

NAA: B2455, MCCLUSKEY T

Series number: B2455

Control symbol: MCCLUSKEY T

Barcode: 1939952

Number of pages: 33

Title: McCluskey Thomas: SERN 3107: POB Kyabram VIC: POE Bendigo VIC: NOK F McCluskey

Thomas N

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MILITARY FORCES

ALIAN IMPERIAL FORCE.

| Attestation Paper of Persons | Enlisted for Service Abroad. |
|--|---|
| No. 3/0 Y Name Surname / (| 100/11 |
| in full (Christian Name | Thomas Thomas |
| V5861 Unit | 1/3 4 "CO R'ts |
| Joined on | afiffy Latin |
| Questions to be put to the Per- | son Enlisting before Attestation. |
| 1. What is your Name! | Thomas MCLUSKEY |
| The state of the s | 2. In the Parish of in or |
| 2. In or near what Parish o Town were you born ? } | near the Town of January |
| | in the County of TCM |
| 3. Are you a natural born British Subject or a Naturalized British Subject? (N.A. If the latter, papers to be shown.) | 3. /49 |
| 4. What is your Age! | . 16 12 |
| 5. What is your Trade or Calling ! | 5. Woolfresaly |
| 6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? | 6. 2/0 |
| 7. Are you married ? | 7. (1)-11 1 (8) N-1, 40.1 |
| 8. Who is your next of kin t (Address and relationship to be | 8 Tother I nowing lasker |
| stated) | Wanfanui Jerk Shepharto |
| The answer to this question shall not be construed as in the nature of a will. | Goghe heel ve Es a Vice |
| 9. What is your permanent address in Australia† | "Warlanui" Park. |
| | Thepharton he |
| 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 yes 8 days and Tamp Bentyo |
| 11. Have you stated the whole, if any, of your previous service? | 11. |
| 12. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? | 12. |
| 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? | 13. |
| 14. Are you prepared to undergo inoculation against small pox and enteric fever! | 14. 1900 |
| by me to the above questions are true, and I am willing and Commonwealth of Australia within or beyond the limits of the | do solemnly declare that the above answers made hereby voluntarily agree to serve in the Military Forces of the |
| two fifthe | of the pay payable to me from time to time during my service |
| for the support of my wife and shildren. | M. Kl b. |
| Date Date | Signature of person enlisted. |
| * This clause should be struck out in the case of unmarrie † Two-fifths must be allotted to the wife, and if there are c | d men or widowers without children under 18 years of age. hildren three-fifths must be allotted. |

| Army For | m B 103 | | Regimen | ntal Number |
|-------------------|---------------------|--|---------------------------------|--|
| and to | D. 100. | Casualty Form-Active | | |
| | Red | iment or Corps. 7/37th Battal: | ion A.I.F. | |
| Rank Pri | vate Surname | MCC LUSKEY | nristian NameTho | mas |
| | Surname | Age on En | | |
| Religion | . 28.11.16. | m War & 4 Moni | the miss realisms f | 28.11.16. |
| Enlisted (|) | Terms of Service (a) ar & 4 Mon | -Service reckons i | t- |
| Date of pr | omotion to presen | t rank Date of a | appointment to lance | rank |
| Extended | | Re-engaged | Qualification (b) | |
| Extended | | Re-engageu | or Corps Trade and | rate |
| Occupation | 1 | | | Signature of Officer. |
| | Report | | | |
| | Report | Record of promotions, reductions, transfers, casualties &c., during active service, as reported on Army Form B 213, Army Form A 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Taken from Army Form. B. 213, Army Form A. 38, or other official |
| Date | From whom received | The authority to be quoted in each case. | | documents. |
| | | | Melbourne 19 | .2.17. LR.1995 |
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| 13.10.17. | C.0.37th Bn. | Killed in Action F | ield Belgium 4. | 10.17.013/46D045/5773 |
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| Anzac Section | | (Sgd) S.T | BENNETT. | |
| G.1 | 1.Q. B.E.F. | • | | .2nd Lieutenant |
| 761 | n November 191 | Officer Officer | in Charge Reco | ords |
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| | | d fee, or entisted into Section D, Army Reserve, particulars of | such re-engagement or enlistme | at will be entered. |
| (Signalier | Shoeing-Smith, &c. | W. 8527—M2093 1000en | 7/17 (25686) C. P. & S. Ltd. Po | Mills D. Ann 10 14500 |
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| | | / | COATE Co | amp, Bendigo. |
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| | | | Signature e | of Attesting Officer. |
| | *A person enlisting | who objects to taking an oath may make an affirms | ation in accordance with the | Third Schedule of the Act, and |
| | the abov | e form must be amended accordingly All amende | ments must be initialed by th | ne Attesting Officer. |
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| National Archives | Australia | | NAA: BZ | 455, MCCLUSKEY T |

