

## Newfoundland Forestry Companies

No. 8 >58 Name	B:11.1	Smith	Corps	
	to be put to the	Recruit befor	Enlistment,	/
1. What is your name?		1. tolef	and Sm	to Core
2. What is your full Address?		2	- , L	
3. Are you a British Subject?		3 40	<i>s</i>	
4. What is your age?		4.019	.Years 5.	Months
5. What is your Trade or Calling	?	5	abourer.	
6. Are you Married?		6	no	
7. Have you ever served in any Br jesty's Forces, naval or military		7	260	
8. Are you willing to be vaccin cinated?	nated or re-vac-	8	Most L	,
9. What is your Religion?		9	210200	
10. Are you willing to serve upon as embodied in this roll of serv Forestry Companies?		10. Jes	Name	
made by me to the above questions a	Clifford Ralp 1	Smith	0	ATURE OF RECRUIT.
Learning to the true allegisted to His Majesty Hi bound, honestly and faithfully serve Hi ditions of my service.	o BE TAKEN BY F	. His Heirs and	do make oath, tha	t I will be faithful and that I will, as in duty om, according to the con-
CERTIFIC  The Recruit above named was can be would be liable to be punished as processed to the control of the	CATE OF MAGISTRA autioned by me that provided in the Arm	if he made any		of the above questions
The above questions were then	read to the Recruit	in my presence.		
I have taken care that he underst	tands each question,	and that his ans	wer to each questio	n has been duly entered
as replied to, and the said recruit has on this. 3.9day of		17 ku 20	d taken the oath be	myo
	CERTIFICATE OF	APPROVING OF	TICER.	
I certify that this Attestation of				d up, and that the re-
quired forms appear to have been con				
If enlisted by special authority, s	uch will be attached	to the original	attestation.	
Date191				} Approving Officer.
Place				)
† The signature of the Ap		o be affixed in t		Recruit.

## DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet. ars 5 months. Height 5 feet 5/3 hes when fully expanded inches weight 117%. Brown Eyes 4 Dark Haw. 19 years 5 months. Apparent age. Girth when fully expanded Chest Measurement Range of expansion... Distinctive marks Name and Address of next of kin Stat Les Joseph Lunces cleave | Relationship 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. (6) (d) (a) Particulars as to Children Date and Place of Birth Christian Names STATEMENT OF THE SERVICES Service in Re-serve not allow-ed to reckon to-wards G. C. Pay Signature of Officers certi-fying correctness of entries Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. Dates Army Rank Days Service towards limited engagement reckons from Joined at Total Service forfeited as above..... Total Service towards Engagement to [date of discharge]\_

Squadron, Troop, Battery and Company Conduct Sheet. Army Form B. 121. Number of Sheet 154 B 121 Regiment of Wild Forestry Co's Signature of O. C. Company H. Wasforslap Regimental No. and Name Good Conduct Badges, Service pay or proficiency pay Age on 19 years 5 Cahowrer. Place and Date | Style of Enlistment | 99 | 6/17.

Period of with Colours | 30 | years. Religion meth Date Joined Place of Hirth Date Cases of drunk-Date of Names of Witnesses OFFENCE Punishment awarded By whom awarded REMARKS To be carried over

## The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE
Intended place of residence. Burie
2. Occupation Labourer'  Classification of soldier £ Medical Category BII
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 rought before me, in accordance with Regulations.  Place ST. JOHN'S.  Date APR 1 1919  Comanding 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: Clifford Much.  1-4-19  Quele lows to 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.  Signature of soldier  Signature of witness
STATEMENT OF SERVICE  7. Enlisted for service 29-6-17- No of days on Military  Discharged from service 4-19 Plus 14 days Service 666
APPROVAL OF DISCHARGE  8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i c Records, The Royal Newfoundland Regiment, twenty-eight days from date.  Place ST. JOHN'S.  Officer Commanding Discharge Depot The Royal Newfoundland Regiment.  CONFIRMATION OF DISCHARGE
9. The discharge of above mentioned, soldier is hereby confirmed. The Cowley Capts  Place Spine 25/1919  Officer ilc Records  The Royal Newfoundhand Regiment