

3-355.
(Old No. 3-145.)

INVALID PENSION.

Claimant, *James Jones*

P. O., *15 Washington St*
County, *Amherst*
State, *Massachusetts*

Rank, *Private*
Company, *30th Co. 1st Regt.*
Regiment, *30th Co. 1st Regt.*

Rate, \$ _____ per month, commencing _____

Pensioned for _____

RECOGNIZED ATTORNEY.

Name, *E. J. Bennett & Co.*
P. O., _____

APPROVALS.

Fee, \$ *2.00*; Agent to pay. _____
Articles filed _____, 1 _____

Submitted for _____, 1901, *Admrs. Jones*

Approved for _____, *Shenstone and*

resulting disease of heart,
resulting disease of heart,
17/18
No increase

Approved for _____, *Shenstone and*

Submitted for _____, 1901, *Admrs. Jones*

Approved for _____, *Shenstone and*

Submitted for _____, 1901, *Admrs. Jones*

Approved for _____, *Shenstone and*

Submitted for _____, 1901, *Admrs. Jones*

Approved for _____, *Shenstone and*

Submitted for _____, 1901, *Admrs. Jones*

Approved for _____, *Shenstone and*

Submitted for _____, 1901, *Admrs. Jones*

Approved for _____, *Shenstone and*

Submitted for _____, 1901, *Admrs. Jones*