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 — Pension Claim No. 842,929
[State above whether for original, increase, or restoration.]

Name and rank of claimant. Perry Mofley, Rank, Musician

Company 18th Reg. Band U.S.C.T. | Chambersburg Pa State,
[Post-office address of the Board.]

Claimant's post-office address. Hagerstown Md | February 10, 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: Chr. Rheumatism — Catarrh, disease of Kidneys & fracture of right leg near ankle

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

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

Here give the claimant's statement as briefly and as compactly as possible. All disabilities incurred since service

Upon examination we find the following objective conditions: Pulse rate, 80; respiration, 21; temperature, nor.; height, 5 feet 8½ inches; weight, 162 pounds; age, 66 5/12 years. Gen appearance good — Conjunctiva clear — Tongue moist & furred — Pharynx highly congested — papillae enlarged, nasal membrane highly congested. Nasal membrane congested. Some muco purulent discharge — No odor — For naso-phar. Catarrh — Six — 18 — Arcus senilis is well marked. Lungs sound — Heart — Normal

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

Abdominal organs — Stomach healthy — Spleen — normal — Liver healthy — Kidneys normal Urinalysis — Urine is normal — For dis of kidney No rating — Rheumatism — Left shoulder joint creaks audibly on motion. There is no limitation of motion of both shoulder joints to horizontal line — Movement of right arm is painful. Marks of treatment on back, stoops, slow, imperfectly and with pain — Left knee joint creaks on motion, motion is limited to R. angle. All muscles are soft & atrophied. All other joints, muscles & tendons are normal except as described — For Rheum — Six — 18 —

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.

"Fracture of R Leg — near ankle" — Four in. above int. Malleolus is a depressed condition of skin due to loss of bone 1 × 1½ & half in deep — Non sensitive, adherent, some cons tissue — On external aspect of leg 4 in. above & immediately opposite — Lower descends a depression — There is an overlapping of fibula; tibia & fibula both enlarged — Meas. R. leg around calf 13½ in left 14 in — at point of fracture R 10½ L 9½ — Ankle at Mal. — R 12½ Left 10 — Foot at instep — R — 10½ L 10 — For fracture of R Leg — Six — 18 — No other disability is found to exist — No evidence of vicious habits

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."

J. M. Gelwix, Pres. J. Montgomery, Sec'y. D. F. Unger, 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.

6—552

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