

A 151087

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MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE

ATTESTATION PAPER OF PERSONS ENLISTED FOR SERVICE ABROAD

No. 5385 Name HURLEY Albert Bails
Unit 17/10th Inf
Joined on JAN 12 1915

17th Reinf. Bn.
10th Bn.

Questions to be put to the Person Enlisting before Attestation.

1. What is your Name? ... 1. Albert Bails Hurley
2. In or near what Parish or Town were you born? ... 2. In the Parish of ... in or near the Town of Waltham in the County of South Aust.
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) ... 3. NB
4. What is your age? ... 4. 30 1/2
5. What is your trade or calling? ... 5. Driver
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 child
8. Who is your next of kin? (Address to be stated) ... 8. Wife - Mrs. Edna Hurley
Front Rd. Waltham
Waltham, South Aust.
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 in respect of your service beyond an amount which together with pay would reach 8/- per day? ... 14. Yes
15. Are you prepared to undergo inoculation against smallpox and enteric fever? ... 15. Yes

I, Albert Bails Hurley 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

JAN 12 1915

A B Hurley

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 Robert Bails Hurley on Enlistment

Age 30 years 7 months
 Height 5 feet 7 inches
 Weight 146 lbs.
 Chest Measurement 35-37 inches
 Complexion Medium
 Eyes Blue
 Hair Dark
 Religious Denomination Ch. Eng.

DISTINCTIVE MARKS.

No R 6 L 6

Vac 42

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 Jan 12th 1916
 Place ADELAIDE.

R.D. Drummond
H. A. S. S. S. S. S.
 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 B. Coy 2ND DEPOT BATTALION A.I.F.

Date JAN 31 1916
 Place Adelaide

M. Hancock LT. COL.
 CAMP COMMANDANT
 Commanding 2ND DEPOT BATTALION A.I.F.

Emb. Sum. Aus. 11/4/16 L. Baird.

B 103 France L 8894 22/10/18.

Statement of Service No. 5385 Name Murley A. B.

Unit in which served	Promotions, Reductions, Casualties, &c.	Period of Service in each Rank		Remarks
		From	To	
B Coy 2nd depot. Metcham 7/10		24.1.16	29.2.16	
		1.3.16		
		1.8.16		
	Proceeding O/Seas	5.9.16.		PT 53/1794E. 13/10/16
	Pl. Adm. to Horton war			do 80/6634 14/10/16
	Asst. Engr. for Koonung	England	9.10.17	W.S. 562 - H.R. 346
B 103 in France	Pl. "Embarcation de Bombardement" for Eng. Gas Shell Co.		9.10.17	PT 69/6169 10.11.17
	2.0.5 of 10" Bln from Reinf. France	France	19.9.16	Do 53/7891 12/10/16
	Wounded in action France.	do.	2.10.17	PT 66/5790 23/10/17
10 Bn	Pl. joined to Bln from 10 Bn in the field	France	17.9.16	Duplicate Do 53/7891 12/10/16
	Pl. Proc O/Seas. etc L/Bridge Devissill	via Southampton	14.10.18	Do 104/1102 E (1915) L 8894
				0046/4414 1918.
				447/2507 "
				47/301 1919
				213414/A151087 19/5/19
				L 6330.

RETURN TO AUSTRALIA
For Sudan from Eng. 12.5.19.
For

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

AUSTRALIAN



MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE.

ATTESTATION PAPER OF PERSONS ENLISTED FOR SERVICE ABROAD

No. 41392

Name HURLEY Albert Bails

5385

Unit 2nd DEPOT BATTALION, A.I.F.

Joined on JAN 12 1915

Questions to be put to the Person Enlisting before Attestation.

1. What is your Name? Albert Bails Hurley
2. In or near what Parish or Town were you born? near the Town of Hay Mills in the County of South Australia
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) No
4. What is your age? 30 7/12
5. What is your trade or calling? Driver
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? No
7. Are you married? No
8. Who is your next of kin? (Address to be stated) STATE TO BE DECEASED (wife) Mrs. Agnes Hurley Government Road, Gaydon, South Australia
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 26 Ellen St. PROSPECT, S.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 to you in respect of your service beyond an amount which together with pay would reach 8/- per day? Yes
15. Are you prepared to undergo inoculation against smallpox and enteric fever? Yes

Albert Bails Hurley 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

JAN 12 1915

A B Hurley

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.

Statement of Service No.

