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Fact sheet 7 – Citing archival records

Fact sheet 8 – Copyright

REGISTER CARD "A."

AFTER-BARKATION.

Particulars of Children for whom Separation Allowance is Payable

Certificate No.	POST OFFICE	Date of Commencement	NAME	Date of Birth	Attain Age Limit	Casualties
705	<i>Unley</i> <i>Mulbound</i>	28-8-16 11-1-18				
SOLDIER'S SURNAME						
<i>Johns IHMS Henry A.</i>						
ALLOTTEE'S SURNAME						
<i>Johns Mollie Mary 9 P.O. Melbourne</i>						

Fort-night Ended	Date Paid	Amount £ s. d.	Fort-night Ended	Date Paid	Amount £ s. d.	Fort-night Ended	Date Paid	Amount £ s. d.	Fort-night Ended	Date Paid	Amount £ s. d.	Total Debts on Card of Returned Soldier	
												Rate per Diem Allow.	Total Forthnightly Rate to be Paid
Previous Payments Brought Forward 1916			Brought Forward 1916									4/15	3-15-10
Feb. 24			Aug. 9	3/15/10		May 2							
Mar. 9			" 23			" 16							
" 23			Sept. 6	7/11/8		" 30							
April 6			" 20			June 13							
" 20			Oct. 4	7/11/8		" 27							
May 4			" 18			July 11							
" 18			Nov. 1	3/15/10		" 25							
June 1			" 15			Aug. 8							
" 15			Mar. 8	7/11/8		" 29							
" 29			" 22			Dec. 13							
July 13			April 5	7/11/8		" 27							
" 27			" 19			1916							
Aug. 10			May 3	11/7/6		Jan. 10							
" 24			" 17			" 24							
Sept. 7			" 31	7/11/8		Feb. 7							
" 21			June 14	3/15/10		" 21							
Oct. 5			" 28	3/15/10		Mar. 7							
" 19			July 12	3/15/10		" 21							
Nov. 2			" 26	3/15/10		April 4							
Carried Forward			Carried Forward			18							

A. S. P.
O.F.C.D.
1/11/17

Casualties Affecting Pay
trans to Melbourne from 11-1-18

25 18 July 11

73 Name Rank *Private 1st Lt.* Unit *343rd / 35th Div* S.A. *20/11*

Relationship. Address of Allottee. Enlistment. Emancipation.

District *4th Div 9* District *4th Div 9*

Date *17.5.16* Date *28.8.16*

No. Transport

M. or S. *TU* Num. Roll Page

Total Pay (including Deferred).	Deferred.	Soldier's Drawing Rate.	ALLOT.	SEPN. ALLCE.	Fortnightly Rate of Allotment and Separation Allow.			Reason and Authority for Variation.	Post Office.	Certif. No.	Checking Staff.
					£	s.	d.				
<i>6/.</i>	<i>1/.</i>	<i>1/.</i>	<i>4/.</i>	<i>1/5</i>	<i>3</i>	<i>15</i>	<i>10</i>	<i>Private at Embark</i>	<i>3rd Div 9</i>	<i>705</i>	<i>MSC</i>
<i>Subject transferred to 3rd Div 9 on 8 from 11.1.18. Paid up to 5 including 10.1.18. in 4th Div 9 vide Schedule 22.</i>										<i>ATH</i>	

hereon.

will to hand 17 FEB 1919

INSTRUCTIONS TO CLAIMANTS FOR BALANCE OF MILITARY PAY DUE TO ESTATES OF DECEASED SOLDIERS.

Claimants are directed to carefully read and carry out the following instructions, as a strict compliance therewith will facilitate settlement.

I.—GENERAL.

1. When the amount due by the Defence Department to a Deceased Soldier's Estate does not exceed £100, it is not necessary to obtain Probate of Will or (should there be no Will) to apply for Letters of Administration to receive payment of this money.

Should there be difficulty, however, in deciding who is legally entitled to the amount payable to the Estate, it will be necessary to insist that Probate of Will or Letters of Administration be duly obtained and produced at the office of the District Paymaster, North Terrace, Adelaide, before payment can be made.