| whom received | Record of premotions, reductions, transfers, carsulties, &c., during active service, as reported on Army Form B.21s, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents. | |
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| | Attestation of the above-named p | | | | |
| , | n complied with. I accordingly | approve, and ap | point hi | m· | |
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| | | , | | | |
| | Park Command | 4/14 | | NAME OF TAXABLE PARTY. | |

CERTIFICATE OF ATTESTING OFFICER.

port

From whom received

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 question has been duly entered as replied to by him.

I have examined his naturalization papers and am of opinion that they are constituted (This to be struck out except in the case of persons who are naturalized British Subjects.)

Date 33/11/16

C.O. A. I. F. Camp, Ben Signature of Attesting Of

OATH TO BE TAKEN BY PERSON BEING ENLISTED.*

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

So HELP ME, GOD.

Signature of Person Enlisted.

Signature of Person Envisted

Taken and subscribed at Inaly in

the State of McTVU a

he State of

day day

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M.M. Jeg D. O. A. I. F. Camp, Bendigo.

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.

before me

National Archives of Australia

NAA: B2455, MCCLUSKEY T

FIELD SERVICE.

Army Form B. 2090A.

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

| or notineation of death on Itimy Form | 5. 210 01 111my 201m 2 | | |
|--|---|---|---|
| REGIMENT 37th Battalion | Squadron | Troop, \ | Australian Division |
| OR CORPS (3107 | Rank | A.R.C.S. | |
| Regimental No. MCC LUSKEY | 7 | homes. | N. S. |
| 4th October 1917 | A CONTRACT OF THE PARTY OF THE | in the Fiel | d BELGIUM |
| Died Died Date | Killed in Acti | lon | |
| Cause of Death* | Army Form B 21 | 3 dated 13 | th October 1917. |
| Nature and Date of Report | Co 37th Battal | ion ATP | |
| By whom made | | | or to fatigue, privation or exposure while on |
| * Specially state if killed in action, or died from wounds mili | itary duty, or from injury while on | | or to latigue, privation of exposure while on |
| Place | 30 320 10001400 | Date | |
| Burial By whom reported | | | |
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| State whether he leaves | DOOK 01) | | |
| a Will cr not ((c) as a separate docur | nent | | |
| All private documents and effects receive will is found it should be at once forwarded to the | e War Office. | | |
| Any information received as to verbal ex- reported to the War Office as soon as possible. | | | |
| A duplicate of this Report is to be sent to or Field Disbursing Officer, as the case may relatter). If the decased's Small Book is at the Ba ANZAC SECTION 376 | the Fixed Centre Paymaster equire, together with the De se, it should be forwarded to Eche Jon. | eat Home, or to the leceased's Pay Pook (| 11 |
| Station and Date 7.11.17 | a tare of Officer in charge of jutant-General's Office at th | e Base Office | William 2/Lieut. |
| (11'2) W.537/M 50 500,000 10/16 JFW [:323] Form-/ | B2090A/2 | | |
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| description. | | | |
| I consider him fit for act | ive service. | | |
| Date 23/11/16 | | | |
| | *************************************** | | |
| Place / Bondigs Co | emp. | 0.04 | |
| | | 9/10 | amphell Put |
| | *************************************** | Signature of Es | camining Medical Officer. |
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| CERTIFICA | ATE OF COMMAN | DING OFFIC | ER. |
| I CERTIFY that this Atten | station of the abo | ove-named per | son is correct, and that |
| the required forms have been c | complied with. I a | | |
| to 7/34 | | | |
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| Date 16/1/4 | | Viane | in laying |

