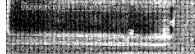
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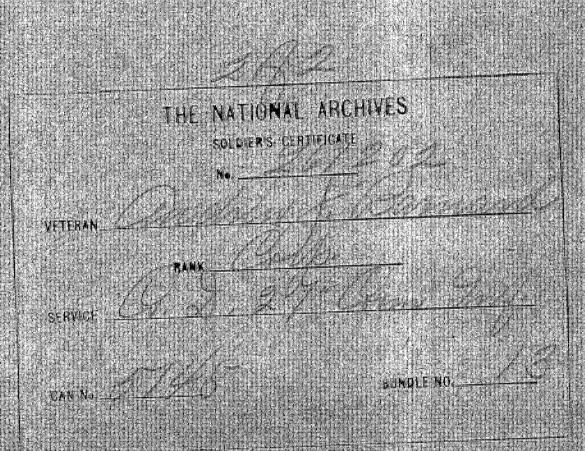
Dear Patron:

We regret that the enclosed photocopies are the best we were able to obtain using our normal reproduction process. This is caused primarily by the age and faded conditions of some of the documents from which these copies were made.

COMPLETE FILE ENCLOSED

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J Basmard

Let I by 2 61.202

Co D, 2 7 Begt.

Usl Joyf. Lown. 340 Third Street Jackson Imich Jebry 13"-1205 Lower of Penning to Dear Sur Jungton as Tampuy Sel to Server what to do concerning my pension Town. writing you for advice. I have not received. any since March last, for the reason Truppose that Barnard has not strawn his, about a year sign, as Barnard Irad not applied fre his, through my solicitor, we employed a Lawyer in Boston who priemed the officients of two persons sessoling in Gredfield Withour that barnard was living, the same were duly Junarded. I then received a letter from the Pension agent in Boston saying the affadout should be on their grinted forms which be enclosed to be filled and organish I had already just over I dollars for those sent in, I the Laywers in Boston, as de from my expenses here and we sent the & popus to them to be witnessed again but we had great difficulty in obtaining their

signature the second time as Barnard. had persuaded them to have nothing more to do with them we paid the fapopers another I dollars for the same affadavits. Is I decided the was me me trying to get it till Barnard. Were his if it took it all to pay expenses, and mon, But the Pension agent al Buston sent me vouchers for six mouther to De filled, lost betober, alse endosing forms for affadorits from medfield 10 ohn Barnard. was still living. I knew it was no use to look for any further help from those who signed Last se I wrote to the Pust master at Medfield as from y him to a betain the signatures of two witness for me & offering to evver expenses, I did not receive any septy and as Barnard has all the chance to influence people on his forow Tanata loss what to she conyon suggest any svay out of the difficulty? Town in need of the as I have nothing to support me and have been crippled with Thremation all winter, Semon

Vol. Fuzy. Go Fow Div W.J. B. CXI In Erans Reproduced: at the National Archives

by this hinc and Mist the rest of papers will be solis Godon was sony the delay was made by the versight of Mr Helmer Turate last Thursday if is copy of dealle of final wife who died in Juduloury lowered will forward some et son as l'eceive it. I unevery hope the bereon will consider il in time to be of some benefit to me this worth July respect all Mosella Harnard P. J. I wish to theme you for your oriel and

RETURN THIS LETTER West Grapes

The H. C. Crans West Grapes

The H. C. Crans Much Sear Jin Jone two weeks

age I wote you enclose in a papers I had filled and left with harfelmen to frush for and mail for me as I was going from home a weeks or found they were not yet tend in on I have since property of the carbook of the copy of the carbook of the copy of the carbook of the sound the sound of the carbook of the carbook of the carbook of the copy of

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Japan mil MA Clay Evan, May &1 Eventur zioner y will find the Jidness fillief my survelillact. might tond it. Topphid v. E. Eliska Afrec for Public revised of they filed Just could (gab Burnous) death of bush not on h Northy and Mr Genderice in the letter bullreel with his testimony Jell, me the train no Township recordings of deaths up to and In home years k

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Mr Burnouns storth from was at one their classel our of me have out members. Moun wed m quity to the church and being a finall place Mings avere sich Muse for a low great avoy. In Enneral 1972 wilnus) com groves Gunder manis & To Muy of meels Mary of Mr Harnestel Myer Live Jr J. Warn Affiner mich willy Johnsieron for 10 or 12 years ca en speak as a and regulability of more comments sugared

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as Mr Barnsal was only in factor a thort think Siffer our massings of drand Trenow what company he served wer in the army 4. his and Trusting Min. 1. Le saltsfactory. Tremadou Visy suspentfully.
Monte Barnard produced at the National Archives

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R	EGISTRY RETURN RECEIPT sent JUL 20 1900	_, 190
Re	eg. No. 200 From Post Office at WASHINGTON, E	). C.
20	Post Office at Mulfield, Moss	out cove
A)	fter obtaining receipt below, the Postmaster will mail this Card, without postage, to address on the other side.  **LETTER**	Service Artist of the Control of
	RECEIVED THE ABOVE DESCRIBED REGISTERED SANCES.  (SENDER'S NAME ON OTHER SIDE.)  Sign on dotted lines of the right.	L
th	When delivery is made to other an addressee, the name of both diressee and recipient must ap-	

## DECLARATION FOR PENSION

ACT OF MAY 1, 1920

The Pension Certificate Should Not Be Forwarded With the Application

State of New Ha	white, County of	Merry	nack	.88:
Bound)	day of January 1926			Public
	and State aforesaid, andra			, who, being duly
sworn according to law, dec	clares that he is. 8.3years of	of age, and a resident	of Wilm	ret
county of Meron	mack,	1	) Hampshi	12; and that he is the
identical person who was I	ENROLLED at Mater	oury	nd (	under the name
of Mareno f	Barrard.	Pop	Conn 1	al Sunt
	(Here State lank, as	ad company and regime	nt in the Army, or vessels if	in the Navy.)
and the second s	d States, in the	a (State II	ame of war, Civil or Mexican.	
	Y DISCHARGED at New Ho			
	Co C 2 7 E /	ement/of all other serv	ices, if any.)	
	being discharg			U 60 10
That his personal description	on at enlistment was as follows: He	eight. Tull. fe	et Trass (1)	mplexion. hight
color of eyes. M	arely 27 th 1843	at his occupation wa	Tield Con	er-being/84e
market be a control of the second of the second	ar personal aid and attendance of an			and the second of the second o
	remation. 2	ernia	Eczema,	, //
appetite.	and surabi		properly o	tress and
<i>R I</i> .	myself &		11 11 (1 /	7
That since leaving the serv	ice he has resided at	met 90	Since 1	7.1.3
and his occupation has bee		That he has	61202	pension under original
No. 201. 20.	That he is a pensioner under	CCI bilicate 1(0		
That he makes this de the Act of May 1, 1920.	claration for the purpose of being p	olaced on the pension	roll of the United States	under the provisions of
: (1) Mores	R-Grea	$ \mathcal{A}$	ndrew Jk	Samuel re in full.)
E William	not Not		Wilmot	
(Address of Dail J.	ss of first witness,)		(Claimant's address	s in full.)
(Signatur Williams (Signatur Address (Signatur	e of second witness.)	Tes Silver	_	
	of second witness.)			
Subscribed a	nd sworn to before me this/	day of	amary A	D. 1926 and I hereby
	certify that the contents of the abo	ve declaration were	fully made known and exp	plained to the applicant
	before swearing, including the wor	ds		
[L. S.]	erased, and the words			, added;
	and that I have no interest, direct	or indirect, in the p	rosecution of this claim.	
	9000	0.00	(Signature	A 0 ·
	Declaration accesses a claim under	1920	Notary P	evolucier.)
	pedaratu inder sa acte in 18.7 1, act of 18.7 1,	2 T. 2000	Wil	mot. Mt.
	200		(Post Office address	of officer.)

## DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

Washington, D. C., January 2, 1915.

Sir: Please answer, at your earliest convenience, the questions enumerated below. The information is requested for future use, and it may be of great value to your widow or children. Use the inclosed envelope, which requires no stamp.

Very respectfully,

ANDREW J BARNARD
WINDSORVILLE ME
261202 ACT MAY

R R 54



South Farms how Morris Liter The name of organizations in which you served? Answer. 60 D 12 Regt Comm. No. 2. What was your post office at enlistment? No. 3. State your wife's full name and her maiden name. No. 4. When, where, and by whom were you married? No. 5. Is there any official or church record of your marriage? Journ bla If so, where? Answer. ..... No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her death or divorce. If there was more than one previous marriage, let your answer include all former wives. July 5- 1900. Windler bonns

f your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any miltary or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. Answer (1 1 Hrusband) Hag No. 8. Are you now living with your wife, Barehland Barnand Born Oct- 10# 1868 Sied a ello Grant Bama d Bom Oct 1 € 1870 Waterbury Com DEC 6 = 1873 Date March 17 4 1915. (Signature) Undrew & Barna melvore maisa

The above title should be indorsed on every paper relating to this claim.

Washington, D. C., MAR 19 1901, 1...

Madam

In the above-entitled claim for pension, the evidence indicated in paragraph  $\sim No.\cancel{1.2.2.2.3}$  should be furnished.

No. 1. The claimant's statement, under oath, showing the character, location, and value of all property, real, personal, or mixed, including bonds, stocks, and investments, owned by has had any interest, and the full amount of his income per month or year from all sources since the support.

- No. 3. If any property is encumbered by mortgage or otherwise, there should be filed a duly authenticated transcript from the public records showing what property is encumbered and the amount of encumbrance.

This circular should be returned with the evidence.

Very respectfully,

Commissioner.

La Garnard St.

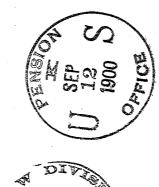
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SEP 14 1980

LAW DIVISION.

## Peparingent of the Unterior, Hurean of Pensions,

Washington, D. J. May //- 1900

Dry Hosetta Barmard

917-Wut Trace Street, Jackson, Mich.

madam,

In response to your request, enclosed find blank application under the act of March 3, 1899.

- 1. It will be necessary to file evidence of desertion, if pensioner is not an inmate of a Soldiers' Home.
- 2. A verified copy of the public or church record of the claimant's marriage to the pensioner; or, if no such record exists, the affidavit of the person who performed the ceremony; or, if that can not be procured, the testimony of credible persons who were present at the marriage, riage, showing the date thereof, should be filed.
- 3. Claimant's affidavit should be furnished, stating whether either she or the pensioner had been previously married, and, if so, whether more than once. The names of former consorts should be given, and the date of dissolution of any former marriage or marriages, stating whether by death or divorce.
- 4. If the claimant or pensioner had been previously married, the death or divorce of the former husband or wife should be proved—in case of death, by a verified copy of the public record, or, if no such record exists, by the testimony of credible witnesses; in case of divorce, by a certified copy of the decree of the court. If there was no prior marriage of either party, the fact should be shown by the testimony of credible witnesses.
- 5. Testimony of credible witnesses is required, showing whether the claimant lived with the pensioner to the date of desertion, and that she is of good moral character and in necessitous circumstances, and that neither she nor pensioner has applied for or obtained a divorce.

This circular should be returned with the application and evidence.

Very respectfully,

Commissioner.







LAW DIVISION.	3-0	980.	Act of March 3, 1899.				
M. F. To	}, Ex'r.	Ce	ard No				
Certificate No 261 é Pensioner, A. J. Ga	ruard Bepar	tment of	the Interior,				
Service, L. 27 Claimant,							
The above title should be indorsed relating to this claim	on every paper Washi	ington, D. C.,	JL 19 1900 , 1				
Madain:							
In the above-entitled	claim for payment of one-h	half pension under the	act of March 3, 1899, the evi-				
dence indicated in paragra	ph No.	snould	of ted you				
No. 1. Evidence that	the pense	ores were	rted you,				
as accege.	<u>a</u> ,						
or, if no such records exist procured, the testimony of	, the affidavit of the person credible persons who were idavit stating whether eith	who performed the cer e present at the marria er she or the pensioner	t's marriage to the pensioner; emony; or, if that can not be ge, showing the date thereof. had been previously married,				
and, if so, whether more the	han once; the names of for	rmer consorts, the date	of dissolution of any former				
marriage or marriages, and whether by death or divorce.  No. 4. If the claimant or pensioner had been previously married, the death or divorce of the							
hughand or wife should be	proved:—in case of death.	by a verified copy of the	e public record, or, it no such				
record exists, by the testing	ony of credible witnesses;	er party, the fact shoul	a certified copy of the decree d be shown by the testimony				
of credible witnesses.							
No. 5. Testimony of	credible witnesses showin	g whether the claiman	t lived with the pensioner to				
the date of		that she is of good I	noral character and in neces-				
sitous circumstances, and that neither she nor pensioner has applied for or obtained a divorce.  Whenever it is indicated above that a fact may be proved by more than one kind of evidence, the classes of							
are named in the order of the	oir nalue Fridence of a lowe	er class will not be accepted	a unitess it is shown that hone of a				
higher class can be obtained.	Copies of records should be	attested by the officer havi	ng custody thereof; and if he has				
no seal by which to authentica	te his signature, the attestation	should be under oath.	of the facts to which they testify,				
Witnesses must state their post-office addresses, ages, and means of knowledge of the facts to which they testify and write their names immediately after their statements, leaving no blank space over their signatures; and it should appear in the jurats that they knew the contents of their affidavits, and that erasures or alterations, if any, were							
This circular should b	be returned with the evider	nce.					
	Very respectfully,	ere e					
	₹ da						

Mrs. Rosetta Garnard, 517 W. Trail St., Jackson; Mich.



John Orowcombe, is of no value as soidence in the claim for the reason that it is not sworn to. It may be completed, as indicated, returned for consideration, be reported, and returned for consideration, be in lieu thereof, there should be furnished the testimony of another furnished the testimony of another person, of known to be reliable, as to claimant moral character and recessitous circumstances;

Reproduced at the National Archives Masse, on October 8, 1898, the shown fact and date should be shown by either a certified copy of the death records or by the testimony of two or more credible witness having personal knowledge sheroof.

The inclosed paper, purporting to be an affidavit and signed as by

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st Trail Ot., AUG 31 1900 In connection with your claim for one-half the pension payable to Andrew J. Barnard, Of. No. 261202, you are advised that evidence us required showing that the promp marriage or marriages of the pensioner, if there were any, to the legally dissolved prior to the from a statement made by pensioner in a communication addressed to the Dureau in March, 1898, that his wifes name was Elizabeth M. Barnard nee Benton, and that they were married march 26,1874, at they were married march 26,1874, at the residence of John St. Morse, by Rev. A. Judson Dage, Postor of the First

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The pensioner stated also, in the same letter, that he had been previously ly married to Elizabeth Buckland, of Windson Conn., who died Dec. 6,1873, at Waterbury, Conn.

Waterbury, Conn.

This probable that the necond of deaths in Waterbury, Conn., for waterbury, Confirm and the year 1873 will show confirm

Freproduced at the National Archives sciences statement as to the former back and date of death of the former wife, Elizabeth, and it is suggested that you correspond with the Deity clerk of said place in regard to the matter.

If as you state, pensioner's former wife Elizabeth M., died at

Reproduced at the National Archives

Masse, on October 8, 1898, the

fact and date should be shown

by either a sertified copy of the death

records or by the testimony of two

or more credible witness having

personal knowledge shereof.

The inclosed paper, purporting

to be an affidavit and signed as by

levidence in the claim for the reason that it is not own to. It may be completed, as indicated, returned for consideration be imported and returned for consideration furnished the testimony of another furnished the testimony of another person, of known to be reliable, as to claimant moral character and recessitous circumstances

Ctf. 261,202, Andrey J. Barnard, Corp.,D,27" Conn.V.Inf. Rosetta Barnard, Claimant under the Act of March 3, 1899.

LAW DIVISION
March 18, 1903.

ETT

Respectfully referred to the Chief of the Finance Division,

Inviting his attention to the former correspondence with the U. See Pension Agent at Boston, Mass., and the pensioner's letter of February 27, 1903, together with the evidence furnished by the beneficiary under date of November 13, 1901, showing that pensioner was alive at that time, which appears to have been overlooked in the former consideration of the claim.

As the pensioner was alive on February 27, 1903, there seems to be no reason, under the present practice of this Bureau, why

the beneficiary under the Act of March 3, 1899, should not be paid up to that time.

Early action is requested.

Chief of the Law Division.

LAW DIVISION.

## Peparingent of the Anterior, Bureau of Pensions,

WFR.

Washington, A. C., July 23, 1904.

Mrs. Rosetta Barnard,

340 Third Street,

Jackson, Michigan.

Madam:

The Bureau is in receipt of your letter of July 10th, instant, in which you refer to your claim under the Act of March 3, 1899, as the deserted wife of Andrew J.Barnard, Co. D, 27th Conn. Vol. Inf., Cert. No. 261,202, and in which you refer to the payments of the one half pension to you, that you presume that the pensioner is indeavoring to secure a divorce from you, and ask what effect it would have in the payments made in your claim.

You are advised that all communications relative to payments in your claim should be addressed to the U. S. Pension Agent at Boston, Massachusetts.

In the matter of divorce it is to be stated that should the pensioner succeed in securing a divorce from you, you would no longer be his lawful wife, and your name would be dropped from the rolls, and the pension in its entirety would be resumed to the pensioner.

Very respectfully,

Pensiona a & Barnard 940 Third At-Cert ho 261202 2.27 Megs. Vol Juft. Bonn as I have not received the one half Pension due June this is probable Barnard is still trying to get a divorce. I have be comed by four means but should be succeed in doing to will the whole of his pension go to him is should I still be entitled to one half: I suppose by hrvens ing offrdavits, as before I

**3-416.** • (Old No. 3-526.)

(Old No. 5-526.)

Division.

#### Department of the Interior,

BUREAU OF PENSIONS.

Washington, D. C., 190\_

No. Claim

Cert. No. 26/202

Claimant, Costta Barnar

Soldier,

Co. D. 24 Regit Com Suf

Respectfully referred to

Chief of Finance

tion to attached letter

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This woucher, with

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to wife, in her dain

undurket of March 3, 1899

Teting Chief of Law Division.

FINANCE DIVISION. Department of th BUREAU OF Respectfully Melurnik tue Chief, Finance Division. Department of the Interior, BUREAU OF PENSIONS, Respectfully referred

Reproduced at the National Archives 340 Thirdrend trees Jackson Mich Dest 28 1903 ert ho 26/202 lo D. 27 Kegt. Lown. Commissioner Ware Washington S. E. Dear Sir. We wrote to the Vension agent at Boston for forms to be filled as instructed by you when the affadain were returned to us in September had them filled as directed and forwarded to J. M. Pember I medfield. Mass. to sign them, as we did not hear from him we wrote and he returned the papers refusing to sign Them. We would only conclude that Barnard had persuaded him not to, so we then sent them to the lawyers of Boston asking them to get their signed for us, after considerable delay they obtain ed them for us, their letter I enclose, please return with your answer, my object in sending the papers to you first, is to ask, as they are dated Deet 22th if it will not be sufficient to warrant the Pension agent in sending me the vonether for Deet His without any further papers from melfull as you see it will be almost impossible to get any

Thing further from them, besides the present ones have already cost me nearly 18 dollars and it would work more than it amounted to to send them to Bostow again. If convenient will you kindly forward the enclosed woucher to the Pension agent of Bostow to save time and oblige, yours respectfully hostow Barnaras.



# DEPARTMENT OF THE INTERIOR, UNITED STATES PENSION AGENCY,

Boston, Mass., Oct. 6th, 1904

Hon. E. F. Ware,

Commissioner of Pensions,

Washington, D. C.

Sir:-

I have the honor to enclose herewith, supplemental voucher in the case of Rosetta Barnard, payable under the Act of March 3rd, 1899, and request instructions as to payment.

Executed voucher in the case of Andrew J. Barnard, certificate No. 261,202, has not been received.

Very respectfully,

U. S. Pension Agent.

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To determine whether the Claimant is a woman of good mosal character and in necessitoins, einematanees and whether the penaiones descrited here have letter dated application of the ferral and applications.

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Aureau of Pensions,					
OFFICE OF THE COMMISSIONER, 1901					
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			6.2		
			Com	missioner.	

Vensioner a. J. Barnard 1. 1 Third Street Juston Mich. Febt 6 th 1904 Cert no 261.202 lo D. 27 Regt Vol Inst. Pour. Mr E. Harc. Commissioner of Pension Harington D. C. Many thanks for your fromplaces in forwarding the worden for To be Pension agent at Boston. I received chaque for some fanty 28th also voncher for godne Scoth Febrush I received a letter from him stating that before payment could be made he must be furnished with the affection of two persons to show he is living and in some place as they The affidavils I sent you, from modfield, Deal 25" cost 8. 63 the last time and 9.2 to for the same one before. If it is necessary the Vension agent should. be frished with them before payment will not trincely forward the same to him as seems of they were sufficient for the 90 the would prove he was living Dect 4th when it was due saing they was to that effect Dect 22 can they not be made available by a decision

The board? If there are required it will will about as anneh as it comes to if I can get them but the Lawyers in Boston had different in getting them last time as Barnard is using his influence to permade the parties not a sign and they doubted y any more could be precured I shall feel deeply gratefull if you will kindly interest yourselfully, wery respectfully,



#### LAW DIVISION.

# Perantuent of the Antegior, Bureau of Pensions,

Walladia.

Mashington, A. J., Jenuary 4, 1904.

The United States Pension Agent,

Boston, Eassachusetts.

Sir:

nard, who it appears is in receipt of one half the pension, under the Act of March 3. 1899, of Andrew J. Barnard, Company D, 27 Connecticut Volunteer Infantry, certificate number 261,202, together with an affide it showing that the pensioner is alive, and a voucher for the September 4, 1903, payment to her.

These papers were evidently referred to the Bureau under a misapprehension in the premises, and they are referred to you for consideration and such action as may be justified.

Very respectfully,

Commissioner.

enc

AR & NUTTER.

LOUIS D. BRANDEIS.
D. BLAKELY HOAR.
WILLIAM H. DUNBAR.
GEORGE R. NUTTER.
EDWARD F. Mc CLENNEN.

JOHN G. PALFREY.
J. BUTLER STUDLEY.

220 DEVONSHIRE STREET.

BOSTON, MASS., December 23

 $_{
m H/N}$ 

CABLE ADDRESS, "BRANDEIS, BOSTON."

Messrs. Parkinson & Campbell.

Jackson, Mich.

Gentlemen: -

Re Barnard.

Your favor of the 17th inst. was received and contents noted. We have been able to obtain depositions for you, which we trust will be satisfactory to the United States authorities. The witnesses were reluctant to make oath as you desired, and it would probably be impossible to obtain further depositions. Barnard has talked with them regarding the matter, and had obtained promises from them to do nothing further. We were, however, able to prevail upon them to do as you desired. We enclose papers sent by you to us in the matter, and also memorandum of our charges.

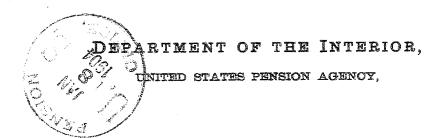
Yours very truly,

Brandis Dunka, Matter

Enclosures.







Boston, Mass., January 7th, 1904

Hon. E. F. Ware,

Commissioner of Pensions,

Washington, D. C.

Sir:-

I have the honor to enclose herewith, supplemental voucher of Rosetta Barnard for one-half the pension due in the case of Andrew J. Barnard, certificate No. 261,202, also affidavit of two witnesses, and respectfully ask if the affidavit of witnesses is satisfactory and if voucher should be paid.

Very respectfully,

U. S. Pension Agent.

26/202

JVI O 100

3–416.
(Old No. 3–526.)

Division.

#### Department of the Interior,

BUREAU OF PENSIONS.

Washington, D. C., SEP 16 190390

No. Claim, Cert. No. Act March 3.1899. NATHAN BICKFORD.

Pension and Patent Attorney,

WASHINGTON, D. C.

Jan Co. 261, 202

Machine J. Barnard

J. Borner

J. Borner

D. Barnard

MAY 20 1902

Mean of Pensions

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#### DEPARTMENT OF THE INTERIOR,

UNITED STATES PENSION AGENCY,

Boston, Mass., March 3rd, 1904

Hon. E. F. Ware,

Commissioner of Pensions,

Washington, D. C.

Sir:-

I have the honor to acknowledge the receipt of your letter of the 1st, inst., from Finance Division, in relation to the case of Andrew J. Barnard, certificate No. 261,202, one-half of whose pension is payable to the wife, Rosetta Barnard, under the Act of March 3rd, 1899, in which it is claimed by the wife that payment should have been made to Docember 4th, 1903, instead of to September 4th, 1903.

In reply would say that the <u>voucher</u> on which payment was made to Mrs. Barnard on January 27th, 1904, was executed on <u>October 2nd</u>, 1903, and the <u>affidavit</u> which accompanied voucher was executed on <u>December 22nd</u>, 1903, so that payment was made on voucher only to September 4th, 1903.

I will be obliged if you will advise me if my action in this matter was correct.

Very respectfully,

W. S. Pension Agent.

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ALTE IN

26/202

Ç

1911 ON 1911

#### BRIEF FOR DROPPING

Claimant, Posette France & Son County, Frack Son State, State,	Rank, Company, Donney Bonney B
Rate, \$per month, commencing	Toptono Vi Tranfolkbo
Submitted Dack Tibb, 1911; Pensione diso	Pearce Thompson, Examiner.
Approved for- Ap	Approved for—
having obtained a disofte from her in the superjoy Court within	
Massachusetts, Hannay 20, 1911.	Mark Mark Mark Mark Mark Mark Mark Mark
Leggl Reviewer.	Medical Examiner. Medical Reviewer.  , 19, Medical Referee.

### Commonwealth of Massachusetts.

C		
Suffolk, ss.	hereby certify that at the Superior Cou	URT holden
	for the County of Suffolk, on the Mineteentle	
. \		
day of	by the Court, between and term Bannan	[ATRIMONY
—Nisi—was decreed b	by the Court, between Macleur Darman	<u>a</u>
	of Raid Borton	
	libellant, and Rosetta Barnard	
	on, in the State of Muching	
libellee, in favor of sa	aid libellant, for the cause which is fully set forth in the libel on file in	said court
to wit:		
	exertion on the part of the	1
Raid libe	elle,	
••		
••••		
to become absolute af	fter the expiration of six months, unless the Court shall have for suffic	ient cause,
on application of any p	party interested, otherwise ordered.	
And on the	wentieth day of January	A. D.19//
	having expired, and the Court not having otherwise ordered, said decr	/
absolute.		
	In testimony whereof I have hereunto set my hand, and affixed to	
	said Court, at Boston, this thirtieth	day
	of assuary A. D. 19/1.	
	Transis A STEAM	bly II
		Clerk.
		/ P 5 0 )
AMA .	TLAW DIVINION (	TT EE ~!
(	FEB 2 1	
	ACCIONATION	NORTHE!
Form 70-5-28-10-1,000.		

CERTIFICATE OF

DECREE OF DIVORCE, ABSOLUTE.

andrew Barnard

Roserta Barnard

Paper.

FEB 2 1911"

## DEPARTMENT OF THE INTERIOR, UNITED STATES PENSION AGENCY,

Boston, Mass., February 1, 1911

Hon. J. L. Davenport,

Commissioner of Pensions,

Washington, D. C.

Sir:

I have the honor to acknowledge the receipt of Bureau letter of the 28th ultimo, from Law Division, directing that payment be suspended to Rosetta Barnard under Act of March 3rd, 1899, of one-half the pension allowed Andrew J. Barnard, certificate No. 261202, Act February 6th, 1907, pending further instructions from the Bureau.

Very respectfully

W. S. Pension Agent







TEB 2 1911

#### DEPARTMENT OF THE INTERIOR, UNITED STATES PENSION AGENCY.

Boston, Mass., February 1,1911

Hon. J. L. Davenport,

Commissioner of Pensions,

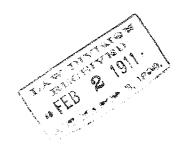
Washington, D. C.

Sir:

I have the honor to acknowledge the receipt of Bureau letter of the 28th ultimo, from Law Division (returned herewith as requested), in relation to the admitted claim of Rosetta Barnard under Act of March 3rd, 1899, for one-half the pension allowed Andrew J. Barnard, certificate No. 261,202, Act February 6th, 1907, and in reply to state that payment to the pensioner and beneficiary was last made on December 10th, to December 4th, 1910, and their respective addresses were, "Foxboro, Mass." and "No. 805 West High St., Jackson, Michigan."

Very respentfully,

U.S. Pension Agent







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HAMA.

, ,,, OFFICE OF

JOHN E. ROWLEY
ATTORNEY AT LAW

12 AND 20 PEMBERTON SQUARE
ROOMS 411, 412 AND 413

BOSTON

TELEPHONE HAYMARKET 691

Boston, Mass. Jan. 31, 1911.

