

NAA: B2455, GRIFFITHS T L

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Number of pages: 44

Title: GRIFFITHS Thomas Lester: Service Number - 35202: Place of Birth - Broken Hill NSW: Place of

Enlistment - Adelaide SA: Next of Kin - (Wife) GRIFFITHS Gertrude S

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AUSTRALIAN



MILITARY FORCES.

DENTAL "B" CLASS

AUSTRALIAN IMPERIAL FORCE.

	Attestation Paper of Person	18	and the state of t
IVO	Unit F.A. abril Reinforce		A Committee of the Comm
	Joined on SEP 281916		All a second and a second as a
Q	uestions to be put to the Pe	rso	n Enlisting before Attestment
1.	What is your Name? PAY BOOK N	0. 1.	Thomas Lestor Grifiths
2.	In or near what Parish or Town were you born?		near the Town of Broken Hill in the County of Lew South Wales
3.	Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.)	3.	Valural Born
4.	What is your Age?	4:	32 /12 years
5.	What is your Trade or Calling?	5.	Solicitor
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
01	Who is your part of him? (Address to be stated)	8(WAFE) GRIFFITHS. GERTRUDE SARAH MR CLOMPS ANDREWS BIRNE AV BEULAHES
RI	Who is your next of kin? (Address to be stated)		ROELRIDE SOUTH AUSTRALIA
9.	Have you ever been convicted by the Civil Power?	9.	Mo la
7	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.	HO 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.	do
12.	Have you stated the wole, if any, of your previous service?	12.	yes
3.	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 yes
15.	Are you prepared to undergo inoculation against t smallpox and enteric fever?	15.	yes
	a Homas Lailer Gellithe		A CONTRACTOR OF THE PARTY OF TH
	me to the above questions are true, and I am willing a the Commonwealth of Australia within or beyond the		
-	And I further agree to allot not less than two-fift		the pay payable to me from time to time during my
ser	vice for the support of my wife * † wife and children	C.	710.
	Date SEP 2 81916		OMUSATUS Signature of Person Enlisted.
	* This Clause should be struck out in the case of unmarry	ied men	- Ar 400

CERTIFICATE OF ATTESTING OFFICER.

The foregoing questions were read to the person enlisted in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to by him.

M. I have examined his naturalization papers and am of opinion that they are correct.

(This to be struck out except in the case of Persons who are naturalized British Subjects.)

Date SEP 2 81916

Signature of Attesting OfficenLIEUT.

OATH TO BE TAKEN BY PERSON BEING ENLISTED.

mell and truly serve our Sovereign Lord the King in the Australian Imperial Force from SEP 281916 until the end of the War, and a further period of four months thereafter unless sooner lawfully discharged, dismissed or removed therefrom; and that I will resist His Majesty's enemies and cause His Majesty's peace to be kept and maintained; and that I will in all matters appertaining to my service, faithfully discharge my duty according to law.

SO HELP ME GOD.

Signature of Person Enlisted.

the State of SOUTH AUSTRALIA.

this SEP 281916 day of

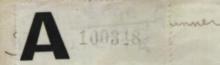
19 , before me-

Signature of Attesting Officer. LIEUT.

A person who objects to taking an oath may make an affirmation in accordance with the Third Schedule of the Act and the above form must be amended accordingly. All admendments must be initialled by the Attesting Officer.

Age 23 years 9 months 5 feet 7/2 _inches Weight 134 Chest Measurement 36 - 38 Complexion Fair Eyes Blue Religious Denomination 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 11-9-16 ADELAIDE. Place 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 F.A. april Reinforcemon (South Aug.) I 4 MAY 1917 Commanding FA april Reinforce (South Aus.) Place MARIBYRNON

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Unit in which served Promotions, Reductions, Ca	asualties, &c.	From	То	Remarks	
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AUSTRALIAN



MILITARY FORCES.

Signature of Person Enlisted.

AUSTRALIAN IMPERIAL FORCE.

Attestation Paper of Persons Enlisted for Service Abroad.

2.4/5	OMAS LESTER
Unit F.A. Reinfercen Joined on SEP 281916	nents S. A.
Questions to be put to the Per 1. What is your Name?	2. In the Parish of Broken Loud in the County of Lew South Walso
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.)	alural Born 323 129/2 years Solicitor
6. Are you, or have you been an Apprentice? If so, where, to whom, and for what period?	6. No
8. Who is your next of kin? (Address to be stated) The answer to this question shall not be construed as in the nature of a Win. 9. Have you ever been convicted by the Civil Power?	8 WIFE GRIFFITHS GERTRUDE SARAH! COMAS ANDREWS BIRNIE RY BEULAH ADELAIDE 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 No
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	II. No
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?	4 Thes you Hill:
15. Are you prepared to undergo inoculation against (smallpox and enteric fever?	15. January deploye that the above answers made
of the Commonwealth of Australia within or beyond the land I further agree to allot not less than two-fift	do solemnly declare that the above answers made and hereby voluntarily agree to serve in the Military Forces limits of the Commonwealth. hs of the pay payable to me from time to time during my
service for the support of my wife * † SEP 2 81916	1. Muisites

^{*} 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.

CERTIFICATE OF ATTESTING OFFICER.

The foregoing questions were read to the person enlisted in my presence.

I have taken care that he understands each question, and that his answer the peach question has been duly entered as replied to by him.

I have examined his naturalization papers and am of opinion that they are

THE PARTY OF THE P

(This to be struck out except in the case of Persons who are naturalized British Subjects.)

Date SEP 281916

Signature of Attesting Officer LIEUT.

OATH TO BE TAKEN BY PERSON BEING ENLISTED.

n, Thomas Lester Griffiths well and truly serve our Sovereign Lord the King in the	swear that I will e Australian Imperial Force
from SEP 2.81916	dismissed or removed there-
to be kept and maintained; and that I will in all n service, faithfully discharge my duty according to law	

SO HELP ME GOD.

