

Reinforcement: 25th.

HISTORY-SHEET.

[E.F. Form No. 3A.]

8 th Coy 3 Bn. Otago Reg D Coy	Unit.	Rank.	Surname.	Christian Name.	No.
		Pte. Pte.	McNiece,	John Alexander.	45107.

Occupation: Police Constable. Religion: Incland Presby. Last New Zealand address: Police Station, Invercargill.
 Last employer: N.Z. Gvt., 3-11-87

Name, relationship, and address of next-of-kin (if not resident in New Zealand, insert also name and address of nearest relative in New Zealand):
S. McNiece, BROTHER,
Pongakawa, Bay of Plenty.
copy of Pay Book sent received (will in Public Trust Office) under certified, signed by soldier.

Service	Country or Troopship.	Date from	Date to	Total.		Initials of Officer making Entry.	Home Service.	
				Years.	Days.		Years.	Days.
...	N.Z.	11/1/17.	26/6/17					
	FOREIGN.	26/6/17						
	MEAL ACTION COMPLETE.							
		21 JAN 1924						

Wounds	CABLE.		Where Soldier located.	Message and Remarks.											
	No.	Date.													
...	A.F.B.	10.3	In the field	Wounded in action 15.10.17.											
	<table border="1"> <tr><td>Australian:</td><td></td></tr> <tr><td>Egyptian:</td><td></td></tr> <tr><td>Egyptian E.F.:</td><td></td></tr> <tr><td>Balkan:</td><td></td></tr> <tr><td>Western European: 1917</td><td></td></tr> <tr><td>Asiatic:</td><td></td></tr> </table>		Australian:		Egyptian:		Egyptian E.F.:		Balkan:		Western European: 1917		Asiatic:		
Australian:															
Egyptian:															
Egyptian E.F.:															
Balkan:															
Western European: 1917															
Asiatic:															
Sick	A.F.B.	10.3.	Died from Wounds received in action	Died from Wounds received in the Field Belgium											
	Enter	2.18	G.S.W. leg R.	Oct 15 th 1917											

Killed in action ...
 Died of wounds* 4517 ^{Jan} 25.10.17 Died of G.S.W. at leg, Oct 15th 1917
 Missing ... Buried in Area compassed by a circle of radius 350 yds of which the centre is a hill top at 59.4.25.95. 25.10.17. The 2nd Angus B Coy
 Prisoner ...
 Injuries in or by the Service ...

Discharge ... Provisional: (Date) Intended address: Final: (Date)

Pension ... Medals awarded Public Trustee Invercargill 4/10/21 Mrs E. McNiece (m) Ballymatoskerity Loone Co. Antrim, Ireland.

* Strike out words not required.

(Surname) (Christian Name)

Regiment or Corps.	Promotions, Reductions, Casualties, &c.	Rank.	Date.	Authority for Entry.
D Coy. 25th.	Posted to	PTA,	11/1/17	R/O. 740.
" 25	Promoted to	Septr	8 2.17	R/O 764
" "	" "	Corpl	8 3.17	" 794

PLAQUE AND SCROLL.

Best posted 27. 10 22 64

Soldier's name: John Alexander McNiece ^{ally} Reg. No. 45107

Roll No. 508563

Scroll despatched (Date): 7 JUL 1921

Plaque: 20 MAR 1922

Recipient and address: Mr E. McNiece
12, Alymore, Killybegs
Doonee
County Antrim, Ireland.

17,000/3/21-37341

Special instance or meritorious

Name of Medal.	Clasps.	Date of Grant.
Medals and Decorations		

PARTICULARS OF MARRIAGE.

Wife's Maiden Name (in full).	Place of Marriage.	Date.	Officiating Clergyman or Registrar.

PARTICULARS OF CHILDREN.

Christian Names.	Date of Birth and Age.	Where born.	Where registered.

Casualty Form - Active Service.

