



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 290

Name in full Michael John Blyde Age 19

Address 47 Fleming Street

~~Married~~ Single Height _____ Weight _____

Color Fair Hair Brown Eyes Blue

Other distinguishing marks none

Nearest relative Father & Mother

Address 47 Fleming Street

Dependents Mother, Father

Occupation Shoe Coffer Present Wage \$12.00 per week

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment _____

*engaged for duration of war
W. A. John Blyde
R. J. Sheppard
2nd Lieut.
Aug 14/15
Albertusht*

I, Michael John Blyde, 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 conditions of my service.

Mr John Blyde

Declared before me this 1 day of October 1914

Sept 5th

W. C. Seruan

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 280

Name Michael John Blyde

Apparent age 19 years months. Height feet inches.

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

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

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin - - - Blyde, 47 Flemming St., St. John's

Relationship Father & Mother

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of 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>5/9/14</u>									
Joined at <u>St. John's</u> on <u>5th September '14</u>									
		<u>Discharged</u>	<u>6. Office</u>	<u>26/9/15</u>					
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension _____ (") _____ " _____ "									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 280

Name **Michael John Blyde**

Apparent age **19** years _____ months. Height _____ feet _____ inches.

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

Distinctive marks **Color: Fair, Hair: Brown, Eyes: Blue.**

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Blyde, 47 Flemming St., St. John's**
| Relationship **Father & 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) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d) Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d) Verified from certificate

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed 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 5/9/14									
Joined at St. John's on 5th September '14									
<i>Died M.C. 2. Sept 26/15</i>									
<i>Embarked S.S. Royal for C.A. 3rd. Embarked on S.S. 20th. Decm 18th 1914</i>									
<i>Ret. and entrained for Cairo 31st. Embarked for Gallipoli 10th.</i>									
<i>Landed Sulva Bay night of 19-20 Sept 15</i>									
<i>Death of Herberts 26th 15. Gallipoli.</i>									
Total Service forfeited as above									
Total Service towards Engagement to 26-9-15 (date of discharge) 1 years 22 days									
" " " Pension " " " " " " " " " " " "									

October 9, 1915.

Dear Sir,

I beg to tender you, on behalf of the Government, as well as for my self, sincerest sympathy on the death from wounds, on the 26th September, of your son Private Michael John Blyde, of the First Newfoundland Regiment.

Your son's name will stand high on the Roll of Honour, he being the first to fall on the field of battle, yielding up his life, and, with such unselfish devotion, standing in the breach at the time of the nation's danger. He died for his King and Country, and in the defence of the principles of Righteousness and Justice. It will, no doubt, be solace to you to realize that he did his part even to the utmost, and his name will ever be kept in memory by those whom he went forth to defend, and for whom he ultimately gave up his life.

I am

Sympathetically yours,

Colonial Secretary.

John Blyde,
47 Fleming Street,
City.



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1914

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 *Blyde* *Michael John* *Jack* *293*
aged *19* conducted at *C E B Army*
Date: *29/8/14* Recruiting Officer:

NO. OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 yes
- 9 no
- 10 Perfect
- 11 n
- 12 n
- 13 n
- 14 n
- 15 n
- 16 n
- 17 n
- 18 n
- 19 n
- 20 n
- 21 n
- 22 n
- 23 n
- 24 n
- 25 n
- 26 n
- 27 n
- 28 n
- 29 n
- 30 n
- 31 n
- 32 left Venereal moderate
- 33 yes 10yr. ago
- 34 5rs
- 35 20
- 36 20 1/2 - 25 3/4
- 37 650 ayr.
- 38 3400 mites
- 39 highway

Fit. 280

Signature of Medical Examiner: *Cluny Macpherson M.D.*

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

MEDICAL HISTORY

Surname Blyde OF Christian Name Michael John

Table I.—GENERAL TABLE.

