or indirect in the prosecution of this claim,

APPLICANT'S POST-OFFICE ADDRESS.

Aufo.

Application for Increase of an Invalid Pension,

Under Act of June 6, 1866.

State of Cassachuselb
County of Suffold 55.
On this Thirteenth day of September, A.D. 186 personally appeared
before me assistant Clem of the Municipal Court
within and for the county and rate aforesaid Abram Handles aged 24.
years, a resident of Acton in the county of Middleses and state of
United States duly enrolled at the Solon Mah. Pension Agency, at the rate of
\$ Four per month, by reason of disability incurred in the Militan service of the United States
and that his present physical condition is such that he believes himself entitled to receive an incleased pension of the grade provided for in the first section of the Supplementary Pension Act, approved June 6, 1866
He further declayes that he is disabled in the following manner, to wit:
While at Carrollton La, June 1864, in
the Revice of the U.S. and In the line of his
dut, the body of an army wagon, which he
made putting of the the threets, fell sings
some on the shoulder me diallocated & man
hered put in place, and he is still suffering
from the effects of this injury.
Hel makes this application for the purpose
of having his I lucion of hourd dollars per mouth,
Uncreased to a full their goight dollar
per month. He Plurrenden Old I Uncion Gestificate
To 10.088, (a) If promo, again the heapy constitutes and appoints
Gardiner Tufts. Majo his attorney to prosecute this claim, procure a pension certificate,
and to do all things necessary and proper to be done in the premises, with power of substitution, hereby ratifying all
Witnesses:
from Heand &
7 40 0 1 , 0
Charlestown Mass and S. Blodgett of Boston Mass
whom I certify to be credible persons, who being duly sworn according to law declare each for himself that they well
know Horam Handley 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 substantially in the manner
alleged in said declaration. They further swear that they or either of them have no interest in this claim.
cither present or prospective, and that they are not concerned, directly or indirectly, in its prosecution.
6/1 Holhaman
of O Blied gett
Sworn to and subscribed, before me, this
September A.D. 1867, and I hereby certify that I have no interest, direct
or indirect, in the prosecution of this claim. Witzess, My hand the
Seal of said Court, the day of glar aforesaid
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
maer vaman



OFFICER'S CERTIFICATE.

I William H. Chafman do hereby certify that I am was captain
of Company 6. of the 26 Regiment of Mass Volunteers, and am
acquainted with Abram Handley who was a member of O Company, and, as I am
informed, is an applicant for an Invalid Pension. That the said Naudley
was in good health at the time he entered the service, and became disabled from doing duty as a soldier from on or about
the 20 day of Man 186 while in the service of the United States and
in the line of his duty as a soldier, in the manner and at the place as follows: Near Carroltton La. while detailed to unload
baggage wagour from a Steamer the body
If a wagon fell whow him injuring
his left shoulder - The accident did
not result from any cardessuess on
the part of Handley
This I state from hersonal knowledge.
Given at Concord this seventeenth day of July 1866
Willedom Whatamen

40088 WAR OF 1861.
(ACT JULY 14, 1862. Brief in case of Abram Handley a of Company & , 26 Regiment Mass vols POST OFFICE ADDRESS OF APPLICANT: actor Middle sex County Mass. Enlisted Jany 1th, 1864, Discharged any 26, 1865. CLAIM FOR AN INVALID PENSION. DECLARATION AND IDENTIFICATION IN DUE FORM. Adgt. Gen, Reports Handly Thustend out any 26/65 Janus G. Beadt Seng 26 Mass sals on Oath Jays. Handlywar under suy Care theatment in Regimental Hosh Cherry May of Jame 1864 at Morgangia Sa. He was at that time Suffing from an injury to the left Shoulder Caused by a deone busine in audonsin arms warons. sulvading army wagons, Capt A. Chapman fo E. 26 Mass vals on activey Handley May 20/64 near Carrollen Sa while detailed to unload baggay wagon from a Steamer, the body of a loagon fell afen him injuring his left Shoulder The accident did not result for many Careless mess on the part of Hendley, Personal Enoughly Dy. I. M. Collister Extany Seng finds July 3966 Result Condition left Shoulder dislocated down band and forward Entires quite infurfact whole arm atrophies, closs not measure in Corcumprenicas much by over one inch as compending foints of right arm Degue of disability one half Admitted lug 20 , 186 6, to a Pension of \$_____ Cry 260 Disability One half Permanent Disabled by Lynn of left Shoulder Derly Williamson Boster R. B. Criffen Examining Clerk. Mass

Name and Residence of Agent.

	the mercuse of an invalid rension.
State of Alband	
State of Massachuse	$\langle SS. \rangle$
County of Juffold	
On this 22 2 day of	May , A. D. one thousand eight hundred and seventy-
	asst The municipal Court of the City of Boston
	and for the County and State aforesaid, Alram & Candley
age	d 3/ years, a resident of Acton
County of Middlesey	State of Massachusetta, who, being duly sworn
17	ensioner of the United States, July enrolled at the Soston
	ncy at the rate of dollars per month, by
a Twate in Ge	althouse service of the United States while (1) Renning as
	h that he believes himself entitled to receive an increased pension; and that he
erewith returns his present pension cer	tificate, No 70,088
	abled in the following manner, to wit: (2) Myyry of left
shoulder, daused	V by an anny wagon falling upon
him: that the ar	in cannot be raised to a horizontal
hosition, and	when feres materially with the performe
of manual labor	: that his present rate of cherision
Die not comme	
disability -	
a converg	
ast he appoints Gardiner Titers, Mas	ssachusetts State Agent, Boston, Massachusetts, his true and lawful attorney to
	is No, instreet, of Actor
	Middlesex, and State of Mags.
	office address is Actou, Mass,
(Attest.)	about Handly
	(Claimant's signature.)
(
Also personally appeared	Louge Handley, residing at
- 40/	and Charles of Blodgelf.
	, persons whom I coling to be respectable and entitled
	worn, say they were present and saw
	, the claimant, sign his name (or make his mark) to the
1	e every reason to believe, from the appearance of said claimant and their
	dentical person he represents himself to be; and that they have no interest in
ne prosecution of this claim.	C // 10
•	Horge Handley
	Charles S. Blade A
	(Signatures of Witnesses.)
. Swam to and	subscribed before me this herenty secondday of May
Sworn to and	
Jan L	, A. D. 187 and I hereby certify that the contents of the
	above declaration, &c., were fully made known and explained to the applicant
>	and witnesses before swearing, including the words and Certify
	the words "is the" "believe" erased, and
2	
7	added; and that I have no interest, direct or indirect, in the prosecution of this claim.
	O. Sleeper
Witness my hand and the seal of said Court.	(Signature.)
	West text of said & sunt
	(Official character.)