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L2/1

# FORMAL WILL.

W.O. No.: E/728124/1. ✓

DOMICILE Irish ✓

Record No. 542/886451/19-20. ✓

Name LEAHY Michael ✓

Regtl. No. and Rank 4/5644 Private ✓

Regt. 2nd Bn. Royal Irish Regt. ✓

Died at France (B57) ✓

Date of Death 21-3-18 ✓

## WAR OFFICE.

Date 27 August 1919



E720124

L

12 JUN 1919

4/5644 Pte. M. Leahy

J. Regt.

P34750

Army Form W. 3297.

**USE EITHER THIS FORM OR THE FORM OVERLEAF, BUT NOT BOTH.**

Form of Will to be used by a soldier desirous of leaving the whole of his property and effects to one person.

(See overleaf for Form of Will leaving legacies to more than one person.)

In the event of my death I give the whole of my property and effects to

Name of Legatee in full Mrs Ellen Leahy  
(Mr., Mrs., or Miss)

Relationship to soldier, if any Wife

Address of legatee in full Abbey St. Cahin - Co Liff

Signature of Soldier (full name) Michael Leahy

Rank and Regimental Number Private 4/5644

Regiment 4th Bn. ROYAL IRISH REGT

Date 9th December 1916.

Signed and acknowledged by the said (a) 4/5644. Leahy. M.  
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) Insert full name of soldier making the Will.

(b) Witnesses to sign here.

(c) Add addresses in full.

(b) C. S. Kearney 4th Bn. ROYAL IRISH REGT

(c) Belmont Huts - Queenstown

(b) Sgt. C. Davey 4th Bn. ROYAL IRISH REGT

(c) Belmont Huts - do

\*N.B.—The Witnesses must NOT be persons intended to benefit under the Will, or husbands or wives of such persons.



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4/5644 Pte. M Leahy

J. Regt.

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USE EITHER THIS FORM OR THE FORM OVERLEAF, BUT NOT BOTH.

Form of Will to be used by a soldier desirous of leaving legacies to some one or more persons, and the residue to another or others.

(See overleaf for Form of Will leaving everything to one person.)

P34750  
E 728124

In the event of my death I give to

(a) Name the person and describe him by his rank, regt., or profession, degree of relationship (if any) or in any other way, and give his address in full

(a) \_\_\_\_\_  
\_\_\_\_\_

(b) Here state the particular articles, or money intended to be given

(b) \_\_\_\_\_  
\_\_\_\_\_

And I give to (a) \_\_\_\_\_

(b) \_\_\_\_\_

And all the rest of my estate and effects, and everything that I can give or dispose of, I give and bequeath absolutely to (a) \_\_\_\_\_

Signature of Soldier (full name) \_\_\_\_\_

Rank and Regimental Number \_\_\_\_\_

Regiment \_\_\_\_\_

Date \_\_\_\_\_

Signed and acknowledged by the said (c) \_\_\_\_\_

(c) Insert full name of soldier making the will.

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\*:-

(d) Witnesses to sign here

(d) \_\_\_\_\_

(e) Add addresses in full

(e) \_\_\_\_\_

(d) \_\_\_\_\_

(e) \_\_\_\_\_

\*N.B.—The Witnesses must NOT be persons intended to benefit under the Will, or husbands or wives of such persons.

[P.T.O.]