

Newfoundland Forestry Companies

Questions to be put to the	Recruit before Enlistment.
I. What is your name?	221 Theatre Bill
2. What is your full Address?	Stop his 14
3. Are you a British Subject?	3
4. What is your age?	4 3.9 Years Months
5. What is your Trade or Calling?	5. Bisherman
6. Are you Married?	6. 1910
7. Have you ever served in any Branch of His Ma) jesty's Forces, naval or military, if so,* which?	7
8. Are you willing to be vaccinated or re-vac-	8. 410
9. What is your Religion?	9 Meth
10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?	io. y.c. { Name
Sec	Sutching Signature of Witness.
bear true allegiance to His Majesty King George the Fifth	do make oath, that I will be faithful and His Heirs and Successors, and that I will, as in duty and Successors, in the United Kingdom, according to the con-
	ATE OR ATTESTING OFFICER.
The Recruit above named was cautioned by me that he would be liable to be punished as provided in the Arm	if he made any false answer to any of the above questions y Act.
The above questions were then read to the Recruit	in my presence.
a proper and the residence of the contract of	and that his answer to each question has been duly entered
as replied to, and the said recruit has made and signed the on this	7 le Plantiers
†CERTIFICATE OF	APPROVING OFFICER.
I certify that this Attestation of the above named R quired forms appear to have been compiled with. I acco- If enlisted by special authority, such will be attached	[1] [2] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4
Date191	
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.

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Ed	wardse	llas	5		TEN			,
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(a) Christi	an and Surname of Woman to (c) Prese	whom married nt address. (d	d, and whether sp Initials of Offic	inster or er verify	widow ing ent	. (b) P	lace and	date of marriage.
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Corps in Rgt. or which served Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service lowed to for fixing rate of p	ng the	Service serve no ed to rec wards G	kon to-	Signature of Officers certifying correctness of entries
Service towards limit	ed engagement reckons from	nd de-	1.248	Ecuts	Dida	1	Days	
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Total Service	ce forfeited as above		qi	di an				*



Newfoundland Forestry Companies

	CAKIL
	535H
No.	

ATTESTATION OF Colored Tellan

Corps

Questions to be put to the	Recruit before Enlistment.
I. What is your name?	1 22 Therew Mice
2. What is your full Address?	2 Vr) ohns N. F
3. Are you a British Subject?	33. d
4. What is your age?	4
5. What is your Trade or Calling?	5
6. Are you Married?	6
7. Have you ever served in any Branch of His Ma) jesty's Forces, naval or military, if so,* which?	7
8. Are you willing to be vaccinated or re-vac-	8. Theth
9. What is your Religion?	9
10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?	Name
made by me to the above questions are true, and that I	Signature of Witness.
I	HECRUIT ON ATTESTATION. do make oath, that I will be faithful and His Heirs and Successors, and that I will, as in duty and Successors, in the United Kingdom, according to the con-
	TE OR ATTESTING OFFICER.
The Recruit above named was cautioned by me that he would be liable to be punished as provided in the Arm	if he made any false answer to any of the above questions y Act.
The above questions were then read to the Recruit	in my presence.
I have taken care that he understands each question, as replied to and the said recruit parimade and signed th on this	and that his answer to each question has been dury entered a declaration and taken the oath before me at
Signature of Attesting	Officer
†CERTIFICATE OF	APPROVING OFFICER.
I certify that this Attestation of the above-named R	ecruit is correct, and properly filled up, and that the re-
	rdingly approve, and appoint him to the
If enlisted by special authority, such will be attached	
Date191	Approving Officer.
Place	Sapproving Omcer.
† The signature of the Approving Officer is t	o be affixed in the presence of the Recruit. uit 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.

vis:-(Name).....re-enlisted in the (Regiment)......

DESCRIPTIVE REPORT ON FAILISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet. dward sellars Apparent age 39 years 0 months. Height. Girth when fully expanded... Chest Measurement Range of expansion Distinctive marks one vaco Left arm Larbhair inches Brown Cys INFORMATION SUPPLIED BY RECRUIT Name and Address of next of kin Ahana Lellans 1) Theatre Still | Relationship Wif 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. (d) Maria Patsons Western Bay Particulars as to Children Christian Names Date and Place of Birth Email to his Edith Blanch Vera Wellington 1914 do. 1917 STATEMENT OF THE SERVICES Service not allowed to reckon for fixing the rate of pension of the service in Reservice in Rese Signature of Officers certi-fying correctness of entries Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. Army Rank Dates Years Days Years Service towards limited engagement reckons from Joined at Total Service forfeited as above.....

[date of discharge]____

Tetal Service towards Engagement to

Army Form B. 121. Squadron, Troop, Battery and Company Conduct Sheet. Number of Sheet List Porm! Regiment of hold Farestry Companies B. 121 Good Conduct Badges, Service pay or proficiency pay H.Q. Regimental No. and Name Age on 39 years ST. JOHNS, N.F.L.D. Religion Place and Date Date. Joined Date Cases of drunk-Date of Offence Names of OFFENCE REMARKS Place Punishment awarded By whom awarded Witnesses To be carried over