



April 1, 1942

Department of Public Health and Welfare  
St. Johns  
Newfoundland, Canada

RE: Pension #1895

Gentlemen:

This is to acknowledge receipt of your letter dated March 5, 1942 allowing my application for pension with respect to my late son, 2nd. Lieut. Frank O'Toole.

With respect to my husband John Miller, it is impossible for me to get a formal certificate of his death. My husband left me on the 15th day of April, 1930, and I have never heard from him since that time. I made many efforts to try to locate him but without success. I never took any legal proceedings to have my husband declared legally dead because of his continued absence. I did not think that it was necessary. However, because of his continued absence and because of my investigations, I am sure that my husband is dead. However, there are no records in the City of New York showing the death of my husband.

Because of this continued absence of my husband that I submitted my application that he was dead.

Until about a year ago, I was working and was able to support myself. This is because of the fact that I was able to support myself. I made no application for a pension. Now that I am unemployed, I have made this application.

If you have any other information with reference to my application, I should be glad what is possible to get this information for you.

I am herewith the declaration and signature statement which was forwarded to me. Both of these documents have been duly signed.

Very truly yours,

4.  
*Minnie Miller*

PROGRESSIVE REPORT ON ENLISTMENT.

Rank. To correspond with entries on the Medical History Sheet.

Reg. No. 365 0-64

Name Frank O'Toole

Apparent age 22 years      months. Height 5 feet 5 inches.

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

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

Other distinguishing marks: Scar back of right wrist, scar side of right eye.

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Mimmie Miller, 261 Water St. West, 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 engaged	Promotions, 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 commenced on engagement reckons from <u>8/9/14</u>								
Joined <u>John's</u> on <u>8th September '14</u>								
	promoted to	<u>L. Corp.</u>	<u>17/4/15</u>					
	do.	<u>Corp.</u>	<u>27/7/15</u>					
	do.	<u>Serg.</u>	<u>14/11/15</u>					
	do.	<u>Private</u>	<u>1/2/16</u>					
<u>Wounded Oct 12 1914</u>								
<u>Embarked for U.S. on 20th Dec 1914</u>								
<u>Admitted to U.S. Army at Camp 13 29th Dec 1914</u>								
<u>Invalided to England 26th Dec 1914</u>								
<u>Discharged from U.S. Army 13th Feb 1915</u>								
<u>Re-embarked for U.S. 9th Feb 1915</u>								
<u>Discharged from U.S. Army 10th Feb 1915</u>								
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C.R.

*Copy*

*Ch590/3854/aa 0-64*

**FIELD SERVICE.**

REPORT of the death of an Officer to be forwarded to the War Office with the least possible delay after receipt of notification of death from Army Form B. 213 or Army Form A. 36 or from other documentary sources.

REGIMENT or CORPS Newfoundland. Squadron, Troop, Battery or Company )

Rank 2nd Lieutenant.

Name F.

From reported O.C. Unit.

Date of Death In the Field, 12/10/17.

DIED at Hospital In the Field. France or Belgium.

Cause of Death Died of Wounds.

Place of Burial Not to hand.

State when private effects received } Not yet Received.  
a will is found

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

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

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

*J. Meavy* 2nd Lt. for Mjr,  
Office i/c No. 1 Infantry Section.

Station and Date O. 3rd. Echelon, B.E.F. 15/10/17.

C.R.O-64

Extract from Nominal Roll of N.C.O.s and Men of New Zealand Regiment, embarked H.M. "Lake Mantibo" at Port Said for France, 18/8/18

1064 Cpl. F.M.O'Toole.

G.

31st December, 1917.

Dear Madam,

I beg to inform you that a report has now been received from the Newfoundland Pay and Record Office, London, which contains the information that Second Lieutenant F. O'Toole was buried at Dozinghem Cemstery, 2½ miles N. of Poperinghe.

Yours faithfully,

Colonial Secretary.

Mrs. Minnie Miller,  
261 Water St. W.



M

October 18, 1917.

Dear Madam,

A report has to-day been received from the Nfld. Pay and Record Office, London, to the effect that the wounds which caused the death of 2nd Lieut. Frank O'Toole consisted of gunshot wounds in the right arm and abdomen.

Yours faithfully,

Colonial Secretary.

Mrs. Minnie Miller,  
261 Water St. West.

11

M

October 15, 1917.

Dear Madam,

I regret to inform you that the  
Record Office of the First Newfoundland Regiment,  
London, to-day reports that your son, Second Lieut.  
Frank O'Toole, died of wounds on October 12th.

