MILITARY FORCES 40 ALIA RSAMS ENLISTED FOR SERVICE ABROAD ESTATION PAPER OF VERARD Name FER'R MAR 27 1916! Joined on Person Enlisting before Attestation. Questions to be put to Cocrard Ferris. What is your Name? 2. In the Parish of near the Town of fre pect n or near what Parish or Town were you born? in the County of Jace Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) What is your age? What is your trade or calling? Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? Are you married? ... FERRIS - ROSE-MYS 2 HVENUE, SEFTON PARK Who is your next of kin? (Address to be stated) ... NAICSWORTH, St. Cuptra Have you ever been convicted by the Civil Power? Have you ever been discharged from any part of His Majesty's Forces, with Ignominy, or as Incorrigible and Worthless, or on account of Conviction of Felony, or of a Sentence of Penal Servitude, or have you been dismissed with disgrace from the Navy? 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 servior Cadet. 80 B. area 11 transferred to betier torses months 806. area still serv Have you stated the whole, if any, of your previous service? Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? ... (For materied men, widowers with children, and soldiers who are the mile support of widowed mother). Do you understand that "A Separation Alfowance will be indued to you in respect of tags service beyond an amount which together with pay would reach 8/- per day? Are you prepared to undergo inoculation against smallpox and enteric fever? ... do solemnly declare that the above answers made Everars lunes. me to the above questions are true, and I am willing and hereby voluntarily agree to serve in the Military Forces be Commonwealth of Australia within or beyond the limits of the Commonwealth. And I further agree to allot not less than two fifths of the pay payable to me from time to ice for the support of my wife and children Date MAR 27 1916 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.

3

Description of Everard Ferries

Age 19 years 1 months

Height 6 feet 1/2 inches

Weight 142 bbs.

Chest Measurement 32 35 /2 inches

Complexion Medicus Vacat

Eyes Blue Scar Relbows and

Religious Denomination 6 8

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; hæmorrhoids; varicose veins, beyond a limited extent; marked varicocele with unusually pendent testicle; inveterate cutaneous disease; chronic ulcers; traces of corporal punishment, or evidence of having been marked with the letters D. or B.C.; 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 FRB 20 1016

Place ADELAIDE.

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

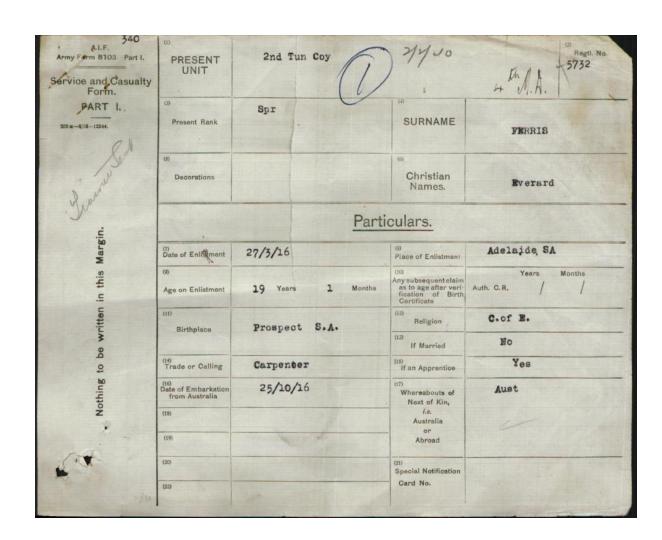
Place EXHIBITION ALLE SAMP.

LT. COL.

Commanding DEPOT BATTALION A.L.F.

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751	03 + name 4/19/	28359		3
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I have examine	ed the above details, and find	them correct	in every respect.	1003
to me		111	1	1
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Casualty Form - Active Service Army Form B. 108.	
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Regimental No. 5732 Rank Sap. Name FERRIS Everand	
Enlisted (a) 1 1 Terms of Service (a) was 4 months Service reckons from (a) 275 6	
Date of promotion to present rank Date of appointment Numerical position on to lance rank Numerical position on roll of N.C.O's.	
Extended Re-engaged Qualification (b)	
REPORT Hecord of promotions, reductions, transfers, casualties, 40., during active service, as reported on Army Form B. 213, Army Form	
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(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or sulfatment will be entered. (b) as, Signalier, Shoeing Smith, &c., &c., also special qualifications in technical Corps duties. (F.T.C.)	

		3			
Date	EPORT From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported un Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213. Army Form A. 35, or other official documents.
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Date of pro	omotion to present	rank	Date of ap	pointment to la	nce rank.	
Extended	Re	engaged	or Corps !	Trade and Rate.		
Occupation	1				Sig	nature of Officer.
Date	Report From whom received	Record of promotions reductions, tra &c., during active service, as reported B 213. Army Form A.36, or in other of The authority to be quoted in each case,	nsfers, casualties, d on Army Form ficial documents.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213. Army Form A.36, or other official documents
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COMMONWEALTH OF AUSTRALIA

RL. 21 Form D736 (1968)

R3. PLEASE QUOTE No ..

SOUTH AUSTRALIAN BRANCH 186 PULTENEY STREET ADELAIDE

REPATRIATION DEPARTMENT

The Officer-in-Charge, Central Army Records Office, Albert Park Barracks, MELBOURNE, VIC. 3004

* (5) Attestation Paper

2 9 MAR 1988

	REQUEST FOR DOCUMENTS
Number:	5732 . Rank: 5PR.
Christian	Names: <u>FVERARD</u> Surname: <u>FERRIS</u>
Unit:	2 ND TUNNELL COV. Period of Service:
SERVING DISCHARGE	(Strike out one.)
Deceased:	
Present A	daress: 16 ORLANDO. AVE. HAMPST EAD CONS. 5086
benefits.	This Department is considering an application lodged for Repatriation
	Please forward the documents indicated below as soon as possible.
/ * (1)	Statement of Service B103 Completed . Aloto
	Medical Documents
* (3)	Micro Films 74/68
* (4)	X-rays

3. If a previous request has been made for the originals or copies of these documents, please advise the date and the branch from which the request originated.

* Tick items (1) to (5) as applicable.

(R.G. COLLINS)
DEPUTY COMMISSIONER