



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4117 Name Frank Hyman Corps R.L.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Frank Hyman</u> |
| 2. What is your full Address? | 2. <u>Bank levee St Barthe</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>4</u> Months |
| 5. What is your Trade or Calling? | 5. <u>enlistman</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, Frank Hyman 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.

Frank Hyman SIGNATURE OF RECRUIT.
Namronsky Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Frank Hyman 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 14th day of November 1917.

Signature of Attesting Officer [Signature]

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....1917 } Approving Officer.

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).....



FIRST NEWFOUNDLAND REGIMENT

4117

ATTESTATION OF

No. 4117 Name Frank Hynes Corps P. C.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Frank Hynes
2. What is your full Address? 2. Becks Cove
St. Barbe
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years 4 Months
5. What is your Trade or Calling? 5. Cookman
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

DURATION OF THE WAR

I, Frank Hynes 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.

G. 14-11-17 Frank Hynes SIGNATURE OF RECRUIT.
Namours of Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 14th day of November 1917

Signature of Attesting Officer W. H. Hynes

†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 Frank Hynes
 Apparent age 19 years 4 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 31 inches
 Range of expansion 36 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Jhuston Hynes
Brents Cove 20 Bay | Relationship Father

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 Re-serve 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>14-11-17</u>									
Joined at <u>M. S. M.'s</u> on <u>November 14th 17</u>									
<u>Discharged July 9/19</u>									
<u>Embarked M. S. M. St. Nazaire to Halifax N.S. 29 '18.</u>									
<u>Embarked for B.C. 2-7-18</u>					<u>Wanderer</u>	<u>14-10-18</u>			<u>Admitted</u>
<u>54th Gen. Hosp. Quebec 4th Bn</u>					<u>L. Hunt</u>	<u>15-10-18</u>			<u>Admitted into Canadian Military</u>
<u>Head Barracks No. 18-10-18</u>					<u>transferred to 5th Bn</u>	<u>11-10-18</u>			<u>Admitted</u>
<u>Admitted to Wm. Lester 18-10-18</u>					<u>to Newfoundland</u>	<u>for demobilization</u>	<u>31-10-18.</u>		
<u>Admitted Newfoundland 1-6-1919</u>									
<u>Demobilization M. S. M.'s 9-7-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 9-7-19 (date of discharge) 1 years 238 days
 " " Pensions " " " " " " " " " " " "

C.R. 4117

Extract from Daily Orders Part II Unit Royal
Newfoundland Regiment, Depot St. John's,
dated 12-7-19.

The Discharge of the undernoted on demobilization
has been CONFIRMED by Officer i/c Records from
noted date ⁹22-7-19.

4117, Pte. F. Hynes.

C.R. 4117

Extract from Daily Orders Part 11 Unit Royal Wilt. Regt.
St. John's, June 16, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by C.G. Discharge Depot with effect from 25-6-19.

25-6-19

4117 Pte. Frank Hynes.

C.R. 4117

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

4117 Pte. Frank Hynes.

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

C.R. 4117

Extract from Casualties received from Pay & Record
Office, London, Nov. 19th, 1918.

The und ermentioned was discharged from the 3rd London
General Hospital, on 18th/11-18 and granted furlough
to 27/11/18. marked fit for l. duty.

4117 Pte. Hynes, H.

CR 4117

Extract from Orders by Lt. Col. B.J. Barton D.S.O. Commanding
2nd Battalion Royal Newfoundland Regiment.

Part 2 (Orders)

The following reported back from the 1st Battn is taken
on the strength and posted to "H" Company

4117 Pte. H. Hynes

as from 18/11/18.

C.R. 4117

Extract from Casualties received from Pay & Record Office,
London, Nov. 18th, 1918.

4117 Pte. H. Hynes,

Ex 3rd London G. Hospital 18-11-18 proceeded to Depot
same date not having sufficient money to proceed on Furlough
Marked fit for l. Duty.

