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Caroline

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Fact sheet 7 – Citing archival records

Fact sheet 8 – Copyright

AUSTRALIAN MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE.

Attestation Paper of Persons Enlisted for Service Abroad.

No. 5079 Name John, Crilly
 Unit MINING CORP.
 Joined on 7. 1. 16

Questions to be put to the Person Enlisting before Attestation.

1. What is your Name? ... John, Crilly.
2. In or near what Parish or Town were you born? ...
 in the Parish of Duiganou in or
 near the Town of Tyrol Delan
 in the County of Tyrol Delan
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) ... Yes
4. What is your Age? ... 41. 2.
5. What is your Trade or Calling? ... Miner
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? ... No
7. Are you married? ... Yes
Wife: E. Crilly
100, 1st St. Rockhampton
W. Morgan
8. Who is your next of kin? (Address to be stated) ... W. Beest St. J. Crilly
9. Have you ever been convicted by the Civil Power? ... No
10. Have you ever been discharged from any part of His Majesty's Forces, with Ignominy, or as Incurable and Worthless, or on account of Conviction of Felony, or of a Sentence of Penal Servitude, or have you been dismissed with Disgrace from the Navy? ... No
11. Do you now belong to, or have you ever served in, His Majesty's Army, the Marines, the Militia, the Militia Reserve, the Territorial Force, Royal Navy, or Colonial Forces? If so, state which, and if not now serving, state cause of discharge ... Yes S.L.A.
12. Have you stated the whole, if any, of your previous service? ... Yes
13. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? ... No
14. (For married men, widowers with children, and soldiers who are the sole support of widowed mother)—
 Do you understand that no separation allowance will be issued in respect of your service beyond an amount which together with pay would reach eight shillings per day? ... Yes
15. Are you prepared to undergo inoculation against small pox and enteric fever? ... Yes

APPLICATION FOR WAR SERVICE
 LEAVE GRATUITY PASSED
 APR 23 1918
 N/o. No. 33196

John, Crilly do solemnly declare that the above answers made by me to the above questions are true, and I am willing and hereby voluntarily agree to serve in the Military Forces of the Commonwealth of Australia within or beyond the limits of the Commonwealth.

And I further agree to allot not less than two-fifths of the pay payable to me from time to time during my service for the support of my wife and children.

Date 15 7 16 John J. Crilly
 Signature of person enlisted.

* This clause should be struck out in the case of unmarried men or widowers without children under 18 years of age.
 † Two-fifths must be allotted to the wife, and if there are children three-fifths must be allotted.

CERTIFICATE OF ATTESTING OFFICER.

The foregoing questions were read to the person enlisted in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to by him.

I have examined his naturalization papers and am of opinion that they are correct.

(This to be struck out except in the case of persons who are naturalized British Subjects.)

Date 15-1-16

Wing Lt Col. [Signature]
Signature of Attesting Officer.

OATH TO BE TAKEN BY PERSON BEING ENLISTED.*

3, John Cully swear that I will well and truly serve our Sovereign Lord the King in the Australian Imperial Force from 15-7-16 until the end of the War, and a further period of four months thereafter unless sooner lawfully discharged, dismissed, or removed therefrom; 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.

J. Cully
Signature of Person Enlisted.

Taken and subscribed at R. Ton in
the State of Queensland
this 15th day of 1916, before me—

Wing Lt Col. [Signature]
Signature of Attesting Officer.

*A person enlisting who objects to taking an oath may make an affirmation in accordance with the Third Schedule of the Act, and the above form must be amended accordingly. All amendments must be initialed by the Attesting Officer.

3

Description of John Gully on Enlistment.

Age <u>41</u> years <u>2</u> months.	DISTINCTIVE MARKS.
Height <u>5</u> feet <u>6 1/2</u> inches.	
Weight <u>352</u> lbs.	
Chest Measurement <u>40 1/2</u> inches.	
Complexion <u>Wheat</u>	
Eyes <u>Brown</u>	
Hair <u>Wheat</u>	
Religious Denomination <u>Catholic</u>	

CERTIFICATE OF MEDICAL EXAMINATION.

I HAVE examined the above-named person, and find that he does not present any of the following conditions, viz. :—

Scrofula ; phtthisis ; syphilis ; impaired constitution ; defective intelligence ; defects of vision, voice, or hearing ; hernia ; hæmorrhoids ; varicose veins, beyond a limited extent ; marked varicocele with unusually pendent testicle ; inveterate cutaneous disease ; chronic ulcers ; traces of corporal punishment, or evidence of having been marked with the letters D. or B.C. ; contracted or deformed chest ; abnormal curvature of spine ; or any other disease or physical defect calculated to unfit him for the duties of a soldier.

He can see the required distance with either eye ; his heart and lungs are healthy ; he has the free use of his joints and limbs ; and he declares he is not subject to fits of any description.

I consider him fit for active service.

Date 15-7-16

Place 22nd St

Robert A. Malcolm
Signature of Examining Medical Officer.

CERTIFICATE OF COMMANDING OFFICER.

I CERTIFY that this Attestation of the above-named person is correct, and that the required forms have been complied with. I accordingly approve, and appoint him to _____

Date _____




Paul Jones Sr.

