

He further declares that he has been a practitioner of medicine for _____ years, and that he has no interest, either direct, or indirect, in the claim to which this affidavit is supplementary and is not engaged in its prosecution.

Jacob L. Lerner M.D.
(Affiant's signature) ~~State and service, if in the Army or Navy~~

Sworn to and subscribed before me this 8th day of February A. D., 1926
and I hereby certify that the affiant is a practicing physician in good professional standing; that the contents of the foregoing affidavit were fully made known to him before its execution, including the words _____ erased, and the words _____ added; that I have no interest, direct or indirect, in this claim, and am not engaged in its prosecution.

Alvan S. Stanley
(Official signature)

Notary Public
(Official character)

1509 Jefferson St.
(Post office address)

[L. S.]

NOTE.—To be executed before some officer authorized to administer oaths for general purposes. The official character and signature of any such officer not required by law to use a seal must be certified by the clerk of the proper court, giving the dates of beginning and close of official term.

AFFIDAVIT OF PHYSICIAN

CLAIM OF

William Well

1511 E. Fayette St.

No. C. 747407

Carefully observe instructions given in marginal notes.

The physician's affidavit should contain such description of claimant's alleged ailments or others that would justify the conclusion that he is materially incapacitated for the performance of manual labor, or that he requires regular personal aid or attendance of another person, as the case may be.

An opinion unsupported by a description of conditions justifying such opinion can not be accepted as sufficient to warrant favorable consideration of a claim for pension or increase of pension.