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INFORMAL WILL.

W.O. No.: E/377066/1

DOMICILE, *Irish*

Record No. *274/483753/17/18*

The enclosed document

dated *6/3/17*

Name *Owen Reilly*

and signed

Owen Reilly

Regtl. No. and Rank *80121 Private*

appears to have been written

or executed by the person

Regt. *15th Bⁿ Notts & Derby*

named in the margin while

he was "in actual military

Died at *in France*

service" within the meaning

of the Wills Act, 1837, and

has been recognised by the

Date of Death *13 May 1917*

War Department as con-

stituting a valid will.

WAR OFFICE.

A. Atkinson

for the Assistant Financial Secretary.

Date *16/8/17*

E
377066
1

30 JUN 1917

R.

80121 - O. Reilly

Notts & D. R.

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18
WILL.

In the event of my death I give the whole of my property & effects to my mother, Mrs. Catherine Reilly, Drumbrade, Ballynag Co. Cavan, Ireland.

Signature Owen Reilly
Rank and Regt. L/Cpl No. 80121
Date 6-3-17 Notts & Derby

30 JUN 1917

R.

80121 - O. Reilly

Watts & D. R.

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Certified that this Will was extracted from the
A.B. 64 of No 80121 Pte Reilly O. 15th Battn.
The Sherwood Foresters.

Watts Captn. for,
Offr. i/c Reg. Infy. Sectn. No 4,
G.H.Qrs. 3rd Echelon, Base.

30-5-17.

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30 JUN 1917

R.

80121 - C. Reilly

Notts & D. R.

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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 Ms Catherine Reilly
(Mr., Mrs., or Miss)

Relationship to soldier, if any mother

Address of legatee in full Drumbrade, Ballinagh, Co. Cavan
Ireland

Signature of Soldier (full name) Owen Reilly

Rank and Regimental Number 1/Cpl. 80121

Regiment Notts & D. R.

Date 6.3.17

Signed and acknowledged by the said (a) Owen Reilly

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) Shikring. 1.

(c) 15th T.R. Bn. Brocton Camp

(b) _____

(c) _____

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

30 JUN 1917

R.

80121 - C. Reilly

Watts & D. R.

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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.)

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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)

(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.

938976