

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5456 Name Goodwin Wiseman Corps Meth.
Questions to be put to the Recruit before Enlistment.
I. What is your name? I Toodwin Wiseman 2 Little Bay Island
2. What is your full Address?
3. Are you a British Subject?
4. What is your age? 4. 20. Years Months
5. What is your Trade or Calling? 5
6. Are you Married? 6.
7. Have you ever served in any Branch of His Ma ; jesty's Forces, naval or military, if so,* which? 7.
8. Are you willing to be vaccinated or re-vac- 8.
9. Are you willing to be enlisted for General Service? • 9.
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?
11. Are you willing to serve upon the conditions as embedded in the roll of service to be signed by you if you are accepted?
I. Joodwin Wiseman
27/5/18 Signature of Witness.
2 OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
I. Job Novin User on do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.
CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered
as replied to, and the said recruit has made and signed the declaration and taken the oath before me at
Signature of Attesting Officer
ACIEDATE OF ADDOMING OFFICED
†CERTIFICATE OF APPROVING OFFICER. I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quired forms appear to have been complied with. I accordingly approve, and appoint him to the ‡
If enlisted by special authority, such will be attached to the original attestation.
Date
Place
† The signature of the Approving Officer is to be affixed in the presence of the Recruit. ‡ Here insert the "Corps" for which the Recruit has been enlisted.

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DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name	900	down U	lisem	u.					
Apparent	age	2D years	mont	hs.	He	ight.		5f	eet 3 inches
Chest Me	asurem	ent $\begin{cases} \text{Girth when fu} \\ \text{Range of expa} \end{cases}$	lly expand	led 0	inches	Mich	es		
Distinctiv	e mark	(S							*
		INFORMA	TION S	UPPLIE	D BY	RE	CRU	ΙΤ	
Name and	l Addre	ss of next of kin /	nedo.	A Relatio	liger nship	k Cerey	y a	16	
	0	1		rs as to M		/		-,,-	
(4	z) Christia	n and Surname of Woman to (c) Prese	o whom marrie	d, and whether	spinster or ficer verify	widow ing ent	. (6) Pl	ace and	date of marriage.
	(a)		(b)		(0)		w	(d)
			Particul	ars as to C	hildren				
	Chris	stian Names					Date	and Pla	ce of Birth
Corps in	Rgt: or Depot	STATE Promotion, Reductions, Casualties, &c.	EMENT Army Rank	OF THE	Service lowed to for fixing rate of p	not al- reckon	Service serve not ed to rec wards G.	kon to-	Signature of Officers certifying correctness of
		Cusumitos, CC.			Years	Days	Years	Days	entries
	rds limite	d engagement reckons from	n						
Joined at									
									<u> </u>
		446							
•									
		*							
Tot	al Service	forfeited as above	1 .						
Total Samia					7			,	\
Total Service t		sions "		[date of discl				days	



