



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3614 Name John Barnes Corps 4th Bn CFB

Questions to be put to the Recruit before Enlistment

- 1. What is your name? 1. John Barnes
- 2. What is your full Address? 2. St. John's
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 Years 9 Months
- 5. What is your Trade or Calling? 5. Shoemaker
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. 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, John C. Barnes 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.

16/4/17 SIGNATURE OF RECRUIT.
John Barnes Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John C. Barnes 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 by the said recruit. John Barnes signed the declaration and taken the oath before me at St. John's on this 16th day of April 1917.
Signature of Attesting Officer John Barnes

†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
Date 1917
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 John B Barnes

Apparent age 19 years 9 months.

Height 5 feet 11 inches

Chest Measurement { Girth when fully expanded 34 inches
Range of expansion 4 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Ebenezer Barnes

Leslie Street St J

Relationship mother

Particulars as to Marriage

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

| (a) | (b) | (c) | (d) |
|-----|-----|-----|-----|
| | | | |

Particulars as to Children

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
| | |

STATEMENT OF THE SERVICES

| Corps in which served | Rgt. or Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension | | Service not allowed to reckon towards G. C. Pay | | Signature of Officers certifying correctness of entries |
|---|---------------|--|-----------|-------|--|------|---|------|---|
| | | | | | Years | Days | Years | Days | |
| Service towards limited engagement reckons from _____ | | | | | | | | | |
| Joined at _____ on _____ | | | | | | | | | |
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| Total Service forfeited as above..... | | | | | | | | | |

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " " Pensions " [" "] _____ " _____

3614



FIRST NEWFOUNDLAND REGIMENT

Off

ATTESTATION OF

No. 3614 Name John B. Barnes Corps 4/1st Hfld.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John B. Barnes
- 2. What is your full Address? 2. Leslie St. St. Johns.
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 Years 9 Months
- 5. What is your Trade or Calling? 5. Shellmaker
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. 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, John B. Barnes 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.

16/4/17 John Barnes SIGNATURE OF RECRUIT.
..... Witness Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. Johns on this 16th day of April 1917.

Signature of Attesting Officer Witness

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....191.....
Place..... } Approving Officer.

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

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, 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 John B. Barnes

Apparent age 19 years 9 months. Height 5 feet 11 inches

Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 4 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Lealie Street, Mrs Ebenezer Barnes | Relationship mother

Particulars as to Marriage

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

| (a) | (b) | (c) | (d) |
|-----|-----|-----|-----|
| | | | |

Particulars as to Children

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
| | |

STATEMENT OF THE SERVICES

| Corps in which served | 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>16-4-17</u> | | | | | | | | | |
| Joined at <u>Wkns</u> on <u>April 16</u> | | | | | | | | | |
| <u>Embarked Wkns S. Hoziel to Halifax N.S. 19</u> | | | | | | | | | |
| <u>Embarked for B.C. 1-12-17</u> | | | | | | | | | |
| <u>Joined 13th France 1-12-17</u> | | | | | | | | | |
| <u>Wounded 15-10-18</u> | | | | | | | | | |
| <u>Died of Wounds 15-10-18</u> | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |

Total Service towards Engagement to 15-10-18 (date of discharge) 1 years 183 days

" " " Pensions " " " " " " " " " " " "

No. *2614* Name *Barnes John* Sqn. *Battery*, } *1st D Corps 1st Newfoundland* Date of enlistment } *16.12.17* G.C. Badges }
 or Company } Service or Proficiency Pay }
 Date of last entry in } No. and date } Period not reckoning towards } Sheet No. *1* Signature O.C. } Character *Good*
 Company Conduct Sheet } of last drunk } freedom from extra fine } Company, etc. } *N.S. Knight of H.*

| 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>Field</i> | <i>2.11.18</i> | <i>Pte</i> | | <i>1. Not complying with an order 2. Intoxicated while on duty 3. Repeatedly drunk in camp</i> | <i>C. Smith Sgt J. B. Adams</i> | <i>28 days T.P. 1. Days for Service</i> | <i>3.11.18 25.7.18</i> | <i>Lt Col. Woodruffe Major Mathews</i> | <i>J. B.</i> |
| <i>Field</i> | <i>22.7.18</i> | | | | | | | | |
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Army Form B. 122

June 10th. 1919.

