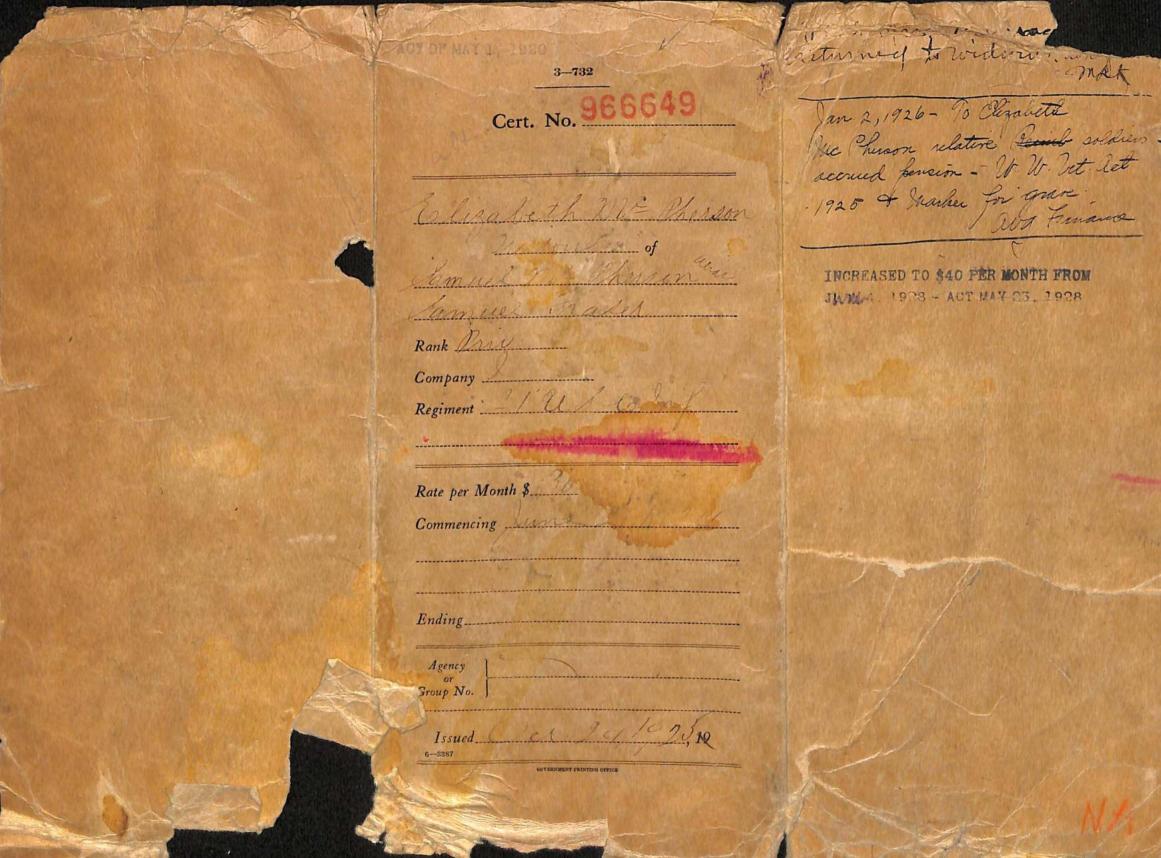
THE NATIONAL ARCHIVES
CERT. NO. 966649.
PENSIONER: Elizabeth M. Pherson
widow OF
VETERAN: Jamusel M. Pherson Win
Samuel Frager,
CAN NO. CO T 6 2 6



[3-216 a.] Ex'r. Act of June 27, 1890. amuel Traser 6. Haltertoro Service: \$ 21. USC & Enlisted: Cliff - , 1864 Discharged: May ______, 1866 Application filed: July 10, 1890. Alleges: See W.C, 294, 566, Samb. Frazen 9,21" v.S.C. Info, 9,103" v.S.C. Def Any other Claim filed: Numerical No. 38267 Attorney: M & Tuerra P. O. Recognized. Contract

why eletwrite salyna thy X 30 1892 Beaufost D.C. Bd, GA. ALA. Miss. LA. TEX. Ky. TENN. Mo. ARK. D C. U.S.C.T.

3-1089. Roll No. Name: alias 825649 U 21 US. C. Vol. Unf Rate and commencement of Penson: NCY - INQUIR FEB 1 5 1912 S. BURÊAU OF PE Date of Certificate: 5 apr 1798 KNOXVILLE, TENN.

Charleston & C. Height J Ft. 7 In. Comerce Age at outletment 20 Hair Black Eyes Black Date of enlistment Quy. 1863 Late of discharge May. 1866 Any prior or sub service hone Honey Hole Oluster Charleston, S. C. & Hilton Head, S. C. of Captain, Liout and Set Capt Stonehouse - / "Level Goodell 2" . Anderson Ord. Sgh John William Blue of wife. Undivorced Olizabeth Martha - 1 chinge dead Jee above Samuel Mc pherson

May 21, 1924
Blank for wid

pension to widow.

B Fini.

,		-
	Cert. No. 825649	1
	Name, Samuel M- Pherson	
	Rank, P.N.; Service, les "1" 21815.	
-	Access Original Roll:	
	Agency or Group No.	
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a	Sept. 23, 1922 date g Cowans may, 1920
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Cenclose and enverige and 65 W. 133"SCpren york n.y apy 48 anti C. W al leharleston S.C. and request ck date 11/4 30 Thesident Charleston 5.C

if still in his Thice = your le adbise disposition Madefiv

advise writer CR # date 114/32 for tavor + add Was Mailed for del. The D. M at Charleston S.C has been requested h encure trai-the cky in his

in an envelope add to ym forward -ORA dateury add of legm at was Marie de for del + the H an A y was mill frequested tideliver to mac

\$5 W. 133 Stapt. 40. Disbursing Will you kindly send my pension Division to about address instead of Charleston Sito, I came here to Bury my daughter, soplease sending mores to you york so I can go back to charleston If you dol it will Oblege 1 6 lizabeth Ma Therson 065 W. 133 It M. Y.c.



DCC-A

Mrs. Elizabeth McPherson, 65 West 1827 Street, Apartment 4-E, New York, N. Y. Cert. #986,649

Dear Madam:

Reference is ends to your latter dated November 33, 1952, requesting your check mailed to you at the above address.

You are advised that check No. 9019212, dated Nov meer 4, 1952, for 140.00, symbol No. 11532, insued in your favor, was mailed to 507 President Street, Charleston, South Carolina. The Postmaster at that place has been requested to forward this check to you at your present address, if on file in his office.

Your December 4, 1952, check was mailed to you at Apartment 4, 65 West 135rd Street, New York, N. Y., and the Postmaster has been requested to deliver it at Apartment 4-E, that address.

When you return to Charleston, South Carolina, it is requested that you furnish this Administration with your proper address, using the enclosed card.

Respectfully,

M. COLLINS, Director of Finance.

1 Enc.

December 1, 1932.

DCG-A

The Postunster, Charleston, South Carolina. Meritanon, Mizabeth Cert. #966,649

Dear Sir:

The records of this administration indicate that the November 4, 1832, check, issued in favor of the above numed pensioner, was addressed to her at 507 President Street, Charleston, South Carolina.

If that check is in your office it is requested that you forward it in the accompanying envelope addressed to her at Apartment 4-E, 65 West 135 Street, New York, N. Y. If this check is not in your office kindly advise the disposition made of it.

Respectfully,

M. COLLINS, Director of Finance.

1 Enc.

HRC:LL





VETERANS ADMINISTRATION

WASHINGTON

Nov. 30, 1932.

IN REPLY REFER TO: DCC-A

YOUR FILE REFERENCE:

Cert. #966,649

COPY

The Postmaster,	
New York, N. Y.	

Dear Sir:

Please deliver a letter recently addressed as follows:

Elizabeth McPherson

65 West 133rd Street, Apt 4

to the addressee at

65 West 133rd Street, Apt 4-E

The postal regulations do not prohibit the delivery of pension mail at any place within the delivery of the post office to which it is addressed. Section 608 P. L. and R. prohibits the forwarding to another post office mail described in paragraph 2 of that section.

Respectfully,

M. COLLINS, Director of Finance.

Class June Widow

Certificate No. 966,649

CHECK INFORMATION REQUEST

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	n	· 4	, Dan	nucl	4		Identifica	ation Cert. #966,649
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3-1660

VETERANS ADMINISTRATION
OFFICE OF THE DISBURSING CLERK
WASHINGTON, D. C.

RETURN IF NOT DELIVERED IN 10 DAYS

OFFICIAL BUSINESS

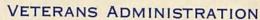
TO THE POSTMASTER:

The Act of August 17th, 1912, prohibits the delivery of this letter to any person if the addressee has died or removed, or being a widow, is believed to have remarried; and postal regulations prohibit its delivery if the pensioner has reenlisted in the military or naval service of the United States, and require its return forthwith in any such case with a statement of the reasons for so doing, and if on account of death, remarriage or reenlistment, the date thereof if known.

IT MUST NOT BE FORWARDED TO ANOTHER POST OFFICE

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, \$300

Mrs. Elizabeth McPherson, 65 West 133rd Street, Apartment 4-E, New York, N. Y.



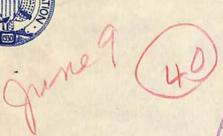
WASHINGTON

December 1, 1932.

YOUR FILE REFERENCE:

IN REPLY REFER TO: DCC-A

McPHERSON, Elizabeth Cert. #966,649



The Postmaster, Charleston, South Carolina.

Dear Sir:

The records of this Administration indicate that the November 4, 1932, check, issued in favor of the above named pensioner, was addressed to her at 307 President Street, Charleston, South Carolina.

If that check is in your office it is requested that you forward it in the accompanying envelope addressed to her at Apartment 4-E, 65 West 133 Street, New York, N. Y. If this check is not in your office kindly advise the disposition made of it.

Respectfully,

mull. M. COLLINS.

Director of Finance.

1 Enc. 0/00



United States Post Office

CHARLESTON, S. C.

NO DELIVERIES CHRISTMAS DAY NOR THE DAY AFTER - SO - SHOP AND MAIL EARLY

ion,

December 6, 1932.

Director of Finance, U.S. Veterans Administration, Washington, D.C.

Dear Sir:

Your letter of December 1st is returned with the information that the check in question was delivered to the addressee.

Very truly yours,

T/m



Postmaster

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NOTAR LIAN ONA GORE - OR - HETTA THE EAST HOR YAIR EASTERN SETTEN SETTENCE.



h	[3-216 a.] Ex'r.
	Cy. No. 825, 649
4	Act of June 27, 1890.
	Samuel Fraser P.O. Walterboro - Collebon Co. S. C. Service: J. 21- 4. S. C. Inj.
	P.O. Walarvio - Wallan Co. S. C.
	Service: 2. 21- 4. S. C. Luy.
	Enlisted: , 18
	Discharged:, 18 Application filed:, 1894.
	Application filed: 7 LV. (, 1894.
	Any other Claim filed: J. U.E-825-649
	Numerical No.
	Attorney: M. V. Ginnly
	P.O. Celly
	RecognizedContract.

Ag Feb. 21-94 MD. VA. W. VA. N. C. S. C. FLA. GA. ALA. Miss. LA. TEX. Ky. TENN. Mo.

ARK.

D. C.

U.S.C.T.

JYALID. (Series.... Rank. Service, C Agency. \ Transf'd 19. for Come Issued ... Mailed Mailed Rate and Period, \$....., from......, 18 Deductions: Disability: Rate and Period, \$...., from..... Deductions: ... Disability:

[3-216.] Ex'r. INVALID. CY, No. 8-25, 649 2/203Acts of July 14, 1862, and March 3, 1873.	Va. Va. W. Va.
Samuel Fraser. P. B. G. Henderson Walterborough Colleton les. S. G. Service: Pr. J. 21" U. S. G. Inft. Enlisted: ,18 . Discharged: ,18 . Application filed: May 17, 1893. Alleges: Dan. Coff - 825 649 Re-enlisted:	N. C. reby 25 198 algorithms. S. C. reford FLA. reford GA. Mar 3/98 algorithm ALA. for full Villing - white. MISS. J Hely 8/98 real for duplant Tex. 9 reby 988. Call for duplant Tex. 9 reby 988. Ky. Call of Men 3/98 having here Tenn. Mo. ARK. D. C. U S. C. T.
P. O. Becognized. Contract.	$\mathcal{N}o$

29 Percy, St.

Charleston, S.C.

May 16 1924

Department of the Interior Bureau of Pension Washington, D.C. Dear Sirs:-

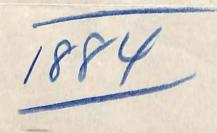
This is to inform you that my husband, Samuel McPherson alias Samuel Frasier, of I, 21 U.S. C. Inf. is dead.he died May 10 1924. His L. C. 825649, Invalid Div.

Please send me an application blank to file my claim for my widow's pension. and also a blank to file my claim for accured pension.

Thanking you in advance for your prompt reply I beg to remain

Very truly yours, Mrs Elizabeth G. Mcpherson, widow

29 Percy St Charleston S.C.





Office

DEPARTMENT OF THE INTERIOR, UNITED STATES PENSION AGENCY,

Knoxville, Tenn., June 8, 1911.

The Commissioner of Pensions,
Washington, D.C.

Sir:-

Replying to Bureau letter of the 5th instant,
Law Division, herewith returned, requesting the postoffice address of Samuel McPherson alias Fraser, Ctf No.825649, Act June
27, 1890, you are informed that the records of the agency show
that the pensioner was paid on May 11, 1911 -- postoffice address given in voucher, 145 Calhoun Street, Charleston, S.C.

Very respectfully,

ASR.

U.S. Pension Agent.



M 229

ORDER MEDICAL EXALINATION ACT OF MAY 1, 1220.

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also Salvuel Frances

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AUG 1 1923

LAW DOISION

DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

WASHINGTON, D. C.

June 5, 1911.

MEP

United States Pension Agent,

Knoxville, Tenn.

Sir:

With the return of this letter you are requested to inform the Bureau as to the last post-office address of Samuel McPherson, alias Fraser, formerly of Co.I, 21st U.S.C. Vol. Inf., a pensioner on your rolls under the act of June 27,1890, by certificate No.825649.

Very respectfully, Laveufwet.

Commissioner.



1.45 Crehun St.

Je,



	3-136
3	MEDICAL DIVISION
X	C No. 8 24 5-649 DEPARTMENT OF THE INTERIOR
0	BUREAU OF PENSIONS
	Co, Reg't
	Washington, D. C., SEP 7 - 1928, 192
73	
8	and Of
B.	Mr. Samuel Mc I herson,
3	Mr. Samuel Mc Pherson, 123/2 Bogard St., Charleston, S.C.
	Charleston: & C
	Sir:
	The order dated Aug. 28, 1923, directing you to
	report for examination to the board of examining surgeons at
	Clarket 10
	Charleston, S.C., is hereby canceled, and you should
	return it at once, with this letter, in the inclosed penalty
	envelope.
	an examination is deemed un-
	necessary in your case.
	Very respectfully,
	J. J. L. J. J. L. J.
	Hackington
	Commissioner.

GOVERNMENT PRINTING OFFICE

13

APPLICANT'S ORDER-SINGLE OR EXPERT, 3-339 C

Ctf. 825649 I, 21 US. C Inf.

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

WAH/AAT/lej/ Aug. 20, 1923.

GANCELLED Mr. Samuel MePher

Mr. Samuel McPherson, 1232 Bogard St., Charleston, S.C.

SIR:

You are hereby directed to report in person for examination by the surgeon named below.

To avoid possible delay or disappointment, it is suggested that you communicate with the surgeon and definitely arrange with him a date for the examination.

The surgeon should fill in the spaces below, after which you will return this notice, using the inclosed

official envelope, which requires no postage.

This order is not valid after three months from date.

Very respectfully,

Hashington Commissioner.

The applicant above named was examined by me	, 19
	Examining Surgeon.
	(P. O. address of examining surgeon.)
Dr. C.A. Speissegger, Jr., 89% Wentworth Street,	

BUREAU OF PENSIONS

Stee 1, 1921
Soldier, Me Therson. Co., Reg't
When Certificate is issued, return papers to Widows Division for action on return of marriage certificate
Mhistorti Ru

72

PROP REPORT—PENSIONER

	THOU REMORE TEXASIONER
	Inv Cert. No. 825649
	Pensioner Samuel McPherson
	1114
	Soldier O
	Service
ed	Class Act May Section "I"
60	LAW DIVISION
600	MAIN DIVISION
61	, 192
7	In the above-described case a declaration filed
0,8	in this Division indicates that said pensioner died
H.	100000
200	(X 6 M/1/1/)
on	210110000
100	Per Chief, Law Division.
GES	AMUEL MCPHERSON
	CHARLESTON S C
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1	825649 ACT MAY
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Lobothe	825649 ACT MAY
334094	825649 ACT MAY
15334997	825649 ACT MAY 123% BOGARD ST FINANCE DIVISION
15334094	825649 ACT MAY 123% BOGARD ST FINANCE DIVISION May 21 , 1924
18ck/5334997	825649 ACT MAY 123% BOGARD ST FINANCE DIVISION
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Check/5334997	825649 ACT MAY 123% BOGARD ST FINANCE DIVISION May 21 , 1924 The name of the above-described pensioner who was last paid at the rate of \$ 22 per month
Check/5334997	### PROPERTY OF THE PROPERTY O
Check/5334094	FINANCE DIVISION May 21, 1924 The name of the above-described pensioner who was last paid at the rate of \$ per month to MAY 4, 19, has this day been dropped from the roll because of death
Chack/5334997	### PROPERTY OF THE PROPERTY O
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Chack/5334997	FINANCE DIVISION May 21, 1924 The name of the above-described pensioner who was last paid at the rate of \$ per month to MAY 4, 19, has this day been dropped from the roll because of death
Check/5334997	FINANCE DIVISION May 21, 1924 The name of the above-described pensioner who was last paid at the rate of \$ per month to MAY 4, 19, has this day been dropped from the roll because of death

3-1661

RETURN IF NOT DELIVERED IN TEN DAYS. OFFICE OF THE DISBURSING CLERK, BUREAU OF PENSIONS, WASHINGTON, D. C.

the delivery of this letter to any person if married; and postal regulations prohibit The Act of August 17, 1912, prohibits the addressee has died or removed, or its delivery if the pensioner has reenlisted in the military or naval service of the United States, and require its return being a widow, is believed to have re-TO THE POSTMASTER: DEPARTMENT OF THE INTERIOR,

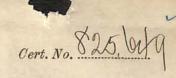






JC. 8256491 Quad Cler 24 Date of death h & mcPherson widow South Carolina The fee of \$_____allowed on issue of to be paid when payment is made on accrued. Resubmitted for consideration. Oct. 16' 1925, Etwell Imp wort Offer Resubmitted adm Mor 28-1924, 5 Approved for Asmission 1 SE report Claimant does not writes. Hon W. Turner





ACT OF MAY 1, 1920

2.4	Supt. Il AC	T OF M	AY 1, 1920	Cert. No. 825 July
	Claimant QMMML W	Pherson	Rank Prince Service So. 3, 21, Ou. 3, le	Jul.
ID DI	STATE REPRESENTATIVE. V	APPR	OVAL Jor Nextee	L. Examiner.
d	Approved for INGREASE, SECTION 2, ACT OF MAY 1, 1920.		Approved for \$72 23, 1922. Not war prior date.	ranted from
	No Medical Examination July 25, 1923, 4. W. C., 192,	Rereviewer.	Rice, Medical Examiner. Sep. 6., 1923,	
	Enlisted	, 18; honor	rably discharged	, 18 ,, 18 days.
	Pensioned at \$	Γ CLAIM, A	CT OF MAY 1, 1920	, as Civil War veteran.

64.825.649 mc Phiram 9. Clear France, Explorered roley etc. wet. 12.8.17.

DEPARTMENT OF THE INTERIOR,

U. S. Pension Agency at

Herewith are transmitted your original pension certificate and voucher. Examine the certificate and if you find any error in name, service, etc., return it TO THIS AGENCY for correction. You should retain it in your possession and be careful not to mislay it as it must be exhibited to the magistrate at the execution of each and every voucher for pension. Should it become lost, mislaid, or destroyed, you should make immediate application to the COMMISSIONER OF PENSIONS for a duplicate.

Read the voucher carefully, giving especial attention to the instructions on the front and back, that you may know what officers are qualified to officiate in the execution of your vouchers and their duties in connection therewith. A voucher from the amount of which a fee is to be deducted and paid to an

attorney can not be accepted if executed before such attorney.

Pensions are due and payable in quarterly installments. With each check in payment of pension you will be furnished a form of voucher for the next quarter's pension, to be executed and presented for ment on or after the date marking the expiration of said quarter. Should you execute it before that time it will be canceled as void.

The number of your pension certificate should be given in all communications to this agency relating to your pension.

ad. Dis. # 325 ashly arme har Charleston & 6 Sept 15 Commissioner of pension Washington & E Dear Sir I Write to inform you of my age i Samuel Fraser 60 I 21 Begment w & 67 broop I am going in my 79 year old By my master Book I Was a Slave Captan thomas phinchney of Charleston Slo Was my master he Say & Was To last you no first what i am asking for i am brying to get Strate With my monthly payment Dear Sir y am a the oldes soldiers a live I take Charleston & morrio & Sland Beaufort Slo Hilton head Sto & Tibew Island Front poliskia & Fort the Battle of honey hills A pocalole yof Jacksonville Mr Commissoner & Write to Let you no the lime and place I inless on hillowhead 1864 under Geneard Little Field I Went to the Front Fort Wagener

bre a chy

3-416 Division

DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

Washington, D. O. fight 19, 1915
No. Claim,
Cert. No. 8 2 5 6 4 9
Claimant, Cherson Traser
Soldier,
Claimant, Cherry Traser Soldier, Co, 2/ Regtt/66 Inf
Respectfully, set of the Chief Bol of Per.
Chief Od of Gev.
for receiven
The Duncan Chief of Cent Division.
Chief of Division.

6-645

· 771 * Churleston S.C. Manh 91915 Deportment of the Interior Burraw of Pansions. I am Writing to inform you that I am To years of age. I was bonn in the year 1845 - I inlisted in 1864 in Company II. WS inf at Wilton head & I Served 2 years and was mustered out in 1866 at Morries Island S.G. my age Entitles yne & an increase of Fansion which I wowld like vray Much to have as I am unable to work and need it very much, your Earliest attention to this matter will qualty Samuel Mª Therson alias Somuel Fearer
my address. Samuel Ma Pherson

H 24 Lucas St Charleston.







DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.	
State of Sola , county of Charleston , 88:	
D. 16. Mari	-11
appeared before me, A day of A. D. one thousand nine bundred and person within and for the county and State afores	The second second
Jamuel Mc Physican who, being duly sworn according to Mw, declares that he is 66	
years of age, and resident of Hohaliston, county of Charliston	
State of Joan ; and that he is the identical person who was enroy en at	
under the name of Assured Irazier	,
on the day of day of the last, as a first in too 9,	
(Here state roll, and company and regiment in the Army, or vessels if in the Navy.)	
in the service of the United States, in the (State name) of war, Civil or Mexican) war, and was HONORABLY DISCHAR	GED
at Charleston & C /on the 25 day of Christ 1864	6
That he also served	
(Here give a complete statement of all other services, if any.)	
That he was not employed in the military or naval service of the United States otherwise than as stated above. That his pers	onal
description at enlistment was as follows: Height, description at enlistment was as follows:	
eyes, Hack; color of hair, Hack; that his occupation was the that	t he
18:16 0 11 1 2 - 1 1 1	
was born , 1846, at Wharliston &	
was born , 1846 , at Wharliston &	
That his several places of residence since leaving the service have been as follows:	
That his several places of residence since leaving the service have been as follows:	
	2
That his several places of residence since leaving the service have been as follows: (State date of each change, as nearly as possess.)	ginal
That his several places of residence tince leaving the service have been as follows: (State date of each change, as hearly as possible.) That he is a pensioner under certificate No. 25 049. That he has 4 applied for pension under original.	
That his several places of residence since leaving the service have been as follows: (State date of each change, as nearly as possible.) That he is a pensioner under certificate No. 25 949. That he has pension under original to the pension for the purpose of being placed on the pension roll of the United States under the provision	
That his serveral places of residence since leaving the service have been as follows: (State date of each change, as hearly as possible.) That he is a pensioner under certificate No. 2. 149. That he has 4 applied for pension under original to the makes this declaration for the purpose of being placed on the pension roll of the United States under the provision the act of May 11, 1912. That his post-once address is 19 hand 14 applied for pension under original to the declaration for the purpose of being placed on the pension roll of the United States under the provision the act of May 11, 1912. That his post-once address is 19 hand 14 applied for pension under original to the pension roll of the United States under the provision the act of May 11, 1912. That his post-once address is 19 hand 14 applied for pension under original to the pension roll of the United States under the provision the act of May 11, 1912. That his post-once address is 19 hand 14 applied for pension under original to the pension roll of the United States under the provision the act of May 11, 1912.	
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A PENSIONER, DO NOT FAIL TO GIVE CERTIFICATE NUMBER.

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This form may be used for original pension or increase of pension. Declaration and testimony in support of same to be executed before some officer of a court of record having custody of the seal, a notary public, justice of the peace, or other other authorized to administer oaths for general purposes. If such officer is not required by law to have and use a seal, his official character, signature, and term of office must be certified by the proper State, county, or city officer under his official seal, unless such certificate has been filed in the Bureau of Pensions for general reference.	Service	ACT OF MAY 11, 1912. CEAIM FOR PENSION. Certificate No. 825649
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ACT APPROVED MAY II, 1912.

That any person who served ninety days or more in the military or naval service of the United States during the late Civil War, who has been honorably discharged therefrom, and who has reached the age of sixty-two years or over, shall, upon making proof of such facts, according to such rules and regulations as the Secretary of the Interior may provide, be placed upon the pension roll and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years and served ninety days, thirteen dollars per month; six months, thirteen dollars and fifty cents per month; one year, fourteen dollars per month; one and a half years, fourteen dollars and fifty cents per month; two years, fifteen dollars per month; two and a half years, fifteen dollars and fifty cents per month; three years or over, sixteen dollars per month. In case such person has reached the age of sixty-six years and served ninety days, fifteen dollars per month; six months, fifteen dollars and fifty cents per month; one year, sixteen dollars per month; one and a half years, sixteen dollars and fifty cents per month; two years, seventeen dollars per month; two and a half years, eighteen dollars per month; three years or over, nineteen dollars per month. In case such person has reached the age of seventy years and served ninety days, eighteen dollars per month; six months, nineteen dollars per month; one year, twenty dollars per month; one and a half years, twenty-one dollars and fifty cents per month; two years, twenty-three dollars per month; two and a half years, twenty-four dollars per month; three years or over, twenty-five dollars per month. In case such person has reached the age of seventy-five years and served ninety days, twenty-one dollars per month; six months, twenty-two dollars and fifty cents per month; one year, twenty-four dollars per month; one and a half years, twenty-seven dollars per month; two years or over, thirty dollars per month. That any person who served in the military or naval service of the United States during the Civil War and received an honorable discharge, and who was wounded in battle or in line of duty and is now unfit for manual labor by reason thereof, or who from disease or other causes incurred in line of duty resulting in his disability is now unable to perform manual labor, shall be paid the maximum pension under this Act, to wit, thirty dollars per month, without regard to length of service or age.

That any person who has served sixty days or more in the military or naval service of the United States in the War with Mexico and has been honorably discharged therefrom, shall, upon making like proof of such service, be entitled to receive a pension of thirty dollars per month.

All of the aforesaid pensions shall commence from the date of filing of the applications in the Bureau of Pensions after the passage and approval of this Act: Provided, That pensioners who are sixty-two years of age or over, and who are now receiving pensions under existing laws, or whose claims are pending in the Bureau of Pensions, may, by application to the Commissioner of Pensions, in such form as he may prescribe, receive the benefits of this Act; and nothing herein contained shall prevent any pensioner or person entitled to a pension from prosecuting his claim and receiving a pension under any other general or special Act: Provided, That no person shall receive a pension under any other law at the same time or for the same period that he is receiving a pension under the provisions of this Act: Provided further, That no person who is now receiving or shall hereafter receive a greater pension, under any other general or special law, than he would be entitled to receive under the provisions herein shall be pensionable under this Act.

Sec. 2. That rank in the service shall not be considered in applications filed hereunder.

Sec. 3. That no pension attorney, claim agent, or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under this Act, except in applications for original pension by persons who have not heretofore received a pension.

Sec. 4. That the benefits of this Act shall include any person who served during the late Civil War, or in the War with Mexico, and who is now or may hereafter become entitled to pension under the Acts of June twenty-seventh, eighteen hundred and ninety, February fifteenth, eighteen hundred and ninety-five, and the joint resolutions of July first, nineteen hundred and two, and June twenty-eighth, nineteen hundred and six, or the Acts of January twenty-ninth, eighteen hundred and eighty-seven, March third, eighteen hundred and ninety-one, and February seventeenth, eighteen hundred and ninety-seven.

Sec. 5. That it shall be the duty of the Commissioner of Pensions, as each application for pension under this Act is adjudicated, to cause to be kept a record showing the name and length of service of each claimant, the monthly rate of payment granted to or received by him, and the county and State of his residence; and shall at the end of the fiscal year nineteen hundred and fourteen tabulate the record so obtained by States and counties, and shall furnish certified copies thereof upon demand and the payment of such fee therefor as is provided by law for certified copies of records in the executive departments.

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De 825H9 Hereon ales Semuel Graver De 2 2. N. 1824.

