

OFFICE OF

T. M. GEHRETT, M. D.,
DESHLER, OHIO.State of Ohio
Henry Co., SS

In matter of pension claim of Charles Howard Co. "L" 1st Reg't Ohio Vol. H.A. I beg to state that I have to day examined the said claimant and find him suffering from a left oblique inguinal hernia and also chronic lumbago. These disabilities he has had since and during the time that I have known him, which has been about seven years. It is impossible for him to get about without a truss; when the hernia is unsupported the hernial tumor becomes about three inches in diameter and disposed to strangulate at once. A truss sufficiently strong and firm to retain the hernia prevents him from doing but little labor of any kind. He alleges continued pain in the back and at this time it seems quite difficult for him to stoop and recover. I have treated him for lumbago and know that he has within the past three years been confined to his bed for a number of days by reason of lumbago. I have also reduced his hernia when strangulated during the past four years. In my opinion this claimant is almost wholly incapacitated for earning his support by manual labor by reason of hernia and chronic lumbago. These disabilities are permanent and due to vicious habits. This affidavit is not made from any oral or printed statement and has been type written by myself.

June 19 1894

J. M. Schmitt

M. D. Ex. Surgeon

*Witness to and subscribed in my presence
this 19th day of June 1894*

*J. A. Parsons
Notary Public*

13 to '2, viz. guaranteed to that of a small article
located near the C. & O. in a
at the C. & O. area, & on 700
which was this claim.
W. C. Bridges, M.D.

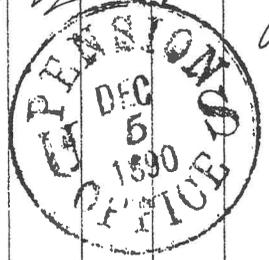
7 sworn to before me, and signed in my presence
8 this 3^d day of December 1890. I certify that
9 this affidavit was read, and explained to
10 affiant before swearing, I have no interest in
11 this claim, nor concern in its prosecution
12 *Profring & Co*
13 *Notary Public*

Original on file

18 Charles Howard
19 "S" for O.R.A. Co
20 Charles Howard
21 Charles Howard

Under date of June 27, 1890

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On 8/3/36

File of this

Stonewall Company, S.S.

As to the matter of the application
for Original Special Privilege of Shanks Starnes"
Private Company "S" 1st Regt. C.S.A. Co. 813.136,
under the act of June 27th 1890.

On this 3rd day of December, A.D. 1890, personally
examined before me, A. J. [unclear], [unclear] and for
the Company and that aforesaid C. C. [unclear] to
me well known as a physician of good standing
in his profession, respectable and entitled to credit
and who bring by me duly sworn oaths, "that he
is a resident of, and his Post office address is
McDonnell Stonewall Company Ohio, that he is now,
and for the last 20 years, is practicing physi-
cians, that he has known, and been acquainted
with Clement Shanks Starnes for about 12 years
that he has often met, and conversed with said
Clement Shanks Starnes, and [unclear] of
[unclear], that about one year ago, said Starnes
reported to applicant for membership of [unclear],
applicant gave him an examination, and found
that Clement was suffering from [unclear] of
the left side, applicant [unclear] for, and
recommended the using, and wearing of a
Certain Device for said [unclear], Applicant says
that in his opinion, said [unclear] as permanent
and not the result of vicious habits, that by
reason of said [unclear], and the opinion
of applicant, he would consider him, [unclear]
from the performance of manual labor about

He is no wise interested in this claim,
nor concurs in its prosecution.

George Champion

Sworn to before me and signed in my presence
this 1st day of December 1890. I certify that this
affidavit was read and explained to affiant
before swearing. I am in no wise interested in
this claim, nor concurs in its prosecution.

Archives of George
Notary Public

Verdict

Charles A. Arnold, Dr.
Compy "2" 1/2" O. & N. A.
Special Comptroller

Under Act of June 27, 1870

Attendant of
George Champion



Scott, W. G. & Co. City
McComb, Mo.

Ch 813, 136



The State of Ohio

Stamessett County SS,

In the matter of the application
for Remission of Charles Steward's Private Copy "S"
1st Reg. O. S. N. O. Claim No 813, 136, under the act
of June 27th 1890.

On this 1st day of December A. D. 1890, personally
came before me, W. Henry Pickett, Justice and for
the County and State aforesaid, George W. Thompson
aged 36 years to me well known, to me well
known, of a reputable and creditable name, and
who bring by me sworn says that he lives in
his Post office address is Wm. Bond Steward County
Ohio. that he is well and personally acquainted
with the said Charles Steward. Stating that
him for the last 20 years lived within about 80
miles of said Steward for about 7 years often met
and mingled together. Stays often heard said
Steward complain of indigestion. Has worked for
him, and he would complain of and suffer
from said indigestion, said Steward has often
informed applicant that he is compelled to use
and wear a brace all the time applicant says.
that in his opinion, he believes said Steward
incapacitated from the performance of manual
labor, about 1/2 as compared to that of a sound
and able bodied man. by reason of said indigestion
and that he believes said disability to be of a
permanent character, and not the result of any
accidental injury, that said Steward is a man
of good habits and character. Applicant says, that

The State of Ohio

Hamersock County ss.

I on the matter of the application for Partition of Charles Howard Private Comby "S." 1st Regt. O. V. A. W. Claim No 813, 136, under the act of June 27th 1890.

On this 1st day of December A. D. 1890, personally came before me, a Notary Public, in and for the County and State aforesaid, Clarence E. Hamery aged 30 years, to me well known as a reputable and credible person, and who being by me duly sworn says "that he is a resident of and his Post office address is McComb Hamersock County Ohio, and his occupation is that of a Druggist. That he has been a resident of McComb for about 4 years, and in the drug business in said McComb during this time that he is well acquainted with the Claimant Charles Howard. Has known him for about 4 years, he being one of the regular customers, Has often heard him complain of Rupture and I have within the time above stated, sold and furnished to said Howard three or four courses of ruptures, and that he is compelled to wear a truss all the time that Claimant has many times informed affiant of this fact, affiant says, that Claimant is a man of good habits and character, I am in no where interested in this claim, nor concerned in its prosecution.

Clarence E. Hamery

Declaration for Increase of Pension

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

State of Ohio, County of Averock, ss:

ON THIS 11th day of November A. D., one thousand nine hundred and five

personally appeared before me, a Clarence Bault within and for the County and State

aforsaid Charles Howard, a resident of Glacout

of Yp County of Howeock State of Ohio

who, being duly sworn according to law, declares he is a pensioner of the United States, enrolled at the

Chautauk Pension Agency at the rate of 8 dollars per month,

Certificate No. 581,430; by reason of disability from paric inability

(Here name the disability for which pension was granted.)

That he was a Corporal in Co. F 101 Reg't Ohio Heavy Art Vol.
(Here state rank, company, and regiment, if in the army; vessel, if in the navy.)

That he is 67 years of age, having been born on the October day of 2nd 1838, 1838, and believes himself to be entitled to an increase of pension on

the ground that the rate allowed him is too low and not commensurate with the extent of his present disability.

