☞ 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, etc.

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. Increase [State above whether for original, increase, or restoration.] Pension Claim No. Cf 683990

Name and rank of claimant. Alexander Chaney, Rank, private

Company A, 6 Reg't U.S.C. V Inf — Dover Del State, [Post-office address of the Board.]

Claimant's post-office address. Chestertown Md — July 28th, 1897 [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: Pharyngitis, disease of eyes, mouth & stomach lumbago & Rheumatism

If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of $8.00 dollars per month.

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

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

Last examined by Dover board 6 years ago.
Became worse in head, legs, back & arms 2 years ago
[illegible] Has had 3 attacks upon an average
Each year for six years lasting ten days at a time
Other disabilities about the same
Disqualified for the performance of manual labor by reason of all disabilities 2/3 of his time

Upon examination we find the following objective conditions: Pulse rate, 60 sit 72; stand respiration, 18; temperature, 98.7; height, 5 feet 6 inches; weight, 134½ pounds; age, 66 years.

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

Rheumatism crepitation, stiffness with slightly impaired motion in right shoulder crepitation in both hips and both knees but no swelling enlargement inflammation or impaired motion. Lumbar muscles stiff tender rigid pain in the effort of stooping but no swelling enlargement inflammation or impaired motion. We rate rheumatism at six dollars per month. Pharyngitis with follicular enlargement and post nasal catarrh. Inflammation extends throughout nasal passages inflammation of pharynx but no ulceration of the latter but there is ulceration of nose anterior and posterior chambers but no caries or deformity. We rate Pharyngitis with post nasal catarrh at four dollars per month. "Disease of throat" we have rated under disease of pharynx. Disease of mouth results of scurvy. Gums spongy only six teeth on upper jaw and has ten teeth on lower jaw. We rate disease of mouth at four dollars per month. Disease of Eyes Reads Snellen in either eye 10 M at 20 ft. Pterygium in both eyes. Commences inner canthus of each eye and extends to margin of iris. Commences outer canthus of each eye and extends to margin of iris. Has Arcus Senilis in both eyes. No conjunctivitis blepharitis ectropion entropion pannus opacity of cornea or cataract. We do not rate disease of eyes. Disease of stomach Tender tympanitic with

The actual or 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.

Each disability must be rated separately, the act of Congress of March 2, 1895, requiring "that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to."

Thos. C. Moore, Pres. J. H. Wilson, Sec'y. L. S. Cornwell, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. If sufficient space is not afforded for the necessary statements called for, additional paper should be neatly attached.