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Title: WALLIS ARTHUR : Service Number - W22026 : Date of birth - 12 Sep 1902 : Place of birth - BIRMINGHAM ENGLAND : Place of enlistment - KATANNING WA : Next of Kin - WALLIS JAMES

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AUSTRALIAN



MILITARY FORCES

MICROFILM

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, or when voluntarily enlisted.

Army No. W22026

Surname WALLIS (BLOCK CAPITALS) Christian Names Arthur

Unit 19th Cav Bn

Enlisted for war service at KATANNING (Place)

West Aust. (State) 29 DEC 1941 (Date)

A

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

1. What is your name? ... { 1. Surname WALLIS (BLOCK LETTERS)
Other names Arthur
2. Where were you born? ... { 2. In or near the town of Birmingham
in the state or country of England
3. Are you a British Subject? ... { 3. Yes
4. What is your age and date of birth? ... { 4. Age 39 yrs 3 months
Date of Birth 12.9.1902
5. What is your trade or occupation? ... { 5. Farmer
6. Are you married, single or widower? ... { 6. Single
7. Have you previously served on active service? If so, where and in what arm? ... { 7. No
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 James Henry WALLIS
Address Warren Road
Relationship Father
9. What is your permanent address? ... { 9. KATANNING
10. What is your religious denomination? (This question need not be answered if the man has a conscientious objection to doing so) ... { 10. C of E

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

Witnessed by M. H. ... Capt (Signature of Attesting or Witnessing Officer) A. Wallis (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 Act.

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~~ †

Place KATANNING Date 29/12/41

Signature of Examining Medical Officer E. Campbell Pope

* Classifications which are inapplicable to be struck out. † Reasons for unfitness to be stated.

C
OATH OF ENLISTMENT †

For persons voluntarily enlisted or called upon under Part III. or Part IV. of the Defence Act 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, Arthur Wallis swear that I will well and truly serve our Sovereign Lord, the King, in the Military Forces of the Commonwealth of Australia until the cessation 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.

So help Me God!

Signature of Person Enlisted A. Wallis

Subscribed at KATANNING in the State of West Australia
this twentieth day of December 19 41

Before me—

Signature of Attesting Officer Mr. Hibbe. Capt.

† 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.



D.3419/4.39.—C.4778.—100M.

T. Rider, Acting Govt. Printer, Melb.



SERVICE AND CASUALTY FORM

Rank *Pl.* (On Enlistment) Christian Names *Arthur* Surname *WALLIS* (Rifle Captains)
 Unit _____

Date of Enlistment *29.12.41* Marital Condition *Single*
 Place *Katanning* Next of Kin *James Henry Wallis*
 Date and Place of Birth *12/9/02 Birmingham Eng* Address of Next of Kin _____
 Trade or Occupation *Seaman* Relationship *Father*
 Religion *C of F*

Medical Classification—Class I. (On Enlistment) _____ Colour of Hair *Brown* Eyes *Blue*
 Distinctive Marks *Scar Rhina* _____

NOTHING TO BE WRITTEN IN THIS SPACE

Date	REPORT		Date of Casualty	Place of Casualty	Authority of Officer Certifying Correctness of Entries	Initials of Officer Certifying Correctness of Entries
	From whom received	Record of all casualties regarding promotions (acting, temporary, local or substantive), discharge, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.).				
<i>7. Feb. 42</i>	<i>19 G. H. B.</i>	<i>T.O.S. & Called up for F.T.O.</i>	<i>3. 2. 42</i>	<i>Swanton</i>	<i>R. 8/180</i>	<i>P GREEN</i>
<i>21. 3. 42</i>	<i>Do</i>	<i>Special leave from 2359 18/3 to 2359 23/3/42</i>	<i>18. 3. 42</i>	<i>Swanton</i>	<i>60/3225</i>	<i>✓</i>
<i>28. 3. 42</i>	<i>Do</i>	<i>Returned Unit m/f on special leave</i>	<i>23. 3. 42</i>	<i>Do</i>	<i>60/3225</i>	<i>✓</i>
<i>6. 6. 42</i>	<i>Do</i>	<i>Spc leave wife payor sub. 2359 21/5 to 21/6/42</i>	<i>3. 5. 42</i>	<i>Swanton</i>	<i>60/3225</i>	<i>✓</i>
<i>27. 6. 42</i>	<i>Do</i>	<i>Returned Unit m/f on special leave</i>	<i>21. 6. 42</i>	<i>Do</i>	<i>60/3225</i>	<i>✓</i>
<i>13. 9. 42</i>	<i>Do</i>	<i>Transferred to 3rd Comp for 4th Coy. 24/8/42</i>	<i>24. 8. 42</i>	<i>Do</i>	<i>60/3225</i>	<i>CH</i>
<i>29. 8. 42</i>	<i>3rd Comp for 4th Coy.</i>	<i>Transferred in 19 G. H. B. 29/8/42</i>	<i>28. 8. 42</i>	<i>5 MID</i>	<i>60/3225</i>	<i>CH</i>
<i>12. 9. 42</i>	<i>Do</i>	<i>Decrease m/f to leave wife pay. 2359 12/9/42</i>	<i>12. 9. 42</i>	<i>Do</i>	<i>430/11/42</i>	<i>478</i>
<i>17. 10. 42</i>	<i>Do</i>	<i>Comr gds 0001 has 6/338</i>	<i>9. 10. 42</i>	<i>Do</i>	<i>430/11/42</i>	<i>478</i>
<i>21. 10. 42</i>	<i>Do</i>	<i>Decrease R/O on leave 2359 Sp "X" leave 9. 10. 42</i>	<i>9. 10. 42</i>	<i>Do</i>	<i>430/11/42</i>	<i>478</i>
<i>21. 10. 42</i>	<i>Do</i>	<i>Decrease m/f leave wife pay & sub. from 0001 has 28/10/42 to 2359 has 24/10/42</i>	<i>16. 11. 42</i>	<i>Do</i>	<i>430/11/42</i>	<i>478</i>
		<i>Trans "X" not</i>				

