

Pension	... above and H. M. paid from above and unclaimed 13.1 21	(advise medal auth to Mrs M. A. Marlou (on) 28 Paul St, Shore Rd, Belfast) 23rd Dec 1913
---------	---	--

M. P. B.

* Strike out words not required.

No.

9304

Last New Zealand address:

MEDAL : W

Sick

Killed in action

Died of wounds*
sickness*

Missing ...

Prisoner ...

Injuries in or by the
Service

Discharge

Provisional :

(Date.)

Intended address :

Final :

(Date)

Pension

above medal and to Mrs M. A. Marlborough, 28 ~~Paul St~~ ~~Shore Rd~~, Belfast, Ireland
 Star and
 H. M. and from
 above and unclaimed 13.1.21

* Strike out words not required.

M. P. B.

Casualty Form—Active Service.

Regiment or Corps

6thago Wtd Rifles

7th

Regimental No.

9/307

Rank

Trooper

Name

Marlowe

Joseph Henry

Enlisted (a)

12-8-14

Terms of Service (a)

Period of war

Service reckons from (a)

12-8-14

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, 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.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
25-8-15	HS Aquitania	died of G.L.W. leg f buried at sea	on ship	22-8-15	End-cable AD 26 from HS Aquitania 25/8/15. A5155
<i>H. J. Herbert</i> CAPT. D. C. Records Section New Zealand for A. A. G. G. H. Q. 3rd. Echelon M. E. F.					

FILE
17 NOV 1915

ENTERED ON HISTORY SHEET
gmg 14.5.17.

**NEW FILE
BEGINS**

MILITARY HISTORY SHEET.

No.

Name:

Joseph Henry Marlowe

	Country.	From	To	Years.	Days.	Initials of Officer making Entry.						
1. Service record	5th Royal Irish Lancers 4th Annaballang Fusiliers 2nd Battalion Royal New Zealand 6th Brigade 1st Division 74					W.H.G.						
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	<table border="1"> <thead> <tr> <th>Name of Medal.</th> <th>Clasp.</th> <th>Date of Grant.</th> </tr> </thead> <tbody> <tr> <td colspan="3"></td> </tr> </tbody> </table>						Name of Medal.	Clasp.	Date of Grant.			
Name of Medal.	Clasp.	Date of Grant.										
9. Injuries in or by the Service	Mrs M. Marlowe											
10. Name and address of next-of-kin	White House Aulstern											
11. Particulars as to Marriage.	<table border="1"> <thead> <tr> <th>(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow.</th> <th>(b.) Place and Date of Marriage.</th> <th>(c.) Name of Officiating Minister or Registrar.</th> </tr> </thead> <tbody> <tr> <td>(a.)</td> <td>(b.)</td> <td>(c.)</td> </tr> </tbody> </table>						(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.)
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(a.)	(b.)	(c.)										
12. Particulars as to Children.	<table border="1"> <thead> <tr> <th>Christian Names.</th> <th>Date and Place of Birth.</th> <th>Where registered.</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Christian Names.	Date and Place of Birth.	Where registered.			
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

NEW ZEALAND EXPEDITIONARY FORCE.

PERSONAL RECORD of

(Surname.)

(Christian name.)

Merlowe

Joseph Henry

REGIMENT: Otago Mounted Rifles

GROUP: 14 NUMBER:

1st NZEF Registration No.	Army No 9/307
2nd NZEF	
RF-TF	

PREVIOUS
PAPERS:SUBSEQUENT
PAPERS:

[20,000/8/14-12421]

SERVICE CARD PREPARED

Marlowe Joseph H.

9/307

[War Pensions—10.]

DIRECTOR OF BASE RECORDS



Pensions Department,

, 191

As application for War Pension *in aid of* the undermentioned soldier has been dealt with as indicated herein.

Regimental No.	Name and Address.	Decision.
9/307	Joseph H Marlowe	(£26 p.a) To Mother (Mary)

G. E. Tache

Commissioner of Pensions.

Casualty Form—Active Service.

Regiment or Corps

6thago Wtd Rifles

7th

Regimental No.

9/307

Rank

Trooper

Name

Marlowe

Joseph Henry

Enlisted (a)

12-8-14

Terms of Service (a)

Period of war

Service reckons from (a)

12-8-14

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, 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.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
25-8-15	HS Aquitania	died of G.L.W. leg f buried at sea	on ship	22-8-15	Excl-cable AD 26 from HS Aquitania 25/8/15. A5155 ABT
<i>H. G. Records Section New Zealand</i> for A. A. G. G. H. Q. 3rd. Echelon M. E. F. <i>H. G. Records Section New Zealand</i> for A. A. G. G. H. Q. 3rd. Echelon M. E. F.					



ENTERED ON HISTORY SHEET
17.11.15

NEW ZEALAND EXPEDITIONARY FORCE.

ATTESTATION OF

No. 9 Name: Joseph Barlowe Regiment or Unit: 7

Questions to be put to the recruit before enlistment.

