



NEW ZEALAND DEFENCE FORCE
PERSONNEL RECORDS

PRESERVED BY ARCHIVES NEW ZEALAND

Record Title: John CALDWELL

Archives Reference: AABK 18805 W5530 0021649

THIS DIGITAL SURROGATE WAS PRODUCED BY ARCHIVES NEW ZEALAND ON
Wednesday, 28 July 2010

Unit: A Company <i>Alv. A. J. R.</i>	Rank: Private	Surname: Caldwell	Christian Name: John	No. 14389
Occupation: Driver		Religion: <i>County Derry</i> C of E <i>1878</i>	Last New Zealand address: Mokai House Grey Street, Auckland	
Last employer: City Council Auckland				

Name, relationship, and address of next-of-kin (if not resident in New Zealand, insert also name and address of nearest relative in New Zealand):

Mrs Anne Parke	Mrs Sarah Jenkins
Desert Martin (Sister)	90 Grey Street
County Derry	Auckland
Ireland	

[B.R. - 220.]

MEDAL ACTION COMPLETE.

Surname: **22/SEP/1923/16**

Address: **no evidence of hold**

Casualty or reason for discharge: **no evidence of hold**

Legatee and address: **no evidence of hold**

Nominated next-of-kin, relationship, and address: **Mrs A Parke (Sister) Grange Desert Martin County Derry Ireland**

Legal next-of-kin, relationship, and address: **Mrs A Parke (Sister) Grange Desert Martin County Derry Ireland**

Decorations: Medals for Gallantry	Authority.	Service Medals.	Date Medal issued.	Service Chevrons.	Wound Stripes.
	Australasian:				
	British:	British War Medal ..	2-9-21	Red.	
	Western European:	Victory Medal ..		Blue.	

Certificates of Service issued.	No.	Date.	MENTION IN DESPATCHES.		
			London Gazette.	No.	Date.

Sick ...	4379	11.10.17	Died from wounds received in action north Conchy Stin In the field France & Belgium 4 Oct 1917
Killed in action ...			
Died of wounds or sickness ...	4379	11.10.17	Died of wounds Oct 4th 1917 f.s.w. side
Missing ...	4416	16.12.17	Died of wounds Oct 4th 1917
Prisoner ...			
Injuries in or by the Service ...			

Discharge ...

Provisional: _____ (Date.)

Final: _____ (Date.)

Intended address: _____

Pension ...

cert posted 22.7.22

Advice re medals authorized to Mrs A Parke 15 Grange Desert Martin

Service prior to entering camp: _____ days

N.Z. service: _____ days

Service	New Zealand	Date	Days	Years		Days		Foreign Service:	Total Service:
				Years	Days				
...	New Zealand	7/3/16	21-6-16						
	Foreign	26-6-16							

Wounds	CABLE.		Where Soldier located.	Message and Remarks.
	No.	Date.		
...				

Sick	3695	20.7.17	Ltd	Adm Hosp France July 2/10 Orlins-Medica Slt
	429589	16.7.17	Ltd	Adm & Com Hosp 5.7.17 2d 2. med course
	7380	8.8.17	Ltd	Pre fav
	3914	8.8.17	"	Trans to Base Depot France July 27 1917
	A 43103			Died from wounds received in action near Conchy Stin In the field France & Belgium 4 th Oct 1917 Burial Rept by. Rev D. J. Pearson. B.2.22. U.K. S. 5.10.17. Miss Edna 1/40100. Ch. 27.

Killed in action			
Died of wounds & sickness	4399	11.10.17	Died of wounds Oct 4 th 1917 f.s.w side
Misc	4416	16.10.17	Died of wounds Oct 4 th 1917
Prisoner			
Injuries in or by the Service			

Discharge	Provisional: _____ (Date.)	Intended address: _____
	Final: _____ (Date.)	

Pension ... Bert posted 22.7.22 m.

Advice re medals authorized to Mrs A. Parke 151 Grange Desert Mountain
County Kerry Ireland

* Strike out words not required.

(Surname) (Christian Name)

Regiment or Corps.	Promotions, Reductions, Casualties, &c.	Rank.	Date.	Authority for Entry.
A Coy 14th	Posted	Pvte	8/3/16	RO 454/2
1st Auck Coy.	Proceeded overseas from Sling	Pte	4.10.16	from Rotten Sling D. 43/11
1st Bde A.I.R.	Joined Unit	Pte	22.10.16	PHD 40 Rousey 11.11.16 13 B24/10
" " "	Reg. Bn from "Forest" Control	"	24.5.17	Pa 25 Rousey 5.6.17
" " "	Det. N3 Wing 11. Ayras Reef	"	1.6.17	Pa 25 Rousey 19.6.17
" " "	Reg. from N3 Wing 2. Ayras Reef	"	18.6.17	Pa 24 Rousey 3.7.17
1st Bde " "	Atch. to N3. + BSA.	"	28.7.17	Pa 34 " 21.8.17
" " "	Reg. Bn from N3. + GAW.	"	15.8.17	Pa 0.35 " 28.8.17

CONDUCT-SHEET.

Regiment or Corps.	Place.	Date.	Offence.	Punishment.	Authority for Entry.

PLAQUE AND SCROLL.

Best posted 29.7.22

Soldier's name: Baldwell John Reg. No. 14389
 Roll No. 33536
 Scroll despatched (Date): 14 JUL 1922
 Plaque: 26 JUN 1922
 Recipient and address: Mrs S. Jenkins
127 Grey St
Auckland
17,000/3/21-3734
Must form to Mrs S. Jenkins
Social Form Recd 25/6/22

Surname (3)

Christian Name (4)

(B.R.—69)

Baldwell

John

Regimental No. (1) <u>14389</u>	Rank (2) <u>Pte</u>	Unit: DECEASED	Reinforcement or Draft	Occupation: (5)
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Medals to
NEXT-OF-KIN-

[300 pads 7/18-10/28]

Name: (6) Mrs. A. Parke (S)
 Relationship: (7) Grange District, Martin
County Kerry,
 Address: (8) Ireland

BRITISH WAR MEDAL 180 SEP 1921
 VICTORY MEDAL 8 AUG 1922

MILITARY HISTORY SHEET.

No. 14389

Name:

Baldwell, John

ABC
14th Div

	Country.	From	To	Years.	Days.	Initials of Officer making Entry.
1. Service record ...	N.Z.	7/3/16	25/6/16		111	MB
	Transit 57	26/6/16	22/8/16		58	MB
	England	23/8/16	6. 10. 16		46	SB
	France.	7/10/16				
2. Certificates ...						
3. Passed classes of instruction† † This includes any authorized class of instruction.						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
8. Medals and decorations	Name of Medal.		Class.		Date of Grant.	
9. Injuries in or by the Service	(friend) Mrs Sarah Jenkins					
10. Name and address of next-of-kin	(Sister) Mrs. Anne Park Desert marton					
	90 Grey St Auckland Co Derry Ireland					
11. Particulars as to Marriage.	(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow. (b.) Place and Date of Marriage. (c.) Name of Officiating Minister or Registrar.					
	(a.)	(b.)	(c.)			
12. Particulars as to Children.	Christian Names.		Date and Place of Birth.		Where registered.	

NOTE.—These entries are to be made from time to time as they occur, and initialed by the officer making the entry.

Intended place of residence on discharge:

N.Z.

STATEMENT OF THE SERVICES OF No. 14389 NAME: Caldwell, J.

Regiment or Corps.	Promotions, Reductions, Casualties, &c.	Rank.	Dates.	Signature of Officer certifying Correctness of Entries.
a Coy 1st Rps	Posted to R.04542	Private	8/3/16	<i>[Signature]</i> Coy. 1st Rps
"	Disembarked & Depart (D.R.)	"	23/8/16	<i>[Signature]</i>
Auct. Coy. Posted to Res Battalion	Hling R. II	"	23/8/16	Hatto.
"	EMBKD. Hling R. II for overseas	"	6.10.16	<i>[Signature]</i>
1st Batta A.I.F.	Posted 1st A.I.F. Batta No. 7/4/16	Private	22.10.16	B. E. Champion

**NEW FILE
BEGINS**

NEW ZEALAND EXPEDITIONARY FORCE.

[Form No. 1]

RECORD of

Registration No. 14389

PERSONAL

(Surname)

(Christian name)

Caldwell

John

1st NZEF 14389

2nd NZEF

REGIMENT: A Company, 14th Reinforcements

GROUP: _____ NUMBER: _____

MEDAL ACTION COMPLETE.

PREVIOUS PAPERS: _____

SUBSEQUENT PAPERS: _____

DECEASED

DEATH CARD ISSUED, R. 3.
INITIALS: JC DATE: 17/10/17

NOTE.

The E.F. 3a History-sheet, containing particulars of casualties, motions, reversions, &c., is not attached to this file.