REPORT		Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, etc., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty clearing, furlough, etc., or disembarkation and embarkation from a theatre of war (including furlough, &c.).	Date of Casualty	Place of Casualty	Authority W 3011, E 2089, or other Document	Initials of Officer Certifying Correctness of Entries
Date	From whom received					
28. 11. 42	1st Ship Coy	Increased pay from leave w/o paye. See 56/27. 1. 43	27. 1. 43	5 MD	15/11	LJB
9. 1. 43	do	Detached for duty to BSD	4. 1. 43	do	21. 6. 43	EC
6. 2. 43	do	Rejoined unit from BSD.	5. 2. 43	do	- 6/43	
15 APR 1943	/	S'DETO 37 AUST COY ASC	15 APR 1943		" 14/3	
15 APR 1943	37 Coy	S'IN FROM 3 A C I SGT COY.	15 APR 1943		" 14/3	
14. 5. 43		S/Dec for 9 DD for Release	14. 5. 43		" 14/3	
19-5-43	Leumont.	Trans to Area. Ess - Service. 668. 194/5/1896.	14-5-43	Leumont	16/5/43	
27/ 1/ 44	MRD	DISCHARGED. AMBROSE. 75/2/368	14/5/43	H.A.	10-2-598/43	
27/ 1/ 44	Retrah	DISCHARGED. Di. Port 75581	1/43			

NOTHING TO BE WRITTEN IN THIS SPACE.

H. BURROWES, Major

Officer in Charge, District Records Office, Eastern Command.

a.w. 400m 7/42

WA L OF C. AREA RECORDS OFFICE
BOX R. 1246 G.P.O. PERTH

Date 4 July 1944

ACKNOWLEDGEMENT RECEIPT
"DISCHARGE & WILL"

I, NO W 22026 RANK DR NAME WALLIS A.

LATE 37 Coy AASC Herewith acknowledge receipt of:--

A.A.F. A101 - Certificate of Discharge
Dated 4 July 1944 75581

and A.A.F. A131 - Envelope purporting to
contain my Will 22.6.44
dated

SIGNATURE C. A. Wallis

Stamped addressed Envelope is
enclosed herewith for return of
this acknowledgment receipt to
DRO W.A. L. OF C. AREA

Charles Lamb Major
Officer in Charge Records
W.A. L. OF C. AREA.

PARTICULARS OF ARTICLE

Registered Article (1)

Envoi recommandé

Posted at *Perth*

Depos au bureau de poste d *3961*

On *July 19 44* No. *3961*

Le *Perth* Sous le No.

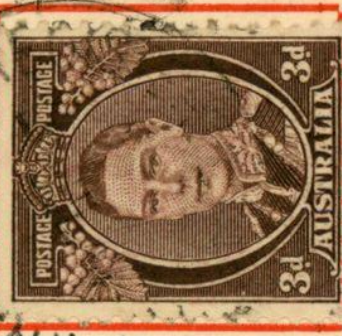
Sent by *Perth Records*

Expédie par *Mr A. Dallas*

Addressed to

Adresse à *Perth*

1) Insert "Letter," "Printed Matter," "Parcel," etc., as the case may be. If an unregistered parcel, strike out "Registered," 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) *W22026* Postmark of office
Timbre du bureau

returning advice.
renvoyant l'avis



ON POSTAL SERVICE
SERVICE DES POSTES

SENDER'S NAME AND ADDRESS:

W. Aust

Records Office,

M. **Box P.1246 G.P.O.**

PERTH.

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

(City or town)

(State)

AUSTRALIA

ADVICE ON DELIVERY

(AVIS DE RECEPTION)

FOR USE AT OFFICES IN AUSTRALIA

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

W. Wallis
W. Wallis

(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 soussigne declare que l'envoi mentionne
on the other side was duly delivered on.....19.....
d'autre part a ete dument livre le

1).....

(Signature of Addressee)
(Signature du destinataire)

1).....

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

1) This advice must be signed by the addressee, or, if the
Cet avis doit etre signe par de destinataire, ou si les
regulations of the country of destination so provide, by
reglements du pays de destinataire le comportent, par
the official of the delivery office, and returned by the
l'ayent du bureau destinataire et renvoye par le
first mail to the sender.

premier courrier directement a l'expediteur.

45903-5-43