1. What is your name? ... 1. Joseph Barlowe
2. Where were you born? ... 2. Ireland
3. Are you a British subject? ... 3. Yes.
4. What is the date of your birth? ... 4. August 24 1888.
5. What is your trade or calling? ... 5. Labourer.
6. Are you an indentured apprentice? If so, where, and to whom? ... 6. No
7. What was the address at which you last resided? ... 7. Invercargill B.O.G.P.O.
8. Have you passed the Fourth Educational Standard or its equivalent? ... 8. Yes.
9. What is the name and address of your present or last employer? ... 9. Wallace County Council.
10. Are you married? ... 10. No
11. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? ... 11. No.
12. Do you now belong to any military or naval force? If so, to what corps? ... 12. Yes. 5th Royal Irish Lancers.
13. Have you ever served in any military or naval force? If so, state which and cause of discharge. ... 13. Yes. Deserted.
14. Have you truly stated the whole (if any) of your previous service? ... 14. Yes.
15. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? ... 15. No
16. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? ... 16. No
17. Are you willing to be vaccinated or revaccinated? ... 17. Yes.
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. 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, Joseph Barlowe, 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: Joseph Barlowe

Signature of Witness: Robert Dunlop Fraser.

Oath to be taken by recruit on attestation.

I, Joseph Barlowe, 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 Invercargill, N.Z., on this 12 day of

August, 1914.

Signature of Attesting Officer: T. M. Wilkes

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

Description of

^{Henry}
Joseph Marlowe

on Enlistment.

Apparent age: *26* years months.

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

Height: *5* feet *6 1/2* inches.Weight: *169* lb.Chest-measurement: Minimum, *37 1/2* inches.
Maximum, *41 1/2* inches.Complexion: *Dark.*Colour of eyes: *Brown.*Colour of hair: *Dark.*Religious profession: *Roman Catholic*

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

Medical Examination.

Sight: Right eye, *6/6*Left eye, *6/6*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? *Very Good*Is he free from hernia? *Yes*Is he free from varicocele? *Left Moderate*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.

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.

Aug 11th 191 *11*.*William Stewart*, Medical Officer.

STATEMENT OF THE SERVICES OF No. 9/304 NAME: Marlowe Joseph Hurry

Regiment or Corps.	Promotions, Reductions, Casualties, etc.	Rank.	Dates.	Signature of Officer certifying Correctness of Entries.
O.M.B.	attested	1st.	12.8.14	A. H. Ringham.

MILITARY HISTORY SHEET.

No. *9/304*Name: *M. Marlowe Joseph Henry*

	Country.	From	To	Years.	Days.	Initials of Officer making Entry.
1. Service Record ...	<i>New Zealand</i>	<i>12.8.14</i>	<i>14.10.14</i>		<i>64</i>	<i>A.P.</i>
	<i>at sea on T. 9.</i>	<i>15.10.14</i>	<i>3.12.14</i>		<i>50</i>	<i>A.P.</i>
	<i>Egypt.</i>	<i>4.12.14</i>				
2. Certificates ...						
3. Passed Classes 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.	Clasps.		Date of Grant.		
9. Injuries in or by the Service ...	<i>Mrs. M. Marlowe</i> <i>White House</i> <i>Belfast.</i>					
10. Name and address 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.					
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 initialed by the officer making the entry.

INITIALS AND SIGNATURE ON DISCHARGE.

Discharged

MEDICAL HISTORY

OF

Surname: MARLOWEChristian Name: Joseph HenryExamined: On 11 day of Augst, 1914At InvercargillBirthplace: Town, BelfastCountry, IrelandDeclared age: 26 yrs.Trade or occupation: Labr.Height: 5 ft., 6½ in.Weight: 169 lb.Chest-measurement: Minimum, 37½ in.Maximum expansion, 44½ in.

Physical development: _____

Small-pox marks: _____

Right. Left.

Vaccination marks: Arm, _____

Number, _____

When vaccinated: _____

Marks indicating congenital peculiarities or previous disease: _____

Approved by

Captain Low StewartMedical Officer, Invercargill

Examined for re-engagement:

_____ day of _____, 191

* Considered: _____

Medical Officer, _____

* If unfit, state disability. _____

anti typhoid inoculation 9 & 19.11.14Re-vaccinated on 15th day of Jan., 1915

Arm: _____

Number: _____

Result: _____

Medical Officer, _____

Enlisted on 12 day of August, 1914, at Invercargill

	Corps.	Regimental No.	Date.
Joined on enlistment	<u>Otago Mounted Rifles</u>	<u>9/307</u>	<u>12.8.14</u>
Transferred to			

PROPOSED FOR DISCHARGE BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

Surname: *Malone* Christian Name: *Joseph*

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.				
Lebanon		15	12	14	16	12	14	Measles	2	Sent into Abyssinian Hospital	CT Howard
Q. A. Hosp.											
Pont de Houbelt.		16	12	14	21	12	14	Influenza	6	Mild attack	GS Sharp. H.
E.A.H.											
Pont de Houbelt		29	12	14	19	1	15	Contused wound Right leg	22.	Mild - improved -	a Raddel
C. A. Hosp		205	4	16							