Signature of Person Enlisted.

ADELAIDE.

Taken and subscribed at.....ii

SOUTH AUSTRALIA.

the State of

.. day of

19 , before me-

Signature of Attesting Officer.LIEUT.

A person who objects to taking an oath may make an affirmation in accordance with the Third Schedule of the Act
and the above form must be amended accordingly. All admendments must be initialled by the Attesting Officer.

Description of Thomas Lester Guffitho Age 32 23 years 9 months DISTINCTIVE MARKS. Height 5 feet 71/2 Weight 134 lbs. Chest Measurement 36-38 inches Complexion Fair Religious Denomination 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 11.9-16 ADELAIDE. 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 F.A. april Reinforcement (South aus) Date 1 4 MAY 191/

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Place

Commanding F.A. april Reinforcemonic

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DEFENCE. 29 11 476 Os I.O Base Records NO 35 20 2 Eune J. L. Friffithes of 10 t f.a. Bde. take 27" Refto 5" auch a.t. art the was reported Wounded and his relatives received word I same through this Dept about the 22 ro april last. as they have received to word ance as to his progress, they desire aging to be trade of cable for which they are prepared to pay. Dease inquire by cable accordingly brothyping Senator Josiale Thomas of Lucius Kat Kistas here done. Please also broking cost of cathe for Which Senator Thomas Will forward, his Cheque.

RECORDS

In all communications regimental number, rank, full name, and unit of Soldier referred to are to be B.R. Form No. 9. BASE RECORDS OFFICE, stated. AUSTRALIAN IMPERIAL FORCE. Don't forget to send any change MELBOURNE. E RECORDS.

VICTORIA BARRACKS,

Dear Madam.

MELBOURNE, April 18th.,

has been reported suffering from shellshock (classed as wounded)

His postal address will be—

No. 35202 Gnr. I.L. Griffiths,

10th Field Artillery Brigade,

(late 27th Fits Army Field Artillery Brigade).
Australian Imperial Force,

Abroad.

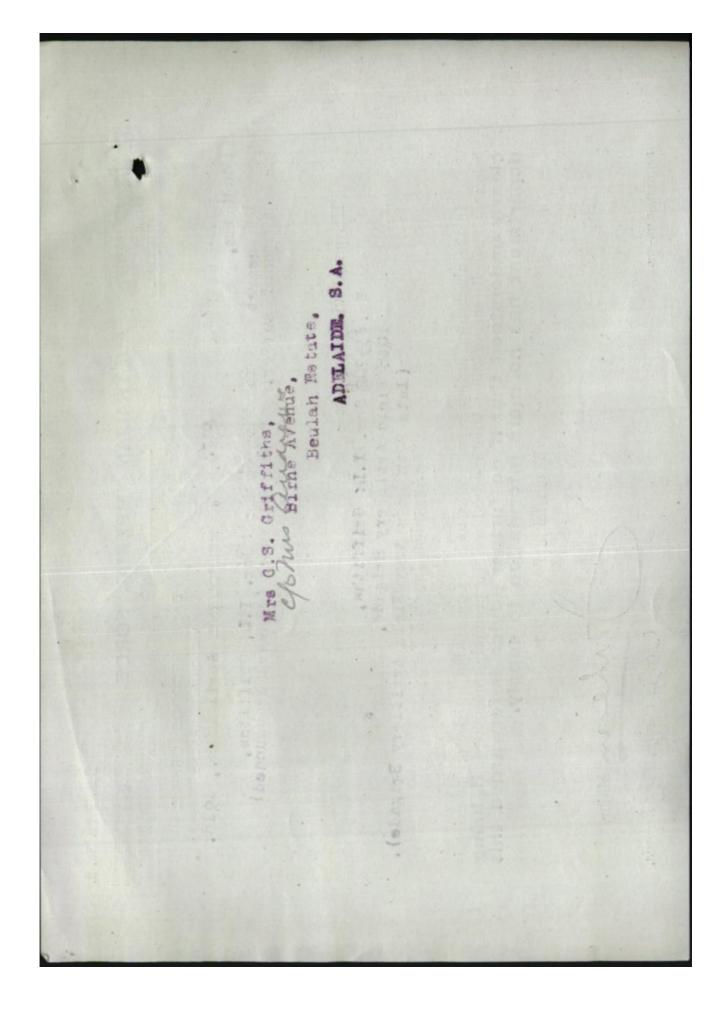
being maintained, but anything later received will be promptly transmitted, it being clearly understood that if no further advice is forwarded this In the absence of further reports it is to be assumed that satisfactory progress is department has no more information to supply.

Yours faithfully,

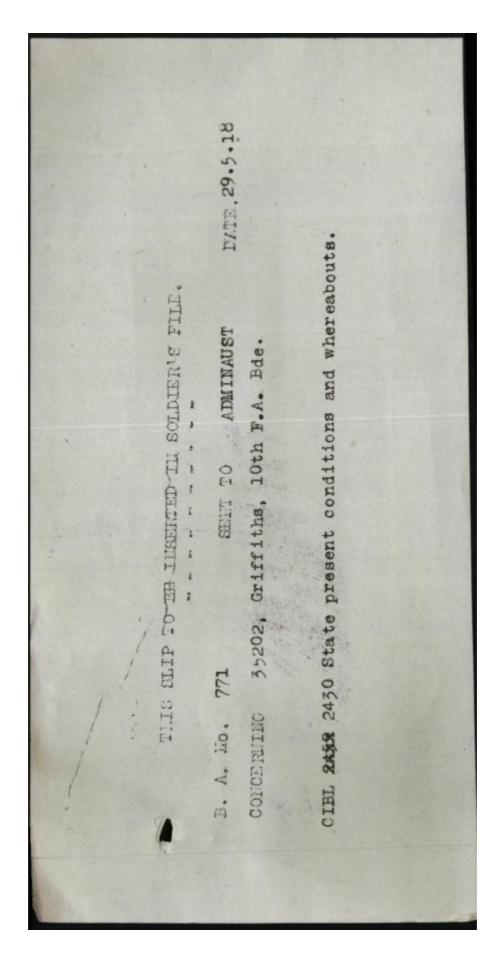
Officer in Charge, Base Records.

