



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4856 Name Augustus Miles Corps C of E

Questions to be put to the Recruit before Enlistment.

1. What is your name? Augustus Miles
2. What is your full Address? Bonaville
3. Are you a British Subject? Yes
4. What is your age? 21 Years - Months
5. What is your Trade or Calling? Electrician
6. Are you Married? No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? Name James Wickes Corps C of E
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? Yes

I, Augustus Miles 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.

A SIGNATURE OF RECRUIT.

James Wickes Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St Johns on this 1st day of May 1918

Signature of Attesting Officer W. Hammett

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 compiled with. I accordingly approve, and appoint him to the 1st May 1918

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

Date 1st May 1918 Place St Johns } 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 was enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) Augustus Miles re-enlisted in the (Regiment) C of E on the (Date) 1st May 1918



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4856 Name Augustus Miles Corps C. of C.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Augustus Miles
- 2. What is your full Address? 2. Bonaville
B.B.
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 29 Years - Months
- 5. What is your Trade or Calling? 5. clerk
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. yes
- 9. Are you willing to be enlisted for General Service? 9. yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. yes

I, Augustus Miles 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.

A Augustus Miles SIGNATURE OF RECRUIT.
1-5-18 James Arlie Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Augustus Miles 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.

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St Johns on this 1st day of May 1918

Signature of Attesting Officer James Arlie

† CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.

Date 191
Place } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) re-enlisted in the (Regiment) on the (Date)

Dec. 28th, 1919



C.R. 4856

DEPARTMENT OF MILITIA
ST. JOHN'S, NEWFOUNDLAND

C.R.

R
Dear Madam

I am forwarding to you herewith under registered cover a Memorial Scroll, which is intended as a solace for bereavement suffered and as a memento of one who laid down his life for right and freedom. And we are commended by His Majesty the King to forward to you also the accompanying Message.

I should be glad if you will kindly acknowledge receipt of both at your early convenience.

Yours faithfully,

W. A. Readell
Lieut.-Col.,
Chief Staff Officer.

Mrs. Susan Miles
Bonavista

Received enclosure OK.
(Mrs) Susan Miles

C.R. 4856

August 25th 1919.

Mrs. Susannah Miles,
Bonavista.

Dear Mrs. Miles:

I am sending under a separate cover, photograph of the grave of your late son No. 4856 Pte. A. Miles, who was buried in Magdalen Hill Cemetery near Winchester, Hants Grave No. 497, which we received from London a few days ago.

Yours faithfully,

Lt. Col.
Chief Staff Officer.

CR. 4856

RECEIVED FROM THE DEPARTMENT OF MILITIA.

ONE PACKAGE CONTAINING EFFECTS OF THE LATE NO. 4856
PTE. AUG. MILES.

SIGNED *Susanah Miles.*

DATE *Feb. 22nd 1919..*

Extract from Registered Receipt, dated Feb. 17th., 1919.

**One package. No. R. 1598 Mrs. S. Miles,
Bonavista.**

C.R. 4856

Feb. 14th 19.

Mrs. Sarah Miles,
Benavista.

Dear Mrs. Miles:

It is my regrettable duty to have to forward to you one package containing effects which belonged to your late son No. 4856 Pte. Aug. Miles, of the Royal Newfoundland Regiment.

Herewith enclosed you will find receipt, kindly sign 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,



Lieut.

Casualty Officer.

No. of Paper 1387**PERSONAL EFFECTS.**Name Miles, A. H.**C.R.** 4856Rank PrivateRegiment ROYAL NEWFOUNDLAND REGIMENT.

Article	Where stored	Notified by
1 Package <i>containing:-</i> 1 Prayer Book 1 Note Book 8 Letters 4 Photos. 1 P. Card.		<i>Shipped to Newfoundland.</i>
	Final disposal	

Remarks :- *Died of Pneumonia 1/10/18*Next of Kin:- *Mother:- Mrs Susan Miles,
Bonavista*

4856

Nov. 16th, 1918

Mrs. Susan Miles,
Bonavista.

