

AUSTRALIAN



MILITARY FORCES

M. F.

ATTESTATION FORM

FOR SPECIAL FORCES RAISED FOR SERVICE IN AUSTRALIA OR ABROAD

Army No. VX 41288Surname HUTCHINS
(BLOCK CAPITALS)Other Names Joan RobertUnit General ReinforcementsA.I.F.Enlisted for service at Swan Hill. (Place)Victoria (State) 7-6-1940 (Date)

A

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

- | | |
|---|---|
| 1. What is your name? | 1. Surname <u>HUTCHINS</u>
(BLOCK LETTERS) |
| | Other names <u>Joan Robert.</u> |
| 2. Where were you born? | 2. In or near the town of <u>Fryerstown</u>
in the state or country of <u>Victoria.</u> |
| 3. Are you a natural born or a naturalized British Subject? If the latter, papers are to be produced | 3. <u>Natural Born</u> |
| 4. What is your age and date of birth? | 4. Age <u>25 1/2 years</u>
Date of Birth <u>7-11-1915</u> |
| 5. What is your trade or occupation? | 5. <u>Labourer</u> |
| 6. Are you married, single or widower? | 6. <u>Single</u> |
| 7. Have you previously served on active service? If so, where and in what arm? | 7. <u>No</u> |
| 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>Henry W. Hutchins</u>
Address <u>Woomer Nth.</u>
<u>Victoria</u>
Relationship <u>Father</u> |
| 9. What is your permanent address? | 9. <u>Woomer Nth.</u>
<u>Victoria</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>Ch of E.</u> |

I, Joan Robert Hutchins do solemnly declare that the above answers made by me to the above questions are true and that I am willing to serve in the Australian Military Forces within or beyond the limits of the Commonwealth.

Witnessed by [Signature]
(Signature of Attesting or Witnessing Officer)

J. R. Hutchins
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. ~~Unfit for military service†~~

Place Swan Hill

Date June 3rd 1940

Signature of Examining Medical Officer

Robert Browne

* Classifications which are inapplicable to be struck out.

† Reasons for unfitness to be stated.

C

OATH OF ENLISTMENT‡

I, Ivan Robert Hutchins 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 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 Help Me God.

Signature of Person Enlisted Ivan R. Hutchins

Subscribed at Campfield in the State of Victoria
this Twenty eighth day of June 1940

Before me—

Signature of Attesting Officer

W. H. Perry

‡ 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.



I CERTIFY THAT THIS IS A TRUE COPY OF THE ORIGINAL OF WHICH IT PURPORTS TO BE A COPY, AND THAT I AM THE OFFICER HAVING THE CUSTODY OF THE ORIGINAL.

R SERVICE AND CASUALTY FORM

Army No. **VX 41238**

Unit **2nd Repts 2/24 Bn**

Surname **HUTCHINS**

(Block Capitals)

Christian Names **Ivan Robert**

Rank **PE**

(On Enlistment)

Date of Enlistment **28/6/1940**

Place **Caulfield, Victoria**

Date of Birth **7/11/1915**

Place of Birth **Fryerstown, Vic.**

Trade or Occupation **Labourer**

Religion **C. of E.**

Marital Condition **Single**

Next of Kin **Henry W. Hutchins**

Address of Next of Kin **Woorinen Nth.,**

Victoria

Relationship **Father**

Medical Classification **Class I.**

(On Enlistment)

Identification — Colour of Hair **Lt. Brown** Eyes **Brown**

Distinctive Marks **Small scar on left buttock**

NOTHING TO BE WRITTEN IN THIS SPACE.

REPORT		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	Signature of Officer Certifying Correctness of Entries
Date	From whom received					
28/6/1940	O.C.R.R.D.	Taken on strength R.R.D.	28/6/1940	CAULFIELD R.O.	134/38/40	
2.7.40	O/C No 3 ID	Trans. to No 3 Train. Dep A.A.M.C.	2.7.40	Bendigo	W3011-105/40 RO 23/305/40	
6.9.40	4. T.B.	Evacuated to Isol. Hosp. Pucka. & admitted there with Ulcer & discharge	6.9.40	"	W3011-105/40 RO 23/305/40	
30.9.40	J. Hop. Pucka	Disch. Y.D. State now neg.	30.9.40	Pucka	W3011-105/40 RO 23/305/40	
14.11.40	2/24 JB	Rejoined unit from Isolation Hospital	1.10.40	Echuca	W3011-193/40 RO 15/327/40	
7.12.40	do	Posted to 2/24 Bn 2 nd Repts	7.12.40	do	W3011-239/40 RO 25/327/40	
5.2.41	do	Embarked overseas 4 Convoy 1/113	5.2.41	Melbourne	A206	
23.3.41	2/24 Bn. being	Disembarked.	23.3.41	Melbourne	A.206	
11.4.41	2/24 I.T.B.	Transferred. 2/4 Fa Amb. 4/404	10.4.41	"	W3011	
11.4.41	2/4 2d Amb	Taken on strength 2/4 2d Amb from 24 I.T.B.	10.4.41	"	W3011	
	7/4	Embarked				
10.8.42	FD AMB	Disembarked	8.2.42	ME MT VERNON		
19.3.42	-	Offence: Conduct to the prejudice	10.8.42	4MD	W5109	
		Award: Dined 10/- by CO	18.3.42	"	"	
		Offence: Neglecting to obey a general order	19.3.42	"	"	
		Award: Dined 10/- by CO	21.5.42	"	"	

14 Id Amb.

NOTHING TO BE WRITTEN IN THIS SPACE.