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STOP PAYMENT NOTICE

File No.		
	WC-966 649	
	Civil War	
	MBAB-B	

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		de Service de Compres
	Cu	rd, whether Term Conserved, or Adjoratic Insurance, Pension, Compensation, or Adjusted Compensation)
1.	Full name of payee	Elizabeth McPherson
2.	Effective date of action	
3.	Reason for action	Douth of payer January 6, 1936 (Abstract required)
4.	Name of veteran	Sonnol Helborson, alias Samuel Praser
Submit	ited by	Approved by Z & Chandles

U.S. GOVERNMENT PRINTING OFFICE 15-648

Adjudicator

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VETERANS ADMINISTRATION Form 3230 Rev. Jan., 1932

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February 6, 1936

MBAB-G

Mrs. Louise Gardner 307 President Street Charleston, South Carolina

McPHERSON, Semuel WG-966,649

Dear Madem:

In response to your communication of January 14, 1936, advising of the death of your mother, Mrs. Elizabeth McPherson, you are requested to forward to this office a verified copy of the public record, showing the exact date of her death. Such copy should bear the signature and seal of the officer having charge of such records.

The question of accrued pension due your mother at the date of her death will be made the subject of a separate communication.

All future communications relative to this case should bear the name of the veteran and refer to the number WC-966,649.

Respectfully

E. L. BAILEY Director Widows and Dependents Claims Service

BUREAU OF PENSIONS

Cetober 20, 19 m	
Mid (No. 1220100	
Soldier, Mr Pherson	
Co, Reg't	
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SEC. I

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

OFFICE OF THE DISBURSING CLERK

WASHINGTON

May 31, 1924.

S. BUREAU OF

The Postmaster,

Charleston, South Carolina.

Dear Sir:

A letter containing a pension check addressed to Samuel McPherson, 123 Bogard St.

Certificate Number 825649 , was mailed in time to reach your office on or about June 4, 1924.

Since the mailing of that check I have been informed that the pensioner is dead.

Please return that letter and this one to me at once.

Respectfully,

Disbursing Clerk.

(D-B-1)





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TO SPECIAL EXAMINER'S REPORT.

Claim of	Samuel Frasu		bur	No. 826649
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Department of the Interior,

OFFICE OF SPECIAL EXAMINER U. S. BUREAU OF PENSIONS
At Wathy fore, S.b.
At Wathy free, S.b. ENOVEMBER 3, 1893.
NOTICE OF SPECIAL EXAMINATION.
Case of Samuel Graser Claimant:
You are hereby notified that, by order of the Commissioner of Pensions, the undersigned will, on the day of A. D. 1893, and continuing thereafter as long as may be
necessary, at Walter boy o , County of Collision and State
of J. La
claim, at which time and place all material witnesses will be heard.
And you are further notified that you have the privilege of being present, in person or by attorney, during said
special examination, and of cross-examining said witnesses and of introducing any material evidence on your own
behalf, if you so desire.
S.F. Hamplon Special Examiner.
I acknowledge service of copy of above notice this 3rd day of 6/04, 1893,
and desire the examination to begin on the at once

On but to 825 649 Samue France Pose office Walterboro, Colliston bo. S.C. Brown fort S.b. Non. Wan. Lochran, Commissioner of Pensions, Sir: Sir: I how the honor to return the papers in the claim for pension about cital and & sub mit this my It was discound that a mon al-Walter bero St. was pursioner for Survia in 60 @ 21 MS. 6. 2 mude the norm of Samuel Fragin and a woman, Ulya The again at Blufflin to as the willow of Said solding Both fusion were Que fundul funding special Hamination to deter mich identif and corner. Sworce in each con. The claimant are given the usual notice and with former during The special Hamination, It had opportunity to talk to one only of the witnesses to identif byon I took thin depositions The witness regard 5 was Dich Police whom the claimant forme

3

about the sleame Alpha while we wem en voute & Bluggtin Al. He was not for mitted to make himself known to The other witnesses until the question as to his selenting service had been asked and answered. In my opinion it is clearly shown by the astimony that he is the Man who seeded under the name of Samue Fragin or From in Abo 60 21 M. S. b. St of fruther agrees That The solding correct morn is Samue Mc Phuson and I Think it ought so to appear in his pension cutifficati The reputation of The claimant is not good and hi is in my opinin municiable Estelhon gh, he is, I am in firmed, a sortly preacher it is shown by the listimony them he is a big time and an ex-Con vict Ah larceny, But, while he has some little education he is in my opin un litter better chan holf withe or at line not al loguther bright." I had the claimant with Who for surval days and did not think lim dis a bled in a dogre enti-

Thing him to the enapimum valing under act of June 27 1890. So I took him before the Brangert Board. He wo stripped dud throughly efarainul. Su This report Page 3/24hibi The ordereds of the Wor Deportmentshow that soldie was born in Churles ances shows that he was born on Uniday island St. aug was a slave of Mis. Biroking of Charleston S.b. let doubt the blace of his punis residence was given as the place of Soldies brith this fir ful 5 in. in his show. Record shows for It 4 in o reammed re-isom to know daimants name and to adjust his rating, if it be determined there he is disabled in a pur sin able dag su under act of June 27, 1890. In also report - howarity in Claim wil. but. No. 294566 bling a Fragin. The claimant signed as withen & the morks of Joseph Prinking and Anton Builty. Then was no one else in this mightorhood who could They lived in the words. When I work their deposiline night - was fore approaching and I had turler miles to driver over

a room a portion of which was impass.

able after dorkness are in.

Very Respectfully

S.F. Hampton Frail Hamin

DEPOSITION

Case of Samuel From CT, No. 825649
On this 3 rd day of Groven by, 1893, at
Walter boxo , Country of bolleton
State of S. b., before me, S. F. Hamplan, a.
Special Examiner of the Pension Office, personally appeared
Somme From , who, being by me first duly sworn to answer
truly all interrogatories propounded to hinduring this Special Examination of aforesaid
pension claim, deposes and says: 6 am about 55 geors old,
Sto which is my fore opping.
I am the Somme From who and was
procional for sure for envice during
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I enlisted at Hellen Heart S. 6 batheren 1863
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and 1864 along in the Apring & Think is was
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Hearl A.B. and stail Then till I won aboutagrown
man 69 Irlongul to Mrs. Harrice Vinderly
who always lived in behave in 5.3. Bhis
does I was more in Charlesten before my
for the overseen Mr. Thechet on Prinching they
My Jathu's name was Antony Mc Pherson, He
belonged to Mis Vin hung Hong before I were
into the army of work the sound Sum me
Frasiv, & just- picked out that name.
I am sometimes called MoPhuson now and
sometim Fram. Josen Ham mand, James
Miller Augt, bo B/ Horas Vinchung island
Morris Froyown 60 6 Brangott St. Elijabeth
Jones, Mm Fields Morris Densmore or Day seg-
from and his wife Morther Krows mi letter
the wor, also an. Williams Jackson bir St.
Page Deposition & Knew you before the wor
Page Deposition 6 (11987-50,000.) 6-288

Thou who know me in the survice are Ofntong Bailey bo H Jackson bus st. Oyd lings John Williams (be 91 Savan not ga Shor pol Millin, Ev 9 Rose island Brought to Jassi Work (Co &) Swannah Fa Singt Thop Hickin-Corpe (bo I) Jackson view Gell James Carawy Corpe (bo I) Mackson ville Fila & Burnett, Cape A. V. Stone hour diene- Tooldell Jus- Trains Major of Reg - Willingthy adji- Cho, A Dow. Affer I wish mustical fin bet Hit an Had At The regiment was sent on a stoum to Jacksonfile Fla. I wo with it in the buttle of Exhance the The wer by at Jack smorter To about a gen, They we born buch in be steeme to Hillen Head but die not land, were ordured to Other sis island I was na a fight on James island from Ellini island for entired blunds in when it was Some Iwo a the months after the we were across to OUT Pleasant: From Mr Plusantwe write book to Hillin Haul. We went the in want melon aim any stail to till Christ. mo During That him Dent graves was on Sun. Fift his stay and I was LI Grains orderly Fran Hillin Have ar went buch to Mer in island and after doing duy then and garrian duy in Chartant de I wo mustical out with my empan on Mor vis islame in My a from 1866 Offen muster out I shail to the menter in Samuel fruser Deponent.

Sworn to and subscribed before me this 3 day of Nov., 1893, and I certify that the contents were fully made known to deponent before signing.

S. F. Hampan Special Examiner.

6-28

DEPOSITION

Case of Samuel Fram Of No. 825 649 On this 3rd day of Norgan land, 1893, at Welter boro Country of Shelder State of S. 6. before me, S. 7. Farm flow Special Examiner of the Pension Office, personally appeared Samuel Fram, who, being by me first duly sworn to answer truly all interrogatories propounded to hinduring this Special Examination of aforesaid pension claim, deposes and says: & har les ton & & Them I want buch to Vindery island and lived and yours with my futher: & lived on Vincking and oping is lands till 1875 or 1876, I worked Some at l'ort Royal Ab. From l'est Angal S.b. I was sent to pris in at bother his not guilty and Goge: Eles Vinland of Charleslon Aft. got Eur Hamplin to pordoth hu after I had bean in prison about 13 monts. I had never bran morniel up wither line My wife is Elizabeth, I morrier hum \$1880. 69 has a wom an on spring island name Daisy, now wife of Hom Mathod, My father rentil bland on the main 1867 and for sweral gens after I was Know when the Hafel place is I hove have of it. I had no win or woman in Buyonbernuty but Dairy Mitchell. @ Think I was diving in 1875 / Cort la an Apring is Carul Ab new Hillen Head and trouved Hillin Had and Offergun d.b. The some proper I have named them me agrithe was they know me whom I tied with Dairy Mitchell Often they last of 1875 of wind up to provit Royal to work I was thinking-Page & Deposition

Page ... ing with Daing Offit chies but the die nor got with me to but day al, She still ashome an oping island. I had noother woman down tohur but Dainy O num Knew a wom an namuel Eliza Mileum. of pour lent on bliga, the was the with of David Hay about at Blufflin. I think David is fliving gui Edvis This I ever know falpreach named Peter White & was not Married & Dais Mit shell , we just live to getter I do not moto Eliga Hagen Aron Mango Phili; Tallent Nepten Orden or Bell Money. EAPLE I got out of prison I when to & horles lind & b, and werker at digging Shophate along the coon for solhe line Ihim I count to Wal antons so about 15 years ago and hove lived her all The birms since & som she only Samue From in 60 69. 2 1 ce Regt. & 6ht sum to me That I hard of another dam From in pom our of the companie, lent-9 con not he positive about it. I would go with you to Beaufort and Mouther to see the men in my our pany but I have no mony I have trife to get mony to go but conf not get it. I have hund my state much read and is is correctly put down. I have status The facts the Olive - I con. Samuel fraser Sworn to and subscribed before me this 3rd day of OtoN.

1893, and I certify that the contents were fully made known to deponent before signing.

S. F. Hamplen Special Examiner.

DEPOSITION

Case of Semuel Fram Cent No. 825 649

On this 23 day of Nov., 1893, at

Of luffen Country of Bren for a

State of S. J. before me, S. F. Hampton, a Special Examiner of the Pension Office, personally appeared Ahr pu Mille , who, being by me first duly sworn to answer truly all interrogatories propounded to hinduring this Special Examination of aforesaid pension claim, deposes and says: 1 am 63 gurs ole ; a frm. O lie on Spriff island and Bost officials about. 0 wood a privare in 60 0 21 H1 67 Julistal in 1864 and was mushound out in the first- port of 1866. Muon, the man now from-He is Saruel Gran and the coos a cerprol of 6,6 2/2 165 but was prance to a polivaci. In was vaised an fricking island for He be longed to the Prinching. of Charlesten S.G. a know the claiment Samuel From from boy hood and an his bruk more in the army. His father was Authory Mc/hu an, but Isam del not laff his fathis now, He sufished and sword withen the name of Jamnd Grown. He lived around then on o or lo years alle the wor fand usually with by the name of sum MIhham, I son surer forting That he is the some mon who entitled and sword in Es. 92/21 169 much The name of Samuel Grown. An won and rich to a young woman Many Dain Mitchell after the chime out of the army & was prime and saw then Americal They superated Page / U Deposition / (11987-50,000.) 6-288

after having lived to getter for Rome Men 3 love fand Dain Gors morried to low Makes a antil now lives in Beautor st. with M. Lovel. Sagn From or Mc Phuson und Daisy Milehell wan mornid by the Withrull I think They were mound in the shouth in Warongon - S. 6 Sto I mion dain and Mc park were mornel in Bhangon- Som Hrown by Sum Mc Chen am and Dais your mor-Collins Mitchell, Toby Middle to Nancy Bring and Som Robinson Hoscow Robinson all spring is found viil, frame- and son them mor-I have never much an appiaunt in 6) how no interest in This of aire for I have under word the questions and my ansures to them are serverly recorded in this deposition as mad & m. Desonni-Deponent.

Sworn to and subscribed before me this 13 day of 6/100. 1893, and I certify that the contents were fully made known to deponent before signing.

S. F. Hampfor Special Examiner.

DEPOSITION

Case of Samuel Grase of No.825 649 On this, 21 day of Dov., 1893, at

New Bern for Gounty of Brownford.

State of St., before me, S. F. Harryton, a Special Examiner of the Pension Office, personally appeared Allen Mach , who, being by me first duly sworn to answer truly all interrogatories propounded to hinduring this Special Examination of aforesaid pension claim, deposes and says of an about 4) gens the. a foram. regulara I miles worker Dunger- St. which is my port office. I know the man nort primet He woo a corporal of my lempany low wys reduced & the a private He sword under the name of Samuel your and avo a minder of Colled Sam Me Phusm. I did norknow him frim & my whis hime-I whitel Aft- 1864 fand an ours-That - the man grow prime - Two a mingen of 60 & 12/21865 and That he served willer the name of Samuel Firom. He are norbe comp follown but wo infinite and did righter duty, of die notin the registrent: I do not remen. les that I have seen This man Samuel 4 voon but on a lyre Day sina ar am mustical ourat there is is coul and that was not long after are were mus-Somuen namet, Eliza Grom or Welen. Page /2 Deposition & (11987—50,000.) 6—288

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6-	-285						' Speci	at Examiner.

DEPOSITION

Case of Samuel Gram ent No825649 On this 22 day of Mor. , 1893, at State of S.b. defore me, & F Habrillan, a truly all interrogatories propounded to hinduring this Special Examination of aforesaid pension claim, deposes and says: I am about - 51 3 ears old, a Javam; residence At Filma island and post-office thogoner Bran for to fe I know the man from print He is Dan Gram I got acquointil with him in the army I am a private in los of 21 U.S. Ef I and ser have 11 months. I was born and roised on et Helen island St. I can surer that the mon who is now with you and claims & to Sam Fraser of los & 21 US 67 in the Same much who enough in The Es. and digt under the name of Som, Grown. 18 did not know him by any name but Same From I muster of There a mon in anyl Som Mc The sur. Then are only one Som From in 60 9 21 W 85, Thut was only on Sam France in the Miginenel as I for as & know. Jon Duckenove of by lives and the Scott Mace At Hihave is love trichard Stewart of by I lives on the School Plan or Pane Thompin plus st. Helma or Ladin island. The Tiller Savan with, go and from North I have som the claimant - Sam From a for times about - Beaugni some prostioni How I do not know when he has lived Page / 4 Deposition 2 (11987-50,000.) 6-288

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189	Sworn to and subscribed before me this 2 Z day of Ass., 3, and I certify that the contents were fully made known to deponent before signing.
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	S.F. Hamp an Special Examiner.

Case of Samuel Gran cur-No. 825649
On this 23 day of Nov , 1893, at
State of J.6. , before me, & F. Houpling, a Special Examiner of the Pension Office, personally appeared
6 Hovam Purchase, who, being by me first duly sworn to answer
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Page/6 Deposition & Special Harming (11987-50,000.) 6-288

Case of Samue Frasu et No. 825649 On this 21 day of 6/0V. , 1893, at State of S. 6. Country of Brought State of State of the Pension Office, personally appeared Jains Frull , who, being by me first duly sworn to answer huly all interrogatories propounded to hinduring this Special Examination of aforesaid pension claim, deposes and says. I am 45 m my grown old a form. residence an Organy That It. O was born and rained on Spring island to and was a munther D, know the mon mon present. He was a mun long to, of and severely much that name of Samuel France got asynamical with him at Hilfen Hrobe after entertum - and know that he is the very man who severel in Es. Januar From & name of him burn how Ohim by any name best From. 3/his an Vindhuy is land land in That mighow hood then he come up & Brothers - and I hard got into prison. Samue France Iver nonmorried while he lived on the island He fisher only From & Knew in the my munt. The is the only man & Troom I dot not Know Ely & Fram Page / Deposition Fr

Elam mot gelacul to Samuel Horan O have al way runder shoul That form all From Torlonged W The Bigokungs and was praise I have neper made in affidorist in this con, Of hour we interpt in This claim 69 hom understown the grantiers and my answers to them I an auricle frecorded in this depositions Mora of and subscribed before me This 21 day of or, 1893 and 60 entig the contribe some July much Kuroun Aufonn to before signif Theine Hanning Deponent. Special Examiner.

Case of Samuel From Mo. 825 649 - On this 2/ day of Nov. , 1893 , at Bran fort - Country of Degraport State of Its. before me, At Hampton, a Special Examiner of the Pension Office, personally appeared Movais Cricking, who, being by me first duby sworn to answer pension claim, deposes and says: Of do met Musica Management age; a former! risiden good Busi for five as along Vinchung Visland and post oppin as abour He is desser For mon mon france He is Daniel Franky He and Obstronged to Mrs Prinching was lived in Charleston aich we come yours finching island 8.6. Samuel Francis faster wol Anthur Mother on down a mundery of Sam From woo in my riginme and I think he was ife 1806. by know for certain That he was a soldin I'm som company of our veginant and their he seponde unthe othe name of Samue From. Then was no orting samuel from in Ide four runn la that I were Know but one Samuel Frage. I mun know 8 am Fixon 1 a go The name of Mc/hu em. HE lived on the islands for several years often the wor If he lows more Viel then I do not throw it you or fire good any he come down to Page Deposition

Au his father and brongst his wife with thin there he for arrive up The county. of do my know any woman I named bling trasufor Of Hypor other the mon now prised - who claims of to Dannel Tyom is Samuel Gram and That he award in our regenent much Jan mer relatue to Samuel I have no interest, in this I have under stool the youshon, and my are even & them on ev-Janes Fiace Marinthing forcodul in 1 89. Hamplin Deponent.

Sworn to and subscribed before me this 21 day of Nov., 1893, and I certify that the contents were fully made known to deponent before signing.

S. F. Henr 12m

Special Examiner.

DETOSITION
Case of Samue Grow at No. 825849
On this 3 day of 6/100, 1893, at
Man Jackson Olles, Country of Joseph
State off Is. before me, S, + Hampline, a
Special Examiner of the Pension Office, personally appeared
truly all interrogatories propounded to hinduring this Special Examination of aforesaid
pension claim, deposes and says: I am 53 gens old,
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	S.F. Hamplin
	Special Examiner.

Case of Samuel From ey, No. 8 2 5 64 9 On this 3 od day of November, 1893, at Walty Golleton State of S.G., before me, S, 4 Hampton, a Special Examiner of the Pension Office, personally appeared Trank Vardien , who, being by me first duly sworn to answer truly all interrogatories propounded to hinduring this Special Examination of aforesaid pension claim, deposes and says: Of am about 52 gears old; O live 12 miles South of Walter leve A.b. which is my post office, I am a former. The is famine France of got acquainte got acquaintel with him at Hillin Hrad 8.6. 6 Revord during a part of the wor in bo. b, 21 U.S. I Bol, Ing 6 think & inlisted in 1863 and was mustined one on Morris is bound with the regumentin 186 5 W 1866. & enlisted att Hillin Hand when I had gone from Walter bow a year of two bryken I entished to know home. we From lat Hille Arad Sty before we intested, He and I wan hind to work in the quarter masters deport mucher for prime is Samuel From and Thur he wor a mun lan of bu & 21 26 6,9 A wo with in last the batter of Oluste Florida, at Jacksonville, Jame Felond Morres istfind Wail not thoor any fight my on farm island blainent is the only Franch & Keen. Il dail not Know Samue 4. value before O went to Hillen Hand. Ofthe Charinanemorre to Walter born I have a thinculled Somuel McChar en I now Brunchin by that name till again the wor Page 2 3 Deposition 9 (11987-50,000.) 6-288

Page V of am not mistaken of know the Man now prisul- ouvel in to 22/ USb I will the name of Samue Fra-Ar & do not know why the is sometimes Two in the arm the goes and on month and I saw this men I Somue troom all along during the him dring duty as a soldie in the Ch 21 Rey - 1 Hz this marriel Quia he com a Malter long, This augus Mound Lydin or Lizabeth O hour no interest in the claim El have under about the question and my auswars to them are correctly recorded Deponent.

Sworn to and subscribed before me this 3rd day of Nov., 1893, and I certify that the contents were fully made known to deponent before signing.

S. J. Hangeton Special Examiner.

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Case of Samuel Gram eg No. 8 25 649 On this 3 rd day of of of. , 1893, at Maltin leves, Country of Dollahin State of S.6. before me, St Planplin , a Special Examiner of the Pension Office, personally appeared I Hande am , who, being by me first duly sworn to answer truly all interrogatories propounded to hinduring this Special Examination of aforesaid pension claim, deposes and says: Of am 5th gens old; alterny at Daw, residen a and port office as a lever. I won lower and ruise he This place of hour known the clarinant Samuel Fire on about 15 grs. He maraine Elizabeth Irm la whose per mit and grand parents wan slaves of my Garfily, and in that way my acquaintam with him commanced the flow been live ming at or new Walter boro was aine Of Know him, and I have frequenty inflogul him to do odd joth. His Variage and her porents and one, respectatore coloral people. Of few trus since he had been meting an fapplication for fusion and not getting along ving well with his polyers the trought his attorny Eff & Timen at Has hing lin D. b. Claimant wis applying under the reported that he sould not find thatehame an the rolls of his tompay and regiment. El resported thou- their The plain and and when white whi was writ by any other name As he hestable for from time wolked around in my offin and suit Page 27 Deposition (11987—50,000.) 6—288

'My Dir! In Sin Samuel Frasu" Excommunication that fact to other Living and he afterwards proces in the pen sint for him house the mann as Samuell Fram of astrowards librare That he was called both Mc Phu em This own mying some onle him one your some the other any one Frank (Mr din late of So & 21 Right words told me that he know this man well during the wor and the he (Figoson) had several sin the 60 0 of the Down regiment with him / Verdut and That he more know the claimant by De show sine called him Firan. Of am fully satisfied that the man now present aught about required & is the men the ouprements himself & to and That he enlisted and sown as he alleges he dies I am not interest in this oldin now Consumul in its prosecution, C. G. Henderson Deforme-Deponent. Sworn to and subscribed before me this 3 day of Nov. 189 & , and I certify that the contents were fully made known to deponent before signing.

St Hom for Special Examiner.

6-288

CLAIMANT'S STATEMENT.

DEPOSITION

Case of Samuel From But, No8 25 649 3rd day of Orov. Tur bor o County of Colleton before me, & f. Hamp lin , a Special Examiner of the Pension Office, personally appeared Same the applicant in the aforesaid pension claim, who says: Q. If it should become necessary to further examine your claim, by taking the testimony of witnesses elsewhere, do you desire to be present in person or be represented by an attorney, or both, at such further examination? If so, you will be notified as to the place and time when it is to be made. A 6/40. 6 con not go as I have money Q. Should you change your mind and desire to be present, or be represented by an attorney during any further examination of your case, will you at once address a letter to the "Commissioner of Pensions, Washington, D. C.," giving the name and the number of your claim, informing him that you have so changed your mind, and desire to be notified when your claim is to be further examined? A 68 will Q. State the names of the person or persons and their post-office addresses, instrumental in the prosecution of your claim for pension. A My Sun on Washington D. E. was my Q. State what contract or contracts you have made with such person or persons for their services in

prosecuting your claim for pension, and whether such contract or contracts were written or verbal.

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A Since m pursin was stopped &
how writted & Mr. Vinney that I would
pay him an additional frety he could get
Q. State the amount of fees paid by you or at your instance, to whom paid, and all the circumstances
connected with the transaction.
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Q. Please give me the names of all witnesses that you desire examined where, with their post-office
addresses, and also state what you expect to prove by each witness.
Dyon. I Married in my state much
Q. Have you any complaint to make as to the conduct, manner, or fairness of the examination of your
claim? If so, please state specifically what it is. A. Of our
A. effect
Q. Do you desire to introduce any more testimony before me?
A & will leave is - to you.
Samuel fraser
Deponent.
Sworn to and subscribed before me this 3rd day of 6700, 1893
and I certify that the contents were fully made known to deponent before signing.
S.F. Namp line Special Examiner.

DEPARTMENT OF THE INTERIOR

OFFICE OF SPECIAL EXAMINER, U. S. BUREAU OF PENSIONS

At Atla	nta, Ga. October 3, 1925.
NOTICE OF SPECIAL	EXAMINATION
Case of Elizabeth G. McPherson	, No. 1220104.
ToElizabeth G. McPherson, Claim	nant:
You are hereby notified that, by order of the Commis	sioner of Pensions, the undersigned will on the
3 day of, A. D. 19	25, and continuing thereafter as long as may be
necessary, at Charleston , Cou	nty of charleston and State
of South Carolina, and elsewhere if necessary, pension claim, at which time and place all available and man And you are further notified that you have the privil during said special examination, and of cross-examining sevidence on your own behalf if you so desire.	aterial witnesses will be heard. ege of being present, in person or by attorney, aid witnesses and of introducing any material
Witness to mark. Only one available.	Special Examiner.
I acknowledge service of copy of above notice this	3 day of October , 1925,
and desire the examination to beginat once.	her
6—6143	Elizabeth G. McPherson

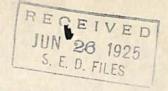
INDEX TO SPECIAL EXAMINER'S REPORT

Claim of	of Elizabeth McPherson			No. 1220104.		
PAGES	NAMES OF WITNESSES, ETC.	Ехнівітв	DEPOSI- TIONS	REPUTATION		
1	Index,					
2	Bureau letter	Х				
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5-7	Claimant's statement,		A	Good		
8-9	Edgar McPherson		В	Good		
10-11	Martha Alston		C	Good		
100-1						

3-1865

IN REPLY REFER TO

Board of Review
W.O. 1220104
Elizabeth G.,
Widow of
Samuel McPherson
alias Fraser
Co. I, 21 U.S.C.Inf.



DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

WASHINGTON

June 24, 1925.

Chief of the Special Examination Division

The soldier in this case had had a former consort, one Daisy Mitchell, from whom he separated, and each contracted marriage after separation. The consort Daisy is represented as having been married to one McCloud, of Spring Island, South Carolina.

A special examination is desired to determine whether there was a ceremonial marriage to this consort Daisy, and if so, whether the marriage was ever dissolved prior to the death of the soldier.

If there was a divorce from Daisy, or she is dead, the date should be shown.

Claimant's address is Walterboro, Colleton County, South Carolina.

Chief, Board of Review.

Examination approved:

Commissioner.

CGB/ifs

Page Z. Exhibit X.

Atlanta, Ga. October 12, 1925.

The Commissioner of Pensions:

Herewith are returned all papers in the above cited claim for pension together with my report.

Claim was referred to the field to determine whether there was a ceremonial ma rriage of soldier and his first consort Daisy, and if so, whether the marriage was ever dissolved prior to the death of the soldier. If there was a divorce from Daisy, or she is dead, the date should be shown. Claim came to this district for the initial examination.

The usual notice was served on claimant and her rights and privileges fully and carefully explained to her, all of which she waived. She was not present when the witnesses testified.

Claimant is well known in W alterboro a nd her reputation is good. She appeared to be telling the truth in giving her testimony. The two witnesses seen bear good reputations for truth and appeared to be telling the truth in giving their testimony.

Claimant declared that she never heard that soldier was married prior to his marriage to her until after she had filed her claim. I am sure that she never heard of it before. No one at Walterboro ever heard of any such marriage, Claimant stated that he had a brother na med Edward or Edgar McPherson living in Savannah and I went there and after some inquiry I located him. He said that soldier lived with Daisy Mitchell but that he did not think they were married though he admitted that they may have been. He said Da isy left soldier and went to live with one Jim McCloud and later she and McCloud went to Beaufort to live and that Daisy died there more than 40 years ago. He told me that Martha Alston in Savanna h knew Daisy well and I took her statement. She declared that she lived near Daisy and McCloud at Beaufort and that Daisy died there more than 40 years ago and that she attended her funeral. She said McCloud was also dead. Both witnesses thought that Daisy died before soldier and claimant were married.

As the testimony of the witnesses seen seems to cover the case I do not think further inquiry is necessary and I therefore recommend that the papers be referred for the consideration of the Chief of the Board of Review.

Respectfully submitted,

Inspector.

Page 4

Case of Elizabeth G. McPherson

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No. 1220104.

On this 3 day of October , 1925, at Charleston county of Charleston , State of South Carolina before me,

E. F. Fewell , a Special Examiner of the Bureau of Pensions, personally appeared Elizabeth G. McPherson, who, being by me first duly sworn to answer truly all interrogatories propounded to her during this special examination of aforesaid claim for pension, deposes and says:

I do not know my age but I was a good siz ed girl at the time of the Civil war. Residence and mail address, Walterboro, S. C. I am staying in Charleston for a short time. I live in Walterboro with my daughter and her husband and family. I am supported by them and I have no o ther income.

My full complete name is Elizabeth McPherson and I have no middle name. I do not know why the middle initial G was put in my name as I never had any other given name than Elizabeth and I am usually called Lizzie.

I am the same Elizabeth McPherson who is applying for pension as the widow of Samuel McPherson who served in the Civil war. I do not know his Company or Regiment. He died in May of last year. He died at Walterboro a nd I was with him when he died and I waited on him in his last sickness. He served in the Army under the name of Samuel Fraser but la ter changed his name to McPherson.

I was born at Walterboro, S. C., and I have always lived there.

