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NAA: B884, V500322

Series number: B884

Control symbol: V500322

Barcode: 6237534

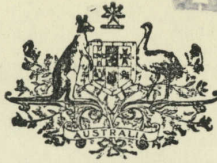
Number of pages: 8

ZWIERZYNSKI DAVID : Service Number - V500322 : Date of birth - Unknown : Place of birth - LODZ
POLAND : Place of enlistment - CAULFIELD VIC : Next of Kin - ZWIERZYNSKI CHI

ALIEN

A.A. Form Mob. 1
(Revised December, 1941)

AUSTRALIAN



MILITARY FORCES.

M.F.

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.

Army No. V500322
 Surname ZWIERYNSKI (BLOCK CAPITALS) Christian Names DAVID
 Unit
 Enlisted for war service at 14th Recruiting Area (Place)
VICTORIA (State) (Date)

A

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

1. What is your name?	1. Surname <u>ZWIERYNSKI</u> (BLOCK CAPITALS)
	Other names <u>DAVID</u>
2. Where were you born?	2. In or near the town of <u>Lodz</u>
	In the state or country of <u>Poland</u>
3. Are you a British Subject?	3. <u>No</u> <u>Polish</u>
4. What is your age and date of birth?	4. Age <u>18</u>
	Date of Birth <u>15.7.42</u>
5. (a) What is your normal trade or occupation? Grade if any?	5. (a) <u>Pelt Maker</u>
(b) Present occupation?	(b) <u>Single</u>
6. (a) Are you married, single or widower?	6. (a)
(b) If married state date of marriage?	(b)
7. (a) Have you had previous naval, military or Air Force service either in peace or war? If so, where and in what arm?	7. (a)
(b) What was the reason for your discharge?	(b)
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>Chi. Zwierzynski</u>
	Address <u>Flat 3, 17 Charnwood Ave</u> <u>St Albans</u>
	Relationship <u>Father</u>
9. What is your permanent address?	9. <u>No abode</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>Jewish</u>
11. Which, if any, of the following Educational Qualifications do you possess?	1. Certificate for entry to Secondary School.....
	2. Intermediate.....
	3. Leaving.....
	4. Leaving Honours.....
	5. Technical.....
	6. University Degree.....
	7. Other Diplomas.....
12. Have you ever been convicted by a Civil Court?	12. (a)
If so—(a) What Court?	(b)
(b) for what offence?	

*Podova Lhvir
110 Mendon Lane*

I, David Zwierzynski do solemnly declare that the above answers made by me to the above questions are true.

Witnessed by A Hughes Lieut David Zwierzynski
 (Signature of Attesting or Witnessing Officer.) 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 Acts.

B

MEDICAL EXAMINATION

I have made full and careful examination of the abovenamed person in accordance with the instructions contained in the Standing Orders for Australian Army Medical Services. In my opinion he is—*

- 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 †

Fit I
A! Well tomorrow 8/8/42
Atkinson

Place 14th Recruiting Area Date 24/5/42

Signature of Examining Medical Officer [Signature]

* Classifications which are inapplicable to be struck out.

† Reasons for unfitness to be stated.

C

OATH OF ENLISTMENT ‡

For persons enlisted or called upon under Part III or Part IV of the Defence Act, and not being members of the Active Citizen Military Forces to serve in the Citizen Forces in time of war. Not compulsory for serving members of the Forces or those allotted to the Citizen Forces under Part XII of the Act, but unless in any case an objection is raised, the oath should be administered to them as part of the ceremony of attestation.

I, _____ swear that I will well and truly serve our Sovereign Lord, the King, in the Citizen Military Forces of the Commonwealth of Australia for the duration of the present time of war, or until sooner lawfully discharged, dismissed, or removed, and that I will resist His Majesty's enemies and cause His Majesty's peace to be kept and maintained, and that I will in all matters appertaining to my service faithfully discharge my duty according to law.

I agree to serve as above
So Help Me God!

Signature of Person Enlisted Dorrid Jureczynski

Subscribed at Coutfield in the State of Vict

this Eighth day of August 1942

Before me—

Signature of Attesting Officer A Hughes Lewis

‡ Persons who object to take an oath may make an affirmation in accordance with the Third Schedule of the Defence Act. In such case the above form will be amended accordingly and initialled by the Attesting Officer.



A 102 RECEIVED.....
 COMPLETED 12/13/47
 A.F. 250 Completed

B. Red A.F. B.103-1 (Adapted)
 Army No. **V.500322.**

SERVICE AND CASUALTY FORM

Unit.....
 Surname **ZWIERYZYNSKI.**
 (Block Capitals)

Rank.....
 (On Enlistment)
 Christian Names **David.**

Date of Enlistment **8/8/42.**
 Place **CAULFIELD.**
 Date and Place of Birth **15/7/42. POLAND.**
 Trade or Occupation **Belt Maker.**
 Religion **Jewish.**

Marital Condition **Single.**
 Next of Kin **C. Zwierzynski,**
 Address of Next of Kin **Flat. 3 17 Charwood Cres.**
ST KIILDA.
 Relationship **Father.**

Identification—Colour of Hair..... Eyes.....
 Distinctive Marks.....