C.R. 4117

Nov. 13th, 19

Mr. Thurston Hynes,
Brents Cove,
St. Barbe.

Dear Sir:-

I beg to inform you that additional information has to-day been received through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that your son No. 4117 Pte, Frank Hynes, is now progressing favourably.

Yours faithfully,

Lieut. Col.,
Chief Staff Officer.

C.R. 4117

Extract of Casualties from Pay & Record Office
London. dated Nov. 8/11/18.

Undermentioned man was admitted 3rd London Gen.
Hospital 31/10/18. Transferred from Mile End Hospital.

#4117 PTE. F. HAYNES.

Memo from 3rd L.G.H. 1/11/18.

C.R. 4117

Extract from War Office List dated 1. 11. 18 No. C1733.

4117 Pte. F. Hynes.

Wounded 10. 110. 18.

BC.

CP 4117
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

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

(NOT TRANSMITTED)

Signature of Sender _____ Address Dept of Militia

Line Number	Rcd	By	Sent	by	Check

Dated Oct 22nd, 1918

To Thurston Hynes, Brent's Cove, St, Barbe

Regret to inform you that Record Office, London,
officially reports No. 4117, Private Frank Hynes,
at Mile End Military Hospital London suffering from
G.S W. thumb compound fracture

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

J. R. Bennett

hge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 4117

Extract from War Office List No. H. A. 30381. dated Oct. 24th. 1918

ADMITTED TO 54 GEN. HOS. AUBENGUE 15th., OCTOBER 1918.

4117 Pte. W. Hynes.

BC.,

G.S.W. LT. THUMB MILD.

C.R. 4117

Extract from Nominal Roll to B.N.F. embarked Folkestone
8-7-18.

#4117 Pte.F.Hynes.

C.R. 4117

Extract from Nominal roll of sick and
wounded from France admitted Mile end
Military Hospital Bancroft Road E.1.
admitted on 18/10/18.

4117 PTE. F. HYNES

G.S.W. L. THUMB CP. FRAC.

C.R. 4117

Extract from Telegram despatched to Synoptical, London,
dated May 16, 1918.

Pay to as follows:-

#4117 Pte. Hynes,

24.0.2.

C.R. 4117

Extract from Nominal Roll Draft "H" Company Embarked
S.S. "Florissel" Jan. 29th, 1918.

4117 Hynes F.

C.R. 4117

Extract from Daily Orders Part II Unit The Royal Rifle
Regt., St. John's Nov. 15th, 1917.

4117 F. Hynes.

Attested for General Service in the 1st Rifle Regt., posted
to G Coy, and assigned to number as shown, with effect from
Nov. 12/17.

J. Hayes

C.R. 4117

~~PRO~~

1

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.....
2. Regtl. No. *4117* 3. Rank.....
4. Name *HYNES* *Frank*
 (Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade }
 or Occupation }
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (b) Where
 (c) Opinion of Court
- (b) Date of Discharge ;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)

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."
G.S.W. Thumb left
11. Date of origin of disability. *Oct 1918.*
12. Place of origin of disability. *Belgium*
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. *Bullett wound Thumb. Healing*

OPINION OF THE MEDICAL BOARD.

14. State whether the disabilities are
- | | | |
|--|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. } | No | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *N. A.*

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.

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.)
- Wound at base of Thumb nail, healed movement at joint below good, nail intact but distorted. otherwise no disability.*

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.*

Station *Hayley Down Camp* Medical Officer in charge of case.

Date

* 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

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—
- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. 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 part of the soldier | | |
- Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not
- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

The Royal Newfoundland Regiment

4117

DEMOBILIZATION OF

Reg. No. 4117 Rank Cts. Name Hynes Frank
 Date of Enlistment 14-11-17 Address Brent Ave District H. Barb
 Occupation Fisherman Classification for Discharge E Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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 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 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Frank Hynes
mark x Hynes
W. J. Salton

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$65.00
- (b) Clothing Supplied Shaw Caps

Date 11-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 1174 to his home at Brent Lane and Release Certificate No. 2606 issued.

