

NAA: B2455, BOYLE J

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Number of pages: 26

Title: Boyle John: SERN 2234: POB Tyrone Ireland: POE Liverpool NSW: NOK M Boyle Mary Martha

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Con Jod Cood AUSTRALIAN



S ALICIDALIANI	TRA	IDEDIAL	FOR	1
AUSTRALIAN	IIV	IPERIAL	FOR	CE.
Attestation Paper of P	ersons	Enlisted for Serv	ice Abroad.	Wall of
No. 2234 Na Un Joi		BOYLE. 34RLIN 39.	-18, B/. 1	5
Questions to be put to	the Pers	on Enlisting before		
1. What is your Name?		1. John 2. In the Parish of C.	Stano	in or
2. In or near what Parish or Town were you born	1		sloval d	,
3. Are you a natural born British Subject Naturalized British Subject? (N.B.— latter, papers to be shown.)	If the }	in the County of	Borne.	Sieland
4. What is your age?		4. 2	and	
<ul><li>5. What is your trade or calling?</li></ul>	If so, }	6.40	cha	
7. Are you married?		7. 100	Barelo	
8. Who is your next of kin? (Address to be sta	ted) {	3 Mount	John	Johne Lyrone
9. Have you ever been convicted by the Civil Pov	wer! *	1 2000		Irelande
10. Have you ever been discharged from any part Majesty's Forces, with Ignominy, or as rigible and Worthless, or on account of tion of Felony, or of a Sentence of Penal tude, or have you been dismissed with D from the Navy?	Incor- Convic- Servi- isgrace	16at	3	/-
11. Do you now belong to, or have you ever served Majesty's Army, the Marines, the Milit Militia Reserve, the Territorial Force, Roya or Colonial Forces? If so, state which, and now serving, state cause of discharge	l Navy,	u do		
12. Have you stated the whole, if any, of your p		12 Noue		
13. Have you ever been rejected as unfit for His Ma Service? If so, on what grounds?		Q3		
14. Do you understand that no Separation Allowar be issued in respect of your service be amount which with Pay would eight shillings per day	ond an reach	14 ges		
15. Are you prepared to undergo inoculation against s and enteric fever?		15. Jes		
by me to the above questions are true, and I a Forces of the Commonwealth of Australia with	m willing in or bey	ond the limits of the Con	agree to serve in amonwealth.	the Military
*And Youther agree to allot not less my service for the support of my wife		fifths of the pay payable to e-fifths	to me from time to	time during
Date 29. wife and chil		John	ignature of person	

#### 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. 7 8 15

Signature of Attesting Officer.

OATH TO BE TAKEN BY PERSON BEING ENLISTED.\*

SO HELP ME, GOD.

Signature of Person Enlisted.

the State of Iwa South Would of this County day of 1915, before me—

Port Buch

Syl S. Benson Liver
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.

Both (State Co.

Description of	on Enlistment.
Age years 5 months.  Height 5 feet 1 inches.	DISTINCTIVE MARKS.
Weight	
Chest Measurement . 3.7. X. 3.9. inches.	
Complexion Jawa	
Hair Now	
Religious Denomination	
CERTIFICATE OF ME	DICAL EXAMINATION.
I have examined the above-named person, and find the	at he does not present any of the following conditions,
	; defective intelligence; defects of vision, voice, or hearing;
	ctent; marked varicocele with unusually pendent testicle; prporal punishment, or evidence of having been marked
	t; abnormal curvature of spine; or any other disease or
	his heart and lungs are healthy; he has the free use of
I consider him fit for active service.	
Date . 39 . 7 . 18	
Place Sydney	Ogs LR Parker Carpet Chamining Medical Officer.
CERTIFICATE OF COM	MANDING 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
C Q QED mus	appoint him to Wh. Reinforcement.  18th. Battalion.  (Jah) a 7 Anderson fr
Date	Copy C. J. Carne von A.
Place LIVERPUOL	Commanding
	41h. Reinforcomont

18th. Battalion.