My father was named David Gruber and my mother Elizabeth. They are
both dead. I have no living bro thers or sisters but I have one
half bro ther and four half sisters. My half brother is named Hern
Gruber but I do not know where he is now. My half sisters are Alice,
Singleton, a widow, Rosella Mike, she is separated from her husband,
Carrie Jane, married to Isaiah McGraw and they all live at Walterboro. The other is Clara Gill, a widow and she lives somewhere in
Florida. I lived with my parents until I was married.

- Q. How many times have you b een married?
- A. Only one time. I have only had one husband. I was married to the soldier, Samuel McPherson, at Walterboro forty years ago. I

Page 5 Deposition

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do not remember the date. I was married at my home and the ceremony was performed by Rev. Gowidin. We lived tog ether continuously from the date of our marriage to the date of his death. We were never separated or divorced. I have not remarried since his death.

I knew the soldier some little time before we were married but I do not r emember just how long. He came to Walterboro from Jacksonboro and was working on the railroad at the time they were building it to Wa Iterboro, I do not know where he was before that, heard him say that he was raised on Pinckney Island near Bluffton and he belonged to the pinckney family. He never said anything about ever being married before he married me. I never heard of any other wife he had until I was told by the Pension Bureau that he had been previously married. No, I never heard him mention anyone named Daisy Mitchell. No one ar ound Walterboro ever heard of his being married before. After I was told of his prior marriage I made inquiry at Walterboro of all the old people there and no one ever heard of any other marriage. The soldier has one brother and one sister living. His brother is named Edward McPherson and he lives in Savannah but I do not know his street address. I have a daughter there and you can get his address from her. I think he is a stevedore. His sister is named Rina and she was married but I do not know the name of her She lives in New York somewhere. Edward McPherson told me that the soldier once lived with a woman before he married me but that he was never ma rried to her. I do not know the name of the woman or where he lived with her.

- Q. How many children have you had?
- A. I have borne six children. Four are living and two are dead. All of them are grown up and married. All the children were by the soldier.

The only member of my family that served in the World War was my son Norman McPherson. He did not go over seas and was not injured. Neither he nor I are receiving nor have we applied for compensation on account of his service. I have not applied for compensation on account of the service of any person in the World War. I do not know what organization my son served in.

Wola Brown

Elizabeth McPherson.

mark Deponent.

Wotness to mark. Only one available.

The date of death of Daisy, the soldier's former consort, is not definitely shown. It may have been before or after the soldier's marriage to the claimant, but since South Carolina recognizes common law marriages the reviewer does not feel justified in return ing the case for a fuller compliance with the letter of reference until the Board shall have passed on the sufficiency of the evidence now in the case.

There were no public records of marriages kept in South Carolina prior to 1911. The inspector may have thought a search of the divorce records unnecessary because a common law marriage would obtain upon death of the

former consort.

Winner, Reviewer.

Oct. 16, 1925

Elizabeth McPherson

, No. 1220104.

Claimant , continued, sheet 2.

I have no attorney in my claim and I have paid no one anything for services in connection with my claim. I have no agreement to pay anyone anything.

I do not desire to be present or represented when witnesses are seen in my claim and I waive notice of further examination.

I have heardithe foregoing readrandeit is correct.

her Elizabeth McPherson. mark, Deponent.

Witness to mark.

Only one available.

Subscribed and sworn to before me this 3 day of October 1925, and I certify that the contents were fully made known to deponent before signing.

Inspector.

Case of Elizabeth G. McPherson

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No. 1220104.

On this 6 day of October , 19 25 at Savannah county of Chatham , State of Georgia before me, E. F. Fewell , a Special Examiner of the Bureau of Pensions, , who, being by me first Edgar McPherson personally appeared duly sworn to answer truly all interrogatories propounded to him during this special examination of aforesaid claim for pension, deposes and says:

My age is about 70. Residence and mail address, 648 Hall St, East, Savannah, Ga. I a m a laborer.

I know the claimant in this case, Elizabeth McPherson, and the soldier. Samuel McPherson, was my brother. I was in close touch with him all my life until about 15 years ago when I came to Savanto live and I did not see him but two or three times after that until he died.

Q. How many times was Samuel McPherson married?

A. Well, I dont know that he was ever married except to this claimantElizabeth, Soon after he came out of the army he lived with a woman named Daisy Mitchell but I dont know whether they were married or not. I dont think they were and it was my understanding that they were just living together though they may have been married. We all lived on Spring Island near Bluffton, S. C., at the time soldier and Daisy went to living together. They lived together for two or three years, maybe more, and then Daisy left soldier and took up with a man named Jim McCloud. Soldier came to me and told me that Daisy had left him for McCloud but he did not seem to care anything about it. Later Daisy and Mccloud went to live at Beaufort and Daisy died there more than 40 years ago. I heard of her death at about the time it occurred and I was then living near Bluffton. I am positive that she died and that it has been more than 40 years ago. I dont remember whether she died before soldier married claimant or not but I think she died before. McCloud is also dead and he died about 25 years ago at Beaufort. There is a woman named Marths Alston who lives on Reynolds Street here who was living in 27 Beaufort at the time Daisy died and who knew her well. She can tell

you all about her death. She was raised at Bluffton and knew all of us well.

I knew claimant before she married my brother and she was never married before her marriage to him. I know that they lived together without separation or divorce from the date of their marriage to the date of his death. The soldier never lived with any woman except Daisy and claimant. I am sure of that and I know he had no other marriage.

I am not related to the claimant except by marriage and I have no financial interest in her claim,

Edgar McPherson

I have heard the foregoing read a nd it is correct.

Only one available,

Subscribed and sworn to before me this 6 day of October 1925, and I certify that the contents were fully made known to deponent before signing.

6-5121

SEATT PA

Deponent.

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No. 1220104.

On this 6 day of October , 19 25 at Savannah county of Chatham , State of Georgia before me, , a Special Examiner of the Bureau of Pensions, E. F. Fewell , who, being by me first personally appeared Martha Alston duly sworn to answer truly all interrogatories propounded to her during this special examination of aforesaid claim for pension, deposes and says:

My age is 69. Residence and mail address, 1437 Reynolds Street. Savannah, Ga, I am a widow.

I do not know the claimant in this case, Elizabeth McPherson. but I have heard of her. I was well acquainted with the soldier, Samuel McPherson, in his younger days and up to about the time that he married the claimant. I was born and brought up near Bluffton, S. C., and the soldier was raised there too.

Q. How many times was the soldier, Samuel McPherson, married?

A. Twice is all I ever heard. His first wife was named Daisy Mitchell and I knew her well. I was not present when soldier and Daisy were married but I know that they lived together and it was said that they were married. They lived together on Spring Island at Bluffton for a year or two and then she left him and went off with Jim McCloud and they went to Beaufort and lived there. Later I moved to Beaufort and lived there until about seven years ago and then came here. At beaufort I saw Daisy and McCloud living there together and I remember Daisy's death but I do not remember the date. I am sure that it was over 40 years ago that she died. I was living near her at the time of her death and I attended her funeral. She was buried in the cemetery at Beaufort. Jim McCloud lived with another woman named Jane after Daisy died but she and Mccloud are both dead now. McCloud died 20 or 25 years ago at Beaufort.

I heard that soldier married this claimant and lived with her at Walterboro but I never saw her. I think Daisy was dead before he married this claimant as well as I can recall. I never heard that soldier ever had any marriage other than the two I have named. I 27 know he had no other marriage before he left Bluffton and he married claimant soon after he went to Walterboro to live. None of Daisy's people are living as far as I know. She had a brother and sister but I know that they are both dead. Her sister died in Charleston about 10 years ago.

I am not related to the claimant and I have no interest in her claim.

I have heard the foregoing read and it is correct.

Marthy alston Deponent.

Subscribed and sworn to before me this 6 day of October 1925, and I certify that the contents were fully made known to deponent before signing.

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S. E. D.

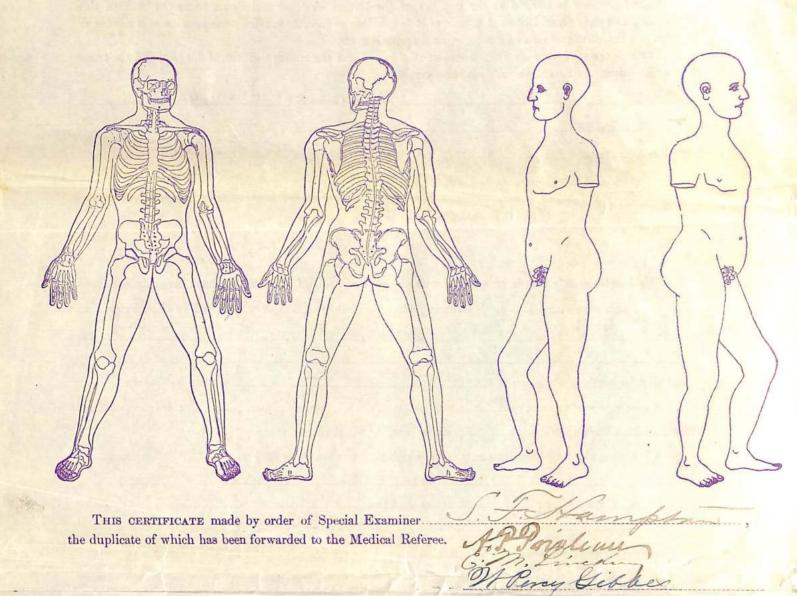
consideration Chief Board of Review for County: Colleton State: S. U. P. O. address: Walterboro Recommendation: Board of Review Soldier: Samuel McPherson Claimant: Elizabeth McPherson Respectfully referred to No. 1220104 RECOMMENSATION. OCT 16 1925 , 19 REFERENCE. Inspector. Reling Chief S. E. Division. ACTION. , 19 Reviewer.

Commissioner.

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Examining Surgeon.

Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

County, State, PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certifical the tain a full description of the physical condition of the claimant at the time, which shall include physical and rational signs and a statement of all the structural changes. [Extract from Section 4] physical and rational signs and a statement of all the structural changes. Congress approved July 25, 1882.] Post office, P. S .- Write your Post-office address plain and in full. SURGEON'S CERTIFICATE DATE OF EXAMINATION: , 1893. BOARD. 6-383 disability our habito roles and, is my evidence ne grades die Exper me akari remance e do bras lence of the

Soldier: P. O. address: Wac REFERENCE. Chief S. E. Division. RECOMMENDATION. Reviewer. ACTION. Further Examination at Been for letter hirewith

Commissioner.

Act. of May 1, 1920

Cert. 825 649
Name, Samuel Mc Pherson

Application filed Jame 14, 1923

Service, 21-U.S. C. Sup

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SEP 7-1923

Aug. 20, 1923. Ex. Ord. S. S. Charleston,

S. C. TANCELLED,

RECORD DIVISION

Department of the Interior

Briefed by A B Claim No.
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Civil War Division Wid. Orig. 499,436 Inv. Ctf. 825, 649 Eliza McPherson Samuel McPherson alias Samuel Fraser

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS Co. I 21 U.S.C. Inf.

WASHINGTON

March 3, 1916.

LLC

Mrs. Louisa Fraser,

Bridgeland,

South Carolina.

Madam:

You are advised that a claim for pension was filed by the widow of the soldier including a claim for her children, Louisa and Frances, and she was pensioned under the Act of June 27, 1890, and her name was dropped from the pension roll January 18, 1896 because the pensioner was not the legal widow of the soldier. Your pension minority expired before the alleged widow's name was dropped from the rolls and you never claimed pension in your own right. You have no title to pension under any law.

Very respectfully.

Acting Commissioner.



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to Speed fer way and he was under The it de lay an tel she smited State died now i am dala Service of the soldier am of the widow wast i am telling your's the trught i have ruitness to Mease Words look Care foff i have Some of the pensions to PENSION S. rentendes theas facily pelase to give me an ancer Sound ders Lavida frager.

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Law Office Heber R . Padgett Walterbero. G.C.

August 21, 1924

Department of the Interior, Bureau of Pensions, Washington, D. C.

In Re: Widow Division W. 0. 1220104

Samuel McPherson

Gentlemen:-

I, 21 U. S. Col. Inf.

Your letter of August 13th, 1924, addressed to the above claimant has been handed to me for reply.

You will find enclosed an Affidavit of the claimant as to the correct date of the death of the late Samuel McPherson.

The evidence requested in the form was fully covered in the Affidavits of John Lewis and Frank Simmons of date June 24th, 1924, which Affidavits were sent out in support of the claim herein.

Yours very truly,

Heber R. Padgett, Service Officer, Colleton County Post, #93. A. L.

HRP:H

0. 1924 OFFICE



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THE AMERICAN RED CROSS

144 WENTWORTH ST.



CHARLESTON, S. C.

February 27, 1936.

Mr. E. L. Bailey, Director, Widows and Dependents Claims Service, Veterans Administration, Washington, D. C.

Your ref: MBAB-g Re: McPHERSON, Samuel WC-966,649

My dear Mr. Bailey:

We enclose herewith a Form 5036, as executed by Louise Gardner, daughter of the above named deceased pensioner, together with certified copies of the funeral bill, and certified copy of the public record of death of Elizabeth McPherson.

Very truly yours,

(Mrs.) Azile Brown Tyler, Executive Secretary.

ABT/f Enc. 5.

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MARGIN RESERVED FOR BINDING

EXACTLY. PHYSICIANS should state CAUSE Every item of infor-Standard Certificate of Death 1. PLACE OF DEATH File No .- For State Registrar Only County of Charleston STATE OF SOUTH CAROLINA of OCCUPATION **Bureau of Vital Statistics** State Board of Health Township of _____ 36- 11 Registered No. Charleston. S.C. Registration District No .. (For use of Local Registrar.) President Street (If death occurred in Residence a Hospital or institution give its NAME (If not same). PERMANENT RECORD. instead of street and number.) Elizabeth McPherson Residenc5 statement 2. FULL NAME Yrs. - Mos. - Dave MEDICAL CERTIFICATE OF DEATH PERSONAL AND STATISTICAL PARTICULARS 21. DATE OF DEATH 36 5. Single, Married, Widowed. (month, day, and year) Jan. 4. COLOR OR RACE or Diverged (write the word) Female Negro Exact Dec. 30. That I attended deceased from 5a. If married, widowed, Henry McPherson (or) WIFE of? classified 6. DATE OF BIRTH to have occurred on the date stated above, at (Month, day, and year) The principal cause of death and related causes of importance in order of If less than 1 onset were as follows: Days 7. AGE Years Months Date of onset THIS properly 8. Trade, profession, or particular kind of work done, as spinner, Domestic sawyer, bookkeeper, etc. should 1 OCCUPATION Cerebral Apoplexy certificate 9. Industry or business in which work was done, as silk mill, at home saw mill, bank, etc 10. Date deceased last worked at 11. Total time (years) this occupation (month and 935 spent in this occupation may Contributory causes of importance not related to principal cause: UNFADING jo Walterboro, S.C. None back BIRTHPLACE (city or town) (State or country(David Grove 110 FATHER 13. NAME Name of operation See instructions Walterboro, S.C. What test confirmed diagnosis? 14. BIRTHPLACE (city or town) plain terms, (State or country) 23. If death was due to external causes (violence fill in also the foll 15. MAIDEN NAME Elizabeth Bowen Accident, suicide, or homicide?_ PLAINLY. Where did injury occur? Walterboro. S.C. 16. BIRHPLACE (citwn or town) (Specify city or town industry, in bond or Specify whether injury occurred in (State or country) mation should OF DEATH in resident St. 17. INFORMANT important. Manner of injury WRITE Nature of injury 24. Was disease or injury in any plated to occupation of deceased? CO 19. UNDERTAKER If so, specify (Address) 20. FILEDJan (Signed) Charleston. S.C. (Address

UNITED STATES STANDARD CERTIFICATE OF DEATH

Statment of occupation .- Precise statement of occupation is very important, so that the relative healthfulness of various pursuits can be known. Make some entry in this section for every person aged 10 years or over. If the occupation has been given up or changed on account of the disease causing death, report the occupation prior to illness. If the deceased had retired from business, report the occupation prior to retirement. Children not gainfully employed may be returned as at school or . at home. For a woman whose occupation was that of home housework, write housework in answer to Question 8 and own home in answer to Question 9. For a person engaged in domestic service for wages, however, designate the occupation by the appropriate terms, as housekeeper-private family, cook-hotel, etc. For a person who had no occupation whatever write none. To be complete, an occupation return must state:

8.—The trade, profession, or particular kind of work done. 9.—The industry or business in which the work was done.

10.-The month and year the deceased last worked at the occupation.

11.—The number of years the deceased followed the occupation.

In stating the occupation, avoid the use of such indefinite terms as "employee," "worker," "operative," etc. Find out the particular kind of work done and return that, as spinner, weaver, etc.

In stating the industry or business, avoid the use of such general terms as "store," "factory," "mill," etc. State the

particular kind of store, factory, mill, etc., as gracery store, soap factory, cotton mill, etc.

Distinguish carefully the different kinds of engineers by stating the full descriptive titles, as civil engineer, mechanical engineer, mining engineer, stationary engineer, etc. Avoid the term "laborer" when a more precise statement of the occupation can be secured. Do not use the word "mechanics" but give the exact occupation, as carpenter, painter, machinist, etc. Distinguish carefully between retail merchants and wholesale merchants. A person who sells goods should be called a salesman and not a clerk.

Statement of cause of death.-Cause of death means the disease, injury, or complication which causes death. not the mode of dying, e. g., heart failure, asphyxia, asthenia, etc. As principal cause name the disease or injury causing death. As related causes, name earlier morbid conditions, if any, related to the principal cause and any important complication of the principal cause. Under contributory causes of importance not related to principal cause, name other important diseases or injuries.

Example 1		Example II	
The principal cause of death and related causes of importance in order of onset were as follows:	Date of onset	The principal cause of death and related causes of importance in order of onset were as follows:	Date of onset
Arteriosclerosis	1915	Attack of epilepsy	1 week ago
Chronic interstitial nephritis	1921	Run over by street car	I week ago
Cerebral hemorrhage	July 5, 1927	Peritonitis	3 days ago
NAME OF STREET			
- 1000000000000000000000000000000000000	-COLD		
Contributory causes of importance not related to principal cause:	(2)	Contributory causes of importance not related to principal cause:	
Fracture of arm	45	Influenza	6 weeks ago
Automobile actident	May 3, 1927	12	
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In a group of causes containing the principal cause and related causes, the causes should be given in the order of onset, so that in a group of three causes the principal cause may appear in either first, second, or third position. The principal cause in each of the above examples happens to be the second cause given.

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MBAC-c

Mrs. Louise Gardner, 507 President t., Charleston, 5.C. McPHERSON, Elizabeth C 966 649

Dear Madam:

Further reply is made to your letter of January 14, 1936.

Pension accruing from the date of last payment to the date of the pensioner's death is not an asset of the estate, is not payable to heirs and is not liable for the payment of debts, but may, under certain conditions be paid to reimburse the person who bore the expenses of the last sickness and burial, or who is old responsible therefor, in the event the pensioner did not heave sufficient assets to meet such expenses.

If, under the circumstances, it is desired to file claim for this amount, the inclosed application, Form 5036, should be completed in accordance with the instructions printed thereon and filed in this office.

All communications relative to this case should bear the pensioner's name and refer to the number WC 966 649.

Respectfully,

B. L. BATLEY, Director, Widows' and Dependents' Claims Service

Inc. Form 5036

EHY

Died Jan Charleston V.C. 6, 1936 Jan 14 1936 Lear Sur I am information you withe death of Elizabeth Me Pherson a Pension Widow and also stating to you that The left all of her expensive berial and Hr. Villand other little thensive on me and Jam asking if tix any way I cano Collect from the government This is from her Daughter Pourise Tardner and she is the Widow Daniel Frasier Mc Meson and her name is Elyston Me Pherson Charles ton Site.



VETERANS ADMINISTRATION

ACCRUED PENSION REIMBURSEMENT

May 1, 1936 MCC-Cb MC 966649

Director of Finance

You are hereby directed to pay \$ 800 pension, accrued in the case of Chyaleth Mi Okerson Widow, Oct May 1 1920

pensioned by Cert. No. 9666649 Group 7 , who died 1.6.36

Louise Gardner St 307 President St Charleston, S. C

as reimbursement of the expenses of the pensioner's last sickness and burial.

Oarge on

Pension Form 5363 Rev. Dec. 1932

Reimbursement Claims Authorizor.

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REIMBURSEMENT

ACCRUED PENSION

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VETERANS ADMINISTRATION, Finance Form 965a /7/26 0 BA

ABSTRACT OF PAYMENT

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Elizabeth Mc Pherson.

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Statement

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VETERANS ADMINISTRATION

WASHINGTON

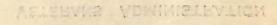
In reply refer to: MCCXCX

MBAC-c

McPHERSON, Elizabeth WC-966,649

REIMBURSEMENT WAIVER

I certify that I hold Louise Gardner
responsible for the payment of any portion of the accrued pension to which I
may be entitled for services rendered, supplies furnished, or money expended
during the last sickness and burial of Elizabeth McPherson
late a pensioner under certificate No. WC-966,649
(This need not be sworn to.) Rev Wo Ravenet and
Louise Gardners
Elizebeth me Pherson was bured on family grown friends of the family dug the grave no charges mrs Louise Yardner 307 President st
Pension Form 5328 Rev. Dec. 1932



MASHINGTON



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the receipton professors



Mary Pect 1946

\$2

Jan. 12-1936-Mrs-Louise Gardener, To Dr. With miller Credit -Debtor 1200 bal due -1000 over

A. Wit Willer-701/2 Bogard 81 hours: 12:2-am 7:9-Pm Phone \$499 W.



REV. W. RAVENEL & CO. NEW FUNERAL HOME

FUNERAL DIRECTORS AND LICENSED EMBALMERS FREE USE OF CHAPEL - MODERN MOTOR EQUIPMENT

PHONE 2659-W - CALL DAY OR NIGHT

90 HANOVER STREET

CHARLESTON, SO. CAR.



To: Louise Gardner 307 President Street

February 19, 1936

Charleston, S. C.

Funeral bill for Elizabeth McPherson who died January 6, 1936, mother of

Louise Gardner, widow of Samuel McPherson.

Embalming and casket

8 40.00

Hearse

15.00

Car for family

10.00

TOTAL

65.00

True and exact copy of funeral bill of Elizabeth McPherson as authorized by her daughter buse Sandne, none of which has been paid.

Rev. w. Ravenel, Undertaker 90 Hanover Street

Charleston, South Carolina

Sworn to before me this 19th day

of February, 1936.

My commission expires at the pleasure of the Governor.



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90 Hanover Street

Charleston, South Carolina

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of February, 1936.

Notery Public for South Carolina.

My commission expires at the pleasure of the Governor.



VETERANS ADMINISTRATION Adjudication Form 5036 Rev. Mar. 1932

READ THE INSTRUCTIONS ON BACK OF THIS BLANK BEFORE USING IT

APPLICATION FOR REIMBURSEMENT

80 D		left a widow or minor children under sixteen years of age
STATE (E OF South Carolina	recdy been paid. I here chiragean
COUNTY	TY OF Charleston	to him that distributed to the fall of the latest the l
On t	this 17th day of February	, A. D. 1936, before me, the undersigned, personally appeared
Lou:	ouise Gardner , aged 33	years, a resident of #307 President St., Charleston, S. C., the Carolina, who makes the following declaration as an
		the accrued pension for expenses paid (or obligation incurred) in the
		, who was a pensioner of the United States by certificate
		, 19 36, at Charleston, South Carolina
	as buried at Walterboro, South Carolin	
		mplete, and truthful to the best of my knowledge, information, and
	the state of the s	Il claims against the accrued pension is suppressed or withheld.
		abeth McPherson
1. What	nat was the full name of the deceased pensioner.	
0. 71	what capacity was decedent pensioned? (As soldier or sail	
2. In wr		or, or as a widow, minor chid, dependent relative, e.c.)
	decedent was pensioned as a soldier or sailor—	
		(es
(lst don't know name. Dead.
		uberr Mcpherson
		no.) Yes
		ordinates (co.) a provide action or the first of the contract
24. W.		wives don't know name of 1st wife. Dead on, died January 6, 1936
	(f) Was he ever divorced? (Answer yes or no.)N)
	(g) If so, is the divorced wife still living? (Answer yes or	no.) (If living, a copy of the decree of divorce must
	be filed.)	med desire the met submed. Database E.
	(h) If not living, give her full name and the date of her d	eath
	Br. W. M. HALLOR, YOU BOX WE	Server, Orcasepage, S. C.
4. Did p	d pensioner leave a child under 16 years of age? (Answer y	es or no.) No
5. Is any	any such child still living? (Answer yes or no.)	FIT COLIN SUB. C. TASO
6. Were	ere any sick or death benefits paid on pensioner's account?	If so, give name of society and amount paid
		pensioner at time of death? (Answer yes or no.)NO
		rried and the amount in which each policy was written
19. 11.	the Se free Spring to the desired producer. He	divert
9. Who	Tho was the beneficiary named in each policy?	
		- Kere
11. Were	ere the premiums paid by the deceased pensioner?	
		emiums paid by each person who made payment on that account

	ll application be made for appointment of	any person as administra	tor? NO
14. Did the deceased pensioner leave any money	y real estate or personal property	TALIE NO.	
15. If so, state the character and value of all suc			
16. What was the assessed value (last assessmen	t) of the real estate? None	The second second	
17. How was the pensioner's property disposed of			
i a posetici s property disposed to	Manager - 22 and and an array array		
18. Did pensioner leave an unindorsed pension of	hask? (Answer was an as) NO		
19. What was your relation to the deceased pens	ionar? Daughter		
20. Are you married? (Answer yes or no.)	Ves		
21. What was the cause of pensioner's death?	urolana, guarakwasa walionala ili	····	
22. When did the pensioner's last sickness begin?	Ailing for five weeks	Confined to b	
 22. When did the pensioner's last sickness begin? 23. From what date did the pensioner become sideath? From December 28 	o ill as to require the regular and daily a	ttendance of another ner	on constanting
24. Give the name and post office address of each	physician who attended the pensioner du	ring last sideness	
Dr. W. A. Miller, 70	a Bogard Street, Charle	ston. S. C.	
to the proper the part of every right	249 (SK) (C C C C C C C C C C C C C C C C C C C		
25. State the names of the persons by whom the	pensioner was nursed during the last sickn	ess Daughter:	
Louise Gardner.	Typical English Committee of the Committ	Land Carlot Control	
	Frain, and to a second second		
6. Where did the pensioner live during last sickn	ess? #307 President St.	Charleston, S.	C.
7. Has there been paid, or will application be made	de for payment to you or any other person	any part of the expenses	of the pension
last sickness and burial by any State, count	ty, or municipal corporation? (Answer ve	s or no.) No	or the pension
8. Has there been or will there be an application The following is a complete statement of all the	filed in the Veterans Administration for a	a burial allowance? No) r:
28. Has there been or will there be an application	he expenses of the last sickness and burial	of said deceased pensione tished any supplies for which reim the pensioner for whom the expense	r: bursement is deman o was incurred or ser
The following is a complete statement of all the (Each charge entered below should be supported by an item as should show, over his signature, by whom paid, or who is help and should show, over his signature, by whom paid, or who is help and should show, over his signature, by whom paid, or who is help and should show. NAMES	the expenses of the last sickness and burial sized bill of the person who rendered the service or furnd responsible for payment, and contain the name of the indicated. NATURE OF EXPENSES	of said deceased pensione of said deceased pensione sished any supplies for which reim the pensioner for whom the expense STATE WHETHER PAID OR UNPAID) r:
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The following is a complete statement of all the (Each charge entered below should be supported by an item of should show, over his signature, by whom paid, or who is help addered. If no charge was made for any item, that fact should be named to the management of the above-mentioned expenses this claim 2.00 toward bill from docto.	he expenses of the last sickness and burial lized bill of the person who rendered the service or furn d responsible for payment, and contain the name of the indicated. NATURE OF EXPENSES Physician \$12.00 Medicine	of said deceased pensione dished any supplies for which reim the pensioner for whom the expense STATE WHETHER PAID OR UNPAID \$2.00 paid Total t of, the following items:	bursement is demand was incurred or ser AMOUNT 10. 65. 75. Unly Anteed Charlest

Sandikagaaa

Charles Carlo

Also appeared William T. King	and Georgia H. King
who, being duly sworn, make the following statement, each for	himself, that they know the claimant herein and that their answers to
the following questions are true:	
1. Did pensioner (if a soldier or sailor) leave a widow or a minor	child under age of sixteen years surviving?
	ueorgia
	Confirm
	and value NO
	and varie
Windows of the Company of the Compan	
we knew her very intimately. Ha	are: We knew the deceased pensioner for 25 years and 35 yrs d visited in wher home and she in ours.
	e she died, and saw her after she was
	C. P. O. Address 15 Ashton St. Charleston, S. C.
	day of rebruary A. D. 19.36;
Company of the Compan	fully made known and explained to the claimant and witnesses before
swearing, that I have no interest, direct or indirect, in the prose bility of the witnesses whose signatures appear above is	cution of this claim, and I further certify that the reputation for credi-
WANTED BOOK OF THE PARTY OF THE	0.0 B. 40
	(Signature)
[L. S.]	Notary Public for South Carolina
10 10 10 10 10 10 10 10 10 10 10 10 10 1	144 wentworth street charleston.
7/2 11/2/2019	(P. O. address) S. C.
STATEMENT OF	ATTENDING PHYSICIANS
Give pensioner's name in full Clarabeth	methors
Give date of commencement of pensioner's last sickness	ocember 28, 1935
Give date of pensioner's death and an analysis	11 6 19 3 6
From what date did the pensioner require the regular and daily a	441 1 2 41 2 41 3
b. O. O. O. A. A. J	2 1 1
During what period did you attend the pensioner?	1/400 280 12 000000000000000000000000000000
State nature of disease from which pensioner died.	26=0 0 4 4 1 1824
Cos ale Cos dalia	Del Del 28 La land
	The rate of the second
Give name of any other physician who attended the pensioner in	last sighness 14 5 0
dire name of any other physician who avended the pensioner in	and strances
Does your bill include a charge for all medicine furnished the pe	nsioner during last sickness? No. 0
Has your bill been paid; if so, by whom?	
\$ 22.00 paid maces	1 1 1 1 0 0 0 0 0 P/10 20
as net due:	The state of the s
	ny other facts within your knowledge which would be helpful in adjust-
ing this claim for reimbursement:	Mrs. house Cardener.
I certify that the foregoing statement is correct.	1 11 111 111
February 13, 1936	(NHO)
	Attending Physician.
15—502	Attending Physician.