Date 11-6-19 *J.A. Snow Capt.*
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 11-1-19

Date 11-1-19 *J.A. Snow Capt.*
Depot Paymaster.

Discharge approved for 11-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1	<i>1 Form B</i>
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. Snow Capt.*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

JUN 25 1919

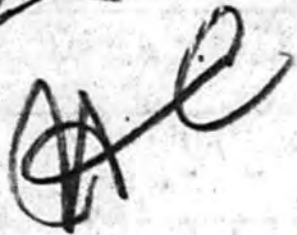
Date
O. C. Discharge Depot.

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

Date June 20/1919 *J.A. Snow Capt.*

O.R. # 10-0 N.R. 16/11/18 Receipt No 9798
16/11/18

of paymaster
to the Pennsylvania Land Regt
58 Victoria St



please permit to me
the sum of one pound for account
of any balance that may be
due to me.

104117

Approved P. C. G. Hayes.

Signature and name
16. 11. 18

104117

To Paymaster No 11
of the 1st Regiment of Foot Guards
55 Victoria St
1818

Please pay to me
the sum of one pound on account
of my balance that may be due to me

WANDSWORTH S.M. 1818
17 NOV 1918
3rd LINDSEY GENERAL HOSPITAL

1117
p to 34 (by order of the
Officer in Charge of the
Receipt No. 4656
P.S.

038587

No. 7961/673

NEWFOUNDLAND CONTINGENT

From

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

To

Officer Commanding,
2/Bn Royal NFB Regt.
Wanchester.



~~Subject~~ 21st May 1918

Subject: 4117 Pte. F. Hynes

With reference to the following telegram (4468) from the Hon. Minister of Militia, received

Pay to 4117 Hynes £4:0:2

Draft £ **4:0:2** is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

A. D. [Signature]
Chief Paymaster & O. i/c Records.

May 23rd 1918

Receipt hereunder.

[Signature] LIEUT. COLONEL,
COMMANDING ~~2ND BN. ROYAL NEWFOUNDLAND REGT.~~
Officer Comdg. 1st Battalion
1st Newfoundland Regiment

Received the sum of Four

Pounds & Two Pence on account of cable remittance from Newfoundland.

[Signature]
No. 4117 Rank Private

Witness: *[Signature]*

Officer in Charge Records/Commanding,

Newfoundland, s. 58. Victoria St. S.W. 1



Please note that the undermentioned W.C.O/Man has this day been

No.	Rank.	Name.	Hospital.	Regiment.	
4117	Pte	Hynes (A.)	Wandsworth Common S.W.	1 st Newfoundlands.	

A

Arthur Hogan

Major, R.A.M.C.
Registrar for Officer i/c.

Mile End Military Hospital,
Bancroft Road, E.1.

A D
T

POST OFFICE TELEGRAPHS.

Counter }
Number } _____

OR EXTRA EUROPEAN DEFERRED TELEGRAMS (TELEGRAMS FOR NORTH AMERICA OR WEST INDIES EXCEPTED).

Express note

Date Stamp	Prefix	Code	Words	Sent
				At _____ .m.
	Service Instructions		Charge	To _____
			£ s. d.	By _____

FOR POSTAGE STAMPS.

To be securely affixed by the Sender. Any stamp for which there is not room here should be affixed at the back of this form.
(A receipt for the Charges on this telegram can be obtained, price One Penny).

According to the language used O, D or F must be added to "LC" (see back).

TO }

NOTICE.—The following Telegram cannot be accepted unless the Declaration at the foot of the Telegram is previously filled in and signed by the sender.

