

Declaration for Invalid Pension.

Act of June 27, 1890.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes. If such officer uses a seal, certificate of Clerk of Court is not necessary. If no seal is used, then such certificate must be attached.

State of Ind, County of Dare, ss:

ON THIS 21 day of Nov, A. D. one thousand eight hundred and ninety 92

personally appeared before me, a James J. Reed

within and for the County and State aforesaid, John H. Murphy

aged 52 years, a resident of the City of Dare,

County of Ind State of Ind, who, being

duly sworn according to law, declares that he is the identical John H. Murphy

who was ENROLLED on the Co. 4. 30 USB T. day of Dec, 18 64 (Here state rank, company

and regiment, in Military service, or vessel, if in the Navy.)

in the war of the rebellion, and served at least

ninety days, and was HONORABLY DISCHARGED at Dare, Ind. on the 23

day of Dec, 18 65 That he is Wholly unable to earn a support by

manual labor by reason of Prostration disease of throat & lungs (Here name the diseases or injuries from which disabled.)

impaired hearing. cuts in service & loss

arms & also rheumatism & also for gallbladder

new disease catarrh head & bronchitis

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief permanent. That

he has never applied for pension under application No. 86, 814 That he is a pensioner

under Certificate No. (If a pensioner, the Certificate number only need be given. If not, give the number of the

former application if one was made.)

That he has never been employed in the military or naval service otherwise than as stated above.

That he makes this declaration for the purpose of being placed on the pension-roll of the United States under the provisions

of the Act of June 27, 1890. He hereby appoints

A. H. Reed of Dare Ind. his true and lawful attorney to prosecute his claim, and he directs that the sum of ten dollars be paid to said attorney

That his POST OFFICE ADDRESS is 1336 N. Broadway

County of Dare State of Ind.

J. H. Murphy Signature of Claimant.)

(Two witnesses who can write, sign here.)