2. The concessions made by the Government of South Australia with respect to the Estates of Deceased Soldiers are as follows:—

- (a) If the value of the estate is under £5,000, and the persons entitled are either a widow, a descendant, or an ancestor of the deceased, **no succession duty is charged.**
- (b) The Public Trustee administering the Estates of Soldiers **makes no charge for commission.**
- (c) In cases where the persons entitled are resident outside this State, and the balances to the credit are handed to the Public Trustee by the Military Authorities, the amounts may, with the permission of the Treasurer, be forwarded direct to the beneficiaries **without administration or Probate being taken out.**

3. If the deceased soldier left a Will, and it is not intended to take out Probate, the Original Will (not a copy) must be forwarded (with the declaration mentioned in paragraph 4 of these instructions) to the District Paymaster.

4. If Probate of the Will has been obtained, or Letters of Administration granted, the Probate or Letters of Administration must be produced at the Office of the District Paymaster before the deceased soldier's account can be settled.

II.—DECLARATION BY CLAIMANT.

5. If neither Probate nor Letters of Administration are being applied for, the claimant must make the declaration on page 2 hereof.

6. The declaration should be made by the following persons:—

- (i) **If the deceased soldier was married, and his**
 - widow is living his widow.
 - If his widow is dead his eldest child or guardian.
- (ii) **If the deceased soldier was unmarried, and—**
 - (a) His father is living his father.
 - (b) His father is dead and mother living . . . his mother.
 - (c) Both parents are dead the eldest surviving brother or sister.

III.—FORM OF AUTHORITY.

7. The form of authority is set out on page 3.

8. If the widow, child, or father of deceased is the claimant the form of authority on page 3 should be left blank and not signed.

9. If the mother of deceased is the claimant, and the father is living, then the form of authority must be filled in and signed by the father, should he consent to the balance of military pay being paid to the mother. Should the mother be unable to obtain the signature of the father owing to desertion or other sufficient cause, then all the brothers and sisters living must sign.

10. If the mother of the deceased is the claimant, his father being dead, the form of authority must be filled in and signed by all brothers and sisters living.

11. If a brother or sister is the claimant, he or she must be of the full age of twenty-one years, and the form of authority must be filled in and signed by all brothers and sisters living.

IV.—FORM OF IDENTIFICATION.

12. The form of identification is set out at the foot of page 3. It should be signed by a minister of religion, police magistrate, justice of the peace, head teacher of a State school, member of police force, or some well-known responsible business man personally acquainted with the claimant making the declaration.

AUSTRALIAN IMPERIAL FORCE—4th MILITARY DISTRICT.

STATUTORY DECLARATION.

In the matter of Military Pay of No. 2173 Rank Temporary Corporal
Name: Henry Arthur Horns.
Unit: 38th Coy 3rd Div Australian on Active Service, deceased.
I, Mabel Marrie Horns.
of Wagyuwagga

do solemnly and sincerely declare that the answers made by me to the following questions are true in substance and fact:-

1. What relation are you to deceased? Wife.
2. Did the deceased soldier, to best of your knowledge and belief, leave a Will? Yes
3. If a Will was left, is it intended to apply for Probate? No
4. If NO WILL was left, do you intend to apply for Letters of Administration? Yes
5. Was the deceased soldier married? Yes
6. If the soldier was married- (a) Is his wife still alive? Yes (b) Are there any children born of the marriage? No
7. State names in full of children living, and give their respective ages.
8. (a) Is the deceased soldier's father alive? Yes (b) If so, what is his full name and address? Frank Julius Horns (c) Is the deceased soldier's mother alive? Yes (d) If so, what is her full name and address? Elizabeth Horns
9. Did the deceased soldier leave any brothers and sisters surviving him? If so, give their names and addresses: Vera, Benjamin, Herbert
10. Was the deceased possessed of any other Property, real or personal? If so, what is the value? No

In the event of any other claimant or claimants later proving a claim to the amount due to the Estate of the deceased soldier, I hereby undertake to refund any amount that may be wrongfully paid to me in this connection.

And I make this solemn declaration by virtue of the Statutory Declarations Act, conscientiously believing the statements contained therein to be true in every particular.

Signature: M. M. Horns
Declared at Wagyuwagga the 10 day of February 1919
Signature of person before whom Declaration is made: J. J. [Name] Justice of the Peace
(Here insert title of person before whom Declaration is made.)

