

FIRST NEWFOUNDLAND REGIMENT

3421

ATTESTATION OF

No. 322X Name Osburn Rubin Corps Co of B

Questions to be put to the Recruit before Enlistment.

- | | |
|---|--|
| <p>1. What is your name?</p> <p>2. What is your full Address?</p> <p>3. Are you a British Subject?</p> <p>4. What is your age?</p> <p>5. What is your Trade or Calling?</p> <p>6. Are you Married?</p> <p>7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?</p> <p>8. Are you willing to be vaccinated or re-vaccinated?</p> <p>9. Are you willing to be enlisted for General Service?</p> <p>10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?....</p> <p>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?</p> | <p>1. <u>Rubin Osburn</u></p> <p>2. <u>Grand Bank Fortune Bay</u></p> <p>3. <u>Yes</u></p> <p>4. <u>19</u> Years <u>7</u> Months</p> <p>5. <u>fisherman</u></p> <p>6. <u>no</u></p> <p>7. <u>no</u></p> <p>8. <u>Yes</u></p> <p>9. <u>Yes</u></p> <p>10. { Name</p> <p style="margin-left: 100px;">Corps</p> <p>11. <u>Yes</u></p> |
|---|--|

I, Rubin Osburn 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.

Rubin Osburn SIGNATURE OF RECRUIT.

Harold Mitchell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Rubin Osburn 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 answered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at

on this 15 day of January 1917

James Strong
Signature of Attesting Officer

†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

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:—(Name).....re-enlisted in the (Regiment)..... on the 11th.....

Osburn

Parent age 19 years 2 months. Height 5 feet 4 inches

Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 33-37 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Osburne
Grand Bank | 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 Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>15-1-17</u>									
Joined at <u>St John's</u> on <u>January 15th 17</u>									
<u>Embarked St John's train to Halifax N.S. 17th 17</u>									
<u>Disembarked Antwerp 3-6-17</u>									
<u>With Battalion 30-12-17</u>									
<u>Transferred to 1st Bn. "Commissaries" 11-4-1918</u>									
<u>Joined base Dept. River 31-4-1918</u>									
<u>Wounded & Missing 29-9-1918</u>									
<u>Died of Wound</u>									
<u>Buried Bin Cross Road Cemetery 1 3/4 miles East of Ypres (Report Letter 1186-E)</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>29-9-18</u> (date of discharge) <u>1</u> years <u>258</u> days									

C.R. 3421

Extract from Nominal Roll, embarked Sf. John's per S.S.F.lorizel
17/3/17

#3421 Pre. R. OSBORNE

Used only for Special Reserve Recruits, and for Special Reserve Army.

MEDICAL HISTORY



Surname Albion OF Christian Name _____

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 15. day of January 1917 at St John's.		on _____ day of _____ 191_____	
Declared Age	19 years 2 months		_____ years _____ days	
Trade or Occupation	fisherman			
Height	5 feet 4 inches		_____ feet _____ inches	
Weight	132 lbs.		_____ lbs.	
Chest Measurement	Grith when fully expanded 37 inches		_____ inches	
	Range of Expansion 4 inches		_____ inches	
Physical Development				
Vaccination Marks	Arm			
	Number	1 scar.		
When Vaccinated				
Vision	R.E.—V=	4/6/9	R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)	
Approved by (Signature)	<i>J.W. Burden</i>			
(Rank)	Lieut			
	Medical Officer.		Medical Officer.	
Enlisted	at St John's. on 15. day of January 1917		at _____ on _____ day of _____ 191_____	
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.	3/1st N 22d Regt. 3421	Regtl. No.	
Transferred to				
Became non-effective by	on _____ day of _____ 191_____		on _____ day of _____ 191_____	
(Signature)				
(Rank)				

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

Date	Brief Details, and Signature
18-1-17.	Vacc. <i>W.B.</i>
24-1-17	
8-2-17.	<u>TAB</u> <i>W.B.</i>
12-3-17	<u>3</u>

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

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

CR 3421

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 28th 1918

To John Osmond, Grand Bank

Regret to inform you that Record Office, London, officially reports No. 3421, Private Reuben Osmond wounded and missing ^{Sept} Oct. 29th no further particulars given.

Upon receipt of further information I shall immediately wire you.

JR. Bennett

Chge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 3421

Extract from telegram to Synoptical London, Dec. 4th
1918.

Enquire if any further particulars concerning
3421 Osmond reported wounded & missing Sept. 29th.

C.R. 3421

Extract from Casualties from Pay & Record Office, London
Dated March 25th 1919.

.....

