



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1456

Name in full Patrick Flynn Age 31

Address Gaulds Bay Bulls Road

Married Single Height 5ft 9 in Weight 145

Color dark Hair black Eyes grey

Other distinguishing marks scar on left leg

Nearest relative Mother Martha Donovan

Address Petty Harbour Road

Dependents

Occupation Expressman Present Wage £5 5s 0d

Previous service

Decorations

General Remarks

Date of Enlistment April 22/15

Patrick Flynn

I, Patrick Flynn, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Patrick Flynn

Declared before me this 27 day of April 1915
Montgomery Capt

DESCRIPTIVE REPORT ON ENLISTMENT.

3550

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

Reg. No. 1456

Name **Patrick Flynn**

Apparent age **31** years _____ months. Height **5** feet **9** inches.

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

Distinctive marks **Color: Dark, Hair: Black, Eyes: Gray.**
Other distinguishing marks: Scald on left leg.

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Martha Donovan, Petty Harbor Road., St. John's.**
 | Relationship **Mother.**

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) 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 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 Ap. 25/15									
Joined at St. John's on Ap. 25/15									
Repatrolled Med. Depot 1/1/16									
Embarked St. John's S. Cavalry for St. John's on 15^{3/4}									
To Newfoundland for discharge 4-4-16									
Discharged Medically Unfit St. John's 11-10-16									
Total Service forfeited as above									
Total Service towards Engagement to 11-10-16 (date of discharge) 1 years 175 days									
" " " Pension " " " " " " " " " " " "									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1486

Name **Patrick Flynn**

Apparent age **31** years _____ months. Height **5** feet **9** inches.

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

Distinctive marks **Color: Dark, Hair: Black, Eyes: Gray.**

Other distinguishing marks: Scald on left leg.

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Martha Donovan, Petty Harbor Road, St. John's.**

| Relationship **Mother.**

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
(c) Present address. (d) 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 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 Ap. 23/15									
Joined at St. John's on Ap. 23/15									
<i>attached A.G.</i> 28/4/16.									
<i>Discharged.</i> 14/10/16.									
Total Service forfeited as above									} Total Service towards Engagement to _____ (date of discharge) _____ years _____ days " " " Pension " (") " " "
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " (") " " "									

DEPARTMENT OF VETERANS AFFAIRS
VETERANS' BUREAU

TO Director,
War Service Records.

OTTAWA, June 14, 1950.

Dept. of Veterans Affairs War Service Records
Referred To.....
JUN 15 1950
File No. 614-P.....
Charge To.....

For attention of Mr. A. E. Heatley

SUBJECT #1456 - FLYNN, Patrick

File No. 614-P.

The above-noted in making an application for pension has stated that on his way to England in 1915 aboard the "CALGARIAN" they called at the Azores and picked up some German prisoners of War, and before proceeding to England stopped off at Gibraltar for a couple of days.

If this statement can be corroborated through your Directorate, the man could become an applicant for pension in accordance with the Pension Act.

Might this office be supplied with this information if available, please.

DEPARTMENT OF
VETERANS' AFFAIRS

JUN 15 1950

J. S. Sulton
for
Chief Pensions Advocate.

TSE/MC
BUFF : ST. JOHN'S, Nfld

WAR SERVICE RECORDS
OTTAWA - CANADA

F. P. P.

1456

Ray Dept

STATEMENT OF ACCOUNT

No. 1456

Name Flynn Latt

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
Apr 20	20 Pay today @ 1%			44 80	44 80
	Rent & Clothing			36 20	81 00
Apr 27	20 Pay		15 00		66 00
" "	" "		5 00		61 00
Apr 28	" "		24 80		36 20
Oct 16	Dr Clothing		36 20		0
	Rent		11 20		11 20
Dec 11	20 Pay		88 90		100 10
	W.S. Praterby			70 00	30 10
	1 mo @ 7%				
			181 10	151 00	30 10

Signed Alvany ESM

1
11
1910



1ST NEWFOUNDLAND REGIMENT

P. O. BOX No. 1242

TELEPHONE No. 361

PAY DEPARTMENT

CABLES AND TELEGRAMS TO
"PAYDEPT."

ST. JOHN'S, NEWFOUNDLAND

ST. JOHN'S, NEWFOUNDLAND.

ALL COMMUNICATIONS TO BE
ADDRESSED TO THE
PAYMASTER

.....191.....