THE ROYAL NEWFOUNDLAND REGIMENT

No. =	5456	Name de	drain	Wisenen	Corps	eth.
		· Questions to be	put to the	Recruit before	Enlistment.	
ı. W	hat is your na	ame?		Jaadne	oay Lot	do
2. W	hat is your fu	ll Address?	\cdots	2	1h	X 18.
		sh Subject?		3 150	ears	Months
5. W	hat is your Tr	ade or Calling?		5. York	man	
7. H	ave you ever s	erved in any Branch of aval or military, if so,	His Ma	6. 3. h	0	
8. Ar	e you willing	to be vaccinated o		8. Y	20	
9. Ar	e you willing to	be enlisted for Genera	1 Service? • •	9	<u>.</u>	
10. Di	d you receive a meaning, and	Notice, and do you us who gave it to you?····	nderstand }	10	Vame	
11. Ar sign	e you willing t	o serve upon the condit ou are accepted?	ions as embo	died in the roll of	service to be } 1	1 yes
f.	Java	man Wise.	nan	do s	olemniv declare th	at the above answers
made l	by me to the al	ove questions are true,	and that I	am willing to fulfil	the engagements r	nade.
27	15/18	12	Says	rong	Signatu	TURE OF RECRUIT.
bound,	honestly and fai	OARTHO BE THE MALESTY KING Georgh through defend His Majes the conditions of my service	ge the Fifth, ty, His Heirs	His Heirs and Su	make oath, that	I will be faithful and at I will, as in duty against all
		CERTIFICATE OF e named was cautioned be punished as provided	by me that			f the above questions
T	he above questi	ons were then read to	the Recruit	in my presence.	to each question	has been de entered
as repl on this	LU		d signed the191 of Attesting	8 QX	Dicko	To me Start
				PPROVING OFFICE		
quired	forms appear t	Attestation of the above to have been complied we reial authority, such will	ith. I accor	dingly approve, and	appoint him to th	
Date					••••••	· Approving Officer.
\	† The sign	ature of the Approving ert the "Corps" for which	Officer is to	be affixed in the	presence of the R	ecruit.
Discharge	If so, Recruit is	s to be asked the partic of Character, which sho	ulars of his ould be retur	former service, and ned to him conspic	to produce, if po	in red ink, as follows

DESCRIPTIVE REPORT ON ENLISTMENT opticable to all ranks. To correspond with entries on the Medical History Sheet.

Name You	dnan W		THE STATE OF THE S			
Apparent age		lly expanded	35%	inches	5-1	eet. 3inche
Distinctive mark	S		• • • • • • • • • • • • • • • • • • • •	e Potoris	7	
	Concrete College		MIL NI	() (A. () ()		
Name and Addre	INFORMA ss of next of king y Soldo N		PLIED BY Wisconship	nan		(s
		Particulars a	s to Marriag	e		a Arsen a estandaren <u>a</u>
	a and Surname of Woman t (c) Prese	nt address. (a) Ini	d whether spinster tials of Officer veri	fying entry.	6) Place and	
(a)	•	(b)		(c)	7/ 1/14	(d)
		Particulars :	as to Childre	n'	1,284	r min manifest
Chris	tian Names				Date and Pla	ice of Birth
Corps in Rgt. or	Promotion, Reductions,	EMENT OF	Servi	ce not al- to reckon xing the	rvice in Re- re not allow- to reckon to-	Signature of Officers certifying correctness of
which served Depot	Casualties, &c.	Army Rank	Year		ds G. C. Pay	entries
Service towards this	depresent reckous from	May 2	18 1-198 any	13	5/8	1) 18 18 18 18 18 18 18 18 18 18 18 18 18
Total Service	Democ	Jugalio Lucio			2 <u> </u>	The second secon

C.R. 5-45-6

Extract of Daily Orders Part II, dated Jan. 16th 1919.

The discharge of the undernoted has been approved by 0.0. Discharge Depot on noted date.

5456 Pte.G.Wiseman

Discharged 14-1-18

C.R. 5456

Extract from Delly Orders Port 11 Unit The Royal Mid. Rept., St. John's, Jan. 20th, 1919.

The Discharges of the undernoted on demobilization has been appropriate confirmed by Officer 1/o Records on noted dates.

5456 Pte. Goodwin Wiseman.

Jan. 15th, 1919.

St Johns. 36-8-18 Tresident Coaker. The Commandings Newfoundland. C.R.5456 . Dear Sis! -I received word. yesterday that my father was ill also he said the pelsy was taking greater effect on him and also that he would like me to try for my discharge to come home to help him I did not know who. else would befriend a poor man excepting yourself. In our family there are six sons the two eldest are married the next two are out of their time, and are physically unfit for active service of the youngest is derbing him H. M. Havy & I'm here in the Rink. I'm twenty years old. Would you hindly try to get.

my discharge & oblige yours Truly.

