

ORIGINAL INVALID CLAIM.

Soldier, *Robert Stafford*
P. O., *Cambridge* Rank, *Private*
County, *Worcester* Company, *a*
State, *Maryland* Regiment, *7th S. Colored Troops*
Rates, \$ *2* per month, commencing *Apr 18: 1864* ✓ ✓

Pensioned for *Disease of eyes*

RECOGNIZED ATTORNEY:

Name, *C. J. Webb Esq* Fee \$ ~~10~~ *10*, Agent ~~to pay~~
P. O., *Washington D.C.* Articles filed *Aug 26*, 18*85*
Authy's statement conflict
in several

APPROVALS:

Submitted for *Admission July 2*, 1885, *Jos. E. S. Long*, Examiner.
Disabled by *Disease of left eye*

Approved for *disease of eyes.*

Approved for *Disease of eyes*
1/4

July 13, 1885, *Ketchum*, Legal Reviewer.
Marks

July 16th, 1885, *Ref*, Medical Reviewer.

IMPORTANT DATES:

Enlisted *Sept 73*, 1863. service from _____
Mustered _____, 18 . 18 , to _____, 18 , in
Discharged *Jan 54*, 1866.
Declaration filed *Apr 18*, 1864. Not in service since *Jan 54*, 1866.

BASIS OF CLAIM.

In declaration filed Apr 18: 1864 alleges that in Virginia
in 1864 he incurred blindness caused by exposure from the
effects of which he has never recovered
was treated in Hosps at Porters Mountain Va and Hicks Hosp
Baltimore

rows not made