Mrs. Jessie Barnes,
Leslie Street,
City.

Dear Mrs. Barnes:-

It is my regrettable duty to have to forward to you, One parcel containing some effects which belonged to your late son, No. 3614 Private John G. Barnes of the Royal Newfoundland Regiment.

I enclose herewith receipt, will you kindly sign same and return to this Department 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.

Yours very sincerely,

Lieut.
Casualty Officer.

ENCLOS. 1.

BC.



C.R. 3614

DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPT. OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND,

June 10th 1919.

[Handwritten signature]

RECEIVED FROM DEPARTMENT OF MILITIA:



1. Parcel

Containing the effects of ~~your~~^{my} late
son #3614, Pte. John. C. Barnes.

Signed.....*Selina Jessie Barnes*.....

Date.....*June 16th 1919*.....

No. of Paper 1476**PERSONAL EFFECTS.**Name Barnes J.C.R. 3614Rank PrivateRegiment ROYAL NEWFOUNDLAND REGIMENT.

| Article | Where stored | Notified by |
|---|--|-------------|
| 1 Cotton bag containing:- Disc, photos; Relig medallion, Relig book, Iron cross; ribbon. |  | |
| | Final disposal | |
| |  | |

Remarks :- Casualty Advice:- Deceased 15-10-18
 Next of Kin:- Mother:- Mrs Stanger Barnes
Scobie Street,
St. Johns.

No. 576

A REGISTERED POSTAL PACKET

Received from

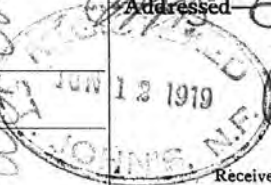
Addressed

Cheney Barnes
Off Leslie St

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

Office Stamp }

Muller



Received a Registered Postal Packet addressed as above...

M

1.—Hand to Sender.

C.R. 3614

Feb. 20th 19

Mrs. Jessie Barnes,
Lealie Street,
City.

Dear Mrs. Barnes:

I beg to inform you that we have received news by mail, from our Pay and Record Office, London, which states that your late son No. 3614 Pte. John C. Barnes, who died of wounds on October 15th 1918, was buried at the Reserveir Notch Cemetery, Ypres, Belgium,

These are all the particulars we have received to date concerning the burial of your late son, but if at anytime we should receive any further particulars, we will at once communicate with you.

Assuring you of my deepest sympathy in your bereavement.

Yours sincerely,



Lieut.
Casualty Officer.

C.R. 3614

Extract from Casualties received from Pay and Record
Office, London, Jan. 28th, 1918

3614 Pte. J.C. Barnes.

Was buried at Ypres Reservoir North Cemetery, (gate
of death 15-10-18) Reported by Garves Registration
Units. (Reports Ypres 1-68)

C.R. 3614

Oct. 24th, 1918

Dear Mrs. Barnes:

I very much regret to inform you that a report has been received from the Record Office, of the Royal Newfoundland Regiment, London stating that your son, No. 3614, Private John C. Barnes died of wounds at 140th Field Ambulance on October 15th, gun-shot wound head.

Should any further information be received concerning him, the same will at once be communicated to you.

Yours faithfully,

Minister of Militia.

Mrs. Jessie Barnes
Leslie Street
C I T Y

PROGRESS REPORTS.

NO.P.147715.

CR. 3614

O.C. 17 C.C.S. FRANCE reports 17th Oct.18.

46998 Pte. Mead P. 2/15 Lond.R.
15843 Cpl. Milner H. 15/KOYLI.
142237 Pte. Carter E.F. 14/HG.Cps.
58071 S/M. Leonard E.J. RA.Hqs.14/Div.

