

TO SEE INSTRUCTIONS AT THE BOTTOM

"A" Declaration for Original Invalid Pension "A"

STATE OF Maryland } S. S.
COUNTY OF Dorchester

On this 5th day of October A. D. one thousand eight hundred and Eighty
personally appeared before me Charles Lake Clerk; the same being a Court
of Record of the County and State aforesaid
a resident of Dorchester County of Dorchester State of MD

who being by me duly sworn according to law, on his solemn oath, deposes as follows, to wit:

"I am the identical John Smith who was enrolled on the 23
day of Feb 1863 in Company B of the 7 Reg't of U. S. C. T.
Vol's., commanded by Captain G. B. Sherman and I was honorably discharged at
Indianola, Miss. on the 13 day of Oct 1866 and my age is
now 54 years. While in the service aforesaid, and in the line of my duty I received the following disability, to wit:

I broke the mouth of
1863 at Indianola, Miss. I contracted
rheumatism from which I have
never recovered and am
disabled thereby the greater part
of the time for which I claim
a pension.

I have never been employed in the Military or Naval Service of the United States otherwise than set forth above
Since leaving the Service, I have resided at MD
and my occupation has been laborer before my entry into the Service aforesaid I was of good,
ound physical health, being at enrollment a _____ and I
am now very seriously disabled from obtaining my subsistence by manual labor by reason
of my disabilities above stated, received in the service of the United States, and I make this Declaration for the purpose
of being placed on the Invalid Pension Roll of the United States. I hereby appoint and empower, with full power of
substitution, NATHAN W. FITZGERALD, OF WASHINGTON, D. C. my true and lawful Attorney to prosecute
my claim. My Post Office address is Tobacco Station County of
Dorchester State of MD Coar Hoos, N. Worlford

William N. Smith
(Claimant's Signature.)

Attest:
Two Witnesses.

A. J. Mobray
Wm. A. McAllister