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NEIGHBORS AFFIDAVIT.

State of Maryland County of Calvert SS:

In the matter of the claim of James Wilson late a

Soldier in Company H of the 7th Regiment of Maryland Vols.

Resident Cobeth aged 33 years, a resident of Calvert County

aged _____ years, a resident of _____

whose Post Office address is Hellins

who being duly sworn, declare in relation to aforesaid case as follows:

I have known James Wilson since 1866, saw him as soon as he came home from the Army. he began to suffer very soon afterward with pain in the back which would disable 1/4 of his time, occupation a farmer and oysterman, his suffering has increased with his age and during the winter season is unable to follow oystering more than 1/3 of his time; his mental condition is normal and his habits temperate

I know these facts from these facts from personal acquaintance with him from the number of years stated and have no interest whatever in his claim, and am not related to claimant.

R. T. Cobeth

Two Witnesses when signed by mark: _____

Sworn to and subscribed before me this 18th day of September 1889.

at Prince Frederick in the County of Calvert

State of Maryland I certify that I am disinterested, that the affiant is to me well known, and is respectable, and worthy of all credit as a witness, and that the contents of the above affidavit were made known to him before execution.

John Seawick
Clerk Calvert County

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Please read these instructions before filling up your affidavit.

NEIGHBORS:— Please state when (the year at least) you first became acquainted with claimant; if before his enlistment, was he sound and free from his present disability. In what year you first saw him, after his discharge; what disability then affected him and what his physical condition was. To what extent, 1/4, 1/2, 3/4, did his disability then prevent him doing manual labor, or interfere with his usual occupation; what was his occupation when you first knew him; and what it is now. In what respect has his disability increased with his age since his discharge; if it has been continuous, and what is now his physical and mental condition, and what capacity, 1/4, 1/2, 3/4, has he now for following his usual occupation. If his disease has been aggravated by intemperate or other bad habits, so state.

State your source of information concerning Claimant.

NOTE. This should be sworn to before a Clerk of Court Notary Public, or Justice of the Peace. If before a Justice or Notary, then Clerk of County Court must add his certificate of character hereon and not on a separate slip of paper unless said Justice or Notary already has a certificate on file in the Pension Office showing official capacity. If such be the case, he must say so in his jurat.