

Casualty Form—Active Service.

Regiment or Corps 8th Infantry Battalion
 Regimental No. 8/1242 Rank Private Name Glassey, Robert John
 Enlisted (a) 3.11.14 Terms of Service (a) Duration of war Service reckons from (a) 3.11.14
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }
 Extended } Re-engaged } Qualification (b) }

Date	Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	Date	From whom received			
		<u>20.9.15</u>	<u>Joined unit</u>	<u>Cape Helles</u>	<u>9.5.15</u> <u>Nominal Roll.</u>
<u>27.9.15</u>	<u>do</u>	<u>Wounded in action</u>	<u>Dardanelles</u>	<u>6.8.15</u>	<u>Supplementary B.213 to 27/9.</u>
<u>22.3.16</u>	<u>of 1st Bn.</u>	<u>Did of wounds</u>	<u>do</u>	<u>9.8.15</u>	<u>Finding of Board of Enquiry</u> <u>Concluded by 1st Bn. and</u> <u>held at Mearns Camp</u> <u>Domailia 22.3.16.</u> <u>Cab 23.3.16.</u>

H. F. H. Herbert LT. COL.
G. C. New Zealand Records Section

M. H.
1-6-16

RECORDED ON HISTORY SHEET
27-10-17.

(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 enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form—Active Service.

Regiment or Corps *Otago Infantry Battalion*
 Regimental No. *8/1242* Rank *Private* Name *Glassey, Robert John*
 Enlisted (a) *3.11.14* Terms of Service (a) *Duration from* Service reckons from (a) *3.11.14*
 Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____
 Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, resolutions, etc., during active service, as reported on Army Form B. 211, Army Form A. 21, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 211, Army Form A. 21, or other official documents.
Date	From whom received				
<i>20.2.15</i>	<i>Joined unit</i>		<i>Cape Hill</i>	<i>9.5.15</i>	<i>Nominal Roll.</i>
<i>27.9.15</i>	<i>do</i>	<i>Wounded in action</i>	<i>Dardanelles</i>	<i>6.2.16</i>	<i>Supplementary B.211 to 27/1.</i>
<i>22.3.16</i>	<i>Lt. A. 37</i>	<i>Died of wounds</i>	<i>do</i>	<i>9.8.15</i>	<i>Findings of Board of Enquiry concluded by Lt. A. B. 11, and held at Maresca Camp Zemaitis 22.2.16. Cable 23.2.16.</i>

H. City Heebert

H. City Heebert

*M. 12
1-6-16*

NEW ZEALAND EXPEDITIONARY FORCE.

PERSONAL RECORD of

(Surname)

Registration No. 8/1242.

(Christian Name)

Glassey.

Pte.

R.J.

REGIMENT: G.I.B.

~~Previously~~ reported Wounded 6/8/15.- Now reported Died of Wounds. 9/8/15.
Finding of Board of Enquiry held at Moascar Camp Ismailia 22/3/16.

MEDICAL HISTORY

OF

Surname: LaceyChristian Name: Robert JohnExamined: { On 2nd day of Nov., 1914{ At Ch Church.Birthplace: { Town, Co. Lyrone{ Country, IrelandDeclared age: 22 years 6 monthsTrade or occupation: LabourerHeight: 5 ft., 11 1/2 in.Weight: 167 lb.Chest-measurement: { Minimum, 34 in.{ Maximum expansion, 37 1/2 in.

Physical development: _____

Small-pox marks: _____

Vaccination marks: { Right. _____
Left. _____
Arm, _____
Number, _____

When vaccinated: _____

Marks indicating congenital peculiarities or previous disease:

Approved by

Tracy R. InglisMedical Officer, Ch Church.

Examined for re-engagement:

_____ day of _____, 191

* Considered: _____

Medical Officer, _____

* If unfit, state disability.

