

ROINN boanta

f.C.1
f8-R01nn

p. C. 1

NA CUIRTEAR ÉANTUAIRISC AR AN SCLÚDÁC SO.

Τὰ ἀνῆρο, λειρ

Առ Սիրիս

Δη Ξνό

I / RB / 516

An Uimhir dS Roinn
Eile.

Boyle Patrick
Lower Chapel Street
Castlebar

[illegible]

LEATHAN MIONTUAIRISCE.

M.S.C.

Tagairt.....

To/
THE MILITARY SERVICE
REGISTRATION BOARD.

I am directed by the Minister for Defence to transmit
the accompanying application of

Patrick Boyle

Castlebar

for investigation and certificate in accordance with Section
8 of the Army Pensions Act, 1932, and the Regulations
made thereunder.

[Signature]

A.S. RUNAL

Date *29/3/33*

Military Service Registration Board - Action Sheet A.P.50.

I. Asked applicant for addresses in following cases :-

Name given in A.P.50 under Head.	Name.	Inquiry Issued.	Intls.	Reply Recd.	Reminder Issued.	Intls.
--	-------	--------------------	--------	----------------	---------------------	--------

II. General Inquiry re names and addresses issued to applicants.

29/5/33 JCB. 31/5/33

III. Inquiries issued as follows :-

No. of Form.	To Whom Issued.
--------------	-----------------

A.P.50 3(b) Wound

" (c) "

" (b) Disease

" (c) "

" 4 (Hospital)

J. Chambers 29/5/33
Canon, Hughes 31/5/33

JCB.
JCB.

IV. Further inquiries addressed to applicants re.

Form 50-3(c) issued to Mr Madden.

15/6

*App. asked for first med. evid.
50-31b to Dr Madden.*

for 26/5/36

*National Health record
asked for 13/6/36*

R O I N N C O S A N T A
(Department of Defence)

Military Service Registration Board,
Collins Barracks,
D u b l i n.

Ref. No. IRB/516

29/5/33

ARMY PENSIONS ACT, 1932.

A Chara,

With reference to your application for Pension/Allowance or Gratuity under the above Act, will you be so good as to give the following particulars :-

Name of Commanding Officer: James Chambers.

Present Address : Maryland, Castlebar Co. Mayo.

Name of Company Captains or other Officers :-

(1) (Name : Patrick Cannon Vice - Commandant.
(Present Address: Mountain View, Castlebar Co. Mayo.

(2) (Name : James Hughes (Capt)
(Present Address Newantrim St. Castlebar Co. Mayo.

Names and addresses of persons who can corroborate the statements in your application as to wounds, injury, disease or cause of death :-

(1) (Name : Patrick Cannon. (Vice - Commandant)
(Present Address: Mountain View, Castlebar Co. Mayo.

(2) (Name : Dr. J. A. Madden. M.D.,
(Present Address: Westport, Co. Mayo.

(3) (Name : James Hughes (Capt)
(Present Address: Newantrim St. Castlebar, Co. Mayo.

Mise, le meas.

J. J. O'Hara
SECRETARY.

NOTE: This form is to be returned to the Military Service Registration Board in the enclosed addressed envelope, which need not be stamped.

To: Mr. Patrick Boyle,
Lower Chapel St.,
Castlebar,
Co. Mayo.

ROINN COSANTA.
(Department of Defence.)**MILITARY SERVICE REGISTRATION BOARD,**

COLLINS BARRACKS,

DUBLIN.

Ref. No. *IRB/5/6**31/5/33***ARMY PENSIONS ACT, 1932.**

A CHARA,

An application has been made under the above Act by.... *Patrick*
Boyle of *Lower Chapel St., Castlebar*
 for a Pension or Gratuity in respect of disease stated to have been contracted by him
 as a result of Military Service with *Ozlag nah-E. Seaven (I.R.A)*
 in the period *1918-22*

Your name has been given as one who has a personal knowledge of the
 facts, and the Board will, therefore, be obliged if you will facilitate them in dealing
 with the application by furnishing replies to the queries set out overleaf.

I am to point out that, for the purposes herein, a person shall be deemed
 to have been engaged in Military Service when, but only when, he was on duty as
 a member of the organisation referred to, or was under arrest as a result of his
 activities as such member, or being such member was evading capture or pursuit by
 the armed forces of the British Government or of the Government of Saorstát Eireann
 or of the Provisional Government or of the Government of Northern Ireland, or being
 such member was detained in a prison or ship, or an internment camp by or by order
 of any of the said Governments.

