



# First Newfoundland Regiment

## ATTESTATION PAPER

Regimental No. 214

Name in full Victor William Miles Age 28

Address 14 Kenningwell Road

~~Married~~  
Single

Color Dark Height \_\_\_\_\_ Weight \_\_\_\_\_  
Hair Dark Eyes Blue

Other distinguishing marks Tattoo left arm

Nearest relative \_\_\_\_\_

Address \_\_\_\_\_

Dependents None

Occupation Tobacco Manufacturer Present Wage \$70<sup>00</sup> per month

Previous service \_\_\_\_\_

Decorations \_\_\_\_\_

General Remarks \_\_\_\_\_

Date of Enlistment \_\_\_\_\_

I, Victor William Miles, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland as the case may be) against all his enemies and opposers whatsoever according to the conditions of my service.

*Be engaged for war*  
*W. Miles*  
*Robert H. Sait*  
*13.8.15*

Declared before me this \_\_\_\_\_ day of \_\_\_\_\_ 1914  
William Miles

Robert H. Sait *Sgt. " 214*

**DESCRIPTIVE REPORT ON ENLISTMENT.**

(To correspond with Entries on the Medical History Sheet.)  
Applicable to all ranks.

Reg. No. 214

Name Victor William Miles

Apparent age 28 years        months. Height        feet        inches.

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

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

Other distinguishing marks: Tattoo left arm

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin Frank Miles, 14 Pennywell Rd., St. John's

Relationship Brother

**Particulars as to Marriage.**

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.  
(c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

**Particulars as to Children.**

Christian Names	Date and Place of Birth

**STATEMENT OF THE SERVICES.**

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of Pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries.
					years	days	years	days	
Service towards limited engagement reckons from <u>8/9/14</u>									
Joined at <u>St. John's</u> on <u>8th September '14</u>									
		Promoted to	<u>Sergt.</u>	<u>21/9/14</u>					
			<u>C.O.M.S</u>	<u>6/5/15</u>					
		<u>Pyrexia</u>		<u>11/10/15</u>					
		<u>Discharged fit for duty</u>		<u>2/12/15</u>					
		Promoted	<u>a/c S.M.</u>	<u>29/1/16</u>					
<u>1-7-16</u>		<u>Killed in Action France</u>							
Total Service forfeited as above ... ..									
Total Service towards Engagement to (date of discharge) ... .. years ... .. days									
" " " Pension ( " ) " " "									

## DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Reg. No. 214

Name **Victor William Miles.**

Apparent age **28** years \_\_\_\_\_ months. Height \_\_\_\_\_ feet \_\_\_\_\_ inches.

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

Distinctive marks **Color: Dark, Hair: Dark, Eyes: Blue.**

Other distinguishing marks: **Tattoo on left arm.**

### INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Frank Miles, 14 Pennywell Road, St. John's**

| Relationship **Brother**

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.

(c) Present address. (d) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d)
			Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	
		(d) Verified from certificate

### STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension	Service in Reserve not allowed to reckon towards G. C. Pay	Signature of Officers certifying correctness of entries
					years	days	
Service towards limited engagement reckons from <b>8/9/14</b>							
Joined at <b>St. John's</b> on <b>8th September '14</b>							
Promoted to <b>Sergt. 21/9/14</b>							
<b>C.Q.S. 6/5/15</b>							
<i>H.A. 1-7-16</i>							
<i>Embarked I.S. Transport for Lib. 3<sup>rd</sup> Feb. Embarked H.C.F. 20<sup>th</sup> Feb. Disembarked H.C.F. 19-20 Feb. 1915. Embarked for Gallipoli 15<sup>th</sup> Feb. Landed Suvla Bay 1915. Admitted 14<sup>th</sup> Feb. 1915. Disembarked 26-27 Feb. 1915. Embarked 14<sup>th</sup> Feb. 1915. Disembarked 29<sup>th</sup> Feb. 1915. Killed in Action 1-7-16.</i>							
Total Service forfeited as above ... ..							
Total Service towards Engagement to <b>1-7-16</b> (date of discharge) <b>1</b> years <b>296</b> days							
" " Pension " " " " " " " " " " " "							

V. W. Miles.

214.

