinion as to the causation of the disability. Active Service.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8). Gunshot wound.

13. What is his present condition ?

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

Healed wounds over both tibiae with fracture of both bones. Union is solid but there is considerable local deformity from lateral displacement.

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

- (a) In action ? **Yes.**
- (b) On field service ? **Yes.**
- (c) On duty ? **Yes.**
- (d) Off-duty ? **No.**

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

**No.**

If so—(a) When ?

(b) Where ?

(c) Opinion ?

**Not applicable.**

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

**Yes. (1) Incision and drainage.  
(2) Reduction under anaesthetic.**

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

**Not applicable.**

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable to active service ?

**Not applicable.**

19. Do you recommend

- (a) Discharge as permanently unfit, **No.**
- or
- (b) Change to Eng. ~~XXXXX~~ Newfoundland, **Yes.**

Amos. Ruston  
Officer in medical charge of case.

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

Station Ontario Military Hospital. Orpington. Kent.

Date 1 FEB 1917 Officer in charge of Hospital.

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

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

## Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1163 and 1165, Pay Warrant, 1918).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

(1) Yes.  
(2) No.  
(3) No.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

G.S.W.

21. Has the disability been aggravated by

(a) Intemperance? **No**

(b) Misconduct? **No**

(c) Any of the conditions mentioned in question 20, and if so, which?

**Not applicable.**

22. Is the disability permanent? **No**

23. If not permanent, what is its probable minimum duration?

**Six months.**

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

$\frac{1}{2}$

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{1}{4}$ ,  $\frac{3}{4}$ , or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

**Yes**

25. If an operation was advised and declined, was the refusal unreasonable?

**Not applicable**

26. Do the Board recommend

(a) Discharge as permanently unfit, **No**

or

(b) Change to ~~England~~? *Newfoundland.* (b) **Yes.**

Signatures:—

*J. Chamberlain*  
President.

*Hadley Williams Stool* *Edmund*  
Members.

*Thomas. P. ...*

Station Orpington, Kent.

Date 6 FEB 1917

Approved  
Station ORPINGTON

*G. Chamberlain* *St. Col.*

Administrative Medical Officer.

Date 6 FEB 1917

Yewford Road

# Medical Report on an Invalid.



Station Antares Inst. Hosp. Offington

Date 2. 7. 1917.

- 1. Unit 1st Regiment Newfoundlands
- 2. Regimental No. 864.
- 3. Rank Pte.
- 4. Name Tracey, Augustus
- 5. Age last birthday 22
- 6. Enlisted { on 25. 11. 1914  
at St. John's.
- 7. Former Trade or Occupation { Draper

## 8. Disability.

Gsw. R. Leg. Fracture tibia & fibula <sup>TR</sup> & tibia <sup>TR</sup> fibula <sup>TR</sup>  
Gsw. L. Leg. Fracture tibia <sup>TR</sup> & tibia <sup>TR</sup> (L)

### Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will not credit cases entirely due to venereal disease.

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 N.F.P.38. No. ....  
 DATED Jan 12 FEB 12 1917

- 9. Date of origin of disability. July 11. 1916.
- 10. Place of origin of disability. near Beaumont Hamel

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

Palms states that on above date during an attack, he was struck in both legs by machine gun bullets: was taken through 88<sup>th</sup> F.A. to 2nd Stationary Hospital where operated upon being sent on the following day to 12 Stationary Hospital remaining two days, then through he leave to Bethnal Green Hospital (July 11. 1916). Remained there until sent to this hospital where arrived Oct. 21. 1916. Operated upon at Bethnal Green from about Aug. 20. 1916. Patient states that he has pain in both legs and ankles after walking about one mile.

- 12. (a) Give your opinion as to the causation of the disability. Active service
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8). Gunshot wound

13. What is his present condition?

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

Healed wounds over both tibiae with fracture of both bones. Union is solid but there is considerable local deformity from lateral displacement.

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

- (a) In action? *yes*
- (b) On field service? *yes*
- (c) On duty? *yes*
- (d) Off duty? *no*

15. Was a Court of Inquiry held on the injury? *no*

If so—(a) When?

(b) Where?

(c) Opinion?

*not applicable*

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

- yes* 1. Incision drainage
- 2. Reduction under anaesthetic

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

*not applicable*

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

*not applicable*

19. Do you recommend

- (a) Discharge as permanently unfit, *no*
- or
- (b) Change to England? *unfounded? yes*

*Howard. P. ... Capt.*

\* Officer in medical charge of case.

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

except†

Station ORPINGTON *W. Chambers* *W. Capt.*

Date 1 FEB 1917 Officer in charge of Hospital.

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

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



## Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

U1 yes  
U2 no  
U3 no

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

S.S.W.

21. Has the disability been aggravated by

(a) Intemperance? *no*

(b) Misconduct? *no*

(c) Any of the conditions mentioned in question 20, and if so, which?

*no applicable*

22. Is the disability permanent? *no*

23. If not permanent, what is its probable minimum duration?

*six months*

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

$\frac{1}{2}$

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{1}{3}$ ,  $\frac{1}{4}$ , or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

*yes*

25. If an operation was advised and declined, was the refusal unreasonable?

*not applicable*

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

*no applicable*

Signatures

*new found (2350)*  
Graham Chambers *Stol Camp*  
President.  
Hadley Williams *Stol Camp*  
Members.  
Mrs. Mrs. ...

Station ORPINGTON

Date 6 FEB 1917

Approved  
Station ORPINGTON

Date 6 FEB 1917

Graham Chambers *Stol Camp*  
Administrative Medical Officer.

8th February,

7

1162/2

HA/JC.

864, Pte. A. Tracey,

1st Newfoundland Regt.

PASSAGE TO NEWFUNDLAND VIA "GRAMPIAN".

You will report at Allan's Office, 19 James Street, Liverpool, on or before the morning of 13th February, 9.30 o'clock, where you will get your instructions and passage ticket to proceed to St. John, N.B., per s.s. Grampian. When you arrive at the latter place, you will report to Allan's agent, who will tell you the arrangements which have been made by the Authorities at St. John's, Newfoundland for your journey to St. John's, N.F.

