



Newfoundland Forestry Companies

ATTESTATION OF

No. 40 Name John M. Griffin Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| 1. What is your name? | 1. <u>John M. Griffin</u> |
| 2. What is your full Address? | 2. <u>32 Goodnow Street</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>39</u> Years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>shoemaker</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>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, John M. Griffin 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.

John M. Griffin SIGNATURE OF RECRUIT.
Walter Ellis Signature of Witness.

E 17/4/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John M. Griffin 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. O'Leary

†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 25/4/17 1917
 Place St. John's Approving Officer J. J. O'Leary

† 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 John M. Griffin
 Apparent age 39 years 7 months. Height 5 feet 8 1/4 inches
 Chest Measurement { Girth when fully expanded _____ inches
 Range of expansion _____ inches
 Distinctive marks Eyes - brown. Hair - dark. Index finger nail off right hand. Left great toe nail dgd.

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Rachel Griffin
32 Goodview Street | Relationship Wife
St. John's
Spinster

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) Hubert P. Mary Rachel Lane	(b) 1901 St. John's	(c) 32 Goodview Street	(d)
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Particulars as to Children

Christian Names	Sex	Date and Place of Birth
Herbert V.	Boy	24/7/03
Mary K.	Female	29/5/05
John E.	Male	15/12/08
Benjamin M.	Female	13/6/12
Margaret		13/2/16

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 _____									
<div style="font-size: 2em; font-family: cursive;">Discharged March 7/1909</div>									
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.
228.

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	
No.	<u>J. Griffin</u>	Age on	years	Religion		
Joined		Date	Place and Date of Enlistment	Place of Birth		
Joined		Date	Period of	with Colours years.		with Reserve years.
Joined		Date				
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
<u>Dumfries, Scotland</u>	<u>11-7-14</u>	<u>Pte</u>		<u>Absent from Duties 8.50 a.m.</u>	<u>Capt. Woodford</u>	<u>20ma Extra Work</u>	<u>12-9-14</u>	<u>Lieut. Godyear</u>	<u>J.A.B.</u>
				<u>Demobilized St John's</u>	<u>7</u>				<u>3/19</u>
To be carried over									

Army Form B. 121..

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. *14170* Rank *Cpl* Name *John Griffin*
 Intended place of residence *32 Gladwin St St John's*

2. Occupation *Demobiler*
 Classification of soldier *E* Medical Category *B1*

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
 Date **FEB 21 1919** *W. H. Lait 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 21-2-19* *John Griffin* Signature of soldier
W. H. Lait 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 21-2-19* *John Griffin* Signature of soldier
W. H. Lait Capt Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service *17-4-17* No of days on Military
 Discharged from service *21-2-19 1st day* Service *704 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. Lait Capt*
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date **FEB 21 1919**

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place *St John's Nfld* *W. H. Lait Capt*
 Date *March 7/1919* Officer in Charge
 The Royal Newfoundland Regiment

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The Royal Newfoundland Regiment

Class for Demobilization: *7*

Report of Demobilization
Travelling Board, held on soldier for
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date: *18.2.19*

Regimental No. *9040*

Name *Grippen* *J.* *St.*

Address

Present Medical Category *B.I.*

Recommended for:— (a) Immediate discharge
(b) ~~Standing Medical Board~~

*It is hereby certified that this soldier
has been before a Travelling Medical
Board and has been classified as
6 for Discharge on Demobilization.
Medical category *B.I.* Members of Board*

18.2.19
Date of T.M.B.

Captain
Assistant Adjutant
Discharge Depot—Newfoundland

R.H. East
O.C. Discharge Depot.

R. Patton
Senior Medical Officer

Geo Borden
M. O. Depot

N^o 153



Newfoundland Forestry Companies.

ALLOTMENTS

I, John Griffen, Regl. No. 80440

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Nenely 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 15th 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
86	Wife	Rachael Griffen	32 Goodwood Ct	90 cts
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 9th 1917

(Sig.) J Griffen
(Rank) Pte

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 8040 Rank Plt Name Griffin John
 Date of Enlistment 17.4.17 Address St Johns District St Johns
 Occupation Laborer Classification for Discharge 16 Medical Category B.I
 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	1
B 178	W 3494	B 122	Board 1st	" 2	3
B 178a	D 400A	B 1915	do 2nd	" 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			

Date 20.2.19

W. M. Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

J. Griffin

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. Brown

Date 21-2-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home

at and Release Certificate No. 1129 issued.

Date 21-2-19

Edwards Capt.
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 21-2-19

Date 21-2-19

Stoney Capt.
Depot Paymaster

Discharge approved for 21. 2. 19

- Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	1	
B 178	W 3494	B 122	Board 1st	" 2	2	Form B
B 178a	D 400A	B 1915	do 2nd	" 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				

Date 21. 2. 19

Edwards Capt.
Demobilization Officer.

APPROVED. h

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date FEB 21 1919

R.H. Sait Capt.
O. C. Discharge Depot.

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

Date Feb 24 1919

W. J. ...
Depot Records