M.P.W.—Wt. 5672—62—Gp. 23—5,000—3/'25. (A.S.)
Wt. 3633—58—Gp. 23—5,000—11/'25.

SAORSTÁT ÉIREANN.

PENSIONS.

AIREACHT CHOSANTA
(MINISTRY OF DEFENCE).

OIFIG AIRM AIRGID
(ARMY FINANCE OFFICE).

Register Number	From whom, number, and date	Officer or Soldier
P.B. 3/P/733		Name REILLY. PATRICK Rank Private Unit 60th Batten Army No 48455 Date of Death Address High Street, Westport, Co. Mayo. Date of Discharge 13/10/1923
P.B.57.		

Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date
P.A.											

(7362).Wt.3568.10,000.11–23.A.T.&Co.,Ltd.

SAORSTÁT ÉIREANN.

"C."

AIREACHT CHOSANTA
(Ministry of Defence).

ROINN NA bPINSEAN AIRM
(Army Pensions Department).

Register Number	From whom, number, and date	Officer or Soldier
3/P/733 P.B. 54.	Patrick Reilly High St. Westport Co Mayo.	Name REILLY PATRICK Rank PTE. Unit 61st Bn. Army No. 48455 Date of Death Address Discharge 13:11:23

Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date
Section	5/3/24	McGreene	7/4/24								
Regy	8/3/24	Regy	30/4/24								
B.F.	24/3/24	P.A.									
Mr Ó S	31/5/24										
Regy.	3/6/24										
B.F.	18/6/24										
Mr Ó S.	18/6/24										
Regy.	18/6/24										
B.F.	1/7/24										
Mr Ó S.	26/6/24										
Regy.	27/6/24										
B.F.	4/7/24										
Mr Greene	4/7										
Regy.	7/7/24										
B.F.	21/7/24										
Mr Cotton	16/7/24										
Dev.	21/7										
Secty.	21/7										
Regy	18/7/24										
Regy	24/7										
Mr. Cleary	28/8										
P. ARC											

MINUTE SHEET.

M.S.B.
(A[illegible]ist).

Reference 3/12/1733

1

A.P.1. sent 27:2:24

2

A.P.1. A.P.1. returned 1:3:24

3

A.P.14 to M. of F. 8/3/24

4

Copy of claim on A.P.1. to A.G. 8/3/24.

A.P.14. A.P.14 from M of F. 24:4:24 5A

6.

Documents from A.G. to D.M.S. 29.3.24. DD. 6.a.

7.

Letter from applicant dated 25/6/24 DD. 7.a.

8

P'honed A.P.M.B. ascertained that Notice has been sent to applicant to appear before the Pensions Board on 1st Inst. - DD. 26/6/24.

9.

Reply to 7. dated 26.6.24 DD. 9.a.

10.

A.G.'s Report. A.P.11 from D.M.S. 16.7.24

11.

Letter from Claimant applying for "Appeal" Board 24/4/25.

12.

Above replied to rejecting appeal by Claimant. 29/4/25.

(1454.)Wt.4244—61.5000.3/23.A.T.&Co.,Ltd.*
(5523.)Wt.2065—38D.10,000.8/23.

3/P/733.

29th April, 5.

Mr. Patrick Reilly,
High Street,
Westport,
CO. MAYO.

A Chara,

In reference to your letter of the 23rd instant, relative to your claim to pension or gratuity I am to inform you that the medical Board before which you were examined on the 1st July last assessed your degree of disablement at less than 20%.

This assessment does not permit of the payment of a weekly pension under the terms of the Army Pensions Act, 1923 and the gratuity of £25 awarded and is in final settlement of your claim.

Mise Le meas,

for (Sa) Sheehan
Army Finance Officer.

JG/MH.

3/P/7334

High Street,
Nenagh
April 23rd 25.

Army Pension Section
Dublin.

Sir.