- LC -

MRS MARY HYNES
TILCOVE

91

(NEWFOUNDLAND)

CABLE

SIX

POUNDS.

through ~~London~~ Halifax

Cable No 91

Date 4/11/18

FRANK. HYNES.

has it must work to give my name

I hereby declare that the text of the above Telegram is entirely in plain language (the language used being *) and that it does not bear any meaning other than that which appears on the face of it.

I request that the Telegram may be forwarded [via] on the faith of the foregoing declaration and subject to the conditions printed on the back hereof by which I agree to be bound.

Signature and Address of Sender

Frank Hynes. The St Mary Riffa Regt

NOTE.—The Sender's Name and Address or either of them, if to be telegraphed, must be written at the end of the text of the telegram.

* State here the language used.

† This space may be filled up if there are alternate routes (see Table of Charges for Foreign Telegrams in Post Office Guide).

to Paymaster No 222
R. Newfoundland Dept 1918
58 Victoria St

Please permit to me
the sum of one pound on account of
any balance that may be due to me

No 4117

approved Pte J. J. Hynes
W. W. Hynes
Captain

O.K. £ 1-0-0 W.R. 8/1/18

Receipt No 9592 P.P.

To Postmaster Nov 12
Newfoundland Regt
35 Victoria

12/18/80
12/18/80
12/18/80
12/18/80

Please permit to me
the sum of one pound on account
of any balance that may be due
to me

[Large handwritten signature]

Gabriel
Capt. Home

No 4117
Pte H. Jones

12/18/80

THIRD LONDON GENERAL HOSPITAL,

TELEPHONE:
BATTERSEA 3085.

WANDSWORTH, S.W. 18.

to ^{for} ~~Wendland~~ ^{Papmaster} ~~and~~ ^{Regt} ~~of~~
58 Victoria Street Nov 2nd of
1918

Please Permit to me
the sum of one pound
an account of any Balance
that may be due to me
W 4117

[Handwritten notes and signatures]
to G. Hynes
+ amount
2-11-18
K.H.
Wendland



No. 1845-7

ENCLOSURE

N.F.P./98.

NEWFOUNDLAND CONTINGENT

From:

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

To: Officer Commanding,

3rd London Gen. Hospital
Wandsworth

15 NOV 1918
LONDON DIVISION

Nov 14 1918

15th Nov 1918

ALLOTMENT

(5)

No. 4117 Pte J. Hynes

With reference to the enclosed application for cancellation of Allotment of the above-named, 11/11/18 (9699), kindly ascertain and advise:-

1. Whether the Allotment is payable to a dependent as a sole or contributory means of support?
2. Whether Separation Allowance (in addition to Allotment) is being paid to any person in Newfoundland or elsewhere on his behalf, and if so, to whom?
3. The reason for cancellation.

Should the Soldier's reply to "2" be in the affirmative he should be informed that Allotment may not be cancelled without reference to the Minister of Militia in Newfoundland, to whom reason for cancellation will require to be submitted.

Contributory

allotment only is being paid to

*Mr T.M. Hynes
Brents Cove*

*St Barbe's Hospital
Newfoundland*

S. M. ... Capt for OC

3rd London General Hospital,
Wandsworth, S.W. 18

[Signature]
Major,
Chief Paymaster & O. i/c Records.

ORIGINAL.

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

ENTERED.
PAY LEDGERS
N.F.P. / 1299
NUM. NO. 1299
ALLOT. INDEX
" REGISTER
EXAMINED

1. I, (No) 4117 (Rank) Pls (Name) J. Hynes
 hereby apply for cancellation of Allotment made by me on N.F.P./11
 No. 3808A dated December 1st 1917 in favour of
Mother Mrs J. M. Hynes, Brents Cove St. Barbe
 for \$ — cts 60 per diem.

Such cancellation to take effect on the Thirtieth day of
November 1918

2. I agree to accept all risks and consequences of this appli-
 cation failing to reach Headquarters, St. John's, in time to become
 operative at above-nominated cancelling date, and that in the event
 of such non-delivery, and thereby the Allotment continuing to be
 paid to the Allottee, I also agree to such further stoppage in the
 Pay Books as may be necessary, or otherwise to refund such overpaid
 amount or amounts.

