3-155.

insert character and number of	CERTIFICATE OF MEDICAL EXAMINATION.
Name of claim- ant.	Mathias Price Pension Claim No.  Address Jacks P.O.
Claimant's post- office address.	Company J- Reg't It W. C. In Board. Board. State. F. 1921 Board. Date of examination.]
Names of disa- bilities.	\$ ;.***
statement (as briefly and as compactly as possible) in regard to the date of origin and cause of his disabilities and the manner in	He makes the following statement in regard to the origin of his disabilities and date when first discovered by him:
which they affect him.	Birthplace, Falfer of Moling, age, Syears; height, 5.8; weight, 16 pounds; complexion, Pounds; color of eyes, Brown; color of hair, scars other than those described below,  We hereby certify that upon examination we find the following objective conditions:  Pulse rate, Sitting standing of the received; respiration, 20; temperature, 9878
Here give a full description of the disabilities, in accordance with Book of instructions, and make a separate paragraph for each disability.	Heart: - Gerrous  Lings: Suffers with asthma  Kidhup: hornel, suffers with enlarged  prostate gland & supetities requiring hingto  get up beveral tornes each might to pass
Facts within the knowledge of the Board, or any member thereof, relative to the cause of any disability found should be stated.	Signs: Sught defective, probably beginning of cataback, can distinguish people out can not see to read newspaper
Act June 5-20, Survivors Spanish War: Estimate incapacity from all causes not due to vicious hab- its at one- fourth, one- half, three- fourths, or total.	person both aukles swollen about twice their normal size requiring their nace caul in walking a sant
Whenever a disability is shown or is believed 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.	Rate act may 1 1970 \$ 72 - par Mounts
\$72 Cases: In every instance where aid and attendance is alleged, the Board will state (in somany words) whether the regular aid and attendance of another person is or is not required.	Mary 1
When rates are recommended solely on subjective evidence the strongest reasons must be given therefor.	
	6-552a  , Pres. Francisco Sec'y.  MSASC4126-124-47