Birthplace:—Parish	County		SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	191	on	day of	191
Examined ...	at			at		
Declared age ...		19 years	days		years	days
Trade or occupation ...		<u>Shoe Cutter</u>				
Height ...		feet	inches		feet	inches
Weight ...			lbs.			lbs.
Chest Measurement { Girth when fully expanded Range of expansion ...			inches			inches
			inches			inches
Physical development ...						
Vaccination marks { Arm ... Number ...		Right	Left		Right	Left
When vaccinated ...						
Vision ...		R.E. - V =			R.E. - V =	
		L.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)						
(Rank)						
			Medical Officer.			Medical Officer.
Enlisted ...	at	<u>St. Johns</u>		at		
	on	day of	191	on	day of	191
Joined on enlistment ...		Corps	Regtl. No.		Corps	Regtl. No.
		<u>1st Field</u>	<u>280</u>			
Transferred to ...						
Became non-effective by ...						
	on	day of	191	on	day of	191
(Signature)						
(Rank)						

PAY LIST.

to 16 September 1915. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *1st Newfoundland*
 No. *280* Rank *Private* Name *Blyde*
 Died (a) at *N. S. F.* on the *16* of *September* 191*5*.
 Deserted at _____ on the _____ of _____ 191*5*.

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.....			18 5 3
	Cash issues (Date of each issue to be stated)				Pay <i>6</i> days at <i>from</i> _____ to <i>17/9/15</i> <i>Exchange Balance</i>			9 2
	Proficiency, Service or good conduct pay				Proficiency, Service or good conduct pay			
	_____ 191 <i>5</i>				_____ days at _____ from _____ to _____			
	_____ "				Messing allowance _____ days at _____			
	_____ "				_____ from _____ to _____			
	_____ "				Clothing and kit allowance			
	_____ "				Amount produced by the sale of Necessaries			
	<i>Allotment paid to 31 Oct 1915-21/10/15</i>				Personal Clothing and Effects from Form 2...			
	<i>35 days @ 60. 721⁰⁰</i>			4 6 3	Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	Consolidated stoppage				Deferred Pay or Gratuity.....			
	Balance due by the Paymaster				Balance due to the Paymaster.....	2 18		7 2
		£	4	6 3		£	4	6 3

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ *4 6 3* is correctly chargeable against the Public AND CONTINGENT

Dated at _____ day of _____ 191*5*.

PAYMASTER & OFFICER *Paymaster*

(a) Here state whether the soldier died intestate or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 1090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

NEWFOUNDLAND CONTINGENT

INVENTORY of EFFECTS of

No. *2842 Pte. M. J. Blyde* deceased.

EXTRACT from A.F. B.2090A, dated *13/10/15* :

CAUSE of DEATH *Death of Wounds*

DATE *26/9/15* PLACE *Gallipoli*

WILL: (a) in Pay Book _____

(b) in Small Book _____

(c) Separate document _____

NEXT of KIN: _____

Relationship *Father & Mother*

Address *17 St. Johns St. N. 7*

Particulars

- 1 Brooch. (Two Egyptian coins)
- 1 Photograph
- 2 Picture Post Cards
- 1 Letter
- 1 Identity Disc.
- 1 Soldier's Small Book.



From

General Headquarters,
3rd Echelon, M.E.F.

To Capt. W.H. Timewell,
Pay & Record Offices,
Newfoundland Regt.
88 Victoria Street.
LONDON. S.W.

Herewith Death Report (Army Form B.2090a) for the
under-mentioned:-

Regiment.	No.	Rank.	Name.	B.2090a.	A.B.64.
1st. Newfoundland Regiment.	280.	Private.	Blyde, J.	1.	1.

J.W. Turner
LIEUT.
Officer i/c Sub-section Records.
2nd Mounted Division, G.H.Q.
3rd, Echelon. M.E.F.

ALEXANDRIA.
4th, Oct, 1915.

TELEGRAM AND CABLE ADDRESS
"PAYCANEX," LONDON.