Dear Madam:-

I beg to inform you that information has been received by this Department from Pay & Record Office, London, to the effect that your son, No. 4856, Pte. H.A. Miles, was buried on Oct. 4th, 1918 in Grave No. L. 97, Magdalen Hill Cemetery, near Winchester. Assuring you of my deepest sympathy in your bereavement.

Yours faithfully,

Lieut.

Casualty Officer,

For Minister of Militia.

1944
C.R. 4856
~~NEWFOUNDLAND CONTINENT~~

CASUALTIES



GRAVESITE:

No. 4856 PTE. A.H. MILES was buried in
the Military Cemetery, Magdalen Hill, Winchester,
Hants.

Authority:-

Memo from O.C. Mil. Hospl,
Hazeley Down, Winchester,
dated 4/10/18.

C.R. 4856
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Gable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address Dept of Militia

Line Number	Rcd	By	Sent	by	Check

Dated Church of England Minister or School Teacher Bonavista
To Oct. 3rd 1918

Regret to inform you that Record Office, London reports to-day that no. 4856, Private Augustus Miles died at Heseley Down Camp Hospital Winchester England on October 1st from pneumonia Please inform next of kin Mrs. Susan Miles

J.R. Bennett
Minister of Militia.

R. Counter No. 4856

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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
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Dated Oct. ~~22~~²³, 1918

To Mrs. Suzan Miles. Bonavista

Regret to inform you that Record Office, London, officially reports No. 4856, Private Augustus Miles died at Hazley Down Camp Hospital, Winchester, England on Oct. 22, from pneumonia

Upon receipt of further information I shall immediately wire you.

J.R Bennett

Minister of Militia.

NOTE FOR OPERATOR:

This Message is not to be delivered until Receiving Office notifies that Message to **Church of England Minister or School Teacher**

has been received and acted upon

FOR TYPEWRITER

C.R. 4876
L. 1888 No. 76

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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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 _____ **Militia Department**

Line Number	Rcd	By	Sent	by	Check

Dated **October 1st, 1918**

To **Mrs. Susan Miles, Bonavista**

Regret to inform you that Record Office, London, officially reports **No. 4856 Private Augustus Miles is at Hazeley Camp Hospital seriously ill pneumonia September 30th**

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

J. R. Bennett.

Minister of Militia.

FOR TYPEWRITER

C.R. 4856

Extract from Telegram received from Synoptical,
London, dated October 3rd, 1918

Died at Hazeley Camp Hospital October 1st, 1918
4856 Miles.

C.R. 4856

Extract from Casualties received from Pay &
Record Office, London, dated October 2nd., 1918.

~~1240~~ Pte. A Miles.

4856 " .

died from pneumonia at the Military Hospital, Hazeley
Down Camp. on 1/10/18.

C.R. 4856

Extract from Telegram received from Synoptical,
London, dated September 30th, 1918

At Hazeley Camp Hospital seriously ill September
30th Pneumonia #4856 Pte, Miles.

C.R. 4856

Extract from Daily Orders Part 11. from Unit The Royal Nfld.,
Regiment, St. John's, dated June 14th 1918.

4856 Pte A. Miles

Embarked for Overseas with draft 11-6-18.

C.R. 4836

Extract from Daily Orders part 11, from Unit The Royal
Wfld. Regt. St. John's, dated May 2nd, 1918.

#4856 Pte. Augustus Miles.

Attested for General Service with the Royal Wfld. Regt.
from 1/5/18.



Q. Miles

4856

P. + P. 6

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

MEDICAL HISTORY

Surname Miles OF St John's Christian Name Augustus

Table I.—GENERAL TABLE.

Birthplace:—Parish Bonavista County Aflda

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	1	May		191
	at	St John's	at	
Declared Age	29	years		days
Trade or Occupation	Clerk			
Height	5	feet 3 1/2		inches
Weight		118		lbs.
Chest Measurement	Girth when fully expanded		35	inches
	Range of Expansion		3	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/		/	
When Vaccinated				
Vision	= 6/6		R.E.—V=	
	L.E.—V= 6/6		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>L. M. Paterson</u>			
(Rank)	<u>Major</u>			
Enlisted	at	St John's	at	
	on	1 day of May	on	day of 191
		Corps.		Regtl. No.
Joined on Enlistment	<u>The Royal 1856</u>			
	<u>Aflda Regt</u>			
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)		191		191
(Rank)				

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospitals will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Hazley Down	24	9	18	1	10	18	Pneumonia-lobar	7	Consolidation of lower lobe R. side, which spread to whole of R. lung. Crisis 7 th day. Death occurred on 8 th day of exhaustion & heart failure.	C. C. Twissian Capt. R. N. M.