J. L. Davenport, Esq., Commissioner, Washington. D. C.

Dear Sir:

In the matter of admitted claim of Rosetta parnard, under the act of March 3, 1899, for one-half of pension of Andrew J. Barnard, Company D., 27th Conn. Volunteer Infantry, would say that the pensioner has obtained a decree of divorce from the beneficiary, certificate of such decree being enclosed. This action was contested by the beneficiary through counsel and was tried and a decree of divorce granted the pensioner. The pensioner now asks that his full pension be restored to him. In accordance with your request in your letter of Jan. 28th, I enclose certified copy of the decree of divorce.

Yours very truly,

Medani Barna

### ACT OF MARCH 3, 1899.

CLASS, Descrited W.	ye.
Claimant, Sosetta Barnard	Pensioner, Andrew J. Jarmar
57 W. Trail est.	Rank, Copl Con 27, Reg't Conn Vol
P.O., Jackson, Thick.	Rank, Con ; Con 27, Regit, oun lot
County, Jackson, State, Mich	Cert. No. 26/202, Rate, \$ 6 per M.
CHILDREN IIN	IDER 16 YEARS.
	DER 10 TEARS.
	Born, 18
	Sixteen
	( Born, 18
	Sixteen, 18
	(Sixteen, 18
	(Born, 18
	Sixteen, 18
RECOGNIZEI	D ATTORNEY.
Name, Olone	Fee, \$ Agent to pay.
P. O.,	
	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
IMPORTA	NT DATES.
Declaration filed une 2 ,1900	Date of app't of guardian, 18
/ / _ /	Former marriage of wife 18
	Former marriage of whe 18
Pension agent notified	Death of former husband Steb 21, 1884
Auditor notified	Former marriage of soldier 18.
Governor of Home notified, 18	Death of former wife Deat 6, 1873
Claimant notified May 1, 1901.  Date of desertion Oct 23, 1899	Claimants' marriage to soldier July 5, 1899
Date of desertion Oct 23	Date of entry in Soldiers' Home, 18
the second days are se	Dave of entity in Soldiers Home, 18
APPRO	OVALS.
Submitted for Opl. Ex. april 9 18901	Word Brooke, Examiner.
Submitted for Opl. Ex. April 9, 1901  Approved for a grant 27, 1901	a cc "
Approved for	Approved for
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er kaja koma in <u>Portonijo jogo</u> moli <del>moli moli od 100 met.</del> Portonijo kom <u>o jogo portonijo portonijo portonijo portonijo portonijo portonijo portonijo portonijo portonijo p</u>	
M	
May ), 180/, Legal Reviewer.	18. Medical Reviewer
(1) (ay ), 180/, Legal Reviewer.	, 18, Medical Reviewer. , Medical Referee.

Index Sheet, Claim No. 261202

Rosetta Barnard, wife of Andrew J. Barnard, Service, Corpl Oo. D, 27 Down Vol. Onf.

<u> </u>			
NO.	NAME AND P. O. ADDRESS.	DATE OF FILING.	SUBJECT.
1	Claimant 517 W. Frail St. ( Jockson, mich.	June 2,1900	Declaration
2	" "	Aug 23,00	Affi as to death form hus.
3	decord (copy) she	ich.	of parties on July 5,1899,
	Family circular	1	
S	Etf of death of occurred Dec. 6,	Elizabet	the B. form wife, Death raterbury, Conn)
6	Of of death of action, mass.	Elizabeth	M., formerje, Deid at.
7	John Genderman River Mich	. Ang 23,00	Death form husb, Bur- man on Feb. 21, 1884.
8	" "	June 2,00	e e e
9	John Keffernan	Aug 23, 00	a a a
/0	Elizabeth ann Barto.	Jeb 7, 01	Chut not previously md ex. to Burman.
11	Deo. Dudley lavr. Bucklingham England	11 11 01	le ce ce "
12	John Proveombe Jockson Mich	1	Clut not morried after death of Burnon until she md, pensioner.
13	Lucy Way Jackson Mich.	11 11 11	Do Do Do
14	John McDevitt	Aug 23,00	Des, char & need of
15	Jeo. D. Wilson Jackson Mich	, a a	
16	John Prowcombe Jackson Mich	10 10 17	u ce u ."
17	Joan Helmer	Dept10,00	Letter not moterial.

Note—In the execution of papers and evidence, whenever a person or witness signs b must attest the signature by signing their names opposite.

The official before whom papers are executed is not a competent witness to mark.

Rep	roduced at the National Archives
#.	nd subscribed before me this day by the above named affiant ; and I certify that
_	I read said affidavit to said affiant and acquainted h with its contents before he executed the same.
or his	I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution;
ly for	and that said affiant personally known to me; that he
evisi	creditable person and so reputed in the community in which he reside
exclusivəly	Witness my hand and official seal this day of 190
$^{13}$	ADD SEAL HERE [Sign Here]
and	Note—If sworn to before Clerk of Court of Record or Notary Public HAVING A SEAL, no County Clerk's certificate is required.
Mich,	
_	and the state of th The state of the state o
Jackson,	State of
of Ja	County of
Knowles, of	I,
now	
D. K	County and State, do certify thatEsq., who
y R.	hath signed his name to the aforegoing affidavit, was at the time of so doing a
ed by	in and for said County and State, duly commissioned and sworn;
prepared	than all his official acts are entitled to full faith and credit, and that his signature thereto is genuine.
is pi	Witness my hand and seal of office this day of 190
lank	
nis b	Clerk of the
Ţ	
	en de la composition de la composition La composition de la
	FILDAVIT OF FILED BY KNOV acksou, Mich.
	Jack X X
	So H

# s useless to make application unless husband is a pensioner

3-012.

### DECLARATION OF WIFE UNDER ACT OF MARCH 3, 1899.

STATE OF Michigan
COUNTY OF Jacicson \ 88:
On this 27th day of May, A. D., 1904, personally appeared before me, a
Justile of the Peace within and for the County and State aforesaid, Mrs. Rosetta
Barnard, aged 49 years, a resident of lesty of Jackson
County of Jackson, State of Michigan, who being
duly sworn according to law, makes the following declaration in order to obtain one-half of the pension due or to
become due her husband Mr Andrew Barward, who is a resident pensioner of the
United States, and who left sul October 23td, 899 and he has not If an inmate of a State or National Soldiers' Home, the name and location of the Home should be fully stated.
contributed one cent for my support since Oct 23 1899. I have never
Meand from Sum, and I do not stow where he is at.  If not an inmate of a Soldiers' Home, but the pensioner has deserted his lawful wife for a period of over six months, the facts should be fully stated here.
this date or since he deserted me
That her said husband served as a Private in le served four years.  Rank. Here give full service of husband.
and I think belonged to some Massa clusetts Company and now belongs
and 173 & 4 R. Acton Mana, and is a pensioner by certificate number 261,207
That she was married under the name of Mrs Rosetta Burman to said
andrew & Barnard at City of Jackson Michigan, on
the 5th day of July , 1899, by Rev ER Curry
that there was no legal barrier to the marriage; that she had oucl been previously married; that the
rew & Barnard had twice been previously married.
Job Burnaumy former husband died February 21st 1884 and If there was a prior marriage of either, the date and place of death or divorce of former consorts or consorts should be stated.
drew I Barnard's first wife is dead but I do not smow the date or place of death and second wife died October 8th, 898 is a cton. Mass achusetts.
That she has not been divorced from her said husband; that she is a woman of good moral character and in
necessitous circumstances, and is an inmate of any institution or home provided for the wives or children
of soldiers and sailors.
That her post-office address is 317 West Trailst bity of Jackson, County of
Jackson, State of Michigan
B. To a
Ctaimant's signature.
Attest:
1 John lesonation RENSION
2 John ME Devite (U. 2005)
John ME Devett V. 1900 S.

Also personally appeared John	in Corour co	walke posidin	ast Jackson	Mielidan
and John Medewi	***************************************	esiding at Ta	escan M	nichian
persons whom I certify to be respect				: (/
present and saw Rosetta B		•		
mark) to the foregoing declaration;	that they have ever	ry reason to believ	e, from the appeara	nce of said claimant
and their acquaintance with her for-	18 years an	d year	s, respectively, that	she is the identical
person she represents herself to be;	and that they have	no interest in the	prosecution of this	claim.
		1. Jole	u brou	coul
		2 John	u brou M= De	with
•	4		[Signatures of witnesses.]	
Sworn to and subscribed before	me this 29th d	ay of Ma	<u>y</u>	, A. D. 190, and
I hereby certify that the contents of	the above declaration	on, etc., were fully	made known and ex	xplained to the appli-
cant and witnesses before swearing,	including the word	8	е	rased, and the words
<i></i>	added; and that	I have no interest	, direct or indirect,	in the prosecution of
this claim.	•			
		John	e Heliiles [Signature.]	· · · · · · · · · · · · · · · · · · ·
		Juste	is of the	Place
			Official character.	]

To be executed before some officer of a court of record having custody of its seal, a notary public, justice of the peace, or other officer authorized to administer oaths for general purposes. If such officer is not required by law to have and use a seal, his official character, signature, and term of office must be certified by the proper State, county, or city officer under his official seal, unless such a certificate has been filed in the Bureau of Pensions for general reference.

Testimony in support of allegations made in a declaration may be taken before any officer whose authority and

signature are duly certified, and who shall disclaim any interest, direct or indirect, in the prosecution of the claim. CLAIM FOR ONE-HALF PEN ACT OF MARCH 3, 1899. No. of Certificate:

years,

years.

Note—In the execution of papers and evidence, whenever a person or witness signs by mark (†), two persons who can write must attest the signature by signing their names opposite.

The official before whom papers are executed is not a competent witness to mark.

1	Sworn to and subscribed before me this day by the above named affiant ; and I certify that I read said affidavit to said
1112	affiant and acquainted her with its contents before Rhe executed the same. I further certify that I am in no wise inter-
	ested in said case, nor am I concerned in its prosecution; and that said affiant in person-
	ally known to me; that the second and so reputed in the community in which the
200	reside. Witness my hand and official seal this 27th day of March 1901.
	(Add Seal Here.) John Here.) John Here.)
	Note—If sworn to before Clerk of Court of Record or Notary Public HAVING A SEAR, no County Clerk's certificate is required.
1111111	
77	
	State of
11.1	Gounty of
1	I,Clerk of the County Court in aforesaid County and
g demand	State, do certify that Esq., who hath signed his name to
Sec. 344	the aforegoing affidavit, was at the time of so doing a
3.0	in and for said county and state, duly commissioned and sworn; that all his official
-	acts are entitled to full faith and credit, and that his signature thereto is genuine.
	Witness my hand and seal thisday of190
31.61.1	and the second of the second o
100	Clerk of the
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3.4483	andre de la companya de la companya Nota de la companya
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### The Coomis Abstract Company.

ABSTRACT BOOKS COMPILED IN 1864.
AND TESTED BY CONSTANT USE SINCE THAT DATE

Room 504 Carter Building. Phone No. 885.

G. S. LOOMIS, Manager.

Jackson, Michigan, March 27 1901.

in Block (8) of Stewards Third addition to the City of Rox (12)
in Block (8) of Stewards Third addition to the City
of Jackson, (recurring for the surpose of a joint driveray
the use of a strip of land (5) feet in width off the
East side of said land) and the use for said driveray of
a like strip of land (5) feet in midth off the Hest side
of the East 1/2 of said Rox. Subject to a mortgage
given for 625 to the american Building of Roan
anxiention of Jackson mich.

Loomis Abstract Co.

State of Michigan 55-Country of Jackson 5 by A. H. Holf abstractor Sworm to and Subscribed before me this of the day of march 1901 by the above named afficult, and I certify that said afficult is personally suown to me, that he is a creditable person and so reputed in the community in which he resides John Holling

Justice of the Peace County of Jackson States of Michigan

State of Michigan			
County of Jackson	55		·
In the matter of Claim of Mrs. Ruse	tta Barna	rd for /2 of he	usion.
of andrew & Barnard			
Personally came before me, a Justice of the	Prace	in and for afores	aid County and
State, Wusley Dears		aged	years,
		ageu	years,
and	age(	d	years,
citizen of the Octy of Jackson	County of	Jackson	State of
Michigan, well	known to me to be re	eputable and entitled to credi	it, and who, be-
ing duly sworn, declare in relation to aforesaid case as follows	·		
		on County, M	illigan.
I am the register of Deeds of find that Mrs Rosetta Baris	formally m	ra Rasetta Burn	r of Lat
thing the grant their	distingt	the pil in	
12 in block 8 of Stewards and			* /
County of Jackson State of	Muelig.	aw reservin	g fertho
purpose of a joint driveway to	the use of	a strip of lan	d 5 feet in
with off the East side of said			the state of the s
of a like strip of land 5 feet in		1	
East Is of said lot. Said hr	operty i	2 Subject to	a mortgage
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for the of the off	······································	i p de	
association of Jacob	ou in	-	
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further declare that	avz	no interest in said case	and and
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Norman In the execution of papers and evidence whenever a p	ffiants.	for yne fise	mehila

tate of Milligan	)	
ounty o Jackson	<b>55</b>	
In the matter of Claim of Mrs	Rosetta, Barnara	for 1/2 ofpension
fandrew JBarnar	d	
ersonally came before me, a Justice of tate, Julian M. Sewar	d	in and for aforesaid County and
ate,		aged years,
nd	aged	years,
tizen of the City of Jack	fice Address.]	ekseen State of
		and entitled to credit, and who, be-
g duly sworn, declare 2 in relation to aforesaid case as	follows:	·
I am the supervisor of I	he second ward in	the lity of Jackson
ounty of Jackson State of		
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teat Mrs Rosetta Barnard le		
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trau \$70000 at its true cas	he value I jud to	ture is a nevertgay
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of andrew & Barna	rd			<i>/</i>	
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ate, - Jeorge Ceebles	<u> </u>		aged	32 y	ears,
d				y	ears,
pit Orak	1	Ü			
izen of the City of Jack	e Address.]	y of fa	ells	Stat	te of
	, well known to me				
		.*			
g duly sworn, declare in relation to aforesaid case as fo				12.2.1	, .
acu the Treasurer of	fthe Co	ty of Ju	ello	i, mice	uga
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ity of Jackson and des in block 8 of Stewards & this property is exemp for the years 189941900	third to	the city they	west of Ja 2 g Ja 2 and Contract	eksou hasb	
further declare that	third to	the city they	west 1 7 of Ja 2 and Con	eksou hasb	<u> </u>
further declare that	third to	the city they	west of Ja 2 g Ja 2 and Contract	eksou hasb	<u> </u>
further declare that	third to	the city they	west of Ja 2 g Ja 2 and Contract	eksou hasb	<u> </u>
ity of Jackson and des in block 8 of Stewards : this property is exemp for the years 189941900	third to	the city they	west of Ja 2 g Ja 2 and Contract	eksou hasb	<u></u>
further declare that	third to	the city they	west of Ja 2 g Ja 2 and Contract	eksou hasb	<u></u>

# 20.247 Marriage License. 1899.

Jackson County, Michigan.

To any Person legally authorized to solemnize marriage,

### Greeting:

Marriage may be solemnized between

Mr. Undrew f, Barnard and	Mrs, Prosetta Burman
affidavit having been filed in this office, as provided	
that said andus Carnas	is 36 years of age, color is white,
residence is Octon, Mass, and	birthplace was Litchfield, Mass
occupation is Januar, father	•
and mother's maiden name was	, has been previously
married & time; and that said Rosett	a Curnar is Hyears of age,
color is white, residence is	
was ingland, occ	cupation is, father's
name A Claus Sout, and mother's	naiden name was hart,
and who has been previously married time, and	d whose maiden name was,
and whoseconsent, in case	she has not attained the age of eighteen years,
has been filed in my office.	
In Witness W	thereof, I have hereunto attached my hand and
the seal	of Jackson County, Michigan, this day
L. S. }	Xuly , A. D. 1199
	COUNT CLERK.
×	
Certificate of	Marriago
Cernicale of	znattage.
Between Mr. andrew & Barnara	and Mra Prosetta Busman
3 Hereby Certify that, in accordance with the	ne above license, the persons herein mentioned
were joined in marriage by me, at	, County of Jackson, Michigan,
on the Saday of A. D. R. D. R. D.	, in the presence of John Crawcomb
of Jakon Wand Kungal	introversity Lackson, Suit
as witnesses.	2 00
-	NAME OF MAGISTRATE OP GERGYMAN.
	Party of par Balitist 19
The second secon	JOFFICIAL TITLE.

STATE OF MICHIGAN,

COUNTY OF JACKSON,

Clerk of said County of Jackson, and Clerk of the Circuit Court for said County, do hereby certify that I have compared the foregoing copy of the original record of Marriage License, and Certificate of Marriage, with the original record thereof, now remaining in my office, and that it is a true and correct transcript therefrom, and of the whole of such original record.

In testimony whereof, I have hereunto set my hand, and affixed the seal of said Court and County, this day of A. D.

Co Conebach, Verperty

Clerk.

CERTIFIED COPY.

No. 247 1899

## LICENSE AND CERTIFICATE OF MARRIAGE.

and Barnard

Rosella Guerman

CLERK'S OFFICE, County of Jackson.

eday of	Received for Record the
and Recorded	A. D.
es, on Page	in Liberof Marriages,
Clerk.	
	7



Registrars should not accept Certificates that are written illegibly, or with a lead pencil.

BUREAU OF VITAL STATISTICS.

State of Connecticut.

#### CERTIFICATE OF DEATH.

To be returned to the Registrar of the Town in which the Death occurred, as the Law directs.

I CERTIFY the following return to be correct from the best information which I can obtain: Men name in full was Elizabeth Maiden Name, if wife or widow ..... \_\_\_\_\_\_Street, \_\_\_\_\_ ...... Ward, Town of .... Place of Death, No. \_ Number of Families, if tenement house\_\_\_\_\_\_, Duration of Disease \_\_\_\_\_ DIC. 18\$73Residence at time of Death... Date of Death ... (o ... day of ... ..., †Race \_\_\_\_\_, Occupation \_\_\_ Sexif a wife or widow, Husband's Name Winden. Law. State or Country. Birthplace ... Father's Name \_\_\_ .. Mother's Name ... Birthplace of Father..... Mother Cause of Death, Secondary . Written legibly with-out abbreviations. Signature of Physician, Waterly lex. this Dated at [SEE OVER.] \*Insert his or her.
†If other than white—(A.) African. (M.) Mulatto, (E) Indian. If other races, specify what.
‡Single, Married, or Widowed. Attest, varrie L. Eldredge alet.

#### INSTRUCTIONS.

The point of most scientific interest in this Certificate is the Disease or Cause of Death.

The "Primary" disease is the first or original disease. Any complication or consequence of that should be entered as "Secondary;" for istance, enter all cases of death resulting either immediately or remotely from measles, phthisis, typhoid fever, scarlet fever, endocarditis, etc., as primary; and bronchitis, bleeding from the lungs or bowels, dropsy, etc., if these occurred as complications, and were the more immediate cause of death, as "Secondary." In cases of death from hemorrhage, state the place of hemorrhage, thus: hemorrhage from lungs, from wound of femoral artery, etc. Avoid general terms as disease of brain, of liver, of spine, of lungs, etc., and report the special character of such disease. Whenever it is possible to be specific, do not report old age, debility, heart failure, paralysis of brain, and like terms of indefinite meaning.

The census in cities has been taken by wards; hence it is desirable that the certificates of death should state the ward in which the death occurred

This Certificate received for record on the .....

Place of Burial, ......Cemete

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Law Division

	Reproduced at the National Archives subscribed	l before me this	day by the above na	med affiant a	nd I certify that
W11	I read said affidavit to said affian				
is or	I further certify that I am in				
for h	and that said affiant	**			
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exc	Witness my hand and officia	l seal this JWL w	ly six day	ofguy	1900
and is	ADD SEAL HERE	[Sign Here]		ook No	Janes Pressie.
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	CASE	For	DAV	HI led by	KNO
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	:	ale politica Section			

To whom this may concern I have known mrs Roselle Barnard as the wife and widow offore Burman Dec of 1880 to march of 1893 as I hvas pastor of the River Baptist church for 12 years of that time at Rives Junction where the said mrs B. had her home during those years. I am personally knowing to the death of her former husband mr Burman whose funeral services were held at the church of which I was then paolor and I preached the sermon on thatoccasion, a hur Handy, then residing at-Leshie mich, but now of Detroit mich, was the undertaker. Mr. Burman left at his decease a large family of children inver

ners destille circumstances acquaintance with the said hirs B, as before referred to, She was of respectably carachter and deportment so far as I ever dictalia! Rives Jimelion mich may 25th 1900





Reproduced at the National Archives	Jan Division WLB Exa
GENERAL	AIIIDAVII Certificate vo 26/202
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State of Mengure County of Jackson	ss Service D countreling
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and State, John Heffern	aged 5.8 years,
and The state of t	aged years,
citizen of the formally of [Postoffice	Address County of Jack State of
	well known to me to be reputable and entitled to credit, and
who, being duly sworn, declare in relation to aforesaid	case as follows:
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and he further declares that he	no interest in said case and
not concerned in its prosecution.	$\mathcal{O}(1)$
1010 ook 10 - NE HO S	signature Am Kepfernan
	of Affiants.
NOTE—In the execution of papers and evidence, whenever a product the signature by signing their names opposite.	person or witness signs by mark (†). two persons who can write
The official before whom papers are executed is not a compe	etent witness to mark.

F	Reproduced at the National Archives
	subscribed before me this day by the above named affiant ; and I certify that
ошп	I read said affidavit to said affiant and acquainted how with its contents before he executed the same.
his	I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution;
y for	and that said affiant personally known to me; that he
levis	creditable person and so reputed in the community in which he reside
exclusivəly	Witness my hand and official seal this Twenty bix day of July 1900
$\cdot \tilde{\mathbf{x}}$	Witness my hand and official seal this Twenty bix day of July 1900  ADD SEAL HERE [Sign Here] Who or Notary Reselves  North Manager Clark of Court of Record or Notary Public HAVING ADDA TO Selves continued in required.
, and	NOTE—If sworn to before Clerk of Court of Record or Notary Public HAVING ASEAL, no County Clerk's certificate is required.
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Kn	County and State, do certify thatEsq., who
R. D	hath signed his name to the aforegoing affidavit, was at the time of so doing a
d by	in and for said County and State, duly commissioned and sworn;
prepared	than all his official acts are entitled to full faith and credit, and that his signature thereto is genuine.
is pr	Witness my hand and seal of office this day of 190
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	CASE OF For Fried by KXNOV ackson, Mich
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Declared at Benkingham in the County of Benkingham wi England this Fifteenth \_ Lay of January 1904 Defen wie

Elysbeth am Barton

"A COMMISSIONER TO ADMINISTER OATHS IN THE SUPREME COURT OF JUDICATURE IN ENGLAND."

I Leone Dudley Cave of Buckingham in the County of Suckingham England Buckher do soleculy and succesely declare as follows: I Heat I keens and an well argusinted with Rosetta Barnara now the Wife of Andrew I Barnard of 517 Toest Irail Street Jackson County withe thicked States of america. That the said Resetta Burnard was forwerly Resetta gent Suifewoun and leved attadbury in the County of Buckingham Eugland, and that she married me Lob Surman on or about the 14 day of July 1871 -I That prior tober hearings with the said It Burnen the said Knetta gent hadnever previously been meanied, and was at the date ofher said hearings aspiristes. 3 Heat I have been informed and believe that the said lot Buruan died in the bluited States of america, and that in the month of July 1899 the said Resetta Burneau intermaries with and is now the Wife of the said andrew I Barward. And I make this solemn Declaration consciouting, believing the same to be true and by vistue of the Statutory Declarations act 1835 (Declared at Berekingham George Gudley Care in the Country of Buckerspan England this Fifteenth day of Jaurery 1901 Lefte un H. Small "A COMMISSIONER TO ADMINISTER OATHS IN THE SUPREME COURT OF JUDICATURE IN ENGLAND."

State of Miele	igan	· · · · · · · · · · · · · · · · · · ·		v.	
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Sworn to and subscribed before me this day by the above na	med affiant ; and I certify that I read said affidavit to said
affiant and acquainted him with its contents before he exec	uted the same. I further certify that I am in no wise inter-
ested in said case, nor am I concerned in its prosecution; and that sa	id affiant person-
ally known to me; that he a credita	
reside. Witness my hand and official seal this	John Helmer Justice of the Bace
(Add Seal Here.) (Sign Here.)	Folin Stelmer Justice of the Brace
Note—If sworn to before Clerk of Court of Record or Notary Publ	ic having a seal, no County Clerk's certificate is required.
State of	poly () many company
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Gounty of	
I,	Clerk of the County Court in aforesaid County and
State, do certify that	Esq., who hath signed his name to
the aforegoing affidavit, was at the time of so doing a	
in and for said county	and state, duly commissioned and sworn; that all his official
acts are entitled to full faith and credit, and that his signature theret	o is genuine.
Witness my hand and seal this	day of190
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Sworn to and subscribed before me this day by the above named affiant ; and I certify	that I read said affidavit to said
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ested in said case, nor am I concerned in its prosecution; and that said affiant Lucy	//
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General Affidavit.

Law Division, W,L,B,Exr, Certificate No, 261202, Pensioner A,J,Barnard, Service,D,27,Conn,Vol,Inf,

State of Michigan, County of Jackson, SS--

In the matter of the above entitled claim for payment of one half pension under Act of March 3td I899,

Claimant, Mrs, Rosetta, Barnard,
Personally came before me, a Justice of the Peace in and for
a foresaid County and State, John, McDevittaged 50 years,
a citizen of the City of Jackson, County of Jackson, State of
Michigan, well known to me to be reputable and entitled to
credit, who, being duly sworn, declares in relation to a foresaid case as follows: I haveknown Mrs Rosetta, Barnard for seven years past, know her of her marriage to Andrew, J, Barnard,
I know her to be in needy circumstances, that she is of
good moral character, that her husband left her without
means for her support, that he has deserted her, and I further declare that I have no interest in said case and I am not
conserned in its prosecution. and up to this date I do not

Know of any divorce proceedings baving been commended by either party

Sworn to and subscribed before me this day by the above named affiant: and I certify that I read said affidavit to said affiant and acquainted him with its contents defore he executed the same. I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution: and that said affiant is personally known to me: that he is a creditable person and so reputed in the community in which he resides.

Witness my hand and official seal this 10 day of August

A,D,1900

Justice of the Peace.

John Helmer

City of Jackson, County of Jackson State of Michigan.

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OFFEICH S

How H. Leay Wales Jades Mich 27-1901
Working L. D. C. Morch 27-1901
Aran Sir In auswer to your questions will Day have known vers Resitte Bornord for a number of years before the morned archen for Barnard of folk har a small Place a fin years you for 1900 to it was said subject to a mortage given to the american Boulding & from association on which mention the still twee about 2000 that to keep up her Payments to association she has had to borrow misney. Her Bornard deria with peer whent & wentles he tried to borrow meney from nee before he dested her. He worked a few weeks not to Exceed four walks, in all the has no other Property and I understand. Hers Bannard Doid to the one day when telling to har that the only money he am gave how was 4/8 " Querin money in Jan lafter he left und this the Paid all all Paid his deserted for get 1899, I Could see no cause for his leaving how the formerhed a Hur to the in all fatoushed I think he thathet should meney and when he found the did not lift her she is a pleasant affany woman and Stands will with all who Know her Ahr Pays all her debts and the below I his debts an a besure of troble for her in this state the Superim han the Printege of set orresing needy Parte with small hours when they and not Paid for and I have the one in her ward and got him wel to assess her lettle home yours truly John Medutt

Asproduced at the National Arenves		4
	Card No.	3413
Act of March 3, 1899.		CA Ex'r
Law Division. DEPA	ARTIENT OF THE INTERIOR,	
Cert. No. 26/202	Bureau of Pensions,	
Pensioner Indrew & Garnard	Washington, D. C., MAR 1	9 1901 1
Service D, 27 Donn Vol. &		
Claimant Wilo.		
COLK:		
To aid this Bureau in the ad	•	5
please furnish a statement in your	c own handwriting setting f	orth all.
the facts within your personal know		ii .
Losetta Garnard	by Andrew J. D.	rnard
Losetta Garnard	by Andrew J. Ge	rruard
and all the circumstances attending	0	rnard
	ng said desertion.	
and all the circumstances attendir	ng said desertion. Decific as possible in resp	ect to
and all the circumstances attending In your reply please be as sp	ng said desertion. Decific as possible in respondant you can, the causes which	ect to
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Law Division,
W,L,B,Exr,
Certificate No 261202
Pensioner,A,J,Barnard,
Service,D,27,Conn,Vol,Inf,

State of Michigan, County of Jackson, SS---.

> In the matter of the above entitled claim for payment of se one-half pension under Act of March 3td, 1899. Claimant Mrs, Rosetta, Barnard, Personally came before me, a Justice of the Peace, in and for aforesaid County and State, George, S, Wilson, aged 56 years, a citizen of the City of Jackson, County of Jackson, State of Michigan, Well to be reputable and entitled to eredit, who, being duly sworn, declares in relation to aforesaid case as follows: I know Mrs, Rosetta, Barnard, and alsonknow A, J, Barnard, that they have lived together as husband and wife, and to me to be such: That Mr, A, J, Barnard obtained employment of me to work in saw mill in Mouturorusay County in this state during the fall and winter of 1899, & 1900, that he was so employed for the period of 86 days, when he received his pay in full and went away, not returning to his homein Jackson, nor has deponent seen him since. Deponent also says that said Barnard told him that he did not intend to live with his wife longer, and up to the time.)
> his departur from the state had be instituted proceedings for diroce, according to his own statemost to may

Sworn to and subscribed before me this day by the the above named affiant: and I certify that I read said affidavit to said affiant and acquainted him with its contents before he executed the same. I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution: and that said affiant is personally known to me: that he is a creditable person and so reputed in the community in which he resides.

