



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

RC

No. 3280 Name John Jos. Brophy Corps RC

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John Jos. Brophy
- 2. What is your full Address? 2. Mount Pearl Rd
St. John's
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 18 Years 11 1/2 Months
- 5. What is your Trade or Calling? 5. farmer
- 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 Jos. Brophy 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.

John Jos. Brophy SIGNATURE OF RECRUIT.
Wm. J. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION

I, John Jos. Brophy 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.....
on this 28 day of November 1915
Signature of Attesting Officer Wm. J. [unclear] Capt

†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 Jos. Brophy

Apparent age 18 years 11 1/2 months. Height 5 feet 4 1/2 inches

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

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr Lawrence Brophy

Mount Pearl | Relationship Parents

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 _____ | | | | | | | | | <div style="font-size: 2em; font-family: cursive;"> Discharged June 29 1919 [Signature] </div> |
| Joined at _____ on _____ | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |

Total Service forfeited as above.....

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

" " " Pensions " _____ [" "] _____ " _____



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

RC

No. 3280

Name John Jos Brophy

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>John Jos. Brophy</u> |
| 2. What is your full Address? | 2. <u>Mount Pearl Rd</u> |
| 3. Are you a British Subject? | 3. <u>Yes John's</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>11 1/2</u> Months |
| 5. What is your Trade or Calling? | 5. <u>farmer</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 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. <u>yes</u> |

I, John Jos Brophy 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.

John Jos Brophy SIGNATURE OF RECRUIT.
W. H. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION

I, John Jos Brophy 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

on this 28 day of November 1915

Signature of Attesting Officer Chas. H. Auye (Capt)

† 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 Jos Brophy
 Apparent age 18 years 11 1/2 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mount Pearl | Relationship M Lawrence Brophy
Parents

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 Rework 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>18-11-16</u> | | | | | | | | | |
| Joined at <u>St John's</u> on <u>November 28</u> th | | | | | | | | | |
| <u>Embarkes St John's train to Halifax N.S. 7th 17</u> | | | | | | | | | <u>Embarkes for</u> |
| <u>B.C.S. 22-9-17</u> | | | | | | | | | <u>with Bathn. 30th 17</u> |
| <u>Transfers from B.C.S. to Manchester 19th 1-1919</u> | | | | | | | | | <u>to High Manchester 2nd 19</u> |
| <u>Transfer from law for demobilization 22-5-1919</u> | | | | | | | | | <u>leaves 1-6-1919</u> |
| <u>Demobilization St John's 29-6-1919</u> | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |

Total Service towards Engagement to 29-6-19 [date of discharge] 2 years 214 days
 " " " Pensions " " " " " " " " " " " "

C.R. 3280

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 29-6-19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 29-6-19.

3280 Pte. John Brophy.

C.R. 3280

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, June 14, 1919.

3280 Pts. John Brophy.

Reported at Headquarters 1-6-19 by "Corsican" which sailed
Liverpool 22-5-19.

C.R. 3280

Extract from Daily Orders Part II Unit The Royal Welch Regt.
St. John's, June 18th, 1919.

The discharge of the undersigned on demobilisation has
been APPROVED BY G.C. Exchange Depot with effect from 15-6-19.

15-6-19

3280 Pte. John Brophy.

C.R. 3280

Extract of DAILY ORDERS, PART 11, ROYAL NEWFOUNDLAND
REGIMENT, Nov. 21/11/18.

Leave to U.K. from 27/10/18 to 10/11/18.

#3280 J. Brophy.

C.R. 3280

Extract from Daily Orders part II, by Lieut. Col. H.B. Barton
D.S.O. Officer Commanding 2nd., Battalion of the Royal
Newfoundland Regiment dated 3-4-19.

The undernoted having reported back from the 1st. Batt.
is taken on the strength and posted to "H" Company from
2-4-19.

#3280 Pte. Brophy.

C.R. 3280

at Btm
Extract from Nominal Roll of the Royal Welch
Regt. 24-1-19.

The undermentioned who was transferred from
R.S.F. to Sml. Bn. Winchester 19-1-19 awaiting
repatriation.

3280 Pte. J. Brophy.

C.R. 3280

Extract from Nominal Roll of Draft No. 30, 50 Other Ranks
from 2/1st Newfoundland Regt., Barry N. B. to 1/1st
Newfoundland Regt., B.E.F.,
Embarked Southampton 22nd September 1917.

#3280 Pte. J. J. Brophy

C.R. 3280

Extract from Nominal Roll, embarked St. John's per S.S. FLORIZEL

17.3.17

3280 Pte. J. J. Brophy.

August 16th. 1917

613

Major H.A. Timewell
Paymaster and Officer i/c Records.
First Newfoundland Regiment.
London, England.

Sir:-

re Relatives Enquiries as to Welfare of Soldiers.

I have an enquiry from the mother of No. 3280, Pte John Brophy, in which she states that she has not heard from her son, since May.

I am aware that this is a matter which it is difficult to regulate, but having in mind the anxiety of our soldiers relatives to hear from them regularly, I should like to have your views as to what can be done to induce the men to write home more frequently or at least regularly. The neglect is, no doubt, due to the fact that some of the men are not sufficiently thoughtful to take advantage of such opportunities as offer to write to their friends or relatives, and when they are so disposed, they cannot get the opportunity owing to their various duties.

