UNITED STATES VETERANS BUREAU
Form 3101
Revised July, 1929

REQUEST FOR ARMY INFORMATION

FOR USE OF—

Counsel

March 17, 1930

DIVISION Awards SUBDIVISION Reimb. SECTION Room 927 UNIT FADB

It is requested that information be given on the subject checked and this sheet returned to the **United States Veterans Bureau.**

Name Armstrong (Last.) John (First.) (Middle.)

Rank and organization Pvt. Co.B 39th Reg.

Date ..... Camp .....

Date of enlistment March 5, 1864

Date of discharge or death ~~XXX~~ December 4, 1865

Home address Baltimore, Maryland

Date of death February 10, 1930

Status of allotment through Z. F. O. .....

Has final settlement been made? .....

Certified copies of Forms 1-B .....

Civil War Veteran

Army Serial No.: S.....

Allotment No.: A.....

Compensation Claim No.: C.....

Converted Insurance No.: K.....

Term Insurance No.: T.....

Allotment deductions, Class A ..... Class B .....

From ....., 19....., to ....., 19.....

Made subsequent to ....., 19.....

Premium deductions:

From ....., 19..... to ....., 19.....

Additional information Please furnish complete medical and military history

Alleged disability ..... incurred at .....

Treated at ..... Hospital No. ..... at ..... from ....., 19....., to ....., 19.....

Treated at ..... Hospital No. ..... at ..... from ....., 19....., to ....., 19.....

Treated at ..... Hospital No. ..... at ..... from ....., 19....., to ....., 19.....

Treated at ..... Hospital No. ..... at ..... from ....., 19....., to ....., 19.....

GEORGE E. IJAMS, Assistant Director

By .....

1. Name ..... (Last.) (First.) (Middle.)
2. Army Serial No. .....
3. Rank and organization at discharge .....
4. Date of enlistment .....
5. Physical defects at enlistment .....
6. Was he medically examined and accepted at camp? .....
7. Date and hour of induction by draft board .....
8. Defects noted by draft board .....
9. General or limited service .....
10. Date of discharge .....
11. Character of discharge .....
12. Date of indefinite furlough .....
13. Physical defects at discharge .....
14. Complete medical history .....
15. Future address .....
16. Date of reenlistment (new army) .....
17. Present rank, organization, and location .....
18. Date and cause of death .....
19. Death in line of duty? ..... Death due to own misconduct? .....
20. Emergency address .....
21. Date of birth .....
22. Date and rank of retirement .....
23. Dates and history of desertion or absences with court-martial findings .....

Report below on National Guardsmen only.

24. Date of President's call (World War) .....
25. Date answered President's call .....
26. Date mustered into Federal Service .....
27. Date of physical examination for Federal Service (World War) .....

(SEE REVERSE SIDE)

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