NOTE.—Any person who makes an untrue statement in this Declaration shall be guilty of an offence under the War Precautions Act, and shall be liable on summary conviction to a fine not exceeding £100 or imprisonment for a term not exceeding six (6) months, or both, and may, in addition, be ordered to repay any money received from the Department of Defence.

“D”

AUSTRALIAN IMPERIAL FORCE—4th MILITARY DISTRICT.

THE DISTRICT PAYMASTER,
4TH MILITARY DISTRICT,
NORTH TERRACE,
ADELAIDE.

We, the undersigned—

hereby authorize you to pay over to—

Name _____

Address _____

(whose receipt shall be a sufficient discharge) the balance of pay and any other moneys due by the Defence Department to the estate of No. _____ Rank _____

Name _____ Unit _____

soldier, deceased.

Signature.	Relationship to Soldier.	Address.	Witness.

FORM OF IDENTIFICATION.

I, PHILLIS JESSIE QUINTON
(Fill in full name.)

do hereby declare that I am personally acquainted with MABEL MURRIE IMMS

_____ the claimant making the declaration on page 2 hereof, and, further, that the relationship of the said claimant to the deceased soldier referred to is as set out in the said declaration.

Dated the Tenth day of February 1919

Signature Phillis Quinton

Address C/o? Mrs. H. Whiting
Tarcutta Street Wagga Wagga

Occupation wife of J.J. Quinton, (domestic duties)

THIS IDENTIFICATION FORM MUST BE COMPLETED IN EVERY CASE IN WHICH STATUTORY DECLARATION IS MADE.

SOLDIER'S PAY BOOK

Pay Book No. 108126

Surname I H M S

Christian Names Henry Arthur

Reg^d. No. 2173 Religion C. of G. Rank Private

Enlisted in 4th Military District.

Date of Attestation 17. 5. '16 Age on Enlistment 22 7/2

Unit 38th Battalion 6th Coy.

Transferred to _____ on _____

" " " "

" " " "



Soldier's Signature *W. H. Stone*

CASH PAYMENTS, FINES, FORFEITURES AND OTHER DEBITS.

Date	No.	Place	Amount	Progressive Total	Officer's Signature
31-1-17	1	Returned key book	6	6	<i>J. R. Mendenhall</i>
17-2-17	2	1st. Detail	8	14	<i>J. R. Mendenhall</i>
28-2-17	3	do	1	15	<i>J. R. Mendenhall</i>
17-3-17	4	do	1	16	<i>J. R. Mendenhall</i>
18-4-17	5	do	1	17	<i>J. R. Mendenhall</i>
2-5-17	6	do	1	18	<i>J. R. Mendenhall</i>
16-5-17	7	do	1	19	<i>J. R. Mendenhall</i>
30-5-17	8	do	1	20	<i>J. R. Mendenhall</i>
21-6-17	9	do	2	22	<i>J. R. Mendenhall</i>
27-6-17	10	do	2	24	<i>J. R. Mendenhall</i>
		Forward	16	40	<i>J. R. Mendenhall</i>

EARNINGS AND OTHER CREDITS.

Earnings to be entered Monthly and when any alteration of net rate is made.

Earnings at net rates and particulars of other Credits.			No. of Days	Net Rate	Amount	Progressive Total	Officer's Signature
From	To						
26-8-16	21-1-17		157	1/17	7 17	7 17	<i>J. R. Mendenhall</i>
1-2-17	28-2-17		28	1/8	1 8	9 5	<i>J. R. Mendenhall</i>
1-3-17	31-3-17		31	1/11	1 11	10 16	<i>J. R. Mendenhall</i>
1-4-17	30-4-17		30	1/10	1 10	12 6	<i>J. R. Mendenhall</i>
1-5-17	31-5-17		31	1/11	1 11	13 7	<i>J. R. Mendenhall</i>
1-6-17	30-6-17		30	1/10	1 10	15 7	<i>J. R. Mendenhall</i>
		Forward			15	15 7	<i>J. R. Mendenhall</i>

Soldier's Signature

CASH PAYMENTS, FINES, FORFEITURES AND OTHER DEBITS.

Earnings to be entered Monthly and when any alteration of net rate is made.