I beg to apply for a Medical Board as I have got one Board since I was discharged medically unfit out of the National Army through Wounds received in action

Reg. No. 48455

Rank Private

Discharged 15/8/1922.
(medically unfit)

and I have had no further Communications from you.

Thanking you for a Reply

Yours Resp.

Patrick Reilly

A.P. A/cs. 6.

To/ Secretary.

26th August 1924

Re your file number S.P. 433 in the case of Mr Patrick O'Reilly. High St. Westport Mayo, kindly note that, I have extracted, and am retaining Form No. A.P. 19 and have on this date opened an Account under Ref. No. E106, in this Claimant's name. The Claimant was notified to-day of the award made to him. (£25 Gratuity)

Your file is returned herewith.

Paid 21/8/24

for Secretary

EK.

(8891).Wt.4809—15.2.1000.2–24.A.T.&Co.,Ltd.
(979).Wt 1024—35.2000.6/24.

A.P. 11.

Reference No. 4. P. 733

Expiry of current Award. Final.

MEDICAL REPORT ON AN EX-SOLDIER CLAIMING DISABILITY IN RESPECT OF SERVICE.

Name Reilly Patrick Army No. 48455. Rank Private.

Unit and Corps 61st Battalion. Age last birthday 36.

Date of entry into Service Date of discharge from Service 13/11/23.

Former trade or occupation Labourer. Home Address High Street, Westport.

NOTE :—The foregoing particulars are to be filled in before the man presents himself before the Board.

Statement of Case by the Medical Board.

1. State concisely the essential facts of the history of each disability recorded in the man's Medical History, and other relevant official documents, giving (a) date and place of origin of the disability, and other relevant particulars of the history; to these may be added (b) any supplementary details given by the man himself; when such details are from the man's own statements only, this will be clearly indicated.

Wounded on 24/11/22 at Newport, Co. Mayo.

Westport Hospital	14 days.
Claremorris Hospital	14 "
Athlone Hospital	3 weeks.
Curragh Hospital	2 Months
Marlboro' Hall	5 months.

2. Was an operation performed ? If so, when, and what was its nature ?

4. Claremorris	2.)	Cleaning.
Athlone	1)	
Curragh	1.)	Removal of dead bone.

3. If an operation was advised and declined, was the refusal unreasonable ?

No refusal.

Opinion of the Medical Board.

NOTES :—

1. Clear and definite answers are to be filled in by the Board, as in the event of a man suffering from a disability it is essential that the Pensions Board should be in possession of full and accurate information to enable them to decide upon the man's claim to pension.

   Expressions such as "may," "might," "probably," etc., are to be avoided.

2. A report is to be made on any disability claimed. If it is found not to exist, this should be made clear. If it exists but it is not considered to be connected with any form of military service, it should be reported on as fully as if it were connected with service. The words "no disability" should never be used as equivalent to "no disability connected with Service."

4. State precisely the nature of the wound or injury.

See below.

5. (1) Give the diagnosis and particulars of any disability claimed or discovered (1), (2), (3), etc.

(1) G.S.W. left leg.

(2)

(3)

6. The present condition thereof, giving—
   (i.) Symptoms and physical signs.
   (ii.) Effect of disability on function.

1.
(i) Complains of pain about left ankle. ENTRANCE scar about mid ⅓ of back of leg: small punctate, healed non-adherent or tender. EXIT operations scar about 4½" long on antero enternal aspect mid. ⅓ of leg. Healed, somewhat adherent to fascia, apparent tenderness. No apparent fracture. Left calf ½" less then right. Apparent loss of power of dorsiflexion of ankle left. which he states causes pain in front of ankle. Genuine loss of dorsi-flexion is slight. Obviously assumed weakness of all movements of left lower limb, even those of hip. Man is exaggerating his disability. No.shortening.

(ii) Disability slight.

7. Disability or disabilities in respect of which the claim for compensation should be considered (1), (2), (3), as per para 5. (If no disability exists, enter NIL).

