

NAA: B2455, SMITH M M L

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Title: Smith Mora Marie Lamb: SERN SISTER: POB Hawksburn VIC: POE N/A: NOK M Smith

Margaret Serpine

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fertified true Copy AETUTANT TO P. M. O. AUSTRALIAN MILITARY FORCES AUSTRALIAN IMPERIAL. Attestation Paper of Persons Enlisted for Service Abroad. Name Surname Smith Nursity Services 19 retests Unit Joined on Questions to be put to the Person Enlisting before Attestation. 1. Mora mare 1. What is your Name? PAY-BOOK NO. 2. In the Parish of .. near the Town of 2. In or near what Parish or Town were you born? in the County of 3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be Mes shown.) 4. What is your Age? hurse 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? ... 7. Are you married? ... 8. Who is your next of kin? (Address and relationship to be stated) 9. What is your permanent address in Australia? ... M.S. LAMB SMITH 10. 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 ... no 5 G-G-81 11. Have you stated the whole, if any, of your previous service? 12. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? ... 13. (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 in respect of your service beyond an amount which together with pay would reach eight shillings per day? 14. Are you prepared to undergo inoculation against small pox and enteric fever \$\(\text{...} \)...

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 three-fifths of the pay payable to me from time to time during my service

for the support of my wife.* † wife and children.

nora n. Land Smeth

Signature of person enlisted.

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.

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.)

		Signature of Attesting Officer.
OA'	TH TO BE TAKEN BY	PERSON BEING ENLISTED.*
3,		swear that I wil
		the King in the Australian Imperial Force
months thereafte and that I will kept and maint	er unless sooner lawfully resist His Majesty's end	end of the War, and a further period of four discharged, dismissed, or removed therefrom emies and cause His Majesty's peace to be n all matters appertaining to my service
		HELP ME, GOD.
		Help Me, God. Signature of Person Enlisted.
Taken and	So	HELP ME, GOD. Signature of Person Enlisted. in
Taken and	So .	HELP ME, GOD. Signature of Person Enlisted. in

A person enlisting 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 amendments must be initialed by the Attesting Officer.

National Archives of Australia

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Description of	mora	marie	Lamb	Kineth on	Enlistment.

Height feet inches. Weight 9.8 lbs. Chest Measurement 36 inches. Complexion Dark Eyes Mair Religious Denomination C. E. 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; 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 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 that the required forms have been complied with. I accordingly approve, and appoint that the required forms have been complied with. I accordingly approve, and appoint that the required forms have been complied with. I accordingly approve, and appoint that the required forms have been complied with. I accordingly approve, and appoint that the required forms have been complied with. I accordingly approve, and appoint that the required forms have been complied with. I accordingly approve, and appoint that the required forms have been complied with. I accordingly approve, and appoint that the required forms have been complied with. I accordingly approve and appoint that the required forms have been complied with. I accordingly approve and appoint that the required forms have been complied with. I accordingly approve and appoint that	Description of Mora Maril Kumb	on Enlistment.
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; 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 Place 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 to Sister. But Date	- 6	
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to A J Sesles Date 1916 ADJUTANT TO P. M. O. 300 M.	CERTIFICATE OF COMMANDING O	OFFICER.
Place Muchouse Commanding	the required forms have been complied with. I according	

NAA: B2455, SMITH M M L

National Archives of Australia

Mora Mary Lamb Statement of Service of No. Sister Name Remarks. Promotions, Reductions, Casualties, &c. Unit in which served. From-Embkd. at Melbourne on Transport "Mooltan" Indian Nursing 26/12/16 Sister . Service I have examined the above details, and find them correct in every respect. National Archives of Australia NAA: B2455, SMITH M M L

MILITARY FORCES.

AUSTRALIAN IMPERIAL FORCE.

Attestation Paper of Persons Enlisted for Service Abroad.

No. Name Surname Smi	th
in full Christian Name	Mora Marie Lamb
	India Dervici Moottan.
26,	
Joinea on	
Questions to be put to the Person	1 1 2
1. What is your Name!	1. Mora havis Namh Smith
Comment of the Commen	2. In the Parish of Acut Lun in or
2. In or near what Parish or Town were you born?	near the Town of Victoria
	in the County of
3. Are you a natural born British Subject or a Naturalized British Subject (N.B.—If the latter, papers to be shown.)	3. 7 es
4. What is your Age?	4. 3 2
5. What is your Trade or Calling †	5. Murse
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period?	6. ho
7. Are you married?	7. ho
	8. mother margaret Serpine Smil
8. Who is your next of kin! (Address and relationship to be stated)	alescandra Chel.
The answer to this question shall not be construed as in the nature of a will.	Thinden St- melloune
	9 as alove.
9. What is your permanent address in Australia 1	
10. 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	10. ho 5 a. G. H.
11. Have you stated the whole, if any, of your previous service?	11. 768
12. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds?	12 ho.
13. (For married men, widowers with children, and soldiers who are the sole support of widowed mother)— Do you understand that no saparation allowance will be issued in respect of your service beyond an amount which together with pay would reach eight shillings per day?	13.
14. Are you prepared to undergo inoculation against small pox and enteric fever?	14. 7es.
3. Mora marie hamb	Smil do solemnly declare that the above answers made
by me to the above questions are true, and I am willing and he Commonwealth of Australia within or beyond the limits of the C	ereby voluntarily agree to serve in the Military Forces of the
And I further agree to allot not less than two-fifths three-fifths	f the pay payable to me from time to time during my service
for the support of my wife and children.	11111
Date 7/12/16	prova he Lamb Cuitte
* This clause should be struck out in the case of unmarried † Two-fifths must be allotted to the wife, and if there are chi	

National Archives of Australia

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.

