

NAA: B883, VX24926

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Title: HEINTZ FREDERICK JOHN: Service Number - VX24926: Date of birth - 22 Jul 1913: Place of

birth - CARLTON VIC: Place of enlistment - CAULFIELD VIC: Next of Kin - HEINTZ ANNIE

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M.F.

## ATTESTATION FORM

FOR SPECIAL FORCES RAISED FOR SERVICE IN AUSTRALIA OR ABROAD

Arr	ny No. 34926
Sur	name HEINTZ Other Names Fredrick John.
In	· Infantry
En1	isted for service at (Place)
-724	al': i :
	Victoria (State) 3, 6.1940 (Date)
	A
	Questions to be put to persons called out or presenting themselves for voluntary enlistment.*
1.	What is your name?   [1. Surname   HEINTZ (BLOCK LETTERS)]  Other names Predrich John.
2.	Where were you born?   [ 2. In or near the town of Carlton! in the state or country of Victoria
	Are you a natural born or a naturalized British ?
	Subject? If the latter, papers are to be produced
4	What is your age and date of birth?  { 4. Age 26 years. 11 works.  Date of Birth 22.7.1913.
7.	What is your age and date of birth?  Age  Date of Birth  22.7.1913.
5.	What is your trade or occupation? 5. Book bleeker
6.	Are you married, single or widower? 6. Massied
7.	Have you previously served on active service? If so, ] _ 7
	where and in what arm?
0	8. Name W. annie Mavis Heint
8.	Who is your actual next of kin? (Order of relation-ship:—wife, eldest son, eldest daughter, father,
	ship:—wife, eldest son, eldest daughter, father, mother, eldest brother, eldest sister, eldest half-brother, eldest half-sister)  **Tutzgoy N.6**  **W.1.**
	Relationship Wife
0	What is your some office of the state of the
9.	What is your permanent address? { July 104 N.6
10.	What is your religious denomination? (This question need not be answered if the man has a con-
	scientious objection to doing so)
	31. Frederick John Heinte de colonely delay the sta
boy	do solemnly declare that the re answers made by me to the above questions are true and that I am willing to serve in the Australian Military
	es within or beyond the limits of the Commonwealth.
Wit.	ressed by Heinty
	(Signature of Attesting or Witnessing Officer)  Signature.
	*The person will be warned that should be give false answers to any of these questions he will be liable to heavy penalties under
	the Defence Act.
-	onal Archives of Australia

Herrif. 3

## 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—\*

	Class	

2. Temporarily unfit for Class It

3. Unfit for military service +....

Place...

Mell. Townstall.

Signature of Examining Medical Officer.

\*Classifications which are inapplicable to be struck out.

Date 3.6.40

Mireso

†Reasons for unfitness to be stated

C

## OATH OF ENLISTMENT #

serve our Sovereign Lord, the King, in the Military Forces of the Commonwealth of Australia until the cessation of the present time of war and twelve months thereafter 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.

So Welp Me God.

Signature of Person Enlisted J. Heinto

Subscribed at Caulfula

Subscribed at Cauff

day of.

Je

.19.....

Before me-

Signature of Attesting Officer...

‡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 initialed by the Attesting Officer.



DECEASED

DATE 20.2-42

PLACE Quebonia

NATURE OF DEATH Presumed to

for Officer in Charge

Victoria Echap and Respons

Printed by W. A. Hamer Pty. Ltd., 205-217 Peel Street, North Melbourne, N.1

National Archives of Australia

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To the Officer-in-Charge, Victoria Echelon and Records, 281 Lonsdale Street, MELBOURNE, C.1. I, the undersigned, hereby apply for the issue of Certificate's of Death in respect of the death on War Service of :-Army No. YX24926 Rank & Unit The Certificate/s is required for the following purpose/s. Purpose such as Name of, Society, Bank, Lodge, Probate, etc., should be stated Dated the 194 Signature Address Relationship Note: Death Certificates are issued only for Legal and other necessary purposes. The purpose, or purposes, for which a Certificate is required must be stated where provided above.

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