Regiment or Corps **8th Coy**

Rank **Private** Surname **McNiece**

Christian Name **John Alexander**

Religion **Methodist** Age on Enlistment **21** years **11** months
 Enlisted (a) **12.16** Terms of Service (a) **Duration War Service** reckons from (a) **11.1.17**

Date of promotion to present rank **12.16** Date of appointment to lance rank **11.1.17**

Extended **12.16** Re-engaged **12.16** Qualification (b) **12.16**
 or Corps Trade and rate **12.16**

Occupation **12.16** Signature of Officer **12.16**

Date	Report		Place of Casualty	Date of Casualty	Remarks Taken from A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AP, AQ, AR, AS, AT, AU, AV, AW, AX, AY, AZ, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BO, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, CR, CS, CT, CU, CV, CW, CX, CY, CZ, DA, DB, DC, DD, DE, DF, DG, DH, DI, DJ, DK, DL, DM, DN, DO, DP, DQ, DR, DS, DT, DU, DV, DW, DX, DY, DZ, EA, EB, EC, ED, EE, EF, EG, EH, EI, EJ, EK, EL, EM, EN, EO, EP, EQ, ER, ES, ET, EU, EV, EW, EX, EY, EZ, FA, FB, FC, FD, FE, FF, FG, FH, FI, FJ, FK, FL, FM, FN, FO, FP, FQ, FR, FS, FT, FU, FV, FW, FX, FY, FZ, GA, GB, GC, GD, GE, GF, GG, GH, GI, GJ, GK, GL, GM, GN, GO, GP, GQ, GR, GS, GT, GU, GV, GW, GX, GY, GZ, HA, HB, HC, HD, HE, HF, HG, HH, HI, HJ, HK, HL, HM, HN, HO, HP, HQ, HR, HS, HT, HU, HV, HW, HX, HY, HZ, IA, IB, IC, ID, IE, IF, IG, IH, II, IJ, IK, IL, IM, IN, IO, IP, IQ, IR, IS, IT, IU, IV, IW, IX, IY, IZ, JA, JB, JC, JD, JE, JF, JG, JH, JI, JJ, JK, JL, JM, JN, JO, JP, JQ, JR, JS, JT, JU, JV, JW, JX, JY, JZ, KA, KB, KC, KD, KE, KF, KG, KH, KI, KJ, KK, KL, KM, KN, KO, KP, KQ, KR, KS, KT, KU, KV, KW, KX, KY, KZ, LA, LB, LC, LD, LE, LF, LG, LH, LI, LJ, LK, LL, LM, LN, LO, LP, LQ, LR, LS, LT, LU, LV, LW, LX, LY, LZ, MA, MB, MC, MD, ME, MF, MG, MH, MI, MJ, MK, ML, MM, MN, MO, MP, MQ, MR, MS, MT, MU, MV, MW, MX, MY, MZ, NA, NB, NC, ND, NE, NF, NG, NH, NI, NJ, NK, NL, NM, NN, NO, NP, NQ, NR, NS, NT, NU, NV, NW, NX, NY, NZ, OA, OB, OC, OD, OE, OF, OG, OH, OI, OJ, OK, OL, OM, ON, OO, OP, OQ, OR, OS, OT, OU, OV, OW, OX, OY, OZ, PA, PB, PC, PD, PE, PF, PG, PH, PI, PJ, PK, PL, PM, PN, PO, PP, PQ, PR, PS, PT, PU, PV, PW, PX, PY, PZ, QA, QB, QC, QD, QE, QF, QG, QH, QI, QJ, QK, QL, QM, QN, QO, QP, QQ, QR, QS, QT, QU, QV, QW, QX, QY, QZ, RA, RB, RC, RD, RE, RF, RG, RH, RI, RJ, RK, RL, RM, RN, RO, RP, RQ, RR, RS, RT, RU, RV, RW, RX, RY, RZ, SA, SB, SC, SD, SE, SF, SG, SH, SI, SJ, SK, SL, SM, SN, SO, SP, SQ, SR, SS, ST, SU, SV, SW, SX, SY, SZ, TA, TB, TC, TD, TE, TF, TG, TH, TI, TJ, TK, TL, TM, TN, TO, TP, TQ, TR, TS, TT, TU, TV, TW, TX, TY, TZ, UA, UB, UC, UD, UE, UF, UG, UH, UI, UJ, UK, UL, UM, UN, UO, UP, UQ, UR, US, UT, UY, UZ, VA, VB, VC, VD, VE, VF, VG, VH, VI, VJ, VK, VL, VM, VN, VO, VP, VQ, VR, VS, VT, VU, VV, VW, VX, VY, VZ, WA, WB, WC, WD, WE, WF, WG, WH, WI, WJ, WK, WL, WM, WN, WO, WP, WQ, WR, WS, WT, WU, WV, WW, WX, WY, WZ, XA, XB, XC, XD, XE, XF, XG, XH, XI, XJ, XK, XL, XM, XN, XO, XP, XQ, XR, XS, XT, XU, XV, XW, XX, XY, XZ, YA, YB, YC, YD, YE, YF, YG, YH, YI, YJ, YK, YL, YM, YN, YO, YP, YQ, YR, YS, YT, YU, YV, YW, YX, YY, YZ, ZA, ZB, ZC, ZD, ZE, ZF, ZG, ZH, ZI, ZJ, ZK, ZL, ZM, ZN, ZO, ZP, ZQ, ZR, ZS, ZT, ZU, ZV, ZW, ZX, ZY, ZZ	From whom received	Record of promotions, reductions, transfers, casualties, etc. during active service, as reported on Army Form B. 103, and other official documents. The substance to be quoted in each case.	Signature of Officer
	21.7.17						Wellington	26.4.17
28.8.17	of E.O. Rgt	EX - HMT Tofun	Devonport	20.7.17	D. Roll			
5.9.17	of NZ Res Grp	Marched in A.O.I.R + reverts to Tempy Corp	Slings	20.7.17	Pz 184			
9.9.17	do	Reverts to private		28.8.17	Pz 207			
13.10.17	of 3rd Bn. 0 Rgt	Left for France		5.9.17	Nom Roll			
		Marched into Camp	Etaples	9.9.17	O.R. 197X2337			
		Joined Batta + posted to 8th Coy	in the field	8.10.17	B213 (B 21/192)			
20.10.17	do	Wounded in Action		16.10.17	B213			
31.10.17	do	Now Reported Wounded in Action		15.10.17	Letter in reply to 15/10/17			
17.10.17	of 2nd NZ Field Amb	Died from Wounds	Belgium	15.10.17	Death Report			
		received in Action 5. Swineberg	In the field	15.10.17	12/11/17 3790			

