

NAA: B2455, SUMMERS RICCARD

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Number of pages: 51

Title: SUMMERS Riccard: Service Number - 4886: Place of Birth - Adelaide SA: Place of Enlistment -

Adelaide SA: Next of Kin - (Mother) SUMMERS Maran

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Fact sheet 8 - Copyright

AUSTRALIAN



MILITARY FORCES.

| - W. Canada - Canada | Sievs. |
|---|--|
| AUSTRALIAN IN | IPERIAL FORCE. |
| ATTESTATION PAPER OF PERSONS | S ENLISTED FOR SERVICE ABROAD |
| | Q. , |
| No. 4886 Name SUMMEN Unit A Cay | LION ALT. |
| | 1101 |
| Joined on 22/11/ | 1 |
| Questions to be put to the Per | rson Enlisting before Attestation. |
| 1. What is your Name? | 1. Ficcard Summers. |
| | 2. In the Parish ofin or |
| 2. In or near what Parish or Town were you born? | near the Town of Adelaide |
| | in the County of South australia. |
| 3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) | 3. N.B. |
| papers to be snown.) 4. What is your age? | 4. 23 h yrs. |
| 5. What is your trade or calling? | 5. Plumber. |
| 6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period? | 6. no. |
| 7. Are you married? Willowed | 7. no. |
| | 0 00 0 00 00 |
| 8. Who is your next of kin? (Address to be stated) | Park) South australia |
| 9. Have you ever been convicted by the Civil Power? | 9. no. Clinton Avenue |
| 10. Have you ever been discharged from any part of His Majesty's Forces, with Ignominy, or as Incorrigible | \$1 Peters Sa. |
| and Worthless, or on account of Conviction of Felony, or of a Sentence of Penal Servitude, or have you been dismissed with disgrace from the Navy? | 10. no 123/10/12 |
| 11. Do you now belong to, or have you ever served in, His Majesty's Army, the Marines, the Militia, the | 9 |
| Militia Reserve, the Territorial Force, Royal Navy or Colonial Forces? If so, state which, and if not now serving, state cause of discharge | 11 |
| 12. Have you stated the whole, if any, of your previous service? | 12. Yes. |
| 13. Have you ever been rejected as unfit for His Majesty's Service? If so, on what grounds? | 13. no- |
| 14. (For married men, widowers with children, and soldiers who are the sole support of widowed mother)— | 14. |
| Do you understand that no Separation Allowance will be issued to you after embarkation during your term of service? | |
| 15. Are you prepared to undergo inoculation against smallpox and enteric fever? | 15. Yes |
| 1. Succard Summers | do solemnly declare that the above answers made |
| of the Commonwealth of Australia within or beyond the l | |
| And I further agree to allot not less than three-fifths | of the pay payable to me from time to time during my |
| service for the support of my wife and children | 2 / |
| Date | R. Dummess |

* 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 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 NOV 22 1915

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 Nov 22 1915 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 ADELAIDE, in the State of SOUTH AUSTRALIA.

this day of

NOV 22 1915 19 , before me-

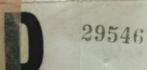
Signature of Attesting Officer.

^{*} 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 initialled by the Attesting Officer.

3

| Description of Riccar | d Summers on Enlistment |
|--|--|
| Age 23 years 9 m | onths DISTINCTIVE MARKS. |
| Height 5 feet 62 in | nches Vis R 6, C 6, |
| Weight 124 lbs. | 1 9 |
| Chest Measurement 322 35 in | nches lace 4 % |
| Complexion Fair | |
| Eyes Blue | |
| Hair N Brow | 2 |
| Religious Denomination of | Eng |
| CERTIFICATE O | F MEDICAL EXAMINATION. |
| I HAVE examined the above-name of the following conditions, viz. | ed person, and find that he does not present any |
| bearing been mouled with the let | |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dis healthy; he has the free use of h | ters D. or B.C.; contracted or deformed chest; any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dis healthy; he has the free use of h subject to fits of any description. | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dis healthy; he has the free use of h | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dis healthy; he has the free use of h subject to fits of any description. | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dishealthy; he has the free use of h subject to fits of any description. I consider him fit for action | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dishealthy; he has the free use of h subject to fits of any description. I consider him fit for actions to the subject to fits of any description. ADELAIDE | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dishealthy; he has the free use of h subject to fits of any description. I consider him fit for action and the subject to fits of any description. ADELAIDE | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not live service. MAJOR MAJ |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dishealthy; he has the free use of his subject to fits of any description. I consider him fit for action and the subject to fits of any description. ADELAIDE CERTIFICATE I CERTIFY that this Attest that the required forms have been | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not live service. Signature of Examining Medical Officer. OF COMMANDING OFFICER. Station of the above named person is correct, and an complied with. I accordingly approve, and |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dishealthy; he has the free use of his subject to fits of any description. I consider him fit for action and the subject to fits of any description. ADELAIDE CERTIFICATE I CERTIFY that this Attest that the required forms have been | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not live service. Signature of Examining Medical Officer. OF COMMANDING OFFICER. station of the above named person is correct, and |
| abnormal curvature of spine; or unfit him for the duties of a soldi He can see the required dishealthy; he has the free use of his subject to fits of any description. I consider him fit for activate to the subject him fit for activate him fi | any other disease or physical defect calculated to er. tance with either eye; his heart and lungs are is joints and limbs; and he declares he is not live service. Signature of Examining Medical Officer. OF COMMANDING OFFICER. Station of the above named person is correct, and an complied with. I accordingly approve, and |

| | | Period of | Service in each | |
|----------------------|----------------------------------|------------|-----------------|------------------|
| Unit in which served | Promotions, Reductions, Casualti | | То | Remarks |
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MILITARY FORCES.

| AUSTRALIAN IN | MPERIAL FORCE. 5 |
|---|--|
| ATTESTATION PAPER OF PERSON | S ENLISTED FOR SERVICE ABROAD |
| No. Bassy Name SUMMERS. | Rucard. |
| 14886 Unit | to the second se |
| Joined on 22/1 | 1/15 |
| Questions to be put to the Pe | rson Enlisting before Attestation. |
| 1. What is your Name? 2 | 1. Recert Summers. |
| In or near what Parish or Transport | 2. In the Parish of in or |
| 2. In or near what Parish or Town were you born? | in the County of South Amehalia |
| 3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the latter, papers to be shown.) | 3. N.18. |
| 4. What is your age? | 4. 23. 4/12 /15. |
| 5. What is your trade or calling? | 5. Flamber |
| 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. 70 |
| | 8. (mother) A.S. maran Summers |
| 8. Who is your next of kin? (Address to be stated) | Park South Anshalia |
| 9. Have you ever been convicted by the Civil Power? | 9. nomis on Summers |
| 10. Have you ever been discharged from any part of His Majesty's Forces, with Ignominy, or as Incorrigible and Worthless, or on account of Conviction of Felony, or of a Sentence of Penal Servitude, or have you been dismissed with disgrace from the Navy? | 10. No. Elenton avenue. |
| 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 | 2.527/8/1 auth? |
| 12. Have you stated the whole, if any, of your previous service? | 12. Jes. |
| 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 after emberkation during your term of service? | 14 |
| 15. Are you prepared to undergo inoculation against smallpox and enteric fever? | 15. Jes. |

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 * †

Signature of Person Enlisted.