Mise, le meas,

J. J. Markham

RUNAL.

To *Mr James Hughes*
Newantrim St.,
Castlebar.

QUERIES:

- (1) Did applicant contract any disease during his Military Service as defined? If so, please give the following particulars:—

(a) Nature of the disease

(b) Where and when was the disease contracted?

(c) Actual conditions under which applicant performed his Military Service. A detailed statement of the actual conditions (with dates) under which applicant served, should be given.

(d) Particulars of any illness from which the applicant suffered during his Military Service. (A detailed statement, with dates should be given.)

(e) Full particulars of any negligence or misconduct on the part of the applicant which, in your opinion, should be taken into consideration in determining whether the disease was attributable to Military Service

(2) Particulars of any other matter in support of the applicant's claim or otherwise, on which you desire to comment.

(3) Have you personal knowledge of the facts of the case as set out by you above, or are your replies based on official reports, or on information otherwise received?

Complained of Defective vision

While with the Flying Column in 1921 (approx)

Served as a member of I.R.A. from 1918 to 1922 With Flying Column 1920 to 1921

Complained of Defective vision pains in head eyes bloodshot and eyelids gummed together at times

Nil

I have seen applicant out of work, through not been able to follow his former employment due to disability.

Personal knowledge

I declare above statements to be true to the best of my knowledge, information and belief.

Signature James Hughes

Organisation and Rank I.R.A. (Capt)

Address New Antrim St

Castlebar Co Mayo.

Date.....

ROINN COSANTA.
(Department of Defence.)

A.P. 50-3 (b).
Disease.

10. MTH 1933.

MILITARY SERVICE REGISTRATION BOARD,

COLLINS BARRACKS,

DUBLIN,

Ref. No. *IRB/516*

29/5/33

ARMY PENSIONS ACT, 1932.

A CHARA,

An application has been made under the above Act by *Patrick*
Boyle of *Lower Chapel St., Castlebar* for
a Pension or Gratuity in respect of disease stated to have been contracted by him/her
as a result of Military Service with *Oglaigh na h-Eireann (I.R.A.)*
in the period *1918-22*

Your name having been given as Commanding Officer in the period covered
by the application, the Board will be obliged if you will facilitate them in dealing
with the claim by replying, without delay, to the queries set out overleaf.

I am to point out that, for the purposes herein, a person shall be deemed
to have been engaged in Military Service when, but only when, he was on duty as
a member of the organisation referred to, or was under arrest as a result of his
activities as such member, or being such member was evading capture or pursuit by
the armed forces of the British Government or of the Government of Saorstát Éireann
or of the Provisional Government or of the Government of Northern Ireland, or being
such member was detained in a prison or ship, or an internment camp by or by order
of any of the said Governments.

Mise, le meas,

J. J. Markham

RUNAL.

To *Mr. James Chambers,*
Maryland,
Castlebar.

QUERIES:

(1) Between what dates did applicant serve with your Command?

1915 and 1922

(2) In what capacity did applicant serve?

Volunteer

(3) In what area was applicant engaged in Military Service?

West Mayo Brigade Area.

(4) Did applicant contract any disease during his Military Service as defined? If so, please give the following particulars:—

Complained of defective eye sight.

(a) Nature of the disease ...

Defective eyesight.

(b) Actual conditions under which applicant performed his Military Service. A detailed statement of the actual conditions (with dates) under which applicant served, should be given.

Served in A.S.U.

from 1920 to 1922

(c) Particulars of any illness from which the applicant suffered during his Military Service. (A detailed statement, with dates should be given.)

Complained of pains in eyes. Unable to say when he contracted that disease

(d) Full particulars of any negligence or misconduct on the part of the applicant which, in your opinion, should be taken into consideration in determining whether the disease was attributable to Military Service ...

(5) Particulars of any other matter in support of the applicant's claim or otherwise, on which you desire to comment. ...

I am not in a position to state whether he contracted disease before or after joining A.S.U.

(6) Have you personal knowledge of the facts of the case as set out by you above, or are your replies based on official reports, or on information otherwise received?

Personal Knowledge.

I declare above statements to be true to the best of my knowledge, information and belief.

Signature

James Chambers.

Organisation and Rank

Comd A. 1st Bn. 1 R.O.

