

NAA: B883, VX66958

Series number: B883

Control symbol: VX66958

Barcode: 6122322

Number of pages: 12

Title: RETELL ARTHUR : Service Number - VX66958 : Date of birth - 22 Jan 1906 : Place of birth - ALBANY WA : Place of enlistment - CAULFIELD VIC : Next of Kin - ANDREW M

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1 N	MILITARY FORCES. A.A. Form A20. (Bevised April/1941.)
ATTESTAT	SERVICE IN AUSTRALIA OR ABROAD
11/2/058	the starter of an and the starter
	ther Names authur
Unit 7 American y left	
Enlisted for service at	4 DEC 1941
V C 1 0 17 1 19 (Stat	e)
A. Questions to be put to persons called out or	r presenting themselves for voluntary enlistment. 1. Surnamo RETELL
1. What is your name 1	Other namos arthur (alock capitals)
2. Where were you born 1	2. In or near the town of Alleman August
3. Are you a natural born or a naturalized British Subject 1 If } the latter, papers are to be produced	3. Are 35 10/12 years
4. What is your age and date of birth ? {	Date of Birth 22-1-1906
 What is your trade or occupation! Are you married, single or widower! O. S. 	6. Marned
7. Give details of previous Military Service 1942	OTHER MILITARY SERVICE
26 17/42/33/	No. Rank Unit UNIT .
8. If now serving, give particular	9. Name Murrel letelle
 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.) 	Address Winderney Address
is Hig Andrew (mardian of children) " James 50 William 24, 11 Hilda, 5. 4re Tas	Relationship 50 William 8*.
10. What is your religious denomination? (Answer optional.)	n. methodist
12. Have you ever been convicted by a civil court 1	12
	2. Intermediate
13. Have you any of the following Educational Qualifications? If	3. Leaving
	5. Technical
	7. Other Diplomas
ne to alove to alove the share true and that I am willing to ser	do solemnly declare that the above answers made by ve in the Australian Military Forces within or beyond the limits of
Witnessed by	Afletell.
(Signature of Attesting or Witnessing Office) * The person will be warned that should be give failed answers they	of their actions he will be liable to have apparting offer the prince det
B MEDICAL I certify he above-names purson to be fit for Class	
Moyae rain	(Signature)
7 Pol. Alun, Adadell	* ENLISTMENT †
Sovereign Lord, the King, in the Military Forces of the Com and twelve months thereafter or until sooner lawfully discharge	monwealth of Australia until the cessation of the present time of war
discharge my duty according to law.	ad, dismissed or removed, and that I will result the subject of faithfully and that I will in all matters appertaining to my service faithfully ap Ale God
Signature of Person Enlisted	forther Retell
Subscribed at _ Coulfield	in the state of 10.42
Before me Standard of Attaction Officer.	Third Schedule of the Distance Art. In such case the above form will be anonaled eccordinate
? Persons who object to take an oath may make an affirmation in accordance with the T and initialed	by the American Others
D.ms. (1,-0.497) By Authority: H. E. Da	w, Government Printer, Mollourne,



Signature of Officer Certifying Correctness of Entries 50 William St. Sr. Kilder Vie. 1944 por 1214 Identification - Colour of Hair Jan, Eyes Bland more and Distinctive Marketle & Toma & Anna & V X 66 958 Army Form B.103-1 (Adapted) (Deprinted Former, 1961) Army No. V.X. Stofes 1337 R.0. 22/22/337 Unit ALAM C. Engebrapot. Authority W.3011, B.2069, or other Document Surname RETELL 110211 14 1301 SERVICE AND CASUALTY FORM NGR/H CAULFIELD. Minds Next of Kin (Parts Murtall Retall, Place of Casualty mater WLfo. Marital Condition Marrolod 8/2/42 45.12 0. 6. 4 V 1-1044 2 4 . 9.0 14.01.6 24/0/42 Date of Casualty 86/1/42 Address of Next of Kin Relationship glecori of all causalties regarding promotions (acting, temporary, local or substantive), appointents), transform pointer, attachments, act, fortigures of pays, woulds, rectionals, appointents to and dama program. Happing, Causalty Casting Stations, Sc. Die of damateria at anon-ration from a theatre of war (including fortough, Sc.). Taken on strength A.I.F.Details legat. LIAVE WITHOUT PAY from to to to to er /preatment Arthur A 200 neg. ho229,15...Completed Leo. allaras a complet K from Carge 28 han ASHE to Ammin Albany, W.A. m. M. R. Cy. hom AS H6 Medical Classification-Class N. 8 Christian Names Cancore Town Hall, Melbournes (On Enlistment) 01 Plais Card ansi er milled Har MIL Methodist. 22/1/06 4/12/41 (festal From whom received . CQTIADO. C.S. W. June Rogin BOB (On Enlistment) Date of Enlistment Trade or Occupation. REPORT Place of Birth. UP-Date of Birth 10. 11.44 47 14/10/42 26/1/42 13.6 42 Date 20 .8. Place Religion 12.6. Rank NOTHING TO BE WRITTEN IN THIS SPACE. £.,