GSW Abdomen.
Gassed (Shell)
Gassed Shell Must.
Bron.Pneumonia.

DIED 17th Oct.18. at 12.30.a.m.
DIED 17th Oct.18. at 9.50.a.m.
DIED 16th Oct.18. at 5.0.p.m.
DIED 17th Oct.18. at 9.50.a.m.

O.C. 140 FLD.AMB FRANCE reports 15th Oct.18.

120278 Gnr. Buckhurst R.W.113/SB/RGA.
44417 Pte. Turner A. 18/R.Ir.Rifs.
50212 I/AM. Haigh C.B. RAF att 10/Bde RGA.
800749 Pte. Turner W.G. 26/R.Fus.
63569 Pte. Simons C. 26/R.Fus.
204734 L/C. Chaston A.E. 15/Hant R.
23136 Pte. Mennie W. 7/Seaf.Highrs.
36723 Sjt. Kawks J. D/190 BDE RFA.
3614 Pte. Barnes J. 1/NEWFOUNDLANDS R.
25749 Pte. Ellis J. 10/R.W.Surr R.

GSW Thigh R.Fr.
GS/ Abdomen.
GSW Head.
GSW Chest.
GSW Fem.L.
GSW Head.
GSW Chest Fr.Thigh R.
GSW Multiple Wds.
GSW Head.
GSW Abdomen.

DIED 14th Oct.18. at 1.30.a.m.
DIED 14th Oct.18.
DIED 14th Oct.18. at 11.50.p.m.
DIED 14th Oct.18.
DIED 14th OCT.18.
BROUGHT IN DEAD 14th OCT.18.
DIED 14th Oct.18. at 4.30.p.m.
ARRIVED DEAD 14th Oct.18.
ARRIVED DEAD 15th Oct.18.
DIED 14th Oct.18.

O.C. 10 C.C.S. FRANCE reports 16th Oct.18.

200788 Sjt. Shells W. 19/D.L.I.
51208 Pte. Blythe C. 18/Lancs Fus.
248884 Dvr. Austen A.W. 408/96 Bde RFA.
44745 Pte. Liquorish F.W. 20/D.L.I.
6134 Pte. Govey W. 26/R.Fus.
21048 Pte. Robertson D. 15/Chesh R.

BW Groin & Hip Pentr.Abdomen.
GSW Multiple Wds.
Typhoid Fever.
GSW Abdomen Pentr.
GSW R Leg.
GSW Legs & R Arm Amp.
Leg L.
GSW Chest R Arm.
GSW Shldr L.Knee R.
GSW Arm & Legs.
GSW Legs Fr
Pneumonia.
GSW Thigh & Abdomen.

DIED 15th Oct.18. at 6.30.a.m.
DIED 15th Oct.18. at 4.15. a.m.
DIED 15th Oct.18. at 2.30.a.m.
DIED 15th Oct.18. at 11. 50.a.m.
DIED 15th Oct.18. at 10.55.a.m.
DIED 15th Oct.18. at 7.10.p.m.
DIED 15th Oct.18. at 7.45.p.m.
DIED 15th Oct.18. at 9.p.m.
DIED 15th Oct.18. at 3.45.a.m.
DIED 16th Oct.18. at 5.a.m.
DIED 16th Oct.18. at 12.5.a.m.
DIED 16th Oct.18. at 6.a.m.

200600 L/C. Hotchkiss A. 1/4 Chesh R.
340552 Gnr. Lewis D. RGA 226/S.B.
11104 L/C. Stewart A.E. 26/R.Fus.
38941 Pte. Stoddert J. 19/D.L.I.
235120 Pte. Hodges W.A. 1/1 Herefords R.
145731 Pte. Green R. 35/Dv.Mg.Bty.



2102

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C 3614

Extract from Nominal Roll Draft No.34: from 2/1st Newfoundland Regiment
Ayr, to 1/1st Newfoundland Regiment B.E.F. Embarked Southampton 1/12/17.

