9



3-81

No./176564

REIMBURSEMENT.

	2				7 2 2		
Claimant Mabel Cha	use		Pension	er	John Cha	RL	
Street and No. 425 N. Ours	lam !	le	Class		Small		,
CR A			2 S		+ On-	11.00	
P. O	more		Law	α	Winny !	1920	
State	d		Agency		Deckin C		
Rate, \$50,			-		no-14 112	4 57	7
	1.1					Fat \$ 30	, /
Last illness commenced	ZT Dat	e of de	ath /	V/	6.1424 Accrued pe	nsion &	رمر
Amounts claimed.			CHARG		Deduction	s.	
Physicians' bills	s 24	00	\$ 24	00	State aid	8	
Medicine	1				Assets	30	011
Board					Insurance		
Nursing and care	70	00	70	00	Amount waived		
Rent			/	Į.	Death benefit	60	00
Living expenses for pensioner							
Undertaker's bill	144	50	120	50	V		
Livery	1						
Cemetery charges	1				TOTAL	90	00
OTHER EXPENSES.					Summary.		
Graceries		23		ŧ	Charges approved	\$2/4	50
				<u>)</u> e	Deductions	90	00
					Amount approved	124	50
Totals	225	73	2/4	60	/		
/							
81/67							
Approved for , , ,			,				
					Ω_{A}		. 1
h. 13 1111-	,			. 100	JA61.		
nch o, 120, O. Coll	Examine	7.	11			Revi	ieuer.
6—2138			****				/

ACT OF MAY 11, 1912. ACT OF MAY 11, 1912. Act of March 4, 1913. School Chase, alias John Reed.	et.
	1125%
Claimant, John Chase alias John Reed.	76564
outline, from the many to me I sen,	· /
The Hill of Holling of the Pint	V
Rank, Morate,	0 0 1
(no county) by	- Suf
State, Maryland.	
Rate, \$ 2/50 per month, commencing fune 16, 1914	2457166
\$27 Sion March 16 1919	
A	
/wproved or	Increase
#37 irem Jen	ie 10, 1918
ATTORNEY OR STATE REPRESENTATIVE. 1' om (Order April 25, 1907.)	19
A market	/ 1918
Name, Fee, \$	ent to pay.
P. O., Articles filed	, 18ev.
<u> </u>	
APPROVAL.	
DSubmitted for admission, ling 19, 1915, 1 Collegeux	Examiner. $\bigvee^{\wedge} V$
Approved for Adwission Rate \$ 2/= per month; age 7	O years,
Date of buth March 16, 1844	·
•	
Length of pensionable service: / year 6 months, 6	3
Deductions in service from any cause:	days,
on account of	1-11:
Seft. 17, 1917 Frank E. Andusa, Sept. 17, 1915, O. W. S.	CKUS Re-Reviewer.
1 4 Fil 14 (18 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2-10/14
Thilisted Jerry 1864; honorably discharged May	, 1860 K
Enlisted Juny 14, 1867; honorably discharged July 3	7, 1869,
Enlisted Juny 17, 1864; honorably discharged July 2; honorably discharged July 2; honorably discharged Enlisted , 18 ; honorably discharged	, 18
	days.
, Length of pensionable service: years, months	
Hength of pensionable service:	
Pensioned at \$ per month, under	
Pensioned at \$ per month, under	
Pensioned at \$ per month, under	1
PRESENT CLAIM, ACT OF MAY 11, 1912.	**************************************
Pensioned at \$ per month, under	* · · · · · · · · · · · · · · · · · · ·

Act of June 27, 1890.

INVALID PENSION NO. (1/2573)

•		
	Claimant, why Chase all as	John Reed
,	P.O. Soo north Spring St	Rank, Printe
	County Bultimore	Company A
	Mid	Regiment, 32 WOCT Inf
	Rate, \$, per month, commencing	,
	C OS	
	Disabled by Zz, az Cz	
	9. 3.0	
	27 - x	**************************************
	RECOGNIZE	D ATTORNEY.
		50 5 Not 8 800-00 Miles
	Name: Warlell Hayd	Fee, \$ 10 Agent to pay.
Jan Sand	P.O., Baltimore ma	Articles filed,, 189
	APPRO	OVAIC
	Submitted for Resection Sept 27, 189	5 medonald , Examiner,
W	Approved for Vyicting up retait	Approved for Millia
U)	disability under act Jun 27/96	The sutolle disoletity under Set of June 27 = 1890
8/	from them piles, affection of back	Let of from 27 1890.
/	provale & eyes Subjects apple	G/11,_
	The Thursday The Legal Reviewer.	Chows the Distanting 1.4
	Den 1, 1895. Hutt	Och 9 1. 1895.
		aid to
	Pensioned from, 18, at \$.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	SERVICE SHOW	IN BY RECORD
	6	
	Enlisted for 14, 1867,	honorably discharged Aug 11, 1860
S	Re-enlisted from 1867,	honorably discharged Letter 186/
- 100p.; 1	Declaration fixed March 27 , 1895, alle	ges permanent disability, not due to vicious habits,
	from Meumatism piles affe	elim Mack dlarshoes affection
	of privates and eyes	ges permanent disability, not due to vicious habits,
		signo by X
	J T	(1335-150,000.)

Act of June 27, 1890, as amended by the Act of May 9, 1900.

INVALID PENSION.

Claimant, John Chase alia	John Reed
P.O., 614- maderis street	Rank, Privale
County, Baltimore	Company, A.
State, maryland	Regiment, 32-21. S. C. V. Juf.
Rate, \$per month, commenc	ν
Pensioned forin	nability to earn a support by manual labor.
	D ATTORNEY.
Name, L. J. Odendhal	Fee, \$
P.O., Baltimore - In	Agent to pay.
APPRO	OVALS.
Submitted for	, 19,
	, Examiner.
Approved for	Approved for
	Aggregate of disabilities shown, permanent in character: \$
Legut Reviewer.	Medical Examiner. Medical Reviewer.
, 1,, Re-Reviewer.	Medical Referee.
No pensioned under other laws at \$	per month for
T. 1:-1-1	conorably discharged, 1 , 1
7 1:-to-1 1	nonorably discharged, I,
Declaration filed, 1	, alleges permanent disability, not due to
vicious habits, from	
•	
	1.
	4
, M. C.	Claimant doeswrite:
	The state of the s

(**3–145** *a*.)

Act of June 27, 1890.

	INVALID	PENSION.
B		

Claimant, Claimant, G. J.	age Mastimore	Rank, Privale	r Keed
State,	Mod.	Company, A. Regiment, 32 W	
Refected.	, per month, commen	cing	·
Disabled by			
	RECOGNIZ	ZED ATTORNEY.	
Name, A Parler			
P.O., Wall		Articles filed,	, 18 9 .
Submitted for Approved for	Ost 4 1	Approved for fless	Les Examiner.
1 2	es of disability	, disabily	tyshornend
or Meymotism	Shown me	la Colon	- The .
Cot fane 27 to desproud	7890 Duly Step of Reviewer	Col 23, 189 3	Medical Referee.
Pensioned from	ed under other laws. Las	t paid to, for	, 189 , at \$
	SERVICE SHO	WN BY RECORI). O. () () () () ()
- In Com	13-1867	honorably discharged	Ang 22, 1863- Feb 27, 1868
Declaration filed	1ay II, 1892,	illeges permanent disability	y, not due to vicious habits,

#426 4. Durlyon St.

Boit iname 119. Beamsmir 1008

Department of the Interdor,

Bureau of Pensions.

Washington, D.C.

Dear Sir: -

UE DIVISIUN BUREAU OF PENSIONS

Your latter of the 13th, inst was received and contents carefully noted and in reply will say that I am inclosing two afridavits stating the facts asked for for.

I have already placed into the office of the Bureau of Pensions the bills of Dr. Burns and the Undertaker Edw. Bryon and the storekeeper.

Hoping that I have satisfactorily answered the questions asked for. I am, Yours Respectfully,

Widow Division. 1. C. 1176,564 John Chase A- 32 U. S. C. Inf. Mabel Chase

STATE OF Maryland	1		
CITY OF Ballinions	} ss		•
I. Wilson E. Docki	ins of 4	17 M. Dur	ham street
of the City of Ballinver	and State of	maryl	and.
being duly sworm according to law depose	s and says:	0	6

That I knew the late John Chase a fermer seldier in the United States Army and can truthfully say that he did not leave any personal property or real; nor was there any funds in any depository according to my knewledge. There is no widew or miner children under the age of sixteen.

To my knewledge, Dr. W. C. Burns is the only physician that attended the pensioner during his last illness.

Subscribed and sworm to before me a Notary Public in and for the Chty of Baltimore and State of Maryland this 23 day of Tebruary 1925.

Wan S. Stanley

ENSION

CITY OF Baltinore) 38

I, Louisa Difon of 1814 Calrano street of the City of Ballimore and State of Maryland, being duly sworn according to law deposes and says:

That I knew the late John Chose a former soldier in the United States Army and can truthfully say that he did not leave any personal property or real, nor was there any funds in any depository according to my knowledge. There is no widow or minor children under the age of sixteen.

To my knowledge, Dr. W. C. Burns is the only physician that attended the rensigner during his last illness.

Mr Louisa Leifer 1814, Collamet

Subscribed and sworn to before me a Notory Public in and for the Chty of Bultimore and State of Waryland this 23 day of Fishermany 1925.

alvan S. Stauley

POLITIC STREET, NOT THE STREET

Widow Division I.O. 1176,564 John Chase A- 32 U.S.C. Inf. February 13, 1925. Mrs. Mubel Chase, 425 North Durham Street. Baltimore, Lid. Madam: In your claim for reimbursement in the above cited ; case. I have to again advise you that affidavits are required of two witnesses having knowledge of the facts, showing the character, value and disposal made of any real or personal property or money belonging to the pensioner, and whether he left a widow or a minor child under sixteen years of age. If any physician other than Dr. Burns attended the pensioner during her last uninterrupted illness, you should so state and furnish a bill for his services which should contain the name of the pensioner and a statement over the signature of the creditor showing by whom paid, or if unpaid, that you are held responsible for payment. Respectfully. WASHINGTON GARDNER Commissioner. EH-eg

a Co		BALTIMOR	E,
35	M		••••
	To	EDWARD	ł

BRYAN Dr.

Cut Rate Funeral Director And Embalmer

OPEN ALWAYS

Phone Wolfe 6429

1631 Orleans Street

Hacks And Limousines For Hire

MD. 192...

Baltimore Md

THE PEOPLES FRIEND

for funeral of john chase, a	lias f	ohn s	reed
castret	\$ 65.0	0	
1 flots robe.	8 91	00	
embalming	\$ 10.	00	
Box	101	00	
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REG. No. 2059	DR. W. C.		OFFICE HOURS:
R For	Juliu Chose		
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John Cha	xe (diseo	by.	his doughlest
mobil	Chose -		
attendo	uce up	on him	a from
Oct 17-2	11-2462	9- 200	8-1-5-7
9-11-13	3-15-16 W		245
JOHN W. SCHNI	EIDER W.	C. Dun	$\times m_{\lambda}$
GREENMOUNT AVE. & EAGER	ST., BALTO.		

Widow Division I.C. 1176.564 John Chase A- 37 U.S.C. Inf. Mrs. Mabel Chase, 425 North Durham Street, Baltimore, Md. In your claim for reimbursement in the above cited case. I have to advise you that affidavits are required of two witnesses having knowledge of the facts, showing the character. value and disposal made of any real or personal property or money belonging to the pensioner, and whether he left a widow or a minor child under sixteen years of age surviving. Itemized bills are required from each of the attending physicians which should contain the name of the pensioner and a statement over the signature of the creditor showing by whom paid, or if unpaid, that you are held responsible for payment. Second to the second of the second The enclosed certificate should be signed by Edward Bryan and Florence Woodard, and returned. Respectfully,

Acting Commissioner.

