



Newfoundland Forestry Companies

ATTESTATION OF

No. 66 Name Robert Pike Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Robert Pike</u> |
| 2. What is your full Address? | 2. <u>Sewisport</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>45</u> Years <u>4</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman, Foreman</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>meth</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, Robert Pike 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.

Robert Pike SIGNATURE OF RECRUIT.

Matthew J. Ellis Signature of Witness.

E 30/4/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Robert Pike 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. Johns

on this 2nd day of May 1917

Signature of Attesting Officer J. P. Ready 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 2nd Co

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

Date 25/5/17 1917

Place St. Johns

J. P. Ready Capt 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 Robert Pike
 Apparent age 15 years 4 months. Height 5 feet 10 1/4 inches
 Chest Measurement { Girth when fully expanded _____ inches
 Range of expansion _____ inches
 Distinctive marks Eyes brown, Hair dark

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Emily Pike
Sewisporte N.W.B. | Relationship Wife

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)
<u>Emily Cox</u> <u>Spinster</u>	<u>New May, N.W.B.</u> <u>9/1892</u>	<u>Sewisporte</u>	

Particulars as to Children

Christian Names	Sex	Date and Place of Birth
<u>John Married</u>	<u>Male</u>	<u>1/11/93. New May</u>
<u>Henrietta</u>	<u>Female</u>	<u>25/1/96</u>
<u>Lucas</u>	<u>..</u>	<u>2/1/99</u>
<u>George</u>	<u>Male</u>	<u>15/10/01</u>

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>Archard Apple 11/1919</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.

Number of Sheet Four

Forms
B. 121
1918

Regiment of Newfoundland Forestry Company Signature of O. C. Company _____

Regimental Number and Name		Enlistment		Trade		Good Conduct Badges, Service pay or proficiency pay	
No.	<u>6066 Robt Vika</u>	Age on	45 years	4 months	Cunberman "Bremen"		
Joined	Date	Place and Date of Enlistment	St John's 30/4/17		Religion		
Joined	Date	Period of	with Colours 1 year.		Metta.		
Joined	Date		with Reserve 3 1/2 years.		Place of Birth		
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>Demobilized St John's</u>	<u>11 4/17</u>				

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 8066 Rank Serjt Name Pike Robt
 Date of Enlistment 30 4 19 Address Lewisport District Twelfth
 Occupation Labourer Classification for Discharge B Medical Category B I
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents :-

N.F. P36	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		" 6
B 179c	B 120	M 93		

Date 25 3 19
 H. M. W. H.
 J. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Robert Pike

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:-

- (a) Clothing Allowance payable \$100.00
- (b) Clothing Supplied 24 Snowsuits

Date 26-3-19
 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R943.....to his home at 2nd Chelmsford and Release Certificate No. 1732 issued.

Date 26-3-19

J.A. Crawford
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 11-1-19

Date 26-3-19

W. H. Capt.
Depot Paymaster.

Discharge approved for 28-3-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 304	2	B 268	B 121	1	N.F. Med	D.F. 1	1	
E 178		W 3494	B 122		Board 1st	" 2	1	<u>2nd</u>
B 178a	1	D 400A	B 1915		do 2nd	" 3	2	
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>see 1</u>		" 6		
B 179c		B 120	M 93					

Date 26-3-19

J.A. Crawford
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAR 28 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. & 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

Pike, Robert.

Regiment from which discharged

Royal Newfoundland

Regimental number

5011.

Intended address

Lewisporte

Height on discharge

5 Feet 11 1/2.

Color of hair on discharge

Grey.

Complexion

Suddy.

Color of eyes

Brown.

Descriptive Marks

Figure on discharge

Tall.

Christian name of Father

John

Christian name of Mother

Sarah.

Wife's maiden name in full

E. Miles

Date and place of marriage

New Bay, N. 9. 1887.

Christian names of children

John, Geo. Henry & Lewis

Place and date of soldier's birth

England. 6. 14. 1865.

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)

Robert Pike Sgt.
(Rank)

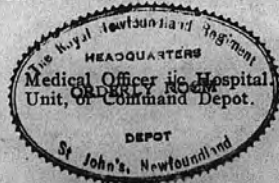
Station

ST. JOHN'S.

Date

24. 3. 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

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 8066 Rank Pvt. Name Pike Robert
 Intended place of residence Lewisport, Twillingate

2. Occupation Lumberman
 Classification of soldier F Medical Category B II

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 St. John's W. H. C. Capt.
 Date MAR 26 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 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 Robert Pike
26-3-19 Signature of soldier
J. H. Snowfoot
 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 Robert Pike
26-3-19 Signature of soldier
E. Wallace Pgt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 30-4-17 No of days on Military
 Discharged from service 28-3-19 Service 712

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. D. Capt.
 Date MAR 28 1919 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed W. H. C. Capt.
 Place St. John's W. H. C. Capt.
 Date April 11/1919 Officer in Charge of Records
 The Royal Newfoundland Regiment

Attest: 2097/1800

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