P&R. O.

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

## MEDICAL HISTORY

Surname Wiles OF Christian Name Victor William

Table I.—GENERAL TABLE.

Birthplace:—Parish	SPECIAL RESERVE.		REGULAR ARMY.	
	County			
Examined ... ..	on	day of 191	on	day of 191
Declared age ... ..	at	28 years	at	years
Trade or occupation ... ..		days		days
Height ... ..		feet inches		feet inches
Weight ... ..		lbs.		lbs.
Chest Measurement {	Girth when fully expanded	inches		inches
	Range of expansion ...	inches		inches
Physical development ... ..				
Vaccination marks {	Right	Left	Right	Left
	Arm ... ..			
Number ... ..				
When vaccinated ... ..				
Vision ... ..	R.E. - V =		R.E. - V =	
	L.E. - V =		L.E. - V =	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)				
(Rank)				
		Medical Officer.		Medical Officer.
Enlisted ... ..	at	St John	at	
	on	day of 191	on	day of 191
Joined on enlistment ... ..		Corps		Corps
		Regtl. No.		Regtl. No.
		214		
Transferred to ... ..				
Became non-effective by ... ..				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				





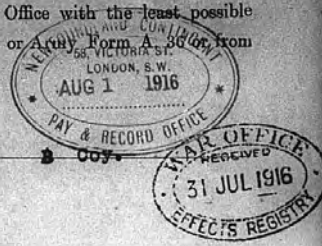


ORIGINAL. *E1*

*10/26 NC*  
Army Form B. 2090A. *W*

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. 360 or from other official documentary sources.



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

Regtl. No. 214 Rank Company Sergt. Major

Name Miles, W.V.

Died { Date July 1st., 1916.

Place France.

Cause of Death\* Killed in Action.

Nature and Date of Report B 213, 11/7/16.

By whom made O.C., Unit.

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

Burial { Place Not yet received.

Date do

By whom reported \_\_\_\_\_

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) Not to hand.

(b) in Small Book (if at Base) do

(c) as a separate document do

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

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

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

Signature of Officer in charge of Section Adjutant-General's Office at the Base } *A. J. Clerk* } Capt. for Lt. Col.,  
Officer i/c Infantry Section, 3rd. Echelon, B.E.F.

Station and Date 28.7.16



COPY

**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.



REGIMENT } 1st Newfoundland Regiment } Squadron,  
or } } Troop, Battery }  
CORPS } } or Company } B Company

Regtl. No. 214 Rank Company Sergt. Major.

Name Miles, W. V.

Died { Date July 1st, 1916.  
Place France.  
Cause of Death\* Killed in Action.

Nature and Date of Report B 213, 11/7/16.

By whom made O. O., Unit.

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

Burial { Place Not yet received.  
Date " "  
By whom reported

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) Not to hand.  
(b) in Small Book (if at Base) " "  
(c) as a separate document " "

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

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

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Signature of Officer in charge of Section Adjutant-General's Office at the Base (Sgd) A. E. Clerk, Capt for Lt.Col.,

O. i/c Infantry Section,  
3rd Echelon, B.E.F.

Station and Date 28/7/16.

242

NEWFOUNDLAND CONTINGENT

INVENTORY of EFFECTS of

No. 214 Lt. May 28th 1916 deceased.

EXTRACT from A.F. B.2090A, dated 28/7/16 :

CAUSE of DEATH Killed in Action

DATE 1/7/16 PLACE France

WILL: (a) in Pay Book Yes Copy attached  
(b) in Small Book \_\_\_\_\_  
(c) Separate document \_\_\_\_\_

NEXT of KIN: Frank Miles  
Relationship Brother  
Address 114 Pennington Rd  
St Austine  
919

Particulars

1 Balance Sheet Book  
1 Photo



NEWFOUNDLAND CONTINENT:

INVENTORY of EFFECTS of

No. 214 COM/VMiles deceased.

EXTRACT from A.F. p. 2090 A, dated \_\_\_\_\_:

CAUSE of DEATH Kia A.

