## Declaration for Pension.

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 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 certificate has been filed in the Bureau of Pensions for general reference.

State of mask. Country of middlesey, 55:
ON THIS 4th day of March , A. D. one thousand nine hundred and 7
personally appeared before me, a Questice of the Place within and for the County and
State aforesaid, Chauncey U. Fully, who, being duly sworn according to law,
declares that he is 63 years of age, and a resident of Sayonville
County of middlesex, State of mask, and that he is
the identical person who was ENROLLED at Zowell, mosk. under the name of
Chamery U. Fully on the 25th day of aug. 1862
as a fraivate, in Co. E. 6th Regt. Model of failing Here state rank, and company and regiment in the Army, or vessels if in the Navy
Cals
in the service of the United States, in the Curl War, and was HONORABLY DISCHARGED at
Zowell mcs. on the 32 day of June, 1863
That he also served in the E 6 th Right (as drumle)  Here give a complete statement of all other services, if any
Honorably discharged at Readville = Get 27 1864
That he was not employed in the military or naval service of the United States otherwise than as stated above. That his
personal description at enlistment was as follows: Height, 5 feet 37 inches; complexion, 24; color
of eyes, Mul ; color of hair, Brown; that his occupation was France;
that he was born Sup. 29th, 1843, at action, mode,
That his several places of residence since leaving the service have been as follows:
as nearly as possible as possible as nearly as possible
as nearly as possible
That he is a pensioner. That he hasheretofore applied for pension
Clifficate No. 1034241  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 pro-
visions of the Act of February 6, 1907.
That he appoints, with full power of substitution and revocation,
of County of County of
State of Manachests, his true and lawful attorney, to prosecute his claim,
and requests and directs that be allowed and paid, upon the issuance of a Certificate, or thereafter, such fee as may
His post-office address is a law elle County of Med allery
The discharge of
State of Mayne Wille
Moss Williams signature Mulio Oscillaria
Attest 1
2. Linch With State of the Control o

	Est	3-447.	E K	/
00	Division.			LEXT.
130	aim No. 1,261,653. Des	partment of	the Inter	ior,
Mai	E la m 2 1 TT	BUREAU OF	PENSIONS,	
Co. Co.	E. G. Reg't Mars Vol Sufty	ashington, D. C.,	Mary 8ª	190/
~			0	
	IR: To aid this Bureau in preventing any ur name, or on account of your service, you.			
7	You will please return this circular under		pe which requires no	postage.
Un	11/2.11	Very respectfully,		
111	Douncey W. Oulles,		01	
	Dayouvalle,		11 0 hus	vaside
	Middlesey Con Mass	·	Commi	ssioner.
1 33	171	1843	1	
	When were you born? Answer	West aci	on Moss	
3 V	When did you enlist? Answer.	25 day of any 186	2 2° 8th day of	July 186 1
	Where did you enlist? Answer		,	
	Where had you lived before you enlisted	1110	actor me	ens.
	What was your post-office address at enlis	1/	est acton 7	ness
7. W	What was your occupation at enlistment	? Answer. Far	m/_	
	When were you discharged? Answer.		1863 2° 27 day	4 oct 1864
9. V	Where were you discharged? Answer.	Lowell & then	will nas	
10. V	Where have you lived since discharge? G	ive dates, as nearly as possibl	e, of any changes of re	esidence.
	Daromille Me	eds f		
11. V	What is your present occupation? Answer	er. Bleek		
12. V	What is your height? Answer. 5			
	The color of your eyes? Blue	The color of your hair? By	Your com	plexion?
	Fair Are there any perman	ent marks or scars on your	person? If so, descri	be them.
13. V	What is your full name? Please write it	on the line below, in ink, in	the manner in which	you are
	accustomed to sign it, in the presence o		/17	MAY
		0/	. 0	13
		Manney le	telle o	Parew.
	RO D		1	
WITN	VESSES: (1. ) & Thenny	Date: 7	1 ay 10th	, 190

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## Commonwealth of Massachusetts.