Lan Major,

D.1171/1.18. -C.445. -25M.



Jouchow	Poice Street
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25th May, 1918.

שות/אות.

Dear Madam,

I have to acknowledge the receipt of your communication of the 16th inst., concerning the case of No. 35202 Gunner T. L. Griffiths, 10th Field Artillery Brigade.

Cabled enquiries are being made from Australian Imperial Force Headquarters, London, and as soon as a reply is received, you will be again communicated with.

Yours faithfully,

Officer 1/c Base Records.

Mrs. T. L. Griffiths,
Birnie Avenue,
Beulah Estate,
NORWOOD. S.A.

Birnie avenue Beulah Estate norwood. 16. 6.18 Dear Si. on the 18th april. 1918. I received a notice from your office that my Devoland Gir J. L. Griffiths 7 : 35202 10th Field arlillery Brigade Late 9 yth Rfls army Field artillery Brigade Just Imperial Force abroad was suffering from shell shock classed (as wounded) would you be so kind as to let me know whether he is is a hospital and where or evhether he has returned to duly Trusting that you will give this your earliest consideration. remain your truly in the L. Griffiths. In Edment &s. ball on

number, rank, full name, and unit of Soldier referred to are to be In all communications regimental B.R. Form No. 9. OFFICE. AUSTRALIAN IMPERIAL FORCE.

VICTORIA BARRACKS. BASE RECORDS

18th September 1918

MELBOURNE,

Dear

admitted 1/9/18 to Cheltenham Voluntary Aid Detachment Cheltenham England, suffering from Abscess right Hund, mild. Gunner T.L. Griffiths, I Managam, to advise you that has been reported

His postal address will be-

10th Field Artillery Brigade, Australian Imperial Force, No. 35202 Gurner T.L. Griffiths,

Abroad.

Don't fail to send change of your address to Base Records, Melbourne.

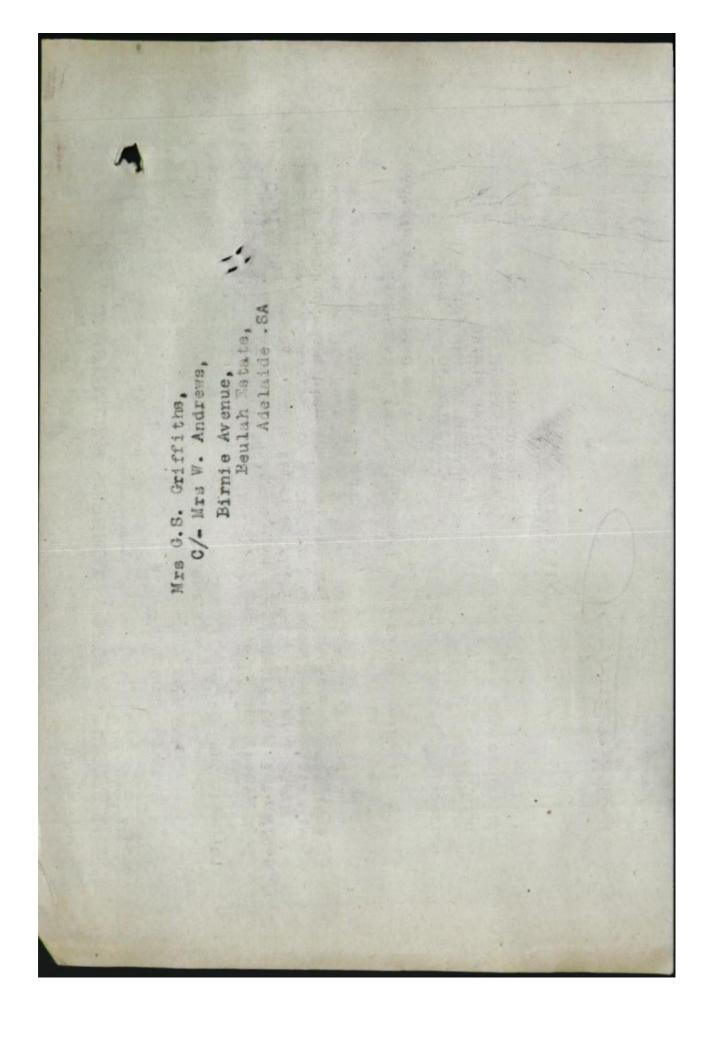
In the absence of further reports it is to be assumed that satisfactory progress is being maintained, but anything later received will be promptly transmitted, it being clearly understood that if no further advice is forwarded this department has no more information to supply.

Yours faithfully,

D.1835/7.18. - 0.10082. - 40M.

