



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1147

Name in full Joseph Warren Wells Age 25

Address 211 LeMarchant Road

Married Height 5' 5 1/2" Weight 139

Single Color Fair Hair Light Brown Eyes Grey

Other distinguishing marks Scar on Left Cheek

Nearest relative (Sister) Sarah

Address 211 LeMarchant Road

Dependents none

Occupation Printer Present Wage \$ 45⁰⁰ per month

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment February 2/15

I, Joseph Warren Wells, 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 His enemies and opposers whatsoever, according to the condition of my service.

[Handwritten signatures and notes: Keeney, Alford, 15, Joseph Wells, etc.]

Joseph Warren Wells

Declared before me this _____ day of _____ 1915

[Handwritten signature: Wm. J. Boyd Capt.]

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1147

Name Joseph Warren Wells

Apparent age 25 years months. Height 5 feet 5½ inches.

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

Distinctive marks Color: Fair, Hair: Light Brown, Eyes: Grey

Other distinguishing marks: Scar on left cheek

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Sarah Wells, 211 LaMarchant Rd., St. John's
 | Relationship Sister

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 Re-serves 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>22/2/15</u>									
Joined at <u>St. John's</u> on <u>22nd February '15</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. 1147

Name Joseph Warren Wells
 Apparent age 35 years _____ months. Height 5 feet 5 1/2 inches.
 Chest measurement { Girth when fully expanded _____ inches.
 Range of expansion _____ inches.
 Distinctive marks Color: Fair, Hair: Light Brown, Eyes: Gray
 Other distinguishing marks: Scar on left cheek

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Sarah Wells, 511 LaMouche Rd., St. John's
 | Relationship Sister
 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. O. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>25/2/15</u>									
Joined at <u>St. John's</u> on <u>22nd February '15</u>									
<u>Killed in Action Aug 14 '17</u>									
<u>Embarked at St. John's 20-3-15</u>									
<u>Disembarked at Halifax 30-8-15</u>									
<u>Landed at Bay night of 19-20 September 1915</u>									
<u>Proceeded to <u>Aug 16 to</u> Embarked at sea <u>14-3-16</u></u>									
<u>Wounded 1-7-6 Admitted 27th S.H. U.S. W.L. 2-7-16</u>									
<u>Admitted Hospital 6-7-16 Embarked then attached depot 1-8-16</u>									
<u>Embarked again 4-10-16 into Battalion 14-10-16</u>									
<u>November 27-2-17 Admitted 2nd S.H. U.S. W.L. (left) 24-2-17</u>									
<u>Rejoined <u>Bushell's</u> 13-4-17. L. Capt. 14-7-17</u>									
<u>Killed in Action 14-8-17</u>									
Total Service forfeited as above									
Total Service towards Engagement to <u>14-8-17</u> (date of discharge) <u>2</u> years <u>17</u> days									
" " " Pension " " " " " " " " " " "									

J. W. Hill.

C.R.

1147.

Peris.

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

MEDICAL HISTORY

OF

Surname Wells

Christian Name Joseph Warren



Table 1.—GENERAL TABLE.

Birthplace:—Parish.....		County.....			
		SPECIAL RESERVE.		REGULAR ARMY.	
Examined	.....	on	16 day of Feb 1916	on	day of 191
	.....	at	St Johns.	at	
Declared Age	.....		25 years	days	years days
Trade or Occupation	.....		Printer		
Height	.....		5 feet 5 1/2 inches	feet	inches
Weight	.....		139 lbs.		lbs.
Chest Measurement	Girth when fully expanded		33 inches		inches
	Range of expansion		36 inches		inches
Physical Development	.....			
Vaccination Marks	Arm	Right	Left	Right	Left
	Number				
When Vaccinated	.....		1907		
Vision	.....	R.E.—V=	6/6	R.E.—V=	
	.....	L.E.—V=	6/36	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>Cluny Macpherson</u>	(Rank)	<u>Capt.</u>	Medical Officer.	Medical Officer.
Enlisted	.....	at	St Johns.	at	
	.....	on	22 day of Feb. 191	on	day of 191
Joined on Enlistment	.....	Corps.	1st Nfld Regt.	Corps.	
	.....	Regtl. No.	1147	Regtl. No.	
Transferred to	.....			
Became non-effective by	.....			
	.....	on	day of 191	on	day of 191
(Signature)					
(Rank)					