\_\_\_ CERTIFICATE OF DEATH.\_\_\_

$\gamma \gamma$
Cown of Actor fan 4/91/190.
Horace. F. Tiettle, hereby certify
that I have examined the Records of Deaths in said Town and find recorded
therein the death of Chauncy Upham Juller
The record is in the following words and figures, to wit:
Date of Death, December / 1910 V
Name & Surname of Deceased, Chauncy Yhham Fuller
Name & Surname of Husband,
Sex, Male Color, M. Condition, Married
Age, Years, Months, Days.
Disease or Cause of Death, Valnular disease of Theurt
Residence, Saxonville Mass
Place of Death, Actor Mass,
Place of Burial, Gramingham Mass.
Occupation, blerk
Place of Birth, Action
Name & Birthplace of Father, Alden A Fuller (not given
Name & Birthplace of Mother, Sarah Faulkner Acton
I, Horace J. Viettle above named, depose
and say, that I hold the office of Town Clerk of the Town of Actor
in the County of Middleser
and Commonwealth of Massachusetts: that the Records of Births, Marriages
and Deaths in said Town are in my custody, and that the above is a true
extract from the Records of Deaths in said Town, as certified by me.
Witness my hand and seal of the said Town
(SEAL) on the day and year first above written
Morace J. Suttle .
Town Clerk.

## Commonwealth of Massachusetts.

COUNTY OF MIDDLESEX

TOWN OF FRAMINGHAM.

The following is a copy from the records of Marriages in said Town:

GROOM.	BRIDE.
Name Chauncey Upham. Fuller.	Name Mary Cordelia, Sprague.
Age, 27 yrs Color W	(If a widow or divorced, maiden name also to be given.)  Age, 20 yr S Color, W
Residence, Framingham. Mass.	Residence, Framingham. Mass.
Occupation, Bookkeeper.	Occupation,
What marriage, First.	What marriage, First (1st, 2d, 3rd, etc.)
If a widower or divorced,	(1st, 2d, 3rd, etc.)  If a widow or divorced,
Birthplace, West Acton. Mass.	Birthplace, Boston. Mass.
Name of father, Alden. Fuller	Name of father, Franklin H. Sprague.
Maiden name Sarah Faulkner.	Maiden name of mother, Cordelia E. Moore.
	hereunto set my hand this 23rd
In Witness Whereof, 1	hereunto set my hand, this 23rd
In Witness Whereof, 1	hereunto set my hand, this 23rd in the year of our Lord, one thousan
In Witness Whereof, I day of December	hereunto set my hand, this 23rd in the year of our Lord, one thousan
In Witness Whereof, I day of December	hereunto set my hand, this 23rd in the year of our Lord, one thousan
In Chitness Chhereof, I  day of	hereunto set my hand, this 23rd in the year of our Lord, one thousand Town Clerk of Framingham.
In Chitness Chereof, I  day of December  nine hundred and Ter  MIDDL  Personally appeared the above named Frank	hereunto set my hand, this 23rd in the year of our Lord, one thousand Town Clerk of Framingham.  LESEX, SS. Dec 23rd 1910 39
In Clitness Clihereof, I  day of December  nine hundred and Ter  MIDDL  Personally appeared the above named Frank regoing is a true copy of the record of Marriages.	hereunto set my hand, this 23rd in the year of our Lord, one thousand the set of Francischem.  Town Clerk of Francischem.  LESEX, SS. Dec 23rd 1910 39
In Clitness Clihereof, I  day of December  nine hundred and Ter  MIDDL  Personally appeared the above named Frank regoing is a true copy of the record of Marriages.	hereunto set my hand, this 23rd in the year of our Lord, one thousand the set of Francischem.  Town Clerk of Francischem.  LESEX, SS. Dec 23rd 1910 360  K. E. Hemenway and made oath that the
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