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.)

		Signature of Attesting Officer.
		Lighten of Lucioning Officer.
0	ATH TO BE TAKEN BY	PERSON BEING ENLISTED.
3,		swear that I will
well and truly	serve our Sovereign Lord	the King in the Australian Imperial Force
months thereas and that I w kept and mai	fter unless sooner lawfully d ill resist His Majesty's ener	nd of the War, and a further period of four ischarged, dismissed, or removed therefrom mies and cause His Majesty's peace to be all matters appertaining to my service, w.
	So E	ELP ME, GOD.
	-	Signature of Person Enlisted.
Taken a	nd subscribed at	in
the State of		
this	day	of
		me—
		Signature of Attesting Officer.

*A person enlisting 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 amendments must be initialed by the Attesting Officer.

National Archives of Australia

Age 32. years 7 months.	DISTINCTIVE MARKS.
Height 5 feet 6 inches.	3 wex cina tion mants
Weight GSI- & lbs.	legi arm, 2 helow t
Chest Measurement 3 % inches.	
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Hair bank how.	
Religious Denomination Ch. of Ly.	
CERTIFICATE OF ME	EDICAL EXAMINATION.
I HAVE examined the above-named person, a following conditions, viz.:—	and find that he does not present any of the
of vision, voice, or hearing; hernia; hæmorrh marked varicocele with unusually pendent tes ulcers; traces of corporal punishment; contr	d constitution; defective intelligence; defects toids; varicose veins, beyond a limited extent; sticle; inveterate cutaneous disease; chronic racted or deformed chest; abnormal curvature defect calculated to unfit him for the duties
	either eye; his heart and lungs are healthy; he he declares he is not subject to fits of any
I consider him fit for active service.	
Date	
Place	
r wee	
	Signature of Examining Medical Officer.
CERTIFICATE OF CO.	Signature of Examining Medical Officer. MMANDING OFFICER.
I CERTIFY that this Attestation of th	MMANDING OFFICER. he above-named person is correct, and that
I CERTIFY that this Attestation of the	MMANDING OFFICER. he above-named person is correct, and that
I CERTIFY that this Attestation of the	MMANDING OFFICER.
I CERTIFY that this Attestation of the the required forms have been complied with to a selection	MMANDING OFFICER. he above-named person is correct, and that i. I accordingly approve, and appoint him

NAA: B2455, SMITH M M L

National Archives of Australia

Statement of Service of No.

Name

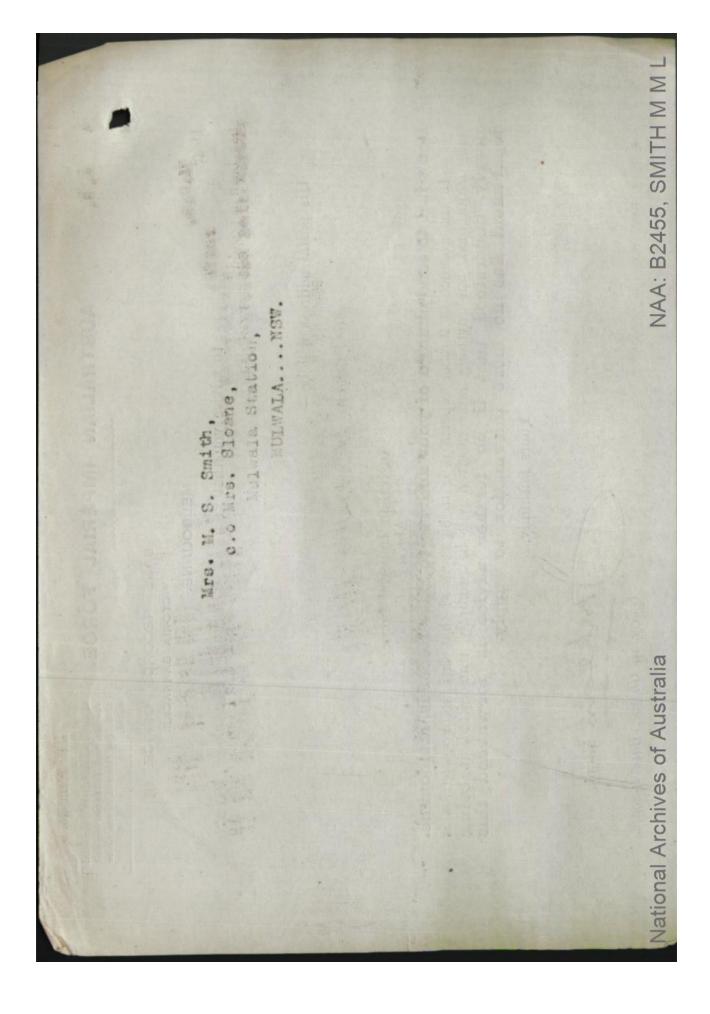
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Unit in which served.	Promotions, Reductions, Casualties, &c.	From-	То-	Remarks.
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and the good	to discovery bearing with the large	ALCOHOLD !		