Table II.—Only for admissions to hospital or to the sick list in the 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 cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8 th LONDON GENERAL HOSPITAL. WANDSWORTH.	6	July	1916	25	July	1916	G. & W. left thigh TX .i. wound.	17	See hand. Entrance & exit wounds. Punctured Rem on leg under skin for disposal.	H. W. & W. W. W. Capt. R. G. M. D.

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
2/10/16	Fit for active service J.H.W.

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 Inf'd	22 Feb 15	20 Mar 15			
T.S. Stephens	20 Mar 15	22 Mar 15			
T.S. ORDUNA	22 Mar 15	30 Mar 15			
Edinburgh Castle	30 Mar 15				

TRIPPLICATE

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 (OR CORPS) NEWFOUNDLAND REGIMENT. Squadron, Troop, D Company
 OR CORPS 1147 Battery or Company London Corporal

Regimental No. _____ Rank _____

Surname WELLS Christian Names J.

Died { Date AUG. 14th., 1917. Place Belgium.

Cause of Death* Killed in Action.

Nature and Date of Report B 213, 19/8/17.

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 not to hand not to hand.

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 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.

Station and Date 23/8/17. Signature of Officer in charge of Section
 Adjutant-General's Office at the Base S. Lawrence

(1452) Wd597/M 30 500,000 12/16 JFW (E225) Form B2090a/2

MAJOR
 G. I/c No. 1 Reg. Infantry Section
 G.H.Q., 3rd Division

FIELD SERVICE ORIGINAL Form B. 20904.

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 REGIMENT. Squadron, Troop, Battery or Company } D Company
 Regimental No. 1147 Rank Lance Corporal
 Surname WELLS Christian Names J.
 Died { Date Aug. 14th., 1917. Place Belgium.
 Cause of Death* Killed in Action.
 Nature and Date of Report B 213, 18/8/17.
 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 18/8/17
 By whom reported _____

State whether he leaves { (a) in Pay Book (Army Book 64) Not to hand (b) in Small Book (if at Base) Not to hand.
 a Will or not { (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.

Station and Date 23/8/17. Signature of Officer in charge of Section } Salavage
 Adjutant-General's Office at the Base }

(1452) Wd587/M 30 500,000 10/16 JFW (E228) Form B20904/2

MAJOR
 O. i/c No. 1 Reg. Infantry Section
 G.H.Q., 3rd Echelon

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No.

Died (a)

Deserted at

Rank

at

Name

on the

of

Newfoundland.
W. 1147. Rank *Corporal* Name *Wells, J. W.*
 Died (a) *W. No 255* at *France* on the *14th* of *August* 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 <i>14/8/17</i> ✓			<i>26 12 10</i> ✓
	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				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	<i>26</i>	<i>12</i>	<i>10</i> ✓	Balance due to the Paymaster			
		£	<i>26</i>	<i>12</i>				<i>10</i> ✓

CHECKED.
26/11/17

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. 1815.

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

Wells, J.

1147

Ray Sept

FIELD SERVICE **DUPLICATE** 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 OR CORPS } NEWFOUNDLAND REGIMENT. Squadron, Troop, Battery or Company } D Company

Regimental No. 1147 Rank Lance Corporal

Surname WELLS Christian Names J.

Died { Date AUG. 14th., 1917. Place Belgium.

Cause of Death Killed in Action.

Nature and Date of Report B 213, 18/8/17.

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 to hand (b) in Small Book (if at Base) Not to hand.
a Will or not { (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.

Station and Date { 25/8/17. Signature of Officer in charge of Section }
Adjutant-General's Office at the Base { S. A. ...

