



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1494

Name in full Walter Rolls Age 26
Address Portland, Bonaville Bay
~~Married~~ Height 5ft 9 in Weight 145
Single
Color Flesh Hair Black Eyes Grey
Other distinguishing marks
Nearest relative Mother Mary Jane
Address Portland
Dependents
Occupation Fisherman Present Wage 1.00⁰⁰ per month
Previous service
Decorations
General Remarks
Date of Enlistment April 24th 1915

I, Walter Rolls, 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 condition of my service.

Walter Rolls

Declared before me this 27 day
of April 1915

J. J. [Signature]
Lieut.

1494 The Parsonage
Kerm J. J. d. Mar. 20/20 Brooklyn
Feb 24 1920 BB

To the Minister of Militia
St. John's

Dear Sir

Mrs. Rolfe is under
the impression that she
has had some
information before as
to the place of her
Sons grave. but there
is no mention in
the enclosed circular
concerning a grave

It would almost seem
as if his body had
never recovered or
healed.

Would you be so
kind to

Yours faithfully
Edwin Reebels

FIELD SERVICE.

C.R. 1494
Army Form B. 2090.

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 } _____ Squadron, Troop, }
OR CORPS } _____ Battery or Company } _____

Regimental No. **Newfoundland** Rank _____ **O. Coy.**

Surname _____ Christian Name **1494** **Lance-Corporal.**

Died { Date **Rolls.** Place **W.**

{ Cause of Death* **9/10/17.** **France or Belgium.**

Nature and Date of Report **Killed in Action.**

By whom made **B 913 G/12/10/17.**

* 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.
O.U. Unit.

Burial { Place _____ Date _____

{ By whom reported _____

State whether he leaves (a) in Pay Book (Army Book 64) _____ (b) in Small Book (if at Base) _____
a Will or not (c) as a separate document _____

Not received **Not received**

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

Not received

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

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

Station and Date { _____ Signature of Officer in charge of Section } *J. T. Boyd*
Date { _____ Adjutant-General's Office at the Base }

DUPLICATE.

C.R. 1494
Army Form B. 2090A.

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 OR CORPS Newfoundland Squadron, Troop, Battery or Company } C Coy.

Regimental No. 1494 Rank Lance-Corporal.

Surname Holls. Christian Names W.

Died { Date 9/10/17. Place France or Belgium.

Cause of Death* Killed in Action.

Nature and Date of Report B 213 6/12/10/17.

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 _____ Date _____
By whom reported _____

State whether he leaves { (a) in Pay Book (Army Book 64) _____ (b) in Small Book (if at Base) _____
a Will or not { Not received (c) as a separate document _____ Not received

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

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

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.S., 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 the Report.

Station and Date { G.H. 3rd. Echelon. Signature of Officer in charge of Section } Sn. Lt. for Mjr.
Date _____ Adjutant-General's Office at the Base _____

(1452) W8627/M530 500,000 10/10/17 Forms/B2090A/2 Officer i/c No.1 Infantry Section



C.R. 1494

Walter Rolls was attested for General Service
with the NEWFOUNDLAND REGIMENT onApril 24th, 1915
Regimental No. 1494 was allotted to Pte **Walter Rolls**.

AUTHORITY:

Record Officer

Dept. of Militia, 1919.

March 25th. 1919.

was attested for General Service

C.R. 1494

Extract from Nominal Roll of NGLA Regiment embarked
Devonport 15-3-16 for Egypt, transferred to B.E.F.
& disembarked Marseilles, 3-4-16.

1594 Pte. W. Rolls.

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.

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 *J. A. Squires* Address _____

Line Number	Rcd	By	Sent	by	Check

Dated October 20, 1917.

To Mrs. Mary J. Rolls,
Portland, B.B.

Regret to inform you Record Office, London,
today reports No. 1494, L.Corp. Walter Rolls,
was killed in action October ~~eight~~ *ninth*.

R.A. SQUIRES
Colonial Secretary.

NOTE FOR OPERATOR

This message is not to be sent until receiving office notifies that message to Ensign Canning, Musgravetown, has been delivered and acted upon.

NEW 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.

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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 _____

John M. Squires
For J. Squires

Line Number	Rcd	By	Sent	by	Check

Dated

October 20, 1917.

To

Ensign Canning, S.A.,

Musgrave town, B.B.

Regret to inform you Record Office, London,
 today reports No. 1494, L.Corp. Walter Rolls, son
 of Mrs. Mary J. Rolls, Portland, was killed in
 action October ^{ninth} ~~eighth~~. Please inform relatives.

