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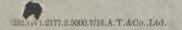
947

Miss Lucy S. Discon

REPORTED ON BY COMMITTEE.

30SEP. 1916

retd Insce Policy o rect



PROPERTY LOSSES (IRELAND) COMMITTEE, 1916.

Inspector's Report.

Name of Claimant Miss	s Livery S.	Disco	Occu		Karyhut	rutress.				
Situation of Property 12	9 11.50	trphrus	Green, N	V. Dub	lin.					
Description	Claim	Insurance (if any)	Valuation of Buildings (Commissioner of Valuation)	Inspector's Valuation of full Damage	Loss Payable on basis of Insurance	Excess of Loss over and above amount payabl under the Policies of Insurance				
Personal Door Locks Stock ni brade Cash Consequential	, 4/-	200 y to . grows		34.4.3	34.4.					
Totals, £	92.0.	0 200		34.4.	3 34.4.	3				
Interests in the buildings I investigated trustrain which I found rocay grated and consider £34. 4.3 reasonable compensation, Bityanthy 12th anyust 1916. Do. Buildings										

2 S. Kembooth Park 94 4. Dublin 2. th July 1916. Draw Sir, ach.
Owing to celeness in my home I find it difficult to attend to business, I trust in this account you will excusable lu answering pour request re claim by me of \$40 for Stock in trade lost chering Meent Rebellin. Will the enclosed thate. ment answer Jour purpose? Ju faithfully . L. S. Diron (Miss) Mi S. S. Diron 24 Kenilworth Fork 944 I consider my loss of Stock in trade amounting to \$40. includes: -Groceries. Luch as flow lugar, tea, Coffee, creoa, chrevlate, rice, lentels, pras beaus, haricots, currants, raisins, candied feel, fround almonds, tenned foods, Sauces. paster, whisty wines, tringar, Spicer, essences de ve 1 reserves mamalades + jams 9 all Lorts. Home made cakes. Home made Sweets, Ornamento + lunto for cakes. Functure injured Utensile missing. From the School of Cookery 129 Ptepheni Green Dublen.

Main L. S. Diron. 28 Kuil worth Pack I consider my lors of Stock in trade amounting to £ 40 includes -Troceries, Such as Flow, Lugar, tea Coffee. Cocoa. Chocolate, rice, leutils pear, hears habients, currents Navins Candied peel, france almonds, timed foods, Sauces, pastes, whiskey, wines, vinegar, Spices, essences tex Preserves Maemalades. + gams y all Home made cakes. Home made Sweets. Omaments & Sweets for Pakes. Furniture Suguied Utensils Missing.
Then the School of Cookery Siblis
129 Stephens Guen Diblis

PROPERTY LOSSES (IRELAND) COMMITTEE, 1916.

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51 St. Stephen's Green, E.

Dublin, 22 July 1916.

No. 947. NAME Muss & S. Dixon

#### MEMO

The claim in the above matter is herewith returned for

Please forward two copies of details showing how the claim of \$40 for stock in trade Cost is made up

J. J. HEALY,

Secretary

Wt. 1794. 2,000. 7/16. P.P.D.