Numerous enquiries are being made at all times by relatives for "news" from their boys, and perhaps if it could be shown to them how welcome a letter is at home, they may be more inclined not to let slip such opportunities as present themselves.

I have the honour to be,

Sir,

Your obedient servant,

J. Drophy

C.R. 3280

~~ARRD~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (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 to 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 Newfoundland Land* 7. Former Trade or Occupation } *Farmer*
2. Regtl. No. *3280* 3. Rank *plc* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Brophy* *John* (a) Former Regts. or Corps with Regtl. Nos.
(Surname) (Christian Names)
5. Age last birthday *20*
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
(c) on duty (d) off duty? (b) Date of Discharge;
(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 B (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. } | Not cured | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

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.)

All complains of no disability

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

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 invalided at Foreign Stations.

Repatriation

W. P. Spencer
Capt Hamel

Medical Officer in charge of case.

Station *Hazely Grove*

Date *1/4/19*

* 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.

No. 3244



4 1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, John Brophy, Regl. No. 3280 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 Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz.:

Allotment begins July 1st 1917

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|------------------|-------------------------------------|----------------------|
| 3410 | Mother | Mrs. Mary Brophy | Mount Pearl Road St. Johns West. | 60 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total Allotment, \$ | | | | |

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

(Sig.) [Signature] Lt. Officer Commanding D. Company St. Johns Jan 4 1917

(Sig.) 3280 John Brophy his mark
(Rank) Phe
Witness [Signature]

COPY

August 16th. 1917

Major H.A. Finewell
Paymaster and Officer i/c Records.
First Newfoundland Regiment.
London, England.

Sir:-

re Relatives Enquiries as to Welfare of Soldiers.

I have an enquiry from the mother of No. 3280, Pte John Brophy, in which she states that she has not heard from her son, since May.

I am aware that this is a matter which it is difficult to regulate, but having in mind the anxiety of our soldiers relatives to hear from them regularly, I should like to have your views as to what can be done to induce the men to write home more frequently or at least regularly. The neglect is, no doubt, due to the fact that some of the men are not sufficiently thoughtful to take advantage of such opportunities as offer to write to their friends or relatives, and when they are so disposed, they cannot get the opportunity owing to their various duties.

Numerous enquiries are being made at all times by relatives for "news" from their boys, and perhaps if it could be shown to them how welcome a letter is at home, they may be more inclined not to let slip such opportunities as present themselves.

I have the honour to be,

Sir,

Your obedient servant,

| | |
|----------|-------------|
| Ref. No. | 5/48 |
| Rec'd. | SEP 11 1917 |
| Acc'd. | |
| Ans'd. | ✓ 14/9/17 |
| File No. | 9497/19 |

WOUNDING REPORT REGIMENT
PAY & RECORD OFFICE

Ref. No. 4689

AUG 2 1917

Mr Ewie Anderson

Assd.
Amd.

File No. 9417/1

Mount-pearle
St-Johns West
July 8th
1917

Dear sir

~~Directed by~~ Miss May Furlong

I write you those few lines
to ask you if you would
kindly let me know where
my son is ^{namely} St John
Brophy no 3280

He left Apr about the 28th
of May (1917) and I cannot get
any news from him since
I am almost tired writing
But I can never get an ans
wer) So the young Lady ment
abouin directed me to write
to you hoping to hear from
you soon

I am His

Mother
Mrs Mary Brophy

8826/513
HA/JC

Forms
G. 348
60

MEMORANDUM.

PAYMASTER & OFFICER I/C RECORDS,
NEWFOUNDLAND CONTINGENT,
From 58, VICTORIA STREET,
LONDON, S.W. 1
ENGLAND.

From Officer Commanding
2/1st Newfoundland Regiment

To The Paymaster
Newfoundland Contingent
ANSWER. London, S.W.

To Officer Commanding,
2/1st Newfoundland R.,
Barry, N.B.

Pay & Record Office,

Barry Camp, Forfarshire

30th August, 1917.

Sept. 6th/17. 191

3280 Pte. J. Brophy.

Owing to the non-arrival of the Weekly Hospital Return, it is regretted that information as to the whereabouts of the above-named man cannot be supplied without troubling you.

Will you please say where and how he is, as an anxious parent solicits information regarding her long-silent son?

This man was in Hospital in Ayr for nearly two months, and during that period did not write any letters home? Since being discharged he has written many letters to N.F.L.D. and he is now quite well.

A. A. Munnell, Major,

Chief Paymaster & Officer i/c
Records.

Amutter bapt

5060

COMMANDING, 2nd Lt. N.F.L.D. REGT.

SEP 18 1917

AYR

✓

13th September, 7.

9457/1

Mrs. M. Brophy,
Mount Pearl,
St. John's, Nfld.

Madam, No. 3280, Pte. John Brophy

With reference to your letter 8/7/17: enquiries were made concerning your son and the following reply has been received from the Officer Commanding 2/1st Newfoundland Regiment, Barry Camp, Scotland, under whose command he now is:

"This man was in Hospital in Ayr for nearly two months and during that period did not write any letters home. Since being discharged he has written many letters to Newfoundland and is now quite well." It is hoped, therefore, that you will have heard from him and will know all about him by this time.

I am, Madam,
Your obedient servant,

Major,

HT/NW

Chief Paymaster & Officer i/c Records.

COPY

Department of Militia,
St. John's, Newfoundland.