DR. W. C. BURNS

OFFICE HOURS:

1 TO 7 P. M.

PATIENT'S Phus Character 42 (M. Dunhau)

ADDRESS 42 (M. Dunhau)

ADDRESS 42 (M. Dunhau)

A. LAPOURAILLE

DRUGGIST

S. W. Cor. Caroline & Orleans Sts.

Phone Connections Baltimore

NAME

NA

3-044

APPLICATION FOR REIMBURSEMENT

This form not to be used if the deceased pensioner left a widow or minor children under sixteen years of age.

STATE OF Maryland			
	······································		
Matel Chase	morn, A. D. 1924, bei	425 U. Durh	am I, cothy of
for, and claim is hereby made for, reimbursement from	7	akes the following declarat	
burial of Man Char alias John Red	2		to the second of the second of
and who DIED November 16th 1924	and a pendioner of the o	nited States by certificate N	10.///6.069
1	, at Batterrore,	ma-	and was buried at
aure Wemelry.		0	
That said deceased pensioner did not leave sufficient	ent assets to defray the expenses of	(His or her)	and burial.
That the deceased pensioner did no (Did or did not)	leave a widow; that said decease	ed pensioner dix	leave a
minor child or children under sixteen years of age.		(Did or o	lid not)
That there was not was not insurance (in	"60. Swelinging Flore	mar 10 moland	leath. (If any,
give the name of each company and the amount of each policy, with	the beneficiary named in each, and state by whor	n the premiums were paid.)	gamus_
	7	• 0	1-1720
That said deceased pensioner (D) (Did or did not)	leave any money, real estate, or p	11)	any, state the character
and value of all such property and the manner in which it was dispo	sed of.)	privaro.	
		/ 	
That the following is a complete statement of all the	he expenses of the last sickness and buri	al of said deceased pensione	er:
(Each charge entered below should be supported by an itemized and should show, over his signature, by whom paid, or who is held re rendered. If no charge was made for any item, that fact should be indi-	sponsible for payment, and contain the name of t	nished any supplies for which rein he pensioner for whom the expens	abursement is demanded se was incurred or service
NAMES	NATURE OF EXPENSES	STATE WHETHER PAID OR UNPAID	AMOUNT
D 111Pa = 13		P.1	
Dr. W. C. Durns	Physician	1 aca	* * Y Y X
make Coloni	Medicine	Mark of	70 10
Edward Brusand	Nursing and care	Unbaid	4000
7.0000000	Livery	2007,000	
	Cemetery		
	Other expenses and their nature:		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Blor bill	1 - 2	// 安务
florisher Stor Prepri	war vi	ungais.	// 25
		. Total	/ 2 / 23
That of the above-mentioned expenses this claima	nt has paid, or guaranteed the payment	of, the following items:	
	Mabe	P Chase	' <i>ب</i>
the same of the sa	/. 1 /= 7	Claimant's signature in full	·) + -
	425	(P. O. address.)	1/
1-4	00 13 mg	to mes	
Subscribed and sworn to before me this	The day of Januar	7 , A. D. 19.25;	and I certify that the
contents of the foregoing application were fully made kn	nown and explained to the claimant before	ore Wearing, and that I ha	ve no interest, direct
or indirect, in the prosecution of this claim.	alv	an & Sta	ulry
	5	(Signature.)	105
[L, S.]	no	lary www.	Tio
- 11	1509	Setterson	St.
11/1/	6—1572	//(P.O. address.)	
J. J. 18	Deoles	tion accepted as a claim e act of March 2,1800	
	CON under +1	tion accenta	,
11 18 11 /	5-1 6	tion accented as a claim e act of March 2, 1895. H. P. Willey	n
? S &	/L:	H. P. Willey.	•
	Per /	THEA.	

			lurind bar
aesaraloi	abursement in the case of any pensioner who left sufficient assets to meet the expense of last	cension is not payable as rein	3. Accrued I
raioner. Taban l	ssets of the estate of a deceased pensioner, nor liable for the payment of the debts of minor chil mbursement in the case of a person pensioned on account of service if a widow or minor chil	pension is not a part of the a pension is not payable as rei	L. Accrued I. Secrued I. Secrued I. Secrued I. Secrued I. Secret objects of the secret o
	"INSTRUCTIONS.		
	to meet such expense. L., 1169), provides— maion shall hereafter be used to reimburse any State, county, or municipal corporation for e corporation under State law for expenses of the last aickness or burial of a deceased pensio		
Linure rviving accrued and	on nor be table for the payment of the debts of said estate in any case whatscover, but shi for confidence, And it to widow or child survive such pensioner, and in the case of his last since of a dependent mother, father, sister, or brother, no payment whatscover of their much as may be necessary to reimburse the person who bore the expense of their last sicki	cetate of such deceased per relusive benefit of the widor non st his death, and made or allowed except so	the assets of the child who was single of the child who was sell be of the child be of the chi
	L. 964), provides— lay of September, eighteen hundred and ninety-two, the accrued pension to the date of the parsioner's defect of the date of the date of the secrued pension to the date of the secretal paying an application therefor pending, and whether a certificate therefore the sen, shall, in the case of a person pensioned, or applying for pension, on account of his disabil, in the case of a person pensioned, or applying for pension, on account of his disabil, in the case of a person pensioned, or applying for pension or secount of his disabil, in the case of a person pensioned, or applying for the age of sixteen years at her death, and or a second pension aball not be considered in our per liable for the payment of the debts of said estate in any case wheteover but shift or children. And is no viden or child survive such pensioner, and in the case of his last sided in the case of a dependent mother, father, sister, or brother, no payment whateoever of their in case of a dependent mother, father, sister, or brother, no payment whateoever of their last sick to meet accordance.		
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uvisi.	614 Quibaəti A		
	e correct.	nat the foregoing statement	I certify t
		er facts within your knowle	Mention any oth
		Mon'n Ca toa n tamal na	ag mg mod sen
	U See Baring auring last sickness?	clude a charge for all medic	Does your bill in
	ded the pensioner in last sickness Dr. C. L. William & Dr. L.	y other physician who atten	as lo same ovid
	Darry Darry	recase from which pensioner	Diate nature of d
776	ioner? The Entre Territor of the Mal.	od did you attend the pens	During what per
	e regular and daily attendance of another person constantly until death?	the pensioner require th	From what date
42 61	1 22 / 129/ neguist	mencement of pensioner's l	mon to stab swift
	45 pl mante no seguine 1824	La l'anciena de tramasanar	
	In to see when the water		

and buried of the expense of last sickness and buried.

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

(a) Bills of all expenses of last sickness and buried. If paid by the claimant for reimbursement the bills are due should state by whom paid or from what source such payment was received. If the parties to whom said bills are due should state by whom paid or thom what source such payment responsible for the payment and the claimant responsible and the parties to whom said bills are due should also en each bill, over their signatures, that they hold the claimant responsible for the parties to whom said bills are due should also en each bill, over their signatures, that they hold the claimant responsible and the parties to whom said bills are due should also en each bill, over their state per day or week. The bill for number care must show the dates between which the services were rendered, and the rate of service was rendered to the services were rendered, and the claims should be presented in the name of one person.

Bach bill must show that the service was rendered for the pensioner on account of whom reimbursement is claimant a claim the name of one person.

Bach bill must show that the service are rendered for the pensioner on account of whom reimbursement is claimed.

Bach bill must show that the service was readered for the pensioner of Pensions and can not be returned.

Bach bill must show that the service was resured in the records of the Bureau of Pensions and can not be returned.

Back bills which are forwarded become a part of the records of the Bureau of Pensions and can not be returned.

Back bills which services of such bills in the name of one person.

Back bills which service so and bills in the records of the Bureau of Pensions and can not in possession of the claimant a cattering its wherever should be made.

Back bills which should be convoloused by the service pensions of the pensions who have pensions of the statement is statement and the service secure o

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section forty-seven hun-

dred and forty-six of the Revised Statutes of the United States is hereby

"That every person who knowingly or willfully makes or sids,

AN ACT to amend section forty-seven hundred and forty-six of the Revised Statutes of the United States. (30 Stat. L., 718.) Haimant.

or writing personally appeared before him and was sworn thereto, or acknowledged the execution thereof, when, in fact, such declarant,

witness named in such declaration, affidavit, voucher, or other paper executed who afall knowingly certify that the declarant, affant, or

every person before whom any declaration, affidavit, voucher, or other paper or writing to be used in aid of the prosecution of any claim for which it was actually signed or acknowledged by the pensioner, and drawing a pension, which paper bears a date subsequent to that upon assists in the making, or presents or causes to be presented at any pension

agency any power of attorney or other paper required as a voucher in or who knowingly or willfully makes or causes to be made, or aids diction of the Commissioner of Pensions or of the Secretary of the Interior, or payment thereof, or pertaining to any other matter within the juris of any false or fraudulent affidavit, declaration, certificate, voucher,

paper or writing purporting to be such, concerning any claim for pension assists in the making, or in any wise procures the making or presentation

pension or bounty land or payment thereof purports to have been

affinnt, or witness did not personally appear before him or was not

Approved July 7, 1898.

ment for a term of not more than five years.

416 N DURHAM ST FINANCE DIVISION	A. Carrier	REPORT—PENSIONER
Soldier Service Class LAW DIVISION In the above-described case a declaration fi in this Division indicates that said pensioner d, 19 Per Chief, Law Division JOHN CHASE BALTIMORE MD 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$50 per monto MOV 4 1924, 19, has this of been dropped from the roll because of Death		
Class LAW DIVISION In the above-described case a declaration fi in this Division indicates that said pensioner d , 19 Per Chief, Law Division JOHN CHASE BALTIMORE MD 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$ 50 per monto MOV 4 1924, 19, has this of been dropped from the roll because of Death		
LAW DIVISION In the above-described case a declaration fi in this Division indicates that said pensioner d ———————————————————————————————————	Soldier	
In the above-described case a declaration fi in this Division indicates that said pensioner d, 19. Per Chief, Law Division JOHN CHASE BALTIMORE MD 1176564 ACT MA 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$ 50 per monto MOV 4 1924 19 has this of been dropped from the roll because of Death		
In the above-described case a declaration fi in this Division indicates that said pensioner described pensioner described. Per Chief, Law Division JOHN CHASE BALTIMORE MD 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$50 per most to MOV 4 1924, 19, has this of been dropped from the roll because of Death	Class	SECTION 1
In the above-described case a declaration fi in this Division indicates that said pensioner declaration in this Division indicates that said pensioner declaration in this Division indicates that said pensioner declaration in the declaration		LAW DIVISION
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Per Chief, Law Division JOHN CHASE BALTIMORE MD 1176564 ACT MA 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$ 50 per monto MOV 4 1924, 19, has this obeen dropped from the roll because of Death	In the above-	The state of the second
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Per Chief, Law Division JOHN CHASE BALTIMORE MD 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$ 50 per more to 100 4 1924, 19, has this of been dropped from the roll because of Death		19
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JOHN CHASE BALTIMORE MD 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$ 50 per more to MOV 4 1924, 19, has this of been dropped from the roll because of Death		
BALTIMORE MD 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$ 50 per more to MOV 4 1924, 19, has this obsern dropped from the roll because of Death	T)	Chief Lan Division
BALTIMORE MD 1176564 ACT MA 416 N DURHAM ST FINANCE DIVISION The name of the above-described pensioner was last paid at the rate of \$ 50 per more to MOV 4 1924, 19 has this obeen dropped from the roll because of Death	Per	Chief, Law Division.
The name of the above-described pensioner was last paid at the rate of \$ 50 per more to 1904 1924, 19 has this obeen dropped from the roll because of Death		Chief, Law Division.
The name of the above-described pensioner was last paid at the rate of \$ 50 per more to 100 4 1924, 19, has this obeen dropped from the roll because of Death	-John-Ch	ASE MD
The name of the above-described pensioner was last paid at the rate of \$ 50 per more to 1924, 19 has this obeen dropped from the roll because of Death	-John-Chi	ASE BALTIMORE MD 54 ACT MAY
The name of the above-described pensioner was last paid at the rate of \$ 50 per more to MOV 4 1924, 19 has this obeen dropped from the roll because of Death	JOHN CH	ASE BALTIMORE MD 64 ACT MAY 416 N DURHAM ST
was last paid at the rate of \$ 50 per monto 100 4 1924, 19, has this obeen dropped from the roll because of Death	JOHN CH	ASE BALTIMORE MD 54 ACT MAY 416 N DURHAM ST NANCE DIVISION
to MOV 4 1924, 19, has this obeen dropped from the roll because of Death	- JOHN - СН / 1176 56 	ASE BALTIMORE MD 64 ACT MAY 416 N DURHAM ST NANCE DIVISION
been dropped from the roll because of Death	JOHN CHA 117656 FI	ASE BALTIMORE MD 54 ACT MAY 416 N DURHAM ST NANCE DIVISION
been dropped from the roll because of Death	JOHN—CHA 117656 FI The name of t	ASE BALTIMORE MD 64 ACT MAY 416 N DURHAM ST NANCE DIVISION
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SOVERNMENT PRINTING OFFICE

