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COMPLETE FILE ENCLOSED

BEST AVAILABLE COPY.

Box 32362

Cert. 74068

Harriet Wilder

widow of

Henry W. Wilder -

OK

Bundle 41

WAR OF 1861.

Act of July 14, 1862.

CLAIM FOR WIDOW'S PENSION.

BRIEF in the case of

Harriet W. Wilder

, Widow of

Henry W. Wilder. Sergt. Co. E. 26 Mass. Vols.

resident of *Middlesex*

County and State of *Mass.*

Post Office address *Stowe. Mass.*

DECLARATION AND IDENTIFICATION IN DUE FORM.

PROOF EXHIBITED.

Service.

Henry W. Wilder was mustered in Jan'y. 1. 1864

Death.

Killed in battle of Winchester. Va. Sept. 19. 1864

Entitled to \$20 per month,
Commencing Sept. 8, 1916,
Under act of Sept. 8, 1916.
Wife During Civil War service.

Cute
[Signature]

9/27/17

Marriage.

Record Evidence furnished

Names
and dates
of birth of
children.

Two children

Loyalty.

Established

Agent
and his P.
O. address.

Chas. Reed, Boston. Mass

Admitted

May 16

, 1866, to a Pension of \$ *8 Dols*

per month,

commencing

Sept. 19

, 1864

Appd.

[Signature]

Samuel Welch
per S. F. S.

, Examining Clerk.



Application for a Widow's Pension.

Under the Act of July 14, A. D. 1862.

STATE OF Massachusetts }
COUNTY OF Middlesex } ss.

On this Second day of May A.D. 1865 personally came before me William A. Richardson Judge of the Probate Court Harriet W. Wilder a resident of Storve in the county of Middlesex State of Massachusetts aged twenty six years, who being duly sworn according to law, doth on her oath make the following declaration, in order to obtain the benefit of the provision made by the Act of Congress, approved July 14, 1862. That she is the widow of Henry W. Wilder who was a Sergeant in Company C commanded by Captain William C. Chapman in the Twenty Ninth Regiment of Massachusetts Vol. in the war of 1861. Who died at Winchester Va. on the twenty first day of September A.D. 1864 in consequence of wounds received in battle on the 19th September

She further declares that she was married to the said Henry W. Wilder at Storve Mass. on the fifteenth day of May in the year 1857, by the Reverend William W. Lantieri that her husband, the aforesaid Henry W. Wilder died on the day above mentioned, and that she has remained a widow ever since that period, as will more fully appear by reference to the proof hereto annexed. She also declares that she has not in any manner been engaged in, or aided, or abetted, the Rebellion in the United States. That the name and age of her child under sixteen years of age at her husband's decease, and their place of residence are as follows:

Melie Sophia Wilder born 25th June 1858
Ida Francis Wilder born 1st February 1861
both reside with their mother the applicant

She hereby appoints CHARLES REED, of Boston, Massachusetts, her attorney, to prosecute her claim and to receive the Pension Certificate

Applicant signs here.

Harriet W. Wilder



Also personally appeared ^{Name of witness.} *Francis W Warren* and ^{Name of witness.} *Sarah J Brown* residents of *Ston Mass* persons whom I certify to be respectable and entitled to credit, and who being by me duly sworn, say that they were present and saw *Harriet W Wilder* sign her *name* to the foregoing declaration; and they further swear that they have been intimately acquainted with *Harriet W Wilder* the above applicant for an Army Pension, for ^{Length of acquaintance.} *Six* years last past. She is now the widow of the late *Henry W Wilder* whom they also knew in his lifetime. There *are* the following-named children under sixteen years of age, of said deceased and applicant living, who *were* at his decease of the ages and residing as follows:

^{Names, ages, and place of residence of children.}
Nellie Sophia Wilder, aged six years
Isa Francis Wilder, aged three years
both reside with their mother, the claimant—

The above-named claimant has not been married since the death of her husband the said *Henry W Wilder*. They have no pecuniary interest in this claim.

Signature of witnesses.

Francis W Warren
Sarah J Brown

Sworn to and subscribed, and Power of Attorney acknowledged before me this *Second* day of *May* A.D. 18*65*, and I hereby certify that I have no interest, direct or indirect, in the prosecution of this claim. The above was made known to the parties.

Signature of officer.

Applicant's Post Office address: *South Acton Mass.*

William A Richardson
Judge of Probate

Commonwealth of Massachusetts.

Secretary's Department,

Boston, May 13th 1865

I Hereby Certify, That the Marriage of H Windsor Wilder
of Stow aged 22
years, and Flatt W Tower of Stow
aged 18 solemnized at Stow
on the fifteenth day of May in the year 1857
by Rev Wm Paine appears of Record in this Department by
duly attested Return of the Clerk of said town of Stow
for that year.

WITNESS THE SEAL OF THE COMMONWEALTH

hereunto affixed on the date first above written.

Quessbarnes

Secretary of the Commonwealth.

Widow's Declaration

FOR AN

ARMY PENSION.

No. Act of July 14, 1862.

CLAIMANT.

Harriet W. Wilder

Widow of *Henry W. Wilder*

Ord. Sergeant Company "E."

Regiment Mass. Vols.

