

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.

Increase Army
(State above whether for original, increase, or restoration.)

Pension Claim No. *626.009*

Name and rank of claimant.

Robert Barnes

Rank, *Private*

Company *K/19* Reg't *U. S. 6 Inf.*

Baltimore Md.
(Post office address of the Board.)

Claimant's post-office address.

123 Selma Place Baltg. Md.

March 4, 189*3*
(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

Cause of disability.

in the service, viz. *Rheumatism - disease of rectum - affection of kidneys - right side - eyesight and hearing and right leg dyspepsia - and broken foot*

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

and that he receives a pension of *\$6.00* dollars per month

He makes the following statement upon which he bases his claim for *Increase*
(Original, increase, restoration, &c.)

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

*Rheumatism 2 years
 Cries 18 months
 Broken foot 18 months*

Upon examination we find the following objective conditions: Pulse rate, *80*; respiration, *19*; temperature, *98*; height, *5* feet *8* inches; weight, *202* pounds; age, *30* years.

Here give a full description of the disabilities, in accordance with Book of Instructions.

Rheumatism: All joints muscles and tendons normal in eye and action - Heart in area and action normal. No disability.
Disease of Rectum: Speculum examination shows slight engorgement of blood vessels; but we fail to find any other evidence of disease of rectum existing at present. No disability.
Affection of kidneys: Not sensitive to pressure over lumbar region - urine dark color - specific gravity 1026 - no albumen - engar. No disability.
Right side: (not now alleged) We fail to find any evidence of same existing. No disability.
Eyesight: On pile reported to light and shade equally - cannot read letters but can count fingers correctly with each eye opposite being closed at distance of 15 feet. No disability.
Hearing: Can hear ordinary conversation with each ear opposite being plugged with cotton at distance of 15 feet. No disability.
Right leg and broken foot: The 2nd and 3rd meta-tarsal

Rate for EACH cause of disability.

rating for the disability caused by

He is, in our opinion, entitled to a *- 0 -*

for that caused *(over)*

by and for that caused by

[Signature] Pres. *L. St. Thomas* Sec'y. *Lane Campbell* Treas.

N. B. - Always forward a certificate of examination whether a disability is found to exist