



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1699 Name Ed L. Shawe Corps _____

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------|
| 1. What is your name? | 1. <u>Ed L Shawe</u> |
| 2. What is your full Address? | 2. <u>170 North Dunn Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your Age? | 4. <u>19</u> Years..... Months. |
| 5. What is your Trade or Calling? | 5. <u>Black</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Emma Loyelle Shawe do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

SIGNATURE OF RECRUIT.

Ed July 19/15

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

The above questions were then read to the Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at _____ on this 17 day of July 1915

Signature of the Attesting Officer.

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the : _____

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

Date _____ 1915
Place _____ } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.

‡ Here insert the "Corps" for which the Recruit has been enlisted.

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

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Name Edward H. Shave

Apparent age 35 years 5 months 7 Height 5 feet 7 inches.

Chest measurement { Girth when fully expanded 32 inches.
Range of expansion _____ inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Const. Wm. H. Shave, Logo
W. D. Day | Relationship Father

Particulars as to Marriage.

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

Particulars as to Children.

Christian Names.	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. 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 _____									Signature of Officers certifying correctness of entries
Joined at _____ on _____									
Total Service forfeited as above									

Total Service towards Engagement to _____ (date of discharge) _____ years _____ days

" " " Pension " _____ (") _____ " _____



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF



No. 1699 Name Ed L. Shaw Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Ed L. Shaw
2. What is your full Address?..... 2. 1090
North Dawn Bay
3. Are you a British Subject? 3. Yes
4. What is your Age?..... 4. 19 Years..... Months.
5. What is your Trade or Calling? 5. Elect
6. Are you Married?..... 6. no
7. Have you ever served in any Branch of His Majesty's }
Forces, naval or military, if so,* which? } 7. no
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its }
meaning, and who gave it to you?..... } 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service }
to be signed by you if you are accepted?..... } 11. Yes

I, Edwin Hazelle Shaw do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

E. L. Shaw SIGNATURE OF RECRUIT.
S. C. Brown Signature of Witness.
E. July 19/15

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at _____
on this 19th day of July 1915 _____
Signature of the Attesting Officer.

† Certificate of Approving Officer.

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

Date _____ 191 _____
Place _____ } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1699

Name Ledward L. Shave

Apparent age 19 years _____ months. Height 5 feet 7 inches.

Chest measurement { Girth when fully expanded 35 inches.
Range of expansion 2 inches.

Distinctive marks _____



INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Wm. H. Shave 5090
R.D. Bay | Relationship Father

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	Rgt. 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	years days	
Service towards limited engagement reckons from <u>14-7-15</u>							<div style="text-align: center;"> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> <p><u>10</u> <u>10</u></p> </div>
Joined at <u>St. John's</u> on <u>July 19/15</u>							
<u>Thursing 1/7/16</u>							
<u>Embarked St. John's train to Quebec 27-15</u>							
<u>Embarked St. John's on 14-6-16</u>							
<u>Disembarked 15-6-16</u>							
<u>Joined Battalion to the field 30-6-16</u>							
<u>Thursing 1-7-16</u>							

Total Service forfeited as above

Total Service towards Engagement to 1-7-16 (date of discharge) _____ years 348 days

" " " Pension " _____ (") _____ " _____

Regimental Number 1699

Company G

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 E. G. Shave. Lt. Col.

Witness St. J. Howsell (2nd Lieut)

Dated at St. John's

May 24th 1916



November 23rd, 1916.

Dear Sir,

For some time past the Imperial Government have been making enquiries in relation to those men of the First Newfoundland Regiment who have been reported missing since the action of the 1st July. I very much regret to state, however, that from the correspondence which has taken place, a copy of which I enclose, it is evident that none of them are Prisoners of War in Germany, and the authorities are, therefore, reluctantly forced to the conclusion that all these gallant men, whose names are given in the enclosed list, and one of whom was very dear to you, were killed in that fateful action on the 1st of July.