OK
No. _____

(If replying please quote
above No.)

Army Form B. 104-90A

Newfoundland Record Office,

58 Victoria St Station.

Oct 8 1918.

SIR

Madam

I regret to have to inform you that a report has this day been received from the War Office to the effect that (No.) *933*

(Rank) *Serjeant* (Name) *Miles W.P.*

(Regiment) *Royal Newfoundland* is at

the 7 Sty. Hospital, Boulogne France suffering
from *Gas Poisoning*

Any further information received in this office as to his condition or progress will be at once notified to you. *if of a serious nature.*

I am,

SIR,

Your obedient Servant,

*74 Green St
Apr*



Officer-in-charge of Records.

(This portion of the Form can be used for any purpose where a Nominal Roll is necessary to communicate between the Station Hospital and the Corps.)

Corps	Regt. No.	Rank	Names	Age	Disease	Date of		Remarks
						Admission	Discharge	

2401.

Officer in Records
Newfoundland Contingent
58 Victoria Street
London. S.W.1



Medical Officer.

Report of Death of a Soldier to be forwarded to the War Office immediately after the date of Death.



REGIMENT or CORPS Royal Nfld. Regt. Squadron, Troop, Battery or Company 6 Company

Regtl. No. 4856 Rank Private

Name Moiles, Augustus

Date and Place of Birth 1/5/1899 Bonavista

Trade or Calling Black

Enlisted—When and Where 1/5/18 St. Johns

Died { Date 1/10/18
Place Hareley Down Camp Hospital Winchester.
Cause of Death Pneumonia

* Specially state if 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 (including heat-stroke) while on military duty (annex a separate statement showing fully the circumstances in which the injury was received).

Account, or (in India) Casualty Return, in which the non-effective balance will probably be included _____

Whether he leaves a Will or not Not known
(Any Will left should be forwarded with this Report.)

Whether in receipt of an annuity for meritorious service, or distinguished conduct } no

COPIES SENT		
To	No.	DATE
M. of M.	1574/21 R+C	29/1/1918
O.C. 1st. Bn.		
2nd. Bn.		

Medals, if entitled to any, and how disposed of no

Whether known or supposed to have been married } Single

If married, whether on married Establishment } _____

Name and address of widow and children, if any _____

Latest information as to Kin (if any known) with address } Wife, Miss Moiles (Mother)
Bonavista.

Small Book to be forwarded with this report. If not, explanation must be given.

I hereby certify that the next of kin has been informed.

J. M. Egan Commanding
St. John's, Nfld. 2/10/18.

Squadron _____
Troop 2nd Bn. Royal Newfoundland Regiment.
Battery _____
Company _____

Transmitted 2nd Oct. 1918.

M. J. Barton LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Report of Death of a Soldier to be forwarded to the War Office immediately after the date of Death.

REGIMENT or CORPS } Royal Nfld Regt. Squadron, Troop, Battery or Company } "Q" Company.

Regtl. No. 4856 Rank Private

Name Miles, Augustus

Date and Place of Birth 1/5/1889 - Bonavista

Trade or Calling Clerk

Enlisted—When and Where 1/5/18 St. John's.

Died { Date 1/10/18 Place Hazeley Down Camp Hospital, Winchester. Cause of Death* Pneumonia

*Specially state if 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 (including heat-stroke) while on military duty (annex a separate statement showing fully the circumstances in which the injury was received).

Account, or (in India) Casualty Return, in which the not-effective balance will probably be included

Whether he leaves a Will or not Not known (Any Will left should be forwarded with this Report.)

Whether in receipt of an annuity for meritorious service, or distinguished conduct No.

Medals, if entitled to any, and how disposed of No.

Whether known or supposed to have been married Single

If married, whether on married Establishment

Name and address of widow and children, if any

Latest information as to Kin (if any known) with address Mrs. Susie Miles, (Mother) Bonavista.