Date.	No.	Place.	Amount.	Progressive Total.	Officer's Signature.	
						From
		Forward	21 11 6	21 11 6	A. Palk P/Sgt	
22-11-17	20	Field	11 -	22 2 6	A. Palk P/Sgt	
23-11-17	21	Imperial Beach	3 0 22	22 5 6	A. Palk P/Sgt	
7-12-17	22	Albion	14 2 83	22 8 3	A. Palk P/Sgt	
28-12-17	23	London	1 10 -	24 10 3	A. Palk P/Sgt	
24-12-17	24		5 -	24 15 2	A. Palk P/Sgt	
19-1-18	25	Schools	1 9 4	26 4 6	A. Palk P/Sgt	
7-2-18	26	Field	7 4 26	26 11 10	A. Palk P/Sgt	
21-2-18	27	do	11 -	27 2 14	A. Palk P/Sgt	
10-3-18	28	do	14 8 27	27 11 6	A. Palk P/Sgt	
		Forward	27 11 6	27 11 6	A. Palk P/Sgt	

Forward 27 11 6

EARNINGS AND OTHER CREDITS.

Earnings at net rates and particulars of other Credits.

Date.	No.	Place.	Amount.	Progressive Total.	Officer's Signature.	
						From
		Forward	21 10	21 10	A. Palk P/Sgt	
1-11-17			1 10	22 10	A. Palk P/Sgt	
1-12-17			1 11	23 11	A. Palk P/Sgt	
1-1-18			1 11	24 11	A. Palk P/Sgt	
1-2-18			1 5	25 10	A. Palk P/Sgt	
1-3-18			1 11	26 11	A. Palk P/Sgt	
		Forward	29 1	29 1	A. Palk P/Sgt	

Forward 29 1

Soldier's Signature										
CASH PAYMENTS, FINES, FORFEITURES AND OTHER DEBITS.					EARNINGS AND OTHER CREDITS.					
Earnings to be entered Monthly and when any alteration of net rate is made.										
Date.	No.	Place.	Amount.	Progressive Total.	Officer's Signature.	Earnings at net rates and particulars of other Credits.			Progressive Total.	Officer's Signature.
						From	To	No. of Days.		
		Forward	27 17 6	27 17 6	A. Beck P. Sgt				29 1	A. Beck P. Sgt
20.2.18	29	Shield	11	28 8 6	A. Beck P. Sgt	1-4-18	30-4-18	30 11	30 11	A. Beck P. Sgt
17.4.11	30	do	14	28 15 10	A. Beck P. Sgt	1-5-18	20-5-18	20 11	31 11	A. Beck P. Sgt
15.5.18	31	do	17 4	29 3	A. Beck P. Sgt	21-5-18	31-5-18	11	34 6	A. Beck P. Sgt
29.5.18	32	do	1 16 8	20 19 10	A. Beck P. Sgt	1-6-18	30-6-18	30	40 15 6	A. Beck P. Sgt
12.6.18	33	do	2 11 4	33 11 2	A. Beck P. Sgt	Deduction on Account of Cash				
24.6.18	34	do	1 9 4	35	A. Beck P. Sgt	Allotted 21.5.18 to 20.6.18				
10.7.18	35	do	1 9 4	36 9 10	A. Beck P. Sgt	- H. days 20.6.18				
17.8.18	36	do	1 2 1	37 11 10	A. Beck P. Sgt	Deduction				
		Total	37 11 10	37 11 10		Credits up to 30.6.18			36 13 6	A. Beck P. Sgt
		Forward				Forward			36 13 6	

CASH PAYMENTS, FINES, FORFEITURES AND OTHER DEBITS.				EARNINGS AND OTHER CREDITS.									
Earnings to be entered Monthly and when any alteration of net rate is made.				Earnings at net rates and particulars of other Credits.									
Date.	No.	Place.	Amount.	Progressive Total.	Officer's Signature.	From.	To.	No. of Days.	Net Rate.	Amount.	Progressive Total.	Officer's Signature.	
		Forward											
	38					1-7-18	21-7-18	21	2/6	26	136	A. REX DARR	
	39					1-8-18	24-8-18	24	2/4	317	4011	A. REX DARR	
	40									317	448	A. REX DARR	
	41					Cash found in effect part to							
	42					Div of Make A 48329							
	43					Added in October 24-8-18							
	44									17	44	10	A. REX DARR
	45												
	46												
		Forward											

Cpl I H M S. H. A.