3614 Pte. Barnes, J.

MP.

CR. 3614

Extract from Nominal Roll, embarked for Overseas from St. John's 19-5-17

3614 PTE. J. BARNES²

C.R. 3614

Extract from Daily Orders Part II Unit The Royal Rifles,
Regt., St. John's, April 16th, 1917.

3614 Pte. John Barnes.

Attached is the strength from April 16th, 1917.

J Barnes

C.R. 3614

ABC

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

MEDICAL HISTORY

Surname Barnes OF Christian Name John



Table I.—GENERAL TABLE.

Birthplace:—Parish St Johns County Wick

| | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|--|-------------|---------------|------------------|
| | Right | Left | Right | Left |
| Examined | on <u>16th</u> day of <u>April</u> 1917 | | on | day of 191 |
| | at <u>Headquarters</u> | | at | |
| Declared Age | <u>18</u> years <u>9</u> months | | years | days |
| Trade or Occupation | <u>Shellmaker</u> | | | |
| Height | <u>5</u> feet <u>11</u> inches | | feet | inches |
| Weight | <u>134</u> lbs. | | | lbs. |
| Chest Measurement | Grith when fully expanded ... <u>38</u> inches | | | inches |
| | Range of Expansion ... <u>4</u> inches | | | inches |
| Physical Development | | | | |
| Vaccination Marks | Arm | | | |
| | Number | <u>1</u> | | |
| When Vaccinated | | | | |
| Vision | R.E.—V= | <u>6/12</u> | R.E.—V= | |
| | L.E.—V= | <u>6/6</u> | 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) | <u>W.S. Pownier</u> | | | |
| (Rank) | <u>lieut.</u> | | | |
| | Medical Officer. | | | Medical Officer. |
| Enlisted | at <u>St Johns</u> | | at | |
| | on <u>16th</u> day of <u>April</u> 1917 | | on | day of 191 |
| Joined on Enlistment | Corps. | | Corps. | |
| | Regtl. No. | <u>3614</u> | Regtl. No. | |
| Transferred to | | | | |
| Became non-effective by | | | | |
| | on | day of 191 | on | day of 191 |
| (Signature) | | | | |
| (Rank) | | | | |

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 |
|---------|-------------------------------|
| | |
| 21-4-17 | } <u>T.A.B.</u> <u>W.S.P.</u> |
| 27-4-17 | |
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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 |
|----------------------|--------------------------------|-------------------------------------|----------------------|--------------------------------|-------------------------------------|
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This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

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

Examination of John Barnes
aged 19 years conducted at _____
Date: April 16 4/17 Recruiting Officer: _____

| NO OF TEST | FINDING |
|------------|--|
| 1 | no |
| 2 | no |
| 3 | no |
| 4 | no |
| 5 | no |
| 6 | no |
| 7 | no |
| 8 | no |
| 9 | no - ho |
| 10 | ~ |
| 11 | ~ |
| 12 | ~ |
| 13 | ~ |
| 14 | ~ |
| 15 | ~ |
| 16 | ~ |
| 17 | ~ |
| 18 | ~ |
| 19 | 66 left 6/12 Right |
| 20 | ~ |
| 21 | ~ |
| 22 | ~ |
| 23 | ~ |
| 24 | ~ |
| 25 | ~ |
| 26 | ~ |
| 27 | ~ |
| 28 | ~ |
| 29 | ~ |
| 30 | ~ |
| 31 | ~ |
| 32 | ~ |
| 33 | yes over 8 car 6 years ago |
| 34 | 5 ft 11 in |
| 35 | 134 lbs. |
| 36 | 34-38 |
| 37 | \$ 11.40 per week |
| 38 | Mother <u>Jessie Celina Cook</u> Lolie ST City |
| 39 | <u>J.W. Borden</u> |