^{*} This clause should be struck out in the case of unmarried men or widowers without children under 18 years of age. † Two-fifths must be allotted to the wife, and if there are children three-fifths must be allotted.

| 100000 | | ent or Corps | Christian | Name | Riccar | d. |
|--|---|---|--------------------------------|---------------------------------|----------|--|
| RankPRIV | 125 A 43 3 | SURERS | Age on Enlists | menty | rears | months. |
| Enlisted (a). | 99.11.16. T | erms of Service (a) | Ser | vice reckons from | nk | *11:10* |
| Date of pro | motion to present r | | | cation (b) | | |
| Extended { | } | Re-engaged { | | ps Trade and Rate | | |
| Extended [| | | 01 001 | | | ature of Officer. |
| ALC: NO | MAN AND AND AND AND AND AND AND AND AND A | | | | Date of | Remarks |
| | Report | Record of promotions, reductions, &c., during active service, as report B. 213, Army Form A. 36, or in oth The authority to be quoted in each cas | ted on Army Form | Place of Casualty | Casualty | Taken from Army Ferm B, 213, Army Form A. 36, other official documents |
| Date | From whom received | The authority to be quoted in con- | | | | |
| A STATE OF THE PARTY OF THE PAR | | The state of the | Embarked | | | |
| | | | Disembarked | | | |
| 7.5.16. | uo Ten spo | rt Froceeded to | join BEF | | e c 16 | . L.R.5811 |
| 7,00,000 | HUNTSPILL | with 4th A.D.Bas | ne Depot | Alexandria Marseille-S | | |
| 14.6.16. | 40 | Disombarked at | | | | 6.B.213.AC |
| 12.9.16. | uo Soth Bn | Taken on strong | W. | Field | | 35/4846. |
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| 6.4.17. | co Soth Bn | WOUNDED IN ACTI | on. | Field 315 dated 13 | | |
| - | | | | | | |
| 2.4.17. | 4th A.F.Ami | forred to Uss. | Cla Static | n. Field | 2.4.1 | 7. A.K.1106 |
| | | s. s.W.ARM. Admit | | | | |
| 3.4.17. | | ferred to A.T. | | Field | 3.4.1 | 7. A.K.1106 |
| | Sation, | for, or enlisted into Section D, Army Reserved | eve, particulars of such re-ci | ngagement or enlistment will be | entered. | [P.T. |
| (b) Shgualier | , Shoeing-Smith, &c. 1135/M768 1000m 9/16s 153 | wa 100 to | | | | |
| 4 | | , o corvice. | | | | 1000 |
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| ADEL | AIDE. | - F. | W. Da | EN JAME | | |
| ADEL | AIDE. | Signature of E. | (). (Da) | CAPTA AAM cal Officer. | | |
| ADEL | AIDE. | Signature of E. | (). (Daxamining Medi | AAM cal Officer. | | |
| | | Signature of E. | | CAPTA AAM Cal Officer. | | |
| | | | | AAM cal Officer. | | |
| CEI | RTIFICATE (| OF COMMANDING action of the above na | OFFICER. | s correct, and | | |
| CERTIFY required | RTIFICATE C | OF COMMANDING tation of the above na complied with. I | OFFICER. | s correct, and | | |
| CERTIFY required | RTIFICATE C | OF COMMANDING tation of the above na complied with. I | OFFICER. | s correct, and | | |
| CERTIFY required | that this Attest forms have been | OF COMMANDING tation of the above na complied with. I | OFFICER. | s correct, and | | |
| CERTIFY required | that this Attest forms have been | OF COMMANDING tation of the above na complied with. I | OFFICER. | s correct, and | | |
| CERTIFY required him to 4 | that this Attest forms have been | OF COMMANDING tation of the above na complied with. I | OFFICER. | s correct, and | | |

| j | Report | Record of promotions, reductions, transfers, ensuables, | Tarable and the | Date of | Romarks Taken from Arms Form |
|----------|--------------------|--|-------------------|----------|---|
| Date | From whom received | Record of permutans, requirements and account and the second of Army Form A. 38, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Casualty | Taken from Army Form B. 218, Army Form A. 30, or other official documents |
| 4.17. | 2nd A.G.H | S.W. ARM. Admitted and to | rans | 4.4.1 | 7. A.K.1106. |
| | | fer red to ENGLAN D. | Field | 5.4.1 | |
| 5.4.17. | H.8 Cambria | EMBARKED FOR ENGI, AND | Boulogne | 5.4.17 | . AK 1106 DO15/1387 |
| 5.4.17. | Royal Surrey | S.W. ARM. Admitted and | England | 5.4.17 | D.0.29/E. |
| | Hos pital | transferred to 3rd Aux. I | lospital | 24.4.1 | 7. |
| 24.4.17. | 3rd Aux. Hesp | S.W.ARM. Admitted and | England | 24.4.1 | 7. |
| 1949-01 | 3 | Discharged to Weymouth | | 7.5.1 | 7. |
| 12.5.17. | No 2 Com. D | Marched in ex Dartford. | England | 7.5.17 | . L.R.2782. |
| 1.7.17. | 0/S Trn.Depot | Marched in ex Weymouth | England | 29.6.1 | 7. L.R.4984 |
| 23.7.17. | do | 'Procee ded oversea s FRAI | IC16 | | |
| | | ex Overseas Trn. Depot | Sothampton | 23.7.1 | 7. D054/E LR 5857. |
| 28.7.17. | 4th ADBDepot | Marched in ex England | Havre | 24.7.1 | 7. D.59/30. |
| 11.8.17. | do | Marched out to Unit | Havre | 9.8.17 | . D.59/32. |
| 19.8.17. | 00 B.213. | Rejoin ed Unit | Field | 12.8.1 | 7. D.21/33.D032/3903 |
| 26.8.17. | do | MILIED IN ACTION. | Field | 25,8,1 | 7. B.21/33. |
| | | Verified | List No 451 | dated 2 | 7.8.17.D0 32/3846. |
| All | ZAS SECTION. 3 | ord Rehelon. G.H.Q | (SGD.) | S.H. CRA | WFORD Lieut |
| | British Exped | litionary Force. | | Office | r i/c Records. |
| 26.11.17 | Director . | Buried Prowse militar | V | | |
| | of Graves | bemetery, 1/4 mls 5, of | | | D4R. E. 248969. |
| BY THEY | 1 | messines. | France | | 87091/5803E 1/10/10 |

R. Summers.
Signature of Person Enlisted.

Taken and subscribed at ADELAIDE. in the State of SOUTH AUSTRALIA. this day of NOV 22 1915 19, before me

Signature of Attesting Officer. Lut

* 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 initialled by the Attesting Officer.

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 NOV 22 1915

Signature of Attesting Officer. Leur

OATH TO BE TAKEN BY PERSON BEING ENLISTED.*

| I. | Record | Summers. | swear that I will |
|----------|--------------------|-------------------------------|-------------------------------|
| | d truly serve our | Sovereign Lord the King in t | the Australian Imperial Force |
| from | NOV 22 1915 | until the end of the War, | and a further period of four |
| months | thereafter unles | s sooner lawfully discharged, | dismissed or removed there- |
| from; a | and that I will re | sist His Majesty's enemies an | nd cause His Majesty's peace |
| to be k | cept and mainta | ined; and that I will in all | matters appertaining to my |
| service. | faithfully discha | arge my duty according to law | v. |

10

SO HELP ME GOD.

R. Summers.
Signature of Person Enlisted.

Taken and subscribed at ADELAIDE. in the State of SOUTH AUSTRALIA.

day___

NOV 22 1915

this.

ignature of Attesting Officer. Lun

^{*} 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 initialled by the Attesting Officer.

D29546

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.

REGIMENT | Squadron, Troop, Battery or Company | Regimental No.4886 Rank Private Surname S U M M B R S . Christian Names Riccard. Date 25th August 1917. Place Belgium. Cause of Death Filled in Action. Nature and Date of Report Army Form B.213 dated 20th August 1917. By whom made Commanding Officer Soth Battalion. A.I.F. * Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty. State whether he leaves (a) in Pay Book (Army Book 64) ___(b) in Small Book (if at Base)____ a Will or not For Burlal Report See BIO (c) as a separate document 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., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book father withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report. 1Zac Section . 3rd Echelon . Signature of Officer in charge of Section Date Office at the Base } Dofficer 1/c Records. W2088/M1768-500,000-H. & Sr.-5/17-(10489)-Forms/B2090a/2.