Yours sympathetically,

Colonial Secretary.

Mrs. Minnie  Water St. West.

COPY.

FIELD SERVICE.

Q-64

**C.R.** Adaptation.  
Army Form B. 2090A.

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

REGIMENT OR CORPS } 1st Newfoundland Regt. Squadron, Troop, }  
Battery or Company } \_\_\_\_\_

Regimental No. ----- Rank 2nd Lieutenant

Surname O'Toole Christian Names F.

Died { Date 12/10/17 Place In the Field, France or Belgium

Cause of Death\* Died of wounds

Nature and Date of Report \_\_\_\_\_

By whom made O.C. Unit.

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

Burial { Place Not to hand. Date \_\_\_\_\_

By whom reported -----

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

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

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

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

Station and Date } G.H.Q. 3rd Echelon (Sd) L. Neary, 2nd Lt. for Major  
Signature of Officer in charge of Section } B.E.F. 15/10/17 Officer i/c No. 1 Infantry Sect.  
Adjutant-General's Office at the Base



C.R.

2nd Lieut. F. O'Toole.

Extract of "Daily Orders" Newfoundland Regiment part 2,  
G. H. Q., 3rd Echelon, B. E. F. dated October 20, 1917.  
Died of Wounds 12/10/17.

C.R. 0-64

P R O M O T I O N? 2nd Battalion.

Extract of Regimental Order dated November 14, 1916.

By Lieut. Col. Sir. W. E. Davidson, K. C. M. G., Officer Comdg.

-----  
#365 Sergeant F. O'Toole,

to be Second Lieutenant.

The above promotion to date from November 1, 1916.

MAR 4 1916

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 365, Sergeant Frank O'Toole, who was previously reported with gunshot wound in the knee at Wandsworth, Jan. 8th, is now fit for duty and was granted furlough Jan. 22.

This information has been received by mail.

Yours faithfully,

Mrs. Minnie Miller  
261 Water

Colonial Secretary.

Mrs O'Toole

Extract of Casualties received from Pay & Record Office,  
London, dated January 14<sup>th</sup> 1916.

#365 Sergt. F.O'Toole. ✓

Gunshot wound knee.

Admitted 3rd London General Hospital, Wandsworth 8th  
January 1916.

Extract of Casualties received from Pay & Record Office,  
London, dated January 14<sup>th</sup> 1916.

#365 Sergt. F.O'Toole. ✓

Gunshot wound knee.

Admitted 3rd London General Hospital, Wandsworth 8th  
January 1916.



M

January 11, 1916.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 365, Corporal Frank O'Toole, who was previously reported suffering from a severe gunshot wound in knee, is now reported as having been admitted to Third London General Hospital, Wandsworth, on January 10th.

Yours faithfully,

J. R. Bennett

Colonial Secretary.

365 O'Toole  
Mrs. Minnie M  
261 Water

C.R. 365

Extract of Casualty List received from P&RO. London  
dated Jan. 8th. 1916.

365 Sgt. F. O'Toole

1st. Nfld. Regiment..... GSW. Knee.

Extract from Casualties received from Pay & Records Office,  
London, dated January 18th, 1916.

#365 Pte. F.O'Toole. ✓

Synovitis Knee. Transferred to England per H.S. Re de'Italia  
ex St. Peters Camp Malta December 31, 1915.

C.R. 365



SICK & WOUNDED N.C.Os. & MEN OF THE MEDITERRANEAN EXPEDITIONARY FORCE.

LIST NO.H.4211.

NEW ZEALAND CONTINGENT.

iss, T.P.

V.D.G..... Trans.to Forrest Hos. ex St Georges  
Hos.12th Dec.15.  
Dysentery.Slt. .... Adm.St Georges Hos.Malta ex Ghain  
Tuffieha 13th Dec.15.

LIST NO.H.4211.

NEWFOUNDLAND CONTINGENT.

365 Sjt. O'Toole,

1/Newfd.

Pick Wd.Knee..... Trans.to Ghain Tuffieha C.C.ex St.Elmo  
Mil.Hos.Malta 11th Dec.15.



0 (11) ✓

December 7, 1915.

Dear Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 365, Corporal Frank O'Toole, received a severe gunshot wound in knee on November 14th.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Colonial Secretary.

201 O'Toole  
Mrs. Minnie Miller,  
261 Water St., West.



SICK AND WOUNDED N.C.Os AND MEN OF THE MEDITERRANEAN EXPEDITIONARY FORCE.

LIST NO.H.3973.

TERRITORIAL FORCE LONDON RECORD OFFICE.

