#### 1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's Forces under the following conditions:

> For the duration of the present war, or until my discharge.

> Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

> Subject to the Newfoundland Volunteer Act, 5 George V., Chapter IV.

> > Signed Albert Coles

Witness a. 6 Dummer

Dated at Newton on ays.

Offs. 8 th 1916

|                |                    | Applicable to all rank                   | s. To corres  | pond with entr | ies on the Medic  | al History Shee                     | t.   |
|----------------|--------------------|--|---------------|----------------|---|-------------------------------------|--|
| •              | ke                 | but V. Cole                              | ,             |                |   |                                     |  |
| heas           | ge                 | years 8  Girth when Range of ex          | fully exp     | anded          | Height 39 inches.   |                                     | eet <u>* // i</u> ncl  |
| tinctive       | marks              |  |               |                |   |                                     |  |
| lame and       | Addres             | INFORMA<br>s of next of kin_             | mai           | Relation       | iship 7   | CRUIT.                              | 5 1  |
| (a) Chri       | stian and          | Surname of Woman to                      |               | rs as to M     |   | ow. (b) Place an                    | d date of marriage.  |
|                | (a)                |  | (6)           | ,              | (e)   |                                     | (d)  |
|                |                    |  | Particula     | rs as to C     | hildren.  |                                     |  |
|                | Christian          | Names.                                   |               |                | Date a  | and Place of Bi                     | rth.   |
|                |                    | STATE                                    | MENT          | OF THE         | SERVIC  | ES.                                 |  |
| Corps in Rgi   | t. or Pro          | omotions, Reductions,<br>Casualties, &c. | Army<br>Rank. | Dates          | Service not al-<br>lowed to reckon<br>for fixing the<br>rate of pension<br>years   days | ed to reckon to-<br>wards G. C. Pay | Signature of Officers<br>certifying correctnes<br>of entries |
| Service toward | ls limited         | engagement reckons fro                   | m             |                | 1 1   |                                     |  |
| oined at       |                    | on                                       |               |                |   |                                     | 1  |
|                |                    |  |               | -              |   |                                     |  |
|                |                    |  | •             |                |   |                                     |  |
|                |                    |  |               |                |   |                                     |  |
|                |                    | 24                                       |               |                |   |                                     |  |
|                |                    |  |               |                |   |                                     |  |
|                |                    |  |               |                |   |                                     |  |
| •              |                    |  |               |                |   |                                     |  |
|                | - -                | <del></del>                              |               |                |   |                                     |  |
| Total Se       | rvice forf         | eited as above                           |               |                |   |                                     |  |
|                | THE REAL PROPERTY. |  |               |                |   |                                     |  |



#### FIRST NEWFOUNDLAND REGIMENT.

#### ATTESTATION OF

| What is your name? What is your full Address?   | 1. (44                                     |
|---|--|
| What is your full Address?  |  |
|   | { 2. <u> </u>                              |
| Are you a British Subject?  |  |
| What is your Age?   | 4  |
| What is your Trade or Calling?  | 5,   |
| Are you Married?  | 6  |
| Have you ever served in any Branch of His Majest Forces, naval or military, if so,* which?  | by's } 7                                   |
| Are you willing to be vaccinated or re-vaccinated?  | 8  |
| Are you willing to be enlisted for General Service  | ? 9,                                       |
| Did you receive a Notice, and do you understand meaning, and who gave it to you?            | Corps                                      |
| Are you willing to serve upon the conditions as em to be signed by you if you are accepted? | bodied in the roll of service 11.          |
| allest Market   | do solemnly declare that the above answers |
| e by me to the above questions are true, and that I am willing                              | ng to fulfil the engagements made.         |
| Adris/15 Aller  | SIGNATURE OF RECRUIT                       |
| Aeving !!   | Signature of Witness.                      |
| OATH TO BE TAKEN BY R   | ECRUIT ON ATTESTATION.                     |
| Max t Decay   | the Done                                   |

#### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to,

and the said Recruit has made and signed the declaration and taken the oath before me at

Signature of the 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.

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, the Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character; which should be returned to him conspicuously endorsed in red ink, as follows, viz.—

Name) re-enlisted in the (Regiment).



## FIRST NEWFOUNDLAND REGIMENT.

| No. 1813 Name albert O Coles corps 1/Mfld Ct  |
|---|
| Questions to be put to the Recruit perofe Enlistment P  |
| 1. What is your name?   |
| 2. What is your full Address?   |
| 3. Are you a British Subject?   |
| 4. What is your Age?Months.   |
| 5. What is your Trade or Calling? 5 5.  |
| 6. Are you Married? 6,  |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?  |
| 8. Are you willing to be vaccinated or re-vaccinated? 8.  |
| 9. Are you willing to be enlisted for General Service? 9.   |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?  |
| 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?  |
| () He delle Colo  |
| answers made by me to the above questions are true, and that, I am willing to fulfil the engagements made.  |
| 6 Seth 3/15 calbert victor boles signature of recruit.  |
| OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.   |
| do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.  |
| CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.   |
| The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act  The above questions were then read to the Recruit in my presence.  I have taken care that he understands each question, and that his answer to each question has been duly entered aspreptied to, |
| and the said Recruit has made and signed the deparation and taken the oath before me at   |
| Sugnature of the Atlesting 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.  |
|   |
| Approving Officer.  |
| Place   |
| † The signature of the Approving Officer is to be affixed in the presence of the Recruit.<br>‡ Here insert the "Corps" for which the Recruit has been enlisted.   |

