

Historical records for the family of Eliza (Elizabeth) O'Flynn (1868-?) and Michael Brislane (1865-1896)

Marriage record for Elizabeth O'Flynn and Michael Brislane, 1891

4/16/91

1891

Marriages in the District of Gisborne

No. 528-529

No.	When and Where Married.	Names and Surnames of the Parties.	Age.	Rank or Profession.	Condition of Parties: 1. Bachelor or Spinster (or as may be); 2. Widower or Widow; 3. Divorced (Name of former Wife or Husband)	Birthplace.	Residence: 1. Present; 2. Usual.	Parents.	
								Father's Name and Surname (1) and his Rank or Profession (2).	Mother's Name (1) and Maiden Surname (2).
26	1891. 20th May In St. John's Church Gisborne	Michael Brislane Brislane	full	Miner	1. Single 2. Single	1. Ireland 2. Ireland	1. Dunmore 2. Dunmore	1. William 2. Susan	1. Conroy 2. Longley
		Elizabeth O'Flynn O'Flynn	full		1. Single 2. Single	1. Ireland 2. Ireland	1. Dunmore 2. Dunmore	1. George 2. Susan	1. Elizabeth 2. Johnson

MARRIED, after the delivery to me of the Certificate required by "The Marriage Act, 1890," by J. P. O'Connell Officiating Minister (or Registrar).

This Marriage was solemnised between us,
Michael Brislane
Elizabeth O'Flynn

In the presence of us,
Walter Wilson, Justice Minister
James M. Williams

I certify that the above is a true copy of the entry in the Register-book of Marriages kept by me,
J. P. O'Connell
 Officiating Minister (or Registrar).

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Marriage record for Elizabeth Brislane (O'Flynn) and Charles Wilson, 1909

NEW ZEALAND.

[B.G.—12]

COPY OF REGISTER OF MARRIAGE.

Marriages in the District of WELLINGTON.

09/697

No.	When and Where Married. (Date, Locality, and Description of Building)	Names and Surnames of the Parties.	Age.	Rank or Profession.	Condition of Parties: 1. Bachelor or Spinster (or as may be); 2. Widower or Widow; 3. Divorced (Name of former Wife or Husband)	Birthplace.	Residence: 1. Present; 2. Usual.	Parents.	
								Father's Name and Surname (1) and his Rank or Profession (2).	Mother's Name (1) and Maiden Surname (2).
71	1909. Jan 20th St. Joseph's Church Wellington	Charles Wilson	32	Laborer	1. Single 2. Single	1. Wellington 2. Wellington	1. Wellington 2. Wellington	1. Charles 2. Florence	1. Elizabeth 2. Wilson
		Elizabeth Mary Brislane	41		1. Single 2. Single	1. Ireland 2. Ireland	1. Wellington 2. Wellington	1. George 2. Susan	1. Elizabeth 2. Johnson

MARRIED, after the delivery to me of the Certificate required by "The Marriage Act, 1908," by P. Linnerty Officiating Minister (or Registrar).

This Marriage was solemnised between us,
Charles Wilson
E. Brislane

In the presence of us,
F. O'Flynn, Schoolmaster, Remuera, Cray
Agnes Johnson, Donkeyman, Cray

I certify that the above is a true copy of the entry in the Register-book of Marriages kept by me,
P. Linnerty
 Officiating Minister (or Registrar).

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Duplicate MAIN BODY. [Form No. 1.]
NEW ZEALAND EXPEDITIONARY FORCE.

PERSONAL RECORD of (Surname) Registration No. 7/533
(Christian name) Michael Edward

REGIMENT: C M R
GROUP: 12 NUMBER: _____

1st NZEF	Army No.
	4/533
2nd NZEF	
RF - TF	

MEDAL ACTION COMPLETE
REMARKS ACTION COMPLETED

PREVIOUS PAPERS: _____
SUBSEQUENT PAPERS: _____

ELIGIBLE: _____

DECEASED

SERVICE CARD PREPARED

NOTE.
The E.F. 3a History-sheet, containing particulars of casualties, promotions, reversions, &c., is not attached to this file.
History-sheet is filed in Base Records Office, and particulars of contents will be supplied on application, if required.

*Placed of Wounds
20th Aug 1915*

Army Form B. 103.

Casualty Form - Active Service.

