



Newfoundland Forestry Companies

ATTESTATION OF

No. 110 Name William Anderson Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>William Anderson</u> |
| 2. What is your full Address? | 2. <u>Grand Falls</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>34</u> Years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</u> |
| 6. Are you Married? | 6. <u>yes</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>Meth.</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, William Anderson 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.

William Anderson SIGNATURE OF RECRUIT.
Frank C. Payne Signature of Witness.

15/11
E-2

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Anderson 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 Grand Falls on this 3rd day of May 1917
Signature of Attesting Officer H. J. Fitzgerald Smb

†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 Forestry Corps

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

Date 15/11 1917
Place St. John's J. J. Kennedy Capt 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).....

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William Anderson
 Apparent age 34 years 7 months. Height 5 feet 5 1/2 inches

Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 3 inches

Distinctive marks Hair - Gr. Brown Eyes - Gr. Blue - Squint
in Right Eye. Complexion - Fair

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Fanny Anderson
Pilley's Island | Relationship Wife
N.D. Bay 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) <u>Fanny</u> <u>Spinster</u>	(b) <u>Oct 26 1910</u> <u>Brooklyn</u> <u>N.S.A.</u>	(c) <u>Grand Falls</u>	(d) <u>F. C. Payne</u>
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Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, 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 _____									
Joined at _____ on _____									
<u>Discharged April 16/1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " Pensions " _____ [" "] _____ " _____ "

C.R. 8110

Extract of Daily Orders Part II Newfoundland Forestry
Corps. Depot St. John's dated April 10th/19.

The discharge of the undernoted on Demobilization has
been APPROVED by O.C. Discharge Depot from noted date.

8110 Pte. Wm. Anderson.

2/4/19.

No.

41

ENTRAGED
 PAY LEGBEER
 NUM. ROLL
 ALLOT. INDEX
 R. CISTLN
 EXAMINED



Newfoundland Forestry Companies.

ALLOTMENTS

I, William Anderson, Regl. No. 5110

hereby agree, until further notification by me, and in similar official form to make an Allotment of 70 Dollars and Seventy 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 May 3/17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
80	wife	Mrs. Wm. Anderson	Pilley, Isld.	70
			Total Allotment, £	

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

(Sig.) W.A. Baird
 Officer Commanding
 Company
St. John's
May 3/17
 191

(Sig.) _____
 (Rank) 1st Lt.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
R 121
303.Number of Sheet *First*Regiment of *Newfoundland Forestry Companies* Signature of O. C. Company _____

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	Date of award or of order dispensing with trial	By whom awarded	REMARKS
No.		Age on		Religion				
<i>8110</i>	<i>William Anderson</i>	34	years 7 months	<i>Burkeham</i>				
Joined	Date	Place and Date of Enlistment		Religion				
Joined	Date	Period of {	with Colours <i>309</i> years. with Reserve <i>365</i> years.	<i>Metta</i>				
Joined	Date			Place of Birth				
Place	Date of Offence	Rank	Class of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded		
				<i>Demobilized Lt Gen's 16th 19</i>				

To be carried over



Descriptive 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 to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities 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 *William Anderson*

Regiment from which discharged *Royal Newfoundland*

Regimental number *8110*

Intended address *Grand Falls*

Height on discharge *5 Feet 7*

Color of hair on discharge *light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *Martin*

Christian name of Mother *—*

Wife's maiden name in full *Fanny Rideout*

Date and place of marriage *Brooklyn, New York, 1910, Dec 18th*

Christian names of children *—*

Place and date of soldier's birth *Pillys Island, Sept 20th, 1882*

Nature and locality of civil employment required

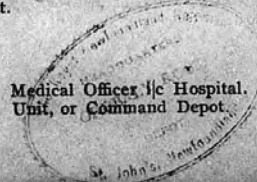
I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *William Anderson*

Pte
(Rank)

Station *St Johns* Date *28-3-19*

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

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 8110 Rank Pte. Name Anderson Wm
 Intended place of residence Grand Falls
 2. Occupation Lumberman
 Classification of soldier E Medical Category B II

3. The above named man is discharged in consequence of.....
DEMobilIZATION.
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place ST. JOHN'S
 Date MAR 31 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place and date ST. JOHN'S
31-3-19
 Signature of soldier William Anderson
 Signature of witness J. A. Snowfoot

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
 Place and Date ST. JOHN'S
31-3-19
 Signature of soldier William Anderson
 Signature of witness W. J. Catory RQM

STATEMENT OF SERVICE

7. Enlisted for service 3-5-17 No of days on Military
 Discharged from service 2-4-19 Plus 14 days Service 7-14

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place ST. JOHN'S
 Date APR 2 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld.
 Date April 16/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

Handwritten: A.B. 299/1908

Handwritten: 3
17
17
365
17
348

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 8110 Rank Private Name Anderson WTM
 Date of Enlistment 3.5.17 Address Grand Falls District Dwight's
 Occupation Lumberman Classification for Discharge 6 Medical Category BII
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	/	N.F. Med	D.F. 1	/
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	/ D 400A	/ B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2		" 6		
B 179c	B 120	M 93	I.C.C.			

Date 29.3.19

for O. C. Discharge Depot. H. Mews, Int.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

William Anderson

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$120.00
 (b) Clothing Supplied [Signature]

Date 31-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 1115*.....to his home at *Stamford* and Release Certificate No. *1008* issued.

Date *31-3-19*.....
J.H. Crawford
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *16-11-19*

Date *31-3-19*.....
W. Kelly Capt.
 Depot Paymaster.

Discharge approved for *2.4.19*
 Forwarded with following documents to O.C Discharge Depot.

N.F. P36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
E 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	1
R 178a.....	1. D 400A.....	B 1915.....		do 2nd.....	" 3.....	1
B 179.....	D 400B.....	Form L.....		do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....		do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....	<i>1</i>	<i>1</i>	" 6.....	
B 179c.....	B 120.....	M 93.....				

Date *31-3-19*.....
J.H. Crawford
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
 Officer i/c Records.
 Board of Pension Commissioners.
 with following additional documents.

Eligible for War Service Gratuity

Date *APR 2 1919*.....
R.H. Sait Capt.
 O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
Jamel Nathoff
Rose Bevan
 Date *April 10/19*.....