Place _____

Commanding _____

Statement of Service of No. 5079

Name *Billie John*

Unit in which served.	Promotions, Reductions, Casualties, &c.	Period of service in each rank.		Remarks.
		From—	To—	
11th Depot Bn MINING CORPS, A.I.F.	Private	18. 1. 16	19 FEB 1916	PR Capt Captain. O. C. Depot Miners.
MINERS REINF'TS. SEYMOUR	SAPPER Lieutd. 19/7/16	19. 2. 16	18 JUL 1916	from Eng Refts
TUNNELLING COY	SAPPER	18 JUL 1916		
<p>Ret to Aust per H. J. Parambal left Plymouth 2/4/17 Cite 1267 of 600 at Lond 17/4/17 20 MAY 1917 N.O.K. Advised Returning to Australia 9. 6. 14 Rtd. "Parambal" 1st M. D. via 3rd M. D. overland Epileptic Convulsions. Discharged (M.D.) 13/7/17 No personal effects in kit, B. P. M. No. 12/1439 WAR HISTORY INDEX</p>				
  				

I have examined the above details, and find them correct in every respect.

A

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AUSTRALIAN



MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE.

Attestation Paper of Persons Enlisted for Service Abroad.

No. 5079

Name John Grilly

Unit **MILITARY CORPS COY.**

Joined on

Questions to be put to the Person Enlisting before Attestation.

1. What is your Name? ... *John Grilly.*
2. In or near what Parish or Town were you born? ... *near the Town of Durgon, in the County of Tyrone, Ireland*
3. Are you a natural born British Subject or a Naturalised British Subject? (N.B.—If the latter, papers to be shown.) ... *Yes*
4. What is your Age? ... *41.2*
5. What is your Trade or Calling? ... *Printer*
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? ... *No*
7. Are you married? ... *Yes*
8. Who is your next of kin? (Address to be stated) ... *Wife Mrs Grilly, 11 Grey Street, Southampton, No. 1 George*
9. Have you ever been convicted by the Civil Power? ... *No*
10. Have you ever been discharged from any part of His Majesty's Forces, with Ignominy, or as Incorrigible and Worthless, or on account of Conviction of Felony, or of a Sentence of Penal Servitude, or have you been dismissed with Disgrace from the Navy? ... *No*
11. Do you now belong to, or have you ever served in, His Majesty's Army, the Marines, the Militia, the Militia Reserve, the Territorial Force, Royal Navy, or Colonial Forces? If so, state which, and if not now serving, state cause of discharge ... *3 years, 2nd Lt.*
12. Have you stated the whole, if any, of your previous service? ... *Yes*
13. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? ... *No*
14. (For married men, widowers with children, and soldiers who are the sole support of widowed mother)—Do you understand that no separation allowance will be issued in respect of your service beyond an amount which together with pay would reach eight shillings per day? ... *Yes*
15. Are you prepared to undergo inoculation against small pox and enteric fever? ... *Yes*

I, John Grilly do solemnly declare that the above answers made by me to the above questions are true, and I am willing and hereby voluntarily agree to serve in the Military Forces of the Commonwealth of Australia within or beyond the limits of the Commonwealth.

And I further agree to allot not less than ~~two-fifths~~ three-fifths of the pay payable to me from time to time during my service for the support of my wife.*† and children.

Date 15-1-16

John G. Grilly
Signature of person enlisted.

* This clause should be struck out in the case of unmarried men or widowers without children under 18 years of age.
† Two-fifths must be allotted to the wife, and if there are children three-fifths must be allotted.

CERTIFICATE OF ATTESTING OFFICER.

The foregoing questions were read to the person enlisted in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to by him.

~~I have examined his naturalization papers and am of opinion that they are correct.~~

~~(This to be struck out except in the case of persons who are naturalized British Subjects.)~~

Date 15-1-16

Wm Carter Capt.
Signature of Attesting Officer.

OATH TO BE TAKEN BY PERSON BEING ENLISTED.*

I, *John Brilly* swear that I will well and truly serve our Sovereign Lord the King in the Australian Imperial Force from *15/1/16* until the end of the War, and a further period of four months thereafter unless sooner lawfully discharged, dismissed, or removed therefrom; 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.

J. Brilly
Signature of Person Enlisted.

Taken and subscribed at *Rockhampton*
the State of *Queensland*

this *7th* day of _____ of

January 19 *16* before me—

Wm Carter Capt.
Signature of Attesting Officer.

*A person enlisting who objects to taking an oath may make an affirmation in accordance with the Third Schedule of the Act, and the above form must be amended accordingly. All amendments must be initialed by the Attesting Officer.

Description of John Grilly on Enlistment.

Age 41 years 2 months.
Height 5 feet 6 3/4 inches.
Weight 352 lbs.
Chest Measurement 104 inches.
Complexion Dark
Eyes Brown
Hair Dark
Religious Denomination Cofc

DISTINCTIVE MARKS.

CERTIFICATE OF MEDICAL EXAMINATION.

I HAVE examined the above-named person, and find that he does not present any of the following conditions, viz. :-

Scrofula; phthisis; syphilis; impaired constitution; defective intelligence; defects of vision, voice, or hearing; hernia; hæmorrhoids; varicose veins, beyond a limited extent; marked varicocele with unusually pendent testicle; inveterate cutaneous disease; chronic ulcers; traces of corporal punishment, or evidence of having been marked with the letters D. or B.C.; contracted or deformed chest; abnormal curvature of spine; or any other disease or physical defect calculated to unfit him for the duties of a soldier.