DATE 1/7/16 PLACE Shance

- WILL: (a) In Pay Book \_\_\_\_\_  
 (b) In Small Book \_\_\_\_\_  
 (c) Separate Document \_\_\_\_\_

NEXT OF KIN: Frank Miles  
 Relationship Brother  
 Address 14 Penneywell Rd.  
St Johns.

PARTICULARS.

- |                                |   |
|--------------------------------|---|
| <p>1 Packet.<br/>(in Box.)</p> | <p>2 Pipes (1 in Case)<br/>         1 Cigarette Case.<br/>         1 Match Box Case.<br/>         Photo, Post Cards.<br/>         Greeting Cards Stationary.<br/>         4 Badges (Crowns)<br/>         1 Soap Box (soap)<br/>         1 Hair Brush.<br/>         1 Pack Playing Cards<br/>         2 Pappaness.<br/>         1 Shell Splinter (Dow.)<br/>         1 Cap.<br/>         2 Diaries<br/>         1 Book (Mil.)<br/>         1 Novel.<br/>         1 Housewife<br/>         (1 Wood of Box)<br/>         1 Suit Bag - from Dept.</p> |
|--------------------------------|---|

**PAY LIST.**

to 1st July 1916. Voucher No.

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps 1st Newfoundland  
 No. 714 Rank C. I. M. Name W. S. Miles  
 Died (a) at France on the 1st of July 1916.  
 Deserted at \_\_\_\_\_ on the \_\_\_\_\_ of \_\_\_\_\_ 191  .

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,  
 Battery or Company.

**STATEMENT OF ACCOUNT.**

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month .....				Balance Cr. last month <u>12th May 16</u> .....	<u>1</u>	<u>62</u>	<u>3</u> <u>11</u>
	Cash issues (Date of each issue to be stated)				Pay <u>16</u> days at <u>1/70</u> from <u>19th</u> to <u>24th</u> 191 <u>6</u> <u>3</u> days at <u>1/60</u> from <u>24th</u> to <u>27th</u> 191 <u>6</u>			
	£ s. d. <u>21. 7.</u> <u>6</u> <u>18</u> <u>0</u> <u>3</u> <u>28. 7.</u> <u>191</u> <u>6</u> <u>1</u> <u>1</u> <u>12. 3</u> " " <u>1</u> <u>10</u> <u>  </u> <u>31. 5</u> " " <u>3</u> <u>6</u> <u>6</u> <u>76. 6</u> " " <u>13</u> <u>17</u> <u>11</u>			<u>1</u> <u>9</u>	Proficiency, Service or good conduct pay <u>88</u> days at _____ from _____ to _____	<u>18</u>	<u>3</u>	<u>3</u>
					Messing allowance _____ days at _____ from _____ to _____			
					Kiv allowance <u>cash being paid</u> .....	<u>6</u>		
					Amount produced by the sale of Effects from Form 2 .....			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity .....			
	Consolidated stoppage .....							
	Balance due by the Paymaster	<u>1</u>	<u>75</u>	<u>2</u> <u>5</u>	Balance due to the Paymaster .....			
		<u>£</u>	<u>86</u>	<u>1</u> <u>7</u>		<u>£</u>	<u>86</u>	<u>7</u> <u>2</u>

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

dated at \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_

191  

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1615.

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

Ray Dept.





\$419.58

Eldred Hawkins  
Executor estate of  
W. V. Miles  
6/11/58 Bal. due to the estate

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**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.

REGIMENT } 1st. Newfoundland Regt. Squadron, }  
 or } Troop, Battery }  
 CORPS } or Company } B Coy.

Regtl. No. 814 Rank Company Sergt. Major

Name Miles, W.V.



Died { Date July 1st., 1916.

{ Place France.

{ Cause of Death\* Killed in Action.

Nature and Date of Report B 213, 11/7/16.

By whom made O.C., Unit.

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

Burial { Place Not yet received.

{ Date do

{ By whom reported \_\_\_\_\_

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) Not to hand.

{ (b) in Small Book (if at Base) do

{ (c) as a separate document do

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

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

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

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

*all*

Capt. For Lt. Col.  
Officer i/c Infantry Section,  
3rd. Battalion, B.E.F.