NOTICE

The only sum available for payment of a claim presented on this blank is the pension unpaid at the date of the pensioner's death.

The Act March 2, 1895 (28 Stat. L., 964), provides-

The Act Interfer the twenty-eighth day of September, eighteen hundred and ninety-two, the accrued pension to the date of the death of september, eighteen hundred and ninety-two, the accrued pension to the date of the death of september, eighteen having an application therefor pending, and whether a certificate therefor shall issue prior or subsequent to the death of such person, shall, in the case of a person pensioned, or applying for pension, on account of his disable tor death. Such account of his disapplying for pension, or a person entitle and or children under the age of sixteen years at his death. Such account of his disable tor the payment of the debts of sixteen years at his death, third, in a case of a widow, to her minor children under the age of sixteen years at his death. Such accrued pension shall not be considered a part of the sale assets of the estate of such deceased person nor be liable for the payment of the debts of said estate in any case considered a part of the sole and exclusive benefit of the widow or children. And if no widow or child survive such pensioner, and in the case of his last surviving child who was such minor at his death, and in case of a dependent mother, father, sister, or brother, and in the case of his last surviving child who was such minor at his death, and in case of a dependent mother, father, sister, or brother, who borre the expense of their accrued pension shall be made or allowed except so much as may be necessary to reimburse the person who borre the expense of their accrued pension shall if they did not leave sufficient assets to meet such expense.

The Act March 3, 1905 (33 Stat. L., 1169), provides—

* * * and no part of any accrued pension shall hereafter be used to reimburse any State, county, or municipal corporation for expenses incurred by such State, county, or municipal corporation under State law for expenses of the last sickness or burial of a deceased pensioner.

SNOITOURTSNI

I. Accrued pension is not a part of the assets of the estate of a deceased pensioner, nor liable for the payment of the debts of such

pensioner.

2. Accrued pension is not payable as reimbursement in the case of a person pensioned on account of service if a widow or minor child

2. Accrued pension is not payable as reimbursement in the case of any pensioned on account of service if a widow or minor child under stateen years of age survive.

3. Accrued pension is not payable as reimbursement in the case of any pensioner who left sufficient assets to meet the expense of last scheness and burda.

4. Application for reimbursement should be accompanied by the following evidence:

(a) Bills of the expenses of lest scheness and burda.—If paid in part only the oreditor should rate by whom paid or from what source such payment receipted to said claimant; but if paid in part only the creditor should note on each bill, over their signatures, that they proment the claimant responsible for the payment. If the bill be for meeting the dates between which the dates or vices were rendered, and show the dates or vices were rendered, and the claimant show the dates of visit of the undertaker must bow the dates between which the services were rendered.

5. The bill of the name of one person.

(b) The pensions extigned which was issued in the name of one person.

(c) The oreasing should be presented in the name of one person.

(c) The oreasing should be presented in the name of one person.

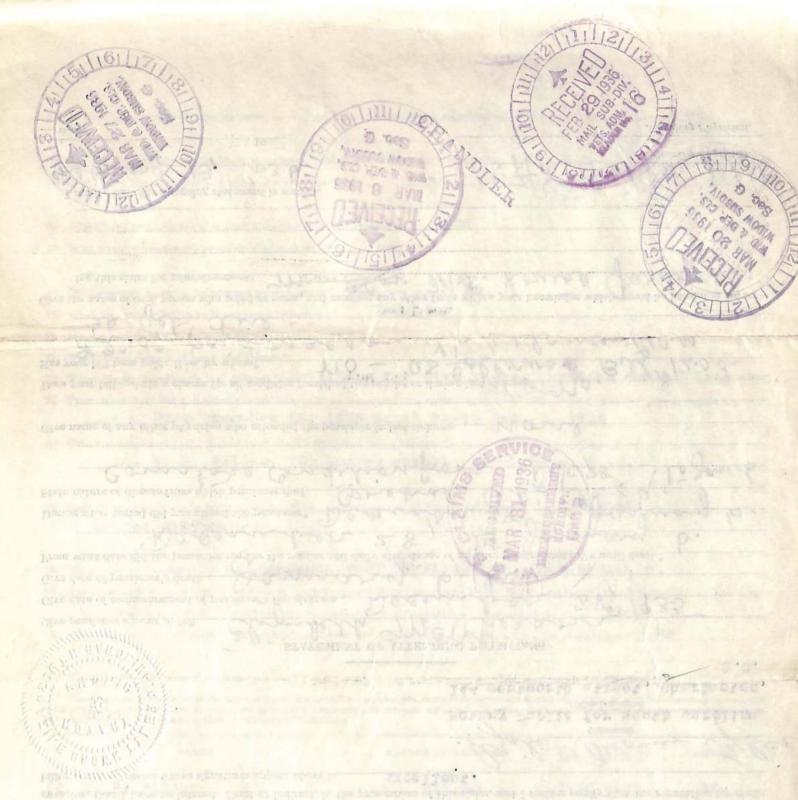
(b) The pensions extigned which was issued in the name of one person.

(c) The officiant's statement showing its wherehouse a part of the ereceded by them.

(d) The proving the proving its wherehouse of such bills if needed by them.

(e) The officiant's statement relative to insurance, property, and whether the certificate is not in posession of the dates between years of age should be presented in the name of one person.

(c) The officiant's statement relative to insurance, property, and whether the deceased pension or left a widow or minor children and ereceived by the gension or strighted to the organization of the deceased pension or the pension of the insurance, property, and whether the deceased pension or left a widow or minor children and the pension of the deceased pension or the deceased pension or the decease





Charleston, S. C. November 17, 1924.

Hon. Washington Gardner, Department of the Interior, Bureau of Pensions, Washington, D. C.

My dear Mr. Commissioner:

I understand that Elizabeth G. McPherson, Widow Division W.O. 1,220,104 has filed her application for pension as the widow of Samuel McPherson. There has been some complaint of delay in this case and knowing how promptly your Department usually functions, I would ask your attention to the matter. Kindest personal regards.

Yours very truly,

Board of Review
W.O. 1220104
Elizabeth G.,
Widow of
Samuel McPherson
alias Fraser
Co. I. 21 U.S.G.Inf.



June 24, 1925.

Chief of the Special Examination Division

The soldier in this case had had a former consort, one Daisy Ditchell, from whom he separated, and each contracted marriage after separation. The consort Daisy is represented as having been married to one McCloud, of Spring Island, South Carolina.

A special examination is desired to determine whether there was a coremonial marriage to this consort Daisy, and if so, whether the marriage was ever dissolved prior to the death of the soldier.

If there was a divorce from Daisy, or she is dead, the date should be shown.

Claiment's address is Walterboro, Colleton County, South Carolina.

Chief, Board of Review.

Examination approved:

Commissioner.

CGB/1fs

AGT OF MAY 1. 1980

WO	No. 1220104	
	CLIZABETH G MCF	
Soldier	SAMUEL MCPHERSO	Naliso FRASER
Service	21 USCINF	
Address	VALTERBORO	
	COLLETON County	S.C

Rec'd in S. E	. D.JUN 26, 19 25,	from B R
	REFERENCES	
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February 4, 1936

DAF-GA-E

legal Representative of the estate of Missbeth Colherson, deceased, 307 President St., Charleston, S. C.

Mermasow, Elizabeth W.C. 966,649 Civil War

Door Sirs

Notice of the death of Mindeth Control
has been received, and it is requested that all checks issued in
favor of this beneficiary subsequent to the date of death be
returned to the Division of Disbursement, Treasury Department,
Washington, D. C.

In the event such checks have been negotiated by you as representative of the beneficiary, refund of the amount should be made by money order or draft drawn to the order of the Treasurer of the United States and mailed to K. C. Baxter, Cashier, Veterans' Administration, Washington, D. C., with the enclosed copy of this letter.

In reply, please quote file reference given above.

Respectfully,

H. V. STIRLING,

Director of Finance.

1 Enc.

Finance Form 1320 Rev. Feb. 1935 RLH: cmcc

 3-812

REIMBURSEMENT

Certificate No.	
Pensioner	
Class	
Date of Death	
Claimant	
Post Office	
Received	
N. A. C.	
A CONTRACT OF THE	

MBAC-e

Mrs. Louise Gardner 307 President Street Charleston, South Carolina

McPHERSON. Samuel WC-966.649

Dear Madam:

Receipt is acknowledged of your letter dated August 10. 1936.

No provision is made by Federal law for payment of a separate allowance toward the burial expenses of a widow pensioner.

The file shows that an award in amount of \$8.00, representing the pension due Elizabeth McPherson from date of last payment to the date of her death, was approved for payment in your favor April 30, 1936. This is all that is due and constitutes final settlement.

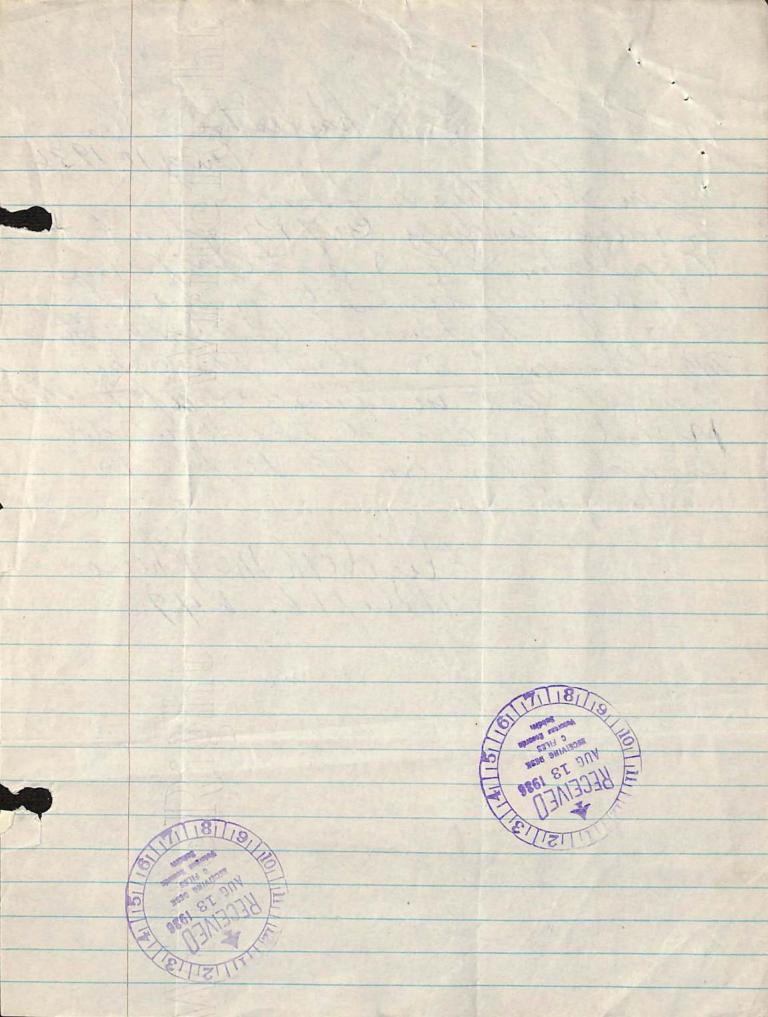
Respectfully

E. L. BAILEY Director Dependents Claims Service

Cary &

oun/rh mm

Charleston & C. ang 10 1936 Dear Sir This is from Houise Gardney 307 Presdent At Charleston & Distarof you Therefer lines to finishout about the Burial Teligebeth Me Pherson I Send in The claim havent get un auswer af to this present, true and the Hr. and furneal expensive the people is pushing me Elizabeth Me Sherson Dannel -



Louise Gardner 507 President St., Charleston, Bouth Garolina. MC PHERSON, Elizabeth MC 966 649

Madam:

NOODCKNOKKENK

you in the amount of \$8.00.

olo jim/ejo

-0

MBAC-C

Mrs. Louise Gardner 307 President Street Charleston, South Carolina McPHERSON, Elizabeth WC-966,649

Dear Madam;

Receipt is acknowledged of your application for reimbursement.

In support of your application it is necessary that you furnish this Administration with bills for medicine and cemetery expenses properly receipted if paid in favor of the person making payment or if unpaid, the creditors should note on their bills over their signatures by whom paid or who is held responsible for payment. If no charge was incurred for any item that fact should be indicated.

It is necessary also that you have Dr. W. H. Miller and Reverend W. Ravehel sign the enclosed Reimbursement Form 5528.

All communications relative to this case should bear the pensioner's name and refer to the number WC-966,649.

Respectfully

CC: Mrs. Azile Brown Tyler
The American Red Cross
Charleston, South Carolina

E. L. BAILEY Director Widows and Dependents Claims Service

Enc.-5328

JJM/mee

(Execute and Return BOTH Copies.)

This form of fee agreement is prescribed by the Commissioner of Pensions and approved by the Secretary of the Interior, July 8, 1884, under the provisions of the Act of Congress approved July 4, 1884.

TO BE EXECUTED IN DUPLICATE WITHOUT ADDITIONAL COST TO CLAIMANT.

ARTICLES OF AGREEMENT.
Whereas, I, Danuel Chraser,
vv nereas, 1,
1 late a Brigates in
Company of the 9/ Regiment of W. O. C. Volunteers
Company of the Regiment of 100 Volunteers
war of Rebellean, having made application for pension under the laws of the United States:
NOW THIS AGREEMENT WITNESSETH: That for and in consideration of services done and to be done in the premises, I hereby agree to allow my attorney, M. V. TIERNEY, of Washington, D. C., the fee of TWENTY-FIVE DOLLARS, which shall include all amounts to be paid for any services in the furtherance of said claim; and said fee shall not be demanded by or payable to my said attorney, in whole or in part except in case
of the granting of my pension by the Commissioner of Pensions; and that the same shall be paid to him in accordance with the provisions of Sections 4768 and 4769 of the Revised Statutes, U. S.
Samuel Atraser
I Mo Henderson Signature Community
(d) of
(Post-Office address, giving street and No., if in a city.) (Signature of two witnesses who can write in every case.)
State of South Caral acounty of Callettan, ss:
Be it Known, That on this, the day of May, A. D. 189 3,
personally appeared Samuel Hasse, the above named, who, after having had read over
to MMM in the hearing and presence of the two attesting witnesses the contents of the foregoing articles of agree-
ment, voluntarily signed and acknowledged the same to be the free act and deed.
6. C. Sendongan
[L. S.] Marter for Calleton Ca
ATTORNEY'S ACCEPTANCE.
Leave the following to be filled up by the Attorney.
And Now, to wit, this 23 day of Man A. D. 189, I accept the provisions
contained in the foregoing articles of agreement, and will, to the best of my ability, endeavor faithfully to represent the interest of the claimant in the premises. I hereby certify that I have received from the claimant above named the sum
of dollars, and no more; dollars being for fee, and the sum of
dollars being for postage and other expenses. And that these agreements have been issued in
duplicate without additional cost to the claimant, as required by law, in excess of the fee above named, I having made no charge therefor.
WITNESS my hand the year and day above written.
District of Columbia, County of Washington, ss:
Personally came M.V. TIERNEY, whom I know to be the person he represents himself to be, and who, having signed the above acceptance of agreement, acknowledged the same to be his free act and deed.
[L. S.] Gertha S. Dana
[Notary Public.]
COMMISSIONER'S APPROVAL.
Approved for

M. V. TIERNEY, of Washington, D. C., the recognized attorney.

NOTICE TO CLAIMANT.

This Contract is Permissible Under the Law, but not Compulsory.—Read the following Copy of the Statute.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled.

That section 4785 of the Revised Statutes is hereby re-enacted and amended so as to

read as follows:

"Sec. 4785. No agent or attorney or other person shall demand or receive any other compensation for his service in prosecuting a claim for pension or bounty land than such as the Commissioner of Pensions shall direct to be paid to him, not exceeding \$25; nor shall such agent, attorney, or other person demand or receive such compensation, in whole or in part,

agent, attorney, or other person demand or receive such compensation, in whole or in part, until such pension or bounty land claim shall be allowed: Provided, That in all claims allowed since June 20, 1878, where it shall appear to the satisfaction of the Commissioner of Pensions that the fee of \$10, or any part thereof, has not been paid, he shall cause the same to be deducted from the pension, and the pension agent to pay the same to the recognized attorney."

Sec. 4. That section 4786 of the Revised Statutes is hereby amended so as to read as follows: "Sec. 4786. The agent or attorney of record in the prosecution of the case may cause to be filed with the Commissioner of Pensions duplicate articles of agreement without additional cost to the claimant, setting forth the fee agreed upon by the parties, which agreement shall be executed in the presence of and certified by some officer competent to administer oaths. In all cases where application is made for pension or bounty land, and no agreement is filed with the Commissioner as herein provided, the fee shall be \$10 and no more. And such articles of agreement as may hereafter be filed with the Commissioner of Pensions are not authorized, nor will they be recognized except in claims for original pension, claims for increase of pension on account of new disability, in claims for restoration where a pensioner's name has been or may hereafter be dropped from the pension rolls on testimony taken by a special examiner, showing that the disability or cause of death, on account of which the pension was allowed, did not originate in the line of duty, and in cases of dependent relatives whose names have been or may hereafter be dropped from the rolls on like testimony, upon the ground of non dependence, and in such ther cases of difficulty and trouble as the Commissioner of Pensions may see fit to recognize dropped from the rolls on like testimony, upon the ground of non dependence, and in such other cases of difficulty and trouble as the Commissioner of Pensions may see fit to recognize other cases of difficulty and trouble as the Commissioner of Pensions may see fit to recognize them: Provided, That no greater fee than \$10 shall be demanded, received, or allowed in any claim for pension or bounty land granted by special act of Congress, nor in any claim for increase of pension on account of the increase of the disability for which the pension had been allowed:

And provided further, That no fee shall be demanded, received or allowed in any claims for arrears of pensions or arrears of increase of pension allowed by any act of Congress passed subsequent to the date of the allowance of the original claims in which such arrears of pension or increase of pension may be allowed."

And if in the adjudication of any claim for pension in which such articles of agreement have been or may hereafter be filed it shall appear that the claimant had, prior to the execution thereof, paid to the attorney any sum for his services in such claim, and the amount so paid is not stipulated therein, then every such claim shall be adjudicated in the same manner as though no articles of agreement had been filed, deducting from the fee of \$10 allowed by law such sum as claimant shall show that he has paid to his said attorney.

Any agent or attorney or other person instrumental in prosecuting any claim for pension or

Any agent or attorney or other person instrumental in prosecuting any claim for pension or bounty land who shall directly or indirectly contract for, demand, or receive or retain any greater compensation for his services or instrumentality in prosecuting a claim for pension or bounty land than is herein provided, or for payment thereof at any other time or in any other manner than is herein provided, or who shall wrongfully withhold from a pensioner or claimant the whole or any part of the pension or claim allowed and due such pensioner or claimant, or the land-warrant issued to any such claimant, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall for every such offense be fined not exceeding \$500, or imprisoned at hard labor not exceeding two years or both, in the discretion of the court. at hard labor not exceeding two years, or both, in the discretion of the court.

Approved July 4, 1884.

irn BOTH Copies.) WASHINGTON, D. C. TAMMIH H ATTORNEY AT LAW LATE OF FILED BY (Execute EE

(Execute and Return BOTH Copies.)

This form of fee agreement is prescribed by the Commissioner of Pensions and approved by the Secretary of the Interior, July 8, 1884, under the provisions of the Act of Congress approved July 4, 1884.

. TO BE EXECUTED IN DUPLICATE WITHOUT ADDITIONAL COST TO CLAIMANT.

ARTICLES OF AGREEMENT.
Whereas, I, Cannel Glacel
Company of the 9/ Regiment of Own On Wolunteers war of Reference of Advisory Witnesseth: That for and in consideration of services done and to be done
in the premises, I hereby agree to allow my attorney, M. V. TIERNEY, of Washington, D. C., the fee of TWENTY-FIVE DOLLARS, which shall include all amounts to be paid for any services in the furtherance of said claim; and said fee shall not be demanded by or payable to my said attorney, in whole or in part except in case of the granting of my pension by the Commissioner of Pensions; and that the same shall be paid to him in accordance with the provisions of Sections 4768 and 4769 of the Revised Statutes, U. S.
Samuel Athasel (Signature of Califfrant.) (Signature of two witnesses who can write in every case.)
State of South Caraling County of Calletan, ss:
Be it Known, That on this, the day of May A. D. 189.2, personally appeared May May A. D. 189.2, the above named, who, after having had read over to Min in the hearing and presence of the two attesting witnesses the contents of the foregoing articles of agreement, voluntarily signed and acknowledged the same to be free act and deed. [L. S.] [L. S.] [L. S.]
ATTORNEY'S ACCEPTANCE.
Leave the following to be filled up by the Attorney.
And Now, to wit, this 23 day of Man A. D. 1893, I accept the provisions
contained in the foregoing articles of agreement, and will, to the best of my ability, endeavor faithfully to represent the interest of the claimant in the premises. I hereby certify that I have received from the claimant above named the sum
of
dollars being for postage and other expenses. And that these agreements have been issued in duplicate without additional cost to the claimant, as required by law, in excess of the fee above named, I having made no charge therefor.
WITNESS my hand the year and day above written.
Personally came M.V. TIERNEY, whom I know to be the person he represents
himself to be, and who, having signed the above acceptance of agreement, acknowledged the same to be his free act
[L. S.] Sutha & Sana [Notary Public.]
COMMISSIONER'S APPROVAL.
Approved for Dollars, and payable to

M. V. TIERNEY, of Washington, D. C., the recognized attorney.

Commissioner of Pensions.

NOTICE TO CLAIMANT.

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"SEC. 4785. No agent or attorney or other person shall demand or receive any other compensation for his service in prosecuting a claim for pension or bounty land than such as the Commissioner of Pensions shall direct to be paid to him, not exceeding \$25; nor shall such compensation, in whole or in part, agent, attorney, or other person demand or receive such compensation, in whole or in part, until such pension or bounty land claim shall be allowed: Provided, That in all claims allowed since June 20, 1878, where it shall appear to the satisfaction of the Commissioner of Pensions that

until such pension or bounty land claim shall be allowed: Provided, That in all claims allowed since June 20, 1878, where it shall appear to the satisfaction of the Commissioner of Pensions that the fee of \$10, or any part thereof, has not been paid, he shall cause the same to be deducted from the pension, and the pension agent to pay the same to the recognized attorney."

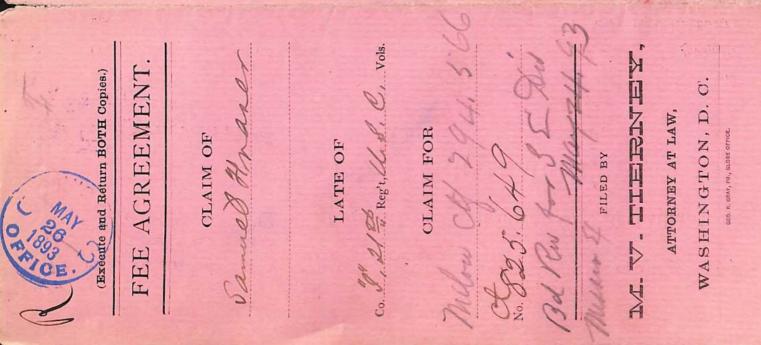
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And provided further, That no fee shall be dem

And if in the adjudication of any claim for pension in which such articles of agreement have been or may hereafter be filed it shall appear that the claimant had, prior to the execution thereof, paid to the attorney any sum for his services in such claim, and the amount so paid is not stipulated therein, then every such claim shall be adjudicated in the same manner as though no articles of agreement had been filed, deducting from the fee of \$10 allowed by law such sum as claimant shall show that he has paid to his said attorney.

Any agent or attorney or other person instrumental in prosecuting any claim for pension or bounty land who shall directly or indirectly contract for, demand, or receive or retain any greater compensation for his services or instrumentality in prosecuting a claim for pension or bounty land than is herein provided, or for payment thereof at any other time or in any other manner than is herein provided, or who shall wrongfully withhold from a pensioner or claimant the whole or any part of the pension or claim allowed and due such pensioner or claimant, or the land-warrant issued to any such claimant, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall for every such offense be fined not exceeding \$500, or imprisoned at hard labor not exceeding two years, or both, in the discretion of the court.

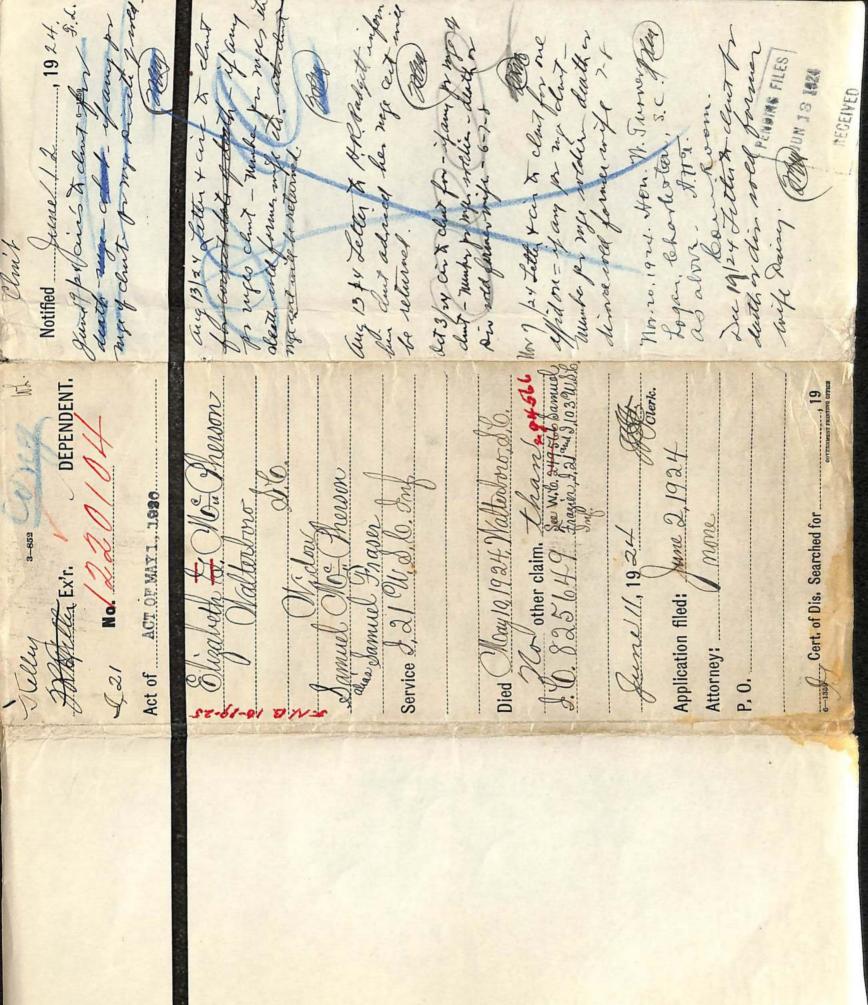
Approved July 4, 1884.



Declaration for Pension. Act of February 6, 1907.

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State of Jum	(Chrotaina	County of	Charliston	, 55:
			, A. D. one thousand nin	ne hundred and
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a/	2	Mithin	and for the County and S	State aforesaid,
Vanuel Or	ager, alias	, a resident of the		
91	Moslestin	County of	Charlotin	
State of Sle)	who, being duly swo	orn according to law, decl	ares that he is
60		***		11/14
the identical	//	· 21	was enrolled on the	1
day of May	, 18 6 4, in (Here	state rank, and company and	d regiment in the Army, or vess	els if in the Navy.)
	od States in the Carl	war and serve	a at least 90.	days, and
in the service of the Unite	(Civil or M	fexican,)	(90 days if Civil War; 60 days day of May	s if Mexican.)
Was Honorably Dischar	GED atlonis	Islandon the	day of May	, 1866
That he has Not	been employed	in the military or nava	l service otherwise than a	as stated above
		. 1		
		e statement of all other servi		
That he is 2	years of age, having beer	born on the	day of Apon	18 17
and asks for a pension o	18 15 p	er month [62 years of ag	e \$12; 70 years, \$15; 75 yea	rs or over, \$20.]
That he has	applied for p	ension under application	n No	That he
is a mangionar under Carti	ficate No. 82	5.649		
(If a pensioner, the cer	rtificate number only need be	given. If not, the number of	f the former application, if one	was made.)
That he makes this declar provisions of the act of Fe		peing placed on the pensi	ion roll of the United State	es under the
He hereby appoints,	All tall paner of salantile		-1:4 D	C -
			shington, D.	C.,
his true and lawful attorr	ieys to prosecute his clain	n.		
HIS POST OFFICE AI	DDRESS IS			
		(If in a city, give street and	d number of residence.)	
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Witnesses to s	signature;		(Claimant's Signature.)	
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Roll	B of, 00	PANSI	W.	
2 (Two persons who ca	an write must sign here.)	TY MA	YC	
		U. 5	3.	