Medical Classification—
 Class I.
 Class II.
 (On Enlistment)

REPORT		Date	From whom received	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c., Date of disembarkation and embarkation from a theatre of war (including furlough, &c.).	Date of Casualty	Place of Casualty	Authority W.3011, B.2069, or other Document	Initials of Officer Certifying Correctness of Entries
Date	From whom received							
10/8/42.	Rec. Camp.			TAKEN ON STRENGTH. R/O 108/42/101.	8/8/42.	CAULFIELD.	MOB. 2	<i>Pradew</i>
	"			<i>Released to Area. Mid unfiled.</i>	18.8.42		<i>28/7/42</i>	<i>W.3011</i>
	"			<i>authy Med. Bd.</i>				<i>W.3011</i>
				<i>for Officer in Charge. District Command. Soudwell Woodhouse, Mid. W. D.</i>				

Discharged A.R.M.O. 253 A. R184 (D 5)

Dec 14 6

DATE 18.8.42

FULL TIME DUTY
 8.8.42.

147

NOTHING TO BE WRITTEN IN THIS SPACE.

Previously referred to
PROCEEDINGS FOR DISCHARGE.
General Detail Serial

Abraham
 A.A.F. A. 102.
 (Introduced July, 1945)

PART A—Compiled by Unit:

Discharge Authority <i>026350 of 4/24/47</i>	AMR & O 253A(1) () <i>D</i>
Reason for Discharge	<i>V</i>
State in which discharge desired—Normally State in which member's home is situated.	

Unit *91010* Army No. *V500332* Rank *Pfc*

Other Names *David* Surname *ZWIERYNSKI*
 (Block Letters)

PART B—Personal details—compiled by Unit:

1. Home address *Flat 3, 176 Hammond Crescent, Kilda*
 Date commenced F.T.D. *8/18/42* Date of Birth *15/7/13*
 State whether:—
 Married, single, divorced, widow *S*
 or widower *S* Under 16 yrs. *S* 16 yrs. & over *S*

2. Present Description of Soldier:—
 Age *34* yrs. *4* months
 Height *5'10"* ins. Eyes *Hazel*
 Complexion *Dark* Hair *Dark*
 Marks/Scars *None of small size*

Trade Group in which employed _____
 3. Operational Service:—
 (a) Overseas area of service Embarked from Aust. */ / /* Disembarked in Aust. */ / /*
 (b) N.T. (North of Par. 14½° Sth.) or Torres St. Is.:—
 At _____ From _____ To _____
 Part B compiled by:—
 Date */ /* (Officer's signature and rank)

PART D—Compiled by Ech. & Rec.:

5. Details for Certificate of Discharge No. *591764*
 Unit (for discharge purposes) *91010*
 Served on continuous Full Time War Service in the *6 C M F* from *8/18/42* to *18/8/42*
 for a Total Effective Period* of *11* days, which included
 Active Service in Australia *11* days and
 Active Service O/S Australia *-* days
 Decorations and Awards† during that Service:

War Badge _____ Entered _____
 Class and No. _____ Badge Register _____
 Discharged from the _____ and discharge confirmed vide Schedule No. *Creagh* to take effect on and from *8/18/42*
 Place *Chester* Signature *David Zwierynski*
 Date */ /* Officer i/c *334642* Ech. and Rec. _____
 6. Details compiled by _____ checked by _____
 A.A.F. A.101 written 'by' _____
 Entered Discharge Certificate Register _____
 A.A.F. A.131 obtained by _____ Entered "Wills" Register _____

PART E—To be signed by Soldier on discharge:

7. I hereby acknowledge receipt of:
 (a) Certificate of Discharge No. *591764*
 (b) Army Form A.131 purporting to contain my Will.
 (c) War Badge No. _____
 Date _____ Signature of Soldier *A. R. POST*
 Place _____ Signature of Witness *APR 11 1947*

* "Effective Period" means the period of service, less any consecutive 21 days or more for which the soldier was not entitled to pay.
 † Australia means the mainland of Australia and Tasmania.
 ‡ Does not include War Medals.

DETERMINATION OF DEMOBILIZATION PRIORITY

DEMOB. INDICATOR	

A. ARMY NO. **RANK** **UNIT**

SURNAME

OTHER NAMES

Date of Commencement of Full War Time War Service / / Age at commencement of Full Time War Service years.

B. ASSESSMENT OF NORMAL PRIORITY.

- | | | | | |
|---|----------------|---------------|-------|--------|
| 1. Length of Service in months | X 2 (males) or | X 1 (females) | | Points |
| 2. Age at enlistment in years | X 2 (males) or | X 3 (females) | | |
| 3. Dependency Status (males only)—one point for each month of Service | | | | |
| Total (Normal Priority) | | | | |
4. Dependency Status (females only)—insert "A" }
 5. Marriage (females only) —insert "B" }
 6. Records and assessment checked.
- Class

Date Signature of Officer.