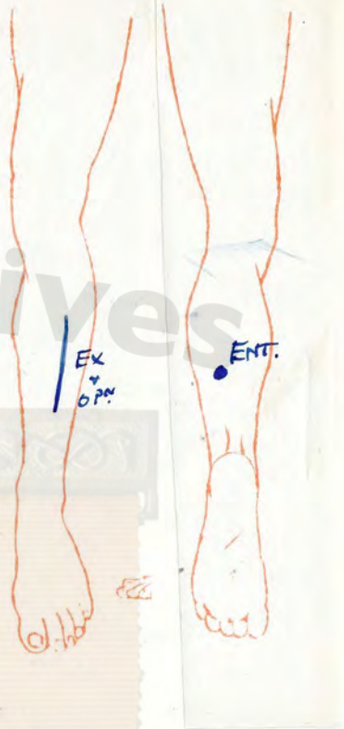
G.S.W. left leg.

8. State whether each disability (as per para. 5) is attributable to

   Wound.
   Injury.

(1) Wound.

9. If there is evidence that any disability was due to serious negligence or misconduct on the part of the man, such evidence will be recorded here.	None.
10. Is the disability in a final stationary condition?	Yes.
If not— How long is the present degree of disablement likely to last ?	N. A.
11. At what period will the Board require a further Examination ?	N. A.
12. Does the man require further treatment ? Is further treatment likely to benefit the condition ?	No.
13. Will the patient require local medical attendance ? If so, how many attendances per week will be necessary ?	NO.
14. In the case of an amputated limb the following particulars will be entered—	
(1) Limb affected.	
(2) Site of amputation.	
(3) Measurement of stump as defined in the first schedule of the Act.	N. A.
(4) How long is stump soundly healed ?	
(5) Is patient fitted with an artificial limb ?	
15. Report of X-Ray examination. Diagram or radiograph to be attached.	None indicated.
16. Report of oculist, dentist, pathologist, or other specialist report indicated.	None indicated.
17. Does the claimant's disability require any Surgical appliance ? If so, state what appliance is needed.	No.



18. In the case of a nerve injury, the following particulars will be required :—

(1) Nerve involved.
(2) Muscles affected.
(3) Area of loss of sensation—
 (i.) to pinprick.
 (ii.) to cotton wool.
(4) Reaction to faradism.
(5) Reaction to galvanism.
(6) Is R.D. present ?

Indicate on charts (and attach) where possible the site and extent of the injury.

N. A.

ASSESSMENT.

19. What is the degree of disablement at which, in the Board's opinion, he should be assessed, independent of any allowances, or future treatment ?

(Degree of disablement should be expressed in the following percentages :—
100, 90, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil.)
Assessment to be stated in words as well as in figures.

< 20% (less than twenty) low.

Signatures :—

M. J. Maguire. Comdt. ......President.

Aust Doran Capt ...... } Members
M. O'Connor Capt ...... }

D.

Date 1. VII. 24

CERTIFICATE OF ASSESSMENT.

----------oOo----------

Reference
P.B. 57

A claim made by Patrick Reilly.

of High St. Westport. Co mayo

for Pension or Gratuity

in respect of Wounds Recd.

was considered by the Army Pensions Board at a Meeting held on 22. 7. 24

The recommendation of the Board is as follows:-

£25 Gratuity

A.P. _____ and A.P.11 forwarded to Army Finance Officer on the _____

M. Liostúil

MM. Runaidhe.

A 6095

OGLAIGH na h-EIREANN.

OFFICE OF ADJUTANT GENERAL.

Records Office,
Portobello Barracks,
DUBLIN

24. 3. 1924.

To:
The Secretary,
Army Pensions Department.

In reply to your 3/P/733 re Patrick Reilly

I HEREBY CERTIFY THAT, according to my records,

(1) Above-named was discharged 13. 11. 1923 - "Med. unfit."

(2) Medical Board proceedings attached.

Medical History Sheet —

(3) Rank Private

(4) That the wound or injury in respect of which he was discharged was received on active service in the course of duty and was not due to any serious negligence or misconduct on his part.