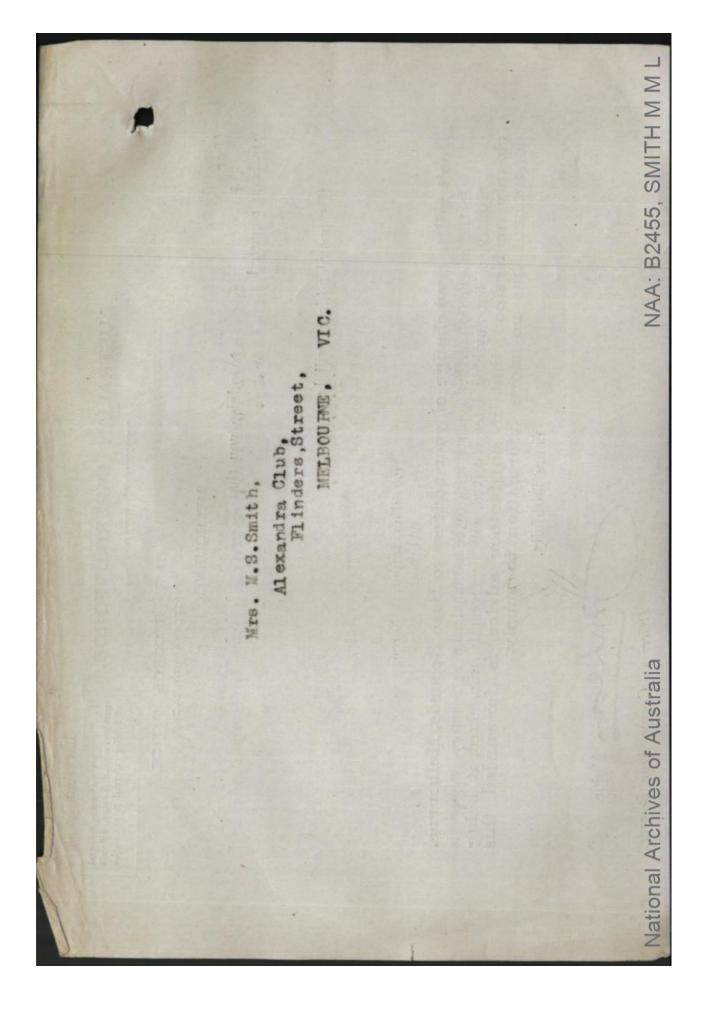
I have examined the above details, and find them correct in every respect.

National Archives of Australia

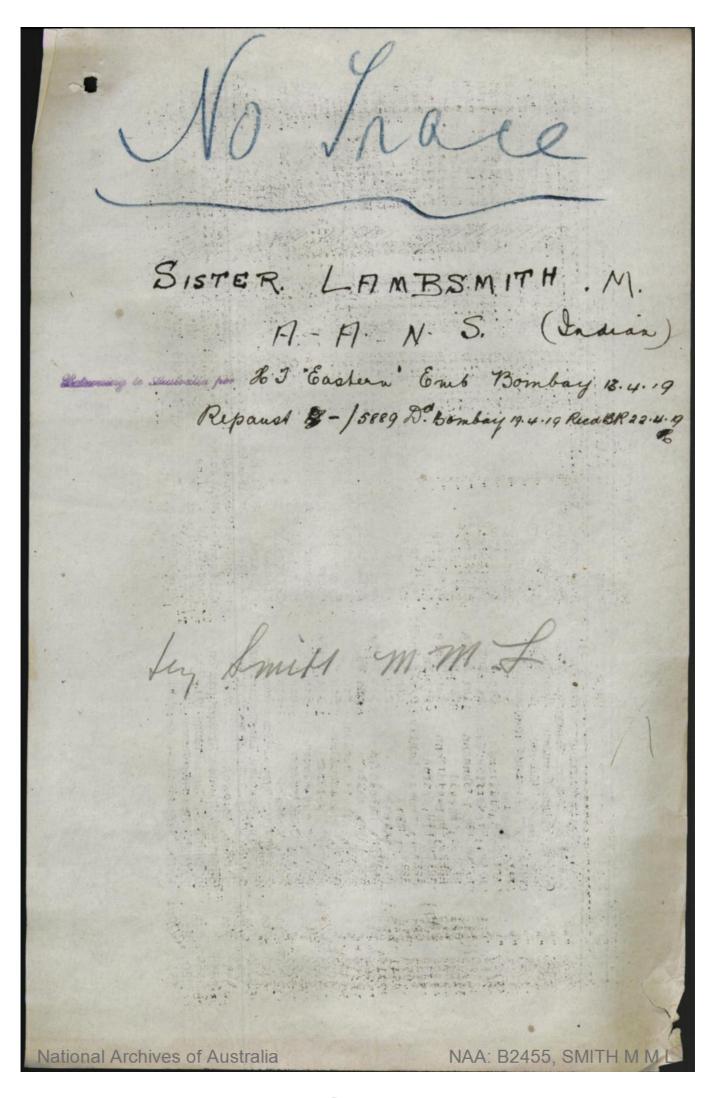
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From whom A36, received.	nd of promotions, reductions, transfers,		PLEMARKS
	reported on Army Form 1813, Army Form A36, or in other official documents. The authority to be quoted in each case.	Place, Date.	
			No.