Also personally appear	ed,	residing at
		and
residing at		nd who, being by me duly sworn, say they were present and
		n to believe from the appearance of said claimant and their
		dyears, respectively, that he is the they have no interest in the prosecution of this claim.
		1
Mignature by mark 18067	ne altested by two persons who write.)	(Signatures of two identifying witnesses.)
		day of, A. D., 190 celaration, &c., were fully made known and explained to the
applicant and witnesse	es before swearing, including the	e words
	nterest, direct or indirect, in the	added prosecution of this claim.
[L. S.]	Post Office address	
Note.—This should executed before an officer	be sworn to before a CLERK OF or not using a seal, his official chara Bureau a general certificate, cover the control of the cover of t	Court, Notary Public or Justice of the Peace. If acter should be certified to by a Clerk of Court, unless there ering his present term, and if said certificate has been filed,
Application for Pension.	Act of February 6, 1907. We APPLICANT: alian So Meyer Maner Co. Reg't M. (W. C. J. Tois.	M. V. Tierney & Co., Attorneys at Law. Washington, D. C.



January 2, 1926

Elizabeth McPherson Walterboro South Carolina

Madam:

In response to your letter of the twelfth ultimo in the case of the decessed pensioner. Samuel McPherson, certificate #825 649. I have to advise you that the only fund available through this Bureau for the purpose of reimbursing the person who bore the expenses of the last sickness and burial of a soldier pensioner is the pension accrued at his death which is payable in accordance with the act of March 2, 1895. The records show that the soldier was last paid at the rate of \$72 for the month ended May 4, 1924, and the pension accrued from that date to the date of his death, in the sum of \$9.60, was paid to you on October 30, 1925, as his legal widow as provided by the act of March 2, 1895.

Attention is called to the enclosed copy of the World War Veterans Act, 1925, which provides \$100 burial expenses in certain cases of veterans of any war. Application for benefits under this act mustbe addressed to the Director of the U.S. Veterans Bureau, Washington, D.C.

Your inquiry reagrding a marker for the soldier's grave should be addressed to the Quartermaster General, War Department, Washington, D. C.

Respectfully,

AVG

WINFIELD SCOTT Commissioner. DEC i2_ 25

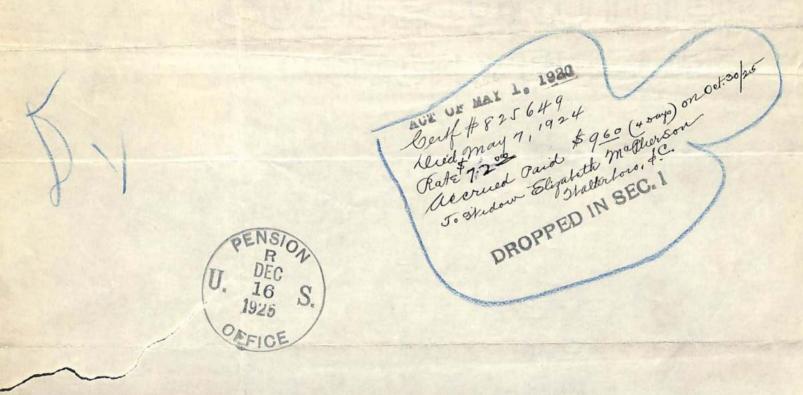
WALTERBORO sc
the commission
will you plea

washington dc

the commissioner of pensions
will you please let me know if you all is going to
furnish the tomb stone for samuel mc phersom and
furnel expensise ifso please letme know this is from

ELIZE BETETH

ELIZEBETH MC PHERSON WALTERBORO SC



Cheman restanting to the big bit them; en for control BONES OF PENSIONS

BEC 28, 1925

BEC 28, 1925

M. Raham

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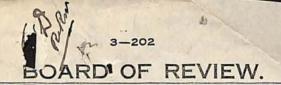
BOARD OF REVIEW.

DEPARTMENT OF THE INTERIOR,

BUREAU OF PENSIONS.

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DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

	Nec	- 11	,192	1
No. Claim,	17701	04		
Cert. No.				
Claimant,				
Claimant, M9	Therson!	Vis Fran	eev.	
C				
Respectfully &	Milon	us Die	rsion	
for complete the Peres	ance s	irth s	lipof	1
the Peres	riewer	dated	Decg	224
herewith.				
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Mula	CHIEF	, BOARD	F REVIEW	
J'hullo	ch lus	3		

BOARD OF REVIEW.

DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

Dec 9 , 1924 No. Claim, /220/04 Cert. No. .. Claimant Soldier, Service. Respectfully While the Claimen and her witheless Day poldier was not previously morried yet there is evidence - statements y hum and others made before a opecial Examiner when his same was in process of investigation to the effect that he was first married to Daisy (Mitchell) on Aforing voland S.C. He as stated to the special Exam Doe in 1901 (Deposition in widows brieg) Sharper Miller testified before Spa Ex amplon in 189

and names several others

also present at the Dame time. ad he further stated that after separating from the ooldeer Saisy was married to a man named ma Lood and in that year 1893 was living in Beaufort SC. It is Therefore oregarded That, before meuring the Expense of a opecial Examination at this time, the claim and be advised the Bureau is in possession of such information and that she is required to furnish proof of the dissolution of such marriage either by divorce or death of said former wife of soldier if either has occurred. Auturn of the papers to the adju-dicating division for this francose is suggested. THROWNOU The aleas, as soldier was pensioned and served should appear on both faxebriefs Colleton not Charleston for Charleston

BOARD OF REVIEW.

DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

Dec 1, 1924	
No. Claim, Wid 1220104	
Cert. No.	
Claimant, Soldier, Mr Pherson	
Soldier, Mi Therson	
Service,	
Horspecial examination	
to determine whether the soldier was married prior	
to his marriage to claimans	_
and if so to determine the	7700
death or divorce of the	
death or divorce of the	
See soldiers statement to	
Special examiner in 1901	
Chimant and soldie were marrie	4
Offinant and Soldie Were married by seremony april or 1884 and cohale of husband and wife to date of his death may 7-1924, a period of forty years.	
Of Muitock Review.	
* no divore in S. E. since 1878.	

DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

OFFICE OF SPECIAL EXAMINER

Atlanta, Ga.
July 15, 1925.

THE POSTMASTER, Walterboro, S. C.

Sir:

Kindly furnish, by notation hereon, the present address of

Elizabet h G. McPherson, (Colored)

O Cuyes.

Wallurfand & Q.

whose testimony is required in pension claim No. 1220104.

If in a city, please give street and number; if in the country, name of road, distance and direction from post office.

If not within your mail delivery, any aid you may give in locating the above named will be appreciated.

Very truly yours,

Inspector.

6-2019

DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

Washington, D. C. 3 1925, 19
WO No. 1220104
Mc Pherson
Mr. Fewell
SPECIAL EXAMINER.
The above-named case is herewith
mailed you for special examination.
Use number and surname given on this
receipt in entering case on your docket
and daily reports.
THIS RECEIPT SHOULD BE PROMPTLY RETURNED.
Received the above-named case this
day of July , 19.20
Eff Feund
SPECIAL EXAMINER

3-202 BUREAU OF PENSIONS

BOARD OF REVIEW

No. Claim, MC.	1	to	len	0	G	
nto	-77-	CHEZ	40		,	1925.
No. Claim.		122	01	of		
Cert. No.		-2/	g			
Soldier,	15	Pho	1300	al al	00)	Pases
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record clas	in	and	on.	are	رو	as
Elizabeth	110	-17	ues	ou/	as	
shown in S	6	rep	ort	pa	ge	5
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A	1	1	77	7	-	P-
	0	1	4	Lec	10	Ly
1011.1	1	2	Chief, 1	Board of	f Revi	ew.
Allullock	4	el.			C terre	
				GOVERNIENS	6—720	

DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS RECORD DIVISION

Briefed by 2 MB Morio. 1220104 V Cert. 825649 212156 Ledaim, Service record 10-19, 1925 No. claim, Alph'b record . Clerk. REMARKS: Lecardo Corrected Widow Division W. C. 966649 Samuel McPherson I, 21 U.S.C.Inf.

November 5, 1925.

Mrs. Elizabeth McPherson Walterboro, S. C.

Madam:

Your marriage certificate having served its purpose in your above entitled claim is returned herewith, as requested.

Respectfully,

Winfield Scott Commissioner.

MIK: ESB

Law Office Heber R. Padgett Walterboro, S.C. November 15th, 1924

Department of the Interior, Bureau of Pensions, Washington, D. C.

In Re: Widow Division W. O. 1220104

Samuel McPherson L, 21 U. S. C. Inf.

Gentlemen:-

You will find enclosed herewith an Affidavit of I. S. McGrath, which gives the information requested in your circular letter number 3-2053, dated November 7th, 1924.

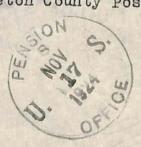
This woman, I am informed, needs assistance very badly, if she is going to get any, and she requests that you send a special examiner as early as possible.

I beg to call your attention to the Affidavit of I. S. Bell dated the 8th day of October 1924, in which he states that Samuel McPherson never married anyone before Elizabeth G. McPherson, and deponent states that he is 67 years of age.

It seems to me that this covers the matter fully, however I am sending an additional Affidavit.

Yours very truly,

HRP:H Encl. Heber R. Padgett, Service Officer, Colleton County Post #93, A. L.



Law Office Heber R. Padgett Walterboro. S.C. August 1st, 1924

er,

Department of the Interior, Bureau of Pensions, Washington, D. C.

> In Re: Widow Division W. O. 1220104 Samuel McPherson

Gentlemen: -

Co. I 21st. U.S.C. Inf.

In paragraph three (3) and four (4) of a letter dated July 3rd, 1924, referring to the above matter I wrote you as follows :-

"I also enclose and old certificate of marriage of Samuel Fraser Alias McPherson to Elizabeth Gruber dated April 22nd, 1884.

This old negro woman prizes this certificate very highly and as soon as you have had an opportunity to make a photostatic copy of it please return it to me so that I may deliver it to her again."

This old negro woman has been to the office requesting that I get this old certificate for her and as she is very old and hard to satisfy, I would thank you to return the certificate ifor you have finished with it, and if you have not, write me a letter stating that it is in safe keeping so that I can in turn advise the old woman.

Your prompt attention will greatly oblige. Thanking you.

Yours very truly.

Heber R. Padgett, Service Officer, Colleton County Post #93, A. L.

HRP:H



Ref Ctf.825649 I,21 J.S.C. Inf. 123-2 Bogard, St. Charleston, S.C. August 25 1923

Mr Washington Gardner Commissioner Washington, D.C.

Dear Sir: -

I received your letter relative to me reporting to Dr C. A.

Speissegger for examination but I am unable to report to his office and I have so advised him to that effect, so he said that I would have to find out if the examination could be made at home as I am unable to go to him.

Please advise me what to do im this matter, Hoping to hear from you soon I beg to remain yours respectfully



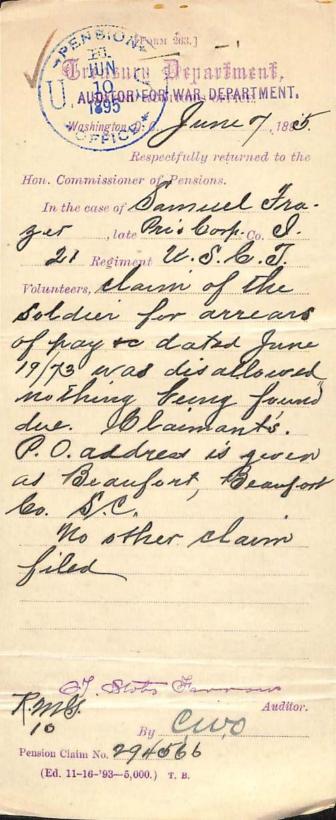
Samuel McPherson

Act of June 27 1800. INVALIDA
Roll So. / 8 / 8 (3- 1.)
Уаше.
m: Pherson, Samuel
III"I IWWOII, SUVIMUE
alias Samuel Frazer
Certificate No.
825-649
Disability:
Rank, Co., and Regiment:
0 6 0
J-21 Uslend
Rate and commencement of Pension:
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Marin Company Company
Date of Certificate:
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MAY 31 1901
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P. O. Address:
Maltinboro 25.
Colliton lo
Last paid to—
Alle an and
AUS 10 mot

T U JAN O 190, 5) Vam satisfied that the Pensioner is the soldier of neard. Judge Hrudroom Collected an illegal fee of 100 Hours I is barned by statute no aller inequantion. Volder Rumin la two names . attention is invited to the ruental mations of Solding.

closed because it is 9681 Preasury Department,

900 Weshington, Aug. 7", 1895: Eliza Frazier of this claim is identical Mespecifully returned to the with the one who claim pension as widow of 5 Samuel Frazier, last, 21" U. S. C. T. - pension Hon Commis of Pensions. The only claim filed in this office on ac Samuel Frazier, les claim 10.2943-66. lopy of reply to your is also enclosed. 2-1" 4.5.6. J. was filed by the soldier Dec. 15" 1893, and was rejected Rusindelain By Curo Ac 3 J. Tropo Farrow June 29", 1874, there being nothing deal. Eliza Frazier of Bluffton, 5.6. filed claim as widow of Samuel Frazier, lest, 103" U, 5.6. F. Dec. 4"/893. which was disallowed by lost. 214, 5-92, Janey 284, 1895: 100 by of laidence in this latter claim is again en-





Department of the Interior,

BUREAU OF PENSIONS,

Washington, D., C., , 189.... Respectfully Law Cff. be reissued to consect name to Canuel McCherson-alias Cannel Tracer ? Hurlis The widows claim, eff. 294.566 Thould have been kept with this case until both were disposed of privally.

Board of Rev. Division. Department of the Interior, BUREAU OF PENSIONS, Washington, D., C. Tely. 19, 1898 No. Claim,
Cert. No. 825649
Claimant, Samuel Fraser co. c. 21 Reg't U.S.C. vol. Inf. Respectfully refused to Mr. Messhorser, Chf. offer. Mr. Okinner, Ren. The reviewers Statement that there is "no record" in this case is literally true - as I can find no war Dept. reports whatever in the brief or among the propers in the factor. In I am made to verify the reviewers action. The orldiers con est name is daid to be Danuel Mine of Therson stone Should not the new

RECEIPT OF ORDER TO SUSPEND, RESUME, OR TERMINATE.

U. S. Pension Agency,

KNOXVIITE TENN,

June 1, 1894. , 189

The COMMISSIONER OF PENSIONS,

Washington, D. C.

SIR:			
I hereby ack	nowledge the receipt of you	ir order of May 10,	1894, 189
in the case of	Samuel Fraser		, Certificate
No. 825,649	, (formerly on	rolls) directing	that payment
of pension be	resumed.		
Last paid at \$	12.00 to May 4, 1	.893 , 18	
	Very respectfully,		
		Da Carper	ili
	0-4		Pension Agent.

1:025 b-25 p

ACT OF Sund 27 th 1890: \$ 1

DECLARATION FOR INVALID PENSION.

This must be Executed before a Court of Record or some Officer thereof having Custody of its Seal.

State of South Carolia Country of Calleton, 55:
ON THIS 8 day of July - A. D. one thousand eight hundred and ninety-
personally appeared before me, Master of the Camal Meas Court; a court of
record within and for the county and State aforesaid Samuel Anaser aged 46 years, a
resident of Walterhans' county of Callatan State of South Canalina
who, being duly sworn according to law, declares that he is the identical Samuel Haaser -
who was Enrolled on the and day of august - 1864 in Campany of al
Regiment U. S. C. J. (as Carperal)
in the War of the Rebellion and served at
least ninety days, and was Honorably Discharged at Mann's Saland fauth Canal
· · · · · · · · · · · · · · · · · · ·
That he is kantially unable to earn a support by reason of Aleumatian and lass of (Fartially or wholly.) Aight in left lyl
sight in left eye
That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief permanent.
That he has mot applied for pension under application No That he is mot
a pensioner under Certificate No. (If a pensioner, the Certificate number only need be given. If not, give the number of the former application
if one was made. If you have never applied for pension leave spaces blank.)
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. He hereby appoints
M. V. TIERNEY, of Washington, D. C.,
his true and lawful attorney to prosecute his claim. That his Post Office address is Walterhand, County of Calletan State of Sauth Canahna
Cane of b. G. Henderson - Samuel frager (Claimant's Signature.)
(Claimant's Signature.)
ATTEST:
Rehristopher Edmards
Jus Daris