REINF 18'BATTNE	From—	To-	
REINFIOEATING			
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THE RESERVE OF THE PARTY OF THE			
Charles with the first the property of the party of the p			



AUSTRALIAN IN	PERIAL FORCE.
o"Bn -	18 4 1
	Enlisted for Service Abroad.
No. 23 4 AUG. 1915 Name	BOYLE REIN-18, BATT
Unit Joined on	29. 7. 15 = 5
Questions to be put to the Per	son Enlisting before Attestation.
1. What is your Name?	1. She Boyle
1110343 21	2. In the Parish of
2. In or near what Parish or Town were you born ?	near the Town of
	in the County of Typione
3. Are you a natural born British Subject or a Naturalized British Subject? (N.B.—If the	3. (Inland) Satural Bon
latter, papers to be shown.)	4 (27) Iwent pseven
5. What is your trade or calling 1	5. Sureman
6. Are you, or have you been, an Apprentice? If so, where, to whom, and for what period?	} 6
7. Are you married?	mrs Mary Boule Albol.
8. Who is your next of kin? (Address to be stated)	Mountjoy
	Coal Island Grone
9. Have you ever been convicted by the Civil Power?  10. Have you ever been discharged from any part of His	9
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's	10
11. Do you now belong to, or have you ever served in, His Majesty's Army, the Marines, the Militia, the Militia Reserve, the Territorial Force, Royal Navy, or Colonial Forces? If so, state which, and if not now serving, state cause of discharge	11
12. Have you stated the whole, if any, of your previous	12. None
13. Have you ever been rejected as unfit for His Majesty's	13
Service? If so, on what grounds?	14.
amount which together with Pay would reach eight shillings per day.	14
15. Are you prepared to undergo inoculation against smallpox and enteric fever?	15. Jes.
Forces of the Commonwealth of Australia within or bey	
my service for the support of my wife three	effths of the pay payable to me from time to time during see hiths
wife and children  Date	John Boyle. Signature of person enlisted.
#Th: almost he amended where necessary and should be struck out in the	he case of unmarried men or widowers without children under 18 years of age.

### 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. 2. 8.15

Signature of Attesting Officer.

## OATH TO BE TAKEN BY PERSON BEING ENLISTED.\*

SO HELP ME, GOD.

John Boyle
Signature of Person Enlisted

Signature of Attesting Officer

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.

## FIELD SERVICE.

	FIELD SERVICE.	112
REPORT of Death of a Soldier delay after receipt of notification of	to be forwarded to the War f death on Army Form B. 213	Office with the least possible or Army Form A. 36 or from
	r official documentary sources.	NAME OF TAXABLE PARTY.

REGIMENT or CORPS 18th Bat	Squadron, Troop, Battery or Company
Regtl. No. 2234	Rank Private.
Name BOYLE	, John.
Date 5th Au	igust 1916.
Died Place France	ne.
Cause of Death*	Killed in action
Nature and Date of	Report Army Form B213, 5/8/16.
By whom made	Commanding Officer 18th Battalion A. I. F.
* Specially state if killed in action, or expo-	died from wounds received in action, or from illness due to field operations or to fatigue, privation or sure while on mulitary duty, or from injury while on military duty.
Place	
Burial { Date	one with other eye; his been and hings are healthy; he has the tire on the
By whom reported	
	(a) in Pay Book (Army Book 64) Not yet to hand.
State whether he leaves a will or not	(b) in Small Book (if at Base)
	(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 Epeditionary 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 this Report.



Signature of Officer in charge) Office at the Base

of Section Adjutant General's

Office at the Base

Lieut.

Office at the Base 3rd Echelon G.H.Q. B.E.F.

Station and Date Rouen, 20, 9.16.