### 1813.

# DESCRIPTIVE REPORT ON ENLISTMENT. Applicable of ranks. To correspond with entries on the Medic History Sheet.

| Vame                    | 0                | least V   | retu           | Cole                | 0  |                   |   |                   | J. J.  |
|-------------------------|------------------|---|----------------|---------------------|--|-------------------|---|-------------------|--|
| Apparent                | t age_           | 22 years  | mo             | nths.               | He   | ight_             | <u> </u>                                    | f                 | eet / O inches.  |
| hest me                 | asurer           | $\begin{cases} \text{Girth when} \\ \text{Range of ex} \end{cases}$ |                | panded S            | inch                                       |                   | iches.                                      |                   |  |
| istinctiv               | ve mar           | ks  |                |                     |  | :                 |   |                   |  |
|                         |                  | INFORMA   | TION           | SUPPLIED            | BY   | RF                | ØRUI  | Ta                |  |
| ame an                  | d Add            | ress of next of kin   | h              | rathe               | w  | 10                | 20  | le                | ٦  |
| Ha                      | wa               | y les   | ve             | Relations           |  | 5                 | ta  | th                | is   |
| M-                      | 0                | Bell Isla   |                | ars as to Ma        |  |                   | w. (b) ]                                    | Place at          | nd date of marriage.   |
| (a) C                   | (a)              | and Surname of Woman to (c) Preser                                  | t address. (b) | d) Initials of Offi | cer veril                                  | ying e            | ntry.                                       | 1                 | (d)  |
|                         |                  |   |                |                     |  |                   |   |                   |  |
|                         |                  |   |                |                     |  |                   |   |                   |  |
|                         | Chris            | stian Names.  | Particula      | ars as to Ch        | ildren                                     |                   | ınd Plac                                    | e of B            | irth.  |
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|                         | 1                | STATE   | MENT           | OF THE              |  | NIC               |   | in Re-            | **************************************   |
| Corps in<br>nich served | Rgt. or<br>Depot | Promotions, Reductions,<br>Casualties, &c.                          | Army<br>Rank.  | Dates               | Service<br>lowed to<br>for fixi<br>rate of | ng the<br>pension | Service<br>serve no<br>ed to rec<br>wards G | The Property Laws | Signature of Officers<br>certifying correctness<br>of entries  |
| Service tov             | wards lim        | ited engagement reckons fro   | 3-             | 9-15                |  |                   |   |                   |  |
| Joined at_              | 1                | Shirs on S  | eptem          | Le 13/16            | 10   |                   | •   | ,                 | 1111   |
| toute                   | 1                | Dan's train   | 6 4            | elie oy             | 73   | 7                 | Sen   | ton               | her Southantion  |
| em                      | La               | her loves   | 2017           | 7-16                | 7  | Nuc               | <u>ne</u>                                   | 3 1               | Jarralion 14   |
|                         |                  | - A1  | lled           | in a                | Zu   | 97U               | <u> 18</u>                                  | 9                 | -/6  |
| ,                       |                  | · · · · · · · · · · · · · · · · · · ·                               | ali.           |                     |  |                   |   |                   | The state of the s |
| . \$                    |                  |   |                |                     |  |                   |   |                   |  |
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|                         |                  | *   |                |                     |  |                   |   |                   |  |
|                         |                  |   |                |                     |  |                   |   |                   | 1  |
| Tota                    | d Service        | e forfeited as above  |                |                     |  |                   |   |                   |  |
|                         |                  | Engagement to   | -9-16          | (date of discharg   | (e)  | year              | . 14  | days              |  |
| ,                       | " 1              | ension "  |                | _( "                | >  | _ "               | -   | - "               |  |

NV, N, C.R. 1813

PERSONAL EFFECTS

Received from Militia Department
One Kit Bag of the late #1813 Pte. Albert V. Coles.

Signed matthew Colis

Date e Supsi /s

August 27,1918.

ibrs. Matthew Coles, Savage Covers St.Barbs.

Dear Mrs.Coles:-

I am writing to inform you that it is my regrettable duty to forward to you by "RaIL" to Flower's cove one Kit Pag, which belonged to your son the late No.1815 Pte. Albert V. Coles of The Royal Newfoundland Regiment.

Assuring you of my deepest sympathy in your bereavement, and in the renewed sorrow which the receipt of these effects must entail.

I am enclosing herewith, receipt, will you kindly sign same and return at your earliest convenience.

Yours faithfully.

Liout.

for Chief Staff Officer

C.R. 1813

Extract from Hominal Roll of Hfld. Regt. from 2nd Im. Depot. to let Bm. B.H.F. Embarked Southemptonin-7-16 (Braft No.9.)

1813 Pte. A. Coles.

CR. 1813

July 8,1918

Mr. Matthew Coles, Savage Cove, St.Barbe.

Dear Mr.Coles:-

I am writing to inform you that it is my regrettable daity to forward to you by "Express" one Kit Bag., which belonged to your son the late #1813 Pte. Albert Cales of The Royal Newfoundland Regiment.

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

I am enclosing herewith, receipt, will you kindly sign same and return at your earliest convenience.