Station and Date 28-7-16



This Form is to be used in connection with Pamph.

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

Examination of *Walter Victor born*  
*Walter born. Gales* *SN 155*  
aged *28* conducted at *E. J. B. Bennett*  
Date: *Aug 31st* Recruiting Officer:

NO. OF TEST

FINDING

- |    |  |
|----|--|
| 1  | n  |
| 2  | n  |
| 3  | n  |
| 4  | n  |
| 5  | n  |
| 6  | at 2 yrs of age not since                |
| 7  | yes                                      |
| 8  | yes                                      |
| 9  | n  |
| 10 | n  |
| 11 | n  |
| 12 | n  |
| 13 | n  |
| 14 | n  |
| 15 | n  |
| 16 | n  |
| 17 | n  |
| 18 | n  |
| 19 | n  |
| 20 | n  |
| 21 | n  |
| 22 | n  |
| 23 | n  |
| 24 | n  |
| 25 | n  |
| 26 | n  |
| 27 | n  |
| 28 | n  |
| 29 | n  |
| 30 | n  |
| 31 | n  |
| 32 | n  |
| 33 | 11 yrs ago                               |
| 34 | 5ft 3"                                   |
| 35 | 138 lbs.                                 |
| 36 | 35-37                                    |
| 37 | \$70 per month                           |
| 38 | Brother Francis Miles 14 Pennsylvania St |
| 39 | n  |

FU

Signature of Medical Examiner: *214* *Clayton Macpherson M.D.*

EST 1189

16 1st July

1915. Voucher No.

**NON-EFFECTIVE ACCOUNT**

Regiment or corps 1st Newfoundland

No. 214

Rank C. S. M.

Name W.V. Miles

Discharged at France

on the 1st of July

1916.

Discharged at

on the of

191

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,  
Battery or Company.

**STATEMENT OF ACCOUNT**

[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month .....				Balance Cr. last month 16th May 16	82	3	11
	Cash issued				18			
	(Date of each issue to be stated)				Pay 34 days at 180 from 20/5/16 to 7/7/16			
	£ s. d.				Proficiency, Service or good conduct pay	18	3	3
	21 2 6	10	3		days at from to			
	28 2 191	2	1		Messing allowance days at			
	15 3 "	1	10		from to			
	31 5 "	5	6		Kit allowance			
	28 6 "	3	17	11 4 0	Cash held by P.A.R.O.	8		
					Amount produced by the sale of Effects from			
	Consolidated stoppage .....							
	Balance due by the Paymaster	75	8	5	Balance due to the Paymaster			
		£85	7	2		85	7	2

This account is in accordance with information received at the Pay & Record Office try 21/07/16 and is therefore subject to amendment if, and as may be found necessary.

I certify that the above account is correct in every particular, and that the debit balance is correctly chargeable against the Public.

1916

191

Paymaster

The Paymaster General is the only person who is authorized to receive the Public Money. In the latter case the Will should be attached. See also the Public Accounts Act, 1913, and Army Form D. 1000 or Army Form G. 1013.



**PAY LIST.** to 1st July 1916. Voucher No. \_\_\_\_\_

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps 1st Newfoundland

No. 214

Rank O. S. M.

Name W.V. Miles

Died (a) *Lifeline* at **Branco** on the **1st** of **July** 1916.

Deserted at \_\_\_\_\_ on the \_\_\_\_\_ of \_\_\_\_\_ 1916.

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 1st May 16	82	3	11
	Cash issues				16 170 13/5 28/5			
	(Date of each issue to be stated)				Pay 34 days at 180 from 29/10/15 to 1/7/16			
	£ s. d.				Proficiency, Service or good conduct pay	18	3	3
21 2 6	10 3				days at _____ from _____ to _____			
28 2 191	2 1				Messing allowance _____ days at _____			
13 3 "	1 9				from _____ to _____			
31 5 "	3 6 6				Kit allowance .....			
26 6 "	3 17	11	4	9	Cash held by P.&R.O. ....	6		
					Amount produced by the sale of Effects from .....			
	Consolidated stoppage .....							
	Balance due by the Paymaster	75	2	5	Balance due to the Paymaster .....			
		£86	7	2		£	86	7 2

This account is in accordance with information received at the Pay & Record Office on / / and is therefore subject to amendment if, and as may be found necessary.