Regiment or Corps *Canby Mtd Rifle Co*
Regimental No. *7/533* Rank *Trooper* Name *Brisbane Michael Edward*
Enlisted (a) *25-8-14* Terms of Service (a) *Period of 2* Service reckons from (a) *25-8-14*
Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } roll of N.C.Os }
Extended } Re-engaged } Qualification (b) }

Date	From whom received	Record of promotions, re-assignments, transfers, casualties, etc., during active service, as reported on Army Form B. 102, 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.
<i>8-8-15</i>	<i>CMR</i>	<i>wounded</i>	<i>Saunders Hill</i>	<i>20th Aug 15</i>	<i>1913</i>
<i>18-8-15</i>	<i>Malta</i>	<i>dangerously ill</i>	<i>Malta</i>	<i>15-8-15</i>	<i>100 cable 118077 dated for Col Malta A 3911</i>
	<i>Malta</i>	<i>died of wounds & 2 W. spine</i>	<i>Malta</i>	<i>20-8-15</i>	<i>100 cable 118077 dated 25/8/15 41-105</i>

N Fitz Herbert
CAPT.
P. C. Records Section New Zealand
for A. A. 13.
P. H. Q. 3rd. Division M. E. F.

FILE
20th AUG 1915
G.M.

(a) In the case of a man who has re-engaged for, or returned into Section D, Army Reserve particulars of such re-engagement or return will be entered in the

Army Form B. 2090A.

FIELD SERVICE.

Report of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.

REGIMENT OR CORPS } *Canterbury Mounted Rifle Squadron,* } *10th*
Troop, Battery or Company }

Regtl. No. *7/533* Rank *Trooper*
Name *BRISBANE Michael Edward*

Date *August 20th 1915*

Died Place *Malta*
Cause of Death* *wounds received in action*

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation, or exposure while on military duty, or from injury while on military duty.

State whether he leaves a will or not
(a) in Pay Book (Army Book 64) _____
(b) in Small Book (if at Base) _____
(c) as a separate document _____

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this report is to be sent to the Paymaster at the Base (see Field Service Regulations, Part II.), together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge of Section Adjutant-General's Office at the Base. *N Fitz Herbert Capt*

Station and Date *Alexandria September 1st 1915.*

MEDICAL HISTORY

Surname: *Cristau* Christian Name: *Michael Edward*

Examined: On *25th* day of *August*, 191*4*
 At *Nelson*
 Birthplace: *Grey mouth*
 Country: *New Zealand*

Declared age: *20 years*
 Trade or occupation: *farm labourer*

Height: *5* ft. *4* in.
 Weight: *104* lb.
 Chest-measurement: Minimum, *34* in.
 Maximum expansion, *36 1/2* in.

Physical development: *Good*

Small-pox marks: *None*

Vaccination marks: Arm: _____
 (Number: _____)

When vaccinated: _____

Marks indicating congenital peculiarities or previous disease: *None*

Approved by: *Swainy A. G. J. G. G.*
 Medical Officer.

Examined for re-engagement: _____ day of _____, 191*4*

* Considered: _____

* If unfit, state disability: _____

Re-vaccinated on _____ day of _____, 191*4*

Arm: _____ Number: _____

Result: _____

Medical Officer, _____

Enlisted on *25th* day of *August*, 191*4*, at *Nelson*

Corps.	Regimental No.	Date.
<i>Cent. Mtd Rifle</i>	<i>4533</i>	
joined on enlistment		
transferred to		

PROPOSED FOR DISCHARGE BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Services on the man becoming non-effective, the date and cause being stated at the foot of next page.

Description of *Michael Edward Cristau* on Enlistment

Apparent age: *20* years *1* months.
 (To be determined according to the instructions given in the Regulations for Army Medical Service.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease: _____

Height: *5* feet *4* inches.
 Weight: *104* lb.
 Chest-measurement: Minimum, *34* inches.
 Maximum, *36 1/2* inches.

Complexion: *fair*
 Colour of eyes: *blue*
 Colour of hair: *brun*
 Religious profession: *Ch. of England*

Medical Examination.

Sight: Right eye, *normal* Is he free from hernia? *Yes*
 Left eye, _____ Is he free from varicocele? *No*

Hearing: Right ear, _____ Is he free from varicose veins? *No*
 Left ear, _____ Is he free from haemorrhoids? *No*

Colour-vision: _____ Is he free from inveterate or contagious skin-disease? *No*

Are his limbs well formed? *Yes* Is there a distinct mark of vaccination? *Yes*

Are the movements of all his joints full and perfect? *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*

Is his chest well formed? *Yes*

Is his heart normal? *Yes*

Are his lungs normal? *Yes* Are there any slight defects, but not sufficient to cause rejection? *No*

What is the condition of the teeth? *Good*

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.

24 Aug, 191*4* *Swainy A. G. J. G. G.* Medical Officer.

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7/533 [Form No. 2]

NEW ZEALAND EXPEDITIONARY FORCE.

ATTESTATION OF

No. 7/533 Name: Michael Edward Brislane Regiment or Unit:

Questions to be put to the recruit before enlistment.