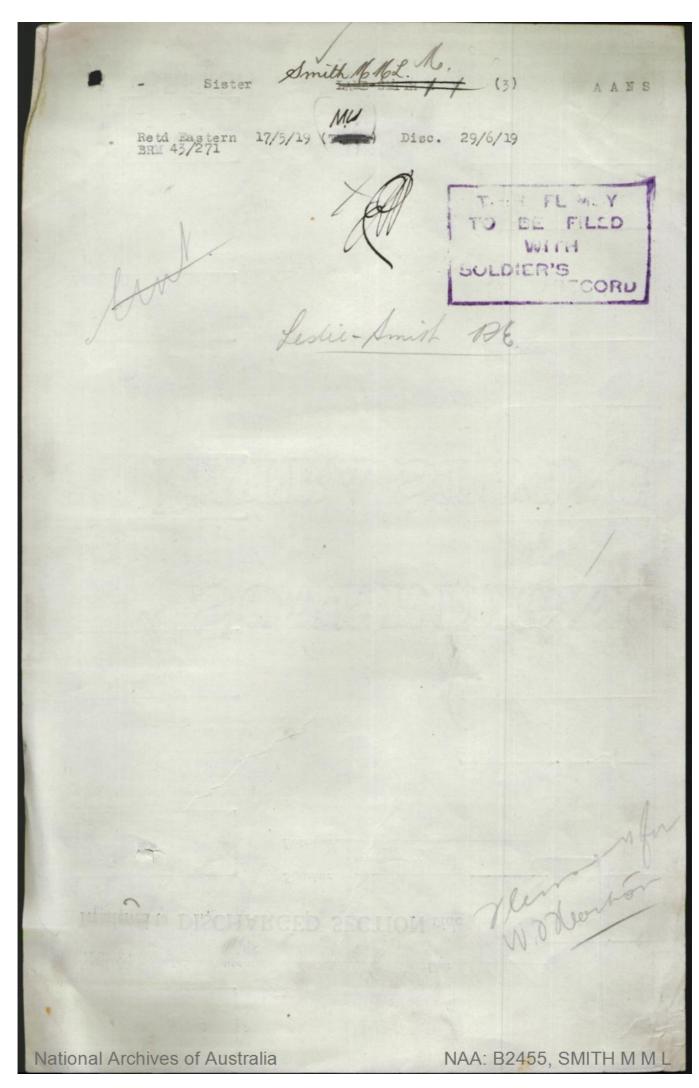




go mis of brance mulwala Station mulwala. & 1 W Ufficer in Charge Base Becords Victoria Barracks, Melbourn Dear dir forwarded to me from alexandre It present etaying - re my daughter Vister M. M. L. Smith a. a. h. f. whomyon state has been admitted Hospital Suffering from Suffering Can you till me what Hospital Whether in Ludia (Which the wrote on and 25 to she expected to leave Shortly) England or Feran oblige Mallie Hamb J. Smith 2410/18 21 001 1018 National Archives of Australia NAA: B2455, SMITH M M



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National Archives of A	Australia NAA: B2455, SMITH	HMML

Station No.11 A.G.H.

AUSTRALIAN



MILITARY FORCES.

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

MEDICAL REPORT ON AN INVALID.

	Number 2 Rank Sister 3. Name LAMB-SMITH N.M. Unit A.A.N.S. 5. Age 34 yrs. 6. Trade or Occupation Nursing.
7.	Place of Enlistment 3rd M.D. 7a. Date of Enlistment 5th Aug. 1915.
8.	Disability in respect of which invaliding is proposed
	MEDICAL OFFICER'S STATEMENT OF CASE. (Soldier's own statement must be carefully record as such, and signed by him.)
	Date and place of India. Date of disability Date of arrival 8.5.19 Date and place where disability first caused man to become a Casualty 1916 1919.

October. Now fit.

11. Essential facts of Medical History (including causation) Influenza & Pneumonia, last

Date for discharge. 29/6/19.

medically limber of

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, &c.

13. What is his present condition and progress?

Fit.

