

are required to be made before a Court of Record, or before some officer of such Court duly
minister oaths, and having custody of its seal. Testimony may be taken before a Justice of the
peace having like authority to administer oaths; but in no case will any evidence that is verified
who is concerned in prosecuting the claim, or has a manifest interest therein.

Also, personally appeared Joseph B. Goodwin, and Francis A. Foster,
residents of Lowell, Middlesex Co, Mass persons whom I certify to be respectable
and entitled to credit, and who being by me duly sworn, say they were present and saw said claimant
sign his name to the foregoing declaration; and they further swear that they
have every reason to believe, from the appearance of the applicant, and their acquaintance with him,
that he is the identical person he represents himself to be; and they further state, they have no interest
in the prosecution of this claim, and that said applicant is a man of good habits.

Joseph B. Goodwin
Francis A. Foster } Witness.

Sworn to and subscribed before me, this twenty fourth day of November, A. D. 1863
and I hereby certify that I have no interest, direct or indirect, in the prosecution of this claim.

Amos P. Haskin Clk of said Court
the same being a Court of Record

I hereby Authorize A. H. Bigelow of Philadelphia - Penna
my Agent and Attorney in fact, to present the foregoing claim, and to receive and receipt for, in my
name and stead, the money, certificate, or warrant payable under it.

Joseph B. Goodwin
Francis A. Foster } Witness.

Charles D. Clark

State of Massachusetts
County of Middlesex } ss.

the same to be his free and voluntary act, for the purposes therein named.
Applicant's P. O. address
Box 890
Lowell
Middlesex Co.
Mass.

Personally appeared Charles D. Clark whose name
is signed to the foregoing Power of Attorney, and acknowledged

Amos P. Haskin
Clk of said Court the same
being a Court of Record

ARMY OF THE UNITED STATES

CERTIFICATE OF DISABILITY FOR DISCHARGE.



Private Charles C. Clark *Lieut Robert Hughes*
 of Captain *Robert Hughes*
 Company, (A.) of the *Second* Regiment of United States
 was enlisted by *Capt. Caldwell* of
 the *Second* Regiment of *Wisconsin* at *La Crosse Wis*
 on the *Eighteenth* day of *May* 1861, to serve *Three* years; he was born
 in _____ in the State of *New Jersey* is *Twenty Three*
 years of age, *Nine* feet *Six 1/4* inches high, *Light* complexion, *Gray* eyes,
Light hair, and by occupation when enlisted a *Lawyer*. During the last two
 months said soldier has been unfit for duty *10* days.* *He states that he left his*
Regiment at Antietam Sept 17th 1862, on account of wound
of wrist. was sent to General Hospital, Washington, D.C. since
to this Hospital.

STATION: *U.S. General Hospital West Philadelphia, Pa*
 DATE: *June 10th 1863* *J. J. Hayes*

Commanding Company Hospital

I CERTIFY, that I have carefully examined the said *Private Charles C. Clark* of
 Captain *Robert Hughes* Company, and find him incapable of performing the duties of a soldier
 because of *Gunshot wound of the right forearm and*
General Debility

Present Disability Three fourths

J. J. Hayes

Surgeon, U.S.A.

DISCHARGED, this *Seventeenth* day of *June* 1863, at *Philada. Pa.*

J. J. Hayes

Commanding the Reg't. Hospital

The soldier desires to be addressed at
 Town *La Crosse* County *La Crosse* State *Wisconsin*

* See Note 1 on the back of this. See Note 2 on the back of this.

Admitted Dec. 12th 1862

[INVALID ARMY PENSION.]



State of Massachusetts)
County of Middlesex) ss.

On this Twenty fourth day of November
A. D. one thousand, eight hundred and
sixty three personally appeared before me
the Clerk of the Police Court of Lowell
within and for the County of State aforesaid,

Charles D. Clark aged twenty nine years, a resident of
Lowell, Middlesex Co. in the State of Massachusetts who being duly
sworn according to law, declares that he is the identical Charles D. Clark
who enlisted in the service of the UNITED STATES at La Crosse, Wisconsin
on the Eighteenth day of May in the year 1861 as a
Private in Company B. commanded by Capt. Robert Hughes
in the Second Regiment of Wisconsin Volunteers in the War of 1861,
and was honorably discharged on the Seventeenth day of June
in the year 1863 that while in the service aforesaid, and in the line of his duty, he
was wounded in the battle of Antietam Md. Sept 17. 1862, by a Minnie ball,
through the right wrist, which shattered the bones and muscles, leaving
the wrist stiff and rendering it impossible to use the hand; that he is,
by reason of this wound, unable to perform any manual labor; that
he has resided since his discharge at Lowell Massachusetts, and
is unable to follow any occupation

Charles D. Clark Claimant.

Give a particular and minute account of the wound or other injury or disability, and state how, when, and where it occurred; where the applicant has resided since leaving the service, and what has been his occupation and his habits.

BOSTON,

3-402.

Certificate No.

20835

Name

Charles D. Clark

Department of the Interior,

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,



Commissioner of Pensions.

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer.

No.

Second. When, where, and by whom were you married?

Answer.

Third. What record of marriage exists?

Answer.

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer.

Yes. Charlotte H. Currier. Died at Cohasset (Mass.) August 1st 1896

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer.

Yes. Frances Clark, June 17th 1869.