Wt. 12929/4141 400,000 12/15 JFW

Forms B 2 10a

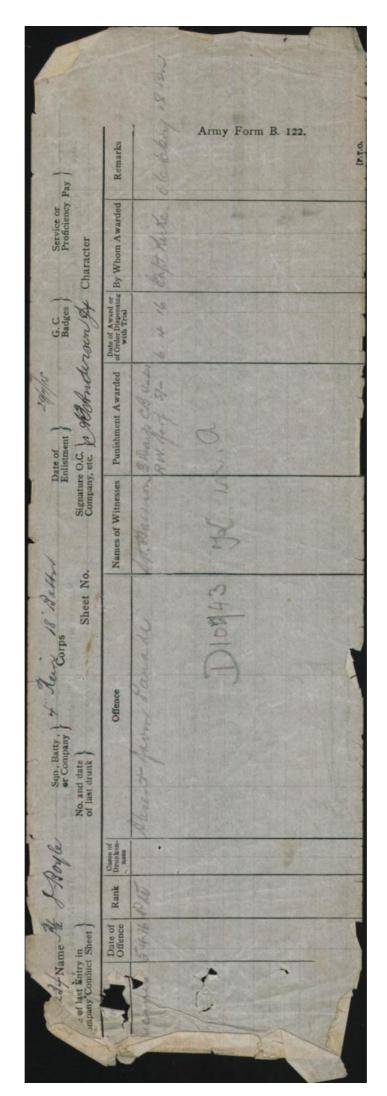
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	3, 6
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	on Enlistment.
. 27 years months.	DISTINCTIVE MARKS.
3 - feet 9 inches.	
1.5.74 lbs.	
Measurement, 37 × 39. Ainches.	
exion Fair.	
Blue Josh	
Brown.	
ous Denomination R.C.	
CHARLES OF THE PARTY OF THE PAR	
CERTIFICATE OF ME	DICAL EXAMINATION.
: above-named person, and find tha	t he does not present any of the following conditions,
Scrofula; phthisis; syphilis; impaired constitution;	defective intelligence; defects of vision, voice, or hearing;
mia; hæmorrhoids; varicose veins, beyond a limited ex	tent; marked varicocele with unusually pendent testicle;
eterate cutaneous disease; chronic ulcers; traces of co	rporal punishment, or evidence of having been marked
ysical defect calculated to unfit him for the duties of	; abnormal curvature of spine; or any other disease or a soldier.
	his heart and lungs are healthy; he has the free use of
joints and limbs; and he declares he is not subject	to fits of any description.
I consider him fit for active service.	
te 29/7/15	
9 01	
ace office	P00 0
	LRJanku
	Signature of Examining Medical Officer.
	Cupt atom 6
CEPTIFICATE OF COM	FANDING OFFICER
CERTIFICATE OF COMM	landing officer.
I CERTIFY that this Attestation of the above-n	amed person is correct, and that the required forms
we been complied with. I accordingly approve, and a	appoint him to plk. Reinforcement
	Asth. Ballulion
ate	White Anderson It
ace Leverfool	Theil Las Highly syols oil forumans exact I
ace	Commanding All Samporcement
	18th. Battalion.

Unit in which served.	Promotions, Reductions, Casualties, &c.	Period of servi	celin each rank.	Remarks.
Pel Nelida Tarre	ON STRENGTH FROM 5 R45		10	R 9
- Cycou	Para No al la La	10-1.16		B 680 27 . 1
275	Proceeded to jour B. F. F. alexandria		18.3.16	
was a line	Frentaired at		4413414	
	Took four u a rai	1	25.3.16.	
	of eveny's trenches	on	*/	7
	night of 26/29th Jun	1916.		Rej 302. 1. 2
	*		The same	
	No. of the last of	de la		
			1	
				e-10
	Killed in action France	5,8,16		Pi760 4662. 29.81
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	Total Control	DETA-LE		
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			The state of the s	The state of the s

