

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.

Name and rank of claimant.

Claimant's post-office address.

Pension Claim No. 998580

Rank, Band Leader

Company 10th Reg't U.S.A. State, Detroit Mich

[Post-office address of the Board.]

June 4, 1891.

[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: Impaired Vision and Chronic Rheumatism

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

and that he receives a pension of 0 dollars per month.

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

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

Vision has been failing for five years
Rheumatism came on five years ago

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

Upon examination we find the following objective conditions: Pulse rate, 96; respiration, 18; temperature, 98; height, 5 feet 8 1/4 inches; weight, 160 pounds; age, 65 years. Has Commencing Cataract in

both eyes Vision both eyes 8/120

Both Shoulders Stiffened 1/8 Slight pain on pressure over the articulations - In rotating arms above head suffers slightly

The right Elbow is Stiffened 1/4; tender on pressure over the articulations

Can not flex the fore-arm completely

The right Knee Stiffened 1/4; tender through

the joint joints not mentioned normal

No swellings atrophies or Contractions

Heart normal No other disabilities

Spinal-

Rate for EACH cause of disability.

He is, in our opinion, entitled to a 8/18 rating for the disability caused by Impaired Vision, 7/18 for that caused by Rheumatism, and for that caused by

R.C. Clin, Pres. W.W. Webber, Sec'y. Pay Archer, Treas.

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