He can see the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs; and he declares he is not subject to fits of any description.

I consider him fit for active service.

Date 15-7-16.
Place R. I. Co.

Robert A. Malcolm
Signature of Examining Medical Officer.

CERTIFICATE OF COMMANDING OFFICER.

I CERTIFY that this Attestation of the above-named person is correct, and that the required forms have been complied with. I accordingly approve, and appoint him to TUNNELL COY.

Date 17 JUL 1916
Place SEYMOUR

Paul Jones Sr
Commanding

103 Aug 8/2/17

CARD CHECKED *JRP*

Statement of Service of No. 5079 Name Grilly John

Unit in which served.	Promotions, Reductions, Casualties, &c.	Period of service in each rank.		Remarks.
		From—	To—	
11 th Depot Bde MINING CORPS, A.I.F.	Private	18. 1. 16	9 FEB 1916	ARR Capt Captain. O. C. Depot Miners.
MINERS REINF'TS. SEYMOUR	SAPPER	10/5/16	18 JUL 1916	from Miners Rft
TUNNELLING COY	SAPPER	18 JUL 1916		
	marched in from Aust. (E.R. 2966) to 413 Camp. Parkhouse.	21. 9. 16.		Pr II $\frac{23}{2966}$ 28.10.16.
	PROCEEDED OVERSEAS, FRANCE	15. 10. 16		Pr II 1/1765 11. 11. 16.
	embarked for England on H.S "St. Patrick" de Rouen Influenza & Bronchitis	30.12.16		Pr II $\frac{3}{146}$ 29/1/17
	Rfts to hosp, sick from 1 st Angac ent Bde	16-12-16		Pr II $\frac{4}{147}$ 1/2/17
<i>Gun Details.</i>	adm. ofc. Wasp. County of middlessex. (ironic flight)	mapsluay England	1.1.17	DO. 6/ $\frac{1325}{E. 17. 2. 17.$
II	marched in from Adm. H. 2trs. to ofc. No 2 Com.	Weymouth England	27.3.17.	L.R. 1364. DO. 13/E. 21.4.17.
	U. in to No 2. G. D. Weymouth from Adm. Hdqrs. London		29.3.16.	D. O. 14/1979. 1.6.17
<i>Sum. boy. Sp</i>	RETURN TO AUSTRALIA Per <i>H. Y. Baramlak</i> for discharge (Epi Gonorrhoias)	Plymouth England	8.4.17	L.R. 1650 DO. 16/E 21.4.17.
	Discharged 1st M D.		13.7.17	Base Record Sub 96. Page 20.

I have examined the above details, and find them correct in every respect.

o.BR 360/596705 S

RECEIPT FOR MEMORIAL PLAQUE.

Received from the Officer i/c Base Records, Army Head-quarters,
one Memorial Plaque in connexion with the late

..... ex No. 5079 Sapper J. GRILLY.

..... Tunnelling Company.

Signature

J. C. Grilly

Date

23 July 1924

This slip to be returned to the Officer in Charge, Base Records, Victoria Barracks, Melbourne, Victoria,
within seven (7) days.

D.2035/9.22.-C.18580.-22

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Weymouth
12/3/17
Papers forwarded 15/3/17
Medical Report on an Invalid.

Army Form B. 179.

Station No 3 Aux. Auxiliary Hospital
Earlford

Date 20.2.17

- 1. Unit No 1. Gunnellay Coy.
- 2. Regimental No. 5079
- 3. Rank Sapper
- 4. Name CRILLY John
- 5. Age last birthday 46
- 6. Enlisted { on Feb 1915 (cannot remember exactly)
at Widewater
- 7. Former Trade or Occupation { Rockhampton Miner

8. Disability.

Epileptiform Convulsions
? Cerebral thrombosis

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

Since his fits the patient has lost his memory to a large extent & cannot give times & dates.
9. Date of origin of disability. about December 25th 1916

10. Place of origin of disability. on the Somme.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Patient was sent over from France about beginning of Dec Jan. 1917 - was in County of Middlesex Hosp & was sent to No 3 A.A.H 1.2.17 He was convalescent from Bronchitis when he arrived here - he has been well except for a slight cough since admission until 14/2/17 when without any previous symptoms except extreme sluggishness of the bowels he had fifteen fits of true epileptiform character - but he had no focal onset. fits were general had patient insists that he has never had fits before & that he has not enjoyed good health at any time since he has never had fits before & that he has not enjoyed good health at any time since he has never had fits before & that he has not enjoyed good health at any time since

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

Consultant's Finding.

Epilepsy. Cardio Vascular Changes, due to wear & tear. Fibrosis of lung. Emphysema. & Bronchitis. Permanently unfit for ALL Military Service. Service has aggravated a developing condition. No history of Epilepsy prior to 14/2/17.

(Sgnd) H.C. Maudsley, Col. 7/3/1917.

18. What is his present condition ?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Patient has been quiet & had no fits since 14/1/17 at which date he was given Pot Brom. He has been very dull since.