National Archives of Australia

Place Regal Park

NAA: B2455, MCCLUSKEY T

Commanding 7/04

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| CERTIFICATE OF MEDIC | AL EXAMINATION. |
| examined the above-named person, and fig conditions, viz. :— | ind that he does not present any of the |
| crofula; phthisis; syphilis; impaired con n, voice, or hearing; hernia; hæmorrhoids varicocele with unusually pendent testicle traces of corporal punishment; corrected ; or any other disease or physical defect dier. | ; varicose veins, beyond a limited extent; ; inveterate cutaneous disease; chronic l or deformed chest; abnormal curvature |
| Ie can see the required distance with either free use of his joints and limbs; and he of option. | |
| I consider him fit for active service. | |
| 23/11/16 | |
| Bendigs Camp. | Signature of Examining Medical Officer. |
| CERTIFICATE OF COMMA | NDING OFFICER. |
| I CERTIFY that this Attestation of the acquired forms have been complied with. I | |
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| Royal Park | Commanding 1/04 |
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National Archives of Australia

NAA: B2455, MCCLUSKEY

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| I have examin | ed the above detail | ls, and find the | m correct i | n every resp | ect. |
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| Certified In Orpy | MILITARY FORCES |
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| OH abean Cold 1973 | MILITARY FORCES. |
| AUSTRALIAN IN | IPERIAL FORCE. |
| Attestation Paper of Persons | Enlisted for Service Abroad. |
| No. 3/0 4 Name Surname III Christian Name | Phane |
| V 5864 Unit 7/ | 3 7 |
| Joined on 16 | 444 23/11/16 |
| Questions to be put to the Pers | son Enlisting before Attestation. |
| 1. What is your Name t | I. Thomas MCLUSTET |
| | 2. In the Parish of in or |
| 2. In or near what Parish or Town were you born? | near the Town of the Town |
| 3. Are you a natural born British Subject or a Naturalized | in the County of County |
| British Subject (N.B.—If the latter, papers to be shown.) | J's to be the services of the |
| 4. What is your Age? | · Hay years. |
| 5. What is your Trade or Calling 1 | 5. Warefreser |
| 6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? | 6. 10 |
| 7. Are you married? | 124 1 1 merch |
| 8. Who is your next of kin ! (Address and relationship to be | 18 Novey in many warrey |
| The answer to this question shall not be construed as | Manganus Tark Shepperton |
| in the nature of a will. | o C/o Phomso Mcluskey Eng |
| 9. What is your permanent address in Australia† | Wangamii Park |
| | Thephaton the |
| 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, | Ils 8 days amstampBenhyo |
| state cause of discharge | 11. Ge 4 |
| 12. Have you ever been rejected as unfit for His Majesty's Service † If so, on what grounds † | 12. 20 |
| 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? | 13. |
| 14. Are you prepared to undergo inoculation against small pox and enteric feyer? | 14. ge 3 |
| Commonwealth of Australia within or beyond the limits of the | |
| 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 and children. | Homas M. Olys Rey |
| | Signature of person enlisted. Signature of person enlisted. children under 18 years of age. |
| | |
| National Archives of Australia | NAA: B2455 MCCLUSKEY T |

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.)

Date 33/11/16

C.O. A. I. F. Camp, Bendigo.

Signature of Attesting Officer.

OATH TO BE TAKEN BY PERSON BEING ENLISTED.*

well and truly serve our Sovereign Lord the King in the Australian Imperial Force from 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.

Taken and subscribed at a flum

the State of

this

hofore me

G.O. A. I. F. Camp, Bendigo,
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

NAA: B2455, MCCLUSKEY T

Description of Thomas MCCLUSKEY on Enlistment.

| Age 26 years 3 months. | Distinctive Marks. |
|--|---------------------|
| Height 5 feet 10 2 inches. Weight 180 lbs. | Scaw back and thigh |
| Chest Measurement 38/42 inches. Complexion Ruddy | tac 4. L. arm |
| Eyes Buown | M. |
| Hair MAD | |
| Religious Denomination Presupters | an |

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.