Account of Pte.P.Flynn,Regtl No.1456

From March 31st. to April 28th.1916

Pay	28 days @ 1.10	30.80	
Subsistence Allowance	50	<u>14.00</u>	<u>44.80</u>
 Payments			
	April 22nd.1916	15.00 <u>5.00</u>	20.00
Balance due	at April 28th.1916		<u>24.80</u>
			<u>44.80</u>

Received from the Paymaster the sum of twenty four dollars and eighty cents, in full settlement of balance due me by the First Newfoundland Regiment

St. John's, Nfld.
May 1st. 1916

Pte Patrick Flynn

Witness.



Paymaster

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

- Christian name..... *Patrick* 2. Surname..... *Flynn*
3. Rank..... *Private* 4. Regtl. No..... *1456*
5. Address in full to which future payments of gratuity are to be forwarded..... *126 Water Street West*
6. Date of enlistment in the Regiment..... *April 23rd 1915*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *Walter Heatha Flynn Donovan*
8. Relationship of such dependents..... *mother*
9. Address in full of such dependent..... *The Goulds Petty Harbour Road*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No*
11. Were you on active service only in Nfld. If so, give dates, and particulars of such service..... *No Overseas in England*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Eighteen months*

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.....

..... *Received 188⁰⁰ from Capt. Jm. Howley Dec. 20/1918. (3 months)*

15. Have you been issued with a War Service Badge?.....

..... *Yes*

16. Have you, during the present war, served in the Imperial Forces?.....

..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

..... *Not applicable*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....

..... *No*

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

..... *Not applicable*

19. Are you now serving in the Regt.?..... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

..... *No* *Oct. 16th 1916* *Medically unfit*

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.....

..... *No*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.

(b), If (a), are you in receipt of full pay and allowances from that Committee.....

..... *Not applicable*

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

Signature of Applicant: *Patrick Flynn*
 Place of Residence: *126 Water Street West*
 Declared before me at: *St. Johns*
 This *28th* day of *February* 19*19*

[Signature]
 Signature of Barrister of the
 Supreme Court, Stipendiary Magis-
 trate, 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>11-12-18</i>	<i>100.10</i>		<i>1.40</i>		<i>70.00</i>
			<i>Less P.D.P.</i>		<i>100.10</i>
					<i>30.10</i>
					<i>30.10</i>

Certified Correct.

Paymaster.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Patrick Flynn, Regl. No. 1456

hereby agree, until further notification by me, and in similar official form to make an Allotment of 50 Dollars and 00 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)
1	Friend	Miss Mary Joseph	Ruby Rd	50
2		Ruby		
1				
0				
<p>Commemorated June 1 2nd</p>				
Total Allotment, \$				50

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

(Sig.) _____
 Officer Commanding
 Company
Johns
June 24
 1915

(Sig.) Pat Flynn
 (Rank) Plt

R. G. Lyon.

C.R.

1456.

P.K. O

C.R. 1456

Patk. Flynn was attested for General Service
with the NEWFOUNDLAND REGIMENT on April 23rd 1915.
Regimental No. 1456 was allotted to Pte Patk. Flynn.

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.

M.

1456 Flynn

Sorry to bother again

What is correct date
of discharge please R

October 14/1916

A stylized handwritten signature, possibly reading 'M.H.', with a large flourish underneath.

C.R. 1456

Extract from list of men discharged from the Royal Newfoundland
Regiment on various dates;

Oct. 14th

#1456 Pte. Patrick, Flynn, discharged ~~April 30th~~ 1916,
Medically unfit.

C.R. 1456

The following Man Returning by Scandinavian Mar. 31, 1916

1456 Flynn.

C.R. 1456

Extract from Nominal Roll Embarked St. John's, for Overseas, per
S.S. "Calgarian" June, 19. 1915. "F".

1456 Pte. Flynn P.

Enlisted 23/4/15

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

COPY SENT TO
 Dep Quarter Master
 56 Johns
 Letter Memorandum
 Dated MAR 31 1918

MEDICAL HISTORY

3550
 MAR 29 1918
 RECORD

Surname Flynn Christian Name Patrick

Table 1.—GENERAL TABLE.