J.W. Borden
Signature of Medical Examiner: _____

Nº 3591



4/1ST. NEWFOUNDLAND REGIMENT

5

ALLOTMENTS

I, John Barnes, Regl. No. 3614

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

Allotment begins June 1st 1917

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|---------------------------------|------------------------|----------------------|
| 3370 | Mother | Mrs Jessie Barnes (Coburnes) | Leslie st. St Johns | 50 |
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| | | | | |
| Total Allotment, \$ | | | | 50 |

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

(Sig.) Mark A. Aylet.
Officer Commanding
7 Company
St Johns N.F.
19 May 15 1917

(Sig.) Jack Barnes
(Rank) PL

No 3591



4/1st ST. NEWFOUNDLAND REGIMENT

5

ALLOTMENTS

John Barnes, Regl. No. 3614

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

Allotment begins June 1st 1917

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|------------------------------|----------------------|----------------------|
| 3370 | Mother | Mrs Jessie Barnes (Robineys) | Leslie St. St Johns. | 50 |
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| | | | | |
| Total Allotment, \$ | | | | 50 |

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

(Sig.) Frank Aye Capt.
Officer Commanding
4. Company
St Johns. N. F.
May 15 1917

(Sig.) Jack Barnes
(Rank) Pte

FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary sources.

REGIMENT (OR CORPS) "1st Newfoundland Regt." Squadron, Troop, Battery or Company)
 Regimental No. _____ Rank Private
 Surname Barnes. Christian Names _____

| COPIES SENT | | |
|---------------|-----|------|
| To | No. | DATE |
| M. or M. | | |
| D.C. 1st. Bn. | | |
| 2nd Bn. | | |

Date 15-10-18. Place France or Belgium.
 Died Cause of Death* Died of Wounds received in Action.



Nature and Date of Report W 3745d/ 15-10-18.

By whom made W 3745d/ 15-10-18.
 * Specially state if killed in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) _____ (b) in Small Book (if at Base) _____
 (c) as a separate document. Not received Not received

All private documents and effects received from the front ~~Not received~~ the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date 25-10-18. Signature of Officer in charge of Section Adjutant-General's Office at the Base [Signature]
 For Officer i/c No 1 Infantry Section 3rd Echelon, General Headquarters

Barnes, J

3614

Ray sept

Nov .11, 1919

Secretary,
Board of Pension Commissioners.

Re #3614 Pte. J. C. Burns.

Dear Sir:-

Referring to your letter of 30-4-19,
I beg to state that the amount paid in continuance
of this soldier's Allowance is Ninety-nine dollars
(\$99.00).

Yours truly

Major
Paymaster & Co.'s Records.

FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary sources.

REGIMENT^{AL} OR CORPS 1st Newfoundland Regt.^{ts} Squadron, Troop, Battery or Company)

Regimental No. 3614. Rank Private

Surname Barnes. Christian Names J.

Died { Date 15-10-18. Place France or Belgium.

{ Cause of Death* Died of Wounds received in Action.

Nature and Date of Report W 3745d/ 15-10-18.

By whom made O.C., 140th.F.A.

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

State whether he leaves { (a) in Pay Book (Army Book 64) Not received (b) in Small Book (if at Base) Not received
a Will or not { (c) as a separate document Not received

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date | 25-10-18. Signature of Officer in charge of Section |
Adjutant-General's Office at the Base | *Thorne*

For Officer i/c No 1 Infantry Section
3rd Echelon, General Headquarters

Red



THE BOARD OF
PENSION COMMISSIONERS
FOR NEWFOUNDLAND

Hon. Sir P. T. McGrath, K.B.E.,
(President Legislative Council),
Chairman.

Hon. J. A. Clift, K.C., C.B.E.,
Major W. H. Parsons, M.C.,
R.A.M.C.



In reply refer to

No. 762

St. John's,

Nov. 17, 1919.

Major Howley,
Paymaster & O.1/c Records.
City.

Dear Sir:-

of amount Enclosed please find cheque for \$99.00,
being refund, paid in continuance of Allotment,
on account of 3614 Pte. J. C. Barnes.

Please acknowledge receipt of this
cheque.

