

Newfoundland Forestry Companies

ATTESTATION OF

		0	1	1.
No	· · · ×	J	h	4
UVO	. 0	a	Ð	No.

Name Ronald Mouland Corps

1. What is your name? 2. What is your full Address? 3. Are you a British Subject? 4. What is your age? 5. What is your Trade or Calling? 6. Are you Married? 7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vaccinated? 9. What is your Religion? 9. Matta. 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? 1. Refeard Mouland do solemnly declare that the above answer
2. Maries your full Address? 3. Are you a British Subject? 4. What is your age? 5. What is your Trade or Calling? 6. Are you Married? 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vaccinated? 9. What is your Religion? 9. Methods Name as embodied in this roll of service as applied to Forestry Companies?
3. Are you a British Subject? 4. What is your age? 5. What is your Trade or Calling? 6. Are you Married? 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vaccinated? 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? 10. Are you make the conditions as embodied in this roll of service as applied to Forestry Companies?
4. What is your age?
4. What is your age?
5. What is your Trade or Calling? 6. Are you Married? 7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vaccinated? 9. What is your Religion? 9. Metta. 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?
6. Are you were served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 7. 8. Are you willing to be vaccinated or re-vaccinated? 8. 9. What is your Religion? 9. 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? 10.
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vaccinated? 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? Name Corps
g. What is your Religion? 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?
g. What is your Religion? 9. Metta. 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? (Name Corps
10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?
as embodied in this roll of service as applied to 10
A 1 . A D 1
OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I
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 question 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
on this . // day of
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re
quired 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
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 Certificati

DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name	Ron	ald moul	and			(m.+)		- 19 y	• • /
CONTRACTOR OF THE PARTY OF THE		20. years	A STATE OF THE SECOND	hs.	He	ight	5	_ _ f	
Chest Me	asurem	ent Girth when fu			400		es	TIN.	(138 lb)
Distinctiv	e marl	s Brown	ı.Hai	~, B	nou	<u>~~</u>	وم	 .	
Jan	ali	O TINFORMA	TION S	UPPLIEI	D BY	RE	CRU	ΙΤ	
Name and		ess of next of kin							
									200000000000000000000000000000000000000
	300	to Dist.		rs as to Ma					
	a) Christia	nn and Surname of Woman	to whom married	d, and whether	spinster or	widow	r. (b) P	lace and	date of marriage.
31.09	(a)	27705	(6)		(4		Y	-	(d)
			Particula	ars as to C	hildren			-10	
- (VT -) = 1	Chris	stian Names					Date	and Pla	ce of Birth
	<i></i>		-5-21 min Laure	-1 -0/-0	100	1		*(>	
		STAT	EMENT	OF THE	SERVICES Service not al- Service in Re-				
Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	for fixing rate of	e of pension wards G. C. Pay		Signature of Officers cert fying correctness of entries	
Service town	rds limite	ed engagement reckous fro	m	1	7 - 2	132	Art.	100	
Joined at_		on	1			-			Married A
Osci	Larg	ed July 15	11919	,					e too and too
A SAME		0 0		DI DION	BO 10	3.1			L - 10° - 110° -
manua 1		Gille de la			7111111	311	400		The second
111 19 2	C 10	in marker to specify the a		In a second	A form				A50 A
	100	At more the	ZOTO I	The item	0 10 AU	52			
		THE DRAW THUM	0 143.249.0	mar					MAN CONTRACTOR OF
-71 - F	U 1423	THE STORE SET WHE DE		2010/03/00	To annual		0.00/28	THE REAL PROPERTY.	m no sure
									4
14.00						-13	4.4	2.5	
		[
то		e forfeited as above		og of of the Military mysteria	15 0 m	7	1		Y
	unani sal	Telepi i wasan i	A Walley III						Commission of the

Nº 589



Newfoundland Forestry Companies.