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? Term. of appointment.

(Sgd.) Edgar M. Inglie. Capt.,

Medical Officer in charge of case.

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

(Sgd.) A. Honman, Col.,

Station No.11 A.G.H.

Date 22.5.19.

Officer in charge of Hospital.

p.1586/5.10.—C.5786—2001

National Archives of Australia

NAA: B2455, SMITH M.M.

Date and Station	Date and Station
Result	Result
Signatures	Signatures
-	
	CAL BOARD ON FINALIZATION.
	ing questions are to be carefully filled in by the Board, as, in the event of the missioner of Pensions should be in possession of the most reliable information to and the Deputy Comptroller of Repatriation, of information to enable him to
21. State whether the disability is clearly (a) Due to Military Service; (d) Due to, or aggravate	Military Service, (b) Aggravated by Military Service, (c) Independent of by, want of proper care on man's part, intemperance, misconduct, &c
No disa	ability.
	nticipate improvement ?
	affected by his disability? (a) In his pre-enlistment trade or occupation
	e as a percentage of full capacity) N11.
	refusal unreasonable ?
	y unfit for General Service 7 Term. of appt.
Asyl	whether further treatment is desirable in a (a) Sanatorium, (b) Orthopædi um, or (e) other institution. State whether further treatment should b
an in-patient or an out-patient, and for what	period .
28. Is any surgical appliance recommended?	
29. Is the man fit for work or for vocational training	g? If not, state reasons for recommendation for discharge from A.I.F.
Station No.11 A.G.H.	Signatures A. Honman, Col., President.
Date 22.5.19.	DeWitt Henty, Major. Members.
The Property of	Edgar M.Inglis. Capt.,
CONFIRMED. A.H. STURDEE, Col., A.	A.M.C.
Station P.M.O. 3rd M.D.	
Date 23.5.19.	Director General Medical Services.
SOUTH AND THE REAL PROPERTY.	

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 theore to the S.O.I. and R.S., who will make necessary copies.

This report is confidential.

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

Page 22

Vational Archives of Australia

W20/6609.

0.i/c. Base Records.

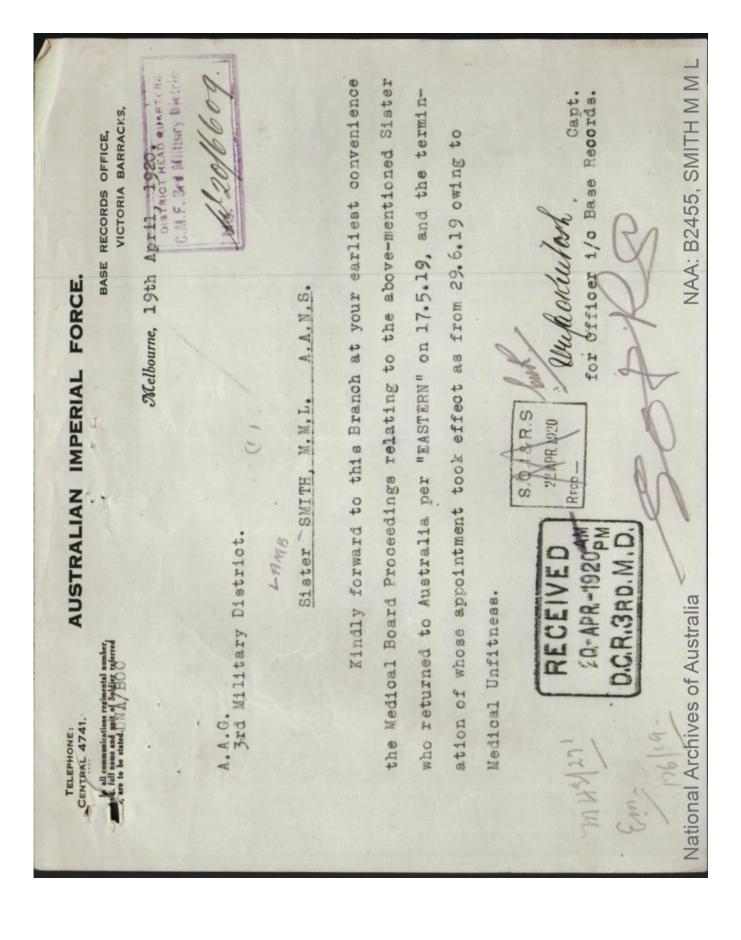
re Sister LAMB-SMITH M.M.L. A.A.N.S.