Property Losses (Ireland) Committee, 1916. 947

51 ST. STEPHEN'S GREEN, EAST, DUBLIN.

| Claim for Damages caused during the Disturbances on the                                                                                                                                                                                                   |                                                                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| 24th April, 1916, and following days.                                                                                                                                                                                                                     |                                                                                                                  |
| I Lucy 3. Doin (Miss) now residing                                                                                                                                                                                                                        |                                                                                                                  |
| at 28. Kenilworth Park in the City of Dublin                                                                                                                                                                                                              |                                                                                                                  |
| do hereby solemnly and sincerely declare that on or about the 25-30 day of Resil 1                                                                                                                                                                        | 916                                                                                                              |
| 1916, damage was done to the undermentioned Property, namely: -* School of                                                                                                                                                                                | * State                                                                                                          |
| Cookery, 129 Stephens Green                                                                                                                                                                                                                               | situation of<br>property<br>damaged.                                                                             |
| and such damage was occasioned to the best of my belief by ** Pay the Rebels                                                                                                                                                                              | ** Here state. cause of                                                                                          |
| taking possessing my premises & the Military firing is                                                                                                                                                                                                    | at them                                                                                                          |
| And We further declare that the Property and Articles specified on the other side were so destroyed or damaged; that the Cost Price of same was as shown in each case; that at the time of the destruction or damage they were respectively of the Values |                                                                                                                  |
| specified under the head "Value of Property at time of Destruction or Damage"; and that, in consequence of such destruction or damage, claim is hereby made for the                                                                                       |                                                                                                                  |
| sums specified under the head "Amount Claimed"; that the Claim is made by me                                                                                                                                                                              |                                                                                                                  |
| as†; and that no person is interested in                                                                                                                                                                                                                  | † Insert "Owner," "Lessee,"                                                                                      |
|                                                                                                                                                                                                                                                           | "Mortgagee," as the case                                                                                         |
| the said property except; myself                                                                                                                                                                                                                          | may be.  † Insert "myself." or                                                                                   |
| and that it is not insured by me or any other person, § except as follows, namely:—                                                                                                                                                                       | "ourselves," and the names of Mortgagors, Mortgagees, Lessors, Lessoes, or joint owners (if any).  \$ Strike out |
| Union Assurance Company, Policy No 2008 063, Amount £ 2 00                                                                                                                                                                                                | the words<br>following if<br>the property is<br>not insured.                                                     |
| Society Limited , , , , ,                                                                                                                                                                                                                                 | nov insuleo,                                                                                                     |
| ,, ,, ,, £,                                                                                                                                                                                                                                               |                                                                                                                  |
| And I make this solemn Declaration conscientiously believing the same to be true, and by virtue of the provisions of the Statutory Declarations Act, 1835.                                                                                                |                                                                                                                  |
| Made and subscribed the day of                                                                                                                                                                                                                            | July                                                                                                             |
| 1916, at                                                                                                                                                                                                                                                  |                                                                                                                  |
| 13 Nicklow St in the said City,                                                                                                                                                                                                                           | of Sublis                                                                                                        |
| before me, a Justice of the Peace for the said                                                                                                                                                                                                            |                                                                                                                  |
| City Sublini<br>County.                                                                                                                                                                                                                                   |                                                                                                                  |
| James Boy 1                                                                                                                                                                                                                                               | p                                                                                                                |
| of Claimant                                                                                                                                                                                                                                               |                                                                                                                  |
| Note—This Claim should be accompanied by the Policies of Fire Insurance and the last receipt, in each case,                                                                                                                                               |                                                                                                                  |

Stephen's Green, East, Dublin.

### PARTICULARS OF THE CLAIM.

(TO BE GIVEN IN DETAIL.)

| DESCRIPTION OF PROPERTY DESTROYED  OR DAMAGED.                      |    | Price |     | Value of Property at time of Destruction or Damage.  £ s d. |     |     | Value of Salvage. |    |             | Amount Claimea |     |    |
|---------------------------------------------------------------------|----|-------|-----|-------------------------------------------------------------|-----|-----|-------------------|----|-------------|----------------|-----|----|
|                                                                     |    | 8.    |     |                                                             |     |     |                   |    |             | £              | 3.  | d. |
| Personal Clothing!                                                  |    |       |     |                                                             |     |     |                   |    |             |                |     |    |
| Folf Jacket (18/6). Bag & Turney (1.1.0)<br>Aprono (12-14) (1.15.6) | 3  | 15    | 0   | 3.                                                          | 15. | 0.  | 4                 |    |             | 3.             | 15. | 0. |
| Old French Cameo Brooch with                                        |    |       |     |                                                             |     |     |                   |    |             |                |     |    |
| Old French Cames Brooch with                                        | .3 | 3     | 0   | 3.                                                          | 3.  | 0   |                   |    |             |                |     | 0  |
| Damage to + loss q furniture                                        | 2  | 10    | 0   | 2.                                                          | 10  | 0   |                   |    |             | 2.             | 10. | 0  |
| Stock in trade (groceries catres, chandlery,                        |    |       |     |                                                             |     |     |                   |    |             |                |     |    |
| Cakes, Chandlery,                                                   | 40 | 0     | 0   | 40                                                          | Ď.  | .0  |                   |    |             | 40             |     |    |
| Household linen                                                     | 4. | 0     | 0   | 4.                                                          | 0.  | 0.  |                   | 8. | 6           | 3              | 11  | 6  |
| Lors of pupils pers a time                                          |    |       |     |                                                             |     | *** |                   |    |             | 39             | 0   | 6  |
|                                                                     |    |       |     | ă e .,                                                      |     | 5   |                   |    |             |                |     |    |
|                                                                     |    |       | 2.5 |                                                             |     |     |                   |    |             |                |     |    |
|                                                                     |    |       |     |                                                             |     |     |                   |    | To the same |                |     |    |
|                                                                     |    |       |     |                                                             |     |     |                   |    |             |                |     |    |
|                                                                     |    |       |     |                                                             |     |     |                   |    |             |                |     |    |
|                                                                     |    |       |     |                                                             |     |     |                   |    |             |                |     |    |
|                                                                     |    |       |     |                                                             |     |     |                   |    |             |                |     |    |
|                                                                     |    |       |     |                                                             |     |     |                   |    |             | T(I            | 167 |    |
| Carried forward,                                                    |    |       |     |                                                             |     |     |                   |    |             | 92             | 0   | 0  |
|                                                                     |    |       |     |                                                             |     |     |                   |    |             |                |     |    |