August 16th, 1917.

Major H. A. Timewell,
Paymaster & Officer i/c Records,
First Newfoundland Regiment,
London, England.

Sir,

re Relatives Enquiries as to Welfare of Soldiers

I have an enquiry from the mother of No. 3260 Ptea John Brophy, in which she states that she has not heard from her son since May.

I am aware that this is a matter which it is difficult to regulate, but having in mind the anxiety of our soldiers' relatives to hear from them regularly, I should like to have your views as to what can be done to induce the men to write home more frequently or at least regularly. The neglect is, no doubt, due to the fact that some of the men are not sufficiently thoughtful to take advantage of such opportunities as offer to write to their friends or relatives, and when they are so disposed, they cannot get the opportunity owing to their various duties.

Numerous enquiries are being made at all times by relatives for "news" from their boys, and perhaps if it could be shown to them how welcome a letter is at home, they may be more inclined not to let slip such opportunities as present themselves.

I have the honour to be,

Sir,

Your obedient servant,

(Sd.) J. R. BENNETT,

Minister of Militia.

| | |
|----------------------------------|---------|
| ST. JOHN'S NEWFOUNDLAND REGIMENT | |
| PAY & RECORD OFFICE | |
| Ref No | 5148 |
| Rec'd | 11/9/17 |
| Asst. D. | |
| Asst. S. | |
| Asst. Q. | |
| Asst. P. | |
| Asst. R. | |
| Asst. T. | |
| Asst. U. | |
| Asst. V. | |
| Asst. W. | |
| Asst. X. | |
| Asst. Y. | |
| Asst. Z. | |

14-4-19

Capt. Marshall.

Sts. J. J. Brophy was paid at this
office this morning. Receipt for
Royal draft has been obtained.

F. Horneick

The Chief Paymaster,
Royal Newfoundland Regiment,
London, S.W.

Please pass the attached Postal Draft to 3280 Pte. Brophy as
per attached telegram.

Hazeley Down Camp,
Winchester,
Apl. 10th 1919.

NEWFOUNDLAND CONTINENT,
PAY & RECEIPT OFFICE.

Ref. Nos. 19 ✓ 2904

CC 10 APR 1919

Ref. Nos. UUI

ACCEPTED FOR PAY

P. Rans
Capt. ✓
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

POST OFFICE



TELEGRAPHS.

Office Stamp.

This Form must accompany any inquiry respecting this Telegram.

Office of Origin and Service Instructions.

Victoria

Charges
to pay

s. d.



Handed
in at

11 2-

M.

Received
here at

12 4 64

TO

*2nd Bn Royal Rifle Regt
Worcesters*

*Forward amount due me pay
& pte Recd office London 3280
Dunphy J. J.*

No. 15024/476

NEWFOUNDLAND CONTINGENT

N.F.P. /90.

From:

To:

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

Officer Commanding,
1/Bn. R. Newfoundland Regt.,
B. E. F.

19th, September 1918

10 Dec 1918

Subject: 3280, PTE. J. J. Brophy

ANSWER

With reference to the following
telegram (8164) from the Hon. the
Minister of Militia, received

*Pay to 3280 Brophy £3.0.0

Kindly advise whether this
amount should be remitted to you
for payment to this Soldier, re-
tained to credit of his account,
or otherwise dealt with.

Chief Paymaster & O. i/c Records.

Handwritten notes:
 This amount was
 retained to credit
 of acct. please
 I enclose
 to your acct
 1/Bn Royal Newfoundland Regt

Handwritten numbers:
 029 791

Handwritten initials:
 J. J. Brophy
 C. G. [unclear]

No 5644/814

N.F.P./79.

From: NEW FOUNDLAND CONTINGENT

Chief Paymaster & O.I/c Records,
Newfoundland Contingent,
Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

To: Officer Commanding.
2nd Batt. Ryl Wild. Regiment
Winchester

9th April 1919

14 April 1919

3280 Pte Brophy J.J.

With reference to the following telegram from the Minister of Militia / / (120

Receipt hereunder.

"Pay to- 3280 Pte Brophy J.J.
£6. 0 0.

Officer Commdg. _____ Batt'n.

Cheque ~~£6~~. 0. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of _____
in respect of _____

telegraphic remittance from the Minister of militia.

A. A. Minns Maj.
Chief Paymaster & O. I/c Records.

J Brophy
No. 3280 Rank pte

Witness F. Hornick

No. 18337/560

~~NEWFOUNDLAND CONTINGENT~~

N.F.C. 191.

From:

To:

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

Officer Commanding,
Royal Nfld. Regt.
B.E.F.

13th November 1918

191

Subject: 3280, Pte. J.J. Brophy

ANSWER

With reference to the following
telegram (9654) from the Hon. the
Minister of Militia, received

Pay to 3280 Brophy £4:0:0

Kindly advise whether this
amount should be remitted to you
for payment to this Soldier, or
retained to credit of his account,
or otherwise dealt with.

Chief Paymaster & O. i/c Records.

Handwritten notes:
J.J. Brophy
3280
11/11/18

Handwritten signature:
J.P.B.

DUPLICATE
MAIL COPY
Posted.....

5978/237/P.&.A

The Hon. the Minister of Militi

St. John's,

Newfoundland

FM/BC

16th April

9.