Birthplace:—Parish Newfoundland County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>21</u> day of <u>April</u> 191 <u>8</u>	on _____ day of _____ 191	at _____	at _____
Declared Age	<u>31</u> years _____ days	_____ years _____ days	_____ years _____ days	_____ years _____ days
Trade or Occupation	<u>Express man</u>		_____	_____
Height	<u>5</u> feet <u>9</u> inches	_____ feet _____ inches	_____ feet _____ inches	_____ feet _____ inches
Weight	_____ lbs.	_____ lbs.	_____ lbs.	_____ lbs.
Chest Measurement	Girth when fully expanded... <u>37 3/4</u> inches	_____ inches	_____ inches	_____ inches
	Range of expansion... <u>4 3/4</u> inches	_____ inches	_____ inches	_____ inches
Physical Development	_____	_____	_____	_____
Vaccination Marks	Arm _____	_____	_____	_____
	Number _____	_____	_____	_____
When Vaccinated	<u>never</u>		_____	_____
Vision	R. E.—V= <u>6/6</u>	_____	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) <u>Enlarged Tonsils</u>	_____	(b) _____	_____
Approved by (Signature)	<u>Fred W. Burden</u>		_____	_____
(Rank)	<u>Lieut</u>		_____	_____
	Medical Officer.		Medical Officer.	
Enlisted	at <u>56 Johns</u>	at _____	on _____ day of _____ 191	on _____ day of _____ 191
	on <u>21</u> day of <u>April</u> 191 <u>8</u>	on _____ day of _____ 191	_____	_____
Joined on Enlistment	Corps. _____	Regtl. No. _____	Corps. _____	Regtl. No. _____
Transferred to	<u>new 1st Regt 1456</u>		_____	_____
Became non-effective by	_____	_____	_____	_____
(Signature)	on _____ day of _____ 191	on _____ day of _____ 191	_____	_____
(Rank)	_____	_____	_____	_____

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

Date	Brief Details, and Signature
May 25	First Inoculation 500 Million
June 15	2nd " 1000
25 th 15	Vaccinated at sea not effective J.
15 th March 16	Cardiac Valv. Disease unfit for foreign service. Impromental. Capt R. M. E.

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St Johns Rifle Co					

74

PAY LIST.

to **30th March**

1915

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **2/1st Newfoundland**

No. **1456** Rank **Private** Name **P. Flynn**

Died ^(a) at **Embarked S.S. Scandinavian** on the **4th** of **April** **1916**
 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.....			
	Cash issues (Date of each issue to be stated)				Pay days at from to.....			
		£	s.	d.	Proficiency, Service or good conduct pay			
	191				days at from to.....			
	"				Messing allowance days at			
	"				from to			
	Consolidated stoppage				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.....			
		£				£		

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

Dated at _____
 this _____ day of _____ 1915 .



NEWFOUNDLAND CONTINGENT

 Paymaster.
 PAYMASTER & OFFICER I/C RECORDS

(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.

74

PAY LIST.

to 30 March 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 1456

Rank

Private

Name

P. Flynn

Discharged

Deserted at

at

on the

of

191

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.....			
	Cash issues (Date of each issue to be stated)				Pay days at from to			
		£	s.	d.	Proficiency, Service or good conduct pay			
	191				days at from to			
	"				Messing allowance days at			
	"				from to			
	"				Clothing and kit allowance			
	Consolidated stoppage				Amount produced by the sale of Necessaries			
					Personal Clothing and Effects from Form 2...			
	Balance due by the Paymaster				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
		£			Deferred Pay or Gratuity.....			
					Balance due to the Paymaster.....			
						£		

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

Dated at this

day of

191

Paymaster.

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

PAY LIST.

to 30th March

1916 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps 2/1st Newfoundland

No. 1456 Rank Private Name P. Flynn

Died (a) at _____ on the _____ of _____ 191 .
 Embarcked S.S. Scandinavian on the 4th of April 1916
 Deserted at _____ on the _____ of _____ 191 .

I Certify to the correctness of above in every particular.

_____ } - Commanding Squadron, Troop,
 Battery or Company.

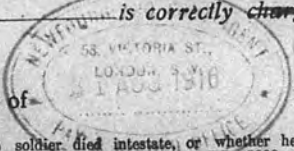
STATEMENT OF ACCOUNT.

[FORM 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....			
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay			
	191				_____ days at _____ from _____ to _____			
	"				Messing allowance _____ days at _____			
	"				_____ from _____ to _____			
	"				Clothing and kit allowance			
	Consolidated stoppage				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.....			
		£				£		

I hereby Certify that the above account is correct in every particular, and that the ~~debit balance of £~~ is correctly chargeable against the Public (a) CONTINGENT

Dated at _____ this _____ day of _____ 191 .
 _____ J. H. Marshall *griff*
 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. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

PAY LIST. to **191 . Voucher No.**

NON-EFFECTIVE ACCOUNT.

Regiment or corps *2/1 Newfoundland Regt*
 No. *1456* Rank *Private* Name *Flynn, P*
 Died^(a) at _____ on the _____ of _____ 191 .
 Deserted at _____ on the _____ of _____ 191 .

