

INSTRUCTIONS.

In the column headed "Continuous Service Enlistment" will be shown whether 1st, 2nd or 3rd continuous enlistment. In column headed "Pay per Day" and "Amount of Pay" will be shown the proper amounts exclusive of re-enlistment pay per day and month respectively. In "Re-enlistment Pay" column will be shown amount of re-enlistment pay due during month. The "Total Amount of Pay" column will show the total pay due in columns headed "Amount of Pay" and "Re-enlistment Pay."

Commanding Officers of Companies are required to make out this roll in quadruplicate with signatures of all the members of the Company who were present during the month. One copy will be retained by the Company Commander and three copies, together with one copy Sick and Absent Report and three copies Deduction sheet, forwarded to "Superintendent, Department of Public Safety, Charleston, West Virginia," within five days after the end of each month.

Voucher No. 4616

\$

To Whom Paid

.....

For What Paid

MUSTER AND PAY ROLL

"B" Company

From MAY 1ST 19 22

To MAY 31ST 19 22

Date of Payment

Company

"B"

Station WILLIAMSON, W.VA.

day of

MAY

to the THIRTY FIRST day of

MAY

1922

, both days inclusive

Total Amount
of pay

Deductions

Total Amount
Due

We, the undersigned, do hereby acknowledge
receipt of the amounts set opposite our
names, the same having been paid to
us by the Company Commander.

REMARKS

Dollars

Cents

Dollars

Cents

Dollars

Cents

200 00

200 00

1

71956

175 00

175 00

1

71957

125 00

125 00

1

71958

120 00

120 00

2

71959

120 00

120 00

3

71960

120 00

120 00

4

71961

119 67

119 67

5

71962

Disch. May 2nd Re-Enl. May 3, 1922.

110 00

110 00

1

71963

110 00

110 00

2

71964

110 00

110 00

3

71965

110 00

110 00

4

71966

5

6

7

8

| Total Amount of pay | | Deductions | | Total Amount Due | | |
|---------------------|-------|------------|-------|------------------|-------|----|
| Dollars | Cents | Dollars | Cents | Dollars | Cents | |
| 100 | 00 | | | 100 | 00 | 1 |
| 100 | 00 | | | 100 | 00 | 2 |
| 100 | 00 | | | 100 | 00 | 3 |
| 100 | 00 | | | 100 | 00 | 4 |
| 100 | 00 | | | 100 | 00 | 5 |
| 100 | 00 | | | 100 | 00 | 6 |
| 100 | 00 | | | 100 | 00 | 7 |
| 100 | 00 | | | 100 | 00 | 8 |
| 100 | 00 | | | 100 | 00 | 9 |
| 105 | 00 | | | 105 | 00 | 10 |
| 100 | 00 | | | 100 | 00 | 11 |
| 100 | 00 | | | 100 | 00 | 12 |
| 102 | 00 | | | 102 | 00 | 13 |
| 100 | 00 | | | 100 | 00 | 14 |
| 100 | 00 | | | 100 | 00 | 15 |
| 100 | 00 | | | 100 | 00 | 16 |
| 100 | 00 | | | 100 | 00 | 17 |
| 100 | 00 | | | 100 | 00 | 18 |
| 100 | 00 | | | 100 | 00 | 19 |
| 100 | 00 | | | 100 | 00 | 20 |
| 100 | 00 | | | 100 | 00 | 21 |
| 100 | 00 | | | 100 | 00 | 22 |
| 100 | 00 | | | 100 | 00 | 23 |
| 43 | 33 | | | 43 | 33 | 24 |
| 100 | 00 | | | 100 | 00 | 25 |

We, the undersigned, do hereby acknowledge receipt of the amounts set opposite our names, the same having been paid to us by the Company Commander.

ck. # 71967 - 68 - 69 - 70 - 71 - 72 - 73 - 74 - 75 - 76 - 77 - 78 - 79 - 80 - 81 - 82 - 83 - 84 - 85 - 86 - 87 - 88 - 89 - 90 - 91

REMARKS

Disch. May 18, Re-Enl. May 19, 1922.

Disch. May 13, 1922.

We, the undersigned, do hereby acknowledge receipt of the amounts set opposite our names, the same having been paid to us by the Company Commander.