At Liverpool you will meet a Draft of other Newfoundlanders, who are also bound for home.

Major,

Paymaster & Officer i/c Records.

In any further correspondence on this subject please quote Number and Date of this Communication.

No. \_\_\_\_\_

February 8th 1917.

From O.C., Ontario Military Hospital,

Orpington, Kent.

To Officer i/c Records, Newfoundland Contingent,

58 Victoria Street, S.W.

ONTARIO MILITARY HOSPITAL  
CENTRAL REGISTRY.  
REF. No.  
DATE 38416  
2.50.1  
ORPINGTON, KENT.

No.864  
Pte.Tracey A.  
-----

*Acknowledged  
WPA*

In accordance with your instructions the marginally noted man is instructed to report to you for disposal. He appeared before a Medical Board here on the 6th. inst., and A.F.B.179 etc. were sent you on that date.

Transfer Clothing Statement for this man is enclosed herewith. Kindly acknowledge.

For your information, please.

*G. N. Lucas*  
Capt. & A/Adj., for O.C.

NEWFOUNDLAND CONTINGENT  
58, VICTORIA ST.  
LONDON, S.W.  
\* 8-2-17 \*  
PAY & RECORD OFFICE

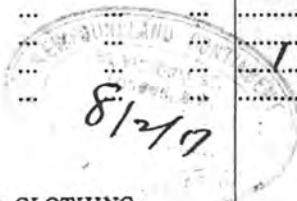
# TRANSFER CLOTHING AND NECESSARIES STATEMENT.

Statement showing the articles of Clothing and Necessaries in possession of a Patient proceeding from the Ontario military Hospital to 1/6 Records, Newfoundland Regiment for disposal

Date of Transfer February 8<sup>th</sup> 1917

Regimental No. 864 Rank Pl. Name Tracy, A. Newfoundland

ARTICLES.	No.	ARTICLES.	No.
<b>CLOTHING.</b>		<b>NECESSARIES.</b>	
Boots, ankle, prs. ... ..	1	Badges, Cap... ..	1
Blankets, grey ... ..	1	" Collar, prs. ... ..	
Caps, forage, drab ... ..		" CAN., Shoulder, prs. ... ..	
Glengarry ... ..		" Initials, sets ... ..	
Greatcoats ... ..	1	" Numerals, sets ... ..	
or Cloaks ... ..		Bootlaces, prs. ... ..	
Jackets, drab ... ..	1	Braces, prs. ... ..	1
Kilts ... ..		Brushes: Cloth ... ..	
Puttees, drab, prs. ... ..	1	Hair ... ..	1
Riding Breeches ... ..		Shaving ... ..	1
Sheets, ground, W.P. ... ..		Tooth ... ..	1
Shirts, service ... ..		Combs, hair ... ..	1
Shoes, canvas ... ..		Drawers, woollen, prs. ... ..	2
Spurs, Jack, prs. ... ..		Drawers, cotton ... ..	
Trousers, drab, prs. ... ..	1	Forks, table ... ..	
Trousers, service ... ..		Housewives, filled ... ..	
		Holdalls ... ..	
		Identity discs ... ..	
		Knives, clasp ... ..	
		Knives, clasp, Lanyds. ... ..	
		Knives, table ... ..	
		Razors ... ..	1
		Shirts, flannel, grey ... ..	2
		Socks, prs. ... ..	2
		Spoons, table ... ..	
		Towels, hand ... ..	2
		Undershirts, woollen ... ..	2
		Undershirts, cotton ... ..	
		Kitbag ... ..	1
		Haversack ... ..	
		Belts, waist, leather ... ..	
		Bottles, water, D.S. ... ..	
		Carriers, B.W., D.S. ... ..	
<b>WINTER CLOTHING.</b>			
Caps, Balaclava ... ..			
Gloves, woollen ... ..	1		
Waistcoats, cardigan ... ..	1		



Signature of Soldier A. Tracy

Certified that this Statement is correct in every particular.

Date \_\_\_\_\_

W.H.P. CAPT.  
Officer Commanding, QUARTERMASTER,

Station \_\_\_\_\_

ONTARIO MILITARY HOSPITAL,

Officer Commanding.



The man is joining \_\_\_\_\_

INSTRUCTIONS.—This Transfer Clothing and Necessaries Statement will be completed by the Unit which the man is leaving, and will be forwarded to the Officer Commanding the Unit to which he is going, who will retain it and acknowledge receipt by return mail.

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

DUPLICATE

SENT TO

O.C. H.Q.

Newfoundland Regiment.



\*The Officer Commanding

The Officer in Charge of Records

The Regimental Paymaster

FEB 12 1917

Newfoundland Contingent  
58 Victoria St  
S.W.

With reference to No. 862 Pte. Tracey A.  
of the above Regiment, who appeared before a Medical Board and was approved by  
the D.D.M.S. Easter Command, on the 6-2-1914  
for discharge from the Service as permanently unfit, please note that this man has  
been sent to his home on warrant with orders to await instructions as to his final  
discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded <sup>with</sup> to Newfoundland office, 58 Victoria St  
on [date] 8/7/1914

G.K. Lucas, Capt Officer Commanding  
for D. C. Ontario Military Hospital.

Place Orpenburgh

Date 6/2/1914

Transmitting to  
Newfoundland

\* In case of Territorial Force "Officer Commanding the Administrative Centre."  
Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

*William B. Bethune*

To be used only for Special Reserve Recruits, and for Special Regular Army.

# MEDICAL HISTORY

OF

Surname Lacey

Christian Name William B. Bethune



Table 1.—GENERAL TABLE.

Birthplace:—Parish \_\_\_\_\_ County \_\_\_\_\_

### SPECIAL RESERVE.

### REGULAR ARMY.

Examined on 10<sup>th</sup> day of Dec 1915 at St John's

Declared Age 20 years Trade or Occupation Drapery

Height 5 feet 7 inches Weight 133 lbs.

