

CIVIL WAR

3-1007.

ANY WARD.

NATHANIEL G GRASTY COM

I, NATHANIEL G GRASTY COM, make oath that I am the rightful holder of pension

certificate No. 94255 dated May 8 1903, in my possession and now exhibited, as guardian of JAMES L SLAUGHTER who is the identical person named in said certificate

and who is now living and resides (or is confined) at Crownsville State Hospital - Crownsville Md and was not employed or paid in the Army, Navy or Marine Corps of the United States during any part of the period covered by this voucher.

that I am entitled to and hereby make claim for payment of Sixty-five DOLLARS \$65 due on said certificate at the rate of 65 dollars per month from SEPTEMBER 4, 1922 to OCTOBER 4, 1922

and that my post-office address to which I desire the check in payment mailed is as follows:

305 Court House  
Baltimore  
Maryland

Nathaniel G. Grasty, Com  
Guardian's signature must be written here in full as name appears in the head of this voucher.

If guardian signs by mark or illegibly, two witnesses who write.

DEPOSITION OF TWO WITNESSES.

We, the undersigned witnesses, do solemnly swear that the contents of the foregoing affidavit have been made known to us, that the ward and pensioner therein named and declared to be living is personally known to us to be now living, and residing (or confined) at the place therein stated, and was not employed or paid in the Army, Navy or Marine Corps of the United States during any part of the period covered by this voucher.

Deposing witnesses should be officers or employees of the institution in which pensioner is confined, or competent persons residing in the immediate vicinity of his abode.

Witness' signature.  
Post-office address.  
Witness' signature.  
Post-office address.  
State of Maryland, County of

(One person who writes, other than magistrate or guardian, must attest the signature of one or both witnesses, if by mark. Witnesses must not attest each others' signatures.)

Personally appeared before me, this day of 1922, the witnesses whose signatures and post-office addresses appear above, whom I believe to be credible persons, and the guardian above named, and made oath in due form of law to the truth of the foregoing statements subscribed by them in my presence, and I certify that the aforesaid guardian has this day exhibited to me the pension certificate, above described.

[L. S.]

Magistrate's signature.  
Official character.  
Post-office address.

(Seal must be above this line.)

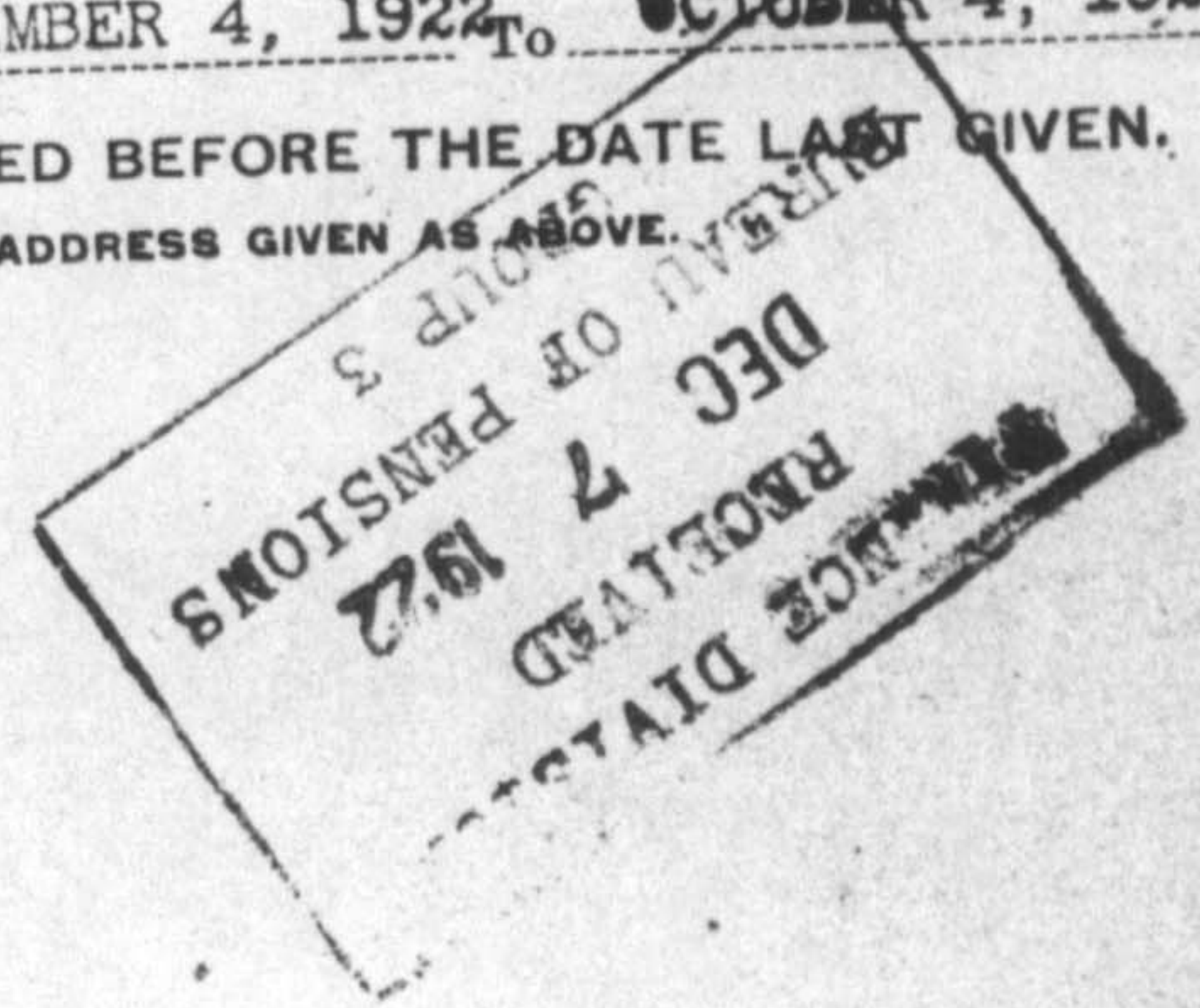
(If any erasures or alterations appear on this voucher, the magistrate must certify above his signature to the jurat that they were made before its execution.)

3-1007.

From SEPTEMBER 4, 1922 To OCTOBER 4, 1922 \$65

PAYMENT WILL NOT BE MADE ON THIS VOUCHER IF EXECUTED BEFORE THE DATE LAST GIVEN. GUARDIAN'S NAME MUST BE SIGNED HERE AND POST-OFFICE ADDRESS GIVEN AS ABOVE.

Name. Nathaniel G. Grasty, Com  
Street and No. or R. F. D. route. 305 Court House  
Post office. Baltimore  
Md



NATHANIEL G GRASTY COM

94255  
JAMES L SLAUGHTER

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