

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

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

*Restoration*  
[State above whether for original, increase, or restoration.]

Pension Claim No. *6-26009*

Name and rank of claimant.

*Robert Barnes*, Rank, *Private*

Claimant's post-office address.

Company *K 19 Reg't U.S.C. Col.*, *Baltimore Md.* State,

*913 Beach Alley City.* [Post-office address of the Board.] *May 12*, 1896. [Date of examination.]

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred

Cause of disability.

in the service, viz: *Rheumatism-disease of rectum-disease of heart-shortness of breath-affection of stomach and back-disease of eyes*

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of \_\_\_\_\_ dollars per month.

Here give the claimant's statement as briefly and as compactly as possible.

He makes the following statement upon which he bases his claim for *Restoration*  
[Original, increase, restoration, &c.]  
*claimant states he has been a hard laborer but owing to his disabilities he can at present only perform work of a light character averaging \$2.00 per week.*

Upon examination we find the following objective conditions: Pulse rate, *80*; respiration, *20*; temperature, *98*; height, *5* feet *7 1/2* inches; weight, *165* pounds; age, *53* years.

Here give a full description of the disabilities, in accordance with Book of Instructions.

*Rheumatism: - Muscles, joints and tendons normal in size and action - stops and recovers with ease. No Rating.*  
*Disease of rectum: - By examination of rectum reveals no evidence of congestion - no diseased condition revealed. No Rating.*  
*Disease of heart: - Area and action of heart normal - apex beat in normal position - no dyspnoea - no hypertrophy. No Rating.*  
*Shortness of breath: - No evidence of dyspnoea & respiration regular - not material. No Rating.*  
*Affection of stomach: - No pain at epigastrium - no tympanitic - tongue slightly coated, due to a bilious condition. No Rating.*  
*Affection of back: - No lesion of back discovered at this examination - no tenderness or scars discovered. No Rating.*  
*Disease of eyes: - Conjunctiva and adjacent normal right and left vision 20/70. No Rating.*

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 aggravated by vicious habits the opinion of the board must be stated. When not due to such habits this fact must be stated.

Each disability must be rated separately, the act of Congress of Mar. 2, 1895, requiring "that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to."

*J. Morris*, Pres. *Robt. Casan*, Sec'y. *John Ays*, Treas.

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