It has been impossible to extract any exact information as to dates etc from him: Since the fits he has had some difference in sizes of pupils - left is larger. Both react to light & accommodation. There is no sign of motor paralysis - knee jerks are very sluggish but obtainable - no Babinski. Pulse is 46, regular - tension low, vessels moderately thickened. Height 5' 4 1/2 inches weight 115 lbs. urine deficient in quantity (passed 25 oz in 24 hours) contains small cloud of albumen

14. If the disability is an injury, was it caused

- (a) In action ?
- (b) On field service ?
- (c) On duty ?
- (d) Off duty ?

not applicable

15. Was a Court of Inquiry held on the injury ?

- If so—(a) When ?
- (b) Where ?
- (c) Opinion ?

not applicable

16. Was an operation performed ? If so, what ?

not applicable

17. If not, was an operation advised and declined ?

not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ?

not applicable

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England ? Aust

eps
two

J. G. C. Washburn Capt
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

except†

Station



Date

W. Washburn-Powell

Lieut.-Col.,

O.C. No. 3 Australian Auxiliary Hospital
Officer in charge of Hospital.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

A 20769

To
The Staff Paymaster.

Administrative Headquarters
A. I. F.

NON EFFECTIVE STATEMENT

Reg. No. 5079 Rank Spr Name GRILLY. J. Unit Min. Coy.

Military District (1) Unit at Min. Coy. Date of Not Available
on Enlistment. Embarkation Embarkation.

TRANSFERS.

NIL

Date

Reference

PROMOTIONS APPOINTMENTS & REVERSIONS.

NIL

FORFEITURES, CRIMES, V.D. ETC.

NIL

CAUSE OF BECOMING NON-EFFECTIVE WITH DATE OF CASUALTY.

Returned to Australia per H.T. "Barambah" for DISCHARGE
EPT. CONVULSIONS

6.4.17

21.4.17

IR.156C.DC.16/E

COMPILED FROM INFORMATION AVAILABLE AT THIS OFFICE
ON THE 11.5.17

Captain.
Officer i/c Records.

MS.



Medical Report on an Invalid.

Station No. 3 Aus. Auxiliary Hospital
Dartford
Date 20 - 2 - 17.

- 1. Unit No. 1. Tunneling Coy.
- 2. Regimental No. 5079
- 3. Rank Sapper
- 4. Name Kelly John
- 5. Age last birthday 46
- 6. Enlisted { on Feb. 1915 (cannot remember exactly)
at Rockhampton
- 7. Former Trade or Occupation { Miner

8. Disability.

Epileptiform convulsions
? Cerebral Thrombosis

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

Since his fits the patient has lost his memory to a large extent and cannot give times or dates.

- 9. Date of origin of disability. about December 25th 1916.
- 10. Place of origin of disability. On the Somme.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Patient was sent over from France about beginning of Jan. 1917. - was in County of Middlesex Hosp. and was sent to No. 3 A. A. H. 1-2-17. He was convalescent from Bronchitis when he arrived here - He has been well except for a slight cough since admission until 14-2-17. when without any previous symptoms except extreme sluggishness of the bowels he had fifteen fits of true epileptiform character: bit his tongue & frothed at the mouth - fits were general & had not a focal onset. Patient insists that he has never had fits before & that he has enjoyed good health up to time of contracting bronchitis.

- 12. (a) Give your opinion as to the causation of the disability.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

uraemia from chronic nephritis not caused by either of (b.) but aggravated by exposure & change of climate.

13. What is his present condition? Patient has been quiet and had no fits
 Weight should be given in all cases since 14-2-17. on which date
 when it is likely to afford evidence of
 the progress of the disability. he was given 6ct Brom.

Now has been very dull since and it has been impossible to
 extract any exact information as to dates etc. from him:
 Since the fits he has had some difference in sizes of
 pupils - left is larger - both react to light & accommodation.

There is no sign of motor paralysis - knee jerks are
 very sluggish but obtainable - no Babinski
 Pulse is 46. regular tension low. vessels moderately thickened
 Heart apex beat 4th space 1/2 inch inside nipple line
 urine. deficient in quantity (passed 25 oz. in 24 hours)
 contains small cloud of albumen.

14. If the disability is an injury, was it caused

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

not applicable

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

not applicable

16. Was an operation performed? If so, what?

not applicable

17. If not, was an operation advised and declined?

not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

not applicable

19. Do you recommend

- (a) Discharge as permanently unfit,
or
- (b) Change to ~~England~~ Australia

yes
no.

Robert Gleshan Capt
 Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

except†

Station _____



Date _____

Wm. Powell

Lieut.-Col.

G.O. No. 3 Australian Auxiliary Hospital
 Officer in charge of Hospital.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

none of these but aggravated by climate and active service

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance? *no*

(b) Misconduct? *no.*

(c) Any of the conditions mentioned in question 20, and if so, which?

yes (1.) and (2.)

22. Is the disability permanent?

yes

23. If not permanent, what is its probable minimum duration?

not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

yes

25. If an operation was advised and declined, was the refusal unreasonable?

not applicable

26. Do the Board recommend

(a) Discharge as permanently unfit,

or
(b) Change to England?

Finding Permanently unfit for general & home service.