He therefore requests that he be favored with another medical examination with the view of determining his right to \$12 per month, the full rate allowed under the Act of June 27, 1890, as amended by Act of May 9, 1900.

That he is now suffering from
summers' affection of both knees, piles,
bladder trouble and chronic back aches,
and

asks to have a re-rating on his claim
beginning when they began to limp on left side
was reported passing through the external rings
as shown by the record of his case in the Pension Department,
properly requests to be sent
to Findlay Ohio for examination as if
is most earnest for claimant.

That said disabilities are not due to his vicious habits and are to the best of his knowledge and belief permanent.

He hereby appoints, with full power of substitution and revocation,

C. A. STROTTMAN of Findlay, - Ohio

his true and lawful attorney to prosecute his claim.

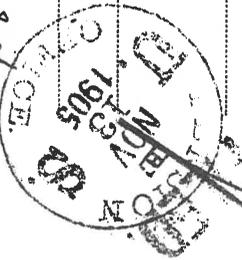
His Post-office address is FRR No. 23 McComb.

Averock County Ohio

John A. Buttin, Charles Howard

W. C. Williams

(Signature of Claimant.)



The State of Ohio
Hancock County S.S.

In the matter of the application
for Pension of Charles Howard Private Compy "G"
1st Regt O. V. A. A. Claim No 8/3, 136. under the act
of June 27th 1890.

On this 1st day of December A.D. 1890, personally
came before me, A. Stoney Public, in and for
the County and State aforesaid, Charles Howard aged
51 years to me well known, as a reputable and
credible person, and who bring by me duly sworn
oath, that he lives within 4 miles of, and his
Post office address is Selmore Putnam County Ohio
that he is the identical Charles Howard who
enlisted as a private in Company "G" 1st Regt
O. V. A. on the 8th day of June 1863, and was
honorably discharged at Knoxville Tenn on the
25th day of July 1865. that he is disabled by
wound of a Captain of the left side, and that
he is troubled with, and suffers from said rupture
nearly all the time, and is compelled to wear a
truss all the time, that he can not get around
without wearing a truss, that he has expended
much money, in buying the different make of
trusses, that he can not perform any kind of
labor without wearing said truss, that said
disability is permanent and not the result of
any vicious habits, and that said disability
incapacitates him from the performance of
manual labor about $\frac{1}{3}$ to $\frac{1}{2}$, as compared to

ACT OF MAY 11, 1912.

Cert. No. 581430

Edmund [unclear]

Claimant, Charles Howard Leopold
 No. P. O., Pop. No. 23, 1st Co. 1st Regt. 1st Div. 1st Army Rank, Corporal
 County, Stancok Service, Inf.
 State, Ohio 1031 1/2 St. C.
 Rate, \$ 2.03 per month, commencing May 28, 1912

ATTORNEY OR STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name, [Signature]; Fee, \$ _____; Agent to pay, _____
 P. O., _____; Articles filed _____, 19____

APPROVAL.

Submitted for Ad. Oct 30, 1912 E. G. Tim Beck Examiner.
 Approved for admission Rate \$ 2.3 per month, age 28 years.

Retiree from Oct 7 February 6, 1907.

Length of pensionable service: 2 years, 1 months, 18 days.

Deductions in service from any cause none, years, _____ months, _____ days,

on account of _____

Nov 13, 1912, W. D. Corby Nov 14, 1912, [unclear]
 Legal Reviewer. Re-Reviewer.

Enlisted Jan 8, 1863; honorably discharged July 25, 1865
 Enlisted _____, 18____; honorably discharged _____, 18____

Enlisted _____, 18____; honorably discharged _____, 18____
 Length of pensionable service: 4 years, 2 months, 18 days.

Pensioned at \$ 1.5 per month, under Act Feb 6 - 87
 _____ per month, under _____

PRESENT CLAIM, ACT OF MAY 11, 1912.

Declaration filed MAY 23 1912, 1911

Age shown by evidence 73 years; date of birth alleged Oct 31, 1838

Claimant does _____ write.

M. C.

Delany
ACT OF MAY 11, 1912.

Cert. No. 581430

ACT OF MARCH 4, 1913

Claimant, *Charles Howard*

P.O. # *279723* *McCoub*

Rank, *Corporal*

County, *Hancock*

Service, *Co L*

State, *Ohio*

1 Ohio Army

Rate, \$ *30* per month, commencing *October 21, 1910*

Approved for increase
from June 10, 1913
to
19
per month
JUL 13 1913
Sent to pay.

ATTORNEY OR STATE REPRESENTATIVE
(Order April 25, 1907.)

Name, _____ Fee, \$ _____
P. O., _____ Articles filed _____, 19____

APPROVAL.

Submitted for *Adms*, *Dec 18, 1913*, *Walsh*, Examiner.

Approved for *Marion* Rate \$ *30* per month; age *76* years.

Length of pensionable service: *2* years, *1* months, *18* days

Deductions in service from any cause: *none* years, _____ months, _____ days

on account of _____

Jany 3, 1914 *Edna* *Jan 7, 1914* *J.R. Hunt*
Legal Reviewer.

Enlisted *June 8, 1868*; honorably discharged *July 25, 1868*

Enlisted _____, 18____; honorably discharged _____, 18____

Enlisted _____, 18____; honorably discharged _____, 18____

Length of pensionable service: *2* years, *1* months, *18* days

Pensioned at \$ *2.3* per month, under *Act May 15, 1912*

PRESENT CLAIM, ACT OF MAY 11, 1912.

Letter *Apr 20*
Documents filed _____, 1913

Not shown by evidence *75* years; date of birth alleged *Oct 21, 1838*

Claimant does *not* write.

521430
ealuminum
Surrender ACT OF FEBRUARY 6, 1907.

Claimant: Charles Howard

P. O.: Mrs. Rankin

County: Hancock

State: Minn

Rate: \$ 15 per month, commencing

Rank: Corporal

Company: "D"

Regiment, 1. Min. Inf., 4. U.S.

October 24, 1908

NO STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name,
P. O.,

APPROVAL.

J. D. Pitts Examiner

Submitted for Adm. Surrender in 1908

Approved for increase

Age over 70
Rate \$15 per month

Nov 10 1908 *W. Thomas* Logg. Rec'd

Nov 11, 1908 *W. Thomas* Re-Port

Unlisted June 8, 1863; honorably discharged

June 25, 1865

Enlisted 18; honorably discharged

Enlisted 18; honorably discharged

Remitted at \$ 12 per month, under Act of Feb. 6, 1907.

PRESENT CLAIM, ACT OF FEBRUARY 6, 1907.

Declaration filed October 24, 1908

Date of birth alleged, October 21, 1838

Age shown by evidence 70 1/2 years

Claimant does write.

R. D. Bode



3-1734
 Middle ^{Div.}
 Reg. No. 571430
 Dept. of the Interior,
 BUREAU OF PENSIONS,
 Co. 1 Reg't Ohio A. A.

