

Passed Reading
Test
NO

WAR GRATUITY SCHEDULE 4/28/50925 ✓
AUSTRALIAN MILITARY FORCES

AUSTRALIAN IMPERIAL FORCE

Attestation Paper of Persons Enlisted for Service Abroad.

No. _____ Name (Surname) KENDALL
in full (Christian Name) KENNETH WALTER.
Unit _____
Joined on 31 MAY 1918

Questions to be put to the Person Enlisting before Attestation.

You are hereby warned that if after enlistment it is found that you have given a wilfully false answer to any question set forth in this Attestation Paper, you will be liable to be tried for the offence.

1. What is your Name? Kenneth Walter Kendall.
2. In or near what Town were you born? Adelaide
In the State or Country of _____
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) Natural. Born.
4. What is your Age? (Date of birth to be stated) 27th Sept 1894. 35th 9/12
Salaman
5. What is your Trade or Calling? NO
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? Single
7. Are you married, single, or widower? (Father) KENDALL WALTER GEORGE
8. Who is your next of kin? (Address and relationship to be stated) KING WILLIAM RD HYDE PARK
The answer to this question shall not be construed as in the nature of a Will. KING WILLIAM RD HYDE PARK
9. What is your permanent address in Australia? _____
10. Do you now belong to, or have you ever served in, His Majesty's Army, the Marines, the Militia, the Militia Reserve, the Territorial Force, Royal Navy, or Colonial Forces? If so, state which, and if not now serving, state cause of discharge. 16 ALH 3-400
11. Have you stated the whole, if any, of your previous service? 4/10
12. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? NO
13. (For married men, widowers with children, and soldiers who are the sole support of widowed mothers)—
Do you understand that no separation allowance will be issued in respect of your service beyond an amount which together with pay would reach ten shillings per day? NO
14. Are you prepared to undergo inoculation against small pox and enteric fever? 4/10

I, Kenneth Walter Kendall. do solemnly declare that the above answers made by me to the above questions are true, and I am willing and hereby voluntarily agree to serve in the Military Forces of the Commonwealth of Australia within or beyond the limits of the Commonwealth.

And I further agree to allow not less than two-fifths of the pay payable to me from time to time during my service for the support of my wife and children. three-fifths

Date 31 MAY 1918

K.W. Kendall
Signature of Person Enlisted.

* This clause should be struck out in the case of unmarried men or widowers without children under 18 years of age.
† Two-fifths must be allotted to the wife, and if there are children three-fifths must be allotted.
D.500/137.—C.214.—22.

I have been informed that if I make any false statement I commit an offense against the Espionage Act 1903-1917, and War Precautions Act 1914-1916, §1 (c).

W. W. Kendell Recruit

3

Description of *Kenneth Walter Kendell* on Enlistment.

| | |
|---|---|
| Age <u>33</u> years <u>7</u> months. | DISTINCTIVE MARKS. <i>Vis. R 6 L 6</i> <i>Vacc H.L.</i> |
| Height <u>5</u> feet <u>7 1/2</u> inches. | |
| Weight <u>152</u> lbs. | |
| Chest Measurement <u>35.87</u> inches. | |
| Complexion <u>Good</u> | |
| Eyes <u>Grey</u> | |
| Hair <u>Dark Brown</u> | |
| Religious Denomination <u>R.C.</u> | |

CERTIFICATE OF MEDICAL EXAMINATION.

I HAVE examined the above-named person, and find that he does not present any of the following conditions, viz:—

Scrofula; phthisis; syphilis; impaired constitution; defective intelligence; defects of vision, voice, or hearing; hernia; hemorrhoids; varicose veins, beyond a limited extent; marked varicocele with unusually pendent testicle; inveterate cutaneous disease; chronic ulcers; traces of corporal punishment; contracted or deformed chest; abnormal curvature of spine; or any other disease or physical defect calculated to unfit him for the duties of a soldier.

He can see the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs; and he declares he is not subject to fits of any description.

I consider him fit for active service.

Date 31 MAY 1918
Place ADELAIDE.

Robert Menthorn
Major

Signature of Examining Medical Officer.

CERTIFICATE OF COMMANDING OFFICER.