23/11/16 Place Bendigo Camp

Tampbell Capti. 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

Date /6/1/4
Place Poral Park

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National Archives of Australia

NAA: B2455, MCCLUSKEY

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| Unit in which served. | Promotions, Reductions, | , Casualties, &c. | From— | k. To— | Ren | narks. |
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| ERVICE. 9 3. J. | Date. | 5-4-17 | 10.01 mg | 11.9.77 12.9.77 14.10.77 14.10.77 14.10.77 | nach re-egga |
| ACTIVE SE THE Service recl Qualification (b) | Place. | Mallouna 19/2/17 Devonport 25-4-17 | Eugeond . | Rouelles -do- -d | my Reserve, particulars of cal Corps duties. |
| CASUALTY FORM—ACTIVE SERVICE. Regiment or Corps 7 1 2 1 4 9 3 1 1 10 9 Rank Rts Name MECLUSKEY J. J. M. 27 10 10 10 10 10 10 10 10 10 10 10 10 10 | 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. | Embarked H.M.A.T. A.70 . Ballerate. | 1/4 PROCESDED OFFICE OF TO THE | Marched in Ex. fing Rouelles Sakin on Shingh Lab — do — Killed in Action Killed in Action Line Lo Secretary Defence Helpourne; F. with Army Forms B20904 7th Nove | (a) In the case of a man who has re-engaged for, or enlisted into section D. Army Reserve, particulars of such re-engagement or enlish at the entered (b) e.g., Signaller, Shoeing Smith, &c., &c., also special qualifications in technical Corps duties. (b) e.g., Signaller, Shoeing Smith, &c., &c., also special qualifications in technical Corps duties. 2nd LieutPSI 3nd LieutPSI |
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To 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 $^{\wedge}$ to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Christian Names Surname TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc. TABLE I.-General Table. Brief details, and Signature Examined 26-5-17 T.A.B Declared Age Trade or Occupation. Height . Weight... inches. Chest Measurement) R Physical Developmen Vaccination Marks When Vaccinated ... (R.E.-V Vision (a) Marks indicating congenital peculiarities or previous (b) Slight defects but not sufficient to cause rejection-Approved by .. Rank. Medical Officer. TABLE IV .- Service Table. Enlisted day of Movember 1916 Date of arrival or embarkation Station or Troopship Regtl No. Corps Joined on 3/07 enlistment Transferred Became non-effective by. on _____ day of ___ (Signature) (Rank) W. P. GRIFFITH & Sons Ltd., Printers, Old Bailey, E.C. [1273] W15368/M1384 500m 2/178 45 59 NAA: B2455, MCCLUSKEY National Archives of Australia

| Name of | | Admitted to Hospital | Dis | Discharged from Hospital | B | Dievase | Number of down in | | is bearing on the | cause, nature, n cases of syp | or treatment o | f the case, lik | aly to be of int | orest pital | Signature of | |
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| Hospital | Day | Mouth Year | r Day | Month | Year | | Hos | 1 | will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | The subsequent sfers, &c., will | t progress, in be given in th | cluding parti | ulars of treat | nent | Medical Officer | |
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IMPERIAL WAR GRAVES COMMISSION, 82, Baker Street, London, W.1, England.

| Date. | i sele | tin. | s. ard |
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THE WAR GRAVES OF THE BRITISH EMPIRE.

CEMETERY REGISTERS MEMORIAL REGISTERS.

The Register recording the names and particulars of those members of the British Expeditionary Forces who died in His Majesty's service during the Great War and are buried in the Cemetery (or whose names are commemorated on the Memorial) mentioned overleaf has been published. It will be the final official record of the War Graves in this Cemetery and copies will be deposited in all the Statutory Libraries of the British Empire for permanent custody.

The Registers contain a full description of the Cemeteries, their history, and directions for reaching them. Maps show the position of the Cemeteries in relation to the surrounding country and plans show the location of the graves.