Witness my hand and official seal this /oth day of August

A.D. 1900.

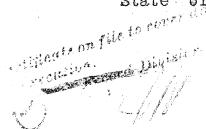
John Helmer

hos S. Wilson

Justice of the Peace.

City of Jackson, County of Jackson,

State of Michigan.





Card No. 34/3

Act of March 3, 1899.

M. L. B Exir

Law Division.

DEPARTMENT OF THE INTERIOR,

Cert. No. 26/202

Bureau of Pensions,

Pensioner Indrew Darnard Washington, D. C., MAR 19 1901

Service & 27 Com Val. onf.

Claimant W.1.

To aid this Bureau in the adjudication of the above-entitled claim please furnish a statement in your own handwriting setting forth all the facts within your personal knowledge relative to the desertion of

Rosetta Darnard by Undrew Garnard.

and all the circumstances attending said desertion.

In your reply please be as specific as possible in respect to dates, and describe, as clearly as you can, the causes which led up to the desertion. Has the claimant any property or income?

Kindly answer upon the reverse of this letter and return the same in the inclosed envelope, which requires no postage.

Very respectfully,

Vr. George O. Wilson,

Commissioner.

Reproduced at the National Archives Jackson. Wich March 23.1901. Sis! Andrew of Ramend, was living with his wife at godeson in the autumn y 1849; bring out of Supplyment him. Vetober 23.1899? linguist him to go to Wintermy County in the norther part of this state to dop't a saw mill for my she wont and I sow him thin several times, during they later part of this year 1899 and early part of 19001 he told my that he did not intend to return to his wift but gave no experited mason for his disenting, Except that he had then decival by her at time of marriage, but it was so shedring that I gave it no continue, believing that it was given because he had no other and intil that it was given because he had no other and intil many & do not laws the date of his deportun from this state, but I was sometime, during this winder of 99 my 1900, 2 De han not beaut from him since, noi do of land when he is My Refully Lin, J. Wilson A second of the 

General Affidavit. Law Division W. A. B. Exr, Estificate Nº 261207 Pensioner, a.J. Barnard Service. D. 27 Conn. Vol. Luf. State of Michigan 1 55 --In the matter of the above withthe claim for payment of one-half pension under act of march 3th 1899. Claimant Mrs, Rosetta, Barnard, Personally came before me. a Justice of the Peace, in and for aforesaid County and State. John Crowcombe aged 39 years, a citizen of the City of Jackson. County of Jackson, State of Michigan. Well Known to be me to be reputable and entitled to credit who, being duly to Sworn, declares in retation to aforesaid case as follows to I Know Mrs Rosetta, Barnard, and also Know a.J., w Barnard. that they lived together as husband and wife. Shave Known Mrs Rosetta Barnard, for 18 years past How of her marriage to a.J. Barnard. Illnow her to been needly circumstances, that she is of good moral character, that her husband left her without means of support, that he has deserted her and up to this date I do not know of any divorce proceedings haveing been commenced by either party. and Sourther declare that I have no interest in said case and I am not conserved in its prosecution. John Crowcomb I worn to and subscribed before me this day by the above named afficult and I certify that I read said affidavit to said afficult and acquainted him with its contents before he secuted the same. I further certify that I am in no its prosecution, and that said of Known to me; that he is a cre Justice of the Peace for Jackson County Michigan

H Clay Evens Com of Pensions Washington DC.

Dear Siri

In regard to the affedavit of John Crowcomb which was suit you with other affidavits in regard to the Claim of Mrs Rosetta Barnard Levould say that it was in the evening and Levas very much in a hurry and fer got to put on my seal &c. but I did swear John Crowcomb at the time and read the offidavit to him and every thing in his affidavit he swears to be true.

Mours Respectfully Johnstelmer Justice of the Reace Jackson Jackson Donny Michigan

			(Ī
LAW DIVISIÓN.	3–297.	,	#34.
Certificate No. 261. 202	Beside		Ex'r.
Pensioner Mudrew 1. Blynas	LZepartmer	it of the	Interior,
Service D-27 Com Vo		U OF PENSI	
	NSIO	1	
/ <b>%</b> *	Washington, D.	C. July 1	0
Generalise September	Committee of the commit		1
SIR:	1900		
With return of this lett	ter, you are requested	l to furnish pos	t-office address
of andrew of Barna	and who is be	orne on the rolls	of uour agencu
as a pensioner under the	<i>A</i>		
, , , , , , , , , , , , , , , , , , ,	,	P	V V
A claim has been filed t		ye	
under provisions of act of .	March 3, 1899.	•	
	Very respectfully,		
The United States Pension A	A com t	Summer of the State of the Stat	ion Maria de la companya
The Onder States Leasion 2	ige 1009		
Boston		<u> </u>	
	711		Commissioner.
	May		
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0 0	
ing and the second second	V notroco	lass July	12, 1900
SIR:			
Replying to above inqu	uiry, you are advise	d that the post	t-office address
of Ondrew J. Bar	nard	a pensioner u	nder certificate
No.26   202, at da	to of Inst marrows	(b)	
of or an and an	ue oj vusu puginenti	~	
Jan. Wt Think	1-02	U Carl	200
was man St. Med State of mass	field, county of	- nort	olk

Very respectfully,

The Honorable

Commissioner of Pensions,

Washington, D. C.

U. S. Pension Agent.

Dec. 20. 1929.

Certificate ho 261.202.
Certificate ho 261.202.
Certificate ho 261.202.

answered the final roll call
answered the home of
Dec. 16. 1929 at the home of
Howard B. Barnard at
his son Howard B. H.
Hollis h. H.

Sighted. Howard B. Barnard.

Andrew Barnard
ACT OF JULY 5, 1928

ACT OF JULY 5,

DEC 26 1929

2. 20 E 1 2

### Post Card

Affix 2-cent stamp here

### DISBURSING CLERK,

Bureau of Pensions,

Washington, D. C.

3-1140

Sec. Class July 3, 1926

Name Maren Danmara

CERTIFICATE No. 26/, 202

R.F.D. Passed away

No. and St. LOCC 16 1929

Post Office at Hollis

State 2. H.

Beginning

#### BUREAU OF PENSIONS

#### OFFICE OF THE DISBURSING CLERK

Washington, 567 4 1929 Your change of address has been made as re-

quested.

When you desire a change from that address, fill in the spaces above and mail this card at once. Do not fail to insert the month with which the change is to begin.

If temporary, state for what months.

Checks will not be sent in care of another person, a firm, or a corporation.

No change in address will be made without the Number of your Pension Certificate.

6-4004 DISBURSING CLERK.

U S, GOVERNMENT PRINTING OFFICE; 1927

3-1638

THOUGHDE
andrew J. Barnard Cert. No. 26/202
Cert. No. 26/202
P. O.,
County,
State,
Application filed aug. 6, 1926
Service, Oak 7,1826
Closh Cir letter for medical
Clort Cir letter for medical Dvidence Fewell
In 12's
ABARIO (Cloud for evidence (Circular)
Restored
leph 6, 1929 Non George 21
Moses adorsed Blaus
being lossedered by
Baker WED Sol Des
Attorney,
2. 0.,
State

# LEXALLD DIVISION. \ SOLDIER DIVISION

## ACT OF JULY 3, 1926

Jusep 191929	ncrease	Cert. No. 26/2021	
distant andrew T	Barnard		
Rank Corporal	Service Co. S	9 27 Com. Anf.	
Rate, \$ 90 per month, commenci	ng August 1	0,1929.	
0 . 0 A	PPROVAL	-	
Submitted for Coden Sept. 6	, 1929, DE	Molles Examiner.	F
Approved for Chicrease		o from	
At of July 3 1926	- Qu	-quel 10,1929	
	Sept 12, 1929	Sachelle Medical Reviewer.	
Seft 10, 1929. JHW Review		AF Medical Reference	
Pensioned at \$		1, 1920	<i>?</i> -
Claim filed August 6 192	6	1000	
	How Ger	orge DI Moses M. C. U, S. S. 11.7.5.	and the second
Hilmot, n. J.	7-	5 11. J.S. N.S.	
, , ,		• • • • • • • • • • • • • • • • • • •	

---

Wilmot M.H. Ohng 6 = 1926

The Commissioner of Pensions:

Believing my condition is such that I am entitled to the \$90 rate provided by the act of July 3, 1926, for those who are totally helpless or blind, I request that my case be taken up for consideration to determine my right to increase to \$90 per month.

Name andrew & Barnard

Address \_\_\_\_\_

Inv. Cert. No. 261,202

1.74

### UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS WASHINGTON

The act of July 3, 1926, provides a pension of \$90 per month in the case of one entitled to Civil War service pension, if he is now, or hereafter may become, totally helpless or blind. You are now in receipt of \$72 per month for the degree of helplessness or blindness prescribed by the act of May 1, 1920.

If you are totally helpless or blind so as to entitle you to the \$90 rate, immediately notify the Pension Bureau so that your case may be taken up for consideration under this new law. For this purpose you may use the form on the other side of this slip. WINFIELD SCOTT, Commissioner of Pensions.

(OAel)

Congressionel 3-794
Saldier Division
DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS
Sept. 5, 1929 Sel. Cert. No. 261202
Pensioner Judrew J. Barnard
Law May 1-1920-72  Group No. or former Agency
The Chief, Finance Division, is respectfully requested to state below at what rate and to

The Chief, Finance Division, is respectfully requested to state below at what rate and to what date payment was last made to the abovenamed pensioner, and address at that time.

Chief of Division.

· Sefet 4 , 192	Ç
The above-named pensioner was last paid	
at \$, 192	,
when address was	 
	<b></b>
Chief, Division	r

Reproduced at the National Archives

CALL FOR EVIDENCE.

27.

७ १९७६

This is to certify that Andrew J. Barnard, of Wilmot Center, N. H. a Civil war soldier, pension certificate 261202 was strickin with apoplexy Aug. 10 1929. He has complete left hemiplegia of left arm and left leg. Unable to take solid food, difficulty in swalllowing liquids. Unable to talk so one could understand him. He requires two people to

take care of him.

Rew London, N. H.

Aug. 27 1929.

New London N.14. aug. 28,1829

Wellen P. Clough. M. D.

Menimail of.

Personally offering the above named

William P. Glough and weeks outh that the above

Certificate by him signed is line to the but

of his knowledge and belief.

Before me Ha S. Litelefreid Noting Rublic

CHIEF'S ROOM SOLDIER

· 4 0 1 1929

U. S. BUREAU OF PENSIONS



# AFFIDAVIT OF ATTENDANT

IN CLAIMS FOR THE \$72 RATE UNDER THE ACT OF MAY 1, 1920.

	a 1 / Barrand 261202
	In the matter of the pension claim of Audreus & Barnard, No. 26/202
	State of New Hayupshire, County of Merrinack, ss:
	/ ( ) / ( )
	On thisday of
	a Notary Piloli within and for the County and State
	aforesaid Ruth M. Barnard., aged / 8 years,
	whose post-office address is a post-office address in the post-office address is a post-office address in the post-office address is a post-office address in the post-office addr
	in relation to the eforeseid alaim as follows.
	In the years 1922 and 1923 I was with
	my grand Lather andrew L. Barnard For
	a term of fifteen mouth's carrying for
	him and doing the housework I came
	back again in 1924 in the same
	capacity continuing in the came
	capacity to the present day He is very
	much shoken in health and strength I'
ner.	have to wait on him now much more in
ensio	
ě.	seeing ha is proberly dressed and roforth
	his mind and membery manders at times, He
	Ingets about many things daily so I have to wat
	I the him and do for him I consider it to be
	my duty to stay with him to the seed.
_	
	Ruth m Barrara.  (Affiant's Signature.)
	(Amant's Signature.)
	Subscribed and sworn to before me this land of famous, 1926;
	and I certify that the contents of this affidavit were fully made known and explained to the affiant
	before the oath was administered, and that I have no interest, direct or indirect, in the prosecution of
	this claim.
	S. S
	Notary Twolk
	(Official Character.)
	(SEAL.)  (Address of Magistrate.)
	5. 8.7 % × · · · · · · · · · · · · · · · · · ·

# AFFIDAVIT OF ATTENDING PHYSICIAS!

IN CLAIMS FOR THE \$72 RATE UNDER THE ACT OF MAY 1, 1920.

In the matter of the pension claim of Chicken J. Bornoud No. 26	120
State of Wew Househing County of Manuack	, ss:
On this	ore me.
a Notary Public within and for the County an	1 04 4
within and for the County an	d State
aforesaid / Illiam / Cough / Lou, aged 40	. years,
aforesaid William P Clough M.D., aged 45 whose post-office address is New London N. Who	states
in relation to the aforesaid claim as follows:	
I have this day examined the	<b></b> .
andrew J. Bornord of Wilmor 18.11	
an old solder of the Circle Wor	
He is a great sufferer from	
Thereashim two a great deal of En	
Signal herrin left side has	v be
put with viter to be our	· self
mon times during the vigor to	
the same of the sa	
appelle pour grature toin "	
the needs constant core and it	lende
and for he have some one me	a he
are the time - does not slay	
· ·	
at night, Stoer not dies hunsely	<u></u>
needs help. Infirm this of eye	<u>-</u>
and some from the head no doe	4-
The see near eight in the voice the	<u>-leced</u>
William P. to Lough.	In. U
(Affiant's Signature.)	
18th Language	2/
Subscribed and sworn to before me this 10 day of day of the sound of t	Ly <del>A.S.</del> ;
and I certify that the contents of this affidavit were fully made known and explained to the	
before the oath was administered, and that I have no interest, direct or indirect, in the prosecuthis claim.	rotott OL
The difference of the second o	
Judy June	<del></del>
Notary & wolve	
(Official Character.)	,

3-402.

certificate No. 26/202 Department of the Interior,
Name MATUUT COMMINICAL. BUREAU OF PENSIONS,
Washington, D. C., January 15, 1898.
Sir:
In forwarding to the pension agent the executed voucher for your next
quarterly payment please favor me by returning this circular to him with
replies to the questions enumerated below.
Very respectfully,
HOlay Evan X.
Commissioner of Pensions.
First. Are you married? If so, please state your wife's full name and her maiden name.  Answer. Geo Chiabeth M Bamand = Chiabeth M Benton  Second. When, where, and by whom were you married?  Answer. March 26 7 1874 = #18 Chestrutel Hartford Conn Residence of John H Monse by Rec a Judson Dage Ractor of the First Church  Third. What record of marriage exists?  Answer. Chalificate of Certificance and record in Jamily Bible
Fourth. Were you previously married? If so, please state the name of your former wife and the
Answer. His Chicaleth daughter of Hiram Buchland Windson Comm.  Fifth. Have you any children living? If so, please state their names and the dates of their birth.  Answer. His (Iwo pain of Lovins).  Orthell Grant and Oliver Benton Barnard Oct 12 1870.  Howard Been with and Henry Knight-Barnard Nov 3 2 1873.  March 15, 1898.  Date of reply, Allon March 15, 1898.  Os 53014750-1-94
Date of reply,

# ACT OF MAY 1, 1920 INCREASE

Claimant Andrew J. Barnard.	f
P. O. Wilmot.	Rank Corporal,
County Merrimack,	Service D.27 Conn Infantry.
State New Hampshire.	
Rate, \$ per month, commencing	Deptember 27,192
	<del></del>
•	REJECTED.
STATE REPRESENTATIVE.	SELECTION LINE
~ APPF	ROVAL
To rued bir Ruch F. 24. Submitted for admission Jan 9, 1922. 4	52, J. D Zu - Dermo Te., Examiner
	, in the second
Approved for	Approved for TE feating
MODULARY, SECTION 2,	Claimant does no
· ACT OF MAN I, MARK	require the regular aid
	attendance of another
	Therson !
and about out, about about to the	
JAN 13 19/192, Gartmujer	Theilly aption.
	Medical Examiler Medical Reviewer.
Rereviewer.	Medical Referee.
Enlisted; hone	orably discharged, 18,
	orably discharged, 18,
Enlisted, 18; hono	orably discharged, 18
	ars, months, days
	SON OF THE LABOU, as Civil War veteran
per month, under	, as Civil war veterali
PRESENT CLAIM,	ACT OF MAY 1, 1920
Declaration filed Sep 22, 1921. , 199	
Claimant does write.	
	No
6—6315	, M. C.

## DECLARATION FOR PENSION

## ACT OF MAY 1, 1920

## The Pension Certificate Should Not Be Forwarded With the Application

State of New Hamp	rohire County of Merr	mack.	8: • • • • • • • • • • • • • • • • • • •
	hday of Sept 1921, person		Public
within and for the county and	d State aforesaid, . (Mudrew &	Barnard.	who, being duly
sworn according to law, declar	res that he isyears of age, and a	resident of	
county of Merricu	orde , State of Re	w Hampsline	; and that he is the
identical person, who was ENI	Bornard on the	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	, under the name
of Undrew f	on the	day of	186/
as a hrivale	, in Co I 1st Reg Conn	and regiment in the Army, or vessels if in	the Navy.)
in the service of the United S	tates, in the Civil Warn (Stat	e name of war, Civil or Mexican.)	
war, and was HONORABLY I	DISCHARGED at New Havey Co	on the Jan day of	July 186!
That he also served. as.	with in La D 27th Per (Here give a complete statement of al	John Melitia	Val swrolled
Jet 22 1862	Iseharged at new	Haven Conn July	2-7.1.863
That his personal description	at enlistment was as follows: Height	feetinches; com	plexion.
color of eyes Shill	; color of hair light; that his o	ecupation was Drass War	kir_
the contract of the contract o			And the second s
	personal aid and attendance of another personal conditions of another personal aid and attendance of another personal aid attendance of a aid attendance		
			Annual Control of the
	of being and		
or more be	ing meanly blind and a	new of workers	Stubudge mas
Hardur me, Booton and his occupation has been.	mas and wilmot	M+. t he hasapplied for	pension under original
	.´∪ nat he is a pensioner under Certificate No.	· ·	
That he makes this declar	ration for the nurpose of being placed on the	pension roll of the United States und	er the provisions of the
Act of May 1, 1920. to the	e Just ramount of 72	andrew & B	armail
(1) (Signature	of first witness.)	(Claimant's signatur	e in full.)
Sesses (Address	of first witness.)	(Claimant's address	in fy/).
(Address (Signature of	A Ligo		M. Yor
Signature (Signature	Lasates N. H.		
(Address o	it second witness.)		
Subscribed and su	worn to before me this	e Defat	D. 19.7. A and I hereby
ce	ertify that the contents of the above declara	tion were fully made known and explain	ned to the applicant be-
fo	ore swearing, including the words	,	
[L.S.] er	rased, and the word	•	, added;
ar	nd that I have ar interest digglor indirect	i, in the prosecution of this claim.	7
	DIVISIOH	Signature.	ne.
<b>t</b>	ปีกล่างผลเล่า	Nolary Tub	ter.)
	Declaration accepted as a claim under Sec. 2, act of May 1, 1920.	Williad (Post Office address	of officer)
	Per Per Prior Law Div.		
	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		

## •

ACT OF MAY 1, 1920 INCREASE

laimant	Andrew		Parmard	, h	
P. O	Wilmot			rpl.	<u> </u>
	Merrima		Service Co.	2,27	Cours.
State A		shere	***************************************		
	2 per month, comm		mary	18,19	726.
Rate, 5	por morra,		1		
STATE R	EPRESENTATIVE.	None			
			ROVAL		
	or Med action			John	🗦 , Examine
Submitted f	or/Nes Decem		1.02-	010	9
Approved for	or		Approved for	1 Done	lanua
ожи	INCREASE, S. OT	<u></u>	18,192	6	
	ACT OF MOYO		"Not	Marso	mtell
	es Modical Ezesi	and the second second	from A	mot d	ale.
7, 8	C ( MC 7 0210				XIIII
	6, 1926, <u>OV. J. 9710</u>		Jeb Medical	Examiner.	Medical Represse
	, 192 ,	Rereviewer.	,	· · · · · · · · · · · · · · · · · · ·	Medical Refere
Thistad		; h	onorably discharged	<u>.</u>	
Entisted		; h	onorably discharged		, 18
Ennsted		18 : h	onorably discharged		, 18
Enlisted	pensionable service	, 3.0,	Vears	months,	d
Length of	at \$ 50 00 pe		POPMAY) 1505	, , <u>, , , , , , , , , , , , , , , , , </u>	s Civil War vete
Pensioned	at \$ 2 0 — pe	r month, under	と .c	s ed 0	
	PRE	SENT CLAIM	, ACT OF MA	Y 1, 1920	
		. 22 ,			
Declaration	on filed	2			

## War Department,

455,752,

### ADJUTANT GENERAL'S OFFICE,

Washington, March 8", 1883.

Poespectfully returned to the Commissioner of Pensions. Andrew J. Barnard, a Private of Company D", 124. Regiment Sunniction Volunteers, was enrolled on the 22 nd, day of Opril , 1861, at Waterbury Conn. for 3 Mor., and is reported: on Muster out roll of loo, dated July 31, 1861, (Mueter in " Mueter out rolls, only rolls on file) perexent. Mustered out with lev, at New Horsen, lemn Andrew & Barnara a Corporal of los. "D." 27th, Kegh, learn. Vols, was enrolled on the y'day of Sept. 1862. at New Heaven, bonn, for 9. Months, and is reported on roll of lev. from Enrollment to Nov. 1/62, present. Noving Dec, 162, absent, evended in battle of Fredericksburg. Va. Dec. 13/62, same to Feb. 28/63, Roll from Feb, 28 to april 10/63 reports now present, Return for Dec/62, reports him absent sick, low was in action at Fredericksburg. Va, Dec. 13, 1862. Mustered out with les, July 27, 1863 at New Hoaven, Com, Location of wound not Stated. Regt Hospt records not on file

EMM EMM EMM \$90

## ANDREW J BARNARD

261202

JULY 26

HOLLIS N H

3-1081

DROP REPORT—PENSIONER
Pensioner
Pensioner /
Soldier Indrew J. Barnard
Service ACT OF JULY 3 1508 - ACT OF 1
Cass CT OF JULY 3. 1998 SECTION 1
RECORD DIVISION
<b>100</b>
, 192
In the above-described case a declaration filed this Division indicates that said pensioner died
<del>(1)</del>
, 19
Chief, Record Division.
20
<u> </u>
를 FINANCE DIVISION
77 700 0 = 1000 192
The name of the above-described pensioner who
was last paid at the rate of \$ 40 per month
to
been dropped from the roll because of death
Dec 16, 1929

O. J RANDALL Chief, Finance Division.

• • •

249 U. S COVERNMENT FRINTING OFFICE 19:

PETURN THIS LETTER.

# Commonwealth of Massachusetts.

— CERTIFICATE OF DEATH.
Cown of Heter 1 Aug 22 190 0
1. Horaco Tille
that I have examined the Records of Deaths in said Town and find recorded
therein the death of Elizabeth Marnard
The record is in the following words and figures, to wit:
Date of Death, Och 4th 1898 mm (Benton)
Name & Surname of Deceased, Cliquetity 1/1 12 03 mond
Name & Surname of Husband, Andrew Barnard.
Sex, Jen. Color, Condition, mas.
Age, 65 Years, Months, 2 Days.
Disease or Cause of Death, Toftening of the bain
Residence, Holou
Place of Death, Action
Place of Burial, Actin Wordlander
Occupation, Myssewife.
Place of Birth, Merry H. The
Name & Birthplace of Father, rook given
Name & Birthplace of Mother, trop quien
I, Morace Flittle, above named, depose
and say, that I hold the office of Town Clerk of the Town of
in the County of Middles of
and Commonwealth of Massachusetts: that the Records of Births, Marriage
and Deaths in said 10wh are in my custody, and that the above is a
extract from the Records of Deaths in said Town, as certified by me.
Witness my hand and seal of the said Town
on the day and year first above written.
Morno H. Litt
Town Clerk.
SERVER OF THE SE

8-1674 UNITED STATES PARTMENT OF THE INTERIOR, BUREAU OF PENSIONS, FFICE OF THE DISBURSING CLERK, WASHINGTON, D. C. TURN IF NOT DELIVERED IN TEN DAYS.

OFFICIAL BUSINESS

TO THE POSTMASTER:

SAct of August 17, 1912, prohibits the livery of this letter to any person if addresses has alled or removed, or

NUST (NOT) BE FORWARDED TO ANOTHER POST OFFICE

RETURN TO WELLER REASON FOR HON DELIVERY CONTRACTOR Noved, Left no address, ...... Refused to such post office in state named

PENALTY FOR PHIVATE USE TO AVOID PAYMENT OF POSTAGE, \$300

Soldier Andrew f/3a Service . A. 27 . Com Claimant/Britis Barry

Law Division. Washington

Respectfully referred to the Chief of the Finance Division, inviting attention to the attached letter indicating neglect or failure of pensioner to execute his woucher, with the evident intent to frustrate payments to the wife, in her claim under the Act of March 8, 1899.

a. andde

Chief, Law Division.

Cert no 261.202 Vol. Tout. Com. Commis-Dear Fir. Enclosed please find affadavits us obtained from medfield, Mass. I Trust they will be satisfactory as they were, obtained with great diffi culty and with me over 9 dollars to get them I hope it will not be nicessary to let Barnard Brown as I wish to keep Track if him and have of tained these without his truledge

otherwise he might go where I

could not find him I sincerely hope you will give this attention as respectfully. Prosette Barnard letter received from yo May 21 tating this proof Handle Land

Cert. 261,202.

ANDREW J. BARNARD,

D, 27 Conn. V.I.

W

Respectfully referred to the Chief of the Finance Division, for his consideration, as the matter contained therein pertains to the execution of vouchers under the Act of March 3, 1899.

Salady Yurs.
Chief of Law Division.

July 3, 1892.

JUL 5 1902 JUL 5 PENSONS 食草

# Declaration for Pension

Under the Act of February 6, 1907

The Pension Certificate should not be forwarded with the application.

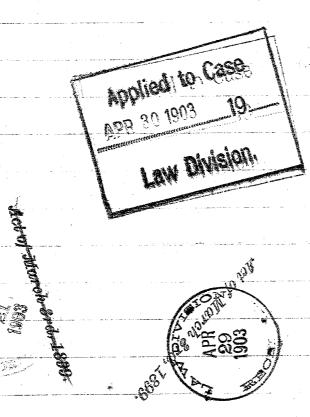
INSTRUCTIONS. This form may be used for Original Pension or Increase of Pension. Declaration and testimony in support of same to be executed before some officer of a court of record having custody of its seal, a notary public, justice of the peace, or other officer authorized to administer oaths for general purposes. If such officer

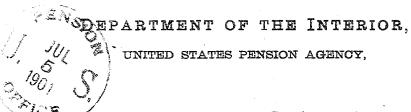
is not required by law proper State, County for general reference.	or City officer under his o	his official character, signa official seal, unless such ce	ature and term of officertificate has been filed	e must be cer I in the Bureau	tified by the of Pensions
State of	assachusetts	, County of	Suffolk	<b></b>	, 55:
On this	th day of Sept	ember	A. D. one thousand	nine hundred	and eight
		cial Commissions			
•		Barnard			
declares that he is	65 years of a	age, and a resident of	Bosto		**************
County of S	uffolk	, State of	Massachus (	∋tt <b>s</b> ; a	and that he is
the identical person v	vho was ENROLLED at	Waterbury	, Солп.	under	the name of
And	rew J. parnard	on the 22nd	day of	April	, 186l
as a Pri	vale, jabralu	1st Regt. Conn Here state rank, and company an	, <u>lnf</u> , vols. d regiment in the Army, or v	vessels if in the Na	vy
	United States, in the	Civil te name of war, Civil or Mexican on the 31st	.War, and was HONO	RABLY DISC	CHARGED at
		, 27th Regt. Co Here give a complete stat			
personal description of eyes,blue	at enlistment was as follo	avy services of the United ws: Height 5 fee  light; that his occ , 18 43 , at	t4 inches; con	nplexion, 1 Mechani	isht; color
		ce leaving the service hav			
as nearly as possible	Bethany, Conn. N	ew Havea, Conn. cton,Mass., and	,Winsor, Conn	., Harwir	igton,
		he has heretoford		•	
If a pension		need be given. If not, give the nue of being placed on the			
visions of the act of	February 6, 1907.				
		Place, Boston	County of	Suff	olk
	ssachusetts	349 1	. andren	JBa	marel
Attest 1	Ŕ	ST CO		U	
2	vo witnesses who write, sign lies	St.Y S.)			

Reproduced at the National Archives

Tensioner, a







Boston, Mass., July 3rd, 1901.