REMARKS

| Total Amount of pay | | Deductions | | Total Amount Due | | |
|---------------------|-------|------------|-------|------------------|-------|----|
| Dollars | Cents | Dollars | Cents | Dollars | Cents | |
| 100 | 00 | | | 100 | 00 | 26 |
| 100 | 00 | | | 100 | 00 | 27 |
| 100 | 00 | | | 100 | 00 | 28 |
| 100 | 00 | | | 100 | 00 | 29 |
| 100 | 00 | | | 100 | 00 | 30 |
| 100 | 00 | | | 100 | 00 | 31 |
| 100 | 00 | | | 100 | 00 | 32 |
| 100 | 00 | | | 100 | 00 | 33 |
| 100 | 00 | | | 100 | 00 | 34 |
| 100 | 00 | | | 100 | 00 | 35 |
| 100 | 00 | | | 100 | 00 | 36 |
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60c, # 71992
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72000
01
02

CHANGES SINCE LAST PAY ROLL

| NAMES (Private in alphabetical order. The first Christian name to be written in full.) | | | CAUSE Whether by honorable discharge, discharge, dishonorable discharge, expiration of enlistment. | Date of Enlistment |
|-------------------------------------------------------------------------------------------|---------|----|-------------------------------------------------------------------------------------------------------|--------------------|
| <u>LOSS</u> | | | | |
| <u>SGT. DISCHARGED.</u> | | | | |
| ELMER | CUBINE | | DISCHARGED. | MAY 3- 1920. |
| <u>PVTS. DISCHARGED</u> | | | | |
| GILLISPIE, | JAMES | F. | DISCHARGED. | AUG. 2- 1921. |
| HAWKS, | COY | E. | DISCHARGED. | MAY 19 -1920. |
| KEENAN, | ABRAHAM | O. | DISCHARGED. | OCT. 22- 1921. |
| LANGDON, | CLAYTON | A. | DISCHARGED. | DEC. 15 -1921. |
| PETERSON, | CLING | | DISCHARGED. | AUG. 4- 1921. |
| RUTLIFF, | CHARLEY | E. | DISCHARGED. | DEC. 19 -1921. |

Date of Discharge or Expiration of Enlistment.

REMARKS

Give Circumstances of Discharge.

MAY 2 - 1922.

EXPIRATION OF TERM OF SERVICE, RE-ENLISTED FOR COMPANY.

APL. 30 -1922.

MISCONDUCT.

MAY 18 -1922.

EXPIRATION OF TERM OF SERVICE, RE-ENLISTED FOR COMPANY.

APL. 25 -1922.

ABSENT WITHOUT LEAVE.

APL. 25 -1922.

ABSENT WITHOUT LEAVE.

MAY 13 -1922.

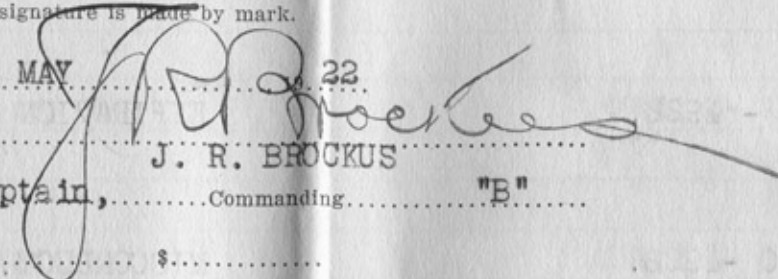
ASSAULT.

APL. 30 -1922.

MISCONDUCT.

I hereby certify that the foregoing pay roll and reports submitted therewith are true and correct; that each man whose name appears thereon is either a commissioned officer or regularly enlisted man of the organization; that each man has personally rendered the service for which pay is claimed; that the sum set opposite each name in the column marked "Total Amount Due," has been verified and is correct and just and has not heretofore been paid; and that the signatures acknowledging the receipt of pay are, to my knowledge, the signatures of the identical persons entitled to the same or their personal mark, where the signature is made by mark.

Given under my hand this the 19 day of MAY 1922.


J. R. BROCKUS
Captain, Commanding "B"

Account submitted for..... \$.....

Differences as follows.....

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.....

..... \$.....

APPROVED FOR..... \$ 

DATE APPROVED.....

.....
Superintendent, Department of Public Safety.