

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.

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

Pension Claim No. 836413

Name and rank of claimant.

Frank M. Thompson, Rank, Private

Company 4, 7 Reg't 1st State, Ill.

Claimant's post-office address.

Frank M. Thompson, [Post-office address of the Board.] 6, 1891.
[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: in the service
when in

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

and that he receives a pension of 84 dollars per month.

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

He makes the following statement upon which he bases his claim for Original
[Original, increase, restoration, &c.]
I am much disabled in my left arm and shoulder
and have a weak back, can't lift anything.
My back gave out when I was carrying a
body of a dead soldier under my arm.

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

Upon examination we find the following objective conditions: Pulse rate, 84; respiration, 22; temperature, 98; height, 5 feet 10 inches; weight, 145 pounds; age, 45 years.

This man's left shoulder joint is 1 inch less in circumference than his right shoulder. and the arm is also smaller all the way down to the wrist.
The movements of all his extremities are slow and careful, but no other joints present any objective signs of disease.
He complains of movements of back, especially in getting to upright position, and altho' he attributes his disability back to injury - we see no evidence of this - as there is no external nor objective evidence of injury -
Except as above no disability is found.
There is no objective evidence of disease of joints.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a rating for the disability caused by chronic rheumatism for that caused by gunshot, and gunshot for that caused by gunshot

Thos. H. Marshall, Pres. John H. James, Sec'y. E. J. ..., Treas.