

AFFIDAVIT TO ORIGIN OF DISABILITY.

TO BE EXECUTED BY AN OFFICER OR ENLISTED MAN OF THE SOLDIER'S COMPANY AND REGIMENT HAVING PERSONAL KNOWLEDGE OF THE CIRCUMSTANCES UNDER WHICH THE DISABILITY WAS INCURRED ON ACCOUNT OF WHICH PENSION IS CLAIMED.

Before Filling in this Affidavit, the Witness should read carefully the Marginal Instructions, and conform thereto in every particular as far as his knowledge of the facts will allow. Enlisted Men's evidence will not be accepted if an Officer's can be had.

State of Delaware } ss.
County of Hunt

In the matter of the Pension claim of Thomas Carmichael, late
Commissary Surgt of 9th Reg't U.S.C. Vols., personally
came before me, a Notary Public in and for the aforesaid County and State,
Joseph Whaley (Title of officer administering oath.)
Hunt of Surry, County of
Hunt, State of Delaware, who, being duly sworn,
declares in relation to the aforesaid claim that his age is 41 years; that he is the identical person who served
as a private in Co. H, 9th Reg't U.S.C. Vols.,
and knows the above soldier, who was a member of Co. 9th Reg't U.S.C.;
that on or about the 16th day of August, 1864, while in the line of duty, and

State the nature of the wound or injury received, and in what part of the body located; or the name and nature of the disease or disability incurred.

State what caused the disability, and upon what particular duty the soldier was engaged at the time it was incurred. If on special duty, by whose order was he acting.

If the injury was a rupture, be particular to state its location, and whether you saw it at the time of or immediately after its incurrence, or at any time while in the service.

State whether you saw him at the date of or immediately previous to discharge; also when, where, and whether the disability named then existed.

State whether the soldier was in sound bodily health and especially free from the disabilities upon which claim for pension is based, at the time he enlisted and immediately preceding the date of incurring his disabilities.

State your source of information, whether present at time and place and an eye-witness to the facts related. If in command of company when the disability was incurred, so state.

without fault or improper conduct on his part, at or near James River & Richmond, State of Virginia, said soldier incurred injury of ankle of left leg, caused from misstep in deep rut while marching in the dark, and in muddy weather.
The accident occurred at or immediately after the action or engagement at "Flussell's Mills," Virginia.
That the claimant, after the accident, was conveyed in Ambulance or wagon under charge of affiant.

Affiant further declares that he has no interest, direct or indirect, in this claim, and that he makes the above statement from personal knowledge having been present at above date and place, and an eye-witness to above facts.
Affiant's Post-Office address is as follows: Surry, Hunt co, Delaware.

Two persons who write their names MUST sign here as witnesses to affiant's signature, if he signs by mark.

John E. Wright
(Name of one witness.)
J. E. Wright
(Name of other witness.)

Joseph Whaley

PREPARE YOUR STATEMENT ON A SEPARATE SHEET OF PAPER, CORRECT IT CAREFULLY, AND THEN TRANSFER IT TO THIS BLANK.

This Blank is Prepared by GEORGE E. LEMON, of Washington, D. C., and is Exclusively for his Use.