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AUSTRALIAN IN	MPERIAL FORCES.
Attestation Paper of Persons	Enlisted for Service Abroad.
	Leslie David
10011	desire david
50 Bast. Unit of 9/10 B	the the training way
50th BATTA Joined on 14	16/15
Questions to be put to the Per	son Enlisting before Attestation.
1. What is your Name 1 PAY BOOK NO.	1 Leslie David Sanderry 2. In the Parish of in or
	p1 1-
2. In or near what Parish or Town were you born 1	near the Town of Trospect
	in the County of Caus
3. Are you a natural born British Subject or a Naturalized British Subject (N.B.—If the latter, papers to be shown.)	s. NB
4. What is your age?	4. 22/12 yrs
5. What is your trade or calling t	5. Grocer
6. Are you, or have you been, an Apprentice If so, where, to whom, and for what period	6. No
7. Are you married t	Mother Mrs Amelia Grace
8. Who is your next of kin i (Address to be stated)	Sandery Prospect thoad
9. Have you ever been convicted by the Civil Power†	. Bad Language (Find)
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 West Madicitud Sondery 21 Pandora Red.
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 My/891 Loss
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. APPLICATION FOR WAS BEST OF THE TAXE OF THE PROPERTY OF TH
14. (For married men, widowers with children, and soldiers who are the sole support of widowed mother) Do you understand that no Separation Allowence will be issued	LEAVE GRATUITY PABLES APR 25 1810
to you after embarkation during your term of service?) 15. Are you prepared to undergo inoculation against small pox?	0100 No. No. 35799
and enterio fever!	15. <u>yes</u>
Commonwealth of Australia within or beyond the limits of the	
anto-atus	of the pay payable to me from time to time during my service
for the support of my wife and children.	10 10 10
Data 9 101 1915	S. W. Sandery. Signature of person entitled.
*This clause should be struck out in the case of unmarri	Signature of person entitled.

† Two-fifths must be allotted to the wife, and if there are children three-fifths must be allotted,

				1
Statement of Serv	ice of No. 28// Name	2	1.6.1	landery
Unit in which served.	Promotions, Reductions, Casualties, &c.	PAI	rvice in each	Bemarks.
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o organisep		19/15	18-3-16	Chauft to 12 1 Control
	Sapper	1.0		
50* Bast.	Private	2-4-16	30.6.16	Trans. fro
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I have even in	d the above details, and find them	correct in	avery reche	d

NDANT.

CAMPO

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Casualty For	rm-Active Service.	2
	Battahon, a.	17.
Regimental No 2811. Rank Rank	Phane Sondery	I. R. Roele Davin
Enlisted (a) Terms of Service (a)		
Date of promotion to present rank Date of appoin to lance ran		al position on 3213.
Extended Re-engaged	Qualification (i)	
Report Record of promotions, reductions, transfers, assumities, etc., during active service, as reported as Army Form b, 213, Army Form A. M. or in other official documents. The authority to be quired in each docu-	Place Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	ce alexandera 39/14/15	03104
27/11/15 C.O. Batt. Taken on strength of	Mudros W 25/11/15	B 213
Battalion from reinfs.	OC .	01/119
a do Rejoined for Delac	ila Serapeur a/3/4	9213/US- 19.128841 0211
	1//	7.1-3041 024
8416 CO Taken on strength	Serapeum 2416	R213 AL439
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2 9.7:6 An Irbe Jance borpora	el Intheficle 1716	92992
(a) In the case of a man who has re-engaged far, as collated into Sec. (b) e.g., Signallar. Shooting Smith, etc., otc.,		ment of enlistment will be entered. [P.T.O
acps and manifestor, and the		
faithfully discharge my duty according to law		
So Help M	de, God.	
	.00	
	L. W. Landery	
	Signature of Person	n Entisted,
Taken and subscribed at Kesure	ch_in	
the State of South Nus		
this day	of	
1.4 JUN 1975 19/5 , before	me—	
	Coy	1
	(Wowers	Capi
	Signature of Attest	ing Officer.

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

Date	From whoms secured	Record of promotions, reductions, transfers, casualties, em., during active services, as reported on Amy Form B. 415, Atpp. Form A. 36, or in other set had documents. The authority to be quoted in each time.	Place	Date	taken from Army Form B. 213, Army Form A. 185, or other official documents.
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		description.			
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					Signature of Examining Medi
				H 1000	
	1	CEI	RTIFICATE O	F COMM	IANDING OFFICER.
					above-named person is co
		O HK Round	ave been compl	Hy.	I accordingly approve, an
		10 / vary		5	a lour
		Date //9/15		TV	Suskellages
		Place Moster	han		Camp Com