I desire to express to you on behalf of the Government, as well as for myself, the sincerest sympathy in this time of sorrow. We feel the loss of our loved ones, but it will, no doubt, be some consolation to you to think that he, for whom you now mourn, willingly answered the call of King and Country, did his part nobly, and fell, facing the foe, in defence of the principles of Righteousness, Truth and Liberty. Though he has laid down the earthly weapons of warfare, he now wears the Soldier's Crown of Victory, and his name will be inscribed upon the Glorious Roll of Honor, and be held in fragrant memory by all his fellow-countrymen. When the victory is won, and Peace again reigns upon the earth, it will be a comforting thought to you that in this glorious achievement he bore no small part.

I trust that you may have the Grace and consolation of the Great Father of us all at this time.

With sincere sympathy,

Believe me to be,

Your obedient servant,

Colonial Secretary.

Mr. W. H. Shave,
Fogo.

1699

1630

C.R. 1699



CASUALTIES

London District

C 928
19.8.16.

1st Bn. NEWFOUNDLAND REGIMENT

Regtl.No.	Rank & Name	Casualty	P.R.
1699	L/Cpl.Shave	E.L. "A" Coy Missing 1.7.16. Reptd. by O.C. Bn. 4.8.16.	N

(Handwritten flourish)

C.R. 1699

PROMOTION.

Extract of Regimental Orders, dated Nov. 1st. 1915.

By Lieut. Col. Sir W.E. Davidson, K.C.M.G. Officer Comdg.



Lieut. Col. Comdg. has approved the following promotion.

No. 1699 E.L. Shave.

To be L/Corporal from Oct. 26, 1915.

M

August 29, 1916.

Dear Sir,

I am in receipt of your letter of the 21st instant, asking news of E. L. Shave, No. 1699, of the Newfoundland Regiment. On the 22nd instant, being the day after you wrote your letter, I sent you a telegram, intimating that we had received news from the Record Office, London, that he was missing. It is evident, therefore, that they have been unable to obtain any tidings of him and his name was, therefore, included in the long list of those of whom they had no definite news. As soon as any tidings is obtained of him, the Record Office will wire such out and I shall communicate at once with you. I hope that shortly you may receive news of his safety.

Yours truly,

Colonial Secretary.

Constable W. H. Shave,
Fogo.

C.R. 1699

1699 SHAVE E.L. L/C. ✓

EXTRACT OF CASUALTY LIST RECEIVED FROM THE F & A O
LONDON DATED 7/11.16.

"REPORTED MISSING JULY 1, 1916."



C.R. 1699

DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND.

January 24th. 1918.

Const. W. H. Shave,
Fogo,

Dear Sir:

I am forwarding you by express a Kit Bag recently received from London, containing effects of your late son, No. 1699, Pte. A. L. Shave, 1st. Nfld. Regt., and also enclose statement of same.

Please return this statement to me with the receipt appended duly signed.

Assuring you of my sincere sympathy in your loss.

Yours faithfully,

A. M. Macneil.
Lieut
for Paymaster.

C.R. 1699

May 15, 1918.

Dear Mr. Shave:-

I am writing to inform you that it is my regrettable duty to forward to you, one "KIT BAG" which belonged to your son, the late #1699 Pte. E. Shave of The Royal Newfoundland Regiment.

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

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

I am,

Yours sincerely,

Captain.

Const. W.H. Shave,
Fogo, N.D.B.

Enc 1.

PERSONAL EFFECTS

Regt. No. 1699, SHAVE, A.I.

1 Kit Bag.

Next of Kin. (Father)
Const. W.H. Shave,
FcgO,
N.D.B.

Received the above mentioned
effects.

Signed *Const. W.H. Shave*.....

PERSONAL EFFECTS.

Received from Militia Department

Package of effects of the late *No 1699 Corp. E. J. Shave*

Signed *Const W. H. Shave*

Date *May 28th 1918*

C.R. 1699

Extract from Nominal Roll of the Nfld. Regt. Draft
No. 6 from 2nd Bn., Depot, to 1st Bn. B.E.F.
Embarked Southampton 14-6-18.

1699 L/Cpl. E. Shave.

C.R. 1699

Extract of Casualty List received from P.&.R.O.
August 24th. 1916.