(a) In the case of a man who has re-engaged for, or enlisted in, Section D, Army Reserve, particulars of rank to engagement or enlistment (fill in) (b) Signatures, Shorthand-Smith, Inc.

Maule Major
 D.A.G. (NZ)
 G.H.Q., 3rd Echelon, B.E.F.

RECEIVED BY HISTORY SECTION
 15.2.18



NEW ZEALAND EXPEDITIONARY FORCE.

ATTESTATION FOR GENERAL SERVICE.

QUESTIONS TO BE PUT TO THE RECRUIT.

1. What is your name? ... John Alexander Mc Nicce,
2. Where were you born? ... of Ireland.
3. Are you a British subject? ... yes.
4. What is the date of your birth? ... 3rd November 1887.
5. What are the names of your parents? ...
 (Father: John Mc Nicce,
 (Mother: Catherine Mc Nicce,
6. Where were your parents born? ...
 (Father: of Ireland.
 (Mother: _____)
7. If your parents are of alien origin, when and where were they naturalized? ...
 (Father: (when) _____ (where) _____
 (Mother: (when) _____ (where) _____)
8. How long have you been resident in New Zealand? ... Seven years.
9. How long have your parents been resident in New Zealand? ...
 (Father: no
 (Mother: no
10. What is your trade or calling? ... Constable, New Zealand Police Force
11. Are you an indentured apprentice? If so, where, and to whom? ... no.
12. What was the address at which you last resided? ... Police Station, Elmercargill.
13. Have you passed the Fourth Educational Standard or its equivalent? ... yes.
14. What is the name and address of your present or last employer? ... New Zealand Government.
15. Are you single, married, widower, divorced, or legally separated from your wife? ... Single.
16. If married, a widower, divorced, or legally separated from your wife, how many children under sixteen years of age have you? ... _____
17. If single, how many persons are absolutely dependent on you? ... None.
18. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? ... no.
19. Do you now belong to any Military or Naval Force? If so, to what corps? ... no.
20. Have you ever served in any Military or Naval Force? If so, state which and cause of discharge. ... no.
21. Have you truly stated the whole (if any) of your previous service? ... yes.
22. Have you ever been medically examined for service with the New Zealand Expeditionary Force? If so, when and where? ... no.
23. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? ... no.
24. Have you ever been rejected as unfit for the Military or Naval Forces of the Crown? If so, on what grounds? ... no.
25. Are you willing to be vaccinated or revaccinated and inoculated? ... yes.
26. Are you willing to serve in the New Zealand Expeditionary Force in or beyond the Dominion of New Zealand for the duration of the present war with Germany and six months thereafter, if your service is so long required? ... yes.
27. For which Reinforcement draft do you volunteer? ... Small parties, Farmer - Pongakawa, Bay of Plenty, N.Z., in Twenty fifth Reinforcement.