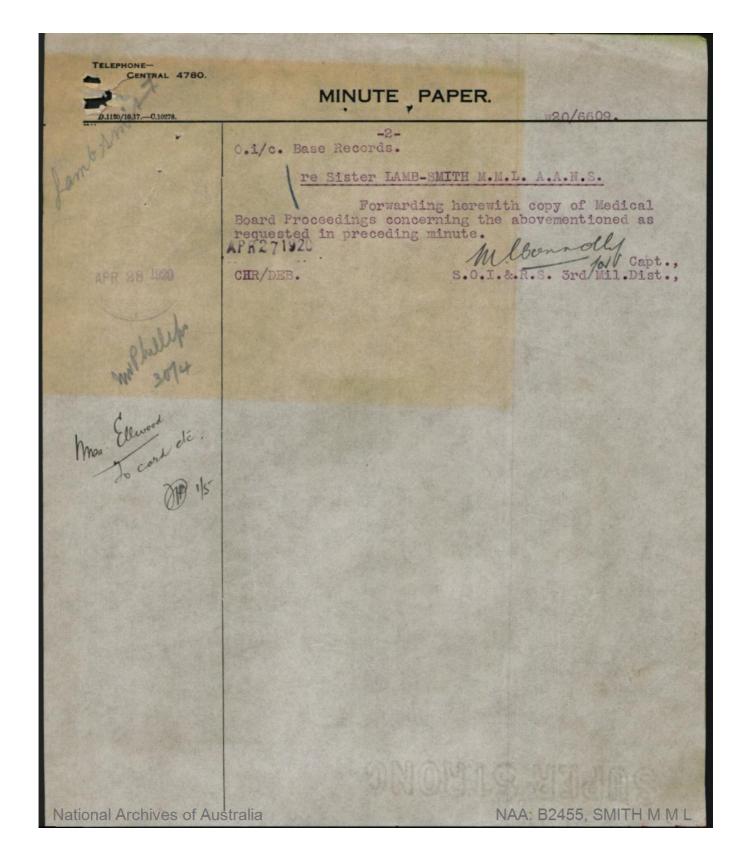
Forwarding herewith copy of Medical Board Proceedings concerning the abovementioned as requested in preceding minute.

CHR/DEB. ...

S.O.I.&.R.S. 3rd Mil.Dist.,

National Archives of Australia





Lamb Smith M.

Sister A.A.N.S. A.I.F.

O. in C. Base Records,

Please advise the present address of the

abovenamed Sister.

T.J. Thomas Finance Member 31/5/20.

IM.

FINANCE MEMBER,

Address of abovenamed Sister is recorded as :-

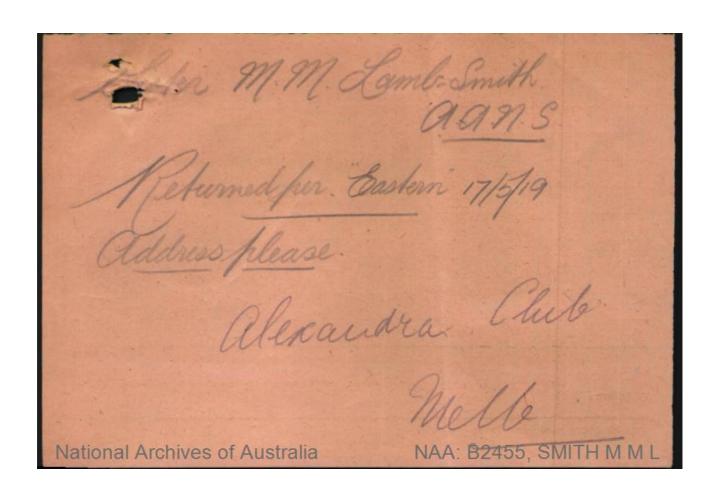
Alexandra Club,

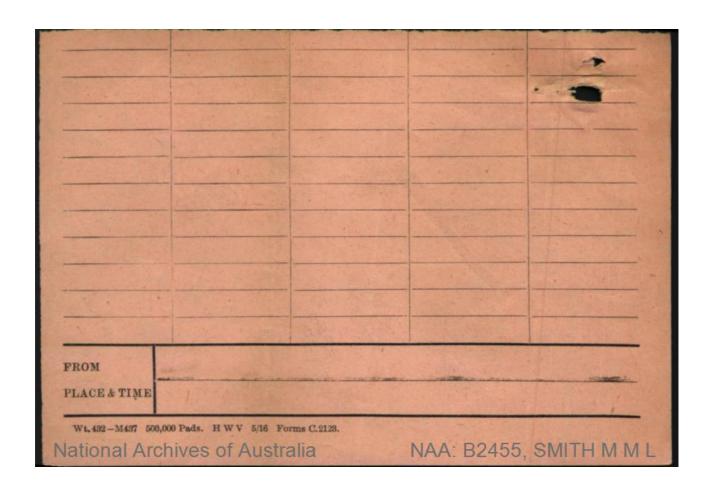
Flinders Street,

Melbourne.

Officer i/c Base Records, 1/6/20.