His 456 Pte Goodwin Wisemen #5456. Pte Goodwin Wisemen Ps. My fathers name is & & Wisemen Shows

ken magni huntymuni -I found thin, but I from muche ash i ammalle. However of Man any mand friend modowber do what promer. Concrates

C.R.5456

Extract from Daily Orders part 11.from Unit The Monal Nfld.Regt."t.John's, dated May 29,1918

#5456 Pte. G. Wiseman.

Attested for General Service with the Royal fld.Regt. from May 27,1918

Wiseman, C

5456

Tay Dept.

January 25th., 1919

#5456 Pte.Goodwin Wiseman.

Little Bay Islands.

Dear Sir :-

Please find enclosed "Discharge Certificate No1746."

Yours faithfully,

Captain, Paymester & Officer i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1.	No. 5.45.6 Rank . Sell
2.	Occupation
3.	The above named man is discharged in consequence of. DEMOBILIZATION.
4.	His accounts are correctly balanced and I have impartially inquired into a BENLISTED under the MILITARY AS ERVICE bACENT before me, in accordance with Regulations. Place and granted leave without pay. AND ELIGIBLE for PAY SHANNING ON AND EDEPOTE THE Royal Newfoundland Regiment
5.	CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE I hereby acknowledge that I have received all my pay and allowances (including slething allowance) and all just demands up to the present date, and hereby release the Discharge Report Royal Newfoundland Regiment, of all financial responsibility in my connection ED under the Milliam without pay. Place and date
6.	CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER I hereby certify that I am in a position to resume civilian occupation immediately on discharge. Place and Date
7.	STATEMENT OF SERVICE Enlisted for service
8.	The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ilc Records, The Royal Newfoundland Regiment, twenty-eight days from date. ST. JOIIN'S. Officer Commanding Discharge Depot The Royal Newfoundland Regiment. Date
9. D	The discharge of above mentioned soldier is hereby confirmed to the Course of Place of the Course of the Course of the Course of the Royal Newfoundland Regiment

as B 2019/ 746

The Royal Newfoundland Regiment

$\gamma_{\rm D}^{\rm D}$	EMOBILIZATION OF
Reg. No. 545 Rank.	Name Wiseman Goodwin.
Date of Enlistment	Address Letter Boy Seld District Low Mengat
Occupation . Jasharman Classifi Recommendation S.M.B.	ication for Discharge Medical Category
Passed to Demobilization Officer with follow	
N.F. P 36	
B 178 W 3494 B 122.	Board 1st " 2
B 178a D 400A B 1915	do 2nd
B 179 D 400B Form L	do 3rd " 4
B 179a D 400C	K do 4th " 5
B 179b ME 2	
В 179е В 120 М 93	
1. Civil Re-Establishment. I amin a position	n to resume civilian occupation.
·	
	NOT APPLICABLE. Granted Leave without pay at his own request after attestation to continue in civilian occupation.
Particulars passed to Vocational O	fficer for information and action.
Date	
2. Clothing.	
Certified that Clothing Regulation (a) Clothing Allowance pa (b) Clothing Supplied	yable. ENLISTED under the MILITARY SERVICE ACT
Date	O i c. Re-clothing.

The above named has been provided with T	Certificate No
Date 1 - 1 - 1 9	Demobilization Officer
4. Pay and Allowances. ENLISTED under The herein named soldier's accounted have the herewith settled. He has rNOTedELLGLES.	the MILITARY SERVICE ACT See Service Withologody and all matters in connection Towards tond. ALLOWANCES
Date	Mahluf Cerfst Led 13-1-19 Depot Paymaster.
Forwarded with following documents to O.C I	
T. 100	N.F. Med D.F. 1
APPROVED. Documents as above forwarded to:— Officer i c Records. Board of Pension Commissioners. with following additional documents.	R.H.A. F. G. G
Date	O. C. Discharge Depot.
Received the above noted documents from O. C. Discharg	ge Depot.

P.T.O.

