

Present Occupation Plumber's Improver

Employer P.C. Priest

Employer's Address Norwood



AUSTRALIAN MILITARY FORCES

1919/20.

A.A. Form Mob. 1

M.P. 97610

John

# MOBILIZATION ATTESTATION FORM

To be filled in for all Persons at the Place of Assembly when called out under Parts III. or IV. of the Defence Act, or when voluntarily enlisted.

Army No. S.11525

Surname KNIGHT (BLOCK CAPITALS) Christian Names Douglas Horace

Unit 51<sup>st</sup> Field Battery

Enlisted for war service at Kensington (Place)

South Australia (State) 27/Feb, 1940 (Date)

## A

Questions to be put to persons called out or presenting themselves for voluntary enlistment.\*

- |   |  |
|---|--|
| 1. What is your name? .. .. .   | 1. Surname <u>KNIGHT</u><br>(BLOCK LETTERS)<br>Other names <u>Douglas Horace</u>   |
| 2. Where were you born? .. .. .   | 2. In or near the town of <u>Adelaide</u><br>in the state or country of <u>Sth. Aust</u>                                   |
| 3. Are you a British Subject? .. .. .   | 3. <u>Yes</u>  |
| 4. What is your age and date of birth? .. .. .  | 4. Age <u>20 7/12 Yrs</u><br>Date of Birth <u>19/July-1940-1919</u>  |
| 5. What is your trade or occupation? .. .. .  | 5. <u>Plumber's Improver</u>   |
| 6. Are you married, single or widower? .. .. .  | 6. <u>Single</u>   |
| 7. Have you previously served on active service? If so, where and in what arm? .. .. .  | 7. <u>No.</u>  |
| 8. Who is your actual next of kin? (Order of relationship:—wife, eldest son, eldest daughter, father, mother, eldest brother, eldest sister, eldest half-brother, eldest half-sister) .. .. . | 8. Name <u>Horace Joseph Knight</u><br>Address <u>14 Lubrs Road</u><br><u>South Payneham</u><br>Relationship <u>Father</u> |
| 9. What is your permanent address? .. .. .  | 9. <u>14 Lubrs Road</u><br><u>South Payneham. Sth Aust</u>   |
| 10. What is your religious denomination? (This question need not be answered if the man has a conscientious objection to doing so) .. .. .  | 10. <u>Congregational</u>  |

I, Douglas Horace Knight do solemnly declare that the above answers made by me to the above questions are true.

Witnessed by J.K. Reid Capt  
(Signature of Attesting or Witnessing Officer)

D. Knight  
Signature

\*The person will be warned that should he give false answers to any of these questions he will be liable to heavy penalties under the Defence Act.

CI

Registered on 27 Feb 1940  
 In Training Area No. 102 Fens

**AUSTRALIAN MILITARY RECORD OF SERVICE UNIFORM**



**PERSONAL INFORMATION.**

Surname (block letters) KNIGHT  
 Other Names (in full) Douglas Horace  
 Date of Birth 19<sup>th</sup> day of July 1919  
 Town and Country of Birth Adelaide SA  
 Nationality BRITISH  
 Postal Address (in pencil) 174 Lybri's Rd, S. Plympton

Army No. \_\_\_\_\_  
 Joined on \_\_\_\_\_/\_\_\_\_\_/19\_\_\_\_

Height 5' 9 3/4"  
 Colour of Hair Brown

I have made full and careful examination of the information contained in the Standing Orders for

1. Fit for Class I.
  2. Temporarily unfit for Class I.
  3. Fit for Class II.
  4. Temporarily unfit for Class II.
  5. Unfit for Military Service.
  6. Not substantially of European Origin.
- Place KENSINGTON

Marital Condition (M, S, or W.) Single  
 Dependents None

**INFORMATION RELATING TO EMPLOYMENT.**

Trade or Occupation (and Grade) Shunter (Improver)  
 Initials and Name of Employer (in pencil) PC Priest  
 Postal Address of Employer (in pencil) 173 Parade Adelaide

**INFORMATION RELATING TO PARENT OR GUARDIAN.**

Surname (block letters) KNIGHT  
 Other Names (in full) Horace Joseph  
 Nationality British  
 Relationship Father  
 Occupation Carriage Painter  
 Postal Address (in pencil) 14 Lybri's Rd S. Plympton

Signature of Examining Officer \_\_\_\_\_

\* Classifications which are inapplicable to \_\_\_\_\_

**IF EXEMPTION CLAIMED.**

Reason No

**SPECIMEN SIGNATURE OF RECRUIT.**

Date 9 APR 1940 / \_\_\_\_ / 19\_\_\_\_  
 Signature D. Knight

Year Ended	Efficient (Yes or No) or Exempt	Equivalent Training
30/6/19		
30/6/19		
30/6/19		
30/6/19		
30/6/19		
30/6/19		
30/6/19		
30/6/19		
30/6/19		
30/6/19		

**EXEMPTIONS.**

Period.		Reason.	Signature of Prescribed Authority.
From.	To.		
/ / 19	/ / 19		
/ / 19	/ / 19		
/ / 19	/ / 19		
/ / 19	/ / 19		
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RECEIVED  
 Received A.A.F. M7. Record Book  
 A.A.F. M7. Record Book Posted