

# Form of Declaration for an Invalid Pension.

This Invalid Pension Declaration must be executed before a Judge or Clerk of a Court of Record, and if before the Judge, the Clerk thereof will certify said Judge's official capacity and signature, and attest the same under the seal of the Court.

*A Justice of the Peace must not authenticate this paper. If he does, the work is utterly useless, and must be all done over again before a Judge or Clerk of a Court of Record, as above stated.*

East State of Columbia }  
County of Washington } SS.

On this twentieth day of March, A. D. one thousand eight hundred and sixty-six, personally appeared before me, (1) Clerk of the (2) Supreme Court of the State, a Court of Record within and for the County and ~~State~~ State aforesaid' Oliver Scott, aged twenty eight years, a resident of the (3) County of Howard, in the State of Maryland, who, being duly sworn according to law, declares that he is the identical Oliver Scott who (4) enlisted in the service of the United States at Baltimore in the State of Maryland, on or about the twenty ninth day of February, in the year 18 64, as a Private in Company E, commanded by Capt Woodward, in the 30th Regiment of (5) U.S. Colored Troops commanded by Col Bates, in the war of 1861, and was honorably discharged at Washington, in the ~~State of~~ District of Col., on or about the fifteenth day of December, in the year one thousand eight hundred and sixty-five; that while in the service aforesaid, and in the line of his duty, (6) on the 30th day of July 1864, while engaged in the Battle in front of Petersburg Va he rec'd a gun shot wound in the right hip. That he was treated in field Hospital of the 9th Corp, was transferred from field Hospital to City Point and from thence to Alexandria at Lovatts Hospital, and subsequently sent to Harwood Washington D.C. where he was discharged

That since leaving the said service, this applicant has resided in the (3) City of Washington in the ~~State of~~ East Columbia, and his occupation has been (7) working on a farm such time as he has been able.

That prior to his entry into the service above named, he was a man of good, sound physical health, being when enrolled a (8) Farmer

That now he is (9) half disabled from obtaining his subsistence from manual labor in consequence of his above named injuries, received in the service of the United States.

He makes this Declaration for the purpose of being placed on the Invalid Pension Roll of the United States, by reason of the disabilities above stated, and revoking and countermanding all other authority that may have been given, he hereby constitutes and appoints, with full power of substitution and revocation, Helmick & Hines, of (3) Washington D.C., his true and lawful attorney, to prosecute his claim, and obtain

the Pension Certificate that may be issued. That his Post Office is at Clarksville, in the County of Howard, in the State of Maryland.

That his domicile or place of abode is (10) Howard County in the State of Maryland.

If applicant makes his mark, let two persons who write their names attest his signature. The Officer administering the oath cannot be one of the attesting parties.

ATTEST:

L.P. Williams  
R. J. [unclear]

Oliver <sup>his</sup> Scott  
Mark

Applicant.

Sworn to, subscribed, and acknowledged before me the day and year first above written, and also personally