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☞ 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. Restoration Pension Claim No. 569,745
[State above whether for original, increase, or restoration.]

Name and rank of claimant. Benj. Finely, Rank, Private

Company G, 39 Reg't U.S.C.Vol.Inf. Baltimore Md. State,
[Post-office address of the Board.]

Claimant's post-office address. 653 Bankard Lane Balto. Md. Sept. 2, 1893.
[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: Rheumatism - disease of heart - wound of right leg 2nd varicocele veins of right leg - rupture 2nd varicocele and disease of breast.

If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of #12.00 dollars per month.

He makes the following statement upon which he bases his claim for Restoration
[Original, increase, restoration, &c.]

Here give the claimant's statement as briefly and as compactly as possible. That disease has so weakened his body as to render him unable to earn a support

Upon examination we find the following objective conditions: Pulse rate, 76; respiration, 18; temperature, 97; height, 5 feet 7 inches; weight, 130 pounds; age, 58 years.

Here give a full description of the disabilities, in accordance with Book of Instructions. Rheumatism: At present we find muscles joints and tendons normal in size and action.

Disease of heart: We find a systolic murmur loudest at apex - heart action forcible but pulse weak, intermittent irregular and unequal - apex beat in 6th intercostal space ½ inch without mammillary line - we diagnose mitral regurgitation and aortic stenosis with slight hypertrophy of left ventricle

The actual and probable origin of every existing disability must be fully set forth. Whenever a disability is shown, or is believed to be due to or aggravated by vicious habits the opinion of the board must be stated. When not due to such habits this fact must be stated. Wound of right leg: Superficial shell wound on middle line of middle 3rd just without the tibia - scar in good state - no loss of power or function - varicose veins of right leg: there is a varicose condition of external saphenous vein involving the middle portion of the calf - there has been no rupture and there is no ulceration.

Rupture: We find no evidence of rupture.

Varicocele: We find none whatever.

Disease of breast: by this claimant means occasional paroxysms of palpitation connected with his heart disease. We think that claimant is wholly unable to earn a support by manual labor.

No other disability found no other alleged

Robt. Kasson, Pres. E. W. Gilliam, Sec'y. L. D. Morris, Treas.

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

(11906—10,000.) 6-809

Sc-4126-398-42