Chest Measurement { Girth when fully expanded... 36 inches Range of expansion... 3 inches

Physical Development... Right Left Right Left

Vaccination Marks { Arm Number

When Vaccinated 1905 Vision R.E.—V=20/30 L.E.—V=20/30

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to Cause Rejection

Approved by (Signature) Henry Macpherson (Rank) Capt. Medical Officer.

Enlisted at St John's on 7<sup>th</sup> day of Jan 1915

Joined on Enlistment 1st Wilt Regt Corps. 864 Regtl. No.

Transferred to... Became non-effective by...

on \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_\_ on \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_\_

(Signature) (Rank)

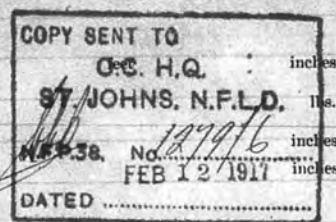


Table II.—Only for admission to hospital or to the sick list in case of Warrant officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In 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				
<b>Bethnal Green</b> <b>Military Hospital,</b> <b>Camb.</b>	11	7	16	21	11	16	Compound Fracture Tibia Fibula injured	135	Good recovery	L. T. Pinhey
<b>ONTARIO MILITARY HOSPITAL,</b> <b>ORPINGTON, KENT.</b>	21	11	16				Saw Bull leg, Fracture Bull tibiae Fracture left Fibula TK 4 tibiae fibulae.		Scales show he was wounded July 1. 16. at Beaumont Hamel fracture from. Union apparently good on admission here though considerable lateral displacement 1/2 in. end of both legs & feet. Recent papers made out Dec. 6. 16 & Jan 2. 17.	Amund. Amund. capit.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
	<p>T.V. — 2</p> <p>Ch. V — 2</p> <p>Vacc.</p> <p>Fit for Foreign Service</p>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St. Johns.	Jan 21/15	Feb 5/15			
F.S. "Dominion"	Feb. 5/15	" 16/15			
Edinburgh Castle	" 16/15				





# 1ST NEWFOUNDLAND REGIMENT

## ALLOTMENTS

*Geo Loney*

I, \_\_\_\_\_, Regl. No. \_\_\_\_\_

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

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
				80
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.) *[Signature]*

Officer Commanding \_\_\_\_\_  
Company \_\_\_\_\_

191

(Sig.) *[Signature]*

(Rank) \_\_\_\_\_

*Augustus Loney*  
*Pte*

## 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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer in Charge of the Hospital, and received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Commissioners of Chelsea Hospital, Chelsea, London, S.W.

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



**A Name in full** *Tracy, Pte. Augustus James*  
**Regiment from which discharged** *1st Newfoundland Regiment*  
**Regimental Number** *864*  
**Where born (Parish, Town and County), and when** *St. Johns, Newfoundland, 17th, 1894*  
**Intended address** *Torty Road, St. Johns, Newfoundland.*  
**Height on discharge** *5* Feet *6 3/8* Inches  
**Colour of Hair on discharge** *Dark brown* **Colour of Eyes** *Blue*  
**Descriptive marks** *Deformed ears with complete loss of the left ear middle* **Complexion** *Light*  
**Figure on discharge** *Small*  
**Christian name of Father** *William*  
**Christian name of Mother** *Agnes*  
**Wife's Maiden name in full** *not applicable*  
**Date and Place of Marriage** *not applicable*  
**Christian names of Children** *not applicable*  
**Nature and locality of civil employment desired** *Draper, St. Johns, Newfoundland*

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 No. *12996*  
 DATED FEB 12 1917

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) *Augustus Tracy* (Rank) *Private*  
 Station *Ontario Military Hospital* Date *January 23rd 1917*

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.

*Frederick M. Mearns* Medical Officer i/c  
 Hospital.  
 Date *23/1/1917*

Station **ORPINGTON**

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
				India		
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of pension }		
Sums due on account of public debts ...						

Rank on Discharge  
 Character (as on Certificate of discharge)  
 Where born, and on what date  
 Date and Place of first Enlistment  
 Trade on Enlistment  
 Cause of Discharge  
 Number of G.C. Badges Medals  
 Wounds, and Actions in which received

Other distinguishing marks

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

Station \_\_\_\_\_ Officer in Charge \_\_\_\_\_  
 Date \_\_\_\_\_ Records \_\_\_\_\_

In any further correspondence on this subject please quote Number and Title of this Communication.

No. \_\_\_\_\_

February 6th. 1917.

From O.C., Ontario Military Hospital,Orpington, Kent.To Officer i/c Records, Newfoundland Contingent,58 Victoria Street, S.W.

ONTARIO MILITARY HOSPITAL CENTRAL REGISTRY.	
REF. No.	
DATE	<u>38203</u>
	<u>0.50.1</u>
ORPINGTON, KENT.	

No. 864  
Pte. Tracey A.

Sir,

With reference to your letter 5873/1 of Dec. 30th. 1916., I have the honour to enclose herewith A.F.B.179 and W.3202 in duplicate, A.F.D.400a, and Medical History Sheet, for the marginally named man.

This man will be given a Railway Warrant to London and be instructed to report to your office for disposal on the 8th. inst.

Kindly acknowledge receipt of

181 N W the enclosed documents.  
PAY OFFICE

Ref. No. 654Rec'd. FEB - 8 1917

Ack'd.

Ans'd. 8-2-17

File No.

I have the honour to be,

Sir,

Your obedient Servant,

*L. K. Lucas Capt.*  
for O.C. Ontario Military Hospital.

8th February,

7

1175/2

HA/JC.

O.C., Ontario Military Hospital,

Orpington,

Kent.

864, TRACEY. PTE. A.

With reference to your Minute 38203, the above-named  
0.50.1 Man, of the 1st Newfoundland Regiment, has reported here.  
The documents, as noted on your Minute, are herewith  
acknowledged, please, as is the Transfer Clothing  
Statement.

Major,

Paymaster & Officer i/c Records.

