

# 12/07/1917 ORR, ARCHIBALD LITTLE (Regiment: ROYAL ENGINEERS)

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570/8/573/5 (1-3)

## INFORMAL WILL.

W.O. No.: E/437289/1.

DOMICILE. *Scottish*

Record No. *298/518934 - 17/18*

The enclosed document

Name *Archibald Little Orr*

dated *17/12/16*

and signed

Regtl. No. and Rank *209568 Pioneer*

*Archibald L. Orr*

Regt. *R. E.*

appears to be holograph of

the person named in the

margin, and has been recog-

Died at *Killed in action (France)*

nized by the War Department

as a valid Will according to

Date of Death *12/7/17*

*Scottish* Law.

WAR OFFICE.

*Whitell*

for the Assistant Financial Secretary.

Date *23/10/17*

**12/07/1917 ORR, ARCHIBALD LITTLE (Regiment: ROYAL ENGINEERS)**

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209 568 Pmr. A. L. Orr

R. E.

P. 63140

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Army Form W. 3297.

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

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

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

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

Name of Legatee in full Mr Margaret Orr  
(Mr., Mrs., or Miss)

Relationship to soldier, if any Mother

Address of legatee in full Auchingramont Rd, Hamilton,  
Scotland.

Signature of Soldier (full name) Archibald L. Orr

Rank and Regimental Number Pioneer 209568

Regiment Royal Engineers

Date 17/12/16

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

Signed and acknowledged by the said (a) Archibald L. Orr  
as and for his last Will in the presence of us, present at the same time, who, in his presence, at his request, and in the presence of each other, have hereunto subscribed our Names as Witnesses\*

(b) Witnesses to sign here.

(b) John Stuart  
(c) 56 Lochrin Mas Gilmore Pl Edinburgh

(c) Add addresses in full.

(b) D. A. Nicoll  
(c) 70, Argyll Street, St. Andrews

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

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8/437289

570/8/573/5 (3)

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

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

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

In the event of my death I give to

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

(a)

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

(b)

And I give to (a)

(b)

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

Signature of Soldier (full name)

Rank and Regimental Number

Regiment

Date

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

Signed and acknowledged by the said (c) as and for his last Will, in the presence of us, present at the same time, who, in his presence, at his request, and in the presence of each other, have hereunto subscribed our Names as Witnesses\* :—

(d) Witnesses to sign here

(d)

(e) Add addresses in full

(e)

(d)

(e)

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

[P.T.O.]

968140