CHARLES REED,

Attorney,

Boston, Mass.



INSTRUCTIONS. — The applicant is to appear and sign before some Court of Record or some officer of such Court authorized to administer oaths and have custody of its seal. Record proof of the marriage and birth of children should if possible accompany the declaration.

Adjutant General's Office,

Washington, D. C.,

Aug 23, 1863

Sir:

I have the honor to acknowledge the receipt from your Office of application for Pension No. 94,181, 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 Wm. W. Wilder was enrolled on the 1 day of Jan, 1864, at Steu. Massin Co. E. 26 Regiment of Mass Volunteers, to serve 3 years, or during the war, and mustered into service as a Serjt. & Co. on the 1 day of Jan 1864, at Newbernada, in Co. E. 26 Regiment of Mass Volunteers, to serve 3 years, or during the war. On the Muster Roll of Co. E. of that Regiment, for the months of Sept. & Oct 1864, he is reported Killed in battle of Winchester Va. Sept. 19/64

I am, Sir, very respectfully,

Your obedient servant,

Geo. D. Preck

The Commissioner of Pensions,
Washington, D. C.

Assistant Adjutant General.

(2)

Memoranda

Name of applicant

Address

J. H.

Headquarters 10th Bat. Mass Vols
Savannah Ga
August 15th, 1865

I, William H. Chapman, on honor, certify that
1st Sergeant Henry W. Wilder Co E 16th
Regt Mass Volunteers, was mortally wounded
at the Battle of Opequan Va Sept 19th 1864
by a Musket Shot which entered the
small of the back and passed through
the body causing death within thirty hours
from the time of his receiving the wound.
he was in the execution of his duty at the
time receiving the wound while making and drance
on the enemy

My knowledge of the above facts is obtained from the following
source: I was Captain of Co E at the time
and saw him when he received the wound
also after he had been carried to the Rear

Respectfully, W H Chapman
Lt-Col

Commonwealth of Massachusetts }
County of }
Joseph H. Barrett }
Commissioner of Pensions,
Washington, D. C.
Subscribed before
me this _____ day of _____
A.D. 1865. by the above named
whom I certify to be a credible
person.

Justice of the Peace

#1847

No. 94081

Applicant Harvey W. Wilder

Residence Mass

PENSION OFFICE

July 18th, 1863

SIR:

The within circular is to be forwarded to
some Surgeon or other commissioned officer
having the requisite knowledge as to the death
of Henry W. Wilder, Co. C,
26th Regt Mass Vols.

Respectfully,

Joseph H. Barrett

Commissioner.

Charles Reed
Boston
Mass
P. H. B.



Adjutant General's Office,

Washington, D. C.,

July 22, 1865.

Sir:

I have the honor to acknowledge the receipt from your Office of application for Pension No. 94,081, 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 Henry M. Wilder was enrolled in the day of , 186 , at in Co. , Regiment of Volunteers, to serve years, and during the war, and mustered into service as a 1st Sgt. on the day of 186 , at , in Co. "E", 26th Regiment of Mass Volunteers, to serve years, and during the war. On the Muster Roll of Co. "E" of that Regiment, for the months of Sept and Oct 1864, he is reported "Killed in battle at Winchester Va Sept 19/64".

I am, Sir, very respectfully,

Your obedient servant, Geo. F. Peck

The Commissioner of Pensions,
Washington, D. C.

Assistant Adjutant General.
(2)

Memoranda

Name of applicant, _____

Address, _____

H.S.

Commonwealth of Massachusetts.

Office, Boston, Dec. 5 1863.

I Hereby Certify, That at the date of the attestation
hereto annexed

Edwin Whitney
and James T. Foster
were

Justices of the Peace for the County of Middlesex, in the said
Commonwealth, duly commissioned and constituted; and that to their acts and
attestations, as such, full faith and credit are and ought to be given, in and out of Court.

I verify their signatures, to be confirmed

In Testimony of which, I have hereunto affixed the
SEAL OF THE COMMONWEALTH the date above written.

Oliver Stone

Secretary of the Commonwealth.

Clerk
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over and
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further
Milder
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her to be
uded at
is received
not

interested in this case

Charles H. Robinson

Commonwealth of Massachusetts
Middlesex, M. November 23, 1863. Subscribed &
duly sworn to before me
James T. Foster
Justice of the Peace.

- (a)—Here fill in an exact transcript of the record, except that, instead of copying figures, the date must be written out in full.
(b)—Here give the date exactly as it is in the record.

And I am not interested in this
case
Edwin Whitney
Justice of the Peace

Marlborough November 23^d 1865

I hereby certify that in the year 1857 I was Clerk of the Town of Glou and that on the fourteenth Day of May 1857 I wrote a certificate of marriage between H Windsor Wilder and Hattie W Tower and I made the record of their marriage which took place on the twenty sixth of the same month I further depose and say that I have known Mrs Wilder from her youth to the present time I also knew her name to be called Harriet while she was quite small after she became older she was called Hattie and that name was so familiar to me that that was the reason for my writing her name in her marriage certificate Hattie I also know her to be the wife of H Windsor Wilder who was wounded at Winchester Virginia and died from wounds received at that time, and I further say that I am not interested in this case

Charles H. Robinson
Commonwealth of Massachusetts
Middlesex, ss, November 23, 1865. Subscribed &
duly sworn to before me
James T. Folger,
Justice of the Peace.

