

SAORSTAT ÉIREANN.

"C."

F56/1

AIREACTH CHOSANTA (MINISTRY OF DEFENCE).

OIFIG AIRM AIRGID (ARMY FINANCE OFFICE).

Register Number	From whom, number, and date PAYEE	Officer or Soldier IN RESPECT OF
7/56	Mr John Conway Knocknagraga Cennistymen lea blane	Name <u>Michael Conway</u> Rank <u>Pte</u> Unit <u>P.V.S.</u> Army No. _____ Date of Death <u>21-7-20</u> Address <u>Sen</u> Discharge _____
F.P. RB. 7		

Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date
2A.	29.10.37										

Military Service
 Pensions Collection

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Military Archives

File referred to M.S.R.B.

29.10.37.

R.G.



Military Service
Pensions Collection

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Ref. No. 1/D/17.

A.P. 21.

ARMY PENSIONS ACT, 1923.

Military Archives
CLAIM FOR DEPENDANTS' ALLOWANCE OR GRATUITY.

Applicant's Name..... Mr. John Conway.....

Address..... Knocknagraga, Ennistymon,

..... Co. Clare.....

Name of Deceased..... MICHAEL CONWAY.....

Rank of Deceased..... Private.....

*Force to which Deceased belonged..... "A" Company, 14th Batt, 4th Brigade.

..... Irish Volunteers.....

Date of Death of Deceased..... 21-7-'20.....

Relationship of Applicant to Deceased..... Father.....

PARTICULARS OF DECEASED'S CHILDREN IN RESPECT OF WHOM ALLOWANCE IS CLAIMED.

Name.....	Date of Birth.....
do.	do.
do.	do.
do.	do.
do.	do.
do.	do.

Particulars of Payments made from Army Funds to Applicant since death of Deceased.

Military Service Pensions Collection
Nil.

* Irish Volunteers, Irish Citizen Army 1916, National Army.

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Report as to dependency of Applicant or of the motherless children upon Deceased at the time of his death.

The Civic Guard Report states that the Applicant works a small farm of 20 acres, mountainous land. He has no other means of support and had no private income prior to the death of Deceased.

Applicant is 69 years of age, permanently invalided and unable to work. He is now being supported by Deceased's elder brother who works the farm.

Deceased was a Baker earning 35/- to 45/- weekly and allowed Applicant 15/- to 20/- weekly according to his earnings. Applicant was partially dependent on Deceased.

Particulars of Claim made in respect of educational expenditure within the past 12 months.

Nil.

Particulars of any Payment received in compensation from person responsible for the act which caused death of Deceased. (Section 13 (a) of The Army Pensions Act, 1923).

Military Service
Pensions Collection

Nil.

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PB7

RECOMMENDATION OF ARMY PENSIONS BOARD.

Army Finance Officer.

I am to request that you will place before the Minister for Defence the recommendation of The Army Pensions Board that in accordance with ~~Section 7,~~ Section 8, (1) 3rd Schedule, para. 8 of the Act, there shall be

granted to Mr. John Conway

a Gratuity of £10 (Ten pounds).

an allowance of per in respect of his son the late Michael Conway.

do. per do.
do. per do.
do. per do.
do. per do.
do. per do.

~~The above to be paid as follows~~

~~28-2-24~~
25-4-24

J.J. Horgan
a.s. Ruidhe.

Minister of Defence.

Submitted.

29-2-24.

Charles Gorman
Army Finance Officer.

Military Service Pensions Collection

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To/

The Secretary,

Ministry of Finance.

Subject to the consent of the Minister of Finance I propose to grant
pension
a allowance in accordance with the foregoing recommendations of the Army
gratuity

Pensions Board.

L. T. Mac Cosgair

Minister for Defence.

To/

Army Finance Officer.

The Minister for Finance consents to the grant by the Minister
for Defence under Section 8 of the Army Pensions Act, 1923, of a gratuity of
£10 to Mr. John Conway, Knocknagra, Ennistymon, Co. Clare.