Yours faithfully,

[Signature]
Asst. Secretary.

ack file

BT.



4/ 1st. NEWFOUNDLAND REGIMENT 5

ALLOTMENTS

I, John Barnes, Regl. No. 3614

herely agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and fifty Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
concerned, viz :
 Allotment begins June 1st 1917

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|---------------------------------|------------------------|----------------------|
| 3370 | Mother | Mrs Jessie Barnes (Robinson) | Leslie st. St Johns | 50 |
| | | | | |
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| | | | | |
| | | | | |
| Total Allotment, \$ | | | | 50 |

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

(Sig.) Chas. Aye Capt.
Officer Commanding
4 - Company

(Sig.) John Barnes
(Rank) PL

St Johns N.F.
May 15 1917

In replying the date of this
letter should be quoted

B.

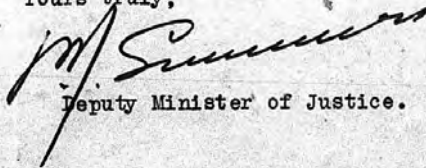


October 27, 1919.

Dear Madam:

I beg to inform you that you have been appointed Administratrix of the estate of your son, John C. Barnes, #3614. I have forwarded the Letters of Administration to Major Howley, who will send them to you together with a cheque for the amount due from the Pay & Record Office. According to law, after his debts are paid, you are bound to divide the residue of his estate in equal shares between yourself, his brothers and sisters, and if there are any children of a deceased brother or sister they would be entitled to their father's or mother's share in the estate.

Yours truly,



Deputy Minister of Justice.

Mrs. Selina Barnes,
Leslie Street,
City.

THE BOARD OF PENSION COMMISSIONERS FOR Nfld.

30.4.19

The Paymaster & Officer i/c Records,
St. John's Nfld.

DEAD AND MISSING MEN.

No. 3614

Rank Pte.

Name J. C. Barnes

Sir:-

I have the honour, by direction to advise you that a pension has been awarded to the Mother of the marginally noted, as follows:

Name Selina Isaac Barnes

Address Leslie St.

Pension \$20.00 per month

Pension commences 1-4-19

Kindly govern yourself accordingly, and advise me what deductions will have to be made.

I have the honour to be,

Sir,

Your obedient servant

C. J. Mc
Asst. Secretary.

B. F. C. Form 1.

15/10/18
to
30/4/19 @ \$0.4 per day
\$99.00

Discontinued
30/4/19
Jesse Barnes
Leslie St. City

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$106 ³⁹/₁₀₀

Oct 27 19 19

Received from the First Newfoundland Regiment
the sum of One hundred & Six ³⁹/₁₀₀ Dollars.
~~on account~~ of Pay. Estate.
balance

[Signature]

| | |
|------------------|-----------------|
| Ch. No. 19072 | Initials. E. W. |
| Pay Ledger..... | Initials..... |
| Gen. Ledger..... | Initials..... |

Regtl. No. *[Signature]*

Rank

No. 3614

Rank

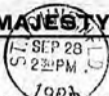
Pt

Name

J. C. Barrie

Lesho Street

ON HIS MAJESTY'S SERVICE



To the Officer in Charge of Records,

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

NO STAMP REQUIRED

Dept. of Militia,

St. John's.



I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. *3614* Rank *Plt*
Name *John C. Barnes*
Royal Newfoundland Regt.

Mrs S Barnes (Sgd.)

Mother Relationship.

Address, *Leslie Street*
city

C.R. 3614

FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 86, or from other official documentary sources.

REGIMENT) 1st Newfoundland Regt.¹³ Squadron, Troop, Battery or Company) Private
OR CORPS) 3614,

Regimental No. Barnes. Rank J.

Surname 15-10-18. Christian Name France or Belgium.

Died { Date 15-10-18. Place France or Belgium.
Cause of Death* Died of Wounds received in Action.

Nature and Date of Report W 3745d/ 15-10-18.
O.C., 140th. F.A.