Note.—Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, John Alexander Mc Nicce, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.

Signature of Recruit: John Mc Nicce,
Signature of Witness: Pathmanay

Oath to be taken by Recruit on attestation.

I, John Alexander Mc Nicce, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, and that I will faithfully serve in the New Zealand Expeditionary Forces against His Majesty's enemies, and that I will loyally observe and obey all orders of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Attesting Officer.

The above questions were read to the above-named recruit in my presence. I have taken care that he understands these questions, and that his answer to each question has been duly entered. The said recruit has made and signed the declaration and taken the oath of allegiance before me, at _____, N.Z., on this _____ day of _____, 1917.

Signature of Attesting Officer: W. Croucher, Esq.

NOTE 1.—If any alteration is required on this page of the attestation, the Attesting Officer should be requested to make it and initial the alteration.

NOTE 2. The recruit expresses his preference to enlist for Infantry (branch of service.)

Apparent age: 29 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height: 5 feet 11 inches.

Weight: 155 lb.

Chest-measurement: { Minimum, 34½ inches.
Maximum, 38½ inches.

Complexion: Fair

Colour of eyes: Greyish Blue

Colour of hair: Fair

Religious profession: Presbyterian

Medical Examination.

Sight: Right eye, 6/6

Left eye, 6/6

Hearing: Right ear, Normal

Left ear, Normal

Colour-vision: Normal

Are his limbs well formed? Yes

Are the movements of all his joints full and perfect? Yes

Is his chest well formed? Yes

Is his heart normal? Yes

Are his lungs normal? Yes

What is the condition of the teeth?

Have you had any illnesses? Only minor

Is he free from hernia? Yes

Is he free from varicocele? Yes

Is he free from varicose veins? Yes

Is he free from hæmorrhoids? Yes

Is he free from inveterate or contagious skin-disease? Yes

Is there a distinct mark of vaccination? Yes

Is he in good bodily and mental health and free from any physical defect likely to interfere with the efficient performance of his duties? Yes

Are there any slight defects, but not sufficient to cause rejection? No

Have you ever had a fit? No

Complaints
Remarks.

Has never been off work through accident or illhealth

Lit

Certificate of Medical Examination.

I HAVE examined this recruit and find that he does not present any of the ~~presents~~ causes of rejection specified in the Regulations for Army Medical Services.

I consider him fit for service in the New Zealand Expeditionary Force in and beyond New Zealand.

Nov 14 1916.

William Stewart Medical Officer.
Address: Dunedin

**NEW FILE
BEGINS**

25th REINFORCEMENTS.
 NEW ZEALAND AND EXPEDITIONARY FORCE.

[Form No. 1.]

PERSONAL RECORD of

1st NZEF	Army No
Registration No. 45107	
2nd NZEF	
	Sergt.

(Surname) Eric Fiese

(Christian name) John Alexander

REGIMENT: D Coy

2.5th Rifle Bn

GROUP: _____ NUMBER: _____

WILL DEPOSITED WITH
 PUBLIC TRUSTEE.
 For papers, see B.R. 27.
 27.

PREVIOUS PAPERS: _____

SUBSEQUENT PAPERS: _____

DEATH CARD ISSUED, R.G.

INITIALS: JK DATE: 14.12.17

ELIGIBLE

RETROSPECTIVE WIDOWED MOTHER'S DEPENDANTS' ALLOWANCE.

SUMMARY - SHEET.

PARTICULARS OF SOLDIER OR SOLDIERS.

PENSIONS
Received
1 JUN 1927

Reg. No.	Rank.	Name.	Age.	Occupation.	M. or S.	Rate of Allotment.	Allotted.	LENGTH OF SERVICE.		
								From	To	Number of Days.