Nationals/ArchivesAprialstradia/25 H&J, Ld Gp 148 NAOAA) BOL455, NOREGLOUS KOEY T

The names, ranks and other particulars of the Dead have been compiled from information furnished by the Naval and Military Record Offices and the next-of-kin. A proof slip of the entry in which you are interested is attached to the form opposite; corrections shown in pencil on the left hand side of it will be included in the Register. The number shown on the right hand side is the reference to the entry and will not be included.

The letters and numerals at the end of the entry represent the final registration of the burial. In the majority of Registers the number of the Plot (if there is more than one Plot) is indicated by a Roman numeral, the Row by a capital letter and the Grave by a number.

The Registers are compiled for official use, but it has been found that many of the relatives and friends of the fallen wish to possess a copy (or copies) of the Register in which they have a special interest, and copies are sold to them at cost price. The additional number to be printed will depend upon the demand resulting from this circular, and very few copies will be reserved to meet future calls; it would therefore be appreciated if you would kindly inform any of those connected with the late soldier, whose name appears on the slip proof, who are likely to require copies, so that a sufficient number may be ordered from the printers. If you desire to purchase this Register will you kindly complete and detach the form opposite and forward it, as soon as possible, to the Receiver of Public Moneys, Department of Defence, Victoria Barracks, Melbourne, with a remittance of three shillings for each copy you require. These copies will then be forwarded to you POST FREE. An acknowledgment of your remittance will be sent within fourteen days of its receipt.



FABIAN WARE, MAJOR-GENERAL, Vice-Chairman.

National Archives of Australia NAA: B2455, MCCLUSKEY

ORDER FORM.

(AUSTRALIAN IMPERIAL FORCE).

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

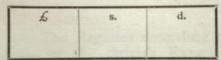
THE REGISTER OF

MENIN GATE MEMORIAL. PART **PAL** (AUSTRALIANS L-Q).

McCLUSKEY, Pte. Thomas Miller, 3107. 37th Bn. 4th Oct., 1917. Age 26. Son of Thomas Miller McCluskey and Jenie Bell McCluskey, of Wanganui Park, Shepparton, Victoria. 3389

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

Please forward to me at the address given below cop(y) ies of the Register containing the above entry, for which I enclose a remittance of



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Address.

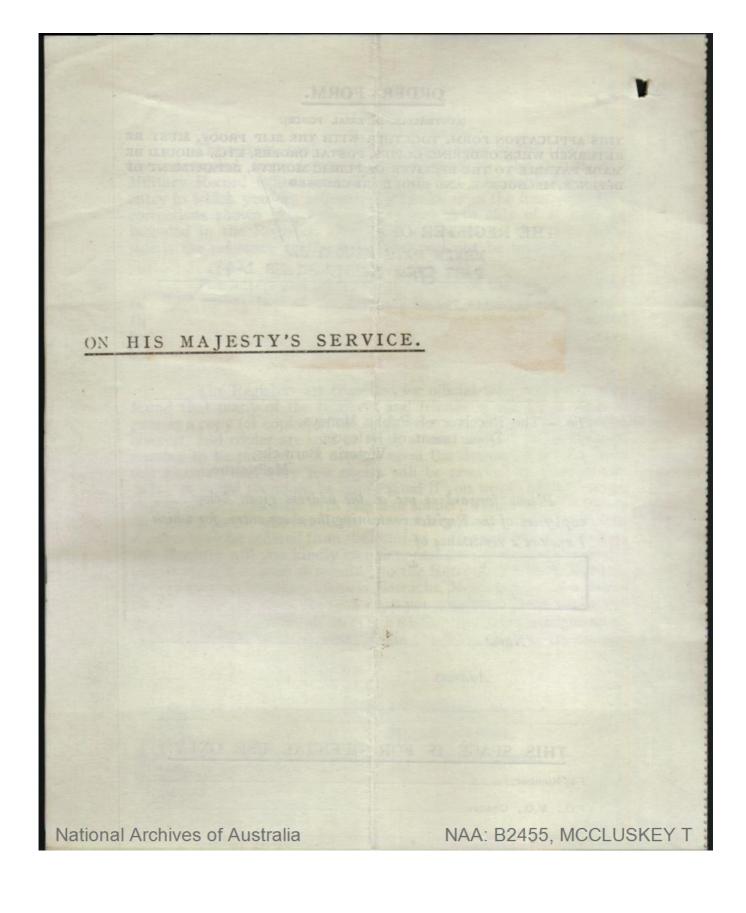
THIS SPACE IS FOR OFFICIAL USE ONLY.

