19956 956

DECEASED



MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE.

Attestation Paper of Persons	Enlisted for Service Abroad.
	VS Charles William L. H. Regt
Oliver to be out to the Per	son Enlisting before Attestation.
1. What is your Name!	1. Charles Colling: 2. In the Parish of Port Cedelaid C in the County of Sth Coust
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!	5. Notor Mcchanie.
5. What is your trade or calling? 6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period?	6. H.
7 Are you married 1	· sporter land
1	8. (Mather) bellew Collins.
8. Who is your next of kin? (Address to be stated)	El austi.
	· Ma
9. Have you ever been convicted by the Civil Power1	
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. H.
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 I If so, state which, and if not now serving, state cause of discharge	11. <u>J.S.</u>
12. Have you stated the whole, if any, of your previous service?	12.
13. Have you ever been rejected as unfit for His Majesty's Service 1 If so, on what grounds 1	13.
14. (For married men and wideners with children) Do you understand that to Separation illowance will be issued you other before or after embarkation to the dry our term of sergical by meantain	against Small port buttie fever? Yes
Commonwealth of Australia within the boyont	hereby voluntarily agree to serve in the Military Forces of the e Commonwealth.
And I further agree to allot not less than three-fifth for the support of my wife and children.	of the ray payable to me from time to district during my
Date Jany 20/12.	Sionature of person miliard
This clause should be bruck out in the case of unmon the first of the unife, and if there are	ried men or widowers without children undar 18 years of age. e children three fifths must be allotted.

FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.

REGIMENT CORPS	} 9th. Li	ght Horse Regt.	Squadron, Troop, Battery or Company
Regtl. No.	1100	Rank Priv	ate
Name			
	Co	llins C.W.	
Date_	2	9/11/15	
Died Place_	G	allipoli Peninsul	8
Cause	of Death *	Killed in acti	on
Natur	e and Date o	f Report Field Ret	urn 5/12/15
By wh	iom made		
* Specially state if	killed in action, or ex		Iment ion, or from illness due to field operations or to fatigue, privation, or m injury while on military duty.
Plac	e Mai	n Cemetery No. 2	Outpost Anzac.
Burial Dat	0	Not stated	
Ву	whom reporte	Brincipaln C h	aplain
		(α) in Pay Book (Arr	ny Book 64)
State whether a will or		(b) in Small Book (in	f at Base)
		(c) as a separate doc	ument