I consider him fit for active service.

Date 22.1915

Place ADELAIDE.

AMBERTON MAJOR!
CAPTAIN.

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 A DOY. 2ND DEPOT PATTALION

Date 24.11.15.

Place EXHIBITION A.I.F. CAMP.

MI Hancick
Commanding
LT. COL

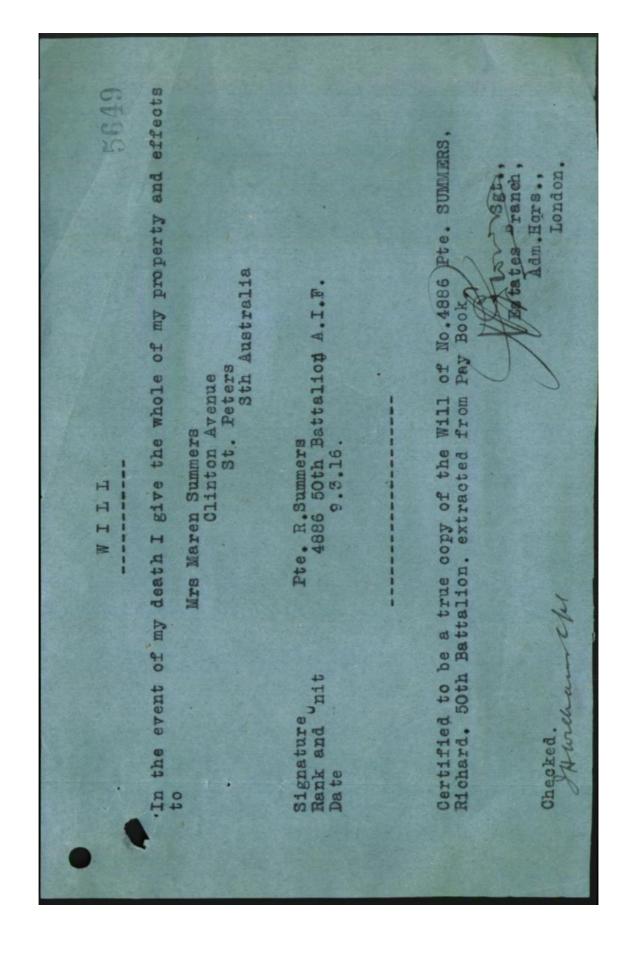
C.O. 2ND DEPOT BATTALION A.I.F.

Description of Riccard Summers. __on Enlistment vears months DISTINCTIVE MARKS. 5 feet 6 2 Height____ inches 124 lbs. Weight_ Chest Measurement 32 2-35 inches Complexion_ 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. nov. 22.1915 Place_ 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 A COY, 2ND DEPOT PATTALION Date 24.11.15 Place EXHIBITION A.I.F. CAMP. LT. COL. C.O. 2ND DEPOT BATTALION A.I.F.

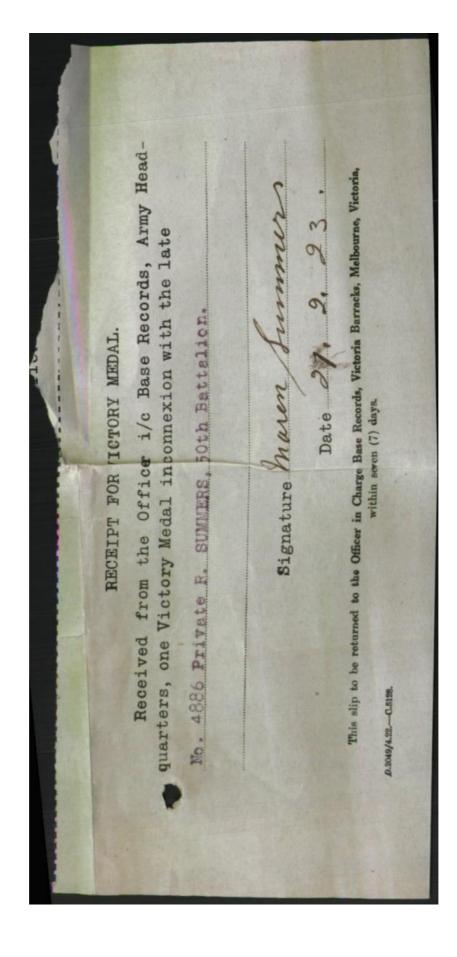
| Statement of Servi | Promotions, Reductions, Casualties, &c. | Period of Se | rvice in each | Remarks |
|------------------------|--|--------------|---------------|---|
| A. bo Zed Dep Bti | Poster Pte. | 22.11.15 | 61315 | |
| 15/10 Post BATTALION } | | DEC 1915 | 16/1/16 | CO 90/2 60/9/ |
| TRANSFERED TO | | 20.5.16. | | Pt- 14 13 + 29.5° Pt- 14 2496. 29.8° 16 |
| | Taken on STRENGTH FROM 4th Aud Dir Base Depol. as | Reinfo. 11 9 | .16 | |
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| 50th Bor. | At Goulogue for Eng. SWA | ia 2 | 5.4.17 | Dr. 15/1387 18.41 |
| south. | Pt. aam Royal Lurry Count | 4 | 5/4/14 | PI 29/24618.19/11 |
| | He Proceeded asea France Constant Per Dons | southenfi | 23.7.17 | DO 54E 28/1/2 SP5857 |
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| | Buried | | | 194 B. |
| * 7 - 1 - 1 | Der file 11095/4 | to re ph | lote. | |
| I have examine | d the above details, and find | them correc | ct in every | respect. |

| Extended Britan Britan Britan Compared | Rank PRGVATE. Religion Enlisted (a) 22. Date of premotion | Surnan Surnan 11.15. | SUMMERS Age the Bast satistics of Service (a) Date of app | ons f | 4886 We Riccard. mol years (a) 22.11.15. | months. |
|---|---|----------------------------|---|----------------------------|---|---|
| Ropott Record of promotions, reducions, transfers, cascalites, Prom whom recoived Real-healty form A. 36, or in other official documents. | Extended | | -engaged {} | ication (b)ps Trade and Ra | | f Officer. |
| Embarked CO T ran sport Proceeded to join BEF HUNTSPILL with 4th A.D.Base Depot Alexandria do Disembarked at Marseille.s CO 50th Bn WOUNDED IN ACTION, Field CO 50th Bn WOUNDED IN ACTION, Field 4th A.F.Amb. S.W.ARM. Admitted and trans ferred to Cas. Clg. Station. Field 9th Cas.Clg. S.W.ARM. Admitted and trans ferred to A.T. Field | Date | Report From whom received | 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 | E E | cmntks on Arny Fern ny Form A. 36, or cial documents |
| . GO T ran sport Proceeded to join BEF . do | | | | | | |
| ao Disembarked at Marseille.s CO.50th.bn Taken on strength Field Field CO.50th Bn WOUNDED IN ACTION. Field Field Ath A.F. Amb. S.W.ARM. Admitted and trans ferred to Cas. Clg. Station. Field 9th Cas. Clg. S. Station. Field Sation. Field Ferred to A.T. Field | 7.6.16. | CO T ran spor HUNTSPILL | Proceeded to | Alexandria | | R.5811 |
| CO.50th Bn WOUNDED IN ACTION. Field CO 50th Bn WOUNDED IN ACTION. Field 4+ A.P.Amb. S.W.ARM. Admitted and trans 9th Cas Clg. S.W.ARM. Admitted and trans 9th Cas Clg. S.W.ARM. Admitted and trans Field Station. Field | 14.6.16. | do | 1 | Marseille.s | 14.6.16. | do |
| CO 50th Bn WOUNDED IN ACTION. 4th A.P.Amb. S.W.ARW. Admitted and trans ferred to Cas. Clg. Station. Field 9th Cas Clg. S.W.ARW. Admitted and trans Station. Field | 12,9,16. | .co.50th.Bn | | Field | 10.9.16.B.2 D.0.35/4 | 13.AQ64 846. |
| 4th A.F.Amb. S.W.ARM. Admitted and trans ferred to Cas. Clg. Station. Field 2.4.17. 7. 9th Cas Clg. S.W.ARM. Admitted and trans Saation. Field 3.4.17. | 6.4.17. | 50th | IN ACTION. | | 2.4.17. B.2 | 13. D.2 |
| • 9th Cas Clg. S.W.ARM. Admitted and trans Field 5.4.17. | 2,4.17. | 4 | S.W.ARM. Admitted and tran ferred to Cas. Clg. Statio | . Field | | 3/9011. |
| | | 9th Cas-Clg. | S.W.ARM. Admitted and ferred to A.T. | | | ,1106 |