3280 PTE. J. BROPHY R. N.F.L.D. REGIMENT

Please delete that part
of N.F.P./54 No. 156 11/3/19
relating to the above named
soldier.

Notification was sent
to you in error, as Pte. Brophy
has not yet proceeded to
Newfoundland.

Adjustment has been made
in his account at this end.

Major,
Chief Paymaster & Officer i/c Rds.

| | | |
|-------------|-----|--------|
| ACKT dated | / / | No. IN |
| Received | / / | |
| REPLY dated | / / | |
| Received | / / | |
| LAST Ref No | | |
| NEXT " " | | |

5978/237/P.&A. The Hon. the Minister of Militia

St. John's,

Newfoundland

FM/BC

16th April

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3280 PTE. J. BROPHY R. NFLD. REGIMENT

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Newfoundland.

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in his account at this end.

Major,
Chief Paymaster & Officer i/c.Rds.

No. 3280 Rank Pte Name J. J. Brophy

| | | | | |
|----------------|------|-----|------|--------------|
| Pay | F.A. | Wks | 1.10 | N.S.A. 1935 |
| 1.00 | 10 | | | ✓ CN 10.1.19 |
| Less Allowment | | | 60 | |
| New Rate | | | 50 | |

| DEBITS | Date | £ s d | | | CREDITS | Period | | Days | Rate | Y | M | D | |
|---|------|-------|----|----|----------------|---------------------------------|---------------------------------|------|------|------|----|--------|--------|
| | | From | To | | | | | | | | | | |
| Balance | | | | | Balance | 30-1-19 | | | | | | 3 16 7 | |
| Acquittance Rolls | | | | | Pay @ Net Rate | 31 ¹ / ₁₉ | 11 ² / ₁₉ | 71 | 50 | 3550 | 95 | 11 | 11.2.6 |
| Hospital Advances | | | 17 | 6 | | | | | | | | | |
| A.B. 64. | | | | | | | | | | | | | |
| Depos. Payments | | | 10 | 0 | | | | | | | | | |
| | | | 1 | 17 | 6 | | | | | | | | |
| Depos payments | | | 5 | 0 | 0 | | | | | | | | |
| | | | 6 | 17 | 6 | | | | | | | | |
| Cash Receipt 1973 10 ⁴ / ₁₉ | | | 4 | 5 | 0 | | | | | | | | |
| | | £ | 11 | 2 | 6 | | | | | | | | |

MEMORANDUM AND CHARGE

No. of Pages
No. of Sheets

Brophy J.

3280

Gay Sept

June 29, 1919

#3280 Pte. John J. Brophy,

Mount Pearl,

St. John's West.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2447.

Yours truly

Captain,
Quartermaster & C. i/ c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3580 Rank Private Name Brophy John
Intended place of residence Mount Pearl

2. Occupation Farmer
Classification of soldier A Medical Category AF

3. The above named man is discharged in consequence of DEMobilIZATION!

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place St. JOHN'S
Date JUN 11 1919
for Major
Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date JOHN'S
JUN 11 1919
J. Brophy
Signature of soldier
J. A. Smallcraft
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S
JUN 11 1919
J. Brophy
Signature of soldier
W. J. O'Leary
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 28-11-16 No of days on Military
Discharged from service JUN 15 1919 Plus 14 days Service 944

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S
JUN 15 1919
R. H. Lat
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
Place St. John's Med
June 29/1919
M. Bowley
Officer i/c Records
The Royal Newfoundland Regiment

and B 2079/2447

3
0/1
28
31
20
31
29
14

The Royal Newfoundland Regiment

Class for Demobilization: 6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 10. 6. 19

Regimental No 3290

Name Worthington Im. J. Rank Pl

Address Mount Park

Present Medical Category A1

Recommended for: (a) Immediate discharge

(b) Standard Medical Board

Members of Board

R. H. East
O.C. Discharge Depot.

L. Paterson
Senior Medical Officer

G. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3280 Rank Pte Name Brophy John
 Date of Enlistment 28-11-16 Address Mt Pearl District St John's
 Occupation Farmer Classification for Discharge E Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

| | | | | | | |
|----------|--------|--------|---|-----------|--------|---|
| N.F. 136 | B 268 | B 121 | 1 | N.F. Med | D.F. 1 | 1 |
| B 178 | W 3494 | B 122 | | Board 1st | " 2 | |
| B 178a | D 400A | B 1915 | | do 2nd | " 3 | 3 |
| B 179 | D 400B | Form L | | do 3rd | " 4 | |
| B 179a | D 400C | Form K | | do 4th | " 5 | |
| B 179b | B 103 | ME 2 | | | " 6 | |
| B 179c | B 120 | M 93 | | | | |

Date 10-6-19 O. C. Discharge Depot. H. M. Smith

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
 (b) Clothing Supplied _____

Date 11-6-19

O i/c. Re-clothing Alfred Smith

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at Mount Pearl and Release Certificate No. 2004 issued.

Date

11-6-19

J.A. Knowlton
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 29-6-19

Date

11-6-19

J. H. [unclear]
Depot Paymaster.

Discharge approved for

15-6-19

Forwarded with following documents to O.C. Discharge Depot.

| | | | | |
|-----------|--------|--------|-----------|--------|
| N.F. P/36 | B 268 | B 121 | N.F. Med | D.F. 1 |
| B 178 | W 3494 | B 122 | Board 1st | " 2 |
| B 178a | D 400A | B 1915 | do 2nd | " 3 |
| B 178b | D 400B | Form L | do 3rd | " 4 |
| B 179a | D 400C | Form K | do 4th | " 5 |
| B 179b | B 103 | ME 2 | | " 6 |
| B179c | B 120 | M 93 | | |

2 Form B

Date

11-6-19

J.A. Knowlton
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records,
Board of Pension Commissioners,

with following additional documents.