- (a)—Here fill in an exact transcript of the record, except that, instead of copying figures, the date must be written out in full.
(b)—Here give the date exactly as it is in the record.

And I am not interested in this
Case
Edwin Whitney
Justice of the Peace

State of Massachusetts County of Widdoway Town of Stone

(a)

H. Windsor Winder and Katie W. Foner both residents of
Stone, Mass were married May twenty six to eight one
hundred and fifty seven, by Rev. Alfred Horton Pastor.

I CERTIFY that the above is a true copy of the record of marriage with
the exception of the date, which is expressed on the record in fair legible figures, as
follows:—^(b)

“ May 26th 1857.”

A. W. Nelson Town Clerk.

I, Fred W. Nelson above named, depose and say, that
I hold the office of Town Clerk in the town, county and state aforesaid,
and that the above is a true copy from the records of said town, with the exception
above named as certified by me.

A. W. Nelson } Town Clerk.

Subscribed and duly sworn to before me, this 22^d
day of November A. D. 1865. I have no interest in this case.

Edwin Whitney

Justice of the Peace.

(a)—Here fill in an exact transcript of the record, except that, instead of copying figures, the date must be written out in full.
(b)—Here give the date exactly as it is in the record.

And I am not interested in this
Case Edwin Whitney
Justice of the Peace

Stow Mass. November 22^d 1865

Charles Reed

Son of

We the subscribers
residents of Stow have known Harriet
McKenna. (Sometimes called Hattie)
from her youth. We know her to be the
Wife of Henry W. McKenna. who was
wounded at Winchester Virginia on the
fourteenth of September Brighten Providence
and fifty four and then on the twenty
first of the same month and we are
not interested in this case

J. W. Warren
Chairman of Selectmen
Peter Fletcher (Treasurer
of Stow)

A. W. Nelson } Town Clerk
of Stow

Commonwealth of Massachusetts

Middlesex ss: On this 22^d day of November
1865 personally appeared J. W. Warren
Peter Fletcher & A. W. Nelson and made
oath to the truth of the above statement by
them subscribed

Before me
Edwin Whitney

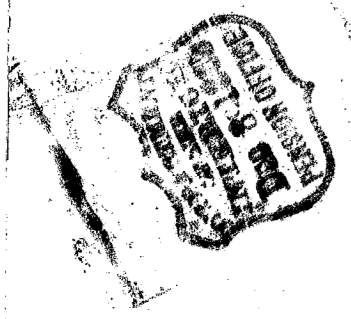
Justice of the Peace

And I am not interested in this
case

Edwin Whitney
Justice of the Peace

[REDACTED]

Authenticity Notice



State of Mass County of Middlesex Town of Stow
 (a) Ida Frances Wilder daughter of Henry W.
and Harriet M. Wilder born February
first Eighteen hundred and sixty one

I CERTIFY that the above is a true copy of the record of Birth with
 the exception of the date, which is expressed on the record in fair legible figures, as
 follows:—(b) Sept 27 " 1867

A. W. Nelson

I, A. W. Nelson above named, depose and say, that
 I hold the office of Clerk in the town, county and state aforesaid,
 and that the above is a true copy from the records of said town, with the exception
 above named as certified by me.

A. W. Nelson } Town Clerk
 of Stow

Subscribed and duly sworn to before me, this 18th
 day of Sept A. D. 1867. I have no interest in this case.

Edwin Whitney

Justice of the Peace.

(a)—Here fill in an exact transcript of the record, except that, instead of copying figures, the date must be written out in full.
 (b)—Here give the date exactly as it is in the record.

Commonwealth of Massachusetts.

SUFFOLK, SS. SUPERIOR COURT.

I HEREBY CERTIFY, That

Edwin Whitney of Lew
in the County of Middlesex

w *as* at the date of the within attestation *S*

Justice of the Peace, within and for said County, duly commissioned and
sworn, that due faith and credit are and ought to be given to *his*
official acts, that *he is* duly authorized to administer oaths and
take acknowledgments, and that *his* signature *is* genuine.

Witness my hand, and the seal of said Court, at Boston, in said County,
and Commonwealth, this *26* day of *September*
A. D. eighteen hundred sixty-*seven*

John Willard Clerk.

State of Massachusetts County of Middlesex Town of Stow

(a)

Nellie Sophia Wilder daughter of
Henry W. and Harriot W. Wilder
born June Twenty fifth Eighteen hundred
and fifty Eight

I CERTIFY that the above is a true copy of the record of Birth with
the exception of the date, which is expressed on the record in fair legible figures, as
follows:—^(b)

June " 25th " 1858

A. W. Nelson

I, A. W. Nelson above named, depose and say, that
I hold the office of Clerk in the town, county and state aforesaid,
and that the above is a true copy from the records of said town, with the exception
above named as certified by me.

A. W. Nelson

Town Clerk
of
Stow, Mass

Subscribed and duly sworn to before me, this twenty ninth
day of January A. D. 1867. I have no interest in this case.

