## Declaration for the Increase of an Invalid Pension.

State of Mod, County of Battemere, 55.
On this \( \frac{1}{2} \) day of \( \begin{aligned} \text{OPO} \cdot \). A. D., one thousand eight hundred and ninety
and State aforesaid,
who being duly sworn according to law, declares that he is a pensioner of the United States, (Certificate No.
863,843) enrolled at the Mashing Time Pension Agency at the rate of
Dollars per month, by reason of disability from infury to ankle  [Here name the disability for which pension was granted.]
and Brondhills incurred in the Military or Naval service of the United States
while Company and regiment, if in the Army-vessel if in the Navy.]  service of the United States  [Military or Naval.]  [Here state rank, company and regiment, if in the Army-vessel if in the Navy.]
That he believes himself to be entitled to, and now claims an INCREASE of pension on account of insufficient
rating for said disability, as he believes that the rating now allowed and paid him is absurdly low and wholly
disproportionate to the degree of disability and his inability to perform the manual labor of a healthy man as same now exists. And he also alleges that he now suffers from more from the manual labor of a healthy man as same now exists. And he also alleges that he now suffers from more from the manual labor of a healthy man as
same now exists. And he also alleges that he now suffers from , the Amelical of a willing, as a injuried and let Bronelial of allowed.
When he is fenounced but having had a linke
A handwiss some tou sears. It has made it
Inhohossible for him to do augmanual lower
at all-his left side is disabled almost entrely this left arisin + hand one nearly use less. If and he desires to be examined by the U. S. Pension Surgeon at
He appoints C. D. PENNEBAKER, of Washington, D. C., his true and lawful attorney to prosecuet
That his Post Office Address is 210 Richmond Sheet
Construct 19 allun ne State of Mile
Claimants Signature: Edward & Dosham

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