I CERTIFY that this Attestation of the above-named person is correct, and that the required forms have been complied with. I accordingly approve, and appoint him

to _____

Date _____

Place _____

J. Malcolm Cap
Commanding *C. L. H.*

Roh

To be used for Enlistment in the Permanent Military Forces only.

MEDICAL HISTORY of

Surname KENDALL Christian Name KENETH WALTER.

TABLE I. GENERAL TABLE.

Birthplace ... Adelaide South Australia

Examined ... (on 2nd day of May 1918.
at Adelaide)

Declared Age ... 33 1/2 years.

Trade or Occupation ... Salesman

Height ... 5 feet 7 1/2 inches.

Weight ... 152 lbs.

Chest Measurement { given when fully Expanded 35 1/2 inches.
Range of Expansion 2 inches.

Physical Development and Pulse rate

Vaccination Marks { Arm Right Left
Number

When Vaccinated ...

Vision ... (R.E. - V = 6/10
L.E. - V = 6)

(a) Marks indicating congenital peculiarities or previous disease (a) no syphilis
no gonorrhoea
no asthma

(b) Slight defects, but not sufficient to cause rejection (b) ? fracture of R Parietal Bone
both need attention
suffer from piles Bit flat footed

Approved by ... (Signature) Karol Kneel
(Rank) Major

Enlisted W.H. Kendall at Adelaide
on 31 May 1918 day of 19

Joined on Enlistment ... (Corps. Q.V. 75 Coy)

Transferred to ...

Became non-effective by ...
on 20th day of May 19

(Signature) W.H. Kendall
(Rank) Major

4/10 Memorise on left side of year to go no neck
no preparation

ALLOTMENT FORM AND DECLARATION—4th MILITARY DISTRICT.

No. _____ Rank *Private* Name *Hendell Kenneth Walla*
 Unit *5th Bde S. Egypt* Pay book No. _____

| | | |
|-------------------------------|--|--|
| ENLISTMENT. | | |
| District <i>Adelaide</i> | | |
| Date <i>May 21 1918</i> | | |
| No. <i>114698</i> | | |
| M. or R. <i>Single</i> | | |
| SEPARATION GRANT. | | |
| <i>Nil</i> | | |
| Checking Staff Initials _____ | | |

To the DISTRICT PAYMASTER.

I hereby authorize you to pay on and after *Embarkation* and during my service in the A.I.E., the sum of *Three Shillings 3/4* per day to my *Wife* *Mrs. Margaret Mary Hendell* of *King William Road* or his or her Agent.
(Place Relationship of Allottee.) (Original Name and Surname of Allottee.) (Address of Allottee.)

Previous Private Address of Soldier *As above*
 P.O. or Bank _____ Certificate No. _____ Land Record No. _____ Schedule No. _____
 Checking Staff Initials _____

SEPARATION ALLOWANCE DECLARATION.

I, the above-named Soldier, hereby claim separation allowance on behalf of the above-mentioned allottee, and declare that—
 1. I am a married man, and above allottee is my wife.
 2. There is no legal or mutual agreement of separation between my wife and myself.
 3. That I am the father of the under-noted children, who are under the age of sixteen years, and are dependent on me for support.

| Full Names of Children. | Date of Birth. | | |
|-------------------------|----------------|--------|-------|
| | Day. | Month. | Year. |
| <i>Nil</i> | | | |
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And I make this solemn declaration by virtue of the *Statutory Declarations Act 1911*, conscientiously believing the statements contained therein to be true in every particular.

Declared at *Adelaide* the *25th* day of *October* 19*18*.
 Before me *Norman Malcolm J.P.* Signature *Hendell Kenneth Walla*
For the State of South Aus.

NOTE.—Any person who makes an untrue statement in this application shall be guilty of an offence under the War Precautions Act, and shall be liable to a fine not exceeding ONE HUNDRED POUNDS or IMPRISONMENT for a term not exceeding SIX MONTHS, or both, and may, in addition, be ordered to repay any money received from the Department of Defence.

As far as the Department is concerned, the above allotment will be regarded as an absolute one, and no liability or obligation is accepted by the Department as to any misapplication of same by the Allottee. If however, the soldier has made any private arrangement with the Allottee as to the disposal of the allotment money, he may avail himself of the provision made on the back of this form for recording same, which would, in the case of the soldier's death, and dispute arising amongst persons interested, supply definite information of the soldier's actual intention in making the allotment.