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

ation and Date	Alexandria 9/2/16	Grad Ser Grade Section o.C. Australian Records Section 5rd. Echelon, G.H.Q. M.E.F.
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25 years 7 months	DISTINCTIVE MARKS.
	-71. Y
feet 9 inches	The
	9/ 9/
surement 33 35 inches	/- /6
n bout	
Brown	
Warts n. s.	
Denomination Meth	
CERTIFICATE OF MED	ICAL EXAMINATION.
CERTIFICATE OF MED	
camined the above-named person, and	i find that he does not present any of the
roice or hearing : hernia : hæmorrho	constitution; defective intelligence; defects ids; varicose veins, beyond a limited extent;
raricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnor- al defect calculated to unfit him for the	ee of having been marked with the letters D. mal curvature of spine; or any other disease duties of a soldier. ither eye; his heart and lungs are healthy;
raricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal al defect calculated to unfit him for the e can see the required distance with e e free use of his joints and limbs; an	ce of having been marked with the letters D. mal curvature of spine; or any other disease
caricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the e can see the required distance with earther the effect use of his joints and limbs; and on.	ee of having been marked with the letters D. mal curvature of spine; or any other disease duties of a soldier. ither eye; his heart and lungs are healthy;
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caricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the e can see the required distance with ele free use of his joints and limbs; and on. consider him fit for active service.	ee of having been marked with the letters D. mal curvature of spine; or any other disease duties of a soldier. ither eye; his heart and lungs are healthy;
caricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the e can see the required distance with earther the effect use of his joints and limbs; and on.	ee of having been marked with the letters D. mal curvature of spine; or any other disease duties of a soldier. ither eye; his heart and lungs are healthy;
caricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the e can see the required distance with elefree use of his joints and limbs; and on.	ce of having been marked with the letters D. mal curvature of spine; or any other disease duties of a soldier. ither eye; his heart and lungs are healthy; d he declares he is not subject to fits of any
raricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the e can see the required distance with ele free use of his joints and limbs; and on. consider him fit for active service.	sticle; inveterate cutaneous disease; chronic ce of having been marked with the letters D. mal curvature of spine; or any other disease e duties of a soldier. ither eye; his heart and lungs are healthy; d he declares he is not subject to fits of any Signature of Examining Medical Officer.
caricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the e can see the required distance with elefree use of his joints and limbs; and on.	sticle; inveterate cutaneous disease; chronic ce of having been marked with the letters D. mal curvature of spine; or any other disease e duties of a soldier. ither eye; his heart and lungs are healthy; d he declares he is not subject to fits of any Signature of Examining Medical Officer.
caricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the ecan see the required distance with ele free use of his joints and limbs; and on. consider him fit for active service.	sticle; inveterate cutaneous disease; chrome ce of having been marked with the letters D. mal curvature of spine; or any other disease duties of a soldier. ither eye; his heart and lungs are healthy; de he declares he is not subject to fits of any Signature of Examining Medical Officer. MMANDING OFFICER. the above-named person is correct, and that
caricocele with unusually pendent test aces of corporal punishment, or evident contracted or deformed chest; abnormal defect calculated to unfit him for the e can see the required distance with ele free use of his joints and limbs; and on. consider him fit for active service.	sticle; inveterate cutaneous disease; chronic ce of having been marked with the letters D. mal curvature of spine; or any other disease duties of a soldier. ither eye; his heart and lungs are healthy; defined he declares he is not subject to fits of any signature of Examining Medical Officer. MMANDING OFFICER.

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CARD CHECKED Star.

		riod of service in each	Remarks
Unit in which served.	Promotions, Reductions, Casualties, &c.	rom— To—	P. 2.0. POH
otrength	Gosled from Reins 251	10:15	P. 2.0 36/2986
Deas L Burial	Killed in action Bullet in head Gallipole Penin 29. Buried at Main Canality	.11-15	+1 3479
737	No 2 Port angac. By C.O. Cogan Cog E.) no a	dali	2 30/
	Buried in Main Cometay ho by O. Cogan Cd. E. Angai	of orthost	9n.4.C.
	1000		15.03

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

Major.

CAMP COMMANDANT.

AUSTRALIAN



MILITARY FORCES

AUSTRALIAN IMPERIAL FORCE.

AUSTRALIAN II	WIFERIAL FORCE
Attestation Paper of Person	s Enlisted for Service Abroad.
No. 1100 Name Colle	ing charles william
Unit 8	Reinfs. 9th L. Horse.
Joined on	20th Jan. 1915.
Questions to be put to the Pe	erson Enlisting before Attestation.
1. What is your Name t	1. Charles Welliam Jolling
	near the Town of Sort Adshards
2. In or near what Parish or Town were you born ?	in the County of Set Quelyt
3. Are you a natural born British Subject or a Naturalized British Subject! (N.B.—If the latter, papers to be shown.)	5. 18.
4. What is your age?	1. 259
5. What is your trade or calling t	5. motor mechanic
6. Are you, or have you been, an Apprentice! If so, where, to whom, and for what period!	o. ho
7 Are you married 1	7. ho
wanuel	& mother) Ellen Colline
8. Who is your next of kin ? (Address to be stated)	KNICHTS DELL A Combi
9. Have you ever been convicted by the Civil Power!	. No doposite AVENUE PO HIGHEATE
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. 1920 Host of 1/3/23
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 1 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. 465
13. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds?	13. /10.
14. (For married men and widowers with children)— Do you understand that no Separation Allowance will be issued by you either before or after embartation during your term of service!	14. Small lower to the kveil too
by me to the above questions are true, and I am willing and Commonwealth of Australia within or beyond the limits of the	do solemnly declare that the above answers made hereby voluntarily agree to serve in the Military Forces of the Commonwealth.
and I further agree to allot not less than three-fifths for the support of my wife and children.	of the pay payable to me from time to time during my service
Date Jon 20/5	C W Collins
*This down should be struck out in the case of summer	Signature of person enlisted. Signature of vidouers without children under 18 years of uge.
D. 277/0.14 C. 12398.	children three-fifthe must be allotted.

