



Newfoundland Forestry Companies

ATTESTATION OF

No. 8316 Name James H. Johnson Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? James H. Johnson
2. What is your full Address? 55 St. Michael's Rd. St. John's N.F.
3. Are you a British Subject? yes
4. What is your age? 19 Years Months
5. What is your Trade or Calling? Labourer
6. Are you Married? no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? no
8. Are you willing to be vaccinated or re-vaccinated? yes
R.B.
9. What is your Religion?
10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? yes { Name
Corps

I, James H. Johnson 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.

J. H. Johnson SIGNATURE OF RECRUIT.
A. D. Hutchings Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James H. Johnson 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 20 day of aug 1917

Signature of Attesting Officer J. P. Goodyear capt

†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.....
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: vis:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121
39

Number of Sheet *first*

Regiment of *Rifled Forestry Companies*

Signature of O. C. Company *J. P. Eastman Capt*

Regimental No. and Name
No. *8311* *Jamel Johnston*
Joined _____ Date _____
Joined _____ Date _____
Joined _____ Date _____
Joined _____ Date _____

Enlistment
Age on *19* years *19* months
Place and Date of Enlistment *St. Johns*
23/9/17
Period of *with Colours* *202* years.
with Reserve *365* years.

Trade *Labourer*
Religion *R.C.*
Place of Birth *St. Johns*

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Time served or order of discharge with trial	By whom awarded	REMARKS	
<i>unheld</i>	<i>17/6/18</i>	<i>Pte</i>		<i>Absent from 9th pm until 6 am. 15/6/18</i>	<i>comrade</i>	<i>Forfeit 3 days pay by R.M. 4 hours extra work</i>	<i>15/6/18</i>	<i>Capt. W.S. Crow</i>		
<i>80</i>	<i>8/6/18</i>	<i>Pte</i>		<i>Absent from camp from noon until 9 am. 15/6/18</i>	<i>comrade</i>	<i>6 hours extra work</i>	<i>10/6/18</i>	<i>W.S. Crow Capt</i>	<i>Forfeit 2 days pay by R.M. 4 hours extra work</i>	
<i>81</i>	<i>6/7/17</i>			<i>Absent from camp from noon 6/7/17 until reporting back noon 9/7/17</i>	<i>comrade</i>	<i>6 hours extra work</i>	<i>8/8/18</i>	<i>W.S. Crow Capt</i>	<i>Forfeit 3 days pay by R.M.</i>	
<i>82</i>	<i>4/8/18</i>			<i>oversleeping pass from 11 pm. until reporting back noon 5/8/18</i>	<i>comrade</i>	<i>10 hours extra work</i>	<i>5/8/18</i>	<i>2/Lt J. P. McNeill</i>	<i>Forfeit 2 days pay by R.M.</i>	
				To be carried over						
				<i>Demobilized</i>	<i>St. Johns</i>	<i>9</i>	<i>3</i>	<i>19</i>		

Army Form B. 121

Brought forward

Hazley Down Camp Feb 2-12-18 absent from table to 22-45
clock. 3-12-18 J. H. Manning 1 day. CB 11-15-18 Capt Emerson 777

Hazley Down Camp " 8-15-19 absent from Roll Call at Capt Manning 2 Days CB 9-15-19 Capt G. Emerson
9-20 hunted 10-11-8-15-19

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 8311 Rank Pfc Name Johnston James
 Intended place of residence 45 Le Marchant Rd
 2. Occupation Labourer
 Classification of soldier E Medical Category B

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 JUN 13 1919
 Date ST. JOHN'S
 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
JUN 13 1919
 Signature of soldier
 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
JUN 13 1919
 Signature of soldier
 Signature of witness SP

STATEMENT OF SERVICE

7. Enlisted for service 20-8-17 No of days on Military
 Discharged from service 13-6-19 plus 14 days Service 679

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
JUN 15 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
 Date June 29/1919
 Officer in Charge
 The Royal Newfoundland Regiment

ATD 2079/2502

The Royal Newfoundland Regiment

DEMOLITION OF

Reg. No. 511 Rank Plt. Name Shuston James
 Date of Enlistment 20-8-17 Address St. Mar. Bay District St. John's
 Occupation Labourer Classification for Discharge 4 Medical Category B11
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	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
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	<u>236-1</u>	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 83		

Date 12-6-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOLITION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$65
- (b) Clothing Supplied _____

Date 13-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at 15 Stenmark Lane and Release Certificate No. 2725 issued.

Date

13-6-19

J.A. Snow 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 29-6-19

Date

13-6-19

A.M. Wills H.
Depot Paymaster.

Discharge approved for

15-6-19

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

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
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2	<u>256-1</u>	" 6
B179c	B 120	M 93		

Date

13-6-19

J.A. Snow Capt.
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

JUN 15 1919

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

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

Date



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 *Johnston James.*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *8511.*
 Intended address *St. Marchant Rd.*
 Height on discharge *5 Feet 9*
 Color of hair on discharge *Dark.*
 Complexion *Fair.*
 Color of eyes *Grey.*
 Descriptive Marks *Operation fear in the Groin.*
 Figure on discharge *Mus.*
 Christian name of Father *Andrew.*
 Christian name of Mother *Mary.*
 Wife's maiden name in full *—*
 Date and place of marriage *—*
 Christian names of children *—*
 Place and date of soldier's birth *St. John's 2 Nov. 1895.*
 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) *Johnston J.*

(Rank) *PL*

Station *St. John's* Date *12-6-19.*

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