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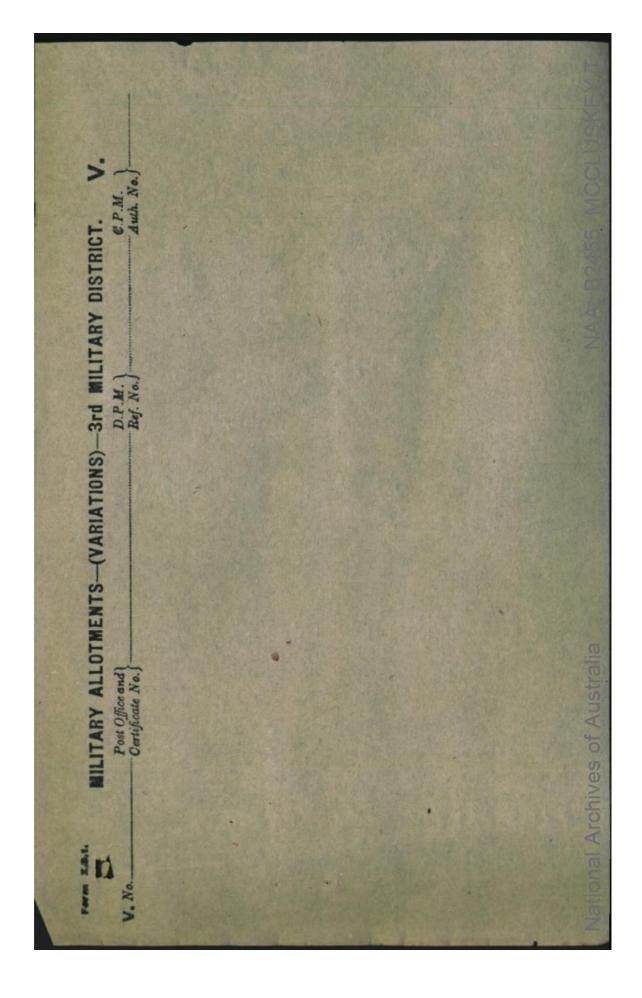
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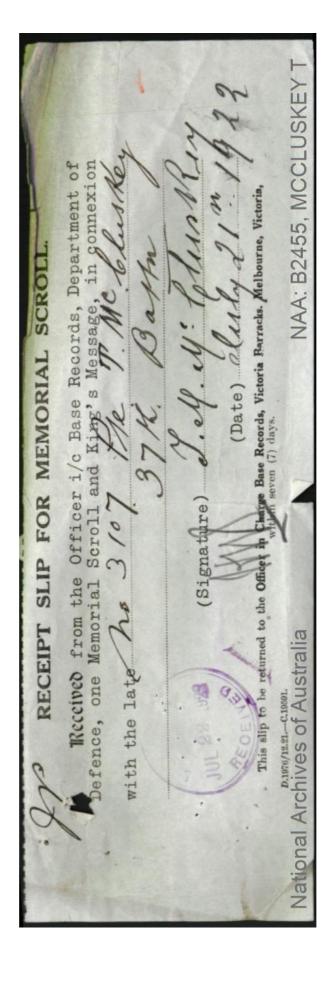
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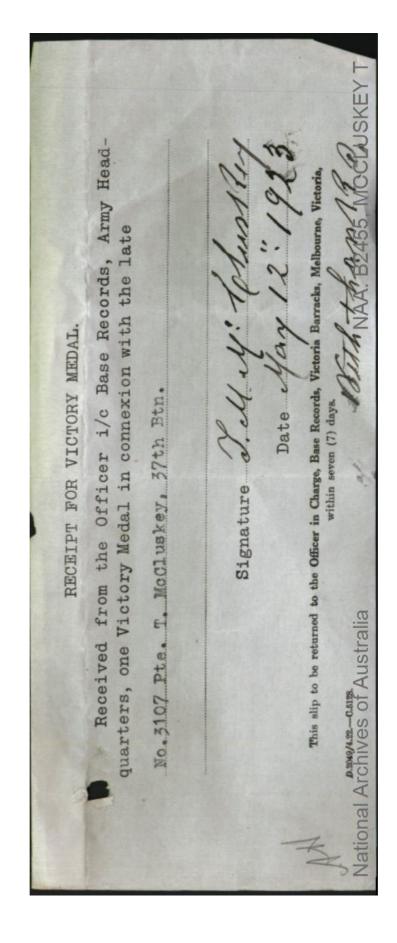
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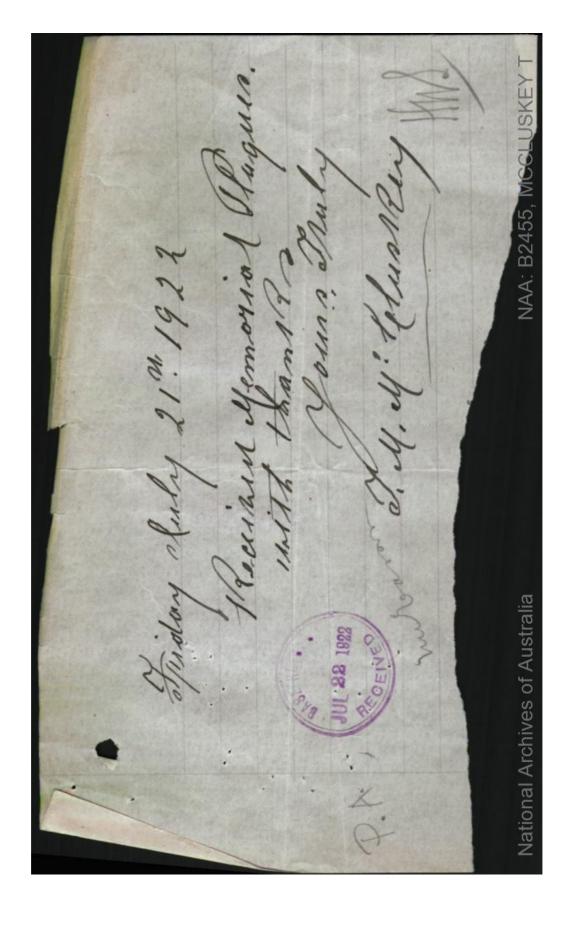