Eoin mac Néill Colonel
~~Lieut. General.~~

A/ ADJUTANT GENERAL.

Correct
Mr

/...

Copy.

DISCHARGE MEDICAL BOARD.

Claremorris COMMAND

Reg. No. 48455 Rank Pte Name Reilly Patrick Age 35

Unit 61st Infantry Battn Disability G.S.W. L. leg.

Duration of Service 8 months Duration of Disability 9 months

Extracts from Documents, Bearing on Disability: attached.

Man's Medical Condition

Complains of - Pain in left instep & ankle.

Examination reveals - G.S.W. left leg.

Has any treatment been advised and declined? No.

If so, what treatment? —

Was Disability due to (1) Duty Yes.
(2) ~~Military Service conditions.~~
(3) ~~Man's own fault~~
(4) ~~Any case for which Irish National Army cannot accept Responsibility.~~

Specify exact cause (where possible and necessary) G.S.W. in action Newport (Co. Mayo) November '22.

Board consider this man is suffering from G.S.W. left leg

which, in their opinion is (attributable to Service in National Army
(~~aggravated by~~
(~~not due to~~

(Board recommend discharge from the Army on Medical grounds)
(~~Board find no Medical grounds for Discharge from the Army.~~)

Chas. J. Hannigan President Medical Board

E. Scanlan Member Medical Board.

Date _____

Ref. No. 3. D.733. A.P.1.A

A6095

MINISTRY OF DEFENCE,
ARMY PENSIONS DEPARTMENT,
34, Molesworth Street,
DUBLIN.

7. March 1924.

ADJUTANT GENERAL.

An application for a Wound Pension has been received in respect of which details are given on the attached form.

In order to enable the Minister of Defence to decide whether the claim is sustainable under the Army Pensions Act 1923. will you kindly certify:-

(1) Date on which the applicant was discharged as medically unfit from the Forces.

(2) Rank in the Forces.

(3) That the wound ~~or injury~~ in respect of which he was discharged was received on active service in the course of duty and was not due to any serious negligence or misconduct on his part.

R. Cleary

~~for Minister of Defence.~~

9a.

3/E/733.

26th June, 4.

Mr. Patrick Reilly,
High Street,
Westport,
Co. Mayo.

A Chara,

With reference to your letter of the 24th instant, relative to your claim to Pension or Gratuity, I am to inform you that when the proceedings of the Medical Board, before which you have been requested to appear on the 1st July, have been received, your case will be finally considered, and you will be notified of the result at the earliest possible date.

Mise, le meas,

_____

Runaidhe.

DOS/EK.

High Street
Westport
Co Mayo
24 June 1924

3/P/733

MINISTRY OF DEFENCE
25 JUN 1924
HOLESWORTH
DUBLIN
ARMY PENSIONS BOARD

The Registrar of Pensions
Dublin

Sir With reference to your letter of 1st March last concerning my application of 20th February last for an army Pension you say that my application will have attention

Since then I have not had any letter to say whether or not my case has been Considered and if so with

what result

Will you kindly direct that this matter receive early attention as owing to the injury I received when defending Newport (24 Nov 1922) in this County I am unable to work.

I am Sir
Your obt Servant
Patrick Reilly

(8071).Wt.4087—10.5000. 1-24.A.T.&Co.,Ltd.*

A.P. 14.

Ref. No. 3-P-733.

MINISTRY OF DEFENCE RECEIVED 24 APL.1924 DUBLIN ARMY PENSIONS BOARD

No trace G.S.

No trace C.P.I.C. W.E.A.

MINISTRY OF DEFENCE,
ARMY PENSIONS DEPARTMENT,
34 MOLESWORTH STREET, DUBLIN.

7th March 1924.

To

SECRETARY,
MINISTRY OF FINANCE.

An application for Pension under the Army Pensions Act, 1923, has been received in respect of the following:—

Name Patrick Reilly Address High Street

Army No. 48455. Westport

Rank Private Co Mayo.

