

Declaration for the Increase of an Invalid Pension.

TAKE
NOTICE.

This declaration may be Executed before a Justice of the Peace or a Notary Public, provided a certificate of his official character is on file in the Pension Office. If not so filed, the certificate of the Clerk of the Court must be attached.

State of Delaware, County of New Castle, ss.

ON THIS 7th day of August A. D. one thousand eight hundred and eighty Eight
personally appeared before me, a Notary Public within and for the County and State
aforesaid, Philip Garrison aged Forty-five years, a resident of
Philisburg County of New Castle State of
Delaware, who, being duly sworn according to law, declares that he is a pensioner of the
United States, enrolled at the Washington Pension Agency at the rate of Eight
dollars per month, Certificate No. 256,101, by reason of disability from gun shot
wound in the right thigh (Here name the disability for which
pension was granted.)

incurred in the Military service of the United States, while serving as a Private
(Military or Navy.) (Here state rank, company, and regiment, if in the army; vessel
if in the Navy.) in Company K, 7th Regiment U. S. C.

That he believes himself to be entitled to an increase of pension on account of greatly in-
creased disability from the wound
(Here state the reasons for applying for increase. If on account of increase in the disability for which already pensioned, that should be described. If on
in his right thigh which causes
account of disability for which NOT pensioned, the location of the wound or injury, the name of the disease, and the time, place and circumstances of its
him to be very lame at times and
origin, and the names of hospitals where treated in the service, should be fully stated. The dates of treatment should be given as nearly possible.)
his suffering therefrom increases
every year. He asks to be sent
to Philadelphia for examination

and he hereby appoints, with full power of substitution and revocation,

WM. H. HAYWARD, of Washington, D. C.,

his true and lawful attorney, to prosecute his claim.

His Post Office address is On Eighth and Du Pont Street
Philisburg, New Castle County, Del.

Lewis Porter

James H. Anderson
[Two witnesses who can write sign here.]

Philip Garrison
[Signature of Claimant.]