July Jo

ATTESTATION PAPER.

80086 No. 124 Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT	BEFORE ATTESTATION.
1 What is your name 9	Thilip John Hamon
What is your name? In what Town, Township or Parish, and in what Country were you have?	A Helien Jensey C. Islan
what Country were you born? 3. What is the name of your next-of-kin?	Philip Janes Nammon
4. What is the address of your next-of-kin?	9 Union Court Jessey
5. What is the date of your birth?	april 14th 1880.
6. What is your Trade or Calling?	Laborer.
7. Are you married?	<i>M</i> .
8. Are you willing to be vaccinated or re-	· · · · · · · · · · · · · · · · · · ·
vaccinated?	Man.
9. Do you now belong to the Active Military Force?	2 years Koyal Gray Militie
10. Have you ever served in any Military Force? If so, state particulars of former Service.	
11. Do you understand the nature and terms of your engagement?	Uje.
12. Are you willing to be attested to serve in the)	O Go.
Canadian Over-Seas Expeditionary Force?	Haman (Signature of Man).
	(Signature of Man).
	Co. H Hewfill (Signature of Witness).
Date 1914.	Hamon (Signature of Recruit) W-H. Howfill (Signature of Witness)
hear true Allegiance to His Majesty King George the in duty bound honestly and faithfully defend His Ma Dignity, against all enemies, and will observe and ob- and of all the Generals and Officers set over me. So	MAN ON ATTESTATION. do make Oath, that I will be faithful and le Fifth, His Heirs and Successors, and that I will as jesty, His Heirs and Successors, in Person, Crown and ey all orders of His Majesty, His Heirs and Successors, help me God. (Signature of Recruit)
Date De 4 1914.	121 60011
Date	(Signature of Witness)
CERTIFICATE O	F MAGISTRATE.
questions he would be liable to be punished as provid The above questions were then read to the Red I have taken care that he understands each que	cruit in my presence. estion, and that his answer to each question has been
before me, atthis	of Lecenter, 1914
DOLOTO IIIO, AU.	19-71 N- 10
	W74. Haugell (Signature of Justice)
I certify that the above is a true copy of the A	

Description of Namon This	Sohn on Enlistment.
pparent Age	Distinctive marks, and marks indicating congenital
be determined according to the instructions given in the Regu-	peculiarities or previous disease.
lations for Army Medical Services.)	(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the
	Approving Officer).
eight 5 ft. 4 ins.	Mennid tattered on
(Girth when fully ex-	Herren foreman Sailers Dansen g om right flow foreman brance og let innen surface og let ly alove ankle.
Girth when fully expanded ins. Range of expansion 4. ins.	Fleren foreman
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Presbyterian	
Wesleyan Baptist or Congregationalist Other Protestants (Denomination to be stated.)	
Baptist or Congregationalist	
Other Protestants	
(Denomination to be stated.) Roman Catholic	
\Jewish	
CERTIFICATE OF ME	DICAL EXAMINATION.
I have examined the above-named Recruit and rejection specified in the Regulations for Army Mo He can see at the required distance with either ee use of his joints and limbs, and he declares that	i find that he does not present any of the causes edical Services. er eve; his heart and lungs are healthy; he has the
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Date 29th Sanuary 1918. S. Comd. 31st Batte C O E Force

.....(Signature of Officer)

been recorded, I certify that I am satisfied with the correctness of this Attestation.