Number of dependants, and relationship to soldier: _____

Comparison between (a) amount of support due for period of service at pre-enlistment rate and (b) amount actually received for same period:—

(a) AMOUNT DUE AT PRE-ENLISTMENT RATE.				(b) AMOUNT RECEIVED.				
Rate.	Number of Days.	Amount.	Total.	Allotment.	Rate.	Number of Days.	Amount.	Total.

Allowance
NO. 10
P.A.
25 JUL 1923
FILE

Plaque No. 508563

N.Z. Army Form 396.

RECEIPT FOR MEMORIAL PLAQUE.

I HEREBY ACKNOWLEDGE RECEIPT OF MEMORIAL PLAQUE ISSUED ON ACCOUNT OF

45107 John Alexander Mc Nice

Next of kin Mr. Esther Mc Nice her Mrs Esther Mc Nice
Signature Mrs Esther Mc Nice
Address Ballymatoskertig Ballymatoskertig
Larne Co. Antrim, Ireland. Larne Co Antrim Ireland.

IMPORTANT:— This receipt must be signed only by person entitled to receive, & returned to officer i/c War Accts. & Records, Wellington.

Decision: _____

CASH NOTED.	CREDITED.	PAYMENT MADE.	LEDGER NOTED.
-------------	-----------	---------------	---------------

Initials and date: _____

11
I, JOHN ALEXANDER HOLLIES of the Dominion of New Zealand, Police Constable, at present however a Corporal in the 25th Reinforcements of His Majesty's New Zealand Expeditionary Force.

1. I REVOKE all former Wills, and I APPOINT THE PUBLIC TRUSTEE of the said Dominion to be the sole Executor and Trustee of this my Will.

2. I GIVE to my mother ESTHER HOLLIES absolutely the proceeds of my life insurance policy in the Australian Mutual Provident Society together with all accretions thereto to the date of my decease.

3. I GIVE to my brother SAMUEL HOLLIES the sum of two hundred and fifty pounds (£250) which he at present owes me.

4. I GIVE DEVISE AND BEQUEATH all the residue of my estate both real and personal of whatsoever nature and wheresoever situate unto my mother absolutely PROVIDED should she predecease me then to my father JOHN HOLLIES absolutely.

SIGNED by my hand this 10th day of April, 1917.

SIGNED by the said John Alexander Hollies the testator, as and for his last Will and Testament, in the presence of us together present at the same time, who in his presence, at his request, and in the presence of each other, have hereunto subscribed our names as witnesses:

John A. Hollies
(Testator to sign here.)

Witness: A. Bayth
Occupation: Civil Servant
Address: Invercargill

Witness: F. E. Young
Occupation: Civil Servant
Address: Invercargill.

Headquarters,
 New Zealand military forces,
 Whitmore Street,
 WELLINGTON.
 16th February, 1920.

Dear Sir,

45107 - J.A. McNiece - Deceased.

With reference to your application for the Active Service Gratuity, I have to point out that Section 7 subsection 3 of the Expeditionary Forces Amendment Act, 1918, reads as follows:-

"In the case of any Officer, non-commissioned officer or man who, after service in an Expeditionary Force beyond the seas has died while still a member of that Force, or who, after such service beyond the seas, has died after being honourably discharged from that Force but without receiving such bonus, the bonus may be paid to or divided between his widow, children, father or mother, or any dependants who are or at any time have been, in receipt of a pension under the War Pensions Act, 1915, in respect of his death, as the Minister of Defence thinks fit in each particular case."

As you are not one of the persons to whom payment is authorised by the Act, it is regretted that the Gratuity cannot be paid to you.

Yours faithfully,

J. W. HUTCHEN

Officer in Charge War Expenses.

Mr. S. McNiece,
 PORANGAHAU,
 Hawkes Bay.

Casualty Form - Active Service.

