

3259

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3509 Name A. J. Payne Corps Artillery

Questions to be put to the Recruit before Enlistment.

1. What is your name? Abraham J. Payne
2. What is your full Address? St. John's, Nfld.
3. Are you a British Subject? yes
4. What is your age? 27 Years Months
5. What is your Trade or Calling? fisherman
6. Are you Married? no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? no
8. Are you willing to be vaccinated or re-vaccinated? yes
9. Are you willing to be enlisted for General Service? yes
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. yes

I, A. J. Payne 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.

A. James SIGNATURE OF RECRUIT.
P. S. Jones Signature of Witness.

A. J. Payne 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 fully stated as replied to, and the said recruit has made and signed the declaration, and taken the oath before me on this 11 day of Nov 1915.

Signature of Attesting Officer W. A. [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 Artillery if enlisted by special authority, such will be attached to the original attestation.

Date 1915

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name _____

Apparent age _____ years _____ months. Height _____ feet _____ inches

Chest Measurement { Girth when fully expanded _____ inches
 Range of expansion _____ inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin _____

| Relationship _____

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.

<small>(a)</small>	<small>(b)</small>	<small>(c)</small>	<small>(d)</small>
--------------------	--------------------	--------------------	--------------------

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									<div style="font-size: 2em; margin-bottom: 10px;">}</div>
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
Pensions " _____ [" "] _____ " _____ "									



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No 3559 Name A. J. Dwyer Corps Q/S

Questions to be put to the Recruit before Enlistment.

1. What is your name? William James Dwyer
2. What is your full Address? } St. John's, Nfld.
3. Are you a British Subject? } yes
4. What is your age? } 23 Years Months
5. What is your Trade or Calling? } fisherman
6. Are you Married? } no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? } no
8. Are you willing to be vaccinated or re-vaccinated? } yes
9. Are you willing to be enlisted for General Service? } yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... } no
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? } yes

I, A. J. Dwyer, 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.

A. J. Dwyer SIGNATURE OF RECRUIT.

R. Adams Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, A. J. Dwyer, do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me on this 17 day of Nov 1915.

Chas. A. [Signature] Signature of Attesting Officer

† 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 1915

Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name James [unclear]
 Apparent age 53 years 5 months. Height 5 feet 1 inches
 Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin James [unclear]
W. B. | Relationship with
 Particulars as to Marriage _____

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>17-11-16</u>									
Joined at <u>W. B. [unclear]</u> <u>December 17-16</u>									
<u>Embarked St. John's N.S. Royal to Union N.S. 31-17</u>									
<u>Embarked for [unclear] 11-6-17 June Bath.</u>									
<u>M.D. 9-9-17 [unclear] 5th Regt. in the [unclear] 9-9-17 [unclear]</u>									
<u>Embarked 19-9-17 [unclear] 3rd [unclear] 17-9-17 [unclear]</u>									
<u>attached [unclear] depot 22-7-18 [unclear] 1-3-18 [unclear]</u>									
<u>Mining 28-3-1918</u>									
<u>Killed in action 28-3-1918</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 28-3-18 (date of discharge) 1 years 213 days
 " " " Pensions " _____



This Form is to be used in connection with Pamph. M. E. (2) H. 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 *Abraham J. Swine*
aged *23 yrs.* conducted at

Date: *Nov 17/16* Recruiting Officer:

NO OF TEST FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *yes operation six months ago. For Service*
- 10 *h*
- 11 *"*
- 12 *"*
- 13 *"*
- 14 *"*
- 15 *"*
- 16 *"*
- 17 *"*
- 18 *"*
- 19 *W. A. H.*
- 20 *"*
- 21 *"*
- 22 *"*
- 23 *"*
- 24 *"*
- 25 *"*
- 26 *"*
- 27 *"*
- 28 *"*
- 29 *"*
- 30 *"*
- 31 *"*
- 32 *"*

3259

OK now
300

No. 5' 11"
135
54" 30 1/2"

San Francisco
Father James Swine Hauling Paint white
None

SW Signature of Medical Examiner: *SW Burden*

No. 319

A REGISTERED POSTAL PACKET

Received from

Addressed—

P.R. R. 209

Mr. [unclear]
Sanbury, Ct.