ALLOTMENTS

	Uotment begins	July 16 1/17		I	
Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	(each person)	
576	sister	Rita mouland	musquare He.	60	
			Jogs Dist		
	3.5				
				1	
			Total Allotment, §		
	signed by the Office required payments of	r Commanding Company and has a pplication.	sig.) Private		

Squadron, Troop, Battery and Company Conduct Sheet. Army Form B. 121. Number of Sheet First. Regiment of Infla Forestry Companies. Signature of O. C. Company Attanges Cap Regimental No. and Name Enlistment Good Conduct Badges, Service pay or proficiency pay Fisherman Age on 20 years // months R. mouland 8264 Place and Date | M. John's of Enlistment | 1192/12 Religion Date 5 · meth. Toined Date Period of with Colours Toined Date with Reserve 2325 years. Date, Cases of drunk-Names of Witnesses Date of OFFENCE REMARKS Place Rank Punishment awarded By whom awarded Offence absent from and poul Gol Merces 4 days. C. B 2-12-16 Capt Enterson Hogeley Down Camp To be carried over

The Koyal Pewfoundland Kegiment

DEMOBILIZATION OF
Reg. No 82 64 Rank The Name Mouland X
Date of Enlistment // Address // Address // District / Old
Occupation Tisker MCM Classification for Discharge Ly Medical Category Bil.
Recommendation S.M.B. Disability Rating
Passed to Demobilization Officer with following documents:
N. F. 1 ³⁶ B 268 B 121 /. N. F. Med D. F. 1 B 178 B 178 B 122 Board 1st " 2
B 178a / D 400A / B 1915 do 2nd " 3 do 3rd " 4
B 179a D 400C Form K do 4th " 5
B 179b B 103 ME 2 "6
B 1/96
Date 196-19 C. C. Discharge Depot.
PARTICULARS FOR DEMOBILIZATION
1. Civil Re-Establishment.
I amin 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 the standard for the stand
(b) Olothing Supplied.
Date 17-6-19. Oilc. Re-clothing

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrants No. 1. 7.5. to his home at a pure second and Release Certificate No. 2007 is sued.
Date
Demobilization Officer
4. Pay and Allowances.
The herein named soldier's accounts have been correctly balanced and all matters in con-
nection therewith settled. He has received pay and allowances to
Date
Discharge approved for 1-7-19
Forwarded with following documents to O.C. Discharge Depot.
N.F. P 36
B 178 W 3494 B 122 Board 1st " 2
B 178a D 400A B 1915 do 2nd 3
B 179a D 400C Form K do 3rd 4 4 5
B 179b B 103 ME 2 " 6
B179e B 120 M 93 M 93
Date MOSTAS HONER AND SOUND WILL GUST
O. C. Discharge Depot.
APPROVED. Rolling to so not be removed to policy and the approved
Documents as above forwarded to:—
Officer ic Records. Board of Pension Commissioners.
with following additional documents.
Eligible for War Service Grataity
Date JUL 1 1010
O. C. Discharge Day
Received the above noted documents from O. C. Discharge Depot
the 3rd
Date June 30/19

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE
Intended place of residence. The pare Houland S.
2. Occupation Frohumeen 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, accordance with Regulations. Place, ST. JOHN'S Date JUN 17 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 just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regime of all financial responsibility in my connection.
Place, ST. JOHN'S Date JUN 1 6 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, ST. JOHN'S Signature of soldier Signature of witness
STATEMENT OF SERVICE
7. Enlisted for service
APPROVAL OF DISCHARGE
8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ic Record The Royal Newfoundland Regiment, twenty-eight days from date. Place, ST. JOHN'S Officer Commanding Discharge Deport The Royal Newfoundland Regiment
CONFIRMATION OF DISCHARGE
Place, ST JOHN'S Date 15/1919. The discharge of above mentioned soldier is hereby confirmed. Offices ilc Records The Royal Newlockland Regiment

a. 8. B 2079/3024