L. J. Mac Cosgair
6 May, 1924.



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Military Archives

FOLD ALONG THIS LINE.

SAORSTÁT ÉIREANN.

(A STAMP IS NOT REQUIRED.)

THE PAY OFFICER,

MINISTRY OF DEFENCE,

ARMY PENSIONS DEPARTMENT,

34 MOLESWORTH STREET,

DUBLIN.

A.P. A/cs 4.

NOT TO BE PLACED IN AN ENVELOPE.

FOLD ALONG THIS LINE.

Military Service Pensions Collection



1D17/8

Reference No. 4/56

A.P. A/cs. 4.

ARMY PENSIONS DEPARTMENT.

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LIFE CERTIFICATE.

NOTICE.—This Certificate is Government Property. It is no security whatever for debt.

No further payment of ~~Pension or Gratuity and~~ Allowances will be made until the following Declaration has been filled in, and signed, by the person to whom the ~~Pension or Gratuity and~~ Allowances ^{is} ~~are~~ to be paid; until the Certificate at foot of this form has been signed by one of the persons mentioned in the margin; and until the completed form has been received in the Army Pensions Department.

(1). To be filled in by the person claiming Pension, or, if that person is unable to write, by someone on his/her behalf.

Name (in full, Surname first)..... CONWAY, JOHN.

Number of Award Certificate..... 1/D/17.

Rate of ~~Gratuity or Pension and~~ Allowances..... 1/10. per ~~week~~ annum.

Award granted in respect of..... Michael Conway - my son.
(If you are the Pensioner give particulars of wounds, or if you are receiving allowance as a relative of a deceased soldier state deceased's name and relationship).

~~Received~~ whilst serving as..... Volunteers in Citizen Army, 1916, in..... July, 19. 20.
(insert rank) (insert month) (year)

(2). Insert in full occupations of adults, and ages and occupations of children.

Particulars of Adults (other than claimant) included in Pension/Gratuity ~~or~~ and Allowances.....
Nil.

Particulars of Children included in Pension/Gratuity ~~or~~ and Allowances.....
Nil.

(3). To be signed, in the presence of the person who signs the Certificate hereunder, by the person making the Declaration. If he/she is unable to write he/she must affix his/her mark thus "X."

I hereby declare that I am the person named in (1) above, and that I am entitled to the ~~Pension or Gratuity and~~ Allowances specified, I having been notified by the Secretary, Army Pensions Department, that such ~~Pension or Gratuity and~~ Allowances has/have been granted to me. I further declare that those persons mentioned in (2) above are alive on this the..... 15th day of..... May..... 19..... 22.

Signature (in full)..... John Conway

Full Postal Address..... Knocknagloga, County Wick.

This Certificate must be signed by one of the following:—A District Justice or Divisional Magistrate, a Peace Commissioner, an Official of the Civic Guard or D.M.P. not below the Rank of Inspector or Station Sergeant, a Postmaster or Postmistress in actual charge of a Post Office, a Barrister-at-Law, a Solicitor, or a Commissioner for Oaths.

CERTIFICATE.

I hereby certify that I have seen the person who signed the above Declaration, alive on the date stated against my name; that he/~~she~~ was in possession of the Award Certificate bearing the number entered in (1) above; that he/~~she~~ signed the above Declaration in my presence; and that he/~~she~~ appears to be the person to whom the sums mentioned above are payable.

I further certify that I know those persons mentioned in (2) above to be alive on the date stated against my name.

Signature..... Mary R. Kerin Date..... 15th May 24

Rank or Profession..... Postmistress

Full Postal Address..... County Wick
Co. Clare

N.B.—“If any person with a view to obtaining a grant or payment of a pension, allowance, or gratuity under this Act makes, signs, or uses any declaration, application, or other written statement knowing the same to be false, such person shall be guilty of an offence and shall be liable, on conviction under the Summary Jurisdiction Acts, to a fine not exceeding five pounds.”

Extract from Army Pensions Act, 1923, Section 12 (1).