Eligible for War Service Gratuity

JUN 15 1919

Date

R.H. [unclear]
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former occupation

J. Proply

Signature of Man.

J. P. Snowcraft

Signature of the Vocational Officer or his Representative.

Reg. No. 3280

Place

Al-John

Date

11-6-19

191

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

MEDICAL HISTORY

OF

Christian Name

Brophy



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

| | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|---|---------------------|---------------|------------------|
| | Right | Left | Right | Left |
| Examined | on <i>28th</i> day of <i>November</i> 191 <i>6</i> | | on day of 191 | |
| | at <i>St John's R.F.L.A.</i> | | at | |
| Declared Age | <i>18</i> years <i>11 1/2</i> mos. | | years | days |
| Trade or Occupation | <i>farmer.</i> | | | |
| Height | <i>5</i> feet | <i>4 1/2</i> inches | feet | inches |
| Weight | | <i>111</i> lbs. | | lbs. |
| Chest Measurement | Girth when fully expanded... <i>36</i> inches | | | inches |
| | Range of expansion... <i>3</i> inches | | | inches |
| Physical Development | | | | |
| Vaccination Marks | Arm | | Right | Left |
| | Number | | | |
| When Vaccinated | | | | |
| Vision | R.E.—V= | <i>4/24</i> | R.E.—V= | |
| | L.E.—V= | <i>1/2</i> | 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) | <i>Sto Burden</i> | | | |
| (Rank) | <i>Lieut.</i> | | | |
| | Medical Officer | | | Medical Officer. |
| Enlisted | at <i>St John's R.F.L.A.</i> | | at | |
| | on <i>28</i> day of <i>Nov</i> 191 <i>6</i> | | on day of 191 | |
| Joined on Enlistment | Corps. | Regtl. No. | Corps. | Regtl. No. |
| | <i>3rd R.F.L.A. 3280.</i> | | | |
| | <i>Regt.</i> | | | |
| Transferred to | | | | |
| Became non-effective by | | | | |
| | on | day of | 191 | on day of 191 |
| (Signature) | | | | |
| (Rank) | | | | |

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

| Name of Hospital. | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number Days in Hospital | Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|-------------------|----------------------|-------|------|--------------------------|-------|------|---------------|-------------------------|---|--|
| | Day | Month | Year | Day | Month | Year | | | | |
| Hilsea | 28 | 1 | 19 | 2 | 4 | 19 | Leukitis v.D. | 65 | <p>27 Feb Acute leukitis, by G.C. found. P. Menge. Frigata - PA Pump. 7th & 8th unit</p> | <p><i>[Signature]</i> Capt. Dan</p> |

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 |
|--|--|
| 15/12/16. 17/1/17 22-12-17 24-1-17. | Vaccination } T.A.B. } 3 } <i>J.W.B.</i> |

It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as 6 for Discharge on Demobilisation. Medical category 10.6.19
 Date of T.M.B. *J.W.B.*
 Discharge Depot—New Zealand

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 |
|----------------------|--------------------------------|--------------------------------------|----------------------|--------------------------------|-------------------------------------|
| | | | | | |

The Royal Afld. Regiment

DEMOBILIZATION

No. 3280 Rank _____

Name Geoff J

Warned for demobilization on

JUN 11 1919

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (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 to 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 Newfoundland* 7. Former Trade or Occupation } *Farmer*
2. Regtl. No. *3280* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Brophy* *John*
(Surname) (Christian Names)
5. Age last birthday. *20*
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
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (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.
12. Place of origin of disability.
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*
nil
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. G. cured | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

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 sensibility*

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

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 ?

Repatriation

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

W. J. Premier
 Medical Officer in charge of case.

Station *Hazeley Down*

Date *14/19*

* 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.



Descriptive Return of a Soldier Discharged on Account of Disability.

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

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

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

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

Name in full *Brophy Jack.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5280*

Intended address *Mt Pearl.*

Height on discharge *5* Feet *7* 1/2.

Color of hair on discharge *Light.*

Complexion *Fair.*

Color of eyes *Grey.*

Descriptive Marks _____

Figure on discharge *Asst.*

Christian name of Father *Laurence.*

Christian name of Mother *Mary.*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Mt Pearl. 10 Feb. 1895*

Nature and locality of civil employment required _____

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *J Brophy*

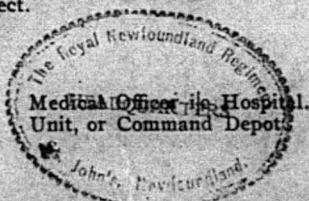
ST. JOHN'S.

(Rank) *Plt*

Station

Date *9-6-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.



Station

Date

Casualty Form—Active Service.

Regiment or Corps 2/1st Newfoundland

Rank Private Surname Brophy Christian Name John

Religion Roman Catholic Age on Enlistment 18 years 11 1/2 months.