5079 Spr. Crilly, J. No. 1 Tun. Co.
 Epilepsy. Cardia Vascular changes due to wear and tear. Fibrosis of lung. Emphysema and Bronchitis. Permanently unfit for all Military Service. Service has aggravated a developing condition. No history of epilepsy prior to 14.2.17.
 7. 3. 17.
 No. 3 A.A.H.
 (Sgd) H.C. Maudsley. Col.

Signatures:—

Blanchard President.

Dr. G. H. ... } Members.

Station _____

Date _____



Approved.

Station _____

Date _____



W. K. ...
Administrative Medical Officer

D.M.S. A.I.F.

(On leaving Corps or Station where invalided.)

Transfer { Date _____
Station _____ } Name { Conveyance _____
or _____ } Vessel _____
Embark- { Date _____
ation { Port _____ } Officer in }
medical charge } _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____
Hospital or } _____ Officer in medical charge.
Station }

(At Station or Hospital where finally disposed of.)

Station and } _____
Hospital }
Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical }
Board, or decision }

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
INVALID.

Station _____
Corps _____
Regimental No. _____
Rank _____
Name _____
Disability _____
Date _____
Hospital or Station }
transferred to for }
final disposal }
Date of final }
disposal }
How finally }
disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.
Wt. W8530/2774 500M 9-15 M.&C.L.D.
Forms B. 179 34

*Colours noted
L. W. 1924*
16 Billet St
Spring Hill
Brisbane
8 April 1924

Dear Sir

Being the Widow of Sapper
John Crilly 5079 I wish to apply for
one of the Deceased Soldiers Plagues
that are being given to deceased Soldiers
Relatives If you will kindly forward one or
or wrap one where I may procure one You
will greatly oblige

Mrs E C Crilly
16 Billet St
Spring Hill
Brisbane

DECEASED
SECTION
APR 12 1924
RECEIVED

DECEASED SECTION
APR 12 1924
RECEIVED

*Forwarded Col. Crilly
15.4.24*

-----4730

JE/EF.

15th April, 1924

RECEIVED
16 APR 1924

The Deputy Commissioner,
Department of Repatriation,
130-132 Mary Street,
BRISBANE.
Queensland.

In order that consideration may be given to next-of-kin's request for the issue of a Memorial Plaque & Scroll on account of the services of the late ex No. 5079 Sapper J. CRILLY, Tunnelling Company, I should be glad to learn whether the cause of death has been accepted by your administration as attributable to War Service.

Thanking you in anticipation of the favor of an early reply.

Captain,
Officer i/c Base Records.

PLEASE ADDRESS REPLY TO
"THE DEPUTY COMMISSIONER"
AND QUOTE—

COMMONWEALTH OF AUSTRALIA.

G..... /
R..... /

C.3734
EAT/MEI

REPATRIATION COMMISSION,
QUEENSLAND BRANCH,
130-132 MARY STREET, BRISBANE

TELEPHONES:
CENTRAL 5770 AND 5771

30th April, 1924.

18108
MEMORANDUM for :-

The Officer-in-Charge,
Base Records Office,
MELBOURNE.

Re Late ex-No. John CRILLY - 5079 - Tunnelling Company.

In answer to your memorandum of the 15th April, 1924, relative to the abovenamed deceased soldier, I have to advise that the cause of death has been accepted by this Department as attributable to war service.

904
DECEASED
SECTION

MAY 6 1924

RECEIVED



J. H. Powe
DEPUTY COMMISSIONER.

[Signature]

E.G.

XXXX 4780

10th May, 1924.

DESPATCHED
12.5.24

Dear Madam,

With further reference to your request of 8th April, I have to advise that a Memorial Plaque and Scroll in respect of your husband, the late ex No. 5079 Sapper J. Crilly, Tunnelling Company, will be forwarded to you as soon as possible.

Yours faithfully,

Captain,
Officer i/c Base Records.

Mrs. E.C. Crilly,
16 Billet St,
Spring Hill,
BRISBANE. Q.

16 Billet St
Spring Hill
Brisbane
June 17th 1924

Base Records Office Victoria
Barracks Melbourne

Dear Sir

I am in receipt of your letter of 15th April 1924 in reference to the issue of a Memorial Plaque to me on account of my late husband services etc No 5079 Sapper J Cully Tunneling company you advise in your communication that I would be further advised but up to present I haven't received the Memorial Plaque or any further particulars hoping you will advise me whether or not the Memorial Plaque will be forwarded to me or not at your earliest convenience

I have to remain
Yours faithfully
Mrs E. C. Cully

16 Billet St.
Spring Hill
Brisbane Queensland

DECEASED
SECTION

JUN 24 1924

RECEIVED



Plaque forwarded on
Schedule No 17
24/6/24

E.G.

xxx 4780

26 JUN 1924

25th June, 1924.

Dear Madam,

I have to acknowledge receipt of your letter of 17th June, and to advise that the Memorial Scroll in respect of your husband, the late ex No. 5079 Sapper J. Crilly, Tunneling Company, is being forwarded to you this day under separate cover, and the Plaque will be sent within the course of the next few weeks. The ensuing delay is due to necessary arrangements having to be made for the engraving of these mementos.

