

198843

HUTT John

RCA

ATTESTATION

Name John Hull Corps _____

Questions to be put to the Recruit before Enlistment

- 1. What is your Name? 1. John Hull
- 2. What is your full Address? 2. 35 Pennycuik
Cadogan
- 3. Are you a British Subject? 3. Yes
- 4. What is your Age? 4. 34 Years ... Months
- 5. What is your Trade or Calling?... .. 5. Pharmacist
- 6. Are you Married? 6. Yes
- 7. Have you ever served in any branch of His Majesty's }
Forces, naval or military, if so, which? } 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? ... 8. Yes
- 9. Are you willing to be enlisted for General Service? ... 9. Yes
- 10. Did you receive a Notice, and do you understand its }
meaning, and who gave it to you? } 10. Yes { Name _____
Corps _____
- 11. Are you willing to serve upon the following conditions provided His Majesty should so long }
require your services? }
For the duration of the War, at the end of which you will be discharged with all convenient }
speed. You will be required to serve for one day with the Colours and the remainder of the }
period in the Army Reserve, in accordance with the provisions of the Royal Warrant dated }
20th Oct., 1915, until such time as you may be called up by order of the Army Council. If }
employed with Hospitals, depots of Mounted Units, or as a Clerk, etc., you may be retained }
after the termination of hostilities until your services can be spared, but such retention }
shall in no case exceed six months. } 11. Yes

I, John Hull do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

John Hull SIGNATURE OF RECRUIT
J. Southall Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Hull swear by Almighty God, 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, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of the Generals and Officers set over me. So help me God.

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 Cadogan on this 30 day of Nov 1915.
Signature of the Justice Agnes Bonner

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled-up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the ‡ S.G.A.
If enlisted by special authority, Army Form B. 203 (or other authority for the enlistment) will be attached to the original attestation.
Date _____ 19 . _____
Place _____ } Approving Officer

† 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.

* If so, the Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz.—(Name) _____
in the (Regiment) _____ on the (Date) _____

months. Height 5 feet
 Birth when fully expanded 35 inches.
 Range of expansion 2 1/2 inches.

INFORMATION SUPPLIED BY RECRUIT.

Address of next-of-kin Ellen. Huff. 35 Penryn St. Cardiff.
 Relationship Wife.

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

(a) <u>Ellen Huff</u>	(b) <u>17th April 1911</u> <u>Nottingham</u>	(c) <u>As above</u>	(d) <u>[Signature]</u>
-----------------------	---	---------------------	------------------------

Particulars as to Children.

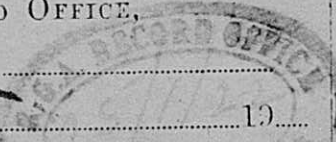
Christian Names	Date and Place of Birth
<u>John Ernest</u>	<u>24th August 1912. Cardiff</u>
<u>Archie Rowland</u>	<u>29th November 1913</u>
<u>Dorothy Ellen</u>	<u>19th September 1915</u>
	<u>3</u>

MILITARY HISTORY SHEET.

1. Passed classes of Instruction † † This includes any authorised class of instruction, e.g., in swimming, chiropody, &c.		
2. Campaigns ... (including Actions)		
3. Wounded ...		
4. Special instances of gallant conduct and mentions in public despatches		
5. Medals, decorations and annuities	Name of Medal	Clasps
	<u>3. W. and V. MEDAL. PAGE 12080</u>	
6. Injuries in or by the service ...		

(c) Crow

0344



I hereby acknowledge the receipt of the

B. W. AND V. MEDAL

I am directed to forward the accompanying

which has been awarded you in respect of your services with

Please complete receipt and return card. No stamp is required.

Regtl. No. 198843

Rank

Signature John A. Kutt

Unit

Date 26/1/22 192

i/c Records.

W2595/PP4071 2000m 11/20v 345 G & S 663

THE DAY'S DIET.

Balance

Cost of Purchases.

Rate. £ s. d.

To be expended Expended

- Tea
- Sugar
- Salt
- Bacon
- Suet
- Dripping
- Currants
- Rolled Oats
- Liver
- Potatoes
- Greens in Season
- Rice
- M. R. Veggies
- Onions
- Milk (qts.)
- Barley
- Beetroot
- Vinegar (qts.)
- Pepper
- Mustard
- Nutmegs
- Cheese
- Milk Powder
- Margarine

THE TOTAL DAY'S EXPENDITURE

0345

Army Form B. 5112.

(c) Crown Copyri

0348

Casualty Form - Active Service.