Enlisted (a) St. John's Terms of Service (a) Duration Service reckons from (a) 28-11-16

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

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

Occupation (Fisherman)

G. H. G. [Signature] Signature of Officer.

| Report | | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 26, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents |
|--------|--------------------|---|--|------------------|---|
| Date | From whom received | | | | |
| | | | Embarked <u>Shampton</u> <u>22.9.17</u> | | |
| | | | Disembarked... <u>Rouen</u> <u>27.9.17</u> | | |
| | | | Joined Battalion <u>7 2 OCT 1917</u> | | |
| | | <u>WITH Bn. 30-13-17.</u> | | | |
| | | <u>Leave U.K. 27/10/18 to 10/11/18</u> | | | <u>B213 4/11</u> |
| | | <u>Transferred to U.K. for Re-patriation.</u> | | | <u>Par 2 2/5.</u> |
| | | <u>Int</u> | | | <u>Capt to Lt Col.</u> |
| | | | | | <u>in Section of Non-Infantry Section</u> |
| | | | | | <u>G.H.Q. 3rd Echelon</u> |

2nd [Signature]

(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.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

ORIGINAL

No. 5978/237/P.&.A

From

PAY & RECORD OFFICE.

56, VICTORIA STREET,

LONDON, S.W.

16th April 1919.

FM/BC

To

The Hon. the Minister of Militia,

St. John's,

Newfoundland

SUBJECT:

3280 PTE. J. BROPHY R. NFLD. REGIMENT

Reference Nos.

REPLY

Dated

191

Please delete that part of N.F.P./54 No.156 11/3/19 relating to the above named soldier.

Notification was sent to you in error, as Pte. Brophy has not yet proceeded to Newfoundland.

Adjustment has been made in his account at this end.

J. H. M. [Signature]
 Chief Paymaster & Officer i/c.Rds.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

DUPLICATE

No. 5978/237/P.&.A

From

PAY & RECORD OFFICE.

58, VICTORIA STREET,

LONDON, S.W.

To

The Hon. the Minister of Militia,

St. John's,

Newfoundland

FM/BC

16th April

1919.

SUBJECT:**3280 PTE. J. BROPHY R. N.F.L.D. REGIMENT**

Reference Nos.

REPLY

Dated

191

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Adjustment has been made
in his account at this end.

J. H. M. [Signature]
Major,
Chief Paymaster & Officer i/c. Rds.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th, 1919.

A complete reply must be given to every question in this Declaration there must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name *John* 2. Surname *Brophy*
3. Rank *A/c* 4. Reg'tl. No. *3280*
5. Address in full to which future payments of gratuity are to be forwarded... *Mount Pearl Fort St. John's*
6. Date of enlistment in the Regiment... *Nov. 27/16*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
8. Relationship of such dependents.....
9. Address in full of such dependents.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Nfld. *Overseas*, give dates and particulars of such service.....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *From Nov. 27/16 to June 11/19* 1.

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.
..... *No*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.
.....
.....

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

16. Have you, during the present war, served in the Imperial Forces?..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.
..... *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *No*

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

19. Are you now serving in the Regt.?..... If not give:- (a) date of discharge..... *June 11/19* (b) Reason for discharge.....
..... *Temporary Demobilization*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.....

France, Belgium & Germany - From Oct 1917 to April 1919 - 1st Res. Cavalry, Ochehendel, Armentieres

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee,..... *No*

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

5.7

J. Brophy

Signature of Applicant:

Place of Residence:

Mount Pearl Wash St. John's, Nfld.

Declared before me at:

St. John's, Nfld.

This

11th

day of

June

19...

1919
John M. Cooney

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

POST DISCHARGE PAY.

| Date paid | Paid Soldier. | Paid Dependent. | War Service Gratuity. | Net amount due |
|--------------------|---------------|-----------------|-----------------------|----------------|
| | | | <i>500</i> | <i>300.00</i> |
| | | | | |
| | | | | |
| Certified correct. | | | Paymaster | <i>le</i> |

No 3244



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

Wj
I, John Brophy, Regl. No. 3280
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.:
Allotment begins July 1st 1917

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|------------------|--------------------------------------|----------------------|
| 3410 | Mother | Mrs. Mary Brophy | Mount Pearl Road St. John's West. | 60 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 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. Strong Lt.
for Officer Commanding
D. Company
St. John's
January 4th 1917

(Sig.) 3280 John X Brophy
his mark
(Rank) Pte
Witness
A. Strong Lt.

SEPARATION ALLOWANCE.

Claimant, *Mary Brophy*..... (*Mother*)

On account of *John Joseph Brophy* No. *3280* Rank *Pvt.*.....

Decision..... *Refused*
Dependence not established
.....
.....

Richard S. Mc Dowley Capt.
W. H. Russell Lieut. Col.
Mc Dowley Major

Date..... *March 1, 1920*

Instructions.....
.....
.....
Decision.....

Allotment of *60* per day payable to *Mary Brophy*
his *Mother* from *1/2/19* to *29/6/19*

Discontinued on account of *being discharged*
L. P. K. S. Sgt.

ROYAL NEWFOUNDLAND REGIMENT
(Separation Allowance Branch)

NOTICE

MOTHER

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

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

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

1. Name in full of soldier. Rank. Reg't or Unit. Reg't No.
John Joseph Murphy Plt Royal Mtlk 3280
2. Age of soldier *21 years* Married or single. *Single*
3. Name in full of mother Age. Occupation Permanent Address
Mary Murphy 58 Married Woman Mount Pearl St. John's, Nfld
4. Give name of your husband Age Occupation Where employed
Lawrence Murphy 72 Farmer
5. If your husband is not supporting you state the reason *Husband too old to work*

6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue).