Hon. H. Clay Evans,

Commissioner of Pensions,

Washington, D. C.

Sir:-

I have the honor to enclose herewith, executed voucher of Rosetta Barnard for one-half of the pension due in the case of her husband, Andrew J. Barnard, certificate No. 261,202.

Executed voucher of Andrew J. Barnard has not been received.

Very respectfukly,

U. S. Pension Agent.

261.202

general especiales de la companya d Mangana de la companya de la company La companya de la co

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# Declaration for Pension

Under the Act of February 6, 1907

The Pension Certificate should not be forwarded with the application.

INSTRUCTIONS. This form may be used for Original Pension or Increase of Pension. Declaration and testimony in support of same to be executed before some officer of a court of record having custody of its seal, a notary public, justice of the peace, or other officer authorized to administer oaths for general purposes. If such officer

is not required by proper State, Con for general refere	y law to have and use a unty or City officer und ence.	a seal, his official che ler his official seal, u	aracter, signatu nless such cert	are and term of o	ffice must be eled in the Bure	eertified by the au of Pensions
State of	Massachusett	s, Cou	nty of	Suffo	lk	, 55:
On this	8th day of	September		A. D. one thousar	nd nine hundre	d and eight
personally appea	red before me, a	Special Com	missioner	7	within and for	the County and
State aforesaid	Andrew	J. Barnard		, who, being	duly sworn ac	cording to law,
declares that he	is <u>65</u> ye	ars of age, and a res	ident of	Bos	ton	
County of	Suffolk	, State	of	Massachu	s ett s	; and that he is
the identical pers	son who was ENROLL	ED at Wa-	terbury,	Conn.	unc	ler the name of
£	Andrew J. Barn	ard on the	22nd	day of	April	, 18 61
as a	orivate jara	1st Reg Here state rank,	t. Conn. and company and r	lnf. Wols.	or vessels if in the	 Navy
• • • • • • • • • • • • • • • • • • • •	the United States, in t					
New	Haven, Conn.			day of	July	, 18 <u>61</u>
to	ved in C July 27, 186	3.				
personal descript	employed in the militartion at enlistment was a  color of hair,  March 27,	as follows: Height.	5 feet that his occup	ation was	omplexion, Mechan	light; color
Conn.	several places of reside Bethany,Coñi ble urbridge,Mass	n. New Haven	, Conn. ,V	linsor, Cor	State the dat n. Harw	e of each change ington
	sa pensioner.			4-	•	
Cert.  If a p  That he makes th	No. 261202  ensioner, the certificate number of the part of February 6, 1907.	per only need be given. If	not, give the numb	er of the former applic	eation, if one was n	ade
His post-	office address is8A]	ston Place,	Boston	County of	Suf	folk
	Massachusetts					arraid
	Two witnesses who write,	A CED				

Also personally appeared Atthur A. Nicherson , residing in
209 Hanover St Boston Mass, and & Helich
residing in Boston Mass., persons whom I certify to be respectable and entitled to credit, and
who, being duly sworn, say they were present and saw. And have being duly sworn, say they were present and saw. Name of Claimant
claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the
appearance of said claimant and their aquaintance with him of
years, respectively, that he is the identical person he represents himself
to be; and that they have no interest in the prosecution of this claim.  Athun W. Mickeusen
Jennallie
Sworn to and subscribed before me this day of Sofut , A. D. 1908 , and
I do hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant
and witnesses before swearing, including the words
erased, and the words
added; and that I have no interest, direct or indirect, in the prosecution of this claim,
Louis Control of Official Signature
[L. S.] Certificate filed to Special Character Official Character
cover date.
S. A. CUDDY,
Chief, Law Division.

#### AN ACT

GRANTING PENSION TO CERTAIN ENLISTED MEN, SOLDIERS, AND OFFICERS WHO SERVED IN THE CIVIL WAR AND THE WAR WITH MEXICO.

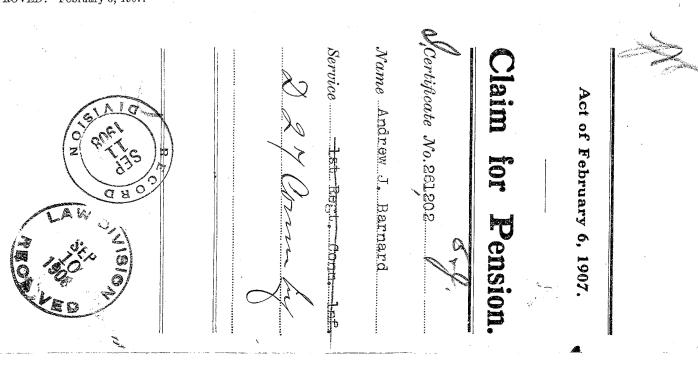
Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled:

That any person who served mixety days or more in the military or naval service of the United States during the late civil war, or sixty days in the war with Mexica and who has been honorably discharged therefrom, and who has reached the age of sixty-two years or over, shall, upon taking proof of such facts according to such rules and regulations as the Secretary of the Interior may provide, be placed upon the pension proof, and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years, twelve dollars per month; seventy-five years or over, twenty dollars per month; and such pension shall commence from the date of the filing of the application in the Bureau of Pensions after the passage and approval of this Act: Provided, that pensioners who are sixty-two years of age or over, and who are now receiving pensions under existing laws, or whose claims are pending in the Bureau of Pensions, may, by application to the Commissioner of Pensions, in such form as he may prescribe, receive the benefits of this Act: and nothing herein contained shall prevent any pensioner or person entitled to a pension under any other general or special act: Provided, that no person shall receive a pension under any other law at the same time or for the same period that he is receiving a pension under the provisions of this Act: Provided further, that no person who is now receiving or shall hereafter receive a greater pension under any other general or special law than he would be entitled to receive under the provisions herein shall pe pensionable under this Act.

Sec. 2. The rank in the service shall not be considered in application filed hereunder.

Sec. 3. That no pension attorney, claim agent, or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension under this Act.

APPROVED: February 6, 1907.



who to then go to show he had not and as he had severe fram in his head and Trouble with his limbe he would not be able if his age permitted but not made Atomd it a man sixty years old would be exemply from army duly, When Barnard was notified that half his pension had been granted me he water me that he could and should prevent any getting and heis simply debarring homself of it the prevent my having st I shall feel very gralefull of you will are



Louis of aller of the sound.

Miss

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LANC

# DEPARTMENT OF THE INTERIOR.

Washington, al 16, 2908,

Mrs. Rosetta Barnard,

340 Third street, Jackson, Michigan.

#### Madam:

Reference is made to your letter of the 13thtimo, presenting the difficulties and expense entailed in obtaining/ment of one-half the pension to you as beneficiary under the act of ch 3, 1899, in the case of Andrew J. Barnard, certificate # 261,2000. "D", 27th Connecticut Volunteer Infantry, because of the penser's omission to execute vouchers for the one-half of pension letto him.

In cases of this character, the regulations raire the beneficiary under the act of March 3, 1899 to adduce poer proof in the form of deposition of two witnesses residing in the place with the pensioner, to show that he is still alive. Evence of the fact that the pensioner is still living is necessary fonde reason that title to pension incres only during his life time, and the right of the beneficiary under the act of March 3, 1899 is deendent upon the continuance of such title. Being unable to obtain his evidence after having apparently exhausted all means in that directon, this Bureau is unable to advise you as to any further course tobe pursued therein.

It is not incumbent upon the Bureau, or deemed proper, to employ any part of its official force in obtaining evidence of the fact that

Mrs. Rosetta Barnard - 2.

pensioners are still living, for use in making payment to beneficiaries under the act of March 3, 1899, where the pensioners refuse to execute their vouchers.

Very respectfully,

Commissioner.

of to M

October 12, 1904.

U. S. Pension Agent, Boston, Mass.

Sir:

Herewith is returned to you the supplemental voucher of Rosetta Barnard, for one-half the pension under the act of March 3, 1899, due to the 4th ultimo, in the case of Andrew J. Barnard, certificate No. 261,202, and you are instructed to make payment thereon provided she furnish you with deposition of two competent witnesses on form 3-1061, showing that the pensioner is still living, a resident of the same place with them, and has not been employed or paid in the Army, Navy or Marine Corps since date of last payment of pension to him.

Very respectfully,

Commissioner.

(Enclosure)

In the claim In increase of Pension & andrew & Darnard Certificate # 26/202 0 o Silt Com Infantry, J. ny B. macken & ... a practicing Physician whose postoffice address Is andober. N. H. defore and way, I know Mr andrew & Barnard, to be affacted with Rhenmatism. a Double Rupture. Ecezma and Infunities of age, His wife is unable to give him any care ar assistance, being herself totally disabled, for five or more years being nearly blind and mentally deficient being confused to her bed touty two out I the twenty four hours of each day! Do that We Barnard either Oughers from meglet or receives ouch care as the neighbors can bestow, He can dress and undress and feed himself if the Food is furnished. I consider it lubafe for him to go out meastended Dr M. y B. Mackensie

e ven anvoneda, as wife and husband from the date WULL marriage to him to the date of his death. lived together and ha whether she

at least two credible witnesses showing the claimant has remarried since the date of the ĵ. O sworn statements The whether death.

property, roal or personal, including bonds, stocks life insurance, and investments owned by her, or in and expenses for taxes, insurang amount of her income per month , 19 ..., date of fil statement under oath, showing the character, lowhich she has had any interest, and the full ing claim; also the present rental value of and necessary repairs on any such property. sources since The claiment's cation, and value of all notes, money on deposit, or year from all Ġ

6-3317

Windsorville Manne. May 5-1913. Commissioner of Pensions Washington D.C. Dear Die Please take (hoties that I andrew & Barnard wishes to change, my Post Office address from #3 Bridge street or 140 main street Randolph maine to Windsorville maine. Route 54, the number A pension certificate is #261.202. act may 11#1912. Former agencies Boston mass, and was Lebenty Jeans old march, 27. 1913. Louis Respy Undrew & Barnard Windsovoille Maine Roule 54.

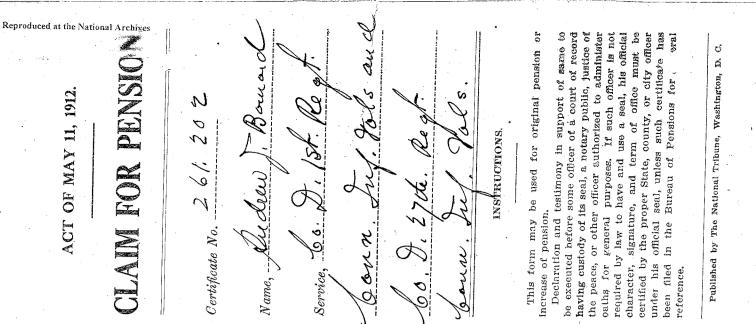
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Rate, \$ per month	commencing May	-29,19	12/. V
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ATTO	DRNEY OR STATE REPRE	ESENTATIVE.	
See /	(Order April 25, 1907.)		
S Name, No	<u>u</u>	Fee, \$	; Agent to pay.
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Approved for Admir	Jan: 16, 1913, 19  Jain Rate \$ 10	2.00 per month; age	g years.
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Declaration filed		· One	977.118
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Claimant does write			0
6—3317	1.1	120	, M. a
the company of the co	- Control (機)、東京中央部の内で	**	

# IF A PENSIONER, DO NOT FAIL TO GIVE CERTIFICATE NUMBER.

## DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

	e of
Com	nty of
	On this 27th day of Mace A. D. one thousand nine hundred and teacher,
	onally appeared before me, a
perse	State aforesaid, — Su deley J. Boun bill , who, being duly sworn according to law,
and	ares that he is
coun	try of, State of, and that he is the
iden	tical person who was enrolled at Hater being boun, under the name of
	Sudrey J. Bornord, on the Ift nel day of April, 1861,
as a	Private, in Co. D. 18t. Regt. Com. Juf. Yala
,	(Here state rank, and company and regiment in the Army; or vessels, if in the Navy.)
in th	ne service of the United States, in thewar, and was honorably discharged
	Med Ibaulu Coun, on the 318th day of July 18-6!
at	the also served in 60. D. 27th. Reg. Coun Tuf. Fals
Inat	(Here give a complete statement of all other services, if any.)
	Low October 22-1862 matil July 27-1863.
That	the was not employed in the military or naval service of the United States otherwise than as stated
	e. That his personal description at enlistment was as follows: Height, -5 feet /2 inches;
	plexion, taglet; color of eyes, ; color of hair, ; that his occu-
patio	on was that he was born march 27 , 1843.
i <del>-</del> -	5/+1
	That his several places of residence since leaving the service have been as follows: Nature.
	Pillslav and Rundelple mail.
	(State date of each change as nearly as possible.)
	That he is a pensioner under certificate No. 261, 26 2
	That he has applied for pension under original No
State	That he makes this declaration for the purpose of being placed on the pension roll of the United
	That his post-office address is Rue dolph , county of Live tele
	e of, county of,
State	andrew & Barnard
	(Colifornity signature is all
	st. (1) Will Divolute & . / Whiteway!!
Attes	Ear of Sold
Attes	(2) Eliza J Brighel
Attes	(2) Eliza J Brigkel
Attes	(2) Clina & Pringkel  Subscribed and sworn to before me this 27th day of - gray, A. D., 191-2.
Attes	(2) Eliza J Brigkel
Attes	Subscribed and sworn to before me this 2700 day of 9000, A. D., 191-2, and I hereby certify that the contents of the above declaration, etc., were fully made known and wastaned to the applicant before swearing, including the words, erased,
Attes	Subscribed and sworn to before me this 2/th day of
Attes	Subscribed and sworn to before me this 27th day of 9nce, A. D., 191-2, and I hereby certify that the contents of the above declaration, etc., were fully made known and strated to the applicant before swearing, including the words, erased, and the words, added; and that I have no interest, direct or indirect, in the prosecution of this claim.
Attes	Subscribed and sworn to before me this 2/th day of
Attes	Subscribed and sworn to before me this 27th day of
Attes	Subscribed and sworn to before me this 27th day of 9nch, A. D., 191-2, and I hereby certify that the contents of the above declaration, etc., were fully made known and subjected to the applicant before swearing, including the words ————————————————————————————————————
Attes	Subscribed and sworn to before me this 27th day of



### AN ACT

GRANTING PENSIONS TO CERTAIN ENLISTED MEN, SOLDIERS, AND OFFICERS WHO SERVED IN THE CIVIL WAR AND THE WAR WITH MEXICO.

Be in enacted by the Senate and House of Representatives of the United States of America in Congress as sembled:

That any person who served ninety days or more in the military or naval service of the United States during the late Civil War, who has been honorably discharged therefrom, and who has reached the age of sixty-two years or over, shall, upon making proof of such facts, according to such rules and regulations as the Secretary of the Interior may provide, be placed upon the pension roll and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years and served ninety days, thirteen the Secretary of the Interior may provide, be placed upon the pension and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years and served ninety days, thirteen dollars per month; one and a half years, fourteen dollars and fifty cents per month; two years, fifteen dollars per month; two and a half years, fifteen dollars and fifty cents per month; three years or over, sixteen dollars per month. In case such person has reached the age of sixty-six years and served ninety days, fifteen dollars per month; six months, fifteen dollars and fifty cents per month; one year, sixteen dollars per month; one and a half years, sixteen dollars and fifty cents per month; two years, seventeen dollars per month; two and a half years, eighteen dollars per month; three years or over, nineteen dollars per month. In case such person has reached the age of seventy years and served ninety days, eighteen dollars per month; six months, nineteen dollars per month; one year, twenty dollars per month; one and a half years, twenty-one dollars and fifty cents per month; two years, twenty-three dollars per month; two and a half years, twenty-four dollars per month; three years or over, twenty-five dollars per month. In case such person has reached the age of seventy-five years and served ninety days, twenty-one dollars per month; six months, twenty-two dollars and fifty cents per month; one year, twenty-four dollars per month; one and a half years, twenty-two dollars and fifty cents per month; two years or over, thirty dollars per month. That any person who served in the military or naval service of the United States during the civil war and received an honorable discharge, and who was wounded in battle or in line of duty and is now unfit for manual labor by reason thereof, or who from disease or other causes incurred in line of duty resulting in his disability is now unable to perform manual labor, shall be paid the maximum pension under this act, to wit, thirty dollars per month, without reg shall be paid the maximum pension under this act, to wit, thirty dollars per month, without regard to length

That any person who has served sixty days or more in the military or naval service of the United States in the War with Mexico and has been honorably discharged therefrom, shall, upon making like proof of such

service, be entitled to receive a pension of thirty dollars per month.

All of the aforesaid pensions shall commence from the date of filing of the applications in the Bureau of Pensions after the passage and approval of this act: Provided, That pensioners who are sixty-two years of age or over, and who are now receiving pensions under existing laws, or whose claims are pending in the Bureau of Pensions, may, by application to the Commissioner of Pensions, in such form as he may prescribe, receive the benefits of this act; and nothing herein contained shall prevent any pensioner or person entitled to a pension from prosecuting his claim and receiving a pension under any other general or special act: Provided, That no person shall receive a pension under any other law at the same time or for the same period that he is receiving a pension under the provisions of this act: Provided further That no person who is that he is receiving a pension under the provisions of this act: Provided further, That no person who is now receiving or shall hereafter receive a greater pension under any other general or special law than he would be entitled to receive under the provisions herein shall be pensionable under this act.

Sec. 2. That rank in the service shall not be considered in applications filed hereunder.

Sec. 3. That no pension attorney, claim agent, or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under

tion for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under this act, except in applications for original pension by persons who have not heretofore received a pension.

Sec. 4. That the benefits of this act shall include any person who served during the late Civil War, or in the War with Mexico, and who is now or may hereafter become entitled to pension under the acts of June twenty-seventh, eighteen hundred and ninety; February fifteenth, eighteen hundred and ninety-five, and the joint resolutions of July first, nineteen hundred and two, and June twenty-eighth, nineteen hundred and six, or the acts of January twenty-ninth, eighteen hundred and eighty-seven; March third, eighteen hundred and ninety-one, and February seventeenth, eighteen hundred and ninety-seven.

Sec. 5. That it shall be the duty of the Commissioner of Pensions, as each application for pension under this act is adjudicated, to cause to be kept a record showing the name and length of service of each claimant, the monthly rate of payment granted to or received by him, and the county and State of his residence; and shall at the end of the fiscal year nineteen hundred and fourteen tabulate the record so obtained by States and counties, and shall furnish certified copies thereof upon demand and the payment of such fee therefor as is provided by law for certified copies of records in the executive departments.

APPROVED: May 11, 1912.

Original No.

Certificate No. 26/202

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ACT	<b>OF</b>	FEB

/ <b>y</b>	Meissue Certificate No.
, [	ACT OF FEBRUARY 6, 1907.
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a de la companya de l	Claimant, andrew J. Barnard
, A	P.O., 8 alston Place Rank, Corporal
i	County, Boston Company, 2
√.	State, praisachusetts, Regiment, 27 Com. De. Suft.
	Rate, \$ / Sper month, commencing Structure 9,1908
<i>.</i> .	
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	STATE REPRESENTATIVE.
A 198	(Order April 25, 1907.)
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1	Enlisted Sept 7, 1862; honorably discharged Sept 27, 1863
	Enlisted, 18 ; honorably discharged, 18
4	Pensioned at 8 6 per month, under Gumal law
	PRESENT CLAIM, ACT OF FEBRUARY 6, 1907.
	PRESENT CLAIM, ACT OF FEBRUART 0, 1907.
	Declaration filed Sept 9, 190 8
	Date of birth alleged, March 27, 1843
b.	Age shown by evidence years.
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, 190,	March 2/ 1902
Re-Reviewer.	Medical Referee.
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PRESENT 14, 1901, M	crease wound of head
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### GENERAL LAW.

## Declaration for Increase of Pension,

OR FOR INCREASE AND FOR A NEW DISABILITY.

State of County of 55:
Dersonally appeared Indrem J. Hernard aged 57 years,
a resident of Medfield County of Norfall State of Mass.
whose Post-office address is. M. Ecliptel , who, being duly sworn according to law
declares that he is a pensioner of the United States by Certificate Number. 2.6.1.2.0.2
and duly enrolled at the
and duty emphed at the
January Marie Control of the Control
(Here name the disabilities for which Pension is now received.)
incurred in the military (or naval) service of the United States, while serving as a for some of the United States, while serving a service of the United States, while service of the United States, while serving a service
[Or name of vessel if in the navy.]
That he has Man. been employed in the military or naval service of the United States prior to
That his present physical condition is such that he believes himself entitled to receive an increase of said pension
on account Dinereasing disability from
hersing I be and
That application is also hereby made for additional pension on account of a new disability, to wit: While a
at or near
about the month of, 186, he incurred or contracted
[Here name the new disability for which pen-
sion is claimed, state when, where, and how contracted, and if treated in hospitals give names of hospitals and dates of treatment.]
L'esability Question pily Rheumatisme general delility
and debely makerate dine to fags
PENS.
14
That he hereby appoints, with full power of substitution and revocation, NATHAN BICKFORD of
WASHINGTON, D. C., his Attorney and authorizes him to present and prosecute this claim and to do any and
all acts necessary to effect the purpose of said appointment.
If the claimant makes his mark, two persons who can write must attest by signing their names on the lines below.
andrew & Barnard Claimant's signature.

· ·			the second second	
Also personally appeared	la la	<i>9.</i> ·		
0	.\V.s\f\]\\\X.0\C\f\	en A las	41)=100	, residing
at MEdfuld		and Jahre T	(	
residing at	afula.		, persons w	hom I certify
to be respectable and entitled to		<i>11</i>		
Midsen J. 100	usnari	, the claimant, s	ign his name, (or mal	ke his mark)
to the foregoing declaration; tha	t they have every	reason to believe fro	m their acquaintance	with him,
that he is the identical person he repr	resents himself to be, as	nd that they have no inte	erest in the prosecution	of this claim.
Signature by mark must be attested two persons who write their name		1. 6.1	2 brock	Ž-
		2. J.L.M Signatures	A. Simbo	· · · · · · · · · · · · · · · · · · ·
Mallean Dran	<b>L</b>			
40	•			,
State of Massaelu		'~ '		,\$\$:
SWORN TO AND SUBSCRIBED BEFORE	ME, this/	day of a	eles	A. D., 19 🕶 .
		fy that the contents of the	化氯化甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲	cc., were fully
	made known, an	d explained to the appl	icant and witnesses be	fore swearing,
and the	including the wor	ds		
Oertificate on file to cover do	erased, and the wo	rds		,
of execution.	added, and that I	have no interest, direct or	indirect, in the prosec	cution of this
\$2.57t.	claim.			•
•		William	Grane	
	<i>a</i> ' '		Signature.	
Centiferale	of elect	. A ustece	of the	Pace
pension De	hot /	Office	dal Character.	
				***
This may be executed, within the limits of h			•	
No erasures or interlineations will be	permitted, unless the mag	istrate certines in his jurat to	at they were made before es	kecution.
	· · · · · · · · · · · · · · · · · · ·			
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Application for Increase

OR FOR

Increase and New Disability,

M. Meary P. Barnand

Court, Wols.

FILED BY

FILED BY

Claimant's Soliojor, DEC

WASHINGTON, D. C. 1900

# ORIGINAL INVALID PENSION.

Claimant, andrew for County, New House,	arriard		<u> </u>
P. O., Woodbridge,	/ Rank,	fire oute.	bople -
County, New Haven,	Company	, ' <i>'\D''</i>	
State, Com.	Regiment	27" Cor	m. Vals
Altoney, J. D. Plustell, 1	w Haver	v lex	·
For \$ 1000; agent int	to pay.	.`	
Rate, \$ per	month, commencing	July 25	" 18-8D, V
Fee, \$ 1000; agent int Rate, \$ per		<i>O</i> . <i>I</i> .	·
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	· 	······································	
			•
Disabled by Gun Shot was	und of he	ad V	
Submitted for admission Fich 70	1884 by LU	6 Mais	tie Examiner
Approved for G. D. W. of head	, ., .,		
Approved for J. D. W. of head	Approved	for	
	15	Q.co. of	Tead
			· .
			·
			<u> </u>
Anch II, 188 Janston, R	eviewer. Mch 20	5 4,1884, JA	RoasMed. Referee.
Enlisted September V11, 1	862 Prior	service from	r April 22
Mustered , 1 Discharged July LI'' , 1	8 . 1861, to	July C	3/11, 1861, in
Discharged July LII'', 1	863. Co. "L	" 1" bor	m. Vols
Declaration filed July 25", 1	8 % Not in mili	itary or naval servic	ce since July
Last material evidence filed,	8	(1 , 1863, w	when discharged.
· · · · · · · · · · · · · · · · · · ·			
BASI	S OF CLA	IM.	1/
Alleges in declaration filed Luly lung VG. Leo 1311 s Wound of head.	25" 1882,	that at	Gredericks-
lung 1/4. Lec 1311 4	862, he re	reined a	Jun shot
worm of head.		<i>U</i>	·
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ELECTRO'S. (11885—75 000)			
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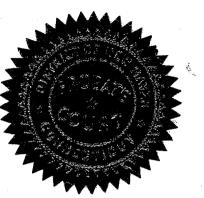
# DECLARATION FOR ORIGINAL INVALID PENSION. TO BE EXECUTED BEFORE A COURT OF RECORD OR SOME OFFICER THEREOF HAVING CUSTODY OF ITS S &L.



State of Connecticul
Mer Harres Country SS.
On this 21 day of May, A. D. one thousand eight hundred and seventy and the
personally appeared before me, Judy of the Probate Court for the District of Court of
record within and for the County and State aforesaid, Malley J. Bannauch aged
years, a resident of the town of Woodbudge, county of Men-
Marieu, State of Alamana Marie, who, being duly sworn according to law, declares
that he is the identical Andrew Ja Jannaco who was ENROLLED on
the day of day of 1862, in Company of the Regiment
of Come Vole commanded by Col Richard S. Bostwick
and was honorably DISCHARGED at New Stare Connen the day
of 1863; that his personal description is as follows: Age, 29 years; height
feet 8 inches; complexion, light; hair, light; eyes, blee
That while a member of the organization aforesaid, in the service and in the line of his duty at Medical Albung
of December, 1862, he Was Struck in heart
Here state name or nature of disease, or the location of wound or injury. If disabled by
disease, state fully its causes; if by wound or injury, the precise mayner in which received.
in actual engagment on aand olay.
Jugarne house in Gardielahouse Va Called
That he was treated in hospitals as follows:
au hospital - to which I was Canice and when
I was healed by Dr J. Morton Hells Ingeon of the Region
That he has been employed in the military or naval service otherwise than as stated above
Here state what
He was unvolled as freeld in Co'D" for fell Come Vote 3 months the service was, whether prior or subsequent to trat stated above, and the dates at which it began and ended.
outh 22% day of April 1861 and discharged July 31.186/Expristed
That since leaving the service this applicant has resided in the Journa of Natury, Bethany Wood by
in the State of Commence trace to, and his occupation has been that of a Mechanica Tourning
That prior to his entry into the service above named he was a man of good, sound, physical health, being when
enrolled a Mhool-toy. That he is nowdisabled from obtaining his subsistence by
manual labor by reason of Kis injuries, above described, received in the service of the United States; and he there-
fore makes this declaration for the purpose of being placed on the invalid pension oll of the United States.
He hereby appoints, with full power of substitution and revocation,
of
Post Office Appress is.
State of Della Medical
The state of the s
Claimant's signature, Andrew f. Jamans
ATTEST: DE EURS FI Porm
Wie 2
the first of the second control of the secon

Also personally appeared Storge F Perry, residing at Malerteury Command Mulliant See persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were present and say the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

JEONO F PONT Millian Lee (Signatures of Witnesses.)



Samuel A Gork
(Signature.)

Secret of Probate.

John Character.)

IM FOR PENSIO  ORIGINAL  Applica  Co., Re  INSTAL  Applica  Co., Re  INSTAL  Applica  Applica			TRINSTON, 18	Co. A	M FOR PENSIO	A
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The claimant's identity and loyalty must be proven by two witnesses, certified by the judicial officer to be respectable and credible, who are present and witness the signature of the declarant, and certify to his identity and loyalty under oath or affirmation.

Declarations and other papers should be as legible and clear in statement as possible.

Where any evidence is already on file in any Department of the Government, a definite description of and specific reference to it will render it available in any subsequent claim.

The Post Office address (naming street and number in all large cities) of the applicant, attorney, and witnesses, should be embodied in or accompany every application, and all evidence in each claim; and each change of residence of said parties, while communicating with the Pension Office or the pension agents, should be stated

Pensions are, by law, exempted from any liability on account of the obligations of the pensioners, and no lieu upon them can be recognized.

Testimony in support of allegations made in a declaration may be taken before any officer whose authority and signature are duly certified, and who shall disclaim any interest, direct or indirect, in the prosecution of the claim.

Please give or send this blank to some one who may need it.