419/11 - Ontario War Hosp  
January 11<sup>th</sup> 1916

Ward 6

Dear Sir

Would you kindly  
send me down a Pay Sheet as we  
don't get much money here in Hospital  
and I would like to get a couple  
of pounds as I would like to  
buy a few personal things for  
myself by so doing

You will oblige  
Yours truly

864

A. J. Tracey

1<sup>st</sup> Newfoundland Regiment

1916	NOV 11
PAY & RECORDS	
Ref. No.	261
Date	JAN 18 1917
Ack'd.	
Ans'd.	
File No.	

NEWFOUNDLAND CONTINGENTNo. 419/1Pay & Record Office,  
58, Victoria Street,  
London, S.W.,

15th January 1917

To: 864, Pte. A.J. Tracey,Ontario Mil. Hospital,Orpington, Kent.

With reference to your request dated 11/1/17 Regulations do not permit a soldier to have money whilst in hospital without express permission of the Officer i/c. If the enclosed N.F.P/45 is completed and returned to this office it will be complied with, subject of course to the state of your account.

The Newfoundland War Contingent Association are notified of admissions to Hospitals, etc. and will supply you with comforts, but not cash. If one of their Visiting Committee has not already seen you, write to:

"The Hon. Secretary,

N. W. C. A.,

58, Victoria Street, S.W."

*A. J. Ginnell* Major,  
Paymaster & Officer in Charge Records.

Ref-no 579/1

In any further  
correspondence on  
this subject please  
quote Number and  
Date of this Com-  
munication.

No. PO-M-357

Orpington, Kent January 22nd 1917

From Paymaster,

Ontario Military Hospital

To Paymaster &amp; Officer i/c Records,

58 Victoria St., London, S.W.



B64 Pte A. J. Tracey.  
1st Newfoundland Regt.

-----  
Postal Order No. 33852

Replying to your favor of the 19th  
inst., respecting payment of £3-0-0, for the  
marginally noted, I beg to return herewith re-  
ceipt duly signed by this man.

*William Taylor*  
Capt. & Paymaster.

# CABLEGRAM



Cas  
 RECEIVED BY SPON.  
 BY *AW*  
 DATE *14/7/16*

No. of Message

13 JUL 1916

The following CABLEGRAM received, at *860* M. "Via Commercial Cables"

RA... SXP624 STJOHNSNF 15

1240A

WSM SYNOPTICAL LONDON.

FOR EIGHT SIXTYFOUR TRACEY ARE YOUR INJURIES SERIOUS REPLY MOTHER

COLONIAL SECRETARY.

*864 Capt. Tracey*  
*Military Hospital*  
*Bethnal Green*

1ST NEWSPAPER & RECORD OFFICE	
Ref. No.	2360
Rec'd.	JUL 14 1916
Acc'd.	
Ans'd.	
File No.	



J. W. L. by  
not serious.

No.

332/50

# WESTERN UNION

ANGLO-AMERICAN



DIRECT UNITED STATES

## CABLEGRAM

Prefix _____ Code _____		SENT		FOR STAMPS	
WORDS		CHARGE		At _____	
				To _____ By _____	
<b>VIA WESTERN UNION</b>				THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.	

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

17/7/10.

To W.S.E. COLONIAL SECRETARY  
ST. JOHNS (NEWFOUNDLAND)

WOUNDS NOT SERIOUS DOING FINE FROM 864 TRAGEDY

SYNOPTICAL

**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 50, Victoria St., S. E.

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.

ONTARIO MILITARY HOSPITAL  
CENTRAL REGISTRY.

REF. No.

DATE

32157  
0.191

No. ORPINGTON, KENT.

In any further correspondence on this subject please give number and date of this communication.

December 28th 1916.

From O.C., Ontario Military Hospital,

Orpington, Kent.

To Officer i/c Records, Newfoundland Contingent,

58 Victoria St., S.W.

9

No. 864  
Pte. Tracey A.  
1st. Battn.

Sir,

The marginally noted man of the Newfoundland Contingent, at present a patient in this Hospital, is considered by the Medical Officer in Charge of his case to be unfit for further Military Service and he has been recommended for a Medical Board.

Could instructions be given me as to the disposal of this case, please.

I have the honour to be,

Sir,

Your obedient Servant,

*W. B. Clarke*  
Capt. & A/Adj.,  
for O.C., Ontario Military Hospital.

P.J.

1ST NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	5122
Rec'd.	DEC 28 1916
Ask'd.	<i>30/12/16</i>
Ans'd.	
File No.	

December 30th . . . . . 8.

5973/1 . . . . .

O. C.,

Ontario Military Hospital,  
Orpington, Kent.

Sir,-

... 862, PTE. A. TRACEY. . . . . .

In reply to your memorandum No. 32157 of the . . . . .  
23th. inst. I beg to inform you O.13.1

(1) The proceedings of the Medical Board (A.F.B.179) should be sent to this Office, in duplicate, as soon as possible, together with two copies of A. F. W. 3202. The man's other papers, as may be necessary, should be sent to this Office.

(2) Issue Tracey, Railway Warrant to London and instruct him to report at this address for disposal, please.

I am,

Sir,

Your obedient servant,

... 2/Lieut.  
For Paymaster & O & c Records.

NEWFOUNDLAND CONTINGENT

N.F.P/47.

579/1

Pay & Record Office,  
58, Victoria Street,  
London, S.W.,

To: Medical Officer in Charge,

19/1/17

Ontario Military Hospital,

Orpington, Kent.

Postal Money Order No. 33852 for £ 3 : 0 : 0

is enclosed at request of No. 864. Pte. A.J. Tracey.

1st Newfoundland Regt.

Attached receipt form to be signed and returned, please.

*A. J. Simons* Major,

Paymaster & Officer i/c Records.

NEWFOUNDLAND CONTINGENT

N.F.P/45.

597/1

To Paymaster & Officer i/c records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W.

O.K.  
£3-0-0  
*[Signature]*

Please remit per Postal Money Order to:

Ward 6 Ontario Military Hospital  
Brixington Kent.

the sum of three £3 pounds .0 shillings, on  
account of any balance that may be due to me.

343  
JAN 18 1917

Regtl. No. 864 Rank Private

Name Tracey, J.