2052	Sap. Smith, A.E.	...	..	Co. of Lond. Yeo.	...	Enteric, Conv.	Trans. to H.S. "Nevasa" for Eng. ex
1108	Pte. Clover, H.E.	....	1/10	Lond. R.	...	B. Wd. R. Flank.	St. Elmo Mil. H. Malta 29th Nov. 15.
1386	L/C. Haines, J.	..	1/11	Lond. R.	....	Aneurysm	-do-
					...	Femoral. Artery	-do-
1695	Pte. Beasley, H.H.	..	1/10	Lond. R.	..	G.S.W.R. Thigh.	Adm. St. Elmo Mil. Hos. Malta ex H.S.
1038	Pte. Gear, F.J.	..	1/11	Lond. R.	..	Septic Finger.	"Glenarth Castle" 3rd Dec. 15.
3279	Pte. Sandiford, J.E.	..	1/11	-do-	..	Shell Wd. L. Eye.	Adm. St Elmo Mil. Hos. ex H.S.
							"Karapara" Malta 4th Dec. 15.
							-do-

LIST NO.H.3973.

NEWFOUNDLAND CONTINGENT.

X 365 Sjt. O'Toole, F. .. .. 1/Newfoundland. .... Pick Wd. L. Knee. Adm. St Elmo Mil. Hos. Malta ex H.S. "Nevasa" 26th Nov. 15.

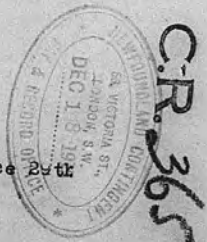
LIST NO.H.3973.

MISCELLANEOUS.

43 - Farrugia, G. .... Malt. Lab. Corps. .... Rheumatism.

Dismissed from Service 29th Nov. 15.

4538



C.R. 365

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3993, dated Dec. 20th. 1915.

365 Sgt. F. O'Toole

Newfoundland Contingent..... Pick Wd. L.Knee..... Adm<sup>d</sup> to  
Hospital in Malta ex H.S. "Nevasa" 26th. November 1915.

REGIMENTAL ORDER

BY LIEUT.-COL. SIR. W.E.DAVIDSON, K.C.M.G.  
OFFICER COMMANDING

The following promotion by Lt. Col. R.de H. Burton  
is approved:-

No. 365 Lance Corporal F. O'Toole, A Co.,  
to be Corporal, 27/7/15

C.R. 365

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3685, dated Dec. 7th. 1915.

365 Cpl. F. O'Toole.

1/Newfoundland .....G.S.W. R.Knee Severe.....Adm. 54 Cas.  
Clearing Station Suvla 14th. Nov. 1915.

C.R. 0-64

Extract from Nominal Roll of Sergeant Officers &  
S.C.O's, of the 1st Bn. R.I.C. (No date given)

365 F.O'Tools.

Promoted to I/Cpl. Apr.17th,1915.

C.R. 365  
0-64

Extract from Nominal Roll of "A" Co. 1st Bn. R.I.C.  
Regt. Embarked at Devonport for Active Service 20-9-15.

365 Cpl. F. O'Tools.

Disembarked Alexandria 21-9-15 Proceeded at Alessia,  
Cairo, same date, Embarked Alexandria for Gallipoli  
15-9-15.

C.R. 0-64

Extract from Nominal Roll Substantiated St. John's per S.S.

"Florinel" Oct 6, 1914.

365.0'Toole Frank.



C.R. 0-64

Frank O'Toole was attested for General Service  
with the NEWFOUNDLAND REGIMENT on ...Sept. 8th, 1914.

Regimental No. 365 was allotted to Pte Frank O'Toole

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

ole  
C.R. 0-64

P. V.R.O.

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

S. W. 1.  
Pay & Recds  
and Contingent,  
Victoria St, S.W.1.

121/0/30

...11765

November 7

The Secretary of the War  
Office is that you will  
be glad to return  
this as early as  
possible the above  
addressed state-  
ment to begin  
showing for the  
estate of late  
2nd Lt. [redacted] Coole,  
Newfoundland Regt., is  
being entered in  
the United Kingdom or  
in Newfoundland.

This Officer's Estate will  
be administered in Newfoundland,  
please.

Major,  
Chief Paymaster & O i/c Recds

FM/WF

6552

1944/7/

POSTER & OFFICER I/C RECORDS,  
NEWFOUNDLAND CONTINGENT,  
88, VICTORIA STREET,  
LONDON, S.W. 1.  
ENGLAND.

10th, November .....7

Messrs Cox's Shipping Agency, Ltd.,  
16, Charing Cross,  
S. W. 1.