The state of the s		M1
Also personally appeared Christopher S. C. residing at Walterbans' S. C.	Edwards residing	a Chackestrand
Also personally appeared	la a Da	
0.6.	nd vames wa	acci
residing at Malterband O. C.		persons whom I certify to be
respectable and entitled to credit, and who, being l		
Samuel Hraser	the claimant, sign l	is name (or make his mark)
to the foregoing declaration; that they have every reason		
acquaintance with him for Jan years and		
person he represents himself to be; and that they have n		
	Christo	pher Edula
	1	6.
	y cury (Signatur	es of witnesses.)
2-1	6	es of witnesses.) A. D. 18 90.
Sworn to and subscribed before me, this	day of July	A. D. 18 90.
and I hereby certify that the contents of	the above declaration, &c., w	vere fully made known and
explained to the applicant and witnesses b	efore swearing, including the w	ords —
~~~	erased, and the words	
aninimpo,	added; and that I have no in	
Whaten I have	added; and that I have no h	iterest, uncer or interect, in
the prosecution of this claim.	111	
SEAL	6. g. Ne	ndensan
	Manual 11	In D. Plan
	marles of the	al character.)
	and for e	belletan country o.
READ THESE NOTES CAREFULLY B	EFORE FILLING UP THE APPLI	CATION.
THE ACT OF 1890 REQUIRES		
An honorable discharge (but the certificate need not be fi A service of not less than ninety days.		
A permanent physical disability not due to vicious habits The rates under the act are graded from \$6 to \$12, pro-		
affected by the rank held.  A pensioner under existing laws may apply under this or	ne, or a pensioner under this one ma	y apply under other laws, but he
cannot draw more than ONE pension for the same period.  Fill up the blank carefully, and be particular to give the		
your application if you have made an application.		
	1874	
	No. of the last of	
N Nois Reg' N	S ASSE	<b>X</b>
SSIO SSIO MARS	JUL BY 9	田。
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DECLARATION FOR  JALID PENSI  Act of Sume 2 1 18  Superior Co. 9-21  J. S. C. Charles  J. J. J. C. Charles  J. J. J. C. Charles  J. J. Charles  J. J. C. Charles  J. J. C. Charles  J. J. C. Charles  J. J.		FILED BY  V. TIERN  Attorney at Law,  ASHINGTON, D  EVFICH 6. ADAMS, PRINTER.
A I I A I		PU T Orn Orn HILL
DECLAR Act of Manual		Att.
De de de la	1	
DECLAR INV ALII Act of Manne Name Manne Rank Canfan		E Z B
R Ra		

# SUPPLEMENTARY DEGLARATION OF GLAIMANT.

Act of June 27, 1890.

To be considered in connection with application heretofore filed.

and Short Odde and a a total han	
State of South County of County of State of ss:	
In the matter of Januel Traser,	
late of Co, C, A Reg't A D. Vols.	
ON THIS STATE OF THE STATE OF T	
ON THIS V a day of August , A. D., 18 6, personally appeared before me, a	
Arthropy Rublich in and for the aforesaid County, duly authorized to administer	111
	74
oaths. Anul Thaser, aged of years, a resident	n
Maltacher of Call to St. 7009!	Que
Malerborough, Colleton whose Post Office address is	
who being duly sworn according to law declares that he	-
is the identical anul Frasel, who enlisted May 186 48	
served at least ninety days, and was honorably discharged on the May 18 day of 1866	
served at least ninety days, and was honorably discharged on the Cay 10 day of 10 6	
from Co	
Cot to Vi in	
filed a claim for pension No. 023, 64 on account of certain disabilities alleged in	
his Original Declaration filed on or about	
He further declares that in addition to the said disabilities heretofore alleged, he is unable to earn a support by manual labor	
on account of showstram, neuralgea, hidney disease, bayanet wand	inc
Here give names of all disabilities you may have-wounds, injuries, and diseases.	
wound in les sight of the sand sight had insie as keaning and atte	do
	1 1/10
trecture, which causes almost entine - yerrein allie	ely
He further declares that none of said disabilities are in any way due to vicious labits, and are to the best of his knowledge	1
The further deciates that hole of said disabilities are in any way due to victous habits, and are to the best of this showledge	/-
and belief of a permanent character, and that he has not been in either the Military or Naval service since	1
11-1866 marion a Using 18613	
or prior to	
and that he makes this declaration for the purpose of being placed on the pension rolls of the United States under the provisions	4 8.
of the Act of June 27, 1890. Olies a fluxioner under Ctf #	0 2
He therefore requests that this supplemental declaration he accepted as a part of his Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and acceptance in a consistent of the Original claim and a consistent of the Original cla	
He therefore requests that this supplemental declaration be accepted as a part of his Original claim and considered in connec	
tion therewith.	
He thereby appoints	
The time of appoints	
M. V. TIERNEY, OF WASHINGTON, D. C.,	
THE COLUMN	
with full power of substitution and revocation, his true and lawful Attorney to prosecute his claim, and hereby agrees to allow his	
said Attorney the legal fee of TEN DOLLARS when the claim is allowed.	
1 Mo the	-
1 4 M. O Conderson Somuel frade	1
Claimant's signature.	
7 14 000 115	
Two persons who can write their names sign here.	
The names sign note:	

1 m No 1. \ 1/10 1/2	1
Also personally appeared f. M. Verdenam residing at Matterbura	0
South Canalia in and W. K. Lewis in	
residing at Malterbans' Se C. persons whom I certify to	pe )
respectable and entitled to credit, and who being by me duly sworn, say that they were present and saw the claimant, Sam	mel
Hraser sign his name (or make his mark) to the foregoi	ng
declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with him f	
1 1	
years and years, respectively, that he is the identical person he repr	e-
sents himself to be, and that they have no interest in the prosecution of this claim.	
J. M. Henderen	2
on B.	
If either of the identifying witnesses sign by mark, two witnesses  Signature of witnesses.	
who can write their names MUST sign on these two lines.	
Sworn to and subscribed before me this U a day of Mufutto - A. D. 189 6, and	I
hereby certify that the contents of the above declaration, &c., were fully made known are	d
explained to the applicant and witnesses before swearing, including the words	
[SEAL] erased and the words	
added; and that I have no interest, direct or indirect, in the prosecution	
7 +0.071 10.819	"
of this claim. O. G. Newders	and
Official signature.	1
"Matay Kublic for 2	o. Ca
(Centificate filed)	
the State of lant Carolina	
collection Country 3 I, A. D. Radgett, Can	6. 14
chelenan chunny 3 VIII I Blic W.	so ogn
lount of Cam. Pleas Has	no Varaci
for about County and in above thato, do eso,	tify, M.
W. V. Hendersay is a tolary Kubico, dely Comme	aciano
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and his Commission will expend at the will of	110
Gavennar. His dignature asstatavy about is gene	end,
seven under my Hand Head of Office, this august 14	1896.
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Supplemental Declaration  of Claimany  of Claimany  source  Act of June 27, 1890.  No. 516 1914.  No. 516 1914.  Registed August 1868.  Discharged May 16, 1868.  M.V. TIERNEY  ATTORNEY AT LAW  ATTORNEY AT LAW	B. AUG.
Supplemental Declaration  of Claimant  of Claimant  For  of Claimant  of Claimant  Act of June 27, 1890.  No. 622644.  No. 6244.  No. 622644.  Pristed Mayard  18 63.  Discharged May 18, 18 66.  M.V. TIERNEY  ATTORNEY AT LAW.	N ON

N

# GENERAL AFFIDAVIT.

State of South Caroling, County of Colletan, ss.
In the matter of the pension claim of Samuel Othaser, late Private Co. Cl. 2/ Reg't W. D. C. Inf Vols.
ON THIS 18 Th day of September , A. B., 189 3, personally appeared before me, a
oaths, Friday Namiltan in and for the aforesaid County, duly authorized to administer oaths, Friday Namiltan aged 5-2 years, a resident of
Malterband' in the County of Calletan and State of
South Canalina whose Post-office address is Matterbars, Calletan Cos S. C. maid aged years, a re-
sident ofin the County of
and State of whose Post-office address is
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares each for himself, in relation to aforesaid case, as follows:
[Note.—Afflants should state how they gained a knowledge of the facts to which they testify.]
That Departe was a member of Co 9 34 Regtilles.
Regt: U. S. C. J. during the Cato war, at Nictais Ale
S.C. where he was sieb for along time with
small pay, that his recovery pering also be the
had him as an orderly in his office; that he
Community with him. That Samuel Houser is
new an ald man and quite infiner, what he is
totally blind in one eye and can see little and
thouther, is weakly canatituded, a sufferer fram
many ailments, and that he is almost entirely incapable of manual labor. He amos traines of
poor land only, and a little shanty anity meallestents
makes little arms onap, and is dependent an
this for a living, almost all lost by the storm, sin
his pension stopped. He has a thip and four little children dependent on him. His case
is a deplarable and,
y-hally,
· Borella
further declare that the that no interest in said case, and not concerned
in its prosecution.

If Affiants sign by mark, two persons who can write must sign here.

Signature of Affiants.

State of South Carolina Sworn to and subscribed before me this day by the	County of Stat Lord said affidavit to
said affiant , including the words	eresed
and the words	added,
and acquainted Kennwith its contents before	executed the same. I further certify that I am in
nowise interested in said case, nor am I concerned in its p to me and that Al A credible person	rosecution: and that said affiant personally known  On Gomenia Signature.
[SEAL.]	Master for Calletan Costs. C
To be executed before any person authorize	ed to administer oaths, one having a seal preferred.

ADDITIONAL EVIDENCE

Claim No.

Claim No.

Claim No.

M. AFFIDAVIT OF

FILED BY

M. -V. TIERNEY,

Attorney-at-Law,

WASHINGTON, D. C.

C.A. Beckert, Printer, Cor. E& Fifth SES, N. W.

# GENERAL AFFIDA WORK

State of South Carolina, County of Calletan, ss.
In the matter of the pension claim of Jamuel Hassel late Private Co. 2/ Reg't W. S. C. Conf. Vols.
ON THIS 18 day of September, A. B., 1893, personally appeared before me, a
oaths, Charles Bruck aged 48 years, a resident of
Walter Gains' _ in the County of Calletan _ and State of
South Carolina whose Post-office address is Walterbard Calleton Con
Si C
and State ofwhose Post-office address is
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares each for himself, in relation to aforesaid case, as follows:
2 hat he final bever Samuel Hraser of Cs. f. 21
Regt: U. S. C. Enfr during the late War, Olpanone
being a member of Co it 35 the Regi U. S. C. Enfs),
they have been near neighbours, that in his opinion
samuel Hraser is blind in one life and sees
Sufferer fram disease, "some of the Contracte
duning served with war, to with small pax.
of manual labor, and wanth is title that
be is entirely dependent an work for a living.
and an obtispied that this would be the
white and colored, in He has a thips and
four Children, dependent an him. His case
is a pitiable and to be drapped from the Pension
Le further declare that Le Las no interest in said case, and so not concerned
in its prosecution.  Charles Bruck
markes prince

Signature of Affiants.

If Affiants sign by mark, two persons who can write must sign here.

State of South Canalia Sworn to and subscribed before me this day by the al	County of and Lee	Clekan ss:
said affiant , including the words	S Notes	erased
and the words with its contents before		I further certify that I am in
nowise interested in said case, nor am I concerned in its proto me and that credible person .	osecution; and that said affian	personally known
[SEAL.]	Marter for	Colletan Csi Si C
To be executed before any person authorized	l to administer oaths, or	ne having a seal preferred.



Late Private _ co. Oly 21 th Regi U. S. C. Lybross, M. V. TIERNEY, of Hamuel Hrasel ADDITIONAL EVIDENCE C. A. Beckert, Printer, Cor. E & Fifth Sts., N. W. Attorney-at-Law, Danles Bruek WASHINGTON, D. C.

OITE ENIMES X 31 County of Doctor's name and P. C ..... County of Calletan being first duly sworn, says that his age is now. J.J. years, and that he is a regular physician of . 38. years standing, and that he has this day examined carefully one. Vanue who, he is informed, was late a ... Regulate in Company ... 2/ T. Regulate Vols., and finds him afflicted as follows: with wheumaking Name of soldier. Doctor: Here inquinos hannia on le the disability s in head! in good w upon which pension is claimed as you find it now examinaand state also for what was the probable cause, all rational and physi-cal signs of each disease. this place drawing a pension except and he further says that the said Samuel Hraner is incapacitated for the performance of manual labor by reason of aforesaid disabilities in about the following degree :.. Here state in about what deee claiment is MENT. TO state about and the affiant further says that he is in nowise interested in the prosecution of this claim for S1011. Subscribed and sworn before me, this ... At and day of Albanany 189 4 The affiant is a credible witness, and the person he represents in the foregoing affidavit. I am not interested in this claim. Witness my hand and seal the day and year above written. OFFICIAL SIGNATURE.] Master for Calleton Caro C.

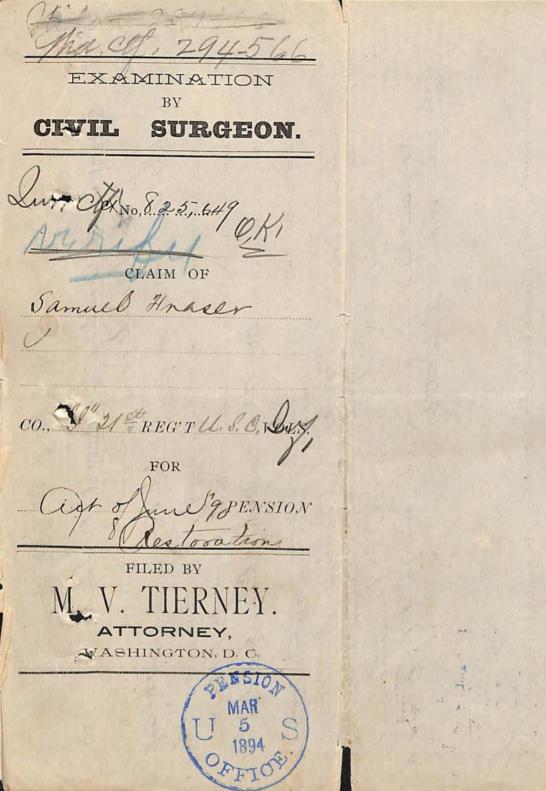
I certify that 6. G. Henderson Esq., who hath signed his name to the
foregoing declaration and affidavit was at the time of so doing
and ometal acts are entitled to fill faith and and gradit and that him.
Witness my hand and seal of office, this 26 Holy day of Helmany 189 H. Clerk of the Court Pleas Hand Season Court
[L. S] Clerk of the Court Pleas & General Court
To be executed before any person authorized to administer oaths.
20 to exceuted before any person authorized to administer oaths.
PENSIO
(C) FEB 2 (C) 1894 (C)



How the 294666 EXAMINATION BY BY BY BY GIVIL SURGEON.		Samuel Houser -	Sal the REGIT W. S. C. VOLS.	A of frue POPENSION	M. V. TIERNEY.  * ATTORNEY,  WASHINGTON, D. C.
Shid GIV	4	Sam	00.00	(2)	

County of Doctor's name ... M. D., whose P. O. address and P. O. address. being first duly sworn, says that his age is now 37... years, and that he is a regular physician of ... 9. years standing, and that he has this day examined carefully one. Samuel Hasser who, he is informed, was late a ... Prevato in Company ... 21 Reg't . Reg't . ... Vols., and finds him afflicted as follows: a partial streshure of the Unethra with Name of soldier. of night, with inquiral hennia Doctor: Here give a full and the Wiscourity upon which pension is claimed as on left side, in had weather he cannot won you find it now upon examination, and state has neuraligia in his head, in good weather he what was the probable cause, giving all ra-tional and physical signs of each disease. and he further says that the said . Samuel Hraal . is incapacitated for the performance of manual labor by reason of aforesaid disabilities in about the following degree :.... to (3/4/ ophis Temo; 2 Here state in about what degree claimant is disabled IN YOUR JUDG-MENT. That

is state abo



To be executed before any person authorized to administer oaths

# GENERAL AFFIDAVIT.

State of South Carolina, County of Calletan ss:
In the matter of Danuel Hnaser latte Prinate Cs. I. 21 - Required U. S. C. Y.
ON THIS 21 cb day of Augusto A. D. 1896, personally appeared before me a
Astray Public in and for the aforesaid County, duly authorized to administer
oaths David Gruber, aged Mout Tyears, a resident of
Matter trans' in the County of Calletan w and State of
South Carolina, whose post office address is Malter hand, Calleton Cs.  S. C. and Jasoph Hasser — aged about 48 years, a resident of
Malterbans in the County of Calleran
and State of South Canalina , whose post office address is Walterhand!
Callatan Oc. S. C. and who being duly sworn, declares each for himself, in relation
to aforesaid case as follows: I key refer to their report affidants
NOTE - Affiants should state how they gain a knowledge of the facts to which they testify!
Hrases is affected with houmstian, neuralgia, kidne
disease, begant wound in chest, wound in leg, sight oflett
eye gand, and that opighteys badly affected inquire
hernia an left side and stricture of the unethra,
to the hest spector belief, and that there diseases
almost entirely disable him, and they now say,
that there diseases have existed to a greater or less
extent such the filing of them claim herein, and
that they are not due to any visions habits on his
part. The applicant is a man ofgood character and
hapits, and is an exhanter with a M. E. Church.
this affident prepared for is this day ab Watter-
boro's. C. by the tolary, and in making same we
were not aided by any printed or written stationate,
nor prampted by same, - Our reasons for show he
safe sot aut infames afficients surlang asquantioned with traser. They have no interest in said case and and
They further declare that they hand no interest in said case and
In Mo Menderson David X Gruber
If affiant sign by X mark, two persons who can write sign here.  Signature of affiants.
If affiant sign by X mark, two persons who can write sign here. Signature of affiants.

State of Estate Cas	Line , County of Calleton ss:
NOTARY PUBLIC, \$	and I hereby certify that the contents of the above affidavit was fully made known, explained and read over to the affiants before swearing, including the words erased, and the words added; that affiant A AA known To
TH GAROLIN	to be reputable and entitled to credit as witnesses, and that I have no interest, direct
	or indirect, in the prosecution of this claim.  O. G. Wendenson  Lottary Rublio for Ss. Co  Official signature.  Official character.
executed before an officer not using seal, his	e a CLERK OF COURT, NOTARY PUBLIC OR JUSTICE OF THE PEACE. If s official character should be certified to by a Clerk of Court, unless there is on file in vering his present term, and, if said certificate has been filed, he should state so opposite

ABDITIONAL EVIDENCE.

Chaim, No. & 2.5, 6449

of Same of the Co.

Late Mark Co.

Late Mark Co.

Meridan Co.

Act of June 87, 1880 X 825649

Ju the accompanying Olemi og Eliga d'ragni widow og Somme Ina. gree alterten is oferally Culled to the record War Defit: in which it is Thom that there are two Tiregress in Os of 21" U.O.C. I. and lew in the Regl: Sheeral Excly Ms also mentines several regiments. There are several witnesses who were not sem by Thee & and especially Clarence B Kirls in porticular whose testing is very of ecific trus this Sam Fragee who died mi Pluffla apr 10/85: Bolls he and the woman worked for this witness.

Clarence B Paide -Qel 8/95 That Somme Fragier (a heunamy and his infe Elega worked forhum 4 years - Truzies doed m Sluffen april 983 Morris Brunde of develey Duffy - Som donni did about 10 years ag on Elizais hus band Deems to have been the man who served in Co. 8. 1037 U.s.C.P.

Act of June 27, 1890.

INVALID PENSION Regiment, per month, commencing ... Disabled by RECOGNIZED ATTORNEY. Fee, \$ ...... Agent to pay. Articles filed, ....., 189 . APPROVALS. Approved for ..... Approved for ..... Legal Reviewer. Medical Referee. _____, 189 . ....., 189 . now pensioned under other laws. Last paid to ______, 189 , at \$ Pensioned from ______, 18_____, at \$ ______, for _______



## DECLARATION FOR PENSION.

Act of May 1, 1920.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of South Carolina , Count	ty of Charleston , ss:
On this 8th, day of June	
	, who makes the following declaration as an application Z
for pension under the provisions of the act of Congress approved May 1, 1	
That he is 83 years of age; that he was born	1839 , 1 ,
at Pinkney Island, S.C.	4
That he is the identical Samuel McPherson	, who 0
ENLISTED June 18 , 1864 , at Hilton H	
Samuel Frasier , in Pvt.	
	state company and regiment, if in the Army; or vessel, if in the Navy.)  I , and was honorably
DISCHARGED June , 1.866 , at M	
the United States, in the Civil (State name of war, Civil or Mexican.)	none
That he also served(Here give a complete statement of all ot	her military or naval service, if any, at whatever time rendered.)
none	Ш
That otherwise than herein stated he was none employed in the	
That his personal description at time of first enlistment was as follows	
color of eyes Black ; color of hair Black ; the	
That since leaving the service he has resided at	Minister
	0
and his occupation has been Press	ching o
That he requires the regular personal aid and attendance of another	person on account of the following disabilities:
Bypertrophiod Prostate (State in this space the nature	of any and all disabilities.)
	<u> </u>
That he has required such regular aid and attendance since	Sept 1922 to the present
That he hasapplied for pension under Original No	825649 ; that he is a pensioner under g
Certificate No. 825,649	Melhannes
My Amount	( Clay was to be
(1) (Signature of first witness.)	- Dummel =
66 Bockerd It	(Claimant's signature in full.)
(Address of first witness.)	(Claimant's address in full.)
(Address of first witness.)  (2) Golgo Morros  (signature of second witness.)	·
59 Chatal St Ober &	
(Address of second witness.)	Z.
Subscribed and sworn to before me this	June, 192 3, and I hereby certify that the
contents of the above declaration were fully made known and explained	to the applicant before swearing, including the words
erased, and the words	added; and that I have no interest 0
direct or indirect, in the prosecution of this claim.	Privel
1.984.	Mu, Stoam
	Notary Public for S. C.
[L, S.] 4.8.	(Official character.)
EFICH A STATE OF THE STATE OF T	29 Percy, St. Charleston S.C.  (Post-office address of officer.)  e-eigs
1923	ant pe
S DE DI	Declaration according to the second s
Nut W	De a clean May 1 10 st

Claimant should answer fully the following:

No. 1. Are you a married man? If so, state your wife's full name and her maiden name. Answer: Yes

Elizabeth Gruber McPherson

No. 2. When, where, and by whom were you married to your present wife? Answer: Walterboro S.C.

April 28, 1884, by Rev. E. H. Gourdin.

No. 3. What record of your marriage to her exists? Answer: My Marriage Certificate.

No. 4. Were you previously married? Answer: MC. If so, state the name of your former wife or wives, the date of your marriage to each, and the date and place of death or divorce of each former wife. Answer: MCNE.

No. 5. Have you any children under 16 years of age living? If so, state their names and the dates of their birth. Answer: MCNE.

Segmature of chainmant.)

between the attendant and the claimant.

of another person; or, if the claimant's attendant showing the character and frequency of the aid and attendance required; whether the claimant is confined to the house or to his bed and, if so, whether for the whole or only a portion of the time; and the relationship existing claimant is confined to the house or to his bed and, if so, whether for the whole or only a portion of the time; and the relationship existing

If applicant claims that, by reason of age and physical or mental disabilities, he is helpless or blind, or so nearly helpless or blind as to require the regular personal aid and attendance of another person, he should file in support of his application:

The sworn statement of the attending or family physician, describing the disabilities which require the regular personal aid and attendance.

The sworn statement of the attending or family physician, describing the disabilities which require the regular personal aid and attendance.

### INSTRUCTIONS.

Section 2 reads as follows: That every person who served ninety days or more in the Army, Navy, or Marine Corps of the United States during the Civil War, and who has been honorably discharged therefrom, or who, having so served less than ninety days, was discharged for a disability incurred in the service and in the line of duty, or is now upon the pension rolls as a Civil War veteran, and every person who served sixty days or more in the War with Mexico, or on the coasts or frontier thereof, or en route thereto, during the war with that nation, and was honorably discharged therefrom, and who is now, or hereafter may become, by reason of age and physical or mental disabilities, helpless or blind as to require the regular personal aid and attendance of another person, shall be entitled to and shall be paid a pension at the rate of \$72 per month.

### Act Approved May 1, 1920.

3-026	Act Approved May 1, 1920.  OECLARATION FOR PENSION.	umber	laimantervice	INSTRUCTIONS.	This form is only to be used by or in behalf of one who esires to claim original pension or under section 2 of the act of May 1, 1920, because he requires the regular ersonal aid and attendance of another person. The declaration and testimony in support thereof tould be executed before some officer authorized to liminister oaths for general purposes.	6—6198	THE STATE OF THE S

RG. 825.649

STATE OF SOUTH CAROLINA

SS

COUNTY OF CHARLESTON

Personally appeared before me a Notary Public in and for the aforesaid State and County a Elizabeth McPherson, age. 7.0 residing at 123-2 Bogard, St. in the City of Charleston, S.C. who being duly sworn acording to law say that she is the wife of Samuel McPherson, Co I, 21 Reg. U.S.C. Inf. who has been sick since September 1922.

She further swears that she had to stop her out side of home work and stay home to be the attendante since September up to now that her husband has been totally unable to help him-self or do anything in regards to labor of any kind.

She further swears that he has been in the care of attendant since September as she had to do for him such as dress him bathe and undress him and some times proped him up and feed him, he is in need of such aid of another person.

Digned Elizabeth XIM Ther

Sworn to before me this 11th. day of August, A.D. 1923

Notary Public for South Carolina.

RESIDENCE 47 BOGARD ST.

W. M. THORNE, M.D.

May 11, 1923

To Whom this way concern! -Thereby certify that sound bu therson of 123½ Bogard Sty Cooreston, S.C. Kas bern Muder ruy Profrosional Care from Supt 1922 To present may 11, 1923 - Forst for Duque from which was followed by reliation of write due to a befrertropland prostate,

State of S.C. SC. Respectfully Control chineston Respectfully Swam to before my 1923. The Me Sleone Med the 11 day of may 1923. The Me Sleone Med

Swspann Public for S.C.



State of South Carolina,

County of Charleston.

Personally appeared before me Dr. William M. Thorne, who, being duly sworn, deposes and says: That he is a regular · liscensed physician, practicing in the State of South Carolina; that he has been and is still treating Mr. Samuel McPherson at # 123 1/2 Bogard Street, Charleston, S. C.; that his first visit to said Mr. Samuel McPherson was on the 23rd day of September, 1922; that at this time the patient was suffering an attack of dengue; that the patient's mental and physical conditions were impaired, due to toxins, asthenia, and senility together with his deformities; that since said date the patient has been disabled, and that on the patient's first to venture out alone with only the aid of a stick he was injured by a trolly-car, the date of same was January 5th, 1923; that said injuries, viz bruises on head, back and legs, confined the patient to bed for three weeks; that on February 4th, 1923 the patient contracted influenza, which left as a sequele a congested hypertrophied prostate, an accompanying cystitis, retention of urine and a toxemia, the same requiring repeated catheterization and irrigation of the bladder; that the patient has been confined to his bed or in an invalid chair at his home since January 5th; 1923; that throughout this entire period of confinement from combined illnesses i.e Sept. 23rd, 1922 to the prenent date the patient has been under his professional care ; that during the entire period the patient's condition necessitated the aid of an attendant in answering the the calls of nature and many times there were involuntary bowel movements; that the patient was unable to dress and undress himself without the aid of an assistant; that at present the patient has improved but remains an invalid. That the foregoing is true to the best of my knowledge

and belief.

Signed low. M. Thomas M.

Sworn to and Subscribed before

me this 15th day, of Cengar 1923

Motory Public for 88,

25.825649 Januel Merherson, alia Samuel Grasor 3, 21 28.88; A69 0F EST 1, 1986

(3-14) a.)

H ACT OF JUNE	27, 1890.
1NVALID	PENSION.
lange Time	SUSPENSION REMOVED
P. O. Walterboro	Rank, Private
county, Colletter	Company, Company, Company, Company, Company, Company, Company
State, 12 S.C.	Resiment, 21. 11.2. C. (401. 001g.
Rate, \$, per month, commencing	
No -	1 2 7 1
Disabled by Aller Trong	both eyes
PEGGGNIZED	ATTORNEY.
m 7/ Ties de la	l nos
Name, 11. 1. Menney	Fee, \$ 10 Agent to pay.  Articles filed,, 189
P. O.,	
	2, O. W. Reed, Examiner.
Submitted for ad June 18, 188 Re. Sub for ad May. 12, 1892 Approved for Approved for	Approved for Recurration
Approved for	and impaired light both
MKM	Eyes Fizz
Sin Sandial	The fire of the
The 17/92 Kurfill Legal Reviewer.	Nedical Referee.
now pensioned under other laws. Las.	t paid to
Pensioned from, 18, at \$	, for
SERVICE SHOW	WN BY RECORD.
Enlisted Sep 10, 1864, and	
Re-enlisted , 18 ,	honorably discharged, 18, 18
peclaration filed pully 10, 1890, all from theun nation	leges permanent disability, not due to vicious habits,
of left eye.	
1 Writes	Ao m.C.

7183 b—200 m

Restaration Winder Act of June 27, 1890.

# INVALID PENSION 27 8250

Claimant, Domnel Hor	
	(V)
P.O. Waller forunde	Rank,
County, Collins	Company, "
State,	Regiment, 2/" In A. B. Vie my
Rate, \$, per month, commenc.	ing
, per montre, commence	ing
<u> </u>	
Disabled by	
7	
RECOGNIZE	ED ATTORNEY.
7- 2/0	
Name, Pl. U. Vierra	Fee, \$ Agent to pay.
/ - 4	S
P.O.,	Articles filed, Zuzza, 189.
APPRO	OVALS.
21.50 2 -	75
Submitted for Ly Mich 3, 189	40 Mesa, Examiner.
Approved for	Approved for
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Legal Reviewer.	Medical Referee.
, 189 .	, 189 .
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now pensioned under other laws. Last p	naid to, 189 , at \$
Pensioned from 18 at \$	, for
Tensionea from	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SERVICE SHOW	VN BY RECORD.
Enlisted, 18,	honorably discharged, 18
Ke-enlisted, 18,	honorably discharged, 18,
Declaration filed 11/4 911 189 4all	eges permanent disability, not due to vicious habits.
0.7.	eges permanent disability, not due to vicious habits,
from comment and or	alim h Colla Under
ace bra 2711/8911	•
The total	

RECORD & PENSION OFFICE ...

WAR DEPARTMENT

Div. NEW , Ex

# Department of the Interior,

BUREAU OF PENSIONS,

Bashington. D. & Heby 2. 189.8

Respectfully referred to the Chief of the Record and Pension Office, War Department, requesting a full military and medical history of the soldier _____

No other report on file.

hur off No. 8 2 5 6 4 9

Name, Samuel d'ruser

co. 8 & 1" Reg't Wto Me by

*

Ferord and Bension Office,

War Department, Washington, D. C."

WAR DEPARTMENT.

Respectfully returned to the

Phase &	Pry O	1.2	dam.
Rased as Samuel	with s	1,21 Regit W. b. Inf	Commissioner of Pensions.
and	John Cel	26.21	her of
annu	10	6. 9	Pensi
es	, 186 6	7	ons.

From Course, 186, to MO, 186, he held the rank of Per

The medical records show him treated as follows

21. as Colding

- 23 65 Sephilis.

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and during that period the rolls show him present except as follows

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Modera March 13, 65.

Modera March 13, 65.

Mohere Were ten 10 men

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of them this period refers

Mothery assessed found.



BY AUTHORITY OF THE SECRETARY OF WAR:

Colonel, U. S. Army, Chief of Office

Poom. Washington, D. C., FEB 8 1898

(COMMISSIONER OF PENSIONS.)

(280)

Department of the Interior, BUREAU OF PENSIONS,

Washingion. D. E., March 5, 189 8 Beespectfully relieved to the

Wen department whire-Record and Benon Office

to me han- franchist. speed for a dufheali Fichmany 80 1898, which

murlar of and courses: has hear lost on

The Sylvanol oto Valhus report-on

my at 825 649

Bd & 21" Was me hy fainel trager

Accord and Bension Office,

WAR DEPARTMENT.

Respectfully returned to the

Commissioner of Pensions.

co. J. 21 Regit USE Ongh.
was enrolled Off 10 .186 4
and Mr. O. Off 25, 186 4 Samuel Traguer

he held the rank of Cor.

and during that period the rolls show him present

(me dispussio): - Trasier

Pr. Co. J. 21 le 8 C. Suf, Jan 21,

to 23, 66, 84 fliels,

Y There were hor men name

Fragies in C. J. and ten in 21. Rept user, and it USCOM, Treated View. 13.65 The medical records show him treated as follows nothing additioned found. Cannot be determined to which of them this nem selati . Tragie, Kauk -, Co-, 21

BY AUTHORITY OF THE SECRETARY OF WAR:

7. C. Colonel, U. S. Army, Chief of Office.

(COMMISSIONER OF PENSIONS.)

Washington, D. C., WAR '8 1898

RECORD & PENSION OFFICE
WAR DEPARTMENT

The medical records show him treated as follows Use soyears. Or surant, Black laws of owner not of pleased Bons in Charleston S.C. Respectfully returned to the Commissioner Complyion, hair and eyes, and during that period the rolls show him WAR DEPARTMENT, RECORD AND PENSION DIVISION. , 186..., to... Namuel Fran present except as follows: (3-060.) Co. 21, Reg't U. A. he held the rank of... was enrotted Pensions.

1

all Mujorand Saryeon, U. S. Army. By authority of the Secretary of War: at huminosh Per m.

Detal 1 1890

found on rolls of

1

-1 (COMMISSIONER OF PENSIONS.)

From

(3-060.)

Dapheali

So Div.
New exc. Department of the Interior,
No. 24 826 649  BUREAU OF PENSIONS,
. Samuel J'rucies
Washington, D. C., July 25, 1898
Sir io È
Jesule of that A annel Trainer enlisted Phril 24, 1863
It alleged that A annuel Fragues enlisted April 24, 1863.  Ind stand as a Private in Co. 8 (1/21" Reg't WHO val by
in Co. Reg't
and was discharged at Morris Is land, S.C. May -, 1866
It is also alleged that while on duty at / Kilters Head & C.
on or about January, 1865, he was disabled by Acuralge in and
Kidney distase.
and was treated in hospitals of which the names, locations, and dates of treatment are as follows: Nellow
1
Bleare give Jull purmal direription than of former one of the report-from War Department of about
I there give full primar at the fire of the
the report-from War Departund of Word
Oleby 1, 1871 as lost
In case of the above-named soldier the War Department is requested to furnish an official statement showing
his full military and medical history. Please give the rank he held at the time he is claimed to have incurred the
disability alleged, and if records show that he was not in line of duty during that period, let the fact be stated.

The Chief of the Record and Pension Office, War Department.

Very respectfully,

Commissioner.

# PROOF OF DISABILITY.

1 1

So it and all and a Colotano so	
State of South Caralina, County of College, ss:	
ON THIS day of day of A. D., 1896, personally appeared before me, a	
Andlary Mublish in and for the aforesaid County, duly authorized to administer	
oaths. Haarb Ferdier, aged years, a resident of	
ormer brakesawhand in the County of Calleton and State of	