Address

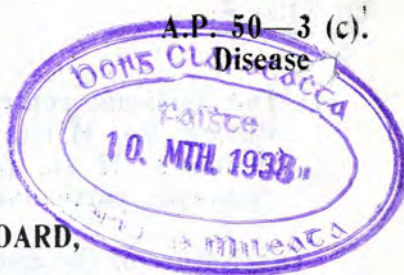
Maryland Castlebar

Co. Mayo.

Date

7 June 1933

ROINN COSANTA.
(Department of Defence.)



MILITARY SERVICE REGISTRATION BOARD,

COLLINS BARRACKS,

DUBLIN.

Ref. No. *LB. 5/6**31/5/33*ARMY PENSIONS ACT, 1932.

A CHARA,

An application has been made under the above Act by *Patrick*
Boyle of *Lower Chapel St. Castlebar, Co Mayo*
 for a Pension or Gratuity in respect of disease stated to have been contracted by him
 as a result of Military Service with *Oglaigh na h-Eireann (I.R.A.)*
 in the period *1918-22*

Your name has been given as one who has a personal knowledge of the facts, and the Board will, therefore, be obliged if you will facilitate them in dealing with the application by furnishing replies to the queries set out overleaf.

I am to point out that, for the purposes herein, a person shall be deemed to have been engaged in Military Service when, but only when, he was on duty as a member of the organisation referred to, or was under arrest as a result of his activities as such member, or being such member was evading capture or pursuit by the armed forces of the British Government or of the Government of Saorstát Éireann or of the Provisional Government or of the Government of Northern Ireland, or being such member was detained in a prison or ship, or an internment camp by or by order of any of the said Governments.

Mise, le meas,

J. J. Murphy

RUNAL.

To *Mr. Patrick Cannon**Mountain View**Castlebar,**Co Mayo*

QUERIES:

(1) Did applicant contract any disease during his Military Service as defined? If so, please give the following particulars:—

(a) Nature of the disease

(b) Where and when was the disease contracted?

(c) Actual conditions under which applicant performed his Military Service. A detailed statement of the actual conditions (with dates) under which applicant served, should be given.

(d) Particulars of any illness from which the applicant suffered during his Military Service. (A detailed statement, with dates should be given.)

(e) Full particulars of any negligence or misconduct on the part of the applicant which, in your opinion, should be taken into consideration in determining whether the disease was attributable to Military Service

(2) Particulars of any other matter in support of the applicant's claim or otherwise, on which you desire to comment.

(3) Have you personal knowledge of the facts of the case as set out by you above, or are your replies based on official reports, or on information otherwise received?

*During period of Service
he complained of defective
vision*

*Whilst with Flying Column
in 1921.*

*I first met applicant in
Flying Column in 1921*

*He was attached to the
Castlebar Column*

*He frequently complained
of sore eyes, headache
etc whilst on active service*

Nil

*I understand that
the defective sight has
interfered with the discharge
of his duties as Bdr ever
since*

Personal Knowledge.

I declare above statements to be true to the best of my knowledge, information and belief.

Signature.....

Organisation
and Rank.....

Address

Hannon

*Vic-Comm St. Castlebar
Bath*

Mountsin View

Castlebar

Date.....

26 June 1933

Memorandum.

Reference No.

IRB/516

From

Department of Defence,

(Military Service Registration Board),

Griffith Barracks, Dublin.

Date, 26 - 5 - 1936.

To Mr Patrick Boyle,
15 Lower Chapel St.,
Castlebar.

REFERENCE OR ENQUIRY

REPLY

ARMY PENSIONS ACT, 1932.

Please furnish the following further particulars:—

- 1) When, where and by whom were you first medically treated for the disability in respect of which you now claim.
- 2) Please furnish certificate of such treatment.

I wish to state that I was treated for Defective Vision after the Treaty was signed by Dr J.A. MADDEN, at Castlebar and Westport and I wish to inform you that I sent on Certificate for same attached to my application form sent to you in March 1933.

and I consider the Certificate issued by Dr J.A. MADDEN M.D. is quite sufficient to prove to you I contracted Defective Vision while I was on Active Service with Castlebar Flying Column in 1920-21.

I also wish to inform you I am not able to afford paying a Doctor at present as I am financially embarrassed.

Sincerely Yours

Patrick Boyle.

T. J. MARKHAM,
for RUNAL.

[P.T.O.]