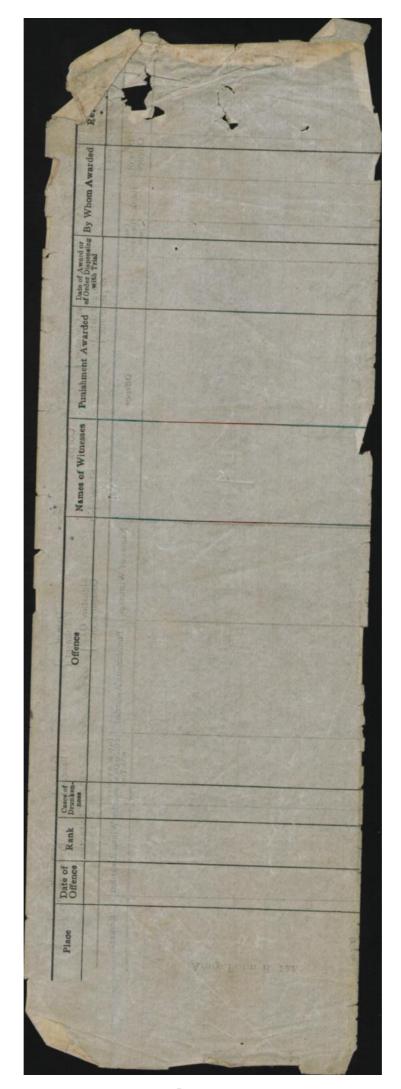
Religion	Samanna	Age	on Enlistment years months.
Eniisted (a) Date of pro	motion to prese	of Service (a) Date of app	
Extended		engaged {	Qualification (b) or Corps Trade and Rate
			Signature of Officer i/c Records.
	Report	Record of promotions, reductions, transfers, casualties,	Data of
Date	From whom received	Act, auring allows envises as experted on Army Form B. 2B. Army Form A. 36, or in other official documents.  The authority to be quoted in each case.	Place of Casualty Casualty b. 23, Army Form A. 36, or other official documents
		Embarked Disembarked	
15.1.16	0.0.18th Bm	Taken on strength and posted	rel-el-Kebir 10.1.16 0.9/680
		Proceeded to join B.E.F.	Alexandria 18.3.16
		Disembared at	Warseilles 25,3.16
Took part	in a raid on	enemy's trenches on night	of 26/27th June 1916. Ref 302.
5.8.16	G.0.18th Bn	KILLED IN ACTION	France 5.8.16 B213 AQ 3208
		Windan	Lieut
		for 0.0.Australian Records Section	an Records Section

Date of Taken from Army Form B. 213, Army Form A. 36, or other official documents										
Place of Casualty										
Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 218, Army Form A. 36, or in other official documents.  The authority to be quoted in each case.										
Report From whom received										

IMPERIAL FORCE.  STORE.  Totrohone:-HAMMERSWITH 1899. W. 6.	MOTHER.  Mrs Mary Boyle,  Mr Joy,  Goal Isle,  Tyrone,  Ireland.	it Store   Scarf, 2 Pipes, Purse, Brush, Handkerchief.	ige b/s. 10847 Checked by
AUSTRALIAN IMPERIAL FORCE. KIT STORE.	Inventory of Effects of— Forwarded to— MOTH	Effects.  Ex Kit Store Book.5.	No. of Package D/



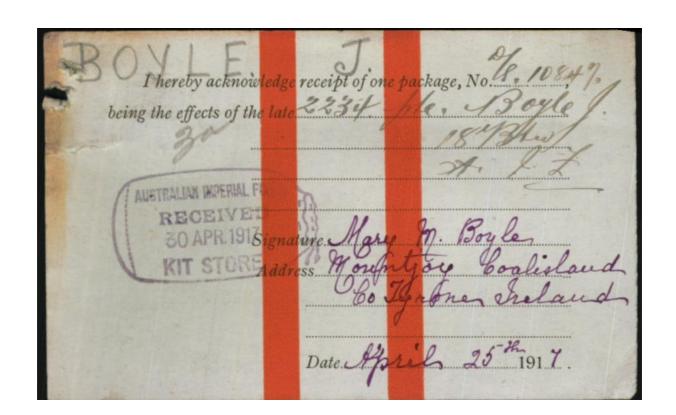
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Page 14

rm B. 103.	***************************************	m B. 213, or other nts.			ie ISIG Fer 30%	os cable	Lieut,
Service.  Service reckons from (a)  Numerical position on {	roll of N.C.Os.	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.	A00.9/880	DISERD NATSEILLES.	of 23-27.h Jun	B213 AC3203 Cable	Officer 1/c P cores
rvice.	rol	Date	10/1/10	ND NA	night :	2/8/16	
to H Q A.I. I Sarvice Service Service and I Service	Qualification (b)	Place	Tel-el- Kebir	DISE	no se your an	France 5/8/16	
Regiment of Cosure Rank Terms of Service	to lance rank	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported en Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Taken on strength and posted to "C" Goy	PECCO T JA B.E.F	ook part in a raid on enemy's transhas on night of 28-27 h June 1816 Fer 302	lilled in action	Officer 1/2 R
S Co. 2	present rank	Report Record From whom rep A.	6. 0.	A	ook part in	C.O. A	
Regimental P Enlisted (a)	Extended	Date	16/1/16			5.8.76	