3/43. Batt.

SOLDIER'S PAY BOOK

FOR USE OF

ACTIVE SERVICE.

INSTRUCTIONS TO SOLDIER.

1. You will produce this book whenever you require an advance of cash on account.

2. You will give a receipt, on the acquittance roll of the Officer paying you, for all cash advances made to you. The Officer making the payment will sign the corresponding entry in this book on the page for Cash Payments.

3. You will make no entries in this book, except to sign your name on pages 4 and 8 and to make your will, if you so desire, on page 15.

4. Should you lose your book you will at once report the loss to your Commanding Officer. A new book will be obtained, if possible, from the Accountant, but it must be understood that no pay can be issued in respect of the period before the date on which you report your loss, until you are finally settled with.

Regiment or Corps ^{28th} ~~1st~~ Battalion

Squadron, Battery, or Company

No. 2173 Rank ³⁰ ~~30~~

Name in full ^{C.E.} ~~1475~~ H.M.S. ^{Henry Arthur} ~~Robert Arthur~~

Date of Attestation ^{17/5/16} and

Age on Enlistment ^{25 1/2 yrs}

If appointed to a Unit formed on Mobilization, the designation of such Unit should be clearly stated here—

NOTE.—The account of the soldier while on active service will be kept in the Office of the Accountant paying the Base Depot of his Unit, and to that Officer all communications relating to his accounts should be addressed.

Rates of — 4
 Pay ... 6
 Less Deferred Pay 1



	s.	d.	s.	d.
Total	5			
Deduct Allotment	4			
† NET DAILY RATE FOR ISSUE	1			

(words) *one Shilling*

H. A. Johns
 Signature of Soldier.
J. S. Watters
 O. C. Company, &c.

Date and Station *Mitcham 26 Aug 1916.*

† Subject to amendments (if any) on page 5.

5
 For use in case the Rates of Pay given on p. 4 require to be amended—

(1)
 The Net Rate of Pay for issue has been reduced or raised to _____ s. _____ d. (words)

from _____ 191 , on account of _____

Checked _____
 O. C. Company, &c.
 Accountant.

(2)
 The Net Rate of Pay for issue has been reduced or raised to _____ s. _____ d. (words)

from _____ 191 , on account of _____

Checked _____
 O. C. Company, &c.
 Accountant.

* NOTE.—The above rates should be verified, whenever opportunity offers, by the Accountant compiling the man's account. A new book should be issued, if necessary, the Accountant retaining the old one.

6
PARTICULARS OF

Wife (1)
Next of kin Habel Clara Shms.
and address Co. F. G. Runt
Salham St

(2) Kingswood
Staus
Person to whom Allotment or Compulsory Stoppage

is payable
and address As above

7
Promotions, Appointments, Reductions, and
any casualty affecting the net daily rate of pay.

Date.	Nature of Casualty.	* Officer's Signature.

* NOTE.—In addition to the above record, the Officer making the entry will write across the columns for cash payments the nature of the casualty and the amended net rate of pay corresponding with page 5. He will also record in the same place all sentences of imprisonment, attesting such entries by his signature.

Signature of Soldier J. A. Hines

Book opens on 28 AUG 1916 191 . (For the Net Daily Rate of Pay see pages 4 and 5, and Note on page 7.)

If the soldier was in debt on the above date, the amount to be recovered from the next pay due to him should be stated.

Debt £ _____ s. _____

J. A. Hines per O. C. Company, &c.

Cash Payments.

Date.	Place.	Amount.			Signature of Officer.
		£	s.	d.	
1916					
7-9-16	A. 68	-	10	-	<u>J. A. Hines</u> <u>per</u>
7/9/16	"		4		<u>J. A. Hines</u> <u>per</u>
23/9/16	A. 68	-	14	-	<u>J. A. Hines</u> <u>per</u>
6/10/16	A. 68	-	12	-	<u>J. A. Hines</u> <u>per</u>
5 OCT 1916	Bedford	-	12	-	<u>P. G. Symons</u> <u>per</u>
NOV 1916	"	-	13	-	<u>P. G. Symons</u> <u>per</u>
Oct 11	Tram	20	14	4	<u>Wherry</u> <u>Major</u> <u>38th</u>
27 th	"	20	14	4	<u>Wherry</u> <u>Major</u> <u>38th</u>
1-17	Tram	20	14	4	<u>Wherry</u> <u>Major</u> <u>38th</u>
1-17	Tram	20	14	4	Wherry Major 38th
		6	2	4	

blain approved *W. Dodson*

DEPARTMENT OF DEFENCE.

