

National Tribune Form No. 1.

APPLICATION FOR INVALID PENSION.

Act of June 27, 1890, amended by Act of May 9, 1900, and as construed by the Order of March 13, 1904.

Act of May 11, 1912.

Fill all blank spaces.

STATE OF Maryland
City of Baltimore } ss:

On this fifth day of May, A. D. one thousand nine hundred and thirteen personally appeared before me, a Notary Public within and for the city County and State aforesaid, John W. Smith, who, being duly sworn, according to law, declares that he is 70 years of age, and a resident of Baltimore City County of Maryland, and that he is the identical person who was ENROLLED at Centerville Queen Ann Co. Md. under the name of John W. Smith on the 28th day of December 1863, as a Private in Co. E. 19th Maryland

in the service of the United States, in the war of the rebellion, and served at least ninety days, and was HONORABLY DISCHARGED at Philadelphia, on the 23rd day of April 1864. That he also served by enlistment in the U. S. Navy as landsman and was discharged from U. S. Naval August 21st 1865

That he was not employed in the military or naval service prior to December 28, 1863.

That he has not been employed in the military or naval service since April Aug. 1st, 1865

That he was born on the 15 day of March, in the year 1841, at Centerville Queen Ann Co. Md.

~~and that his personal description at enlistment was as follows: Height _____ feet _____ inches; complexion, _____; hair, _____; eyes, _____. That he is suffering from disability of a permanent character, not the result of his own vicious habits; which incapacitates him for the performance of manual labor in such a degree as to render him _____ [Wholly or partially.]~~

~~unable to earn a support, to wit:~~ not having been able to do any work for the last 14 yrs am suffering catarrh on the bowels and Piles

That he is _____ a pensioner. That he has _____ heretofore applied for pension.

Pension Certificate No 25, 668 draw pension 16.32 per mo.
[If a pensioner, give the certificate number and amount per month. If not, give the number of the former application if one was made, if possible.]

That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the Act of ~~June 27, 1890, as amended by the Act of May 9, 1900.~~ Act of May 11, 1912.

That his POST-OFFICE ADDRESS is 1015 Race St Baltimore City of _____, State of Maryland

That he hereby appoints R. W. SHOPPELL, of Washington, D. C., his true and lawful attorney, to prosecute his claim.

John W. Smith
[Claimant's signature]

WITNESSES:

Attest: (1) James J. Morrison
(2) Walter F. Smith