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INDEX TO SPECIAL EXAMINER'S REPORT

57

Claim of	John Chase alias John Reed	-		No. 1176564
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2	Summary			
	Mabel Chase			Fair
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PAGES	NAMES OF WITNESSES, ETC.	Ехнівіта	Deposi- tions	REPUTATION
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DEPARTMENT OF THE INTERIOR BUREAU OF PENSIONS

Baltimore Md, December 1,1924

The Commissioner of Pensions.

The death of John Chase alias John Reed, pensioned under ctf No 1178564 on account of service with Co A 32 U S C Inf, on Sunday November 16,1924 is brought to your attention. It is said he did not leave sufficient assets with which to defray the expense of his last sickness and burial and a claim for reimbursement may be filed by a granddaughter Mabel Chase of 425 N Durham st, Baltomore Md.

Respectfully submitted for consideration of Chief Finance Division.

Special Examiner.

2

THE EXAMINER MUST BRIEF THIS LETTER.

No.

Special Examiner.

Dated

BRIEF.

No. of inclosures,

GOVERNMENT PRINTING OFFICE

0-0700



30

Case of John Chase alias John Reed

No.1176564

On this 1 day of December , 1924, at Baltimore county of Baltimore City , State of Maryland before me,

W. H. Stovall , a Special Examiner of the Bureau of Pensions, personally appeared Mabel Chase , 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 am 31 years old, am unmarried, post office address 425 North Durham st, Baltimore Md. The late pensioner John Chase was my grandfather and he died at my residence in Baltimore on Sunday November 16,1924 and was buried at Laurel His physician was Dr Burns of Pratt Cemetery. street, and the undertaker was Edward Bryant of the 1600 block in Orleans street. My grandfather was ill and under my care for six or seven weeks before his death and I nursed him solely. I am expecting to file a claim for reimbursement of the expense of his last illness and burial as I stood for those expenses. John Chase belonged to Jobs Lodge No 13 and we received sixty odd dollars from them to be applied toward his funeral. He left no other assets. He left some money with his daughter Florence Woodard of Early Heights Md but I dont know the amount, it was thirty or forty dollars. John Chase served with Co A 32 U S C Inf under the name of John Reed as shown by his pension ctf now in my possession and numbered 1176564. He left no widow and no children under the age of sixteen years. I have heard the foregoing deposition read and it is correct.

Mabel Chase Deponent.

(Jurat over)

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Page 3 Deposition

6-5121

Subscribed and sworn to before me on this the 1 day of December 1924, and I certify the contents were fully made known to deponent before signing.

SPL. EXII. DIVISION
ABOVE OF FORE
DEC 3 1974
BUREAU of PENSIONS.

FINANCE DIVISION
DEC 3 1924
EUREAU OF FERSIONS

100
3-296
S. E. D. (3)
1/20
No. 1170504 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Claimant: John Chase
Soldier:John Reed
P. O. address: 425 N Durham st
Gounty: Baltimore State: Md
Recommendation: Finance Division
W. H. Stovall Special Examiner.
REFERENCE.
DEC 3 1924 19
Respectfully referred
to chief Finance Division
for consideration.
M. L. DAWKINS.
Chief S. E. Divisien.
Chief S. E. Division.
RECOMMENDATION.
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Reviewer. ACTION.
ACTION.
, 19,
<u>-</u>

W. 200

John Chase of his follo Reed Private Co. CT. 32 Regulent united state Infantry. 73 alto Md EROPPED AND REPORTED. Dece 3/924 Dear Sir. of the 16 days mother Ingard Lian John Reed Who Die Inovember 16,1924 under my Care for sick for about seven months befor he soi down in Bled Ned Singalcases send me a Blank to be filled. From his Grand-Wauretter Mabel Chase Baltimore III-

ADMY AND 3 NODY. Y SIV.

DEPARTMENT OF THE INTERIOR, BUREAU OF PENSIONS,

MOTING

Address: "The Adjutant General, War Department, Washington, D. C."

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE, Army and AWASHINGTON.
SEP FILES

Respectfully returned to the SEP

Commissioner of Pensions.

The medical records show the following information that has been discovered since the statement of 27,95, herewith returned, was made. ditional reend of disability H. P. McCain

The Adjutant General.

No. Claim, ///2573 Cert. No...____ Chief, Board of Review.

DEPARTMENT OF THE INTERIO BUREAU OF PENSIONS Washington, D. C., O , 191 V. Sin: Please answer, at your earliest convenience, the questions enumerated below is requested for in ture the and it may be of great value to your widow or children. envelope, which requires to stamp. The information Use the inclosed stamp. AUG Very respectfully, Commissioner No. 1. Date and place of birth? Answer. Baltomore March The name of organizations in which you served? Answer. (...) olm Holm Reed a Co. 32 sd No. 2. What was your post office at enlistment? Answey John Reed. No. 3. State your wife's full name and her maiden name. Answer. No. 4. When, where, and by whom were you married? Answer. Answer. No. 5. Is there any official or church record of your marriage? If so, where? Answer. at home 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 death or divorce. If there was more than one previous marriage, let your answer include all former wives. Answer. Mave 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. 8. Are you living with your wife? Answer. ... of birth of all your children, living or dead. (Signature) **338** τ

6-384 AND HALLY GIV. 7/6.S.

DEPARTMENT OF THE INTERIOR,
BUREAU OF PENSIONS,

Washington, D. C., Aug 16 1915.

Respectfully returned to

The Adjustant General,

Was department,

regresting a referr show ing whether the statements of the soldierhere

with as to the names of

afficers and members

afhis companies and regi
ments and the movements

of Co. A. 32 M. S. C. Juff are

corroborated by the records.

John Chase, alias

Solan Reed, Juff

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

Respectfully returned to the

Commissioner of Pensions,

with the information that in the case of John Reed, Co. A. 32 U.S. S., The statement of soldier as to the name of Officers and members of his Co. and Regt and the movements of to A. 32.

U.S. F.S. are found substantially correct, except that he was mountain his Co. Aug. 22, 65 or Hillon.

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Per

Orm No. 161-A. G. O.
Ed. Apr. 16-16-5000.

Form No. 161—A. G. O Ed. Apr. 16-15—5.000

ARMY AND NAVY DIV,		I m	~ /
\$ 0 No. 1/12.5	Div.	3–442	Ex'r.
60 a 32 16 s.C.	Enf. DE	EPARTMENT OF THE INTERIO	OR
P. O. Waltenore . M Enlisted Feb 17, 18	1d.	BUREAU OF PENSIONS	
Discharged and 22, 18, Discharged they 1, 18		ashington, D. C., lug 16	, 1915
Chief, Record Division:	,		, 1013.
Please furnish the nam of Co. A., 32 Reg't Toestablish ouldier	U.	ost-office addresses of officers and con 1. C. Suff, as below ore	nrades atten
		Chief, A Y 21	Div.
NAME.	RANK.	PRESENT POST-OFFICE ADDRESS.	WITNESS ACCOUNTED FOR BY—
o Mm Gordon,	Polyt	not on file	
V James HA would,	agt	Mead	
· Geo. Hayes,	Tiper	not on file	-
James W. Unistrong,	Priv	Nead	-
o Mm Boley,		not on file	
V Alford Bye,		Nead	
& James Tivingston,		not on file	-
o Homes Burton,		not on file	
a Jasse Thompson,	//	not on file	-
V Noah B. Jacobs,		RR- Dead	-
1 Jerry Brown,		Moorestown, Burlington Ca. N.J.	
John Butchers		Dead	
Respectfully returned to desired information as far	Chief, as knowi	a. 7 wate All	oith the 1945
AUG 181915		ACTINGChief, Record	Division.

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RECORD DIVISION.

LIST OF

OFFICERS AND COMRADES.

Co. C., 32 Reg't MSC. Inf.

FOR USE IN CLAIM

I.O. No. 1/12573

NO. No. 1112573	_ <i>Div</i> .	3—112	Ex'r.
John Chure ai John	Reed		
la 32 rese Inf	DE	EPARTMENT OF THE INTER	IOR
P. O U Enlisted	 18	BUREAU OF PENSIONS	
Discharged,			
Disability incurred,		Cashington, D. C.,	, 191
Chief, Record Division:		,	ŕ
Please furnish the n	ames and n	ost-office addresses of officers and c	omrades
7 .			
of Co. \mathcal{U} , 32 Res	g t mac, o	<i>w</i>	
k		$\it Chief,$	Div.
NAME.	RANK.	PRESENT POST-OFFICE ADDRESS.	WITNE ACCOUNT FOR BY
Parles Crissey	Capi	152 M. Winifred N. St. Paul, M.	inn
vry Grandison	Prof	607 Maryland ann N.E. Washington	n,10.0.
aniel Cole		Hrigoton, Stevens Co, Kan.	
eorge Burton	- Int	Fairmount, Gussex Co. Web.	
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RECORD DIVISION.

LIST OF

OFFICERS AND COMRADES.

Co. a., 32 Reg't Mse Inf

FOR USE IN CLAIM

No.11/2573

DEPARTMENT OF T

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BUREAU OF PE

John Chase, alias,

John Reed,

Co.A, 32 U.S.C. Inf.,

Co.K, 40 U.S. Inf.

The Auditor for the War Department,

Treasury Department.

Sir:

For use in the above cited cla of May 11, 1912, you are requested, for back-pay or bounty on account o Inf. from February 17, 1864 to Aug. Bureau any evidence furnished there

You are requested also, to fur ture of said John Reed, as of the s ing of the signature of John Chase, from Jany. 14, 1867 to Feb. 27, 186

NO CLAIM FOR ARREARS Treasury Department. 8 UDITOR FOR THE WAR DEPARTMENT, Washington, D. C., Respectfully returned to the Hon. Commissioner of Pensions In the case of John Reed late bruste , no claim having been filed in this office on account of his services, the desired information can not be furnished. The names of each . L. BAITY. Auditor.