Date of Wound, ~~Injury or Death~~ 24 November 1922

Circumstances, &c. Gunshot wound left leg received in action at Newport Co Mayo

W.J.K. Will you please state below whether any award in respect of malicious injury has been made or is being considered by you in this case.

A.P. Cleary
for Minister of Defence.

REPLY.

Ministry of Finance.

3/4/24 J.P.

No award has been made.
No application received by the Ministry of Finance or by the Compensation (Personal Injuries) Committee.

C.S. Almond
23 April, 1924.

3/P/733.

COPY.

A.P. 1.

ARMY PENSIONS ACT, 1923.

WOUND PENSION OR GRATUITY.

STATEMENT BY AN EX-OFFICER OR EX-SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This form is to be filled in by every ex-Officer or ex-Soldier who has been discharged from the forces as medically unfit, and who claims a pension or gratuity in respect of any wound or injury received in the course of his duty whilst on active service on or since 1st April, 1922.

The questions are to be answered in the ex-Officer's or ex-Soldier's own words, and the form is to be signed by him and the signature witnessed. In the event of the ex-Soldier being unable to write he should affix his mark, such act being witnessed.

✓Army No. 48455. Rank Vol.

Unit and Corps. Mid. Western Division.

Name and Rank of Commanding Officer Capt. Mulroy and Comdt. Duffy,

O/c. 44th Infantry Battn. Westport.

NAME (TO BE WRITTEN IN BLOCK CAPITALS.) R E I L L Y, (Surname) PATRICK (Christian Names)

Present Address. High Street, Westport.

Nearest Police or Civic Guard Station. James St. Westport.

Note.—Before answering the questions below, the applicant is to note that

(a) The statements made by him will be checked by official records.

Section 12 (1) of the Act imposes a summary penalty for a false declaration:—"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."

In answering question 2 (a) any special matters which, in his opinion, caused any unfitness from which he may be suffering or which aggravated it, should be clearly stated.

If the applicant is unable to read, the above notes should be read to him by the witness.

1. (a) For what period have you served? (b) In what area?	13 months. Westport.
2. (a) State the nature of any wound or injury, from which you are suffering, the date upon which, and the place and circumstances in which, it was received.	G.S.Wound Left Leg, 24/11/1922, received in action at Newport Co. Mayo.
(b) Who was your Commanding Officer upon that date?	Captain Mulroy.
(c) Give the name of any witnesses who can corroborate your answer to (a) above.	Sergt.Murtagh, Military Bks., Westport Co. Mayo.
(d) State the date upon which you were discharged from the Army as medically unfit.	13th November 1923.
3. Give the names of any hospitals where you have been treated for the above wound or injury, and the approximate dates of admissions and discharges if possible.	Westport, Claremorris, Athlone Curragh amd Marlborough Hall Hospitals. Dates of admission - discharge from hospitals unknown. Discharged from Marlborough Hall, Hosp. last week in August 1923.
4. Did you suffer from the injury mentioned in above answer to question 2 (a) or anything like it *before* joining the Army? If so, give details and dates.	No.
5. Give the names and addresses of any hospitals you were in, or doctors who attended you *before* you joined the Army.	Nil.
6. What is the name and address of your last employer before joining the Army?	Mr. Alf. O'Grady, The Quay, Westport.
7. What was your occupation or trade before joining the Army?	Dock Labourer.
8. Have you received in respect of the wound or injury mentioned in above answer to question 2 (a) any decree for compensation under the Criminal Injuries (Ireland) Acts, 1919 or 1920? If so, give full particulars.	Received no compensation
9. Have you received in respect of the wound or injury mentioned in above answer to question 2 (a) any compensation from or on behalf of the person alleged to be responsible for the act which caused the wound or injury? If so, give full particulars.	No.
10. Have you received in respect of the wound or injury mentioned in the answer to question 2 (a) any payment from any Relief Organisation such as National Aid or White Cross Association? If so, give full particulars.	No.
11. Give the name of your National Health Approved Society, and (if possible) your membership number.	