Dated at London
Nov. 14 1918

Witness to the mark of Jde Hynes
H. Mathias

Allotter. Sgt. Ramet.

Approved and Witnessed:

Subtropsen Capt. Rame

for O.C. " " Company,
 3rd London General Hospital,

COPIES SENT		
TO	No.	DATE
M. OF M.	<u>19381/95</u>	<u>27/11/18</u>
O.C. 1st. Bn.		
" 2ND. Bn.		

N.B. - To be made out TRIPPLICATE and delivered to the Pay & Record
 Office not later than the date of cancellation, in accordance
 with P. & R.O. C.L./10, 9/12/18.

19637/2201/P&A.

(3004) Wt. W6720/M2855. 10,000,010. 9/17. C. & Co.

Forms
C. 348
1690

ENCLOSURE

Army Form C. 348.

MEMORANDUM.

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

From **Officer Commanding,
2nd Bn. Royal Newfoundland Regt.
Hazeley Down Camp.**

To **Officer Commanding,
2/Bn. R. Nfld. Regt.,
Hazeley Down Camp,
Winchester.**

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

WF/BC

- ANSWER.

Pay and Record Office.

30th November 1918

Dec. 3rd 1918.

4117.PTE. F. HYNES.

With reference to the enclosed letter 24/11/18 (10249) from 4117 Pte. F.Hynes: No remittance for this soldier has been received from Newfoundland to date.

[Signature]
Major.
Chief Paymaster &.O. i/c. Records

NEWFOUNDLAND CONTINGENT,
PAY & RECORD OFFICE.
No. 10485
DEC 1918
Noted.
[Signature]

EW
Comd
P & A
R & C
B & F
P

[Signature]

**LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.**

19637/2201/P&A.

SUSPENSE | CLEARED

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

Officer Commanding,
2/Bn.R. Nfld.Regt.,
Hazeley Down Camp,
Winchester.

WF/BC

Pay and Record Office.

30th November 8

4117.PTE. F. HYNES.

With reference to the
enclosed letter 24/11/18 (10249)
from 4117 Pte. F.Hynes: No
remittance for this soldier
has been received from
Newfoundland to date.

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

19637/2201/

No. 91

Pay

ANGLO-AMERICAN



WESTERN UNION DIRECT UNITED STATES CABLEGRAM

Prefix _____ Code _____		At _____		FOR STAMPS	
WORDS	CHARGE	To _____	By _____	THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.	
10		VIA ANGLO.			

4/11/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To MRS MARY HYNES
TILTCOVE (Newfoundland)

CABLE SIX POUNDS THROUGH MILITIA

HYNES

*Express Rate 1/- per word
Charge 4 11/7 Hynes*

CHECK
[Signature]
Nov 13/18

10/-

CHARGED
PAY BOOK *[Signature]*
Date *13/11/18* by *[Signature]*

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address 58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

Hynes, A

H117

Ray Sept.

July 11, 1919

#4117 Pte. Frank Hynes,

Brents Cove,

St. Barbe Dist.

Dear Sir:-

Referring to your application I enclose cheque
for Seventy dollars (\$70.00), being amount of first payment
due you on account of the War Service Gratuity.

Yours truly

Captain,
Paymaster & O.I/c Records.

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 *Frank*..... 2. Surname..... *Hynes*

3. Rank..... *O/C*..... 4. Regtl. No..... *4117*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *Brents Cove*

6. Date of enlistment in the Regiment..... *District of St. Barbe*
Nov. 16/17 - 1917

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. If so, give dates and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From Nov. 16/17 to June 11/19*..... 1.2

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.....

..... *No*

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

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.?..... *No* If not give? - (a) date of discharge..... *June 11/19* (b) Reason for discharge.....