PREVIOUSLY REPORTED WOUNDED AND MISSING NOW REPORTED
DIED OF WOUNDS.

3421, Etc. R. Osburn.

NEWFOUNDLAND POSTAL TELEGRAPHS.

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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 Dec. 19th, 1918
To Church of England Minister or School Teacher, Grand Bank

Regret to inform you that message received from Record Office, London, to-day states No. 3421, Private Reuben Osmond previously reported wounded and missing Sept. 29th, 1918 now reported to have died of wounds on or about Sept. 28th, 1918 authority Burial report. Please inform next of kin, John Osmond

J.R. Bennett

Minister of Militia.

FOR TYPEWRITER

C.R. 3421

FIELD SERVICE.

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 } Royal Newfoundland Squadron, Troop, }
OR CORPS } Battery or Company }

Regimental No. 3421 Rank Private

Surname Osbourne. Christian Names R.

Died { Date on or after 28-9-18. Place France or Belgium.

Cause of Death* Died of Wounds.

Nature and Date of Report Burial report, Ref. No., 60051, d/d4-10-18.

By whom made O.C., R.G.A.

* 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.

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) Not received (b) in Small Book (if at Base) not received
(c) as a separate document none 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.; 5rd. Echelon, } Signature of Officer in charge of Section } W.H.H. } Capt. for Lt. Col.
Date } 13.12.18. } Adjutant-General's Office at the Base } 1/c No. 1 Infantry Section.

Army Form B. 103.

Regimental Number *2421*

Casualty Form - Active Service.

Regiment or Corps *2nd New Zealand*
 Rank *Plt* Surname *John O'Shane* Christian Name *Ruben*
 Religion *C of E* Age on Enlistment *19* years *2* months
 Enlisted (a) *St John's* Terms of Service (a) *Quarterm* Service reckons from (a) *15 1 17*
 Date of promotion to present rank Date of appointment to lance rank
 Extended (.....) Re-engaged (.....) Qualification (b)
 Occupation *Fisherman* or Corps Trade and Rate
 Signature of Officer *B Howorthy 2nd Lieut*

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
			Embarked <i>Folkestone</i>	<i>3.6.17</i>	
			Disembarked <i>Boulogne</i>	<i>3.6.17</i>	
			Joined Battalion	<i>19 JUN 17</i>	<i>B 2 13</i>
	<i>76 3a</i>	<i>Ad Transport train</i>	<i>1st class</i>	<i>1/4/18</i>	<i>80167 13/4/18</i>
	<i>10 " "</i>	<i>Camp "La Tourelles"</i>		<i>12/4/18</i>	<i>W 3034 15/4/18</i>
	<i>10 " "</i>	<i>1st Lt</i>		<i>15/4/18</i>	<i>W 3034 15/4/18</i>
	<i>12ca</i>	<i>1st Lt</i>	<i>1st class</i>	<i>21/4/18</i>	<i>1000</i>
		<i>1st Lt</i>	<i>1st class</i>	<i>15 4 18</i>	<i>HA 22323</i>
		<i>1st Lt</i>	<i>1st class</i>	<i>29/4/18</i>	<i>223</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.
 W. 13863—M1477 1000m 1/17 (27612) SP & Co, Ltd. Forms B./103/4 E./354. (P.T.O.)

Date	Report From whom received	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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A. 36, or other official documents.
4/27/18	C.R.G.A. No 3518	Buried & died	Wounded	28/9/18	Ref No. 60051.
		write report relative to 30/1/18	Capt. J. L. Cal.		
			No. 1. Capt. Section.		

to 191 .

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 3421

Rank Pte

Name OSBORNE R.

Died (a) Intestate

at France

on the 25th of Sept. 1918 .

Deserted at

on the of 191 .

I Certify to the correctness of above in every particular.

{ Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[Form 1.]

Date	Dr.				Cr.			
		£	s.	d.		£	s.	d.
	Balance Dr. last month				Balance Cr. last month ... 25/9/18	9	0	4
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at			
	"				from to			
	"				Rt allowance			
	"							
	Consolidated stoppage							
	Balance due by the Paymaster	9	0	4	Balance due to the Paymaster			
		£	9	0 . 4		£	9	0 . 4

This account is in accordance with the advice received at the Pay & Record Office to and may therefore be subject to amendment if and as may be required by subsequent advice.

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

Dated at this day of 191 .

Paymaster

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B, 2090 or Army Form O, 1016.
(b) Words in Italics to be struck out when there is no debtor balance.

C 3621

File 100

Osbourne
John Oswald Esq.,
Grand Bank.