Reference your letter Z/T/ESD, 6/11/17  
(2222). Effects of the late 2/Lt. F. O'Toole,  
1st. Newfoundland Regiment have been received, please.

Major  
Chief Paymaster & O i/c Re/

Z/T/ESD

16, Charing Cross.

London, 6th November 1917.  
S. W. 1.

Z/T/ESD.

Sir,

We have the honour to inform you that we are to-day forwarding to your care, one package No. OV.24656, returned from the Expeditionary Force in the name of:-

2nd. Lieut. F. O'TOOLE,  
1st. Newfoundland Regt.

We enclose Inventory herewith.

We have the honour to be, Sir,

Your obedient servants,

for COX'S SHIPPING AGENCY LIMITED,

Manager.

The Officer in Charge,  
Records,  
Newfoundland Contingent,  
58, Victoria Street, S.W.

BRANCH
<i>Ray</i>
ACTED UPON
BY <i>W. P. Records</i>
7. 11. 17

Ref. No.	6619
Rec'd.	NOV 1917
Ack'd.	<i>J.M.</i>
Ans'd.	
File No.	12024/7

*B. 28*

From

THE STANDING COMMITTEE OF ADJUSTMENT,  
General Headquarters,  
3rd Echelon,  
British Expeditionary Force.



To

Messrs. COX & Co's SHIPPING AGENCY, LTD.,  
16, Charing Cross,  
London, S.W.

The undermentioned effects of the late

2nd Lieut: F. O'Toole. 1st Newfoundland Regt.

are forwarded herewith, by registered post.

INVENTORY.

- + 1 Watch
- + 1 Whistle & lanyard
- + 1 Leather wallet
- + 1 Cheque book
- + 1 Advance book
- + 1 Cigarette case
- + 2 Rosaries
- + 3 Religious medallions
- + 1 Religious book
- + 1 Pocket knife
- + 2 Studs
- + 1 Identity disc
- + 1 Dollar note
- + 1 Pass book
- + 1 Photo & cards
- + 1 Certificate

*Bank of Montreal*

*L 28044-47*

*259-275*

26.10.17.

Please acknowledge receipt.

*124656*



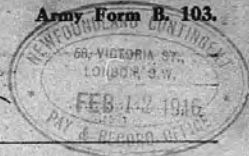
C.R. 0-64

Army Form B. 103.

## Casualty Form—Active Service.

Regiment or Corps *1st Newfoundland*Regimental No. *365* Rank *Spl.* Name *Er. O'Goole*Enlisted (a) *Oct 2/14* Terms of Service (a) *Duration of War* Service reckons from (a) *Oct 2/14*Date of promotion to } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on } \_\_\_\_\_  
present rank } to lance rank } roll of N.C.Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, N.F.L.D.		3/10/14.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
14/11/15.	54 C.C.S.	Admitted, Gunshot W. R. Knee	54th.C.C.S.	14/11/15.	E 927.
26/11/15.	Gomdt., Malta.	do PICK Wound	Hosp., Malta	26/11/15.	F 195.
16/1/16.	"R.deItalia"	Invalided to England	H.S."Regina de Italia"	31/12/15.	B 855.

*W. J. Jackson*  
Captain

Officer i/o Records 11 & 12 Dists.,  
3rd Echelon, G.H.Q., M.E.F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

The inventory of Kit the  
 property of the LATE <sup>MR</sup> F. J. O'Keefe P.  
 15th <sup>REGT</sup> <sup>INF</sup> <sup>BRITISH</sup> <sup>ARMY</sup> <sup>RETIRED</sup>  
 UNLAND Regt who died  
 PCS 12-10-14  
 DISPATCHED to Mess<sup>rs</sup> Cox  
 SHIPPING AGENCY  
 16 CHARING CROSS  
 LONDON SW

ARTICLES	NUMBER
✓ TUNIC SD DAMAGED	ONE
✓ BOOTS ANKLE 13 BLACK PR	ONE
✓ PUTTIES	PRs ONE
✓ KHAKI TIE	ONE

M.P.  
 9.2.0.  
 NOV 12 1917

probably  
 LIEUT COL  
 OCH C.C.F.

10-11-11

NEW HI. O'Jade 218

10 Thompson

1 small sack story

0627

I

we ER light

MP  
Received  
12/11/17

*[Handwritten signature]*



10-11-17

NEW 111 - O'Joule 2/1 5. 1 Newfoundland Regt 1 Small sack D2214

see BR. 69670

2114

Received 12/19/17  
M.P.