Yours sincerely,

Lieut.

for Lieut .Col .C.S.O.

Remarks: - K.J. a.

Most of Die: - Stattler ... m Color

W1492/M1728 100,000 5/17 [X346a] W. & Co. F

Core

Extract of Casualties received from Pay & Record Office, Mondon, dated October 20,1916.

The following Casualty on the 1st.Nfld.Regt. with the British Expeditionary Force is reported under various date:-

#1813 Pte. A. Coles.

KILLED.

10th October, 1916.

Dear Sir.

It was with the deepest regret that the Government received a cablegram from the Record Office, London, intimating that your son, Private Albert V. Coles, had been Killed in Action on September 18th.

On behalf of the Government, as well as for myself. I desire to express to you the sincerest sympathy in your time of sorrow. But though we feel the parting and though the heart is heavy with its loss, yet it is a glorious thing to think that your gallant boy early responded to the call of duty and made his stand for the establishment of Right eousness Truth and Liberty upon the earth. We are all proud of our brave and noble boys but no less do we esteem the unselfish fathers and mothers who so willingly gave their boys when the call of duty came. Though your boy has laid down his earthly weapons he wears the soldier's Crown of Victory and his name is inscribed upon the glorious Roll of Honour and will be held in fragrant memory by all his fellow countrymen. end of this war comes and an honourable and abiding Peace will have been established, it will be your proud thought that you dear boy did to the utmost of his ability to bring about such result. I trust that the Great Father may give you of his love and comfort at this time.

Believe me to be,

Yours sympathetically,

ewfoundland Postal Telegraphs Office Stamp and Date Maidment Copies

Office Stamp and Date wfoundland Postal Telegraphs SERVICE MESSAGE From

Ne foundland Postal Telegraphs Office Stamp and Date SERVICE MESSAGE Time received by Time sent From rage 4 th 6 Her maidment was I delivered at norms ft, Red Richards ove to inform the to

Newfoundland Postal Telegraphs Office Stamp and Date SERVICE MESSAGE -by------by-------by-------Prom

Newfoundland Postal Telegraphs Office Stamp and Date SERVICE MESSAGE T 11 wille Time sent.....

# FOUNDLAND POSTAL TELEGRAPHS.



### Cable Connection with all the World

# All Messages Sent are Subject to the Following Conditions:

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

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

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

transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have ntirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message in the 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 |
|----------------|--------------------|----------|
| Line<br>Number | Rcd By Sent        | by       |
| Dated          | 7th October, 1916. |          |
| To             | Mr. Matthew Coles. |          |

Savage Cove, St. Barbe.

Regret to inform you Record Office London today advises that No. 1813 Private Albert V. Coles was Killed in Action on September eighteenth.

J.R.BENNETT.

Colonial Secretary.

Note for Operator This message is not to be delivered until receiving office advises that message to Rev. G.H.Maidment. Bonne Bay has been delivered and acted upon.

# WFOUNDLAND POSTAL TELEGRAPHS



### Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

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

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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

resulting from the non-transmission or non-delivery of the variable for the purposes of these Conditions at any point where, the control of the N. P. T. over the Message shall be deemed to have intirely 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. (a.d. 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 that the Telegraphic system or service of the N. P. T. 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.

| (NO | T TR | ANSM | ITTED) |
|-----|------|------|--------|
|     |      |      |        |

| Signature o    | f Sender |     |      | Addres | SS    | en e |
|----------------|----------|-----|------|--------|-------|--|
| Line<br>Number | Rcd      | -By | Sent | by     | Check |  |

7th October, 1916. Dated

To Rev. G. H. Maidment.

Bonne Bay

Regret to inform you know Record Office London today advises that No. 1813 Private Albert V. Coles, son of Mr. Matthew Coles of Savage Cove St. Barbe was killed in action on September eighteenth. Kindly inform relatives.

J.R.BENNETT.

Colonial Secretary.

Extract from Casualties received from P.&.R. Office London, Oct. 7.1916.

1813 Cowes.

Killed in Action, Sept. 18th.



Caqualtics

London District

4/10/16 0974

# NEWFOUNDLAND REGIMENT

|    | Rank Home | Sasualty nP.R.                               |  |
|----|-----------|--|--|
| No |           | K in A 18/9/16<br>Reptd by 0.C. Unit 23/9/16 |  |

C.R. 1813

# C.R. 1813

Copy of Cablegram to Governor St. John's Nfld from P. &. R. O. 6 Oct. 16.

1813 Pte Coles. U

Killed in Action. Septwmber 18.

- C.R. 18/3

Extract from Nominal Roll Entrained St. John's 27/10/15 for Oversees

1813 Pte. A. Coles.

- C.R. 18/3

# Extract from Nominal Roll Entrained St. John's 27/10/15 for Oversees

1813 Pte. A. Coles.

# C.R. 1813

With the NEWFOUNDLAND REGIMENT on ....September. 3rd 1915
Regimental No. 1813 was allotted to PteH.B.Coles

AUTHORITY:

Record Design

Dept. of Militia,
March 25th, 1919.

A. Cales. 1813. Pero,

Surname

101

Reprint for 1st. Nfld. Rgt. of Army Form B. 178A.

