

(3-111.)

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.

Original

Pension Claim No. *842,921*

Name and rank of claimant.

Wesley Perry

Rank, *Private*

Company *1st Brig Band US Inf*

Post-office address of the Board, *Hagerstown, Md*

Claimant's post-office address.

Hagerstown Md

[Date of examination.] *March 19th*, 189*1*

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: *fract of right leg at ankle and Rheumatism*

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

and that he receives a pension of _____ dollars per month.

He makes the following statement upon which he bases his claim for *Original*

[Original, increase, restoration, &c.]

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

Act of 1890

Upon examination we find the following objective conditions: Pulse rate, *70*; respiration, *18*; temperature, *98 1/2*; height, *5* feet *11 1/2* inches; weight, *174* pounds; age, *60* years.

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

Right leg shows a fracture at lower third, slight deformity, no shortening no disability, function of ankle joint unimpaired.

Heart normal, Muscles joints and tendons normal and no evidence of Rheumatism present.

No other disability exists.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a *X*

rating for the disability caused by *fract right leg*, *X* for that caused by *Rheumatism*, and _____ for that caused by _____

James H. Scott, Pres.

Pres.

A. Shanks, Sec'y

Sec'y

Wm. Raper, Treas.

Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.