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# FORMAL WILL.

W.O. No.: E/699322/1

DOMICILE Irish

Record No. 464/775585 18/19

Name Patrick Heslin

Regtl. No. and Rank 2440 Private

Regt. Irish Guards

Died at in Germany

Date of Death 13-7-18

WAR OFFICE.

*W. G. A. Parkes*

Date 6<sup>th</sup> June 1919.

Et. 16/1005.

699322

H.

22 OCT 1918

2440 P. O. Weston

Irish Arms

P 77757

Army Form B 243.

FORM OF WILL, No. 1.

To be used by a Soldier desirous of leaving the whole of his effects to one person.

(a) The names of the soldier to be written in full.

I, (a) Patrick Weston

No. 2440 of the First Fresh Regiment of Foot Guards

do hereby revoke all former Wills by me made, and declare this to be my last Will.

After payment of my just Debts and Funeral Expenses, I give to my

(b) Insert "friend," or if a relative, in what degree.

(b) Wife

(c) The name in full.

(c) Annie Weston

(d) Insert the address, if known, or other description.

(d) 189 Guiness Bldg, Spawfields, Westminster, S.W.

(e) If to a female, add the words [for her sole and separate use, her receipt alone being a sufficient discharge].

absolutely (e) for her sole & separate use, her receipt alone being a sufficient discharge

The executor (or if more than one be appointed then one of them) should be in Great Britain or Ireland, and, if possible, in London, and the address of each should be clearly written.

the whole of my Estate and Effects, and everything that I can by law give or dispose of, and I appoint

Annie Weston 189 Guiness Bldg, Spawfields, Westminster, London, W.C.

Executor of this my Will.

699322

H.

22 OCT 1918

2440 P. O. Weston

Irish Gtds

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In Witness whereof, I have hereunto set my hand this 6<sup>th</sup> day of August

A.D. 1918

S Soldier to sign here, or if he cannot write, to make his mark.

S Patrick Weston

Signed and acknowledged by the said

Patrick Weston

the same having been previously read over to him as and for his last Will in the presence of us, present at the same time, who, in his presence, at his request, and in the presence of each other, have hereunto subscribed our names as Witnesses.

(A) Witnesses to sign here.  
(i) Add addresses in full.

- (h) John Walsh 2107  
1st Irish Guards
- (i) Wellington P.O. London SW
- (h) Daniel Bunker 3214
- (i) Irish Gtds Wellington P.O.  
London.

Declaration of the Medical Officer.

I declare that I was present at the Execution of this Will, and that

\_\_\_\_\_ the Testator was at the time in a fit state of mind to execute the same.