Regiment or Corps 8th CoyRank Private Surname McNIECE Christian Name John Alexander

Religion Age on Enlistment years months

Enlisted (a) 1. 12. 16 Terms of Service (a) Duration War Service reckons from (a) 1. 1. 17

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

Extended (.....) Re-engaged (.....) Qualification (b)
or Corps Trade and rate

Occupation Signature of Officer

Report		Kind of promotion, induction, transfers, casualties, etc., during active service, as reported on Army Form B 212, Army Form A 20, 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 212, Army Form A 20, or other official documents.
Date	From whom received				
		HMT Tofua Embarked	Wellington	26.4.17	E. Roll
		EX " " Disembarked	Devonport	20. 7. 17	D. Roll
21. 7. 17	of C.O. Rgt	Marched in 40IR + reverts to Temp Coy	Slings	20. 7. 17	Pz 174
28 8 17	of NZ Res Gp	Reverts to private	oo	28. 8. 17	Pz 207
5. 9. 17	oo	left for France	oo	5. 9. 17	Nom Roll
9. 9. 17	of NZ 1 + 9 B Co	Marched into Camp	Etaples	9. 9. 17	OR. 197 X 2337
13. 10. 17	of 3rd Bn. 0 Rgt	Joined Bn + posted to 8th Coy	in the Field	8. 10. 17	B212 (Pz 2/1152)
20. 10. 17	oo	Wounded in Action	oo	16. 10. 17	B213
31. 10. 17	oo	Now Reported Wounded in Action	oo	15. 10. 17	letter in reply to 15
17. 10. 17	of 2nd NZ Field Hq	Died from Wounds received in Action S. Swileg (R) in the field	Belgium	15. 10. 17	death Repo 12/11 X 3741 N. 11 177 11 12 15 17

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of both re-engagement or enlistment and original enlistment should be given.

(b) Signaller, Sholing-Smith's, etc.

74 8027-22500 10000 7417 (M) 00000 C. P. & S. Ltd. Form B 103 (1917)

ENTERED ON HISTORY SHEET

Emcl 15. 2. 18

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, 3rd. Battalion
OR CORPS OTAGO REGIMENT Squadron, Troop, }
N.Z. Expeditionary Force Battery or Company } 8th. Company.
Regimental No. 45107 Rank Private

Surname McNIECE Christian Names John Alexander

Died { Date 15th. OCTOBER 1917 Place No. 2 New Zealand Field Ambulance.
In the field, FRANCE or BELGIUM.

Cause of Death* DIED FROM WOUNDS RECEIVED IN ACTION.

Nature and Date of Report Death Report - 17th. October 1917.

By whom made O.C. No. 2 N.Z. Field Ambulance.

* 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 _____ Date _____
By whom reported _____

State whether he leaves { (a) in Pay Book (Army Book 64) None or Not attached (b) in Small Book (if at Base) Not issued.
a Will or not { (c) as a separate document No Will received to date

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 Office, 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.

ROUEN FRANCE

Station and Date 28th. NOV. 1917. Signature of Officer in charge of Section } Howles Lt. Col. Major
Adjutant-General's Office at the Base }

WPH / TEB.

D.A.A.G. (N.Z.)

G.H.Q. 3rd Echelon, B.E.F.

CH

45107 Mc Niece John Alexander

13.
SOLDIER'S WILL.

THIS IS THE LAST WILL AND TESTAMENT OF ME,
.....
a (No.)
in the Company,
..... Reinforcements of His Majesty's
New Zealand Expeditionary Force on Active
Service.

1. I revoke all prior Wills.
2. I appoint (1).....
of
.....
to be the sole executor and trustee
of this my Will.

3. I give, devise, and bequeath all my
property, both real and personal, of
whatsoever nature and wheresoever
situate, unto (2).....

Handwritten notes:
"I am making a copy in New Zealand Public Trust office for Mr. Mc Niece."
"G.H.Q. No. 45107"

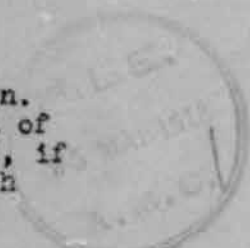
(Signature)
(Date), 191

- (1) Full name, address, and occupation.
- (2) Full name, address and occupation of beneficiary or beneficiaries, and, if more than one, the shares in which they are to take.

Certified a true copy of page 13 in pay book of 45107 Private John Alexander McNiece.

McNiece, J.A.
for

Major.
D.A.A.G. (N.Z.)
G.H.Q. 3rd Echelon B.E.F.
28th November 1917.



Cal ✓

ENTERED ON HISTORY BOOKS
18-2-17

NEW ZEALAND EXPEDITIONARY FORCE.