Regimental Number 198843

ACTUAL AGE CLAIMED ON 19/18 36 7/8

BIRTH CERT. SHOWS DATE OF BIRTH AS 2/15/18

UNFIT FOR SERVICE
PARTIALLY TRAINED

Regiment or Corps

Rank Private Surname Stutt Christian Name John Bartlett

Religion B of E Age on Enlistment 34 years 16 months

Enlisted (a) 30.11.15 Terms of Service (a) Duration of War Service reckons from (a) 4.3.18

Date of promotion to present rank Date of appointment to lance rank 30.11.15

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and Rate 1/1

Occupation Chemist & Druggist (Genl) M Signature of Officer [Signature]

DEPOT R.G.A.
NO. 1
35
Cardiff

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
	<u>R.G.A. No 1 Depot</u>	<u>Mob. and posted</u>	<u>Ireland</u>	<u>18.2.18</u>	<u>R. Shannon Capt</u> <u>R.G.A.</u>
					<u>For COMDG No 1 DEP R.G.A.</u>
		<u>Posted Sig Coy Bpt Lochend</u>	<u>Dunfermline</u>	<u>20.3.18</u>	<u>R. Shannon Capt</u>
	<u>% Scottish 2 Co</u>	<u>Posted to BE 7</u>	<u>France</u>	<u>10.10.18</u>	<u>R.G.A.</u>
		<u>Disembarked</u>	<u>do</u>	<u>18.10.18</u>	<u>COMDG No 1 DEP. R.G.A.</u>
<u>26.10.18</u>	<u>G/C 126 S.B.</u>	<u>Posted from Base</u>	<u>Ireland</u>	<u>22.10.18</u>	<u>R 213 25.10</u>
<u>30.11.18</u>	<u>- - -</u>	<u>Do 100 M Workshops</u>		<u>23.11.18</u>	<u>R-213</u>
<u>14.12.18</u>	<u>- - -</u>	<u>Rejoined unit</u>		<u>4.12.18</u>	<u>R-213</u>
		<u>Do Childers D.C.</u>		<u>13.2.19</u>	<u>29</u>

Next of kin Ellen Stutt
35 Pentwyn Street
Cardiff
Married 14/4/11
Children: 2 Boys
1 Girl

Next of Kin (Wife)
Mrs Ellen Stutt, 35 Pentwyn Street, Cardiff

(c) Crow

0347

not, will be given an opportunity of making a statement in writing. If he wishes to put forward any claim in respect of a disability incurred in the Service he must sign the Statement hereunder to the satisfaction of an Officer of the Unit with which he is serving, who will witness his Signature. Whether a Claim is made or not, this Form will be sent by the Unit Commander, in the case of every Officer, direct to the Secretary of War Office; and in the case of every Soldier, to the Record Office.

Unit..... 126. Siege Bty.
 Regiment or Corps..... R.F.C.
 Regtl. No. 1988430 Rank.....
 Surname..... MUTT.
 (Block letters.)
 Christian Names { JOHN ROBERT MUTT
 in full { W.S.
 Permanent address..... 35 Pentonville Rd.
Charlton
 Age last birthday..... 37
 First joined } (Date)..... at (Place).....
 for duty }

If the Officer or Soldier has previously been discharged from the Army, Royal Navy or the Royal Air Force, he will state—
 (a) Former Regiments or Corps with Regimental Numbers—
 (b) Dates of discharge.....
 (c) Causes of discharge.....
 (d) Particulars of Pension or Gratuity received (if any)—

TO BE CANCELLED IF A CLAIM IS MADE.
 I do not claim to be suffering from a disability due to my military service.
 Place of Examination.....
 Date.....
 Signature of Officer or Soldier.....
 Signature of Officer witnessing.....

Before the claimant answers questions 1—8 the following should be read by, or to, him:—
 “Your statement will be checked by Official Records. In answering question 2, any special matters which in your opinion caused or aggravated any unfitness from which you are suffering, must be clearly stated.”
 The claimant will answer the questions in his own words and after completing the form will sign it. The Officer will witness the signature. If the claimant cannot write, he will affix his mark, such act being witnessed.

THIS PORTION IS NOT TO BE COMPLETED IF A CLAIM IS NOT MADE.

1. (a) In what countries have you served during this war and for what periods? (b) In what capacity?	
2. If you are suffering from any disease, wound or injury, state what it is, the date upon which it started, and what in your opinion was the cause of it. (If more space is required a sheet of foolscap should be used and attached firmly to this form).	
3. Give the names of any Hospitals in which you have been treated for the above disabilities during this war.	
4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it before joining the Army? If so, give details and dates.	
5. Give the names and addresses (if you know them) of any Hospitals you were in or Doctors who attended you before you joined the Army.	
6. Give the name of your National Health Approved Society and, if possible, your membership number.	