History-sheet is filed in Base Records Office, and particulars of contents will be supplied on application, if required.

14387. *Baldwell John*
CONFIDENTIAL

[Form A. 90a.]

NEW ZEALAND MILITARY FORCES.

Proceedings of a Medical Board

The signature of each officer composing the Board, &c., should be attached at the end of the proceedings.

Assembled at Inverham, on the 7th Feb 1916
by order of Headquarters
for the purpose of examining and reporting upon the present state of health of Private J. Caldwell
A. Co. 10th

President: Lt Col Andrew

Members:

Capt [Signature]

Capt Johnston

Read instructions on back of form.

The Board, having assembled pursuant to order, proceed to examine the above-named individual, and find that he is mentally slow
but there is no sufficient medical reason
for rejection

The opinion of the Board upon the questions herein is as follows:—

1. (a.) Is the individual fit for "general service"? Yes
(b.) If not so fit, how long is the disability likely to continue?

2. (a.) If unfit for general service, is he fit for service at home? *

- (b.) If not so fit, how long is the disability likely to continue?

3. Was the disability contracted in the Service? No
4. Was it caused by military duty? † No
5. Was it contracted under circumstances over which he had no control?
Yes
6. If caused by military duty or service, the nature of such duty or service to be briefly and clearly stated:

7. RECOMMENDATION: Service

(Signatures) [Signature] Lt Col
[Signature] Capt
[Signature] Capt

* Vide paragraph 3 of instructions overleaf

† Enteric fever, &c., contracted when on service abroad is to be regarded as caused by military duty.

Casualty Form—Active Service.

Regiment or Corps

Rank Pte Surname Leadbull Christian Name John

Religion

Age on Enlistment years months

Enlisted (a) Terms of Service (b) Service reckons from (a) 7-3-10

Date of promotion to present rank Date of appointment to lance rank

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and rate

Occupation Signature of Officer.

Report		Reason of promotion, reduction, transfers, casualties, etc., during active service, as reported on Army Form B. 103, Army Form A. M., or on other official documents. The authority is to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 103, Army Form A. M., or other official documents.
Date	From whom received				
		Embarked ...	Wallingford	20-6-10	Form B, Form B
		Disembarked	Warrington	22-8-10	Warrington Form B
31-8-10	4th Lt. J. G. P. P. P.	Att. strength 4th Coy	2nd Coy	23-8-10	Form B
4-10-10	4th Lt. J. G. P. P.	Roll out. 4th Coy	- do -	4-10-10	Form B
9-10-10	4th Lt. J. G. P. P.	Att. strength 4th Coy	4th Coy	6-10-10	- do -
22-10-10	4th Lt. J. G. P. P.	Formed 1st Coy AIR	Field	22-10-10	Form B
5-5-17	- do -	Att. strength 4th Coy	- do -	29-5-17	Form B
25-5-17	- do -	Formed 1st Coy	- do -	25-5-17	Form B
9-6-17	- do -	Disembarked to 4th Coy	- do -	1-6-17	Form B
25-6-17	- do -	Formed 1st Coy	- do -	15-6-17	Form B
7-7-17	- do -	Formed 1st Coy	- do -	3-7-17	Form B
7-7-17	4th Lt. J. G. P. P.	Adm. 1st Coy 3rd Coy	- do -	3-7-17	Adm. 1st Coy 3rd Coy
7-7-17	4th Lt. J. G. P. P.	Adm. 1st Coy 3rd Coy	- do -	3-7-17	Adm. 1st Coy 3rd Coy

(a) In the case of a man who has re-engaged (a), or National/Trade (Section D), Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signifier, Shering-Smith, etc.

W. 103-1000 1000 103 1000 C.F. & L. Ltd. Form B. 103 1/100

D.T.C.

RECEIVED.

16 JAN 1918

NOV 1917

Report		Report of by S.I.H. Act The authority	Date of Casualty	Remarks Taken from Army Form S.I.H. Army Form A. 24 or other official documents
Date	From whom received			
5-7-17	Admiral's Report	Casualty Report	5-7-17	AD 104 x 178
23-7-17	- do -	Report to Coast Camp	- do -	AD 104 x 1000
28-7-17	Admiral's Report	Casualty Report	28-7-17	AD 104 x 900
18-8-17	Admiral's Report	Wounded (in Detail)	18-8-17	B213
8-9-17	- do -	Wounded on board (etc)	- do -	5-9-17
22-9-17	- do -	Wounded (in Detail)	- do -	18-9-17
7-10-17	- do -	Wounded on board	- do -	4-10-17
12-10-17	Admiral's Report	Casualty Report	- do -	4-10-17
12-10-17	Admiral's Report	Casualty Report	- do -	4-10-17
14-10-17	- do -	Wounded	- do -	4-10-17
				Wounded by DAAF x x 1007

for B. Chung
Major
DAAG (NZ)

G.H.Q. 3rd Echelon B.E.F.

