

FA/27

Ref. No... 2/D/339.....

A.P. 21.

ARMY PENSIONS ACT, 1923.

CLAIM FOR DEPENDANTS' ALLOWANCE OR GRATUITY.

Applicant's Name..... **Mrs. Jane Mulhall,**.....
 Address..... **7. Corn Market,**.....
 **Dublin.**.....
 Name of Deceased..... **Patrick Mulhall,**.....
 Rank of Deceased..... **Private.**.....
 *Force to which Deceased belonged..... **National Army.**.....

 Date of Death of Deceased..... **19/12/1922.**.....
 Relationship of Applicant to Deceased..... **Mother.**.....

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.

Dependant's Allowance paid at 7/- per week for period 13/10/22 to 31/3/24.

* 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 D.M. Police Report states that the Applicant is not known to have enjoyed any private income prior to death of deceased.

Applicant was not in any employment prior to death of deceased, she is a married woman, engaged in her own home.

Applicant is the mother of deceased, and she is not invalided.

Thomas Mulhall, father of deceased is living at the address given, he is 45 years of age employed as a builders labourer casually at £2 per week, which he contributes towards the upkeep of the home.

Claimant has five other children living. Mary, aged 16 years, no occupation. Christopher aged 10 years, schoolboy. Peter aged 6 years, schoolboy. Anne aged 2 years, ~~schoolboy~~. Josephine aged 6 months, ~~schoolboy~~.

None of the five children are earning.

Deceased was employed as Telegraph Messenger G.P.O., before joining National Army.

He earned £1.6.2 per week and contributed £1.5.0 weekly towards upkeep of claimant and family.

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.

EX.

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

granted to.....Mrs. Jane Mulhall,.....

a Gratuity of £80 (eighty pounds).

.....per.....in respect of.....her son the late Pte. Patk. Mulhall.

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

~~The above amount to be paid as follows~~

£20 down and ten pounds monthly for six months.

24 June, 1924.

J. J. Horgan
Runaidhe.

The Minister of Defence.

Submitted and recommended.

27 June, 1924.

James Gorman
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. MacCosgair
Minister for Defence.

To/

Army Finance Officer.

SS2/477/m

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 £80 to Mrs. Jane Mulhall, 7 Corn Market, Dublin. The Minister consents to the payment of £20 immediately and the payment of the remainder in six monthly instalments of £10 each.

Full:



John Mulhall

5 July, 1924.

Military Archives

FOLD ALONG THIS LINE.

SAORSTÁT ÉIREANN.

OFFICIAL LEARN
PAID IRISH
THE PAY OFFICER,

(A STAMP IS NOT REQUIRED.)

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 Allowances will be made until the following Declaration has been filled in, and signed, by the person to whom the Pension or Allowances is 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)..... Mulhall Jane.....

Number of Award Certificate..... 2/D/339.....

Rate of Gratuity or Pension and Allowances..... Payable £20 down + six instalments of £10 per month per week annum.....

Award granted in respect of..... Mother.....
(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..... Private..... 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 Allowances and.....

Particulars of Children included in Pension/Gratuity or Allowances.....
5 children ages: - 7 months - 2 years - 8 years - 10 years + 16 years

(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..... July..... 1924.....

Signature (in full)..... (Mrs) Jane Mulhall.....

Full Postal Address..... 7 Corn Market Dublin.....
Her Mark +

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..... H. C. O'Connell..... Date..... July 14/24.....

Rank or Profession..... Son of.....

Full Postal Address..... Steph St No 10.....
Dublin

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).

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 $\frac{\text{Pension or}}{\text{Gratuity and}}$ Allowances will be made until the following Declaration has been filled in, and signed, by the person to whom the $\frac{\text{Pension or}}{\text{Gratuity and}}$ Allowances $\frac{\text{is}}{\text{are}}$ 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)..... *Mulhall Jane*
 Number of Award Certificate..... *50 27*
 Rate of $\frac{\text{Gratuity or}}{\text{Pension and}}$ Allowances..... *10 Pound Per Month* per week
 annum.
 Award granted in respect of..... *the late Patrick Mulhall*
 (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).
Mother
 Received whilst serving as..... *Kerry* in ~~Citizen Army, 1916,~~ in..... *19*
 Killed (insert rank) ~~Volunteers~~ 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 $\frac{\text{or}}{\text{and}}$ Allowances

 Particulars of Children included in Pension/Gratuity $\frac{\text{or}}{\text{and}}$ Allowances.....
Christy Mulhall, Peter Annie Josephine and
Mary Mulhall

(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 $\frac{\text{Pension or}}{\text{Gratuity and}}$ Allowances specified, I having been notified by the Secretary, Army Pensions Department, that such $\frac{\text{Pension or}}{\text{Gratuity and}}$ Allowances has/have been granted to me. I further declare that those persons mentioned in (2) above are alive on this the *17* day of *November* 19*24*
 Signature (in full)..... *Mrs Jane Mulhall 7 Bonmarket*
 Full Postal Address..... *High street Post office*

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..... *M. J. O'Connell* Date.....
 Rank or Profession..... *P.O.*
 Full Postal Address..... *High St. P.O. Dublin*