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

NOV 10 1918

Received a Registered Postal Packet addressed as above...

[Signature]

ap }

CR 3259

Nov. 18th. 18.

Mr. James Twyne,
Hauling Point,
St. Barbe.

Dear Mr. Twyne:

It is my regrettable duty to have to forward to you one package containing the effects of your late son #3259 Pte. A. James Twyne of the Royal Newfoundland Regiment .

I am enclosing herewith receipt. Will you kindly sign same and return at your earliest convenience.

Assuring you of my deepest sympathy in your bereavement, and in the added sorrow which the receipt of these effects must entail.

I am,


Yours sincerely,

Lieut.

Campbell Officer.

No. of Paper 1373**PERSONAL EFFECTS.**

Name Twyne A.F. C.R. 3259
 Rank Pte. Regiment THE ROYAL NEWFOUNDLAND REGT.

Article	Where stored	Notified by
Religious Book New Testament Post Card. Photo's Memo. 3 Francs 10 Centimes 1 penny (in Envelope)		
	Final disposal Mr. Jas. Twyne, Hauling Point, White Bay.	

Remarks:— **DECEASED.**
 Next of Kin James Twyne
Father. Hauling Point white Bay

CR. 3257
Counter No.

NEWFOUNDLAND 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 _____ Address Dept of Militia.

Line Number	Red	By	Sent	by	Check

Dated July 9th, 1918

To James Twyne, Hauling Point, St. Barbe.

Regret to inform you that Record Office, London, officially reports No. 3259, Private James Twyne previously reported missing March 28th, 1918 now reported dead no particulars given. Authority official German List June 17th, 1918

Upon receipt of further information I shall immediately wire you.

W.F. Rondell, Lieut. Col

Chief Staff Officer
for Minister of Militia.

NOTE FOR OPERATOR:

This Message is not to be delivered until Receiving Office notifies that Message to Curch of England

Minister or School Teacher Hauling Pt. has been received and acted upon

FOR TYPEWRITER

C.R. 3259
Number No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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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 _____ Address Dept of Militia.

Line Number	Red	By	Sent	by	Check

July 9th 1918

Dated

To Church of England Minister or School Teacher, Hauling St. St. Barbe

Regret to inform you that Record Office, London reports to-day No. 3259, Private James Twyne, previously reported missing March 28th, 1918 now reported dead no particulars given. Authority Official German List. Please inform next of kin.

W.F. Rendell, Lieut. Col
Chief Staff Officer.

CR 3259

Extract from Telegram received from London July 8th, 1918.

#3259 Pte. Twyne

Previously reported Missing now reported dead no
particulars given, Authority Official German List June 17th



LIST NO P M. 452 of 4.7.18.

NEWFOUNDLAND EXPEDITIONARY FORCE.

Official German List forwarded through Geneva Red Cross 17.6.18.

C.R.

32 59

LIST OF DEAD.

<u>Name.</u>	<u>Rank.</u>	<u>Regiment.</u>	<u>Remarks.</u>
* 6481	Brigade's	Newfoundland, Regt.	Fallen and buried on 16.4.18. in the district to the right of the road at the N. East exit of St. Romarin. Disc forwarded by a Res. Inf. Regt. 22. 4.18.
3259 Disc.	Twyne James.	Pte. Royal Newfoundland Regt.	The Pay book was sent in by the S. I. Central Office for effects on 15.4.18. without further details. Transmitted by intelligence Officer of an A.O.K.

1439

* Cannot be identified as belonging to Royal Newfoundland Regt

NEWFOUNDLAND POSTAL TELEGRAPHS.

C.R. 3259



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(NOT TRANSMITTED)

W.F.R.

Signature of Sender

Address **Dept of Militia.**

Line Number	Red	By	Sent	by	Check
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Dated **April 25th, 1918**

To **James Tryne, Hauling Point, St. Barbs.**

Regret to inform you that Record Office, London, officially reports **No. 3259, Private A. James Tryne missing March 28th.**

Upon receipt of further information I shall immediately wire you.

J.R. Bennett

Acting Minister of Militia.