..... *Temporary* *Deutsches Heer*

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...

..... *Belgium & Germany - Oct. 14/18 to* *Apr. 1919*

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.

Signature of Applicant:

his
Frank X. Hayes

Place of Residence:

Branch Cove, Dis. St. Peter

Declared before me at:

St. John's, Nfld.

This

11th

day of

June

19*19*

John W. McCarthy

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
.....
.....
.....
Certified correct.			Paymaster	

July 9, 1919

#4117 Pte. Frank Hynes,

Brent Cove, N.D.B.

Dear Sir

Please find enclosed Discharge
Certificate No. 2844.

Yours truly

Captain
Paymaster & O.i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4117 Rank Pte Name Hynes Frank
 Intended place of residence Brent Cove

2. Occupation Interman
 Classification of soldier 2 Medical Category A1

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 JUN 11 1919
 Date ST. JOHN'S *J. H. Mousher*
 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 ST. JOHN'S
JUN 11 1919
Frank Hynes
 Signature of soldier
Am. Louston
 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
Frank Hynes
 Signature of soldier
W. J. Peatley
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 14-11-17 No of days on Military
 Discharged from service JUN 25 1919 Plus 14 days Service 603

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
JUN 25 1919
R. H. Lait Major
 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, Nfld
 Date July 9/1919
M. Bowley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

ATB 2079/2844

The Royal Newfoundland Regiment

Class for Demobilization: E.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 10.6.19

Regimental No 4117

Name Hynes, Frank Rank Pte

Address Brents Cove N.S.B.

Present Medical Category A1

Recommended for:— { (a) Immediate discharge
(b) ~~Standard Medical Board~~

Members of Board {

R.H. Last Capt
O.C. Discharge Depot.

Robison
Senior Medical Officer

G.W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4117 Rank Pte Name Hynes Frank
 Date of Enlistment 14-11-17 Address Brent Lane District H.C. 2
 Occupation Fisherman Classification for Discharge E Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P136	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 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation:

Frank ^{his} Hynes
 mark ^x Hynes
 W. J. Halton

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 _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1721 to his home at Brentford and Release Certificate No. 2606 issued.

Date

11-6-19

J.A. Snow Capt.

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 9-1-19

Date

11-6-19

J.A. Snow Capt.
Depot Paymaster.

Discharge approved for

25-6-19

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 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		

2 Form B

Date

11-6-19

J.A. Snow Capt.

O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

- Officer in Records.
- Board of Pension Commissioners.

with following additional documents.

JUN 25 1919

Eligible for War Service Gratuity

Date

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

Hynes Jr

Signature of Man.

J. A. Snowcraft

Signature of the Vocational Officer or his Representative.

Reg. No. *4117*

Place

Pt Johns

Date

11-6-19

191

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

MEDICAL HISTORY

Surname Hyne Christian Name Frank




Table I.—GENERAL TABLE.

Birthplace:—Parish Brent Cross St. Peter's County London

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>14</u> day of <u>Nov</u> 191 <u>7</u> at <u>St. John's</u>		on _____ day of _____ 191 <u>1</u> at _____	
Declared Age	<u>19</u> years <u>4. 11</u> months <u>Fisherman</u>		_____ years _____ days	
Trade or Occupation	<u>Fisherman</u>		_____	
Height	<u>5</u> feet <u>8</u> inches		_____ feet _____ inches	
Weight	<u>131</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>36</u> inches		_____ inches	
	Range of Expansion... <u>3</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	_____	_____
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V= <u>6/12</u> L.E.—V= <u>6/18</u>		R.E.—V=_____ L.E.—V=_____	
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to cause rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>Lammie Paterson</u>		_____	
(Rank)	<u>Major</u> Medical Officer.		_____ Medical Officer.	
Enlisted	at <u>St. John's</u> on <u>1st</u> day of <u>Nov</u> 191 <u>7</u>		at _____ on _____ day of _____ 191 <u>1</u>	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<u>1st Regt</u> <u>Regt 4117</u> ROYAL NEWFOUNDLAND REGIMENT		_____	
Became non-effective by	on _____ day of _____ 191 <u>1</u>		on _____ day of _____ 191 <u>1</u>	
(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 case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
	12	3	18	29	MAR	1918	Measles	14	<i>Recovery. Discharged to duty usual Army regulations; improve</i>	<i>W. J. Langton Capt R.M.C. Winchester</i>
	18	10	18	31	10	18	G.S.W. Thumb. (L)	13		
<i>3rd London Cyclist Bde. Wandsworth.</i>	31	10	18	18	11	18	G.S.W. Left Thumb.	18	wounded in France 14. 10. 18	<i>W. J. Langton Capt R.M.C.</i>

