



NATIONAL ARCHIVES OF IRELAND

NAI/2002/119

Archives are subject to copyright and should not be copied or reproduced
without the written permission of the Director of the National Archives

7

FORMAL WILL.

W.O. No.: E/564126/1

DOMICILE *Irish*

Record No. *395/665717 8/19*

Name *James Lynch*

Regtl. No. and Rank *No. 30885 Sergeant*

Regt. *1st Bn. Inniskilling Fusiliers*

Died ⁱⁿ at *France*

Date of Death *30/11/17*

WAR OFFICE.

Date *June 26/1918*

H. 16/1905.

20-504126

29 MAR 1917

5 - APR 1917

30885. Pgt. J. Lynch.

Innis. Fus

P. 24295.

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. Dorothea M. Lynch
(Mr., Mrs., or Miss)

Relationship to soldier, if any wife

Address of legatee in full 4 St. Barnabas Street
Dublin

Signature of Soldier (full name) James Lynch

Rank and Regimental Number Sergeant 30885

Regiment 3rd Royal Inniskilling Fus

Date 30th April 1917

Signed and acknowledged by the said (a) James Lynch
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) T. D. O'Neill C.O.M.P.

(c) 3rd Royal Inniskilling Fus

(b) Robinson Sgt.

(c) 3rd Royal Inniskilling Fus

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

30885 4126

29 MAR 1918

5 - APR 1918

30885. Pgt. J. Lynch.

Innis. Fus

P. 24295.

P. 24295

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.)

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) _____

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

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 _____

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

Signed and acknowledged by the said (c) _____ 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) _____

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

[P.T.O.]