FOR TYPEWRITER

C.R. 3259

Extract from Nominal Roll of Draft No. 39. 50 Other Banks
from 2 Bn. Royal Newfoundland Regiment to 1st Bn. Royal
Newfoundland Regiment, R.N.F.

Embarked Southampton, 1/8/18.

3259 Pte. A.J. Twyne.

C.R. 3639

3259 PTE. A. JAMES TWYNE.

EXT. OF CASUALTY LIST RECEIVED SEPT. 22nd 1917
"ADMITTED WANDSWORTH, PYREXIA OF UNKNOWN ORIGIN."

NEWFOUNDLAND POSTAL TELEGRAPHS.

Counter No. 83



Cable Connection with all the World

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

(NOT TRANSMITTED)

Signature of Sender John R. Bennett Address _____

Line Number	Rcd	By	Sent	by	Check

Dated

September 22, 1917.

To

Mr. James Twyne,
Hauling Point,
St. Barbe.

Regret to inform you that Record Office
London, officially reports No. 3259, Private

A. James Twyne, has been admitted to Wandsworth
suffering from pyrexia of unknown origin.

Upon receipt of further information I shall immedi-
ately wire you and trust that next report will be
of his convalescence.

JOHN R. BENNETT, R.A. SQUIRES

Colonial Secretary.

FOR TYPEWRITER

C.R. 3269

Subject from Central Mail of Draft No. 11: Reported Southampton 11/6/19
from 2/1st Newfoundland Regiment, Western-Canada, to 2/1st Newfoundland
Regiment I.C.F.

3250 Pte. Twyne, A.

C.R. 3259

Extract of Officers and men sial ed St John's 17-4-17

Sailed Halifax S. S. NORFOLK 17-4-17.

3259 Pte. A. J. TWYNE.

CR. 3259

Extrect from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Nov.17th, 1916.

3259 Pte. A.J. George.

Attached to the Strength from Nov.17th, 1916.

A. J. Wagner

C.R. 3259

~~1890~~

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

MEDICAL HISTORY

Surname Joyce Christian Name Abraham J

Table I.—GENERAL TABLE.

13 JUN 1917

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 17 day of Nov 1916		on _____ day of _____ 1916	
Declared Age	at St John's R.G. 23 years _____ days		at _____ day of _____ 1916	
Trade or Occupation	Fisherman			
Height	5 feet 11 inches		feet	inches
Weight	135 lbs.			lbs.
Chest (Grith when fully expanded)	29 1/2 inches			inches
Measurement (Range of Expansion)	5/2 inches			inches
Physical Development				
Vaccination Marks				
When Vaccinated				
Vision	R.E.—V= 6/6 L.E.—V= 6/6		R.E.—V= _____ L.E.—V= _____	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)	
Approved by (Signature)	Lamm Peterson			
(Rank)	Major			
	Medical Officer.		Medical Officer.	
Enlisted	at St John's on 17 day of Nov 1916		at _____ day of _____ 1916	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	3rd S Highland Regt	5259		
Transferred to	1st Newfoundland			
Became non-effective by	on _____ day of _____ 1916		on _____ day of _____ 1916	
(Signature)				
(Rank)				



Table II.—Only for admission to hospital or to the sick

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks (including syphilis, admission of to)
	Day	Month	Year	Day	Month	Year			
3 rd London General Hospital Hammersmith	19	9	17	19	"	17.	V.D.H.	61	
St. John's Hospital St. John's	30	11	17	22	1	18.	Trench Fever & Gascol	53	

List in case of Warrant Officers treated in quarters.

On the cause, nature or treatment of the case likely to be of interest or of future use. In cases of
discharge and re-admissions to hospital will be shown. The subsequent progress, including particulars
of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

Reported sick in France 7-9.17
with P.O. from here to have pulmonary
Syphilis in form of head
Do find!

Col. Q. III

G. C. Hall
Capt. Med.

G. C. Hall

Lt. Col., R.A.M.C.,

M.O. in Northern Command Depot.

REPORT.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, ac.: 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
5-1-17	Vaccination SP
21-11-16	SP
25-11-16	T.A.B. SP
9-1-17.	3. SP
22-1-18	Gen A III

[Signature]
Lt. Col. I. A. B. C.

