



# Newfoundland Forestry Companies

## ATTESTATION OF

No. 8476 Name Barnett Victor Corps Forestry

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Barnett Victor</u>                                   |
| 2. What is your full Address? .....  | 2. <u>Big Roberts East</u>                                 |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>  |
| 4. What is your age? .....   | 4. <u>20</u> Years <u>11</u> Months                        |
| 5. What is your Trade or Calling? .....  | 5. <u>Labourer</u>   |
| 6. Are you Married? .....  | 6. <u>single</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>of England</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 <u>Victor Barnett</u><br>Corps ..... |

I, Victor Barnett ..... 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.  
 ..... Victor Barnett ..... SIGNATURE OF RECRUIT.  
 ..... D. Moore C.M. ..... Signature of Witness.

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

I, Victor Barnett ..... 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 .....  
 on this 2nd day of Feb ..... 1918  
 Signature of Attesting Officer M. E. Deane

### †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 compiled 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, 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 Victor Barrett  
 Apparent age 20 years 11 months. Height 5 feet 4½ inches  
 Chest Measurement { Girth when fully expanded 37 inches  
 Range of expansion 2 inches  
 Distinctive marks none

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Elisha Barrett Bay Roberts E.  
 | 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	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 _____									<div style="font-size: 2em; font-family: cursive;">                     Discharged July 7/1919                 </div>
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to \_\_\_\_\_ (date of discharge) \_\_\_\_\_ years \_\_\_\_\_ days  
 " " Pensions " [ " " ] " " "

## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B, 121.

Forms  
B 121.  
29.

Number of Sheets

Regiment of

1st Forestry Company

Signature of O. C. Company

H. H. H. H.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Victor Barrett</i>	Age on	<i>20</i> years <i>11</i> months	<i>Laborer</i>	
Joined	Date	Place and Date of Enlistment	<i>Bay Roberts 2/2/18</i>	Religion	
Joined	Date	Period of	with Colours <i>1 1/2</i> years. with Reserve <i>1 1/2</i> years.	Place of Birth <i>Bay Roberts</i>	
Joined	Date				

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
									<i>Demobilized St John's 7<sup>2</sup> 19</i>

To be carried over

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 8476 Rank Plt Name Victor Barrett  
 Intended place of residence Bay Roberts St. John's

2. Occupation Laborer  
 Classification of soldier B Medical Category F

3. The above named man is discharged in consequence of Demobilization

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 JAN 10 1919 W. H. C. C. C.  
 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 10.1.19  
V. Barrett  
 Signature of soldier  
W. H. C. C. C.  
 Signature of witness

## 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 Jan 10 1919  
V. Barrett  
 Signature of soldier  
W. H. C. C. C.  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 27/1/18 No of days on Military  
 Discharged from service 10-1-19 plus 28 days Service 371 Days

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S  
R. H. Lunt Capt  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

Date JAN 10 1919

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's, Nfld.  
M. Bowley, Capt  
 Officer in Charge  
 The Royal Newfoundland Regiment

Date February 9/1919

2019/704

## 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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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

**A** Name in full **"BARRETT VICTOR**  
 Regiment from which discharged **NEWFOUNDLAND FORESTRY**  
 Regimental Number **8476**  
 Where born (Parish, Town and County), and when **BAY ROBERTS FEBRUARY 28th., 1899**  
 Intended address **BAY ROBERTS**

Height on discharge **Feet** **Inches**  
 Colour of Hair on discharge **LIGHT** Colour of Eyes **BLUE**  
 Descriptive marks Complexion **FAIR**  
 Figure on discharge  
 Christian name of Father **ELISHA**  
 Christian name of Mother **ALFREDA (DEAD)**  
 Wife's Maiden name in full  
 Date and Place of Marriage  
 Christian names of Children  
 Nature and locality of civil employment desired

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) (SGD) **VICTOR BARRETT**  
(Rank) **PTE.**

Station **HAZELEY DOWN CAMP** Date **6/12/18**

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.

*Medical Officer i/c  
Hospital.*

	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
<b>B</b> Period of Service and in what Corps ...				India		
				S. Africa		
Disallowed ... ..						
Service towards Pension ... ..						
Date inclusive to which pay has been issued	Sum due on account } of advance of pension }					
Sums due on account of public debts ...						

Rank on Discharge  
 Character (as on Certificate of discharge)  
 Where born, and on what date  
 Date and Place of first Enlistment  
 Trade on Enlistment  
 Cause of Discharge  
 Number of G.C. Badges Medals  
 Wounds, and Actions in which received

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station \_\_\_\_\_ Officer in Charge  
 Date \_\_\_\_\_ Records.