Re-vaccinated on _____ day of _____, 191

Arm: _____ Number: _____

Result: _____

Medical Officer, _____

Enlisted on 22nd day of Nov., 1914, at Trentham

	Corps.	Regimental No.	Date.
Joined on enlistment	<u>8thago Inftry.</u>	<u>8/12/14</u>	<u>2/11/14</u>
Transferred to			

PROPOSED FOR DISCHARGE BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Services on the man becoming non-effective, the date and cause being stated at the foot of next page.

**NEW FILE
BEGINS**

NEW ZEALAND EXPEDITIONARY FORCE.

ATTESTATION OF

No. 8/242 Name: Robert John Glassey Regiment or Unit: _____

Questions to be put to the recruit before enlistment.

- | | |
|--|---|
| 1. What is your name? ... | 1. <u>Robert John Glassey</u> |
| 2. Where were you born? ... | 2. <u>County Tyrone, Ireland</u> |
| 3. Are you a British subject? ... | 3. <u>Yes</u> |
| 4. What is the date of your birth? ... | 4. <u>1st May 1892</u> |
| 5. What is your trade or calling? ... | 5. <u>Labourer</u> |
| 6. Are you an indentured apprentice? If so, where, and to whom? | 6. <u>No</u> |
| 7. What was the address at which you last resided? ... | 7. <u>Opoitiki</u> |
| 8. Have you passed the Fourth Educational Standard or its equivalent? | 8. <u>Yes</u> |
| 9. What is the name and address of your present or last employer? | 9. <u>Fred Orchard</u>
<u>Opoitiki</u> |
| 10. Are you married? ... | 10. <u>No</u> |
| 11. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? | 11. <u>No</u> |
| 12. Do you now belong to any military or naval force? If so, to what corps? | 12. <u>No</u> |
| 13. Have you ever served in any military or naval force? If so, state which and cause of discharge. | 13. <u>No</u> |
| 14. Have you truly stated the whole (if any) of your previous service? | 14. <u>Yes</u> |
| 15. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? | 15. <u>No</u> |
| 16. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? | 16. <u>No</u> |
| 17. Are you willing to be vaccinated or revaccinated? ... | 17. <u>Yes</u> |
| 18. Are you willing to serve in the Expeditionary Force in or beyond the Dominion of New Zealand under the following conditions, provided your services should so long be required: For the term of the present European war and for such further period as is necessary to bring the Expeditionary Force back to New Zealand and to disband it? | 18. <u>Yes</u> |

NOTE.—Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, Robert John Glassey, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.

Signature of Recruit: R. J. Glassey

Signature of Witness: David Galbraith

Oath to be taken by recruit on attestation.

I, Robert John Glassey, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, his Heirs and Successors, and that I will faithfully serve in the New Zealand Military Forces, according to my liability under the Defence Act, and that I will observe and obey all orders of His Majesty, his Heirs and Successors, and of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Magistrate or Attesting Officer.

The above questions were read to the above-named recruit 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, and the said recruit has made and signed the declaration and taken the oath before me, at Ouentham, N.Z., on this 5th day of Nov, 1914.

Signature of Attesting Officer: H. R. Kerr

If any alteration is required on this page of the Attestation, the Attesting Officer should be requested to make it and initial the alteration.

* Strike out words not required.

MILITARY HISTORY SHEET.

No. *8/1242*Name: *Glasser, Robert John*

	Country.	From	To	Years.	Days.	Initials of Officer making Entry.
	<i>Y.Y.</i>	<i>3/11/14</i>	<i>12/2/15.</i>	<i>—</i>	<i>93.</i>	<i>as.</i>
	<i>H. No. NZT. 19</i>	<i>13/2/15.</i>	<i>26/3/15.</i>	<i>Disembarked</i>	<i>42.</i>	<i>as.</i>
1. Service record ...						
2. Certificates ...						
3. Passed classes of instruction† † This includes any authorized class of instruction.						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
8. Medals and decorations	Name of Medal.	Class.	Date of Grant.			
9. Injuries in or by the Service						
10. Name and address of next-of-kin	<i>sister Miss Mary Glasser Ruarua Bankbury</i>					
11. Particulars as to Marriage.	(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow. (b.) Place and Date of Marriage. (c.) Name of Officiating Minister or Registrar.					
	(a.)	(b.)	(c.)			
12. Particulars as to Children.	Christian Names.	Date and Place of Birth.	Where registered.			