(1452) W5587/M 30 500,000 10/16 JFW (E238) Form (B2090a)2

MAJOR
O. 1/a No. 1 Reg. Infantry Section
G. H. O. 3rd Echelon



Casualty Form—Active Service.

Regiment or Corps *2/1st Newfoundland*Regimental No. *1147* Rank *Pt. Sgt.* Name *Hells.*Enlisted (*a*) *2.2.15.* Terms of Service (*a*) *duration of War.* Service reckons from (*n*) *12.2.15.*Date of promotion } Date of appointment } Numerical position on }
to present rank } to lance rank } roll of N.C.Os. }Extended _____ Re-engaged _____ Qualification (*ii*) _____

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				
		<i>Ensb. Dis. Joined B. Co.</i>	<i>Lothampton.</i>	<i>3 Oct 16</i>	
			<i>Down.</i>	<i>4 . 16</i>	
				<i>14.10.16</i>	
			<i>With Batt.</i>	<i>28.1.17</i>	
	<i>O.C. Unit</i>	<i>Wounded in Action</i>	<i>France.</i>	<i>26.2.17</i>	<i>B213.</i>
	<i>60 Lt. Asst. Adm. (S.I.M.) (Capt.) transf. s/a for C.I.S.</i>			<i>26.2.17</i>	<i>B2601.</i>
	<i>1 Asst. Gen. Hosp.</i>		<i>Down.</i>	<i>27.2.17</i>	<i>HA.7186.</i>
	<i>29 I.B.D.</i>	<i>Joined. B. Co. Depot.</i>		<i>6.3.17</i>	<i>Down Roll.</i>
	<i>O.C. Unit</i>	<i>Rejoined B. Co.</i>	<i>In the Field.</i>	<i>13.4.17</i>	<i>B.213.</i>
<i>25.4.17</i>	<i>do</i>	<i>Appointed Lt. Asst.</i>	<i>do</i>	<i>18.7.17</i>	<i>B213.</i>
<i>21.7.17</i>	<i>do</i>	<i>Killed in Action.</i>	<i>Belgium</i>	<i>14.8.17</i>	<i>B213</i>
<i>18.8.17</i>	<i>do</i>				

*S. Alda Lt. Major
 s/a for 1 Reg. Inf. Lt. Col.
 G.H.Q. 3rd Fock.*

(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.

(P.T.O.)

253

NEWFOUNDLAND CONTINGENT

Copy of "Will"

of

1147, Pte. J.W. Wells.

DUPLICATE
MAIL COPY
Posted 3 - JAN 1918

February 3rd 1918.

In the event of my death I give the whole of my property and effects to my sister Mrs. Sarah Porter, No. 40 Pleasant Street, St. John's, Newfoundland.

Joseph Warren Wells,

Private. No. 1147.

1st Newfoundland Regiment.

Certified True Copy.

F. H. Marshall
LIEUTENANT,
ASST. PAYMASTER,
FOR MAJOR,
CHIEF PAYMASTER & OFFICER I C RECORDS.



PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.Regiment or corps **Newfoundland**No. **1147** *Sobers* CorporalName **J. W. Wells**Died **Will No255** at **France**on the **14** of **August** 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 14/8/17	26	12	10
	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			
	"							
	"							
	Consolidated stoppage							
	Balance due by the Paymaster	26	12	10	Balance due to the Paymaster			
		£26	12	10		£26	12	10

Checked
This account is in accordance with information received at the Pay & Record Office to **11/12/17** and is therefore subject to amendment if, and as may be found necessary.

CHECKED
No 1147
11/12/17

I hereby Certify that the above account is correct in every particular, and that the Debtor balances of £

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 the Civil Authorities, Form B, 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out and the balance to be a debtor balance.



NEWFOUNDLAND AND DEPENDENT TERRITORIES CONTINGENT
J. J. M. Wells
Paymaster

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **Newfoundland**

No. 1147 **Yard** ~~Private~~-Corporal

Name **J. W. Wells**

Died **Will No 255** at **France**

on the **14** of **August** 191**7**.