South Carolina who being duly sworn according to law, state of that he is well aquainted with	
Samuel Anaser applicant for Invalid Pension, and known to the said. Hank -	
01.60	
to be the identical person of that name who enlisted or volunteered as a mustle	
in Company of Regiment of U. J. C. Vols, and who	
(Died or was Discharged.	
18 th day of line 1866, by reason of time aligned.	
Acte insert die reason of solution	
discharge, if known; if not known, so state; or if he died, so state.  That the said Daniel Hall when while in the line of his duty, at or near	
askan willo (after battle of Cluster) in the State of Hlands and did, on or	
about the day of All All All All All All All All All Al	
Here state the time and place and manner in which the wound or injury was received. Describe the wound or injury, the part of the body	
wounded or injured and all the circumstances attending it. It sickyess, state time and place when contracted, what caused it, the name of the	
affected him asks render him unfit for military duty at 140	
sickness, and how it affected him	a
Jack that know ided river by An Namb. also that gaid	
wel trasen duringlatter part of sport year was wounded in balle by a vayant on ma	2
wand was in his Chart. And new chart the 1 and so so the the	7
That the facts are personally known to the affiant, by reason of Here state whether the affiant was with the command at the Regiment U. S. C. J. All sand Regiment to which Samuel Fire sees	,
time the claimant contracted his disability or whether his knowledge was otherwise obtained. And reasons in full for knowing the facts to	
time the claimant contracted his disability or whether his knowledge was otherwise obtained. And reasons in full for knowing the facts to which they certify.	
famb Regiment, the Regiment almost always acted as a	
whole, the companies being together and offent presentationed	-
	40
this affidant was prepared forme, and in	
making same I was not aided nor knowpted by	
any pointed or waitten shakement, The facts therein	>
stated were namated by me to the hotary, and taken	
dawn by him this day at Walterbans' S. C.	

And deponent further state that he is well acquainted with clajmant, having known him for at le	ast
thinly four years and further, that his knowledge of the facts above state	ted
derived from said acquaintance, and from having served as Sergearto of Copmany of	
Mention Rank.	
Regiment of U. S. C. Volunteers, from the	
day of light 1863, to the day of line 1866.	
And deponent further states that the claimant was a sound and able-bodied man at and prior to enlishment so far as	2
knew, and that the totally disinterested in this claim.	
Post office address of affiant is Idaksanbaro' Calletan Csi S. C.	سب
O Ma the days	
J. M. O. Denacueron	
or no the Kare die	
[If affiant sign by mark, two persons who can write sign here]. [Signafure A.Affiants].	
STATE OF South Canalina , COUNTY OF Callettan	ss:
Sworn to and subscribed before me this day by the above named affiant , and I certify that I read said affidavit to sa	aid
affiant , including the words	
erased and the words	
added, and acquainted herry un	
with its contents before executed the same. I further certify that I am in no wise interested	in
said case, nor am I concerned in its prosecution; and that said affiant	
that the is a credible person.	.nu
· · · · · · · · · · · · · · · · · · ·	\
6. G. Hendenson	).
!Official signature.]	
G. B. HENDERSON Latter Puplice King & a - Sai O	11
A MILASIV & PUBLIC, of Continue of the state	,
Centificate files)	
The state of the s	
wision.  "Sion."  "A.S. O.	
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Persion.

Per

State of South Carolina, County of Calleton , ss:
a a no i o a
ON THIS Land day of June A. D., 18 96, personally appeared before me, a
paths. Rany Railey and aged 60 to years, a resident of
orneas lasks melans in the County of Collation and State of
South Canalina, who being duly sworn according to law, states that he is well aquainted with
Samuel Hraser applicant for Invalid Pension, and known to the said Lany Baile
to be the identical person of that name who enlisted or volunteered as a Private
" 31 80 M. C. Amm VI. A. C.
was discharged and massis I sland f. C, on or about
18 th Died or was Discharged.  Aday of June 1866, by reason of time being out.
Here insert the reason of soldier's
discharge, if known; if not known, so state; or if he died, so state.
That the said Samuel Haser while in the line of his duty, at or near seaments (After Lattle of Alestee) in the State of Alestee did, on or
about the day of lugust 1864, become disabled in the following manner, viz:
10 Here state the time and place and manner in which the wound or injury was received. Describe the wound or injury, the part of the body
wounded or injured and all the circumstances attending it. If sickness, state time and place when contracted, what caused it, the name of the try at the tend, and was treated for the same for the same and manth at the Regenental of
sickness, and how it affected him
the provided over by Dr Aprole, allas Habo amulo Hasser Suring Caller Ran
one Island which navelous on his body and for which wand he was gon to to Nichts
That the facts are personally known to the affiant, by reason of his Anna Arenath of the 2 they
ent U. S. C. J. Alto came against to which Samuel House Whent was with the command at the
time the claimant contracted his disability or whether his knowledge was otherwise obtained. And reasons in full for knowing the facts to
Companies were almost almost apportage the and at times about lake which they certify.
this affedant was prepared forme, and in making
same I was not ailed no prompted by any pointed or wantle
Exatement. The facts there's stated were manuted sympton
Notting, and taken down by him this day at thatte shows 'S. G
ording, and cares as as by him Has aly as walle was so &

PROOF OF DISABILITY.

And deponent further state that Al is well acquainted with clajmant, having known him for at least
thinky fine years —, and further, that his maknowledge of the facts above stated
derived from said acquaintance, and from having served as Abaution of Copmany of the Mention Rank.
If Ref. Regiment of U. A. C. Wolnnteers, from the
day of apparts 1863, to the 18 th and day of fund 1866,
And deponent further states that the claimant was a sound and able-bodied man at and prior to enlishment so far as
knew, and that the is totally disinterested in this claim.
Post office address of affiant is facksaubus Collettan Co. S. C
1 Mh the
J. M. alleraderessa.
M. P. Simis Long & Bailey
[If affiant sign by mark, two persons who can write sign here]. [Signature of Affiants].
STATE OF SAUTH CANALIS , COUNTY OF COUNTY OF SS:
Sworn to and subscribed before me this day by the above named affiant , and I certify that I read said affidavit to said
affiant , including the words
erased and the words
added, and acquainted Kens
with its contents before executed the same. I further certify that I am in no wise interested in
said case, nor am I concerned in its prosecution; and that said affiant personally known to me and that that credible person.
that
O. J. Hedenson
(Ometat signature.)
C. HENDERSON Latary Public for SSI Cal
NOTE: S.J. PUBLIC, 6)  Contificato filed)
CAROLINA CAROLINA
Miller to the same of the same
Division.  Pension.  Pensi
E 33 E 3 E 3 E 3 E 5 E 5 E 5 E 5 E 5 E 5
DISABILITY.  DISABILITY.  DISABILITY.  PBY  CATLAW,  WASHINGTON.
S 2.55  S. A.
CLAIM OF CLAIM OF CLAIM OF CLAIM OF W. J. C. J. W. M. J. L. J. W. M. J. L. W. M. M. M. WASHINGT
No. No.
7 9 3   RB 3 5   > A
$\mathbb{R}^{2}$
597 53

# PHYSICIAN'S AFFIDAVIT.

1

TAKE NOTICE:—The affidavit should, if possible, be in the handwriting of affiant; the marginal instructions must be carefully observed, before writing out the statement. All the facts in possession of affiant as to the origin and continuance of the disability should be fully set forth, and the dates of treatment should be specifically given. If the affidavit is prepared from memoranda in possession of the physician, that fact should be stated.

	State of South Carolina County of Calletan ss:
	of 8 9.5 lave and Theren
	In the Pension Claim North, 825, 649 of Campuel Maser.
	late of Co. C. J. 5.
	SU. 6. 6. Osl.
	(Company and Regiment or service, if in the army; or Vessel and Rank, if in the navy.)
	Personally came before me, a Master we Efficiency in and for the afore-
	said County and State Charles thinksell M. D., a citizen of the atterband
	whose Post-Office address is Watterbars', Calletan Co! S. C
	well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to aforesaid
	case as follows:
	That he is a Practicing Physician, and that he has been acquainted with said soldier for about Alverd
	years, and that faithful langth offens,
	(Here embody all the facts known to affiant in accordance with the marginal instructions. No erasures or interlineations will be
	Har last six wears he has been blind in letto evo.
	permitted, unless the magistrate certifies in his jurat that they were made before executing the paper.)
	and right eye sympathetically affected, we is also
	subject to attacks of Ruralgia in the head in
	ingunal hanna aftholeftisido. En myapinian h
imes what h be from	Cannot wank mane than ane founts of his time,
urge nch t nnt; w whice	and that at intervals and poorwork, He ha
ntal s n at s satme ring	small pay marks an his bady, It is about
Ittion Ittion st tre od du	55 years of age.
is his regim sical conditi of his first t the period labor during	Deparent is reactive officer for water hand
as h rsical rt. e of h ; the	S. C. and Chairman of the County medicabex
g facts: , either a ants phys breatment g the date isability; lons,	amining board for Calletan County, in
E SEL GOTE	
following service he claim dates of the driving of the descript of perfect of perfect of the descript of the description of the	
now te in ated. Ity are d so s agno	
wit must show the mant while in the fabould be stated. In this disability and it, he should so stromptere diagnost as possible, of the thas been unable	
avit mush should this dis ge, he secomple r as post that has be started as post that has b	
Affidant fact shift fact shift fact shift scharge with co	
n's Af ated nat fa astur disch e, wi as n	
Physician's Affidav If he treated clair fuctough, that fact si ell as the nature of b dier since discharge at the time, with co with dates, as near is to which claimant	
e Phys furlous rell as dier si at the at the with of	
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home home wwn, a sated on w ee stat	
TOE Ist. Int was home on further shown, as well has treated soldle condition was at should be stated, we extent or degree t	
nant nant learl ne he al co	
OH SHEET	
while should should built phi treated ad.	

He further declares that he has been a practitioner of medicine for that he has no interest, either direct or indirect, in the prosecutiou of this claim. Sworn to and subscribed before me, this and I hereby certify that affiant is a practicing physician in good professional standing; that the contents of the above declaration, &c., were fully made known to him before swearing, including the words erased, and the words added; and that I have no interest, direct or indirect, in the prosecution of this claim. [SEAL.] C. A. Beckert, Ptr., Cor. E & Fifth Sts., N. W WASHINGTON, D. C. AFFIDAVIT OF CLAIM OF



GENERAL A	FFIDAVIT.
State of South Carolina, County of	
In the matter of Samuel Hasser la	-
ON THIS 17 th day of July -	d for the aforesaid County, duly authorized to administer
	, aged J , years, a resident of
So Cale, whose post office address is	tto, bars, Colletan Co: S. C.
(balter hand , in the Cou	nty of Colletan
4 // . //	o being duly sworn, declares each for himself, in relation
from yout often the way	from about latto know
NOTE-Affiants should state how they gain a know of 1866, when he stilled	
discharged from the service	a ofthounted states, he was
married a saughter of sep	and David Gruber, and das
and hand about sever sins D.	They seeing hem two as
	knesent time Samuel Hraser
has had neuralges and "	Ridney disease, and the
	& from perfarming manual
labor for nearly all his to	me, at least three fourthooper,
	This affidant was prepent
for us, and in making so	me we were not aided nor
	them down this Day at Watterbook &
further declare that we have no not concerned in its prosecution.	interest in said case and And
Ja Ma Denderson	Danid X Gaubes
M. R. Lestis If affiant sign by X mark, two persons who can write sign here.	Signature of affiairs.

alux, County of Callilan ss:
17 th day of fully A. D. 189 6,
and I hereby certify that the contents of the above affidavit was fully made known,
explained and read over to the affiants before swearing, including the words
erased, and the words added; that affiant of and known to me
to be reputable and entitled to credit as witnesses, and that I have no interest, direct
or indirect, in the prosecution of this claim.
Official signature.  Lotary Public for Est Cu,  Official character.  Centificato filed)

NOTE—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC OR JUSTICE OF THE PEACE. If executed before an officer not using seal, his official character should be certified to by a Clerk of Court, unless there is on file in the Pension Bureau a general certificate covering his present term, and, if said certificate has been filed, he should state so opposite his signature.



Atention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c. The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate. Insert character and number of claim, Pension Claim No. 810465 the above whether for original, increase or restoration.] Company V, 21 Reg't US. C. J. markeston October allaboro-Claimant's post-office address. We hereby certify that in compliance with the requirements of the lawwe have carefully examined this applicant, who states that he is suffering from the following disability, incurred Cause of disa- in the service, viz: los of rheumatism and If a pensioner, fill in the amount; and that he receives a pension of if not, erase the whole line.

He makes the following state He makes the following statement upon which he bases his claim for _ Senden and states that his disability Here give the claimant's statement as briefly and as compactly as possible. to exposure when in The service. Upon examination we find the following objective conditions: Pulse rate, ... respiration, 20; temperature, 98; height, 5 feet 4 inches; weight, 146 pounds; age, 45 years. Here give a full description of the disabilities, in accordance with Book of Instructions. Symptoms los of thigh fections aplic He is, in Oppinion, entitled to a Rate for EACH cause of disa-bility. rating for the disability caused by (and mosighe for that caused for that caused by , Pres. Mugeono

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

Rease state the condition tructions 1890 in all your Bound of Surgeons at Charleston S.C. Department of the Interior, This certificate is respectfully returned to lack eye scharately and Washington, D. C., Nov. 1891 Mas state the distance normal eng can letters AFRand B Hor Willacuse Of Claimant, Daniel Truges THOS. D. INGRAM, Jah. 91 to 96 BUREAU OF PENSIONS, No. claim, 810, 465 which a

Rease correct and return certificate promptly, inclosing this slip.

MEDICAL DIVISION.

SURGEON'S CERTIFICA!

or amendanent.

, 21 Reg't H. S. C. J

Applicant for Ongmine

Vaninations

DATE OF EXAMINATION:

No. Bloy65

BOARD.

cuna, Set,

Post office,

County,

State,

P. S.-Write your Post-office address plainly and in full.

Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same. PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

(3-060 a.)

# MILITARY SERVICE.

NAME OF SOLDIER:

Write nothing above this line.

Bureau of Pensions,

tt is alleged that the above-named man enlisted 186 , and served as a Chil , Al Reg't Ma

, and was discharged at

in this case, showing date of enrollment and date and mode of The War Department will please furnish an official statement No. of prior claim MITH termination of semice.

RECORD AND PENSION DIVISION, THE OFFICER IN CHARGE OF THE

Tery respectfully,

Commissioner.

I

WAR DEPARTMENT.

War Department,

Record and Pension Division,

FEB 3 1891

Respectfully returned to the

COMMISSIONER OF PENSIONS.

The rolls show that ... Dannell

thranger,

mentioned in the preceding indorsement, was enrolled

Depli 11. 186 H, and Mr. C. with bei anil 25

.. . leuge serrant douple. Now 30. Join al Charleston,

per black, Noin Hack,

m Sulla side met been strond

BY AUTHORITY OF THE SECRETARY OF WAR:

Captain and Ass't Surgeon, U. S. Army. Quineman

1508 b-25 m

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c. The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate. Insert character and number of claim. Pension Claim No. Rank. Name and rank of claimant. c [Date of examination.] Vallerborr x Claimant's post-office address. We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred 4 consacred Munalism Cause of disa- in the service, viz: Vision If a pensioner, fill in the amount; if not, erase the whole line.

He makes the following statem dollars per month. He makes the following statement upon which he bases his claim for Arquial rat he suffer from Theundahim Here give the claimant's statement as briefly and as compactly as possible. upaired Vescono Upon examination we find the following objective conditions: Pulse rate, pounds; age, 50 at years 10 him is no fluxible inches inches; weight, 145 Lungs The Azarts action is, elle gular but there are anie disease It suffers in arligular & misseula Steeled are the right In muscles are choud Lendons whon te same Smeli full limitation of & Equal lo est & slittment ( w with differ hus molio with the body partially Sloo museles of this regions as lotre & we state ighteenthe & he Eyes are weak the pupils are thry small, in Eye there and grache is, in our opinion, entitled to a rating for the disability caused by Meunalism, 12/18 for that caused Rate\for EACH cause of disa-bility. by Impaired rivor and for that caused by Moleau Treas. emedeev. , Pres. N. B.-Always forward a certificate of examination whether a disability is found to exist or not.

(0287-300,000.) 6-552

ming one half of the lens which Continue rec-ord of examina-tion here. das an incipling balarach discover no other disease of DEyes his vision is very much impaired almost total in this Eye While in twollier he was only able to decipher the largest when brought with in as we regard these as Equial to is In Eye we neil of above no disability of vicious no Evidence if has conse to our Knowledge hat he has been convicted + sendenced to the Venetentiary for - hime a go & has been out for several years & we Whoh certain how much of his disability is due to said chearceration besides from subsequent observation We do not believe his disability from theun be as serere as appeared at line of I we would change our valing for Theumalie to six Eighthenthe Except as as above no disability is found to Exist

Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the ting, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

SURGEON'S CERTIFICATE

SURGEON'S CERTIFICATE

Co. 2, 2, Regit Led 101

Co. 2, 2, Regit Led 101

Applicant for Brantwinos:

(FC) 5 Schiller of Persons

Rost office, Maller of Persons

State, Maller your Pest-office address plainty and in full

New July 1911 Pest-office address plainty and in full

New July 1911 Pest-office address plainty and in full

Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the ting, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

# UPLICATE FOR MEDICAL REFEREE.

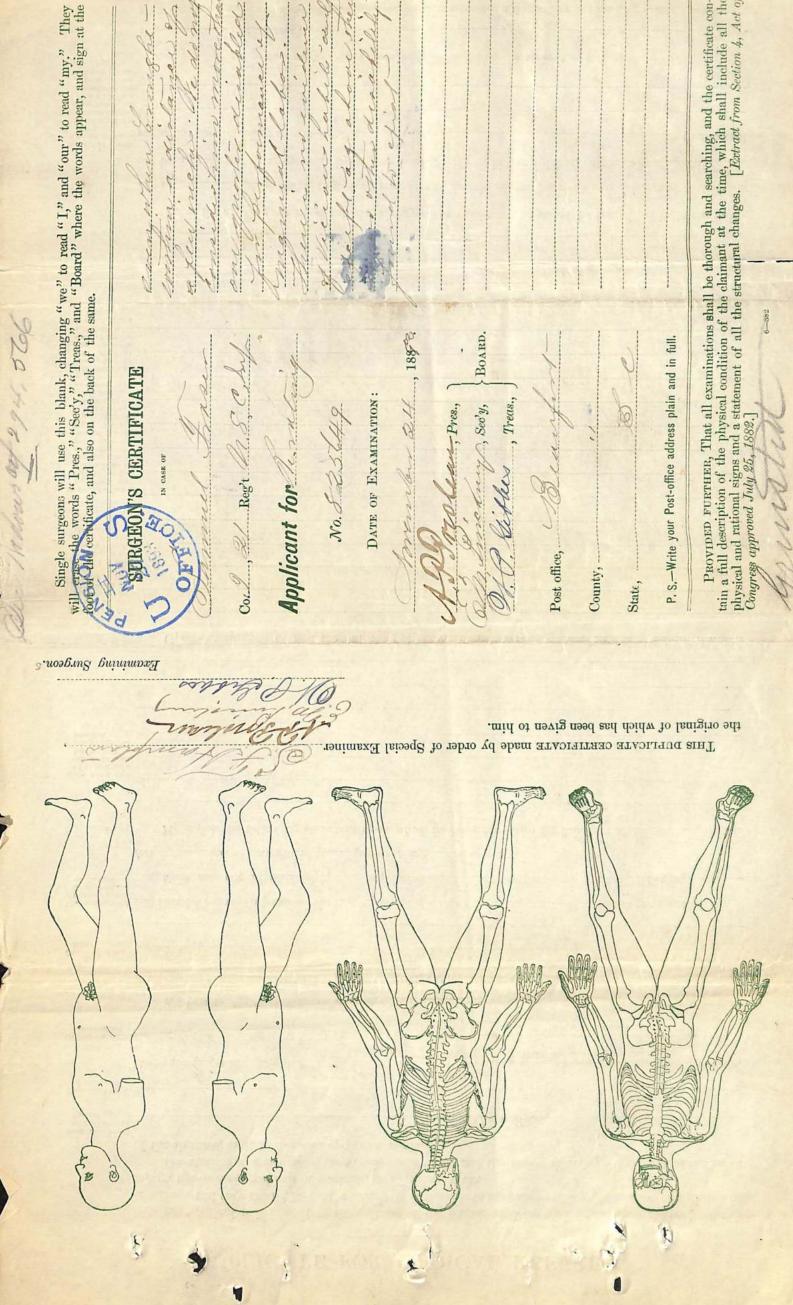
Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

	The absence of a member from a session of a board and the reason therefor, if known, and the name of the absence, must be indorsed upon each certificate.
Insert character† and number of claim.	Pension Claim No. 825649
Name and rank	
of claimant.	Company 9, 21 Reg't U. S. CVol. ht State,
Claimant's post-	Walterborough S-C (Post office address of the Board.) , 188.
Claimant's post- office address.	(Date of examination.)
	We hereby certify that in compliance with the requirements of the law* we have carefully examined
	this applicant, who states that he is suffering from the following disability, incurred in the service, viz:
Cause of disa- bility.	Thursdin impaced sight of both Eyes.
Ten monelones 611	and that he receives a pension ofdollars per month.
in the amount; if not, erase the whole line.	Pulse rate per minute, 80; respiration 18; temperature, 55; height, 5
	feet 5 inches; weight, 148 pounds; age, 55 years.
	He makes the following statement upon which he bases his claim for the rating
	That the suppos from desabilities carried
Here give the	Ly Thumalism & impaired dight of both Eges
claim an t's statement as briefly and as	
compactly as possible.	
	The state of the s
	Upon examination we find the following objective conditions: The attractions
Here give a full symptom pic- ture of the case,	dine and yeither Manfeel with sheunding
embracing all the physical and rational- signs, but con-	affecting particularly the left thee goint This goint
fining it to the present condi-	in slightly enlarged deiging a greater of an inch greater
claimant,	in circumference han its fellals. There is also
It must be borne	formener of asticulating comes - medening if
in mind that the duty of the Surgeon is to give an opinion	The sure of the contract of the second
as to the pro- portionate de- gree of disabil-	Many of the walking the later mation of
ity,as 1, 1, total, &c., through the grades,	The see the bulik respond to light lest the right more
without any re- gard to dollars and cents, and to make such a	Lully or than the left there is an of neity of the pupil
full particular description as will afford to	of Spring covering at least one string of the bripil
this Office the ground for in- telligent opin-	& do please to be sealed in the lens. There is mi disease
ion and action in rating.	Hidesper structure of the eyes. Us a result of least
- 6	while with the right aggliture able at a distance
	of telling feel to motinguish ly fee the horn how
	Left he could not meeting wish the tangest upface
t m	From the existing condition and the history of this claimant, as stated by himself, it is, in our judg-
*	ment,probable that the disability was incurred in the service as he claims, and that it has
Rate for each	not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a
cause of disa- bility.	Taking for the discourse, endings and the same and the sa
vicious habits, the word not should be erased and the	
reason for the	A.O

t Here state whether for original, increase, restoration, or renewal, or for a re-rating.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

molean, Pres Manashuy, Sec'y. It Verry Geb begreas.



PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of

100

Se 825-C

N. B.—Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE, OF DEATH in plain terms so that it may be properly classified. Exact statement of OCCUPATION is very important. (See Instructions on back of certificate.) WRITE PLAINLY WITH UNFADING BLACK INK-THIS IS A PERMANENT RECORD MARGIN RESERVED FOR BINDING

C	ounty of Colleton ownship of Verdier	STATE OF SO Barau of	E OF DEATH UTH CAROLINA Vital Statistics rd of Health	File No.—For State Registrar Only
Ci	Town of Walterlors or ty of S-C		rrict No.1409 St. Pherson	Registered No. (For use of Local Registrar) (If death occurred in a Hospital or Institution give its NAME instead of street and number.)  Residence In City
PE	ERSONAL AND STATISTICAL PA	ARTICULARS	MEDICAL CE	ERTIFICATE OF DEATH
3. SI	male Colored	DOWED Parried  OWNED  OWNED  (Write the word)	16. DATE OF DEATH	May 7 1924
(a pa (h bu	(Month) (Day)	(Year)  IF LESS than 1 day. hrs. ormin.?	May 2, stated above, at 4 Pm.	That I attended deceased from May 1924, that I saw h Malive on 1924 and that death occurred, on the date The CAUSE OF DEATH* was as follows:
9. BI	(State or Country)	eton	Contributory Of	ation) yrs mos 10 days
PARENTS	10. NAME OF FATHER IN ME.  11. BIRTHPLACE OF FATHER (State or Country)  12. MAIDEN NAME OF MOTHER	Pherson leton	(SECONDARY)  (Dura  18. Where was disease contra if not at place of death?  Did operation precede death?  Was there an autopsy?	70 Date of 6
	13. BIRTHPLACE OF MOTHER (State or Country)	leton /	What test confirmed diagnos	sontely any
14. TF	(Informant) Walter for ILEB Control of the BEST OF I	. 6	*State the Disease causing D (1) Means of Injury; and (2) 19. Place of Burial or Remove	
(	July 9, 1904 Mrs. Dian	ca aagem	20. UNDERTAKER	ADDRESS 19

CARY-BARBER PRINTING CO.

# Residence States Standard Certificate of Death

Approved by U. S. Census and American Public Health Association

Statement of Occupation-Precise statement of occupation is very important, so that the relative healthfulness of various pursuits can be known. The question applies to each and every person, irrespective of age. For many occupations, a single word or term, on the first line, will be sufficient, e.g., Farmer or Planter, Physician, Compositor, Architect, Locomotive Engineer, Civil Engineer, Stationery Fireman, etc. But in many cases, especially in industrial employments, it is necessary to know (a) the kind of work and also (b) the nature of the business or industry, and therefore an additional line is provided for the latter statement; it should be used only when needed. As examples: (a) Spinner, (b) Cotton Mill; (a) Salesman, (b) Grocery; (a) Foreman, (b) Automo. actory. The material worked on may form part of the second statement. Never return "Laborer," "Foreman," "Manager," "Dealer," etc., without more precise specification, as Day Laborer, Farm Laborer, Laborer-Coal Mine, etc. Women at home who are engaged in the duties of the household only (not paid Housekeepers who receive a definite salary), may be entered as Housewife, Housework, or at Home, and children not gainfully employed, as at School or at Home. Care should be taken to report specifically the occupations of persons engaged in domestic service for wages, as Servant, Cook, Housemaid, etc. If the occupation has been changed or given up on account of the DISEASE CAUSING DEATH, state occupation at beginning of illness. If retired from business, that fact may be indicated thus: Farmer (retired 6 yrs.). For persons who have no occupation whatever, write None.

Statement of Cause of Death.—Name first the DISEASE CAUSING DEATH (the primary affection with respect to time and causation), using always the same accepted term for the same disease. Examples: Cerebrospinal fever (the only definite synonym is "Epidemic cerebro spindline in gitis"); Diphtheria (available of "Caus"). Typhoid

fever (never report "Typhoid pneudonia"), Lobar pneumonia; Bronchopneumonia ("Pneumonia," unqualified, is indefinite); Tuberculosis of lungs, meninges, peritoneum, etc., Carcinoma, Sarcoma, etc., of .....(name origin; "Cancer" is less definite; avoid use of "Tumor" for malignant neoplasms); Measles, Whooping cough; Chronic valvular heart disease; Chronic interstitial nephritis, etc. The contributory (secondary or intercurrent) affection need not be stated unless important. Example: Measles (disease causing death); 29ds; Bronchopneumonia (secondary 10ds.) Never report mere symptoms or terminal conditions, such as "Asthenia," "Anemia," symptomatic), "Atrophy," "Collapse," "Coma," "Convulsions," "Debility," ("Congenital," "Senile," etc.), "Dropsy," "Exhaustion," "Heart Failure," "Hemorrhage," "Inanition," "Marasmus," "Old Age," "Shock," "Uremia," "Weakness," etc., when a definite disease can be ascertained as the cause. Always qualify all diseases resulting from child-birth or miscarriage, as "PUERPERAL septicemia," "PUER-PERAL peritonitis," etc. State cause for which surgical operation was undertaken. For VIOLENT DEATHS state MEANS OF INJURY and qualify as ACCIDENTAL, SUICIDAL, OR HOMICI-DAL, or as probably such, if impossible to determine definitely. Examples: Accidental drowning; struck by railway train-accident; Revolver wound of headhomicide; Poisoned by carbolic acid-probably suicide. The nature of the injury, as fracture of skull, and consequences (e.g., sepsis, tetamus) may be stated under the head of "Contributory."

### NOTE.

Certificates will be returned for additional information which give any of the following diseases, without explanation, as the sole cause of death: Abortion,, cellulitis, childbirth, convulsions, hemorrhage, gangrene, gastritis, erysipelas, meningitis, miscarriage, necrosis, peritonitis, phlebitis, pyemia, septicemia, tetanus.

A stillbirth must be registered both as a birth and death. The date of death should be the date of delivery, and the death certificate should further thate, if known the cause of the stillbirth and the period of uterine gestation in months.

July 1, 1924 Le M. melen archounce RUMIDITAT

Le soldiers defortenin Spec Ey 18

# SPECIAL EXAMINATION DIVISION

## DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

W.O	No	1220104
El	izabeth G., widow	of Samuel McPherson, alias Samuel Fraser, Co.I 21
U.	S.Col'd.Inf.	Act of May 1, 1920.
In	cases submitted for specia	l examination the papers should be indexed to show page numbers, names and

brief. In indexing surgeons' certificates, dates of examination, not of filing, should be stated.

- Claimant, Watterboro, Charleston County, S.C., June 2, 1924. declaration.
- 2. W.W Circular - no application.
- letter, Aug. 22, 1924, sol married prior to their marriage April 22, 1884 but that she has no knowledge of any such mgr. 3.
- afft.dated Aug. 22, 1924, stated her husband, Samuel McPherson, died on May 7, 1924, and any other dates are erroneous.
- Certified copy of the public record of the soldier death, rec'd July 8, 1924, Walterboro, S.C., diedMay 7, 1924 of dysentry and old age 5.
- Certificate of marriage of Samuel Fraser alias McPherson of Walterboro, S.C., to Elizabeth Gruber of Walterboro, S.C., April 22, 1884, by Rev.E.H.Gowidin, Officiating minister. appears to be an original certificate). (not certified but
- Soldier, mgr.circular dated August 4, 1898, stated he married Elizabeth Gruber at Walterboro, S.C., April 22, 1984, that he had no prior mgr., and four children, Rinah born March 26, 1886, James Edward born November 24, 1887, Mary Ann born Oct.6, 1891, and John Norman born April 3, 1897. Only family bible record. 7.
- mgr.circular dated February 5, 1898 same as no.7, except last son named John Newman instead of John Norman. 8.
- mgr.circular dated May 31, 1915 same as no.7, except that soldie stated he was previously married, married Daisy Mitchell in 1870 9. and that she died at Beaufort, S.C., 1877. Also another child born, Louisa 1899.
- two pages S.E. report received May 31, 1901, relative to military and marital history of soldier. Marital history same as in 10. numbers 7 and 9.
- 11. Ben Robinson and I.S.Bell, both of Walterboro, S.C., afft., rec'd.Oct. 9, 1924, testify that they have known both soldier and claimant and that they were not married prior to their marriage to each other.
- 12. I.S.McGrath, Walterboro, S.C., received November 17, 1924, afft., testifies that soldier was not marriedprior to his marriage to claimant.
- 13. Frank Simmons, Walterboro, S.C., afft., rec'd.July 8, 1924, testify that chimant and soldier were never divorced and lived together as hus and wife until sol death and that was sol only marriage.
- 14. John Lewis, Walterboro, S.C., afft. rec'd. July 2, 1924, testifies that soldier and claimant lived together as husband and wife until soldier death and that soldier was never married to anyone other than the claimant.

### RJF SPECIAL EXAMINATION DIVISION

### DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

	7.0. No.	1220104
	Elizabeth G., widow	of Samuel McPherson, alias Samuel Fraser, Co-I 21
	U.S.Col'd.Inf.	Act of May 1, 1920.
In cases submitted for special examination the papers should be indexed to show page numbers, names and addresses of claimants and witnesses, dates of filing, and subjects covered, a separate index being required for each		
brief.	In indexing surgeons' certif	cates, dates of examination, not of filing, should be stated.

- Claimant, Watterboro, Charleston County, S.C., June 2, 1924. 1. declaration.
- W.W Circular no application. 2.
- letter, Aug.22, 1924, sol married prior to their marriage April 22, 1884 but that she has no knowledge of any such mgr. 3.
- afft.dated Aug. 22, 1924, stated her husband, Samuel McPherson, died on May 7, 1924, and any other dates are erroneous.
- Certified copy of the public record of the soldier death, rec'd July 8, 1924, Walterboro, S.C., diedMay 7, 1924 of dysentary and old age. 5.
- Certificate of marriage of Samuel Fraser alias McPherson of Walterboro, S.C., to Elizabeth Gruber of Walterboro, S.C., April 22, 1884, by Rev.E.H.Gowidin, Officiating minister. (not certified but appears to be an original certificate).
- Soldier, mgr.circular dated August 4, 1898, stated he married Elizabeth Gruber at Walterboro, S.C., April 22, 1984, that he had no prior mgr., and four children, Rinah born March 26, 1886, James Edward born November 24, 1887, Mary Ann born Oct.6, 1891, and John Norman born April 3, 1897. Only family bible record. 7.
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- 14. John Lewis, Walterboro, S.C., afft. rec'd.July 2, 1924, testifies that soldier and claimant lived together as husband and wife until soldier death and that soldier was never married to anyone other than the claimant.

# DECLARATION FOR WIDOW'S PENSION.

Act of May 1, 1920.

Z	08. 20.01 000
0	State of South Jurolined, Country of Charleston, 88:
H	On this 26 day of May , 1924, before me, the undersigned, personally
4	El - + Il more all
R	appeared College William St. Market Who makes the following declaration as an application for pension under the provisions of the act of Congress approved May 1, 1920.
4	
OL	That she is
E	at waterproved and
۵	That she is the widow of and the other of thereon alegan function who
	ENLISTED Must 18 1864 at Helton Head & Co under the name of
0	Sugared my herron ale Non House Post Co J 21= U.S.C. Joseph
I.	(Here state company and regiment, if in the Army; or vessel, if in the Navy.)
-	and was honorably
L	DISCHARGED , having served ninety days or more, or was discharged for, or died in service
ō	of the United States of a disability incurred in the service in the line of duty, during the CIVIL WAR, and who
	DIED May 16 1924 Walterbor S.C.
×	That he also served in
0	(Here give a complete statement of all other military, naval, or coast guard service, if any, at whatever time rendered.)
Ø m	
m	and that, except as herein stated, said soldier (or sailor) was employed in the military or naval service of the United States;
Ш	THAT SHE WAS MARRIED said soldier for sailor) Chris 22, 1887 under the name
I	of Elizabeth agriber fat waterbook isc.
-	by Kev & M Loudene that she had My been previously married, that he had My
Z	been previously married;
ō	been previously married,
-	(If there was a prior marriage of either, the name and the date and place of death or divorce of the former consort, or consorts, should be stated.)
0	
Z	
0	That neither she nor said soldier was ever married otherwise than as stated above.
1	That she was NOT divorced from the soldier (or sailor) and that she has NOT remarried since his death;
0	