The following Casualty in the 1/1 Newfoundland Regiment
with the British Expeditionary Force is reported under
various date.

1699, L.Cpl. E.L. Shave. ✓

MISSING

COPY OF TELEGRAM.

Dated
22nd August 1916.

To
Mr. W. H. Shave
Fogo.

Regret to inform you ~~that~~ ~~the~~ ~~Rank~~ ~~of~~ ~~Corporal~~ ~~No. 1699~~

London, officially reports
~~Edwin L. Shave missing since July 1st.~~

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

J. R. BENNETT,

Colonial Secretary.

C.R. 1699

Edwin L. Shave was attested for General service
with the NEWFOUNDLAND REGIMENT onJuly.19th 1915.
Regimental No1699 was allotted to Pte. E.L. Shave.

AUTHORITY:

Record Ledger,

Dept. of Militia,

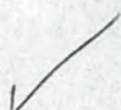
March 25th. 1919.

C.R. 1699

Extract of Cablegram received from London, dated
August 22, 1916.

1699 Pte. Shave.

Missing July 1st.



(101)

copy

(10)

7090

August 21st 1916

Honourable J. R. Bennett Esq

Dear Sir we are unable
to get any news of E. L.
Shave ¹⁹¹⁶⁹⁹ since the 1st July
I am informed he was
attached to A. Company
If you could give
me any information
as to his whereabouts
would be thankful
yours respectfully

W. H. Shave
Constable

C.R. 1699

Extract from Nominal Roll of Draft which embarked for
B.E.F. on or about 20th June 1916.

#1699 L/Cpl. E. Shave.

C.R. 1699

Extract from Hospital Roll, G. Co., sent a/c of St. John's 27/10/18 for Overseas

1699 L/C E. L. Shave.

E. L. Shave

1699

P.R.O.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

Edwin L. Shave

I, *Edwin L. Shave*, Regl. No. *1697*

hereby agree, until further notification by me, and in similar official form to make an Allotment of

2 Dollars and *50* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz. :

Allotment begins

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>1515</i>	<i>Wife</i>	<i>W. H. Shave</i> <i>W. H. Shave</i>	<i>St. John's</i>	<i>70</i>
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

Sept 23rd 1915

(Sig.) *Edwin L. Shave*

(Rank) *Private*

No. *1699* Name *Shove, E. L.* Sqn., Batty., } *G.* Corps *21st Inf. Regt.* Date of enlistment } *19/7/16* G.C. Badges } Service or Proficiency Pay }
 Date of last entry in } No. and date } Period not reckoning towards } Sheet No. Signature O.C. } Character
 Company Conduct Sheet } of last drunk } freedom from extra fine }

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

Army Form B. 122

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

MEDICAL HISTORY

OF

Surname Shade

Christian Name Edwin Lagille



Table 1.—GENERAL TABLE.

Birthplace:—Parish _____ County Wilt

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>16</u> day of <u>July</u> 191 <u>5</u>		on _____ day of _____ 191	
	at <u>St. Johns Wilt</u>		at _____	
Declared Age	<u>19</u> years _____ days		_____ years _____ days	
Trade or Occupation	_____		_____	
Height	<u>5</u> feet <u>7</u> inches		_____ feet _____ inches	
Weight	<u>125</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>35</u> inches		_____ inches	
	Range of expansion... <u>2</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	Left
	Number	_____	_____	_____
When Vaccinated	<u>120</u>		_____	
Vision	R.E.—V=	<u>0 D 4/6</u>	R.E.—V=	_____
	L.E.—V=	<u>0 5 4/15</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>Samuel Bateson</u>		_____	
(Rank)	<u>Capt.</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. Johns</u>		at _____	
	on <u>19</u> day of <u>July</u> 191 <u>5</u>		on _____ day of _____ 191	
Joined on Enlistment	Corps.	<u>1st Wilt Regt</u>	Corps.	_____
	Regtl. No.	<u>1699</u>	Regtl. No.	_____
Transferred to	_____		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 191		on _____ day of _____ 191	
(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
17.10.15	1 st Inoculation
19.11.15	Vacc. R.P. Graham. St. Ranc.
23.10.15	2 nd Inoculation

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 W.L.F.					