Kennett, Ind.

Washington, D. C., *March 7*, 189*8*

Sir: Will you kindly answer, at your earliest convenience, the questions enumerated below? The information is requested for future use, and it may be of great value to your family.

Very respectfully,

Mr. Charles Horned,
Belmore Ohio

No. 1. Are you a married man? If so, please state your wife's full name, and her maiden name.

Answer: *yes, Elizabeth Howard, Elizabeth Boyan*

No. 2. When, where, and by whom were you married? Answer: *Mar. 29th 1859*

by Charles Presly J.P.

No. 3. What record of marriage exists? Answer: *In the Probate Judges*

Office of Hancock County Ohio

No. 4. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce. Answer: *No*

No. 5. Have you any children living? If so, please state their names and the dates of their birth.

Answer: *yes One Lucy A Howard born Aug the 1st 1861*

Date of reply, *Mar 14*, 189*8*

Charles Howard
 (Signature.)



✓

SURGEON'S CERTIFICATE

IN CASE OF

Charles Howard
Co. E, 1st Reg't Ohio V.A.

APPLICANT FOR Insurance

No. 581430

DATE OF EXAMINATION:

December 20th, 1905

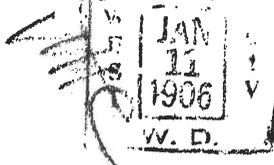
| | |
|-------------------------------|----------|
| <u>F. W. Fernier</u> , Pres., | } BOARD. |
| <u>W. H. Maclean</u> , Sec'y, | |
| <u>C. F. King</u> , Treas., | |

Post office, Ludlow

County, Hancock

State, Ohio

Do not use backs of certificates for any purpose other than indicated by printed matter thereon. 6-552a



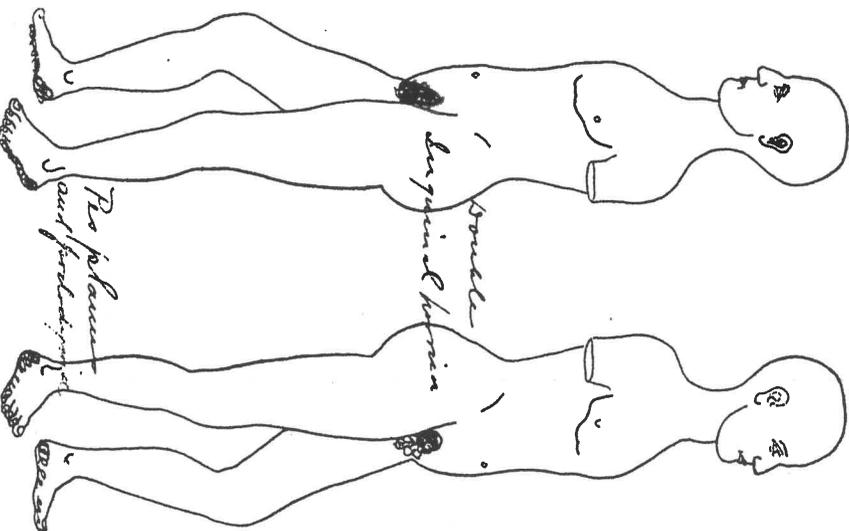
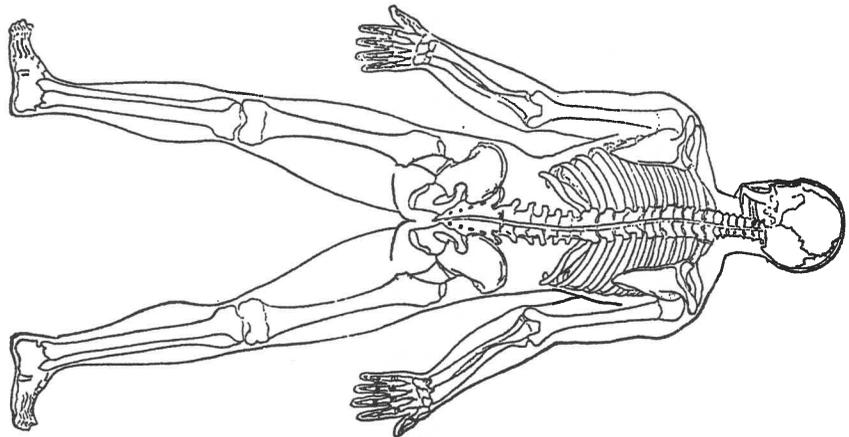
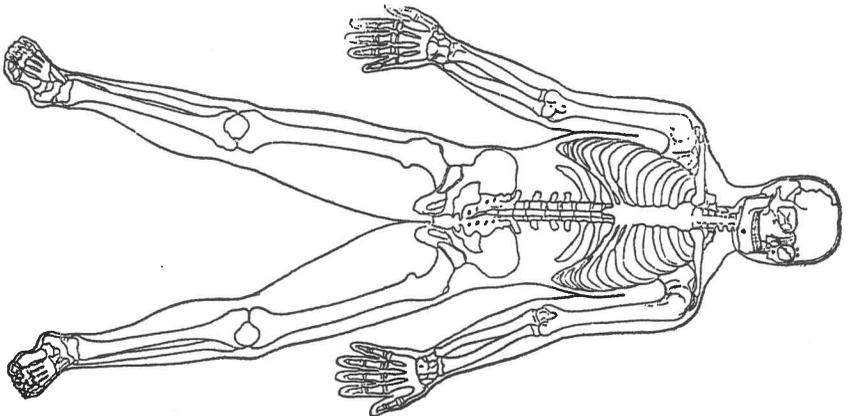
(This certificate to be filled in and signed by the secretary when the full board is present.)
"I hereby certify that Dr. F. W. Fernier, Dr. W. H. Maclean and Dr. C. F. King were personally present and actually participated in the examination of Charles Howard, the claimant in this case, on 20 day of December, 1905" (Signature) W. H. Maclean

(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.)

"I, _____, the applicant for (increase or original) pension referred to in this medical certificate, hereby consent to be examined by Dr. _____ and Dr. _____, the examining surgeons here present (waiving examination by full board), on this _____ day of _____, 190 _____"

Witnesses to mark: _____

(Signature of Applicant) _____



The outlines of the human skeleton and figure should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

(Paste continuation sheet, if used, here.)

SURGEON'S CERTIFICATE.

Insert character and number of claim. Surgeon Pension Claim No. 581,420 Fridlay P. O. State. Ohio 1905

Name of claimant. Charles Hazard Address of Board. 21st Reg't McComb, Hancock & Co December 20 [Date of examination.]

Claimant's post-office address. RFD No 23 McComb, Hancock & Co December 20 1905

Names of disabilities. Double inguinal hernia, hernia, hernia, double inguinal hernia, piles and disease of bladder.

He receives a pension of Eight dollars per month.