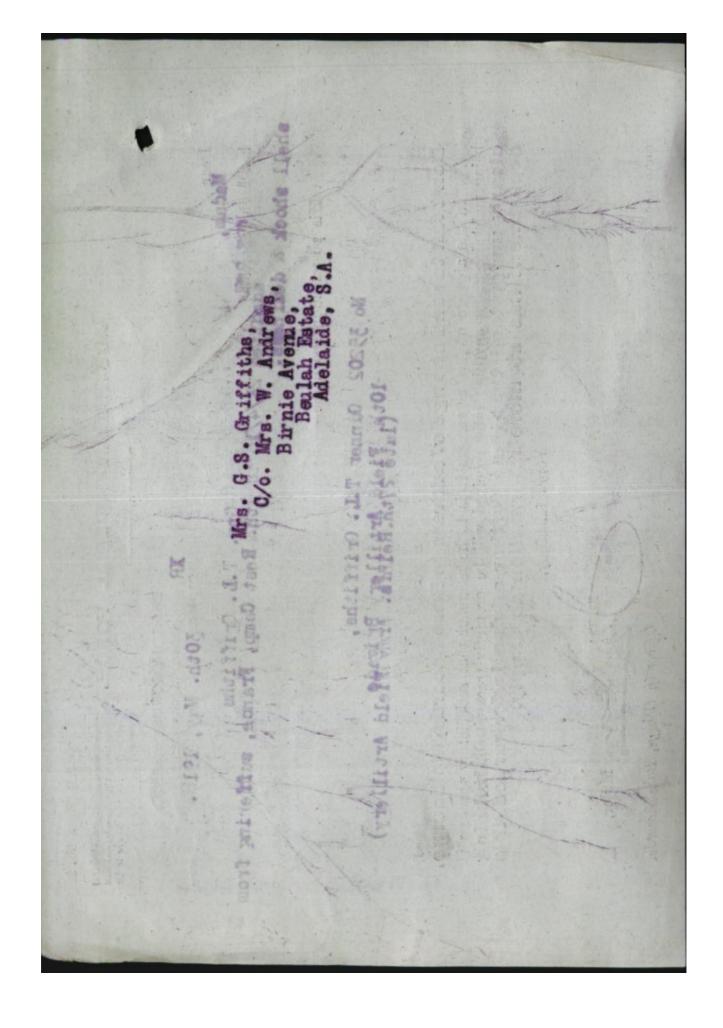
Officer in Charge, Base Records.

Lan Major.



with reference to your recent request that a cable anquiring progress of No. 35202 Gunner ". L. Griffiths, 10th Field Artillery Exigade, be despatched to Australian Imperial Force Headquarters London, I beg to inform you same was complied with, Rajor. Records. Her oth June, 1918. Gunner Oriffiths was admitted to 5th Rest Camp, France, on 25/4/18, suffering Hext-of-kin (wife) has been ndviesd accordingly. Officer 1/c Base and a reply has now been received stating that Yours faithfully, ADELAIDE, S.A. Beulah Estate, Mrs. 6. G. Griffiths, C/o Mrs. W. Andrews, from shell shock and deafness. Birnie Avenue, address is recorded as :-MELBOURNE, VIC. Senator Josian Thomas, Parliament Houne, Dear Sir, 1

dmitted 25/4/18 to 5th. Rest Camp, France, suffering from In all communications regimental number, rank, full name, and unit of Soldier referred to are to be B.R. Form No. 9. Don't fail to send change of address to Base Records, Melbourne. being maintained, but anything later received will be promptly transmitted, it being clearly understood that if no further advice is forwarded this In the absence of further reports it is to be assumed that satisfactory progress is Officer in Charge, Base Records. Lan Major, BASE RECORDS OFFICE, MELBOURNESOth. May, 1918. department has no more information to supply. AUSTRALIAN IMPERIAL FORCE. 10tha Lield Artillery Brigg No 35202 Gunner T.L. Griffiths, Abroad. Yours faithfully, His postal address will beshell shock & deafness. has been Menones D.1171/1.18.-C.446.-85M



No. 7. A. G. HOSPITAL **A 370
MEDICAL REPORT ON AN INVALID 1. Number 5202 2. Rank Guiller's Name Stuffishs 4. Unit 37 By 5. Age 6. Trade or Occupation Barrisler 7. Place of Enlistment Ballaide 7. Date of Enlistment 98 (916) 8. Disability in respect of which invaliding is proposed 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 20-8-18 framul prince or grant of disability 10. Date and place where disability first caused man to become a Casualty 20-8-18 france. 11. Essential facts of Medical History (including causation) Plucial Lawrence Juffley While on Sick furlance
MEDICAL REPORT ON AN INVALID 1. Number 37 6 2 2. Rank Junior 3. Name Triggish 4. Unit 3 1 5. Age 3 6. Trade or Occupation Barristey 7. Place of Enlistment Ballarial 7a. Date of Enlistment 128 1916 8. Disability in respect of which invaliding is proposed 15 10 Hours I 10 10 10 10 10 10 10 10 10 10 10 10 10
1. Number 35202 2. Rank Guille 3. Name Wilstims 4. Unit 37 124 5. Age 6. Trade or Occupation Bayuster 7. Place of Enlistment Pallace 7. Date of Enlistment 98 198 98 8. Disability in respect of which invaliding is proposed 8 10 Factor of Statement flust be carefully recorded as such, and signed by him.) 9. Date and place of 20-8-18 fraull 5 from overseas 10. Date of arrival from overseas 11. Essential facts of Medical History (including causation) Pullace further full flusters for Medical History (including causation)
4. Unit 37 1249 5. Age 6. Trade or Occupation Baruster 7. Place of Enlistment Balland 7. Date of Enlistment 128 1916 8. Disability in respect of which invaliding is proposed 120 Harman 128 1916 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 20 - 8-18 frame 129 from overseas 10. Date of arrival from overseas 11. Essential facts of Medical History (including causation) Pluid twice Influence where disability including causation pluid twice
8. Disability in respect of which invaliding is proposed 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 20-8-18 framel proposed Origin of disability 10. Date and place where disability first caused man to become a Casualty 20-7-18 france 11. Essential facts of Medical History (including causation) MEDICAL OFFICER'S STATEMENT OF CASE. (Soldier's own statement must be carefully recorded as such, and signed by him.) Date of arrival from overseas of the first caused man to become a Casualty 20-7-18 france. 11. Essential facts of Medical History (including causation) MEDICAL OFFICER'S STATEMENT OF CASE. (Soldier's own statement must be carefully recorded as such, and signed by him.) Date of arrival from overseas of the first caused man to become a Casualty 20-7-18 france. 11. Essential facts of Medical History (including causation) MEDICAL OFFICER'S STATEMENT OF CASE. (Soldier's own statement must be carefully recorded as such, and signed by him.)
MEDICAL OFFICER'S STATEMENT OF CASE. (Soldier's own statement from the carefully recorded as such, and signed by him.) Date and place of 20-8-18 framel. Date of arrival february Date of arrival february 10. Date and place where disability first caused man to become a Casualty 20-8-18 frame. 11. Essential facts of Medical History (including causation) Deluced formula for frame.
9. Date and place of 20-8-18 Frank. 10. Date and place where disability first caused man to become Casualty 20-8-18 France. 11. Essential facts of Medical History (including causation) Surfluenza while on sick furlange.
10. Date and place where disability first caused man to become Casualty 20-8-18 France. 11. Essential facts of Medical History (including causation) Plue Twice Jufluenja while on sick furlangh.
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12 State whether disability was (a) Due to Military Service, (b) Aggravated by Military Service, or (c) Independent of Military Service; (d) Due to pr aggravated by, want of proper care on man's part, intemperance, misconduct,
de. My Mulitary serve
13. What is his present condition and progress
Tympani show no path changes Harry hote affects He disability is an injury state whether it research (1) in still (1) and in wall- not enjoy
Tympani show no path changes
hearing with affects
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? No
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 remarkly well to
out the voll recommend discourage as normanantly well for my and
20. Do you recommend discharge as permanently unit for general services
Mo atten dance of tase.
Mo atten dance & Can Medied Officer in charge of lase.
Mo atter dance & Car Medical Officer in charge of lase.