| | Record of promotions, reductions, transfers, casualties, Re., during active service, as remoted on Army Form | 1 | | Remarks |
|---------------|--|-------------------|--|---|
| HH | B. 213, Army Form A. 35, or in other official documents. The authority to be quoted in each case. | Place of Casualty | Casusity B. 212, Army Form A. 36, or other difficial desimants | Army Form orm A. 36, or I documents |
| The same | S.W. ARM. Admitted and trans | เกร | 4.4.1%. A K 110A | 1104 |
| | fer red to ENGLAN D. | Field | 5.4.17. | |
| | EMBARKED FOR ENGL AND | Boulogne | | AK 1106 DO15/1387 |
| | S.W. ARM. Admitted and | England | 5.4.17. D.0.29/E. | 9/E. |
| | transferred to 3rd Aux. Hospital | spital | 24.4.17. | |
| 3rd Aux. Hosp | S.W.ARM. Admitted and | England | 24.4.17. | |
| | Discharged to Weymouth | | 7.5.17. | |
| - | Marched in ex Dartford. | England | 7.5.17. L.R.2782. | 782. |
| 0/s Trn.Depot | Warched in ex Weymouth | England | 29.6.17. L.R. | L.R.4984 |
| | Procee ded oversea s FRANCE | Œ | | - |
| 9 | ex Overseas Trn. Depot | Sothampton | 23.7.19. | D054/E IR 5857. |
| 7 | Marched in ex England | Havre | 24.7.17. D.59 | D.59/30. |
| No. of Lot | Marched out to Unit | Havre | 9.8.17. D.59 | D.59/32. |
| | Rejoin ed Unit | Field | 12.8.17. D.21 | D.21/33 D032/3903. |
| | KILLED IN ACTION. | Field | 25.8.17. B.21/33. | /33. |
| | Verified I | List No 451 | dated 27.8.17.DO 32/3846. | DO 32/3846. |
| SECTION. 3rd | Echelon, G.H.Q. | | Den Store Of | |
| - | British Expeditionary Force. | | Officer 1/c H | Records. |
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| | The state of the s | | | |



Royal Surrey County Hospital, 5/4/17, suffering I now beg to advise you that information has been received 25th April 1917. Any further reports received will be promptly transmitted: Victoria Barracks Base Records Office, Officer 1/c Base Regretts. Yours faithfully, TALLEAN. His postal address will therefore bet-100 BOURNE foth Battalion, Australian Imperial Force. AUSTRALIAM IMPRETAL FORCE to the affect that Private R. Summers, BEOAD. from gun shot wound arm. was admitted to the ST PETERS. 3.A. R Clinton Avenue, Mrs. M. Summers, Dear Madam,



LMK.

23rd Ostober,1919

M 54/944

Major.

Dear Madam,

With reference to your request to A.I.F.

He adquarters, London, for a photograph of the

grave of the late No. 4886, Private R. Summers,

50th Battalion, the Officer i/s ecords at that

Administration requests me to advise you that

action is being taken to have the grave photographed

and then available a copy will be forwarded to this

office for transmission to you.

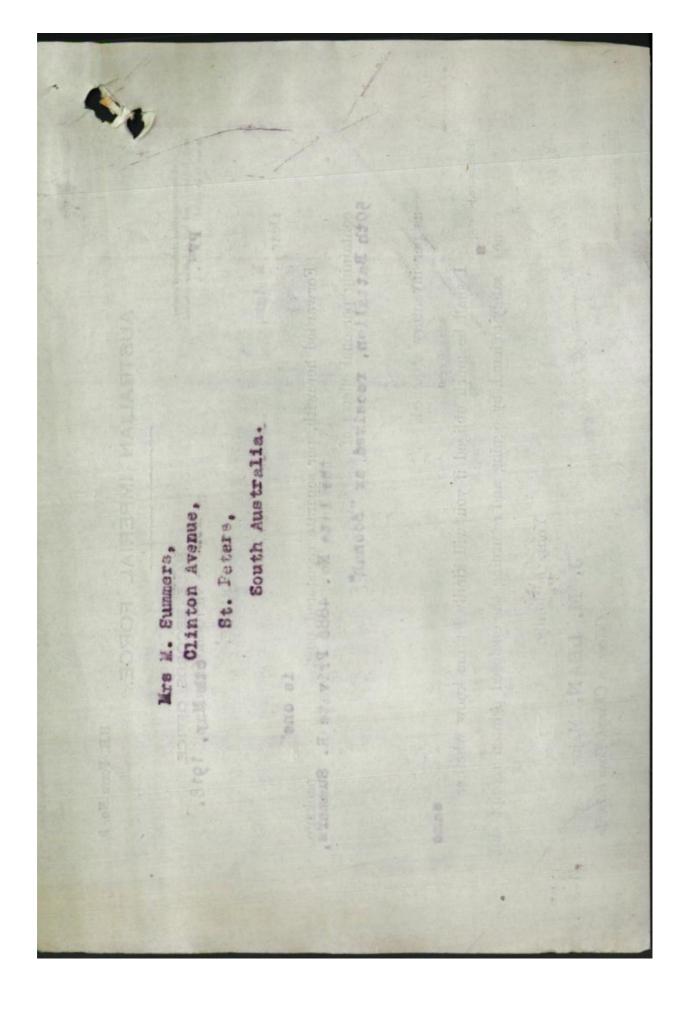
Yours faithfully,

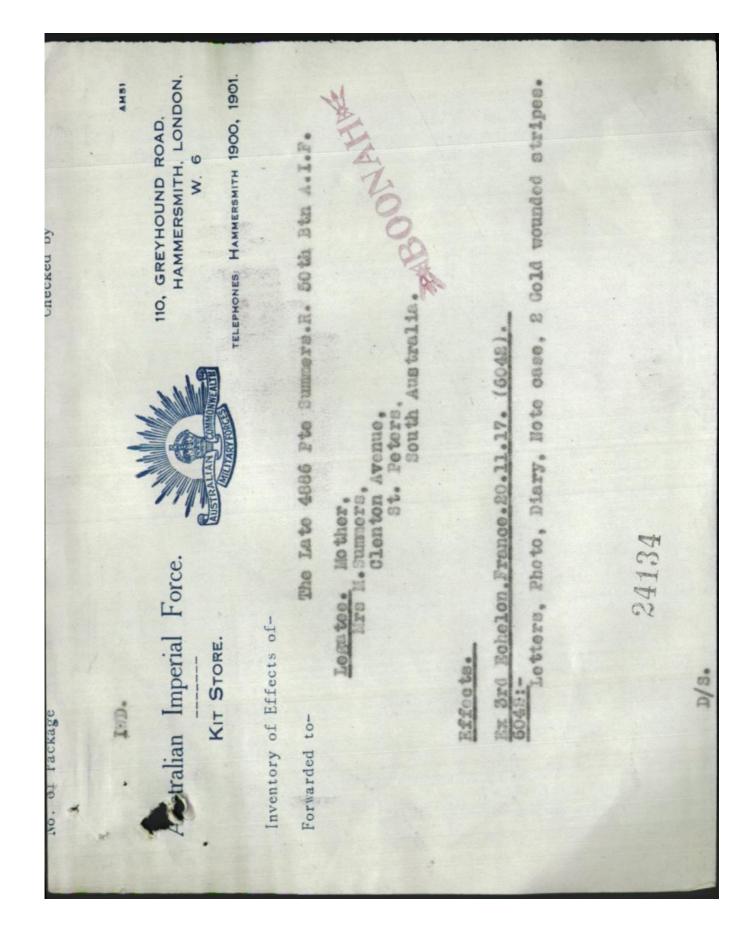
Officer i/o Base Records.

