



1021st (RUSSIAN)  
LABOUR COMPANY  
No. 20/3/19.  
On Demobilization

**STATEMENT AS TO DISABILITY.**

(This form is not applicable to Officers and Soldiers in Hospital or on leave therefrom who will be brought before a Medical Board).

On Demobilization every Officer and Soldier, whether remaining with the Colours or not, will be given an opportunity of filling in this Form. Should he not wish to put forward any claim in respect of a Disability due to Military Service he must sign the Statement hereunder to this effect, in the presence of an Officer of the Unit with which he is serving, who will witness the Signature. Whether a claim is made or not, this Form will be forwarded by the Unit Commander, in the case of every Officer, direct to the Secretary, War Office; and in the case of every Soldier, to the Record Office of his Unit.

Unit 1021st (Russ) Labour Coy  
 Regiment or Corps Labour Coy  
 Regtl. No. 55664 Rank Plt (a) Former Regiments or Corps with Regimental Numbers :—  
 Surname AARONIS (Block Letters),  
 Christian Names in full ABRAHAM S. (b) Dates of discharge :—  
 Permanent address 119 Elizabeth St. Hightown, Manchester (c) Causes of discharge :—  
 Age last birthday 39 (d) Particulars of Pension or Gratuity received (if any) :—  
 First joined for duty } (Date) 8/4/18 at (Place) Manchester  
 Medical Category or Grade in which joined \_\_\_\_\_

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 20/3/19 A. S. Wilson  
 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.

STATEMENT of the SERVICES of No. 556015

Christian Names

*Alexander George Curzon*

Surname

Corps	Battn. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of Pension		Signature of Officers certifying correctness of Entries
					years	days	
General Service		Deemed to have been enlisted		22.9.17			<i>Hubbard</i>
<i>Labour Corps</i>	<i>Depot</i>	Called up for Service <i>Posting</i> awaiting posting at <i>Depot on B 203</i>	<i>Pte</i>	8.4.18 15.4.18			<i>For a R</i> <i>Hubbard</i>
<i>Labour Corps</i>	<i>Depot</i>	<i>Posted</i>	<i>Pte</i>	17.4.18	<i>Comdr</i>		<i>Hubbard</i>
<i>Labour Corps</i>	<i>Depot</i>	<i>Posted</i>	<i>Pte</i>	7.5.18	23/8		<i>Hubbard</i>
<i>Labour Corps</i>	<i>Depot</i>	<i>B E F Posted</i>	<i>Pte</i>	22.6.18	1/18		<i>Hubbard</i>

Transferred to Class  
Army Reserve on Demobilization  
Date... 23.4.19  
Signature...  
Place...  
Home Address...  
Character... *good*

Home  
B E F  
22.9.17 21.6.18

Total Service forfeited as above ... ..

Total Service towards Engagement to \_\_\_\_\_ (date of discharge) \_\_\_\_\_ years \_\_\_\_\_ days  
" " " Pension " ( " ) " " "

Post Office letter box.

Army Form Z. 11.

Government property. It is no security in possession of it, either as a pledge or security for debt, or under Section 156 (9) of the Army Act to a fine of twenty pounds to both fine and imprisonment."

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

Dispersal Unit Stamp and date of dispersal.

Surname AARONS  
(Block letters)

Christian Names Abraham S

Regtl. No. 556011

Rank O to

Record Office Nottingham

Unit 1021st Cavalry

Regt. or Corps Salisbury

Pay Office do

I have received an advance of £2.

† Address for Pay 119 Plimburgh St

(Signature of Soldier) A. S. Aarons

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 1879

Medical Category Good

Place of rejoining in case of emergency Germany

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.

DISPERSAL UNIT  
26 MAR. 1919

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 \_\_\_\_\_ Office of Issue \_\_\_\_\_ Policy issued No 71 050454

10 APR 1918

M.N.S. Form (R) 203.

# MINISTRY OF NATIONAL SERVICE.

## Form of Application for the Special Enlistment of a man (including an \*Alien and a man over or under military age or otherwise not liable to military service):—

\*NOTE.—If applicant is an Alien, stamp or write in red ink at head of form the word "ALIEN."

- (a) whose posting to the Corps of his choice requires special sanction from the War Office; or
- (b) who cannot be enlisted until notification is received that there is a vacancy in the Corps desired.

*N.B.—This form is not applicable in the case of Boys for training as Musicians, Artificers, etc.*

From 40<sup>th</sup> Recruiting Area at Warrington

To Secretary (A.G. 13), War Office, London, S.W. 1.

### Particulars of Applicant for Enlistment.

Surname Schizor @ Arons Christian Names Abraham

Address 119 Elizabeth St. Sheadham Manchester

Date and year of Birth Feb: 1880 Nationality Russian Jew

If applicant has formerly served in Navy or Army, state particulars and cause of discharge \_\_\_\_\_

Trade or occupation Tailor Cutter 18 Years

Remarks on and full details of trade or other special qualifications.

If an Alien, Identity Book Number 154950 Where Registered Manchester

**Medical Particulars.**

Medical Grade Love = A If fit for the Corps which he desires \_\_\_\_\_

Height 5 ft. 7 ins. Weight 133 lbs.

Chest Measurements 35-3

Remarks, if any, on physical qualifications See AFB 178

Date and Stamp. attached

Signature of Medical Officer \_\_\_\_\_

Period of enlistment desired Desired enlistment under  
(in Red Ink).

Corps applicant desires to join \_\_\_\_\_

If voluntary enlistment, signature of applicant \_\_\_\_\_

**Recruiting Officer's Observations.**

*Submitted in accordance with A.C. 1470 of 1917 Para II  
Russian Jew, speaks English fluently, desires a Jewish Batt.  
Identity Book attached.*

**Reply from Military Authorities.**

May be accepted for Service in

Ref. A.G. 138/100/1

Director of Organization.

ON THE DAY ON WHICH THIS MAN IS  
POSTED

NAME, REFERENCE NO ON ENDORSEMENT AND  
CORPS OR UNIT TO WHICH POSTED

MUST BE ENTERED ON A.F.W. 359a.

**SPECIAL NOTES.**

- (1.) If the applicant although of military age is permanently or for the time being not liable for military service, the reasons should be fully stated under Recruiting Officer's Observations by the Officer submitting the application, and the date of the expiration of Tribunal or other exemption, if any, should also be given.
- (2.) It should be stated whether in the case of a man not liable for military service he will only join the Corps stated above, or whether failing acceptance for that Corps he will join any, and, if so, which other Corps requiring men of his qualifications and category.
- (3.) If desirous of being enlisted for the normal period, the fact will be stated in red ink under the "Recruiting Officer's Observations."
- (4.) If enlistment is sanctioned this form must be attached to the man's attestation form.