12. Have you served at any period with any of the following military or police forces? If so, give full particulars of service.

No.

(a) British.

(b) Australian.

(c) New Zealand.

(d) South African.

(e) Canadian.

(f) American (U.S.A.)

(g) Royal Irish Constabulary.

13. (a) Give full particulars of any pension, allowance, or gratuity which you hold or at any time have held in respect of any wound or injury received in, or disease contracted in, the service mentioned in your reply to above question 12.

None.

(b) State clearly the source from which payment of such pension or allowance or gratuity is made or has been made.

None.

The above statement has been read over to me; I agree to it, and have nothing further to add.

Signed ...his Patrick X Reilly.... Address .High st. Westport.....
(ex-Officer or ex-Soldier) mark.

Signed* ..John Moloney., Capt..... Address .Westport Military Bks.....
(Witness)

Qualification .Adjutant 44th Battn.. Date .....28/2/1924.....

*To be signed by one of the following:—

A Commissioned Officer serving in the Free State Army.

A Permanent Civil Servant (active or retired) whose salary is or was not less than £200 and on a scale rising to not less than £300.

A District Justice, or a Divisional Magistrate.

A Peace Commissioner.

A Barrister-at-Law, a Solicitor or a Commissioner for Oaths.

A Minister of Religion (denomination to be stated).

A registered Physician or Surgeon.

Managers, Secretaries, Chief Cashiers and Accountants of Banks and Officials in charge of Branch Banks.

An Officer of the Civic Guard or Dublin Metropolitan Police not below the rank of Inspector or Station Sergeant.

A Postmaster or Postmistress in actual charge of a Post Office.

Head Teachers of Secondary or National Schools.

A Secretary of a registered Friendly Society.

ARMY PENSIONS ACT, 1923.

Statement by an ex-Officer or ex-Soldier who claims as a married man a further pension in accordance with Section 2 of the Act.

14. If your wife is alive

(a) State the date of your marriage.

(b) Is your wife dependent on you?

(c) Does she ordinarily reside with you? (Certificate of Marriage to be attached).

15. (a) If your wife is dead, or the marriage has been dissolved, state the names and ages of any

(to be filled in by ex-Officers)

Sons under 18 years.

Daughters under 21 years.

(to be filled in by ex-Soldiers)*

Sons under 16 years.

Daughters under 18 years.

(Certificate of Birth of youngest living child to be attached).

(b) State whether the child or children mentioned above are dependent on you and where they are living.

(c) State whether any of the above children are married.

16. If your wife is alive, but your marriage has been dissolved, and you claim a further pension in respect of the children mentioned in reply to question 15 (a) above, please furnish copy of the decree or order of the Court.

The above statement has been read over to me; I agree to it, and have nothing further to add.

Signed ..... (ex-Officer or ex-Soldier) Address .....

Signed* ..... (Witness) Address .....

Qualification ..... Date .....

*To be signed by one of the following:—

A Commissioned Officer serving in the Free State Army.

A Permanent Civil Servant (active or retired) whose salary is or was not less than £200 and on a scale rising to not less than £300.

A District Justice, or a Divisional Magistrate.

A Peace Commissioner.

A Barrister-at-Law, a Solicitor, or a Commissioner for Oaths.

A Minister of Religion (denomination to be stated).

A registered Physician or Surgeon.

Managers, Secretaries, Chief Cashiers and Accountants of Banks and Officials in charge of Branch Banks.

An Officer of the Civic Guard or Dublin Metropolitan Police not below the rank of Inspector or Station Sergeant.

A Postmaster or Postmistress in actual charge of a Post Office.

Head Teachers of Secondary or National Schools.

A Secretary of a registered Friendly Society.

M.P.W.—Wt. 3648.—2,500.—11/'23.

2 18

3/P/733.

ackd 1/3/24 WJR

A.P. 1.

ARMY PENSIONS ACT, 1923.