Entitled to 1914/15 Star. Statement of Service of No. Name Period of service in each rank. Unit in which served. Promotions, Reductions, Casualties, &c. From-To-SEP 2 1 1915 TAKEN ON STRENGTH FROM ows asper REJOINED UNIT FROM Quanto 9/3/6 Taken on Strength 50th Batn.2,4.18 1.4.16 WOUNDED in action France al Bonlogne for England R. Ruphered Blobe. 17.8.16 adn to 2nd London Gen Hosp. Chelsea (Ship Ild night eye Levers) Jaken on strength of details boy from Weymouth Southall 17-1-17 adm. 2 nd asusc. Hosp. Loss of Eye. Southall 45 14.3.14 Z.R 450 Lable In to had lom befol I have examined the above details, and find them correct in every respect. Discharged 4 th M. D. (W.) 28. 10.14. B. RX leapy sent to Tensions 8/12/14 Hey are to thomotion that come through or dees

Medical Report on an Invalid. Station Date Station Date Station Station Station State of State	Army Form B. 179.
Station 15 MAR 1917 Date 15 MAR 1917 Date 15 MAR 1917 S. Age last birthday 23 2. Regimental No. 28 11 3. Rank Lapt 23 6. Enlisted on at Share adolesped 4. Name S'ANDERY. Leslic or Occupation Share Indeed at Share adolesped 8. Disability. Removal Right lapt 15 Mee Indeed 15 M	
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Date Date Date Comparison Scious State 1. Unit 50 - 18 MT2 2. Regimental No. 3. Rank 4. Name SANDERY. Lesling 7. Former Trade Shire Normal Right lay 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 concredity the essential facts of the history of the disability. 12. 8. 16 14. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Many artificial type Many Agents to the fill of the phase of the support of the disability. 15. 8. 16 Has artificial type Many Agents to the right type y necessitating on the case. Many artificial type	Station Station 15 MAR 1917
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	11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. dustrowning the right eye 4 meanstating
19 (a) Give your oninion as to the causa- Chramul wound Right eye	Has artificial eye
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19 (a) Give your oninion as to the causa- Chramul wound Right eye	
19 (a) Give your oninion as to the causa- Shramul wound Right eye	
tion of the disability.	12. (a) Give your opinion as to the causa- Chrapul would hight eye
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 3).	which you attribute it (See notes

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.
right eye distroyed sight &
night eye distroyed sight of the eye
Has an artificial eye. 15.8.16
50 2 11 WHE 23
1/32
the state of the s
SAMDERY L
14. If the disability is an injury, was it caused
(a) In action?
(b) On field service?
(c) On duty?
(d) Off duty? . Wo
15. Was a Court of Inquiry held on the injury?
If so-(a) When? If not applicable
(b) Where?
(c) Opinion?
16. Was an operation performed? It so, his Removal of Right eye
17. If not, was an operation advised and Nor 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?
19. Do you recommend
(a) Discharge as permanently unfit, NO (3) or (b) Change to Eastland? Australia. NO
Myll cape
Officer in medical charge of case.
I have satisfied myself of the general accuracy of this report, and concur therewith,
Station 18 MAR 1917) A Martin Sell

† 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. (b) If due to one of these causes, to what specific conditions do the Board attribute it?		Service borned Right	Permanently unfit
			y wn
21. Has the disability been aggravated by (a) Intemperance?	no		fit for
(b) Misconduct? (c) Any of the conditions mentioned in question 20, and if so, which?	no		general
	not ap	shielle	Sgd. C.
minimum duration? To be stated in months.			C. Ce
24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?	4		fit for Ryan. C
In defining the extent of his inability to earn a livelihood, estimate it at \(\frac{1}{4}, \frac{1}{4}, \frac{3}{4}.\)			Col.
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?	no	11:11	res
25. If an operation was advised and declined, was the refusal unreasonable?	not as	phiani	2 Levisa
25. If an operation was advised and declined, was the refusal unreasonable? 26. Do the Board recommend **Manager** (a) Discharge as permanently unfit,	Resmany by	illy unifor P	om Perine
(b) Change to England?			
Signatures :—	0		

Members.

Administrative Medical Officer.

Station,

Station

Date_

Approved.

Date.

THE CHIEF PAYMASTER.

ADMINISTRATIVE HEADQUARTERS. A. I. F.