NOTE.—These entries are to be made from time to time as they occur, and initialled by the officer making the entry.

Intended place of residence on discharge: *Bankbury*

Surname:

Glassy

Christian Name:

Robert John

Station or Troopship.	Date of Arrival at the Station or of Embarkation.	DATES OF						Disease.	Number of Days in Hospital	REMARKS ON NATURE OF DISEASE: How induced, if mild or severe, if completely recovered from, whether any particular treatment was adopted. In venereal disease state nature of primary dis- ease and whether mercury has been given. If an accident state whether it occurred on duty and whether a court of inquiry was held.	Signature of Medical Officer.				
		Admission into Hospital.			Discharge from Hospital.										
		Day.	Mon.	Year.	Day.	Mon.	Year.								
Hincham H.M.N.Z.T. 19	3/11/14 12/2/15									INOCULATED THYPOID 31 1 15 INOCULATED THYPOID 31 1 15 Vaccinated 7/3/15.	Dr. Wilson H. Madison Capt.				

NEW ZEALAND EXPEDITIONARY FORCE.

PERSONA RECORD of
(Surname.)

Registration No.

Army No

1st NZEF

8/1242

(Christian name.)

2nd NZEF

REGIMENT:

B Coy O.I.B.

3RD REINFORCEMENTS

GROUP:

NUMBER:

3rd REINFORCEMENTS

PREVIOUS
PAPERS:SUBSEQUENT
PAPERS:

ELIGIBLE FOR MEMORIAL PLAQUE.

Description of

Robert John Glassey

on Enlistment.

Apparent age: 22 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height: 5 feet 11½ inches

Weight: 167 lb.

Chest measurement: { Minimum, 34 inches
Maximum, 37½ inches

Complexion: Fair

Colour of eyes: Hazel

Colour of Hair: Light Brown

Religious profession: Presbyterian

Nil

Medical Examination.

Sight: Right eye, Normal

Left eye, Normal

Hearing: Right ear, Normal

Left ear, Normal

Colour-vision: Normal

Are his limbs well formed? Yes

Are the movements of all his joints full and perfect? Yes

Is his chest well formed? Yes

Is his heart normal? Yes

Are his lungs normal? Yes

What is the condition of his teeth? Good

Is he free from hernia? Yes

Is he free from varicocoele? Yes

Is he free from varicose veins? Yes

Is he free from haemorrhoids? Yes

Is he free from inveterate or contagious skin-disease? Yes

Is there a distinct mark of vaccination? Yes

Is he in good bodily and mental health and free from any physical defect likely to interfere with the efficient performance of his duties? Yes

Are there any slight defects, but not sufficient to cause rejection? No

Remarks.

Fit

Certificate of Medical Examination.

I have examined the above-named, and find he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

I consider him fit for service in the New Zealand Expeditionary Force.

Description of Robert John Glassey on Enlistment.Apparent age: 22 years 6 months.

(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Height: 5 feet 11 1/2 inches.Weight: 167 lb.Chest-measurement: { Minimum, 34 inches.
Maximum, 37 1/2 inches.Complexion: Fair.Colour of eyes: Hazel.Colour of hair: Light BrownReligious profession: Presbyterian

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Nil

Medical Examination.

Sight: Right eye, Normal.Left eye, Normal.Hearing: Right ear, Normal.Left ear, Normal.Colour-vision: Normal.Are his limbs well formed? yes.Are the movements of all his joints full and perfect? yes.Is his chest well formed? yes.Is his heart normal? yes.Are his lungs normal? yes.What is the condition of the teeth? Good.Is he free from hernia? yes.Is he free from varicocele? yes.Is he free from varicose veins? yes.Is he free from hæmorrhoids? yes.Is he free from inveterate or contagious skin-disease? yes.Is there a distinct mark of vaccination? yes.Is he in good bodily and mental health and free from any physical defect likely to interfere with the efficient performance of his duties? yes.Are there any slight defects, but not sufficient to cause rejection? No.