M.O. 28 Northern Command Report

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
S.S. Florizel	Jan 31	Feb 3/17			
Windsor	Feb 3/17				

No. _____
Regt. *325 C*
Batt. *15*
Name *James J.*
Regiment *1st Regt.*
Date from *10.2* 191*8*
to *10.2* 191*8*

To proceed to _____



Address _____ which any



POST OFFICE TELEGRAPHS.

MADE & PRINTED IN GREAT BRITAIN.

If the Receiver of an Inland Telegram doubts its accuracy, he may have it repeated on payment of half the amount originally paid for its transmission, any fraction of 1d. less than 1d. being reckoned as 1d.; and if it be found that there was any inaccuracy, the amount paid for repetition will be refunded. Special conditions are applicable to the repetition of Foreign Telegrams.

Office Stamp.



Office of Origin and Service Instructions.

BRANCH

DEPARTMENT
Reference No. 1639

ACTIONED UPON

Charges
to pay

s. d.

Date Rec'd. 16 FEB 1888

BY
Bazeley Camp

1/3/50

Received here at

4/3/88

Ack'd.
Ans'd.

File TO
Synoptical London

66 16th aaa 3259 twyne
given Embarkation leave yesterday expires
20.2.18 issue warrant
Newfound Bazeley Camp -

Send to Records. #33

4.30 pm. 16/2/88

No. 3259 Rank Pte Name Lwynne E

Pay	R.A.	Ver	Total
100	10		110
Less: Allotment			60
Net Rate			50

12. 12. 17

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d								
						From	To			£	s	d						
Balance					Balance 8.6.17 ✓								65	✓				
Acquittance rolls	2	11	4		Pay @ Net Rate	9	17	19	17	164	50	82	00	16	16	12	✓	
Hospital Advances	1	17	6		Ration allowance	18	17	28	17	10	2/-			1	0	0	18.3.5	✓
A.B. 34					(13-14-7) ✓													
P. & R.O. Payments																		
4-8-10 ✓																		
Cash 4462 10/100		13	0	0														

CHECKED.
J.P.D.
 18 11 17

Registered No. 14842/3/PAX

Army Form A. 2019.

[In any reply the above number
should be quoted.]

17th, September 1918

SIR,

I have to acknowledge the receipt of your letter of the
21/1795 (Accounts 4)
13/9/18 (8100), No. and to acquaint you in reply that

A. B. 64 (Pay Book) and 'Identify disc' of No. 3259,
Pte. James Twyne, Royal Newfoundland Regiment, have
been received, please.

I am,

SIR,

Your obedient Servant,

..... Major,
Chief Paymaster & O i/c Records.

Secretary War Office,
Imperial Institute,
South Kensington,
S. W. 7.

Only for use with Men returned from an Expeditionary Force or from
Garrisons Abroad.

Army Form W. 3016.
(In Books of 100.)

No. _____ Date 19 Nov 1917 Admitted _____

(1) To the Officer i/c Records, 58 Victoria St 19/9/17
SW (Station).

(2) The Officer Commanding, 1st Command Depot
Ripon North (Station).

(3) The Paymaster, 58 Victoria St
SW (Station).

Regimental No. 3259

Rank and Name Pte T Wynn J.

Regiment or Corps 1st Field

has been granted a furlough from 19 Nov to 28 Nov

His address while on leave will be: 58 Victoria St
SW.

I consider he is fit for*
 i. ~~Duty~~
 ii. Command Depot. **II**
 iii. ~~Employment~~

* Strike out that which is inapplicable.
Officer in charge g c Hall
Regist. R.A.M.C. Hospital,
3rd London General Hospital,
WANDSWORTH, S.W. (Station).

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps two copies of A.F.W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

This man has been furloughed with pay
e warrant to Victoria and given
an advance of £1 (one pound).

WAR OFFICE,

IMPERIAL INSTITUTE,

SOUTH KENSINGTON,

LONDON, S.W.7.

No. 21/1795 (Accounts 4.)

13th September 1918.

Memorandum for

The Chief Paymaster
and Officer in Charge Records.
Newfoundland Contingent
58 Victoria St SW1.