HEADQUARTERS : SOUTHERN COMMAND.
PROCEEDINGS ON DISCHARGE.

RETURNEE

(To be compiled by R. & T. Camp and forwarded to D.R.O. on completion of Discharge).

1. Sthrn. Comm. Authy. 1330 Date 7/4/43 A.N.R. & O.253 Sec. VIII C.

NAME (In full)
(Surname block)

No. VX 41288

Rank

Pte.

Unit

2/4 Aust Fd Amb.

Cert. of Discharge No. 43215 ~~Widower~~, ~~Married~~, Single (Cross out as required)

Discharged at R. & T. Camp, Caulfield on _____ as at 2.5.43 ✓

Including 19 days leave

2. MEDICAL PARTICULARS ON DISCHARGE (To be compiled by examining M.O.)

Age 26 Height 5'6" Complexion Fair

Eyes Brown Hair Fair Distinctive Marks _____

I certify that the soldier named above, on the date of Discharge DID/DID NOT claim or reveal a disability caused or aggravated by War Service. (Strike out DID or DID NOT as applicable). Where such disability was claimed or revealed, the matter has been investigated by a Medical Board.

SIGNATURE OF EXAMINING M.O. _____

In cases where the disability has not been investigated the Discharge will be deferred.

3. REASON FOR DISCHARGE To Reserve Discharge

Total period of Service towards Completion of Engagement 1039 Days.
Including Service Abroad of _____ Days.

Intended Place of Residence after Discharge to which D/C may be posted is - Woolmer North.

4. UNIFORM RETURNED No

PLAIN CLOTHES ISSUED No OR

DESPATCHED TO _____

BY K. Hall ON 14.4.43

5. CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE.

I hereby acknowledge that I have received all my Pay, Allowances, and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the reverse herewith.

PLACE Caulfield

(Signature of Soldier)

DATE 14.4.43.

(Signature of Witness)

6. CONFIRMATION OF DISCHARGE.

I have impartially inquired into all matters brought before me in accordance with regulations and hereby confirm the Discharge.

Place Malbourne

Date 12.4.43

(Signature & appointment of Confirming Officer)

Discharged in Absentia.

Cert. of Discharge placed in personal file.

Cert. of Discharge posted to

Date of Embarkation 5/2/41

Date of Disembarkation 10/3/42 on _____

(SA)

7c

Harvey

Continuous full time War service 1039 days including 418 days in Australia outside

16 JUL 1943

3rd World Record

H/° M. Hutchins
Co. 6 Private Bag
Woorinen.

July. 15/1943

Officer Badge Section.

339 Swanston St Melbourne
Dear Sir;

As I am now a discharged
Soldier from the second AIF and returned
from Service in middle East and New
Guinea I have been informed by the
branch of the RSL of this District that
I am now entitled to wear their badge.
And would be very grateful if you
could forward one on to me at
an early date. I was informed at Campfield
the day of my discharge to call on you &
receive one, but owing to my free rail
Warrant issued to me on that day I was
unable to do so.

Thanking you in Anticipation

V.X.41288
P.E. Hutchins SR.
2/4 Field Ambulance
AIF

Yours faithfully
M. Hutchins.

NAME HUTCHINS, I.R. No. VX41288
Address Private Bag Woorinen Cth

1	<input checked="" type="checkbox"/> 1939/45 STAR	<input checked="" type="checkbox"/>
2	<input checked="" type="checkbox"/> AFRICA STAR	<input checked="" type="checkbox"/>
3	<input checked="" type="checkbox"/> " with 1st Clasp	<input checked="" type="checkbox"/>
4	<input checked="" type="checkbox"/> " with 8th Clasp	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/> ATLANTIC STAR	<input checked="" type="checkbox"/>
6	<input checked="" type="checkbox"/> A.C. EUROPE STAR	<input checked="" type="checkbox"/>
7	<input checked="" type="checkbox"/> ITALY STAR	<input checked="" type="checkbox"/>
8	<input checked="" type="checkbox"/> FRANCE & G. STAR	<input checked="" type="checkbox"/>
9	<input checked="" type="checkbox"/> PACIFIC STAR	<input checked="" type="checkbox"/>
10	<input checked="" type="checkbox"/> BURMA STAR	<input checked="" type="checkbox"/>
11	<input checked="" type="checkbox"/> DEFENCE MEDAL	<input checked="" type="checkbox"/>
12	<input checked="" type="checkbox"/> WAR MEDAL	<input checked="" type="checkbox"/>
13	<input checked="" type="checkbox"/> A.S.M.	<input checked="" type="checkbox"/>
14		<input checked="" type="checkbox"/>

Recorder EB

Checker 76011

AWARDS WITHHELD

Serials:

REASON:

AUTHORITY: Aug 5 11 51

H.S.M. EN 9 21 8 51

Packer

Despatcher

TO WHOM DESPATCHED

Reg'd Parcel No. Yorled

DATE 16.4.51

RECEIPT

Serials A.S.M.

Sig. Yorled 11.9.51

DATE

AHQ Press-3443-9/46-710m