Dear Mr. Oswald: *Osbourne*

It is my regrettable duty to have to forward to you one envelope containing effects which belonged to your late son No. 5421 Pte. Reuben Oswald, of the Royal Newfoundland Regiment.

Herewith enclosed you will find receipt, will you kindly receipt same and return at your earliest convenience.

Assuring you of my deepest sympathy in your bereavement and in the added sorrow that the receipt of these effects must entail.

Yours sincerely,

[Signature]
Lieut.
Casualty Officer.

C.R. 3421

RECEIVED FROM THE DEPARTMENT OF MILITIA.

ONE ENVELOPE CONTAINING EFFECTS OF THE LATE

NO. ~~414~~ PTE. REUBEN OSMOND. *Osbourne*

3421

SIGNED

John Osbourne

DATE

10th 1919

C.R. 342

Sept. 2nd 1919.

John Osbourne Esq.,
Grand Bank.

Dear Sir:

I am directed by the Minister of Militia to forward you the following information, with reference to the gravesite of your late son, No. 3421 Pte. R. Osbourne, - received from the Pay & Record Office, London recently. It reads as follows:-

"I beg to inform you that for various reasons it has been found necessary to exhume the bodies in certain areas, and to re-inter them in new sites, and the body of this soldier has accordingly been removed and buried in the cemetery on the attached location sheet.

The new grave has been duly marked with a cross bearing all particulars and registered in this office.

The removal has been undertaken with every measure of care and reverence, and the re-burial conducted by a Military Chaplain."

The Grave site in question is:

Burr Cross Road Cemetery, 1½ miles East of Ipswich.
(Report 21146/1919 111-642.)

I beg to remain,

Yours sincerely,

Official Signature

C.R. 3421

August 6th, 1920

Mr. John Osborne,
Grand Bank.

Dear Sir:-

I have to acknowledge receipt of your letter of 26th July relative to your deceased son, No. 3421, Pte. Osborne, and to state with reference to your enquiries therein that a photograph of his grave will be forwarded to you through this Department as soon as it is received. The only effects recovered belonging to Pte. Osborne were those forwarded to you on 13th Feb., 1918 which you duly acknowledged.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.

June 13, 1919

Mr. John Osborne,
GRAND BANK,
NY1d.

Dear Sir:

I enclose herewith cheque
for \$44.88, balance of estate of late Pte.
R. Osborne, due you as Administrator.

I am also enclosing Letters
of Administration.

Yours truly
[Handwritten Signature]

Permeator & S. I.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 44 ⁸⁸/₁₀₀

June
~~May 31~~ 19 19

Received from the First Newfoundland Regiment
the sum of Forty four ⁸⁸/₁₀₀ Dollars.
on account of Pay. Estab
balance

Ch. No. 2267	Initials. E.C.
Pay Ledger	Initials.
Gen. Ledger	Initials.

Regtl. No. _____ R.C.

R.C.
21

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

NO STAMP REQUIRED

3

Dept. of Militia,
St. John's.

Newfoundland 1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. *3421* Rank *Private*
Name *Robert Osborne*
Royal Newfoundland Regt.



Mr. John Osborne (Sgd.)

Relationship.
Address *Grand Bank Newfoundland*

OCT 11 1921.

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

Mr. John Osburn (Father)

in respect of his service as No. 3421 Rank Pte.

Name Reuben Osburn Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received _____

Signature John C. Horne

Date November 2nd

Address Grand Bank

[P.T.O.]

Receipt for Army Book 64

2/

No. 3451 Name L Osbourne

To Certify that I have received the AB 64 of the above named soldier.

Name Mr. John Osbourne

Date July 26th 1920

Place Grand Bank N. F. D.

N.B. For completion and return to the Department of Militia insert in corner of envelope "AB 64"

MS

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B

Number of Sheets

Signature of O. C. Company

Maxley

Regiment of *1st Newfoundland*

Good Conduct Badges, Service pay or proficiency pay

Forms R 121 34

Regimental Number and Name

No. *2421*
 Joined *Coburne R.*
 Date
 Date
 Date
 Date

Enlistment

Age on *19* years *20* months
 Place and Date of Enlistment *St. Johns*
 Date *15.1.17*
 Period of { with (hours, *259* years, *365* years, with Reserve

Trade

Reckerman
 Religion
 Place of Birth *C. I. E.*

Place Date of Offence Rank Cases of Drunkenness

OFFENCE

Names of Witnesses

Punishment awarded

Date of award or of order (specify if with trial

By whom awarded

REMARKS

Awarded 1st Newfoundland 29.7.18

To be carried over

NEWFOUNDLAND CONSTABULARY

P.