Deserted at

on the of 191 .

I Certify to the correctness of above in every particular.

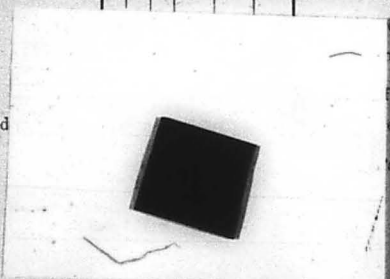
(Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/8/17	26	12	10
	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			
	"				deduced by the sale of Effects from 2			
	Consolidated				Savings Bank balance, including est (if no balance, to be so stated)			
					Pay or Gratuity			
	Balance due by the Paymaster	26	12	10	Balance due to the Paymaster			
		£26	12	10		£26	12	10

CHECKED.
M. G. G. O.
11/1/17



I hereby Certify that the above account is correct in every particular, and that the
debtor balance of £ 26 12 10 is chargeable against the Public.

Dated at

this

day of



191

J. H. Marshall
Paymaster
NEWFOUNDLAND CONTINGENT

- (a) Here state whether the soldier died in battle, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to the Officer in Charge with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when the account is a debtor balance.

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **Newfoundland**

No. **1147** *4084* **Corporal**

Name **J. W. Wells**

Died **Will No 255** at **France**

on the **14** of **August** 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 <i>14/8/17</i>	26	18	10
	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			
	"							
	Consolidated stoppage							
	Balance due by the Paymaster	26	18	10	Balance due to the Paymaster			
		£26	18	10		£26	18	10

checked
This account is in accordance with information received at the Pay & Record Office to 11/12/17 and is therefore subject to amendment if, and as may be found necessary.

CHECKED
No 1140
11/12/17

I hereby Certify that the above account is correct in every particular, and that the debit balance of £

Dated at this day of



NEWFOUNDLAND GOVERNMENT
J. W. Wells
Paymaster

- (a) Here state whether the account is chargeable against the Public or Private Account, if not already stated.
- (b) Words in Italics to be struck out.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Joseph Warren Wells, Regl. No. 1147
 hereby agree, until further notification by me, and in similar official form, to make an Allotment of
50 Dollars and Fifty 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.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
944		Self - Mrs Sarah Porter (Sister) to be deposited in Royal Bank of Canada		50
		Sister's Add. 211 Le Marchant Rd.		
Total Allotment, \$				

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

(Sig.)

Officer Commanding

Company

(Sig.)

(Rank)

private

MAR - 8 1915 191

No. 661/2/18 (Accts. 5B).

4

REMITTANCE PAID TO PRISONER OF WAR INTERNED IN SWITZERLAND.

Name Portland M.G. No. 1148 Regt. Newfoundland

Regimental Paymaster 58. Victoria Street - SW

The sum of £ 3/- was paid to the above-named soldier on 14/2/18, for which his receipt is held in this office. The

amount should be finally charged on Army Form W. 3085, and the lower portion of this form completed and returned to Accounts 5B, War Office,

S.W.1. No vote adjustment should be made by you.

CHARGED
PAY BOOK
Date

WAR OFFICE.

C. W. COOPER,

May 1918 (Date)

for Assistant Financial Secretary,

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$139.⁰⁰/₁₀₀

Apr. 4th 1918

Received from the First Newfoundland Regiment
the sum of One hundred thirty nine ⁰⁰/₁₀₀ Dollars.
on account of Pay to state
balance cheque mailed.

Ch. No.	5385	Initials	AW
Pay Ledger	664	Initials	AW
Gen. Ledger	671	Initials	AW

Regtl. No. _____ Rank _____

AW

April 9th. 1918.

Mrs Sarah Porter,
40 Pleasant Street,
City.

Dear Madam,-

I enclose herewith cheque for \$139.00,
being the balance of the estate of the late No.
1147, Lance Corporal J. W. Wells, payable to you
as Administratrix. I also enclose Letters
of Administration.