*[Handwritten signature]*

# FIELD SERVICE.

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

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
12970 1539/153  
NOV 20 21 DEC 1917  
REFOUNDARY CONTINGENT  
25 VICTORIA ST.  
LONDON, S.W.  
23 OCT 1917  
PAY & REGD OFFICE

Newfoundland.

Squadron,  
Troop, Battery  
or Company

Lieutenant.

Branch Report of Unit.

Date of Death In the Field, 12/10/17.

Place of Hospital In the Field. France or Belgium.

Cause of Death Died of Wounds.

Place of Burial Not to hand.

Remarks Not yet Received.

When a report is received from the front or hospital, should be reported, and if any will is found it should be at once forwarded to the War Office.

When a report is received as to verbal expressions by a deceased Officer or his estate should be reported to the War Office as soon as possible.

Office in charge  
Lieut-General's  
Base.

1/1/17  
End. Lt. for Mjr  
1 Infantry Section.

S.N.F. 15/10/17

FIELD SERVICE.

Dear Sir,

I have the pleasure to

acknowledge the receipt of

your letter of the 14th

inst. in relation to

the matter mentioned

in your letter of the 10th

inst. and in reply to

advise you that the

same has been referred

to the appropriate

authorities for their

consideration and

they will be kept

advised of any

development in the

matter. I am, Sir,

Yours faithfully,

[Signature]

[Name]

[Title]

[Address]

[City]

[State]

[Country]

[Postcode]

[Phone Number]

[Fax Number]

[E-mail Address]

[Website]

[Social Media]

[Other Contact Info]

[Additional Info]

[Closing Remarks]

[Final Sign-off]

[Page Number]

[Date]

[Time]

[Location]

[Weather]

[Mood]

[Thoughts]

[Final Note]

E. R.

1971-72

NO

10

10





Total  
Balance

157 57

187 72

187 72

187 72



. O'Toole, F.

Action, 12/10/17

ending  
10/17

14 9 5

4 1

1 11



LONDON, S.W.  
 JUL 18 1917  
 PAY OFFICE

FOR USE IN  
 PAY OFFICE

*French Motor Battery*

Monthly claim for

(a) To enable payment of Engineer Pay of Officers acting as Agents, and for Charge Pay of Medical Officers, this return should be made on the first day of the month following the month for which the claim is made. If the Agent is not desired, the Agent to whom the claim is made should be named.

(b) A.F.O. 1679 will continue to apply to Agents, and for Charge Pay of Medical Officers.

(c) Broken periods should be explained in the margin of the form, and should be shown from Staff 24th.

(d) Where Command Pay depends on annual increments, the increments should be shown.

(e) No claim should be made beyond the date on which an Officer leaves the unit, his destination or disposal being shown in the Casualty Column; all particulars regarding leave, casualties, dates of joining, embarkation and disembarkation, etc., will also be shown in this column.

(f) Field Allowance in the case of Officers coming to France for the first time is issuable from the 92nd day reckoning from the date of embarkation. The 91 days' advance is issuable by the Paymaster of the Command in which the Officer was serving prior to embarkation.

(g) Separate forms must be rendered for attached Officers who belong to a different Arm of the Service. Where they belong to the same Arm as the Unit rendering the claim their names may be included in the claim but their permanent Units must in all cases be shown. Separate claims must also be rendered for Warrant Officers.

Rank	Name	How and when Payment is to be made	Appointments	Rank	Name	Admissible	
						From	To
			Officer Commanding				
			Senior Major or 2nd in Command				
			Adjutant				
			Company Commander	2.			
			Islands only	3.			
			Transport Officer				

*Sec Lt. J. O. Taylor*  
*88th T.M.B.*  
*12th New*



No. \_\_\_\_\_

Date Jan 22<sup>nd</sup> 1916

(1) To the Officer i/c Records,

58 Victoria Street  
S.W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent  
A42 (Station).

(3) The Paymaster,

58 Victoria Street  
S.W. (Station).

Regimental No. 365

Rank and Name Sgt O'Toole

Regiment or Corps 1<sup>st</sup> Newfoundland

has been granted a furlough from Jan 22<sup>nd</sup> to Jan 31<sup>st</sup>

His address while on leave will be:-  
Waverley Hotel  
58 Victoria Street Edinburgh  
Westminster S.W.

*This man has been furnished with a warrant to (Victoria) (Edinburgh) (London) (S.W.)*

General Hospital,  
S.W. (Station).

mentioned above and one copy



41

Four copies to be made and sent to the office.