Name

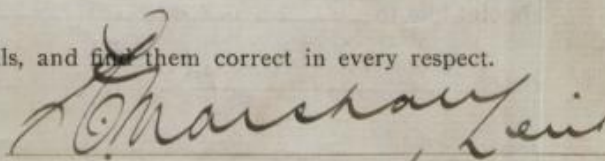
HURLEY

Alvar. Rails

Unit in which served	Promotions, Reductions, Casualties, &c.	Period of Service in each Rank		Remarks
		From	To	
B. COY. 2ND DEPOT BATTALION 17/10 th Infly.	Private.	24/1/16	29.2.16.	
		1.3.16.		
10 th Bn. ^{Pte.}	Discharged 4 th M. D.	JPG	11/8/19	BRM 28/11/06 ^{Pte.}

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

CERTIFIED TRUE COPY.



 Major,
 CAMP COMMANDANT,

Station **KESWICK**

Date **27 JUN 1919** AUSTRALIAN



MILITARY FORCES.

A.M. Form D2.
(For use in Australia.)
Revised 1.4.19.

MEDICAL REPORT ON AN INVALID.

1. Number **5385** 2. Rank **PTC** 3. Name **Hurley A B**
4. Unit **10 BATT** 5. Age **34** 6. Trade or Occupation **Driver**
7. Place of Enlistment **Andamook** 7A. Date of Enlistment **12/1/1916**
8. Disability in respect of which invaliding is proposed **C. O. F. H.**

MEDICAL OFFICER'S STATEMENT OF CASE.

(Soldier's own statement must be carefully recorded as such, and signed by him.)

9. Date and place of origin of disability _____ Date of arrival from overseas **Soudan**
10. Date and place where disability first caused man to become a Casualty **26 JUN 1919**
11. Essential facts of Medical History (including causation) _____

*C. O. F. H.
The gas in 20/10/1917 & ill
5 months now feels well
A B Hurley*

12. State whether disability was (a) Due to Military Service, (b) Aggravated by Military Service, or (c) Independent of Military Service; (d) Due to, or aggravated by, want of proper care on man's part, intemperance, misconduct, etc.

13. What is his present condition and progress?

HEART ✓

LUNGS ✓

URINE ✓

SCARS *nil*

14. If the disability is an injury, state whether it was caused (a) in action, (b) on field service, (c) on duty, (d) off duty

15. If a Court of Inquiry was held, state place, date, and opinion

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

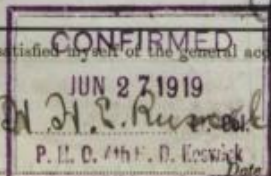
17. Was an operation advised, and declined?

18. In the case of loss or decay of teeth—Was it due to, aggravated by, or independent of, Military Service?

19. Give particulars of any other disabilities existing

20. Do you recommend discharge as permanently unfit for general service?

I, having satisfied myself of the general accuracy of this report, concur therewith, except



Medical Officer in charge of case

Officer in charge of Hospital.

Station

D.1399/5.19—C.5735—200X.

4

Registration, Alteration, or Change of Next-of-Kin and Address. AM223Reg. No. 5285 Rank _____ Name (in full) Hurley A.B. ✓Unit 14/10th Btn

Next-of-Kin previously Registered-

Relationship Wife

Name (in full) _____

Address _____

Unit - To note and file with

ATTESTATION PAPER

Next-of-Kin now changed to-

Relationship WifeName (in full) Mrs. A. A. HurleyPostal Address (in full) Yusuf Road, Brompton Park, S.W.

Reason for Change _____

Date _____

Signature Auth 4327/3/1. 28/10/14.
Person desiring change.

This form must be passed to Verification Dept., "A" Records, for recording change.

Entered on Index Card _____

Notification to Defence made _____

3. A.I.F.
Form 8103 Part I.

Service and Casualty
Form.

PART I.

W-8/18-12244.

Nothing to be written in this Margin.

(1) PRESENT UNIT	10TH BATTALION.		(2) Regtl. No. 5385
(3) Present Rank Pte	(4) SURNAME HURLEY		
(5) Decorations	(6) Christian Names. Albert Bails.		
Particulars. 40256.			
(7) Date of Enlistment 12/1/15.	(8) Place of Enlistment Adelaide S.A.		
(9) Age on Enlistment 30 Years 7/12. Months	(10) Any subsequent claim *as to age after veri- fication of Birth Certificate Auth. C.R. / /		
(11) Birthplace Walkerville S.A.	(12) Religion C.of E.		
(14) Trade or Calling Driver	(13) If Married Yes.		
(16) Date of Embarkation from Australia 11/4/16.	(15) If an Apprentice No.		
(18)	(17) Whereabouts of Next of Kin, i.e. Australia or Abroad Aust.		
(19)			
(20)	(21) Special Notification Card No.		
(22)			

Casualty Form - Active Service.

Army Form B. 103.

