

ARMY OF THE UNITED STATES.



CERTIFICATE OF DISABILITY FOR DISCHARGE.

(To be used, in duplicate, in all cases of discharge on account of disability.)

Private George B Parker

of Captain *Aaron C Handley*

Company, (E) of the *Sixth*

Regiment of ~~United States~~ *Mass*

Bals was enlisted by *Capt Aaron C Handley* of the *Sixth* Regiment of *Infantry* at *Acton Mass* on the *Twenty fifth* day of *August* 1862, to serve *nine Months*; he was born in *Winsor* in the State of *Vermont* is *Twenty five* years of age, *five* feet *nine* inches high, *fair* complexion, *Brown* eyes, *Brown* hair, and by occupation when enlisted a *Farmer* During the last two months said soldier has been unfit for duty *58* days. (Here consult directions on Form 12, p. 269, Medical Dept. Gen. Reg.)

Said soldier has not been able to do duty for three days in succession of four months past & has been in Hospital for fifty eight days past confined to his bed.

STATION: *Suffolk Va*

DATE: *Feb 27th 1862*

Aaron C Handley Capt Commanding Company.

I CERTIFY, that I have carefully examined the said *Private Geo B Parker* of Captain *A C Handley* Company, and find him incapable of performing the duties of a soldier because of (Here consult par. 1134, p. 245, and directions on Form 12, p. 269, Med. Dept. Gen. Reg.)

Arthritis Spinalis. Said soldier has been under constant observation and treatment in Hospital for two months past without improvement. Believing him of no use in the service I recommend his discharge

Otis W Humphrey Surgeon. in charge

DISCHARGED, this *Sixteenth* day of *March* 1863, at *Acton Mass*

Suffolk Va

A J Follansbee Col Commanding the ~~Post~~ *Regt*

NOTE 1.—When a probable case for pension, special care must be taken to state the degree of disability.

NOTE 2.—The place where the soldier desires to be addressed may be here added.

Town—*Acton* County—*Middlesex* State—*Mass*

(DUPLICATES.)

Said disability was incurred in line of service about Nov 15th at location unknown. As soldier he will ultimately receive an army and air ambulance I do not deem his a case for Pension. O. W. Humphrey, M.D. at Acton Mass 6th Nov

J. Geo B Parker Claimant for Invalid
 Pension No 512984 after my discharge
 from service I lived in Concord Mass
 for a few months then went to
 Boston Massachusetts lived there on
 a farm in Co with a brother eight
 years (or until 1872) since then have
 resided in West Acton Massachusetts
 have held an interest in the firm
 of E C Parker & Co. dealers in Grain feed
 & Cider Vinegar, my disability commenced
 when in the service about the first
 of Dec 1862 at Suffolk Va (and was
 a spinal trouble as was stated in
 my discharge) and have suffered ever
 since in the same way only accompanied
 with severe headaches lasting sometimes
 two or three days have been sick six
 weeks or more at two different times
 not able to do anything
 since my discharge from service my
 medical attendant was Dr Cowdery
 of Acton Massachusetts now deceased.
 Dr Isaiah Hutchins of West Acton
 Massachusetts has been my family
 physician for the last fifteen or
 sixteen years

Geo B Parker

Witnessed at West Acton Mass May 2^d 1885-

Then personally appeared the above named George B Parker and
 made oath that the above statement made by him
 is the truth

Isaiah Hutchins
 Justice of the Peace

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

WASHINGTON, D. C., *Aug 5*, 1918

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,

Mr George B Parker
West Acton, Mass.

G M Sargent
Commissioner.

- No. 1. Date and place of birth? Answer. *Sept 2, 1837 Windsor, Vermont*
The name of organizations in which you served? Answer. *Co. E. Sixth Regiment*
- No. 2. What was your post office at enlistment? Answer. *West Acton, Mass.*
- No. 3. State your wife's full name and her maiden name. Answer. *Fannie Wheeler (Parker)*
- No. 4. When, where, and by whom were you married? Answer. *Aug. 28, 1862 Acton Center, Mass.*
- No. 5. Is there any official or church record of your marriage? *Town records*
If so, where? Answer. *Acton*
- 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. Answer. *No.*
- No. 7. If 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 military 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. *She was never married previous -*
- No. 8. Are you living with your wife? Answer. *Wife is deceased.* If there has been a separation give date of same. Answer.
- No. 9. State the names and dates of birth of all your children, living or dead. Answer.
- Sattie A. Hutchins Feb 13th 1864*
Herman W. Parker Jan. 22nd 1871

Date *Aug. 12, 1918*



(Signature)

George B Parker

6-272