Please Address all communications:

"CHIEF PAYMASTER,"

and quote

E. 25-B-489

E. 211015.

ESTATES BRANCH,
CANADIAN CONTINGENTS,
WESTMINSTER HOUSE,
7, MILLBANK, LONDON, S.W.

21st October 1915.

To:-
Officer in Charge,
Newfoundland Record Office,
58, Victoria Street, S.W.

Sir,

I beg to forward herewith soldier's
small book and Army Form B. 2090A for
No. 280, Private J. Blyde, 14th Battn,
1st Newfoundland Regiment, which was
forwarded here in error.

I have the honour to be,

Sir,

Your obedient servant,

Gregor
Major,

ASSISTANT CHIEF PAYMASTER.

McD/N/P.

Enclosure.

F

1ST N WFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	1021
Rec'd.	OCT 23 1915
Acc'd.	OCT 23 1915
Ans'd.	
File No.	

From

General Headquarters,
3rd Echelon, M.E.F.



To

Capt, W.H. Timewell,
Pay & Record Offices,
Newfoundland Regmt.
58 Victoria Street,
LONDON. S.W.

Herewith Personal effects -as per the enclosed Inventory-
together with Identity Disc, of the deceased soldier undermentioned:-

Regiment.	No.	Rank.	Name.	Remarks.
1st. Newfoundland. Regiment.	280.	Private.	Blyde, J.	

K.W. Turner LIEUT.

Officer i/c Sub-section Records.
2nd. MOUNTED DIVISION. G.H.Q
3rd Echelon, M. E. F.

ALEXANDRIA.
Oct, 4th. 1915.

11
I N V E N T O R Y .

Copy made

Personal effects forwarded from the Field of the late
Private J. Blyde. 1st Newfoundland Regiment.

- 1. Small Brooch (Three Egyptian Coins).
- 1. Photograph.
- 2. Picture Postcards.
- 1. Letter (Signed Stan. G. Grimes.)



A. W. Turner LIEUT.
Officer i/c Sub-section Records
2nd Mounted Division. G.H.Q.
3rd Echelon M. E. F.

ALEXANDRIA.
4th, Oct, 1915.

FIELD SERVICE.

25-B-A 89

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 } 1st. Newfoundland Regmt. Squadron, }
 or } Troop, Battery }
 CORPS } or Company }

Regtl. No. 280. Rank Private.

Name Blyde, J.



Date 26th. September 1915.

Died Place Gallipoli.

Cause of Death* Died of Wounds received in action.

Nature and Date of Report Letter dated 2/10/15.

By whom made 88th Field Ambulance, R.A.M.C

* 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.

Place Not to hand.

Burial Date Not to hand.

By whom reported _____

State whether he leaves a will or not

- (a) in Pay Book (Army Book 64) No.
- (b) in Small Book (if at Base) No.
- (c) as a separate document No.

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.



Signature of Officer in charge of Section Adjutant-General's Office at the Base

D. S. Turner **LIEUT.**

Officer i/c Sub-section Records
 2nd Mounted Division B.H.Q.
 3rd Echelon, M.E.F.

Station and Date _____

ST. JOHN'S
SEP 15
9-AM

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.

.....1921

I beg to acknowledge receipt of
 Memorial Plaque issued in respect of services of
 the late No. 280 Rank Pte.
 Name M. J. Blyde
 Royal Newfoundland Regt.

Mrs. J. Blyde (Sgd.)

Mother Relationship.

Address 49 Flemming St.

B. ③ ✓

October 8, 1915.

Dear Sir,

I regret to have to inform you that the Record Office of the Newfoundland Regiment, London, has to-day officially reported that No. 280 Private Michael John Blyde, 47 Fleming Street, died of wounds.

Sympathetically yours,

Colonial Secretary.

Mr. John Blyde,
47 Fleming Street.

26 Sep

Casualty Form—Active Service.