William A. Richardson
Justice of the Peace. *
Judge of the Probate Court

(a)—Here fill in an exact transcript of the record, except that, instead of copying figures, the date must be written out in full.

(b)—Here give the date exactly as it is in the record.

Additional Evidence
Harriet W. Wilder
Increase of Penn
No. 74068



Charles R. Allen
Attorney
Boston
Mass.

WEBB

3-1081

3

PENSIONER DROPPED
FINANCE
DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

MAY 20 1919, 191

Certificate No. 74068

Class CIVIL WAR WIDOW

Pensioner Harriet W. Wilder

Soldier Henry W.

Service E. 26 Mass vols

The Commissioner of Pensions.

Sir:

I have the honor to report that the name of
the above-described pensioner who was last
paid at \$ 25, to MAR 4 1919,

has this day been dropped from the roll be-
cause of death Apr 23. 1919

HARRIET W WILDER
OAKLAND CAL
74068 C W WID
8733 HILLSIDE ST

Very respectfully,

W. M. Russell

Chief, Finance Division.

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

6-2249

4319492

Check No. 4319492 dated JUN 4 - 1919 canceled

PLATE DESTROYED

Ad No. *74068*

Massachusetts

Harriet W Wilder

Wid of Henry W Wilder

Rank Serjt

Company "E"

Regiment 26 Mass Vols

Boston Agency.

Rate per month, \$ 8

Commencing 19 Sept '64

Certificate dated 25 May '66

and sent to C Reed

Boston

Act 14th July, 1862.

Book "B" Vol. 3 Page 70

Aug 27/67 Letter to Agent for proof of
birth of eldest child Ida F. Wilder

Birth of
youngest child

✓
No. 4681 74068
ACT OF JULY 14, 1862.

Harriet W. Wilder
Middlesex Co. Mass. Mid. of
Henry W. Wilder
Urgen. Co. E., 26 Mass. Vol.
Died at Winchester Va.
Sept 21 1864 Wounds

Pension Office,

_____, 186 .

Respectfully referred to the Adjutant
General, for official evidence of service
and death.

Joseph M. Barrett

Commissioner.

Received May 1st 1865

Charles Reed

Boston

Mass.
Attorney.

July 18th 1865-
Cir. 21.

July 27/65

Cir. 19. & required
explanation as to the
discrepancy in name.

Admitted May 16. 1866.

You are informed that the pension accrued to the date of death of the widow is not an asset of her estate but inures to the sole and exclusive benefit of the minor child, who was under the age of 16 years at the date of her death.

A blank form upon which to present a claim for pension in behalf of the minor is herewith enclosed, which should be properly executed and returned to this Bureau when the question of her title to the pension accrued to the date of death as well as to pension in her own right will be given due consideration.

0000 ----- 0000

That as title to pension under the Act of February 6, 1907 is dependent upon the person included within its provisions filing a properly executed declaration for pension thereunder, the Bureau is bound in this class of cases by the General rule obtaining in all Departments which prohibits the inviting of claims against the Government.

0000 ----- 0000

You are informed that the Bureau is unable to determine in advance of the filing of formal application therefor and the necessary bills, the question of your title to the accrued pension as reimbursement of expenses incurred in the pensioner's last sickness and burial.

If you will execute the blank form sent you on ***** and return the same to this Bureau with itemized bills of every expense incurred in the last sickness and burial of the pensioner, the question of your title to the accrued pension will be given due consideration.

0000 ----- 0000

That said claim was allowed under the ~~Act of June 27, 1890,~~ *Act April 19, 1908* which law provides that pension thereunder shall commence at date of filing the application therefor. In this case the application was filed _____ and pension was properly commenced upon that date.

0000 ----- 0000

Relative to the payment of an unendorsed pension check in the case of _____ I have the honor to inform you that if the check for pension to March 4th was delivered to the pensioner during his lifetime, it is an asset of his estate, and the same is payable to the legal representative.

A copy of Treasury Department Circular No. 1 containing instructions for the payment of unendorsed pension checks is enclosed herewith together with a form whereon application may be made in accordance with said instructions in case there is no executor or administrator of the deceased pensioner's estate. The application when executed should be mailed to the Auditor for the Interior Department, Treasury Department, this city, together with the check.

8733 Hillside St-
June 20th 1919 Oakland Cal.

Department of the Interior
Pension Bureau

Enclosed please find Application
for Reimbursement, which I do not
think needs to be filled out, as I am
only asking for the amount of money
due my mother at the time of her
death which occurred Apr 23^d, 1919. I consider
the amount of pension due her, just the
same as any other money which may have
been due her and certainly, I would not

be expected to send all the bills of her
last sickness and the Undertaker bill
My mother (Harriet Dr. Wilder) made her home
with me since 1881 and in her declining
years she had every care that a daughter
could bestow and I want nothing but
what is justly my due. I have her Pension
Certificate No 74068. and would like
to keep it.

Ida F. Wetmore
8733 Hillside St-
Oakland
California



Finance

BMD*KAV

July 2, 1919

Mrs. Ida F. Wetherbee,
#8733 Hillside St.,
Oakland, California.