WOUND PENSION OR GRATUITY.

STATEMENT BY AN EX-OFFICER OR EX-SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This form is to be filled in by every ex-Officer or ex-Soldier who has been discharged from the forces as medically unfit, and who claims a pension or gratuity in respect of any wound or injury received in the course of his duty whilst on active service on or since 1st April, 1922.

The questions are to be answered in the ex-Officer's or ex-Soldier's own words, and the form is to be signed by him and the signature witnessed. In the event of the ex-Soldier being unable to write he should affix his mark, such act being witnessed.

Army No. 48455. Rank Pvt.

Unit and Corps. Mid Western Division

Name and Rank of Commanding Officer Capt. Mulroy. & Comdt. Duffy O/C. 44th Infantry Bn. Westport.

NAME (TO BE WRITTEN IN BLOCK CAPITALS.) REILLY (Surname) PATRICK (Christian Names)

Present Address. High Street Westport

Nearest Police or Civic Guard Station. James St. Westport

Note.—Before answering the questions below, the applicant is to note that

(a) The statements made by him will be checked by official records.

Section 12 (1) of the Act imposes a summary penalty for a false declaration:—"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."

In answering question 2 (a) any special matters which, in his opinion, caused any unfitness from which he may be suffering or which aggravated it, should be clearly stated.

If the applicant is unable to read, the above notes should be read to him by the witness.

1. (a) For what period have you served?
   (b) In what area?

13 months.
Westport.

2. (a) State the nature of any wound or injury, from which you are suffering, the date upon which, and the place and circumstances in which, it was received.

G.S. wound left leg. 24th Nov. 1922. Received in action at Newport Co Mayo.

   (b) Who was your Commanding Officer upon that date?

Capt. Dunleavy.

   (c) Give the name of any witnesses who can corroborate your answer to (a) above.

Sergt. Dunlagh Military Brks Westport Co Mayo.

   (d) State the date upon which you were discharged from the Army as medically unfit.

13th November 1923

3. Give the names of any hospitals where you have been treated for the above wound or injury, and the approximate dates of admissions and discharges if possible.

Westport, Claremorris, Athlone, Burragh & Marlborough Hall Hospitals Dublin. Dates of admission & Discharge from Hospitals unknown. Discharged from Marlborough Hall Hospitals Dublin. Last week in August 1923.

4. Did you suffer from the injury mentioned in above answer to question 2 (a) or anything like it *before* joining the Army? If so, give details and dates.

No.

5. Give the names and addresses of any hospitals you were in, or doctors who attended you *before* you joined the Army.

Nil

6. What is the name and address of your last employer before joining the Army?

Mr Alf. O'Grady. The Quay. Westport.

7. What was your occupation or trade before joining the Army?

Dock Labourer

8. Have you received in respect of the wound or injury mentioned in above answer to question 2 (a) any decree for compensation under the Criminal Injuries (Ireland) Acts, 1919 or 1920? If so, give full particulars.

Received No Compensation

9. Have you received in respect of the wound or injury mentioned in above answer to question 2 (a) any compensation from or on behalf of the person alleged to be responsible for the act which caused the wound or injury? If so, give full particulars.

No.

10. Have you received in respect of the wound or injury mentioned in the answer to question 2 (a) any payment from any Relief Organisation such as National Aid or White Cross Association? If so, give full particulars.

No.

11. Give the name of your National Health Approved Society, and (if possible) your membership number.

12. Have you served at any period with any of the following military or police forces? If so, give full particulars of service.

(a) British.

(b) Australian.

(c) New Zealand.

(d) South African.

(e) Canadian.

(f) American (U.S.A.)

(g) Royal Irish Constabulary.

No

13. (a) Give full particulars of any pension, allowance, or gratuity which you hold or at any time have held in respect of any wound or injury received in, or disease contracted in, the service mentioned in your reply to above question 12.

None.

(b) State clearly the source from which payment of such pension or allowance or gratuity is made or has been made.