ENTERED ON HISTORY SHEET

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NEW ZEALAND EXPEDITIONARY FORCE

ATTESTATION OF

No. 14 389 Name: Caldwell John Regiment or Unit: 1st Coy

Questions to be put to the Recruit before enlistment.

- | | |
|---|---|
| <p>1. What is your name? ...</p> <p>2. Where were you born? ...</p> <p>3. Are you a British subject? ...</p> <p>4. What is the date of your birth? ...</p> <p>5. Who is your next-of-kin? ...</p> <p>6. What is your trade or calling? ...</p> <p>7. Are you an indentured apprentice? If so, where, and to whom? ...</p> <p>8. What was the address at which you last resided? ...</p> <p>9. Have you passed the Fourth Educational Standard or its equivalent? ...</p> <p>10. What is the name and address of your present or last employer? ...</p> <p>11. Are you married? ...</p> <p>12. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? ...</p> <p>13. Do you now belong to any military or naval force? If so, to what corps? ...</p> <p>14. Have you ever served in any military or naval force? If so, state which and cause of discharge? ...</p> <p>15. Have you truly stated the whole (if any) of your previous service? ...</p> <p>16. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? ...</p> <p>17. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? ...</p> <p>18. Are you willing to be vaccinated or re-vaccinated and inoculated? ...</p> <p>19. Are you willing to serve in the Expeditionary Force in or beyond the Dominion of New Zealand under the following conditions, provided your services should so long be required: For the term of the present European war, and for such further period as is necessary to bring the Expeditionary Force back to New Zealand and disband it? ...</p> | <p>1. <u>Caldwell John</u></p> <p>2. <u>County Kerry Ireland</u></p> <p>3. <u>Yes</u></p> <p>4. <u>1878</u></p> <p>5. <u>(Sister) Mrs Park Grant. County Kerry. Ireland</u></p> <p>6. <u>Driver</u></p> <p>7. <u>No</u> <i>Indentured to work for Mrs Grant Ireland 90 miles to Auckland</i></p> <p>8. <u>Mohai House. Grey Street. City</u></p> <p>9. <u>Yes</u></p> <p>10. <u>City Council. Auckland</u></p> <p>11. <u>No.</u></p> <p>12. <u>No</u></p> <p>13. <u>No</u></p> <p>14. <u>No</u></p> <p>15. <u>Yes</u></p> <p>16. <u>No</u></p> <p>17. <u>No</u></p> <p>18. <u>Yes.</u></p> <p>19. <u>Yes. Next of kin Mrs Anne Park (Sister) Desert Austin County Kerry Ireland</u></p> |
|---|---|

NOTE.—Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, John Caldwell, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.

Signature of Recruit: John Caldwell
 Signature of Witness: Francis Hardy Bedford

Oath to be taken by Recruit on attestation.

I, John Caldwell, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, his Heirs and Successors, and that I will faithfully serve in the New Zealand Military Forces, according to my liability under the Defence Act, and that I will observe and obey all orders of His Majesty, his Heirs and Successors, and of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Magistrate or Attesting Officer.

The above questions were read to the above-named Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly and as replied to, and that said Recruit has made and signed the declaration and taken the oath before me, at Hentham Camp, N.Z., on this 8 day of

March 1918.
 Signature of Attesting Officer: [Signature]

If any alteration is required on this page of the Attestation, the Attesting Officer should be requested to make it and initial the alterations.

Description of

Caldwell, John

ON

Apparent age: *38* years *8* months
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height: *5* feet *7* inches

Weight: *10* *10* lb.

Chest measurement: { Minimum, *34* inches
Maximum, *37* inches

Complexion: *Dark*

Colour of eyes: *Brown*

Colour of hair: *Dark*

Religious profession: *C of E*

Medical Examination.

