



Newfoundland Forestry Companies

ATTESTATION, OF

No. 8260 Name James Gusick Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>James Gusick</u> |
| 2. What is your full Address? | 2. <u>St. Lawrence</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>1</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Labourer</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>R. C.</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, James Gusick 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.

James Gusick SIGNATURE OF RECRUIT.

A. F. Fanning Signature of Witness.

8.29/6/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James Gusick 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 30th day of June 1917.

Signature of Attesting Officer M. P. Sullivan Major

†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.....

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

Date.....191..... } Approving Officer.
Place..... }

† 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 James Busick
 Apparent age 18 years 1 months. Height 5 feet 4 inches
 Chest Measurement { Girth when fully expanded _____ inches 113 1/2 lbs.
 Range of expansion _____ inches
 Distinctive marks Brown eyes, Brown hair.
Bent top on index finger, left hand.

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Busick
St. Lawrence. | 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)
			g

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 James Busick</u>									
<u>July 4/1919</u>									
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
39

Number of Sheet

Regiment of *Nfld Forestry Coy.*

Signature of O. C. Company

H. A. A. [Signature]

Regimental No. and Name		Enlistment		Trade
No.	<i>8760 Jno Casick</i>	Age on	<i>18</i> years / <i>1</i> months	<i>Labourer</i>
Joined	Date	Place and Date of Enlistment	<i>St. John's</i>	Religion
Joined	Date	Period of	<i>29/6/17</i>	<i>R.C.</i>
Joined	Date	with Colours	<i>1 3/4</i> years.	Place of Birth
Joined	Date	with Reserve	<i>3 1/2</i> years.	

Good Conduct Badges, Service pay or proficiency pay

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>St. John's Scotland</i>	<i>28/10/17</i>	<i>Pte.</i>		<i>Absent from duties all</i>	<i>Capt. [Signature]</i>	<i>7 days C.B.</i>		<i>High. H. Hildings [Signature]</i>	
<i>St. John's Scotland</i>	<i>28/1/17</i>	<i>Pte.</i>		<i>Refusing to obey an order</i>	<i>CSTs [Signature]</i>	<i>1 day C.B.</i>	<i>28/1/17</i>	<i>High. H. Hildings [Signature]</i>	
<i>St. John's Scotland</i>	<i>29/1/17</i>	<i>-</i>		<i>Absent from Parade</i>	<i>-</i>	<i>for 1 day [Signature]</i>	<i>29/1/17</i>	<i>High. H. Hildings [Signature]</i>	
<i>St. John's Scotland</i>	<i>29/1/17</i>	<i>Pte.</i>		<i>Creating a disturbance</i>	<i>CSTs [Signature]</i>	<i>for 1 day [Signature]</i>		<i>High. H. Hildings [Signature]</i>	

Demobilized St. John's H 79

NOTE OFFENCES IN SCOTLAND
 8760 Jno Casick
 1917
 28/10/17
 28/1/17
 29/1/17
 29/1/17

To be carried over.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 8260 Rank Plt Name James Lusick
 Intended place of residence St. John's
 2. Occupation Labourer
 Classification of soldier B Medical Category E

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 DEC 30 1918

Date

W. H. C. Capt
 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

30-12-18

James Lusick
 Signature of soldier
W. H. C. Capt
 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

30-12-18

James Lusick
 Signature of soldier
W. H. C. Capt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 30-6-17 No of days on Military
 Discharged from service 7-1-19 plus 28 days Service 566 585

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S

Date JAN 7 1919

J. H. C. Capt
 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

Date February 4 1919

W. H. C. Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment

AD B 2019/703



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 **Cusick James**
 Regiment from which discharged *1st. Newfoundland*
 Regimental number **8260**
 Intended address **St. Lawrence**
 Height on discharge **5** Feet **4**
 Color of hair on discharge **Red**
 Complexion **Fair**
 Color of eyes **Brown**
 Descriptive Marks **-**
 Figure on discharge **Medium**
 Christian name of Father **William**
 Christian name of Mother **Annie**
 Wife's maiden name in full **--**
 Date and place of marriage **--**
 Christian names of children **--**
 Place and date of soldier's birth. **St. Lawrence** ... **May 24th. 1899.**

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) **James Cusick**

(Rank) **Pte**

Station **St. John's**

Date **Dec. 24th/1918**

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.

L. Patersen

Medical Officer i/c Hospital.
Unit, or Command Depot.

Station **St. John's N.F.L.D.**

Date **Dec. 24th. 1918.**

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5260 Rank Pte Name Cusick, James
 Date of Enlistment 30.6.17 Address St. Lawrence District Quin
 Occupation Laboured Classification for Discharge B Medical Category 8
 Recommendation S.M.B. permanently unfit Disability Rating Aggravated 20%
 Passed to Demobilization Officer with following documents:—

N.F. P36	1	B 268		B 121	1	N.F. Med.	D.F. 1		34634	1
B 178		W 3494		B 122		Board 1st	" 2		3463B	1
B 178a	1	D 400A	1	B 1915		do 2nd	" 3	3	400D	1
B 179	2	D 400B		Form L		do 3rd	" 4			
B 179a		D 400C		Form K		do 4th	" 5			
B 179b	1	B 103		ME 2			" 6			
B 179c	1	B 120		M 93						

Date 30.12.18

W. C. Discharge Depot.
W. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

James Cusick

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$60.00

(b) Clothing Supplied Joseph A. Snow

Date 30-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 880 to his home at St Lawrence and Release Certificate No. 827 issued.

Date 30.12.18

W. S. D. Kelly
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 H-2-19

Date 30-12-18

W. S. D. Kelly
Depot Paymaster.

Discharge approved for Jan 7. 1919

Forwarded with following documents to O.C Discharge Depot.

N.F. P. 11	B 268	B 121	N.F. Med.	D.F. 1.	✓ 11	✓ 11
F 178	W 3494	B 122	Board 1st.	" 2.	✓ 12	✓ 12
B 178a	D 400A	B 1915	do 2nd.	" 3.	Form 346	346 ✓
B 179	D 400B	Form L.	do 3rd.	" 4.	" 3.4.6.88	3.4.6.88 ✓
B 179a	D 400C	Form K.	do 4th.	" 5.		
B 179b	B 103	ME 2.		" 6.		
B 179c	B 120	M 93.				

Date 31.12.18

W. S. D. Kelly
Demobilization Officer.

APPROVED.

Documents as above forwarded to—
Officer in Records,
Board of Pension Commissioners.
with following additional documents.

Date JAN 7 1919

J. J. Kelly
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date Jan 13/1919

M. Howley
Capt.
O.C.D.