Military Archives
I/RB/516.

/3 July, 1936.

A Chara,

I am desired by the Military Service Registration Board to state that Mr. Patrick Boyle, Lower Chapel Street, Castlebar, has made application, under the above Act. He states that he was a member of St. Patrick's Catholic Insurance Society of the west, his membership number being 24764. The Board will be grateful if you will furnish the following particulars from records:-

- 1) The date applicant entered insurance.
- 2) The periods he was in receipt of benefit, and
- 3) The nature of the illness from which he was suffering during these periods.

Mise, le meas,

A. J. F.
Ruairi.

Military Service Pensions Collection
Secretary,
National Health Insurance Socy.,
Aras Brugh, 9/10, Upr. O'Connell St.,
DUBLIN.

Cumann an Áraoais Náisiúnta ar Sláinte

(THE NATIONAL HEALTH INSURANCE SOCIETY)

TELEPHONES: DUBLIN 44358, 44359

TELEGRAMS: "SLAINTE, DUBLIN"

Correspondence to be
addressed to the Secretary

Our reference
Our reference

I.RB/516.
Reds/3/JC/MW



ÁRUS BRÚJA
SRÁID Uí Chonail Uacht.
Baile Átha Cliath

UPPER O'CONNELL ST.
DUBLIN

18th
July
1936

The Secretary,
Military Service Registration Board,
Griffith Barracks,
Dublin.

re: Patrick Boyle. 221425

Dear Sir,

With reference to your letter of the 3rd instant, we have to state that the above named entered into insurance on the 7th of April 1924. He was incapacitated from 31.1.35 to 26.3.35 by reason of 'Arthritis of thumb', and from 2.3.36 to 16.3.36 by reason of 'Gastric 'flu'.

Yours faithfully,

SECRETARY.

6

Military Service
Pensions Collection

Military Archives

I/RB/516.

7 August, 1936.

A Chara,

I am desired by the Military Service Registration Board to refer to your application, under the above Act, and to point out that the medical certificate furnished by you is in respect of present treatment. I am to ask you to please furnish medical evidence of first treatment for the disability in respect of which you claim.

Mise, le meas,

ajf
Ruhal.

Patrick Boyle, Esq.,
Lr. Chapel Street,
Castlebar,
CO. MAYO.

Military Service Pensions Collection

LP.

Military Archives

I/RB/516.

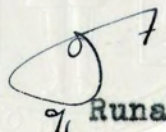
10 August, 1936.

A Chara,

I am desired by the Military Service Registration Board to refer to your application, under the above Act, and to point out that the medical certificate furnished by you states that you were suffering at the time (February 1933) from Defective Vision. I am to ask you to please furnish medical evidence showing when you were first treated for the disability in respect of which you claim.

A copy of Dr. Madden's Certificate is enclosed.

Mise, le meas,


J. Runai.

Patrick Boyle, Esq.,
Lr. Chapel Street,
Castlebar,
CO. MAYO.

LP.

Military Archives

COPY/

Dun Maeve,

Westport,

Co. Mayo.

24/2/'33.

This is to certify that Patrick Boyle, whom I have known as a member of the West Mayo Brigade Flying Column (1920-21) is suffering from very deficient eye-sight.

The deficiency is so great as to render it difficult for him to follow his occupation.

Sgd: J.A. MADDEN, M.D.

Military Service Pensions Collection

Универсальна

(Ref. No.) I/RB/516.

Roinn Coranta,
(Department of Defence)

Boird Clárachais Seirbhíse Míleata,
(Military Service Registration Board)

Dún Uí Shuibé, (Griffith Barracks)

Baile Átha Cliath.
(Dublin)

27 LUN. 1936 10 August, 1936.

ARMY PENSIONS ACT, 1932.

A Chara,

I am desired by the Military Service Registration Board to refer to your application, under the above Act, and to point out that the medical certificate furnished by you states that you were suffering at the time (February 1933) from Defective Vision. I am to ask you to please furnish medical evidence showing when you were first treated for the disability in respect of which you claim.

A copy of Dr. Madden's Certificate is enclosed.

Mise, le meas,

J. J. Runai.
J. Runai.

Patrick Boyle, Esq.,
1r. Chapel Street,
Castlebar,
CO. MAYO.

Military Archives

Particulars

of nature of service

med. evidence

1. Send in treatment

National Health Insurance.

