

IMMIGRATION ACT 1901-1912.

REGULATION 15.

DUTIES OF MASTERS AND MEDICAL OFFICERS OF VESSELS.

15. (1) The master of a vessel, other than a public vessel of a Government, arriving at any port in the Commonwealth, from parts beyond the Commonwealth, with any passengers on board for that port, shall, before making entry at the Customs, deliver to an officer a list of all the passengers for the port, specifying to the best of his knowledge, the name, nationality, race, place of shipment, and calling or occupation of each of those passengers.  
 (2) The master and the medical officer (if any) of the vessel shall make and sign a statement in writing on the list stating, to the best of their knowledge and belief, as to each of the passengers, whether he or she is insane or mentally defective, or is suffering from epilepsy, pulmonary tuberculosis, trachoma, or any loathsome or dangerous communicable disease, either general or local, or is suffering from any other disease or mental or physical defect likely to cause him or her to become a charge upon any public or charitable institution.  
 (3) The master or medical officer of a vessel who refuses or neglects to make and sign the statement required by this section, or who makes or signs any statement under this section which is incorrect in any material particular, shall be guilty of an offence against these Regulations.

REPORT OF PASSENGERS for the Port of Aelaide SA  
 from Parts beyond the Commonwealth.

Ship H.M.S. S. Bauer Master Fra. Hanson  
 Agents P. O. Co. Arrived 3 August day of Aug 1915

from Suez, Egypt 413

Name.	Nationality.	Race.	Adults. (18 Years and upward.)		Children. (Under 18 Years.)		Place of Shipment.	Calling or Occupation.	Remarks.
			M.	F.	M.	F.			
Sgt Elliott	R.I.		M					On active service	
Pte Myndock	n.v.		M					"	
" Halliday	wa		M					"	
" Collier	L.		M					"	Pulmonary Tuberculosis
" Goldsmith	L.M.		M					"	
Sgt Aldersey	ah		M					"	
Pte Marshall	as		M					"	
" Carr	kw		M					"	
" Simpson	ag		M					"	
" Taylor	J.R.		M					"	
Capt Huxford	hw		M					"	
Pte Jolley	s		M					"	
Cpl Muir	fp		M					"	
Capt Sexton	es		M					"	
Cpl Kolb	o		M					"	
" Evans	ec		M					"	
L.Cpl O'Brien	wh		M					"	
Pte Ford	ja		M					"	
" Langhead	a		M					"	
" Rayney	ra		M					"	
" Shaw	hw		M					"	
" Banfield	bc		M					"	
" Sharp	aj		M					"	Mental Trouble.
" Phelan	ip		M					"	
" Gillett	iw		M					"	
" Brown	f		M					"	
" King	jc		M					"	
" Hunter	R		M					"	
" Lambert			M					"	
" Ward	o		M					"	
" Sheppard	wa		M					"	
" Ryan	c		M					"	
" Toovey	ch		M					"	
" Robertson	a		M					"	
" Zimke	k		M					"	
" Elliston	wa		M					"	
" Frusher	hl		M					"	
" Kempster	ch		M					"	
" Krayer			M					"	
" Cave	RFS		M					"	
" Hefron	E		M					"	
" Sugg	F		M					"	
" Wilson	jh		M					"	
" Hopkins	gf		M					"	
" Bicker	f		M					"	
Sgt Mitchell	a		M					"	
Pte Paterson	wh		M					"	

I certify that this report contains the names of all Passengers on board the Ship for the Port of \_\_\_\_\_ and that to the best of my knowledge and belief none of the Passengers in the above list (except as therein stated) is insane or mentally defective, or is suffering from epilepsy, pulmonary tuberculosis, trachoma, or any loathsome or dangerous communicable disease, either general or local, or is suffering from any other disease or mental or physical defect likely to cause him or her to become a charge upon any public or charitable institution.

I certify that to the best of my knowledge and belief none of the Passengers in the above list (except as therein stated) is insane or mentally defective, or is suffering from epilepsy, pulmonary tuberculosis, trachoma, or any loathsome or dangerous communicable disease, either general or local, or is suffering from any other disease or mental or physical defect likely to cause him or her to become a charge upon any public or charitable institution.

Clas. Butler Master.  
W. A. ... Medical Officer.

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## REPORT OF PASSENGERS for the Port of \_\_\_\_\_ from Parts beyond the Commonwealth.

Ship \_\_\_\_\_ Master \_\_\_\_\_ from \_\_\_\_\_  
Agents \_\_\_\_\_ Arrived \_\_\_\_\_ day of \_\_\_\_\_ 191

Name.	Nationality.	Race.	Adults. (18 Years and upward.)		Children. (Under 18 Years.)		Place of Shipment.	Calling or Occupation.	Remarks.
			M.	F.	M.	F.			
Pte Scanton	TJ		M					On active service	
Mjr Baker	AK		M					"	
Pte McLaughlin	J		M					"	
" Gardner	H		M					"	Pulmonary Tuberculosis
Cpl Hood	S		M					"	
" Blackman	G.		M					"	
<del>53</del>									

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*Captn Baker*  
Master

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Medical Officer.