The enclosed actesé service pay book
and identity disc of no: 3259, Private
James Iwyne, Royal Newfoundland Regt.
have been received from Germany and are
forwarded to you for disposal

~~No official report of the death of the
soldier has been received in this Office.~~

The effects were received with those of
British soldiers, and no details were
furnished - an acknowledgment is

NEWFOUNDLAND
PAY & RECORDS
Ref. Nos. 14 8100
Rec'd 14 Sept 1918
Ack'd
Ref. Nos. 001 14842/3.

UPON	
BY	
Comd	
P & A	
R & C	
B & F	
P.S.	

J. Leaven
for the Assistant Financial Secretary.

~~PAY LIST~~

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 3259

Rank

Pte

Name

Twyne J.

Died (a) Intestate

at France

on the 26th of March

1918.

Deserted at

on the of

191 .

I Certify to the correctness of above in every particular.

{ Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[Form 1.

Date	Dr.	£ s. d.			Cr.	£ s. d.		
		£	s.	d.		£	s.	d.
	Balance Dr. last month				Balance Cr. last month.... 25/3/18.....	1	1	7
	Cash issues (Date of each issue to be stated)				Pay days at from to.....			
		£	s.	d.	Proficiency, Service or good conduct pay days at from to.....			
	191				Messing allowance days at from to.....			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	"				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	Consolidated stoppage				Deferred Pay or Gratuity			
	Balance due by the Paymaster	1	1	7	Balance due to the Paymaster			
		£	1	1	7			

P.S.D.

I hereby Certify that the above account is correct in every particular, and that the
debtor balances of £ 1 1 7 is correctly chargeable against the Public (b).

Dated at

3 APR 1918

this day of

191

CHIEF PAYMASTER & OFFICER Paymaster, D.S.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italic to be struck out when there is no debtor balance.

~~PAY LIST~~

to

191 Voucher No.

~~NON-EFFECTIVE ACCOUNT.~~

Regiment or corps

No. 5208

Bank

Pte

Name

Twyne J.

Died Intestate

at France

on the 26th of March

1918.

Deserted at

on the of

191

I certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month..... 26/3/18.....	1	1	7
	Cash issues (Date of each issue to be stated)	£	s.	d.	Pay days at from to			
	101				Proficiency, Service or good conduct pay days at from to			
	"				Messing allowance days at from to			
	"				Kit allowance			
	"							
	Cash listed stoppage							
	Balance due by the Paymaster	1	1	7	Balance due to the Paymaster			
		£	1	1		£	1	1

This account is in accordance with advices received at the Pay & Record Office to / / 1918 and may therefore be subject to amendments if and as may be revealed by subsequent advices.

I hereby certify that the above account is correct in every particular, and that the debit balance of £ 1 1 7 is correctly chargeable against the Pte.

Dated at

3 APR 1918

this

day of

191

Paymaster

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be enclosed hereto, if not already sent to War Office with Army Form B, 2090 or Army Form O, 1415.
(b) Where it is desired to be struck out when there is no balance.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. **3259.**

Rank **Pte.**

Name **Swayne, S.**

Died (a) *intestate* at **France.**

on the **28th** of **March.** 191**8.**

Deserted at

on the of 191 .

I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

(Form 1.)

Date	Dr.	£ s. d.			Cr.	£ s. d.		
		£	s.	d.		£	s.	d.
	Balance Dr. last month				Balance Cr. last month 28 2 18	1	1	7
	Cash issues (Date of each issue to be stated)				Pay days at from to			
		£	s.	d.	Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at			
	"				from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	1	1	7	Balance due to the Paymaster			
		£	1	7		£	1	7

I hereby Certify that the above account is correct in every particular, and that the
debtor balance of £ 1 1 7 is correctly chargeable against the Public (b).