MEDICAL HISTORY

OF

Surname: *Mc Nice*

Christian Name: *John Alexander*

Examined: (On *14th* day of *Nov*, 191*6*)
At *Invercargill*
Birthplace: (Town *Ireland*)
(Country, _____)

Approved by
S. W. Stewart
Medical Officer, *Invercargill*

Declared age: _____
Trade or occupation: *Boatman N.Z. Police*
Height: *5* ft *11* in.
Weight: *155* lb.

Examined for re-engagement: _____ day of _____, 191*6*

Chest measurement: (Minimum, *34 1/2* in.)
(Maximum expansion, *38 1/2* in)

* Considered: _____
Medical Officer, _____

Physical development: _____
Small-pox marks: _____
Right _____ Left _____

* If unfit, state disability.

Vaccination marks: (Arm, _____) *present*
(Number, _____)

Re-vaccinated on _____ day of _____, 191*6*

When vaccinated: _____
Marks indicating congenital peculiarities or previous disease: _____

Arm: _____ Number: _____

Result: _____

Medical Officer, _____

Enlisted on *1st* day of *Dec.*, 1916, at *Invercargill*

	Corps.	Regimental No.	Date.
Joined on enlistment	<i>D Coy 25th</i>	<i>45107</i>	<i>11. 1. 17</i>
Transferred to			

PROPOSED FOR DISCHARGE BY A MEDICAL BOARD.

Station.	Date.	Disease	Result.

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Ser- man becoming non-effective, the date and cause being stated at the foot of next page.



NEW ZEALAND EXPEDITIONARY FORCE.

45107

ATTESTATION FOR GENERAL SERVICE.

QUESTIONS TO BE PUT TO THE RECRUIT.

1. What is your name? ... *John Alexander Macnicol*
2. Where were you born? ... *of record.*
3. Are you a British subject? ... *yes.*
4. What is the date of your birth? ... *5th November 1887.*
5. What are the names of your parents?
 (Father: *John Macnicol,*
 Mother: *Kathleen Macnicol,*
6. Where were your parents born?
 (Father: *of Ireland.*
 Mother: ...)
7. If your parents are of alien origin, when and where were they naturalized?
 (Father: (when) ... (where) ...
 (Mother: (when) ... (where) ...)
8. How long have you been resident in New Zealand? ... *Seven years.*
9. How long have your parents been resident in New Zealand? ...
 (Father: ...
 (Mother: ...)
10. What is your trade or calling? ... *Co. Constable, New Zealand Police Force*
11. Are you an indentured apprentice? If so, where, and to whom? ... *no.*
12. What was the address at which you last resided? ... *Police Station, E. Mueser, G.P.O.*
13. Have you passed the Fourth Educational Standard or its equivalent? ... *yes.*
14. What is the name and address of your present or last employer? ... *New Zealand Government.*
15. Are you single, married, widower, divorced, or legally separated from your wife? ... *Single.*
16. If married, a widower, divorced, or legally separated from your wife, how many children under sixteen years of age have you?
17. If single, how many persons are absolutely dependent on you? ... *None.*
18. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? ... *no.*
19. Do you now belong to any Military or Naval Force? If so, to what corps? ... *no.*
20. Have you ever served in any Military or Naval Force? If so, state which and cause of discharge. ... *no.*
21. Have you truly stated the whole (if any) of your previous service? ... *yes.*
22. Have you ever been medically examined for service with the New Zealand Expeditionary Force? If so, when and where? ... *no.*
23. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? ... *no.*
24. Have you ever been rejected as unfit for the Military or Naval Forces of the Crown? If so, on what grounds? ... *no.*
25. Are you willing to be vaccinated or revaccinated and inoculated? ... *yes.*
26. Are you willing to serve in the New Zealand Expeditionary Force in or beyond the Dominion of New Zealand for the duration of the present war with Germany and six months thereafter, if your service is so long required? ... *yes.*
27. For which Reinforcement draft do you volunteer? ... *Samuel Marice, former Pungakawa, Boy of Party, N.Z., under fifth Reinforcement.*

Note. - Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, *John Alexander Macnicol*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.
 Signature of Recruit: *John Macnicol*
 Signature of Witness: *Patrick Macnicol*

Oath to be taken by Recruit on attestation.

