

Also appeared (Mrs) Ella Bond³ and Mrs. Virgie Jones
who, being duly sworn, make the following statement, each for himself, 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? April 30 1932 ✓
- 3. Did pensioner leave any property? If so, state its character and value none ✓
- 4. Our means of knowledge of the above statements made by us are: We knew the deceased pensioner for 53 and 57 years and and me are her daughter's

Name Ella Bond Name Virgie Jones
 P. O. Address 1533 Argyle Ave P. O. Address 1533 Argyle Ave

Subscribed and sworn to before me, this 15th day of June A. D. 1932,
 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 good

[L. S.]

Wm. L. Smith
 (Signature)
 Notary Public
 (Official character)
 1808 Penna. Ave.
 Baltimore Md.
 (P. O. address)

STATEMENT OF ATTENDING PHYSICIANS

Give pensioner's name in full Elizabeth Harris
 Give date of commencement of pensioner's last sickness Oct-5-31
 Give date of pensioner's death 4-30-32 ✓

From what date did the pensioner require the regular and daily attendance of another person constantly until death?
Oct 6-31

During what period did you attend the pensioner? Oct-5-31 to April 30-32
 State nature of disease from which pensioner died Valvular + Intestinal Nephritis

Give name of any other physician who attended the pensioner in last sickness none

Does your bill include a charge for all medicine furnished the pensioner during last sickness? no
 Has your bill been paid; if so, by whom? Part paid by Paul G. Harris (husband) ✓

Give the name of each person who acted as nurse, and mention any other facts within your knowledge which would be helpful in adjusting this claim for reimbursement: Mrs. Mildred Johnson

I certify that the foregoing statement is correct.
June 14 1932



W. H. Hearn M.D.
 Attending Physician.
 Attending Physician.