

Ref. No.....2/D/176..

F 194

A.P. 21.

ARMY PENSIONS ACT, 1923.

CLAIM FOR DEPENDANTS' ALLOWANCE OR GRATUITY.

Applicant's Name..... Miss Annie Crawford.....
 Address..... Mass Lane, Cappoquin,
 Co Waterford.....
 Name of Deceased..... Samuel Crawford.....
 Rank of Deceased..... Private.....
 *Force to which Deceased belonged..... National Army.....

 Date of Death of Deceased..... 24-12-'22.....
 Relationship of Applicant to Deceased..... Sister.....

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.

Dependants' Allowance was paid at the rate of 7/- per week for period 14-8-'22 to 8-3-'24. Account now closed.

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

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 did not enjoy any private income prior to the death of Deceased.

Applicant did not hold any employment prior to death of Deceased.

Applicant suffers from deafness.

Applicant's father works in the Cappoquin Bacon Factory and is in fairly comfortable circumstances. I am of opinion that the 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).

Nil.

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 8,~~ Section 7,

.....3rd.....Schedule, para....8.....of the Act, there shall be

granted to.....Miss Annie Crawford.....

a Gratuity of £70 (seventy pounds).

.....per.....in respect of her brother the late Pte. Saml. Crawford.

- do.per..... do.
- do.per..... do.
- do.per..... do.
- do.per..... do.
- do.per..... do.

~~.....~~

2 July, 1924.

L. J. Hogan
Runaidhe.

The Minister of Defence.

Submitted and recommended.

3 July, 1924.

James Gomer
Army Finance Officer.

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

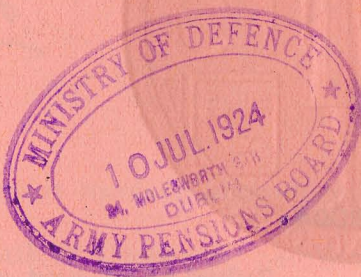
Minister for Defence.

To/

Army Finance Officer.

The Minister for Finance consents to the grant by the Minister for Defence
under Section 7 of the Army Pensions Act, 1923, of a gratuity of £70 to
Miss Annie Crawford, Mass Lane, Cappoquin, Co. Waterford.

APK.



John Hamilton
5th July, 1924.

Military Service
Pensions Collection

Military Archives

Extracts from Dependants' Allowance File Rg.U.15944.

*****oOo*****

Annie and Jack Crawford (brother and sister of Deceased) are living at home - Annie's earnings are NIL. Jack is in receipt of 15/- per week Unemployment Benefit, - contributes 10/- to upkeep of home.

The Father of Deceased is earning £2.5.0 per week.

Deceased was a watchmaker previous to Enlistment - Wages about £3. per week - contributed to the upkeep of home 30/- per week.

*****oOo*****

Dependants' Allowance was paid at the rate of 7/- per week for period 14/8/22 to 8/3/24. Account now closed.

*****oOo*****

EK.

Military Service
Pensions Collection

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



ARMY PENSIONS DEPARTMENT.

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)..... Crawford Annis
Number of Award Certificate..... 2/D/176
Rate of Gratuity or Pension and Allowances..... Granted £ 70 in all per week annum.
Award granted in respect of..... Samuel Crawford brother
(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..... Pte in Volunteers Citizen Army, 1916, in Dec..... 1922
~~Killed~~ (insert rank) National Forces (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
.....
Particulars of Children included in Pension/Gratuity ^{or} _{and} Allowances.....
.....

(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.....day of.....19.....
Signature (in full)..... Annis Crawford
Full Postal Address..... Mass Lane, Cappoquin Co. Waterford

CERTIFICATE.

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.

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..... W. White Date..... 17/7/22
Rank or Profession..... Medical Practitioner
Full Postal Address..... Cappoquin Co. Waterford

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).