# AFFIDAVIT OF CLAIMANT.

(1) State of Mar	County of	middler	55:
In the pension claim of Andren	1 Sur	mm	
late of Co.		Conn Reg't.	$\nabla$ ols.
personally came the claimant above named, who bein	and the second second	• •	-
entitled claim, that Post-Office address is		es that he is the civilitin, this the a	OUVE
County of Nulllery	DIE VOUS	mms.	
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mildary as moral	4	e grand of	
1863 court out	onar l	a aprop 1	
1861			
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	**************************************		
	ENSION .		
Signature by mark must be attested by two persons who write their names,			
go de la telemant	1" 5	1 6 0	4
1-isaran frieran (.	1899 7 1/1	Aron I (donne	
2	FFIC	Afflants Signature,	

ffidavit of Claimant

Reproduced at the National Archives [2] Sworn to and subscribed before me this and I certify that the affiant is the person he represents him self to be, and is a credible witness, that I am in nowise interested in said claim, nor am I concerned in its prosecution, and that I read the foregoing affidavit to said affiant, and acquainted her with its contents before he executed the same. [SEAL] Under provisions of Acts of Congress, approved July 1, and September 1, 1890, affidavits to be used in pension and bounty claims may be executed, within the limits of his jurisdiction, before any officer who is authorized to administer oaths for general purposes. [1] Caption of blank must, therefore be filled up, [2] Jurat must be fully filled out, and [3] official character of the authenticating officer must be given.

> Solicitor of Claims and Patents, WASHINGTON D. C. Filed by

### PHYSICIAN'S AFFIDAVIT

PROOF OF PHYSICAL DISABILITY.-Act of June

ine 27, 1890, F

TAKE NOTICE.—The affidavit should, if possible, be in the handwriting of the affiant; the marginal must be carefully observed before writing out the statement. All the facts in possession of affiant as to the oritinuance of the disability should be fully set forth, and the dates of treatment should be specifically given. Korceslu , County of ..., SS: In the Pension Claim No. CTf. 261. 202 late of Company and regiment of service, if in the army, vessel and rank if in the navy. Personally came before me a. in and for the aforesaid Mass. County and State.... a citizen of whose Post-Office address is well known to me to be reputable and entitled to crédit, and who, being duly sworn, declares in relation to aforesaid case as follows: That he is a practicing physician, and that he has been acquainted with said soldier for about 12 That acatu عنص Low Here embody all the facts known to the affiant in with the marginal instructions. No erasures or interlineations will be per-NOTES. ther certifies in his jurat that they were made before executing the paper. The Physician's Affidavit must show the fol-lowing facts: s the magistrat show the following facts:

1st. A complete diagnosis of the disabilities upon which the claim for pension is based, and the periodduring which he treated him.

2d. That the soldier is suffering at present from a mental or physical disability of a permanent character not the result of his own vicious habits, which incapacitates him from the performance of manual labor in such a degree as to render him unable to earn a support. The degree or extent he has been disabled since the filing of his application should be plainly stated.

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,				/ 2	<u>r</u>	
	orther declares that he ha			for	years, and that	t he has
no interest	, either direct or indirec	et, in the prosecu	tion of this claim.	vell D	a m	. Q
			Affiant's Sign	nature. Give rank a	nd service, if in the	army.
Sworn to a	and subscribed before m	e this 16 Th	day of File	marf	A. D.	. 18 <i>9/</i>
	nd I hereby certify that			1		•
, th	ne contents of the above	e declaration, &c	., were fully made	known to him l	pefore swearing,	includ
in	ng the words		e;	rased, and the	words	
		add	lade and that I ha	ave no interest d	litect or indirect	6 Jan 41n.
			ieu; and that i ha	eve no interest, e	meet of maneet	t, in the
pı	rosecution of this claim.		led; and that I ha	75 P.		., III LEI
_	rosecution of this claim.		L	official Signs	Try	
tificati			L	official Signs	ture. Pea	ce.
_	rosecution of this claim.		L	Official Signs	ture. The Pea	ce.
tificati	rosecution of this claim.	shington &	e. Gusta	Official Signs	ture.  The Pea	ce
ificati [L.S.]	on file in Ma	shington &	Justa, Clerk of the Co	Official Signs Official Che	ture.  The Pea	County
[L. S.]  I,and State,	on file in Ma	shington &	Justa, Clerk of the Co	Official Signs Official Che Ounty Court in as	ture.  The Tea	County
[L. S.]  I,  and State, to the fores	on file in Ma	flidavit, was at the	Luota, Clerk of the Co	Official Signs Official Che Ounty Court in as	ture.  The Pearson of	County
I	on file in Ma	ffidavit, was at the	Lusta, Clerk of the Co	Official Signs Official Che Ounty Court in as	ture.  The Pearson of	County
IL. S.]  I,  and State, to the fores in and for	do certify that going declaration and a said County and State, credit, and that his sign	ffidavit, was at the duly commission ature thereunto	Lusta, Clerk of the Co	official Signal Official Charles County Court in an Esq., where the county are the county county county county are the county count	ture.  The Parameter.  Ind for aforesaid no has signed his acts are entitled.	County
IL. S.]  I,  and State, to the fores in and for	do certify that going declaration and a said County and State, credit, and that his sign	ffidavit, was at the duly commission ature thereunto	he time of so doing and and sworn; the is genuine.	official Signal Official Charles County Court in an Esq., where the county are the county county county county are the county count	ture.  The Parameter.  Ind for aforesaid no has signed his acts are entitled.	County
IL. S.]  I,  and State, to the foreg in and for faith and c	do certify that going declaration and a said County and State, credit, and that his sign	ffidavit, was at the duly commission ature thereunto in and and seal of o	he time of so doing and and sworn; the is genuine.	official Signal Official Charles Charl	ture.  The Pea	County
IL. S.]  I,	do certify that going declaration and a said County and State, credit, and that his sign Witness my h	ffidavit, was at the duly commission atture thereunto in and and seal of a Clerk of	he time of so doing and and sworn; the is genuine.	official Signal Official Charles Charl	ture.  The Pea	County is named to full
If calc  [L. S.]  I,	do certify that going declaration and a said County and State, credit, and that his sign	ffidavit, was at the duly commission atture thereunto in and and seal of a Clerk of the core any officer auti	he time of so doing and and sworn; the is genuine.  office this horized to administer	Official Signs Official Signs Official Che ounty Court in an Esq., wl	nture.  The Pearline of the Pe	County is named to full
If calc  [L. S.]  I,	do certify that  going declaration and a said County and State, credit, and that his sign  Witness my h	ffidavit, was at the duly commission atture thereunto in and and seal of a Clerk of the core any officer auti	he time of so doing and and sworn; the is genuine.  office this horized to administer	Official Signs Official Signs Official Che ounty Court in an Esq., wl	nture.  The Pearline of the Pe	County is named to full

PHYSICIAN'S EVIDENCE
Act of June 27, 1890.

CLAIM A Chum & C.

Soldier & P. T. C.

Co. & Y.

No. 261.202

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We. 261.203

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### NEIGHBORS' AFFIDAVIT.

Act of June 27, 1890.

For the testimony of EMPLOYERS or NEAR NEIGHBORS of soldier (other than relatives), showing his present physical disability, as required under the provisions of the Act of June 27, 1890.

	State of Massachusetts, country of Worlester, 55:
	In the matter of the application for pension of Audrewy Burnard late
	of Co D - 25th Com. Suf (Ctf Co. 261202)
	On this 170 day of Jebrusen, A. D. 1896, personally appeared before me,
	a further of the Deace in and for the aforesaid County, duly
	authorized to administer oaths Levi B 6 hase aged 57 years, a
	resident of Stubridge, in the County of Moracesta
	and State of Mass, whose Post-Office address is 8 miling
	and William J. Lamb
	aged 62 years, a resident of Sturbridge, in the County of
	Worcester and State of Mafsachusetto
	whose Post-Office address is Sturbridge, as above well known to me to
	be respectable and entitled to credit, and who, being duly sworn, declare in relation to the aforesaid case as
INSTRUCTIONS.—Read carefully.	follows: That the have been well and personally acquainted with and very
The witnesses must state: 1st. Their respective ages and occupation; the	Burned for 1/2 years, and 1/2 years, respectively, and that the
length of time they have known the soldier, and how long during that pe-	applicant, andrew J. Barnard, purchased and moved on to a farm
riod they have employ- ed, worked with, or for him, or lived in the same neighborhood with him,	a Limb and Inon a year and red of a for and and
and how near to him. 2d. If they have employed or worked with him they should state	miles from the residence of afficient, In the direction of partifice,
where it was and at what business; or if they know him as neighbors only	Store, church etc affiant is his nearest neighbor (In other
they should state about what distance from him they live, how frequently they see him and con-	die to a also able and acceptance of the we been semilian
verse with him, and how intimate they are with him, and from what dis- ease or disability he is	
suffering with at present, and whether at any time he is obliged to stop work	Knowing in a general way his occupation and condition,
by reason of his alleged disabilities. In this con- nection, if the witnesses have been his employ-	The state of the s
ers, or have worked with him or for him, they should state about what proportion of a	his head, afficient has nonced a call of well on governing your
work he is able to do— whether ¼, ½, ½, ½, ¾, , or as the case may be;	
or as the case may be; what his actual earnings are, and whether or not the wages paid him are	1. Die 1. Die 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
less in amount, and how much less on account of his inability to labor,	awale when treed Hence aftertions of applicant in
than is paid to others physically sound, and doing the same kind of work. They should also	reference to times of distressed feeling in the top of his
state how they are able to say what his disabili- ties are, and describe fully and clearly the	- 1 12 11 1121 11 12 12 1 1 1
symptoms as they appear to them in his case; in fact, describe his physical condition fully, and	business are credable, and believed by the afficient to be
show whether for not be is suffering from a men- tal or physical disability	fact, and that the applicant had been, and is now subject
of a permanent charac- ter, not the result of his own vicious habits, and the extent which he is	to much pecuniary loss from these circumstances.
incapacitated from the performance of manual labor, or the degree he	In reference to manual labor, the applicant choses such
has been unable to earn a support since the filing of his claim.	kinds of work as he con perform; he being unable on
	account of a rupture, to do any hard work; his ability not
1	being more them one half from result of resture alone

I William J. Ban Andrew J. Ban Jew days w					
	Lamb, also having	a sseigs	iber of	the applicant	<sup>9</sup> /
andrew J. Warn	and and em	eployed.	said ap	plicator (8)	
Lew days w	thin a year of	hast, c	onfirm	and agree	THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF TH
with the si	aternents of	the first	Laffian	I as written	₹C\$/
upon this				<b>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</b>	Market Broker
	2 for a sinterpolitic politic	loons and Ad	h a not cone	arned in its presention	
further declare that	Ly Matorio interest in Said	r case and	7 som	erned in its prosecution.	
				1. Janu	
Henry U.C	dora		Levi	B. Choise	
	ritnesses who write sign here.		Signatures		
NOT#.—The witnesses, Justice of the Peace, or other	not themselves equal to the officer or competent person a	task of drawing the and have the blank	filled out and prop	erly executed.	
STATE OF Maffor	ehisetts, co	UNTY OF	Porceste	£, ss:	
Sworn to and subscr	bed before me this day b	by the above-nar	ned affiant , a	nd I certify that I read	
said affidavit to said affi	ant , including the wor	ds			
	erased, and				
	e crascu, and				
				Page sind to	
contents before			. 4		
case, nor am I concerned	-	at said affiant.	personal	ly known to me and that	
y ask a credible perso	J		3965	THE	
•			Official Sig	nature.	
[L.·S.]		J.	stice 9	The Race	•**** •
			Official Ch		
· · · · · I,	<u></u>	; Clerk of the C	County Court in	and for aforesaid County	r
and State, do certify that			, Esq.,	who has signed his name	<del>.</del>
to the foregoing declarat	on and affidavit, was at th	he time of so doi	ng.,	150	
	10/4 11		hat all his offici	al acts are entitled to ful	
in and for said County as	id State, duly commission	ied and sworn; ,i	mat_an ms omer	in dets are engineer to lar	, ( > /
in and for said County as faith and credit, and that		•	mat <sub>z</sub> an ms omer	(E) 18%	
faith and credit, and that		is genuine.		E S	WES.
faith and credit, and that	his signature thereunto i	is genuine. iisday	of	E S	NO ENCO
faith and credit, and that	his signature thereunto i	is genuine. iisday		E S	NO ES
faith and credit, and that	his signature thereunto i	is genuine. isday	of	E S	NO CO
faith and credit, and that Witness my  [L. S.]  NOTE.—This can be	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office	
faith and credit, and that Witness my  [L. S.]  NOTE.—This can be	his signature thereunto i hand and seal of office th	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office	
faith and credit, and that Witness my  [L. S.]  NOTE.—This can be	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office	
faith and credit, and that Witness my  [L. S.]  NOTE.—This can be	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office	
faith and credit, and that Witness my  [L. S.]  NOTE.—This can be	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office	
faith and credit, and that Witness my  [L. S.]  NOTE.—This can be	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Cler	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Cler	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Cler	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Cler	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Cler	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Cler	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Clerk  A D WITNESS TO THE CONTROL OF CLERK TO THE CONTROL O	his signature thereunto is hand and seal of office the Clerk of Clerk of the court is not necessary.	is genuine.  day  of the	of ster oaths for generathen such certificat	al purposes. It such offices a must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Clerk  Vitness my  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be uses a seal, certificate of Clerk  NOTE.—This can be used to consider the constant of the	his signature thereunto is hand and seal of office the Clerk of Clerk of the court is not necessary.	is genuine.  day  of the day  thorized to adminis  If no seal is used, to	of ster oaths for generathen such certificat	al purposes. It such offices a must be attached.	
Witness my  [L. S.]  NOTE.—This can be uses a seal, certificate of Clerk  Very Corp.  [L. S.]	his signature thereunto i hand and seal of office th  Clerk of executed before any officer au	is genuine.  day  of the	ofster oaths for gener	al purposes. If such office must be attached.	

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# PHYSICIAN'S AFFIDAVIT.

, 0/	the Pension Claim No.	20/202	of A	vorew g.	1 Jarnaro
of Third	nolge Mas	2	late of	bo. D.	27th, bo
Voluntee	ers Also be (Company and Regim	ent or service, if in th	F. Reg'5,	Conn. Rank, if in the na	Volunteers
	ame before me, a				
	:ate		•		
			r		
	address is	•			
well known to me	to be reputable and e	entitled to credit, a	and who, being duly	sworn, declares	in relation to afor
case as follows:					
That he is a	a Practicing Physician,	and that he has l	peen acquainted wit	a said Ands	ew & Ban
<i>D</i> • .	Mars.				•
	unity of knowing his I				
	ly physician				
. (	1 1			,	
minut not it	Andrew & Bu	and S	Z-1.1.2 M		
	•		1 /		
	- 11	Varindi of	The bear	piles,	Themat.
afflicted with the f	ollowing diseases:	***************************************	0000	/	
	following diseases: /			,	
and m	fiture.				
That by reas at least to the foll has been heavy	son of the diseases mentowing degree or extent to tally manual	tioned, he has been By re disabled. labor.	since said date incap	pacitated from potential supplemental supple	erforming manual
That by reas at least to the foll has been heavy	son of the diseases men dowing degree or extent	tioned, he has been  By re  disabled.  Calos.  by wound  mental u	since said date incap  as on of -  disable for the head of the hea	ead, he	erforming manual in along any has not be always u
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That by reas at least to the foll has been heavy	son of the diseases men dowing degree or extent in totally manual reason of 7 do any	tioned, he has been  By re  disabled.  Calos.  by wound  mental u	since said date incap  as on of -  disable for the head of the hea	ead, he	erforming manual in along any has not be always u

State of 1941 cachacult	County of House	
Sworn to and subscribed before me, this $29$	day of Mark	, A. D. 189
and I hereby certify that affiant is a practicing physician	n in good professional standing; that the cor	itents of the above
declaration, &c., were fully made known to him before swear	aring, including the words	erecurate microscoccoccoccoccoccoccoccoccoccoccoccocco
erased,	and the words	annan an a
added; and that I have I	no interest, direct or indirect, in the prosecu	tion of this claim.
	John & Day	
[SEAL.]	Official Signature.	der.
aei •	Ufficial Character.	:

Clf No. 261. 202.

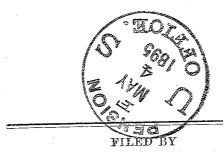
### PENSION CLAIM

OF-

andrew J. Barnard\_ Late co. "D"

1 st regt levn. vols.

MEDICAL EVIDENCE



### NATHAN BICKFORD,

CLAIMANT'S SOLICITOR,

WASHINGTON, D. C.

U. A. Beckert, Printer, Cor. E & Fifth Sts., N. W.

Willimantie Com. October. 200 1883. This is to certify thus Corp. a.f. Barnard of Co. D. 27th Righ- C.V. was avounded at-Fridnicholing Va. in the charge on the Stone wall - on the 13th Dec. 1863, The wound was onner by a bullet on the Fop of the head, cutting through the scalp and bone to the deste of the setume take of the bone. I done the cound the same day and daily untile aboutthe 16th of fan. 1864. when he was sent to hospital at- alocangria Va. J. Morton Idle M.D. Seate Asst. Sung. 37th V. V. Ensonary appraid of Monton Hill Mo. D. Jarasting Johnsieien in Willimantie District of Mondham and made out to the foregoing statement, and that the has no interest in his plain for a John Officeron Judge of Footate for the Opstrict Mondham Conny pension

Reproduced at the National Archives

Im. 455,752 A.J. Barnard. "10! 27. Comn.

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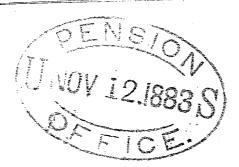
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# HISTORY OF CLAIM.

Pensioner,A	n drew	J	Barn	and			Certific	eate A	Co. 26	1,202	·
1st service, 🔃	) ] (	Sorm. V	oul,	enlisted,	April	<b>22</b> , 18	61.; di	scharg	ged, Jul	y 31.,	18 <b>6</b> l
2nd service, ⊅	27	٠	u u	: enlisted,	Sept-	<b>27</b> , 18.	<b>62</b> ; di	scharg	ged, Ju	ly 27	18 <b>.63</b>
T		n in	-1 C*O**						a. (	۲۱	
Pensioned from	Mar	2	1895	+ \$ 6		per mo	onth fo	rais	wig	- 4	
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***************************************				··							
Original declar	ration, $A$	lct of	July	14		18 <b>62</b> , f	iled	Juhy	25,	1882	
elleged g.s.v	<u> </u>	head		· · · · · · · · · · · · · · · · · · ·						************	
Deel under Stat I	une 27/90	file 2	Sept. 13	190, allege	a way	in head	Some	tares	Reje	Deg 21	9 (1)
		ن د	April 27	195 · q	is.w.gl	Lord, var	plum &	pilos.	(	May 23	1983
<del></del>	42 42		May 13	95 4 50	ame V	Vheuma	tisten 1				· <u>-</u> -).
·	wa no per manana ma			· · · · · · · · · · · · · · · · · · ·							
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	and the second like the second transfer to the second transfer transfer to the second transfer tran	THE					***************************************				
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			*** ** *** ***, *** *** ***, **** *** *								
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										,	

Add Act of June 27, 1890.

### INVALID PENSION.

P.O., Acton,	H-No. 261,202
,	Rank, Corporal
County, Middlesex.	Regiment, 27 Com Nol. Inf.
State, Massachusetts,	$\mathcal{L}$
Rate, \$, per month commen	cing 1150000 15, 1898, \$
	· ·
Mr. L. D. V. C. Die	<b>-</b>
Disabled by	
No so	RESECTED TO
Order Wy a my	1. hts, 26119
RECOGNIZ	ED ATTORNEY. Jufty, 26,19
Name, Nathan Bickford,	Fee, \$.10
P.O., Washington D.C.	Articles filed,, 189
APPR	OVALS.
	100, L.S. Perking, Examiner.
Approved for G.S. W. Thear, right, inquirebe hersen piles and	Approved for hura luxuround of
delbility due to a go Colonit ons,	head and right ingunial
similing Kneepans. Us disabit	shown permanent in chara
	And
	Ouslaw of Hylling 92
Aug. 27,1900, It.a. Ray Legal Reviewer. C. Johnson &	Dustan Golf Whilliam Medical Referee.
1 misonses	180 -106
	paid to
Pensioned from July 15 , 1881, at	5 12 , for gun-shot wound of head.
ncreated " March 2 1895 to S	3.6
SERVICE SHOW	WN BY RECORD.
Enlisted April 22 , 1861,	honorably discharged July 31 , 1861
•	honorably discharged. July 27
, , , , , , , , , , , , , , , , , , ,	•
Declaration filed September 13., 1890, al	leges permanent disability, not due to vicious habits.

Additional

### Act of June 27, 1890.

### INVALID PENSION.

Claimant, Andrew J. Barnard Cth No. 261,202
may P.O., Stubridge Acton Rank, Corporat
Jew County, Woxeder Middlesux Company, D
Regiment, 27 Com Not Infi
per month, commencing Defiteration 13.1890 2 Mil 27.189
13 2 3 D
S S Stabled by
REJECTED
Jane 17-98
RECOGNIZED ATTORNEY.
3 Fame Bathan Bickford, Fee, \$ 10 Agent to pay.
P.O., Washington, D. C. Articles filed, 189.
O APPROVALS.
Submitted for admission, February, 1898, L.S. Perkine, Examiner.
Sporoved for Steph waguind house Approved for Mennatism and
O shownation, files and grow that wound of disease of rectum \$6.
hear. Pouring in the stare last name No other disability shown,
Qualitation to begin April 27 1845 men
ical Repair wel valety dis also fruit likes
Medical Referee.  May 201898.  Medical Referee.
illay of 198
Pensioned from July 25, 1882, at \$ 2, or que shot worms of head
Increused " March 2 1895 to \$ 6
SERVICE SHOWN BY RECORD.
Enlisted April 22 , 18:61, honorably discharged July 31 , 18:61
September  Re-enlisted April 7, 1862, honorably discharged July 27, 1863
Declaration filed April 27 , 1895, alleges permanent disability, not due to vicious habits,
from q. S. W. of head, supture and piles. Declaration filed May 13, 1895,
alleged same and sheumestrom.
Declaration files Deptember 13.1890. alleges wound in the head and rupture

### ACT OF JUNE 27, 1890.

		The second secon
adoletunal	INVALID	PENSION.

, v	
Claimant Andrew 1 Da	a to day to the
Claimant, Andrew J Va	innara
P.O. Sturbridge,	Rank, Cosfse
	Towner,
County, Droncester	Company,
na-	20
State, Mass	Regiment, 27. Com Vol.
Rate, \$, per month; commen	cing Sefet 13.1890
Disabled by	·
•	
DECOCNIZE	
RECOGNIZE	ED ATTORNEY.
Name Hole Januer,	Fee, \$ 10 Agent to pay.
Name, and a surre	ree, \$\phi_LL Agent to pay.
P.O. City	Articles filed,, 189
,	,
·	
APPI	ROVALS.
$\mathcal{O}_{\mathcal{I}}$	S DA.
Sufmitted for ad Dice 8,"	1892, Examinor.
	Rejection, not disabled
Approved for Goldinson	Approved for Angeles de great hungasond
Persion granted under former laws by	
Cerif No. 2. 2. 18-9 D	I Jany disalities so as to be culted
10 61 Garage of France on source source source	C The state of the
0 . 0 . 1	pynder acford from 27. 1879.
Drawt Sub payments	Hand And College and 803
	thereafter. The state of the st
- Safr	Of Eighern
blegal Reviewer.	Medical Referee.
Dec 17, 189	60ec 21, 1892.
	2
	ast paid to, 18, at \$
Pensioned from And . 25 1887 -+	\$ 2, for ISI of head
2 Orovovova promo	W
SERVICE SHO	WN BY RECORD.
Enlisted Afril 22, 1861,	honorably discharged July 31, 1861,
1 1 1 2 2 10	1 - 2 4
Re-enlisted Ofit 7,1862,	honorably discharged July 27, 1865
8-1-4 12"	
Declaration filed CLJAC 10, 1890, a	alleges permanent disability, not due to vicious habits,
from wound me	read and Enfeture
	·
	0-4

No mile.

Act of June 27, 1890.

### AA DECLARATION FOR INVALID PENSION.

AA

To be executed before a Court of Record or some officer thereof having custody of its seal, a Notary Public or Justice of the Peace, whose official signature shall be verified by his official seal, and in case he has none, his signature and official character shall be certified by a Clerk of a Court of Record, or a City or County Clerk.

State of Mapa huntto, County of Morcester, ss:
State of prosper to the state of the state o
On this 22 day of 2 herbo, A. D. one thousand eight hundred and ninety
personally appeared before me, a Mutury Tublus
within and for the County and State aforesaid, Undrew f, Warnard
aged 47 years, a resident of the John of Sturbridge
county of Meester, State of Maps hundle, who, being duly
sworn according to law, declares that he is the identical and well as a warmen of the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, declares that he is the identical and the sword according to law, and the sword according to law, and the sword according to law, and the sword according to law accordin
who was enrolled on the 220 day of April , 186/, in Waterbury Com,
in New Com Com 22 day of Got. 1862 Confrol 27tho in Military service, or vessel, if in the Navy.]
in the service of the United States, in the War of the Rebellion, and served at least ninety days, and was honorably
DISCHARGED at New House Co, on the 27th day of July , 1873.
That he isunable to earn a support by manual labor by reason of
wound in the head and rufture [Here name the disease or injuryes from which disabled.]
That said disabilities are not due to his vicious habits, and are, to the best of his knowledge and belief, of a permanent
character. That he has applied for pension under application No
That he is a pensioner under Certificate No. 26/1202  [If a pensioner the Certificate number only need be given. If not, give the number of the
That he is a pensioner under Certificate No. [If a pensioner, the Certificate number only need be given. If not, give the number of the
former application if one was made.]
That he makes this declaration for the purpose of being placed on the pension roll of the United States under the
provisions of the Act of June 27, 1890.
He hereby appoints H. C. TANNER, or WASHINGTON, D. C., his true and lawful attorney to prosecute his claim
and receive a fee of \$10. That his post-office address is turbudge
County of Worcester , State of Mapullusto
andrew & Barnard
Claimant's signature.
Attest: (1) W. D. Lynnburk
(2) S. D. Merrill

Repro	oduced at the National Archives	1. 1.
	WAD-h. A.	The Andrew
	Also Isonally appeared	iding at white
1	and J. Mursill , residing at J.	
:	persons who I certify to be reputable and entitled to credit, and who, being b	y me duly sworn, say that they were present
i	and saw anohew & Barnard the claiman	t sign his name (make his mark) to the
i	foregoing declaration; that they have every reason to believe, from the appeara	ance of said claimant and their acquaintance
	with him for two years and years, respectively, that	
	himself to be, and that they have no interest in the prosecution of this claim	P. A. Pura ford
		S All III
	(If affiants sign by mark two persons who can write sign here,)	(Signature of affiants.)
		Schlenber A. D. 1890, and
	Sworn to and subscribed before me this Leund day of	······································
	I hereby certify that the contents of the above declaration, &c., were fully	7 made known, read, and explained to the
	applicant and witnesses before swearing, including the words	
3	erased, and t	he words
09 W		added; and that I have no interest,
(m)	direct or indirect, in the prosecution of this claim.	in D. Bata
		MACON HALL
		(Official character.)
•	SHOOMER COULD STATE	OF NEW YORK, OSWEGO, July 7, 1890.
:	W W Wridgen C Tenn	or Esq. of Washington, D. C., formerly of
-	This is to certify that I am personally acquainted with ridgon C. Tand this city; that he is an Attorney-at-Law, in good standing, possessed of suc and public men as to enable him to render claimants before the Department	s valuable services.
0%		JOHN C. CHURCHILL, e Supreme Court, State of New York.
11	Justice of th	======================================
21/9	The Act of June 27, 1890, REQUIRES, in case of a soldier:  1. An honorable discharge (but the certificate need not be filed unless called for).	
- 1		nave originated in the service.)
1/2	2. A minimum service of milesy days of a permanent character, not due to vicious habits. (It need not it 3. A mental or physical disability of a permanent character, not due to vicious habits. (It need not it 4. The rates under the act are graded from \$6 to \$12, proportioned to the degree of inability to earn a 5. A pensioner under prior laws may apply under this one, or a pensioner under this one may apply for the same period.	under other laws, but he cannot draw more than one pension
J.	for the same period.	
1 - 1		
$-\eta'$	JUNE 27, JUNE 27, Regt. 1867 1867	
ĺ	JNE 2  Reg. 70  186.	, 3
	N. I. A.	FILED BY TANNER, AND COUNSELINGTON, D. C.
		H Z O
	APPROVED APPROVED APPROVED APPROVED AATION A	A S C
		Z O
	R 1890. ST 1890. ST 1890.	FILED BY TAN GAND C
	6 88 7 4 6 7 7 7 8 9101	
		FILED BY  C. T.A.IN IN E.  NEY AND COUNS WASHINGTON, D. C.
	LAIM FOR PENSION CONGRESS, APPROVED  WALLACLARATION. DECLARATION.  OCLARATION.  OCLARATION.  OCLARATION.  PENER  OCLARATION.  OCLARATIO	FILED BY  FILED BY  H. C. T.A.IN IN E.R.,  RNEY AND COUNSEL  WASHINGTON, D. C.
100 m		
- 40		H. C. ATTORNEY WASH
	CLAIM FOR PENSION.  ACT OF CONGRESS, APPROVED JUNE 27,  AUT. CH. 26/202  DECLARATION.  DECLARATION.  Co. 2 27 Regt  Co. 2 27 Regt  Tols  Enlisted Oct 2 2 1862  Discharged Auly 27 1863  Discharged Auly 27 1863	ET. C. ATTORNEY WASS

# JUPPLEMENTAL DECLARATION OF CLAIMANT.

Act of June 27th, 1890.