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

MEDICAL HISTORY

Cole

Christian Name

allet

#### Table I.—GENERAL TABLE.

| Birthplace:—Parish   |                   | Coun                                    | ty reflect |        |                    |
|--|-------------------|---|------------|--------|--------------------|
|  | SPECIAL           | REGULAR ARMY                            |            |        |                    |
|  | on 3 day of       | September 1915                          | on da      | y of   | 191                |
| Examined   | at At John's      | Sptali 1915<br>, reglet                 | at         | :      | •                  |
| eclared Age  | yer               |   | y          | ears   | days               |
| rade or Occupation   |                   |   |            |        |                    |
| Height   | 5 fee             | t /o" inches                            |            | fcet   | inches             |
| Veight   |                   | 143 lbs.                                |            |        | lbs.               |
| Chest (Girth when fully expanded                                       |                   | 39 inches                               |            |        | inches             |
| Measure-<br>ment Range of expansion                                    |                   | 4 inches                                |            |        | inches             |
| Physical Development   |                   |   |            |        |                    |
| ( Arm  | Right             | Left                                    | Right      |        | Left               |
| Vaccination Marks Number   |                   | -                                       |            |        |                    |
| When Vaccinated  |                   |   |            |        |                    |
|  | R.EV= 6/6         |   | R.E.—V==   |        |                    |
| 7ision }   | L.EV= 6/6         |   | L.EV=      |        | •                  |
|  | (a)               |   | (a)        |        |                    |
| (a) Marks indicating congenital peculi-<br>arities or previous disease |                   |   |            |        |                    |
|  |                   |   |            |        |                    |
|  |                   |   |            |        |                    |
| (b) Slight defects but not sufficient to                               | (b)               |   | (b)        |        |                    |
| Cause Rejection  | 1                 | <u> </u>                                |            |        |                    |
| Approved by (Signature)  | Vanneto           | elerson                                 |            |        |                    |
| (Rank)   | Vanort &          |   |            |        |                    |
|  | 100               | Medical Officer.                        |            |        | Medical Officer    |
| ·  | at STOR           | ms'                                     | at         |        |                    |
| Enlisted   | on 3 day of       | 5 eff 191                               | b on       | day of | 191                |
|  | Corps.            | Regtl. No.                              | Corps.     |        | Regtl. No.         |
| Joined on Enlistment   | 1st reflet light. | 1813                                    |            |        |                    |
|  |                   | 1                                       |            |        |                    |
| Transferred to   |                   |   |            |        | L. Mariane Company |
| . (  |                   | *************************************** |            |        |                    |
| Became non-effective by  |                   |   |            | . 4    |                    |
|  | on day            | of 191                                  | - on       | day of | 191                |
| (Signature)  |                   |   |            |        |                    |
|  |                   |   |            | •      | <u>.</u>           |
| (Rank)   |                   |   |            |        | P.T.0              |

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination 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 |   |  |  |  |  |  |
|----------|------------------------------|---|--|--|--|--|--|
|          | Inoc. at It Jolius.          |   |  |  |  |  |  |
| 19.11.15 | Thec. RPGraham St. Rame.     |   |  |  |  |  |  |
| 9.12.15  | T.V. T Robraham. Lh Rames.   |   |  |  |  |  |  |
| 7.6.16   | Fit for Loneign Derine Hofw. | 1. 1. 1. 4  |  |  |  |  |  |
|          |                              |   |  |  |  |  |  |
|          |                              |   |  |  |  |  |  |
|          |                              |   |  |  |  |  |  |
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|          |                              |   |  |  |  |  |  |
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|          |                              | Consequent on a government of the sector of the sector of |  |  |  |  |  |
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|          |                              |   |  |  |  |  |  |
|          |                              |   |  |  |  |  |  |
|          |                              |   |  |  |  |  |  |

#### TABLE IV.—SERVICE TABLE.

•

| Station or Troopehip   | Date of<br>Arrival or<br>Embarkation | Date of<br>Departure or<br>Disembarkation | Station or Troopship | Date of<br>Arrival or<br>Embarkation  | Date of<br>Departure or<br>Disembarkation |
|--|--------------------------------------|---|----------------------|---------------------------------------|---|
| St John's nges.  |                                      |   |                      |                                       |   |
|  |                                      |   |                      | •                                     |   |
| ·  | /. <b>-</b>                          |   |                      |                                       |   |
| and the state of t | 4000 m                               |   |                      |                                       |   |
| 200 1 0 1, 20 3, 2 | 1 1 %                                |   |                      |                                       |   |
| William A  |                                      |   |                      | · · · · · · · · · · · · · · · · · · · |   |
|  |                                      | . 39                                      |                      |                                       |   |
| <u> Λ</u> του τ<br><u>τ</u>  |                                      | 6   |                      |                                       |   |
| · ·  |                                      |   |                      | i.                                    |   |
| All the second s |                                      |   |                      |                                       |   |
|  |                                      |   |                      |                                       |   |

| offence | Cases of<br>Drunken-<br>ness            | Offence      | Names of Witnesses | Punishment awarded | Date of award or<br>of order dispensing<br>with trial | By whom aware | Remarks A |
|---------|---|--------------|--------------------|--------------------|---|---------------|-----------|
|         |   | 1.00         |                    |                    |   |               |           |
|         | A                                       | t ·          |                    |                    |   |               | V         |
| <br>    |   |              |                    | 2                  |   |               |           |
|         | ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) | A 3          |                    |                    |   | -             |           |
|         | 1 12 15                                 | . 1) /       |                    |                    |   |               |           |
|         | X L                                     | 11/          |                    |                    |   |               |           |
|         |   | <del>'</del> |                    |                    |   |               |           |
| _       | <del></del>                             |              |                    |                    | -   |               | i         |
|         |   |              |                    |                    |   |               |           |