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 }
 2. Regtl. No. *1117* 3. Rank... *Pte.* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *MYNES Frank* (a) Former Regts. or Corps; with Regtl. Nos.
 (Surname) (Christian Names)
 5. Age last birthday.....
 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. *G.S. W. left thumb Oct. 1918.*
 12. Place of origin of disability. *Belgium*
 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. *Bullet wound thumb healed.*

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war *Yes*
 - (ii.) Previous active service *No*
 - (iii.) Climate in pre-war service *No*
 - (iv.) Ordinary military service before the war *No*
 - (v.) Serious negligence or misconduct on the man's part. } *No*
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *U.A.*

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.

15. What is his present condition? *Wound at base of thumb nail, healed*
below good. Movement at joint intact but distorted. Otherwise no disability
 (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

21. Give diagnosis and particulars of:—
 (a) Any disability claimed or discovered.
 (b) The present condition thereof.

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?

22. 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 part of the soldier
- Give details:

20. Do you recommend—
 (a) Discharge as permanently unfit? *Repatriation*
 (b) Change to United Kingdom?
 Note—(b) is only applicable to soldiers invalided at Foreign Stations.

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?
 23. Is the disability in a final stationary condition? If not
 (a) How long is the present degree of disability likely to last?
 (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

Station *H.W. Camp* Medical Officer in charge of case.
 Date *17-1-19*

* 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

The Royal Wld. Regiment

DEMOBILIZATION

No. 4117 Rank _____
Name Lynn

Warned for demobilization on

JUN 11 1919



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 *Frank Hynes*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4117*

Intended address *Brents Cove, St Barbe,*

Height on discharge *5* Feet *8*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *1 Scar on left Hand*

Figure on discharge *Tall*

Christian name of Father *Jusem*

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 *Brents Cove, 24 Aug 1899*

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) *Frank Hynes* *Pte*
 Date *9-6-19* (Rank)

Witness, E. P. ...

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



May 19, 1919

Mrs. Mary Hynes,
BRENT'S COVE.

Dear Madam:

With reference to your letter of April 27th. I beg to advise you that No. 4117, Pte. Frank Hynes cancelled his allotment from and including De c. 1/'18, therefore if you wish him to declare another allotment in your favour, I would suggest that you write direct to him.

Yours truly,

Lieut.
For Paymaster

5013

Brents Cove

April 24th 1919

J. M. Bennett Minister of ~~Education~~
Militia

Dear Sir

inform

Will you kindly
me child No 4117 Pte Frank Hynes
Withdraw the allotment which
he cancelled from me from
your office & wired to me to
send him ten pounds I have
sent him money before he stops
the allotment and I also sent
him money since and still he
wired for more If the allotment
is still at your office please
hand it over to me. As he is
not of age to manage his own
affairs I think it my duty to
do so He is my oldest son of
a family eight so you may
see I have lots of uses for his
money. If we had to let his

money come on I would have
shared it with him but I can
not afford to send him any from
our own earnings

Hoping you will oblige
me if in this

I remain
yours truly

Mrs Thousant Hynes
or Mary Hynes

The man
cancelled his ~~alibi~~
30/11/18
LLO

March 22nd. 1919

Mrs. Mary Hynes,
BRENT'S COVE, St. Barbe,
Nfld.