State of Mapachuse	Sto, County	of Warce	stic	, SS.
(1) PERSONALLY APPEARED on this.	2 day of	Mril	A. D., 189	refore me,
(1) PERSONALLY APPEARED on this	uay or.,	./	* * * * * * * * * * * * * * * * * * * *	
Justice of the Dead	in and for the	aforesaid County, du	ly authorized to adminis	ster oaths,
			rears, a resident of	
Stubudge			whose Post Office	
			n according to law declar	
the identical andrew J.	Jama		NROLLED on the 22	
apr. 186/, in (Her	re state rank, compan	y and regiment in Whit	1. Count	he Navy.)
the service of the United States, in the	war of the Rebellion	n, and served at least	ninety days and was H	ONORABLY
ISCHARGED at Wen Hawn	- bann	on the $3/$ 'd	ay of July	
86/, and who is an applicant for	w.	pension, No. 64	1. 261, 202 on	account of
wound of he	ad as	id v	upture	ane
Piles				
	Se Se	let 1	890	
lleged in his Original declaration filed on or (2) He further declares that in addition	to the shove pam	ed disabilities hereto	fore alleged, he is disable	d for man
1.	and		e Said a	1100
AS EVIDENCED BY STATEMENTS		CASE AND FOR	WHICH PENSION IS	CLAIMED
(3) He further declares that said disabi				
lisabled at the time of filing his original de				
ricious habits and are to the best of his kno	wledge and belief o	of a permanent chara	acter and that he has	
either the military or naval service of the U	nited States except	as above set forth	60, D	
27" Com.	Vols.			
and that he makes this declaration for the	purpose of being	placed on the pension	rolls of the United Stat	es under th
provisions of the Act of June 27, 1890.				
He therefore requests that this Suppl	emental declaration	be accepted as a part	of his Original claim an	d considere
in connection therewith.				
He hereby appoints NATHAN	BICKFORD, o	f Washington,	D. C.,	
with full power of substitution and revoca			*	by agrees
allow his said Attorney the legal fee of TE				
1. George & Local 2. Dahn E. Ladd	(d	andre	Sarne	and
DD D 11	•	(	(lainant's Signature.)	
, John O. Dadd				

•				2	_	
	Also personally	appeared Glas	ge & to		ng at Stur	tride
	residing at -8/1	nighted	and #4/	in Exam		
	respectable and entitle	ed to credit, and who, t	eing by me duly swo	n, say that they were	, persons whom I cen present and saw the	
•	Audre	$v \neq 12n$	mard	sign his name (o	r make his mark) to	the fore-
	going declaration; that with him for	t they have every reaso		e appearance of said cla		
		y have no interest in th		ely that he is the ident	ical person he represe	ents him-
				e C	O.C.	
				D. P.	2 - 20 cm	id
	(If either of the identif who can write their	ying witnesses sign by m names MUST sign on thes	ark, two witnesses e two lines.	(Signatu	re of Witnesses.)	<u> </u>
	Sworn to and subscribe	d before me this	Cund day of	Missel		· · · · / •
				tents of the above decl		D., 189 <b>5</b> , —
		known and	explained to the app	dicant and witnesses b		
		words	file to cover words			
	[SEAL.]	certificat and the	words	I that I have no inter	rest direct or indirec	t in the
	·	Certificure of Execution of	this claim.	104		o in one
		(9n	Ough	Official Signatur	ana E. L. De	
A Mag			900)10	[Official Characte	er.j	
	· · · · · · · · · · · · · · · · · · ·					
			6. • • • • • • • • • • • • • • • • • • •		Na T	es.
;	.*	<b>~</b> .	•		•	
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¥.,	Years III				,	il Asi
€ North	Declaqation  TOIN.	Reg't			e,	No die
A W	erlana O D , 1890.	12 - 3	90		FOR, ITOR, C.	Printer, 617 E Street AW.  15. M DIVISION.  29. 895.  B. APN. 29. 895.
0, 0	Al Del For STC, 1	1218		JONE .	Y VKI OLICI , D. C	DIVE Str
6	A 70	V I	D. A	MEN ?	FILED BY HAN BICKFOI ANT'S SOLICITOR, WASHINGTON, D. C.	Beckert, Printer, 617 E Stress  B. APN 29  B. APN 29
	menta  U  T  T  T  T  OF  J  T	in the		DEN'S E	FIII AIN ASHIN	and had
M		h. M	No.	N +OF		A. Beck
Jan 1997	ding.	11.38	13		CC	Chas. A
	and the second s	J 3	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	e P		

Attorney Filed.

# SUPPLEMENTAL DECLARATION OF CLAIMANT.

Act of June 27th, 1890.

	State of Mapachinety, County of Warcester, ss.
	(1) PERSONALLY APPEARED on this day of A. D., 189 5, before me,
	a Nushicl of the Seach in and for the aforesaid County, duly authorized to administer oaths,  Can be y. Brannard aged 52 years, a resident of
	Btirblidge, mass. whose Post Office address is
	Sturksiell "who being duly sworn according to law declares that he
	is the identical andrew J. Barnard who was Enrolled on the 22 day of
	april 1861, in les. "D" 121 lenn. Ools.
	in the service of the United States, in the war of the Rebellion, and served at least ninety days and was Honorably
	DISCHARGED at New It aren, Come on the 31" day of July
	186/, and who is an applicant for malif pension, No. 26/.202 on account of
	wound of head, motime and giles
a digital di di	olloged in his Original deplayation filed on an about
•	alleged in his Original declaration filed on or about  (2) He further declares that in addition to the above named disabilities heretofore alleged, he is disabled for man-
	ual labor by Rhermation back Shalver, and knees
	and have been transled about thirteen year
	have spells that for several day am companie
	to my hed
	AS EVIDENCED BY STATEMENTS ON FILE IN HIS CASE AND FOR WHICH PENSION IS CLAIMED.
	(3) He further declares that said disabilities render him unable to earn a support by manual labor; that he was so
	disabled at the time of filing his original declaration as above stated; that none of said disabilities are in any way due to
	vicious habits and are to the best of his knowledge and belief of a permanent character and that he has not been in
	either the military or naval-service of the United States except as above set forth.
	In leo." 27. lemn. Orlo, Det. 22. 62 until
	July 27'63
	and that he makes this declaration for the purpose of being placed on the pension rolls of the United States under the
	provisions of the Act of June 27, 1890.
	. He therefore requests that this Supplemental declaration be accepted as a part of his Original claim and considered
	in connection therewith.
<b>,</b>	He hereby appoints NATHAN BICKFORD, of Washington, D. C.,
Division	with full power of substitution and revocation, his true and lawful Attorney to prosecute his claim, and hereby agrees to
	allow his said Attorney the legal fee of TEN DOLLARS when the claim is allowed.
Law	1. Charlotte PLadd, andrew J. Barnard (Claimant's Signature.)
•	2. George Houdd (Claimant's Signature.)
	ii claimant signs by mark, two persons who can write their names must attest same by their signatures here.

Also personally app	Color of Patte & Locales	residing at Shurbries
	and Glory &	
residing at 8/1	wheredy	, persons whom I certify to be
	credit, and who, being by me duly sworn, say that the	y were present and saw the claimant,
Andrew J	Barnard sign his r	name (or make his mark) to the fore-
	ey have every reason to believe from the appearance of	
with him for 6	years and years respectively that he is the	ne identical person he represents him-
	eve no interest in the prosecution of this claim.	
	Colonia Colonia	ITT P LI
	Nuari	oue of Laaa,
	Georg	-0 9 Locald
(If either of the identifying who can write their nan	g witnesses sign by mark, two witnesses des MUST sign on these two lines.	(Signature of Witnesses.)
· · · · · · · · · · · · · · · · · · ·	efore me this & day of Afrik	1
Sworn to and subscribed be		A. D., 189 <b>5</b> ,
	and I hereby certify that the contents of the ab	
•	known and explained to the applicant and wit	nesses before swearing, including the
	words	
[SEAL.]	erased and the words	
	added; and that I have	no interest, direct or indirect in the
• • •	prosecution of this claim.	
	Tomicial Comicial	Signature.
	to a justice of	The Seace
•	t a to	· Onaraotor.j
	<b>5</b> 8	
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	\$ · · · · · · · · · · · · · · · · · · ·	

M. 28/26/202. J.

Supplemental Declaration

ACT OF JUNE 27TH, 1890.

Kindrew J. Barna, "W. J. Lemin Kross. Cul. 20 27 Com

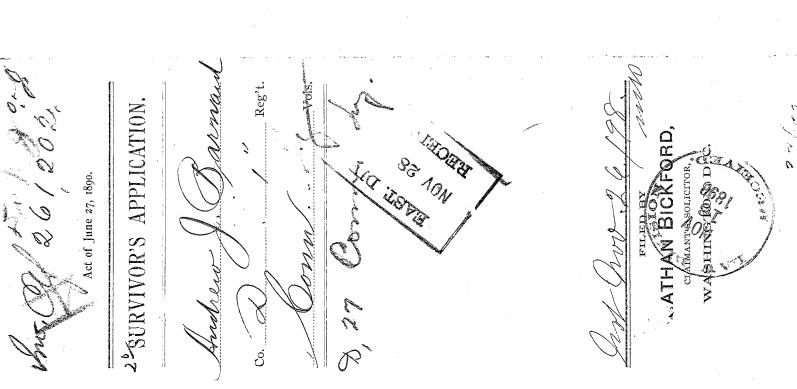


NATHAN BICKFORD

C TMANT'S SOLICITOR,
WASHINGTON, D. C.
Chas. A. Bookgrin, Printer, 517 E Street, N.

Chas. A. Bjekerth Printer, 617 E Street, N. W. Es. Willy 15 15 15 15

Also personally appeared Firstern Easter brook residing at Mast &	eton
	ding at
West Cletin Michalusa-lu man, persons whom I certify to be respectal	ole and
entitled to credit, and who, being by me duly sworn, say they were present and saw (11 whrun)	
Swr and, the claimant, sign his name (or make his mark) to the foregoing declaration	; that
they have every reason to believe from their acquaintance with him for Wyam and 2h p	en
years respectively, that he is the identical person he represents himself to be; and that they have no i	nterest
in the prosecution of this claim.	1
Signature by mark must be attested by two persons who write their names.  Signature by mark must be attested by two persons who	roole
Frunk Helbliten	nb
Signatures of two identifying witnesses.	
Sworn to and subscribed before me this // day of horoman A. D. 1898	, and I
hereby certify that the contents of the foregoing declaration, etc., were fully made known and explained	l to the
applicant and witnesses before swearing, including the words	
erased, and the wordsadded; and that I h	ave no
erased, and the words  interest, direct or indirect, in the prosecution of this claim.  Certification  Record  Signature.  Signature.	
of execution Record Darch Antehin	
[SEAL.] Signature.	2 1
Myber of Ill I care Official Character.	



### DEGLARATION FOR PENSION.

Act of June 27, 1890.

	state of, County of, 55:
1	personally appeared Indrem & Sarnard aged 5 7 years,
	a resident of Medfield County of . Torfalk State of . Mass.
,	whose Post-office address is Med field , who, being duly sworn according to law,
	declares that he is the identical Andrew J. Garmardwho was enrolled on the A
	day of
	in the service of the United States, in the war of the Rebellion, and served at least ninety days and was honorably
	discharged at NEw Hauer Com on the 27 day of July
	186.3. That he is
	Mount of head Jupping bull bull there are all the diseases or injuries from which you are disabled, whether one to your service or not.
	general debility and debility naturally
	die Comment of the Co
	1 au 10
	*.
	That he hasebeen employed in the military or naval service of the United States otherwise than as stated
	above. Low in the service was, if any, whether prior or subsequent to that stated above, and the dates at which it began and ended.
(	Ehlisteel on 22 of Oct 1862 at New Hours 27 Hay July 1868
de	That said disabilities are not due to vicious fabits, and are to the best of his knowledge and belief permanent.
	That he has
	That he is a pensioner under Certificate No. 26. If a pensioner, the Certificate number only need be given.
As.	and that he makes this declaration for the purpose of being placed on the pension roll of the United States under
4	the provisions of the Act of June 27, 1890. and Act of May 9, 1900.
	That he hereby appoints, with full power of substitution and revocation, NATHAN BICKFORD of
ેલ -્	WASHINGTON, D. C., his Attorney and authorizes him to present and prosecute this claim and to do any and
erij Gege	all acts necessary to effect the purpose of said appointment, the fee to be TEN DOLLARS as prescribed by law
	If the claimant makes his mark, two persons who can write must attest by signing their names on the lines below.
	and Claimant's signature.

	h. brocker	
Also personally appeared.	les and John HE	mber
residing at.		persons whom I certify
. , , , ,	dit, and who, being by me duly sworn, say the	y were present and saw
Andrew J. Darn	chof, the claimant, sign his nat	-
	they have every reason to believe from their acqu	
	years respectively, that he is the identical person	on he represents himself
to be; and that they have no interest	in the prosecution of this claim.	or Ren
two persons who write their names.	A A CIL (III	
	2 John TV Signatures of two identity	Symulty Sying witnesses.
William Co. an		
10	1	
State of Masoa che	pay County of Joyales	<b>,\$\$</b> :
SWORN TO AND SUBSCRIBED BEFORE A	IE, this day of DEREMBER.	, A. D., 1900.
	and I hereby certify that the contents of the foregoing	declaration &c., were fully
A cold	made known, and explained to the applicant and including the words	•
Gertificate on file to cover date	erased, and the words	
of execution. [SEAL]	added, and that I have no interest, direct or indirect,	in the prosecution of this
	claim.	
	Melleane Grand	
Centificate fe	lee Duption of the	Deace
Dension & Spor		
This may be executed, within the limits of his	jurisdiction, before any officer who is authorized by law to admin	ister oaths for general purposes.
No erasures or interlineations will be p	ermitted, unless the magistrate certifies in his jurat that they were	made before execution.
DIV.		
ea 1900		
TED.		e ja ti <mark>nt</mark> Harandaria
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	and the state of t	
N. Rog't.		6 -
		, C. S. S. S.
19, 1900. APPLICA		ED BY BICKFORI 's Solicitor, FTON, DOS
1, 1890 1, 1890		BY ICKFO Solicitor, ION, D
of May 9, amending of June 27	<i>d</i> :	FILED BY NN BIC  IANT'S SOII
	6:     ·	FILED BY THAN BICI Claimant's Soli ASHINGTON
VOI PAGE AS		Clai
PAE 30		Y,
So Su		
J. 2 0 11 0	• (1	Reproduced at the National Archives

# HISTORY OF CLAIMANT'S DISABILITY.

State of Massachusetts, Country of Worester, 55:
In the matter of the original invalid pension claim No. 26/202, of audient
J Barnard, late of Co"D" - 27th Cour Juf ON THIS 16th day of February, A. D. one thousand eight hundred
and Minely-One personally appeared before me, a Justice of the Peace
in and for the aforesaid County, duly authorized to administer oaths. Quelle
I Branand aged 47 years, a resident of Sturbvidge
in the County of Workeller and State
of Mass, well known to me to be reputable and entitled to credit, and
who, being duly sworn, declares in relation to aforesaid case, as follows: My Post Office address
is Lurbaidge, Workelte, Co, Wald.  (Give present address in full.)
Since my discharge from said service on the 25 day of 4, 186.3;
I have resided in Muterbury Cettor 183 to 74 - 74 & 96 at
New Howen Ct / 7 x / 8 at Marwille Ct / 7 gat Waterlung:
hi STX 82 at Belliany & Woodbridge Ct: 82 0 75 at Muctor 1/86 6
Wender Hill 189 at Hamelton Crather & Stust vidge
and that my occupation has been that of a Jermer
I further state that the disability for which a pension is claimed arises from would out
tu head and refiture which was contracted in 1802, at Hoel's at Hoel's (Here state time, place, and all the elections ances under which
the disability for which pension is claimed originated.)
though to the back leaving a sear, or seam as wide as z
fugers, 5 inches long, the outside skull beauty cracked
and splintered which fortially healed & at times Broke out
The nuftine was caused by lifting
From my said discharge to the present time, I have received the following medical treatment
for said disease: Dr. Roch and Meated me about 3 (Give the name and address of each physician employed, and the date when each commenced and ceased to treat you. If any
mus when I returned from the army have of them are deceased, so state.)
not had a Dr suice as Juns too per Thay
for one and was advised that no treatment
could care me Have had no vicious
habits of any Knid and my disability
dos not avise from any vicious
habits.

8

No. 142575

#### WAR DEPARTMENT, Surgeon General's Office,

RECORD AND PENSION DIVISION,

SIR:	Washington, D. C., May 28, 1883
	erewith your request for a report of hospital treatment in
Claim No. 455752/, w	ith such information as is furnished by the records filed in
	rew J. Darnard, Porpl. lo. D. 27th bonn.
	light wound of head at the battle
of Frederickebur	g. Va. Dec. 13. 186V, nemark. Brein
<i>/</i>	
	. and the state of
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	part and the second sec
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/-	
<u>/</u>	
By order of the Surgeon General	: B Fr Paha
To the	Assistant Surgeon, U. S. Army.
Commissioner of Pension	rs. per T. C. Porder

RECORD & PENSION OFFICE .

Eastern Division.

### Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. & Janne 14, 1895

Respectfully referred to the Chief of the Record and Pension Office, War Department, requesting a full military and medical history

(Descriptive list.)

of the soldier.

Please examine all records likely to afford any information as to diseases, wounds, or injuries incurred by him while in the service.

No other report on file.

Claim No. 261,202

Name, Andrew J. Barnardo

Co. D. 27 Reg't. Come voleinf

Commissioner.

Respectfully Returned to

the affectant

General, Your Da-

frustment, for age

at Sule of endist-

Ct. 261.202

an freed J. Barmand. A-27-Comm. Tayl.

#### WAR DEPARTMENT,

#### THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON,

Jan. 18, 1918.

Respectfully returned to the

Commissioner of Pensions,
with the information that in the case of Market L. Darnard
co 2, 27 Regit Conn Inf.
the records show personal description as follows:  Age / feet, inches,
eyes
place of birth
occupation
·
NSIGN.
JAN
0.000
Jos and zand
The Adjutant General.
(A. G. 0.136) Per

# Request for Special Action in Pension Clain

Request for Special Action in Pension Clain

Note.—To be filed with the Commissioner of Pensions, whereby special action is requested by reason of extreme age; or threatened dissolution of claimant; or dependence of the claimant on charity; or other like special and urgent reasons which may be particular to the case. The statements must be verified by the oath of the claimant making them, or of other reputable person and corroborated by the claimant's family physician, or if no physician is in attendance, then by neighbors, who should give, under oath, reasons for knowing the facts as to the claimant's physical and financial condition.

	muss	, <b>Q</b>	ounty of Mis	deris	_, 22:
ON THIS	14 day	/	-5 71		_,
l time		Read	, A. D. 189	personally appeared before	e me, a
mue	my 7710	in and	I for the aforesaid County,	duly authorized to administe	er oaths,
indres	V/15as	num aged !!	years, a resident of	Teton	
the County of		11	and State of	2041	***************************************
,	,	anta	and State of		
hose Post Offic	te address is	nevon			
d who, being d	uly sworn, declares	as follows: That I	ndrung 1	Sarnary "	ho is an
plicant for per	asion No. $26$	1202	and for the reason given	below request is made for	انٹریس
				I have been	
un mal	ne claim by the Hon	orable Commissioner of Po	ensions. That	my hear	my
Vote.—State the rea	asons why special action	should be taken, such as extrem	2 on and	of claimant: or dependence of the	laipant
Morr				Supports	mhs
	and openia and dischill	casons which may be particular	to the case		700
mo				east hun	Shote
20 822	apples	entron fo	o merci	in blf Per	ssor
0					······
					*************
l	100				
teorge	CT- FORZE	st		6 -	
Saruh	A. Hulah	in	Undren	1 Barnan	
I WO WI	tnesses who can write s	sign here	· (	grature of Claimant	_
d case, nor am	Inted him with its co I concerned in the p	ontents before he executed rosecution.	the same. I further certify	that I am in nowise interes	ested in
			Burnh	Dutohin	7
	•		1	1 1 6	
		•	mehry a	11 11 11 11 100	
		•	Justice a	Official Signature	e
				5	e
A .			AFFIDAVI	Т.	e (
On this			AFFIDAVI	Т.	e me a
On this	/5 day of	afar	AFFIDAVI	T. 189. <b>4</b> ., personally came before	re me, a
On this	15 - day of	Word Reer	AFFIDAVI  A. D.  in and for	T. 189. , personally came before the aforesaid County and	l State,
On this	15 - day of	Word Reer	AFFIDAVI  A. D.  in and for	T. 189. <b>4</b> ., personally came before	l State,
Supply se Post Office	day of Co	War wo J Reed ell. a citi	AFFIDAVI  A. D.  Tel in and for the sen of t	T.  189. personally came before the aforesaid County and Market M	l State,
Supply se Post Office	day of Co	War wo J Reed ell. a citi	AFFIDAVI  A. D.  Tel in and for the sen of t	T. 189. , personally came before the aforesaid County and	l State,
se Post Office known to me llows:	day of the control of	Mentitled to credit, and wh	AFFIDAVI  A. D.  in and for  zen of Area  o, being duly sworn, declar	T.  189. personally came before the aforesaid County and Sulface.  es in relation to the aforesa	1 State,
se Post Office known to me llows: hat he is a F	day of a Co	a citientitled to credit, and what, and that he has been acq	AFFIDAVI  A. D.  in and for  zen of  July  no, being duly sworn, declar  uainted with said soldier for	T.  189.4., personally came before the aforesaid County and the aforesa	d State,
se Post Office known to me llows: hat he is a F	day of a Co	a citientitled to credit, and what, and that he has been acq	AFFIDAVI  A. D.  in and for  zen of  July  no, being duly sworn, declar  uainted with said soldier for	T.  189. personally came before the aforesaid County and Sulface.  es in relation to the aforesa	d State,
se Post Office known to me llows: hat he is a F	day of Co	a citientitled to credit, and what, and that he has been acq	AFFIDAVI  A. D.  in and for  zen of  July  o, being duly sworn, declar  uainted with said soldier for  aimant's physical and financial c	T.  189.4., personally came before the aforesaid County and the aforesa	d State,
se Post Office known to me llows: hat he is a F	day of Co	a cities a cities and what he has been acques own to him concerning the classical and the classical an	AFFIDAVI  A. D.  in and for  zen of  uainted with said soldier for  aimant's physical and financial co	T.  189.4., personally came before the aforesaid County and the aforesa	d State,
se Post Office known to me llows: hat he is a F	day of Co	a cities a cities and that he has been acquest the concerning the classical and the concerning the concerning the classical and the concerning the classical and the	AFFIDAVI  A. D.  in and for  zen of  zen of  uainted with said soldier for  aimant's physical and financial columns.	T.  189.4., personally came before the aforesaid County and the aforesa	d State,
se Post Office known to me llows: hat he is a F	day of Co	a citi  A entitled to credit, and when and that he has been acques own to him concerning the classical and the classical	AFFIDAVI  A. D.  The second of	T.  189. personally came before the aforesaid County and County an	I State,
se Post Office known to me llows: hat he is a F	day of Co	a citi  A entitled to credit, and when and that he has been acques own to him concerning the classical and the classical	AFFIDAVI  A. D.  The second of	T.  189.4., personally came before the aforesaid County and the aforesaid County and the aforesaid results and the aforesaid results.  1.	I State,

Affiant's se

made oath that the affectivett by him hereto Subscribed is true . Before me: Year Handerson. Clark of the First Dettrict Court of Northern Middlese

### GENERAL AFFIDAVIT.

	State of Mapachuseth Country of Warcester 55:
	In the matter of the pension claim of Andrew & Barnare
	late of Co. U , Reg't barre in p Vols.
	Personally Appeared on this 18 day of Naventee A. D., 1895, before me,
	a Visite of The Wach in and for the aforesaid County, duly authorized to administer
	oaths, Andhe well aged 2 years, whose Post Office address is strubucille, County of March and State of
	Majaciulith who being duly sworn declares in relation to aforeasid case, as follows:
,	I was rul Turca rabile, roarly of for Benedict & Burn
- 6	Milo Water levery barn making Seandless Tubing in the Spri
ify.	87 1879 and has attended by Ir & 9 Rackpull of Waterhure
test	who fitted me with a truss which I have warn to this
they	Time or Rachwell alier about 8 years ago and Michael
ich	Thelley the man who wonked with me and knew of the pact of my being my tured is also dead so there is
w o	no and lining at This true excell my Wife Ling is all
ces t	Barrard that I can obtain affaira wit of the facts called
stan	Juga In 18819 left The la of Benedict & Burnham became the wars
.cnm	mas to haset Traingrave for me an account of Twenthere
d cii	and far the last sin years I have lived in sturbridge
ts an	Countral Warcester state of Mafrachine the Mi irramal Clar
Tac.	in Oct 1890 in which the above facts wer States in recard
t the	to the Rock will shis Statement was written for the affin
O.WA	Just Charles Ladel 819, The the prominer of 814 Barnard with
or Kn	Stated to we the facts werkelly wirthant any assistance
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οw	prom acy asser fleshan
kńow	fran acy asser files an
they know	fran acy asser files an
they know	fran acy asses filstan
how they know	fran acy asses filstan ?
state how they know	fran acy asses, pleasan
fail to state how they know	fran acy asses, pleasan
not fail to state how they know	fran acy aller person
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must not fail to state how they know	frum accy aller for the second
must not fail to state how they know	Lass not interested in said claim nor concerned in its prosecution.  If the affiant makes his mark, two persons must attest by writing
must not fail to state how they know	Lam not interested in said claim nor concerned in its prosecution.  If the affiant makes his mark, two persons must attest by writing their names on the lines below.

read sa	Sworn to and subscribed before me	one day by the above numed aimai	e, and I certify that I
	aid affidavit to said affiant , includir	ng the words	
	erased, and the wor		
***************************************	added, and acquainted	with its contents before	le executed the
same.	I further certify that I am in nowis	se interested in said case, nor am, I	concerned in its prose-
cution	; and that said affiant pers	sonally known to me and that	is a credible person
	•	Staal of Lace	
	_	Official Sig	nature.
[L. S.]		Vustice of the	- Page
		Officia	Title
statement and only oral state or recital pension of Under claims n	the experience of the Commissioner of Per at by the witness that such testimony was all writer from his oral statements then made; stating a sements, and that in making the same he did not all, prepared or dictated by any other person; and claims must be prepared in accordance with the provisions of acts of Congress, approved July hay be executed within the limits of his juripurposes.	itten, or prepared for type-writing (as the calso the time, place, and person, when, where use, and was not aided or prompted by and not attached as an exhibit to his testimon terms of this order.  y I, and September I, 1890, affidavits to be	ase may be), in his presence, and to whom he made such written or printed statement y." All evidence for use in used in pension and bounty
Muy Ce	rtificate is an file	at the US Semi	in Office
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	1,80,		
	Reg't		J.R.
	Reg't "		ab, ITOR,
Lee Lee	Reg't "		ORD, ICITOR,
	Barnand,  27 "Reg't		KFORD,  JLICITOR,
	Barnard "27"		D BY SOLICITOR,
76/196.	Hannard O. S. "Reg't " 2° C. "		LED BY  I BICKFORD,  I'S SOLICITOR,
10 6 12 2 C	Co. St. ("Reg't " 27 " 27 " "		FILED BY AN BICKFORD, NT'S SOLICITOR,
26/20 g	Co. St. "Reg't " 227 " 229333		FILED BY  FHAN BICKFORD,  IANT'S SOLICITOR,
No. 26 (209	En My Barnand,  t, " 27 "  Lann, " 27 "		FILED THAN BI
No. H. J. 6 (20 9)	Late Co. F. "Reg't Vols. Leguns.		FILED BY  NATHAN BICKFORD,  LAIMANT'S SOLICITOR,

	11 - (
State of Connelic	n claim of Andrew Bandard 21 1848  Regiment Carrier Vols.  14 day of February , A. D. 1897, before me,
	Andrew Burdan FB 21 1000
In the matter of the pension	on claim of VVCCCCC 1098
, late of Co	Regiment WOUVED. Vols.
Personally appeared on this	14 day of Tebruary, A. D. 1897, before me,
Notary Public	in and for the aforesaid County, duly authorized to administer
oaths William J	in and for the aforesaid County, duly authorized to administer  Lilley, aged 53 years, whose post-office address is
Wendson	, County of Hariful and State of
	, who, being duly sworn, declares in relation to aforesaid case as follows:
- oruge constant	, who, being dury sworn, declares in relation to aloresaid case as follows.
14 1	1 8 8 00 1 14 201 2 1 10 1
	Andrew Barrard Well and internal
Sun 164. N	le married my wife's Vistin in 1866
(non deceased)	I have always been intimate at his
nome thank	Kept up my acquaintaine with he
and his tamily	, I know him to be a man of
good, lemperce	to and morae habits, and that h
	ich accumed in 1879 mas not
the mount	Pricion habits, I first Knew of
hi subturn	in 1879 but anoustood that
	ras then of long Handing
My Uslimony	mas written I'm my presence by
Herry U. Hanton	glow from my onal tratement at
Wildson af	heraid & Whom I made Paid
exatement,	and I was not ander or
Growfited &	y any written or printed
Statement or	ticital purpand or dietaled
Les au other	Susmy than musul, Dand as
July Sur Fa	14 1848 L
weco-, , c	4 / 10/0
I am not interested in said	claim nor concerned in its prosecution.
Signatures by mark must be attested by who write their names.	two persons
I.	The Thisley
	(Affiant's signature.)
2	

Sworn to and subscribed before me this day by the above-named affiant , and I certify that I read said
affidavit to said affiant , including the words
erased, and the words
added, and acquainted With its contents before executed the
same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution;
and that said affiant. Uppersonally known to me and that he g credible person.
Henry a. Huntington
[L. S.]
(Official title.)