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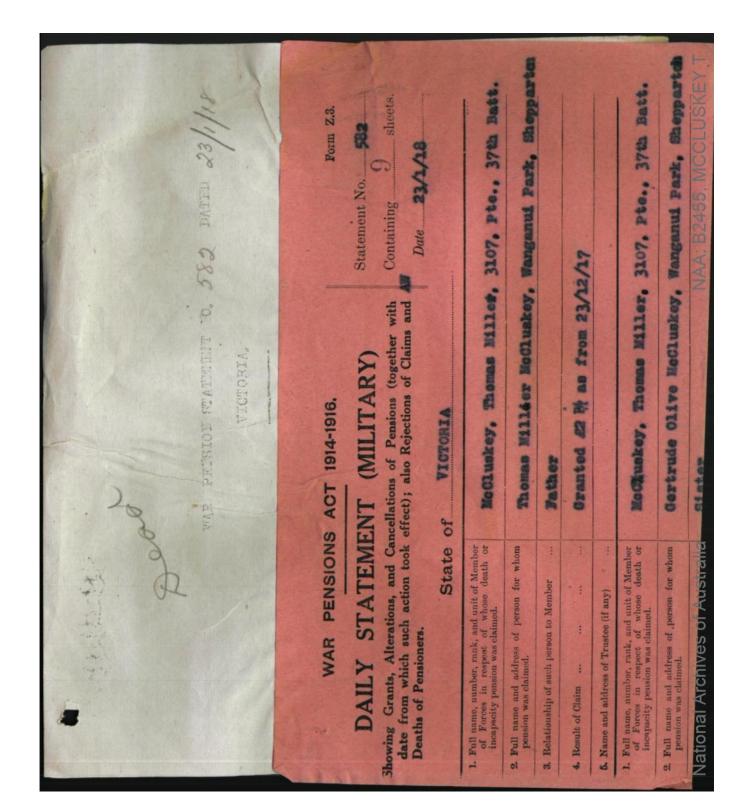
National Archives of Australia