66

7. If you are a widow, state date and place of your husband's death

again
8. Have you married since death of above mentioned husband?

9. Names of your other children. Address in full Age Occupation Married or single.
- | | | | | |
|------------------|------------------------|-----------|----------------------|---------------|
| <i>Isabel</i> | <i>address unknown</i> | <i>36</i> | <i>Married Woman</i> | |
| <i>Agnes</i> | <i>Grand Falls</i> | <i>32</i> | | <i>do</i> |
| <i>Catherine</i> | <i>Freshwater Road</i> | <i>34</i> | | <i>do</i> |
| <i>Elyzabeth</i> | <i>Mount Pearl</i> | <i>25</i> | <i>None</i> | <i>Single</i> |

10. State amount earned by (a) Yourself *None*
(b) Your husband *None*

11. State amount and source of any other income.

12. State value of real property belonging to you and your husband

15. State value of personal property belonging to you and your husband *None*
-
16. If husband is dead state value of real and personal property left by him
-
15. Actual amount contributed by soldier during the year prior to his enlistment. *About \$300 per year*
-
16. Was this amount contributed weekly or monthly *Monthly*
-
17. Did his amount include payment of son's board, etc. *yes*
-
18. State your son's trade or occupation prior to enlistment. *Farmer*
-
19. State amount of his wages per week *About \$10.00 per week*
-
20. State name and address of his last employer. *John Lester Mount Pearl*
-
21. State amount of monthly support from son since enlistment *\$18.00 per month - allotment*
-
22. State amount of Allotment received by you from son since enlistment *above amount \$18.00 monthly*
-
23. State from what date did you receive Allotment *From April 17, 1917.*
-
24. Actual amount contributed by other children Weekly Monthly
None
-
25. Are any of these children in the employ of you or your husband *Elozabeth works on farm*
-
26. If not receiving support from other children, state cause. Explain fully *All other children married*
-
27. With whom are you residing at present? *Husband.*
-
28. ~~Have you made a previous claim for Separation Allowance. If not, why? Give particulars.~~ *No. Because soldier received allotment till July 1919.*

29. Are you already in receipt of Separation Allowance from any source? If so, how much?

No.

30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much?

No.

31. Was the soldier at the time of his enlistment an employee of the Nfld. Government?

No.

32. In what capacity and in what place?

Not applicable

33. Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much?

No.

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

Signature of Applicant ^{her} Mary X Brophy

Place of Residence ^{Mont} Monks Pearl, St John's, Nfld.

Declared and subscribed before me ^{at St John's} this 12 day of ^{January} 19 20.

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

Chas. V. Hunt
Notary Public

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman ^{Thomas J. Flynn}

Signature of member of the Patriotic Fund Committee

[Signature]

Feb. 6, 1920

Mrs. Mary Brophy,
Mount Pearl.

Dear Madam:-

With reference to your application for Separation Allowance, it is understood that your husband has a "Farm" at Mount Pearl, that he is too old to work same, and does not earn anything.

Will you kindly, therefore, advise me who works the Farm, and what returns you and your family receive from the said work.

Yours truly,

Major

Paymaster.

Mr Howley

Dear Sir in Answer
to your inquiry I am writing
to let you know what
return I get from the
farm and who works
the same. My oldest
son works the farm
and the farm being
small we raise
enough vegetables to
last about 7 months
the return from the farm
is ten dollers a week
I am an invelide since
last April (1919)

Truely yours

Mrs Brady

Mar. 4, 1920

Mrs. Mary Brophy,
Mount Pearl,
St. John's West

Der Madam:-

With reference to your application for Separation Allowance, I have been directed to inform you that same cannot be granted to you.

To begin with, in your application you are asked to give the names of your other children, and the only names supplied are four daughters, no mention being made of any sons. On the other hand we asked you who was working the farm, and your reply that it is worked by your eldest son.

Apart from this, the returns from the farm, according to your statement, are by far the main support of the family, and considerably more than could possibly be contributed by your son John, either before or after his enlistment, you cannot, therefore, be considered to have been dependent upon him during his service in the Regiment.

Yours truly,

Major

Paymaster.

8/3/19

Winchester
Hardy Loan Camp

Dear Mother and Father

Just a line to say
I am all right and hope you are all
well at home.

well mother I am coming home
soon and I got no money and
no clothes to come home in
I had a leave and spent what
I did have so I want you to send
60 or sixty Dollars I want to get some
nice clothes on this side before I go
home send it to the above address

I was coming home with the
lost Big Craft and took
the flu or influenza I should
say only for that I would be

home now but never mind I will
come home soon it is better late
than never. well mother I think this
is all for this time so good bye
from your loving son
Jack Brasby

2280

Nov 3 1920

LAND SETTLEMENT

Major Howley
O. I. C. Records

Please pay to J. Brophy 3280
the sum of eighty dollars
in payment of allowance for November and Travelling Expences
and charge same to Civil Re-establishment Committee Land Settlement

\$80.00

| | |
|-----------|---------|
| Allowance | \$70.00 |
| Expences | 10.00 |

| | |
|---------------|--------------------|
| ACCOUNT | |
| CHK. NO. 3589 | INITIALS <i>AS</i> |
| INTL. LEDGER | INITIALS |
| PAY LEDGER | INITIALS |
| GEN. LEDGER | INITIALS |

J. C. S.
J. Brophy
Vocational Officer
T. Howlett
Witness

ST. JOHN'S, June 11th 1919

Royal Newfoundland Regiment.