Sight: Right eye, *Normal*

Is he free from hernia? **YES**

Left eye, *Normal*

Is he free from varicocele? **YES**

Hearing: Right ear, *Normal*

Is he free from varicose veins? **YES**

Left ear, *Normal*

Is he free from haemorrhoids? **YES**

Colour-vision, *Normal*

Is he free from inveterate or contagious skin disease? **YES**

Are his limbs well formed? **YES**

Is there a distinct mark of vaccination? *Yes*

Are the movements of all his joints full and perfect? **YES**

Is he in good bodily and mental health and free from any physical defect likely to interfere with the efficient performance of his duties? **YES**

Is his chest well formed? **YES**

Is his heart normal? **YES**

Are his lungs normal? **YES**

What is the condition of his teeth? *None efficient*

Are there any slight defects, but not sufficient to cause rejection?

None efficient
BR
Remarks.

No Illness
fits
Nil

Certificate of Medical Examination.

I have examined the above-named, and find he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

I consider him fit for service in the New Zealand Expeditionary Force.

v. v 1916

Franklin MacLennan

Medical Officer.

capt

NEW ZEALAND EXPEDITIONARY FORCE. 6670

ATTESTATION OF

No 14389 Name: Caldwell John Regiment or Unit: A Coy 14th Div

Questions to be put to the Recruit before enlistment

- | | |
|--|---|
| 1. What is your name? | 1. Caldwell John |
| 2. Where were you born? | 2. Grange, County Kerry, Ireland. |
| 3. Are you a British subject? | 3. Yes. |
| 4. What is the date of your birth? | 4. ? 1878. |
| 5. Who is your next-of-kin? | 5. (sister) Mrs. P. O'Grady, Grange, County Kerry, Ireland. |
| 6. What is your trade or calling? | 6. Driver. |
| 7. Are you an indentured apprentice? If so, where, and to whom? | 7. No. |
| 8. What was the address at which you last resided? | 8. Mohan House, Grey Street, Auckland City. |
| 9. Have you passed the Fourth Educational Standard or its equivalent? | 9. Yes. |
| 10. What is the name and address of your present or last employer? | 10. City Council, Auckland. |
| 11. Are you married? | 11. No. |
| 12. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? | 12. No. |
| 13. Do you now belong to any military or naval force? If so, to what corps? | 13. No. |
| 14. Have you ever served in any military or naval force? If so, state which and cause of discharge? | 14. No. |
| 15. Have you truly stated the whole (if any) of your previous service? | 15. Yes. |
| 16. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? | 16. No. |
| 17. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? | 17. No. |
| 18. Are you willing to be vaccinated or re-vaccinated and inoculated? | 18. Yes. |
| 19. Are you willing to serve in the Expeditionary Force in or beyond the Dominion of New Zealand under the following conditions, provided your services should so long be required: For the term of the present European war, and for such further period as is necessary to bring the Expeditionary Force back to New Zealand and disband it? | 19. Yes. |

NOTE.—Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, John Caldwell, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.Signature of Recruit: John CaldwellSignature of Witness: Francis Hardy Redford

Oath to be taken by Recruit on attestation.

I, John Caldwell, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, his Heirs and Successors, and that I will faithfully serve in the New Zealand Military Forces, according to my liability under the Defence Act, and that I will observe and obey all orders of His Majesty, his Heirs and Successors, and of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Magistrate or Attesting Officer.

The above questions were read to the above-named Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly entered as applied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Penitentiary Camp, N.Z., on this 8 day ofMarch 1916.Signature of Attesting Officer: G.P.O. Sullivan

Description of

on Enlistment.

Apparent age: 38 years ? months.
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height: 5 feet 7 inches

Weight: 10 10 lb.

Chest measurement: { Minimum, 34 inches
Maximum, 37 inches

Complexion: Dark

Colour of eyes: Brown

Colour of hair: D.B.

Religious profession: C of E.

Medical Examination.

Sight: Right eye, Normal

Is he free from hernia? YES

.. Left eye, Normal

Is he free from varicocele? YES

Hearing: Right ear, Normal

Is he free from varicose veins? YES

.. Left ear, Normal

Is he free from haemorrhoids? YES

Colour vision: Normal

Is he free from inveterate or contagious skin disease? YES

Are his limbs well formed? YES

Is there a distinct mark of vaccination? ✓

Are the movements of all his joints full and perfect? YES

Is he in good bodily and mental health and free from any

Is his chest well formed? YES

physical defect likely to interfere with the efficient per-

Is his heart normal? YES

formance of his duties? YES

Are his lungs normal? YES

Are there any slight defects, but not sufficient to cause

What is the condition of his teeth? How efficient

rejection?

D.R.O.
Remarks.

No illness

No fit

Fit

Certificate of Medical Examination.