Madam:

Acknowledging the receipt of the blank application for reimbursement, which was forwarded to you for execution on May 20, 1919, in the case of Harriet W. Wilder, certificate number 74,068, you are advised that the Act approved March 2, 1895, provides that the pension accrued from the date of last payment to the pensioner to the date of her death is available only to reimburse the person who bore the expense of the last sickness and burial, if the assets were not sufficient to meet such expense.

The Bureau is unable to determine in the absence of the filing of the formal application therefor and the necessary bills, the question of your title to the accrued pension as reimbursement of the expenses incurred in the pensioner's last sickness and burial.

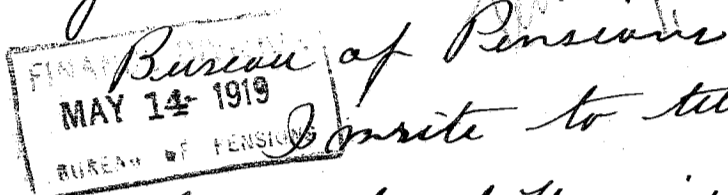
I am enclosing herewith a copy of the Act approved March 2, 1895, governing the payment of the accrued pension in such cases.

Very respectfully,

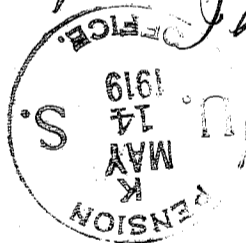
C. M. SALTZGABER.

Commissioner

8733 Hillside St
Oakland
Cal
May 6th 1919



I write to tell you
of the death of Harriet H. Wilder
which occurred Apr. 23-1919
whose pension certificate no
was 74.068. Please send the
amount due her to her
daughter



Ida F. (Wilder) Wetherbee
8733 Hillside St-
Oakland
Cal.

WIDOW'S CLAIM FOR AN INCREASE OF PENSION.

State of Massachusetts }
 COUNTY OF Middlesex } ss.

On this 12 day of October 1866, personally appeared before me,
 a Judge of a Court of Record in the County and State aforesaid,
Harriet W. Wilder a resident of South Acton in the County of
Middlesex State of Massachusetts
 aged thirty years, who, being duly sworn, declares that she is the widow of
Henry W. Wilder, who died in the (1) Military
 service of the United States, on the 21 day of September 1864, while (2)
a Sergeant Co "B" 26 Mass. Vol.
 ; and that she has remained a widow since the death of
 said Henry W. Wilder. That by reason of the death of her husband,
 as aforesaid, she received a Pension Certificate No. 74068 and that she is a Pensioner of the
 United States, duly enrolled at the Pension Agency at Boston in the
 State of Massachusetts, at \$ 8 per month. That the following
 are the names, date of birth, and present place of residence, of all of the
 children of her deceased husband, ^{4 himself} who are now under sixteen years of age, to wit,

Ida Frances born February 1, 1861
Thellie Sophia " June 12, 1858 } all reside with claimant.

She further declares that she has not abandoned the support of any one of the children above-named, nor per-
 mitted any one of the same to be adopted by any other person or persons, as his, her, or their child.

That she surrenders the aforesaid Pension Certificate No. 74068, and makes this application for the
 purpose of obtaining the increased rate of pension authorized by the act "increasing the pensions
 of widows and orphans," approved July 25, 1866; that she hereby constitutes and appoints
Charles R. Webb of Boston Mass.
 her true and lawful attorney, and authorizes him to present and prosecute this claim, and to
 receive and receipt for all orders or certificates that may be issued in consequence thereof, hereby
 revoking all Powers of Attorney, if any, heretofore given by her for a like purpose. My
 Post Office address is South Acton

SIGNATURE OF CLAIMANT.

Harriet W. Wilder

Also personally appeared before me, at the time and place aforesaid, Jona K. W. Methuen
Walter Bee, of So. Acton, and James
Tuttle, of Acton, in the County
 of Middlesex, State of Massachusetts, whom
 I certify to be credible persons, who, being duly sworn according to law, declare, each for himself,
 that they well know Harriet W. Wilder, who signed the foregoing
 declaration in their presence, and that she is the identical person she represents herself to be; that
 they have been acquainted with the said applicant, and the said deceased for ten years,
 and believe the foregoing statement relative to the names, births, and ages of their children, to be
 true and correct, and that the said statement is believed to be true and correct in the community in
 which they resided.

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.

SIGNATURES OF WITNESSES.

Jona K. W. Methuen
James Tuttle

Sworn to and subscribed before me, this 12 day of October 1866, and I hereby certify that I have no interest, direct or indirect, in the prosecution of this claim. And that the contents of the above instrument were made known to the applicant and witnesses, before signing.

OFFICIAL SIGNATURE,

[L. S.]

NOTES.

- (1.) Military or Naval.
(2.) If Military, state rank, company, and regiment. If Naval, state rank and name of vessel.

The Act of Congress, approved July 4, 1864, requires "That all declarations for pensions shall be made before a Court of Record, or before some other officer thereof having custody of its seal; said officer being hereby authorized and empowered to administer and certify any oath or affirmation relating to any pension, or application therefor."
The seal must be impressed on the original paper, either direct or through the paper on which the jurat is made, if that be a separate paper.
Revenue stamps are not required on any paper relating to soldiers' and seamen's claims, except for prize money.
To obtain an increase of pension authorized by the act of Congress approved July 25, 1866, it will be necessary for persons already pensioned to make a new application, setting forth the causes for which they were pensioned, fully covering the reasons for which the application is made, proving identity, and surrender the original pension certificate, which should in all cases accompany the new application.
The undrawn pension under the old law will be drawn with the first payment on the new pension certificate.
When witnesses or applicants sign by making their marks, the names of two witnesses thereto must appear on the left-hand margin, opposite the signature witnessed.