NON-EFFECTIVE ACCOUNT.

Regiment or corps *12 Newfoundland*
 No. *1699* Rank *Sypl* Name *Ch. Shawe*
 Died (a) *Intestate* at *France* on the *14* of *July* 191*6*
 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>JUL 1 1916</i>	<i>1</i>	<i>2</i>	<i>9 1/2</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>1</i>	<i>2</i>	<i>9 1/2</i>	Balance due to the Paymaster			
		<i>£</i>	<i>1</i>	<i>2</i>		<i>£</i>	<i>1</i>	<i>2</i>
				<i>9 1/2</i>				<i>9 1/2</i>

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.

New Telephone No.—REGENT 6151.
Enquiry Department for
Wounded and Missing,
18, CARLTON HOUSE TERRACE, S.W.

BRITISH RED CROSS



BRITISH RED CROSS

AND

ORDER OF ST. JOHN.

ad.
22.7.16

SIR,—Can you give us the correct address, present location
and latest information of Share. E. L. 1699X 2/cpl.

1/1 Newfound Land: A Coy. for whom we have an enquiry?
II Plat. With apologies for troubling you.

I am, yours faithfully, 24 1916

To the Officer-in-Charge,

LOUIS MALLET.

of Infantry Records,

Newfound Land R.O.

No Report ✓

Shave, E.L.

1699

Ray Sept

PAY LIST. to 1st July 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps 1st Newfoundland
 No. 1699 Rank L/Cpl. Name E.L. Shave
 Died (Intestate) 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 July.....1/16.....	1	2	9½	
	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	1	2	9½	Balance due to the Paymaster				
		£	1	2	9½	£	1	2	9½

This account is in accordance with information received at the Pay & Record Office to / / 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

this FEB 21 1917 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.

PAY LIST. to 1st July 1916 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps 1st Newfoundland
 No. 1699 Rank L/Cpl. Name E.L. Shave
 Died (Intestate) 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 July....1/16.....	1	2	9½	
	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				
	"				duced by the sale of Effects from 2				
	"				Savings Bank balance, including st (if no balance, to be so stated)				
	Consolidated				y or Gratuity				
					Balance due by the Paymaster	1	2	9½	
					Balance due to the Paymaster				
		£	1	2	9½	£	1	2	9½

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 FEB 21 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.

PAY LEAF

NON-RESERVE ACCOUNT.

Regiment or corps 1st Newfoundland
 No. 1699 Rank L/Cpl. Name E.L. Shave
 Died^{or}Intestate at France on the 1st of July 1918.
 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 A)

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month July.....1/18.....	1	2	9½
	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	1	2	9½	Balance due to the Paymaster			
		£	1	2	9½			

This account is in accordance with information received at the Pay & Record Office to FEB 22/1917 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 is correctly chargeable against the Public.

Dated at this FEB 21 1917 191 Paymaster.

(a) Have state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be submitted to the War Office, with Army Form R. 2020 or Army Form G. 1815.

July 9th.1917.

Constable W. H. Shave,

Fogo, N.D.B.

Dear Sir:-

I enclose herewith cheque for \$19.03,
being the balance of the estate of your late son,
No. 1699, R.L.Shave.

Yours truly

Lieut.
Deputy Paymaster.

J.M.H./J.H.

No 1572



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *Edward S. Shaw*, Regl. No. *1607* hereby agree, until further notification by me, and in similar official form to make an Allotment of *Twenty* Dollars and *00* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}_{or} *1* Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}_{or} *1* Persons concerned, viz.:

Allotment begins *Oct 30 1915*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
<i>1513</i>	<i>Wife</i>	<i>Elizabeth H. Shaw</i>	<i>Fort</i>		<i>20</i>
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.) *Sen*
fw
Officer Commanding
Company
1915

(Sig.) *Edward S. Shaw*
(Rank) *Sergeant*

Army Form B. 103.

Casualty Form—Active Service.

