

National Tri-Vue Form No. 7.

DECLARATION FOR THE INCREASE OF AN INVALID PENSION.

State of Maryland, County of Cecil, 88-On this 29th day of June, A. D. one thousand nine hundred and 1914 personally appeared before me, A. Notary Public, awithin and for the County and State aforesaid, John W. Owensaged 62 years, a resident of Port DepositCounty of Cecil, State of Maryland, who, being duly

sworn according to law, declares that he is a pensioner of the United States, duly enrolled at the

Pension Agency, at the rate of 12⁰⁰dollars per month, by certificate No. 356127, for disability due toSwelling in left leg below gun shot wound
(State the disability just as it is written in your pension certificate.)incurred in the U. S. Cold. Inf. service of the United States while serving as a G 4
(Give rank, company and regiment.)

or other organization, if in the Army; and rank and vessel, if in the Navy.)

and he believes himself entitled to an increase of pension upon the ground that his present rating is incommensurate with the degree of incapacity resultant from the disabilities named in his Pension certificate, and that there has been a material increase of disability since his last medical examination by

U. S. Examining Surgeons.
(State the reasons for applying for increase and describing the condition of claimant.)

He hereby appoints, with full power of substitution and revocation, R. W. SHOPPELL, of Washington, D. C., his true and lawful Attorney, to prosecute his claim.

That his Postoffice address is No. _____ Street,
(Give City or Village. If you reside in city where streets are named and houses numbered, give name ofPort Deposit, County of Cecil, State
street and number of house. If in the country, give No. of R. F. D. route.)of Maryland.His John W. Owens
(Claimant's signature.)Also personally appeared Herbert M. Gerry, residing at Port Deposit, Md.and Elmer B. Conner, residing at Port Deposit, Md. persons whom I

certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were present

and saw John W. Owens, the claimant, sign his name (or make his mark) to the

foregoing declaration; that they have every reason to believe, from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

Herbert M. Gerry
Elmer B. Conner
(Signatures of witnesses to identity of applicant.)

Two attesting witnesses to signatures by X mark:

(1) _____

(2) _____