Small Book to be forwarded with this report. If not, explanation must be given.

I hereby certify that the next of kin has been informed.

Geo. M. Emerson, Lieut. Colonel } 2nd Bn. Royal Newfoundland Regiment

Station and date Winchester 2/10/18. Transmitted End Oct. 1918.

B.J. Barton, Lieut. Colonel, 2nd Bn. Royal Newfoundland Regiment.

Report of Death of a Soldier to be forwarded to the War Office immediately after the date of Death.

REGIMENT or CORPS } Royal Wfld Regt. Squadron, Troop, Battery or Company } "C" Company.

Regtl. No. 4856 Rank Private

Name Miles, Augustus

Date and Place of Birth 1/5/1889 - Bonavista

Trade or Calling Clerk

Enlisted—When and Where 1/5/18 St. John's.

Died { Date 1/10/18 Place Hazley Down Camp Hospital, Winchester. Cause of Death* Pneumonia

*Specially state if 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 (including heat-stroke) while on military duty (snaxx a separate statement showing fully the circumstances in which the injury was received).

Account, or (in India) Casualty Return, in which the non-effective balance will probably be included

Whether he leaves a Will or not Not known (Any Will left should be forwarded with this Report.)

Whether in receipt of an annuity for meritorious service, or distinguished conduct No.

Medals, if entitled to any, and how disposed of No.

Whether known or supposed to have been married Single

If married, whether on married Establishment

Table with 3 columns: TO, NO., DATE. Includes handwritten entries: 15/4/21, 29/1/19, and initials 'A.H.'.

Name and address of widow and children, if any

Latest information as to Kin (if any known) with address Mrs. Susie Miles, (Mother) Bonavista.

Small Book to be forwarded with this report. If not, explanation must be given.

I hereby certify that the next of kin has been informed.

Geo. M. Emerson, Lt. Col. Commanding { Squadron, Troop, Battery, Company } 2nd Bn. Royal Newfoundland.

Station and date Winchester 2/10/18. Transmitted 2nd Oct. 1918.

B. J. Barton, Lt. Col. Commanding. Regiment

FORM K

Nº 4001



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Augustus Miles, Regl. No. 4856

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and twelve Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} or Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} or Persons concerned, viz.:

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3869	mother	Mrs Edmunda (Susan) Miles	Peninsula I I	
Total Allotment, \$				<u>609</u>

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) [Signature]

Officer Commanding
Company

(S) Augustus Miles

(Rank) Pte

St John's
Germany 16th 1918

FORM K

No 4001 a



1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Augustus Miles, Regl. No. 4856
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} or Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} or Persons
 concerned, viz :

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	Name (in full)	ADDRESS	AMOUNT (each person)
3869	Mother	Mrs Edmund (Susan) Miles	Ronanville F B	
Total Allotment, £				<u>609</u>

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.)

[Signature]

Officer Commanding
 Company

(Sig.)

[Signature]

(Rank)

[Rank]

St John's
Permay 16th 1918

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet. 1/3

FORMS
121
39-

Regiment of Royal Newfound Land

Signature of O. C. Company J. James

Regimental Number and Name		Enlistment		Trade
No. <u>Miles</u> <u>4456</u> . <u>9</u>		Age on <u>29</u> years <u>00</u> months		<u>Clerk.</u>
Joined _____ Date _____		Place and Date of Enlistment } <u>St. Johns</u> <u>1.5.18</u>		Religion <u>Ch. S.</u>
Joined _____ Date _____			Period of } with Colours _____ years. with Reserve _____ years.	
Joined _____ Date _____				

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS

To be carried over

Army Form B. 121.

To: The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amount set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of the year.
Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
1856	Pte	Miles, A	£250	A Miles

I have the honour to be, Sir,
Your obedient servant.

Date

July 1/18

A Miles

Office 4856 Pt A Miles

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

Kindly acknowledge receipt of attached cheque.

Hazeley Down Camp,
Winchester,
Oct. 5th 1918.

W. J. Barber

LIEUT. COLONEL.