U JUL 1915 S. 2-481

Very res

DEPARTMENT OF THE INTERIOR

F.O.1,112,573, John Chase, alias, John Reed, Co.A,32 U.S.C.Inf., Co.K, 40 U.S.Inf.

BUREAU OF PENSIONS

WASHINGTON

June 25, Ale Depart

CELVIELOELE

The Auditor for the War Department,
Treasury Department.

Sir:

For use in the above cited claim for pension under the act of May 11, 1912, you are requested, if John Reed has filed a claim for back-pay or bounty on account of service in Co. A, 32 U.S.C. Inf. from February 17, 1864 to Aug. 22, 1865, to loan this Bureau any evidence furnished therein bearing on his identity.

You are requested also, to furnish a tracing of the signature of said John Reed, as of the service indicated, and a tracing of the signature of John Chase, as of Co. K, 40 U.S.Inf., from Jany. 14, 1867 to Feb. 27, 1869.

Very respectfully,

ACTION Commissioner.

PENSION N JUL 1915 S.

Army and Navy Division FILES JUL 10 1915 RECEIVED

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I.O.1,112,573, John Chase, alias, John Reed, Co.A,32 U.S.C.Inf., Co.K, 40 U.S.Inf.

June 25, 1915.

The Auditor for the War Department,
Treasury Department.

Sir:

For use in the above cited claim for pension under the act of May 11, 1912, you are requested, if John Reed has filed a claim for back-pay or bounty on account of service in Co. A, 32 U.S.C. Inf. from February 17, 1864 to Aug. 22, 1865, to loan this Bureau any evidence furnished therein bearing on his identity.

You are requested also, to furnish a tracing of the signature of said John Reed, as of the service indicated, and a tracing of the signature of John Chase, as of Co. K, 40 U.S.Inf., from Jany. 14, 1867 to Feb. 27, 1869.

Very respectfully,

ACTING Commissioner.

A. & N. DIV.

RK: JNL

DEPARTMENT OF THE INTERIOR

I.O. 1112573,

John Chase, alias BUREAU OF PENSIONS

John Reed,

A, 32 U.S.C.Inf.

WASHINGTON

July 1, 1914.

Auditor for the War Department,

Treasury Department.

Sir:

For use in the above-cited claim for pension, if the soldier, John Reed, has filed a claim for back pay or bounty, please loan this Bureau any evidence furnished therein bearing on his identity. Said soldier served in Co. A, 32nd U. S. C. Inf., from February 17, 1864, to August 22, 1865.

Very respectfully,



I.O. 1112,573,
John Chase, alias,
John Reed,
A,32 U.S.C.V.lnf.
K,40 U.S.Inf.

July 1, 1914.

Mr. John Chase,

410 N. Durnam St.,

Bultimore, Md.

Sir:

In your above-cited claim for pension under the Act of May 11, 1912, you should furnish the testimony of credible witnesses who knew you in the service as John Reed, and have known you since the date of your discharge as John Chase, and can state positively from their knowledge of you that you are the identical person who served in Co. A, 32 U.S.C.V.Inf. under the name of John Reed. You should also state the names of all battles in which you were engged during the period of your services, from Feb. 17, 1864 to Feb. 27, 1860, the station of your companies during the said period, and all events connected with your service which you deem of sufficient importance to have been made a matter of record.

Very respectfully,

A. & N. DIV.

RK: JUL

I.O. 1112573, John Chase, alias John Reed, A, 32 U.S.C.Inf.

July 1, 1914.

Auditor for the bar Department, Treasury Department.

Siri

For use in the above-cited claim for pension, if the soldier, John Reed, has filed a claim for back pay or bounty, please loan this Bureau any evidence furnished therein bearing on his identity. Said soldier served in Co. A, 32nd U. S. C. Inf., from February 17, 1864, to August 22, 1865.

Very respectfully,

ARMY AND NAVY DIV.

3-004

Col May 11-1917

DEPARTMENT OF THE INTERIOR.

BUREAU OF PENSIONS.

Washington, D. C. June 24-1814

Respectfully referred to thee

Adjutant general, lear

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at enlishment jam 14-1867

mider name of John

Chase at which hime

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as soldier,

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Gran lehase alias

John Read

John Read

1.32 N. J. C. Guf

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON, JUN 23 1914

Respectfully returned to the

Commissioner of Pensions,

with the information that is the case
of John Charl put to A,
40 Up for the inhistment
paper of Jan 1867 dord
not show the organization
in which sites ? enice
was rendered; at a



Geo. Andrews

The Adjutant General.

(A.G. 0.161)

16

ACT OF MAY 11, 1912. DECLARATION FOR PENSION.

	THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.
	State of Maryland, Consity of Satherest, 55:
	On this day of June, A. Done thousand nine hundred and fourture
	personally appeared before me, a Notary Public within and for the county
	and state aforesaid, John Chase hyjohne Reed, who, being duly sworn according to law
	declares that he is 70 years of age, and a resident of 4/1 N. Durlance St
	Country of Battimers State of Maryland, and that he is the
	identical person who was ENDOLLED at Made Made Manual Language under the name of
ż	four of ted on, on the 17 day of January, 1864
/IBE	as a Private, in Co." 32 Regt. W. W. Jhroths (Here state rank, and company and regiment in the right, or vessels if in the Navy.)
5	(vessels if in the Mavy.)
I I	in the service of the United States, in the war, and was HONORABLY DISCHARGED
A	at Camp Cadwalladov on the day of Cangust 1865
エ	That he also served in 60. K"40" REgt Us Infty-exclisted at
Z	Butto Med about 867 muder name & Hohre Chase served
7	about 25 months - Discharged for Disability at Ralugh N.C.
기 >	That he was not employed in the military or naval service of the United States otherwise than as stated
3	above. That his personal description at enlistment was as follows: Height, feet inches;
\subseteq	complexion, www ; color of eyes, black ; color of hair, black ; that his occu-
4	pation was a coacherran ; that he was born Grand 16-, 1844
Y.	
5	That his several places of residence since leaving the service have been as follows: Bultinune, Ma
Z	That I was a slave and when I endested in 1864, endested
\preceq	and profe name of John Red and great provide mider my own
Ę,	That he is a pensioner under certificate No.
5	That he has applied for pension under original No. M. Law Caw Color as applied for pension under original No. M. Law Caw Color as applied for pension under original No. M. Law Caw Caw Color as applied for pension under original No. M. Law Caw Caw Caw Caw Caw Caw Caw Caw Caw C
2	That he makes this declaration for the purpose of being placed on the pension roll of the United States cunder the provisions of the Act of May 11, 1912.
LI Li	That his post-office address is 4/6 N. Durly of Quitured
<	State of state of the Charles
Pe	The transfer of the state of th
<i>s</i> - 0	Attest: (i) Manual & The Manual
	(2) Manue D. Minun
	Subscribed and sworn to before me this day of A. D. 191 A and I hereby certify that the contents of the above declaration, etc., were fully made
	known and explained to the applicant before swearing, including the
	[L. S.] words erased,
	and the words and that I have no interest, direct or indirect, in the prosecution of this claim.
•	Marrie Vilmin
	Notary Sublic

A PROVED MAY 11, 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, wenty 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 of special act, Flowled, 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.

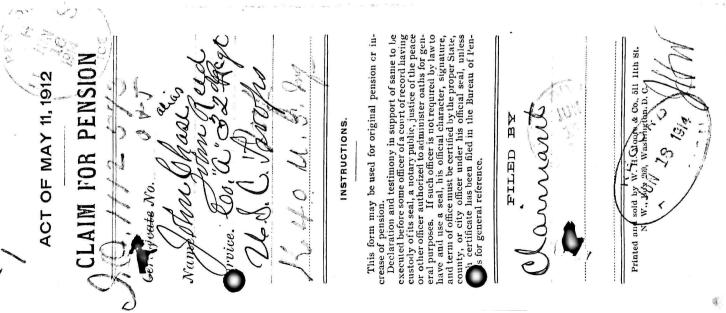
Sec. 2. That rank in the service shall not be considered in applications filed hereunder. Sec. 3. That no pension attorney, claim agent. or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under 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 hundered 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 two, and twenty-eighth, nineteen hundred and two, and twenty-eighth, nineteen hundred and two, and twenty-eighth, nineteen hundred and two twenty-eighth and twenty-eight

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 service of each claimant, the monthly rate 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 1914 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.



Army & Navy Div.
I.O. 1,112,573.
John Chase, alias
John Reed,
A, 32nd U. S. C.Vol. Inf.
K, 40th U. S. Inf.
Act of June 27, 1990.

March 2, 1911.

Er. John Bhase,
410 North Durham Street,
Baltimore, Md.

Sir:

In response to your letter dated February 18th, received February 21, 1911, relative to your above cited claim for pension, you are informed that Captain Edmund Rice, James W. Armstrong, Alford Byce, Norah B. Jacobs and James H. Howard are dead; and that the present post office addresses of James Livingston, Romeo Burton, William Gordon, George Hayes, Jesse Thompson, Boley, Murray, Thomas Dye, Charles Peterson and Henry Utley are not known to this Bureau.

Very respectfully,

Medond bivision face. Department of the Interior, BUREAU OF PENSIONS.

Briefed by
Claim No. Clean Certificate No. / / 1 2 5 7 3
Claimant ohn Chari ain
Service Q 32, Par-duty
Additional Service K. 40, U.S. S.
No, 190, 190
No claim, combination records, 190
200 PLV



J. G. Noff/2 57 John Characa	div.	artment of the Inter	Ex'r.
P. 0.4/8-/r. Dull Enlisted Jan. 14, 18 Discharged Fiel, 27, 186 Disability incurred , 18	<u> </u>	BUREAU OF PENSIONS, Vashington, D. C., Feb. 25	,190
Chief, Record Division: Please furnish the nam of Co. Z., 4 C. Reg't		ost-office addresses of officers and con	_
John John Lie		Chief, A + C	Div.
James on James of Jam	Capt Freit Inster	110 such officer 22 Noton file	ACCOUNTED FOR BY—
Respectfully returned to desired information as far	Chief,	Division, u	F8 5.

RECORD DIVISION.

LIST OF

OFFICERS AND COMRADES.

Col, JO Regita I Inf
FOR USE IN CLAIM

L.O. No. 1/12 57 3.

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AMOU AND Div.	O 3–442.	Ex'r.
Son No///2 573	de la	•
A 32 01 8 C CV. 12	epartment of the Inte	rior,
Enlisted 7, 1864	Bureau of Pensions,	
Discharged A Z Z, 1865 Disability incurred 18	Washington, D. C., Feb. 25	_,190/_
Chief, Record Division;		
	d post-office addresses of officers and co	
of Co. A, 32 Reg't a	. & @ my 7/fustice	stick
belons,		Tim
(For Identity)	Chief, A Y Zz	Div.
NAME. RAY	K. PRESENT POST-OFFICE ADDRESS.	WITNESS ACCOUNTED FOR BY—
(Amstrong	Dead	
Boley	Notonfile	
Aland Bre	Dead	
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Romeo Bourton	h ,, k	
asse Thompson	p 0 p	
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Respectfully returned to Chie	of Division,	with the
desired information as far as ki		and Naty bivier
, 190		d Division.
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RECORD DIVISION.

LIST OF

OFFICERS AND COMRADES.