National Archives of Australia





61892 lon alet A.M. Form D2. MILITARY FORCES. (For use in Australia. Revised 1.10.18. **AUSTRALIAN** REPORT INVALID. AN 2. Rank SiSTER 3. Name LAMB. SMITH 1. Number 4. Unit aus 6. Trade or Occupation hursin 7A. Date of Enlistment 3 ang 1915 -7. Place of Enlistment 350 pp. 8. Disability in respect of which invaliding is proposed. MEDICAL OFFICER'S STATEMENT OF CASE. (Soldier's own statement must be careful as such, and signed by his Date of arrival 9 85. 9. Date and place of) origin of disability 10. Date and place where disability first caused man to become a Casualty... 11. Essential facts of Medical History (including causation) last oct. montel 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, 13. What is his present condition and progress The. 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? Coltanue Jew of apple Edgardelagle Cape Medical Officer in charge of case. I, having satisfied myself of the general accuracy of this report, concur therewith, except

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 BOARD ON FINALIZATION. Note.—Clear and definite 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 Minister for Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim for pension. 21. State whether the disability is clearly (a) Due to Military Service, (b) Aggravated by Military Service, (c) Independent of Military Service; (d) Due to, or aggravated by, want of proper care on man's part, intemperance, misconduct, &c. (a) no Irochili 22. Is the present degree of disability permanent? 23. If not, at what rate and to what degree do you anticipate improvement? 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 percentage of full capacity.) 25. If an operation was advised and declined, was the refusal unreasonable ! 26. Do the Board recommend discharge as permanently unfit for General Service! Lerun of apple 27. If discharge is recommended, it should be stated whether further treatment is desirable in a (a) Sanatorium, (b) Orthopædic Institution, (c) Convalescent Home, (d) Asylum, or (c) other institution. State whether further treatment should be an in-patient or an out-patient, and for what period. 28. Is any surgical appliance recommended ?. Station 11 a. G.H Members. Members.

APPROVED.

Station

Data

P.M.O. 8RD, M.D.

Director General Medical Services.

Notes by S.O.I. and R.S.

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 justient on finalization. On completion of the Board, it will be forwarded to the P.M.O. by hand, for confirmation, use to the papers of invalidation of the papers of invalidation of the Board, it will be forwarded to the P.M.O. by hand, for confirmation, and the papers of invalidation of the pape

delonel A.A.M.O

Page 30

Surname. Surname. Other Names. 93 Regimental No. Unit. This Surname. This Surname. AUTHORITY. This Surname. The Surname.	Service
RERECTION SCHEDULE PURPORE. / / / / / / / / / / / / / / / / / / /	it.
at Melbourne on Transport "Mooltan" 26/12/16	ORITY.
4	511.
Posted to Cumbala War Hpl Bombay for duty 15/1/17 Tid. to Heslop	
W.H. Secunderabad 18/2/17 Ifa. to Sicilia for temp duty 24/8/1814 The 6/1-19	6/1-19
	13/1/19
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National-Archives of Australia NAA: B2455, SMITH MML	MML

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National Archives of Australia	NAA B2455 SMITH M M I

In all communications regimental number, rank, full name, and unit of Soldier referred to are to be stated.

ER AUSTRALIAN IMPERIAL FORCE. BASE RECORDS OFFICE.

VICTORIA BARRACKS.

MELBOURNE. 20th November, 1918.

60784

Dear Madam,

I am in receipt of cable advice to
the effect that Sister M.M.L. Smith, Australian
Army Nursing Service, is returning to Australia.
Beyond this no further information can be supplied
It is regretted that the movements or name of the
vessel on which she is arriving cannot be disclose

Should any further information be received at this office, you will be promptly notified.

Yours faithfully,

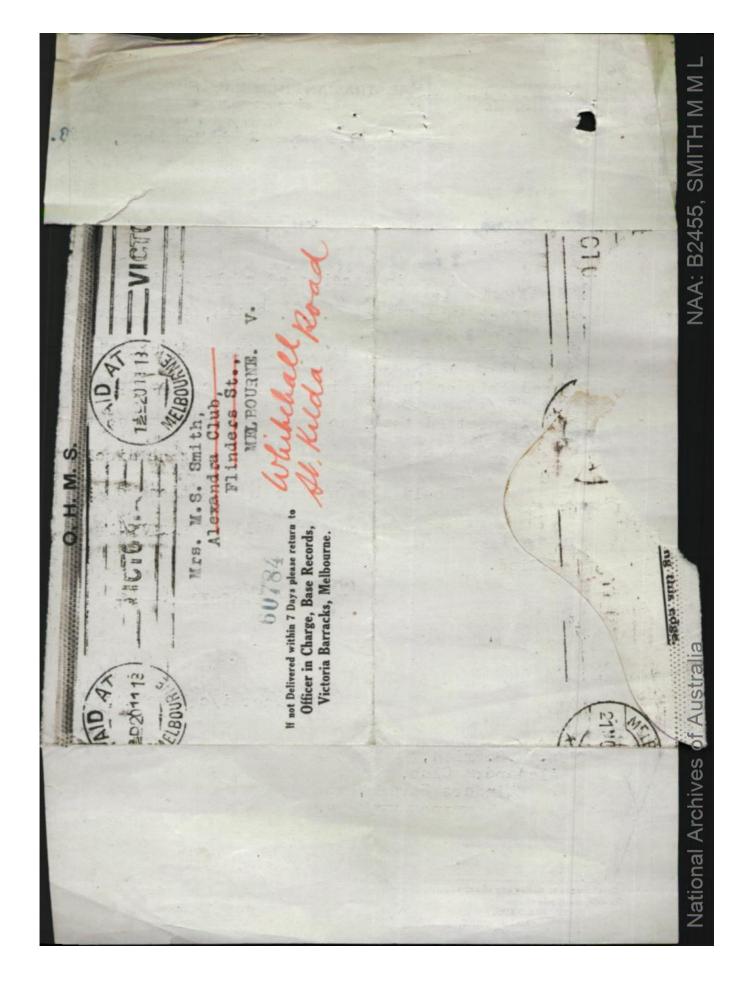
Mrs. M.S. Smith,
Alexandra Club,
Flinders Street,
MELBOURNE.

