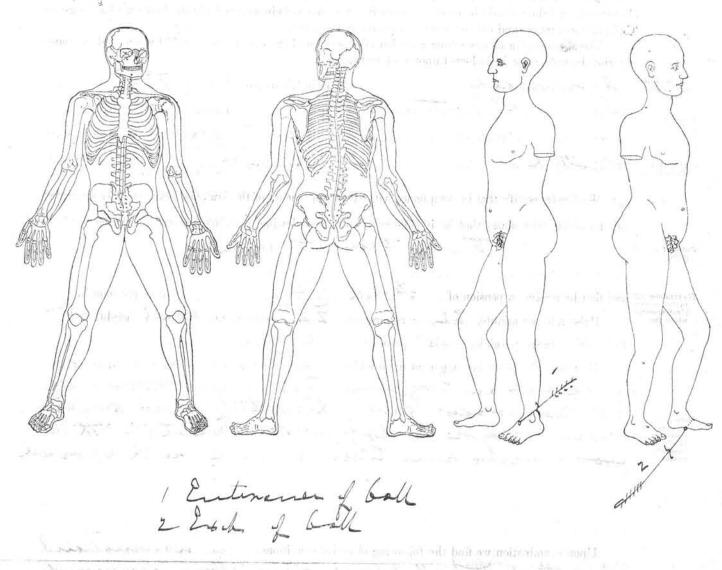
injury, the entrance and exit of a missile, an amputation, etc.

Attention is invited to the outlines of the human skeleton and figure upon the be & of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or

The dence of a member from a session of a board and the reason therefor, it known, and the name of the absentee, must be indorsed upon each certificate. Pension Claim No. 334, Name and rank of claimant. Reg't Linn held Luft 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 in the service, viz: - Wound If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of... ; temperature, nmul; height, 5 Pulse rate per minute, \$2 ...; respiration, ZZ feet 4 inches; weight, 145 pounds; age, 62 He makes the following statement upon which he bases his claim for † ... Upon examination we find the following objective conditions: mind that e duty of the rigeon is to ve an opinion to the pro-From the existing condition and the history of this claimant, as stated by himself, it is, in blay judgment, _____probable that the disability was incurred in the service as he claims, and that it has not been prolonged or aggravated by vicious habits. He is, in by opinion, entitled to a Rate for cac cause of dis-bility. If prolonged b rating for the disability caused by ... and See the back there state whether for original, increase, restoration, or renewal, or for a re-rating. 2, Stellyment Supperse N. B.—Always forward a certificate of examination whether a disability is found to exist or not. (12695-100,000.)



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

P. SWrite your Post-office address plainty and in full.	FICS	State, Lines 10, '889	7	County, Charles NOV	FOST OHIOS, CALLACTOR OF STATE	B. J. B.	, 11cus.,)		It arrand tust secy,	followed , ra,	1000	Lulux 2	DATE OF EXAMINATION:		No.334 774		Applicant for Line		Co. L., Reg't Kin Mild	X	Janus . Though		IN CABE OF	SURGEON'S CERTIFICATE	一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一
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PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

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