Regiment or Corps NEWFOUNDLANDRegimental No. 280 Rank Private Name BLYDE, J.Enlisted (a) 1/10/14 Terms of Service (a) One year Service reckons from (a) EnlistmentDate of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } roll of N.C.Os. }Extended _____ Re-engaged Aug. 13/15 ^{Duration of war} Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 33, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's Nfld.		3/10/14	
		Disembarked Alexandria		1/9/15	
		Embarked for Gallipoli		13/9/15	
4/10/15	88th, F.A. R.A.M.C.	Died of Wounds Letter dated 2/10/15, from 88th Field Ambulance R.A.M.C.	Gallipoli	26/9/15	Authy. No.A.12021,

(Sgd) D.W. TURNER, Lieut.
Officer i/c Sub-section Records.
2nd Mounted Division, G.H.Q.
3rd Echelon. M.E.F.

(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, Shooting Smith, etc., etc., also special qualifications in technical Corps duties.

C.R. 280

Extract of Mediterranean Force Casualties, NO: M. 8770, dated Oct. 8th. 1915.

Third Echelon, Mediterranean Expeditionary Force, Alexandria, telegraphs
4th. October, 1915. (M.F.C. 19891. Received 4th. October, 1915)

Died of Wounds 26th. September, 1915.

280 Pte. J. Blyde.

Newfoundland Regiment.

RECEIPT.

C.R. 280

I hereby certify that I have received the 1914-1915

STAR.

No 280

Name

Michael John Biele

Witness

Rollie Grouchy

Date

July 26/20

Place

18 Belvidere St

^{has}
Mrs John ^{has} Biele
work

m. B.

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 14 1921

1921.

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

Mr. J. Blyde (Father)

in respect of his service as No. 280 Rank Pte.

Name Michael J. Blyde Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received _____

Signature Miss J. Blyde

Date Sep 19th 1921

Address 49 Flemming st

[P.T.O.]

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.,
(Minister Agriculture and Mines)
Capt. W. H. Parsons, R.A.M.C.

In reply refer to

C.R. 280



St. John's

Feb'y. 21/19

J. R. Bennett, Esq.,
Minister of Militia,
City.

Sir:-

I have to acknowledge yours of Feby. 20/19
No. 280, relating to the case of Mrs. John Blide,
mother of 280 Pte. M. J. Blide, deceased.

This case has been considered by the Board,
and its decision is, that in view of the fact that
deceased was ^{not} the sole or main support of applicant,
no pension could be granted.

Mrs. Blide has been advised of the Board's
decision, but I shall communicate with her again.

I have the honour to be,
Sir,
Your obedient servant,

W. H. Parsons
Secretary.
Board of Pension Commissioners
for Newfoundland.

WHP/LBD.

C.R. 280

Feb. 20th, 19

Major W.H. Parsons

Secretary

Board of Pension Commissioners

Sir :-

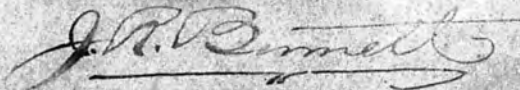
Mrs. John Blyde of 49 Fleming Street, mother of No. 280 Private M.J. Blyde deceased, called on me a short time ago asking for the continuation of her son's allotment. He was killed in the early part of the war, being one of the first to give up his life, and since that time, up to three months ago the allotment has been continued pending the adjustment of pension.

I am not aware whether your Board has considered this case or not, but I am informed that, although the father is alive and employed with the Sanitary Department, he has a large family of eight in number to maintain. I promised Mrs. Blyde to have this matter referred to your Board for consideration and final decision. Please communicate with her direct at the foregoing address.

I have the honour to be

Sir,

Your obedient servant



MINISTER OF MILITIA

C.R. 280

Michael J. Blyde. was attested for General service
with the NEWFOUNDLAND REGIMENT on ..Sept. 5th. 1914.
Regimental No 280 was allotted to Pte. Mic. J. Blyde.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

C.R. 280

Extract from Nominal Roll Embarked St. John's per S.S.
"Florizel" Oct. 4. 1914.

280 Blyde Michael J.

C.R. 780

Extract from Nominal Roll Co. 1st. Bn. Nfld. Regt.