#### FIELD SERVICE.

## ORIGINAL.

|                                   |   | · · · · · · · · · · · · · · · · · · ·  | nentary sources:   | 58, VICTORIA ST.  LONDON, S.W.                         |
|-----------------------------------|---|--|--|--|
| REGIM<br>or<br>CORI               | A MEMBEOUTH                                   | DIAND REGIMENT.  | Squadron, Troop, Battery or Company  | A GOTT 1 1976  |
| legtl. N                          | lo. <b>1813</b>                               | RankPr   | Ivate  |  |
| Vame_                             | Coloz, A.                                     |  |  |  |
| ſ I                               | DateSept. 18                                  | th., 1916.   | <u> </u>   |  |
| Died I                            | Place Belgium                                 |  | 1  |  |
|                                   | Cause of Death *                              | Killed in Actic  |  |  |
|                                   |   |  |  |  |
|                                   | Nature and Date of                            | Report   | 25/9/16  |  |
|                                   |   | 2 2203   |  |  |
|                                   |   |  |  |  |
| 1                                 | By whom made                                  | O.C., Unit.  |  |  |
| 1                                 | By whom madestate if killed in action, or     | O.C., Unit.  |  | d operations or to fatigue, privation, or              |
| 1                                 | By whom madestate if killed in action, or exp | died from wounds received in a<br>cosure while on military duty, or f  | ction, or from illness due to field<br>from injury while on military duty  | d operations or to fatigue, privation, or              |
| 1                                 | By whom madestate if killed in action, or exp | died from wounds received in a course while on military duty, or f   | ction, or from illness due to field<br>from injury while on military duty  | d operations or to fatigue, privation, or              |
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| Specially                         | By whom made                                  | O.C., Unit.  O.C., Unit.  died from wounds received in a course while on military duty, or for the control of the course where the course while on military duty, or for the course where the course we would be control of the course where the course we would be control of the course where the course we would be control of the course where the course we will be control of the course where the course we will be control of the course where the course where the course we will be control of the course where the course where the course we will be control of the course where the course  | ction, or from illness due to field from injury while on military duty   | d operations or to fatigue, privation, or              |
| Specially                         | By whom made                                  | O.C., Unit.  O.C., Unit.  died from wounds received in a course while on military duty, or for the control of the course where the course while on military duty, or for the course where the course we would be control of the course where the course we would be control of the course where the course we would be control of the course where the course we will be control of the course where the course we will be control of the course where the course where the course we will be control of the course where the course where the course we will be control of the course where the course  | ction, or from illness due to field from injury while on military duty   | d operations or to fatigue, privation, or              |
| Specially  Burial                 | By whom made                                  | died from wounds received in a course while on military duty, or it yet received.  do d  (a) in Pay Book (A  | ction, or from illness due to fiel from injury while on military duty  | d operations or to fatigue, privation, or              |
| Specially  Burial                 | By whom made                                  | died from wounds received in a course while on military duty, or it yet received.  do d  (a) in Pay Book (A  | ction, or from illness due to fiel from injury while on military duty  | d operations or to fatigue, privation, or              |
| Specially  Burial  State was a wi | By whom made                                  | died from wounds received in a course while on military duty, or for the course while on the course while on the course while on the course while on the course while of the course while on the course while of the course while on the course while of the course while on the course while of the course while of t | ction, or from illness due to field from injury while on military duty that the control of the c | d operations or to fatigue, privation, or  Not to hand |
| State w                           | By whom made                                  | died from wounds received in a course while on military duty, or for the course while on the course while on the course wounds and course while on the course wounds and course while on the course while on the course would be compared to the course while on the | ction, or from illness due to field from injury while on military duty the committed of the committed from the from the front or leading to the comment.   | Not to hand.  No to hand.                              |
| State was a win                   | By whom made                                  | died from wounds received in a course while on military duty, or to the course while on the course wounds are considered as a separate duty of the course wounds and effects received and if any will is found to the course wounds are considered as a separate duty of the course would be compared to the course while on the course would be compared to the course while on the course would be compared to the course while on the course while out the course while out the course while of the course while out the cou | ction, or from illness due to field from injury while on military duty  riny Book 64)  (if at Base)  ocument  ed from the front or lead of the should be at once for   | d operations or to fatigue, privation, or  Not to hand |

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.

|                   | Signature of Officer in charge of Section Adjutant-General's | Ju      | ay  | 47mg     | _     | 16    | alor f | -   |
|-------------------|--|---------|-----|----------|-------|-------|--------|-----|
|                   | Office at the Base   | Officer | 1/0 | Records  | Reg.  | Inf.  | Sect.  | No. |
| Station and Date  |  |         | Sr  | i. Echel | on, G | .H.Q. | , B.E. | .F. |
| station and Date_ | 7/10/16.   |         |     |          |       |       |        |     |