And the second s	DISTINCTIVE MARKS.
Age 25 years months	61
Height 5 feet 9 inches	100
Weight 15% lbs.	6/ 6/
Chest Measurement 33 35 inches	6 /0
Complexion Mark	
Eyes Brown	7.
Hair Naul)	
Religious Denomination	
	10
HAVE examined the above-named person, and following conditions, viz. :—	I find that he does not present any of the
marked varieocele with unusually pendent test ulcers; traces of corporal punishment, or eviden- or B.C.; contracted or deformed chest; abnora- or physical defect calculated to unfit him for the	ce of having been marked with the letters D. nal curvature of spine; or any other disease
He can see the required distance with eine has the free use of his joints and limbs; and	ther eye; his heart and lungs are healthy;
	ther eye; his heart and lungs are healthy;
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service.	ther eye; his heart and lungs are healthy;
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service.	ther eye; his heart and lungs are healthy; I he declares he is not subject to fits of any
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service.	ther eye; his heart and lungs are healthy; I he declares he is not subject to fits of any
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service.	ther eye; his heart and lungs are healthy; I he declares he is not subject to fits of any
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service.	ther eye; his heart and lungs are healthy d he declares he is not subject to fits of any
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service. Date Place Consider the fit for active service Consider the fit for activ	ther eye; his heart and lungs are healthy if he declares he is not subject to fits of any signature of Examining Medical Officer.
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service.	ther eye; his heart and lungs are healthy if he declares he is not subject to fits of any signature of Examining Medical Officer.
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service. Date CERTIFICATE OF COM I CERTIFY that this Attestation of the	ther eye; his heart and lungs are healthy if he declares he is not subject to fits of any Signature of Examining Medical Officer. MANDING OFFICER.
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service. Date CERTIFICATE OF COM I CERTIFY that this Attestation of the the required forms have been complied with	ther eye; his heart and lungs are healthy if he declares he is not subject to fits of any Signature of Examining Medical Officer. MANDING OFFICER. e above-named person is correct, and that I accordingly approve, and appoint him
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service. Date CERTIFICATE OF COM I CERTIFY that this Attestation of the	ther eye; his heart and lungs are healthy if he declares he is not subject to fits of any Signature of Examining Medical Officer. MANDING OFFICER. e above-named person is correct, and that I accordingly approve, and appoint him
He can see the required distance with eine has the free use of his joints and limbs; and description. I consider him fit for active service. Date CERTIFICATE OF COM I CERTIFY that this Attestation of the the required forms have been complied with	ther eye; his heart and lungs are healthy; if he declares he is not subject to fits of any signature of Examining Medical Officer. MANDING OFFICER. e above-named person is correct, and that I accordingly approve, and appoint him

COLLINS	Chas. William (Pte)	1100	9thL.H.R.8thRft
Surname.	Other Names.	Regimental No.	Unit.
3	PUBPORT,		AUTHORITY.
Embarked at Adelai	ide per H.M.AT. "MOREA" 26/	8/15	
		-	
			- 000
25.10.15. Taken on sti	rength of Rgt. (9th L.H.R.)	T.	
	TION Bull. head. at Gallipo		
Buried Main	Cemetery No 2 Outpost Anza	c By C.O. Co.	gan
C. of E.		T.5	S. MEFO 2.5.16.
	1		
	19		
	1	The same is the	

ORDER FORM.

