



# Newfoundland Forestry Companies

## ATTESTATION OF

No. 8084 Name Frank Phillipps Corps Corps

### Questions to be put to the Recruit before Enlistment.

- |  |   |
|--|---|
| 1. What is your name? .....  | 1. <u>Frank Phillipps</u> .....           |
| 2. What is your full Address? .....  | 2. <u>76 St. John's Rd</u> .....          |
| 3. Are you a British Subject? .....  | 3. <u>yes</u> .....                       |
| 4. What is your age? .....   | 4. <u>21</u> Years <u>10</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Fireman</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. What is your Religion? .....  | 9. <u>Ch. of E.</u> .....                 |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? ..... | 10. <u>yes</u> { Name .....               |
|  | { Corps .....                             |

I, Frank Phillipps ..... 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.

Frank Phillipps ..... SIGNATURE OF RECRUIT.

E 20/4/17

Nothing ..... Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Frank Phillipps ..... 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 serve His Majesty, His Heirs and Successors, in the United Kingdom, 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 St. John's on this 25 day of April ..... 1917

Signature of Attesting Officer J. J. Phillipps ..... Capt

### † 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 Corps.

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

Date 25/4/17 ..... 1917

Place St. John's .....

J. J. Phillipps ..... 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, 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) .....





## Certificate of Discharge and Pensions Return of a Soldier Discharged on Account of Disability.

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim for pension, on account of disability, is to be submitted for the consideration of the Pensions and Disability Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification, depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i. c. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Philips, Frank*

Regiment from which discharged *Royal Newfoundland*

Regimental number *8034.*

Intended address *76 St. Lawrence Road*

Height on discharge *5* Feet *9*

Color of hair on discharge *Black*

Complexion *Dark*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *Tall*

Christian name of Father *James*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St. John's 5-6-1895*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full)

*Frank X Philips* (Rank)

Station

*Rank*  
Date *10-6-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge, correct.



Station

Date