FOR USE IN CLAIM

So No. 112573

Balton 2/18/17/ To the Pension Buran Washington LOC. Sentlemen I have before the board 3 times and the last was Heb 9/1910 and I received an answer from Mr Parlett Toyd attoney at Law-It faul & Sarattogo st Ballo Md and he said that I would have to fine 2 witnesses from each Company the 32 sd Pennsylvania Co. Oa I can nt get any witness as all that I know is dead except a min name armstrong and I can'nt locate him no where Sand Wm Bolers I can'nt locate him Bent Beard he is dead all all the Mon What I can remember are afford Bye , James Livington, Promeo Burton Cenry Clay he died at Morris Island names continued are pessie Thompson Morah Jacobs, (Wm Gordon 1st Sergt) (James Howard Sergt, (Seonge Harges; fifer) (Samuel Towndine Drumer) Jerry Brown Um Hailstock, John Butcher, James Wright Bazil Proctor, Wm Hill I was under Caption Crising, Leut Winters he was

Mares Continured John Lee, Leven Palmer, GloBrown, Comelious Walker andrew Jessen he beleve Burtle) John Tront; Walter Gilmore, I was Company Carpetner and Joseph Yateman was Black smith. the 40th United Stales Go. K and camped at at camp Disebusion and Whent from alexandra on the Hlambul and was Shiped week near Hart Hisher and lost all we had guns and every thing was thrown over board in trying to Dave the Men and the ship we left Hart Hisher and whent to Fort Gasel Mour Sentlem I was a private Solder in the 32 sd Temselbound Co. A. inlisted by the names of John Reid in Philadelphia and I was Company Carptner in the 40th Mited States Co. Ky and in Batter Bitel the reason I inlisted under John Chase, and John Reid because I was a Runaword slave I was discharged at Ralegh North Carolina for being desable for Duty in the 40 th United States Co. K. Hendlemen this is the best I can give you as Iam now 67 years old and not able to work Residence

.2.

Wounded at thonas Hill and I think he died at Beauford South Carolina and 2 Leut Sliton we left Philadelphia on the Contlenettle think it was either Oper or May and I was taken sick with the Mumps and Dr Green attended me and we landed at Selrook South Carolina and Marcheddown to Hilton Head and When we came home the right wing came first we came home on the Molenen and landed in Non- York and there to Philadelphia and we had a fine suffer given us that night and next day we Marched out to Camp Kitwalty and got our

I was in Co, H. 40th United States
I was under Capt Rice Perried Cornal
Let James on lot Sergt Murie)

3 sd - Sergt Thomas Dye, Sergt took sick and
and Sergt Thomas Dife took is place the
names are Harty Watson was shot by Gook Johnon
accondently and died from it John Southwood
short one evering firing a salute a Fort Casel
and Charles Peterson too, and I. Letter
and henry latters made the box and Maild
Southwood up,

rase Reid Removed

RECORD DIVISION.
Department of the Interior,
BUREAU OF PENSIONS.
Briefed by T, H, W,
Claim No. 1112, 573
Certificate No.
Statem Chase & Reed Service a 32 M.S. C. by Additional Service K 40 M.S. by
Storm Chase & Need
Service a 32 M.S. C. my
Additional Service K 40 U.S. hy
No Merchim, State records Mar 181960
No claim, combination records, 190
REMARKS:
Records O.K.

Chief Division

SURGEON'S CERTIFICATE.

Insert character and number of claim,	Pension Claim	No						
Name of claim- ant.		dress \ P.O.						
Claimant's post- office address.	Company A Reg't Bo	State.						
	Disease of lowt, pile - daice							
Names of disa- bilities.								
		sion of XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX						
Here give the claimant's statement (as briefly and as compactly as	ent (as discovered by him: Discours of interference times times to be a second as the							
compactly as possible) in regard to the date of origin and cause of his disabilities and the manner in	d d							
which they affect him.								
	Birthplace, Baltimore, Md ;;							
	weight, 170 pounds; complexion,							
	color of hair, 1101; ; occupation, 1010;							
	We havely certify that man examination we for	•						
	We hereby certify that upon examination we find Pulse rate, (Sitting, standing, after exercise.); respiration, (Sitting, standing, after exercise.)							
	[Sitting, standing, after exercise.]	itting, standing, after exercise.]						
Here give a full description of the disabilities, in accordance with Book of instructions, and make a separate para-	netion-no dysphoen, adama or cyrrical PILES-Cordition of rentum normal stricture or prolupse of rectum.	osis-no rurmirs. -no piles, "istula, lissure,						
gruph for each disability.	cities one CO/30. RMEDIATISM-Complains of pain in in it is the state to be seen in the complaint of the com	Poth hip joints-both thee and						
Facts within the knowledge of the Board, of any member thereof, rela- tive to the cause of any	or notice joint-wilks with alight line contraction or impaired nation.	mp-ne stropy; of swaclea-ne						
disability found should be stated.	LUNGS-C est at rest 37-full image Pamerusian and autoritation reva	al a normal condition of						
	KIDNEYS-Uring alorgeli 't qu' or o cid reactioners l'agin, a ar o tosts loit, itrie of a Fili	nolor-cyrcific revity 1016- r ofter alrers 1 deposits- n.s.						
Whenever a disa- bility is shown or is believed	HYDROCELE-There is a rist share and end of the share and the share the state of the share the state of the share the	asto II indici in direcultera. -ue vuriceeslo er lornia. mina ill-vourished-croeta.						
to be due to or aggravated by vicious habits the opinion of the board must be stated. When not due	of Claiment Educts Invited Land a cor	e on panis while in Stryles, in ri ht proin-lunge wear in						
to such habits this fact must be stated.	<pre># ribt rein-re other cyldales 0:</pre>	vinimial disease-ulin, dir, u normal-plandalar spetam nor- ans-na evidence of victors						
	No other limitality found to make we wind to the warm of the tenth of the second later is due to							

When rates are recommended solely on subjective evidence the strongest reasons must be

C. L. Scudden, Pres. Treas.

An examination must not be made by one member of Programmes upon a special order of the Commissioner of Fensions. (This certificate to be filled in and signed by the secretary when the full board is present.) "I hereby certify that Dr. _____ were personally present and actually participated in the , the claimant in this case, on___ examination of Jc , 190 (Signature.)(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.) _, the applicant for (increase or original) pension referred to in this medical certificate, hereby consent to be examined by Dr. _ ____, the examining surgeons here present (waiving examination by full board), on this _ day of. Witnesses (Signature of Applicant.) to mark. Post office, The outlines of the human skeleton and figure should be used to indicate precisely the location of a disease or injury, the entrance

exit of a missile, an amputation, etc.

DECLARATION FOR INVALID PENSION

Under the Acts of June 27, 1890, and May 9, 1900.

,	State of Maryland, country of Baltimire, 55:
	On this 29th day of Deember, A. D. one thousand nine hundred and
	mil personally appeared before me 13 4/anns on a
*	a within and for the County and State aforesaid
	John Chase John Reef a resident of the City
	of Baltinoue County of
	State of Waryland who, being duly sworn according to law, declares that he is
	the identical John Chan alias John Reed who was ENROLLED on the
	day of
	in the service of the
	United States in the War of Rebellion, and served at least ninety days, and was Honorably discharged at
	, on theday of, 18 6 1.
	That he hasbeen employed in the military or naval service otherwise than as stated
	above(Here state what the service was, whether prior or subsequent to that stated above, and the dates at which it began and ended.)
1.05 Jul.	That he isyears of age, having been born on theday of18
'.) '.	That he is unable to earn a support by manual labor by reason of age (Strike out the word "age" if under 62.)
27,	disease of heart and keller and defective vision. (Here name all diseases or injuries from which disabled.)
$\mathcal{S}_{\mathcal{J}}$	
	That said disabilities are not due to his
	vicious habits, and are to the best of his knowledge and belief permanent. That he has
	applied for pension under application No. That he is 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.)
	That he makes this declaration for the purpose of being placed on the pension-roll of the United States under
۲,	the provisions of the act of June 27, 1890, as amended by act of May 9, 1900.
	He hereby appoints, with full power of substitution and revocation, A. PARLETT LLOYD. of Baltimore, Md.
Alsi.	his true and lawful attorney to prosecute this claim, the fee to be TEN DOLLARS, as prescribed by law. That
8 -	
CO	his POST-OFFICE ADDRESS IS
), \31 ₀₀₀	his POST-OFFICE ADDRESS IS
), \21 \0 _{FF1} C ⁽	S. Baltins ou State of Mary land. S. Harris on State of Mary land. S. State of Mary land.
OFFIC	Signaturi ou State of Mary Pand his his
0. 1909 0. 1909	S. Baltins ou State of Mary Pand. S. Harris on State of Mary Pand. S. Word of this Charles
0. 1909 0. 1909	S. Baltins on State of Mary Parid. S. Baltins on State of Mary Parid. (Claimant's signature-FULL name.) 2 Beulah S. Davis

Also personally appe	ared M. A. Par	ad'hal	
Balts.	Mol ar	nd Beulah 3 Davi	, residing at
esiding at 13at	the trail	nom I certify to be respectable and entitle	
who being by me duly swo		and saw John Chare alia, (Name of Claimant)	
elaimant, sign his name ((or make his mark) to the fo	regoing declaration; that they have	Very reason to
		acquaintance with him of	
		dentical person he represents himself t	
they have no interest in the	he prosecution of this claim.	M. H. adend ha	l.
(Ifaffiants sign by mark, two pe	4	(Signatures of Afflants.)	avis
Sworn to and subscri	bed before me this 29 Th	day of December, A.	D. 190
I do hereby certify that	the contents of the above decla	aration, etc., were fully made known an	d explained te
the applicant and witness	ses before swearing, including t	the words	
		210f erased,	and the words
		4	थ प
added; and that I have:	no interest direct or indirect in	1 = 9	g.
indiago.	Pawer of account of S. A. Cuddy.	on Confr. Haur	resident file to
(L. S.)	Chief, Law Dr.	(Official Character.)	7 11 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
10,5		(Ontoin Cumstant)	lon.
Notary Public, or Just in case he has none.	ice of the Peace, whose officia his signature and official cha	r some officer thereof having custody al signature shall be verified by his off aracter shall be certified by a Clerk icate is already on file in Pension Office	icial seal, and of a Court of
	O, REQUIRES in case of a soldier		
 An honorable di 	scharge (but the certificate need	not be filed unless called for).	

- 2. A minimum service of ninety days.
- 3. A permanent physical disability not due to vicious habits. (It need not have originated in the service.)
- 4. The rates under the act are graded from \$6 to \$12, proportioned to the degree of inability to earn a support, and are not affected by the rank held.
- 5. A pensioner under prior laws may apply under this one, or a pensioner under this one may apply under other laws, but he cannot draw more than one pension for the same period.

Cts of June 27, 1890, May 9, 1900.

Cts of June 27, 1890, May 9, 1900.

Name:

Name:

Service:

Service:

Service:

Service:

And Charles Control of May ind New your Blutsion

Fred May 1900.

Fred May 9, 1900.

Service:

Service:

Fred May 9, 1900.

Fred

Declaration for Invalid Pension.

Act of June 27, 1890.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes. If such officer uses a seal, certificate of Clerk of Court is not necessary. If no seal is used, then such certificate must be attached.