(AUSTRALIAN IMPERIAL FORCE).

THIS APPLICATION FORM, TOGETHER WITH THE SLIP PROOF, MUST BE RETURNED WHEN ORDERING COPIES. POSTAL ORDERS, ETC., SHOULD BE MADE PAYABLE TO THE RECEIVER OF PUBLIC MONEYS, DEPARTMENT OF DEFENCE, MELBOURNE, AND SHOULD BE CROSSED

THE REGISTER OF OF CEMETERIES.

(EMBARKATION PIER CEMETERY.) GI.18.

COLLINS, Tpr. Charles William, 1100. 9th Australian Light Horse. Killed in action 29th Nov., 1915. Age 27. Son of Charles and Ellen Collins, of Avenue Rd., Highgate, South Australia. Native of Wanbi, South Australia. I. A. 11.

53

To:—The Receiver of Public Moneys,
Department of Defence,
Victoria Barracks,
Melbourne.

£	5-	d.
		econilla.

Name

Address

THIS SPACE IS FOR OFFICIAL USE ONLY.

File Number

P.O., M.O., Cheque

Receiving Officer

FOR INSCRIPTIONS ON WAR GRAVES. FOR THE NATION'S HISTORIES. FOR THE ROLL OF HONOUR OF AUSTI

MH A

		INSCRIPTIONS ON WAR GRAVES.
1. the	According to the Official Reco- soldier's remains have not been	rds, the particulars to be inscribed on the Headstone (or Collective Memorial where a discovered) are as follow. Please correct if necessary:—
	Regimental Number and Rank	No.1100 Pte.
	Name (in full)	COLLING Charles William
	Honours and Decorations	
	Unit	9th L.H. Agt.
		29/11/15
3:	Nature of Death	Killed in Action
3.	Next of Kin	Killed in Action Kie. E. Colline, (mother)
4.	Age at Date of Death	1
5,	Parentage—	
		To be stated by
	Name of Mother	Applicant
6.	Native Place of Soldier.	
	In the case of those of Jewish	oss to be inscribed on the Headstone or not?
0		Personal Invested on 6.11 and an all and a state of
. 474	- canonat anacription—I desire	a Personal Inscription as follows, and agree to pay the cost when required:-
	NOTE-The inscription	is limited to 66 letters less the number of spaces between words, each space counting as a letter.
4		Signature of Applicant
		Relationship to Soldier
		Address
-		
1	Particulars Required for	the Roll of Honour of Australia in the Memorial War Museum.
1.	Name (in full) of Fallen Soldier.	
2,	Unit and Number (if known)	
3.	With what Town or District in	Australia was he chiefly connected (under which his name ought to come on the Memorial)—
	Town (if any)	District State
4.	What was his Birthplace	
5.	Date of Death	
6.	Place where Killed or Wounded.	
	Par	ticulars Required for the Nation's Histories.
1.	What was his Calling	
2.	Age at time of Death-	
3.	What was his School	
4.	What was his other Training	
5.	If born in Britain or Abroad, at	what age did he come to Australia
6.	Had he ever served in any Milita	ary or Naval Force before Enlisting in the A.I.F. (Please state particulars)
7.	Any other biographical details li	kely to be of interest to the Historian of the A.I.F., or of his Regiment-
8.	Was he connected with any Relationship)—	other Member of the A.I.F. who died or who distinguished himself. (Please state
9.	Name	or other person giving this information—
	Relationship to Soldier	
10.	Address ,	er persons to whom reference could be made by the Historian for further information—
10.	Address ,	



AUSTRALIAN IMPERIAL FORCE.

Telephone- 4780

BASE RECORDS OFFICE,
VICTORIA BARRACKS,

Melbourne, 9th August, 1921.

Always state Regimental Number, Rank, Full Name, and Unit of Soldier in your Communications.