Group
 your trade or calling
 before joining the
 Army?

to be assessed from A.B. 439,
 B. 44 or A.F.B. 103).

The above statement has been read over to me, and I agree to it and have nothing to add to it.

Place of Examination..... Signed.....(Claimant).

Date..... Signed.....(Witness).

OPINION OF THE EXAMINING MEDICAL OFFICER.

(i) Clear and definite answers to the following questions are to be carefully filled in by the Examining Medical Officer, as it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the applicant's claim to pension.

Expressions such as "may," "might," "possibly," &c., should be avoided.

(i) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war, (b) due to causes not connected with the present war, viz.: (1) previous active service, (2) climatic diseases in pre-war service, (3) ordinary military service before the war. It is therefore essential when assigning the causes of a disability to differentiate between them.

(iii) When there is more than one disability the replies will distinguish between them.

9. Give Diagnosis and particulars of:—

(a) Each disability claimed or discovered.

(b) The present condition thereof.

THIS PORTION IS NOT TO BE COMPLETED IF A CLAIM IS NOT MADE.

10. State whether each disability is:—	(i) Attributable to	or (ii) Aggravated
(a) Service during the present war.		
(b) Previous active service.		
(c) Climate in pre-war service.		
(d) Ordinary military service before the war.		
(e) Serious negligence or misconduct on the part of the claimant.		
Give details:—		

11. (a) Is each disability in a final stationary condition?
 (b) If not is re-examination before the expiration of the period of twelve months specially advised?

12. (a) What is the degree of disablement at which in your opinion he should be assessed at present?
 (Degrees of disablement should be expressed in words in the following percentages: 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil).
 (b) In case of aggravation, what in your opinion was the degree of disablement which existed before joining the Army?

Examining Medical Officer's Signature } *H. R. King M.C. USA* Rank *Capt*

Unit to which attached. *7th Bde RGA*

Place of Examination..... Date.....

Inside Sheet

no. 98843

name. Luth. J. B.

Ob. Dis. Unit.

Forwards a.f. 2.11.

Chiselton. 15.2.19

Office

a.f. 2.21 from 20.3.19

C!

IF FOUND, please drop this Certificate in a Post Office letter box.

Army

NOTICE.—"This document is Government property. It is no security whatever for debt, and any Person being in possession of it, either as a pledge or security for debt, or without lawful authority or excuse, is liable under Section 156 (9) of the Army Act to a fine of twenty pounds (£20) or imprisonment for six months, or to both fine and imprisonment."

PROTECTION CERTIFICATE AND CERTIFICATE OF IDENTITY (SOLDIER NOT REMAINING WITH THE COLOURS).

Dispersal Unit Stamp and date of dispersal.

Surname HUTT
(Block letters)

Christian Names John Russell

Regtl. No. 1988413 Rank Private Record Office Chesham

Unit 126th Coy Buffs Regt. or Corps 1st Buffs Pay Office Chesham

I have received an advance of £2 35 † Address for Pay 35 Bury Road, Bury, Lancs.

(Signature of Soldier) John R. Hutt

The above-named soldier is granted 28 days' furlough from the date stamped hereon pending (as far as can be ascertained) which will date from the last day of furlough after which date uniform will not be worn except upon occasions authorized by Army Orders.*

Theatre of War or Command France

Born in the Year 1901

Medical Category General

Place of rejoining in case of emergency France

Specialist Military Qualification None

* If for Final Demobilization insert 1.
Disembodiment insert 2.
Transfer to Reserve insert 3.

† As this is the address to which pay and discharge documents will be sent unless further notification is received, any change of address must be reported at once to the Record Office and the Pay Office as noted above, otherwise delay in settlement will occur.

R. W. Wade

This Certificate must be produced when applying for an Unemployed Sailor's and Soldier's Donation Policy or, if demanded, whenever applying for Unemployment benefit.

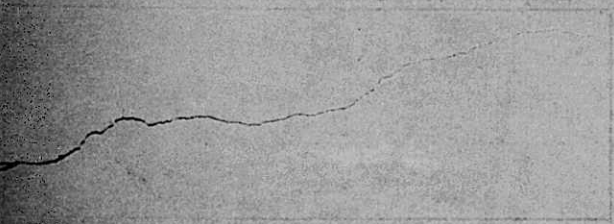
Date 15-2-1916 Office of Issue Chesham Policy issued No 16 021531

AB 5/1/16 (3)

NOTICE - This document is Government property. It is no longer valid authority of excuse is held under Section 158 (1) of the Army Act for a fine of twenty pounds (20) or imprisonment for six months or to both fine and imprisonment.

