

A. Declaration for Original Invalid Pension. A.

To be executed before a Court of Record or some officer thereof having custody of its seal.

State of Michigan }
County of Wayne } ss.

On the date hereinafter mentioned, personally appeared before me a Notary
of the County of Wayne, a court of record, within and for the County and State aforesaid

Robt Mosley resident of the City of Detroit
County of Wayne State of Mich who being duly

sworn according to law, declares that he is the identical Robt Mosley
who was enrolled on the U.S.C. 1863 and served in Company Isleader
of the Regiment of U.S.C. and was discharged at Brownsville,
Texas on the 20 day of April 1866; that his personal

description is as follows: Age 66 years; height, 5 feet 8 1/2 inches; complexion,
dark; hair, gray; eyes, gray. That while a member of the organization

aforesaid, in the service and in the line of his duty, at Petersburg
in the State of Virginia, on or about the month of Dec 1864, he

from exposure to which subjected
(Here state name and nature of disease or the location of wound or injury. If disabled by disease, state fully its cause; if by wound or injury, the precise
manner in which received.)
lying on wet ground, contracted
chronic rheumatism, and disease of
eyes

That he was treated in hospitals as follows: None
(Here state the name or number, and the localities of all hospitals in which treated
and the dates of treatment.)

That he has not been employed in the military or naval service otherwise than as stated above
(Here state what other service, if any, was rendered, prior or subsequent to that stated above, and give the dates at which it began and ended.)

That since leaving the service this applicant has resided in Hagerstown Md
until 1884; Detroit Mich ever since
(Here state in detail the different places in which he has resided
from discharge to present date.)

That prior to his entry into the service above named he was a man of good, sound physical health,
being, when enrolled, a laborer. That he is now speaker

disabled from obtaining his subsistence by manual labor by reason of
the injury or disability, above described, received in the service of the United States; and he therefore
makes this declaration for the purpose of being placed on the invalid pension roll of the United States.

He hereby appoints, with full power of substitution, MILO B. STEVENS & CO., of
DETROIT, MICH., their successors or legal representatives, his true and lawful Attorneys
to prosecute his claim. That he has not received a applied for pension Oct. Jan 1890

of 747001. That his Post-office address is Russell House, Detroit

County of Wayne State of Mich
Claimant's Signature Robert Mosley