

Received 17/8/15
Central
 AUSTRALIAN



DISCHARGED PRIOR
 LEAVING AUSTRALIA
 17/8/15
 O'Leary

WAR GRATUITY SCHEDULE

AUSTRALIAN IMPERIAL FORCE.

20
 No. _____ Name BEAUCHAMP Percy Albert
 Unit 7 Coy 2nd Lt 201
 7617
 Joined on 14. 9. 15 Depot 4th MD

Questions to be put to the Person Enlisting before Attestation.

1. What is your Name? ... 1. Percy Albert Beauchamp
2. In or near what Parish or Town were you born? ... 2. In the Parish of _____ in or near the Town of St Augustine in the County of Western Australia
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) ... 3. N.B.
4. What is your age? ... 4. 28 9/12 yrs
5. What is your trade or calling? ... 5. Baker
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? ... 6. no
7. Are you married? ... 7. (no children)
8. Who is your next of kin? (Address to be stated) ... 8. Mr Mrs Daisy Beauchamp, corner Stanley + Percy Street, Perth, South Australia
9. Have you ever been convicted by the Civil Power? ... 9. 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? ... 10. 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 ... 11. no
12. Have you stated the whole, if any, of your previous service? ... 12. yes
13. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? ... 13. 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 to you after embarkation during your term of service? ... 14. yes
15. Are you prepared to undergo inoculation against smallpox and enteric fever? ... 15. yes

Cancelled

C.P.A. REINFORCEMENTS

I, Percy Albert Beauchamp 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 + wife and children

Date 17/8/15 P.A. Beauchamp
 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.

Description of Percy Albert Beauchamp on Enlistment

Age 28 years 9 months
 Height 5 feet 8 1/4 inches
 Weight 160 lbs.
 Chest Measurement 36 39 inches
 Complexion Fresh
 Eyes Hazel
 Hair Brown
 Religious Denomination of Eng.

DISTINCTIVE MARKS.

Vvo. R. ⁶/₆ L. ⁶/₆
 Vacc 3 L

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 AUG 17 1915

Place ADELAIDE.

H. Call.

CAPTAIN

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 2. DEFOT. BN

Date 17/9/15 17.1.16

Place EXHIBITION A.F. CAMP,

Commanding ~~Officer~~ EXHIBITION

M. A. Young

JA. Reint
 Lieut

Statement of Service No. B-7617 Name P. A. Beauchamp

Unit in which served	Promotions, Reductions, Casualties, &c.	Period of Service in each Rank		Remarks
		From	To	
FCUY 2, DEFOI. BN		17/9/15	21.10.15	
1ST DEPOT BATTALION, MORPHETVILLE, F. H. Reinforce		-1 NOV 1915	15 DEC 1915	
		16/12/15	15/11/15 C/o 453/16	
Base Camp 5th Coy		17.1.16	26-1-16	to unit
of 1 Refs.		26-1-16	11-2-16	
Chapelizing	Im	12-2-16	28-3-16	Medically unfit. not the result of misconduct

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

CERTIFIED TRUE COPY:

P. A. Beauchamp
MAJOR
CO. FA REINFORCEMENTS

FIT
Bond letters to
be submitted
with
H. Card.

SCHEDULE, 3 / 109 / 1615

AUSTRALIAN



MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE.

ATTESTATION PAPER OF PERSONS ENLISTED FOR SERVICE ABROAD

No. B7617 Name BEAUCHAMP Percy Albert
Unit "F" Coy 2. DEF OT. BN Exhibition AIF Camp.
Joined on 17-9-15

Questions to be put to the Person Enlisting before Attestation.

1. What is your Name? ... 1. Percy Albert Beauchamp
2. In the Parish of ... in or near the Town of Pt. Augusta in the County of Stk Australia.
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) ... 3. N.B.
4. What is your age? ... 4. 28 1/2 yrs.
5. What is your trade or calling? ... 5. Baker
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? ... 6. NO.
7. Are you married? ... 7. Yes (no children)
8. Who is your next of kin? (Address to be stated) ... 8. Wife) Mrs Daisy Beauchamp
Corner Harvey & Percy Street
Prospect. Stk Australia.
9. Have you ever been convicted by the Civil Power? ... 9. 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? ... 10. 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 ... 11. No
12. Have you stated the whole, if any, of your previous service? ... 12. Yes
13. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? ... 13. 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 to you after embarkation during your term of service? ... 14. Yes.
15. Are you prepared to undergo inoculation against smallpox and enteric fever? ... 15. Yes.

Cancelled
MAJOR
CO., F.A. REINFORCEMENTS

Percy Albert Beauchamp 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 AUG 17 1915

Percy Albert Beauchamp
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.

AUSTRALIAN



MILITARY FORCES

C.M. Form D. 2.

(Revised 1.11.16)

P. M. O.

SEQUENCE NO. 11192

H.Q.'s C.S.

DETAILED MEDICAL HISTORY OF AN INVALID.