MD4
 Regiment or Corps 17th R. Inf. 10th Batta
 Rank Pte Name Swirey, A. B. Herbert Baits
 (a) 17/16 Terms of Service (a) _____ Service reckons from (a) _____
 promotion to }
 ent rank } Date of appointment } Numerical position on }
 to lance rank } to lance rank } roll of N.C.O's. }
 d. _____ Re-engaged _____ Qualification (b) _____

REPORT		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority for each entry must be stated.		Remarks taken from Army Form B. 213, Army Form A. 36 or other official documents.	
Date	From whom received	Place	Date		
7/9/16	4/13/16	Proceeded Overseas France	11-4-16	Auth. R. Card. Pte 58/1974E	
21-9-16	CO 10-En	Taken on Strength from 10th Batta	3/9/16	0213/331 EPI 1/31	
6/10/17	CO 10 B.	Wounded in action	3/10/17	H 71/40. 5713	
3/10/17	3rd Lt. H. M.	Gassed shell	3/10/17	AK 1720/34	
6/10/17	3rd Lt. H. M.	Gassed shell (lethal)	4/10/17	AK 1720/52	
5/10/17	1st Lt. H. M.	W. Gas shell.	5/10/17	AK 1720/46	
9/10/17	"	(N) Gas Poison shell To England	9/10/17	AK 1720/59	
9/10/17	1st Lt. H. M.	(N) Shell Gas To England	9/10/17	AK 1720/64	
9/10/17	1st Lt. H. M.	Pte/Adm. Gas	9/10/17	D 080/66 3/4 E 20-10-17	
		Had Poisoning	9/10/17	WS 562 HR 396	

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

REPORT		Record of promotions, reductions, transfers, casualties, &c., 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.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
12.12.17.	3 rd Quacy Hosp.	Pt/Adm 7-12-17. Hurl 12.12.17 - 26.12.17 7 Rept to No 3 Comd Gp. Hurdcott.	Dartford	26.12.17	
5.2.18.	No 4 C Gp. D.S.	Pt/Sick to Camp Isol: Hosp. (Seabies)	Hurdcott.	5.2.18.	L B 1245.
10.2.18.	No 4 C Gp. (D.S.)	Pt/In/2n from Camp. Isol: Hosp.	Hurdcott.	10.2.18.	L G 1245.
24.6.18.	O/S Y. Bde D/S.	Pt/In/2n from No 4 C Gp. Hurdcott.	Deverill	24.6.18.	L H 5299.
24.6.18.	No 4 C Gp. D/S.	Pt/In/6 to 9 Seas Y. Bde	Hurdcott	24.6.18.	L H 5296.
17.10.18.	O/S Y. Bde	Pt/Pro: 9 Seas to France via Longbridge Deverill	via Shampton	17.10.18.	L 8894. Do 104/1 E 1918.
18.10.18	A.B.R.D.	Marched in Ex. England	Home.	18.10.18	AK 3146/85. DO 76/111
19.10.18	"	PROCEEDED TO UNIT	"	19.10.18	AK 3146/84.
26.10.18	60.10.18	Rejoined from Hospital	Field	20.10.18	CT 21/94.
29.3.19	"	Pt On O for R.S. A Draft	"	24.3.19	Q 21 117
4.4.19	A.B.D.	Pt Emb. for England	Home	3.4.19	LX 4424 DO 74/301 14.4.19
4.4.19	E.S.D.	Pt Disemb: 8 Hampton	Eng.	4.4.19	LX 4424.
4.4.19	O/S Y. Bde	Pt In 2 to France	"	4.4.19	LX 4424.

DIED AFTER DISCHARGE.

PLACE... 13.3.1931... DATE... 15.12.1931...

INTERRED A.I.F. Cemetery, West
Terrace, Adelaide, S.A. See M. 54/921
ex Secretary, Cemetery Trust.
13.3.1931

Transferred to

D

AUSTRALIAN IMPERIAL FORCE.

No. 5385

Dies after discharge

Rank Private

Name HURLEY, A. B.

Unit

10th Bn

LIST.

353

Casualty Gas poisoning

admitted 9-10-17 Horton

County London War Hospital W.S.M. 4562, 121 N dated London 18-10-17 SR

Only to Shet. per H. T. "London" embarked 12/5/19

C.I.B.L. 5453/6096, did Lon. 16/5/19 Rec.B.R. 26/5/19

3/4 2

Returned to Australia per A. London

Disembarked 4 M.D. 26/6/19 List 27th. C.M.

DATE

Form B. 103. Revised

PURPORT

REF. NO.

OCT 29 1917

10/6/19

M.O.K. Advised in Hospital

M.O.K. Advised Returning to Australia. Form AB

WAR HISTORY INDEX



11-8-19

Discharged M.D.