PENALTY.

That whoever in any claim for family allowance, compensation, or insurance, or in any document required by this act or by regulation made under this act, makes any statement of a material fact knowing it to be false, shall be guilty of perjury and shall be punished by a fine of not more than $5,000, or by imprisonment for not more than two years, or both.

1. Claimant's full name Mary Ellen McNicholas (a) Date of birth

2. Second Claimant's name J W McNicholas (a) Date of birth

3. Name of person injured or killed in service George Edward McNicholas

4. Date and place of his birth Sept. 9 1888, Ned, Greene Co Pa

5. His relationship to Claimant(s) Son 6. His color White 7. His height 5 ft 10 in

8. His occupation before entering the service Tool dresser & driller

(a) Weekly earnings 850

9. Date and place he last entered the service

10. Branch of service he served in: Army Infantry Navy —

Marine Corps — Coast Guard — Other branch —

11. His rank or rating at time of last discharge —

12. Company and regiment or organization, vessel, or station in or on which he was serving Co K. 110 Inf 28th Div

13. Describe injury suffered or disease contracted in the service causing death or disability Reported by the Government Killed in Action Sept 28 1918.

14. Did death result (a) while in the service? Yes (b) If so, state amount, if any, expended by you for the return home and burial of the body, $ Nothing (c) State amount of burial expense, if any, received from Army or Navy, $ 0

15. Date of discharge from the service — Date of death Sept 29-1918

16. Date when and place where injury or disease causing disability or death was first received —

17. Nature and extent of disability resulting therefrom —

18. Occupation and weekly wages since discharge —

19. If disability or death occurred after discharge or resignation from the service, state: (a) Whether claim for compensation was ever filed in this Bureau by the disabled or deceased, and if so, the file number assigned his claim —

(b) Whether he obtained a certificate from the director of the Bureau to the effect that at the time of his discharge or resignation he was suffering from injury likely to result in disability or death, and if so, the number of the certificate of disability — (c) Whether he ever applied for War Risk Insurance, and, if so, the number of the certificate of insurance issued him N 991104

20. Was he married or single? Single If married, how many times? — Had he been divorced? —

21. Date and place of last marriage —

22. Maiden name of wife, if any — 23. Is she living? —

24. Were they divorced? — 25. Her present address —

26. Had she been previously married? — 27. Was she divorced from a former husband? —

28. If so, give date of divorce — 29. Has she remarried since death of husband injured or killed in the service? — If so, state date of remarriage — 30. Has person disabled or deceased any child or children living, including adopted children and stepchildren under 18 years of age and unmarried? —

31. If so, give name and following particulars of each child to the best of your knowledge and belief:

Full name of child.	Date of birth.			Name and address of person having custody of the child.
	Day.	Month.	Year.	
		X		

32. If any child is a stepchild, an adopted child, or an illegitimate child, state the full name of such child, whether a member of the household of deceased, the name of the mother and, if an adopted child, the date of legal adoption —

33. Name and date of birth of any child of the person on account of whose injury or death claim is made who is insane, idiotic, or otherwise permanently helpless —

34. Name and address of each parent of the person on account of whose injury or death claim is made Mary, Ed. McNicholas, Ned Pa. John Haller McNicholas Ned Pa

35. Are they incapable of self-support? partly If so, how is each one incapacitated?

(a) Mother by sickness and age

(b) Father by age

36. On whom does each depend for support? (a) Mother husband, (b) father himself

37. Did the person injured or killed in the service contribute to their support? Yes If so, what amount did he contribute monthly to (a) his mother 25, (b) his father 25? (c) How much of this was for his board? none

38. Cash value of all property, real and personal (including cash on hand and in the bank, stocks, bonds, etc.), owned by (a) mother $3000, (b) father $3000

39. Name and age of each member of the household if father or mother is claimant Agnes McNicholas (19) Frances McNicholas (17) Maudie McNicholas (15) Josie McNicholas (11)

(a) Total monthly earnings of all members of household —