(3-		4	4
1	- 1	-	1

-	Attention is invited to the outlines of the human skeleton and figure upon the back of this
	certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or
	injury, the entrance and exit of a missile, an amputation, etc.
	The absence of a member from a session of a board and the reason therefor, if known, and the name
	of the absentee, must be indorsed upon each certificate.
Insert character† and number of claim.	Pension Claim No. 4/2339
Cimin.	(Ithan 111 ahh
Name and rank of claimant.	Rank, Colland
	Company 10, 9 Reg't 16 . C. 1. Daltungth. State, Md.
Claimant's nost	11195 Post of the Board.)
office address.	1725 Vannuma all-Date Mac Corolla, 1889.
	We hereby certify that in compliance with the requirements of the law* we have carefully examined
	this applicant, who states that he is suffering from the following disability, incurred in the service, viz:
Cause of disa- bility.	this applicant, who states that he is suffering from the following disability, incurred in the service, viz:
bility.	
	10,0,
THE CASE CONTRACTOR	
if not, erase the whole line.	Pulse rate per minute, 80; respiration, 18; temperature, 11; height, 5
	feet 9 inches; weight, 2/0 pounds; age, 42 years.
	Hé makes the following statement upon which he bases his claim for to the Character
	Clarins Mat as a result of wound he
	hashatian estate it is all the
Here give the claimant's	The figure of the first and and
briefly and as	my seven pain especially on daug.
possible.	weather and is offen in a we to surfail
	mount laborel.
	Upon examination we find the following objective conditions: Unull physical
Here give a full symptom pic-	Condition good Muscles large and mill developed.
embracing all	yours to have regeried an infung this
and rational	spoulder caused by the grun tangel offile
fining it to the	thrown violently against it by a graquet
tion of the claimant.	The state of the s
	of sheet; There is a stight schi our ilpher
It must be borne	Spect of right shoulder thy hich he claims
the duty of the	He has evidently sufficed after ation of
give an opinion	Le for all -1
portionate de gree of disabil-	ge mus goginning anguest a manion of
ity, as 1, 1, total, &c., through	head of humerus othornord-acromioli
without any re-	process is abroquelly prominent and there
and cents, and to make such a	is a distinct hallow beneath it- The museles
full particular description as	and a la l
this Office the	possible to grash the head of humen whitmen
telligent opin-	possible to grash the head of humen between
in rating.	the fingers - marked crepitation on mation
	whiteder to the total
	makhoteder fourt. The can with difficulty
	carry the thand to apposite shoulder but
	campot raise it to the head Complains
	From the existing condition and the history of this claimant, as stated by himself, it is, in our judg-
	ment,
	not been prolonged or aggravated by picious habits. He is, in our opinion, entitled to a 19/18
Rate for each	in a series of a series of the
it protonged by	rating for the disability caused by Shell round right ann for that caused
vicious habits, the word not	by caused by
should be erased and the reason for the	
erasure given.	

Here state whether for original, increase, restoration, or renewal, or for a re-rating.

Here state whether for original, increase, restoration, or renewal, or for a re-rating.

Rec'y. Sec'y. Sec'y. Sec'y.

\* See the back.

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N. B.—Always forward a certificate of examination whether a disability is found to exist or not.