(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.

Inc. Pension Claim No. 568,338

[State above whether for original, increase, or restoration.]

Name and rank of claimant.

Richard Butler, Rank, Pvt.

Company G, 7 Reg't U.S.C.V.I. | Washington D.C. State,

Claimant's post-office address. Charlotte Hall St Mary's Co. Md. | June 1, 189 X.

[Post-office address of the Board.] [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 in the service, viz:

Cause of disability.

Heart dis; Rheumatism in both shoulders; impaired Eyesight; piles. Kidney affection. Swelling in right wrist and hand; deafness in L ear. Wound of left ankle and neuralgia; and general debility.

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

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

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

[Original, increase, restoration, &c.]

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

Rheumatism in both shoulders, left arm small of back and both legs. piles; Heart dis. Breathing short. Vertigo.

Upon examination we find the following objective conditions: Pulse rate, 64-68; respiration, 18; temperature Normal; height, 5 feet 5 inches; weight, 147 pounds; age, about 65 years.

Here give a full description of the disabilities, in accordance with Book of Instructions.

Rheumatism: Slight pain upon pressure and motion in both shoulders. Lumbar region, left hip & knee and right ankle. Considerable pain upon pressure and motion in left elbow and ankle. Both shoulders and left knee crepitate. Tissues around right ankle slightly thickened. No atrophy, contraction of tendons or restriction of movements. Knee & ankle joints more stiffly, producing considerable limp.

Heart normal.

Eyes: Reads with his Snellen's type at 18 feet; 5th at 16; 6th at 12; 7th at 8; 8th at 6; 9th at 4. Globes and appendages normal in appearance.

No evidence of piles, Kidney affection; weakness in head, vertigo, dyspnoea; wound of left ankle, swelling in right wrist and hand or neuralgia.

No other disability. No evidence of foreign bodies. Claimant well-nourished. Hands lightly calloused. Claimant can only do light manual labor. He is chiefly.

Rate for *EACH* cause of disability.

~~He is, in our opinion, entitled to a~~ rating for the disability caused by , for that caused by , and for that caused by disabled by senility.

C. A. Ball, Pres. Sterling Leffler, Sec'y. C. V. Boarman, Treas.

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

(7567—200,000.) 6—552