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

Dated at \_\_\_\_\_ 23 NOV 1916  
this \_\_\_\_\_ day of \_\_\_\_\_

1916

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 Italic to be struck out when there is no debtor balance.

## PAY LIST.

to 1st July

1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps 1st Newfoundland

No. 214

Rank O. S. M.

Name W.V. Miles

Died (a) *Left Mail* at Brance

on the 1st of July

1916.

Deserted at

on the of

1916.

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 18th May 18...	82	3	11
	<i>Cash issues</i>				18 70			
	(Date of each issue to be stated)				Pay 34 days at 180 from 13/5 28/5			
					29/5 17/8	18	3	3
		£ s. d.			Proficiency, Service or good conduct pay			
	21 2 6	10	3		days at from to			
	28 2 191	2	1		Messing allowance days at			
	13 3 "	1	9		from to			
	31 5 "	3	6		Kit allowance .....			
	28 6 "	3	17	11 4 9	Cash held by P.&R.O. 6			
					Amount produced by the sale of Effects from			
					Form 2 .....			
					Amount of Savings Bank balance, including			
					interest (if no balance, to be so stated)			
	Consolidated stoppage .....				Deferred Pay or Gratuity .....			
	Balance due by the Paymaster	75	2	5	Balance due to the Paymaster .....			
		£86	7	2		£	86	7 2

*See over*

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

Dated at 23 NOV 1916

this day of

1916.

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. 1615.
- (b) Words in Italic to be struck out when there is no debtor balance.

INVENTORY and PARTICULARS of the SALE of the EFFECTS of No. \_\_\_\_\_  
of the \_\_\_\_\_

[Form 2.]

ARTICLES	Number of each Article now forthcoming	Rank and Name of Purchaser	Amount			Remarks
			£	s.	d.	
<p>Probate dated Dec. 9<sup>th</sup> 1916 presented at Pay Office Dec. 12<sup>th</sup> 1916. Elised Hawkins c/o Harvey &amp; Co Executor M. A. Hawley Dep Paymaster</p> <p style="text-align: right;">Carried to Form 1...£</p>						

We certify that we have this day carefully inspected the effects of \_\_\_\_\_ and the above is a just and true Inventory and Report of all the articles belonging to him as far as can be ascertained. We further certify that all the articles now forthcoming are duly secured until they can be conveniently sold or otherwise disposed of according to Regulations.

Dated at

this \_\_\_\_\_ day of

191

{ Commanding the squadron,  
troop, battery or company.  
Two other commissioned officers.

I do certify that I attended the sale of the above effects at fair and open auction, and that the above is a true statement of the particulars thereof in every respect.

Dated at

this \_\_\_\_\_ day of

191

{ Commanding the squadron,  
troop, battery or company.

Estate 214 W.V. Miles.  
Eldred Hawkins Exr.

ACCOUNT Estate  
CK. NO. 1447 INITIALS [Signature] DEPARTMENT  
OF  
MILITIA  
INV. LEDGER \_\_\_\_\_ INITIALS \_\_\_\_\_  
PAY LEDGER 266 INITIALS [Signature]  
GEN. LEDGER \_\_\_\_\_ INITIALS \_\_\_\_\_

REGIMENTAL PAY BRANCH

3.08 PAY VOUCHER

March 20<sup>th</sup> 1922

\$ 97<sup>5</sup>/<sub>100</sub> .....

RECEIVED from the Royal Newfoundland Regiment the sum of

Nine 100 .....

Dollars  
on account of Estate

..... W.V. Miles .....

Eldred Hawkins Exr  
per Ed Bugden March 20/22

I would be much  
obliged if you will let  
me have cheque.

Yours truly  
Miller

To Hon<sup>ble</sup> Genl

Monday  
Nov 20/90

Maj<sup>r</sup> J. M. Howley  
Dept of Militia

Dear Maj<sup>r</sup>,

When you were  
in the office a few days  
ago, you asked me if I  
had received an amount  
of about £2 on a/c of  
my brother's estate. I

told you that I  
did not receive this,  
and I thought you would  
have forwarded it  
before now.

