

(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 therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

ORIGINAL

Pension Claim No. 890754

[State above whether for original, increase, or restoration.]

JAMES A. REYNOLDS

, Rank, PRIVATE

Name and rank of claimant.

Company F, 9th Reg't U.S.C.T.

BALTIMORE, MD.

State,

[Post-office address of the Board.]

Claimant's post-office address.

671 PIERCE ST., BALTO. MD.

APRIL 17th,

, 1891.

[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 in the service, viz: Pain in Head and Loss of Memory.

Cause of disability.

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of 0 dollars per month.

He makes the following statement upon which he bases his claim for ORIGINAL

[Original, increase, restoration, &c.]

Has pains through the head and memory is failing.

Has pains through the chest.

Here give the claimant's statement as briefly and as compactly as possible.

Upon examination we find the following objective conditions: Pulse rate, 80; respiration, 18; temperature, N; height, 5 feet 6 inches; weight, 125 pounds; age, 49 years. General physical condition good.

There is no evidence whatever of disease of the head.

His memory of past events is as near perfect as it could well be.

There is no disease of the chest.

Auscultation and percussion show the lungs to be healthy.

Heart and Abdominal organs are normal.

We fail to find any disability.

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

Rate for EACH cause of disability.

He is, in our opinion, entitled to a 0 rating for the disability caused by _____, for that caused by _____, and _____ for that caused by _____

A. B. White, Pres. E. S. Gault, Sec'y. Geo. R. Hale, Pres.

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