By whom made _____
* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) Not received (b) in Small Book (if at Base) Not received
(c) as a separate document. Not received

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date 25-10-18. Signature of Officer in charge of Section [Signature]
Adjutant-General's Office at the Base

For Officer i/c No 1 Infantry Section
3rd Echelon, General Headquarters

Army Form B. 103.

Regimental Number **C.R. 3614****Casualty Form—Active Service.**Regiment or Corps *Newfoundland*Rank *pte* Surname *Barnes* Christian Name *John C*Religion *Church of England* Age on Enlistment *18* years *9* monthsEnlisted (a) *16/4/17* Terms of Service (a) Service reckons from (a) *16/4/17*

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

Extended { } Re-engaged { } Qualification (b) { }
or Corps Trade and Rate { }Occupation *Shell-maker* *Harold Knight RMT* Signature of Officer.

| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.103, 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.103, Army Form A.35, or other official documents. |
|-----------------|--------------------|--|--|------------------|--|
| Date | From whom received | | | | |
| | | | Embarked <i>Seely Harbour</i> | <i>2-12-17</i> | |
| | | | Disembarked... <i>Leves</i> | <i>4-12-17</i> | |
| <i>29.12.17</i> | <i>66 Bn</i> | <i>Joined to</i> <i>WITH Bn. 30-12-17.</i> | <i>11.12.17</i> | <i>11.12.17</i> | <i>B 213</i> |
| | <i>"</i> | <i>Rewarded 28 days 9/1 No. 1</i> | <i>Fad.</i> | <i>7/1/18</i> | <i>Ordn 247</i> |
| <i>15/10/18</i> | <i>140 FR</i> | <i>Died of Wounds</i> | <i>Fied</i> | <i>15/10/18</i> | <i>W 3745</i> |
| <i>Jmt</i> | | | <i>For Officer 1/4 Infantry Section</i> <i>General Headquarters 3rd Echelon</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) Signaller, Sholing-Smith, &c.

W.11863-15477 10000 1/17 (26/11) S P & Co, Ltd. Forms B.103/4 B.154.

(P.T.O.)

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
29.

Number of Sheet

Regiment of

1st Newfoundland.

Signature of O. C. Company

First
Thos. Dyer Esq.

| | | | | | |
|----------------------------|-------------------------------|------------------------------|---------------------------------|--------------------|--|
| Regimental Number and Name | | Enlistment | | Trade | Good Conduct Badge, Service pay or proficiency pay |
| No. | <i>3614. Barnes, John. G.</i> | Age on | <i>18</i> years <i>9</i> months | <i>Shellmaker.</i> | |
| Joined | Date | Place and Date of Enlistment | <i>St. John's.</i> | Religion | |
| Joined | Date | Period of | <i>16. 4. 17</i> | <i>Exp. C.</i> | |
| Joined | Date | | with Colours <i>182</i> years. | Place of Birth | |
| Joined | Date | | with Reserve <i>365</i> 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 |
|-------|-------------------------|------------|----------------------|---|------------------------------------|--------------------|---|----------------------------------|---------|
| | <i>Sept. 10. 11. 17</i> | <i>Pvt</i> | | <i>1. Breaking isolation 2. Absent from tattoo Roll call late reported at 12.30 pm.</i> | <i>Co. Diako Capt. Kendall</i> | <i>2 days Ctd.</i> | <i>17. 11. 17</i> | <i>Co. M. Emerson Lieut. Pte</i> | |
| | | | | <i>Died of Wounds</i> | <i>15</i> | <i>10</i> | <i>78</i> | | |

To be carried over

C.R.

3614

Leslie St.

CITY.

April 29th, 1920.

DEPARTMENT OF MILITIA,
St. John's, Nfld.

Dear Sirs:-

Mrs. Jessie Barnes acknowledges receipt of your letter dated December 22th, 1919, enclosing Memorial Scroll, and message from His Majesty the King, for same please accept her thanks.

Yours truly,

Kathleen Barnes.