

DECLARATION FOR THE INCREASE OF AN INVALID PENSION.

State of Maryland, <sup>City</sup> County of Baltimore ss:

ON THIS sixth day of July A. D. one thousand eight hundred and ninety seven  
before me, the undersigned, duly authorized to administer oaths within and for the <sup>City</sup> County and State  
aforesaid, personally appeared, Garrett Brown  
Claimant's name.  
late a U.S. Cold Inf. in Company A of the 19th Regiment of  
Volunteers, aged 63 years, who being duly sworn according  
to law, declares that he is a pensioner of the United States, duly enrolled at the Washington D.C.  
Pension Agency, at the rate of 6 dollars per month, under Pension Certificate No 689 H 04  
by reason of disability resulting from Rheumatism  
Here state the disability for which you are pensioned exactly as mentioned in your Pension Certificate

That he believes himself entitled to an increase of pension for disability above stated, and hereby makes application therefor.

On account of an increased disability, and he thinks the rate of pension he is now receiving is unjustly and unreasonably low and disproportionate to the rate drawn by other pensioners for similar or equivalent disabilities.

He also claims additional pension for disease of heart, Piles, disease of stomach, Lumbago- disease of kidneys, Rupture of right side, partial loss of eyesight both eyes.  
If you claim additional pension for disability not mentioned in your Pension Certificate, here describe it fully and state when, where and under what circumstances the same originated.

That he hereby appoints, with full power of substitution and revocation

J. W. MORRIS, of Washington, D. C., his true and lawful attorney, to prosecute said claim.

His Post Office address is 1420 Orleans St <sup>City</sup> County of Baltimore

State of Maryland

George W. Edwards

Samuel P. Edwards  
If claimant signs by mark, two persons who can write must sign here.

Garrett X Brown  
Signature of Claimant  
mark

FILED