I Certify to the correctness of above in every particular.

Chas. Aye Capt. { 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			
	Cash issues (Date of each issue to be stated)				Pay 13 days at <i>100</i> from <i>18/3</i> to <i>30/3</i>	<i>2</i>	<i>13</i>	<i>5</i>
	£ s. d.				Proficiency, Service or good conduct pay			
	<i>March 25/16</i> <i>191</i>		<i>15</i>	<i>0</i>	days at _____ from _____ to _____			
	<i>March 31/16</i>			<i>17</i> <i>0</i>	<i>Field</i>			
				<i>15</i> <i>0</i>	Messing allowance <i>13</i> days at <i>100</i>			
				<i>1</i> <i>12</i> <i>0</i>	from <i>18/3</i> to <i>30/3</i>			<i>5</i> <i>4</i>
	<i>Allotment 13 days at</i>			<i>1</i> <i>6</i> <i>9</i>	Clothing and kit allowance			
	<i>Consolidated stoppage 50.</i>				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			
		£	<i>2</i>	<i>18</i> <i>9</i>		£	<i>2</i>	<i>18</i> <i>9</i>

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

Dated at _____ this _____ day of _____ 191 . Paymaster.

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

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT

Regiment or corps *2/1 Newfoundland Regt*
 No. *1456* Rank *Private* Name *Flyman P*
 Died (a) at _____ on the _____ of _____ 191 .
 Deserted at _____ on the _____ of _____ 191 .

I Certify to the correctness of above in every particular.

Chas. Aye Cpt. { 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			
	Cash issues (Date of each issue to be stated)				Pay <i>13</i> days at <i>100</i> from <i>18/3</i> to <i>30/3</i>	<i>2</i>	<i>13</i>	<i>5</i>
		£	s.	d.	Proficiency, Service or good conduct pay			
	<i>March 25/16</i>	<i>150</i>	<i>15</i>	<i>0</i>	days at _____ from _____ to _____			
	<i>March 31/16</i>		<i>17</i>	<i>0</i>	<i>Field</i> Missing allowance <i>13</i> days at <i>10</i> <i>0</i>			<i>54</i>
				<i>150</i>	from <i>18/3</i> to <i>30/3</i>			
	<i>Alotment B depot</i>		<i>1</i>	<i>12</i>	Clothing and kit allowance			
	<i>Consolidated stoppage ... 50...</i>	<i>1</i>	<i>6</i>	<i>9</i>	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			
		<i>£</i>	<i>2</i>	<i>18</i>		<i>£</i>	<i>2</i>	<i>18</i>
			<i>9</i>				<i>9</i>	

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

Dated at _____ this _____ day of _____ 191 . Paymaster.



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

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

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 [66] W:617/2124 1000m 6/10ss 56 B. 121.
 29.

Number of Sheet 1

Regiment of 1st Newfoundland

Signature of O. C. Company S. C. Norris 2/Lt.

Regimental Number and Name 1456 Flynn, Patrick		Enlistment Age on 31 years 2 months	Trade Expressman	Good Conduct Badges, Service Pay or Proficiency Pay		
Joined _____ Date _____		Place and Date of Enlistment St. John's 23/4/15	Religion Roman Catholic.			
Joined _____ Date _____		Period of { with Colours _____ years. { with Reserve _____ years.	Place of Birth Goulds			
Joined _____ Date _____						

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
Stoba	9/8/15	Pte.		Absent from 7 a.m. to 9.30 p.m.)	Cpl. Wolverson	2 days C.C.	10/8/15	Capt. E.S. Ayre	Forfeit 1 days pay.



To be carried over

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (66) W:617/2121 1000m 6/10ss 56 56

Forms
 B. 121.
 29.

Regiment of 1st NewfoundlandNumber of Sheet 1Signature of O. C. Company S. C. Norris 2/Lt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	<u>Flynn, Patrick</u>	Age on	<u>31</u> years <u>2</u> months	<u>Expressman</u>			
Joined	Date	Place and Date of Enlistment	<u>St. John's</u> <u>23/4/15</u>	Religion	<u>Roman Catholic.</u>		
Joined	Date	Period of	(with Colours) years.	Place of Birth			
Joined	Date		(with Reserve) years.	<u>Goulds</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
Stoba	9/8/15	Pte.		Absent from 7 a.m. to 9.30 p.m.)	Cpl. Wolverson	2 days C.C.	10/8/15	Capt. E. S. Ayre	Forfeit 1 days pay.