Embarked, at Devenport for Active Service 20-8-15

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

280 Pte. J. Blyde.

Extract of Daily Orders part 11 from Unit: Newfoundland ,dated October
8th. 1915.

C.R. 280

280 Pte. J. Blyde

"B" Coy.....Died of Wounds 26th. September, 1915.

C.R. 280

Extract of Daily Orders Part 11. October 8th. 1915.

280, Pte J. Blyde. ✓

B. Co. Died of Wounds 26th. Sept. 1915.

C.R. 280

Copy of Cablegram to Governor St. John's Nfld from P.&.R.O. 8 Oct. 18

280, Pte Blyde. ✓

Died of Wounds September 26th.

C.R. 780

Extract of Casualty list received from Pay & Record
Office, London, dated November 18, 1915.

#280 Pte. M.J. Blyde. ✓

Died of Wounds, 26/9/15.

Casualty Form—Active Service.

Regiment or Corps Newfoundland

Regimental No. 280 Rank Pte. Name Blyde, J.

Enlisted (a) 1/10/14 Terms of Service (a) one year Service reckons from (a) enlistment

Date of promotion to } present rank } Date of appointment } Numerical position on }
 } } duration of War } roll of N.C.Os. }

Extended _____ Re-engaged Aug 13/15 Qualification (b) _____

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	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, Nfld.		3/10/14	
		Disembarked Alexandria		1/9/15	
		Embarked for Gallipoli		13/9/15	
4/10/15	88th, F.A. R.A.M.C.	Died of Wounds. Letter dated 2/10/15, from 88th Field Ambulance R.A.M.C.	Gallipoli	26/9/15	Authy. No. A.12021.



[Handwritten signature]

[Handwritten signature] **LIEUT.**
 Officer i/c Sub-section Records.
 2nd, Mounted Division, G.H.Q.
 3rd Echelon, M.E.F.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

Mr. J. Blyde

280

P. + R. O.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of Newfoundland

Number of Sheet 1

Signature of O. C. Company Sam Alexander Capt

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.20,712-s.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.		Age on	years months	Shoe-Cutter	
<u>270</u>	<u>Blyde J</u>				
Joined	Date	Date of Enlistment		Religion	
Joined	Date	Period of	{ with Colours years. with Reserve years.	<u>R. C.</u>	

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>Pond Farm</u>	<u>17/11/14</u>	<u>Pte.</u>		<u>Absent over staying pass till 10:30 p.m. 17th.</u>	<u>Sgt. Major Dick</u>	<u>3 days C.C.</u>	<u>19/11/14</u>	<u>Major Burton</u>	<u>Forfeits 3 R.P. days pay under R.W. Forfeits 4 days pay under R.W. Forfeits.</u>
<u>Bustard</u>	<u>23/11/14</u>	<u>"</u>		<u>Absent from Camp from 9 p.m. to 2 p.m. Nov. 26th.</u>	<u>Sgt. Dick</u>	<u>4 days C.C.</u>	<u>27/11/14</u>	<u>Major Burton</u>	<u>R.W. Forfeits 4 days pay under R.W. Forfeits.</u>
<u>Fort George</u>	<u>2.1.15</u>	<u>"</u>		<u>absent from tattoo until 10 p.m. 4.1.15</u>	<u>Sgt. Dick</u>	<u>5 days C.B.</u>	<u>5.1.15</u>	<u>Capt Bernard</u>	<u>forfeits 2 days pay R.W.</u>
<u>Fort George</u>	<u>Jan 18th 1915</u>	<u>"</u>		<u>Absent from 9 a.m. Parade</u>	<u>Sgt. Snow</u>	<u>2 days E.B.</u>	<u>18.1.15</u>	<u>Capt Alexander</u>	
<u>Fort George</u>	<u>21 Jan</u>	<u>"</u>		<u>Absent from Tattoo</u>	<u>Sgt. Snow</u>	<u>3 days E.B.</u>	<u>21.1.15</u>	<u>Capt Bernard</u>	
<u>Edinburgh</u>	<u>Mar 9th</u>	<u>"</u>		<u>Absent from 9 a.m. parade</u>	<u>Sgt. M. Pauer</u>	<u>2 days E.B.</u>	<u>9.3.15</u>	<u>Capt Alexander</u>	
<u>Edinburgh</u>	<u>Mar 9th</u>	<u>"</u>		<u>Absent fr 4 defaulters calls.</u>	<u>Sgt. Steele</u>	<u>4 days E.B.</u>	<u>10.3.15</u>	<u>Capt Alexander</u>	
<u>Stobs</u>	<u>May 29th</u>	<u>"</u>		<u>Absent from Tattoo till 12 m.m. June 1st</u> <u>To be carried over</u>	<u>L. Cpl. Taylor</u>	<u>4 days C.C.</u>	<u>2.6.15</u>	<u>Capt Alexander</u>	<u>Forfeits 4 days pay under R.W.</u>

Army Form B. 121.

1915

Brought forward

Stokes

July 2nd

Pte

Absent from 7. am Parade

Lt Col Taylor

2 days C.E.

27.15

Capt. Alexander

Badayr

Aug 9th

Pte

Overstay Pass from
midnight Aug 8th to 11.00 Aug 15

Cpl. Oakley

forfeits 10 days pay
2 days C.B.

108.15

Capt. Alexander

Blyde. m. q.

280

Pay Dept

FIELD SERVICE.

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.

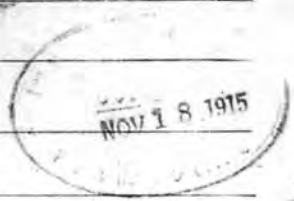
REGIMENT } 1st. Newfoundland Regiment Squadron, Troop, Battery or Company }
or
CORPS }



Regtl. No. 280 Rank Private

Name Blyde, J.

Died { Date 26th. September, 1915.
Place Gallipoli.
Cause of Death * Died of wounds received in Action.



Nature and Date of Report Letter dated 2/10/15.

By whom made 88th. Field Ambulance, R.A.M.G.

* 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.

Burial { Place Not to hand.
Date Not to hand.
By whom reported - - - - -

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) No.
(b) in Small Book (if at Base) No.
(c) as a separate document No.

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.

Signature of Officer in charge of Section Adjutant-General's Office at the Base } (Sd.) D.W. TURNER, Lieut.
Officer i/c Sub-section Records
2nd. Mounted Division, G.H.Q.
3rd. Echelon, M.E.F.

Station and Date _____

FIELD SERVICE.

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 } 1st. Newfoundland Regt. Squadron, }
or } Troop, Battery }
CORPS } or Company }

Regtl. No. 280. Rank Private.

Name Blyde, J.

Died { Date 26th. September 1915.

{ Place Gallipoli.

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

Nature and Date of Report Letter dated 2/10/15.

By whom made 88th Field Ambulance, R.A.M.C.

* 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.

Burial { Place Not to hand.

{ Date Not to hand.

{ By whom reported -----

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) No.
{ (b) in Small Book (if at Base) No.
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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.

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Signature of Officer in charge
of Section Adjutant-General's
Office at the Base

J. W. Turner **LIEUT.**
Officer i/c Sub-section Records
2nd Mounted Division H.Q.
3rd Echelon, M.E.F.

Station and Date _____

PAY LIST.

to 26 September 1915. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *1st Newfoundland*
 No. *280* Rank *Private* Name *J. Blyde*
 Died (a) at *M. E. S.* on the *26* of *September* 1915.
 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.