Billeting Account,

To H. J. Brophy

Billeting Soldiers as undermentioned

from June 1st 1919 to June 15th 1919

3280 H. J. Brophy 15 50

ACCOUNT B 4 m

CH. NO 23247

INITIALS EW

IND. LEDGER

INITIALS

PAY LEDGER

INITIALS 50

Certified correct for

\$ 15 50

INITIALS

W. M. Lawson

Billeting Officer.

H. J.

H. J. Brophy

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121

Forms
B 121
39.

Number of Sheet *Just*

Regiment of 1st. Newfoundland

Signature of O. C. Company *Chas. H. Capet Capt.*

| Regimental Number and Name | | Enlistment | | Trade | |
|----------------------------|-------------|--|----------------------------------|----------------|---------------|
| No. | <i>3280</i> | Age on | <i>18</i> years <i>11</i> months | Trade | <i>Farmer</i> |
| Joined Date | | Place and Date of Enlistment | | Religion | |
| Joined Date | | <i>St. John's, Nfld.</i> | | <i>R.C.</i> | |
| Joined Date | | Period of | | Place of Birth | |
| Joined Date | | { with Colours <i>2</i> ^{<i>14</i>} years. with Reserve <i>3</i> ^{<i>36</i>} years. | | | |

Good Conduct Badges, Service pay or proficiency pay



| 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>Barry Camp</i> | <i>22/7</i> | <i>Pte</i> | | <i>Failing to salute an officer</i> | <i>Pte Power } R.B. " Anthony }</i> | <i>3 days C.B.</i> | <i>24/7</i> | <i>Lt Robertson, Capt.</i> | |
| <i>Barry</i> | <i>11.8.17</i> | <i>"</i> | | <i>Absent from O.P.M. parade for inspection by orderly Officer</i> | <i>Cpl Maybee</i> | <i>3 days C.B.</i> | <i>13.8.17</i> | <i>Capt. Robertson</i> | <i>CR</i> |
| <i>Barry</i> | <i>30/8/17</i> | <i>"</i> | | <i>Absent from 8.45 P.M. parade until 10 P.M.</i> | <i>Cpl Walsh</i> | <i>20 days C.B.</i> | <i>21/8/17</i> | <i>Capt. Robertson</i> | <i>CR</i> |
| <i>Ailea</i> | <i>4/9/19</i> | | | <i>Absent from 9 am parade</i> | <i>Cpl Neales</i> | <i>4 days C.B.</i> | <i>7/4/19</i> | <i>Major Mack</i> | <i>CR</i> |
| | | | | <i>" Absent from 2 pm parade</i> | <i>Cpl Neales</i> | | | | |
| <i>Demobilized St. John's, 29/6/19</i> | | | | | | | | | |

CR

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

3280
40

DEMobilIZATION OF

Reg. No. 3280 Rank Private Name Brophy, James
 Date of Enlistment 28-11-16 Address 111 Pearl District St. John's
 Occupation Farmer Classification for Discharge F Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

| | | | | |
|----------|--------|--------|-----------|--------|
| N.F. P36 | B 268 | B 121 | N.F. Med | D.F. 1 |
| B 178 | W 3494 | B 122 | Board 1st | " 2 |
| B 178a | D 400A | B 1915 | do 2nd | " 3 |
| B 179 | D 400B | Form L | do 3rd | " 4 |
| B 179a | D 400C | Form K | do 4th | " 5 |
| B 179b | B 103 | ME 2 | | " 6 |
| B 179c | B 120 | M 93 | | |

Date 10-6-19 for St. John's O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

J Brophy

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied _____

John Robinson

Date 11-6-19 O i.c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at Mount Pearl and Release Certificate No. 2007 issued.

Date 11-6-19 J.A. Sawloff
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 29-6-19

Date 11-6-19 J.A. Sawloff
Depot Paymaster.

Discharge approved for 15-6-19
Forwarded with following documents to O.C. Discharge Depot.

| | | | | | |
|-----------|--------|--------|-----------|--------|----------|
| N.F. P136 | B 268 | B 121 | N.F. Med | D.F. 1 | 2 Form B |
| B 178 | W 3494 | B 122 | Board 1st | " 2 | |
| B 178a | D 400A | B 1915 | do 2nd | " 3 | |
| B 179 | D 400B | Form L | do 3rd | " 4 | |
| B 179a | D 400C | Form K | do 4th | " 5 | |
| B 179b | B 103 | ME 2 | | " 6 | |
| B179c | B 120 | M 93 | | | |

Date 11-6-19 J.A. Sawloff
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

JUN 15 1919 Eligible for War Service Gratuity

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

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

Date June 19 1919 James Guthrie
Good Record

Reg. No. *3240* Rank *SG* Name *Brophy, J.J.*
Attested Address *Mt. Pearl.*
Allotment Allottee
Date of Allotment Returned from Overseas *29.1.19.*
Returned on S.S. *Corsevan* Cause *Discharge*

10-6-19
15-6-19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILIZATION