

No. 179 Private
ROBINSON Christopher Keith

10th Battalion

27.4.15

Died of wounds

(Foster-mother) Mrs. S.A. Robinson

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

1. Name (in full) of Fallen Soldier *Christopher Faith Robinson*
2. Unit and Number (if known) *No 149 10th Battalion*
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) *Adelaide* District _____ State *South Australia*
4. What was his Birthplace *Adelaide*
5. Date of Death *10, 8, 18 Sept 1915*
6. Place where Killed or Wounded *Gallipoli*

Particulars Required for the Nation's Histories.

1. What was his Calling *Wood Turner*
2. Age at time of Death *19 yrs 3 months*
3. What was his School *Hindley Street*
4. What was his other Training _____
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)
No
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)—
9. Name and Address of the Parent or other person giving this information—
 Name *P. A. Robinson*
 Relationship to Soldier *Sister Mother*
 Address *Bolton St North Adelaide S.A.*
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.