3380

APPLICATION FOR WAR LEAVE PAYMENT IN RESPECT OF DECEASED SOLDIER.

STATUTORY DECLARATION. 11705

(Carefully peruse this form before making the Statutory Declaration.)

PARTICULARS OF SOLDIER IN RESPECT OF WHOM APPLICATION IS MADE.

Full Name *Arthur Heinrich Shinn*
Regtl. No. *2173* Rank at Date of Death *Corporal* Unit at Date of Death *38th Battalion*
Place of Enlistment—Town *Adelaide* State *South Australia* Date of Death *24 August 1918*
Date of Embarkation in Australia *28 August 1916* State whether soldier was married or single *Married*

INFORMATION IN SUPPORT OF APPLICATION.

* Questions 2 and 3 need not be answered by a person who is a parent, wife, or child of the deceased soldier.

- (1) What relation were you to the deceased soldier? *Wife*
- (2) Were you wholly or partly dependant on the deceased soldier for support? *Wholly*
- (3) If you were partly dependant, to what extent did the late soldier contribute to your support? *See last answer*
- (4) Did you receive payment of Separation Allowance in respect of the deceased soldier? *Yes*
- (5) Are you drawing a War Pension in respect of the deceased soldier? *Yes*
- (6) If so state—(a) The amount of fortnightly pension payment. *£2.12.6*
(b) Name of Post Office at which payment is made. *Leeton*
- (7) Did you receive the balance of pay due to the deceased soldier's estate? *Yes*

Wife: Mabel Munnice Shinn

I, *Mabel Munnice Shinn* of *Leeton* in the State of *New South Wales*

do solemnly and sincerely declare that the above-mentioned information and replies furnished by me are true and correct. And I make this solemn declaration by virtue of the Statutory Declarations Act 1911, conscientiously believing the statements contained therein to be true in every particular.

Signed before me at *Leeton* this *9th* day of *March* 19*20*
(Signature) *B. Clark* (Date) *9th March 1920*
(Position) *Justice of the Peace*

† Up to 30th November, 1919, this Declaration may be signed by the Applicant before a J.P., State School Head Master, Clergyman, a legally qualified Medical Practitioner, a member of the Police Force, or a Commissioned Officer of the Military Forces. After 30th November, 1919, this Declaration must be signed before a Justice of the Peace, Police Magistrate, Commissioner for Declarations, or Commissioner for Affidavits.

Any person who makes an untrue statement in this Declaration shall be guilty of an offence under the War Precautions Act, and shall be liable on summary conviction to a Fine not exceeding £100 or Imprisonment for a term not exceeding twelve months, or both, and may in addition be ordered to repay any money received from the Department of Defence.

FOR OFFICE USE ONLY.

Date of embarkation *28.8.16*
Date of disembarkation *24.8.18*
Date of re-embarkation
Date of disembarkation
Period of Service abroad

Years	Months	Days
1	11	28

Registered by *W. Dodson*
PAY— *10/-* days at £ *8/-* p. d.
SUSTENANCE— *20* days at 3/- p. d.
Total amount due £

£	s.	d.
13	10	0

Computed by *W. Dodson 14069* Cheque No. *1910*
Checked by *W. Dodson*

Copy/EM

THIS IS THE LAST WILL AND TESTAMENT of me Henrich Arthur Ihms
of Stockwell in the State of South Australia made the twentyfifth
day of August 1916

I revoke all other wills made by me I appoint my wife Mabel
Murrie West to be my executrix and direct that my funeral and
testamentary expenses and all my debts shall be paid as soon
as conveniently may be after my decease

I GIVE UNTO my wife
Mabel Murrie West all my personal belongings
& any money I may have in the bank at the time of my
decease