U.S. G.P.O. 1950. 10,000 copies. H.S. 48-715-15

Strook, I Lieut 064

Ray Sept.



Army Form W. 2016.

No. \_\_\_\_\_ Date 22nd Jan. 1916

(1) To the Officer i/c Records,

58, Victoria Street,

S.W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent,

Ayr. (Station).

(3) The Paymaster,

58, Victoria Street,

S.W. (Station).

Regimental No. 365

Rank and Name Sgt. O'Toole,

Regiment or Corps 1st Newfoundland.

has been granted a furlough from 22nd Jan. to 31st Jan.

His address while on leave will be :-

58, Victoria Street,

Westminster, S.W.

This man has been furnished with a warrant to Victoria and given an advance of £1 (one pound).

I consider he is fit for \* <sup>Duty.</sup> <sub>Light duty.</sub>

A. Hope Gosse, Capt. R.A.M.C.T.,

Registrar,

Officer in charge 3rd Ldn. General Hospital,

Wandsworth, S.W. (Station).

\* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.





CERTIFICATE?

Information of Separation Allowance Department.

Name and regimental number  
of soldier in respect of whom  
Separation Allowance is claimed)

*Privat. Frank O'Keefe*

2. Name and age of said soldier's )  
*step* father or other relative.

*45*

3. Is said <sup>*step*</sup> father or other relative a chronic )  
invalid and totally incapacita- )  
ted. )

*acute pleurisy & effusion with  
with increase of fluid July 1918 -  
end of 1918. Parotitis & abscess  
during April 17 & 18, May 1919,  
contracted influenza with pneumonia, was confined  
mostly to the house.*

4. Of what nature is disability? )

*Chronic pleurisy*

5. From what date has this total  
incapacity been existent? )

*not totally incapacitated  
except for a few months*

6. How long is total incapacity )  
likely to continue and what will )  
be the effect on earning power. )

*about 3 months  
uncertain*

7. If not totally incapacitated by )  
what per cent in your opinion is )  
capacity for work reduced and )  
from what date. )

*total incapacity for next  
three months uncertain  
afterwards*

8. Are you the regular attending  
physician? )

*No.*

9. Relationship to soldier of  
applicant? )

*step. father*

correct,

I certify that the above statements are

*St. John's* Place,

*Feb 12 '19* Date.

*W. J. [Signature]*

Physician.



only for Special Reserve Recruits, and for Special Reservists enlisting into

# MEDICAL HISTORY

OF *Joseph* Christian Name *Frank*

Table 1.—GENERAL TABLE.

Birthplace	Parish	SPECIAL RESERVE.		REGULAR ARMY.			
		County	County	County	County		
Examined	.....	on	day of	191	on	day of	191
		at			at		
Declared Age	.....	22 years		days	years		days
Trade or Occupation	.....	Checker					
Height	.....	5	feet	5	inches	feet	inches
Weight	.....	140		lbs.	lbs.		
Chest Measurement	Girth when fully expanded... Range of expansion... ..			inches	inches	inches	inches
				inches	inches	inches	inches
Physical Development	.....						
Vaccination Marks	Arm	Right	Left	Right	Left		
	Number						
When Vaccinated	.....						
Vision	.....	R. E.—V==			R. E.—V==		
		L. E.—V==			L. E.—V==		
(a) Marks indicating congenital peculiarities or previous disease	.....	(a)			(a)		
		(b)			(b)		
(b) Slight defects but not sufficient to cause rejection	.....						
Approved by (Signature)	.....						
(Rank)	.....						
				Medical Officer.		Medical Officer.	
Enlisted	.....	at	St John. N.F.S.D.		at		
		on	day of	191	on	day of	191
Joined on Enlistment	.....	Corps.		Regtl. No.	Corps.		Regtl. No.
		Newfoundland		365			
Transferred to	.....						
Became non-effective by	.....	on	day of	191	on	day of	191
(Signature)	.....						
(Rank)	.....						

Table II.—Only for admissions to hospital

Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	bearing admission of treatment
	Day	Month	Year	Day	Month	Year		
3rd SCOTTISH GENERAL	19	6	16.	4	7	16.	Uterus left ovary 16. 175.	

For full Medical Record of  
 on B. 175.  
 to the

in the case of Warrant Officers treated in quarters

the cause, nature or treatment of the case likely to be of interest or of future use. In cases of readmissions to hospital will be shown. The subsequent progress, including particulars of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer:

Result of ulceration in childhood.  
2/60 l. 6/6 u. Glasses unnecessary.

Alvin K. Quincy  
Major, R.A.M.C.