Don't forget to advise any change of address to
BASE RECORDS,
MELBOURNE,
ational Archives of Australia

NAA: B2455, SMITH M M L

Major

Base Records.





27th November, 1918.

63326

Dear Madam.

I am in receipt of cable advice to the effect that Sister v.v.I. Smith, Australian Army Nursing Service, is returning to Australia. Peyond this no further information can be supplied. It is regretted that the movements or name of the vessel on which she is arriving cannot be disclosed.

Information re the above was forwarded to you on the 20th inst. at Alexandra Club, Flinders Street, Welbourne, but same was returned unclaimed.

Should any further reports be received at this office, you will be promptly notified.

Yours faithfully,

Officer i/c Base Records.

Mrs. M.S. Smith,
o/o Mrs. Sloane,
Mulwala Station,
MULWALA. WSW.

National Archives of Australia

NAA: B2455, SMITH M M L

ag1-6

20th November, 1918.

60784

Dear Madam.

I am in receipt of cable advice to
the effect that Sister W.M.I. Smith, Australian
Army Nursing Service, is returning to Australia.

Reyond this no further information can be supplied.

It is regretted that the movements or name of the
vessel on which she is arriving carnot be disclosed.

Should any further information be received at this office, you will be promptly notified.

Yours faithfully,

Officer i/c Base Records.

Mrs. M.S. Smith,
Alexandra Club,
Flinders Street,

National Archives of Australia

NAA: B2455, SMITH M M

Page 36

Surname LAM B	(0	AL HISTO: Christian Name	RY of	n Age
Birthplace	TABLE	E IGENERAL TAE	BLE.	
Examined				
Declared Age				
Trade or Occupation		The	mon g Sweler	
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Weight			1	bs.
Chest Girth when f Expanded Measurement Range of Expansion			inch	
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	rm		Left.	
When Vaccinated				
Vision	(23.23. 1 —			
(a) Marks indicating co genital peculiarities previous disease	or			
(b) Slight defects, but n sufficient to cause n jection	$ \text{not} \begin{cases} (b) \\ \text{re-} \end{cases} $			
Approved by (Signatu				
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Enlisted	at		August	19 15.
	(on	day of		
Joined on Enlistment .	Thos	Corps.	Regtl. No	
Transferred to				
Became non-effective by.				
101	on			19 .
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Name of Hospital.	Admitted to Hospital.		Discharged from Hospital.			Disease.	Number of days in	
Traine or Trospecial	Day.	Month.	Year.	Day.	Month.	Year.	ALCOHOLD WARRY	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. NAA: B2455, SMITH MM National Archives of Australia

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Transfer or Service Abroad, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c. Date. Brief Details, and Signature. 24.11.16 Table IV.—Service Table. Date of Date of Date of Date of Station. Station. Arrival. Departure. Departure. Arrival. National Archives of Australia NAA: B2455, SMITH M M L

O. TRACE. Less Calcuston 9/11/18 per SS Jaled Calculla 12/11/18: Rec BR 13/11/18. 19.NOV18 Hadadora - Calcuth Gueried - Mo hace NAA: B2455, SMITH M National Archives of Australia

	Transferred to
	AUSTRALIAN IMPERIAL FORCE.
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Rank J	Austre Army Nursing Service
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Discha	Progressing satisfactorily Coourse 2B 2 . 1 296 y Received 3R 13/10/18 KET aged duty (Report wo Ending 12/10/18) Conattio 266/3167 18 Simila Mays Reco BR 3/19/18 Leath 2/11/18 per S.A. "Langola" Seatta 9/11/18 per S.A. "Langola" Tobb/1241 Badadora No Calcutta 12/11/18 Rec Por 13/1/18 A
	entta Jangola transferred to Australia 18/11/18 Kec Port. 13/1/18 A leutta Langola transferred to Australia 15/11/18 Kec Port. 13/1/18 A leutta Langola transferred to Australia 15/11/18 Kec BR. 19/1/18 A
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20 · 11 · 18 20 · 11 · 18 30 APR 1919	Commody 3rd Mb D advised Retg. Aust.
29.6.19	N.O.K. Advised returning to Australia, Form
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	1914/15 STAR B IS UED B
	No. AF
i	BY SRB D. B. WAR HISTORY INDEX
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National Arc	