I have examined the above-named, and find he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

I consider him fit for service in the New Zealand Expeditionary Force.

2-2 1916

James MacLennan Medical Officer.

MILITARY HISTORY SHEET.

No. 14389

Name

Baldwell, John

A.C.
14th Div

	Country	From	To	Years	Days	Initials of Officer making Entry
1. Service record ...	N.Z.	7/3/16	25/6/16		111	728
	Transit 57	26/6/16	22/8/16		58	728
	England	23/8/16	6. 10. 16		46	56
	France	7/10/16				
2. Certificates ...						
3. Passed classes of instruction? <small>1 This includes any authorized class of instruction.</small>						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
8. Medals and decorations	Name of Medal	Class	Date of Grant			
9. Injuries in or by the Service						
10. Name and address of next-of-kin	(friend) Mrs. Sarah Jenkins 96 Grey St Auckland (Sister) Mrs. Anne Park Desertmartin Co. Derry Ireland					
11. Particulars as to Marriage.	<small>(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow. (b.) Place and Date of Marriage. (c.) No. of Civilizing Ministry or Registrar.</small>					
	(a.)	(b.)	(c.)			
12. Particulars as to Children.	<small>Christian Name</small>					
	<small>Date and Place of Birth</small>		<small>Where registered</small>			

Note.—These entries are to be made ~~as soon as~~ to the date they occur, and initialled by the officer making the entry.

Intended place of residence on discharge: N.Z.

STATEMENT OF THE SERVICES OF No. 14389 NAME: Caldwell, J.

Regiment or Corps.	Promotions, Reductions, Casualties, etc.	Rank.	Dates.	Signature of Officer certifying Correctness of Entries.
A Coy 1st Regt	Posted to 20454 th Pnt	Pvt	8/3/16	W. E. Champion Capt
"	Disemb'd & Deserpt (D.R.)	"	23/8/16	W. E. Champion
Auct. Coy. Posted to Res. Battalion	(Slings B.I.)	"	23/8/16	H. G. H. G.
"	EMDKO (Slings B.I.) for overseas	"	6.10.16	H. G. H. G.
1 st Bn A.I.F.	Posted (1 st A.I.F. Des't 27 th Dec. 7/16)	Pvt.	23.10.16	B. E. Champion

MEDICAL HISTORY

Surname: CaldwellChristian Name: JohnExamined: On 2nd day of Feb, 1916
At _____Birthplace: Town, County Dunc
Country, IslandDeclared age: 38 7Trade or occupation: DriverHeight: 5 ft., 4 in.Weight: 104 lb. 10Chest-measurement: Minimum, 34 in.
Maximum expansion, 37 in.

Physical development: _____

Small-pox marks: _____

Vaccination marks:

	Right	Left
Arm,	<u>None</u>	
Number,		

When vaccinated: _____

Marks indicating congenital peculiarities or previous disease:

Approved by

Kenneth Macdonald

Medical Officer,

Examined for re-engagement:

_____ day of _____, 1916

* Considered: _____

Medical Officer,

* If unfit, state disability: _____

Re-vaccinated on _____ day of _____, 1916

Arm: _____ Number: _____

Result: _____

Medical Officer,

Enlisted on 7 day of March, 1916, at Teahānui

	Corps.	Regimental No.	Date.
Joined on enlistment	<u>14 Coy 1st</u> <u>18th Bn 1914</u>	<u>14.389</u>	<u>7/3/16</u> <u>28/10/16</u>
Transferred to			

PROPOSED FOR DISCHARGE BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Services on the man becoming non-effective, the date and cause being stated at the foot of next page.

Surname: *Ballwee*
 Christian Name: *John*

Station or Troopship.	Date of Arrival at the Station or of Embarkation.	Date of				Disease.	Number of Days in Hospital.	Remarks on Nature of Disease: How followed, if mild or severe, if completely recovered from, whether any peculiar treatment was adopted. In venereal disease state nature of primary disease and whether mercury has been given. If an accident state whether it occurred on duty and whether a court of inquiry was held.	Signature of Medical Officer.
		Admission into Hospital.	Discharge from Hospital.	Day.	Mon.				
<i>Troop</i>	<i>1/20/16</i>								<i>Admit</i>
<i>Transpt 57</i>	<i>2/16/16</i>							<i>VA IN AT 21616</i>	
<i>Brookhead to Haruch (D.R.S.)</i>		<i>3-10-16</i>	<i>3-10-16</i>						

MEDICAL HISTORY
 NEW ZEALAND EXPEDITIONARY FORCE