Squadron, Troop, Battery and Company Conduct Sheet.

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 [533] W19571/604 400m 2/15x-1 53 58

Forms
H. 121.
89.

Regiment of 1st Newfoundland

Number of Sheet 1

Signature of O. C. Company Schorris et.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	<u>1456</u>	Age on	<u>31</u> years <u>2</u> months	<u>Expressman</u>			
Joined	Date	Place and Date of Enlistment	<u>St John's</u> <u>April 23rd 15</u>	Religion			<u>Roman Catholic</u>
Joined	Date	Period of	with Colours <u>1</u> 17 years. with Reserve <u>3</u> 6 years.	Place of Birth			<u>St John's</u>
Joined	Date						

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>St John's</u>	<u>9. 8. 15</u>	<u>Pte</u>		<u>Absent from 7am to 9.30 pm</u>	<u>Cpl. Woloszew</u>	<u>2 Days CC.</u>	<u>10. 8. 15</u>	<u>Capt. P. D. Hays</u>	<u>Infirm 1 day long</u>
<p style="font-size: 2em; font-family: cursive;">Medically unfit <u>St John's</u> 30 14 [#] <u>14</u> ¹⁰ <u>16</u> <u>E</u></p>									
<p>To be carried over</p>									

COPY SENT TO
Adj + Dep

Letter _____ No. _____
 Memorandum _____

Dated APR 5 - 1916

Army Form B. 121.



1st Newfoundland Regiment

HEADQUARTERS

St. John's, Newfoundland,
October 14th. 1916.

To
1/ Lt. Tashel. Howley,
Pay Office.

No. 1456-Pte. P. Flynn is discharged from the Newfoundland Regiment from this date, October 14th/16. I am paying this man his full pay to date of discharge. Please arrange discharge papers etc.

Chas. H. Aye Capt.

Newfoundland Regt. ^{Med. Dept.}

Pte. Flynn was sent back from Ayr, Scotland, & was taken on the strength at Headquarters for Pioneer work. His work lately has not been very satisfactory & because of that he is being discharged.

C.H.A.



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. i/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 *Flynn Patrick*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *1456*
 Intended address *126 Water St West*
 Height on discharge *5 Feet 9*
 Color of hair on discharge *Black*
 Complexion *Fair*
 Color of eyes *Grey*
 Figure on discharge *medium*
 Christian name of Father *Dead*
 Christian name of Mother *Marta*
 Wife's maiden name in full *-*
 Date and place of marriage *-*
 Christian names of children *-*
 Place and date of soldier's birth *Quebec 22 May 1885*
 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)

Patrick Flynn

(Rank)

pte

Station

St John N. F.

Date

Mar. 13th /17

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.

J. W. Borden Lt

Medical Officer i/c Hospital.
Unit, or Command Depot.

Station

St John N. F.

Date

Mar. 13/17

COPY

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

MEDICAL HISTORY

Surname Flynn. OF Christian Name Patrick.

Table I.—GENERAL TABLE.

Birthplace:—Parish	Newfoundland		County			
	SPECIAL RESERVE.		REGULAR ARMY.			
Examined	on 21	day of April	1915	on	day of	191
	at	St. John's.		at		
Declared age	31	years	days	years	days	
Trade or occupation	Expressman.					
Height... ..	5	feet	9	inches	feet	inches
Weight			145	lbs.		lbs.
Chest Measurement	Girth when fully expanded	37		inches		inches
		Range of expansion		4	inches	inches
Physical development	Right		Left		Right	
Vaccination marks	Arm			Right		Left
	Number					
When vaccinated	Never.					
Vision	R.E.—V.=	6/6		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)			
	Enlarged tonsils.					
Approved by (Signature)	Fred. W. Burden,					
(Rank)	Lieut.					
	Medical Officer.				Medical Officer.	
Enlisted	at	St. John's.		at		
	on 21	day of April	1915.	on	day of	191
Joined on enlistment	Corps		Regtl. No.		Corps	
	Nfld Regt.		1456			
Transferred to						
Became non-effective by						
	on	day of	191	on	day of	191
(Signature)						
(Rank)						

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

Date	Brief details, and signature
May 25.	First Inoculation 500 Million.
June 7th. 1915.	Second " 1000 "
" 25th "	Vaccinated at sea. not effective (Sd)J.C.
March 15th.1916.	Cardiac Valv. Disease. Unfit for foreign service. (Sd.) M.J. Murray, Capt., R.A.M.C.

Table IV.—SERVICE TABLE.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
St. John's Nfld.					