Dear Madam:

With reference to your letter of March 3rd. I beg to inform you that #4117, Pte. Frank Hynes cancelled his allotment from and including December 1/18, therefore the last cheque which you should have received, would be on or about Dec. 10th. in payment for the month of November.

Yours truly,

Lieut.
For Paymaster

Brents Cove
March the 3rd 1919

475

please I am writing
to ^{to you} about my sons money
Pte G rank Glynnes No 4117
I never got my money
going on three months now
I want to know the reason
or is he stopping please
write and let me now the
reason

Yours
truly
Mrs Mary
Glynnes
Brents Cove

Cancelled
Allan

December 24th. 1917.

Mr. Thomas Lannon,
Tilt Cove, N.D.B.

Dear Sir,-

I enclose herewith cheque for \$4.00,
being the amount due you for Board & Lodging a/c
Private F. Hynes.

Yours faithfully,

Capt. & Paymaster.

JH/.



till Cove
November 10th 1913

Due to Thomas Lannon
on the part of Francis
Lynnes 4 days Board at
\$1 one dollar a day to
the said Thomas
Lannon

till Cove ✓✓

Notre Dame Bay
November 10th 1913

ACCOUNT	<i>J. Messer</i>	INITIALS	<i>JW</i>
CH. NO.	<i>2345</i>	INITIALS	<i>JW</i>
IND. LEDGER	<i>L</i>	INITIALS	<i>JW</i>
PAY LEDGER	<i>Am</i>	INITIALS	<i>JW</i>
GEN. LEDGER	<i>Am</i>	INITIALS	<i>JW</i>

1913

St. John's
Nov 23rd - 17

1st Newfoundland Regiment
To Thomas Cannon Det. Co.

To Board Lodging 4 days @ 100 per day. \$4.00

To 4117 Pk. J. Hayes

Wm. J. O'Connell
C.O. 9. COY.,

1st NEWFOUNDLAND REGIMENT,
ST. JOHN'S, Nfld.

23-11-17.

W. J. J. Cashy
MAJOR
Pres. Regimental Institute
Depot 1st Newfoundland Regiment,
St. John's, Nfld.

C.R. 4117

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal-1914-1919.

4117 pte Frank Lynes
Name

Date July 9 1919 -

Place Brents Cove

C.R. 4117

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of Victory Medal 1914-1919.

July 9, 1919
DATE.....
PLACE... Puerto Rico

NO. 4117... NAME... Mr. Frank Lynes

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

1st Newfoundland

Number of Sheets

ONE

Signature of O. C. Company

[Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>H. 117. Hynes Bank</i>	Age on	<i>19</i> years <i>4</i> months	<i>Stoker</i>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date		<i>St. Johns</i> <i>14-11-17</i>	<i>R.C.</i>
Joined		Date	Period of	with Colours	Place of Birth
Joined		Date		<i>238</i> years.	<i>St. Johns</i>
		with Reserve	<i>365</i> years.		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Hazeley Down Camp.</i>	<i>16.4.18</i>	<i>Pte.</i>		<i>1. Hesitating to obey order of a N.C.O. Christian</i>	<i>Christie</i>	<i>5 days. 6 B.</i>	<i>17.4.18.</i>	<i>Lt Col R.A. Cameron D.S.O.</i>	<i>[Signature]</i>
<i>Wilmington</i>	<i>16/19</i>	<i>"</i>	<i>1</i>	<i>1. Drunk in High Street 2045 2. Violently resisting the const</i>	<i>Documentary</i>	<i>10 days. CB</i>	<i>18/19</i>	<i>Lt. Col. Burtin D.S.O.</i>	<i>[Signature]</i>
<i>Demobilized St. Johns, 9/19</i>									

To be carried over

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