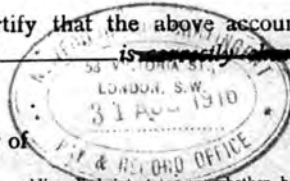
[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month... <i>26.9.15</i>		18	5 1/2
	Cash issues (Date of each issue to be stated)				Pay days at from <i>to</i> <i>Exchange Bal. 19/3/15</i> Proficiency, Service or good conduct pay		9	2
	£ s. d. 191 " " "				days at from _____ to _____ Messing allowance days at from _____ to _____			
	<i>Allstment paid to</i> <i>31st Oct. 26/9/15-31/10/15</i> <i>35 days @ .60 \$ 21.00</i> Consolidated stoppage			<i>4-6 3</i>	Clothing and kit allowance			
					Amount produced by the sale of Necessaries			
					Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity.....			
	Balance due by the Paymaster				Balance due to the Paymaster.....	2	18	7 1/2
		£	4	6		£	4	6
				3				3

I hereby Certify that the above account is correct in every particular, and that the ~~debtor balance of £~~ *is correctly chargeable against the Public*

Dated at
 this day of

191



J. H. Marshall
 PAYMASTER & OFFICER IN CHARGE
 Paymaster.

(a) Here state whether the soldier died intestate or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

NEWFOUNDLAND POSTAL TELEGRAPHS.



CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. _____ Sent by _____ Recd by _____ Class _____ No. 19

Place from _____

To _____

Grand Falls

St. John's

H. J. Regt

St. John's

SEP 19 1917

Please wire me name
and address of
soldier regimental
number 280.

H. J. FitzGerald

Michael John Blyde St. John's
47 Fleming St
Head of W. Sands

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 _____

Line Number	Rcd	By	Sent by	Check
Dated <u>H.F.Fitzgerald, Grand Falls,</u>				
To <u>September 19th, 1917</u>				

280 number of M.J.Blyde, died of Wounds at Gallipoli. Peopleside at
47 Fleming Street.

J.M.Howley Lieut.

Charge Nfld. Regiment.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, John Blyde, Regl. No. 280
 hereby agree, until further notification by me, and in similar official form, to make an Allotment of
 Dollars and Sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made
 on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or}
 Persons concerned, viz:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person).
	mother	Mrs Mary Blyde	47 Fleming St St John's Nfld.	60
<i>Excluded in action</i>				
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.) A. M. Leonard
 Officer Commanding
6 Company

(Sig.) John Blyde
 (Rank) Private

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$8.⁷⁴/₁₀₀

Oct. 26th 1917

Received from the First Newfoundland Regiment
the sum of Eight 74/₁₀₀ Dollars.
on account of Pay Estate:
balance

Cheque mailed Oct 29/1917

Ch. No. 576	Initials	RS
Pay Ledger 27	Initials	RS
Gen. Ledger 00	Initials	RS

Regtl. No. Rank

No. 280

Rank Pte.

Name J. Blyde

John Blyde
47 Fleming St.

October 29th.1917.

Mr. John Blyde,

47 Fleming Street.

Dear Sir,-

I enclose herewith cheque for \$8.74, being the balance due you as Administrator of the Estate of the late John Blyde. I also enclose letter of Administration.

Yours faithfully,

Capt. & Paymaster.

Enclosures 2.

National Archives
of CanadaArchives nationales
du CanadaPERSONNEL
RECORDS CENTRECENTRE DES DOCUMENTS
DU PERSONNEL

Location - Lieu

CONTROL AND REQUEST

CONTRÔLE ET DEMANDE

NFLD WWI BOX 24

Surname - Nom de famille

Surname - Nom de famille

Surname - Nom de famille

BLYDE

Given name - Prénom

Given name - Prénom

Given name - Prénom

MICHAEL

JOHN

ID number - N° d'identité

ID number - N° d'identité

ID number - N° d'identité

280

Birth date - Date de naissance

Last rank
Dernier grade

W.T. - T.G.

Reg. - Rég.

Res. - Rés.

NAVY

ARMY

RCAF

HIST.

Request number - N° de demande

Release year
Année de renvoi

Departments - Ministères

Drawn by - Sortie par

KIA 26-9-15

Request date - Date de la demande

Requested by - Demandé par

22-5-96

PRU

3914

5/6/96

1/3