Dated at

this

day of

191

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 362 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 362 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P. or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service for consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal N. F. L. B.* 7. Former Trade or Occupation }
 2. Regtl. No. *3254* 3. Rank. *Pvt.* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *Edchy Ernest* (a) Former Regts. or Corps; with Regtl. Nos.
 (Surname) (Christian Names)
 5. Age last birthday. *26*
 6. Posted for duty on..... at.....
 in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service (b) Date of Discharge;
 (c) on duty (d) off duty? (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state:—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
 12. Place of origin of disability. *nil*
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war ✓
- (ii.) Previous active service.. .. ✓
- (iii.) Climate in pre-war service ✓
- (iv.) Ordinary military service before the war ✓
- (v.) Serious negligence or misconduct on the man's part. } *V.D.C. caused*
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, dislocation, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation, the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

No complaints of no feasibility

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

- (a) Discharge as permanently unfit?
 (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invaded at Foreign Stations.

Preparation

W.E. Proctor - Capt/RamC

Station *Hoykeflom*

Medical Officer in charge of case.

Date *27-3-19*

* 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

Only for use with Men returned from an Expeditionary Force or from
Garrisons Abroad.

Army Form W. 3016.
(In Books of 50.)

No. _____ Date 19 Nov 1917 Admitted

(1) To the Officer i/c Records, 58 Victoria St 19/11/17
SW (Station) _____

(2) The Officer Commanding, RAF Command Depot
Ripon North (Station) _____

(3) The Paymaster, 58 Victoria St
SW (Station) _____

Regimental No. 3259

Rank and Name Pte Twyne J.

Regiment or Corps 1st RAF

has been granted a furlough from 19 Nov to 28 Nov

His address while on leave will be: 58 Victoria St
SW.

I consider he is fit for*
• Strike out that which is inapplicable.
 i. ~~Detachment~~
 ii. Command Depot. **II**
 iii. ~~Employment~~

Officer in charge _____
Registrar, R.A.M.C.I. Hospital,
3rd London General Hospital,
WANDSWORTH, S.W. (Station).
G C Hall
Capt IMC

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps two copies of A.F.W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

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

Only for use with Men returned from an Expeditionary Force or from
Garrisons Abroad.

Army Form W. 9010.
(In Book of 20.)

No. _____ Date 19 Nov 1917 Admitted

(1) To the Officer i/c Records, 58 Victoria St
SW (Station), 19/11/17

(2) The Officer Commanding, Infld Command Depot
Ripon North (Station),

(4) The Paymaster, 58 Victoria St
SW (Station).

Regimental No. 3259

Rank and Name Pte Twyne J.

Regiment or Corps 1st Infld

has been granted a furlough from 19 Nov to 28 Nov

His address while on leave will be: 58 Victoria St
SW.

I consider he is fit for*

* Strike out that which is inapplicable.

- ~~i. Duty~~
ii. Command Depot. **II**
~~iii. Employment~~

Officer in charge

G. C. Hall
Capl Ind
Registrar, R.A.M.C. Hospital,
3rd London General Hospital,
WANDSWORTH, S.W. (Station).

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps two copies of A.F.W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

This man has been visited
a warrant to Victoria and given
an advance of £1. (one pound).

Woyne, A. J.

3259

Gay Sept.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 6 $\frac{7}{8}$.

Aug 8 19 19

Received from the First Newfoundland Regiment
the sum of Six 74 Dollars.
xx
as account of Pay. Estab.
balance

Ch. No. 4592	Initials <i>ew</i>
Pay Ledger 168	Initials <i>ew</i>
Gen. Ledger.....	Initials.....

A. C. S.

Regtl. No. _____ Rank _____

No. 3259

Rank

Pf

Name

J Twyne

James Twyne (Father)
Hauling Boat St Barb

In replying the date of this
letter should be quoted.

S-I



DEPARTMENT OF JUSTICE
ST. JOHN'S, NEWFOUNDLAND

26 July, 1919.

Sir,

As the estate of the late No. 3259 Pte. James Twyne consists of only \$6.74 at your office, I beg to recommend that this amount be paid out to his father, James Twyne, of Hauling Point, St. Barbe District.

I have the honour to be *A.C.R.*

Sir,

Your obedient servant,

Deputy Minister of Justice.

Capt. J. M. Howley,
Paymaster,
Royal Nfld. Regiment.

August 12, 1919

James Tynes,
Hauling Point,
St. Barbe.

Dear Sir:

I enclose herewith
cheque for \$6.74, balance of estate of late
Pte. Jas. Tynes,

Yours truly,

Capt.
PAYMASTER & O i/c RECORDS.