PROTECTION CERTIFICATE AND CERTIFICATE OF IDENTITY (SOLDIER NOT REMAINING WITH THE COLOURS)

Discharge Date and date of the year



Signature
(Block letters)

Christian Names

Rank

Regt. No.

Regt. or Corps

Unit

Address for

I have received an advance of £2

(Signature of Soldier)

The above named soldier is entitled to the following

from the date stamped below

as can be ascertained which will be the last day

of which after which

if you receive

if for this

in that

and

and

**R. G. A. RECORDS,
DOVER,
25 APR 1919
PARLIAMENTARY
INDEX BRANCH.**

This Certificate must be produced when applying for an Unemployment Allowance and Soldier's Donation Form, or if sent in lieu of the same for Unemployment Allowance.

Printed name

Office of Issue

Date

Residence *Warwick*
On *6* day of *July* 191*8*

Declared Age *36* years *0* days

Trade or Occupation *Chemist & Druggist*

Height *5* feet *8 3/4* inches. Weight *139* lbs.

Colour of Hair *Brown* Complexion *Fair*

Eyes *Grey*

Chest Measurement { Girth when fully expanded *35* inches. Range of expansion *2 1/2* inches.

Physical Development

Vaccination Marks { Arm, RIGHT | LEFT | Number *3*

When Vaccinated

Vision { R.E.—V = | With Glasses { R. | L.

Identification Marks, such as Tattoo, Moles, Scars, etc:—

Defects or Ailments:—

Venules both legs

Examined and found—

Fit for Grade { I. | II. | III. | IV.

(Strike out those which do not apply.)

Signature

Chairman of Medical Board.

Re-examined for posting at

On *1* day of *August* 191*8*

Enlisted { at | on *1* day of *July* 191*8*

	Corps	Regtl. No.
Joined on enlistment		
Transferred to		

Vaccination, for Field or Foreign engagement, or Issue of Surgical Appliances, Dental Treatment, etc.

Date	Brief description
<i>6/3/18</i>	<i>Category A</i>
<i>14.3.18</i>	<i>Do</i>
<i>13.3.18</i>	<i>Do</i>
<i>10.3.18</i>	<i>Vaccinated against</i>

DENTAL TREATMENT

Special Remarks:

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Became non-effective by on *1* day of *August* 191*8*
(Signature) *R. Shannon*
(Rank) *Adjutant*

(c) Crown

II. — Only for admissions to Hospital or to the Sick List in Hospital

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or extent of disease; course of treatment or of future use. In cases of syphilitic admissions, the subsequent progress, including admissions out of hospital, transfers, &c., will be given in the special syphilis form.
	Day	Month	Year	Day	Month	Year			

0355

Name Plut. John Sqn., Batty., } 176 Corps R.Q.A. Date of enlistment } 30.11.15 G.C. Badges }
 or Company }
 No. and date } Period not reckoning towards } Sheet No. One Signature O.C. }
 of last drunk } freedom from extra fine } Company, etc. }

Character
A. Shannon CAPTAIN, R.Q.A.
 for ADJUTANT No 1 DEPÔT, R.Q.A.

Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<u>22.8.18</u>	<u>Sig.</u>	<u>-</u>	<u>Alcohol taken leave from 12.M.N. 22.8.18.</u> <u>15.7.15.AM. 23.8.18</u>	<u>Capt. Rosa A.</u> <u>Boh Mac Donald.</u>	<u>2 days C.B.</u>	<u>23.8.18</u>	<u>Capt. R. J. Scott</u>	

Army Form B. 122

03

Wt. W.13058/M.1417. 500,000. 1/17. W. & Co., Ltd. (E804). Forms B/122/4.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded

REGIMENTAL CONDUCT REPORT.

Army Form B. 120.

Number of sheets
(in words)

One

Signature of C.O.
or Adjutant

R. H. Scott Captain

Asst. Comdt. Scottish Command R.G.A. Signalling Training Centre Regiment.

Royal Regiment of Artillery (R.G.A.)

843 Hutt J.B.

Attested 30. 11. 1915.

Joined 18. 2. 1918.

Cases of Drunkenness	OFFENCE	Names of Witnesses	PUNISHMENT awarded	Date of award, or of order dispersing with trial	By whom	Date of Commencement	Date of Expiration	REMARKS
			<u>4/10/18 Certified no entry</u>		<u>Capt.</u> <u>Asst. Comdt. Scottish Command R.G.A. Signalling Training Centre</u>			

and over

(c) Crow

0358