1145

Regiment or Corps 2/1st Mfld. Regt. Regimental Number 1699
 Rank S/c. Surname Shaver Christian Name Edwin L.
 Religion C. of E. Age on Enlistment 19 7/16 years — months.
 Enlisted (a) 19/7/16 Terms of Service (a) duration Service reckons from (a) 24/5/16
 Date of promotion to present rank 27/10/15 Date of appointment to lance rank 27/10/15
 Extended { } Re-engaged { 24/5/16 } Qualification (b) —
 or Corps Trade and Rate —

Signature of Officer i/c Records.

Date	Report		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 26, or other official documents
	Date	From whom received			
30.6.16	Unit	Joined Battalion In the Field	Embarked ... <u>Southampton</u> Disembarked... <u>Rouen</u>	14.6.16 15.6.16	B 213.
11/7/16	Unit	Missing	France	1/7/16	B 213.

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 279
 No. 6/15/17
 2 - JUL 1917

Doohy Lieut.
 MAJOR FOR
 O. i/c No. 1 Reg. Infantry Section
 G.H.Q. 3rd 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) Signaller, Shoening-smith, & Co.
 (B96130) W 15012-5156 J. P. & Co., Ltd. Form B. 103/2. [P.T.O.]

COPY.

Casualty Form—Active Service.

Regiment or Corps 2/1st Newfoundland
 Regimental No. 1699 Rank Lt. Col. Name Shaw, Edwin L.
 Enlisted (a) 19.7.16 Terms of Service (a) Duration Service reckons from (a) 24.5.16
 Date of promotion to present rank 27.10.15 Date of appointment to lance rank 27.10.15 Numerical position on roll of N.C.Os.
 Extended Re-engaged 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 Southampton.		14. 6. 16.	
		Dis as Renew.		15. 6. 16.	
30. 6. 16.	Unit.	Joined Battalion.	In the Field.	30. 6. 16.	213.
11. 7. 16	Unit.	Missing.	France.	1. 7. 16	213.

J. Toole
 Capt.
 for.
 O/4201 Reg. Inf. Section.
 G.H.A. 3rd Ech.



(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.

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



Date

Address

SEP 23 1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Mr. William H. Shave (Father)

in respect of his service as No. **1669** Rank **Pte.**

Name **Edwin L. Shave** **Royal Nfld. Regt.**
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received two British war medals

Signature Wm H. Shave

Date Oct. 1st. 1921

Address Fogo Nfld

[P.T.O.]

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

NEWFUNDLAND
JULY 28 1950

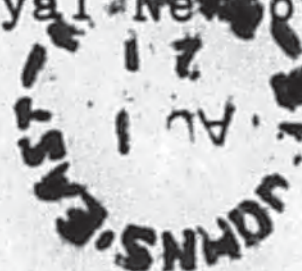
Dept. of Militia,

St. John's.

.....1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. 1699 Rank
Name..... *Edwin S. Shave*

Royal Newfoundland Regt.



Wm H. Shave (Sgd.)

father Relationship.

Address..... *Fogo, Nfld.*

C.R. 1699

Fogo

February 18th 1920

Lieut. Colonel W. J. Rendell

Dear Sir

I beg to acknowledge receipt of
a memorial scroll in honor
of No. 1699.

L. Cpt Edwin L. Shave

1 Royal Newfoundland Regt

also His Majesty's the King's message

yours respectfully

Wm. H. Shave
Constable

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Forms B. 121. 39.

Number of Sheet 203

Regiment of 1st Newfoundland.

Signature of O. C. Company _____



Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>E. L. Shave</u>	Age on	<u>19</u> years <u> </u> months	<u>Clerk.</u>	
Joined	_____ Date _____	Place and Date of Enlistment	<u>St. John's July 19, 1915</u>	Religion	
Joined	_____ Date _____	Period of	{ with Colours <u>3.11.1915</u>	Place of Birth	
Joined	_____ Date _____		{ with Reserve <u>3.11.1915</u>		<u>6 of E.</u>
				<u>Fogo.</u>	

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>Missing 1 7/16</u>					

To be carried over

Army Form B. 121.