	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.	
	Date	
	Place	
	Record of promotions reductions, transfers casualties, etc. 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.	
	Report From whom received	
S D I I	Date	





KIT STORE.  Inventory of Effects of— The I  Forwarded to— MOTHER.  Mrs	Iste.2234.Pte Boyle J.18th Btn.A.I.F  "S Mary Boyle,  "S Mary Boyle,  "Tyrone,  Tyrone,  Ireland.	FULHAM, LONDON.  Telephone; HAMMERSMITH 1899. W.6.  T.18th Btn.A.I.F.  1893
Ex Kit Store   Book.5.	Scarf, 2 Pipes, Purse, Brush, Handkerchief	Brush, Handkerchief.
P.E. NOT HAT	F. H.Q.	
No. of Package D/8.	10847	Checked by MM

2234 4/18th/Bn	Other Names. Regimental No. Unit.	PURPORT.	. A8 "Argyllshire" 50.12.15	10/1/16. Taken on atreneth of 11011 C 1011, p. 11.	18. " " " " " " " " " " " " " " " " " " "	I.B. 22/14-16			
BOYLE	Surname.		Embarked at Sydney on H.M.A.T.	10/1/16. Taken on atreneth o	webir from 4th Rfts.	5/8/16. KILLED IN ACTION	5/8/16 Killed in Action-France.		

PURPORT.		AUTHORITY.
1		
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#### FIELD SERVICE.

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 or CORPS	Squadron, Troop, Battery or Company
Regtl. No. 2234	Rank Private.
Name BOYLE,	John.
Date 5th Aug	nst 1915.
Died Place France	
Cause of Death*	Killed in action
Nature and Date of Re	port Army Form B213, 5/8/16.
By whom made	Commanding Officer 18th Battalion A. I. F.
	ed from wounds received in action, or from illness due to field operations or to fatigue, privation or e while on military duty, or from injury while on military duty.
Place	
Burial Date	
By whom reported_	
(	a) in Pay Book (Army Book 64) Not yet to hand.
State whether he leaves a will or not	b) in Small Book (if at Base)
(	c) as a separate document
By whom made * Specially state if killed in action, or disexposure  Place  Burial { Place  Pate  By whom reported  State whether he leaves a will or not	Commanding officer 18th Battalion A. I. F.  In the second of the second

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.

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A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Epeditionary 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 this Report.

Signature of Officer in charge of Section Adjutant-General's for O.C.Australian Records Section 3rd Echelon G.H.Q. B.E.F.

Station and Date Rouen, 20. 9.16. Wt. 12929/4141 400,000 12/15 JFW H 2 POA

whose death 38 claimed  Member's numb  Full name and pension was	per, rank,		2234 Mary Mount	Martha tjoy, Co	. 181	th Battn.	one, IREL	AND.
Forces	***		110 011		ight. Co	om. 5.10.1	.6.	
Name and add	ress of Ti	rustee (if any)		And administration of the contraction of the contra	A resisted	.B.G . oyang	Married, Jah.	-
CHAIL THE TEST	THE COLUMN TWO IS NOT				0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	TOS DAY		
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Fee. Clextol, A.G. Fte. Clextol, A.G. Fte. Thoras, V.J. Fte. Broon, T.A.I. Fte. Allen, S. Fte. Inner, I.F. Gpl. Kunro, D.S. Fte. Ifnn, T.R. Fte. Ifnn, T.R. Fte. Ifnn, T.R. Fte. Inner, J.R. Fte. Inner, J.R.
1,725 1,725
Hill tery District District 18t 16t 16t 16t 16t 4th 4th 4th 4th

