(3—111.)

☞ 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, &c.

The absence of a member from a session of a board and the reason therefo[illegible] known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim. Original Pension Claim No. 778,471
[State above whether for original, increase, or restoration.]

Name and rank of claimant. John W. Davis, Rank,

Company N, 9th Reg't U.S.C. Inf. | Baltimore, Md State,
[Post-office address of the Board.]

Claimant's post-office address. Jew alley, Balto. Md | August 2nd, 1893.
[Date of examination.]

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

Cause of disability. in the service, viz: Disease of Kidneys - Sunstroke - injury of leg - disease of eyes - rheumatism

If a pensioner, fill in the amount; if not, erase the whole line. ~~and that he receives a pension of dollars per month.~~

He makes the following statement upon which he bases his claim for original
[Original, increase, restoration, &c.]

Here give the claimant's statement as briefly and as compactly as possible. Sunstroke in 1865 - now numbness - hurt across spine of back by lifting - malaria and diarrhoea - most trouble I have is head and back - no further troubles

Upon examination we find the following objective conditions: Pulse rate, 84; respiration, 18; temperature, 2m; height, 5 feet 8½ inches; weight, 155 pounds; age, 54 years. Gen physical condition excellent -

Here give a full description of the disabilities, in accordance with Book of Instructions. disease of Kidneys - no disease of Kidneys Specific gravity 1020 - no albumen or sugar or other abnormal deposits - no oedema or dropsy - no anaemia - heart and arteries normal - no evidence of degeneration - Sunstroke - no objective evidence of sunstroke - pupils normal. no objective evidence of injury to leg - disease of eyes - Snellen's test - left eye vision 24 at 20 feet - right eye same (24) at 20 feet - pupil 30 are of average normal size and respond to light - no conjunctivitis - no opacities Rheumatism - slight muscular pain over lumbar region and left shoulder joint - no swelling, stiffness, enlargement, atrophy or impaired motion -

The actual or probable origin of every existing disability must be fully set forth. Whenever a disability is shown, or is believed to be due to or aggravated by vicious habits the opinion of the board must be stated. When not due to such habits this fact must be stated.

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Rate for EACH cause of disability. _____. He is, in our opinion, entitled to a _____ rating for the disability caused by _____, _____ for that caused by _____, and _____ for that caused by _____

A H Saxton, Pres. H S Jamell, Sec'y. W C Ireland, Treas.

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

(9480—200,000.) 6—552