Yours faithfully,

Officer i/c Base Records,
Captain,

J. Crilly
Mrs. C. Crilly,
16 Billet St,
Spring Hill,
BRISBANE. Q.

gunnelling Coy. cas. available
gunnelling Coy. Active Service.

gunnelling Details
gunnelling Coy Rps. 5079
Griddy John

Regiment or Corps

Regimental No. *5079* Rank *Sapper* Name

Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) _____
 Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____
 Extended _____ Re-engaged _____ Qualification (b) _____

Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.

Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received			
2.12.16	A.G.P.D.	<i>F</i>		
11.12.16	Angachant Bn.	<i>Staples</i>	<i>27.11.16</i>	<i>AK 633/34 ✓</i>
11.12.16	Angachant Bn.	<i>Field</i>	<i>21.12.16</i>	<i>A.X. 3162 ✓</i>
11.11.16	A.G.P.D.	<i>Staples</i>	<i>2.11.16</i>	<i>AK 633/53 ✓</i>
25.11.16	12 G.F.	<i>Rouen</i>	<i>25.12.16</i>	<i>AK 731/6</i>
21.9.16	Extrad. A.P. 2.13 P. 415	<i>Parkhouse</i>	<i>21.9.16</i>	<i>AX 3427</i>
1.12.16	5 th F.A.	<i>Field</i>	<i>16.12.16</i>	<i>AK 731/12 D.O. #147</i>
31.12.16	12 Gp. Hosp.	<i>Rouen</i>	<i>30.12.16</i>	<i>AK 731/23</i>
29.12.16	24 C.C.S.	<i>Field</i>	<i>17.12.16</i>	<i>AK 731/37</i>
			<i>24.12.16</i>	

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 211, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 211, Army Form A. 36, or other official documents.
Date	From whom received				
23.12.16	Ingen. Col. Adm. Riachosa G. C. C. I.		Fidley	16.12.16 17.12.16	AAX 731/00
31.12.16	1st Lt. Ayers Ent. Pakt.	To Hospital - sick.	"	24.12.16	B 213 DO. 4/147 A Q 13989
30.12.16	K.S. St. Patrick	Influenza & Bronchitis Ent. for England X	Rouen	28.12.16	W 3683. AX 731/68 D.O. 3/146
11/1/17	G/E Hospital	ADMITTED County of Somerset MIDDLESEX WAR HOSPITAL Mapesbury.	LARGHARD	13/1/17	HOSPITAL. DO 6/17/2/17 REPORT.
1/2/17	G/E Hospital	ADMITTED 3rd Auxiliary Hosp. Dartford. BRIGHTON	LARGHARD	1/2/17	HOSPITAL REPORT.
12/3/17	3rd Auxiliary	DISCHARGED From Hosp. to Fiddlewash	FIDDLEWASH	13/3/17	HOSP. REPORT
3/13/17	6/6 War Cont.	Marched in from Adm. Messengers Westmourt	Westmourt	24/3/17	A R 067 DO 15/12/17/17
13/4/17	Admir. Messengers	Returned to Australia from Plymouth per SS Y Barambah for discharge Epi Conclusions	London England	8/4/17	A R 0650 DO 16/17/2/17/17 1774.
20.9.16	No 3 Camp Office Parishouse Parishouse on parade under 1 day Lt. B. Dy Lt. J. J. Dunne O.C. 21. 9.16 Lt. H. K. G. O. E. D. West. From. Adm. Messengers. Labra.			20.9.16	Graden Union & R 5476

DAILY STATEMENT (MILITARY)

Showing Grants, Alterations, and Cancellations of Pensions (together with date from which such action took effect); also Rejections of Claims and Deaths of Pensioners.

Statement No. 131

Containing 16 sheets

Date 4/7/1917

State of QUEENSLAND.

1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed ...	<u>CRILLY, John, 5079, Spr. Tunnelling Corps</u>
2. Full name and address of person for whom pension was claimed ...	<u>CRILLY, Esther, D'Arcy St, Mt. Morgan</u>
3. Relationship of such person to Member ...	<u>Daughter</u>
4. Result of Claim ...	<u>Granted at 10/- p.f. from 14-7-17</u>
5. Name and address of Trustee (if any) ...	<u>CRILLY, Esther Caroline, D'Arcy St, Mt. Morgan</u>
1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed ...	<u>CRILLY, John, 5079, Spr. Tunnelling Corps</u>
2. Full name and address of person for whom pension was claimed ...	<u>CRILLY, John, D'Arcy St, Mt. Morgan</u>
3. Relationship of such person to Member ...	
4. Result of Claim ...	<u>Granted at £3 p.f. from 14-7-17</u>
5. Name and address of Trustee (if any) ...	
1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed ...	
2. Full name and address of person for whom pension was claimed ...	<u>CRILLY, Esther Caroline, D'Arcy St, Mt. Morgan</u>
3. Relationship of such person to Member ...	<u>Wife</u>
4. Result of Claim ...	<u>Granted at £1/10/- p.f. from 14-7-17</u>
5. Name and address of Trustee (if any) ...	
1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed ...	
2. Full name and address of person for whom pension was claimed ...	<u>FLAMANK, Eric, D'Arcy St, Mt. Morgan</u>
3. Relationship of such person to Member ...	<u>Stepson</u>
4. Result of Claim ...	<u>Granted at £1 p.f. from 14-7-17</u>
5. Name and address of Trustee (if any) ...	<u>CRILLY, Esther Caroline, D'Arcy St, Mt. Morgan</u>
1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed ...	
2. Full name and address of person for whom pension was claimed ...	<u>FLAMANK, Clara, D'Arcy St, Mt. Morgan</u>
3. Relationship of such person to Member ...	<u>Stepdaughter</u>
4. Result of Claim ...	<u>Granted at 15/- p.f. from 14-7-17</u>
5. Name and address of Trustee (if any) ...	<u>CRILLY, Esther Caroline, D'Arcy St, Mt. Morgan</u>

DEPARTMENT OF DEFENCE.