WILL.

| Name in full. | I, Pte. Thomas. McCLUSKEY |
|--|---|
| Unit. | Regimental Number 3107 serving in 37th Battalion |
| unit. | of the Australian Imperial Force do hereby revoke all former Wills made by me and declare this to be my last Will. |
| Name and Address | I DEVISE and BEQUEATH all my real estate unto Thomas |
| of person or per- | Miller. McCluskey (Father) |
| sons to whom it is to go | Wanganui Park Australia Shepparton.Vic. |
| Name and Address | absolutely, and my personal estate I bequeath to |
| of person or per- | Thomas Miller McCluskey (Father) Wangamui Park |
| sons to receive personal estate | Shepparton Victoria Australia |
| (See Note) | IN WITNESS WHEREOF I have hereunto set my hand this17th |
| Fill in Date. | day ef July A.D. 1917 |
| | Pte. Thomas McCluskey (Signature). |
| All alterations to be initialled by Testator and Witnesses. | Signed by the said Testator as his last Will and Testament the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses |
| TIPOT TIPOTO | Signature of Witness I.M. Taylor |
| FIRST WITNESS. | Address and Occupation 37th Batt. A.I.F. |
| | Signature of Witness Jas Ronan |
| SECOND WITNESS | Address and Occupation 37th Battn A I.F. |
| | N.BPersonal Estate includes Pay, Effects, Money in Bank, Insurance Policy, in fact everything except Real Estate. |
| Certified to be a | true copy of the Will of No.3107 Pte McCLUSKEY. Thomas. 37th .F. (Deceased) |
| | Le Montes |
| a | Cpl |
| Checked | Cpl Estates Branch, Adm. Hdqrs., London. |
| Bloues | 10.4.18. |

WILL.

| Name in full. | I. Pte. Thomas. McCLUSKEY |
|---|---|
| Unit. | Regimental Number 3107 serving in 37th Battalion of the Australian Imperial Force do hereby revoke all former Wills made by me and declare this to be my last Will. |
| Name and Address of person or per- sons te whom it is to go | I DEVISE and BEQUEATH all my real estate unto |
| Name and Address of person or per- sons to receive personal estate (See Note) | absolutely, and my personal estate I bequeath to Thomas Miller McCluskey (Father) Wanganui Park Shepparton Victoria Australia |
| Fill in Date. | IN WITNESS WHEREOF I have hereunto set my hand this |
| | Pte. Thomas McCluskey (Signature). |
| All alterations to be initialled by Testator and Witnesses. | Signed by the said Testator as his last Will and Testament the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses |
| FIRST WITNESS. | Signature of Witness J.M. Taylor Address and Occupation 37th Batt. A.I.F. |
| SECOND WITNESS | Signature of Witness Jas Ronan Address and Occupation 37th Battn A I.F. |
| | N.BPersonal Estate includes Pay, Effects, Money in Bank, Insurance Policy, in fact everything except Real Estate. |
| Battalion. A.I. | Estates Branch, |
| Checked Souls. | 10.4.18. |
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Army Form B. 2090a.

| OR CORPS Squadron, Troop, Srd Australia Squadron, Troop, Srd Australia Squadron, Troop, State Surname McGLUSKEY Christian Names Thomas Thomas In the Field BELGIUM | 3rd Australian Division |
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* Special. State if killed in action, or died from wounds received in action, or from injury while on military duty. GO 37th Battalion ATF Army Form Nature and Date of Report By whom made

1917.

B 213 dated 13th October

Killed in Action

Cause of Death*

....... State whether he leaves ((a) in Pay Book (Army Book 64) Will not yet, to hand Book (if at Base). Date. Particulars not yet received By whom reported Place

(C) as a separate document. a Will or not

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

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

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

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