INSTRUCTIONS.

WIDOW'S APPLICATION

FOR AN

INCREASE OF PENSION.

UNDER ACT JULY 25, 1866.

Carriet M. Wilder

Residence Co. H. 1st Regt. N.Y.

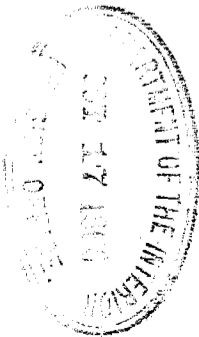
County Wichita

State Kansas

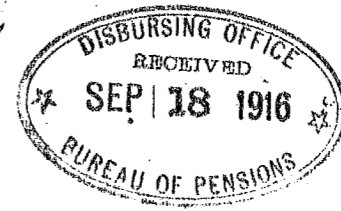
FILED IN THE PENSION OFFICE,

186

Charles D. Miller
Attorney
Boston
Mass.



No of Pension Certificate is
74,068



Oakland Calif Sept 9
8733 Hillside St 1916

Mr. Gay C Taylor
Dear Sir

I see that the President has
signed the bill for the increase of
Pension to the war widows, at the
age of 70. I was 80 the 2 of last May
if there is any thing more for me
to do please notify me I wish to
enter my claim for the increase

Resp- Harriet M. Wilder

CLAIM FOR INCREASE OF WIDOW'S PENSION.

Supplemental to case in which certificate No. 74068 was issued May 23th, 1866.

BRIEF in the case of Harnet W Wilder, Widow of

Henry W Wilder Sergt lev E 26 Mass Vols

Resident of Middlesex County, and State of Mass
Post Office address: South Acton Mass

DECLARATION AND IDENTIFICATION IN DUE FORM.

PROOF EXHIBITED.

Abandonment or adoption. Neither

Date of Marriage of Parents. May 26th 1857

Names and dates of birth of children.	<u>Kellie S</u>	, born <u>June 20</u>	, 18 <u>58</u> , who will be 16 years old <u>June 24</u>	, 18 <u>74</u> .
		"	, 18	, 18
	<u>Ida F</u>	, <u>Feby 1</u>	, 18 <u>61</u> , " <u>Jan'y 31</u>	, 18 <u>77</u> .
		"	, 18	, 18
		"	, 18	, 18
		"	, 18	, 18
		"	, 18	, 18
		"	, 18	, 18

Proof of ages. Public record

Only children. Shown

Agent, and his P. O. address. C R Abell
Boston
Mass

Issue certificate for Eight dollars per month, commencing Sept 19, 1864, and two dollars per month additional for each of the above-named children, commencing 25 day of July, 1866, deducting former payments.

W H Chapman, Examiner.
for Staylor

Passed Nov 19, 1867.

APPROVED: [Signature]

1927 Aug 3 - Gen. A. G. to transfer from Boston to San Francisco 28-

MAY 20 1919

REIMBURSEMENT.

Ida F. Wetherbee
McC
Fin

July 2-1919 To
Ida F. Wetherbee relative
to payment of accrued
pension. Rm D
Finance

Entitled to \$20 per month,
Commencing Sept. 8, 1916,
Under act of Sept. 8, 1916.
Wife During Civil War service.

DROPPED

MAY 20 1919

FINANCE DIVISION

Increased No. 14.068

Massachusetts
Harriet W. Wilder

WIDOW OF

Henry W. Wilder

Rank Sergeant, Co. E,
Regt. 26 Mass Vol

Boston San Francisco Agency

Rate per Month, \$ 8

Commencing 19 Sept 1864

Additional sum of \$2 per Month for each
of the following children, ~~under the age of~~ the age
of 16 years, commencing 1866, viz:

Hellie S 24 June 1874

Ida P 31 Jan'y 1877

DEAD

Former payments to be deducted

Certificate dated 26 Apr 1867

Sent to C. B. Abell
Boston Mass

Act 14th July 1862.

Book 3. Page 71

Dunnell Clerk.

READ LAW AND INSTRUCTIONS ON BACK
OF THIS BLANK BEFORE USING IT.

3-044

APPLICATION FOR REIMBURSEMENT.

(This application, when properly executed before some officer having authority to administer oaths for general purposes, should be forwarded, together with the pension certificate and itemized bills of all expenses, to the Commissioner of Pensions, Washington, D. C.)

STATE OF _____ } ss:
COUNTY OF _____ }

On this _____ day of _____, A. D. one thousand nine hundred and _____, personally appeared before me, a _____ within and for the County and State aforesaid, _____, aged _____ years, a resident of _____, County of _____, State of _____, who, being duly sworn according to law, makes the following declaration in order to obtain reimbursement from the accrued pension for expenses paid (or obligation incurred) in the last sickness and burial of _____ who was a pensioner of the United States by certificate No. _____, on account of the service of _____ (Name of soldier or sailor.) in _____ (Describe service by company and regiment, etc., if in the Army, or by the words U. S. Navy, if in the Navy.) That pension was last paid to _____, 191_____.