R.A. SQUIRES

Colonial Secretary

C.R. 1494

Extract ofn Daily Orders part 11, from Unit 1st
Newfoundland Regiment, 3rd Echelon, C.H.C., dated
March 24, 1917.

#1494 Pte, W. Rolls, C.Co., (Unpaid)

Appointed Lance Corporal 14/3/17.

✓

2

C.R. 1494

Extract from Nominal Roll Embarked St. John's for Overseas, per
S.S. "Galgarian" June, 19, 1915. "F".

1494 Pte. Rolls W.

W. Rolls.

1494

R.

P. & P. U

R.

R. R.

U

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

MEDICAL HISTORY

OF

Surname Pells Christian Name Walter

Table 1.—GENERAL TABLE.

Birthplace:—Parish Wrestland Parovista Bay County St. John's

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left.
Examined	on <u>26th</u> day of <u>April</u> 191 <u>5</u>	on	day of	191
	at <u>St. John's</u>	at		
Declared Age	<u>26</u> years	days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>9</u> inches	feet	inches
Weight		<u>142</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>37</u> inches		inches
	Range of expansion	<u>4</u> inches		inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated	<u>7 years</u>			
Vision	R. E.—V=	<u>6/6</u>	R. E.—V=	
	L. E.—V=	<u>6/6</u>	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>Walter Pells</u>			
(Rank)	<u>Lieut.</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St. John's</u>	at		
	on <u>24th</u> day of <u>April</u> 191 <u>5</u>	on	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st St. John's</u>	<u>1494</u>		
Transferred to				
Became non-effective by				
	on	day of	191	on
	day of		191	day of
(Signature)				
(Rank)				

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations 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
May 20	First Inoculation - 500 million
June 7	Second " " 1000 "

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St Johns Rft ^o					

ORIGINAL

FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary sources.



REGIMENT Newfoundland
OR CORPS

Squadron, Troop,
Battery or Company

G. Coy.

Regimental No. 1494

Rank

Lance-Corporal.

Surname

Rolls.

Christian Names

W.

Died

Date 9/10/17.

Place

France or Belgium.

Cause of Death* Killed in Action.

Nature and Date of Report B 213 d/12/10/17.

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

Date

By whom reported

State whether he leaves { (a) in Pay Book (Army Book 64) Not received (b) in Small Book (if at Base) Not received
a Will or not { (c) as a separate document Not received

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

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

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

Station and Date

G. H. O. 3rd. Echelon

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

15/10/17.

2nd Lt. for Mjr.

DUPLICATE
COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
1279 No. 14307/125
21 DEC 1917

Regimental Number 1494

Company _____

THE
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 Walter Dalls

Witness Robertson

Dated at _____



_____ 191

No. 1494 Rank L/C Name Rolls Walker

Pay	F.A	Wtg	Total
1.00	10		1.10
Less: Allotment			60
Net Rate			50

M. P. / 35

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d			
						From	To						
Balance					Balance								
Acquittance Rolls		9	3	4	Pay @ Net Rate	9/6/17					27	3	3 ✓
Hospital Advances		8	1	4		9/6/17	21/6/17	74			7	12	0
A.B. 34					Retain allowed							17	6
P. & R.O. Payments													
Rpt No 3566 Cash		30											
(6425) Cheque		15	0	0									
35-1-4		12	0	0									

3.6.0

CHECKED
RJA
27/8/17

Office Copy.

Army Form O. 1625.

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

Royal Newfoundland

No.

1494

Rank

Private

Name

Race, W.

Died

Intestate

at

Marce

on the

9th

of

October

191

7

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	9	10	2
	Cash issues (Date of each issue to be stated)				Pay days at from to			17
	£ s. d.				Proficiency, Service or good-conduct pay days at from to			2
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				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	2	17	2	Balance due to the Paymaster			
	£	2	17	2		£	2	17
								2

CHECKED. 2/6 4/9/16

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ is not a debt payable against the Public.

Dated at

this

day of

4 - SEP 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 Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

Ross Walter

1494

Ray Dept

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

to 191 . Voucher No.

NON-REFLECTIVE ACCOUNT.

Regiment or corps

ROYAL NEWFOUNDLAND REGIMENT.

No. **1494**

Rank **Private**

Name **Rolls. W.**

Died (a) **Intestate** at **France**

on the **9th** of **October**. 191**7**.

Deserted at

on the _____ of _____ 191**7**.