If that amount is  
still on your books





D

WILL

No. 10

of

No. 214. Rank Co. S. M.

Name V. W. Miles

Frank Miles B

14 Pennycuill Rd

WILL.

Brother

Frank Miles  
 of Harvey & Co  
 St John's  
 Newfoundland

---

214 Miss V.W

1914

NEWFOUNDLAND CONTINGENT.

Copy of "Will"

of

No. 214, C.S.M. V.W. Miles.

---

Brother

Frank Miles

c/o Harvey & Co.

St. John's,

Newfoundland.

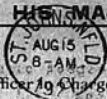
Certified True Copy.

Capt.

Paymaster & Officer i/c Records.

Copy Sent To H.Q.

ON HIS MAJESTY'S SERVICE



MADE IN  
NEWFOUNDLAND  
GOODS

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 13<sup>th</sup> 1921

I beg to acknowledge receipt of  
Memorial Plaque issued in respect of services of  
the late No. 214 Rank C. Sm.  
Name: William Miles  
Royal Newfoundland Regt.

Miles (Sgd.)

Brother Relationship.

Address

Gandi Nidi Rd



Fold Here

Fold Here

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

*Royal Nfld. Regt.*

*Dept. of Militia,*

*ST. JOHN, S. Nfld.*



Received

Signature

*Miles*

Date

*Oct 6th 1921*

Address

*103 Guidi Vidi Road*

[P.T.O.]

is/are forwarded herewith by *Post Office*

**Mr. Frank Miles (Brother)**

in respect of his service as No. *214* and Rank **WO. Cl. II**

Name **Victor Wm. Miles** **Royal Nfld. Regt.**

~~1st Bn. Canadian Corps.~~

Receipt of the same should be acknowledged hereon

*The above Mr. Miles*

Receipt for Army Book 64

No. 214 Name W. Miles

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

Name W. Miles

Date Aug. 18, 1920

Place B. John's N.Y.

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



~~5~~  
C.R. ~~44~~

214

THIS IS TO CERTIFY THAT I HAVE THIS DAY  
RECEIVED FROM THE DEPARTMENT OF MILITIA WARRANT  
APPOINTING ME A WARRANT OFFICER CLASS AT

NO. 214 RANK. C.S.M.  
NAME. Ed Miles

DATE. Nov 12 1896

Received by  
Ed Miles  
brother

C.R. 214  
C.R.

RECEIPT.

I hereby certify that I have received the 1914-1915  
STAR.

for No 214 Name W. W. Miles

Witness E. H. Cornick

Date Dec 5 1919

Place St. Johns N.Z.

E. H. Cornick  
W. W. Miles

C.R. 214

Extract of Casualty List received from PARD, London

Dated Aug. 1st. 1916

The following Casualties in the Newfoundland Contingent are reported under various dates:-

214 Co. Sjt. Maj. W.V. Miles

Billed.



C.R. 214

Extract of Casualty List received from P.A.R.O.  
July 23th. 1916.

214, CSM. Miles. W.V. ✓

Reported by C.C. En. d/11.7.16. as KILLED IN ACTION 1.7.16.

M

July 26, 1916.

Dear Sir,

I regret to inform you that the  
Record Office of the First Newfoundland  
Regiment, London, to-day reports that your  
brother, No. 214, C.S.M. V. William Miles,  
was killed in action on July 1st.

Yours sympathetically,

Colonial Secretary.

Mr. Frank Miles,  
120 Gower Street.

CRI 214

Extract from Daily Orders Part 11 Unit The Newfoundland Regiment 3rd Echelon, June 24th, 1916

214 A/QMS Miles. W.V.

Promoted Co. Sergt. Major 11-6-16 vice C.S.M. Dicks, promoted 2nd Lieut.

C.R. 214

Ex. from D. O. Part II, Unit the A. Mfld. Regiment dated  
July 10th. from 3rd. Echelon, B.E.F.