$\supset$	That the following are the ONLY children OF THE SOLDIER (or sailor) who are now living and are under sixteen years of age; (If he left no children under sixteen years of age, the claimant should so state.)
Œ	horn 1 at
S	
Ž	, born, 1, at
=	, born, 1, at
Ш	, bern, 1, at
I	, born, 1, at
-	, born, 1, at
_	That she and Zuel serve in the Army, Navy, or Marine Corps of the United States between April 6, 1917, and February 9, 1922,
t	(Did or did not.)
Ξ	or at any time during said period.
3	That member of her family served in the Army, Navy, or Marine Corps of the United States between April 6, 2017 and
	February 9, 1922, or at any time during said period Corporal Mangar Metheuron
7	(Hapy members of relationary of the military or naved service during the period mentioned, state
L	the full name under which each such member served, with the designation of the organization in (or vessel on) which such service was rendered, together with the dates
)	
Ŀ	of enlistment and discharge. State also whether any such members are dead, and if so give the names.)
>	) A HOSTE COLLEGE CONTRACTOR OF THE COLLEGE CO
L	and the state of t
0	any function or compensarion from the other
Σ	That she has her tolore applied for pension, the number of her former claim being that said soldier (or
Ö	sailor) was a pensioner, the number of his pension certificate being 2 5
0	X Washing of a star of
Ω	and state of author
_	Harten (Signature of first witness.) Janleste . Delly about Grant Signature of first witness.
$\supset$	The / Cesseum V) ( A m. leste of . A (Claimant's signature frull.)
0	
I	(2) Claimant's address in full.) (Signature of second witness.)  (2) Claimant's address in full.) (Signature of second witness.)
0)	(Claimant's address in full.)
+	(Signature of second witness.)
Z	5 32 haple st Charleston so
4	(Address of second witness.)
Σ	Subscribed and sworn to before me this
4	contents of the chore declaration were fully made known and explained to the employed hefere executed in the chore declaration were fully made known and explained to the employed hefere executed in the chore executed in
Ĺ	contents of the above declaration were fully made known and explained to the applicant before swearing, including the words
0	trace, and the words
ha	direct or indirect, in the prosecution of this claim.
显	- M. Spann
	(Stronger )
	Metan Carleta 6 as C
	[L. S.] (Official pharapter.)
	19 99 75 1
	a very of places for
	(Post office address of Officer.) 6-5211
	Den
	Q IIIN ASSIBLAN
	J. Ung Magan
	Declaration as widow accepted to the second

ROPPED

3-015

U

of a widow who desires to claim pension under of Pensions for general reference. man who served in the Army, Navy, or Marine account of the service of an officer or enlisted unless a certificate has been filed in the Bureau county, or of office must be certified by the proper State, seal, his official character, signature, and term Soldier __ officer is not required by law to have and use a Corps during the Civil War. idminister oaths for general purposes. If such DECLARATION FOR WIDOW'S PENSION This form is to be used ONLY by or in behalf be executed before some officer authorized to Declaration and testimony in support of same city officer under his official seal Samuel McPherson 825649 Act of May 1, 1920 21st U Samuel Fraser 1920, above named, S Col Inf on

### ACT OF MAY 1, 1920.

Under the provisions of the Act of May 1, 1920, the widow of any person who served in the Army, Navy, or Marine Corps during the Civil War for ninety days or more, and was honorably discharged, or regardless of the length of service was discharged for or died in service of a disability incurred in the service in line of duty, may be entitled to pension, without regard to her financial condition, provided she was married to him prior to June 27, 1905. The rate of pension is \$30 per month, and \$6 additional for each of his children under the age of 16 years. Pension commences from the date of filing a valid declaration in the bureau.

"That no claim agent or attorney or other person shall be recognized in the adjustment of claims under this Act, except in claims for original pension, and in such cases no more than the sum of \$10 shall be allowed for services in preparing, presenting, or prosecuting any such claim, which sum shall be payable only on the order of the Commissioner of Pensions; and any person who shall violate any of the provisions of this section, or shall wrongfully withhold from the pensioner or claimant the whole or any part of a pension allowed or due to such pensioner or claimant under this Act, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall, for each and every offense, be fined not exceeding \$500 or be imprisoned not exceeding one year, or both, in the discretion of the court."

## INSTRUCTIONS—READ CAREFULLY.

Under the law a person may not receive pension from the Bureau of Pensions and compensation or vocational training pay through the United States Veterans Bureau covering the same period of time. That part of the declaration referring to service between April 6, 1917, and February 9, 1922, should show whether the claimant or any member of her family rendered any service in the Army, Navy, or Marine Corps of the United States during said period, and if so, the full name under which each such member served should be stated, together with the designation of the organization in (or the vessel on) which such service was rendered with dates of enlistment and discharge.

The term "family" includes: Child, legally adopted child, stepchild, father, mother, stepfather, stepmother, father and mother through adoption, and person who has stood in place of parent for a period of not less than one year prior to induction into service.



Widow Division 1220104

del McPherson

o. I. 21st U.S.C.Inf.

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS
WASHINGTON

June 19, 1924

Mrs.	Elizabeth	G.	McPherson,
Wate	rboro,		
Sout	h Carolina		

Madam:

In this claim there is required the statement of the claimant, under oath, giving the information indicated herein. EACH QUESTION SHOULD BE FULLY ANSWERED AND SWORN TO before a Notary Public or some officer authorized to administer oaths for general purposes. Prompt response is requested in order that the claim may not be delayed.

3-2002

Hash for Gardner

Commissioner.

1. Did the claimant or any member of his (or her) family serve in the Army, Navy or Marine Corps of the United States between April 6, 1917, and February 9, 1922? If so, state the name under, the designation of the organization in (or the names of the vessels on), which such service was rendered, with dates or approximate dates of enlistment and discharge.

Answer : Normon Me Pherson, Serued at Cruy Jacobson, S. P. Dont olnon dates on Organization

NOTE: The term, "family" includes: Child, legally adopted child, step-child, father, mother, stepfather, stepmother, father and mother thru adoption, and person who has stood in place of parent for a period of not less than one year prior to induction into service.

(OVER)

	2. If a member of his (or her) family rendered such service, is such member living or dead?
	Answer: Living, in Charlester, S. C.
	Answer:
	3. If the claimant rendered such service, state whether he (or
ļ	she) is in receipt of, or has ever applied for compensation or training pay thru the Veterans Bureau. If so, give the number of the claim
	그래 하는 그들은 사람들은 그들은 사람들은 사람들은 그들은 사람들은 사람들은 사람들은 사람들이 되었다. 그는 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은
	Answer: no application etc male
	4. If a member of his (or her) family rendered such service and is deceased, state whether the applicant for pension is in receipt of
	or has ever applied for compensation thru the Veterans Bureau on ac-
	count of such service and death. If so, give the number of the claim used by the Veterans Bureau.
	0 - 1
	Cl- her
	Chysliff & Mc Phersen (Signature)
	(Signature)
	Walter Lero, S. P.
	State of Louth Ewling  County of Balleton
	State of Court
	County of Daller
	Subscribed and sworn to before me this day of here 192 and I hereby certify that I have no interest, direct or indirect, in the claim herein mentioned.
	and I hereby certify that I have no interest, direct or indirect, in
	The claim herein mentioned.
	(Signature)
	Mot But for S. P.
	(Official Character)
	Walterdow, S.C
	(LS) (Post-office or address
	of Officer)

EVENT OF THE SUFFRED

Widow Division W. 2. 1220104 Samuel McPherson I 21 U.S.C. Inf.

29 Percy, St.
Charleston, S.C.
May 22 1925

Department of the Interior Bureau of Pensions. Washington, D. C. Dear Sirs:-

In reply to your letter of December 18 1924, I beg to state that if Samuel McPherson was married before we married in April 22 1884 I have no knowledge of the same and cannot furnish you with such facts.

If you will refer to his declaration for increase pension for his disabilities during 1923 you will find under oath that he said that he had not been previously married, and the question further asked to state the name of his former wife and was answered by saying none.

I have been married to the Samuel McPherson for forty years up to his death and had six children for the said soldier now I can not state any thing that I do not no therefore if there was a wife before he and I married then I was not aware if that fact. And again if the said Daisy Mitchell was legally married to the said soldier it is strainge how that I married him and lived together for forty years and no one ever interfered with us not even after he was dead. So I would asked that you please let me know the date of their marriage as I married in 1884.

As I have first said I have no knowledge of this married and I am unable to furnish any information relative to this matter.

Thanking you in at advance for a prompt reply I beg to remain

Very truly yours

Mrs Elizabeth G. McPherson

STATE OF SOUTH CAROLINA COUNTY OF COLLETON

Widow Division W. O. 1220104 Samuel McPherson 1, 21 U. S. Col. Inf.

Personally appeared Elizabeth G. McPherson, who being duly sworn, says: That her husband, the late Samuel Mc-Pherson died on May 7th, 1924 at Walterboro, South Carolina, and that if any other statement showing date of death other than May 7th, 1924 was made, the same was an error.

Further deponent sayeth not.

Sworn to before me this

Al day of August 1924.

Elzolth & Mc Mrson 2mi

Not Only (I.S.) Reba Hiers Not Only fu S ( Walterbors, & C.





Law Office Heber R. Padgett Walterboro. S.C. July 3rd, 1924

Department of the Interior, Bureaumof Pensions, Washington, D. C.

In Re: Widow Division
W. O. 1220104
Samuel McPherson
Co. I 21st. U. S. C. Inf.

Gentlemen:-

I enclose herewith form 3-2002 with the questions properly answered and probated.

I also enclose an Affidavit of Frank Simmons and one of John Lewis, both dated June 24th, 1924, which Affidavits comply substantually with the information requested on your form 3-2053 of June 19th, 1924.

I also enclose an old certificate of marriage of Samuel Fraser Alias McPherson to Elizabeth Gruber dated April 22nd, 1884.

This old negro woman prizes this certificate very highly and as soon as you have had an opportunity to make a photostatic copy of it please return it to me so that I may deliver it to her again.

I also enclose a certified copy of the death of Samuel McPherson which certificate was executed by the State authorities in Columbia.

If there is anything further necessary to complete this case I will inform the old woman and endeavor to get the same for you.

Thanking you. Your prompt attention will greatly oblige.

Yours very truly,

Heber R. Padgett, Service Officer, Colleton County Post #93, A. L.

HRP:H Encls.

Request for Photostating (To be prepared in duplicate)	3-2006 Ex. M&(
2616 OFFICE OF	THE CHIEF CLERK
Job No.	Date Oct 31, 1925
Subject WC, 966 649	mc Pherson
(No.) (No.)	cea consisting of pages to be (No.)  Division
forwarded when completed to the	e Division
Remarks: Marriage Ce	ruficale
Ar	pproved:
FOR !	
F. J. Probinson	
Chief Div.	Chief clerk.

Department of the Interior

This envelope can be used only for reply to official communications. This address must not be changed.

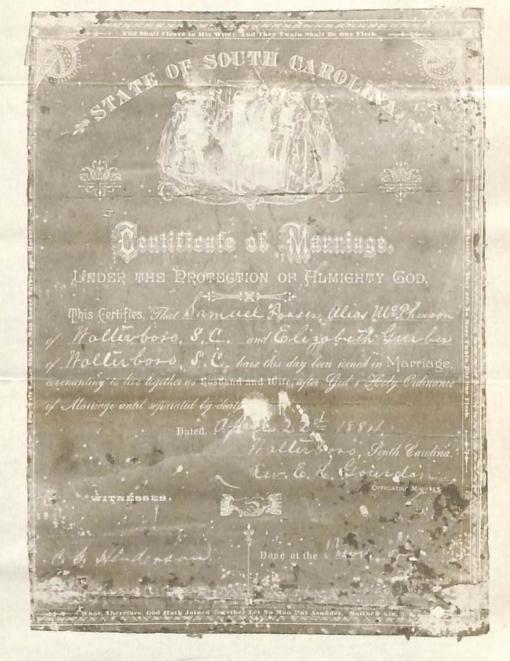
RETURN PENALTY ENVELOPE

BUREAU OF PENSIONS WASHINGTON, D. C.



THE COMMISSIONER OF PENSIONS, WASHINGTON,

Larring & Certificate
Returned Mon 5. 1923
mage



Muse. C. W. Stu: Act of June 27 1890.
2 £29-16
3-402. MAY 31890 3 6 8
Certificate No. 825649
Me pariment of the Interver
Taser Marions,
Washington, D. C., January 15, 1898.
SIR:
In forwarding to the pension agent the executed voucher for your next
quarterly payment please favor me by returning this circular to him with
replies to the questions enumerated below.
Very respectfully,
(Mal A D.
Telay Frank
Commissioner.
First. Are you married? If so, please state your wife's full name and, her maiden name.
Answer. Yes. Elizabeth Mraser alias metherson. Elizabeth Grus
Second. When, where, and by whom were you married?
Answer. Walter boro, S.C. Opine 22 and 1884. by Rov. G. H. Gourdin.
Third. What record of marriage exists?
Answer. Hamily Wiole.
Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.
Answer. No-
Fifth. Have you any children living? If so, please state their names and the dates of their birth.
Answer. How - Rinah, born mich 26 " 1886. James Edward
born Mus: 24th 1887. many and born Oct,
6th 1891. 2 John Norman Haser Opil 3the 1897.
6 - 1071. & jour norman waser your 3" 1897.
Bannel methers on alias Fraser
Date of reply, (Signature.)
witness
Chas St. Harner

deposition of may 8,1

0-2

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

WASHINGTON,

Sir: Please answer, at your earliest convenience, the questions enumerate is requested for future use, and it may be of great value to your widow or envelope, which requires no stamp.

Very respectfully,



Washington, D. C., January 2, 1915.

Sir: Please answer, at your earliest convenience, the questions enumerated below. The information is requested for future use, and it may be of great value to your widow or children. Use the inclosed envelope, which requires no stamp. SAMUEL CHARLESTON, S.C. CALHOUN ST., U.S.C. July No. 1. Date and place of birth? Answer. The name of organizations in which you served? Answer. 60. 1 2/ 2t Raying Answer. Cligatett No. 4. Won, where, and by whom were you married? Answay. No. 5. Is there any official or church record of your marriage? No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her If there was more than one previous marriage, let your answer include all former No. 7. If your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any miltary or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. Answer. No - next was

Date May - 31 - 1910

Signature) I Samuel Mepherson

DEPOSITION Case of Samuel Mc Therson, No. 825.649 On this Internal day of , 190, at , before me, ..... special examiner of the Bureau of Pensions, personally appeared. Sonseons, who, being by me first duly sworn to answer truly all interrogatories propounded to h. during this special examination of aforesaid claim for pension, deposes and says: I how no class pending I was examined by the board at Beauford, & C. about M. V. Turney of Washington D.C. got me bles 1th provin in 1892 and the menor in 1898. It got 10 00 for the first pursein. I cannot meall that he got anything else or since. pudge thrudrown was my sub-agent. I paid him 1000 when I got my penseers. I also pard him 50 cents for each paper be made out I did not pay him anything for getting the lucrase. Judge Hundroon has my Off. for safeteeging. He executes my wouldn't every 4 the of every quarter, must before I tuck the year and am swow yay 50 Cents. Vused to sign my name, but since the changed the pagero & Mr Phison & count So it. I must fearmed my cet fed any purpose. I leave only been married once I first married Daisy Mitchel on Spring Island & in 1876. I had no children with her Muther of us had been proviously married We were married by leads till of Spring Island We lind togather 2-3 years. I wont away & work and when I came back she had another man, so I gut his. of Me Cloud - Count gris frist name. Page..... Deposition....

Attean married Elizabeth Grover of Charlest	*
	20
lun in Walterboro S.C. in the fall 1883.	
Rev. E H. Goodyne married us, The lea	0
not been married before she married se	
I have the following children most 16 year	
Rua bom in Walterborn S.C. March 26, 188	
James & " Blufflow " Mor 24 188	
Many aun " Walterboro - Oct 6 189	1
y John Morman 4 4 april 3 18	77
Marthallzalrth " " Mich 21 189 Forise " " July 20 189	3
Soriese " " " July 20 189	19
I live in Blufften S.C. from discharge to 18	
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and since than Shaw lind here.	
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Changes mail on 1-2 than of this organites and undreated by x in margin were we have the	ace
fried last seguing same.	
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and cometly nearly	
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Mark Mark	- Care
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i filad	
1 to the second	
(C. ) ":	-
Deponent.	
Sworn to and subscribed before me this 8 day of May	
1901, and I certify that the contents were fully made known to deponent	

0-2

Special Examiner.

Major Willoughby was acting. Capt stonehouse H. B. Jet Lt Grain 2 Let Goodell. Ord Last Julk Williams. Surget George Green, 3 - Left J. Higgsuboltain. My tentemates um Sharper Miller and

hose Mash Page Deposition Of



My first battle was at Morris Island I.C. No one wounded at Relled of my Co in this pight. My next battle was at James Island so I was wormed in the left Rose by a musket ball on account of it. Lurgen Hoch brated sue My must battle was alfocatalligo mear Beauford S.C. Sam Dexter, and two more got killed from my Co. no one women of My must battle was at alustae, Ha No coseroleter in my Co My next and last battle was at Honey Hill to We had both Rilled and womend in Co I this time, but I carred recall the names Geroonal description of Genseous: Complexion black hair grayesh eyes black hight about 5'0" occupation, servount, one sear on left fortead, on seas on broat from bayoutte at It Wagner and sear und l. Ruce from mustet ball at fames Island Probable hight 5'3" From Of 825, 649 more Oct June 27, 1890 X 1200 pom Felr 4 1898 for forted Snahlet, to earn a support by manual labor. Insent certificate Cef. issued april 5 1898)
My wrtmsses um Friday Hamilton & Sharper Miller and abrown Vinclose of Co C. and allen Mack I hour not testified for any of this people. My claim was specially examined by & 7. Hampton of the Vension Burray in 1896 Henry paid anything for my testimony altest: Wit Ming Samuel his Mc Meson alas trages nearly Deponent. Sworn to and subscribed before me this day of , 190..., and I certify that the contents were fully made known to deponent before signing.

Special Examiner.

State of South Carolina, County of Colleton

Wid Div. W.O.1226164 Samuel McPherson 1st 21st USC Inf



PERSONALLY appeared Ben Robinson and S. Bell who each for himself after being duly sworn says:

I Ben Robinson of Walterboro, S.C. am 45 years of age and have lived at Walterboro all of my life and I have known Elizabeth G. McPherson all of my life and know of my own knowledge that the said Elizabeth G. McPherson was never marri married until she married Samuel McPherson and that Samuel McPherson was never married until he married Elizabeth G. MC-Pherson.

I, S. Bell of Walterboro, S.C. am 67 years of age and have lived in Walterboro all of my life and Have known Elizabeth G. McPherson for at least forty years and now of my own knowl edge that she was never married until shemmarried Samuel Mepherson and further that Samuel McPherson Never Married any one before he married Elizabeth G. MCPherson.

Each deponent further states that this affidavit was read ove over or explained before signing and understood by deponent and that deponent has no interest in the claim of Elizabeth G. MCPherson against the United States Government.

Sworn to before me this 8th day of October 1924.

Not Pub for So. Car.



STATE OF SOUTH CAROLINA COUNTY OF COLLETON

IN RE: Widow Division
W. O. 1220104
Samuel McPherson
1. 21 U. S. C. Inf.

PERSONALLY APPEARED I. S. McGrath, who being duly sworn, deposes and says: That he is a resident of Walterboro, South Carolina and is Fifty-One (51) years of age and that deponent knew Samuel McPherson all of deponents life.

Deponent further states that he knew Samuel McPherson before his marriage to Elizabeth G. McPherson and that the said Samuel McPherson was never married to anybody at any time before his marriage to Elizabeth G. McPherson.

Deponent further states that this Affidavit was read over and understood by him before signing, and that deponent has no interest whatsoever in the claim of Elizabeth G. Mc-Pherson against the United States Government.

& & Megratt

SWORN to before me

this 15th day of November 1924.

Notary Public for S. C.



STATE OF SOUTH CAROLINA )

In Re: Widow Division

W. O. 1220104

Samuel McPherson

Co. I. 21st U.S.C. Inf.

Personally appeared Frank Simmons, who being duly sworn, says:- That he is Sixty-Eight (68) Years of age and lives at Walterboro, South Carolina and has known Samuel McPherson and Elizabeth G. McPherson for at least Fifty (50) years and deponent further states that the said Samuel McPherson and Elizabeth G. McPherson lived together as man and wife in the Town of Walterboro, S. C., for a great number of years and that deponent has never heard of any former marriage of the said Samuel McPherson, notwithstanding the fact that he was associated with the said Samuel McPherson during the period above mentioned.

Deponent further states that the said Samuel McPherson and Elizabeth G. McPherson lived together as man and wife until the death of the said Samuel McPherson on May 8th, 1924.

Deponent further states that this Affidavit was read over and understood by him before signing and that he has no interest whatever in the claim of Elizabeth G. McPherson against the United States Government.

EXECUTE Survey

Sworn to before me this

24th day of June 1924.

(L.S.)

Notary Public for S. C.



STATE OF SOUTH CAROLINA COUNTY OF COLLETON

IN RE: Widow Division
W. O. 1220104
Samuel McPherson
Co. I 21st, U.S.C. Inf.

Personally appeared John Lewis, who being duly sworn, says:- That he is Forty-Five (45) Years of age and lives at Walterboro, South Carolina and has been personally acquainted with Samuel McPherson and Elizabeth McPherson for nearly Thirty (30) Years.

Deponent further states that he has never heard of any former marriage of Samuel McPherson and he knows of his own knowledge that the said Samuel McPherson and Elizabeth G. McPherson have been living together as man and wife until the death of the said Samuel McPherson on May 8th, 1924.

Deponent further states that this Affidavit was read over and understood by him before signing and that he has no interest whatsoever in the claim of Elizabeth G. McPherson against the United States Government.

JahnLewis

Sworn to before me this

24th, day of June 1924.

Notary Public for S. C.

(L.S.

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## INVALID PENSON! Cert. No. 8257649

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Po Washington D. E.	Articles filed, 18
A DDRC	WAIS
Approved for Almulgia and b	Approved for
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	AND FORMER ACTION.
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M. C.	Claimant writes. ?

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Declaration for an Original Invalid Pension.

This must be Executed before a Court of Record or some Officer thereof having

Custody of the Seal.

State of Snath Carolina, county of Colletan, 55:
On this // day of May , A. D. one thousand eight hundred and ninety- three
personally appeared before me, amaster of the Comman Reas, a court of
record within and for the County and State aforesaid, and Mary, aged
years, a resident of the Lace of Mullerborough County of
State of , who, being duly sworn according to law, declares
that he is the identical Anni, Annie who was Enrolled on
of M. day of August, 1864 in Company of the Regiment of Company of the Chanelouse
and who was honorably Discharged at Marais I sland near Charlester on the day
of flue , 1866, that his personal description is as follows: Age 55 years; height
5- feet 5- inches; complexion, back; hair, black; eyes, black
That while a member of the organization aforesaid, in the service and in the line of his duty at
Niltan head S. C. in the State of South Carolina,
on or about the day of January — 1866, he Would
of disease, or the location of wound or injury. If disabled by disease, state fully its causes; if by wound or injury, the precise manner in which received.
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he was sent to the general Nospital at that place
Dr Namb and Dr Steekney being in Change, was the
heated for same intil he recongred somewhat,
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Pwo persons who can write sign here.]

	Also personally appeared f. M. Hendenson, residing at Watterbond'S. ( , and to G. Hendenson	0
	and to b. Herdenson	
	residing at Walterband' Si Cz , persons whom I certify to be	
	respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw	
	Dawy, Frank, the claimant, sign his name (or make his mark)	
	to the foregoing declaration; that they have every reason to believe from the appearance of said claimant	
-	and their acquaintance with him that he is the identical person he represents himself to be; and that	
	they have no interest in the prosecution of this claim.	
	J. M. Denderson	
	2. H. Henderson.	
	[If witnesses sign by mark, two persons who can write must sign here.]	
	Sworn to and subscribed before me this / aday of May, A. D. 18 93;	
	and I hereby certify that the contents of the above declaration, &c., were fully made known	
	and explained to the applicant and witnesses before swearing, including the words	
	, erased, and the words	
	, added;	
- 10	and that I have no interest, direct or indirect, in the prosecution of this claim.	
	ble Na la la )	
	[Signature.]	
	[L. S.] Menter for Colletan Cos S. C.	3
	[Official Character.]	
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### GENERAL AFFIDAVIT.

State of Santh Caralina, County of Calletan ss:
In the matter of Samuel Hasser applicant for Pensian.
ON THIS 30 to day of Answher A. D. 189/, personally appeared before me
oaths Samuel Hasser — aged Ho years, a resident of Maltagham in the County of Calletan and State of Sauth Caralina
well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:
(Note—Afflants should state how they gain a knowledge of the facts to which they testify.)
that he with claimant in the above indicates
Claim, and that he has not been in sitter the
military ar hand service since his discharge
Therefram in may - 1866
HAPOST-Office address is Walter hand, Calletan Canty S. Ca.
further declare that
James Le March Samuel V Handen
( a mark)
[If Affinit sign by mark, two witnesses who can write sign here ] [Signature of Affiant,]
( ) Samuel ( )

State of Sauth Caralina, COUNTY	OF Colletan - ss:
Sworn to and subscribed before me this day by the above	e named affiant , and I certify that I read said affidavit to
said affiant , including the words	erased, and the
words	added
and acquainted with its contents before.	executed the same. I further certify that I am in
nowise interested in said case, nor am I concerned in its prose	cution; and that said affiant
known to me and that Al Acredible person .	O. G. Hendersand Official Signature.  Master in And for Colleton G
[L. S.]	Official Character,
1,	Clerk of the County Court in and for aforesaid County
and State, do certify that	, Esq., who has signed his name to the
foregoing declaration and affidavit, was at the time of so doing	
	in and
foregoing declaration and affidavit, was at the time of so doing for said County and State, duly commissioned and sworn; that and that his signature thereunto is genuine.	t all his official acts are entitled to full faith and credit,
foregoing declaration and affidavit, was at the time of so doing for said County and State, duly commissioned and sworn; that	t all his official acts are entitled to full faith and credit,
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ADDITIONAL EVIDENCE.

Samuel Anall

Calaim no. C. U. & Cor
Samuel Anall

AFFIDAVIT OF

AFFIDAVIT OF

PILED BY

FILED BY

THY ORNEY-ATT-LAW,

WASHINGTON, D. C.

# GENERAL AFFIDAVIT.

A LIGAR Services of Prince Annual Control of the Co	Series, or hotelede. mint on	a to streamin
State of Santh Cana	ha, County of Calletan	SS:
	Anaxes Petitionespas Pe	
In the matter of Variation	to the second and the	marine of the
or my the m	anel A. D. 1892, personally appeared	d before
1	in and for the aforesaid County duly authorized t	o administer
	raged years, a resident of Macket	1000
	and State of & Auth Can	auna
	titled to credit, and who, being duly sworn, declared i	n relation to
aforesaid case as follows:	Inhe of languages on one material a ways of payath	Charles and the control of the contr
what he meanly	te, how they gain asknowledge of the facts to which they testify.)	rame,
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	E.	
11.00		
H 10 Post-Office address is MACA	ervors, colland Canal	94 Di C
- further declare that	no interest in said case and not	concerned in
its prosecution:		
D. E.	3	
Old Magaziani	sign here.) (Signature of Affiant.)	

affidavit to said affiant , inc. and the words and acquainted am in nowise interested in said personally known to me and the said affiant and the said affiance.	before me this day by the above named affiand luding the words (Antile) and with its contents before. A executed d case, nor lam I concerned in its prosecution; that A credible person	errsed, added the same, I further certify that I
[L. S.]	in suit for marter	Official Character, July Colotto Colo Co,
Note.—This must be swo	rn to before any person authorized to administer oa	
	angul and her the prima anticovery the first trade in the second of the second o	
ADDITIONAL EVIDENCE.  Claim No. F. W. H. S.	Amuel Mark. Cols.	FILED BY M. V. TIERNEY, ATTORNEY - AT - LAW, WASHINGTON, D. C.

### GENERAL AFFIDAVIT.

State of South Carolina, County of Calleton, ss.
In the Pension claim No 8 2 3 6 4 9 of Saggnel Frager.
late of Co. Reg't (NSO) Vols.
Personally came before me, a state Fublica in and for aforesaid County
and State & annuel Francer aged 60 years labs
a citizen of Malter borrough County of Collitan and State of [Post Office Address.]
, who being duly sworn, declares in relation to aforesaid claim as follows:
Note-Affiant should state how he gains all nowledge of the facts to which he testifies.
I growthe change of the facts to which he testifies.]
claim and have tostate that I did not serve
inverther the militaryor haral service of the
Amfed States provite august 1863 l or
subsequent to May 18, 1866
The same of the sa
hamabled on all matters on brinte his tote
In resetal Sheb Sold
The facts were more known to the waster.
andwritten from my statement to topic
further declare that Surve no interest in said claim and and
not concerned in its prosecution.
Hamuel fraser
Signature of Affiants.

Note-In the execution of evidence, whenever a witness signs by X mark, two persons who can write, MUST attest the signature by signing their names opposite.

State of South Carplina County of Calletan, ss.
Sworn to and subscribed before me this 2 day of May, A. D. 189
and I hereby certify that the contents of the above affidavit was fully made known, explained and read over to the affiants before swearing, including
the words.
NOTARY * PUBLIC * erased, and the words.
added; that affiant to me well known to be re-
putable and entitled to credit, and that I have no interest, direct or indirect,
in the prosecution of this claim.  6. 6. Menders and
Aotan Public tor S. C
Centificato files)
[Official Signature.]
[Official Character.]
Note.—This should be sworn to before a Clerk of Court, Notary Public or Justice of the Peace.

Note.—This should be sworn to before a Clerk of Court, Notary Public or Justice of the Peace. If executed before an officer not using a seal, his official character should be certified to by a Clerk of Court, unless there is on file in the Pension Bureau a general certificate covering his present term, and if said certificate has been filed he should state so opposite his signature.



GENERAL AFFIDAVIT.
te of Sauth Caralina, County of Calletan - , ss.
In the Pension claim No. of Odmile Hall
Personally came before me, a Atlany Ruslie in and for aforesaid County and State. Samuel Hrager aged 55 year.
and State United (Add year aged O year a citizen of APost Office Address.)
Alato Dr Nawb was the Regenental Surgean, who being duly sworn, declares in relation to aforesaid claim as follows:
Aun walfo w Hospital with feld and Dratishe
formed, that book there parties are dead, to lamost losa
them, teither does he know when any office Commit
was Senglant Williams, who was manyylans ago in Saramah
Physicians regularly, he was attended sensul times by s
asternary of refers, amongst the papers in his es
also to that of or f. & Saunders also there, and leder
making same I was not sided nor prompted by
to my denders and the hotary and its took
them down this day to blacker bans' 8. C.
further declare that no interest in said claim and
not concerned in its prosecution.
Samuel frazin
[Signature of Affiants.]

Note-In the execution of evidence, whenever a witness signs by X mark, two persons who can write, MUST attest the signature by signing their names opposite.

State of South	Panalus County of Calletino , ss.	
Sworn to and subscribed before	1 1 10	
	and I hereby certify that the contents of the above affidavit was fully made	
	known, explained and read over to the affiants before swearing, including	
	the words	
n HENDRO		
A WOULD A DUDING		
[SEAL.]	erased, and the words	
TH CHEST	added; that affiant to me well known to be re-	
	putable and entitled to credit, and that I have no interest, direct or indirect,	
Company Commence	in the prosecution of this claim.	
	h & No drag	1
	[Official Signature.]	_
	Latary Rupliplans	1
	[Official Character.] Continues of	1
Note.—This should be sy lf executed before an officer no	worn to before a CLERK OF COURT, NOTARY PUBLIC OR JUSTICE OF THE PEACE. ot using a seal, his official character should be certified to by a Clerk of Court,	-
unless there is on file in the P	Pension Bureau a general certificate covering his present term, and if said cerd state so opposite his signature.	
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Additional Evidence.	Reg't U. J. C.  AFFIDAVIT OF  WASHINGTON,  REG'T U. J. C.  AFFIDAVIT OF  AFFIDAVIT OF  FILED BY  V. TIERNEY  Attorney at Law,  WASHINGTON,	
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* 1568587 ST WAR DEPARTMENT

So Div., Hell, Ex'r.

#### Department of the Interior,

BUREAU OF PENSIONS,

Washington. D. March 3, 189. 8.

Respectfully referred to the Chief of the Record and Pension Office, War Department, requesting a full military and medical history of the soldier The referred to the Start of the Start of the soldier of Mench 14/898 has not referred the Clause and has been love or mirlacel.

No other report on file.

Name, Samuel d'ragin cod 21" Regit US & Vol hy Compagnissioner.

80 1000 0d ACT OF MAY 1, 1980