		
State of MS	, County of	Jallenor, 55:
ON THIS	A. D. on	te thousand eight hundred and ninety.
personally appeared before me, a	ustice !	
within and for the County and State aforesaid,	In le	frase
agedyears, a resident of the	eccy of	Dacener.
County of	State of	who, being
duly sworn according to law, declares that he is the	identical	In Rus.
who was ENROLLED on theday of		
and regiment, in Military service, or vessel, if in the Navy.)	U.S.L.	
		S In alout 67
Discharged aleuin the serv		
ninety days, and was HONORABLY DISCHARGED at		
day of, 18 65 TI		<u> </u>
manual labor by reason of The	(Here name the diseases or inj	uries from which disabled.)
		That he alleges
hu Disakelle	es Off	ation of privale
T afficeion	of eige	<i>a</i>
That said disabilities are not due to his vicious hal		
character. That he hasapplied for	pension under application	No
und er Certifica te No(If a	pensioner, the Certificate numb	per only need be given. If not, give the number of the
former application if one was made.)		
The the been employed in the	military or naval service o	therwise than as stated above.
That he makes this declaration for the purpose of	being placed on the pens	sion-roll of the United States under the pro-
visions of the Act of June 27, 1890. He hereby appears A. PARLETT L.I.O.Y.)of	LTIMOPE MD.
his true and lawful attorney to prosecute his claim,	and he directs that the sur	m of ten dollars be paid to said attorney.
	10 A	Juney The
That his POST OFFICE ADDRESS is	.EState of	
County of Maassed July	ia La	Signature of Claimant.)
To Buest growth story here.		11007

	Also personally appeared. John W. J. Wison, residing at Ballo me
á	A Steph to
	residing at
,	certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were present and saw
J	The Chare aleas Tec., 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 acquaint-
	4
	identical person he represents himself to be; and that they have no interest in the prosecution of this claim.
	Magnew Tolona John With alson
	Marine (M)
	Sworn to and subscribed before me this
	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
	to the applicant and witnesses before swearing, including the words.
	prosecution of this claim of expecution of expecution of this claim of expecution of e
\	prosecution of this claim of this claim of this claim of the state of
- X	prosecution of this claim.
C.	Magurda Juliusur
	O De Marie
	[L. S.]
	I,, 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 doingin and
	for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and
	that his signature thereunto is genuine.
	Witness my hand and seal of office, thisday of, 189
	[L. S.] Clerk of the
	The Act of June 27, 1890, REQUIRES, in case of a soldier: 1. An honorable discharge (but the certificate need not be filed unless called for.)
	2. A minimum service of ninety days.
	4. The rates under the act are graded from \$6 to \$12, proportioned to the degree of mability to earn a support, and are
	not affected by the rank held. 5. A pensioner under prior laws may apply under this one, or a pensioner under this one may apply under other laws,
	but he cannot draw more than one pension for the same period.
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	APPLICATION Le 27, 1890. 32 USC. M. CLS. M. Class by Class by
	1890.
90.	27, 12 27, 12 27, 12 27, 12 28 27, 12 28 27, 12 28 28 27, 12 28 28 28 28 28 28 28 28 28 28 28 28 28
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1112,573	Set of June Con Sess Co A Lo C
12-6	ame Act.
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Declaration for Invalid Pension.

Act of June 27, 1890.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes. If such officer uses a seal, certificate of Clerk of Court is not necessary. If no seal is used, then such certificate must be attached.

State of	ms	, County of	/ Tates	, 55:
ON THIS	14 day of ma	7, A. D. o	ne thousand eight hundred and	l ninety.(LWo
personally appea	nred before me, a	\sim		
within and for th	ne County and State aforesaid,	John	100	rase
aged	years, a resident of the	ily of !!	Jule.	
County of		State of	J	., who, being
duly sworn acco	ording to law, declares that he is the id	entical	m /ted	
who was ENROLLI	on theday of	1	, 18 , in	e rank, company
and regiment, in Mi	ilitary service, or vessel, if in the Navy.)	Vaj	450 Say	
	in the service	۸ .	a (~)	
ninety days, and	I was HONORABLY DISCHARGED at			
day of	<i>(</i> , –	-	unable to earn	Liduey
manual labor by	tore		juries from which disabled.)	" ±
24.(<u>G</u> 5.5)	4°. 			
T. Barthiann				
	ilities are not due to his vicious habits		No That he	
character. Tha	Al a O ente	iledin.	60K40	us. Ja
under Certificat	Correct - come (If it po	nsjoner, the Ortificate num	nber only need be given. If not, give t	he number of the
former application	i if one was made.)			
That he has			otherwise than as stated above	
	this declaration for the purpose of be		nsion-roll of the United States MA	under the pro-
11	Act of time 27, 1890. He hereby app	Zof	ILIORE,	and and a
his true and law	wful attorney to prosecute his claim, an	nd he directs that the si	where by	- tattorney .
That his POST C	OFFICE ADDRESS is	<i></i>	nd 1	
County of	(Ow Broke	State of	hu X Signature of Claimant.)	luce
Mag.	wither Tub mana	<i>O</i> a	was John	houl

				C_{-}	7		_		
10	101.	Also pe	rsonally appeared	Teo	ye .	1	residing at	15 as	The man
4	,	1:	Quo/	Zevie		3	20 1 7 3	T	
PEXOX	10 NO \$	and			residing at.			nerse	ons whom I
0	1205	< /							
1	STO.	certify to t	pe respectable and ent	itled to credit	, and who, bei	ng by me d	uly sworn, say 1	they were prese	nt and saw
1		There	han E.	Ky S.					
		******	······ <i>§</i> ····		• • • • • • • • • • • • • • • • • • • •	, the c	laimant, sign his 1	name (or make h	is mark) to
		the foregoin	g declaration; that the	y have every r					
			-13	,	eason to believe	nom me app	bearance of said of	laimant and thei	ir acquaint-
		ance with hi	im for	— ······	vears and	no			
		identical ne	reon he represents Li				years,	respectively, tha	at he is the
		Identical per	rson he represents him	sell to be; and	that they have r	10 interest in	the prosecution	of this claim.	
						6	2	70	
							eveg e	I. Vee	-Ch.)
							//Oe	V 3.	
					-	, · · · · · · · · · · · · · · · · · · ·	(Signatures of	Witnesses.)	
		_	N 80 000 NO NO NO		1 4 Ch		Ma		
		Sworn t	o and subscribed befor	e me this	d	ay of	,, ca	.J, A.	D. 1892
	*		and I hereby certify the	nat the content	s of the above	declaration, a	&c., were fully m	iade known and	explained
			to the applicant and w	itnesses before	swearing, include	ding the word	ls		
			ž						
			***************************************		erased, and	the words			
		₩	•••••		added;	and that I h	ave no interest,	direct or indire	ect, in the
	111	off party				1			
	de 1,	1,	prosecution of this cla	im.		1/h	, ,	7/	
	Ca"	11 () //	Λ.			1 4/1	agnide	realism	ano
	J. 11.	111					(Official Sig	Thereas we Dearwork was reasonable	107
	7 7 41		w.				JUSTICE C)F THE PE.	ACB.
	1,	[L. S.]					(Official Cl	naracter.)	
	Σ							gri	
	42 r	Ι, χ.λ.		************		, Clerk of t	he County Court	in and for aforesa	iid County
		and State	do certify that		* 5		Esa. who	has signed his no	ame to the
		and State,	do certify that		*************			in the state of th	
		foregoing d	leclaration and affidavi	was at the time	e of so doing				in and
	_96		unty and State, duly co						
1	10	1			i sworii; mat ai	ii iiis oiiiciai	acts are entitied	to full lattir and c	arcuit, and
	12	that his sig	nature thereunto is gen						
	मिं द	Z MZ	Witness my hand and	seal of office, t	his	day of		, 189	
	15 8	502 ;	-4						
	100	.0)/						
	1. 1.	CO V	p ^e		Clerk of t	he			
	-	Jak Salas	,		CIEIR OI				
		The Act of	June 27, 1890, REQUIRE	s in case of a	soldier:				
		r. An	honorable discharge (b	out the certificat	e need not be fi	led unless call	led for.)		
		- Δ.	minimum service of nit	nety days.					
		3. A 1	permanent physical disa	ability not due t	o vicious habits.	(It need not	t have originated	in the service.)	rt and are
		4. Th	e rates under the act ar	e graded from \$	6 to \$12, proport	ioned to the c	legree or manning	to carn a suppor	it, and are
		not affected	d by the rank held. pensioner under prior la	iws may apply t	inder this one, o	r a pensioner	under this one m	ay apply under c	ther laws,
		but he can	not draw more than on	E pension for th	e same period.	•			
		540 110 1	W-900 0000000000000000000000000000000000						
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			<i>i</i> g\ \	1	de .)		1	*

Medical DiAsion,

BUREAU OF PENSIONS,

Washington, D. C., Soft. 201, 1895 Vo. Claim ///2573. Respectfully returned to the Louising

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. Tismal Runalid Pension Claim No. 1/1 2.5 7 3 whethator original, increased or restoration.] 40 Reg't _ Company K us State, Wost-office 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 Cause of disa- in the service, viz: Rhumalum- piles. affection of back-dianhous-He makes the following statement upon which he bases his claim for Dic. Dw.

[Original, increase, restoration, de.]

A sight hik and lig & Musery. If a pensioner, fill in the amount; if not, crase the whole line. Here give the claimant's statement as briefly and as compactly as possible. value Upon examination we find the following objective conditions: Pulse rate, _; temperature, ____ ; height, _____feet _ _ inches; weight, 145 Den Here give a full description of the disabilities, in accordance with Book of Instructions. The actual or probable origin of every existing disability must be fully set forth.

Whenever a disability is shown, or is believed to be due to or aggrayated by I to bleed is slightly inflamed. to be due to or aggravated by vicious habits the opinion of the board must be stated. When not due to such habits this fact must be stated. with

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

Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my."

They will erase the words "Pres.," "See 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 PURTHER, 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.]

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100 / S = 30 30
855 F 5
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SURGEON'S CERTIFICATE
IN CASE OF
John Chase Jus Reed
Co. K, 40 Reg't W. Luf.
Applicant for one lun
0
No.1/12,573
DATE OF EXAMINATION:
may 15 Th , 1895.
asperston Pres,
BOARD.
D.C. Seland, Treas,
Post office, Ballo
County,
State, Mud
P. S.—Write your Post-office address plainly and in full.

OLD WAR & NAVY.
JUN 13 1695
P. FITTES.

Continue record of examination here.

no other disability is

found to exist

Mar Department,

ADJUTANT GENERAL'S OFFICE,

Washington, D. C., apl. 27, 1895. Poespectfully returned to the Commissioner of
Respectfully returned to the Commissioner of
Olizionz.
It appears from the records of this office that John day of
Charl was enlisted on the 4 day of
Juny , 1867, at Balto, Mrs, and was
Jany, 1867, at Balto, Mrs., and was assigned to in Co. K, 40 Regiment of U. S. Inf.
appointed artificer Feb 1868.
Roll Oct. 31/68. shows him absent sick
at goldsboro. n. c. since Oct. 16/68-an artificio
Roll Dec 31/68 shows him Great Arch
Roll Dec. 31/68 shows him "Freunt Rich Raleigh. n. C a Port" date of change of grade not stated.
grade not stated.
Roll Theb. 28/69 show him Discharged Theb. 27/69 for disability at Raleigh. n. c a private
Feb. 27/69 for disability at Raleigh.
n.c a private."
not reported sick on any rollduring
service except as above quoted.
Born in Baltimore, mo aged 22 - by
occupation a soldier-dark eyes - dark
hair - dark complexion - 5 feet 7/4 miches
high.
Enlistment paper does not indicate prior
service and is signed by mark.
1º Z \
1 8 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Adjutant General.
3-258 (260.)
06.11.0

Medical Division,

BUREAU OF PENSIONS, Washington, D. C. No. Claim ///25 J.L Approved :

THOS. FEATHERSTONHAUGH,

Medical Referee.

o 6-030.

11747 b—20 m

Decaration for an Original Invalid Pertion.