EW/MG. MINUTE PAPER. 2nd M.D.

SUBJECT. Medical Board Proceedings.
re No. 4206, Signaller L.W.F. Waugh, 1st Battn.

A.A.G.
2nd Military District.

Kindly advise date of discharge.

Melbourne. 1/2/16. Capt.
Officer i/c Base Records.

RC

B.R. Form No. 8.

AUSTRALIAN IMPERIAL FORCE.

In all communications regimental number, rank, full name, and unit of Soldier referred to are to be stated.

BASE RECORDS OFFICE,
DEPARTMENT OF DEFENCE,

MELBOURNE, 20th May 1917.

Dear Madam,

I am in receipt of cable advice to the effect that
No. 5079 Sapper
J. Crilly, Tunnelling Coy. about
is returning to Australia and is due in Brisbane
the end of May, 1917. It is regretted that the movements or name of the
transport on which he is arriving cannot be disclosed.

It is to be noted that owing to possible mutilations in the cabled advice and
other causes this notification may not be correct pending verification from the roll on
arrival of the Troopship.

Yours faithfully,

J. M. LEAN, Major,
Officer in Charge, Base Records.

D.195/3.17.—C.3415.

Mrs. C. E. Crilly,

Darcy Street,

MOUNT MORGAN, O.

BR 360/596705

RECEIPT SLIP FOR MEMORIAL SCROLL.

Received from the Officer i/c Base Records, Department of Defence, one Memorial Scroll and King's Message, in connexion with the late ex. No. 5079 Sapper J. CPILLY, (Died after Discharge)

Tunnelling Company.

(Signature) *E L Cilly*

(Date) *23 July 1924*

This slip to be returned to the Officer in Charge Base Records, Victoria Barracks, Melbourne, Victoria, within seven (7) days.

D.1876/12.21.-C.10601.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Crilly Christian Name John

TABLE I.—General Table.

Birthplace { Parish.....
County.....

Examined { on.....day of.....191..
at.....

Declared Ageyears.....days.

Trade or Occupation.....

Height.....feet.....inches

Weight.....lbs.

Chest Measurement { Girth when fully Expanded.....inches
Range of Expansion.....inches

Physical Development.....

Vaccination Marks { Arm..... RIGHT | LEFT
Number.....

When Vaccinated.....

Vision { R.E.—V =
L.E.—V =

(a) Marks indicating congenital peculiarities or previous disease—
.....

(b) Slight defects but not sufficient to cause rejection—
.....

Approved by.....
Rank.....
Medical Officer.

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief Details and Signature
27.6.17	Boards Under 20
6.11.17	Respectfully to the [Signature]

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
"BARAMBAH"	APR 5 - 1917	

Enlisted { at.....
on.....day of.....191..

Joined on enlistment { Corps Aus: Engls Regtl. No. H.M.A.T. 5619

Transferred to { [Signature] 5079

Became non-effective by.....
on.....day of.....191..

(Signature).....
(Rank).....

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
The County of Middlesex War Hospital, near St. Albans.										A. N. Household, M.B.
103 Road, Keston	2	17	17	2	1	17	Parotitis	33		
				12	3	17	Bronchitis Anæmia	70	Admitted 1944-17 collected dorsally - none Anæmia - none seen - 4 months 11/11/44 - 4 weeks - 4 months 11/11/44 - 4 weeks - 4 months 11/11/44 - 4 weeks - 4 months 11/11/44 - 4 weeks - 4 months	
S.S. Barcombe	27	4	17	2	5	17	Pleurisy	5	Admitted Hospital 2 days in 2 weeks Temp 99. resp normal on day pleurisy tracheoph. normal	B. E. Blaxter, M.B.
									Very weak + anæmic. Still some Bronchitis	A. N. Household, M.B.

B. - 200277.

C3
17

DISCHARGED

JUL 13 1917
9259

Hammock 75



Medical Report on an Invalid



11 3 1917
6th A.G. HOSPITAL, M. D.

Station No. 3 Aus. Auxiliary Hospital
Dartford.

Date 20. 2. 17.

- 1. Unit No. 1 Tunnelling Coy.
- 2. Regimental No. 5079
- 3. Rank Sapper
- 4. Name Rilly, John
- 5. Age last birthday 46
- 6. Enlisted on Feb. 1915 (cannot remember exactly)
at Rockhampton
- 7. Former Trade or Occupation Miner

8. Disability.

Epileptiform convulsions
? cerebral thrombosis

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

Since his fits the patient has lost his memory to a large extent and cannot give times or dates.