# DUPLICATE, Army Form B. 2090A.

#### FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible 4 191 delay after receipt of notification of death on Army Form B. 213 or Army Form A. 35 or from other official documentary sources.

| REGIMEN<br>or<br>CORPS | TT - NEWFOU            | NDLAND REGIMENT.    | Squadron,<br>Troop, Battery<br>or Company                               | A Co | mpany                |
|------------------------|------------------------|---------------------|---|------|----------------------|
| Regtl. No.             | 1813                   | RankP               | rivate  |      |                      |
| Name                   | Coles, A               |                     |   |      | <b>Y</b>             |
| Date                   | Sept. 1                | 3th., 1916.         | )   |      |                      |
| Died Plac              | e_ Belgiu              | m •                 |   |      |                      |
| Cau                    | se of Death            | Killed in Acti      | on.   |      |                      |
| Nat                    | ure and Date           | of Report B 213,    | 23/9/16.  |      |                      |
|                        |                        | 0.C., Unit.         |   |      |                      |
| ( P                    | lage st-               | tt                  | action, or from illness due to fie<br>from injury while on military dut | y.   | cigue, privation, or |
| Burial D               | ate                    | do                  |   |      |                      |
| . В                    | y whom report          | ed                  |   |      |                      |
|                        |                        |                     | Army Book 64)   |      | nd.                  |
| State whet<br>a will o | her he leaves<br>r not | (b) in Small Book   | (if at Base)  | do   | • •                  |
|                        |                        | (c) as a separate d | document_   | do   |                      |
| Δ11                    | private docum          |                     |   |      |                      |
|                        |                        |                     | yed from the front or l   |      |                      |

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.

|                 | Signature of Officer in charge of Section Adjutant-General's |         | Treat o sur |           |      | Major for |       |      |
|-----------------|--|---------|-------------|-----------|------|-----------|-------|------|
|                 | Office at the Base   | Officer | 1/0         | Records   | Reg. | Inf.      | Sect. | No.a |
| tation and Date | 7/10/16.   |         | 3rd         | l. Echelo | n, G | .H.Q.,    | B.E.F |      |

Nº 1705

I. 00 + 66



## 1ST NEWFOUNDLAND REGIMENT

#### **ALLOTMENTS**

| Identity<br>Certificate<br>No. | Whether Wife, Child,<br>other Relative or<br>Friend     | Name (in full)         |                     | Address   | Amoun<br>(each pers |
|--------------------------------|---|------------------------|---------------------|---|---------------------|
| 11.45 Fott .                   |   | ms mitte 6             |                     | Longo Con State   |                     |
|                                | *                 |                        |                     |   |                     |
|                                | -   |                        |                     |   |                     |
| •                              |   |                        |                     |   |                     |
|                                |   |                        |                     | Total Allotment, \$   |                     |
| 8                              | This form must be digned by the Office equired payments | r Commanding Company a | mmanding ond handed | Company, signed by the Volum<br>to the Paymaster as authority | teer, coun          |

PAY LIST.

to 18 Leplember 1916. Voucher No.

| No.<br>Died<br>Deser | NON-EFFECTIVE ACCOUNT.  Regiment or corps  No. /8/5  Rank Pherale  On the /8 of a eptember 1910.  Deserted at  I Certify to the correctness of above in every particular.  (Commanding Squadron, Troop, Battery or Company.  STATEMENT OF ACCOUNT.  [Form 1.] |     |     |    |                        |    |     |    |  |  |  |  |
|----------------------|---|-----|-----|----|------------------------|----|-----|----|--|--|--|--|
|                      | ST  | ATE | MEI | T  | OF ACCOUNT.            | [F | orm | 1. |  |  |  |  |
| Date                 | Dr.   | £   | s.  | d. | Or.                    | £  | 8.  | d. |  |  |  |  |
| 0                    | Balance Dr. last month  |     |     |    | Balance Cr. last month |    |     | 7  |  |  |  |  |

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

Dated this

Balance due by the Paymaster

Balance due to the Paymaster .....

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 sont to War Office with Army Form B. 2090 or Army Form O. 1815.
 (b) Words in Italies to be struck out when there is no debtor balance.

W5486-733 200,000 8/16 HWV(P1201) Forms/01625/27 Coles, A.

1813

Hay Dept

#### NONSETERECUTIVE ACCOUNT.

Regiment or corps

1st Newfoundland

No. 1813

Rank Private

A Cole Name

Died (c)Intestate France on the 18thof Sentember

191 6.

Deserted at

on the of

I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,

|      | ST                           | ATE | Men | T   | OF ACCOUNT.  |                   | orm | 1. |
|------|------------------------------|-----|-----|-----|--|-------------------|-----|----|
| Date | Dr.                          | 2   | 81  | d.  | Or.  | £                 | ð.  | d. |
|      | Balance Dr. last month       |     |     |     | Balance Cr. last month 18/9/16  Pay days at from to  Proficiency, Service or good conduct pay days at from to  Messing allowance days at from to   | 5                 | 0   | 2  |
|      | Consolidated stoppage        |     |     |     | This account is it accordance with inform received at the Pay & Office the | ati<br>Rece<br>is | ord |    |
|      | Balance due by the Paymaster | 5   | 0   | ω « | Balance due to the Paymaster   | s                 | 0   | 2  |

ertify that the above account is correct in every particular, and that the is correctly chargeable against the Public (6).