To be executed before some officer authorized to administer oaths for general purposes. The official character and signature of any such officer not required by law to use a seal must be certified by the clerk of the proper court, giving dates of beginning and close of official term.

State of Maryland, City of Bad	
ON THIS day of JUL 0 1933	
personally appeared before me, a	
within and for the County and State aforesaid	Jun Chase & Chu Reed
*	ording to law, declares that he is the identical
	MOLLED as a Presale on the 17 day of
Jan , 18 63, in Company Q of	the 32 Regiment of Pa Inff
commanded by Christie	and was honorably DINCHARGED at
Camp Cadwalacer, on the	day of fall 18 (5; that his
personal description is as follows: Age 48 years; heigh	ghtinches; complexion
hair ; eyes	. That while a member of the organization aforesaid, in the
Service and in the line of duty at	in the State of
on or about the day of Sjiring	, 18 6 3 , he Mumbs and (Here state the name or nature of discuse, or the
deamhoear in The	Lesvice.
ocation of wound or injury. If disabled by disease, state fully its cause;	; if by wound or injury, the precise manner in which received.)
	1 500
VI deg	
EV.,	
Clara an	
i hill ;	
That he was treated in hospitals as follows:	
(Here state the names or numbers, and the	he localities of all hospitals in which treated, and the dates of treatment.)
HI Endested in Meg Service	1867 (01K 40 USCJuff-
burned about 25 month	
been employed in the military or na	val service otherwise than as stated above (Here state what the
ryice was whather prior or all the state of	
ervice was, whether prior or subsequent to that stated above and the date	. /
hat he has not been in the military or naval service of the U	nited States since the day of String 18 69
nat since leaving the service this applicant has resided in the	Ball
(170, 0)	is occupation has been that or a Second 12.
	man of good, sound, physical health, being when enrolled a
Cachman That he is	now Greatte disabled
	of his injuries, above described received in the service of
the United States; and he therefore makes this declar ension foll of the United States. He hereby appoin	ration for the purpose of being placed on the invalid ints with full power of substitution and revocation,
a parlett lloy	D, of Baltimore, Md
is true and lawful attorney to prosecute his claim. That he	e has not received but applied fo
11/2573 pension; that his residence is No. 1928 & less	Esse street
Baltin.ore, Maryland, and that his post office address is same	. 2.
12	Change Chance
Maguder Vulman	
4	(Signature of Claimant.)
13 min 12 min 1	(Signature of Claimant.)
Two witnesses who can write, sign here.]	alexo I for Relation

Also no	rsonally appear	1010	ne	Canen	7 -	1dulas	2
Also per	rsonany appear	ed /		()	residing at	Wow of	~
2/2	7-1-	- A	and	Q-//	-/04	residing	at
	W 2v	my	persons w	hom I certify to be	respectable	and entitled to credit, an	d _
who being h	r mo duly amon				10/	· & ()	12
who being b	y me duly swor	n. say that they wer	re present and	saw 2 /2/2	Char	le cas p po	l Cec
			, the	claimant, sign his	name (make l	his mark) to the foregoing	3
declaration;	that they have e					eir acquaintance with him	
						prosecution of this claim.	
	→ (2007)	1	2017 10 20, 424	121	. ~		
				Misse	u 10.	Unen	
				(Owes	Ziale		
[If Affiants s	ign by mark, two pe	ersons who can write sign	here.]		[Signature of A	Mants.]	
Sworn	to and subscrib	bed before me this		day of		, A. D. 189	
	and I hereby c	ertify that the conte	ents of the abov	e declaration, &c., v	vere fully ma	de known and explained	
	to the applicar	it and withesses belo	ne swearing, ir	icituding the words.	٧		
			erased,	and the words	····/······		
	<u>-</u>		ad	ded; and that I hav	e no interest,	direct or indirect, in the	
WHA 6	prosecution of	this claim.		1	`	,	
. 4	(v		்து ப	14/11/2014	der V	abman	
3 Th / (1)	100		20	1	Official Signatur		
[L. S.]	1			JUSTIC	725	HE PEACE.	
a place	L.			1	Official Characte	or.]	
I,				, Clerk of the Cour	nty Court in a	and for aforesaid County	
and State, d	o certify that			, , , , , , , , , , , , , , , , , , , ,	Esq., who ha	s signed his name to the	
foregoing de	eclaration and af	fidavit was at the ti	me of so doing			in and	
			inc or so doing	was an explanation of the		- In and	
for said Cou		ıly commissioned and		san ar ing an new contr		ull faith and credit, and	
				san ar ing an new contr			
that his sign	nty and State, du		d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, du	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, dunature thereunto Witness my han	is genuine.	d sworn; that a	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, dunature thereunto Witness my han	is genuine.	d sworn; that s	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, dunature thereunto Witness my han	is genuine. ad and seal of office,	d sworn; that s	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, dunature thereunto Witness my han	is genuine.	d sworn; that s	all his official acts ar	e entitled to f	ull faith and credit, and	
that his sign	nty and State, dunature thereunto Witness my han	is genuine.	d sworn; that s	all his official acts ar	e entitled to f	ull faith and credit, and	
[L. S.]	nty and State, dunature thereunto Witness my han	is genuine.	d sworn; that s	day of the	e entitled to f	ull faith and credit, and	
[L. S.]	nty and State, dunature thereunto Witness my han	is genuine.	d sworn; that s	all his official acts ar	e entitled to f	ETT LLOYD, ORNEY, - MARYLAND.	
[L. S.]	nty and State, dunature thereunto Witness my han	is genuine.	d sworn; that s	day of the	e entitled to f	ETT LLOYD, ORNEY, - MARYLAND.	
[L. S.]	nty and State, dunature thereunto Witness my han	is genuine.	this	day of the	e entitled to f	ETT LLOYD, ORNEY, - MARYLAND.	
[L. S.]	nty and State, dunature thereunto Witness my han	Reg't. M. J. C. M. M. J. M. J. C. M. M. J. M. J	this Clerk of	day of the	e entitled to f	ETT LLOYD, ORNEY, - MARYLAND.	
[L. S.]	nty and State, dunature thereunto Witness my han	Reg't. M. J. C. M. M. J. M. J. C. M. M. J. M. J	this Clerk of	day of the	e entitled to f	ETT LLOYD, ORNEY, - MARYLAND.	
[L. S.]	nty and State, dunature thereunto Witness my han	Reg't. M. J. C. M. M. J. M. J. C. M. M. J. M. J	d sworn; that s	day of the	e entitled to f	ull faith and credit, and	

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 absence, must be indorsed upon each certificate.

He makes the following statement upon which he bases his claim for Claims to suffer with Rheumatism in right leg and also across the back. Condition much worse statement as briefly and as company cold weather. At times is lame and unable to	PRIVATE 1, MD. State, 16 Board.] 15th. , 189 2 15th. , 189 2 15th. , 189 2 16th. , 18
Company K, 40th.Reg't U.S.INF. Claimant's post-office address. #1928 CHASE ST. BALTO.MD. We hereby certify that in compliance with the requirements of the examined this applicant, who states that he is suffering from the following the statement upon which he bases his claim for the makes the following statement upon which he bases his claim for the makes the following statement upon which he bases his claim for the claimant's statement as briefly and also across the back. Condition much worse cold weather. At times is lame and unable to the cold weather.	dollars per month. ORIGINAL [Original, increase, restoration, &c.] from hip to foote in damp and get about.
#1928 CHASE ST. BALTO.MD. We hereby certify that in compliance with the requirements of the examined this applicant, who states that he is suffering from the following statement upon which he bases his claim for Claimant's statement as briefly and also across the back. Condition much worse cold weather. At times is lame and unable to	dollars per month. ORIGINAL [original, increase, restoration, &c.] from hip to foot e in damp and get about.
We hereby certify that in compliance with the requirements of the examined this applicant, who states that he is suffering from the following. Cause of disability. If a pensioner, fill in the service, viz: Rhematism: Piles: Kidney Discase. If a pensioner, fill in the amount; if uot, erase the whole line. Here give the claimant's statement as briefly and also across the back. Condition much worse statement as briefly and as companying and that he receives a pension of NO. Claims to suffer with Rheumatism in right leg and also across the back. Condition much worse cold weather. At times is lame and unable to	dollars per month. ORIGINAL [Original, increase, restoration, &c.] from hip to foote in damp and get about.
We hereby certify that in compliance with the requirements of the examined this applicant, who states that he is suffering from the following cause of disability. If a pensioner, fill in the service, viz: Rhematism: Piles: Kidney Discase. If a pensioner, fill in the amount; if uot, erase the whole line. He makes the following statement upon which he bases his claim for Claimant's and also across the back. Condition much worse statement as briefly and as companyed as companyed as contained to a cold weather. At times is lame and unable to the contained to the	dollars per month. ORIGINAL [Original, increase, restoration, &c.] from hip to foot e in damp and get about.
cause of disability. If a pensioner, fill in the amount; if uot, crase the whole line. Here give the claimant's statement as briefly and as companying the specific order as the statement as briefly and as companying the specific order as contained to the service, viz: Rhematism: Piles: Kidney Discase. NO. He makes the following statement upon which he bases his claim for Claimant's and also across the back. Condition much worse cold weather. At times is lame and unable to	dollars per month. ORIGINAL [Original, increase, restoration, &c.] from hip to foot e in damp and get about.
Cause of disability. If a pensioner, fill in the amount; if not, errors the whole line. He makes the following statement upon which he bases his claim for Claimant's and also across the back. Condition much worse tastement as briefly and as companying the statement as briefly and as companying to the cold weather. At times is lame and unable to the statement and the service, viz: Rhematism: Piles: Kidney Discase. NO. Claims to suffer with Rheumatism in right leg and also across the back. Condition much worse cold weather. At times is lame and unable to	dollars per month. ORIGINAL [Original, increase, restoration, &c.] from hip to foot e in damp and get about.
If a pensioner, fill in the amount; if uot, crase the whole line. Here give the claimant's statement as briefly and also across the back. Condition much worse statement as briefly and as companying the cold weather. At times is lame and unable to see the cold weather to see the cold weather to see the cold weather to see the cold weather.	ORIGINAL [Original, increase, restoration, &c.] from hip to foot e in damp and get about.
He makes the following statement upon which he bases his claim for Claims to suffer with Rheumatism in right leg and also across the back. Condition much worse tatement as briefly and as companying to cold weather. At times is lame and unable to	ORIGINAL [Original, increase, restoration, &c.] from hip to foot e in damp and get about.
He makes the following statement upon which he bases his claim for Claims to suffer with Rheumatism in right leg and also across the back. Condition much worse tatement as briefly and as companying to cold weather. At times is lame and unable to	ORIGINAL [Original, increase, restoration, &c.] from hip to foot e in damp and get about.
He makes the following statement upon which he bases his claim for Claims to suffer with Rheumatism in right leg and also across the back. Condition much worse tatement as briefly and as compactly according to the cold weather. At times is lame and unable to	from hip to foot in damp and get about.
and also across the back. Condition much worse statement as briefly and cold weather. At times is lame and unable to	from hip to foot e in damp and get about.
and also across the back. Condition much worse statement as briefly and cold weather. At times is lame and unable to	e in damp and
as briefly and as contactly cold weather. At times is lame and unable to	get about.
baring the winter loses 2/3 of his time from wa	ork.
Suffers with riles that protrude and blood at t	imes.
Pains in region of kidneys with difficulty in substitution of the second parts of the parts of t	stooping.
endote to perform hard manual labor.	,
Upon examination we find the following objective conditions: Pulse	
respiration,18_; temperature,N; height,5 feet8_ in	nches; weight, 125
pounds; age, 47 years. General physical condition	is fair,
Here give a full Fairly well nourished and tissues in good cond:	ition.
description of Rheumatism: No crepitation or deformity in joint description of deformity in joint description of the disabilities	ints. Has no
in accordance with Book of sensitiveness of muscles of right leg or thigh.	, č.
Complains of pain when walking and has a slight	limp in gait.
- States that he suffers greatly through the Wir	nter with this
leg and that he is now at his best.	
Marked sensitiveness to pressure in both lumbar	regions with
much pain and stiffness when stooping and in ri	sing.
States that after lying for any time his back?	ecomes very
 stiff and painful and gives way when attempting No rheumatism of shoulders. 	to lift.
He suffers with muscular rheumatism which is pr	ao bo bil se
in cold weather as claimed and we recommend rat	ing of give
eronceentus.	
No evidence of hemorrhoids. Some enlargement of	of hemorrhoidal
vessels but otherwise rectum in healthy conditi	on.
No disease of Kidneys. Urine is normal.	
Heart, Lungs and abdominal organs are in health	y condition.
No other disability exists.	
the for EACH	ed to 2 6/18
	ed to a
h	
for th	at caused by
1 1011	W
6 White Pres Estaly Seein Cha	

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

SURGEON'S CERTIFICATE Applicant for Ong Post office, Bal

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.] 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.

