1512

No. 1605. Private. O'CONNOR. Michael.

1st Battalion.
6.6.15.

Killed in action.
(Sister) E. Drummond.

1	Particulars Required for the Roll of Honour of Australia in the Memorial 1. Name (in full) of Fallen Soldier Michael Corner 2. Unit and Number (if known) No 1603 184 Battalia 3. With what Town - Division of Australia in the Memorial	The state of the s	
	Name (in full) of Fallen Soldier Michael Of Mastralia in the Memorial	War Museum	
	2. Unit and Number (if known) 10 /603 121- Gattalion 3. With what Town or District in Australia was be chiefly connected (under which his name and the same and		
ā.	3. With what Town or District in Australia was he chiefly connected (under which his name ought to come Town (if any) 10 of Mellowel District	on the Memorial	
	Town (if any) 10 orth Mellound District State 11	toria	
2	o. Date of Death		
# -3	o. Flace where Killed or Wounded A CA CA		
מפירסיה	Particulars Required for the Notice TV		
(0)	What was It a m	_	
- 6	2. Age at time of Death Oliver 1		
	3. What was his School Tobacol + 19.	*	
	2. Age at time of Death Officially Size 3. What was his School Christope Bushess College House Mollone 4. What was his other Training 5. If born in Britain or Abroad, at what age did he come to Australia	A A	
	5. If born in Britain or Abase 1	uel	
	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 ATE.	4	
•	6. Had he ever served in any Military or Naval Force before Enlisting in the A.I.F. (Please state particula 7. Any other biographical details like to the state of the state o		
	7. Any other biographical details likely to be of interest to the Historian of the A.I.F., or of his Regiment—	's)	
	other diagraphical details likely to be of interest to the Historian of the A.I.F., or of his Regiment	***************************************	
	1 Together Land		
1.			
8	8. Was he come to		
·,· · · ·	8. Was he connected with any other Member of the A.I.F. who died or who distinguished himself	, , , , , , , , , , , , , , , , , , ,	
	died of who distinguished himself	· (Please state	
9	9 Name and 433		
	9. Name and Address of the Parent or other person giving this information—		
	Jummon a		
-	Treationship to Soldion / 1/4 - / -		
10	Address 100 January St Mentle		
	and Audresses of any other persons to whom reference could		
	Name Name Addresses of any other persons to whom reference could be made by the Historian for further inf Address NOTE.—This Folder is Address	ormation-	
	Address		
D.	To Autressed to the Country of		
. (DOM: October 10.11.—C.167.6. So that the addressed portion is outside. The information is required urgently.	gummed flap	
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