We make the following statement in regard to the origin of his disabilities and date when first discovered by him: Eight inguinal hernia originated about 1890

Left inguinal hernia about 1880, hernia about 1880
Double inguinal hernia about 1880, hernia about 1880
Double inguinal hernia about 1880, hernia about 1880
Double inguinal hernia about 1880, hernia about 1880

Birthplace, Cleveland Ohio; age, 67 years; height, 5' 8 1/4; weight, 197 pounds; complexion, Medium; color of eyes, Blue; color of hair, Gray; occupation, Tanner; permanent marks and scars other than those described below, None

We hereby certify that upon examination we find the following objective conditions:

Pulse rate, 80 90 115; respiration, 19 21 30; temperature, 98 98 98
[Sitting, standing, after exercise.] [Sitting, standing, after exercise.] [Sitting, standing, after exercise.]

Small inguinal hernia, lower in left inguinal and small
hernia six inches, and two inches in circumference
Hernia is direct and occurs through the external ring
and descends into scrotum. Rings are on
large. Hernia can be reduced but cannot be retained
on account of large opening just above eye-bro; the
truss cannot be drawn sufficiently close but half hernia
remains.

Left inguinal hernia, lower in left inguinal
ring two inches long by one inch in diameter. Hernia is oblique
and passes through the external ring but does not descend into
scrotum. It can be reduced and retained by a well fitted truss. Hernia is
reduced by pressure. It is not reducible in left inguinal
ring. Lower muscular slightly tender but claimant can
stand and give without difficulty.
Affecting of feet. Has few blisters of both feet with
phlegmonous. Needs for only truss and he cripples along in walking.

Piles. Proctal mucosa much enlarged and much enlarged
My ulceration of bleeding. One external pile one inch long by 1/2 in diameter
them internal hernia 1/4 x 1/2; long 3/4 by 1 inch in length. Not bleeding or
ulcerated but very sensitive. No pain, faint, abortion or foul odor.
Disease of bladder. History of recurrent attacks of hematuria which
is said to come from his father. No evidence of any disease of prostate
gland. Urine contains acid 1020. No sugar or albumen.

Heart. Chest impulses not evident on inspection or palpation. Suffering
valvular from mitralis, sine 2 1/4 inches to left and from 2 1/2 to 3 inches
to right irregular, action full and regular, sounds faint but normal. No
muscular dilatation, hypertrophy, pulse cyanotic, definite or visible. No
what symptoms, vessel from mitralis, pressure not, and respiratory movement normal
No evidence of renal disease or vicarious habits. Except as above
no other disability is found to exist. Wants highly colored
muscles moderately firm. Claimant is well nourished
and there is but slight evidence of arterial sclerosis or
arterio-sclerosis.

We find that the aggregate permanent disability for coming a subject
to manual labor is due to double inguinal hernia, double piles
and piles, not due to vicarious habits and warrants a rate of 10%

W. W. Sherman Pres. M. W. Beckler Secy. C. P. King Treas.

Single surgeons will use this blank, changing "we" to read "I."

Marginal entries must never be made.

Here give a full description of the disability, in accordance with Book of First, Second, and Third, and make a separate paragraph for each disability.

Feet within the knowledge of the Board, or any member thereof, shall be taken into consideration in the award of a pension.

Whenever a disability is shown or is believed to be due to or aggravated by any disease or condition of the body, the Board shall be satisfied that the disability is due to such disease or condition, unless it is shown to be due to some other cause.

When rates are recommended solely on subjective evidence, the Board may, in its discretion, require a medical examination of the claimant.

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.

Expert character and number of claim.

Increase

Pension Claim No. 581430

Name and rank of claimant.

Charles Howard

Rank, Private

Company 1st Regt Ohio, H.A

Deshler, Ohio

State,

Claimant's post-office address.

Belmore, Ohio

Post-office address of the Board,
Feb'y 19th 1896

[Date of examination.]

189

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: left inguinal hernia, old, and same hernia of right side new,

Cause of disability.

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

and that he receives a pension of

~~Six~~

dollars per month.

He makes the following statement upon which he bases his claim for

Increase

[Original, Increase, restoration, &c.]

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

Because my disability from hernia is that I can do no labor at all. I am also suffering greatly from piles, and also have Jumbago.

Upon examination we find the following objective conditions: Pulse rate, 70; respiration, 18; temperature, 98.5; height, 5 feet 8 inches; weight, 205 pounds; age, 58 years.

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

On inspection this an appears in good health and well nourished. We find a left and right inguinal hernia; they are both complete, the left descends into the scrotum; the left opening is very large and almost impossible to hold it with a truss. He is fully threefourth incapacitated for the performance of manual labor of any kind on account of hernia and therefore rate for same 12/18. We find the rectum inflamed as high as can be seen; the rectal vessels are terge and the examination very painful; no pronounced pile tumors. We rate for disease of the rectum 2/18.

We find the lumbar muscles tense and the integument adherent stooping and recovering is attended by pain also tenderness over the course of both sciatic nerves; no atrophied muscles. We rate for Jumbago 4/18. No disability other than described. No evidences of vicious habits.

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.

The left hernia through the umbilical ring as above when the subject. The right one by entrapment by a protuberance. The right hernia is not 2 in in diameter which the left is merely 1/2 in.

Blank

Pres.

W. H. Schmitt

Sec'y.

J. H. Schmitt

Treas.

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

Continue record of examination here.

Doctor - Please describe all Existing disabilities. Comply fully with paragraphs 6 and 103 of instructions of 1850. Recall claimant if necessary
C. W. K. May 11/1891

SURGEON'S CERTIFICATE



IN CASE OF

Chas. Howard
Co. 1, Reg't *Chas. H. A.*

Applicant for *original*

No. *813186*

DATE OF EXAMINATION:

, 1891

BOARD.

Jan 21
Dr. F. Reed Pres.
Mr. [unclear] Secy.
Mr. [unclear] Treas.