Yours faithfully,

Captain & Paymaster &
Officer i/c Records.

Enclosures 2.
JMH/JH.

WILL

No. 1147, Pte. J.W. Wells.

Mrs Sarah Porter

40 Pleasant St

COPY SENT TO N. 2.	
<u>B279/156</u>	
Letter	No.
<u>20/12/17</u>	

WILL.

In the event of my death
I give the whole of my property
and effects to my Sister
Mrs. Sarah Porter,

no. 40 Pleasant Street
St Johns, Newfoundland

Joseph Warren Hells,

Private, no. 1147.

1st Newfoundland Regiment
February 3rd 1916.

Date 1916	Kit Supplied
Feb 8.	Shirt, Tunic, Trousers
" 18	Hall Knife, Hwife, J Knife, Fork

'RECEIPT FOR 1914-15 STAR'

C.R. 1147

Received from the Department of Militia, St. John's, Nfld.
the 1914-15 Star.

Signed Mrs Sarah Porter (sister)

Witness Mary Rowe

Rank L/C.P.L. No. 1147 J.W. Wells

Date Dec 4th 1919

Place Received No 40 Pleasant Street

H.C.G.

C.R. 1147

Extract of Daily Orders part 11, by Lieut.Col. A.L.
Hadown C.M.G., Commanding Newfoundland Regiment,
dated July 28, 1917.

#1147 Pte. J. Wells, D.Co.,
Lance
to be Corporal.

The above promotions to date from July 18, 1917.

C.R. 1147

extract of Daily Orders part 11, by Lieut.Col.A.L.Hadow,
C.M.G., Commanding 1st Fl. Regt, dated 18/7/17.

#1147 Pte. J. Wells, D.Co.,

To be Lance Corporal.

C.R. 1147

Extract from Casualties received from P.S.R. Office, London,
Mar. 7, 1917.

1147 Wells.

1st Australian General Hospital, Rouen, Feb. 27th, shellwound
right hand, slight.

C.R. 1147

Extract of Nominal Roll Draft (All Ranks) to 1st Bn.,
B.E.F. Embarked Southampton.

1147 Pte. J. Wells.

3-10-16.

C.R. 1147

Extract of Casualties received from Enq & Record Office,
London, dated July 31, 1916.

(Extract from Army Form B 215, from C.O. 1st. Field Regt.
dated 11/7/16.)

#1147 Pte. H. Wells. ✓

Wounded in Action 1/7/16.

C.R.

1147

.....
Extract of Casualty List received from P.&.R.O.

July 24th. 1916.

1147, Pte J. Wells.

Furlough 23/7/16. to 31/7/16. Fit for Duty.

Extract of Casualty List received from P.&R.O.

July 17th. 1916.

From: Officer Commanding 3rd London General Hospital.

To : Officer i/c Records Nfld. Contingent, 58, Vistoria St. S.W.

1147, Pte J. Wells.

1st Nfld.

TO BROOKLANDS 13/7/16.

In accordance with your Memo of 30th June, I beg to inform you that the undermentioned man was transferred to the Convalescent Home named on the date specified.

C.R. 1147

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&I.R.O.
July 17th. 1916.

1147, Dr. J. Wells. ✓

1 Newfoundland Bat. GSW Knee. Adm. 36 Gen. Hos. Staples
3rd July 1916.

C.R. 1147

Extract of Casualties received from Pay & Record Office
London, dated July 8, 1916.

#1147 Pte. J. Wells. ✓

Gunshot wound IX.1.

Admitted 3rd London General Hospital, Wandsworth, S.W.,
July 6th, 1916.

C.R. 1147

Extract from Nominal Roll of "D" Co. 1st Bn. 25th. Regt.
Embarked at Devenport for Active Service 20-8-15.

Machine Gun Section.

1147 Pte. J. Wells.

Disembarked at Alexandria 31-8-15 proceeded to Abbassian
Cairo, same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 1147

Extract from Nominal Roll of Draft embarked for Overseas per
S.S. ^Stephano March 20th 1915.