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(To be confiled by Recortion Camp and forwarded to Records orrise on somplation of discharge.) 1. Vic. L of C Authy. 6001. Dato 17.2.43 AIROO Provident NAME (In Sull) RETELL and NO. VX 66958 And Hope 21 2/12 Quet Inf Br as ut; 13, 1, 44 18 Fay and allowances in lieu of leave up to & including_ 31. 1. 44. 2. INDICAL INPUTCULARS OF DISCLARGE (to be compiled by examining M.O.) AGE 37 METCHT 6'1' EYES Brow Distinctive Marice CONFLEXION They I certify that the soldier named above, on date of Discharge DID/DID NCT cluim or reveal a disability caused or accurated by War. (Strive cut DID or DID HOF as required.) Where such disability was clrimed or revealed, the matter has been investigated by a Medical Deard. Med Board Date Malt 12 1.44 B. On x Ray Date 17. 12 43 (Signature of Manufaing M.O.) In cases where the disability has not been investigated Discharge will 5. REASON FOR DISCHARGE. MPR. Total publica of corvice towards completion of engagement 718 c includius:days Active Serv. Abroad 19 & in Aust. 560 Total Active Serv 639 Days Intended place of residence after Dischange, to which D/C may be posted 56 william Al ft Kilda PTAIN CLOTHES ISSUED YES OF 19: 4. UNIFORM RETURNED 10 13-1-44 sh leall DESPATCHED TO <u>STRATES</u>: 5. <u>CEPTIPICATE TO EX LAGNED BY SOLDIER ON DISCHARGE</u>: 5. <u>CEPTIPICATE TO EX LAGNED BY SOLDIER OF</u> present date, subject to the i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay, allowances and i hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I have received all my pay. I hereby acknowledge that I ha CAULTER SIGNATURE OF SOLLIER DATE 13.1.44 SIGNATURE OF WITHERS PLACE I have impartially inquired into all matters brought before me in accordance with regulations and hereby confirm the Discharge 6. CONFIRMATION OF DISCHARCE: TSI She there of the Apple of Confirming Officere) CAULFIELD PLACH DATE OF DISCHDARKLINION DATE OF ENBARKATION DIS FILITE, AND D. of D. (For Medical Ressons only)_ Omp met Gas Co - Valveman-13144555 CRICINAL AREA 13144 DESTINATION WEEK: 4617 NAA: B883, VX66958

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Name RETELL,	arthur	Army No	x.				
	Unit	Paybook No					
If so, state Army No 2. Are you a married man? 3. Is your wife alive?	ARE YOU MAKING AN ALLON	OK NO.					
If so, what is her name and addr 4. State particulars of children—	ess ?						
NAME OF CHILD	ADDRESS	AGE	DAT	E OF BIR Month	TH Year		
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2/12 Aust. Inf. Bn. 270 1186 Records Office, Craig's Buildings, Elizabeth St., WELBOURNE. C.1. HQ.PR. HH/PY. 26821 19 Apr 43. 64A/4/31 RECEIVED 14 MAY 1943 C.O., 2/12 Aust. Inf. Bn., VIC. L OF CAREA AUSTRALIA. RECORDS A.A.FORM F.200. Herewith A.A.F.'s F.200. for the undermontioned personnel discharged from Hospital :--VX.66958. Sgt. RETELL A. VX.73292. Pte. HOUSE R. Please receipt duplicate copy and return to this Office. 2. Alahdia A Officer 1/c Records. 2. Receipt for AAF 200's is acknowledged herewith. hu her. Auphenson EAPES Adjt 2/12 Aust Inf Bn. Ple all isto B National Archives of Australia NAA: B883, VX66958

V×66959 Neter AUSTRALIAN MILITARY FORCES PRO-FORMA (C). This form to be signed and Returned IMMEDIATELY to :- " District Records Office, Vic. L. of C. Area. 2RI Lonsdale St., MELBOURNE. <u>C.1</u>. RECEIVED from the Officer in Charge, District Records Office, Vic. Lines of Communication Area. Returned from Active Service Badge Numbered 245555 2.3. IAN 1944 Date 1 Signature National Archives of Australia NAA: B883, VX66958

Officer in Charge, Records Office, <u>Vic. L. of C.Aren</u> I hereby acknowledge receipt of AAF. A.131 (Will Form) completed by me whilst a member of the A.I.F. VX 06958 Actual 18 DEC 1943 Signature. • Signature. National Archives of Australia NAA: B883, VX66958