7. I desire discharge in the State of
8. I intend to apply—
 * (i) For service in the Permanent Military Forces.
 * (ii) For service throughout the Demob. period.
- Date Signature of Member.

C. DECISION OF COMMANDING OFFICER OR REPRESENTATIVE OF SERVICE ON FORMATION H.Q.†

*Not to be retained
 *To be retained—(see instructions).

.....

D. ALLOTMENT OF SPECIAL PRIORITY.

Reason and Authority

Date Signature of Commanding Officer or Representative of Service.

INSTRUCTIONS.

- LENGTH OF SERVICE.**—Months of service calculated from the date of commencement of full-time service to the date notified by L.H.Q.
- AGE AT ENLISTMENT.**—Completed years of age at date of commencement of full-time war service.
- DEPENDANCY STATUS.**—Accorded only to members on whose behalf an allowance is being paid by the Army for one or more dependants.
- MARRIAGE.**—Claims by female members for discharge on account of marriage will not be recognised if such marriage has not been reported, and in consequence has not been entered in their personal records.
- †PART C.—REASONS FOR RETENTION**—to be inserted as appropriate
- (i) Member of Permanent Military Forces;
 - (ii) Applicant for Permanent Military Forces.
 - (iii) Service throughout Demob. period—voluntary.
 - (iv) Services essential—Retained until
- *Strike out where appropriate
- Authority

PARTICULARS OF ARTICLE

Registered Article (1)
Envoi recommandé Cert

Posted at St. Kilda

Déposé au bureau de poste d
On APR 11 1947 No. 45043

Le Sous le No. Records

Sent by
Expédié par

Addressed to Mr. D. ZWIERYNSKI,
Adressé à ST. KILDA.

1) Insert "Letter," "Printed Matter,"
"Parcel," etc., as the case may be. If
an unregistered parcel, strike out "Re-
gistered" and insert "Ordinary."



Particulars of the
article and the name
and address on right,
are to be inserted by
the sender.

Form R.15 (C.5)

Ex V500322

ON POSTAL SERVICE
SERVICE DES POSTES

SENDER'S NAME AND ADDRESS:-

3 Mil Dist. Echelon and Records

A Block, No. 1 Area

Albert Park Barracks

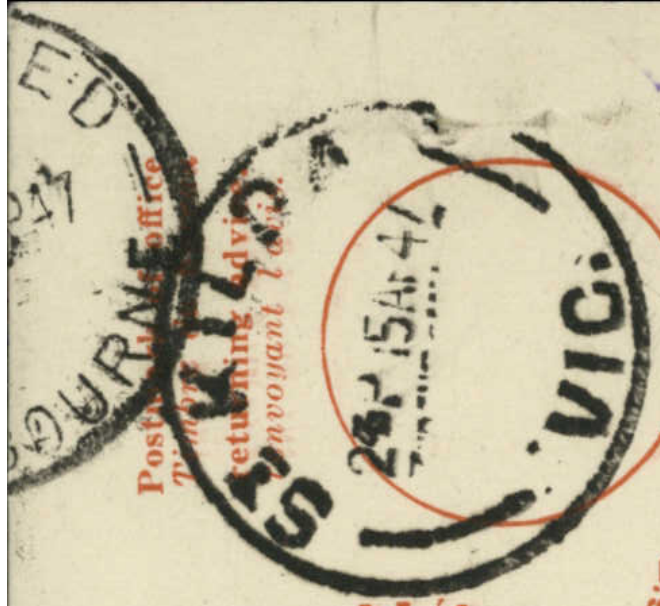
Melbourne

(Street and number or P.O. Box No.)

(City or town)

(State)

AUSTRALIA



Post office
retourner avis
renvoyant l'avis.

ADVICE OF DELIVERY
(AVIS DE RECEPTION)

FOR USE AT OFFICES IN AUSTRALIA

15741
The undersigned acknowledges the receipt on
.....19.....47 of the article described
on the other side of this card.

X D Suezoshi
.....
W. G. O'Keefe
.....
(Signature of addressee)

.....
(Signature of officer by whom delivery is made)

To be forwarded to sender by first mail after delivery.

NOTE.—An A.R. article posted in the Commonwealth for delivery therein is delivered to the addressee only. In other countries, delivery is effected in accordance with their own regulations. In some countries, it is the practice for the A.R. card to be signed by an official at the delivering office and not by the addressee.

FOR USE ONLY AT OFFICES OUTSIDE AUSTRALIA

The undersigned states that the article described
Le soussigné déclare que l'envoi mentionné

on the other side was duly delivered on
d'autre part a été dûment livré le19.....

1)
(Signature of addressee)
(Signature du destinataire)

1)
(Signature of official at delivery office)
(Signature de l'agent du bureau destinataire)

1) This advice must be signed by the addressee, or, if the
Cet avis doit être signé par le destinataire, ou si les
regulations of the country of destination so provide, by
règlements du pays de destination le comportent, par
the official of the delivery office, and returned by the
l'agent du bureau destinataire et renvoyé par le
first mail to the sender.
premiere courrier directement à l'expéditeur.