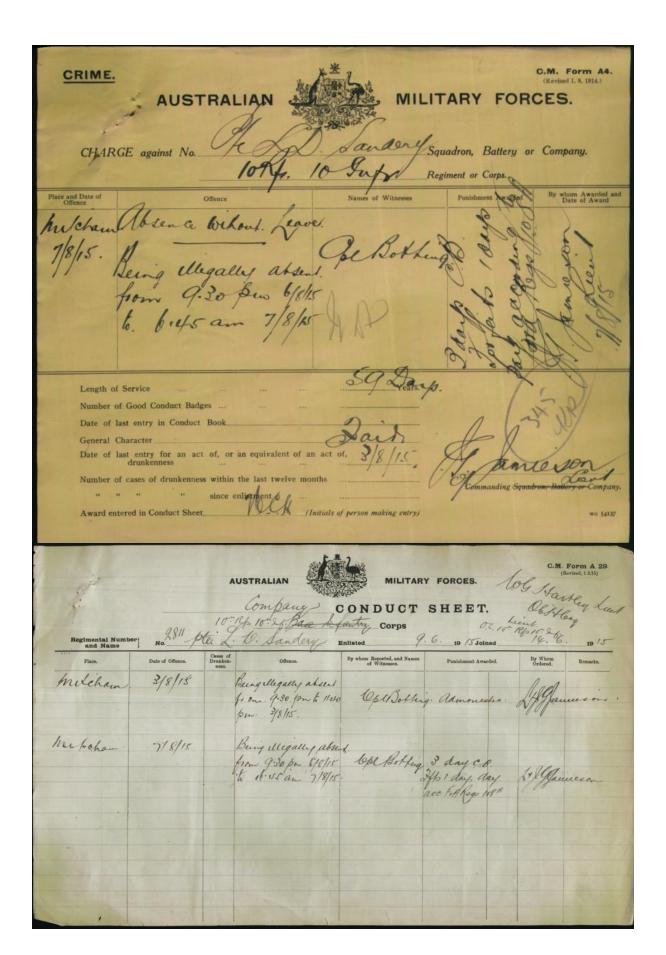
Non Effective Statement.

MF.A.32132

TRANSFERS.				Embarkation	
O.O. OI DOWN DA				Date 2.4.16. B213	Reference AL.439 D08/17
PROMOTIONS, APPOINTMENT	S and REV	ERSIONS.		1	200 70 00 (000
o be L/Cpl				1.7.16. Ad.	992 DO.23/3076
	4.				
FORFEITURES, CRIMES, V.	D., Etc.			11	
	-3				
CAUSE OF BECOMING NON E	a per "/	" 71 for	OF CASUALTY		.6259 DO.58/8
OME SERVICE (REMOVA	L of Rt	EYE)		11	1.8.17.

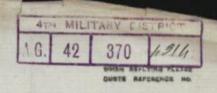
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REGISTRATION, ALTERATION, OR CHANGE OF ADDRESS OF NEXT OF KIN
Rog. No. 2611 Rank Lichtgit 50 this
Name LA Lan acry
N-O-K previously registered as (Relationship) Mother.
Name Mrs. a. G. Sandery
Address Prospect Rd, Prospect, S. aust
To be now recorded as (Relationship) (4)
Hame Mrs alice mily landery
Full postal address V/ Kan dord Rd West Blangs stead
Romerks_ Roldier married London NW
Signature of authority No. L. W. Landery.
"Special notification of casualty" cards are provided for notification purposes. Legal N-O-K only can be registered on attestation Paper. In cases where an Alteration of N-O-K
is involved the reason therefore should be stated in Remarks column.
To be referred to Records Section for recording on Card and notification of all concerned.
To be referred to Records Section for recording on Card and notification of all concerned.
\(\tau_{\text{*}}\)



RTA 22	-7-17 A3	2132
		-/1
TO BE PASSED TO O/C No. 1 Sub-Sect	ion "A" RECORDS (10 A	1
	OF MARRIAGE OF-	CR4326=1-4
Reg. Ne. Rank Sandery Name	where the same of	It.
2811 3811 & CDL. Candery.	V. VX. 201	3n.
Date & place By whom Maiden name of Marrage married. of wife.		ent address wife.
30.1.14. Not Birla	O Ohnam.	
Hampstead known dice	yancs.	
Partice of Marriage . m 202. By	9. P. Dat	0 16.4.8
and the state of t	Jac	
Verification card shows N. of K. as	wife mas al	& Sandery
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Action taken:-	Date MIMAY ID	18 Page Form Z. 3.
Action taken:-	Date TIMAY 10	Page Form Z. 3.
Action taken:-	COMMISSIONER PR 1 8 1918 Statement No OF PENSIONS. (This statement con	Page Form Z. 3. 195 ttains # sheets.
Action taken:- Defence advised ner Idst Nos- EXPIRIES. CANCELLATIONS ETC.	COMMISSIONER PR 1 8 1918 Statement No OF PENSIONS. (This statement con	Page Form Z. 3. 195 ttains # sheets.
Statement of WAR PENSION CLAIMS (State of London 1. Full name of Member of Fores in respect of whose death or incapacity pension was	COMMISSIONER PR 1 8 1918 Statement No OF PENSIONS. (This statement con	Page Form Z. 3. 195 ttains # sheets.
Statement of WAR PENSION CLAIMS (State of London 1. Full name of Member of Forces in respect of whose death or incapacity pension was claimed	COMMISSIONER PR 1 8 1918 Statement No OF PENSIONS. (This statement con MILITARY) which have	Form Z. 3. 195 Atains
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Statement of WAR PENSION CLAIMS (Statement of War Pension Claims (State of London 1. Full name of Member of Forces in respect of whose death or incapacity pension was claimed	COMMISSIONER PR 1 8 1918 Statement No OF PENSIONS. (This statement con MILITARY) which have rid Sendery Cpl. 70th Bettn.	Form Z. 3. 195 18
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1. Full name of Member of Forces in respect of whose death or incapacity pension was Baloclaimed	Leslie David Sandery State of London 177 2811. L/Cpl. 70th Battn. Date
5. Result of Claim	Wife 15/- p.f. Com. 24.10.17. Rev. when advised by Australia.
Full name of Member of Forces in respect of whose death or incapacity pension was D. 10 Shimed	
3. Full name and address of person for whom pension was claimed 4. Relationship of such person to Member of	ada Lilian Ethel Sandery, (above address)
5. Result of Claim	10/- p.f. Com. 24.10.17. Rev. when advised by Australia