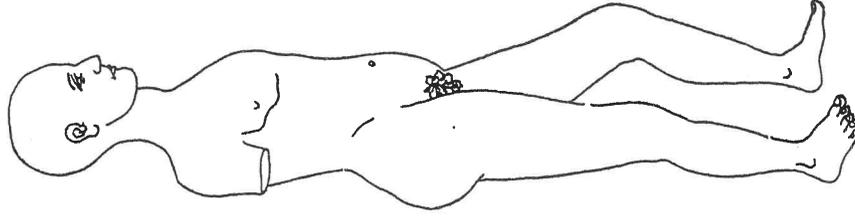
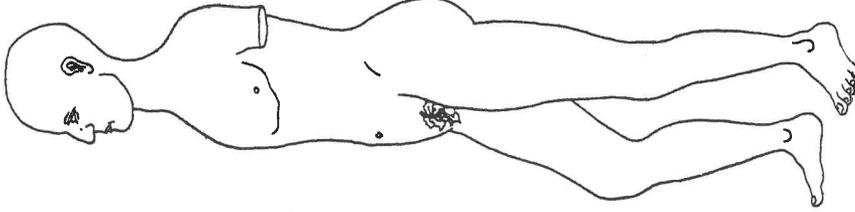
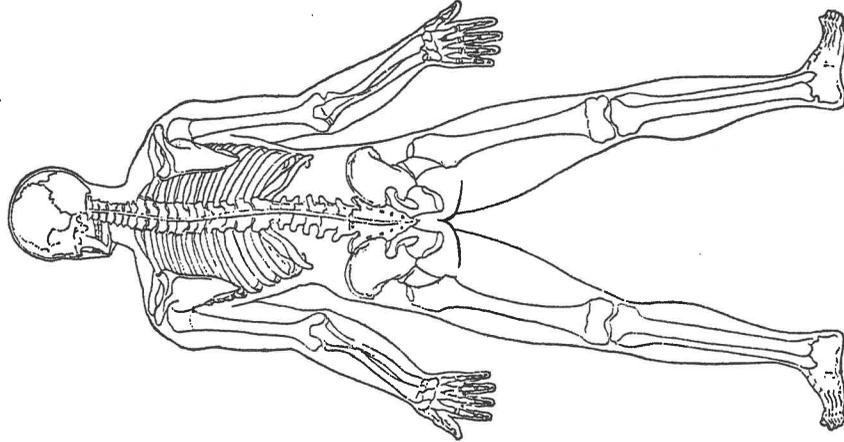
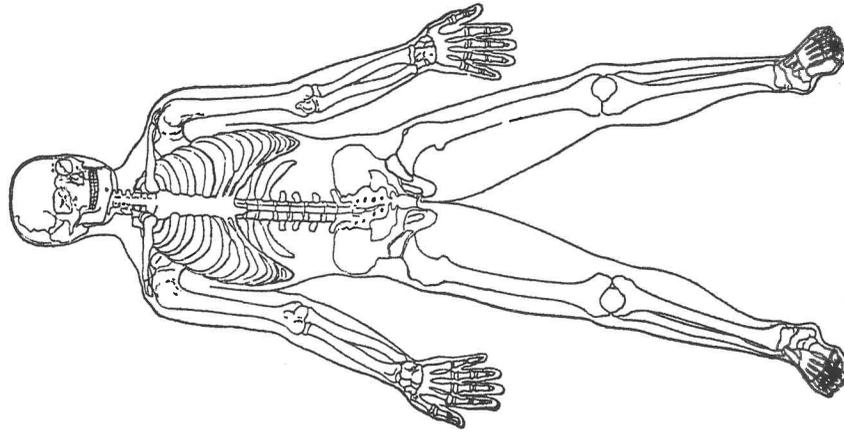
Post office, *Chicago*

County, *Cook*

State, *Ill.*

P. S.—Write your Post-office address plainly and in full.

1711



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.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certifi-

State of Ohio Henry Burdett SS

In the matter of Pension Claim of Charles How
and O. S. Reg Ohio N. S.

Personally appeared before me a Notary Public in and for the County and State of Warren Charles Howard, the Oathman whom I certify to be respectable and worthy of full credit who being by me duly sworn deposes as follows: That he incurred night imprisonment therein on Nov: 9th 1898 under the following circumstances by slipping from the north steps at Findlay Ohio to the sidewalk on the above date, and as for disease of Rheum and Lumbago it would be impossible for me to tell the manner of same, as they are both of long standing but believe them to be due to my military service and that said disabilities are in no way due to any vicious habits

Charles Howard

Sworn to before me at Findlay, O. in my presence on this 14th day of Mar. 1898. and tested by this Special Agent fully acquainted with the above affidavits for executing this same, and that I have no objection either direct or indirect

Witness my hand and seal at Findlay Ohio



George W. Williams
Notary Public

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. *Original* Pension Claim No. *819196*
(State above whether for original, increase, or restoration.)
 Name and rank of claimant. *Chris Howard*, Rank, *Private*
1st Regt Ohio H.A. Ottawa Ohio State,
Belmore Palmarc Ohio [Post office address of the board.]
 Chairman's post-office address. *Jan 21,* 189*1*, [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 in the service, viz: *Amputation left leg*

and that he receives a pension of *80* dollars per month.
 He makes the following statement upon which he bases his claim for *Original*
that he has a amputation. [Original, increase, restoration, etc.]

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

Upon examination we find the following objective conditions: Pulse rate, *80* ; respiration, *19* ; temperature, *99* ; height, *5* feet *8* inches; weight, *200* pounds; age, *52* years. *Left leg wired hernia*
gunner worked through & terminating
claimant means loss, which
relieves the hernia reasonably
well.

Here give a full description of the disability, in accordance with the provisions for 1889.

Date for EACH cause of disability. He is, in our opinion, entitled to a *sum* for that caused by *sum*, and *sum* for that caused by *sum*

M. F. Reed, Pres. *W. W. Bygg*, Sec'y. *C. J. S. J. J. J.*, Treas.

N. B.—Always forward a certificate of examination, whether a disability is found to exist or not.
 (632-150 N.) 6-562

GENERAL AFFIDAVIT

State of Ohio COUNTY OF Hancock

In the Matter of Percepsion for Charles Howard
Co. 2, 1st Regt. Ohio Heavy Artillery
Chs. No. 581,430 - 9''

ON THIS 9th day of December, A. D. one thousand nine hundred
 and 13, personally appeared before me, a Notary Public

Charles Howard, within and for the County and State aforesaid, duly authorized to administer
 oaths, Pleasant St. aged 75 years,
 a resident of No. Pleasant St. Street, Hancock
 County of Ohio, State of Ohio, well known by me to

be reputable and entitled to credit, and who, being duly sworn according to law, declares in relation to the
 aforesaid case as follows:

That he is the claimant
 in said mentioned claim, and in respect
 to a call from the Department under
 date of Dec. 2, 1913, he says that he is
 unable to furnish either public or church
 or family record of the date of his birth,
 for the following reasons - he can find no
 public record or church record as
 he believes none exist, and as his
 father died when claimant was only about
 two year of age he has been told - his
 mother marrying a man by name of James Howard
 Affiant has never been a member of a
 family Bible of his father. He was told by his
 mother, and her sister has known that
 he was born on the 21st day of October 1838.

He also says that his mother Elizabeth
 Howard married soon after the death of his father
 in the Affiant lived with them in or near
 Elyria Ohio until 1852, when they moved
 to Liberty Township, Hancock Co. Ohio, where he lived
 with them until 1860.

I certify that I am not interested in the prosecution of this case.

My post office address is RR No 28 McConnelsville Ohio.

W. B. Brown Notary Public for Hancock Co. Ohio
W. B. Brown Witness



R.D. No. 23. McComb, FINDLAY, OHIO,
Oct. 21. 1913.

Hon. Commissioners of Pensions
Washington D.C.

Sir:

I am pensioned under Act May 11. 1911
Cite No. 581.430 Co. L. 1st Regt Ohio Heavy
Artillery Civil War, as 70 years of age
and as I am 75 years of age to day
having been born Oct. 26. 1838, I desire
to call your attention to the fact
as I ~~can~~ have a change of rating
in accordance with the change of
age to 75 years -

Respectfully

Charles Howard

R.D. 23 McComb, Hancock Co.