# Property Losses (Ireland) Committee, 1916.

51 ST. STEPHEN'S GREEN, EAST, DUBLIN.

Claim for Damages caused during the Disturbances on the 24th April, 1916, and following days.

| We Lucy. S. Dixon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | now resid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ing                                                                                                                                                                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| at 28 Keniler oth Parks in t                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | he City of Dublin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                   |
| do hereby solemnly and sincerely declare that on or a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 4 1916                                                                                                                                                                                            |
| 1916, damage was done to the undermentioned Prop                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | erty, namely:—* School 9 Com                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | State<br>situation of<br>property<br>damaged.                                                                                                                                                     |
| and such damage was occasioned to the best of my our And I further declare that the Property and Artists of destroyed or damaged; that the Cost Price of the | icles specified on the other side we of same was as shown in each case                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ere                                                                                                                                                                                               |
| that at the time of the destruction or damage the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                   |
| specified under the head "Value of Property at and that, in consequence of such destruction or dasums specified under the head "Amount Claimed ast ;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | amage, claim is hereby made for the claim is made by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | the<br>me<br>us +Insert                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | "Mortgagee," as the case                                                                                                                                                                          |
| and that it is not insured by me or any other person,  Company, Policy No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | § except as follows, namely:—                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | may be.  ! Insert "myself," or "ourselves," and the names of Mortgagers, Mortgagers, Lessors, Lesses, or joint owners (if any).  ! Strike out the words following if the property is not insured, |
| Boristy Rivited ", ",                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | , ,, £                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                   |
| And I make this solemn Declaration conscientiously is virtue of the provisions of the Statutory Declarations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Act, 1835.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | by                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | scribed the 300 day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1916, at                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1916, at City in the said Count                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | of Sublin                                                                                                                                                                                         |
| hefore m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | e a Justice of the Pages for the on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | :1                                                                                                                                                                                                |
| City<br>County.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | of Dublin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 200                                                                                                                                                                                               |
| Signature of Claimant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | James Santa |                                                                                                                                                                                                   |
| Note—This Claim should be accompanied by the Policies of Fi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | re Insurance and the last receipt, in each ca                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | SP                                                                                                                                                                                                |

or certified copies of same. When completed it is to be forwarded to the Secretary of the Committee, 51 St. Stephen's Green, East, Dublin.

## PARTICULARS OF THE CLAIM.

(TO BE GIVEN IN DETAIL.)

| DESCRIPTION OF PROPERTY DESTROYED OR DAMAGED.                                       |          | Cost Price. |    |        | Value of Property at<br>time of Destruction<br>or Damage. |     |         | Value of Salvage. |    |        | Amount Claimea |    |  |  |
|-------------------------------------------------------------------------------------|----------|-------------|----|--------|-----------------------------------------------------------|-----|---------|-------------------|----|--------|----------------|----|--|--|
|                                                                                     |          | 8. d.       |    | £ 8 d. |                                                           | d.  | £ s. d. |                   | d. | £ g.   |                | d. |  |  |
| Personal Clothing                                                                   |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
| Personal Clothing<br>Say Jacket (18/6) Bagthony (1.1.0)<br>Aprons (12-14) (£ 1.156) | 3        | 15          | 0  | 3.     | 15                                                        | .0. |         |                   |    | 3      | 13             | 0  |  |  |
| Old French Cames Brookwith                                                          |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
| antique parme                                                                       | 3.       | 3.          | 0. | 3      | 3                                                         | 0   |         |                   |    | ٦,     | 3              | .0 |  |  |
| Danage & o los y furnitiese                                                         | 2.       | 10          | 0  | 2.     | 10                                                        | 1.  |         |                   |    | 2.     | 10             | 0. |  |  |
| Stock in trade, groceries, cakes, chandlery to                                      |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
| Cakes, chardlery to                                                                 | 40       | 0           |    | 40     | .0                                                        | .7  |         |                   |    | 40     |                |    |  |  |
| Household linen                                                                     | 4.       | a.          | 0  | 4      | 0.                                                        | 0   |         |                   |    | 3      | 11             |    |  |  |
| Lors y pupils pers + times                                                          |          |             |    |        |                                                           |     |         |                   |    | 38     | 8              |    |  |  |
|                                                                                     | A, area. |             |    |        |                                                           | 7.  |         |                   |    |        |                |    |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    |        |                |    |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    | TRUE C |                |    |  |  |
| Carried forward,                                                                    |          |             |    |        |                                                           |     |         |                   |    | 92     | d.             | 0. |  |  |
|                                                                                     |          |             |    |        |                                                           |     |         |                   |    | /~     |                |    |  |  |