IN WITNESS whereof I the said Henrich Arthur Ihms have to this
my last will and testament set my hand the twentyfifth day of
August in the year of our Lord one thousand nine hundred and
sixteen

(sgd) Heinrich Arthur Ihms

Signed by the said Henrich Arthur Ihms the testator on the
day and year aforesaid in the presence of us present at the
same time who at his request in his presence and in the presence
of each other have subscribed our names as witnesses

(sgd) Bertha M. Burt

(sgd) Hugh Morris
Chaplain Captain

Certified to be true copy of the will of
2173 T /Cpl IHMS H. A. 38th late 3/43 Bn

2173 T /Cpl Ihms H.A.
38th Late 3/43

a Kaye, Mgt
JUL 25 1919

NOTED ON CARD.

COPY. EM.

1916. Married in the District of ADELAIDE. in the State of South Australia.

No. When Married.	Name & Surnames to be written in full.	Age.	Place & Country of Birth.	Condition.	Trade or Calling.	Residence at time of Marriage.	Names & Surnames of Fathers of both Parties.	Place in which Celebrated.
25th August.	Henrich Arthur, ^{Arthur} IHMS.	23	Stockwell, Sth. Australia.	Bachelor.	Baker.	Mitcham Military Camp.	Franz Julius IHMS.	Balham St., Kingswood.
	Mabel, Murrle, WEST.	23	Bishops Waltham, Hampshire, England.	Spinster.	Domestic Servant.	Avston, Balham Rd. Kingswood. ADELAIDE.	Alfred, Charles, WEST.	- - -
<p>This Marriage) Heinrich Arthur, IHMS. was celebrated) between us.) Mabel, Murrle, WEST.</p>								
<p>Name. Trade or Calling. Residence.</p>								
<p>Berthe M. BURT. ----- "Aylestone" KINGSWOOD. Phillis WEST. Domestic Servant. Arthur St., UNLEY.</p>								

The above-named Henrich Arthur IHMS and Mabel Murrle WEST were duly Married by or before me, at the time and place above named, and in the presence of the witnesses whose signatures are above written.

Witness my hand this twentyfifth day of August 1916.

(Sgd) Hugh MORRIS.
Officiating Minister.

2173
2173
Claim no 64891

No. 2173. Cpl. IHMS. Deceased.
AUSTRALIAN MILITARY FORCES.

TO BE RETURNED TO THE DECEASED
4TH MILITARY DISTRICT.
SOLDIERS SUB-SECTION.
EXPEDITIONARY FORCE PAY OFFICE,
KESWICK, S.A.

STATUTORY DECLARATION.

I, Mabel Murrice Shmes
[Here insert FULL surname and Christian name(s).]
of Shepparton Post Office Victoria
[Furnish FULL postal address.]

in the State of South Australia, do hereby solemnly and sincerely declare:—

(a) THAT I am the wife of Cpl A H Shmes
12 2173 now deceased was
killed August 24-1918

(b) THAT There is no children

(c) THAT _____

(d) THAT _____

And I make this solemn declaration by virtue of "The Statutory Declarations Act, 1911," conscientiously believing the statements contained herein to be true in every particular.

Mabel Murrice Shmes
(Signature of person making Declaration.)

Declared at Shepparton in the State of Victoria SA
this 19th day of January in the year
of our Lord one thousand nine hundred and twenty one, before me—

Fredrick W Fair
(Justice of the Peace or other person authorised to take Declarations.)

Any person who makes an untrue statement in this Declaration shall be guilty of an offence under "The War Precautions Act," and shall be liable on summary conviction to a fine not exceeding £100 (One Hundred Pounds) or imprisonment for a term not exceeding six months, or both; and may, in addition, be ordered to repay any money received from the Department of Defence.

N.B.—On any child, on behalf of whom separation allowance is being paid, attaining the age limit for such allowance of sixteen (16) years, notification should be sent to this office in order that same be recorded and payment decreased accordingly.

To Kinross Officers

40 Post Office
Shepparton
Victoria
Sep 3rd 1920

Dear Sir

I am forwarding my
Gratuity form & also marriage Certificate
so as to prove I am the wife
of Capt H. A. Shinn as I find it very
difficult to get form of Identification
signed as I am not known in
Shepparton, not being here long,
trusting you will be able to
fix it up for me as I am
badly in need of the money
not being able to work on account
of bad health.

