

AUSTRALIAN MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE.

Attestation Paper of Persons Enlisted for Service Abroad.

No. 562400 Name { Surname SPELLS
in full { Christian Name NEIL SAMUEL.
Unit _____
Joined on 2 SEP 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? Neil Samuel Spells
2. In or near what Town were you born? Gladstone
In the State or Country of SOUTH AUSTRALIA
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) 20 1/2 years
27th July 1898.
5. What is your Trade or Calling? Civil Servant.
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? No
7. Are you married, single, or widower? Single.
8. Who is your next of kin? (Address and relationship to be stated) Father SPELLS THOMAS JOSEPH
26 GORDON ROAD PROSPECT.
SOUTH AUSTRALIA.
9. What is your permanent address in Australia? 26 GORDON ROAD PROSPECT.
SOUTH 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 4 years A.C. 80th
11. Have you stated the whole, if any, of your previous service? Yes.
12. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? No
13. Have you ever suffered from:—
1. Consumption, tubercular disease, or chronic cough? No
2. Fits of any kind? No
3. Rheumatism or asthma? No
4. Mental or nervous disease? No
5. Has any member of your family suffered from any of the above diseases? If so, state particulars. No
14. (For married men, widowers with children, and soldiers who are the sole support of widowed mother)—
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? Yes
15. Are you prepared to undergo inoculation against small pox and enteric fever? Yes

3. Neil Samuel Spells 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 allot 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.

Date 2 SEP 1918

* This clause should be struck out in the case of unmarried men or widowers without children under 16 years of age.
† Two-fifths must be allotted to the wife, and if there are children three-fifths must be allotted.

23182/2.18—C.1979—70W.

I have been informed that if I make any false statement I commit an offence against the *Defence Act 1903-1917* and *War Precautions Act 1914-1916*.

Description of <u>Neil Samuel Spells</u>		Recruit.
on Enlistment.		
Age	20 years 1 months.	DISTINCTIVE MARKS. <i>Dis R 4/6 L 4/6</i> <i>base L.H.</i>
Height	5 feet 7 inches.	
Weight	129 lbs.	
Chest Measurement	32-34 inches.	
Complexion	Medium	
Eyes	Blue	
Hair	Brown	
Religious Denomination	R.C.	

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; 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 _____

Place ADELAIDE.

H. A. G. G. G.
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 _____

C. 179.

Commanding _____

Spells Neil Samuel

DISCHARGED

cessation of ~~curator~~
Hostilities

I have examined the above details, and find them correct in every respect.

Waelw Doelman

.....Lt. Colonel..

CAMP. COMMANDANT,

Original.
Duplicate.

APPLICATION TO ENLIST IN THE AUSTRALIAN IMPERIAL FORCE.

To the Recruiting Officer,

at

Adelaide

(OFFICIAL STAMP.)

I, *Unit Samuel Spells*

hereby offer myself for Enlistment in the Australian Imperial Force for Active Service Abroad, and undertake to enlist in the manner prescribed, if I am accepted by the Military Authorities, within one month from date hereof.

POSTAL ADDRESS

*26 Gordon Road
Prospect*

Signature

Spells

Occupation

Civil Servant

Date

2nd Sept 1918

or on his behalf, of which it
is not to mislead any officer, or

COMMONWEALTH MILITARY FORCES

4th Military Force

MINORS

I hereby Certify that:-

- (a) The person named above { an Extract of Birth Entry
has produced *Birth Certificate*

which shows he was Born at *Gladstone* on *27/7/98*

- (b) An Extract of Birth Entry { is attached
Statutory Declaration from { is attached
Parent's

- (c) Parents have been asked if they have any objection to
Enlistment *by letter on 19/18 and up
to the present 19/18 have received no reply*

Their Reply:-

*No objection
Objection has been forwarded to State
Recruiting Committee and their Decⁿ
is attached.*

W. D. Dean Lieut

13/9/18

Place

(Signature)

Recruiting Officer.

Date

D. 567/118.-C. 1102.-719.

(OVER)

WILL.

No.

Rank *Pte*

Names (Surname) *Spells*

(Christian) *Neil Samuel*

Unit

My will is ~~attached hereto.~~ *my mother*
~~lodged with me.~~ *Susan Emily Spells*
26 Gordon Rd
Prospect

RULE OUT PORTION INAPPLICABLE.

N. Spells Signature of Soldier.

Verified C.O.

The Will Form provided in the soldier's pay-book may, if desired, be utilised.



C.M. Form A 45.
(Revised 1.6.13.)

MILITARY FORCES OF THE COMMONWEALTH.

PROCEEDINGS ON DISCHARGE.

No. *S 15400*

Rank— *Private*

Name— *SPELLS Neil Samuel*

NOTE.—The name must agree strictly with that on enlistment, unless changed subsequently by authority.

Corps— *7th S. U.K.*

Date of Discharge—

Place of Discharge— *Mitcham A.I.F. Camp*

1. Description on Discharge.

Age *20* years *1* months

Height *5* feet *7* inches

Complexion— *Medium*

Eyes— *Blue*

Hair— *Brown*

Trade— *Civil Servant*

Intended place of
Residence }

(This should be given as
fully as practicable.)

Descriptive Marks.

Vacc 46

2. The above-named man is discharged in consequence of—

Cessation of Hostilities

3. His conduct and character while in the service have been, according to the records, &c.—

Good

4. Special Qualifications for employment in civil life—