HOTE (3-173.) Div. C. D. Berrtment of the Interior,	
John Chase John Road. Co.K. 40 Rog't U. S. Inft. Washington, D. C., Och // the, 1892	
John Chara of John Road.	
Co./C. 40 Reg't U. 5, Juft. Washington, D. C., Or 1/2, 1892	
Sir: This Bureau will esteem it a favor if you will, at your earliest convenience, answer the questions enumerated below. This information is desired for statistical purposes and it may be of great value to your family in the future. Very respectfully, Commissioner.	
1. Are you a married man, and if so, what is your wife's full name, and what was her maiden name?	
Ans. Aan, Laura Virginia Chase, Laura Virginia	
Delosher	
2. When and where were you married? Ans. January 7th 1871 At Baltimore County Ma. 3. What record of marriage exists? Ans. John Chase And Laur. Virginia Chase	
4. If you had been previously married state the name of your former wife and the date of her death	
or divorce. Ans. A Was Mever Marsied before.	
5. If you have any children living state their names and dates of birth. Ans. Emma. Chase Born Sep. 15. 1873, Mary Chija Chase. Born June 26 1874. Sirah l. Chase Born Son 3. 1877. Chas. Chase Sep. 26/877. Flowrence Chase Cot 10/886. Amic Bell Chase. Date of reply, October 15. 1892. Post-office address, 717. As Dearham St. Baltimore And. 1928 E. Chase St. Baltimore Mar.	1
7355 b—50 m o-4 (Claimant's signature.)	

Mintant General's OCT 4 1892

MILITARY SERVICE. 6

NAME OF SOLDIER:	Respectfully returned to the
John Chase " John Rud.	COMMISSIONER OF PENSIONS.
Cl. W and St. Div.	John Chase
Bureau of Pensions,	co. K. 40th Reg's, U.S. Ouf
No. /2/12.673. Oct / ,1892	was enlisted larry 4, 1867
7E.a.9	at and was discharged Febr 27, 186 9
SIR: It is alleged that the above-named man enlisted	at, by reason
, 18 6 f, and served as a	of alicability
in Co. U., 32 Reg't U. S. C. Luf.	a Part
also as a in Co. , Reg't	,
Phila., Va.	
on Fall , 18 65 also served	
in 1/2" 40. U.S. Duf- lunder name	
"John Chase"	
2081 9 100	
- A. B	
The second second second	
No. of prior claim	
The Adjutant General will please furnish an official statement in this case, showing date of enrollment and date and mode of	
termination of service.	***************************************

War Department,

ADJUTANT GENERAL'S OFFICE,

Washington, October 4, 1895

Majutant General.

Becord and Pension Office, WAR DEPARTMENT,

Washington, 4 1892 , 189 .

Respectfully returned to the

Commissioner of Pensions.

mentioned in the preceding endorsement, was e	mentioned in the preceding endorsement, was	,	e rolls show that J	The rolls sh
	and M. O. aug. 22	ıs e	ntioned in the pre	nentioned
	as pot	-	$_{d}$ $m.o.$ C	md M.

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

(414)

Commissioner.

5112 b—15 m

0 3601.
Law Office A. PARLETT LLOYD, S. E. Corl St. Paul and Saratoga Streets, Baltimore, Md.
Claim No. 1 2, 7 y of In Chase alias a 32 Regiment. USlace
On this day and date below written, personally appeared the affiant whose signature is hereto affixed
and who being duly sworn according to law testified as follows:
My age is 42 years, I reside in Baltimore, Md., at No.
7/7 A. Dorhan Street.
18 beg in les a 33 voor
a discharge as
- A dism of the
. Terved by my
Charle Film
alumiteg, I have never served in arm
services he
us, ortunise has as given daning
in the second of
I have no interest in this claim.
(If witness sign by mark, two persons who can write, sign here.) Our Bound folious thouse Our Bound folious
S Magnador Tubrian
State of Maryland, Baltimore City, Ss: Sworn to and subscribed before Me, this day of 1892, and I
certify that the contents of the aforegoing were fully made known and explained to affiant above named, (whom I
certify to be creditable) before his making oath thereto and I have no interest in prosecution of this claim,

Commissioner of Deeds in the State of Maryland for the District of Columbia,

JUSTICE OF THE PEACE.

WAJ TA YENTOTTA WAJ TA YENTOTT

THE UNITED
OF THE UNITED STATES
OF DISABILITY FOR DISCHARGE.
OF DISABILITY
I mate Jahn Place , of Captain & WC mros
Company, () of the Tulub Regiment of the Enited States
Tafaully was enlisted by 18th least J & Tringle 177 June of
the tweet Regiment of Landy at 13 allumin med on the 15 day of James 1867, to serve 3 years; he was born
on the 13 day of Jamay, 1867, to serve 3 years; he was born in ballman in the State of Mayland, is 2 ments
years of age,feet 1 inches high, rout complexion, but eyes,
hair, and by occupation when enlisted a five due During the last two
Months said soldier has been unfit for duty 9 0 days.* The Omelutation of
C. P. D. M. M.
STATION: Adug L / CU
DATE: Ochricay 117/8609
Commanding Company.
Commanding Company.
I CERTIFY, that I have carefully examined the said
of Captain a. W. C. MOUTE. Company, and find him incapable of performing the duties of a
Boldier because of the pical Disability, resulting from Constitutional Syphilise - The
Explainititie history of line case dates back to mante. He was transferred to this Obst from the Book Dospital at Goldsbore with the occurding Emption district. "10 with Open spicefic
Probos in Each ground-duply Escavated - Constituting impaired-reside breakment - This
man will be no longer useful in services, I not contracted in line of duty
B white
O. Oraly Surgion.
of the state of th
DISCHARGED, this a day of February, 1867, at Cally
This is the thing
Change and a la
Politico de la la companya de la companya del companya del companya de la companya del companya della companya
The Soldier desires to be addressed at
Toton County State
*See Note 1 on the back of this. † See Note 2 on the back of this.

[DUPLICATES.]

[A. G. O. No. 100 & 101—First.]

NOTE 1.

NOTE 1.

The company commander will here add a statement of all the facts known to him concerning the disease or wound, or cause of disability of the soldier; the time, place, manner, and all the circumstances under which the injury occurred, or disease originated or appeared; the duty, or service, or situation of the soldier at the time the arry was received or disease contracted, stating particularly whether the injury was received or the disease contracted in the line of his duty; and whatever other facts may aid a judgment as to the cause, immediate or remote, of the disability, and the circumstances attending it. When the facts are not known to the company commander, the certificate of any officer, or affidavit of other person having such knowledge, will be appended—as the surgeon in charge of a hospital, the officer commanding a detachment or recruits, &c., &c.

Note 2.

When a probable case for pension, special care must be taken to state the degree of disability—as \$\frac{h}{2}\$, \$\frac{h}{2}\$

DIRECTIONS.

DIRECTIONS.

This certificate will be made out in duplicate by the soldier's company commander, or other officer commanding the separate detachment to which he belongs, and sent by him to the surgeon who has charge of the hospital where the soldier is side.

It is a surgeon who has charge of the hospital where the soldier is side.

It is a surgeon who has charge of the hospital where the soldier is side.

It is a surgeon who has charge of the hospital who has charge of the hospital who proper channel to the division commander, or post commander, who will his action endorsed thereon, through the proper channel who had belong the surgeon shall be proper at the surgeon of the surgeon who had been commander, or other commander or officer to whom the authority to discharge enlisted men may be specially a because the surgeon of the highest authority to which they are required to be sent, will be returned through the same channel to the regimental, post, or detachment commander, who will, if the discharge is authorized by the endorsement of the proper authority, sign the soldier's discharge, and the last certificate on this paper; see that the soldier's discharge, and the last certificate of direct to the Alphanette of the certificates direct to the Alphanette of the leads of the soldier's furthed. States Annaes certificates direct to the Alphanette of the commander of the soldier's furthed. States Annaes certificates direct to the Alphanette of the commander of the soldier's furthed. States Annaes certificates direct to the Alphanette of the soldier's furthed. States annaes are the beautiful to the bands of the soldier.

CERTIFICATE OF DISABILITY FOR DISCHARGE IN THE CASE OF huse Porrate Adjutant General's Office; I'AR /9 1834

186

Received (A. G. Office)



REIMBURSEMENT.

Certificate No. // 76364
Pensioner John Chase,
Class
Date of Death 100, 16, 1924
Claimant Mabel Chase
Post Office 425 M. Austran St.
Received Jan, 7, 1935
Jan 19/25 Cant Ex
Relative to property &
lett oinned
Oct 13/25 Cent EN
Relative to property, widow
4 medical attendance

6-5473
A0010

INVALID. Application filed Cert. of Dis. Searched for. .,19 *USU*. Act of June 27, 1890.

P. O. P. E. P. D.

Sohw Chase and John Recol
P. O. Son Share Share

APR 201895

O. W. and N. Div.

[3—216 a.]

Ex'r

[3-216 a.] PES? Enlisted: Discharged: Application filed Alleges: Numerical No. Nd. Cert. of Dis. Searched for... [4477—10,000.]

)	MCLEXITE CHOVALID.	from one and atterior
-	No.1./12.5/3 J	The state of the s
	Acts of July 14, 1862, and March 3, 1873.	origin and writing ares with
A.	John Chase 4; John Reed.	Dept 13 95 ex + M & D. Poaded of amrades Caled for G slip place pm 7 90 mg
	P.O. 1928-6. Cohard St-800 //Springs.	files pmr 1, 70 ms mes
4	Service: K. 40 - U.S. Luf. & a	7
	Enlisted:, 18	
	Discharged: , 18 .	
	Application filed: Yuly 8, 1893.	
	Alleges :	
	Re-enlisted:	
T.	Cert. of Dis. Searched for , , 18 , Attorney:	
1	P.O. Ballimore M.d.	
1	Recognized, Contract.	
1	Cert, of D's. Searched for (1877-10,00%) 6-560	

3-730	N. A. S.
Cert. No. 1176564	1ssueā.
Name John Chase John Reed	Rate, 8. Afrom
Rank, OM, ; Service Co. A 32 US leasy	
4 - 3	e) Deductions:
Agency Original Roll: Joup 3	
Group No. " , 1 , to	Disability:
Issued Dept. 21-1915	Issued
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