ORDER 229 of the Commissioner of Pensions, dated June 19, 1893, requires: "And such testimony must embody a statement by the witness that such testimony was all written, or prepared for typewriting (as the case may be), in his presence, and only from his oral statements then made; stating also the time, place and person when, where and to whom he made such oral statements, and that in making the same hadid not use, and was not aided or prompted by, any written or printed statement or recital, prepared or dictated by any other person, and not attached as an exhibit to his testimony." All evidence for use in pension claims must be prepared in accordance with the terms of this order.

Under provisions of acts of Congress approved July 1 and September 1, 1890, affidavits to be used in pension and bounty claims may be executed, within the limits of his jurisdiction, before any officer who is authorized in administer oaths for

general purposes.

GENFRAL AFFIDAVIT.
Off. No. 26/22. 2

Late of Cod, 18 Tregit

FILED BY

NATHAN BICKFORD, CLAIMANT'S SOLICITOR,

WASHINGTON, D. C.

State of Connecticut; County of Mulham . ISSIV.
In the matter of the pension claim of Andrew & Barnard 1848
lote of Co D 2,7 45 Regiment Coass Vols
But of Company A D 1806 before me
a Mortan Public in and for the aforesaid County, duly authorized to administer
oaths, Thir will mo, aged 57 years, whose post-office address is
multiple and State of
Connection of the who, being duly sworn, declares in relation to aforesaid case as follows:  Johnn Known and Market J. Barnard well
June servore court of roughout made
and intimately lines the minning of 185879.
He over a contain of ony first orifo now decused, and I have always hun internal,
decused and have always were winner
at his futures and his home, I know kin
while in the service of the Entry States
and attended time as - Thrus creebing by when
groundly in the live of duty. I have
Rept-up my aggraintance this him sine
I know him to be a man of good time-
prati and moral hubis: I know that
his superiors which account in 1879 was
not in any com the result of viewes
hubits.
I am not interested in said claim nor concerned in its prosecution.
Signatures by mark must be attested by two persons
I. In the line had sure of the Come hale.
Lewis Parane Scharure Tomanon
2. 2. Pho Come Inte

Jand und	subscribed before me this d	lay by the above-named affiant	, and I certify that I read said
affidavit to said affian	nt , including the words		
	erased, and the wor	nted hun with its contents	s before — executed the
		nterested in said case, nor am	<del>=</del>
		Curlis	Dean
[L. S.]		Notary.	Onlilio
		(Official t	itla )

ORDER 229 of the Commissioner of Pensions, dated June 19, 1893, requires: "And such testimony must embody a statement by the witness that such testimony was all written, or prepared for typewriting (as the case may be), in his presence, and only from his oral statements then made; stating also the time, place and person when, where and to whom he made such oral statements, and that in making the same he did not use, and was not sided or prompted by, any written or printed statement or recital, prepared or dictated by any other person, and not attached as an exhibit to his testimony." All evidence for use in pension claims must be prepared in accordance with the terms of this order.

Under provisions of acts of Congress approved July I and September I, 1890, affidavits to be used in pension and bounty claims may be executed, within the limits of his jurisdiction, before any officer who is authorized to administer oaths for general purposes.

GENERAL AFFIDAVIT.

20, No. 261, 202

Coff No. 261, 202

Late of Co. 20, 142/Reg't

Comme

FILED BY
NATHAN BICKFORD,

WASHINGTON, D. C.

CLAIMANT'S SOLICITOR,

PHYSICIAN'S AFFIDAVIT.

The restimony of a physician for use in claim for Invalid Pension under Act of June 27. 1890, should be in his own handwriting and should (1) describe all disabilities or causes of permanent disability, (2) not due to vicious habits, and (3) the extent or degree to which the applicant is and has been thereby incapacitated for earning a support by manual labor.

State of Mars, County of Middleser, ss:
In the Pension Claim No 24/272 of Contrem / Sornara
Company and Regiment or service, if in the army, of Versel and Rank, if in the navy.]
PERSONALLY came before me, a JUVINE of The Cauce in and for the aforesaid County
and State Sasch Dhillmin M. D., a citizen of less there
whose Post-office address is WY WWWY WWW. LOW JO VWY
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to afore-
said case as follows:  That he he is a practicing physician, and that he has been acquainted with said soldier for about $\frac{2}{2}$ .
veers and thathe is quity well accommended with the
Paint andrew & armonstonery on his formy [Here embody all the facts known to affant in accordance with the above instructions. No erasures or interlineations will be permitted, unless,
the plaistrate quotes or refers to them in his jurat, and certifies that they were made before execution of the paper.)
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which mes hromeen pressur headuch and detecting
memory also Whenonatorm in night hip
forderedenn Buin and Sareners, also en left
"Thoulder makein motion in left arm
ul it at times
Heart's action is abnormal causeing causing
3hort brech
Has firtulia en Com which chischeryes
There is Evidence of Hemar hould himses
which Surround the ann,
There is Throme Synovey englamation
of both knee juint Swelling in flogisteers
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to wens a trus thou is swident smortes
Extrety wholite Earn a leven yours
luba /
U, 28 5./
OFFICE/

MEDICAL EVIDENCE.  MEDICAL EVIDENCE.  CLAIM OF  MINGES ( Command  S I" 427" ( Com Obl)  FOR  ARFIDAVIT OF  ARFIDAVIT OF  ARFIDAVIT OF  ARFIDAVIT OF	THAN BICKFORD. CLAIMANT'S ATTORNEY. Washington, D. C.
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# CIAN'S AFFIDA PHYSICIAN'S AFFIDAVII. The testimony of a physician for use in claim for Invalid Pension under Act of June 27. 1890, should be fix his own handwriting and should (1) describe all disabilities or causes of permanent disability, (2) not due to vicious habits, and (3) the extent or degree to which the applicant is and has been thereby incapacitated for earning a support by manual labor. Ştate oi/ in and for the aforesaid County PERSONALLY came before me well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to aforesaid case as follows: That he he is a practicing physician, and that he has been acquainted with said soldier for about

1

## PHYSICIAN'S AFFIDAVIT

The testimony of a physician for use in claim for Invalid Pension under Act of June 27, 1890, should be in his own handwriting and should (1) describe all disabilities or causes of permanent disability, (2) not due to vicious habits, and (3) the extent or degree to which the applicant is and has been thereby incapacitated for earning a support by manual labor.

In the Pension Claim No. 2 61202 of Mudrew J. Barnard
[Company and Regiment or service, if in the army, or Vessel and Rank, if in the Navy.]
PERSONALLY came before me, a lerk of a Court of Record in and for the aforesaid County
and State Benja H. Hartwell M. D., a citizen of Ryer mass
whose Post-office address is after made
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to afore-
said case as follows:
That he is a practicing physician, and that he has been acquainted with said soldier for about. There
years, and that. It the proper the facts known to affiant in accordance with the above instructions.]
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levision right Dick, fishela in deed
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	*		
		L. I t	
	He further declares that he has been a practitioner	of medicine for. their trans. years, and	
	that he has no interest, either direct or indirect, in the	ne prosecution of the claim.	
٠	of his statement	10. Altantivelle	
	[Affiant should sign here and also at the end of his statement.]	Maffiant's Signature.	,
		who as all I dans (	
	•	unty of Meddlise, 55:	
		day of January, A. D. 1901, and	
		and that his standing is good; that the contents	
	of the foregoing affidavit were fully made known to hi	m before swearing, including the words	
	erased, as	nd the words	
5	added; and that Lha	ve no interest, diect or indirect, in the prosecution of this claim.	
		Con No Tan derson	
		Jacob Walling	
	to see all the second s		
4	Clus	k of the First Destreet Lours	
4	Elec	Rorthern Middlese	
4	Note.—This affidavit may be executed, within the limits of his jurisc	Official character.  Worthern Middlese  diction, before an officer who is authorized by law to administer oaths for all purposes.	
**	Note.—This affidavit may be executed, within the limits of his jurisc gener.  No erasures or interlineations will be permitted, unless the magistic.	Horthern Middleson	
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	Note.—This affidavit may be executed, within the limits of his jurisdigener. No erasures or interlineations will be permitted, unless the magistre before executed.	Official character.  Marthurn Much Mississer Commission of the paper.  Official character.  Marthurn Much Mississer Commission of the paper with the paper of the paper.  Official character.  Marthurn Much Mississer Commission of the paper of the paper of the paper.  Official character.  Marthurn Much Mississer Commission of the paper of the	
	Note.—This affidavit may be executed, within the limits of his jurisdigener. No erasures or interlineations will be permitted, unless the magistry before executed.	Northern Musicus V administer oaths for all purposes, at equotes or refers to them in his jurat and certifies that they were made ution of the paper.  N. BICKEORD  VI. S. ATTORNEY  Whington, Defore all officer who is authorized by law to administer oaths for all purposes, at equotes or refers to them in his jurat and certifies that they were made ution of the paper.	
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	Note.—This affidavit may be executed, within the limits of his jurisdigener. No erasures or interlineations will be permitted, unless the magistry before executed.	Wathern Manager and officer who is authorized by law to administer oaths for all purposes.  In BICKK FORD  NT'S ATTORNEY  Shinington, D. C.  Shinington, D. C.	
	Note.—This affidavit may be executed, within the limits of his jurist gener. No erasures or interlineations will be permitted, unless the major before executed.	Northern Musicus V administer oaths for all purposes, at equotes or refers to them in his jurat and certifies that they were made ution of the paper.  N. BICKEORD  VI. S. ATTORNEY  Whington, Defore all officer who is authorized by law to administer oaths for all purposes, at equotes or refers to them in his jurat and certifies that they were made ution of the paper.	

### EXAMINING SURGEON'S CERTIFICATE

IN THE CASE OF AN ORIGINAL APPLICANT.

	No. 45-5-75-2
Name of claim	nant, Andrew J. Barn and
Down of	nhad Post office, Harbar
Company,	County, Hartfird
Regiment,	27th State Comidation
State,	mil dial Date of examination, Old 4/12.188
4	Me hereby certify That Me have carefully examined this
	applicant, who claims that while in the service of the United States, at or near a
Cause of disabil-	place named of Julunch sungfu, and while in line of duty, on of about the 13th, day of Dec, 1863, he incurred
ity and the de- gree.	Wand me head, and that
	in consequence thereof he is disabled for earning his subsistence by manual labor.
Particular de- scription.	He states that he is 40 years of age, that he weighs 165
•	pounds, and that he is 3 feet 312 inches in height.
	His pulse-rate per minute is If, his respiration Is, and his temperature of which is temperature of the second of
Give the ration-	The examination reveals the following facts:
al and physical signs so fully that how and why and how	
muchthe claim- ant is disabled shall clearly appear. When	of her as a second - of manich
* shere are seith- er structurat changes not physical not	mide in the tot of the head
rational signs in support of the claim; that fact should be	a white - to sight - of median line
stated. Thera- ting should be made in com- pliance with	Dulling The Denne Hour francisco
the "Instruc-	for is roughoured teneath June
्रे <b>व</b> े	fradain last lines, and unique
	Thursin about my avalle
	Mas to fundom ma darkened
	manned headache any
	firmy at head-produces a similar
	effect;
:	
	7
It must be borne in mind that the duty of the	$^{t}$
Surgeon is to givean opinion astothe propor tionate degree	incurred in the service as claimed, and that it is not agara-
of disability, as 14, 1/2, total, &c. through the grades, withou	vated or protracted by vicious habits.
any regard to dollars and cents, and to	of It find the disability as above described to entitle him to the transfer
make such a fall particula description a will afford to this office the	s 0

NI Nill WEndmining Surgeon. Always forward a certificate of examination whether a disability is found to exist or not.

# SURGEON'S CERTIFICATE

IN CASE OF

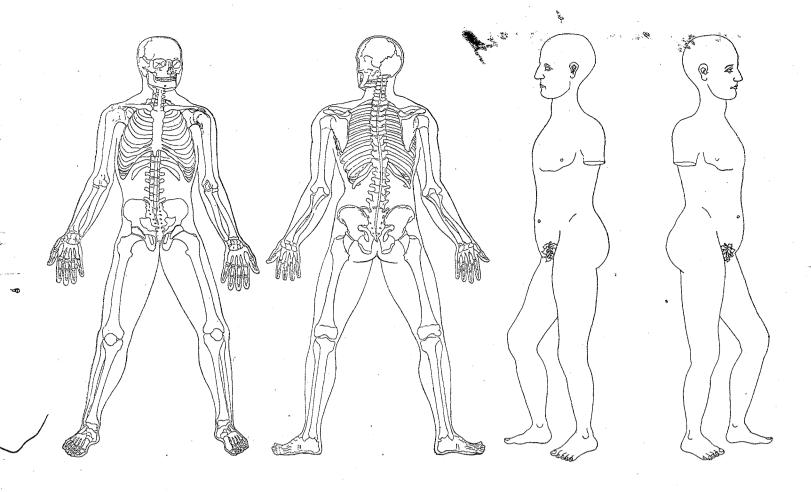
Application for Pension
No.464732

Date of Examination: Dec

P. S.—Write Post Office address plain and in full.

'10,000-100 M.] ELECTRO'S.





#### EXAMINING SURGEON'S CERTIFICATE

IN THE CASE OF AN ORIGINAL APPLICANT.

No. of Application, 455757 State: County Mew Haven Post Office Muttaven edge 231882. The hereby certify That we have carefully examined Andrew & Warnand, late a corporal Applicant's ser Co. D / 27th Reg't, Lenn, Dols in the service of the United States, who is an APPLICANT for an invalid pension by reason of alleged disability resulting from J.C. V. In our opinion the said Andrew J. Ban Out incapacitated for obtaining his subsistence by manual labor from the cause above stated. Judging from his present condition, and from the evidence before it is any belief that the said disability did ...... originate in the Origin. service aforesaid in the line of duty. The disabilty is 2nd James A more particular description of the applicant's condition is subjoined: Height, Sft. Twi weight, 160; complexion, Le age, IJ; pulse, J2; respiration, 18 hplicant shows cause Examining Surgeoff. Culynd, Bissel

SURGEON'S CERTIFICATE

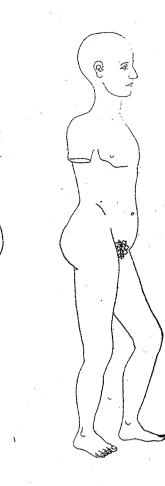
IN CASE OF

Application for Pension.

No. 183, 752.

Date of Examination: (Lead 2)

P. S.— Write Post Office address plain and in full.







#### IN THE CASE OF AN ORIGINAL APPLICANT.

No. 455.752

Name of claimant, a. J. Barrand	
Rank, Private for Corpor	Post office, New Year
Company,	County, new xaren
0 -	State, Comments
0'0	Date of examination, OG-24, 188 }
,	
	tify That CVC have carefully examined this
	ile in the service of the United States, at or near a
	Kabrugh Va, and while in line of duty,
Cause of disability and the de- on or about the	day of Dec , 1862, he incurred
	and of head, and that
	disabled for earning his subsistence by manual labor.
_	years of age, that he weighs 160
	feet 672 inches in height.
His pulse-rate per minut	e is 26, his respiration 18, and
his temperature 986	
Give the rational and physical	
signs so fully that how and why and how muchtheclaim	
ant is disabled shall clearly appear. When	e developed from.
there are neither structural changes nor	- de la firma .
physical nor rational signs in support of	- Under the war and the
the claim, that fact should be stated. There	ear. We find over poster
ting should be made in compliance with	of relat paretal, bone
the "Instruc- tions."	a almost uperceptible
Geating to	vo and a quarter wells
tong and	there by could of an wel
wide - paro	ellel to- and this quater
of and meh	the new of Jalius
The state of	tack it and quite tende
on briss & u	2. a Carful Examination
of the Skull	notal a slight but un
mustakeable	linear Cravice or harrow
depression	ust under they cicating.
This depres	ion in the skull is only
about 13 the	2 length of the creatney
Lee dragra	Jules that he has seen
headache (	streeting frontal action
Itmust be borne why and how much the claim-	grine up or down
ant is disabled shall clearly appear. When	& and Elposin & Sun
there are neither structural changes nor	el troubled with tritique
physical nor rational signs in support of	had any Convulsions
the claim, that fact should be stated. Thera-	Conscious at an
ting should be made in compliance with	5 that he sleeps voy will
the "Instruc- tions." Lublas 72	enong is ony from
the surse	ell theorne an toll

no cortificate contain a full rational figns and a state-3 dollars, ".do., do. hs daw are sakkfied.

SURGEON'S CERTIFICATE

IN CASE OF

a. D. 27 Regian Colo

Application for Pension

No.45-5-75-2

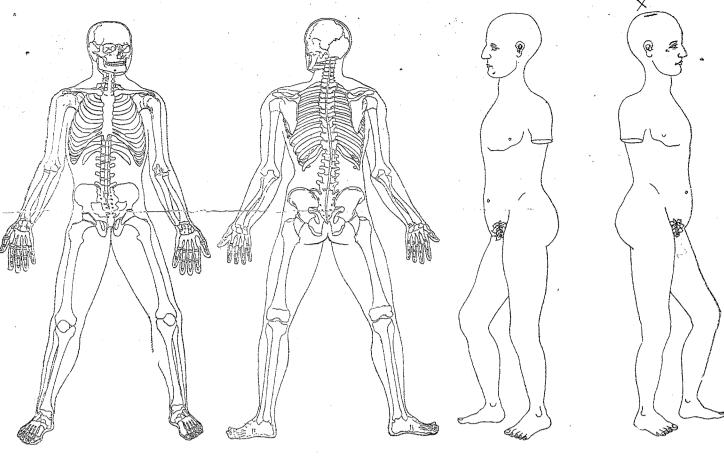
Date of Enamination: O G-24, 1883
The see A Balle
Thornes Milliage
Educad I Badeloer

Post Office, New Herren

County, Men Baren

P. S.-Write Post Office address plain and in full.

(11155-200 M.) ELECTRO'S.





Reproduced at the National Archives the claim, that fact should be stated. Therating should be made in compliance with the "Instructions." Itmust be borne way and how much the claim, and is disabled shall clearly appear. When there are neither structural changes nor physical nor rational signs in support of the claim, that fact should be stated. Therating should be made in compliance with the "Instructions." Itmust be borne in mind that the duty of the Surgeon is to give an opinion asto the proportionate degree of disability, as 14, 15, total, &c., through the grades. without From the condition and history of the claimant, it is prince opinion the incurred in the service as claimed, and that it is not aggravated or protracted by vicious habits.

IN CASE OF

#### Application for Pension

No. 455752

Date of Examination: O 1-24 (883

Examining Surgeon.

Post Office, New Haven

P. S.-Write Post Office address plain and in full.

Attention is invited to the outlines of the human skeleton and figure upon the bar of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc. The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate. nsert characte and number claim. Pension Claim No. 261. Name and rank of claimant. Company .State, 2 Claimant's post We hereby certify that in compliance with the requirements of the law\* we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz: Cause of disa-bility. If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of. Pulse rate per minute, 20 18 .; temperature, 22 ; respiration, ; height, inches; weight, 16 2 pounds; age, He makes the following statement upon which he bases his claim for † Here give the claimant's statement as briefly and as compactly as possible. Upon examination we find the following objective conditions: Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the present condition of the claimant. U 1 It must be borne in mind that the duty of the Surgeon is to give an opinion as to the pro-portionate de-gree of disabilportionate de-gree of disabil-ity, as \( \frac{1}{1} \), total, &c., through the grades, vithout any re-gard to dollars and to make such a full particular description as will afford to this Office the ground for in-telligent opin-ion and action in rating. in rating. From the existing condition and the history of this claimant, as stated by himself, it is, in our judg-\_\_\_probable that the disability was incurred in the service as he claims, and that it has not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a ... Rate for each cause of disability.

If prolonged by vicious habits, the word not s hould be erased and the reason for the erasure given. of hea rating for the disability caused by ...caused by .... and.

\* See the back. † Here state whether for original, increase, restoration, or renewal, or for a re-rating.

Mollswith, Pres. Herre D. Hellinsery. J. May 2, Treas

will erase the words Dies, "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, ardialso on the back of the same. SURGEON'S CERTIFICATE Applicant for Increase No. 261.209 DATE OF EXAMINATION: BOARD. Post office, County, P. S.-Write your Post-office address plainly and in full.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

	the name of the absentee, must be indorsed upon ea		n tnerefor, if I	rnown, and
Insert character and number of		ion Claim No.	261.239	
claim.  Name and rank	[State above whether for original, increase, or restoration.] Andrew J. Barnard.	, Rank,	Corp.	
of claimant.	Company D, 27 Reg't Conn. Inf.	Worceste	r, Mass.	State,
Claimant's post- office.address.	Sturbridge, Mass.	JAN 13	1892	, 189 .
	We hereby certify that in compliance with the	2.7	•	e carefully
	examined this applicant, who states that he is suffe	ering from the foll	owing disabilit	y, incurred
Cause of disability.	in the service, viz: G.S.W. of head and r	runture.		- <del></del>
If a pensioner, fill in the amount; if not, erase the	and that he receives a pension of			
whole line.	He makes the following statement upon which	he bases his claim f	or Increase	ie.
Here give the	He is pensioned for G.S.W. He ask			
claimant's statement	same because he is so much disable	ed by loss of	memory and	l ina-
as briefly and as compactly as possible.	bility to transact business. He d	loes no busine	ess unless	other
	members of his family are present.	He has beer	ruptured	for 12
	years.		4 - 1	•
				,
·	Upon examination we find the following objerespiration, 20.24; temperature, 98.6; height,		,	
	pounds: org. 48 years. His miscles a			•

Here give a full description of the disabilities,

ital He has incomplete right oblique inguinal true impulse is felt on coughing with protrusion into not through internal ring, opening admits end of finger, can be reduced and retained, six eighteenths. Find a scar,  $3 \frac{1}{2}$ one inch to the right of median line of cranium, There is evident loss of extending back from coronal suture. some of outer tablet. The scar is adherent to bone a portion He stands rather unsteadily with eyes closed, of its length. <u>walks in a hesitating manner,</u> superficial reflexes He claims defective memory on account of G.S.W. but gived apparently minute accounts of previous examinations made by other Boards, eight eighteenths. bility is found to exist.

He is, in our opinion, entitled to a rating for the disability caused by\_ for that caused for that caused by

> -Always forward a certificate of examination whether a disability is found to exist or not. (6287-300,000.) 6-552

	1 Mile of the same									
ord of examina- tion here.				•		nika stuppenklavivi na poveznevi		-	<u> </u>	
· -		· · · · · · · · · · · · · · · · · · ·		·	· · · · · · · · · · · · · · · · · · ·			 -		
• •			. 1	`	· · · · · · · · · · · · · · · · · · ·	<del></del>	·	<del></del>		
	· · · · · · · · · · · · · · · · · · ·		•					 		
								 	<del>-                                    </del>	



# SURGEON'S CERTIFICATE

IN CASE OF

Reg't Conn, Inf 27

Applicant for Increase.

No. 261.209

DATE OF EXAMINATION:

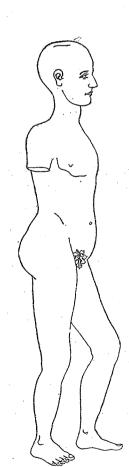
189

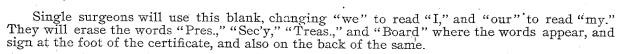
BOARD.

Worcester, ost office,\_

ounty

P. S.-Write your Post-office, address plainly and in full.





Provided further, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section Act of Congress approved July 25, 1882.]

Attention is invited to the outlines of the human skeleton and figure up n the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Name and rank of claimant.

Pension Claim No. 261, 202. Additional [State above whether for original, increase, or restoration.] Andrew J. Barnard. , Rank, private Reg't Conn. Vol. Inf. Worcester, Mass.

Sept. 11th

Claimant's post-office address.

Sturbridge, Mass.

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred Cause of disa- in the service, viz: G. S. W. of head; rupture; piles.

\_ dollars per month.

He makes the following statement upon which he bases his claim for Additional [Original, increase, restoration, &c.] Has a wound in head; received it in 1862; makes his head feel bad at times; is feeling so now; seems as though something was pressing on the brain; has had rheumatism for past 3 years in right shoulder and right hip; on account of rheumatism can't do all parts of his work, which is a farmer; has had a rupture since 1873; doesn't trouble him when wears a truss; piles trouble him off and on; thinks loses about 1/2 time on account of troubles; doesn't use tobacco; doesn't use stimulants; never had ven. dis. Here give the claimant's bad at times; statement's was pressing or was pressing or the control of the control o

Upon examination we find the following objective conditions: Pulse rate, 84-92-102.;

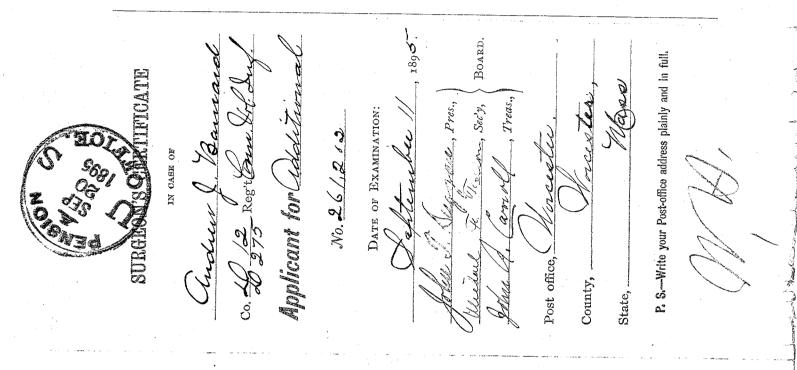
respiration, 20-24; temperature, 98.6; height, 5 feet 7 inches; weight, 175 pounds; age, <u>52</u> years. Face tanned; eyes muddy; conjunctivae some injected, not icteroid; tortuous temporal arteries; all back testh gone; front teeth in fairly good condition; tengue some prolabia normal in color; palms calloused; well-nourished; muscles firm; abdomen some protuberant; percussion note normal over abdomen; no tender areas over abdomen; no epigastric tenderness; liver area normal; spleen normal; lungs normal; card. area slightly increased; apex beat between 5th and 6th interspace, nipple line; there is an accentuated 2nd aortic; no murmurs; no oedema; no cyanosis; no dyspnoea; slight card. hypertrophy, probable cause rheumatism, 4/18; on coughing find an impulse in right inguinal canal; rupture comes to but not through external ring; pillars of ring tense; find an impulse upon coughing in left inguinal canal; rupture comes to but not through external ring; pillars of ring tense; both ruptures can be retained by a proper fitting truss, rate both shoulders crep.; there is no lim. of motion of these joints: no atrophy of muscles about joint; bends over and resumes the erect posture without apparent pain or stiffness; moves the right hip freely and without crep. or lim. of motion

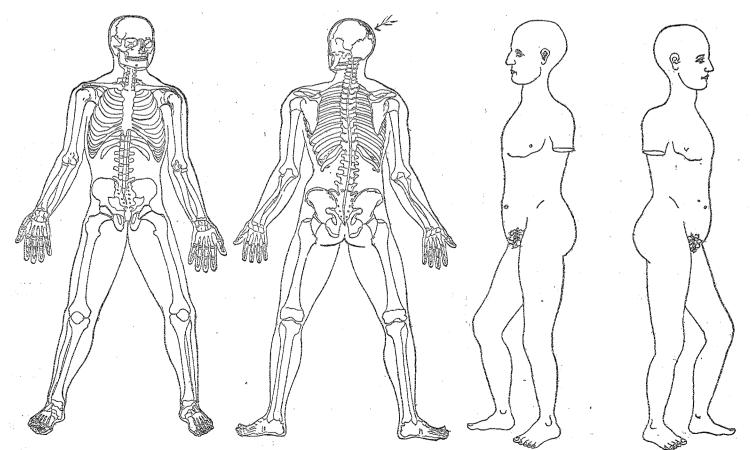
right knee joint crep. some; no atrophy of muscles about

this joint; no lim. of motion of joint; no signs of rheumatism

1 - Suggen Pres. Muchael Fr. Fally Sec'y. John

The actual or probable origin of every exist-ing disability must be fully set forth. must be fully set forth. Whenever a disability isshown, or is believed to be due to or aggravated by victous habits the opinion of the board must be stated. When not due to such habits this fact must be stated. any of the other joints, muscles or tendons; can find no signs of piles now; upon dome of head, posterior third, about 1/2 inch from median line, find a linear scar, glistening in appearance, about 1 inch in length; scar is not sensitive, not dragging, not deforming; loss of tissue is but tegumentary; exam. of urine negative; no other dis. found to exist; dis. not result of vicious habits.





Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

Provided further, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

#### 3-111.

Attention is invited to the outlines of the human skeleton and figure upon whenever it is possible to indicate precisely the location of a disease or injury, the e The absence of a member from a session of a board and the reason therefor, if k upon each certificate.

Department of the Interior, BUREAU OF PENSIONS,

Apr	il	18	., 189 <b>.8</b>

Insert character and number of claim. Varnar Pension Nature of Claim: Act of June 27, 1890.

Name and rank of claimant.

Soldier: ... D. 217 Com. Vol. 2 Service: Lo.

Claimant's post-

Vorceeler C We hereby certify that in

It is desired in this case that the examination be made with special reference to-

examined this applicant, who states that he is suffering Tunshol Cause of disa- in the service, viz: trem

pilesas

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of

This is a test examination to determine whether the claimant is incapacitated for earning his support by manual labor, by reason of any permanent disabilities not due to vicious Please report occupation, exact age, height, weight, habits. state of nutrition and muscular development, condition of palms and general physical appearance. Note in what manner and from what causes he is disabled, being careful to describe clearly the seat, character, and extent of all lesions found, in accordance with Book of Instructions; a compliance with Pars. 6, 12, 61, 62, 101 and 118 thereof is required in every case.

Here give the claimant's statement as briefly and as compactly as possible.

He makes the following statement upon which he

Here give a full description of the disabilities, in accordance with Book of Instructions.

Upon examination we find the following objective stration, 17; temperature, 17,6; height, \_\_e respiration, / pounds; age, 🗸 🗸

Į.F. RAUB Medical Referee.

© Civil and foreign surgeons are required to make oath of back of Certificate, 0-4 [OVER.] the back of Certificate. 3025b6-97-30m

The actual or probable origin of every exist-ing disability must be fully set forth.

must be 1111y
set forth.
Whenever a disability is shown,
or is believed
to be due to or
aggravated by
vicious habits
the opinion of
the board must
be stated.
When not due
to such habits
this fact must
be stated.

Each disability must be rated separately, the act of Congress of March 2, 1895, requiring "that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to."

Ant Thins

Pres

D

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. When sufficient space is not afforded for the necessary statements, an additional blank certificate should be attached and properly numbered. The backs of certificates must not be used except as it may be necessary to use the diagrams. Marginal entries must never be made.

Treports
your o

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amplication, etc.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, Eust be indorsed upon each certificate.

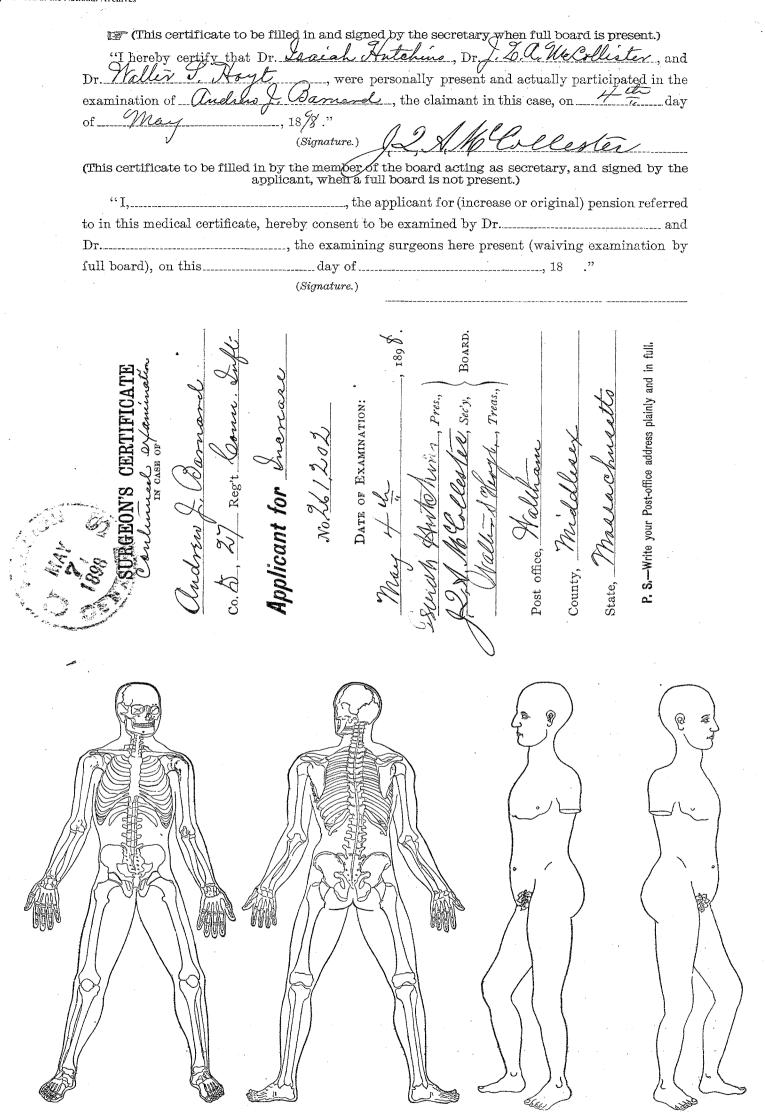
Insert character and number of the absence of

and number of claim.	Pension Claim No. 46/1404
Name and rank	andrew L. Warnard Rank, Corporal
of claimant.	Company D, 27 Reg't Com. In 266 Moody L. Waltham Mace State,
	[Post-office address of the Board.]
Claimant's post- office address.	Merbridge. Mase - May 4 m, 1898.
	We hereby certify that in compliance with the requirements of the law we have carefully
	examined this applicant, who states that he is suffering from the following disability, incurred
Cause of disa-	in the service, viz: Tunshot wound of head-rupluse. Sile and Theuma-
bility.	tiem.
If a pensioner, fill in the amount; if not, erase the	and that he receives a pension of
whole line.	He makes the following statement upon which he bases his claim for Mound of
	head received at Mederickburg Dic. 13 ([Original, increase, restoration, &c.]
Here give the claimant's	Struck the top of the head and extends towards the back of
statement as briefly and as compactly	the head - hay right dided rupline - biles come down here
as possible.	the read - may reput to the state come work. has,
•	1 A D.
*	from Resorce
	<u> </u>
	Upon examination we find the following objective conditions: Pulse rate, 62,
•	respiration, 19; temperature, 17,6; height, 5 feet 7/2 inches; weight, 189
	pounds; age, or years. The find a creatist commencing at
	the sincture of the sagital with coronal sutures
Here give a full description of the disabilities,	for the strace of the inches (vit diagrams) land
in accordance with Book of	The Trav bain and dessiness - no swaning with lines
Instructions.	
	closed - no paralysis - Viflexies normal no apparent
	deslast of orain, or its membrance no spaem-no
	Convilsion, ny arcue semiles-
	Start: Open but at extinter costal space just to
	naht of mobile line, deep cardiac duluese in
	whitecal line extends from Second intercostal Afrace.
The actual or probable origin	to felit intercostal space - transverse extends from
of every exist- ing disability must be fully	light of elemen It just to right of nipple line.
set forth. Whenever a disa-	no hupertroppy no delitations no murmuro - ofthere
bility is shown, or is believed to be due to or	
aggravated by vicious habits	
the opinion of the board must be stated.	pulse Blow but regular - Trule Retting 62 Standing 10.
When not due to such habits this fact must	Offir exercise /7 - Trae never our treated for heart
be stated.	desease - no omvilsions - no aphiera - no destimbare,
	of vision except al occurs with advancing age-
Each disability	hearing normal-mental condition sound
must be rated separately, the act of Congress	kupils egnal and respond redily to light and
of March 2, 1895, requiring "that the re-	Shade - aculty of vision, right eye to left eye to
port of such examining	Rate 18
surgeons shall specifically state the rat-	Rupline; on right side is held in place with a
ing which, in their judg-	bruss, internal, Jung much, larger than, left, by
ment, the ap- plicant is en- titled to."	congling, the impulse of rack, is felt, but there,
4	in A. 1st al and the second
	To the tunor at weeken in inquiral canal-
130	inh Antohim, Pres L. M. Wollester Sec'y. Waller & Hory, Treas.
معيد عاص	, 1105 - 110as.
N. B sufficient	—Always forward a certificate of examination whether a disability is found to exist or not. When space is not afforded for the necessary statements, an additional blank certificate should be
attached a	and properly numbered. The backs of certificates must not be used except as it may be necessary
to use the	diagrams. Marginal entries must never be made.  6-552

Single surgeons will use this blank, changing "we" to read "I," and "one" to read "my." They will erase the words "Pres.," "See'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall tract from Section 4, Act of Congress approved July 25, 1882.]

-	ificate.	
Insert character	4	Pension Claim No. 26/.202 -
and number of claim.	[State above whether for original, increase, or restoration.]	Pension Claim No. 261.202 -
Name and rank	Indrew L. Darnard	, Rank, Coporal -
of claimant.	Company D. 27 Reg't Coun. In	1. 266 Moody Il Waltram Mace Sta
		[Post-office address of the Board.]
Claimant's post- office address.	Therbridge Mase.	[Date of examination.]
	We hardy contifue that in compliance I	with the requirements of the law we have carefu
	examined this applicant, who states that he	is suffering from the following disability, incurr
Cause of disa-	in the service, viz:	
bility.		
If a pensioner, fill in the amount; if not, erase the	and that he receives a pension of	dollars per mont
whole line.	He makes the following statement upon	which he bases his claim for
		[Original, increase, restoration,
Here give the		
statement as briefly and		
as compactly as possible.		
,		
,		
No.	Upon examination we find the following	ng objective conditions: Pulse rate,
	respiration,; temperature, ;;	height, feet inches; weight,
	pounds; age, years. The her	nia does, not pase through
. *	the external, sing, Vaii	cole, and hydrocele are
Here give a full description of	ortalists of the	F
the disabilities, in accordance with Book of	6P1 1	- 17 1 1 1 1 1 1
Instructions.	Tiles: there are two exter	nal hemorrhoidal humors
	on left side of anne	The Dame demensions; viz.
	one half an meh in le	ngth, and a fourth of an me
	wide no internal hem	archorde, walls of the rectum
	smooth and healther in	ithe the exception of an obeing
	Na complete Listula:	which ohering is sist abor
	X.A. III.	
	The Afahinter and on the	e test lide, the external open
The actual or probable origin	just at the margen of a	mus, on left side - no stricture,
of every exist- ing disability	no Tisoure - no prolapse	of osclum - tale to
must be fully set forth. Whenever a disa-	Rheumatism: Phoulder	winto symmetrical and not
bility is shown, or is believed		TAAA U 1 DAI
to be due to or aggravated by vicious habits	good applicant Faims	that he has been in ooth hips
the opinion of the board must	but no alexation of sige	or motions are apparent in
be stated. When not due	either. Thees, the mea	suremento are equal; on the
to such habits this fact must be stated.	back of each Knee is a	a tumor of equal size - oval.
	21 181- 1 A	with inches long deameter or
		i al + d' \ t
Each disability must be rated	and three fourther such	es in Whost diameter - Clevation
separately, the act of Congress	of each tumor, half an	inch, annerem to excluded,
of March 2, 1895, requiring "that the re-	and is in the openion	of the board, the nature of the
port of such	contents of the humors	is an effusion of lerum into
examining	Phialth of landons in The	bapteleal, rigions.
surgeons shall specifically	all the	both Kree Jointo, the motion
surgeons shall specifically state the rat-	11 - 1 -	WITTER (SALER INTERNAL MAIN MARKET
surgeons shall specifically state the rating which, in their judgment, the applicant is en-	there is crepitations in	1 1 - 0 1 1
surgeons shall specifically state the rat- ing which, in theirjudg- ment, the ap-	There is crepitations in of jointo cause sain.	and the freedom of motion
surgeons shall specifically state the rating which, in their judgment, the applicant is en-	1	and the freedom of motion ration one half -
surgeons shall specifically state the rating which, in their judgment, the applicant is en-	of jointo cause hain.	and the freedom of motion
surgeons shall specifically state the rating which, in their judgment, the applicant is en-	of jointo cause hain.	and the freedom of motion ration one half -



Single surgeons will use this blank, changing "we" to read "I." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate of the plaintenance of the same which shall be sh

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

Reproduced at the National Archives invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amountation, etc. nember from a session of a board and the reason therefor, if known, and the name of the absentee; must be indorsed Insert character and number of claim. Pension Claim No. Company 4 189/. [Date of examination.] Co We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred Cause of disa- in the service, viz: If a pensioner, fill in the amount; if not, erase the whole line. dollars per month. and that he receives a pension of \_ He makes the following statement upon which he bases his claim for [Original, increase, restoration, &c.] Here give the claimant's statement as briefly and as compactly as possible. Upon examination we find the following objective conditions: Pulse rate, height, temperature pounds; age, Here give a full description of the disabilities, in accordance with Book of Instructions. The actual or probable origin of every exist-ing disability must be fully set forth. set forth.
Nhenever a disability is shown,
or is believed
to be due to or
aggravated by
vicious habits
the opinion of
the board must
be state d.
When not due
to such habits
this fact must
be stated. Each disability
must be rated
separately, the
act of Congress
of March 2,
1895, requiring
"that the report of such
examining
surgeons shall examining surgeons shall specifically state the rat-ing which, in their judg-ment, the ap-plicant is en-titled to." .

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. When

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. When sufficient space is not afforded for the necessary statements, an additional blank certificate should be attached and properly numbered. The backs of certificates must not be used except as it may be necessary to use the diagrams. Marginal entries must never be made.

6-552

"I hereby Dr. Waller examination of of	certify that Dr. 2  Joyle  Candren J. Ba  , 1  e to be filled in by t applica  cal certificate, here	were personal series, were personal series, when a full be the examining series.	conally present and the claimant in the claimant in the claimant in the claimant in the claimant as oard acting as oard is not present clicant for (increase examined by Dr. aurgeons here present constants).	e or original) pension ent (waiving examin	ded in the day  Lecy d by the  referred and
1898 SURGEON'S CERTIFICATE		(Signature.)		Post office, Haltham County, Middlease State, Maskachusetto	P. S.—Write your Post-office address plainly and in full.  E.D. IN  MAY 20 1898

Single surgeons will use this blank, changing "we" to read "I." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

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MEDICAL DIVISION.

THIS PAPER MUST NOT BE DETACHED FROM THE ACCOMPANYING CERTIFICATE.

# Department of the Interior,

BUREAU OF PENSIONS, Washington, D. C. June 7, 1892 The attached certificate is returned for amendment. Date and sign the amendment and return promptly to this Bureau. J. F. RAUB, Medical Referee. commended ely on sub-ctive evi-nce the ongest rea-ns must be ven therefor.

Thum flind Prother J. Hannigto, sec'y Lis South on Preas

N. R.—Do not use backs of certificates for any purpose other than indicated by printed matter thereon. When additional space is needed to complete report of examination use blank certificate (3—111 g) properly numbered, and attach it to the back and upper margin of this sheet. Marginal entries must never be made.

## SURGEON'S CERTIFICATE.

and number of claim.	Additional Pension Claim 1	No. 26/202
Name of claim-	Andrew 1. Barnard	P. O.
ant.	Address	O/ State
Tledman de	[Rank,]	May 24, 1899
Claimant's post- office address.	acton wers	[Date of examination.]
 Cause of disa-	mound ihed rupture, piles . A	hounting Ewilling
bility.	how joints. Fistula debilit	y from age -
	He receives a pension	on of dollars per month.
	He makes the following statement upon which he bases	his claim for Additional
Here give the claimant's statement (as		/ Driginal increase restoration etc.
briefly and as compactly a		wils i blece - Tiles thehing
possible) in re- gard to the ori-	1 120 1 70 1 101 # 22-00	his evilling it his fouget
gin of his disa-/ bilities and the	Cas vas vi desce 27 det i de la companya de la comp	
manner in which they affect him.	of Should in file & apring - trouble in withen	- Carana Extremis Spessor
^	which discharges ; Hot obtito work as fermer	
Attention	n is invited to the outlines of the human skeleton and figure upon the bac	ek of this certificate, which should be used to indicate
precisely the l	location of a disease or injury, the entrance and exit of a missile, an amp	ntation, etc.
	We hereby certify that upon examination we find	the following objective conditions:
•	Pulse rate, 72-72-102, respiration, [Sitting, standing, after exercise.]	$f - /f - 30$ , temperature, $\frac{gf}{z}$
,	— <i>~ / /</i>	/ / / · / / / / / / / / / / / / / / / /
	height,	
Here give a full description of	On top of heed 1/2 men to right of me	dien live Sean / struck
the disabilities, in accordance.	long 3 lines in willy, non a dhe	und depressed . Il action
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The actual or probable origin		and a set profum
of every exist- ing disability must be fully		is the first Return
set forth. Whenever a disa-	Minn Mae of Marine Ville - Cope	in floor of this . I think
bility is shown or is believed to be due to or	d Transfer	relegia. reminente
aggravated by vicious habits	of Trus Congested Menors the of the	in brus No Melections
the opinion of the board must be stated.	to revering	les 1/18 superior
When not due to such habits	e to any is an oheren draw of	listila. nel discharging
this fact must be stated.	does not connect with travels. Rit	ing for futula 0 1
	Cupiter = left home minsur	tion of three same -
Each disability	Some Julness in both popular	& Spaces, Some Islange
must be rated separately, the act of Congress	a la	introvo stiffend in
of March 2, 1895, requiring	hnees limited about 20 - hear	to action normal. no
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sons must be given therefor.	be The one	ouly.
		<b>√</b>
•	11 11 - 41 71 -	- 00 - Q. O. 1
	Jamm Kimen Proten J. Halling	b, Sec'y. The Comphany Preas.
N. B.	—Do not use backs of certificates for any purpose other	than indicated by printed matter thereon.
When add	ditional space is needed to complete report of examinating	et. Marginal entries must never be made.
numbered	d, and attach it to the back and upper margin of this sheet $_{6-552}$	o. Harsing onerios mass novor so made.

Single surgeons will use this blank, changing "we" to read "I." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

"All examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes." [Extract from Section 4, Act of Congress approved July 25, 1832.]

### SURGEON'S CERTIFICATE.

Insert character and number of claim.	Luncary. Pension	n Claim No.	261,202	
Name of claim-	_ Ande en J. Barnard.	1 (	Berton	P. O.
ant.		Address )		
	Company 2 27. Reget Som Jul.	Board. (	Man.	State.
Claimant's post-	medfield . Most h. bo. Man	·	· funcs	, 190/
office address.	71 11 11 1 1 1 11 - 1	100	[Date of examination.]	. 1
Cause of disa-		6 10 0	yeni amelin	<u>~ j" ~ /~                                  </u>
bility.	ence-partend general de	dility drie	( or ang E	
	· /	· · · · · ·	<del>1 (1)</del>	
•	He receiv	es a pension of	Aluger dollars po	er month.
Here give the claimant's	He makes the following statement in regard	to the origin of his	s disabilities and date	when first
statement (as briefly and as	discovered by him: Nas would kee		٠ ، ٨	
compactly as possible) in re-				-
gard to the date of origin and	I hafters intight grown for 24 y	1	chiles labby ones	
cause of his dis- abilities and	Chamerotherin in reg to have laler	and both	sing ( Itas ) after	<u>~</u>
the manner in which they	Conlyptale to de light chrisal we	rbthe last 2		
affect,him.	0		Q.	
The outling of a disease of	nes of the human skeleton and figure upon the back of trinjury, the entrance and exit of a missile, an amputat	his certificate should be	e used to indicate precisely	the location
	Birthplace, Leven.	· age 6	years; height, ح	-7/9.
•	weight, 127 pounds; complexion,	do de		, , ,
	weight, pounds; complexion,	; (	color of eyes, Atom	<del>;</del>
	color of hair, white.; occupation, _	mill-mig	; permanent m	narks and
	scars other than those described below,			
	•	G3 41 G-37	:	,
,	We hereby certify that upon examination			-
	Pulse rate, <b>F2</b> , <b>F4</b> //6; respire	ation, ///	خ خے; temperature,	98-6;
Here give a full description of	Donned of la a of There is a safe	\[ \subseteq \text{Stttipg, standing, ar} \]	ter exercise.]	-
the disabilities, in accordance		11		(
with Book of Instructions.	about certine of logittal suture	oxumeny para	lleberett A. Sear	s liverand
instructions.	of extenses Adea! This notters	cles No alpa	se I riscent toxics	intant
	weakely never on other alreades	2000		A A Para
	No restrac - No liston of heading	_	166	-
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cause of any disability	Piles No banars boad al trus de	texually suredo	to the same of the	74
found should be stated.	A The state of the		-(1)	mannen -
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or is believed to be due to or	Kleeneaksen Nearl. Linelles	a Of level to	ea. Wostiffices.	
aggravated by vicious habits	tendoniers, revelling, buil alia	volenden se	ich talen of as	where r
the opinion of the board must	Noashas in or cretionation of tens	O. O. A. T.	7 10 16	i i
be stated. When not due	· · ·	Of Other Day	C. J.	VIO 0
to such habits this fact must	sallot to war and thereof	Main of the second	. Hear unuales ?	<u> </u>
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dence the strongest rea-				
sons must be given therefor.				
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	W. Wileum Pres. Ello Ban	Les Sec'y	D. S. Mes Clary	Troop
	,	, 200 j		==5 110as.

N. B.—Do not use backs of certificates for any purpose other than indicated by printed matter thereon. When additional space is needed to complete report of examination use blank certificate (old \$\frac{3-156}{No.2-110}\$) properly numbered, and attach it to the back and upper margin of this sheet. Marginal entries must never be made.

opt upon a special order of the Commissioner of Pensions. An examination must not be made by one member of a board (This certificate to be filled in and signed by the secretary when the full board is present.) "I hereby certify that Dr. & A Liberty ..., Dr. Elol3mles ---, were personally present and actually participated in the D. E. Clarles S. E. the claimant in this case, on \_\_\_\_\_day examination of Audresis (Signature.)(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.) ---, the applicant for (increase or original) pension referred to in this medical certificate, hereby consent to be examined by Dr. the examining surgeons here present (waiving examination by full board), on this \_\_\_\_\_ day of. (Signature.) Post office, County,

Single surgeons will use this blank, changing "we" to read "I." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

"All examinations shall be therearth."

"All examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes." [Extract from Section 4, Act of Congress approved July 25, 1882.]

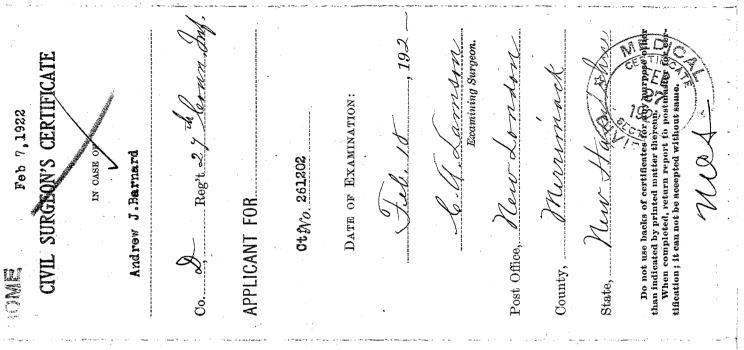
7

### CIVIL SURGEON'S CERTIFICATE.

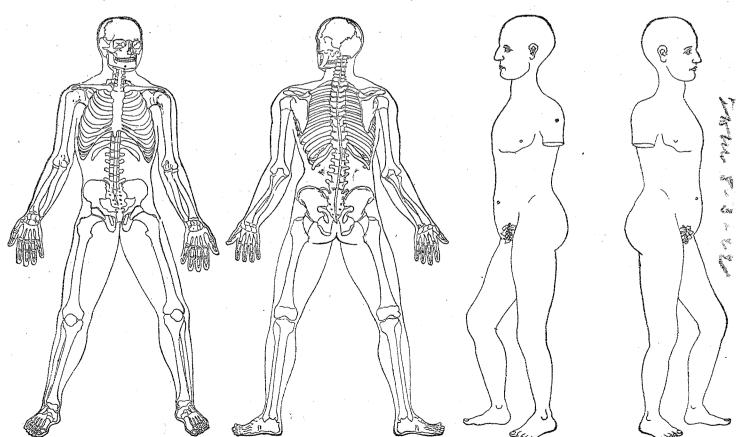
and number of claim.	26/202 Pension Claim No.
Name of claim- ant.	andrew & Barnard Address ( New London P.O.
a:16.	Company & Reg't 24 Conn. Regt Surgeon. \ Text. State.
Claimant's post-	Milmot n. H. Tehny 15 1922
office address.	[Date of examination.]
	Dauble pierrea
Names of disa- bilities.	**************************************
	He receives a pension of 50. dollars per month.
	He makes the following statement in regard to the origin of his disabilities and date when first
compactly as	discovered by him: The suptime man first motione
possible) in re- gard to the date of origin and	(uninght sede) about July or august 1000
cause of his dis- abilities and	
the manner in which they affect him.	
anoct min.	$\mathcal{D}_{n}$ $\mathcal{L}_{n}$
	Birthplace, Morris, Com; age, 79 years; height, 5/1.6/2;
	weight, 140 pounds; complexion, say; color of eyes, Blue;
· .	color of hair, Tray ; occupation, Petrus ; permanent marks and
	scars other than those described below, double suptime, Ecginia
	I hereby certify that upon examination I find the following objective conditions:
	Pulse rate, 82, 86-96; respiration, 18, 26, 22; temperature, 96.6; [Sitting, standing, after exercise.]
	[Sitting, standing, after exercise.] [Sitting, standing, after exercise.]
Here give a full description of	A complete engumal herrial
the disabilities, and make a separate para-	
graph for each disability.	lift side, a falled engund himse
	Ecegeme on legs.
	Z
	Musculos chemmalian, various parts
	of The body.
v ·	
Facts within the knowledge of	The clasmont is capable of waling
the surgeon relative to the cause of any	whoy himself but agong to the profunde
disability found should be stated.	Padomed age is unable to take core
	of his invalid wife who is confined to
	hubed and has been for a long build
•	trice; and himself, regening help.
•	about the case of the wife and self.
•	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
4	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
When even a dica	
Whenever a disa- bility is shown or is believed	The about allowed were not frought
to be due to or aggravated by vicious habits	on by any imperation vicion
the opinion of the surgeon	hobits ()
must be stated. When not due to such habits	
this fact must be stated.	
	2 2
	tolender and mind
	6–72 Examining Surgeon.
	Daditioning has govern

ACH OF MAY 1, 1920

I HEREBY CERTIFY that I am person	ally acquainted with Dr.		
who has signed this paper, and know tha		nd integrity is good	
Datedat	this day	of	<b>§</b> , 19
	Secretary of the second secretary of the second sec		
			Postmaster.



Always forward a certificate of examination whether a disability is found to exist or not.



The outlines of the human skeleton and figure should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

Act of June 27, 1890.

## INVALID PENSION.

2 Briefs.

Naimant.	Andrew S.	Barnard,		<u> </u>	t. 261,202.
P. O. M	nedfield.		Rank, 6	orporal,	
County,	norfolk	·	Company,	, , , , , , , , , , , , , , , , , , ,	
State,	masso	chusetts,	Regiment, 2	7 Com. Yol.	Sujantry.
Rate, \$	per	month, commend	cing Deces	wher 14,1900	
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P. O.,	Massingth	ickford, m, DC.		Ag	ent to pay.
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dility 2	which to expres	refe to me	Agg <del>regate of disabili</del>	ties shown, permanent in	character.
I car les	an how here				
Jan 25	,190×, JEII	Legal Reviewer.	Whoon	Vergrain on 15 cs.	Medical Reviewer.
Bl. 3	. 1902 0	ANAL Reviewel.	March 25	Examiner. 1902,	Tout-
	,	Re-Reviewer.	<u> </u>		Medical Referee.
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		nd in head and			
And M	1. 1895 alle	els q. 3, mond of	head rupture o	ud pila.	
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nov. 15	1898 Alleren	wound in head,	nepture, piles, r	Lemation dis	stilet, due to ago,
		and swaling and	grating of Knee	pans,	<i>, , , , , , , , , , , , , , , , , , , </i>
Dec. 14	1900 alleges	nound of head	mpture piles	Munchiam	gent debility,
		and debility a	he to age.		<i>y t</i>
	<b>~</b> ~	, M. C.	E		write. V
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