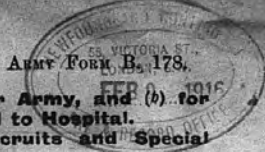
**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.**

Date	Brief Details, and Signature
	<i>T. V.</i>
<i>14. 8. 15</i>	<i>Fit for Foreign Service.</i>

**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

Temporary



To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname O' Toole Christian Name F.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191 ,  
at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height ... feet \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded \_\_\_\_\_ inches.  
Range of Expansion \_\_\_\_\_ inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... \_\_\_\_\_ Right \_\_\_\_\_ Left \_\_\_\_\_  
Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

Medical Officer.

Enlisted ... { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Joined on Enlistment ...	Corps.	Regtl. No.
	<u>1st Newfoundland</u>	<u>365</u>
Transferred to ...		

Became non-effective by ...  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_









SEPARATION ALLOWANCE

Miller, Mennie (mother)  
On account of Approve

On account of Franks O'Bole No. .... Rank. Lieut

Decision... Approved

Date July 24/1919  
A. E. Wickman  
W. F. Russell Lieut. Col.  
M. Bowler Capt.

Instructions.....

Allotment of 1.44.00 per week payable to Mrs. J. Miller  
his mother from 3/10/14 to still current  
Discontinued on account of

..... L. H. St. .....

36<sup>5</sup> Enlisted Sept 8/1914  
Sergt 1-11-15  
Lieut Nov 1/16

REGIMENT.

MOTHER.

(Separation Allowance Branch)

STATUTORY DECLARATION is to be filled in correctly in  
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, Stipen-  
diary 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. Regt. No.  
*Frank O'Goale Lieut. Royal Nfld. Regt.*
2. Age of soldier. ~~25~~ 25 Married or Single. *Single*
3. Name in full of mother. Age. Occupation. Permanent Address.  
*Minnie Miller 44 Charwoman 261 Water St. St. John's*
4. Give name of your husband. Age. Occupation Where Employed.  
*John Miller 45 No occupation - Not employed sick since 1914*
5. If your husband is not supporting you state the reason. *Husband sick and delicate. worked only a month out of each year during 1916 to 1918*
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.) *Chronic Consumption*
7. If you are a widow, state date and place of death of your husband. *First husband died at St. John's in 1894.*
8. Have you married again since death of above mentioned husband? *Married again to present husband in 1906.*
9. Names of other children. Address in full. Age. Occupation Married or Single.  
*Other children.*

12. <sup>215</sup> *nothing at present*  
and source of any other *No other income*
13. State value of real property belonging to you and your husband. *No real property*
14. State value of personal property belonging to you and your husband. *\$150.00*
15. If husband is dead state value of real and personal property left by him. *nothing left by first husband*
16. Actual amount contributed by soldier during the year prior to enlistment. *About \$500.00*
17. Was this amount contributed weekly or monthly. *Weekly*
18. Did this amount include payment of son's board, etc. *Yes*
19. State your son's trade or occupation prior to enlistment. *Checker*
20. State amount of his wages per week. *\$12.00 per week*
21. State name and address of his last employer. *Browning Bros.  
111 1/2 John St.*
22. State amount of monthly support from son since enlistment. *\$16.00 per month*
23. State amount of allotment received by you from son since enlistment. *About \$800.00*
24. State from what date did you receive allotment? *Nov. 7/14.*
25. Actual amount contributed by other children. *Weekly Monthly.  
No other children.*
26. Are there any children in the employ of your husband?



with husband

is a previous claim for Allowance. If not, why? Particulars.

recently ~~Partially~~ granted

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

No.

31. 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?

—

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... *Winnia Miller*

Place of Residence... *261 Water St. West, St. John's, Nfld.*

Declared and subscribed before me at... *St. John's, Newfoundland*

this... *thirteenth* day of... *February* 191...

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. *Cyril J. Caplan*

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... *H. T. Pennington*

Signature of member of the Patriotic Fund Committee.

*Am Bourne*

RECEIVED BY PATRIOTIC FUND

ACATE.

Separation Allowance Department.

1. Name and regimental number of soldier in respect of whom separation allowance is claimed ) *Line Rank 0700*

2. Name and age of said soldier's father or other relative. ) *45*

3. Is said father or other relative a chronic invalid and totally incapacitated. ) *Chronic arthritis but not totally incapacitated*

4. Of what nature is disability? ) *Chronic arthritis*

5. From what date has this total incapacity been existent? ) *since check of pension 1914*

6. How long is total incapacity likely to continue and what will be the effect on earning power. ) *total incapacity permanent. total incapacity covered month of 1915, 1916, 1917.*

7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced and from what date. ) *50%*

8. Are you the regular attending physician? ) *Yes.*

9. Relationship to soldier of applicant? ) *Step. son*

I certify that the above statements are correct.