191

(b) Hims state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed harvis, if not girtady sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italies to be struck out when there is no debtor balance.

to 18th September 1916. Voucher No.

#### NON-EFFECTIVE ACCOUNT.

1st Newfoundl and Regiment or corps A Cole Name 1813 Rank Private No. on the 18thof September Died (a) Intestate 191 6. France of 191 on the

Deserted at I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,

|      |                              |    |    |    | ( Buttery or Comp   | independent by | 12/2/1965 |    |
|------|------------------------------|----|----|----|---|----------------|-----------|----|
|      | STA                          | TE | ME | T  | OF ACCOUNT.   | E              | 'orm      | 1. |
| Date | Dr.                          | £  | 8: | d. | Or.   | £              | 8.        | d. |
|      | Balance Dr. last month       |    |    |    | Balance Or last month 18/9/16  Pay days at from to  Proficiency, Service or good conduct pay days at from to  Messing allowance days at from to  This account is i accordance with inform received at the Pay & Office to b / 2 / land therefore subject to a | ati<br>Rec     | ord       |    |
|      | Consolidated stoppage        |    |    |    | ment if, and as may be necessary.   | for            | und       |    |
|      | Balance due by the Paymaster | 5  | 0  | 2  | Balance due to the Paymaster  |                |           |    |
|      | £                            | 5  | 0  | 2  | £   | 5              | O         | 2  |

| I hereby Certify | that the a | bove account    | is correct in | every particular, | , and that the |
|------------------|------------|-----------------|---------------|-------------------|----------------|
| thereby Certify  | is i       | correctly chara | eable against | the Public (b).   |                |
| 390 Surance of 2 |            |                 |               |                   |                |

Paymaster. 191

(b) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed thereto if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italies to be struck out when there is no debtor balance.

#### NON-EFFECTIVE ACCOUNT.

Regiment or corps 1st Newfoundland

No. 1813 Rank Private Name A Cole

Died (n) Intestate at France on the 18th of September 1916.

Deserted at on the of 191 .

I Certify to the correctness of above in every particular.

| er ar sa | STA                          | TE | ME | NT | OF ACCOUNT.   |            | Form | 1. |
|----------|------------------------------|----|----|----|---|------------|------|----|
| Date     | Dr.                          | £  | 8. | d. | Or.   | £          | 8.   | d. |
|          | Balance Dr. last month       |    |    |    | Balance Cr. last month .18/9/16   | 5          | 0,   | 2  |
|          |                              |    |    |    | fromto  It allowance  mount produced by the sale of Effects from Form 2  mount of Savings Bank balance, including interest (if no balance, to be so stated) | <b>V</b> \ |      |    |
|          |                              |    | (  |    | Deferred Pay or Gratuity  |            |      |    |
|          | Balance due by the Paymaster | 5  | 0  | 2  | Balance due to the Paymaster  |            |      |    |
|          | £                            | 5  | 0  | 2  | £   | 5          | o.   | 2  |

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

191 . Paymaste

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed herebo if not already sent to War Office with Army Form B, 2090 or Army Form O. 1815.

(b) Words in Italies to be struck out when there is no debtor balance.

#### Casualty Form-Active Service.

Regiment or Corps\_\_\_\_ Regimental No. 1813 Rank 96 Name Enlisted (a) 3.10.15 Terms of Service (a) Duration of Mar Service reckons from (a) 3.10.15 Date of promotion to) Date of appointment) Numerical position on) present rank to lance rank roll of N.C.Os. Extended\_\_\_ Re-engaged\_ \_\_\_\_ Oualification (b) Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as taken from Army Form B. 213, Army Form A. 36, or other official documents. Date reported on Army Form B. 213. Army Form Place From whom A. 36, or in other official documents. The Date received authority to be quoted in each case.

3rd Edelon. G. A. J. B. E. F.

Squadron,
Troop, Battery or Company

#### FIELD SERVICE.

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.

Newfoundland

Wt. 12029/4111 400,000 12/15 JFW

| Regtl. No. /8/3                         | Rank Frevete   |   |
|---|--|---|
| Name 60                                 | les. A.  |   |
| Date Jept-                              | 18th 1916  |   |
| 6                                       |  |   |
| Died Place Sele                         | num  |   |
| Cause of Death*                         | Relled in action   |   |
| Nature and Date of                      | Report 32/3 23.9.  | 16  |
| By whom made                            | O. E. Unit   |   |
| Specially state if killed in action, or | died from wounds received in action, or from illness due<br>sure while on military duty, or from injury while on milit | s to field operations or to fatigue, privation or |
| expo                                    | Safe while on mineary days, or nom injury while on mine  |   |
| Place                                   | Not yet received   |   |
| D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |  |   |
| Burial { Date                           |  |   |
| By whom reported                        |  |   |
|   |  | Not to hand                                       |
|   | (a) in Pay Book (Army Book 64)   | dior would  |
| State whether he leaves a will or not   | (b) in Small Book (if at Base)   | do  |
|   | (c) as a separate document   | do  |
|   |  |   |
| All private documen                     | ts and effects received from the front   | or hospital, as well as the Pay                   |
| Book, should be examined, a             | nd if any will is found it should be at one  | e forwarded to the War Office,                    |
| Any information rec                     | eived as to verbal expressions by a dece   | eased soldier of his wishes as to                 |
|   | ould be reported to the War Office as soo  |   |
|   | Report is to be sent to the Fixed  |   |
|   | Epeditionary Force, or Field Disbursing (  |   |
|   | l's Pay Book (after withdrawal of any  |   |
|   | the Base, it should be forwarded to the  |   |
| Signatur<br>of Sect                     | e of Officer in charge<br>ion Adjutant-General's \   | But Maja  |
| Station and Date 7.10                   | 1 1/ 12.   | ords Reg. Inf. Sect.                              |

DET BOAR OF EDNSION COMMESSIONERS OF NELD.