214 SQMS. W. Miles,

app. acting C.S.M. vice No. 33 A/RSM. Dicks, 29/5/16.

January 14, 1916.

Dear Sir,

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

No. 214, C.Q.M.S. Victor W. Miles, who was previously reported with pyrexia at Malta on October 11th, is now reported as having been discharged from Hospital fit for active service and embarked for Egypt on December 2nd.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mr. Frank Miles;  
14 Penmywell Rd.

CR. 214

Extract of Casualty received from Pay & Record Office, London,  
dated Dec. 18th 1915.

214 C.Q.M.S. V.W.Miles

Discharged ex Hospital in Malta (Fit for Active Service) and  
Embarked for Egypt per H.T. "Nile" 2nd Dec. 1915.

C.R. 214

Extract of Casualty. List received from P & R. O. Nov. 18th. 1915

214, C.Q.M.S. V. W. Miles. ✓

Pyrexia, Malta.



✓  
M 26

M

November 24, 1915.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 214, C.Q.M.S., Victor Wm. Miles, was admitted to hospital in Malta ex Hospital Ship KARAPARA on Oct. 11th suffering from Pyrexia. This information was received by mail.

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

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

Yours faithfully,

*J. H. Bennett*

Colonial Secretary

Mr. Frank Miles,  
14 Pennywell Rd.,  
City.

C.R. 214

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No. H.2593, dated Oct. 30th. 1915.

314 QMGs. V.W.Miles

Newfoundland Contingent..... Pyrexia.... Admitted to Hospital in Malta ex H.S. "Karapara" 11th. October, 1915.

CR. 214

Extract from Nominal Roll of No. 1st Bn. Field Regt.  
Embarked at Davenport for Active Service 20-8-15.

214. COMS. V. Miles.

Disembarked Alexandria, 31-8-15. Proceeded to Abbassia,  
Cairo, same date. Embarked Alexandria for Gallipoli  
13-9-15.

C.R. 214

Extract from Seminal Roll Registered St. John's, per  
S.S. Florisel, Oct. 6th, 1914.

214 Miles Victor W.

C.R. 214

Extract from Nominal Roll of Warrant officers and  
N.C.O's of the 1st Kfld. Regt. (No date given)

214 W. Miles.

Promoted to Sergt. 3-10-14.

C.R. 214

Victor Wm. Miles. was attested for General service  
with the NEWFOUNDLAND REGIMENT on ..Sept. 8th.. 1914.  
Regimental No 214 was allotted to Pte. Victor Wm. Miles.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

ORIGINAL.

Casualty Form—Active Service.

Regiment or Corps

*Newfoundland*

Regimental No.

*CR 214*

Rank

*C.Q.M.S. Miles W.V.*

Enlisted (a) *1-10-14*

Terms of Service (a) *one year*

Service reckons from (a) *1-10-14*

Date of promotion to present rank

Date of appointment to lance rank

Numerical position on roll of N.C.Os.

Extended

Re-engaged

*duration of war*  
Qualification (b)



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

		Embarked St. John's, Nfld.		3/10/14.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
7/10/15.	"Karapara"	Ill, Pyrexia admitted	A 36		
<i>29/11/16</i>	<i>med unit</i>	<i>with Battalion</i>	<i>unit</i>	<i>29/11/16</i>	<i>B213</i>
		Embarked Port Suez		14.3.16	
		Disembarked MARSEILLES		22.3.16	
		<i>unit</i>	<i>Portford C.S.M</i>	<i>France</i>	<i>11.6.16 B213 Order 220</i>
<i>11.7.16.</i>	<i>unit.</i>	Killed in Action		<i>France</i>	<i>1.7.16 B213</i>
<i>J.M.</i>					<i>ad clerk</i>

CAPTAIN.  
FOR O.116 INFANTRY RECORDS  
G. H. Q.; 3<sup>rd</sup> ECHELON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.





214  
June 30th.1932

C.O.N.Conroy Esq.,

City:-

Dear Sir:-

At the request of Mr.Frank Miles,formerly of St.John's, but at present residing in the U.S.A., I enclose official certificate of the death of his brother, Victor William Miles.

Yours truly,

Archivist.