Approved [Signature]  
Officer i/c

Ont. Mil. H. Hospital.

Date at Ont. Mil. Hospital  
January 16<sup>th</sup> 1917

8th February,

7

Embarkation Officer,  
Liverpool.

1161/6  
HA/JC.

864, TRACEY, PTE. A.

Bearer, the above-named man, of the 1st Newfoundland Regiment, is being transferred to Headquarters, St. John's Newfoundland, per s.s. Grampian, leaving Liverpool 13/2/17. *He is medically unfit for service abroad.*

Major,

Paymaster & Officer i/c Records.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 884, Pte. Tracey, A. J.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 15/2/17 (Dates inclusive)

Embarked per S.S. Crampian

From Liverpool Date 15/2/17

DR. Classification (See procedure) B.

Draft No. 27 CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1.00	53	53		
	9	Allotments	80		53	42	40		2	Field Allowances	10	53	5	30	
	10								3	Other Allowances					
	11/12	Total Stoppages			42	40	8 14 5		4/5	Total 3 24.86 2/3			58	30	11 19 7
	13	Fines							6a						
	14	Clothing & Necessaries								Credit Balance 22/12/16				19	9 1
	15	Arms & Accoutrements													
	16	Barrack Damages													
	17	Hospital Stoppages													
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
Jan. 19	20	1st Payment Hospital Advance					10 0								
Jan. 19	21	2nd " Cash P & R.O.					5 0 0								
Feb. 8	22	3rd " " "					16 0 0								
	23	Final "													
	24	Balance Debit Last Period													
	28	" Due by Paymaster					1 4 5		27	Balance Due to Paymaster					
							31 8 6								£ 31 8 6

CERTIFIED CORRECT.



CHECKED  
17/2/17



Tracy, A. J.

864

Gay Sept

Dispatching  
Office  
Stamp.



Arrival  
Office  
Stamp.

864

No. 491

From

*John Jago*

Registered Letter Addressed—

*A J Tracey  
Embassy Bldg.  
St John's*

Received by

*[Signature]*

**Proceedings on Discharge.**

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

No. <u>864</u>	Army Rank <u>Private</u>
Name <u>Augustus James Tracey</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>Fired Newfoundland Regiment</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>28<sup>th</sup> March 1917</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. <u>Description at the time of discharge.</u>	
Age _____ years _____ months Height _____ feet _____ inches Chest measure { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion _____ Eyes _____ Hair _____ Trade _____ Intended place of residence (To be given as fully as practicable) _____ _____ _____	Descriptive marks.          
(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 _____ _____ _____	
(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. 489 was awarded in this case.	
_____ Initials of Commanding Officer.	
Army Form B. 2068 has been issued to* _____	

To be filled in on the soldier quitting the Colours.

\* Strike out if not applicable.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 864, Pte. Tracey, A. J.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 13/2/17 (Dates inclusive)

Embarked per S.S. Grampian

From Liverpool Date 13/2/17

DR. Classification (See procedure) **B.**

Draft No. 27 CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	£	s	d	
	8	Forfeited Pay								1	Pay	1.00	53	53	-			
	9	Allotments	80	53	42	40				2	Field Allowances	10	53	5	30			
	10									3	Other Allowances							
	11/12	Total Stoppages			42	40	8	14	5	4/5	Total @ \$4.86 2/3			58	30	11	19	7
	13	Fines								6a								
	14	Clothing & Necessaries									Credit Balance 22/12/16				19	9	1	
	15	Arms & Accoutrements																
	16	Barrack Damages																
	17	Hospital Stoppages																
	17a	Miscellaneous Stoppages																
	19	Casual Payments																
<del>xxxxxx</del>	20	1st Payment Hospital Advance					10	0										
Jan. 19	21	2nd " Cash P & R.O.				3	0	0										
Feb. 8	22	3rd " " "				18	0	0										
	23	Final "																
	24	Balance Debit Last Period																
	28	" Due by Paymaster				1	4	5		27	Balance Due to Paymaster							
					31	6	8							£	31	8	8	

This account is in accordance with information received at the Pay & Record Office to 12/2/17 and is therefore subject to amendment if, and as may be found necessary.

CHECKED.

NEWFOUNDLAND CONTINGENT  
 PAY & RECORD OFFICE  
 12 FEB 1917

NEWFOUNDLAND CONTINGENT  
 CERTIFIED CORRECT.

*H. D. ...*  
 PAYMASTER  
 O.C. Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 864, Pte. Tracey, A. J.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 13/2/17 (Dates inclusive)

Embarked per S.S. Grampian

From Liverpool Date 13/2/17

DR.

Classification (See procedure) B.

Draft No. 27

CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	£	s	d	
	8	Forfeited Pay									1	Pay	1.00	53						
	9	Allotments	80	53	42	40					2	Field Allowances	10	53	5	30				
	10										3	Other Allowances								
11/12		Total Stoppages			42	40	8	14	3	4/5		Total 3 \$4.86 2/3				58	30	11	19	7
13		Fines								6a										
14		Clothing & Necessaries																		
15		Arms & Accoutrements										Credit Balance 22/12/16					19	9	1	
13		Barack Damages																		
17		Hospital Stoppages																		
17a		Miscellaneous Stoppages																		
19		Casual Payments																		
<del>xxxxxx</del>	20	1st Payment Hospital Advan																		
Jan. 19	21	2nd " Cash P & R.O.																		
Feb. 8	22	3rd " " "																		
	23	Final "																		
	24	Balance Debit Last Period																		
	28	" Due by Paymaster					1	4	5	27		Balance Due to Paymaster								
					31	8	8										£	31	8	8

CHECKED



NEWFOUNDLAND CONTINGENT. CERTIFIED CORRECT.

*H. S. Simons*  
PAYMASTER & OFFICER IN CHARGE  
" O.C. " Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 864, Pte. Tracey, A. J.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 13/2/17 (Dates inclusive)

Embarked per S.S. Grampian

From Liverpool Date 13/2/17

DR. Classification (See procedure) B.

Draft No. 27 CR.

Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	£	s	d
	8	Forfeited Pay									1	Pay	1.00	53	53	-			
	9	Allotments	80	53	42	40				2	Field Allowances	10	53	5	30				
	10									3	Other Allowances								
	11/12	Total Stoppages			42	40	8	14	3	4/5	Total @ \$4.86 2/3				58	30	11	19	7
	13	Fines								6a									
	14	Clothing & Necessaries																	
	15	Arms & Accoutrements																	
	16	Larrack Damages																	
	17	Hospital Stoppages																	
	17a	Miscellaneous Stoppages																	
	19	Casual Payments																	
<del>xxxxxx</del>	20	1st Payment Hospital Advance							10 0										
Jan. 19	21	2nd " Cash P & R.O.							3 0 0										
Feb. 8	22	3rd " " "							18 0 0										
	23	Final "																	
	24	Balance Debit Last Period																	
	28	" Due by Paymaster							1 4 5	27	Balance Due to Paymaster								
									31 8 8										

This account is in accordance with information received at the Pay & Record Office to 12/2/17 and is therefore subject to amendment if, and as may be found necessary.

CHECKED

NEWFOUNDLAND CONTINGENT  
 12 FEB 1917  
 PAYMASTER'S OFFICE

NEWFOUNDLAND CONTINGENT  
 CERTIFIED CORRECT.

*H. S. [Signature]*  
 PAYMASTER'S OFFICE  
 O.C. Company.

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.. *Augustus*. 2. Surname... *Tracey*.....

3. Rank.. *Private*..... 4. Regtl. No.. *864*.....

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

..... *St. John's Newfoundland*.....

6. Date of enlistment in the Regiment.... *January 2<sup>nd</sup> 1915*.....

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

..... *Not applicable*.....

8. Relationship of such dependents..... *Not applicable*.....

9. Address in full of such dependent.....

..... *Not applicable*.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*

11. Were you on active service only in Nfld. 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 Nfld, or Overseas.....

..... *2 yrs and 86 days*.....

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

*Not applicable.*

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.....

*I received the sum of one hundred Dollars  
Paid by Capt. Howley.*

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.....

*Not applicable.*

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.? *No*... If not give:-(a) Date of discharge. *28<sup>th</sup> March 1917*..... (b) Reason for discharge.....

*Through wounds received  
in action.*

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.....

*Sept. 19<sup>th</sup> 1915. Salon (Foz) (Yulipito).  
Stayed until the evacuation, was wounded in  
the hand and leg. Leaves at Headmont Naval  
July 1<sup>st</sup> 1916*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. *No*

(b). If (a), 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: *Augustus Tracey*

Place of Residence: *Torbay Road*

Declared before me at: *St. John's*

This *28<sup>th</sup>* day of *February* 1918.

*John Ferrelly*  
*Barrister at Law*  
*Notary Public*

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
13.12.18	100.10		5.00	350.00
			Less PDP	100.10
				249.90
Certified Correct.			Paymaster.	



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Gus. Tracey, Regl. No. 864

hereby agree, until further notification by me, and in similar official form, to make an Allotment of Dollars and 80 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
792	Father	William Tracey	Torbay, N.S.	80
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.) E. S. [Signature]

Officer Commanding  
Company

(Sig.) Augustus Tracey

(Rank) Pte.

A. J. [Signature]  
Feb 15 1915

STATEMENT OF ACCOUNT

No. 864

Name Inacey A. J.

1931

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
Feb 13	Balance due by Rom				
	<i>Feb. 11.5</i>			5 93	5 93
28	Re Pay 15 days @ 1%			16 50	22 43
Mar 6	6 @ 1%			6 60	29 03
28	22 @ 1%			40 70	69 73
	Bonus Clothing			12 95	82 68
				26 00	107 68
Feb 28	Dr Pay Allotment 15 days @ 80%		12 00		95 68
Mar 15	To Pay	142	15 00		80 68
31	To Allotment @ 80%		24 80		55 88
29	To Pay	152	55 88		<del>0</del>
	War Service Gratuity 5 mos @ 70%			350 00	350 00
Dec 13	Bonus To Pay	6725	12 95		337 05
Mar 1	"	11241	87 15		249 90
April 1	"	14427	70 00		179 90
			70 00		109 90
			347 78	457 68	109 90

Signed A. Loany *SLM*

6r

STATEMENT OF ACCOUNT

No. 864

Name Tracy A

Date	Particulars	Ch. No.	Dr.	Cr.	Bal.
	Brought forward		347 78	457 68	109 90
May 1	To Pay	18606	70 00		39 90
June 1	"	21875	39 90		<del>0</del>
			457 68	457 68	<del>0</del>

Signed A. Loany *ESM*

29  
1921

No. \_\_\_\_\_



### 1st NEWFOUNDLAND REGIMENT

### VOUCHER

In Acct. with #864 Pte. A. J. Tracey

Voucher No. 29263.

Cheque No. 29263.

Reg'l A/c No. \_\_\_\_\_

Name \_\_\_\_\_

C.B. Folio No. \_\_\_\_\_

#### CERTIFICATION

PAYMASTER

Dissect<sup>n</sup> Sheet No. \_\_\_\_\_

Recap. Sheet No. 341.

Checked by \_\_\_\_\_

#### RECEIPT

March 29th

1917.

### Received

from the 1st. NEWFOUNDLAND REGIMENT the sum of

Fifty Five

Dollars

and Eighty Eight

Cents in Payment as above stated.

March 30 1917.

\$ 55.88

[Sig.]





# 1ST NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, Geo Tracy, Regl. No. 864

hereby agree, until further notification by me, and in similar official form to make an Allotment of 80 Dollars and 00 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz :

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
792	Father	William Tracy	St. John's, N.F.	80
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.) Geo Tracy Capt

St John's  
Company

(Sig.) Geo Tracy

(Rank) Pte.

804

March 29th,

7.

Pte. Augustus J. Tracey,  
Terbay Rd.,  
St. John's.

Dear Sir,-

I enclose herewith Certificate of Discharge,  
dated March 28th 1917.

Yours truly,

2nd. Lieut. & D/Paymaster.