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

NEWFOUNDLAND CONTINGENT
PAY & RECORDS OFFICE

REF. NOS. IN

867

RECD

9

Oct 1918

ACK'D

DATE

REF. NOS. UNIT

16558

BRETAGNE

COMP

REGT

NO. 2

BATT

NO. 1

COMP

16035/1788/R.&.S.

MEMORANDUM.

From
O.P. & O. i/c Records,
Newfoundland Contingent.

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

To
Officer Commanding,
2nd Bn. R. Newfoundland Regt.,
Winchester.

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

ANSWER.

Pay & Record Office.

4th October, 1918.

Oct. 12th 1918.

4856 PTE. A. H. MILES, dec'd.

Will you kindly furnish all documents relating to this man who died at Hazeley Down Hospital on 1/10/18? Also kindly state with regard to his burial:-

Herewith information as requested.

- (a) Number of Grave
- (b) Name of Cemetery and Place
- (c) Date of burial.

- (a) L 97.
- (b) Magdalen Hill Cemetery, near Winchester.
- (c) 4th October 1918.

A. H. Miles Major,
Chief Paymaster & O. i/c Records.

NEWFOUNDLAND
PAY & RECORD OFFICE
REF. 8876
14 OCT 1918

H. J. Barker LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

HA/NV

*Casualty
Extracted
14/1/18*

General
P.S.



NEWFOUNDLAND CO. REG. & RECORDS
Ref. Nos. 8379
Rec'd OCT 1918
Adk. I
Ref. Nos. 001

To Officer in Records.
Newfoundland Regt.
38 Victoria St. S.W.I.

Further to my notification on a J.A.27 re death of 4856 Miles Pte A.H. forwarded under my number 2701 on October will you kindly note that the above named is buried in Military Cemetery Magdalen Hill Winchester.

~~Comd. Extracted~~
10/18/18

C Morse
MAJOR, R.A.M.C. (S.R.)
OFFICER in CHARGE MILITARY HOSPITAL.

Miles, A

4856

Gay Sept.

ORIGINAL

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

ROYAL NEWFOUNDLAND REGIMENT.

No. 4856

Rank Private

Name Miles A.

Died (Intestate

at Hazley Hospital,

on the 1st of October

1918 .

Deserted at

Winchester.

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.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month .1/10/18.....	2	4	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			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	2	4	4	Balance due to the Paymaster			
		£	2	4	4	£	2	4

This account is in accordance with advices received at the Pay & Record Office to / / and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED

P. J. J.

30 APR 1919

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

Dated at

this

day of

191

- (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. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL

PAY LIST to 191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps ROYAL NEWFOUNDLAND REGIMENT
 No. 4856 Rank Private Name Miles A.
 Died^(a) Intestate at Hasley Hospital, on the 1st of October 1918.
 Deserted at Winchester, 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.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 1/10/18.....	2	4	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			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	2	4	4	Balance due to the Paymaster			
		£	2	4	4	£	2	4

This account is in accordance with advices received at the Pay & Record Office to APR 1919 and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED
 P. V. J.
 30 APR 1919

I hereby Certify that the above account is correct in every particular, and that the Debtor's balance of £ 2 4 4 is VICTORIAN correctly chargeable against the Public^(b).

Dated at 30 APR 1919 day of 1918
 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. 2030 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL

PAY LIST

to

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **ROYAL NEWFOUNDLAND REGIMENT**
 No. **4856** Rank **Private** Name **Miles A.**
 Died (or Intestate) at **Hazley Hospital,** on the **1st** of **October** **1918**
 Deserted at **Winchester,** 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.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 1/10/18	2	4	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			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	"				Savings Bank balance, including rest (if no balance, to be so stated)			
	Conn				Pay or Gratuity			
	Balance due by the Paymaster	2	4	4	Balance due to the Paymaster			
		£	2	4		£	2	4



CHECKED
P. J. A.
30 APR 1919

I hereby Certify that the above account is correct in every particular, and that the balance of **£ 2 4 4** on VICTORIA is correctly chargeable against the Paymaster.

Dated at **LONDON** this **30** day of **APR** 1919

W. H. Miles
PAYMASTER & OFFICER IN CHARGE OF RECORDS
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. 1815.
- (b) Words in Italics to be struck out when there is no debit balance.

