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# PROOF OF INCURRENCE OF DISABILITY.

NOTE.—This affidavit must be executed by a Commissioned Officer, or First Sergeant, of claimant's company, if possible; but if not possible to secure such evidence, then one of the soldier's late comrades should testify.

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**State of** Maryland, **County of** Baltimore, **ss:**

Personally appeared before me, a Justice of the Peace in and for the aforesaid County and State, duly authorized to administer oaths, Daniel Sengenich, aged 45 years, a resident Baltimore City, in the County of No 572 Walnut alley, and State of Maryland, who, being duly sworn according to law, states that he is acquainted with Benjamin Frisby, applicant for Invalid Pension, and knows the said Benjamin Frisby to be the identical person of that name who served as a Private in Company G 39th Regiment of Md. Col vols, and who was Discharged at Petersburg Va

(Died or was discharged.)

on or about the ~~1st~~ day of ~~July~~, 1864, by reason of Gun Shot wound in Right leg

(Here insert the reason of the soldier's discharge, if known; if not known, so state.)

That the said Benjamin Frisby, while in the line of his duty, at or near Petersburg, in the State of Virginia, did, on or about the 3rd day of July, 1864, become disabled in the following manner, viz: was wounded by a Shell in the Right leg

(Here state how the wound, injury, or disease, was incurred. Describe the wound, injury or disease, and state the location of the same.)

I know that Frisby after he was wounded was sent to the Hospital, I did not see him afterward until the war ended and I came home, I found him still suffering from the wound and he has ever since been complaining and a Sufferer from the wound and from Rheumatism.

That the facts as above stated are personally known to affiant by reason of my being a member of the Same Company & Regiment

(Here state whether with the command at the time the disability was incurred, and in case of wound or injury, whether an eye witness to the incurrence of the same, and the kind of duty claimant was performing at the time.)

☞(SIGN ON THE REVERSE SIDE.)

PENSION OFFICE U.S. DEC 23 1882

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