Entries will be made here when an invalid is brought before a Medical Board and deferred for treatment.

Date and Station	Date and Station
Result	Result
Signatures	Signatures
OPINION OF MEDICAL BO	OARD ON FINALIZATION.
Note.—Clear and definite answers to the following question the man being invalided, it is essential that the Minister for Pensionable him to decide upon the man's claim for pension.	ons are to be carefully filled in by the Board, as, in the event of sions should be in possession of the most reliable information to
21. State whether the disability is clearly (a) Due to Military Se	ervice, (b) Aggravated by Military Service, (c) Independent of
	of proper care on man's part, intemperance, misconduct, &c.
22. Is the present degree of disability permanent?	recovered
23. If not, at what rate and to what degree do you anticipate imp	provement !
24. To what extent is his working capacity at present affected by	his disability? (a) In his pre-enlistment trade or occupation?
(b) In the general labour market? (Estimate as a perce	
25. If an operation was advised and declined, was the refusal uni	reasonable !
26. Do the Board recommend discharge as permanently unfit for	General Service ?
27. If discharge is recommended, it should be stated whether furt Institution, (c) Convalescent Home, (d) Asylum, or (e)	ther treatment is desirable in a (a) Sanatorium, (b) Orthopædic other institution. State whether further treatment should be
an in-patient or an out-patient, and for what period	no
28. Is any surgical appliance recommended?	w
KESWICK	4.511.
Station Signat	wres W. S. Ules ward for President.
Date 27 FEB 1919	Members.
	I CONFIRMED
Approved.	D. Dr. S. Russell 12 00
KESWICK	P. N. O. 47 12 . Col.
Station Date 27 FEB 1019	Director General Medical Services.
Notes by S.O.I. and R.S.	
printed and in the same will of the initial tra-	Charge in a continue to a strain which are
	1 2 100

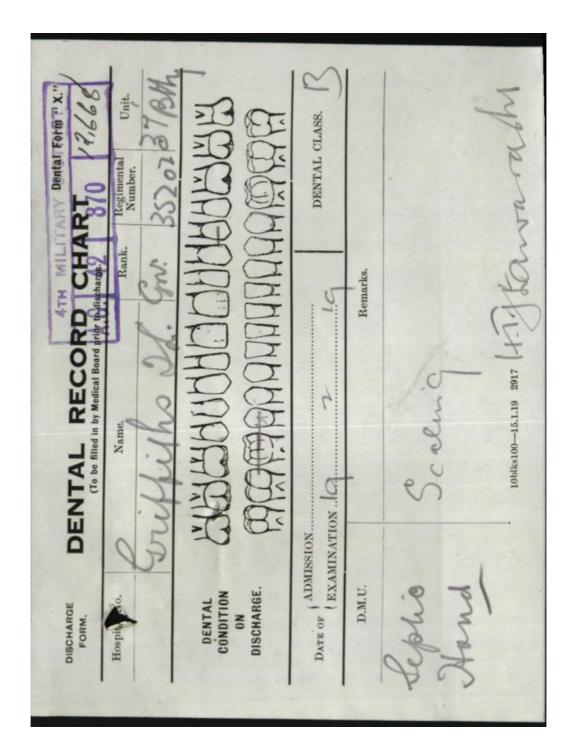
This form will be used for the finalization of all invalids in Australia, and will embody (Question 11) all information contained on the papers of invalids returned from overseas. Question 13 will include in its Answer a detailed careful account of the medical condition of the patient on finalization. On completion of the Board, it will be forwarded to the P.M.O. by hand, for confirmation, thence to the S.O.I. and R.S., who will make necessary copies.

Single copies only need be forwarded to Head-Quarters.