F. C. —

ASG/TRO
Section I
Civil War Division
Inv. Ctf. 581430
Charles Howard
Co, I, 1 Ohio H.A.

, December 13, 1913.

The Director of the Census,
Washington, D. C.

Sir:
For use in the above entitled claim for pension,
please furnish a report from the records of your office
giving the age in 1859 or 1860 of the soldier, Charles
Howard, who resided with James Hardin in Elyria, Lorain
County, Ohio in 1850, and in Liberty Township, Hancock
County, Ohio in 1860, and who alleges the date of his
birth as October 21, 1838.

Very respectfully,

G. M. SALTZGABER,
Commissioner.

CHARLES HOWARD *Hancock*
 McCOMBIOHIO
 581430 ACT MAY
 DROR REPORT—PENSIONER

DEPARTMENT OF THE INTERIOR
 BUREAU OF PENSIONS

DEAD Cert. No.

Pensioner

Soldier

Service *Exp. R. / 1000000*

Class *Act. MAY 1 - 1920* Group *3*

LAW DIVISION

....., 192

In the above-described case a declaration filed in this Division indicates that said pensioner died, 19.....

Per H. P. WILLEY,
Chief, Law Division.

DISBURSING DIVISION

JUN 29 1922

....., 192

Check No. *3990921* \$ *1.50*

dated JUN 4 1922, Section

returned by postmaster with information that the above-described pensioner died *Mar. 16,* 19*22* has been canceled.

Per E. E. MILLER,
Disbursing Clerk.

FINANCE DIVISION

JUN 30 1922

....., 192

The name of the above-described pensioner who was last paid at the rate of \$..... per month to 19....., has this day been dropped from the roll because of *276*

MAR 16 1922
 J. J. KANDALL.

DECLARATION OF RECRUIT.

I, Charles Howard desiring to VOLUNTEER as a Soldier in the Army of the United States, for the term of THREE YEARS, do declare, That I am Twenty Two years and — months of age; that I have never been discharged from the United States service on account of disability or by sentence of a court-martial, or by order before the expiration of a term of enlistment; and I know of no impediment to my serving honestly and faithfully as a soldier for three years.

GIVEN at Trinity Warren County Ohio
The 10th day of June 1863

Witness:
J. B. Price

Charles Howard

Reg't of _____
Discharged _____ 18__
enlistment; last served in Company ()

Volunteered at Trinity Warren County
Ohio June 8th 1863
By John S. Riddle
Capt. Regiment of C. V. G. A.

No. 6
Charles Howard

CONSENT IN CASE OF MINOR.

I, _____ Do certify, That I am the
_____ of _____ ; that the
said _____ is _____ years of age; and I
do hereby freely give my consent to his volunteering as a Soldier in the Army of the United States for
the period of THREE YEARS.

GIVEN at _____ day of _____
The _____
Witness: _____

✓ 1709
Howard, Charles

Co L, 1 Ohio Heavy Art'y.

Corporal *Corporal*

CARD NUMBERS.

| | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 |
|----|----------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 1 | 23465653 | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 23465796 | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 23465949 | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | 23466100 | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | 23466249 | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | 23466403 | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | 23466563 | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | 23466715 | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | 23466865 | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | 23467014 | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 | 23467165 | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 | 23467319 | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | 23467470 | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 | 23467624 | | | | | | | | | | | | | | | | | | | | | | | | |
| 15 | 40098477 | | | | | | | | | | | | | | | | | | | | | | | | |
| 16 | 34097956 | | | | | | | | | | | | | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25 | | | | | | | | | | | | | | | | | | | | | | | | | |

Number of personal papers herein 1

Book Mark: _____

See also _____

876 | 1 H. Arty. | Ohio.

Charles Leonard
Cpls, Co. L, 1 Reg't Ohio Heavy Arty.

Company Muster Roll

for *May & June*, 1865.

Present or absent *Present*

Stoppage, \$ 100 for _____

Due Gov't, \$ 100 for _____

Remarks: _____

Book mark: _____

(858) Copyist. *Geo. Brown*

876 | 1 H. Arty. | Ohio.

Charles S. Leonard
Corpl, Co. _____, 1 Reg't Ohio H. Arty.

Age 21 years.

Appears on _____ dated _____

Amoxville, Ohio, July 25, 1865.

Am't for cloth'g in kind or money adv'd \$ 100

Due U. S. for arms, equipments, &c., \$ 100

Due soldier \$ 17.96; due U. S. \$ 100

Last settled 186 _____; drawn since \$ 100

Clothing account: _____

Last paid to _____

Muster-out to date *July 25, 1865*

Remarks: *Dismissed for duty.*

Book mark: _____

(861) Copyist. *Stympe*

876 | 1 H. Arty. | Ohio.

Charles Leonard
Cpl, Co. _____, 1 Reg't Ohio H. Arty.

Appears on *Nov 1865* Returns as follows:

Absent on detail *Nov 30*

Order to take him *Nov 30*

Order to Leonard *Nov 30*

May June 1865

Absent on detail *Nov 30*

Genl Arty. *Nov 30*

Remarks: _____

Book mark: _____

(848) Copyist. *W. Hancock*

876 | 1 H. Arty. | Ohio.

Charles Leonard
Cpl, Co. _____, 1 Reg't Ohio H. Arty.

Appears on _____ of the organization named above.

DESCRIPTION.

Age 24 years; height 5 feet 11 inches.

Complexion *tan*

Hair *dark*

Eyes *blue*

Where born *Cynthiana, Ohio*

Occupation *farmer*

ENLISTMENT.

When *June 8*, 186 _____

Where *Franklin*

By whom *St. John*; term 3 yr.

Remarks: _____

Book mark: _____

(888g) Copyist. *St. John*

H | I H. Art'y. | Ohio.

Charles Howard Corp., Co. I, 1 Reg't Ohio Heavy Art'y

Appears on

Company Muster Roll

for July & Aug 1864

Present or absent

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks:

Book mark:

(858) Copyrtd. *John Howard*

H | I H. Art'y. | Ohio.

Charles Howard Corp., Co. I, 1 Reg't Ohio Heavy Art'y

Appears on

Company Muster Roll

for May & June 1864

Present or absent

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks: On detached service at Strainers Landing Tenn June May 2, 1864

Book mark:

(858) Copyrtd. *John Howard*

H | I H. Art'y. | Ohio.

Charles Howard Corp., Co. I, 1 Reg't Ohio Heavy Art'y

Appears on

Company Muster Roll

for Mar & Apr 1864

Present or absent

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks:

Book mark:

(858) Copyrtd. *John Howard*

H | I H. Art'y. | Ohio.

Charles Howard Corp., Co. I, 1 Reg't Ohio Heavy Art'y

Appears on

Company Muster Roll

for Jan & Feb 1864

Present or absent

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks:

Book mark:

(858) Copyrtd. *John Howard*

H | 1 H. Art'y. | Ohio.