Mrs. M. Summers, St. Omer, Clinton Ave. St Peters. S. A.

| William James 59805 MIEHUS Clerence Douglas 1222 HICHOLLS Robert 59692 P.T.R. SON Thomas John 57904 FINERROW Arthur Roy 1354 PRISSTLY Clive Ormaby 57910 RALSTON William Archibald 55797 ROBERTOW Leo Watt 29003 REMKIN James 58075 ROWLY George Ducret 27827 SHCLAIR John Alexander 50951 HAW Robert Phillip 6c406 STRICKLAND Glande Gus 7556 SCHRODER Lennox Russell 25067 FAL UIT Stanley Mamilton 14580 TAXLOR John Charles 39715 WALES Percy Stephen 58085 WALKER Clarence Edwin 58402 WILD Russell Willeham 5960 WILSCH Victor Sydney 59512 YOUNG Edward Lee |
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| Percy Stephen 58083 WALKER Clarence Edwi |
| Mileham 3960 Wilson Victor Sydney 29512 |
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| FROM |
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the late No. 4886 Private R. Summers, 50th Btn. ex "Boonah" Signature Pouren Summeller I hereby acknowledge having received from the Officer in Charge of Base Records the undermentioned (1) Package, being the effects of Receipt for Consignment from Defence Department. Melbourne, Victoria. Date 9. 5. 19. Victoria Barracks, The Officer in Charge, NOTE.-This Receipt should be Posted to-AUSTRALIAN IMPERIAL FORCE. Base Records, Package. Description. consigned to me. D.1062/7.17.—C.8723.—10M





8649 death I give the whole of my property and effects Gertified to be a true copy of the Will of No.4886 Pte. SUMMERS, Richard. 50th Battalion, extracted from Pay Book. London. stes branch Adm. Hors., Sth Australia Pte. R.Summers 4886 50th Battalioth A.I.F. 9.5.16. St. Peters Mrs Maren Summers Clinton Avenue H M I 四四 In the event of Signature, Rank and unit Checked.

| Riccard Summers, 4886, Fte, 15th/10th Inf. Doresn Susie Udaline Summers, Clinton Avenue, St Pete Sister. Rejected on the grounds that claimant was not a dependent of deceased member of the Forces. | Sions at ADELAIDE 3 | |
|--|------------------------------------|--|
| | Deputy Commissioner of Pensions at | |
| 1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed | D. 1964/8.16. — C. 8556.—10s., | |

4 sheets Charles George Christian Summers, Clinton Avenue, was not a that olaiment was not a Form Z.3. Sucie Madge Summers, Clinton Avenne, St Peters Rejected on the grounds that olaimant was not dependant of decessed member of the Forces. dependant of deceased member of the Forces. dependant of deceased member of the For ces. 29/9/17 Riccard Summers, 4886, Pte, 15th/10th Inf. Fredk John Nelson Summers, Clinton Ave. St Ricoard Summers, 4885, Fte, 15th/10th Inf. Riocard Summers, 4336, Pte, 15th/10th Inf. Statement No. St Peters Containing the grounds that claiment Date Showing Grants, Alterations, and Cancellations of Pensions (together with date from which such action took effect); also Rejections of Claims and gr ound s DAILY STATEMENT (MILITARY) SOUTH AUSTRALIA the WAR PENSIONS ACT 1914-1916. Re jected on Re jected on Brother Brother Sister State of 1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed ... 2. Full name and address of person for whom pension was claimed ... 1. Full name, number, rank, and unit of Member of Forces in respect of whose death or incapacity pension was claimed... 1. Full name, number, rank, and unit of Member of Forces in respect of whose death or 2. Full name and address of person for whom pension was claimed ... 2. Full name and address of person for whom pension was claimed ... 3. Relationship of such person to Member 3. Relationship of such person to Member 3. Relationship of such person to Member *** 5. Name and address of Trustee (if any) 5. Name and address of Trustee (if any) 5. Name and address of Trustee (if any) incapacity pension was claimed ... Deaths of Pensioners. : 4. Result of Claim ... 4. Result of Claim 4. Result of Claim

Peters

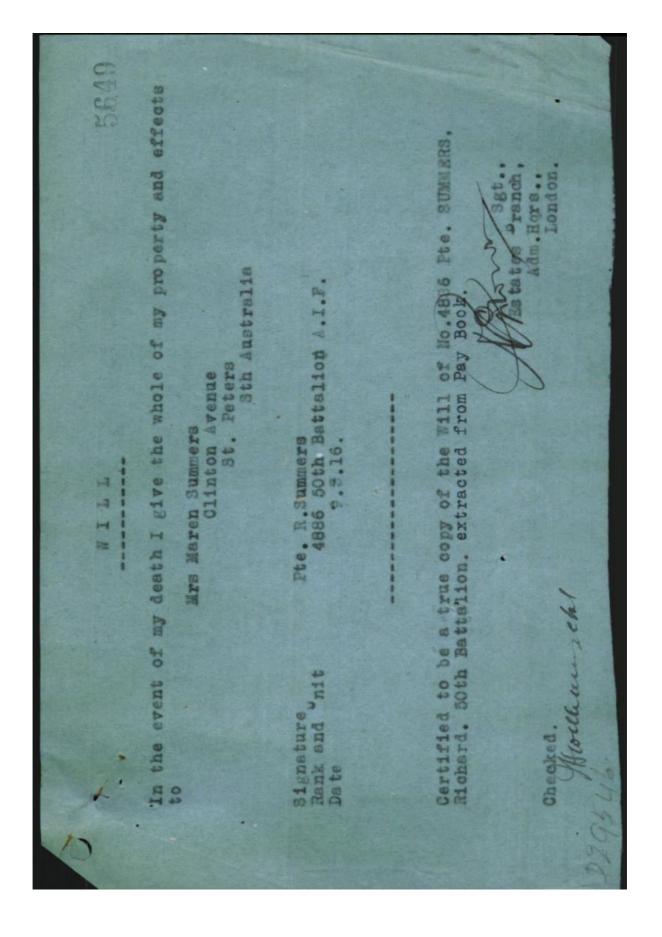
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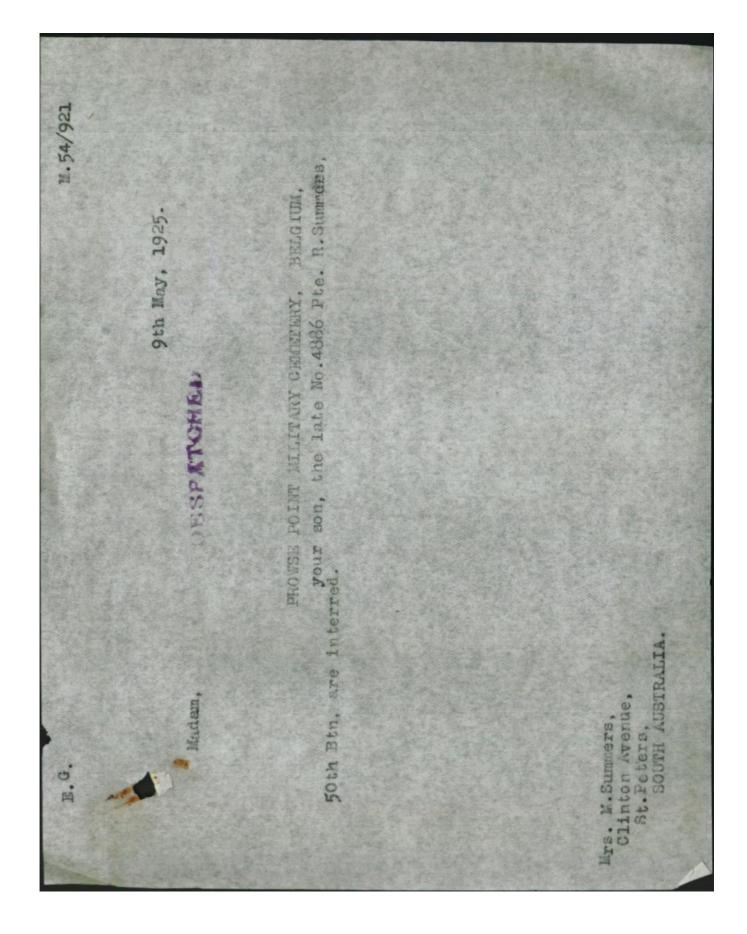
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| lreen Aslie trank | Dit | 5676 | 14 " | 11/4/1 |
| Briffiths, John | DE. | 4501 | 14 ~ | 0102 |
| Groves, William Charles | 0/91. | 4199 | 14. | 11/4/1 |
| Quest, William | DE. | 2756 | 147 | 11/4/1 |
| Gove, andrew | 291. | 2600 | 13 " | 11/4/ Oto Th |
| Holder, matthew | Ple | 5381 | 48 - | 11/4/ |
| Hodgson, Homas | At | 2289 | 48 - | 11/4/17 |
| Hardy, John | Ple | 2602 | 14. | 11/4/ |