For discharge of members of services other than the permanent forces the District P.M.O. may approve for the D.G.M.S

MILITARY DISTRIC Vemporary Army Form B. 178 be used (a) for recruits enlisting direct into the Regular Army. and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178 to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army. MEDICAL HISTORY OF Christian Name Surname TABLE I.-General Table. TABLE III. - Boards; Courts of Enquiry, Vaccination. Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation Birthplace of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc. Brief Details and Signature Examined Declared Age Trade or Occupation..... Weight ... Measurement Physical Development .. Vaccination Marks When Vaccinated L E. V = . (a) Marks indicating congenital peculiarities or previous (5) Slight defects but not sufficient to cause rejection Approved by TABLE IV. Service Table. Date of arrival or embarkation ...191. Joined on culistment Transferred Became non-effective by (Signature) ... [11,823] W2836 M2217 1,800,000 6/17 W. P. & Go. (1349)

TABLE IIOnl	y for admis	Only for admissions to Hospital or to	spital or to the	Sick	Sick List in case of Warrant Officers treated in quarters.	uarters.
Name of Hospital Day	Admitted to Hospital y Month Year	Discharged from Hospital Day Month Year	Disease	Number of days in Hospital	Remarks 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
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DISTRICT MILITABY Form B. 179. A.G. Medical Report on an Station Date 7. Former Trade or Occupation Daristes Regimental No. 35202 7a. If with previous service in Army, state-(a) Former Unit; 4. Name GRIARITHS Thomas Lester (b) Regimental No.; 5. Age last birthday 25 (c) Date of Discharge; 6. Enlisted on 28- Dept 1916 (at Palance St australia (d) Cause of Discharge. 8. Disability in respect of which invaliding is Proposed. (Other disabilities should be reported upon in answer to question No. 19). Lease Sand, 10. 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 venercal disease. 9. Date of origin of disability. France 10. Place of origin of disability. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Optimal Lorce - Diffuse a white which which the case. Give your opinion as to the causation of the disability, stating whether in your opinion it is (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on Infection Stritutable to Detwe Seun page 3). (b) constitutional or hereditary, and not aggravated by service during the present war. (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. (A9855) Wt. W3695/P496. 500,000. 1/18. D. D. & L. Sch. 27. Forms/B179/39.

the c 13. What is his present condition? Weight should be given in all cases when it is likely to afford evidence of the progress of the disability. 14. If the disability is an injury, was it caused— (a) In action? (b) On field service? (c) On duty? (d) Off duty? 15. Was a Court of Inquiry held on the injury? If so-(a) When? (b) Where? (c) Opinion? Was an operation performed? If so, what? 17. If not, was an operation advised and declined? 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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present 20. Do you recommend—
(a) Discharge as permanently unfit, or Bra 1 (winse) Officer in medical charge of case. I have satisfied myself of the general accuracy of this report, and concur therewith, except † Station 6 DEC:191 Officer in charge of Hospital. Date USTRALIAN

Page 27

*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† 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, the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

- "might," "probably," &c., should be avoided. (ii.) Expressions such as "may,"
- service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war (2) ce. (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them. (iii.) The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by
- (iv). In answering question 21 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.

21. (a.) State whether the disability is clearly attributable to-

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.
- (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?
- 22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?
- 23. Is the disability permanent?
- 24. If not permanent, how soon do the Board recommend re-examination?
- 25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Digrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil

26. If an operation was advised and declined, was the refusal unreasonable?

27. Do the Board recommend-

- (a) Discharge as permanently unfit, or
- (b) Change to England?
- 28. If discharge is recommended it should be stated whether further medical treat-ment (including orthopædic training) is desirable in a
 - (a) Sanatorium;
 - (b) Hospital;
 - (c) Convalescent home;
 - (d) Asylum; or
 - (e) Other institution either as an in-patient or an out-patient, and if so the period for which recom-
- 29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?
- 30. Does the man require the constant attendance of another person?

signature

President. Members. ative Medical Officer. be Burgeon Genera. D. M. S. A. E. W.

Date Approved Station 3 DEC 197 Date.

AL OFFICE N

Station

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(On leaving Corps or Station	where invalided).
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ation Port Brief remarks on case during transit, and state	(medical charge)
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Ro transformed \ Date	Rmm mastu major
Re-transferred { Hospital or Station }	Officer in medical charge.
(At Station or Hospital where Station and	G. HOSPITAL
Hamital 1	SWICK 18FEB 1919
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Date From To Disease	How finally disposed of Discharge, &c.
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Detailed statement as to condition on discharge a to corps, to station, or to depôt. In cases of discharg whether the answers to questions 23, 24	e from the service it should be stated
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PERMANENT MEDICAL BOARD. DELLES ANDROLLON	
allerantage	CONFIRMED
Date of final Medical 27/2/29 Board, or decision	1. Dr. 2. Russeller con
Board, or decision (/ 1	Administrative Medical Officer.
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sability School and R. S. Ath M. D. transferred to for final disposal. Ite of finally MEDICALLY UNFIT (NOT sposed of DUE TO MISCONDUCT.) The original Report is invariably to accompany the discharge documents of Invalids. 179.	MEDICAL MEDICAL Tops Solver MEDICAL ME
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35202 Gnr T.L. (4) 37th Bty 10th FAB. 18/2/19.