I, *John Alexander Macnicol*, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, and that I will faithfully serve in the New Zealand Expeditionary Forces against His Majesty's enemies, and that I will loyally observe and obey all orders of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Attesting Officer.

The above questions were read to the above-named recruit in my presence. I have taken care that he understands these questions, and that his answer to each question has been duly entered. The said recruit has made and signed the declaration and taken the oath of allegiance before me, at *Dunedin*, N.Z., on this *1st* day of *December* 1917.
 Signature of Attesting Officer: *W. C. Crowther, Surgeon*

Note 1 - If any alteration is required on this page of the attestation, the Attesting Officer should be requested to make it and initial the alteration.
 NOTE 2. The recruit expresses his preference to enlist for *Infantry* (branch of service.)

Apparent age: 29 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height: 5 feet 11 inches.

Weight: 156 lb.

Chest-measurement: Minimum, 34½ inches.
Maximum, 38½ inches.

Complexion: Fair

Colour of eyes: Greyish Blue

Colour of hair: Fair

Religious profession: Presbyterian

Medical Examination.

Sight: Right eye, <u>6/6</u>	Is he free from hernia? <u>Yes</u>
Left eye, <u>6/6</u>	Is he free from varicocele? <u>Yes</u>
Hearing: Right ear, <u>Normal</u>	Is he free from varicose veins? <u>Yes</u>
Left ear, <u>Normal</u>	Is he free from haemorrhoids? <u>Yes</u>
Colour-vision: <u>Normal</u>	Is he free from inveterate or contagious skin disease? <u>Yes</u>
Are his limbs well-formed? <u>Yes</u>	Is there a distinct mark of vaccination? <u>Yes</u>
Are the movements of all his joints full and perfect? <u>Yes</u>	Is he in good bodily and mental health and free from any physical defect likely to interfere with the efficient performance of his duties? <u>Yes</u>
Is his chest well formed? <u>Yes</u>	Are there any slight defects, but not sufficient to cause rejection? <u>No</u>
Is his heart normal? <u>Yes</u>	Have you ever had a fit? <u>No</u>
Are his lungs normal? <u>Yes</u>	
What is the condition of the teeth? <u>None</u>	
Have you had any illnesses? <u>Only minor</u>	

Remarks.

Has never been off work through accident or illhealth

Fit

Certificate of Medical Examination.

I HAVE examined this recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

I consider him fit for service in the New Zealand Expeditionary Force in and beyond New Zealand.

Jan 14 1916.

William Stewart Medical Officer.
Address: Dunedin

MILITARY HISTORY SHEET. 8 25

No. _____

Name: *Mr. Nicoll John Alexander*

	Country	From	To	Years	Days	Initials of Officer making Entry
1. Service record ...	<i>NZ</i>	<i>11-1-14</i>				
2. Certificates ...						
3. Passed classes of instruction ... <small>* This includes any authorized class of instruction.</small>						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
8. Medals and decorations	Name of Medal	Class	Date of Grant			
9. Injuries in or by the Service	<i>Samuel W. Nicoll</i> <i>Pongakawa</i> <i>Blay of Plenty (brother)</i>					
10. Name and address of next-of-kin						
11. 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.) Name of Officiating Minister or Registrar.					
	(a.)	(b.)	(c.)			
12. Particulars as to Children	Christian Names		Date and Place of Birth		Where registered	

Note.—These entries are to be made from time to time as they occur, and initialed by the officer making the entry.

Intended place of residence on discharge: *NZ*

STATEMENT OF THE SERVICES OF No. 45107 NAME McNiece J.A.

Regiment or Corps.	Promotions, Reductions, Casualties, An.	Rank.	Dates.	Signature of Officer certifying Correctness of Entries.
D Coy 25	Posted to R/o 740	Pvt	11-1-17	J. S. Graham Capt
D Coy 25	Promoted to R/o 764	L/Cpl	8-2-17	J. S. Graham Capt
D Coy 25	" " R/o 794	Cpl	8-3-17	J. S. Graham Capt
D Coy 25	" " R/o 831	Sergt	22/1/17	J. S. Graham Capt

PROVISIONAL FILE

N. Z. E. F.No. 45104SurnameMcRaeChristian NamesJohn Alexander

Unit

302R