| 2. Full name, number, rank, and unit of Momber of Forces in respect of whose death or incapacity pension was chaimed |
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| 11th Battn. | 56th E.A.G. Rrts. | | OF THE A. I. F. ENTRANCE OF THE TOP TOP STRICT 26/9/17 | 17th Battn. Ix "Beltana" Mental Fo.1 Lack "i.eless | lst LTX "Oxfordshine" Fx "Oxfor shine" | |
|---------------|-------------------|---------------|--|---|--|--|
| Davencort, J. | | Colgate, V.C. | 2nd HIT, IT ARY DISTRICT 26/9/17 | Bateman, A. Bavoren, P.J. | Turnbull, J.O. | |
| 7175 Spr. | | 1.40 Gnr. | 4 TATE 101 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 6770 Pte. 14495 Fpr. | 2390 Pte. | |

| 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. |
| REGIMENT 50th Battalion A.I.F. Squadron, Troop, Battery or Company Battery or Company |
| M E R S . Christia |
| (Date 25th August 1917. Place Belgium. |
| Died. Cause of Death. Killed in Action. |
| Nature and Date of Report Army Form B.213 dated 26th August 1917. |
| By whom made Commanding Officer 50th Battalion. A.I.F. |
| ecially state if killed in action, or died from wounds received in action, or from hijut with recently will not recellable the leaves (a) in Pay Book (Army Book 64) |
| 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., Indian 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 deceased's Small Book is at the Base, it should be forwarded to the War Office with the Report. ZEC Section 5rd Echelon G.H.Q. B.E.F. Station and School Section Adjutant General's Office at the Base Officer in Checords. |
| W2088/M1768-500,000-H. & Sr5/17-(10489)-Forms/B20904/2. |
| |





| SUMMERS. N Riccard. 18 4886 V | 10/15th Rfts |
|---|--------------------|
| Regimental No. | Unit. |
| | AUTHORITY. |
| Embkd at Adelaide per R.M.S. "Mongolia" 9/5/16 | |
| Pte. | |
| 11/9/16. Taken on strength of 50th Btn. | BEFO 35/5-16. |
| 0/5/16. Trans. as Rfts. to 50th Btn. | лето 14/4-16 |
| 5/4/17. Adm. to Royal Surrey Co. Hosp. S.W. Arm. W/D. | W/D, IB. 206/51-12 |
| | WH IB 219/63-17 |
| 7/5/17 Dis.from 3rd Aux.H. to Dis. to Weymouth SW. Arm | IB 231/53-17 |
| 2/4/17 Wounded in Action | BRF 0 15/2-17 |
| 5/4/17 Emb. on H.S.Cambria at Boulgone for Eng. S.W. Arm. | BEFO 15/3-17 |
| 5/4/17 Adm Royal Surrey County Hosp.S.W.Arm. | LDN 29/17-17 |
| 23/7/17 Pro. 0/8 to France via Southamrton ex 0/8 Ing.Depot | |
| P.Dns. | LDN 54/2-17 |
| 25/8/17 KILLED IN ACTION | BEFO 32/3-17 |
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| D.825/2.16C.2024. | |

| PURPORT. | - AUTHORITY. |
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| Burred Prewse Mil Cemetery 14 miles S.Of Messines France. | 1DN 91/1-17 |
| | BEEO 32 5-17 |
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AUSTRALIAN MILITARY FORCES.

| 4TH MILITARY DISTRICT. | |
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| DISTRICT HEADQUARTERS: EXPEDITIONARY FORCE PAY OFFICE, | |
| ALL OFFICERS C 8320 SO 2 C 1388 D.P.M C 4388 KEAWICK HOSPITAL C 6270 MORPHETYPILES GLEM. 64 MORPHETYPILES GLEM. 64 MORPHETYPILES GLEM. 64 MORPHETYPILES GLEM. 64 | |
| The Secretary, ADELAIDE, .19th.October 19 | 16 |
| Department of Defence, A.I.F.Ref.No 14914 | |
| MELBOURNE, Vic. | |
| | |
| Please note on Nominal Roll of 10th. Battalion A.I. | F |
| relative to the undermentioned Member, the following data - | 1.6 |
| RankPrivate | 8.0 |
| Regtl. No | • |
| FULL NAME OF) SUMMERS R. | |
| Company15th. Reinforcements | |
| Reinforcements) | |
| MEXT OF KIN | |
| MEXT OF KIN :- Mrs. W. Symmers | |
| Present FULL postalClinton Avenue, | |
| RECEIVEDST. PETERSS.A | |
| GOODWOOD S.A | |
| DEFENDANCIES NO ADDITION OF THE PARTY OF THE | |
| RELATIONSHIP TO ABOVE SOLDIER (Mother) | |
| The Staff Paymaster, A.I.F, London has been advised accordingly | |
| T'ARKS:- | |
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| 10000 | |
| Circ. 13 // // // Mann | |
| (EB) Officer in Charge, Expeditionary Force Pay Office. | |
| | |



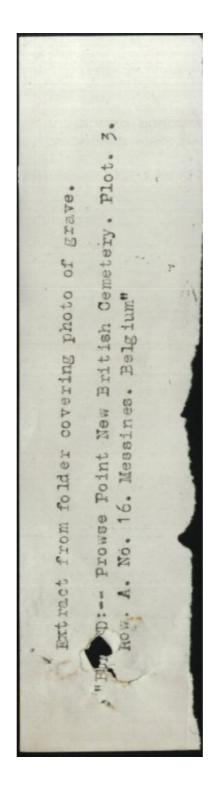
AUSTRALIAN MILITARY FORCES.

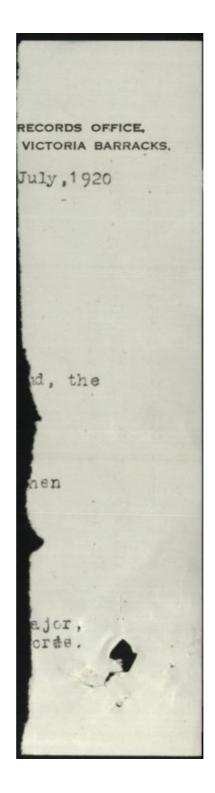
4TH MILITARY DISTRICT.

