CLAIM FOR a correction of Affidavit

State of Penna, **County of** Phila, **ss:**

ON THIS 11 day of Sept A. D. 1890, personally appeared before me, a Deputy Prot in and for the aforesaid County, duly authorized to administer oaths, Henry Nibsall, aged 56 years, a resident of Phila, in the County of Phila, and State of Penna, whose Post Office address is 1824 Walnut St. Phila Penna, and who, being duly sworn, declares as follows: That in making affidavit in his claim for Invalid Pension Claim No. 635.599 and on which Certificate No 453776 was issued he erroneously stated the degree of his disability through ignorance of the term disability as construed and used in the Pension Dept. he supposing it to apply to the mental as well as the physical functions and had to be so considered when forming an estimate of such disability. Had he known that only Physical conditions were required he would have unhesitatingly made it total instead of one half for he knew that he had never done three consecutive days of manual labor since the time of his discharge Nov 2 1864 and that he had after tried and as often failed. He further declares it as his belief that in consequence of such error on his part that the pension now is much less than is justly due him and asks that the record be so changed and justice done him in the claim now on file for reconsideration &c.

The declarant hereby appoints, with full power of substitution and revocation, W. P. Sickle of Phila Penna his attorney, and authorizes him to present and prosecute this claim, to ~~receive and receipt for the certificates, check, draft or money that may be issued or paid in satisfaction of this claim, and to do any and all acts necessary to effect the purpose of said appointment.~~

1 ....

2 ....

(Two witnesses *who write*, sign here.)

H Nibsall
(Signature of Claimant in full.)