Remarks.

Fit.

Certificate of Medical Examination.

I have examined the above-named, and find he does not present any of the causes of rejection specified in the Regulations or Army Medical Services.

I consider him fit for service in the New Zealand Expeditionary Force.

2nd Nov, 1914

10,000/10/14-10323]

Harry R Inglis
Lt Col.

, Medical Officer.

STATEMENT OF THE SERVICES OF No.

81242

NAME:

Glassy, Robert

Regiment or Corps.	Promotions, Reductions, Casualties, &c.	Rank.	Dates.	Signature of Officer certifying Correctness of Entries.
Otago Inf.		Private	3/11/14	D. Colquhoun Capt.
Do.	Previously rptd Wounded. now rptd Died of Wounds. Aug 9 th 18		24.3.16	

MILITARY HISTORY SHEET.

No. *8/1242* Name: *Glassey: Robert John*

	Country.	From	To	Years.	Days.	Initials of Officer making Entry.
1. Service record ...	<i>N. Z.</i>	<i>3/11/14</i>				
2. Certificates ...						
3. Passed classes of instruction† † This includes any authorized class of instruction.						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
	Name of Medal.	Clasps.		Date of Grant.		
8. Medals and decorations						
9. Injuries in or by the Service						
10. Name and address of next-of-kin						
	<i>Sister Miss Mary Glassey. Ruapuna. Ganteibury.</i>					
11. Particulars as to Marriage.	(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow. (b.) Place and Date of Marriage. (c.) Name of Officiating Minister or Registrar.					
	(a.)	(b.)		(c.)		
12. Particulars as to Children.	Christian Names.		Date and Place of Birth.		Where registered.	

NOTE.—These entries are to be made from time to time as they occur, and initialled by the officer making the entry.

Intended place of residence on discharge: _____

MILITARY HISTORY SHEET.

No. 8/1242

Name:

Glassey, Robert John

	Country.	From	To	Years.	Days.	Initials of Officer making Entry.
1. Service record ...	NZ	3/11/14				
2. Certificates ...						
3. Passed classes of instruction† † This includes any authorized class of instruction.						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
8. Medals and decorations	Name of Medal.	Class.	Date of Grant.			
9. Injuries in or by the Service	Sister / Mrs Mary Glassey Ruapuna Auckland					
10. Name and address of next-of-kin						
11. Particulars as to Marriage.	(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow. (b.) Place and Date of Marriage. (c.) Name of Officiating Minister or Registrar.					
	(a.)	(b.)	(c.)			
12. Particulars as to Children.	Christian Names.		Date and Place of Birth.		Where registered.	

NOTE.— These entries are to be made from time to time as they occur, and initialled by the officer making the entry.

Intended place of residence on discharge:

Auckland



NEW ZEALAND EXPEDITIONARY FORCE.

ATTESTATION OF

No. 8/242 Name: Robert John Glassey Regiment or Unit: _____

Questions to be put to the Recruit before enlistment.

1. What is your name? ...
2. Where were you born? ...
3. Are you a British subject? ...
4. What is the date of your birth? ...
5. What is your trade or calling? ...
6. Are you an indentured apprentice? If so, where, and to whom? ...
7. What was the address at which you last resided? ...
8. Have you passed the Fourth Educational Standard or its equivalent? ...
9. What is the name and address of your present or last employer? ...
10. Are you married? ...
11. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? ...
12. Do you now belong to any military or naval force? If so, to what corps? ...
13. Have you ever served in any military or naval force? If so, state which and cause of discharge? ...
14. Have you truly stated the whole (if any) of your previous service? ...
15. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? ...
16. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? ...
17. Are you willing to be vaccinated or re-vaccinated? ...
18. Are you willing to serve in the Expeditionary Force in or beyond the Dominion of New Zealand under the following conditions, provided your services should so long be required: For the term of the present European war, and for such further period as is necessary to bring the Expeditionary Force back to New Zealand and disband it? ...

