

45/03

AW

4463 Private
BISCHOFF, Walter Samuel

11th Battalion

30/4/18

Died of Wounds

Mr. C. Bischoff (Father)

Particulars Required for the Roll of Honour of Australia in the Memorial War Museum.

1. Name (in full) of Fallen Soldier *Alfred Walter Samuel Buschhoff*
2. Unit and Number (if known) *Private N° 4463*
3. With what Town or District in Australia was he chiefly connected (under which his name ought to come on the Memorial)—
 Town (if any) _____ District *Spearwood* State *West Aust*
4. What was his Birthplace *West Australia*
5. Date of Death *April 30-1918*
6. Place where Killed or Wounded *Wounded in France*

Particulars Required for the Nation's Histories.

1. What was his Calling *Private*
2. Age at time of Death *20 years 7 months*
3. What was his School *St. John's Boys School W.A.*
4. What was his other Training *Senior Naval Cadet*
5. If born in Britain or Abroad, at what age did he come to Australia _____
6. Had he ever served in any Military or Naval Force before Enlisting in the A.I.F. (Please state particulars) *Served 4 year Senior Naval Cadets*
7. Any other biographical details likely to be of interest to the Historian of the A.I.F., or of his Regiment—

8. Was he connected with any other Member of the A.I.F. who died or who distinguished himself. (Please state Relationship)— *Brother*

9. Name and Address of the Parent or other person giving this information—

Name *Christina Buschhoff*
 Relationship to Soldier *Mother*
 Address *Edeline St Spearwood*

10. Names and Addresses of any other persons to whom reference could be made by the Historian for further information—

Name _____

Address _____

NOTE.—This Folder is Addressed to the Secretary, Department of Defence, Melbourne. Please fold in four, and stick down gummed flap so that the addressed portion is outside. The information is required urgently.