Charles Howard
Corp., Co. L, 1 Reg't Ohio Heavy Art'y.

Appears on

Company Muster Roll

for Jan & Feb., 1864

Present or absent Present

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks:

Book mark:

(858) *Falmer* Copyist.

H | 1 H. Art'y. | Ohio.

Charles Howard
Corp., Co. L, 1 Reg't Ohio Heavy Art'y.

Appears on

Company Muster Roll

for Mar & Apr., 1864

Present or absent Present

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks:

Book mark:

(858) *Falmer* Copyist.

H | 1 H. Art'y. | Ohio.

Charles Howard
Corp., Co. L, 1 Reg't Ohio Heavy Art'y.

Appears on

Company Muster Roll

for May & June, 1864

Present or absent Absent

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks: On detached
service at Strawberry
Blain, Tenn, since
May 2, 1864.

Book mark:

(858) *Falmer* Copyist.

No | 1 H. Art'y. | Ohio.

Charles Howard
Corp., Co. L, 1 Reg't Ohio Heavy Art'y.

Appears on

Company Muster Roll

for July & Aug., 1864

Present or absent Present

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks:

Book mark:

(858) *William J. ...* Copyist.

H | 1 H. Art'y. | Ohio.

Charles Howard

Capt., Co. L, 1 Reg't Ohio Heavy Art'y.

Appears on

Company Muster Roll

for May & June, 1865.

Present or absent Present

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Remarks:

Book mark:

Geo. Allen Copyist.

H | 1 H. Art'y. | Ohio.

Charles Howard

Corpl., Co. S., 1 Reg't Ohio H. Art'y.

Age 24 years.

Appears on Co. Muster-out Roll, dated

Knoxville, Tenn., July 25, 1865.

Muster-out to date July 25, 1865.

Last paid to Aug 31, 1864.

Clothing account:

Last settled 186 ; drawn since \$ 100

Due soldier \$ 17 96 ; due U. S. \$ 100

Am't for cloth'g in kind or money adv'd \$ 100

Due U. S. for arms, equipments, &c., \$ 100

Bounty paid \$ 25 00 ; due \$ 75 00

Remarks: Corpl. from enrollmt. Present for duty.

Book mark:

Ripps Copyist.

H | 1 H. Art'y. | Ohio.

Charles Howard

Cpl., Co. L, 1 Reg't Ohio H. Art'y.

Appears on Returns as follows:

Nov 1863, Absent on detached service to take prisoners to Louisville Ky. Nov 30,

May June 1864 Absent on detached serv. at Strawberry Plains, Tenn. since May 2, 64.

Book mark:

W. Harcott, Copyist.

H | 1 H. Art'y. | Ohio.

Charles Howard

Co. L, 1 Reg't Ohio H. Art'y.

Appears on

Company Descriptive Book

of the organization named above.

DESCRIPTION.

Age 24 years; height 5 feet 11 inches

Complexion Fair

Eyes blue; hair dark

Where born Cuyahoga, Ohio

Occupation Farmer

ENLISTMENT.

When June 8, 1861

Where Indiana

By whom J. S. Noble; term 3 yr.

Remarks:

Hastie Copyist.

1709

Howard, Charles

Co. I, 1 Ohio Heavy Art'y.

Corporal | Corporal

CARD NUMBERS.

| | | |
|----|----------|----|
| 1 | 23465653 | 26 |
| 2 | 23465796 | 27 |
| 3 | 23465949 | 28 |
| 4 | 23466100 | 29 |
| 5 | 23466249 | 30 |
| 6 | 23466403 | 31 |
| 7 | 23466563 | 32 |
| 8 | 23466715 | 33 |
| 9 | 23466865 | 34 |
| 10 | 23464014 | 35 |
| 11 | 23465165 | 36 |
| 12 | 23467319 | 37 |
| 13 | 23467470 | 38 |
| 14 | 23467624 | 39 |
| 15 | 40098477 | 40 |
| 16 | 34097956 | 41 |
| 17 | | 42 |
| 18 | | 43 |
| 19 | | 44 |
| 20 | | 45 |
| 21 | | 46 |
| 22 | | 47 |
| 23 | | 48 |
| 24 | | 49 |
| 25 | | 50 |

Number of personal papers herein. 1

Book Mark: _____

See also _____

DECLARATION OF RECRUIT.

I, Charles Howard desiring
 to VOLUNTEER as a Soldier in the Army of the United States, for the term of THREE YEARS,
 I do declare, That I am Twenty Four years and months
 of age; that I have never been discharged from the United States service on account of disability or
 by sentence of a court-martial, or by order before the expiration of a term of enlistment; and I know of
 no impediment to my serving honestly and faithfully as a soldier for three years.

GIVEN at Findly Hancock County Ohio
 The 8th day of June 1863

Witness:
J. S. Peble

Charles Howard

Charles Howard
 No. 6

Charles Howard
 Volunteered at Findly Hancock County
Ohio June 8th 1863
 By Justice S. Peble
Capt Regiment of C. S. A.

_____ enlistment; last served in Company ()
 _____ Reg't of _____
 Discharged _____ 18 .

CONSENT IN CASE OF MINOR.

I, _____ Do certify, That I am the
 of _____ ; that the
 said _____ is _____ years of age; and I
 do hereby freely give my consent to his volunteering as a SOLDIER in the ARMY OF THE UNITED STATES for
 the period of THREE YEARS.

GIVEN at _____
 The _____ day of _____

Witness:

2006.092.001

OFFICE OF
 A. E. WARD, K-

NOTARY PUBLIC
 U. S. Pension Attorney.

State of Ohio County of Henry, S.S.

On this 18 day of January 1896 A.D.

Personally appeared before the undersigned Notary Public in and for the aforesaid County & State aforesaid, Charles Howard, Aged 59 years who being duly sworn according to law declares that he is a pensioner of the United States duly enrolled at the rate of \$6.00 per month under Pension Certificate No. 581430 by reason of disability of Hernia of left side and an additional pension for Hernia of right side of recent date, that he is the identical Charles Howard, who was a ~~sergeant~~ ^{corporal} in Co. "L" 1st Reg. A. V. Heavy Artillery ^{and} served at least 90 days, and he asks increase of pension on account of the new disability of recent Hernia. Plaintiff requests medical examination before U. S. Pension surgeons at Desolder Ohio.

Application for Increase of Pension Act of June 7,

Desolder, O. _____ 189

That he hereby appoints with full power of substitution and recreation Edward Ward of Desolder Ohio, his true and lawful attorney to prosecute his claim, under the act of June 27th 1890.

P. W. Cramer

C. J. Ward.

Charles Howard

[4]

DECLARATION FOR THE INCREASE OF AN INVALID PENSION.