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| 1. What is your name? ... | 1. <u>Michael Edward Brislane</u> |
| 2. Where were you born? ... | 2. <u>Greymouth</u> |
| 3. Are you a British subject? ... | 3. <u>yes</u> |
| 4. What is the date of your birth? ... | 4. <u>1st Aug. 1894</u> |
| 5. What is your trade or calling? ... | 5. <u>Farm Labourer</u> |
| 6. Are you an indentured apprentice? If so, where, and to whom? | 6. <u>no</u> |
| 7. What was the address at which you last resided? ... | 7. <u>8/o E. Loveridge, Dovedale.</u> |
| 8. Have you passed the Fourth Educational Standard or its equivalent? | 8. <u>no</u> |
| 9. What is the name and address of your present or last employer? | 9. <u>E. Loveridge Dovedale</u> |
| 10. Are you married? ... | 10. <u>no</u> |
| 11. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? | 11. <u>no</u> |
| 12. Do you now belong to any military or naval force? If so, to what corps? | 12. <u>12th. Infantry</u> |
| 13. Have you ever served in any military or naval force? If so, state which and cause of discharge. | 13. <u>none</u> |
| 14. Have you truly stated the whole (if any) of your previous service? | 14. <u>yes</u> |
| 15. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? | 15. <u>yes</u> |
| 16. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? | 16. <u>no</u> |
| 17. Are you willing to be vaccinated or revaccinated? ... | 17. <u>yes</u> |
| 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. <u>yes</u> |

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, Michael Edward Brislane, 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: M. E. Brislane
 Signature of Witness: A. W. Shelton

Oath to be taken by recruit on attestation.

I, Michael Edward Brislane, 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 Gelson, N.Z., on this 25th, day of Aug., 1914

Signature of Attesting Officer: Lieut. R. B. Giesmahon

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



Auckland War Memorial Museum Cenotaph Database

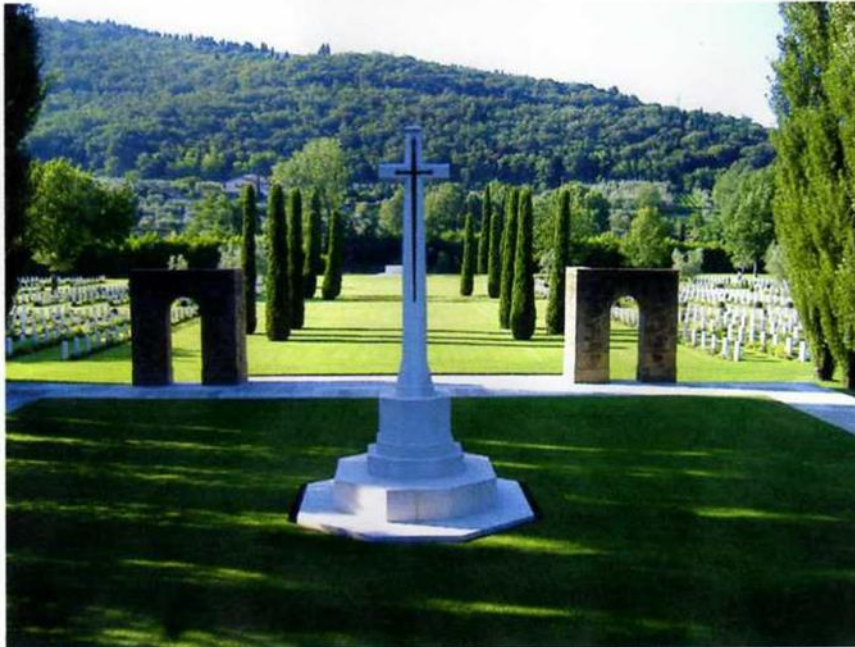
Name	Rex Michael Brislane
War	WWII 1939 - 1945
Serial Number	76594
Last Rank Held	Corporal
First Known Rank	Private
Occupation Before Enlistment	Farmer
Next of Kin	Mrs M E Brislane (mother), RDM Wakefield, Nelson, New Zealand
Marital Status	Single
Enlistment Address	RDM, Wakefield, Nelson, New Zealand
Body on Embarkation	Second New Zealand Expeditionary Force (2NZEF)
Embarkation Unit	2 Divisional Signals
Campaigns	Italy
Last Unit Served	23 Infantry Battalion
Place of Death	Italy
Date of Death	24 July 1944
Age at Death	27
Year of Death	1944
Cause of Death	Died of Wounds
Cemetery	Florence War Cemetery, Italy
Grave Reference	VIII. C. 4.
Biographical Note	Son of William Brislane and of Minnie Brislane (nee Davies) of Wakefield, Nelson, New Zealand

**In Memory of
Corporal REX MICHAEL BRISLANE
Mentioned in Dispatches**

**76594, 23rd Bn., New Zealand Infantry
who died age 27
on 24 July 1944**

**Son of William Brislane and Millie Brislane (nee Davies) of
Wakefield, New Zealand.**

**Remembered with honour
FLORENCE WAR CEMETERY - ITALY**



**Commemorated in perpetuity by
the Commonwealth War Graves Commission**