

740 Declaration for Increase of Pension

Under the Act of June 27, 1890.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes. If such officer uses a seal, certificate of Clerk of Court is not necessary. If no seal is used, then such certificate must be attached.

State of Ind, County of Baile, ss:

ON THIS 15 day of Oct, A. D. one thousand eight hundred and One

personally appeared before me, a J. P. within and for the County and State

aforesaid, Robert Parmer aged 49 years, a resident of

City Baile County of _____ State of

Ind, who, being duly sworn according to law, declares he is a pensioner of the

United States, enrolled at the Washington Pension Agency at the rate of 6

dollars per month, Certificate No. 626009; by reason of disability from thrombosis

(Here name the disability for which pension was granted.)

and disease of heart

That he was a Private in Co. K, '9 1st Reg't 10th Vols.

(Here state rank, company, and regiment, if in the army; vessel if in the navy.)

That he believes himself to be entitled to an increase of pension on the ground that the rate allowed him is too low and not commensurate with the extent of his present disability. He therefore requests that he be favored with another medical examination with the view of determining his right to \$12 per month, the full rate allowed under the Act of June 27, 1890.

Claims increase for above disabilities
also, operation eyesight Kidney trouble
operation hearing operation of right side
dyspepsia, broken foot & operation
right leg

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief permanent.

He hereby appoints with full power of substitution and revocation, A. Parmer Floyd

Baile Ind his true and lawful attorney, to prosecute his claim.

His Post Office address is 1008 Peach Alley
Baile Ind

V. Currier Robert Parmer
E. S. Warner (Signature of Claimant.)
(Two witnesses) (Sign here.)