Next of Kin should always notify Change of Address to Base Records, Melbourne.

Dear Madam,

I am forwarding herewith three photographs of the grave of the late No. 1100, Pte C.W. Collins, 9/L H., which I trust come safely to hand.

The inside page of the folder contains a description of the locality of the place of burial.

Action is being taken to have any incorrect particulars appearing on the temporary memorial amended forthwith.

Kindly acknowledge receipt by signing and returning the attached receipt form.

Additional copies of the photograph may be obtained at the rate of 3d. per copy, and requests for same accompanied by remittance (stamps or postal note) should be forwarded to this office for transmission to London.

Yours faithfully,

Mrs B. Collins, Post Office. Unley, S.A. rours randinarry,

Officer in Charge, Base Records.

RECEIPT SLIP.

RECEIVED from the Officer in Charge Base Records, Department of Defence, three copies of photograph of the grave of the late No. 1100 Pte C.W. Collins, 9/L.H.

(Signature)

(Date)

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

D.1871/11.20.—C.18978.—6M.

DUPLICATE Cribinal sent to A.I.F. Headquarters 9/2/16

Army Form B. 103.

Casualty Form-Active Service.

		Terms of Service (a)	Serv	rice reckons	from (a)	
	f promotion resent rank		ent		f N.C.Os.	
Extend	ed	Re-engaged_	Qualification	(è)		
Date	From whom received	Record of promotions, reductions, transfers, cavalities, etc., during active service, as reported on Army Form B. 213. Army Form A. M. or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.	
0/10	Regt.	Taken on strength	G41lipoli	28/10/15	Field Return 32.	36/2984
5/12	Regt.	Killed in action. Bullet. Head.		29/11/15	Field Return 37.	41/3479
2/1	Principa Chaplain		y No.2 outpo ANAZAC	at	550	2/301
					MallL1 Records Section, H.Q. M.E.F.	eut

No. 1100.

Private Charles William Collins, 9th Light Horse Regiment, Australian Imperial Force.

xxxxxx was killed in action.

Gallipoli Peninsula. 29th November

15.

Cable No. M.F.C.

31224, from the Officer Commanding Intermediate Base, dated Alexandria, 14th December, 1915, confirmed by Army Form B 104-52, and Army Form B 2090A.

1st November. 16.

Major.

B.O'L. D.6950.

15th May

6.

5,5417

Dear Hadam,

With reference to the report of the regrettable loss of your son, the late No. 1100, Private C. W. Collins, 9th Light Horse Regiment, I am now in receipt of advice which shows that he was killed in action at Gallipoli Peninsula, on the 29th November 1915, and was buried at Main Cemetery No. 2 Outpost, Anzac, Gallipoli, the principal Chaplaineofficiating.

These additional details are furnished by direction, it being the policy of the Department to forward all information received in connexion with deaths of members of the Australian Imperial Force.

Yours faithfully,

Officer 1/c Base Records.

Mrs. Ellen Collins, WANBI. S.A.

and

FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.

CORPS Squadron, Troop, Battery or Company	
Regtl. No. Rank Private	
Name	
Collins C.W.	
Date	
Died Place Gallipoli Penincula	
Cause of Death * Killed in action	
Nature and Date of Report Field Return 5/12/15	
By whom made	
*Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or exposure while on military duty, or from injury while on military duty.	to fatigue, privation, or
Place Main Cemetery No. 2 Outpost Anzac.	
Burial Date	
Not stated	
By whom reported Brincipal Chaplain	
Bringsparagnaplain	
(a) in Pay Book (Army Book 64)	
State whether he leaves a will or not (b) in Small Book (if at Base)	
(c) as a separate document	
	77 .7 75

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

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Signature of Officer in charge of Section Adjutant General's Office at the Base Office at the Base Station and Date

Station and Date

Alexandria 9/2/16

(4 11 3) W 497-810 200,000 4/15 HWV(P) 20.52

Signature of Officer in charge of Section Sect





