

No. 114.

*Increase*  
**DECLARATION FOR INVALID PENSION**

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

State of *Maryland*, County of *Baltimore*, ss:

On this *17th* day of *October*, A. D. one thousand nine hundred and *six*, personally appeared before me

a *notary public* within and for the County and State aforesaid

*John Armstrong* a resident of the *City of Baltimore* County of

State of *Maryland* who, being duly sworn according to law, declares that he is

the identical *John Armstrong* who was ENROLLED on the

day of \_\_\_\_\_, 18 \_\_\_\_\_, in *Co B 39 U.S.C.T.*  
(Here state rank in company, and regiment in Military service, or vessel, if in Navy.)

\_\_\_\_\_ in the service of the United States in the War of Rebellion, and served at least ninety days, and was HONORABLY DISCHARGED at \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 18 \_\_\_\_\_.

That he has *not* been 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.)

That he is *65* years of age, having been born on the \_\_\_\_\_ day of \_\_\_\_\_, 18 \_\_\_\_\_.

That he is *wholly* unable to earn a support by manual labor by reason of age *heart trouble*  
(Strike out the word "age" if under 62.)  
*and increase of disabilities heretofore alleged*  
(Here name all diseases or injuries from which disabled.)

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.

*761637 and asks increase*  
(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 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.* his true and lawful attorney to prosecute this claim, the fee to be TEN DOLLARS, as prescribed by law. That his POST-OFFICE ADDRESS is *211 Dover St.*, County of *Baltimore*, State of *Maryland*

- 1 *Henry C. Lloyd*
  - 2 *Carter Field*
- (Two witnesses who write sign here.)

*John X. Armstrong*  
(Claimant's signature—FULL name.)  
*mark*



ATTY FILED