

(This certificate to be filled in and signed by the secretary when the full board is present.)

"I hereby certify that Dr. Scudder, Dr. Jarrett, and Dr. Owings, were personally present and actually participated in the examination of Joshua E. West, the claimant in this case, on 3rd day of July, 1905."

(Signature.)

W. A. Jarrett

(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.)

"I, _____, the applicant for (increase or original) pension referred to in this medical certificate, hereby consent to be examined by Dr. _____ and Dr. _____, the examining surgeons here present (waiving examination by full board), on this _____ day of _____, 1905."

Witnesses to mark.

(Signature of Applicant.)

SURGEON'S CERTIFICATE

IN CASE OF

Joshua E. West

Co. H, 39 Reg't U.S.C. Inf

APPLICANT FOR Increase

No. 610,041

DATE OF EXAMINATION:

July 3rd, 1905

BOARD.
C. H. Scudder, Pres.,
W. A. Jarrett, Sec'y,
J. H. Owings, Treas.

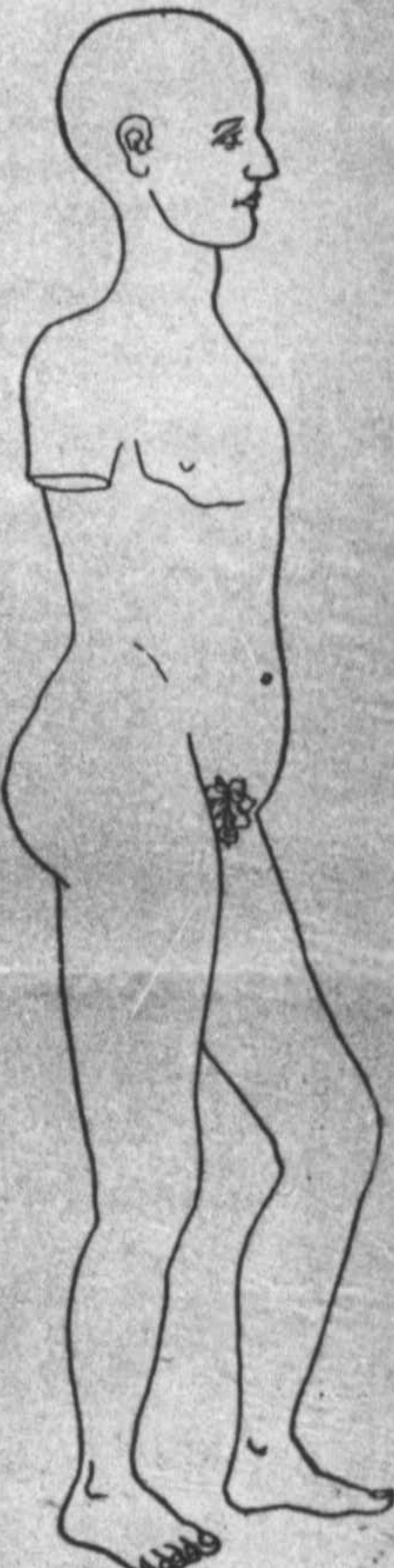
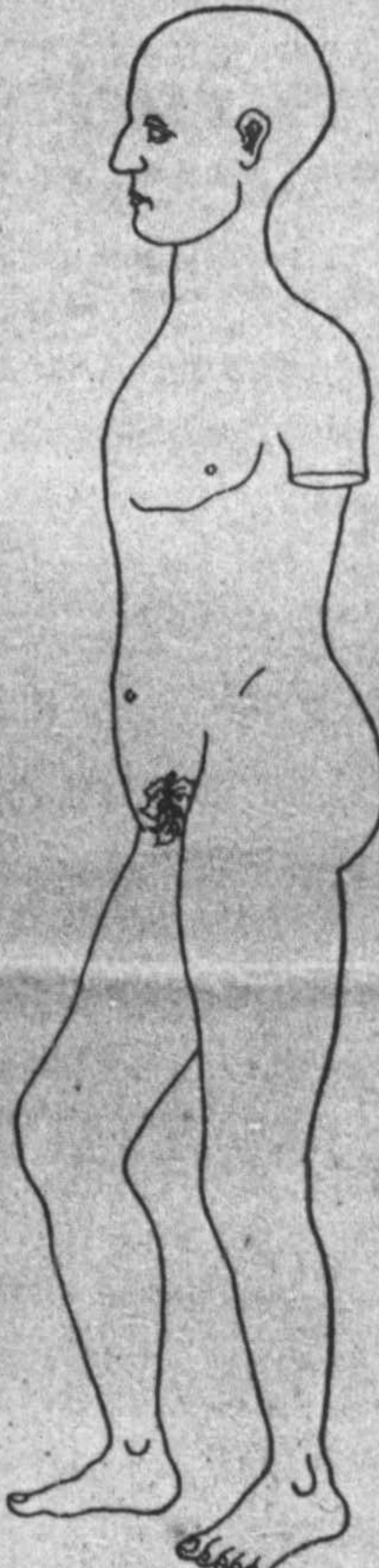
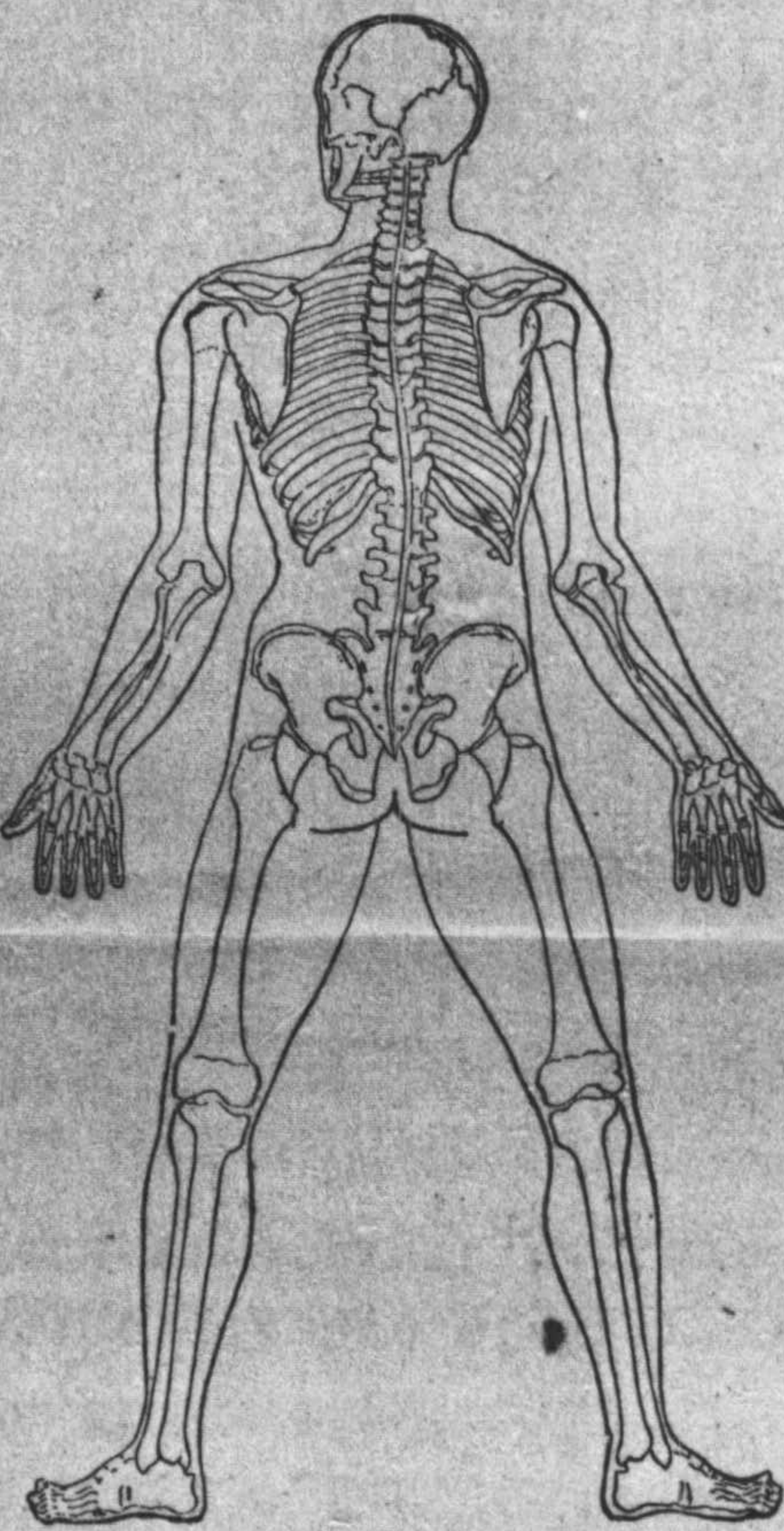
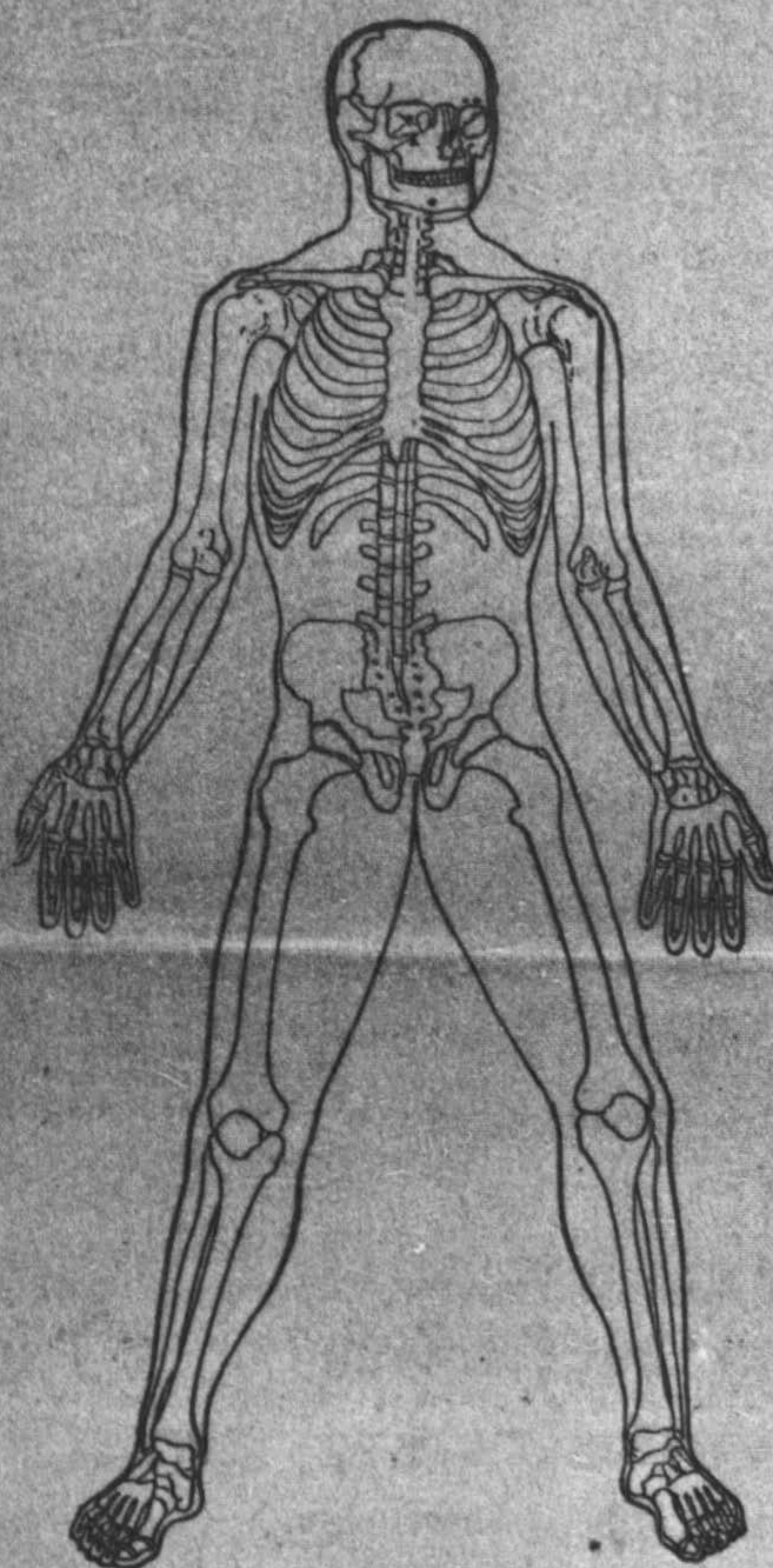
Post office, Baltimore

County,

State, Maryland

Do not use backs of certificates for any purpose other than indicated by printed matter thereon. 6-552b

RECEIVED JUL 8 1905



The outlines of the human skeleton and figure should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

(Paste continuation sheet, if used, here.)