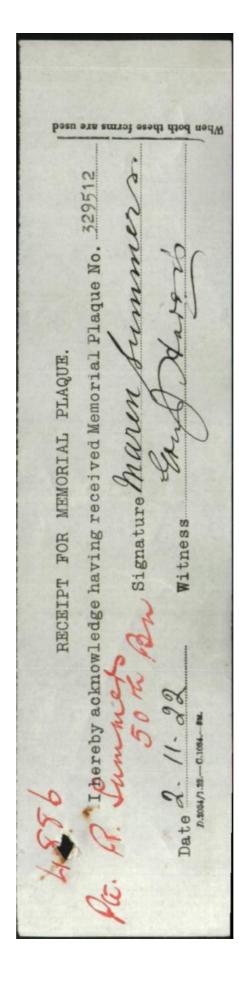
| DISTRICT HEADQUARTERS: CAMPS: | EXPEDITIONARY FORCE PAY OFFICE, | |
|--|--|---|
| 8-0 0 C 1366 EXHIBITION C 0580 D.P.M C 4366 MONPHETYVILLE GLEN. 6A KCHNICK HOEPITAL C 6270 | North Terrace, | |
| The Secretary, | ADELAIDE, . 19th.October 191 | 6 |
| Department of Defence, | A. I. F. Ref. No 14914 | |
| MELBOURME, Vic. | | |
| | | |
| Please note on Nomina | al Roll of 10th. Battalion A.I.F | |
| relative to the undermention | oned Member, the following data - | |
| Rank Pri | | |
| Regtl. No. | 4896 | |
| FULL NAME OF) SOLDIER) | SUMMERS R. | |
| Company) | 15th. Reinforgementa | |
| | mers | |
| Present FULL postal | Clinton Avenue. | |
| TAME OF GOOD | DWOOD. S.A. | |
| BAIL OF | | |
| | · | |
| RELATIONSHIP TO ABOVE SOLDI | ER(Nother) | |
| The Staff Paymaster, A. | I.F, London has been advised accordingly. | |
| TARKS:- | | |
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| Circ.13 | M+m | |
| (EB) | Officer in Charge, Expeditionary Force Pay Office. | |
| | tributation of the outlier. | |

| Correspon | dence Sheet. | | | |
|--|--|--|--|--------------|
| Soldiers | Name 4886 Rank | Sto Na | no & Tumme | 10 |
| | Unit | 15 Refs 101 | the | |
| | District | enlisted | | |
| THE STATE OF THE S | | THE RESERVE OF THE PERSON OF T | NAME OF THE OWNER OWNER OF THE OWNER OWNE | A 20 B 20 C |
| NATURE OF | FENOUIRY. | | | |
| | | | Unit. | |
| | | | Rrigade- | 7 |
| | | - | Division | |
| | | A. I. F. | ABRO. | AD. |
| CHANGE C | OF ADDRESS. | 1 1. | 10 | |
| Nan | of N.O.K.A. | Ker 1.2. /! | J. Summer | |
| | Old Address | albourou | gh Road | |
| | w | esthound | Fack Sa. | - |
| | New Address | Clarkon | Adenue | - |
| | _ | Jr. get | ero Sa. 102 | 3/10/16 |
| Not | ed on Attestation | n Sheet | | Initia |
| GENERAL | | | | |
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| | | | Initials. Checkers. | |
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TO.2 SECTION. Correspondence Sheet. ummers Soldiers Name: 4886 Unit District enlisted MATURE OF ENQUIRY. Address of soldier. Unit. Brigade. Division. ABROAD. A. I. F. CHANGE OF ADDRESS. Name of N.O.K ... Old Address A New Address ... Initials. Noted on Attestation Sheet GENERAL. Initials Sub. Date_ Change of Address noted, Initials. Chockers. Date_







1)29546 C.M. Form D.1. To be used for Enlistment in the Permanent Military Forces only. Christian Name TABLE 1.-GENERAL TABLE Birthplace Examined Declared Age ... Trade or Occupation inches Height ... feet Weight ... inches Chest Measurement inches Physical Development and Pulse rate Vaccination Marks When Vaccinated Vision (a) Marksindicating congenital peculiarities or previous disease (b) Slight defects but not sufficient to cause rejection Approved by (Signature) (Rank) Enlisted day of Regtl. No. Joined on Enlistment ... Transferred to Became non-effective by on day of 19 (Signature) (Rank) 10m.-15/7/15-wo54783 P.T.O.

| C.M. Form D.j. | | | | naly. | esone | litary F | e Permanent Mi | for Enlistment in the | Part | 1 |
|--|--------------|---|------------------------|-------|-----------------|----------|----------------|--|--|--------------|
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| Name of Hospital | Admitte | | ospital JAA Year | AL | harged Hospital | - GE | TABLE 1 | | Number in Hot Birthplace | of D |
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| Albs. | 4 | | | OFE | 100 | | 304% | 1000 | Weigh | |
| inches | -53 | | | | | | 1 | Cittle when fully expended | Chest | |
| inches | 335 | | | | | | 14.1 | engineers of consistent | Charles and the same of the sa | |
| 1 - Louisin | 250 | | | | | | 74 | Development | (C) 10 (S-10) (H) | |
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| New years | | | | | | VIC. | 8 | on Marks (Number | Vaccination | |
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| | | | | EE) | | | entries (d) | | (b)Slight o | |
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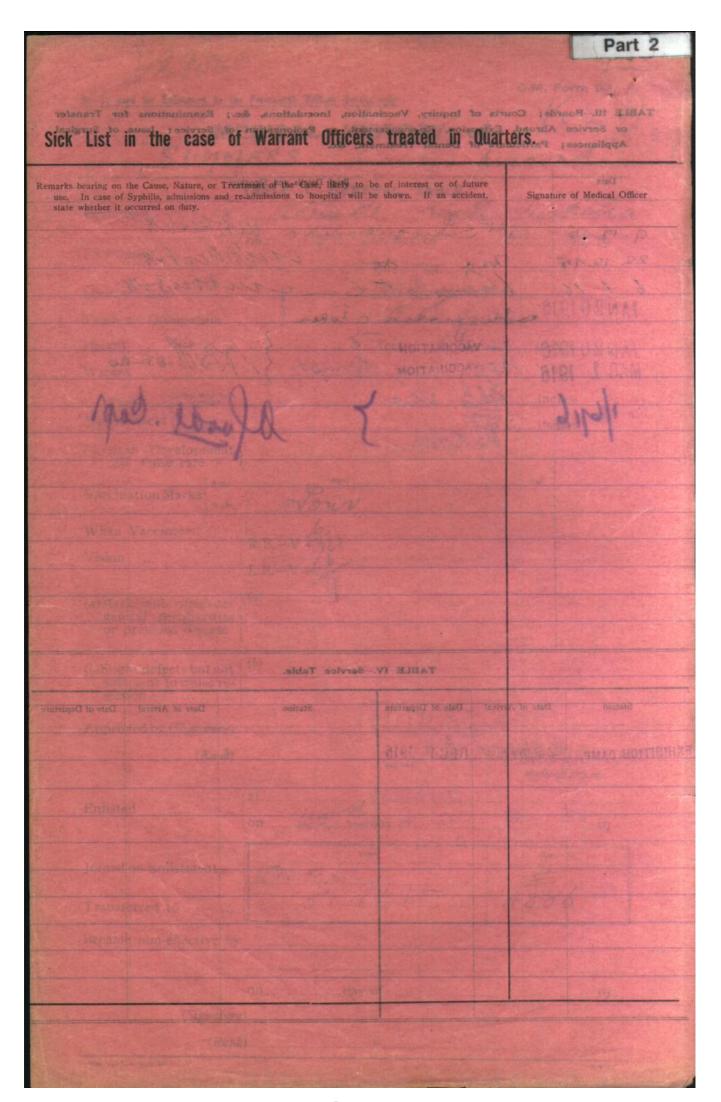