(Not for Field Service)

Army Form B. 2090.

Report of Death of a Soldier to be forwarded to the War Office immediately after the date of Death.



REGIMENT or CORPS } Royal Nfld. Regt. Squadron, Troop, Battery or Company } "B" Coy

Regt. No. 4256 Rank Private

Name Miles Augustus

Date and Place of Birth 14/1889 Bonaville

Trade or Calling Cook

Enlisted—When and Where 1915 St. John's

Died { Date 1/10/18 Place Stanley Down Camp Hospital, Winchester. Cause of Death Pneumonia

*Specially state if 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 (including heat-stroke) while on military duty (annex a separate statement showing fully the circumstances in which the injury was received).

Account, or (in India) Casualty Return, in which the non-effective balance will probably be included

Whether he leaves a Will or not Not known (Any Will left should be forwarded with this Report.)

Whether in receipt of an annuity for meritorious service, or distinguished conduct No

Medals, if entitled to any, and how disposed of No

Whether known or supposed to have been married Single

If married, whether on married Establishment

Name and address of widow and children, if any

Latest information as to Kin (if any known) with address Mrs. Susan Miles (Mother) Bonaville

Small Book to be forwarded with this report. If not, explanation must be given.

I hereby certify that the next of kin has been informed.

Signature: J. M. ... Station and Date: Winchester 2/10/18. Transmitted 2nd Oct. 1918



Signature: Lt. Barton, Commanding, 2nd Bn. Royal Newfoundland Regiment

SEPARATION ALLOWANCE.

Claimant..... *Miles, Susannah (mother widow)*
On account of *Aug. D. Miles* No. *4856* Rank *Pvt.*

Decision..... *Approved.*

J. R. Bennett
W. F. Rydell Lt Col
M. Howley Capt

Date..... *5/5/19*

Instructions.....

Allotment of *60¢* per day payable to *Mrs Edmund Miles*
his *Mother* from *1/6/18* to *still current*
Discontinued on account of

..... *A. H. Keegan*.....

NOTICE.ROYAL NEWFOUNDLAND REGIMENT.MOTHER.

(Separation Allowance Branch)

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

"The Paymaster"
Separation Allowance Branch,
St. John's Bldg.

1. Name in full of soldier. Rank. Reg't. or Unit. Regt. No.
Augustus H. Miles *Pte* *Regt 11 F.L.D.* *4856*
2. Age of soldier. Married or Single.
29 years *Single*
3. Name in full of mother. Age. Occupation. Permanent Address.
Susannah Miles *60* *—* *Bonaville*
4. Give name of your husband. Age. Occupation Where Employed.
Edmund Miles *—* *Dead* *—*
5. If your husband is not supporting you state the reason.
— Dead —
6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue.) *—*
7. If you are a widow, state date and place of death of your husband. *Feb 1901. Bonaville*
8. Have you married again since death of above mentioned husband?
No.
9. Names of your other children. Address in full. Age. Occupation Married or Single.
Archibald Miles, Bonaville, 32. Fisherman. Married.

10. State amount earned by (a) Yourself *Nil* 2/-
(b) Your husband. _____
-
11. State amount and source of any other income. *Nil*
-
12. State value of real property belonging to you and your husband. *House \$ 500 ⁰⁰/₁₀₀*
-
13. State value of personal property belonging to you and your husband. *Nil*
-
14. If husband is dead state value of real and personal property left by him. *Nil*
-
15. Actual amount contributed by soldier during the year prior to enlistment. *\$ 500 ⁰⁰/₁₀₀*
-
16. Was this amount contributed weekly or monthly. *Monthly*
-
17. Did this amount include payment of son's board etc. *Yes*
-
18. State your son's trade or occupation prior to enlistment. *Col. Genl*
-
19. State amount of his wages per week. *\$ 15 ⁰⁰/₁₀₀*
-
20. State name and address of his last employer. *Gas. Ryan. Poicta*
-
21. State amount of monthly support from son since enlistment. *\$ 15 ⁰⁰/₁₀₀*
-
22. State amount of allotment received by you from son since enlistment. *60 cents per week*
-
23. State from what date did you receive allotment? *July 1918.*
-
24. Actual amount contributed by other children. Weekly *Nil* Monthly. *Nil.*
-
25. Are any of these children in the employ of you or your husband? *No.*