Kindly Oblige

P.S. Kindly return
marriage lines safely

Yours Truly
Mabel Murray Shinn

Book to sign

NOTE.—It is essential for the Soldier to show full Particulars of the Battalion, Regiment, Battery, Company, of Squadron to which he belongs, and after completing the form to hand same to his Commanding Officer for transmission to the Paymaster.

4th Military District Pay Office,

19 AUG 1916 191

74

Soldier's No. 2173 Rank PRIVATE

Battalion 3rd 43rd Inf Batt Company _____

Soldier's Full Name Mess Henry Arthur

to the DISTRICT PAYMASTER,

MEMO.

I beg to request that on and after the Embarkation

26 AUG 1916 191 , and during my service in A.S.F.

you will be good enough to pay on my behalf the sum of four Shillings per day

to Wife Mabel Mary Shms of L. E. Best, Balham

whose signature appears in the margin.

Kingswood Street
Mulden

Signature of Soldier H. A. Shms

Previous Private 1916

DISTRICT PAY OFFICE
4th MILITARY DISTRICT
CARDS DISPATCHED
Checked
CAMP PAY OFFICE
CHECKED
SOUTH AUSTRALIA

Stockwell
S. Aus

H. A. Shms
Signature of Soldier.

2173
Soldier's Number.

Battalion 3rd 43rd Inf Batt Company _____

* When making this allotment in favour of a married lady, fill in her Christian names - not her husband's. In any case, fill in full Christian names of Allottee.

Should the Soldier after embarkation receive information that his allotment is not being paid, he should immediately sign a fresh form and hand same to his Commanding Officer for transmission to the Staff Paymaster abroad, who will see the Official requirements are complied with, and forward form for payment.

wo 57415

Signature of Agent.

Usual Signature, and must always be written the same way.

Signature of Agent

The Agent must be a person over the age of sixteen years.



COMMONWEALTH MILITARY FORCES.

STATUTORY DECLARATION.

1. Name in full (1) Henry Arthur Shew - Thmo.
 2. Rank and Number (2) Private
 3. Squadron, Battery or Company of (3) 3rd Repts
 4. Regiment of (4) 43rd Battalion

do solemnly and sincerely declare that I am entitled to Separation Allowance referred to in A.I.F. Regulations 112, while serving in the Australian Imperial Forces, as follows :-

For Camp held at Mitcham period from
26th day of August 1916.
 to the day of discharge 1916
 inclusive.

5. Names of Children
 a. For wife living at home Mabel Mary Shew
 b. For each child (5) under the age of 14 dependent on father for support. Go Mr. R. S. Butt of Balhamist Kingswood Stho

~~c. Being sole support of widowed mother.~~

And I make this solemn declaration by virtue of the Statutory Declarations Act 1911, conscientiously believing the statements contained therein to be true in every particular.

Declared at Mitcham the 26th day
 of August 1916

Signature H.A. Shew

Before me M. J. P. J.P.

Signature of O.C. J. S. Watts

D.C. 3/43rd Sub.



Z Group "B"

AUSTRALIAN MILITARY FORCES.

PAY OFFICE NO. _____

Adelaide Place.

Sept 20th 191*5*

From No. *1 HMS*

Arthur Henry

Expeditionary Force.

To the DISTRICT PAYMASTER,

4th Military District.

Signature of Agent.

M.E.M.O. I beg to request that on and after the

Sept 20th 191*5*, and during my service

in the Expeditionary Force you will be good enough to pay on my behalf the sum of _____ per day

to _____

of _____

whose signature appears in the margin.

*JWR Yonge
OC Z Group*

A. L. Jones

Regimental No. _____

Regimental No. _____ Rank _____

Signature of Principal *A. L. Jones*

The Agent will please also sign below for

Transport No. *A 68.* (35)

UNIT *3rd 43rd Inf Batt*

No. *2173* RANK **PRIVATE**

Name in full *Jones Henry Arthur*
(Surname to be underlined)

Amount of Allotment *Four* shillings _____ pence

Amount to be drawn at the front *One* shillings _____ pence

Name of Allottee *Mrs. Elizabeth*

Date *20th Nov 1916*

Signature of Soldier.