No. 8. Platoon

1147 Pte. J. Wells.

C.R.

1147

Jos. W.Wells was attested for General Service
with the NEWFOUNDLAND REGIMENT on February 25th 1915
Regimental No. 1145 was allotted to Pte J.W.Wells

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 313, Army Form A. 86, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 313, Army Form A. 86, or other official documents.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of Newfoundland

Number of Sheet _____

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.30,712-s.

Signature of O. G. Company _____

W. March
Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.		Age on			
<i>1147</i>	<i>Wells J.</i>	<i>25</i>	<i>years — months</i>	<i>Printer</i>	
Joined	Date	Date of Enlistment		Religion	
Joined	Date	<i>22.2.1915</i>		<i>C. of E.</i>	
Joined	Date	Period of			
Joined	Date	with Colours <i>2 1/4</i> years.			
		with Reserve <i>3 1/2</i> years.			

Place	Date of Offence	Rank	Case of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order of discharge (with trial)	By whom awarded	REMARKS
<i>Racourse</i>	<i>1916</i>	<i>Pte.</i>		<i>1</i> absent from Tattoo Roll Call	<i>Cpl. Small</i>	<i>2 days C.P.</i>	<i>11-9</i>	<i>Capt. Rowsell</i>	<i>I.S.S. Forfeit</i>
	<i>8-9</i>			<i>2</i> absent from parade at 6.30a					<i>10 days pay by R.W.</i>
	<i>9-9</i>			absent from 6.45a. — Parade	<i>Cpl. Taylor</i>	<i>2 days C.P.</i>	<i>26-9</i>	<i>Capt. Rowsell</i>	<i>I.S.S.</i>
	<i>26-9</i>			<i>Drunk & causing a disturbance in Fish & chip shop (out of bounds) on George St. — Absent from tattoo roll call 29/9/16</i>	<i>Serjt. Munn Whalen Cpl Taylor</i>	<i>Admonished</i>	<i>2/10/16</i>	<i>Lt Col. Whalen</i>	<i>R.P.</i>
	<i>29-9</i>			<i>Killed in Action</i>					<i>14 8/17</i>

To be carried over

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of Newfoundland

Number of Sheet _____

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.20,712-s.

Signature of O. G. Company W. March.

Capt.

Regimental Number and Name		Enlistment		Trade		Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>1147 Wells J.</u>	Age on	<u>25</u> years — months	<u>Printer</u>			
Joined	Date	Date of Enlistment	<u>22 2-1915</u>	<u>C. of E.</u>			
Joined	Date					Religion	
Joined	Date						
Joined	Date	Period of	{ with Colours <u>2¹⁷⁴</u> years. with Reserve <u>3³⁶⁵</u> years.				

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
<u>Racourse</u>	<u>1916</u> <u>8-9</u>	<u>Pte.</u>		<u>① Absent from Tattoo Roll Call</u>	<u>Cpl. Small</u>	<u>2 days C. B.</u>	<u>1916</u> <u>11-9</u>	<u>Capt. Rowsell</u>	<u>I.S.S. Forfeit</u>
	<u>9-9</u>			<u>② Absent from parade at 6.30a</u>					<u>1 days pay by R.W.</u>
	<u>26-9</u>			<u>absent from 6.45a. parade</u>	<u>Cpl. Taylor</u>	<u>2 days C. B.</u>	<u>26-9</u>	<u>Capt. Rowsell</u>	<u>I.S.S.</u>
	<u>29-9</u>			<u>Drunk & causing a disturbance in Fish & chip shop (out of bounds) on George St. Absent from tattoo roll call 29/9/16</u>	<u>Serjt. Nixon</u> <u>Whalen</u> <u>Cpl. Taylor</u>	<u>Admonished</u>	<u>2/10/16</u>	<u>Lt Col Whitaker</u>	<u>R. P.</u>
				<u>Killed in Action 14</u>		<u>8</u> <u>17</u>			

To be carried over