4.	Unit	10th Bn. 5th Phr. Bn. 5th Phr. Bn. 5th M.G. B. 5th M.G. B. 65th M.G. B. 65th M.G. B. 65th M.G. B. 72nd Bn. 13th F. Amb. 9th L. H. 72nd Bn. 10th " 12th F. A. B. 12th Bn.	14th F.A.B. 45rd Bn. 5rd L.H.B. 45rd Pn. 11th F.A.B. 50th Bn. 57th R. R. 50th Bn. 4th F.Amb.
No. 443.	Particulars	Znd.occ. Znd.occ. P.R.Ill F.R.Ill F.R.Inj. Znd.occ. Znd.occ.	P.R.W. P.R.W. P.R.W. P.R.W. P.R.W. P.R.Inj. Znd.occ.
CASUALTY LIST NO.	Helatives Reside	Stockport Barabba England Hilltown Adelaide Mile End Murray Bridge Watervale Wallaroo Mt.Gambier Torrensville Mitcham Park Gawler Sth. Glanville N.Broken Hill, N.S.W. Guorn Magill I I I	England Maitland Snowtown Hayneham Ireland Coondambo Jamestown Sydney, N.S.W. Broken Hill, N.S.W. Brathalbyn Carawa,
4th M.D.	Name	ROBERTS, Allan Francis ROBERTS, Hugh David SAILING, Albert Charles SCOTT, Henry Milton SCOTT, Jas.Gavin SCOTT, Robt. Wm. SMITH, Alex.Robt. SOBELS, Verno Julius SURFIELD, Percival Geo. THOMSON, Robt.Duncan TIGGERMANN, Fredk.Lewis WESTOVER, Harry Airs WHITE, Les Geo. WHITE, Les Geo. WHITING, Albian Wm. WRIGHT, Rredk. Joseph WEEND, Affred Harold	ALLEN, Wm. ANDREW, Fercy Clover ANDREWS, Jas. Wm. Kenneth BIRKS, Edward Harold BOWERS, Geo. BROWN, Owen Jas. Farker CAVANAGH, Edward Philip COLLINS, John James CURRY, Hatrick DOUGHERTY, Alan John (MM) DREVER, Jas. Henry
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田.G.	Reg'l No.	2774 2191 2964 1103 815 3918 3006 1439 3009 1439 8999	1653 2650 2650 12702 276 2891 2601 1048

4TH MILITARY DISTRICT 42 370

AUSTRAL MILITARY DISCRECT.

4th litery District.

I O APR 1919

CONFIDENTIAL,

KUSWICK BARLACKS, ADELATOR

Officer in Charge, Base Records. Victoria Barracks, MELPORATE.

The undermentioned soldi r has been handed his Discharge. Med. Sal Board Proceedings and other documents at follows, forwarded herewith. B. 179. D.1. D.2. B. 1 Dental Form X.

No. 35202 Rank Grr. Name. GRIFFITHS, Thomas Lester. Discharge.

No. 35202 Rank . Gnr.

Unit 37th. Baty. 10th. F.A.B.

Date of Attestation 28/9/16.

Date of Embarkation. 9/11/17.

Date of Disembarkation. 18/2/19. Ext Reason for Discharge DUE TO MISCONDUCT.) "MORV ADA"

Date of Dischar 3. 14/3/19.

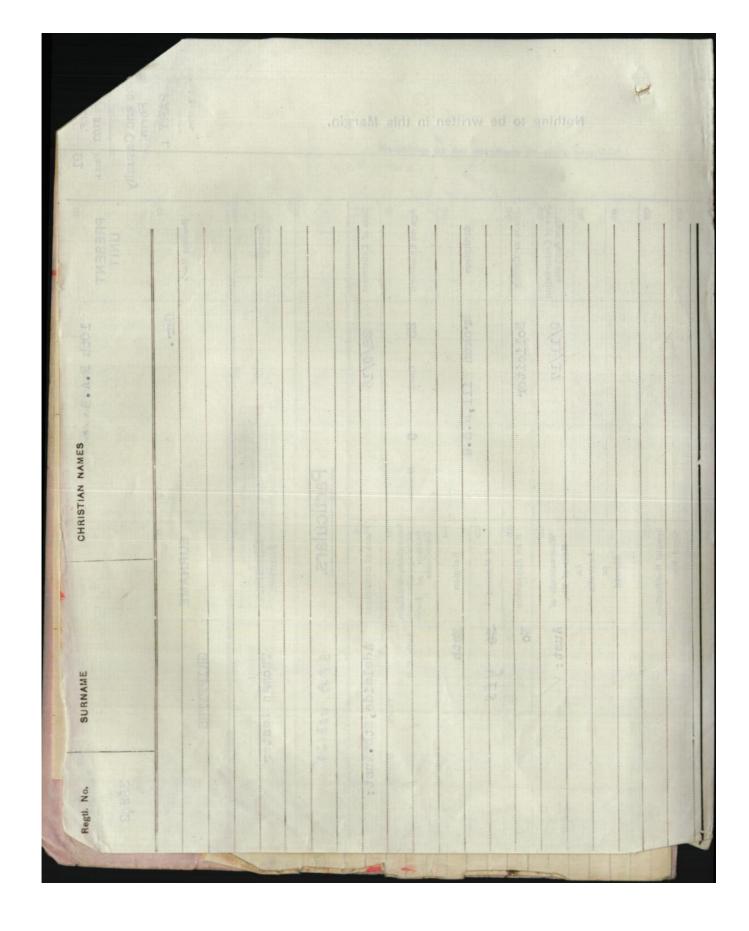
Total Service 2 years - 168 days.

Service Abroad. 1 years - 102 days .

Account Adjusted in Part.

AM intell hut Stalf Officer Invel as & Reta. Soldiers. 4th MIDITARY DISTRICT.