Station Maribyrnong Date 23.3.16
 1. Regiment or Corps 7. A Reinforcements 2. Regimental No. and Rank Gunner
 3. Name BEAUCHAMP Percy Albert 4. Age last Birthday 29
 5. (a) Enlisted 20th Sept 1915 6. Former Trade or Occupation Baker
 (b) If returned from service abroad, date of return to Australia _____

Before making out this Report read the following note carefully:-

NOTE.—The answers to the following questions are to be filled in by the Medical Officer by whom the soldier is brought forward. As the object of these questions is, in the event of the man being invalided, to put the authorities of the Military Forces of the Commonwealth in possession of the most reliable information grounded upon the opinion of those best capable of judging, so as to guide them in deciding upon the man's claim to compensation, clear and decisive answers must in all cases be given. ALL QUESTIONS MUST BE ANSWERED.

7. Disease or Disability Sciatica

In answering the following questions the Medical Officer will carefully discriminate between the man's unsupported statements on his case, and recorded evidence furnished by his documents, military and medical. He will also carefully discriminate cases entirely due to venereal disease.

8. Date of Origin of Disability Nov 1911

9. Place of Origin of Disability South Australia

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

bearing on the case For past 5 years, patient has suffered from severe pains in back of left thigh, along the great sciatic nerve: pains were worst in cold weather: in summer they were brought on by cool change in the weather. Since enlistment he has suffered more, especially in the last 2 months since he has been in Victoria

11. (a) Give your opinion as to the causation of the Disability

Exposure to cold after working at ovens in baking.

(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 3.) none of these

12. What is his present condition?

He has had fairly severe sciatic pains for the last 6 days in the left thigh. He is unable to drill & has lost sleep with the pain.

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

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to ALL 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 authorities of the Military Forces should be in possession of the most reliable information to enable them to decide upon the man's claim to pension or compensation.

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

(iii.) In answering question 23 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.

(iv.) 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.

21. State how far the Board concur with the answers to Questions 7-20—i.e., "in toto," "partially," or "not at all."

If either of the latter, give detail. In toto

22. The Board will describe the pathological condition present at time of examination by the Board

Acute exacerbation of a chronic sciatica of the left great sciatic nerve.

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

(i) No (ii) No (iii) No.

(b) If due to one of these causes, to what specific conditions do the Board attribute it? None of these.

24. Is the disability permanent?

especially as regards—

(a) Military service? Yes

(b) Previous occupation? Yes No

(c) Other occupations? No.

25. If not permanent, what is its probable minimum duration? Unable to say: depends on climate & occupation
(To be stated in months.)

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

Not at all

(In defining the extent of his liability to earn a livelihood, estimate it at 1, 1/2, 2/3, or total incapacity.)

27. If an operation was advised and declined, was the refusal unreasonable? No operation advised.

28. Do you recommend him for—

(a) Discharge as permanently unfit? Yes

or
(b) For change to another State? No.

29. General Recommendations:—

(a) Is he at present fit for discharge to earn his living? Yes

(b) Does he require further treatment to restore him to health? No

(c) If so, what does the Board recommend?

(d) Any other Recommendations none

Handwritten signature
Major, R.A.M.C.
Camp Staff
24 3.16

(If Board considers case one for compensation or pension the patient may be so informed, so he may make formal application. But he is to be informed at the same time that final decision rests with the War Pensions Board.)

Signatures:—

Station _____

Date _____

J. D. Jagger Capt. President.
F. W. Tully Capt.
A. B. Fraser Capt. Members.

Approved—

Station _____

Date _____

Director-General Medical Services.

DISTRICT HEAD QUARTERS
C.M.F. 3rd, Military District
No. *116/10/869*

A.M.F. 3RD, MILITARY DISTRICT
HEADQUARTERS CAMP STAFF
No. *16/8/1355*

Victoria Barracks.

MELBOURNE.

(1)

D.H.Q. Camp Staff.

Discharge of *BEAUCHAMP: P. I.*

7. A. Rpts 3 Battery provisionally confirmed.
H. Section Maryborough

C.M. D2's herewith.

C. McQuillan
Major A.A.M.C.
R.M.O. D.H.Q. Camp Staff.

29/3/16

(2)

T. C. O.

Maryborough CAMP.

Discharge approved. Please complete and attach

attestation papers and return without delay.

Date of discharge *28-3-16*

29/3/16

W. Shortt Lieut.
for A.A.G. 3rd M.D.H.Q. Camp Staff.



BEAUCHAMP, Percy Albert



Service No. 7617
Gunner
Field Artillery Reinforcements

Born on November 30, 1887 at Port Augusta, South Australia
Husband of Daisy Beauchamp of Prospect, South Australia
Occupation prior to enlistment – Baker
Enlisted on September 17, 1915 at Adelaide and served with the Field Artillery in Melbourne before being discharged as medically unfit on March 28, 1916 suffering from severe sciatica.

[All Australia Memorial SA Edition Section I](#)