AUSTRALIAN MILITARY FORCES.

4TH MILITARY DISTRICT.

TELEPHONE NUMBERS

KFSWICK BARRACKS,

ADPIAIDF. NOV 141917

191 .

Officer in Charge.

Base Records.

Victoria Barracks,

MELBOURNE.

The under-mentioned soldier has been handed his discharge. Medical Board Proceedings and other documents, as follows, forwarded herewith: - B.179, B.178, B.122, A29.

No. 2811 Rank. L/Cpl.

Name. SAMDERY L.D.

Unit. 50th Battn.

Date of Attestation.

14/6/15

Date of Embarkation.

21/9/15

Date of Disembarkation 21/9/17

Ex... Nestor ..

Reason For Discharge. MEDICALLY UNFIT (NOT DUE TO MISCONDUCT.)
Date of Discharge. 23/10/17.

Total Service.

2 years 132 days.

Service Abroad.

2 years 1 day.

Character.

GOOD.

Account Adjusted in PART

MANUEL TANK

Hattaniphely

LIEUT

S.O. INVALIES & RETURNED SCEDIFRS. 4th M.D.

List in the case of Warrant Officers treated in quarters. ks 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 tome Service Remore Part 2

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

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Hammock

4TH MILITARY RICT 4314

Medical Report on an Invalid.

L5 MAR. 1917 Station_ Date_

50 - 13 all= 1. Unit

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2. Regimental No. 28112 L. Ope 3. Rank

VERIFIED

23 JUN1917

S'ANDERY. Leslie Daired To Former Trade or Occupation

5. Age last birthday

6. Enlisted on

8. Disability.

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Horeman

al & Right Eye

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.

9. Date of origin of disability.

10. Place of origin of disability.

12. 8. 16

Somme-

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Authority the right eye & nevertility to removal 15. 8. 16.

Has artificial eye.

(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, ex-plain the specific conditions to which you attribute it (See notes on page 3).

thrapul would Right eye

Carpon and the said

active Service

AUSTRALIAN IMPERIAL FORCE.

Hase Records Office, Victoria Farracia Marmounte

Dear Madam,

I now beg to advise you that information has been No, 2811 Lance Corporal L. D. Sandery,

received to the effect that

was admitted to the from loss feye. 2nd Auxiliary Hospital 17/1/17, suffering

His postal address will therefore be:2811 Lance Corporal L. D. Sandery,
SIOK. No. 50th (late 10th) Battalion

0/o A. I. F. Headquarters, 130 Horseferry Read, Westminster, LONDON. E.W.

The word "SICK" must be written prominently in RED TORK

Any further reports received will be promptly

transmitted. Mrs. A. G. Sandery,

Prospect. S.A.

Yours faithfully,

J. M. LBAN. Major, Officer i/o Basa Records.__

MRS. A.G. SANDERY PROSPECT ROAD PROSPECT S.A. NOW REPORTED SON LANCE CORPORAL LEGLIE D. SANDERY RETURNED TO DUTY WILL PROMPTLY ADVISE IF ANYTHING FURTHER RECEIVED BASE RECORDS 10/10/16

HW. MRS. A. G. SANDERY PROSPECT ROAD PROSPECT S.A. REGRET REPORTED SON LANCE CORPORAL LESTIE D. BANDERY ADMITTED 2nd LONDON GENERAL HOSPITAL 17th AUGUST CUMSHOT WOUNDERF SEVERE WILL PROMPTLY ADVISE IF ANYTHING FURTH R RECEIVED BASE RECORDS 21/9/16

