

Physician's Affidavit.

STATE OF

Maryland

COUNTY OF

Baltimore

SS:

In claim No.

120453 of

Florence Scott wid. of Co.

B

of

the

20

Regt. of

U.S.C. Inf.

Philip

Vols.,

Personally appeared before the undersigned duly au-

thorized to administer oaths within and for said County, Dr.

aged _____ years, whose P. O. is _____

, County of _____

State of _____

, who being duly sworn, states in relation to said claim as follows to-wit:

Philip Scott was at work for me on Saturday in the Harvost field. was taken sick that night and died the following day. He was subject to sudden spells having had several such to my knowledge. He avoided the sun as much as possible. have heard he had a sunstroke at one time which I think was during the war.

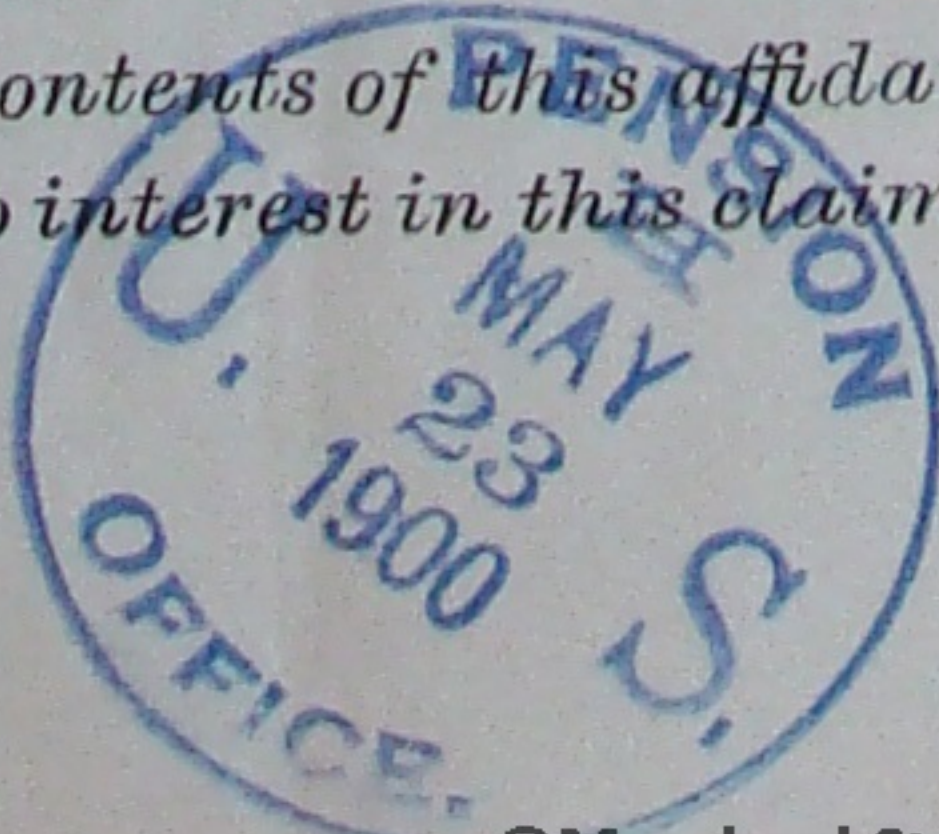
And affiant further states that he has no interest in this claim.

If affiant signs by mark two witnesses sign here.

Sworn to and subscribed before me on the 28 day of April 1900, and I hereby certify that the contents of this affidavit were fully made known to the witnesses before signing and I have no interest in this claim or its prosecution.

A. W. Black

Affiant's Signature.



Frederick B. Kidd
Justice of the Peace

Official Signature.

L.S.