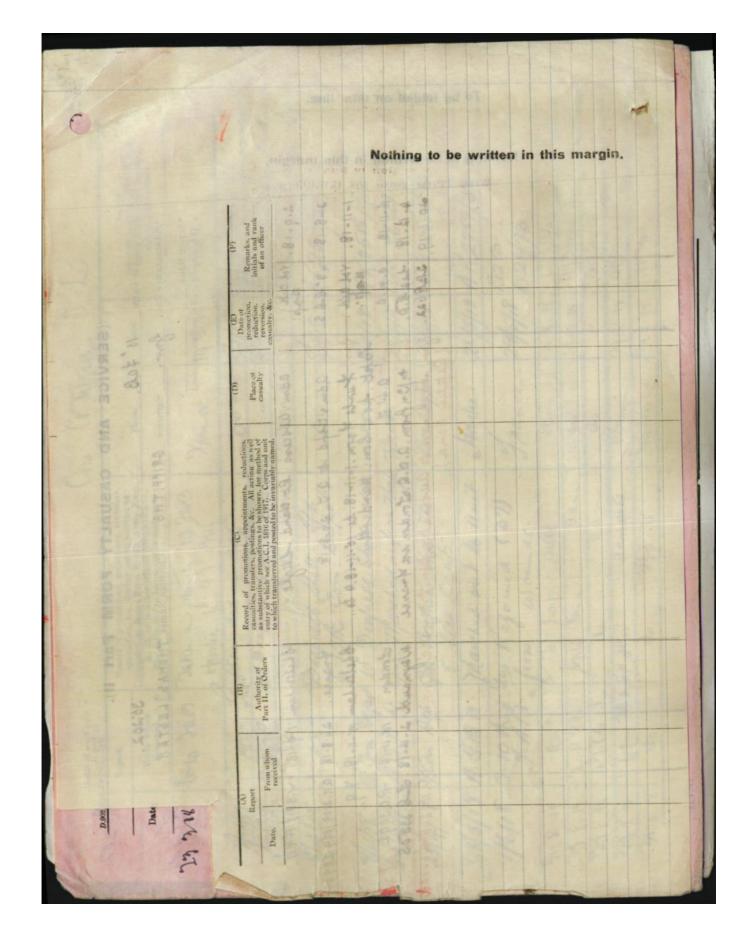
Service and Casualty Form. PART 1, 2008-8/19-12244.	PRESENT UNIT UNIT Present Rank (5)	dim.		SURNAME (6)	GRIFFITHS
	Decorations		Parti	Christian Names. Particulars.	Thomas Lester S.P.A. 608/16
	(7) Date of Enlistment	28/9/16		(8) Place of Enlistment	Adelaide, Sth. Aust:
	Age on Enlistment	23 Years 9	Months	(10) Any subsequent claim as to age after verification of Birth Certificate	Years Months Auth. C.R.
*	(11)	I O M LEST MOTION		(12) Religion	Meth
	Girnpiace	Nogen billing in Sold		(13) If Married	40 yes
	(14) Trade or Calling	Solicitor		(15) If an Apprentice	No
	(16) Date of Embarkation from Australia	9/11/17		Whereabouts of Next of Kin,	Aust: /
	(18)			i.e. Australia or	
	(69)			Abroad	
	(00)			(21) Special Notification	
	(23)			Card No.	



at No. 35 % of transferrance of transfer	Rejort. Record of promotions, reassfers, casualties, &c., during active service, as reported on Army Form B. 213, Rocaived. The authority to be quoted in such case. O. R. Leops Leophore Leophore Leophore O. R. Leops Leophore Leophore Leophore O. R. Leoph Leophore	ALGED. 1. AROHED IN FRO C ENGLAND 4/1/18 4/1/18 4/1/18 4/1/18 1913/2013/11/18 2. A.G. B.D. 1. A.G
Regimental No Enlisted (a) 2.8 Date of Promotion present rank Extended	Report, Recom Reco	14 MAR 1918 L.G.B.D. 18 3. 18 18 18 18 18 18 18 18 18 18 18 18 18

Me 7. L.	Pemarks taken from Army Form B. 213, Army Form A. 36, or other official documents.	19-2-14 DM/C3 DI 16/106-2	44	1418 Ax2518/66. 20 0/2 11 11/18	8/4/18 4 K 2518/174		26/5/18 A.K. 2757/33.	16.8 19 UN 3169 34 10 34 34 11.9.18.	29 & 18 GH Flood 14 Divay hospithis	Soll logages on and other and at to trees add all at to q 18.
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	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.	Mondo J	W. Deapurs Shell explores	Shell .	W. Deghuls. Shell. adm	m. Skapnes, Shell The o 5 kest Lamb.	w. Keforied (37)	hepli Mara L. Warn	do 2/4 K	order Section Services
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D,902/6.	Date.	13/1/10	8//1/8	81/4/8	29/4/18	28/2/18	1/6/18 600 #	81 8 W.	81 8 W.	0.7.0

Regiment or Corps 11 428. Regiment or Corps 11 428. *Substantative Rank for. Surname GRIFFITHS. Christian Names THOMAS LESTER. ("To be entered in pencil to tacilitate alteration.) ("To be entered in pencil to tacilitate alteration.)	Record of properties. The following the foll	Card No.
	To be folded on this line.	The No.



To be used for Enlistme	ent in the Permanent Military For	A.M. Form D.
Surname GRIFF I	TEDICAL HISTORY Christian Name	
Birthplace	TABLE I. GENERAL TABLE.	1 1 Nales
orrenpiace	on 11th day of S	ebt 19/1
Examined	at ADELAIDE.	
Declared Age	23 19/12 year	0
Trade or Occupation	Solikeboi	
Height	5 feet 7/2	inches.
Weight	134	lbs.
Chest Girth when fully Expanded	36 - 38	inches.
Measurement of Expansion Physical Development and	2	inches.
Pulse rate Vaccination Marks $\begin{cases} Arm \\ Number \end{cases}$		VIL Lort.
When Vaccinated	6	
Vision	R.E.—V=_6	
a) Marks indicating con- genital peculiarities or previous disease	((a)	
b) Slight defects, but not sufficient to cause rejection	Epilepsy, Insanity, Tuberculosis, Rheumatier	se i
Approved by (Signature)		Co Hedical Officer.
Enlisted	at ADELAIDE. SEP 28 1916 day of	
oined on Enlistment	AZA Corps.	Regtl. No.
ransferred to	1001 J.a.B	
secame non-effective by	089	
	onday of	_19
(Signature)		

		Admitted to Hospital.			Discharged from Hospital.		Disease.		Number of days in Hospital
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Sick List in the case of Warrant Officers treated in Quarters. Remarks 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. Signature of Medical Officer. If an accident, state whether it occurred on duty. NO ADMISSION mncs mul Part 2

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