1. Robert John Glassey
2. C. Lynskey, Ireland
3. Yes
4. 1 May 1892
5. Labourer
6. No.
7. Orotiri
8. Yes
9. Ind. Orchard Orotiri
10. No.
11. No.
12. No.
13. No.
14. Yes
15. No.
16. No.
17. Yes
18. Yes

NOTE.—Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, Robert John Glassey, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.

Signature of Recruit: R. J. Glassey

Signature of Witness: David Gallsworthy

Oath to be taken by Recruit on attestation.

I, Robert John Glassey, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, his Heirs and Successors, and that I will faithfully serve in the New Zealand Military Forces, according to my liability under the Defence Act, and that I will observe and obey all orders of His Majesty, his Heirs and Successors, and of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Magistrate or Attesting Officer.

The above questions were read to the above-named Recruit 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, and the said Recruit has made and signed the declaration and taken the oath before me, at

November 1914.

Signature of Attesting Officer

W. H. Hether 2/11

If any alteration is required on this page of the Attestation, the Attesting Officer should be requested to make it and initial the alterations.

STATEMENT OF THE SERVICES OF No. 91242

NAME: Glassey, R. A.

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HISTORY-SHEET.

[E.F. Form No. 3A.]

Unit.	Rank.	Surname.	Christian Name.	No.
C. I. B. Pute.		Glassey.	Robert. John.	8/1242

Occupation: Labourer Religion: Ireland. Last New Zealand address: 6 Potiki
 Last employer: Fred Orchard Presbyterian 1-5-92

Name, relationship, and address of next-of-kin (if not resident in New Zealand, insert also name and address of nearest relative in New Zealand):
 (Sister) Miss Mary Glassey. Ruapuna
C. I. B. C. I.
 Legal next-of-kin (Brother) Wm Glassey. Ruapuna Canterbury
Main St. Pakiata

Surname: Glassey. Christian names: Robert John. at death
 Rank on discharge: Plt Highest rank held: Plt Reg. No. 8/1242
 Address: 12/OCT/1973
 Highest rank held in theatre of war:
 Rank shown on discharge-certificate:
 Country resident in: 19/2/21
 In the case of death, country next-of-kin are resident in.

MEDAL ACTION COMPLETE

Casualty or reason for discharge: 12/OCT/1973
 Legatee and address: Public Trustee (Administrator)
Miss. Mary D. Glassey, 33 Hackthorne Rd, Cashmere, Christchurch
 Nominated next-of-kin, relationship, and address:

Legal next-of-kin, relationship, and address: Mr. Wm Glassey (B) Ruapuna. Canterbury.
Main St. Pakiata

Decorations: Medals for Gallantry.	Authority.	Service Medals.	Date Medal issued.	Service Chevrons.	Wound Stripes.
	<u>Australasian:</u>				
	<u>Egyptian: 1915</u>	<u>1914-15 Star</u>			
	<u>Egyptian E.R.:</u>	<u>British War Medal ..</u>		<u>Red.</u>	
	<u>Balkan: Gal. 1915</u>	<u>Victory Medal ..</u>		<u>Blue.</u>	
Certificates of Service issued.	No.	Date.	MENTION IN DESPATCHES.		
	<u>Western European:</u>		<u>London Gazette.</u>	<u>No.</u>	<u>Date.</u>
	<u>Asiatic:</u>				

SICK ...
Army Form B103. Died of wounds. Dardanelles 9.8.15.
ONE 15-11-17.

Killed in action ...
 Died of wounds* 1298. 27/3/16. Reported
G. 8. 15. result of Court of Enquiry held at
Missing ...
moascar camp. Ismailia 22.3.16.

Prisoner ...
(See Army Form B103. Since received)

Injuries in or by the Service ...
C. I. B. Died of wounds received in action at Gallipoli 9. Aug. 1915
Provisional: ...
Final: ...
Intended address: ...

Discharge ...
Final: ...

Pension ...
Modals to Miss. M. Glassey,
33 Hackthorne Rd
Cashmere, Christchurch