TABLE III.-Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Transfer or Service Abroad, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c. Date Signature to the paint to an of Brief Details and Signature to or the control per Thoculation With Westitt 9-12-15 Tra do unatuestra 22-12-15 6. 1. 16 JAN 20 191 JAN 20 1916 e VACCINATION TE VACCINATION TABLE IV. Service Table. Station Date of Arrival Date of Departure Station Date of Arrival Date of Departure EXHIBITION CAMP. 22/11/15 DEC 1 1915

1161-15-6

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^a to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

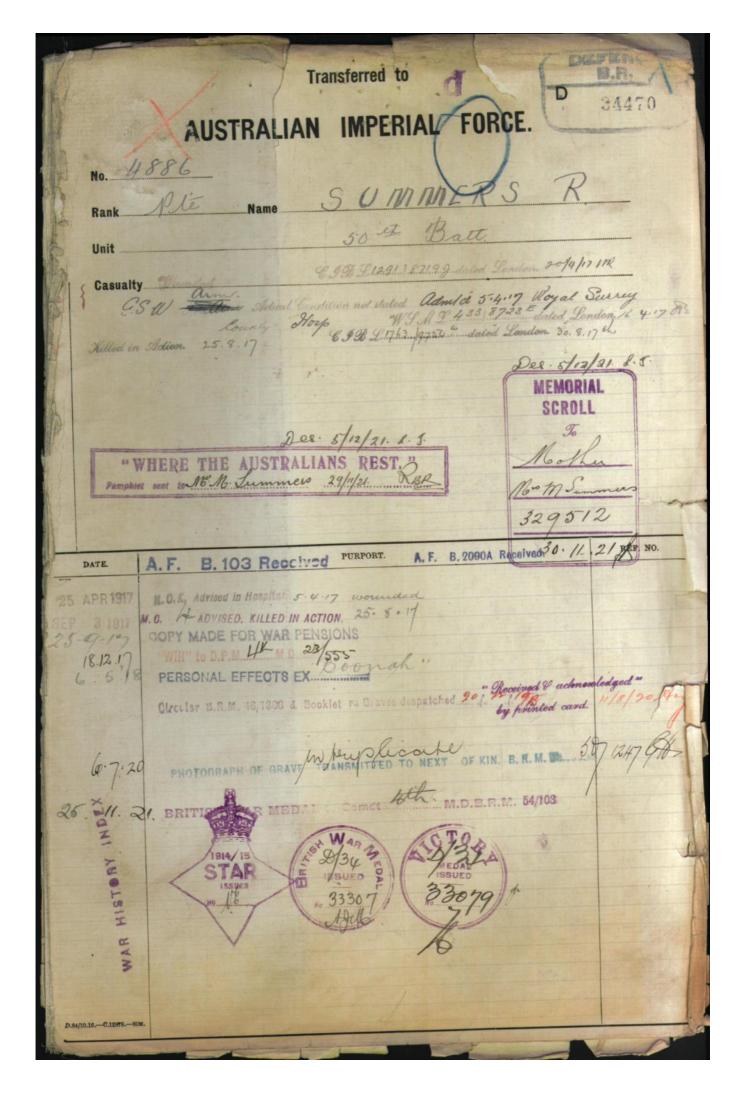
| TARER | I.—GENERAL TABLE. | |
|---|-------------------|--------------------|
| Birthplace Parish | | 1 |
| | | Int |
| Examinad | day of | |
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| | | |
| Height | feet, | inches. |
| Weight | | lbs. |
| Chest Girth when fully Expanded | | inches. |
| Measurement Range of Expansion | | inches. |
| Physical Development | | |
| (Arm | Right | Left |
| vaccination Marks | | |
| When Vaccinated | | TO THE RAIL |
| Vision R.E.—V | | |
| (L.E.—V | = | SINK BURNESS STATE |
| (a) Marks indicating con- | | |
| genital peculiarities or previous disease | | |
| (| | |
| (b) Slight defects but not (b) | | MARINE SERVICE |
| sufficient to cause re- | | |
| jection | | |
| Approved by (Signature) | | |
| (Rank) | | |
| 5)' | | Medical Offi |
| (at | | |
| Enlisted on | day of | 191 |
| (1 | Porps. | Regtl. No. |
| oined on Enlistment | 50 Datter | 11986 |
| Pransferred to | | 4000 |
| Transferred to | | 729546 |
| Became non-effective by Kel | led in Action 20 | 5, 8.14 |
| | | |
| on | day of | 191 |
| (Signature) | | 1 |
| (Rank) | | |

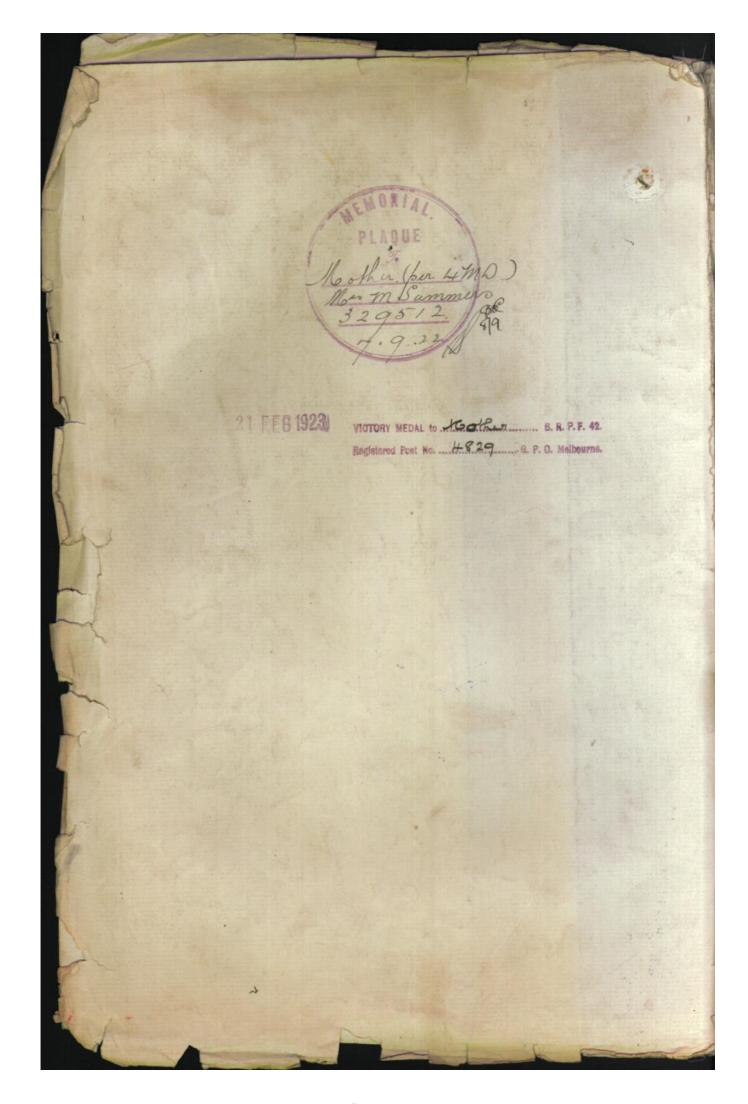
| | - | Admit | tted to E | | Disc | harged | from | or Admissions to Hospital o | Numb | |
|---|----------------------------|-------|-----------|----|------|---------|------|-----------------------------|-----------------------|--|
| - | Name of Hospital | | 1 | 1 | - | Hospita | | Disease | of day in Hospi | |
| | 3th A A Aosp Sart fra | | | 17 | | | | Sea wa Raun | 18 | |
| | A. M. C. 8 + MAY 1917 NO | 8 | 5 | 17 | an e | | | Sheelworrd Right arm. | | |
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Table III.—Boards; Courts of Inquiry, 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.

| Date | Brief details, and signature | |
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| Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation | Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation |
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