That the answers to questions propounded below are full, complete, and truthful to the best of my knowledge, information, and belief, and that no evidence necessary to a proper adjustment of all claims against the accrued pension is suppressed or withheld.

1. What was the full name of the deceased pensioner? _____

2. In what capacity was decedent pensioned? (As invalid soldier or sailor, or as a widow, minor child, dependent relative, etc.) _____

3. If decedent was pensioned as an invalid soldier or sailor—

(a) Was he ever married? (Answer yes or no.) _____

(b) How many times, and to whom? _____

(c) If married, did his wife survive him? (Answer yes or no.) _____

(d) If so, is she still living? (Answer yes or no.) _____

(e) If not living, give full names and dates of death of all wives _____

(f) Was he ever divorced? (Answer yes or no.) _____

(g) If so, is the divorced wife still living? (Answer yes or no.) _____ (If living, a copy of the decree of divorce must be filed.)

(h) If not living, give her full name and the date of her death _____

4. Did pensioner leave a child under 16 years of age? (Answer yes or no.) _____

5. Is any such child still living? (Answer yes or no.) _____

6. Were any sick or death benefits paid on pensioner's account? If so, give name of society and amount paid _____

7. Was there insurance (life, accident, or health) in force on life of pensioner at time of death? (Answer yes or no.) _____

8. If so, give the name of each company in which a policy was carried and the amount in which each policy was written _____

9. Who was the beneficiary named in each policy? _____

10. What was the relation of each beneficiary to the pensioner? _____

11. Were the premiums paid by the deceased pensioner? _____

12. If not paid by the deceased pensioner, state the amount of premiums paid by each person who made payment on that account _____

13. Is there an executor or administrator, or will application be made for appointment of any person as administrator? _____
14. Did the deceased pensioner leave any money, real estate, or personal property? _____
15. If so, state the character and value of all such property _____
16. What was the assessed value (last assessment) of the real estate? _____
17. How was the pensioner's property disposed of? _____
18. Did pensioner leave an unindorsed pension check? (Answer yes or no.) _____
19. What was your relation to the deceased pensioner? _____
20. Are you married? (Answer yes or no.) _____
21. What was the cause of pensioner's death? _____
22. When did the pensioner's last sickness begin? _____
23. From what date did the pensioner become so ill as to require the regular and daily attendance of another person constantly until death? _____
24. Give the name and post-office address of each physician who attended the pensioner during last sickness _____
25. State the names of the persons by whom the pensioner was nursed during the last sickness _____
26. Where did the pensioner live during last sickness? _____
27. Where did the pensioner die? _____
28. When did the pensioner die? _____
29. Where was the pensioner buried? _____
30. Has there been paid, or will application be made for payment to you or any other person, any part of the expenses of the pensioner's last sickness and burial by any State, County, or municipal corporation? (Answer yes or no.) _____
31. State below the expenses of the pensioner's last sickness and burial. Write the word *none* where no charge is made in case of any item of expense noted.

(Each charge entered below should be supported by an itemized bill of the person who rendered the service or furnished supplies for which reimbursement is demanded, and should show, over his signature, by whom paid, or who is held responsible for payment, and contain the name of the pensioner for whom the expense was incurred or service rendered.)

NAMES.	NATURE OF EXPENSES.	STATE WHETHER PAID OR UNPAID.	AMOUNT.
	Physician _____		
	Medicine _____		
	Nursing and care _____		
	Undertaker _____		
	Livery _____		
	Cemetery _____		
	Other expenses and their nature: _____		
	TOTAL _____		

32. Is the above a complete list of *all* the expenses of the last sickness and burial of the deceased pensioner? (Answer yes or no.) _____

That my post-office address is No. _____, on _____ street,
town or city of _____, County of _____,
State of _____.

(When the claimant for reimbursement is a married woman, she is required to sign the application with her own full name, not using the Christian name or the initials of her husband, and all bills should be receipted to her in her own name.)

Also appeared _____ and _____
 who, being duly sworn, say that they saw _____, the claimant, sign
 name (or make _____ mark) to this application; that they know the claimant herein and that their answers to the
 following questions are true:

1. Did pensioner (if a soldier or sailor) leave a widow or a minor child under age of sixteen years surviving? _____

2. When did the pensioner die? _____

3. Did pensioner leave any property? If so, state its character and value _____

4. We knew pensioner _____ years. We believe above statements to be true because _____

Name _____ Name _____

P. O. Address _____ P. O. Address _____

Subscribed and sworn to before me, this _____ day of _____

A. D. 191____; and I certify that the contents of the foregoing application were fully made known and explained to the
 claimant and witnesses before swearing, that I have no interest, direct or indirect, in the prosecution of this claim, and I
 further certify that the reputation for credibility of the witnesses whose signatures appear above is _____

(Signature.)

(Official character.)

STATEMENT OF ATTENDING PHYSICIANS.