C.R. 864

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

864 Pte. Augustus Tracey, discharged Mar. 28th 1917 Medically  
unfit

C.R. 864

Extract from Roll of Officers N. C. O.'s  
and men DISCHARGED from the Royal  
Newfoundland Regiment.

---

Regtl. #	rank	name	date	reason.
864	Pte.	Tracey	28/3/17	Med. Unfit.
		(Augustine)		

C.R. 864

Extract from Code Telegram received from Major  
Timewell dated February 14th, 1925.

S.S. Grampian for Repatriation:

#864 Pte. Tracey.

C.R. 864

Extract of Casualties received from Pay & Record  
Office, London, dated November 25, 1916.

#864 Pte. A. Tracey.

Transferred from Bethnal Green Military Hospital, to  
Ontario Military Convalescent Hospital, Orpington,  
Kent. Suffering from G.S.W; Both legs, with Comp.  
Fracture both legs.

Authority:- O.C. Military Hospital, Bethnal Green.

✓

C.R. 864

2. TRANSFERRED FROM BETHNAL GREEN MILITARY HOSPITAL,  
TO ONTARIO MILITARY CONVAL. HOSPITAL, ORPINGTON, KENT.

No. 864, Pte. A. Tracey, 1st Nfld,

Suffering from G.S.W. Both Legs,

With comp. frac. both Legs.

Authority:- O.C. Military Hospital, Bethnal Green.

-----

2/10/16

C.R. 864

Extract of casualties received from Pay & Record Office,  
London, dated July 31, 1916.  
(Extract from Army Form B 213, from G.C. 1st. Field. Regt.  
dated 11/7/16.)

#864 Pte. A. Tracey ✓

Wounded in Action 1/7/16.

M

July 18, 1916.

Dear Sir,

I am to-day in receipt, through the Record Office, London, of a message for you from your son, No. 864, Private Augustus J. Tracey, as follows

"Wounds not serious. Doing fine."

I trust that his complete recovery will soon be reported.

Yours faithfully,

Colonial Secretary.

Mr. William Tracey,  
Major's Path.

C.R. 864

NEWFOUNDLAND CONTINGENT.

Extract of Casualty List received from P.&R.O.  
July 17th. 1916.

864, Pte A Tracey. ✓

1 Newfoundland R. GSW      Legs.

Adm. 1 Gen. Hos.

Retreat 7th. July 1916.



C.R. 864

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&R.O.  
July 17th. 1916.

864, Pte A. Tracey. ✓

1 Newfoundland R. GBW Left Leg. Trans to Base ex 12  
Sty. Hos. St. Pol 6th. July 1916.

Anglo-American Telegraph Company

ESTABLISHED 1866

EIGHT ATLANTIC CABLES  
AUTOMATIC DUPLEX SYSTEM



IN DIRECT TELEGRAPHIC COMMUNICATION WITH ALL PARTS OF THE WORLD.

ANGLO-AMERICAN  
TELEGRAPH & CO. LIMITED  
JUL 17 1916  
ST. JOHN'S,  
NEWFOUNDLAND

No.  
Wds.

TO {

*ph London 19*  
*Colonial Secretary*  
*ophus*

*wounds not serious*

*doing fine from*

*864 Tracey*

*Synoptical*



PLEASE HAND YOUR REPLY DIRECT TO THIS OFFICE.

C. 2. Casualties.

**COLONIAL CONTINGENTS ONLY.**



Military

HOSPITAL at Bethnal Green

Affiliated to

NOMINAL ROLL of Sick and Wounded from the French Expeditionary Force  
 admitted on 11th July 1918 from Hospital Ship "ASTURIAS" Southampton  
 or Dover.

\* Here insert which Expeditionary Force.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
  - (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.
- If a limb has been amputated the fact should be recorded.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., *not later than the day after admission*; envelopes to be marked C. 2, Casualties: rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
884	Private	Tracey, Augustus	1 Newfoundland C Co.	G.S.W.IX.frac.both.

(Sd.) Lieut. R.A.M.C.,  
 for Lieut. Col. R.A.M.C.,  
 Officer in charge Military Hospital,  
 Bethnal Green.

# NEW ZEALAND POSTAL TELEGRAPHS.

## Cable Connection with all the World



### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_

*Wm M. Mather*

Address \_\_\_\_\_

Line Number \_\_\_\_\_

Rcd \_\_\_\_\_

By \_\_\_\_\_

Sent \_\_\_\_\_

by \_\_\_\_\_

Check \_\_\_\_\_

Dated July 13, 1916.

To Synoptical,  
London.

WSM for eight sixtyfour Tracey - Are your injuries serious. Reply, Mather.

COLONIAL SECRETARY

July 12th, 1916.

Dear Sir,

I regret to inform you that the Record Office of the First Newfoundland Regiment, London, to-day reports that No. 864, Private Augustus J. Tracey, was at the 12th Stationary Hospital, St. Pol, on July 4th, with a gunshot wound in the leg.

Yours faithfully,

Colonial Secretary.

Mr. William Tracey,  
Major's Path.

C.R. 864

Extract of Casualties received from Pay & Record Office,  
London, dated July 11, 1916.

#864 Pte. A. Tracey.

Gunshot wound Left Leg.

Admitted 12th Stationary Hospital, St. Pol. 4th July 1916.

C.R. 864

Copy of Cablegram to Governor St. John's Nfld.  
from P.&.R.O. 11/7/16.

864, Tracey. ✓

Twelfth Stationery Hospital St. Pal. 4th July  
Gunshot Wound Leg.

MAR 21 1916

Dear Sir,

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. 864, Private A. J. Tracey, who was previously reported at Mudros West, December 9th, suffering from frostbite, was discharged from 3rd Canadian Hospital, Mudros West, to duty January 20th.

This information has been received by mail.

Yours faithfully,

Mr. Wm. Tracey,  
Torbay Rd.

Colonial Secretary.