- 9. Date of origin of disability. about December 25th 1916.
- 10. Place of origin of disability. On the Somme.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Patient was sent over from France about beginning of Jan. 1917 - was in County of Middlesex Hospital and was sent to No. 3 A. V. H. - 1-2-17. He was convalescent from Bronchitis when he arrived here - He has been well except for a slight cough since admission until 14/2/17. when without any previous symptoms except extreme sluggishness of the bowels he had fifteen fits of true epileptiform character - bit his tongue and frothed at the mouth - fits were general and had not a focal onset.

Patient insists that he has never had fits before & that he has enjoyed good health up to time of contracting bronchitis

- 12. (a) Give your opinion as to the causation of the disability.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

uraemia from chronic nephritis not caused by either of (b.) but aggravated by exposure and change of climate.

Endorse on sheet & P.A.

6/8/17

13. What is his present condition ?

Patient has been quiet & had no fits since 14-2-17. on which date he was given Pot Brom. He has been very dull since & it has been impossible to extract any exact information as to dates etc. from him: since the fits he has had some difference in sizes of pupils - left is larger both react to light & accommodation. There is no sign of motor paralysis - knee jerks are very sluggish but obtainable - no Babinski. Pulse is Hb. regular - tension low. vessels moderately thickened. Heart apex beat 4" space 1/2 inch inside nipple line urine deficient in quantity (passed 2.5 oz. in 24 hours) contains small cloud of albumen.

14. If the disability is an injury, was it caused

- (a) In action ?
- (b) On field service ?
- (c) On duty ?
- (d) Off duty ?

not applicable

15. Was a Court of Inquiry held on the injury ?

- If so—(a) When ?
- (b) Where ?
- (c) Opinion ?

not applicable

16. Was an operation performed? If so, what ?

not applicable

17. If not, was an operation advised and declined ?

not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ?

not applicable

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) Change to ~~England~~ Australia

yes
no.

John C. McEachan

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

except†

Station



Date

Arthur Powell

Lieut.-Col.,

O.C. No. 3 Australian Auxiliary Hospital

Officer in charge of Hospital.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

5079 Subser J Crilly 1 January 1917 46.

Epulekay disease
Causes vascular changes due to wear & tear
of lungs employment + bronchitis
Permanently unfit for any military
service.

Service has aggravated a developing
condition
In history of Epulekay from 14.2.17.

9.3.17

H.C. Mansfield M.D.

In 3 A A A

Station _____
Date _____
1 - MAR. 1917
DARTFORTH
Jno Chedoke M.D. } Members.

Approved.
Station _____
Date _____
26 MAR. 1917
H.W. Lewis } Major
Administrative Medical Officer. }
for Surgeon A.M.S. A.I.C.

where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

none of these but aggravated by climate & active service.

21. Has the disability been aggravated by

(a) Intemperance? *no.*

(b) Misconduct? *no.*

(c) Any of the conditions mentioned in question 20, and if so, which?

yes (1.) & (2.)

22. Is the disability permanent?

yes

23. If not permanent, what is its probable minimum duration?

not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total

In defining the extent of his inability to earn a livelihood, estimate it at *1. 1. 1.* or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

yes

25. If an operation was advised and declined, was the refusal unreasonable?

not applicable

26. Do the Board recommend

(a) Discharge as permanently unfit,

or *✓*
(b) Change to England?

Finding Permanently unfit for general & home service.

Signatures:—

W. S. ... President.

J. O. ...

Members.

Station _____

Date _____

Approved.

Station _____

Date _____



H. W. Lewis

Administrative Medical Officer.

D.M.S. A.I.

5079 Spr. Crilly, J. No. 1 Tun. Co.
Epilepsy. Cardia Vascular changes due to wear and tear. Fibrosis of lungs. Emphysema and Bronchitis. Permanently unfit for all Military Service. Service has aggravated a developing condition. No history of epilepsy prior to 14.2.17.
7. 3. 17.
No. 3 A.V.A.H.
(Sgd) H.C. Mandusley. 201.

(On leaving Corps or Station, where invalided.)

Transfer { Date _____ } Conveyance _____
 or { Station _____ } Name of Vessel _____
 Embark- { Date _____ } Officer in _____
 ation { Port _____ } medical charge _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____ }
 { Hospital or Station _____ } Officer in medical charge.

(At Station or Hospital where finally disposed /of.) /

Station and Hospital Arrived from England Date 11 JUN 1917
6th A. G. HOSPITAL 1st. M. D.

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From To			
<u>4/5/17</u>	<u>11/6/17</u>	<u>27/6/17</u>	<u>central thrombosis</u>	<u>Discharged from 6th A.G.H.</u>	<u>13/9/17</u>

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Board fixed. Discharge
Board recommended. Discharge
Capacity to be in



CONFIRMED.
Amw hutor Lt. Colonel
 P.M.O. 1st. Military District

[Signature]
 Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
 INVALID.

Station 6th A.G.H. Hospital
 Corps 1st. Army Corps
 Regimental No. 5779
 Rank Warrant Officer
 Name Walter John
 Disability central thrombosis
 Date 27.6.17
 Hospital or Station transferred to for final disposal 509th B.C.
 Date of final disposal 13/9/17
 How finally disposed of Discharge on Pension

The original Report is invariably to accompany the discharge documents of Invalids.
 W.L. W8530/2774 500M 9-15 M&C.I.L.