2. 15. 2. 12 days of

29/5/36

D. Madden
ent. is only
present med.
wid. appi-
will have 15
produce early
med. evidence of
treatment

24⁷/26.

Mr Markham
applicant has
now furnished an
early medical cert

AD $\frac{3}{9}$
36.

Military Archives

Main Street,

Castlebar.

25th August, 1936.

*Original
W 73
11/26/37*

To Whom it may Interest

Re Mr. Patrick Boyle,

Lower Chapel Street,

Castlebar.

I wish to report from my Records that during the month of January 1922 I attended Mr. Patrick Boyle for Debility and Defective Vision.

The Disability I attribute to hardships endured while on Active Service.

Sgd: ALFRED J. FAULKNER, M.D.

Military Service
Pensions Collection

ARMY PENSIONS ACT, 1932.

SERVICE CERTIFICATE ISSUED BY THE MILITARY SERVICE REGISTRATION BOARD IN RESPECT OF A LIVING PERSON ALLEGED TO HAVE BEEN A MEMBER OF AN ORGANISATION TO WHICH PART II OF THE SAID ACT APPLIES.

Registered No. of Applicant I/RB/516.

Name of Applicant Boyle, Patrick

Address of Applicant Lower Chapel Street,
Castlebar.

WHEREAS an application for the grant of a pension or gratuity to the said applicant has been referred to us by the Minister for Defence under Section 8 of the Army Pensions Act, 1932;

NOW, We, the Military Service Registration Board, in pursuance of the said Section 8, hereby certify as follows:—

1. ~~The applicant was not at any time a member of any organisation to which Part II of the said Act applies.~~

or

The applicant was a member of Oglaigh na h-Eireann (I.R.A.)

(State organisation or organisations of which applicant was a member).

2. ~~The applicant was not engaged in military service within the meaning of Part II of the said Act.~~

or

The applicant was engaged in military service within the meaning of Part II of the said Act, and the following are particulars of such military service:—

Organisation or organisations of which applicant was a member	Particulars of military service		
	(*) Period of service		Nature and extent of military service
	From	To	
Oglaigh na h-Eireann (Irish Republican Army)	1918	1922	Volunteer, West Mayo Brigade.
Irish Volunteers	-	-	-
Irish Citizen Army	-	-	-
Fianna Eireann	-	-	-
Hibernian Rifles	-	-	-
Cumann na mBan	-	-	-

(*) If the service was not continuous throughout, particulars of the period or periods of actual military service should be stated.

3. The applicant did not receive a wound or injury while engaged in military service.

or

~~The applicant received a wound or injury while engaged in military service and the following are particulars of such wound or injury:—~~

(a) Nature of wound or injury

(b) Date on which wound or injury was received

(c) Circumstances in which wound or injury was
received
.....

(d) Particulars of any negligence or misconduct
on the part of the applicant which in the
opinion of the Board should be taken into con-
sideration in determining whether the wound
or injury was attributable to military service

4. ~~The applicant did not contract any disease during his military service.~~

The applicant contracted a disease during his military service and the following
are the particulars of such disease :—

(a) Nature of disease **Defective Vision.**

(b) Actual conditions under which applicant **Applicant served in A.S.U.**
performed his military service **from 1920.**

(c) Particulars of any illness from which the **Headaches, and pains in his eyes.**
applicant suffered during his military
service

(d) Detailed report on the applicant's state- **It is certified that applicant**
ments in reply to questions 3 D (i) and (ii) **was a member of Flying Column,**
in the application of the applicant **and that he complained of sore**
..... **eyes and headaches while serving**
..... **with Column. His employers**
..... **testify that applicant was in**
..... **perfect health from 1916 - 1920,**
..... **and that he never lost an hour.**
..... **He returned to their employment**
..... **in 1924, and occasionally complains**
..... **of headaches, and loses time.**

(e) Full particulars of any negligence or mis-
conduct on the part of the applicant which in
the opinion of the Board should be taken into
consideration in determining whether the
disease was attributable to military service **NIL.**

5. *

* This paragraph will be used for certifying such other particulars in respect of the applicant as the Minister may
request the Military Service Registration Board to ascertain and certify.

Signed..... *E. O. Feilly* Chairman

..... *Michl. Hilliard* Member

..... *J. O. Hunt* Member

} of
Military
Service
Registration
Board

Dated this *9th* day of **September,** 193 **6**