

DECLARATION FOR INVALID PENSION.

Act of June 27, 1890.

This Must be Executed Before a Court of Record or Some Officer Thereof Having Custody of its Seal.

State of _____, County of _____, SS:

ON THIS 7th day of July, A. D. one thousand eight hundred and ninety _____

personally appeared before me, Deputy Clerk of the Circuit Court, a Court of Record within and for the County and State aforesaid Wm Smothers

aged _____ years, a resident of the _____ of City of Balto.

County of _____, State of Maryland, who, being

duly sworn according to law, declares that he is the identical Wm Smothers

who was ENROLLED on the 15 day of Aug, 1863, in Private K 4 - U.S. C.T. (Here state rank, company and regiment, Military service, or vessel, if in the Navy.)

_____ in the war of the rebellion, and served at least ninety days, and was HONORABLY DISCHARGED at Baltimore 1865, on the _____

day of May, 1866. That he is _____ unable to earn a support by reason of loss of left foot - ruptured (Here name the disease or injuries from which disabled.)

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief permanent. That he has _____ applied for pension under application No. _____. That he is a pensioner under Certificate No. _____ (If a pensioner, the Certificate only need be given. If not, give the number of the former application if one was made.)

That he makes this declaration for the purpose of being placed on the pension roll of the United States under the the provisions of the Act of June 27, 1890. He hereby appoints

_____ of _____ his true and lawful attorney to prosecute his claim.

That his POST OFFICE ADDRESS is 1138 Saratoga St. County of City of Balto. State of Maryland

Harry H. Paul
William S. Placide
(Two Witnesses who can write, sign here.)

William Smothers
(Signature of Claimant.)
Wm