**ST. JOHN'S,
NEWFOUNDLAND**

August 24th., 1936.

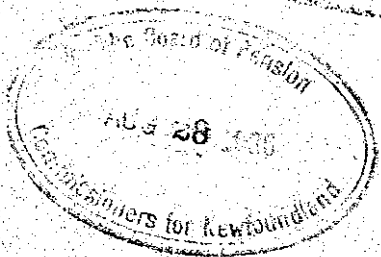
J. A. McGrath, Esq.,
Clerk, War Pensions.

Dear Sir:-

In compliance with your request of the 13th. Instant I directed Constable E. Barnes, Grand Bank, to make enquiries relative to the circumstances of Mr. John Osbourne of that place, and I now enclose his report for your information.

Yours very truly,

P. J. O'Brien
Chief of Police.



November 6th, 1937

Relieving Officer,
Grand Bank.

Dear Sir,

Mr. John Osbourne of Grand Bank
has made application for pension in respect of his
son, Reuben who was killed during the Great War.
Mr. Osbourne states that his son, Thomas, is a cripple.

I enclose herewith a medical certificate
with the request that you would please have this complet-
ed by Mr. Osbourne in respect of this boy Thomas. If
Mr. Osbourne is unable to pay for this examination,
would you please arrange to have it carried out by the
Medical Health Officer as soon as possible and return
the certificate to this office.

Yours very truly,

J. A. McGrath,
Clerk, War Pensions.

JM/JM

Board of Pension Commissioners for New York State

REPORT OF INQUIRY OFFICER

Pension No: 0-5

Name of Claimant: Mr. John Osborne

Address: Grand Bank

Amount of War Pension: \$18.60 per month for two years after from was killed have
Rec nothing since 1920

PARTICULARS OF DECEASED: Name: Ruben Osborne No: 3421 Regt: Nfld

Const Edwin Barnes
 Name of Inquiry Officer.

Grand Bank
 Address of Inquiry Officer.

1. IDENTITY: Are you satisfied as to the identity of the claimant? 1. yes
 How did you verify this? By investigation made
2. Age of claimant: 2. 72 years
3. MARITAL STATUS: 3. Single
 (a) single; (b) married; (c) widower;
 (d) widow; (e) separated.
 If re-married, give date: Never re-married
4. Occupation— 4. Fisherman
 Monthly or weekly earnings— None
5. Average monthly or weekly earnings during last 12 months 5. Have not earned anything
6. Income from all other sources during last 12 months 6. None
 Rentals, bonds, investments, pension, boarders, etc. None
7. Value of Real Estate 7. My house & land is worth about \$
8. Amount of Municipal Taxes yearly 8. None
9. Is the claimant's (wife) (husband) living? 9. No
10. Occupation of wife/husband: 10. —
11. Monthly or weekly earnings of wife/husband: 11. —

(Over)

12. Does he or she claim to be wholly or partially incapable of self-support? *12. Wholly self-support*

13. Age or infirmity: *13. Through age & infirmity*

14. If claimant is widow, give date of husband's death *14. —*

15. Value of property of deceased, including Life Insurance; house and farm, farming equipment, live stock, etc.: *15. House & land about \$300.00*

16. Income from above: *16. None*

17. PARTICULARS OF ALL LIVING CHILDREN:

Name:	Sex:	Date of Birth:	If married, date of marriage must be given
<i>John Wilson Osbourne</i>	<i>Male</i>	<i>Jan 28th 1900</i>	<i>married in 1929</i>
<i>Fred Osbourne</i>	<i>"</i>	<i>June 10 1902</i>	<i>married in 1934</i>
<i>Thomas Osbourne</i>	<i>"</i>	<i>Aug 28 1908</i>	<i>Single crippled in two hips</i>

18. Monthly earnings of daughter(s): *18. None*

19. Monthly contributions of son(s): *19. about \$2.00 per month from J. Wilson*

20. Benefits such as free board or lodgings provided by any of the children: *20. Living in my own house*

Signature of Claimant.....

Date.....

Signature of Inquiry Officer:.....

ADDITIONAL INFORMATION:

Station Grand Bank

August 1936

Sir

I respectfully report for your information re John O'Shaughnessy of Grand Bank. This man is unable to work through infirmity & I find from investigations made he have no means of support only what his oldest son Wilson help him. This son is married & have a family to support & living in a house of his own. The other two sons live with their father but is not able to support him. The youngest son is crippled in both hips the other is married & cannot support himself. I think this man is urgently in need of the pension ask for if there was any forthcoming

Edwin Barnes

Constable

P. O'Neill Esq. Chief of Police