Give date of the pensioner's death _____

Give date of commencement of pensioner's last sickness _____

From what date did the pensioner require the regular and daily attendance of another person constantly until death? _____

During what period did you attend the pensioner? _____

State nature of disease from which pensioner died _____

Give name of each person who rendered service as nurse, and who has made or will make a charge for such service _____

Give name of any other physician who attended the pensioner in last sickness _____

Does your bill include a charge for all medicine furnished the pensioner during last sickness? _____

Has your bill been paid; if so, by whom? _____

Mention any other facts within your knowledge which in your opinion would be helpful in adjusting this claim for reimbursement: _____

I certify that the foregoing statement is correct.

_____, 191

Attending Physician.

_____, 191

Attending Physician.

DROPPED

APPLICATION FOR REIMBURSEMENT.

WIDOW.

Certificate No. 74 068

Marion T. Miller
Deceased Pensioner.

Claimant.

AN ACT to amend section forty-seven hundred and forty-six of the Revised Statutes of the United States. (30 Stat. L., 718.)

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section forty-seven hundred and forty-six of the Revised Statutes of the United States is hereby amended to read as follows:

"That every person who knowingly or willfully makes or aids, or assists in the making, or in any wise procures the making or presentation of any false or fraudulent affidavit, declaration, certificate, voucher, or paper or writing purporting to be such, concerning any claim for pension or payment thereof, or pertaining to any other matter within the jurisdiction of the Commissioner of Pensions or of the Secretary of the Interior, or who knowingly or willfully makes or causes to be made, or aids or assists in the making, or presents or causes to be presented at any pension agency any power of attorney or other paper required as a voucher in drawing a pension, which paper bears a date subsequent to that upon which it was actually signed or acknowledged by the pensioner, and every person before whom any declaration, affidavit, voucher, or other paper or writing to be used in aid of the prosecution of any claim for pension or bounty land or payment thereof purports to have been executed who shall knowingly certify that the declarant, affiant, or witness named therein was personally appeared before him and was sworn thereto, or who signed the execution thereof, when, in fact, such declarant or witness did not personally appear before him and did not swear thereto, or did not acknowledge the execution thereof, shall be punished by a fine not exceeding five hundred dollars, or by imprisonment for a term of not more than five years."

Approved July 7, 1898.

G-1572

The Act March 2, 1895 (28 Stat. L., 964), provides—

That from and after the twenty-eighth day of September, eighteen hundred and ninety-two, the accrued pension to the date of the death of any pensioner, or of any person entitled to a pension having an application therefor pending, and whether a certificate therefor shall issue prior or subsequent to the death of such person, shall, in the case of a person pensioned, or applying for pension, on account of his disabilities or service, be paid, first, to his widow; second, if there is no widow, to his child or children under the age of sixteen years at his death; third, in a case of a widow, to her minor children under the age of sixteen years at her death. Such accrued pension shall not be considered a part of the assets of the estate of such deceased person nor be liable for the payment of the debts of said estate in any case whatsoever, but shall inure to the sole and exclusive benefit of the widow or children. And if no widow or child survive such pensioner, and in the case of his last surviving child who was such minor at his death, and in case of a dependent mother, father, sister, or brother, no payment whatsoever of their accrued pension shall be made or allowed except so much as may be necessary to reimburse the person who bore the expense of their last sickness and burial, if they did not leave sufficient assets to meet such expense.

The Act March 3, 1903 (33 Stat. L., 1169), provides—

* * * and no part of any accrued pension shall hereafter be used to reimburse any State, county, or municipal corporation for expenses incurred by such State, county, or municipal corporation under State law for expenses of the last sickness or burial of a deceased pensioner.

INSTRUCTIONS.

1. Accrued pension is not a part of the assets of the estate of a deceased pensioner, nor liable for the payment of the debts of such pensioner.
2. Accrued pension is not payable as reimbursement in the case of a person pensioned on account of service if a widow or minor child under sixteen years of age survive.
3. Accrued pension is not payable as reimbursement in the case of any pensioner who left sufficient assets to meet the expense of last sickness and burial.
4. Application for reimbursement should be accompanied by the following evidence:
 - (a) Bills of all expenses of last sickness and burial. If paid by the claimant for reimbursement the bills must be properly receipted to said claimant; but if paid in part only the creditor should state by whom paid or from what source such payment was received. If unpaid, the parties to whom said bills are due should note on each bill, over their signatures, that they hold the claimant responsible for the payment. If the bill be for medical treatment it must show the dates of visits or treatment and the charge for each. A bill for nursing and care must show the dates between which the services were rendered, and the rate per day or week. The bill of the undertaker must be itemized, and show the date on which the services were rendered. Each bill must show that the service was rendered for the pensioner on account of whom reimbursement is claimed. All claims should be presented in the name of one person. Bills which are forwarded become a part of the records of the Bureau of Pensions and can not be returned. Claimants should therefore secure duplicates of such bills if needed by them.
 - (b) The pension certificate which was issued in the name of the pensioner. If such certificate is not in possession of the claimant a statement showing its whereabouts or final disposition should be made.
5. A careful compliance with these instructions will save much unnecessary delay in the settlement of the claim presented.

NOTICE.

The only sum available for payment of a claim presented on this blank is the pension unpaid at the date of the pensioner's death.

G-1572