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

Surname Christian Name Table I.—GENERAL TABLE REGULAR ARMY Examined at Declared Age.. days , years days Trade or Occupation ... Height tuches inches Weight lbs. Chest Measure-ment (Girth when fully expanded inches inches Range of Expansion. inches inches Physical Development.. Right Leit Right Left Vaccination Marks When Vaccinated R.E.-V= Vision L. E. -- V == (a) (a) Marks indicating congenital peculi-arities or previous disease (6) Slight defects but not sufficient to cause rejection Approved by (Signature) (Rank) Medical Officer Medical Officer. at Enlisted on day of 191 Regtl. No. Corps Regtl. No. Transferred to ... Became non-effective by day of 191 on day of 191 (Signature)

(Rank)

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	i i feologic to a chologic	Brief Details, and Signatures					
					a		
18 5/8	Yacc.	B					
		•					
13-6-18	TAB &	9		•			
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4							
					~ · · · · · · · · · · · · · · · · · · ·		
	1	able IV.—SER	VICE TABLE.				
Station or Troops	hip Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation		

Embarkation Disembarkation Station or Troopship Arrival or Bmbarkation Disembarkation Disembarka

FORM No. _ NEWFOUND(AND POSTAL TELEGRAPHS. CABLE CONNECTION WITH ALL PARTS OF THE WORLD Place from tilles ay Island OCTI Lieut Dudler MING & WHI Diving to outbreak of Supposed Spanish influence here was Alfared passag on Steamer Yvrseman Goo boun A boy lengterly Ley! Heave hote Weturn. H. Hamun fo No enquiry respecting this Message will be attended to without the production of this page.

NEWFOUNDLAND POSTAL TELEGRAPHS. CABLE CONNECTION WITH ALL PARTS OF THE WORLD Man from Lapt. Sait

Regimental Hagles Dwing to Spanish Influenza in our house I am refused passage to Stophn's please advise Ite. F. S. Wiseman answered activesiel to aireil Dectars decision. rage will be attended to without the production of this paper

5456 Pre. S. Wirwan granted leave of absence without lag until 821. 15 1 1918. RW Lat Cap 4/9/18 Sat go'c

Little Bay Island

Rail & Story

N9 6553



THE ROYAL NEWFOUNDLAND REGIMENT

	te (in full)	Address	AMOUNT (each person)
No. Friend	: Unionan Lit	The Bon Island	45
1		71 10/3	
	, , , , , , , , , , , , , , , , , , ,		
		-	
			<u> </u>
		Total Allotment, S	40

Nº 6553



THE ROYAL NEWFOUNDLAND REGIMENT

	Whether Wife, Child. other Relative or Friend	Name (in full)	Address	AMOUNT (each person)
551	Faclas	Fred & Una ama	Little Ban Islant	145
		y consina	in Little Bay Island	
	er da to			
			·	
			Total Allotment, S	40
S	Chis form must be eigned by the Office equired payments	r Commanding Company and l	anding Company, signed by the Volume handed to the Paymaster as authority (Sig.) Howdwin Wi	eer, counter- to make the

FORM 93.

ROYAL NEWFOUNDLAND REGIMENT.

	Medical Examination Held at	eadquarters May 27 /18
	· Ol 1 · Solitanian	1// //
I.	Name Spoodman vilarman	Age (a) Declared 20
	Do you know of anything wrong with you? M	(b) Apparent
2.	Do you know of anything wiong with you?	
	What severe illnesses have you had?	s .
	Height 5-5 Eyesight (a) Left 66, Physical Defects (Examine after strenuous exercise	
	wise 5 dwg	ш.
3.	Height 3 - 3	Weight 131
4.	Eyesight (a) Left /6,	(b) Right 6/6
5.	Physical Defects (Examine after strenuous exercise	e) ~
	** *** *** *** *** *** *** *** *** ***	
6.	Examination of Lungs ~	
	Measurement (a) Expiration	3 (b) Inspiration 3 $\frac{7}{2}$
		t.
7.	Examination of Heart M	
8.	Examination of Urine	f
9.	Examination of Mouth—(Defective Speech)	
	Teeth	
	Throat	
	Nose	
	Ears—(Otorrhea)	
	(Deafness)	
		, No.
10.	Have you been successfully vaccinated, and when?	
· II.	Name and address of next of kin Jathar	Fredrick Little Bay Stor
REM	ARKS	Two Berden
سيس		1 il B
11		Chellefart

Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Good Conduct Badges, Service pay or proficiency pay Regimental Number and Name Enlistment Age on months Religion of Enlistment | M. S-18 Joined Date Joined Date. with Colours 2344 years. Hace of Birth with Reserve 365 years. Joined Date Toined Date_ Name of Date of By whom awarded REMARKS Place Rank Punishment awarded Offence Witnesses

To be carried over.

syd

The Royal Newfoundland Regiment

DEM	OBILIZATION OF							
Reg. No. 5.45 Rank The	Name - Wiseman Goodwin.							
Date of Enlistment 22518	Address Settle Ban Sold District Lung Changate							
Occupation Lasherman Classification for Discharge Medical Category Medical Category								
On date Leave without Pay granted. Disability Rating								
Passed to Demobilization Officer with following								
N.F. P 36	NE Med DE 1							
B 178 W 3494 B 122	TO BE A CONTROL OF THE PROPERTY OF THE PROPERT							
B 178a D 400A B 1915								
B 179 D 400B Form L	4							
B 179a D 400C Form K	do 4th " 5							
B 179b B 103 ME 2								
В 179е В 120 М 93								
I. Civil Re-Establishment.	RS FOR DEMOBILIZATION							
I amin a position to	resume civilian occupation.							
	NOT APPLICABLE. Granted Leave without pay at his own request after attestation to continue in civilian occupation							
Particulars passed to Vocational Officer	r for information and action.							
Date								
a. Clothing.								
Certified that Clothing Regulations ha	we been complied with:—							
(a) Clothing Allowance payabl	ie ENLISTED under the MILITARY SERVICE ACT							
(b) Clothing Supplied	and granted leave without pay, NOT ELIGIBLE for PAY and ALLOWANCES.							
Date	O i c. Re-clothing.							

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrant No
at MULL Reng July and Release Certificate No
Day 14-1-19 Coff
Demobilization Officer
4. Pay and Allowances. ENLISTED under the MILITARY SERVICE ACT
The herein named soldier's accounts hand grantent leave without pay, all matters in connection
therewith settled. He has receine Tak Life Blow forces AY and ALLOWANCES.
13.1-19. Mothey Capt.
Date
Discharge approved for
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36 B 268 B 121
Б 178 W 3494 В 122 Воагd 1st
B 178a D 400A B 1915
B 179. D 400B. Form L. do 3rd. " 4. B 179a. D 400C. Form K. d. do 4th. " 5
B 179b B 103 ME 2
B 179c D 120 M 93
M. Pariska Cill
Date Demobilization Officer.
1
Approved. \mathcal{N} .
Documents as above forwarded to:—
Officer i c Records. Board of Pension Commissioners.
with following additional documents.
the control of the co
JAN 14 1919
O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
for words
Jany 174/19 Hordekerous
Date

Attested	5. 4.5 6. Rank Pts. Name. Wisconcum. 5. 2.7.5. 6. Address Sittle Bay Islanda N. B. 40. Allottee Inst. 5. Wisconcum (Paths.) lotment 19. 19. Returned from Overseas.
Embarked	for Overseas
13/18/18	1, noe ex 16-6-18, to 26-6-18
9. Leave	. Without Pay 5-9-19 to 15-10-18.
10 -1 -	, 9 PASSED TO DEMOBILIZATION OFFICER
14-1-19	DISOHARGE APPROVED ON DEMOBILISATION.