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 9-10-17	2	17	2
	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			
	Consolidated stoppage							
	Balance due by the Paymaster	2	17	2	Balance due to the Paymaster			
		£2	17	2		£2	17	2

This account is in accordance with advices received at the Pay & Record Office to **51 91 18** and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED
4/9/18

NEWFOUNDLAND CONTINGENT.
I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Funded.
Dated at _____ this _____ day of **4 - SEP 1918** 191**8**
CHIEF PAYMASTER & OFFICER IN CHARGE

(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 under Army Form B. 2090 or Army Form O. 1815.
(b) Words in Italics to be struck out when there is no debtor balance.

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

to **191** Voucher No.

~~POSTED~~
NON-EFFECTIVE ACCOUNT.

Regiment or corps **ROYAL NEWFOUNDLAND REGIMENT.** Name **Rolls. W.**
 No. **1494** Rank **Private**
 Died (a) **Intestate** at **France** on the **9th** of **October** 191**4**.
 Deserted at _____ on the _____ of _____ 191**4**.

I Certify to the correctness of above in every particular.

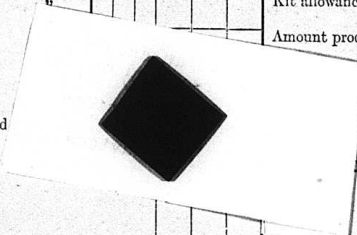
{ *Commanding Squadron, Troop,
Battery or Company.*

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.		Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 9.10.14		2	17	2
	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				
	"				Savings Bank balance, including				
	"				(if no balance, to be so stated)				
	"				or Gratuity				
	Consolidated								
	Balance due by the Paymaster	2	17	2	Balance due to the Paymaster				
		£ 2	17	2			£ 2	17	2

CHECKED.
26
4/19/14



I hereby Certify that the above account is correct in every particular, and that the **NEWFOUNDLAND CONTINGENT.** debtor balance of £ _____ is correct and chargeable against the Public.

Dated at _____ this _____ day of **4 - SEP 1918** 191**8**

CHIEF PAYMASTER & OFFICER IN CHARGE 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 Army Form B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

to 191 . Voucher No.

NOT POSTED TO EFFECTIVE ACCOUNT.

Regiment or corps **ROYAL NEWFOUNDLAND REGIMENT.**
 No. **1494** Rank **Private** Name **Rolls. W.**
 Died (a) **Intestate** at **France** on the **9th** of **October** 191**4**.
 Deserted at _____ on the _____ of _____ 191**1**.

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 9-10-14	2	17	2
	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	17	2		Balance due to the Paymaster			
		£2	17	2			£2	17	2

This account is in accordance with advices received at the Pay & Record Office to **5/9/18** and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED
[Signature]
4/9/16

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correct and chargeable against the **NEWFOUNDLAND CONTINGENT**.

Dated at _____ this _____ day of **4 - SEP 1918** 191**8**



CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS

- (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 by Army Form B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL.

Army Form O. 1625.

PAY LIST.

to

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps ROYAL NEWFOUNDLAND REGIMENT.

No. 1494

Rank Private

Name Rolls. W.

Died (or) Intestate at France

on the 9th of October 1914.

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	9	10	14	2	14	2	
	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							
	101				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	14	2	Balance due to the Paymaster							
		£	2	14		2			£	2	14	2

This account is in accordance with advices received at the Pay & Record Office to 5/9/18 and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED. 2/16 4/19/16

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 2 14 2 is chargeable against the PAYMASTER & OFFICER IN CHARGE RECORDS.



Dated at this day of 1918. (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 Form B. 2090 or Army Form O. 1815. (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL.

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.Regiment or corps **ROYAL NEWFOUNDLAND REGIMENT.**No. **1494**Rank **Private**Name **Rolls. W.**Died ^(a) **Intestate** at **France**on the **9th** of **October** . 191**4**.

Deserted at

on the _____ of _____ 191**4**.

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.		
		£	s.	d.		£	s.	d.
	Balance Dr. last month				Balance Cr. last month 9. 10. 14	2	14	2
	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 _____			
	101				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	14	2	Balance due to the Paymaster			
		£ 2	14	2		£ 2	14	2

This account is in accordance with advices received at the Pay & Record Office to **5/9/18** and may therefore be subject to amendments if and as may be revealed by subsequent advices.

✓ **CHECKED.**
2/6
4/9/16

I hereby Certify that the above account is correct in every particular, and that the **NEWFOUNDLAND CONTINGENT** debtor balance of £ **2 14 2** is **not** chargeable against the Public Account.