None

The above statement has been read over to me; I agree to it, and have nothing further to add.

Signed Patrick X Reilly (ex-Officer or ex-Soldier) Address High St West Port

Signed John Mc Conroy Capt (Witness) Address West Port Military H/Qrs

Qualification Adjutant 4th Battn Date 28th Day of February 1924

*To be signed by one of the following:—

A Commissioned Officer serving in the Free State Army.

A Permanent Civil Servant (active or retired) whose salary is or was not less than £200 and on a scale rising to not less than £300.

A District Justice, or a Divisional Magistrate.

A Peace Commissioner.

A Barrister-at-Law, a Solicitor or a Commissioner for Oaths.

A Minister of Religion (denomination to be stated).

A registered Physician or Surgeon.

Managers, Secretaries, Chief Cashiers and Accountants of Banks and Officials in charge of Branch Banks.

An Officer of the Civic Guard or Dublin Metropolitan Police not below the rank of Inspector or Station Sergeant.

A Postmaster or Postmistress in actual charge of a Post Office.

Head Teachers of Secondary or National Schools.

A Secretary of a registered Friendly Society.

ARMY PENSIONS ACT, 1923.

Statement by an ex-Officer or ex-Soldier who claims as a married man a further pension in accordance with Section 2 of the Act.

14. If your wife is alive

(a) State the date of your marriage.

(b) Is your wife dependent on you?

(c) Does she ordinarily reside with you? (Certificate of Marriage to be attached).

15. (a) If your wife is dead, or the marriage has been dissolved, state the names and ages of any

(to be filled in by ex-Officers)

Sons under 18 years.

Daughters under 21 years.

(to be filled in by ex-Soldiers)

Sons under 16 years.

Daughters under 18 years.

(Certificate of Birth of youngest living child to be attached).

(b) State whether the child or children mentioned above are dependent on you and where they are living.

(c) State whether any of the above children are married.

16. If your wife is alive, but your marriage has been dissolved, and you claim a further pension in respect of the children mentioned in reply to question 15 (a) above, please furnish copy of the decree or order of the Court.

The above statement has been read over to me; I agree to it, and have nothing further to add.

Signed ..... (ex-Officer or ex-Soldier) Address .....

Signed* ..... (Witness) Address .....

Qualification ..... Date .....

*To be signed by one of the following:—

A Commissioned Officer serving in the Free State Army.
A Permanent Civil Servant (active or retired) whose salary is or was not less than £200 and on a scale rising to not less than £300.
A District Justice, or a Divisional Magistrate.
A Peace Commissioner.
A Barrister-at-Law, a Solicitor, or a Commissioner for Oaths.
A Minister of Religion (denomination to be stated).
A registered Physician or Surgeon.
Managers, Secretaries, Chief Cashiers and Accountants of Banks and Officials in charge of Branch Banks.
An Officer of the Civic Guard or Dublin Metropolitan Police not below the rank of Inspector or Station Sergeant.
A Postmaster or Postmistress in actual charge of a Post Office.
Head Teachers of Secondary or National Schools.
A Secretary of a registered Friendly Society.

M.P.W.—Wt. 3648.—2,500.—11/'23.

High Street
Westport
Co. Mayo
20 Feby 1923

Re Pension

The Army Authorities
Portobello Barracks
Dublin

On the 15th August 1922 I joined the Nat Forces and served for one year and 91 days.

I was stationed at Newport in this County and on the 24th November 1923 in the Course of a severe attack on our post by probably over 100 men

I got sivevely wounded in the left leg by an explosive bullet as a result of which I underwent four operations necessitating my having to remain in hospital for nine months.

I still feel my wound very painful and it has rendered me quite unfit for work consequently I request you will immediately grant me the pension to which I am justly entitled

As I cannot obtain

any out of work donation
I am very much in need
of the money to enable me
to support myself so I
trust you will expedite
payment.

I was discharged
on 13/11/23 and the No
of my discharge Certificate
is 9959.

Patrick Reilly