- 3/-
26. If not receiving support from other children, state cause. Explain fully. *Don married with family of two children*
-
27. With whom are you residing at present? *Alone*
-
28. Have you made a previous claim for Separation Allowance. If not, why? Give particulars. *Wrote twice to Separation Allowance Dept. but got no reply*
-
29. Are you already in receipt of Separation Allowance from any source? If so, how much? *no*
-
30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much. *No.*
-
31. Was the soldier at the time of his enlistment an employee of the Nfld. Government. *No.*
-
32. In what capacity and in what place? _____
-
33. Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much. _____

I herewith make this solemn Declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in Virtue of the Evidence Act.

Signature of Applicant..... *Susannah Miles*

Place of Residence..... *Bonaville, Newfoundland*

Declared and subscribed before me at..... *Bonaville*

this..... *twentieth eighth* day of..... *April* 1914

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. } *John Rowse*

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman... *Augustus E. Barry, M.A.*

Signature of member of the Patriotic Fund Committee. *John Rowse*

May 10th., 1919

Mrs. Susannah Miles,
Bonavista.

Dear Madam:-

Referring to your application for retroactive Separation Allowance, I beg to state that same has been approved. I enclose cheque for Two hundred and twenty dollars (\$220.00) in payment thereof:

Yours truly

Captain,
Paymaster & O.i/c Records

The Bank of Nova Scotia,

4636

BONAVISTA, N.F.L.D. Apr. 11th., 1919.

The Paymaster,
Royal Newfoundland Regiment,
St. John's.

156.

Dear Sir:-

This letter has reference to Pte. Augustus Miles, No. 4856 of Bonavista who enlisted in April of 1918 and died in hospital at Hazeley Down Camp, Winchester, on Oct. 1st. of 1918.

Mrs. Susannah Miles, Pte. Miles' mother, a widow whose sole support, we understand, was her son, has asked us to write you regarding the Separation Allowance which should have been sent to her on account of her son. She receives her Allotment regularly but has never been in receipt of any money for Separation Allowance.

Will you kindly look into this matter and advise us. It may be that the son did not take the necessary steps to secure this extra money for his mother and that he and she both presumed that the authorities would send her it acting on their own initiative.

Thanking you in advance for the favor of a reply.

Yours very truly,

W. D. Smith

Manager.

October 17, 1919

Mrs. Susannah Miles,
Bonavista.

Dear Madam:

I enclose cheque for \$43.78
balance of estate of your late son, Pte. A. Miles
due you as Administratrix of his estate.

I also enclose Letters of
Administration.


Yours truly,

Major
PAYMASTER & O i/c RECORDS

LM-
Enc. 2

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 43 ⁷⁸/₁₀₀

Oct 3 1919

Received from the First Newfoundland Regiment
the sum of forty three ⁷⁸/₁₀₀ Dollars.
~~on account~~ of Pay Estate
balance

Ch. No. 14296	Initials. <i>EW</i>
Pay Ledger 44	Initials. <i>EW</i>
Gen. Ledger.....	Initials.....

Regtl. No. *A.C.B.*
Rank

No. 4836

Rank

Pl

Name

A. M. S.

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



Dept. of Militia,

St. John's.

Aug 1



I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. 4856 Rank P/O
Name Augustus Miles
Royal Newfoundland Regt.

Sushannah Miles (Sgd.)

Mother Relationship.

Address Bonavista



Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 15

1921.

The accompanying ~~Victory Medal~~ for British War Medal

is/are forwarded herewith to

Mrs. Susan Miles (Mother)

in respect of his service as No. 4856 Rank Pte.

Name Augustus Miles

Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received

Victory Medal.

Signature

Susan Miles

Date

Oct 25th 21.

Address

3 Bonavista

9 CR 4856

Bonavista

Feb. 1st /21

G

Department of Militia
St. Johns
Newfld.

Dear Sirs: —

Received (with thanks)
photograph of the grave of my son
No. 4856 Ple. A. Miles

Yrs faithfully
Susannah Miles