*D. J. ...* Place,

*Aug 21 1919* Date.

*M. J. ...*  
Physician.



August 22, 1919

Mrs. Minnie Miller,  
#261 Water St West,  
CITY.

Dear Madam:-

Referring to your application for Separation Allowance, I beg to state that same has been granted to you, and I enclose cheque for Nine hundred and fifty dollars (\$950.00).

Yours truly,

Captain & Paymaster.

Rank... 2<sup>nd</sup> Lieut Name... Outerbridge

OFFICER'S DECLARATION PAPER.

1st. Newfoundland Regiment.

- 1. (a) What is your surname ? ... Outerbridge
- (b) What are your Christian names ? ... Norman Aubrey
- 2. (a) Where were you born ? (State place and Country) ... St John's N.F.L.D.
- (b) What is your present address ? ... do
- 3. What is the date of your birth ? ... April 4. 1884
- 4. What is (a) the name of your next-of-kin ? ... Mary Evaleen Outerbridge
- (b) The address of your next-of-kin ? ... 26 Monkstown Road St John's
- (c) The relationship of your next-of-kin ? ... Wife
- 5. What is your profession or occupation ? ... Business
- 6. What is your religion ? ... Church of England
- 7. Are you willing to be vaccinated or re-vaccinated and inoculated ? ... Yes
- 8. State particulars of any former Military Service ... Nil

The undersigned hereby declares that the above answers made by him to the above questions are true.

H. A. Outerbridge (Signature of Officer)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him for the Newfoundland Regiment.

Date.....

Place.....

Medical Officer.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$81.<sup>02</sup>/<sub>100</sub>

Apr. 14<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Eighty One <sup>02</sup>/<sub>100</sub> Dollars.  
on account of Pay Estate  
balance

Ch. No.	5347	Initials	ent
Pay Ledger	310	Initials	lehl
Gen. Ledger	61	Initials	KA

Regtl. No. *ZB*

Rank *Co. 1st Lt.*

No. \_\_\_\_\_

Rank

2/Lt.

Name

N. O'Poole.

Minnie Miller

261 Water St. West.

City

April 9th. 1918.

Mrs Minnie Miller,  
261 Water Street West,  
City.

Dear Madam,-

I enclose herewith cheque for \$81.02, being the balance of the estate of the late 2/Lieut. Frank O'Toole, payable to you as Administratrix. I also Letters of Administration.

Yours faithfully,

Capt. & Paymaster &  
Officer i/c Records.

Enclosures 2.  
JMH/JH.

IM-

April 29, 1920

From: Paymaster & O i/c Records

To : Board of Pension Commissioners.

Re Lieut. F.M.O'Toolis.

The amount paid in continuance of the above man's  
allotment is \$360.00

Paymaster Major





0-64

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

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

Examination of *Oldest Pearl James* 184.  
aged 22. conducted at *Ed B Armon*  
Date: *29/8/14.* Recruiting Officer:

NO. OF TEST	FINDING
1	<i>no</i>
2	<i>no</i>
3	<i>no</i>
4	<i>no</i>
5	<i>no</i>
6	<i>no</i>
7	<i>yes</i>
8	<i>yes</i>
9	<i>no</i>
10	<del><i>Refused to give answers</i></del> <i>n</i>
11	<i>n</i>
12	<i>n</i>
13	<i>n</i>
14	<i>n</i>
15	<i>n</i>
16	<i>n</i>
17	<i>n</i>
18	<i>n</i>
19	<i>In R. - not test n</i>
20	<i>n</i>
21	<i>n</i>
22	<i>n</i>
23	<i>n</i>
24	<i>n</i>
25	<i>n</i>
26	<i>n</i>
27	<i>n</i>
28	<i>n</i>
29	<i>n</i>
30	<i>n</i>
31	<i>n</i>
32	<i>n</i>
33	<i>yes: 10 yrs ago</i>
34	<i>5' 5"</i>
35	<i>135 lbs.</i>
36	<i>33 - 36 3/4</i>
37	<i>\$500.00 apr.</i>
38	<i>mother: Mrs. James O. James, 761 Wabash St. West.</i>
39	<i>mother:</i>

*O.K.*  
*J.A.M.*

*mother's age*  
*80*

Signature of *315* Examiner: *Clayton Stephenson M.D.*