Date of reply,

June 4th

1898

Charles D. Clark

(Signature.)

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PENSIONER DROPPED.

United States Pension Agency,

Boston, Mass.

Jan. 6, 1908

Certificate No.

20835

Status

Invalid

Pensioner Charles D. Clark

Rank

Vice Pri. B. 2. U.S. V. 2.

Commissioner of Pensions.

I.R.: I have the honor to report that the

re-named pensioner who was last paid

\$140, to Dec. 4, 1907

has been dropped because of Reptd. death

Dec. 19, 1907

Very respectfully,



United States Pension Agent.

NOTE.—Every name dropped to be thus reported at once, when cause of dropping is death, state date of death if known.

0-9

WAR OF 1861.

ACT JULY 14, 1862.

120.635-
 Brief in case of Charles D. Clark a Private
 of Company "B", 2nd Regiment Wisconsin Vols

POST OFFICE ADDRESS OF APPLICANT:

Box 890 Lowell Middlesex County Massachusetts
Enlisted May 18th 1861, Discharged June 17. 1863

CLAIM FOR AN INVALID PENSION.

Declaration and Identification in due Form.

PROOF EXHIBITED.

Sicut W^m H. Harris Co "B" 2nd Regt Wis Vols asserts that said Clark at the battle of Antietam Sept 17, 1862 was wounded by a Minnie ball through the right wrist which according to Surgeon's Certificate shattered the bones and injured the sinews to such an extent as to render the wrist stiff and without the power of using the wrist or hand.

The Certificate of disability for his discharge says General wound of the right fore arm and general debility present therefrom incurred at Antietam Sept 17, 1862

Nathan Allen Examining Surgeon finds wound in the wrist, had a Minnie ball strike the inside of the wrist, on right hand precisely at the joint fracturing the Radius, and producing complete bony loss of the joint also partial of the finger joints - the hand generally withered and comparatively useless now

Degree of Disability Total

Admitted Nov 28th, 1863, to a pension of \$ 8.00 per month, commencing

June 17th, 1863.

Disability Total

Disabled by General wound right wrist

A. H. Bigelow

Name and Residence of Agent.

Philadelphia Penn

Thomas Pearson
By R. B. Crippen

EXAMINING CLERK.

Adjutant General's Office,

Washington, D. C.,

Nov 2nd 1863.

Sir:

I have the honor to acknowledge the receipt from your Office of a letter asking for the rank and verification of the signature of William H. Harries, and to return it herewith, with such information as is furnished by the files of this Office.

It appears from the rolls on file in this Office that the signature of William H. Harries who was, on the 15th day of Aug, 1863, a 2nd Lieut. of "B" 2nd Regiment of Missouri Volunteers, upon the within certificate, is genuine

I am, sir, very respectfully,

Your obedient servant,

Saml Beck

Assistant Adjutant General.
(3)

To the Commissioner of Pensions,

Washington, D. C.

B.S.

Declaration for Increase of Pension,

Under the 1st Section of the Supplementary Pension Act of June 6, 1866.

State of Massachusetts }
County of Mitchell } SS.

On this twelfth day of July A. D. 1866 personally appeared before me
Clerk of a Court of Record in and for the County aforesaid,
Charles D Clark aged 34 years, a resident
of Lowell Mass who being duly sworn according to law, declares that he is a pensioner
of the United States, duly enrolled at the Boston Mass Pension Agency at the rate of \$ 8 per month,
by reason of disability in the (1) Military service of the United States (2) as Private in
Company B Capt Robert Hughes Second Regt
Wisconsin Volunteers Infantry
and that his present physical condition is such that he believes himself entitled to receive an increased pension of the (3) Third
grade, provided for in the first Section of the Supplementary Pension Act, approved June 6, 1866. He further declares that he is
disabled in the following manner, to wit: (4) Wounded in right wrist at the
joint by mine ball
causing loss of the use of all the fingers and
thumb of right hand for ordinary labor attended with
much pain and inconvenience
And Charles P Blair of Lowell Mass
is hereby appointed my attorney to prosecute this claim, and receive my certificate.

My Post Office address is Lowell Mass - Box 890

(Claimant's Signature.)

Charles D Clark

Also personally appeared before me, at the time and place aforesaid, Samuel W. Foster
of Lowell Mass and Alexander Harper
of Lowell Mass whom I certify to be credible persons, and who being duly sworn according to
law, declare, each for himself, that they well know Charles D Clark who signed the
foregoing declaration in their presence; and that he is the identical person he represents himself to be, and that he is disabled sub-
stantially in the manner alleged in said declaration. They further swear that they, or either of them, have no interest in this claim,
either present or prospective, and that they are not concerned, directly or indirectly, in its prosecution.

(1st Witness' signature.)

Sam W Foster

(2d Witness' signature.)

Alexander Harper

Sworn to, subscribed and acknowledged before me, this twelfth day of July
A. D. 1866, and I hereby certify that I have no interest, direct or indirect, in the prosecution of this claim.



Samuel W. Foster, A. M.

NOTES.

- (1) Military or Naval.
- (2) Here state the Company and Regiment, if in the Army, or the vessel and rank, if in the Navy.
- (3) First, second or third.
- (4) Here set forth the nature of the disability, and the extent to which he is incapacitated for manual labor, or dependent upon the personal aid and attendance of others.