Dated at _____ this _____ day of _____ 191**4**



W. J. ...
CHIEF PAYMASTER & OFFICER IN CHARGE 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 under Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL.

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps ROYAL NEWFOUNDLAND REGIMENT.

No. 1494

Rank Private

Name Rolls. W.

Died (a) Intestate at France

on the 9th of October 1914.

Deserted at

on the of 191 .

I Certify to the correctness of above in every particular.

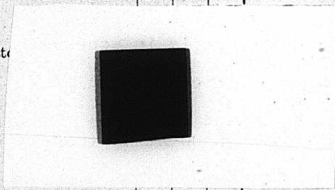
Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month .. 9-10-14 ..	2	14	2
	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 statement				Savings Bank balance, including (if no balance, to be so stated)			
					or Gratuity			
	Balance due by the Paymaster	2	14	2	Balance due to the Paymaster			
		£ 2	14	2		£ 2	14	2

CHECKED. 4/19/18



NEWFOUNDLAND CONTINGENT 68, VICTORIA ST. LONDON, S.W. 1 4 - SEP 1918

NEWFOUNDLAND CONTINGENT

CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS

I hereby Certify that the above account is correct in every particular and that the debtor balance of £ 2 is correct and 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 Form B. 2090 or Army Form O. 1815. (b) Words in Italics to be struck out when there is no debtor balance.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 38⁰⁹/_{xx}

Mar 3. 1919

Received from the First Newfoundland Regiment

the sum of Thirty Eight ⁰⁹/_{xx} Dollars.

~~on account~~
balance of Pay. Estate.

A. C. J.

Ch. No.	12163	Initials	C.W.
Pay Ledger	160	Initials	C.W.
Gen. Ledger		Initials	

Regtl. No. Rank

No. 1494

Rank

PL

Name

W. Roll

Mar. 7th. 1919.

Samuel Rolls, Esq.,
Portland, B.B.

A. C. R.

Dear Sir,

I beg to enclose cheque for \$38.09,
being the balance of the Estate of the late Pte.
W. Rolls due you as Administrator.

I also enclose Letters of Administration.

Yours very truly,

Capt.
Paymaster & O.i/c Records.

Mar. 7th. 1919.

Samuel Rolls, Esq.,
Portland, B.B.

A. C. R.

Dear Sir,

I beg to enclose cheque for \$38.09,
being the balance of the Estate of the late Pte.
W. Rolls due you as Administrator.

I also enclose Letters of Administration.

Yours very truly,

Capt.
Paymaster & O.i/c Records.



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

SEP 23 1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Mrs. Mary J. Rolis (Mother)

in respect of his service as No. 1494 Rank Pte.

Name Walter W. Rolis Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received 7 Medals.

Signature Mrs Mary J. Rolis

Date Sept 30th 1921

Address Portland B. Bay.

[P.T.O.]

Receipt for Army Book 64

No. 1494 Name W. Roll

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

Name Mrs. Mary J. Roll

Date July 26

Place Portland Bonairsta Bay

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

Handwritten signature or mark

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Form B. 121.
[533] W12871/604 400m 2/15c-1 53 58

Number of Sheet 1

Regiment of 1st Newfoundland

Signature of O. C. Company _____

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.		Age on	26 years 4 months	Fisherman	
Joined	Date	Place and Date of Enlistment	St John's April 24 1915	Religion	
Joined	Date	Period of	with Colours 169 years. with Reserve 368 years.	Methodist	
Joined	Date			Place of Birth	
				Monrovia N.Y.	

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
				Killed in Action 9 ¹⁰ / ₁₉					
				To be carried over					

Army Form B. 121.

CR 1494

MARCH 20th 1920.

Rev. Edwin Nichols,
The Parsonage,
Brooklyn, B.B.

Rev. and dear Sir:

I beg to acknowledge receipt of your letter of February 24th, having reference to the Cemetery Register Form of the late #1494 L/Cpl. Walter Rolls.

In reply I beg to state that no information has been received as to the burial place of this soldier. Should anything be received from the Imperial War Graves Commission in this connection, I shall be glad to forward same to Mrs. M. Rolls.

Yours faithfully,

Lieut. Colonel,
Chief Staff Officer.

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.

.....1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. 1494 Rank 1 Lt
Name Walter Rolles
Royal Newfoundland Regt.



Mrs Mary Jane Rolles (Sgd.)

Mother Relationship.

Address Portland B/Bay