37 may 1919 master & Officer i/c Records, St. John's Will.

DEAD AND HISSING MEN.

No. 1813 Rank / ta.

Name a. A Coles

I have the honour, by direction to advise you that a pension has been awar -ded to the father of the marginally noted, as follows:

加州。政保的

Hamo Matthew Coles secress Howers love. Pension \$3400 Sexmonts Pension commences 16.8-16

Kindly govern yourself accordingly, and advise me what deductions will have to be made.

> I have the honour to be. sir,

31/5/19 3. Bales Barbo Mouther leave Po Barbo Your obedient servent

19/9/16 31/5/19 @ 60 x \$591.00

THE BOARD OF

#### PENSION COMMISSIONERS

FOR NEWFOUNDLAND

HON. J. A. CLIFT. K.C., C.B.E., MAJOR W. H. PARSONS, M.C., R.A.M.C.



In reply refer to

St. John's,

Marsh April 3/20

To :- The Paymaster & O. 1/c Records. From:- The Board of Pension Commissioners for Nfld.

1813 A. Coles, deceased.

Enclosed please find cheque for \$591.00 being refund of amount paid in continuance of the above mentioned deceased soldier's allotment.

Kindly acknowledge receipt of this amount.

MA STATE OF THE PROPERTY OF TH

Asst. Se

LBD.

May 3, 1920

From: Paymaster

To Board of Pension Commissioners for Mild.

#### ReNo 1813, A. Coles, deceased

I have been directed to acknowledge receipt of your letter of April 3, (C.1746), enclosing chaque for \$591.00 refund of amount paid in continuance of the above man's allotment, and to thank you for same.

Capt.

Nev. 20, 1919

Secretary, Beard of Fersion Commissioners.

1813 Pte.A.Coles.

Referring to your letter of May 27,1919, I beg to state that the amount paid in continuance of this soldier's Alletment is Five hundred and ninety one dellars (\$591.00).

Yours truly

"a jo r

Paymaster,

June 29th.1917.

Mr. Matthew Cole,

Savage Cove,

Straits of Belle Isle.

Dear Sir:-

I enclose herewith cheque for \$30.37, being the balance of the estate of, your late son, No. 1813, A. Cole.

Yours truly,

Lieut. D/Paymaster.

[P.T.O.

# Casualty Form—Active Service. Army Form B. 103.

|         |                             | Regiment or Corps /: he   | wpounda        | nd.                 | 1810 1 1810 1 1910 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                                 |              |
|---------|-----------------------------|---|----------------|---------------------|--|--------------|
| Regine  | ental Ro.                   | 3/3 Rank Privale  | Name Coles,    | a.  =               | OCT 1. TOTAL   | -            |
| Enliste | ed (a) 3. 10.1              | Terms of Service (a) Dural  | ion of low ser | rice reckon         | s from (a) 3 10.15   |              |
| Date o  | of promotion<br>resent rank | Date of appointment to lance rank   | nent(          | _) Numeri<br>roll c | cal position on }  of N.C.Os.  | <del>-</del> |
|         | Report                      | Record of promotions, reductions, transfers,  |                |                     | Remarks  |              |
| Date    | From whom received          | 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                | taken from Army Form B. 213,<br>Army Form A. 36, or other<br>official documents. |              |
|         | ruut<br>(                   | Lan Southampta<br>Dig Konen<br>Jours Hattakon   | -144           | 16                  | B-213. 19.8.16   |              |
| 16:     | - 80-                       | Level undetran  | Belgiun        | 189.16              | B213.  |              |
|         |                             |   | 1              |                     |  | d            |
| In/     |                             | ·······································   |                | Treat               | mant.  |              |
|         |                             |   |                | G. H. Q             |  |              |
|         |                             |   | +              |                     |  |              |

#### Receipt for Army Book 64 .

| No |            | /3   | Name . | Coles.   |     |    |    |    |     |      |
|----|------------|------|--------|----------|-----|----|----|----|-----|------|
| то | Certify th | at I | have   | roceived | the | AB | 64 | of | the | ahov |

word Matthew Coles.

Place. Savage Dave....

named Soldier.

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

B

#### Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Regiment of /st Newfoundland Signature of O. C. Company 1 9.13 [686] W5017/2124 1000m 6/15ss 93 56 Good Conduct Badges, Service Pay or Proficiency Pay Regimental Number and Name 22 years Religion Place and Date) Date Joined Joined Date Period of Date Cases of Drunk Date of Names of OFFENCE Punishment awarded Place Rank By whom awarded REMARKS Offence Witnesses 1.5-16 Killed in action 18 36 To be carried over