LM/

Enc. 1.

August, 6, 1919

Sir:

I have the honour to acknowledge receipt of your letter of July 26th, authorizing the payment of \$6,74 being the balance of the estate of the late Pte. James Twine, #3259, and to advise you that this will be attended to.

I have the honour to be,

Sir,

Your obedient servant,

Capt.
For Paymaster.

The Dep. Minister of Justice,
C i t y.

3259
1609 B

new papers.

Hauling Point
Back Cove
White Bay
Nov 9th
-1917

1st Newfoundland Regiment

Captain O. Grady
dear sir

I am writing you those
few lines concerning
my sons money I have
got every months money
regular only September's
money its missing I havent
got it and dont know
the reason, I am writing
to you to let you know
about it please write and
let me know the reason
why I didnt get it
I received one order Aug 2nd
and didnt receive

any more not untill Oct, 18
so you can see for yourself
Sept money is missing
so I must close hoping
to hear from you soon
I remains yours truly

James Twyne

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

SEP 28 1921.

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

Mr. James Twyne (Father)

in respect of his service as No. 3259 Rank Pte.

Name A. James Twyne

Royal Nfld. Regt.

~~1st Bn. The Buffs~~

Receipt of the same should be acknowledged hereon.

Received one Gold medal one Silver Medal

Signature Two pieces ribbon

Date November 11th 1921

Address James Twyne Hauling Point
Back Cove White Bay [P.T.O.]

ON HIS MAJESTY'S SERVICE.



OFFICER i/c RECORDS,

DEPARTMENT OF MILITIA,

ST. JOHN'S, Nfld.

3259

539437 257

To ensure that as far as may be possible none of the next of kin of those who have fallen in the War shall fail to receive the Memorial Plaque, it is requested that on receipt of the enclosed Plaque this card be signed at the bottom and posted. No stamp is required.

L

James W. Turner

22
20
1913
SEP 13
1913

Casualty Form—Active Service.

Regiment or Corps *Royal Newfoundland*

Rank *Pvt.* Surname *Doyle* Christian Name *W.*

Religion *C of E* Age on Enlistment *23* years *—* months

Enlisted (a) *17.11.16* Terms of Service (a) *Duration* Service reckons from (a) *17.11.16*

Date of promotion to present rank *—* Date of appointment to lance rank *—*

Extended Re-engaged Qualification (b) *—*

Occupation *Fisherman* *Forward Major* or Corps Trade and Rate *—* Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.103, Army Form A. 25, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.103, Army Form A. 25, or other official documents.
Date	From whom received				
			Embarked ... 1 MAR 1918		
			Disembarked... 3 MAR 1918		
<i>30-3-18</i>	<i>Officer</i>	<i>Missing believed Killed</i>		<i>28/3/18</i>	<i>B213</i>

W. Doyle

(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.



Army Form B. 103.

Regimental Number 3229

Casualty Form—Active Service.

Regiment or Corps Newfoundlanders

Rank Pvt. Surname Loyne Christian Name Abraham

Religion C of E Age on Enlistment 23 years — months

Enlisted (a) 17.9.16 Terms of Service (a) 5 years Service reckons from (a) 17.9.16

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

Extended — Re-engaged — Qualification (b) —

Occupation Assherman or Corps Trade and Rate — Signature of Officer B. S. Probert

Occupation Assherman Signature of Officer B. S. Probert

Report		Record of promotions, reductions, transfers, casualties, etc. during active service, as reported on Army Form B. 213, Army Form A. 35, 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. 35, or other official documents
Date	From whom received				
			Embarked <u>Hampton</u>	<u>11.6.17</u>	
			Disembarked... <u>Koreev</u>	<u>12.6.17</u>	
			Joined Battalion	<u>2 JUL 1917</u>	<u>B 213</u>
<u>8.9.17</u>	<u>8.9.17</u>	<u>Ad. P.U.O. trans.</u>	<u>14 BR L.</u>	<u>3.9.17</u>	<u>F.D. 230</u>
<u>10.9.17</u>	<u>63 6.6.17</u>	<u>Ad. DO</u>		<u>7.9.17</u>	<u>EA 424</u>
<u>26.9.17</u>	<u>54 8.10.17</u>	<u>Ad. DO</u>	<u>In the Field</u>	<u>9.9.17</u>	<u>H.P. 13913</u>
	<u>"It David"</u>	<u>Invalided to England</u>		<u>17.9.17</u>	<u>18.3.83</u>