22  
February 8, 1916.

Dear Sir,

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. 864, Private Augustus J. Tracey, who was reported at Lemnos on December 4th, sick, was admitted to Lowland Convalescent Depot, Mudros West, on December 9th, suffering from frostbite.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mr. William Tracey,  
Forbury Road

C.R. 864

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean  
Expeditionary Force, No. H. 5539, dated Feb. 7th. 1916.

864 Pte. A. Tracey

1/Newfoundland..... Frost Bite RT.Leg. ....Adm. 3 Can. S.H.West  
Mudros 15th. Jan. 1916.

✓  
T 22

January 20, 1916

Dear Sir,

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. 864, Private Augustus J. Tracey, was admitted to Third Australian General Hospital, Lemnos, on December 4th. sick. This information has been received by mail.

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

Mr. William Tracey,  
Torbay Road

C.R. 864

Extract from War Office List. No. H4 5533.

864 Pte. Tracey, A.

1st Mfld. R. Frosted<sup>R</sup> Leg Dis to duty Base Dtls. W. Madres ex  
3 Can. S.H. 20th Jan. 16.

C.R. 864

Extract from War Office List No.H.5494.

864 Cpl. Tracey.

1/Nfld.R. Trans. to 3 Can.H.ex Lowland Cas. C.SH. Mudros W.

15 Jan.16.

C.R. 864

Extract of Casualty list received from Pay and Record office London  
dated Jan. 9th. 1916.

864 Pte. A. Tracey

1st. Wfld. R. Frostbite....Adm. Lowland C.D. Mudros W. 9th. Dec. '15.

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&R.O.  
January 7th 1916.

864, Pte A. Tracey.

Newfoundland R. Sick Dis. ex 3 Aust. G.H. Lemnos 9th Dec.  
1915 to Lowlands C.D.

C.R. 864

Extract of Casualties received from Pay & Record Office,  
London, dated December 24, 1915.

#864 Pte. A. Tracey.

SICK. Admitted 3rd Australian General Hospital, Lemnos,  
4th December 1915.



C.R. 864

Extract from Nominal Roll of No. 1st Bn. Wild. Regt.  
Embarked at Devenport for Active Service 20-8-15.

864 Pte. A.J. Tracey.

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

C.R. 864

Extract of Nominal Roll embarked per S. S. "Dominion" St. John's,  
Feb. 2nd, 1915.

864 Pte. Tracey A.J.

C.R. 864

Augustus J. Tracey was attested for General service  
with the NEWFOUNDLAND REGIMENT on . . . . Jan. 2nd. 1915.  
Regimental No 864 was allotted to Pte. Augustus J. Tracey.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

Casualty Form—Active Service.

969

Regiment or Corps Newfoundland

Regimental No. 862 Rank Plt Name A. J. Tracy

Enlisted (a) 14/1/15 Terms of Service (a) one year Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_ Numerical position on roll of N.C.Os. \_\_\_\_\_

Extended \_\_\_\_\_ Re-engaged 15/8/15 Qualification (b) \_\_\_\_\_

COPY SENT TO  
O.S.H.Q.  
Remarks  
Taken from Army Form B. 213,  
Army Form A. 36, or other  
official documents.  
No. 1274/6  
DATED FEB 12 1917

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

		Embarked St. John's, NFLD.		3/2/15.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
24/12/15.	26 C.M.S.	Admitted, Frostbite	26th.C.C.M.S.	3/12/15.	C 5171.
do	2nd.Aust.	do	2nd.Aust.,	4/12/15.	C 5184.
	Mudros.		Mudros.		
		<i>do Aug</i>	<i>29-4/15</i>	<i>20/1/16</i>	<i>B 1241.</i>
		<i>and with Gallata</i>	<i>and</i>	<i>1/3/16</i>	<i>Normal Prod.</i>
		Embark'd Port Suez		14.3.16	
		Disembk'd MARSEILLES		22.5.16	
		<i>H. Col. G. Swlop (fract) transf</i>	<i>12th Regt</i>	<i>3.7.16</i>	<i>80. 11959.</i>
		<i>trans</i>	<i>In to Eng</i>	<i>9.7.16</i>	<i>W 308 5</i>

(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.

all clerk CAPTAIN.  
1000.116 INFANTRY RECORDS  
P.T.O.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.  
[312] W9042/1126 100m 12/14ss 29 50

Forms  
B. 121.  
22.

Number of Sheet First

Regiment of 1st Newfoundland

Signature of O. C. Company

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>864 Tracey A.J.</u>	Age on	years	<u>black</u>	
Joined		Date	months		
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	Period of	Place of Birth	
Joined	Date	with Colours	years.	<u>R.C.</u>	
Joined	Date	with Reserve	years.		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>St. John's</u>	<u>1915</u>	<u>Private</u>		<u>Absent at Duties</u>	<u>Cpl. D. J. O'Connell</u>	<u>10 Days C.C.</u>	<u>1915</u>	<u>Capt. R. B. ...</u>	<u>...</u>
				<u>Medically Unfit</u>	<u>St. John's</u>	<u>28 <sup>3</sup>/<sub>17</sub></u>			

To be carried over

COPY OF ...

JOHNS. N.F.L.D.

No. 1279/6

FEB 12 1917

DATED

Army Form B. 121.

**C. 2.—Casualties.**

**COLONIAL CONTINGENTS ONLY.**

CR 864  
 Army Form 2026  
 58, VICTORIA ST.  
 LONDON, S.W.  
 JUL 13 1918  
 Expeditionary Force  
 Southampton  
 or  
 Dover.

**Military**

HOSPITAL at **Bethnal Green**

Affiliated to

NOMINAL ROLL of Sick and Wounded from the \* **French**

admitted on **11th July 1918** from Hospital Ship "ASTURIAS"

\* Here insert which Expeditionary Force.

Dover.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
  - (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.
- If a limb has been amputated the fact should be recorded.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., not later than the day after admission; envelopes to be marked C. 2, Casualties: rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
864	Private	Tracey, Augustus	1 Newfoundland C Co.	G.S.W.IX.frac.both.

(Sd.) Lieut. R.A.M.C.,  
 for Lieut. Col. R.A.M.C.,  
 Officer in charge Military Hospital,  
 Bethnal Green.