[Handwritten signature]

[Handwritten signature: Saccuzzie]

MAJOR

1/c 1st Reg Infantry Section

C.H.C. 3rd Division

(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, Shipping-Smith, St. John's.
 18820 W. 13863/1477 1.400.000 1/17 MeA & W Ltd Forms B.1034 (R. 259) P.T.O.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121
2a

Regiment of 1st Newfoundland

Signature of O. C. Company Frank Lloyd Capt

Number of Sheets 1

Regimental Number and Name No. <u>3259</u> <u>Lwyne</u> <u>A</u>		Enlistment Age on <u>23</u> years - months		Trade <u>Fisherman</u>	Good Conduct Badges, Service pay or proficiency pay
Joined _____ Date _____	Joined _____ Date _____	Place and Date of Enlistment <u>St. John's, N.S.</u> <u>17.11.16</u>	Religion <u>CofE.</u>		
Joined _____ Date _____	Joined _____ Date _____	Period of <input type="checkbox"/> with Colours <u>2 1/2</u> years.	Place of Birth		
		<input type="checkbox"/> with Reserve _____ years.			

Place	Date of Offence	Rank	Character of Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Ripon</u>	<u>28.11.17</u>	<u>Pte</u>	<u>Obtaining his sick leave from 7pm until 6pm 20.11.17</u>	<u>Documentary</u>	<u>Deprived 3 days pay</u>	<u>4.12.17</u>	<u>W. L. Simkins</u>	<u>Forfeits 3 days pay by P.W. Clerk</u>
		<u>Capt</u>	<u>DD Clayton</u>	<u>No. 7 COY.</u>	<u>NORTHERN COMMAND</u>	<u>LEPOT.</u>	<u>RIPON.</u>	<u>21 JAN 1918</u>
			<u>Missing 25/18</u>					<u>Died in Enemy's Hands 17/18</u> <u>Reported 17/18</u>

To be carried over

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.

Number of Sheets *1st*

Regiment of *1st Newfoundland*

Signature of O. C. Company *Thos. H. Cope, Capt.*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badge, Service pay or proficiency pay
No.	<i>3259 Twyne. A.</i>	Age on	months	<i>Fisher</i>	
Joined		Place and Date of Enlistment		Religion	
Joined		Period of		Place of Birth	
Joined		with Reserve			

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>Ripon</i>	<i>28.11.17</i>	<i>Pte</i>		<i>Overstaying his sick leave from 7pm until 6pm 30.11.17</i>	<i>Documentary</i>	<i>Deprived 3 days pay</i>	<i>4.12.17</i>	<i>W. H. P. Smith</i>	<i>Forfeits 3 days pay & P.M. C.M.</i>
		<i>Capt</i>		<i>W. Clayton Berford</i>	<i>No. 7 Coy.</i>	<i>NORTHERN COMMAND</i>	<i>DEPOT, RIPON</i>	<i>21 JAN 1918</i>	
				<i>Missing 28th</i>					<i>Died in Enemy's hands 17th</i>
				<i>Reported 17th</i>					

To be carried over

C.R.

May 22nd 1920.

James Tryno, Esq.,

Pauline Point,

ST. JAMES DISTRICT.

Dear Sir:-

I am sending you up herewith the effects of your late son, 2359, etc. . James Tryno, which we receive from the office of the High Commissioner, London, a few days ago.

Kindly sign the enclosed receipt and return to this office.

Accepting you of my dearest sympathy in your sad bereavement and in the renewed sorrow which the receipt of these effects must entail.

Yours faithfully,

J. Hunt.

CHIEF CLERK.

3259
C.R.

This is to certify that I have received from
the Department of Militia, St. John's, effects
of my late son #3259, Pte. A. James Twyne. No 3259
with many thanks

Signed James Twyne

Date June 23/20

Place Hawking Point, White Bay