State of Ohio, County of Starrcock, ss:

On this 12 day of Sept, A. D. one thousand eight hundred and ninety one personally appeared before me, a Notary Public

within and for the County and State aforesaid, Charles Howard, aged 52

years, a resident of the township of Pleasant county of Starrcock

State of Ohio, who, being duly sworn according to law, declares that he is a pensioner

of the United States, Certificate No. 581430 enrolled at the Starrcock Pension Agency

at the rate of Eight dollars per month, by reason of disability from Soft meningitis,
(Here name the disability for which

Starrcock incurred
Pension was granted.)

in the Millitary service of the United States while as private in Company
(Military and Naval), "Q" 1st Regt. O. I. S. A. Co. (Here state rank, company and

regiment, if in the Army—vessel, if in the Navy.)

That he believes himself to be entitled to an increase of pension on account of the present rating being too

low for the degree of his disability that said disability has
(Here give a plain statement of why you should have a higher rate of Pension.

increased and continues to increase as he

grows older

He feels that his present rating is not commensurate with the degree of his disability. He, therefore, files this application for increase of pension, and requests a medical examination by a board of examining surgeons at Beaumont Ohio, to whom special instructions may be issued, so that the full extent of his disability may be ascertained. He hereby appoints, with full powers of substitution and revocation,

Deeth McRobble of McLeans Ohio
 his true and lawful attorney to prosecute his claim.

His post office address is 13th Street Cincinnati Ohio
(State your address in full.)

Charles Howard
(Claimant's Signature.)

(If claimant sign by mark, two witnesses must sign here.)

Sworn to this 15th day of July A. D. 1890. I
hereby certify that the content of this declaration
was read and fully explained to the applicant
and witnesses before swearing. I have no
interest in this claim, not concern in its
prosecution.

William Warner
Notary Public

the United States, under the act of Congress
 approved June 27th 1890.

He hereby appoints with full power of sub-
 stitution and pro-secution, Scott W. Orsby of
 McComb Stewart County Ohio, his true and lawful
 Attorney to prosecute said claims.

His Court office address is Behrens
 Putnam County Ohio.

Paul R. B. Charles Howard
 J. G. Hammond

Also personally appeared John S. Orsby
 residing at McComb Ohio and J. G. Hammond
 residing at McComb Ohio persons whom I
 certify to be respectable and entitled to credit in
 being by me duly sworn say they were present
 and saw Charles Howard the claimant sign
 his name to the foregoing declaration that they
 have very rarely to believe from the appearance
 of said claimant and their acquaintance
 with him that he is the identical person
 he represents him self to be and that they have
 no recollection in this claim, nor concern in its
 prosecution.

John S. Orsby
J. G. Hammond

Sworn to before me and signed in my

Declaration of Soldier for disability Pension

Act of June 27th 1890.

State of Ohio
Hancock County ss.

On this 15th day of July A. D. 1890, personally appeared before me the Notary Public, within and for the County and State aforesaid, Charles Howard aged 57 years who being by me duly sworn according to law, declares that he is the identical Charles Howard, who was enrolled on the 8th day of June A. D. 1863, as a private in Company "G" 1st Reg. O. V. A. W. Commanded by Captain Joshua S. Preble, in the late war of the Rebellion, and was honorably discharged at Honorville Tenn. on the 25th day of July A. D. 1865. and that he served more than Ninety Days in said war, that he is disabled by reason of "Fracture of the left side, which incapacitates him from the performance of manual labor to such a degree, as to render him unable to earn a support, and that said disability is of a permanent character, and is not the result of his own vicious habits, that he has not been employed in the Military or Naval service, since his discharge. These facts as above stated, that he has never received, nor applied for a pension.

He therefore makes this declaration for the purpose of being placed on the Pension roll of

Act of June 27, 1890.

INVALID PENSION.

581430
Lawrence J. ...

Claimant, Charles Howard
 P.O., Bellvue
 County, Putnam
 State, Ohio
 Rank, Private
 Company, L
 Regiment, 1. Ohio Inf Regt
 Rate, \$, per month, commencing July 17, 1890

Disabled by Left injured from

RECOGNIZED ATTORNEY.

Name, Scott W. Bette Fee, \$ 10- Agent to pay.
 P.O., McCoyts Ohio Articles filed, None, 189.

APPROVALS.

Submitted for Wm. Quinn, 1891, Examiner.
 Approved for admission
Left injured from
 \$ 8

Legal Remewer, E. W. Stodd
 Medical Referee, Sam. M. S.
Mr. 301891. May 13, 1891.

Pensioned from , 18 , at \$ for , 189 , at \$

SERVICE SHOWN BY RECORD.

Enlisted June 3, 1863 honorably discharged Aug 25, 1865
 Re-enlisted , 18 , honorably discharged , 18

Declaration filed July 17, 1890, alleges permanent disability, not due to vicious habits,
 from injury of the left side
Writts. W. M. S.

Act of June 27, 1890.

Middle Increase **INVALID PENSION.**

Claimant, Charles Howard Ct, 0814 30
 P. O., Blumore,
 County, Cutman, Ohio,
 State, Ohio,
 Rank, Captain,
 Company, 1st L.
 Regiment, 1 Ohio Vol. Fy. Arty.

Rate, \$ _____ per month, commencing _____

Disabled by _____

RECOGNIZED ATTORNEY:

Name, Carroll Ward, Ohio, Fee \$ 2, Agent to pay.
 P. O., Becker, Ohio, Articles filed _____, 189 _____

APPROVALS:

Submitted for a decl. Nov. 22, 1898 Newman, Examiner.
 Approved for left inguinal hernia (complete) plate. 16.00 Feb. 19, 1896,
thereafter for double inguinal hernia
and disease of rectum \$10.00 and
for the disability affecting rate.
Cyrene.
Dec. 1, 1898, July, 1898, Medical Referee.

Enlisted June 13, 1863 Honorably discharged July 25, 1865 Last paid
 to at \$ 6, for left inguinal hernia (complete)
Pensioned at \$8 July 17, 1890 Dec. 5 \$10 Dec. 4, 1891
Reduced to \$6 March 4, 1895 Pension under other laws at \$ _____, for

Original declaration, act June 27, 1890, filed July 17, 1890; alleged rupture of left
side Sept. 18, 1891, alleged same. Disability increasing
with age.

PRESENT CLAIM, ACT OF JUNE 27, 1890.
 Declaration filed Jan'y. 14, 1896, alleges
hernia of right side Supplemental Declaration filed
June 30, 1897 alleges Hernia. Increase of rectum and
umbago Aprils.

INVALID PENSION.

Widow *Enigma* ^{to come} *to come*
Pensioner *Enigma*
Claimant, *Charles Bernard*, Regt. 581430

P. O., *Belmore*, Rank, *Sergeant*
County, *Culman*, Ohio, Company, *"E"*
State, _____ Regiment, *Ohio 7th Infantry*

Rate, \$ *8* per month, commencing *February 19th 1896*
stopped *and* *payments*
in lieu of certificate dated May 9th 1895

Disabled by *irreversible inguinal hernia (complete)*

RECOGNIZED ATTORNEY:

Name, *Edward Ward*, Fee \$ *2*, Agent to pay.
P. O., *Recher, Ohio*, Articles filed _____, 189__

APPROVALS:

Submitted for *advice*, *Dec. 19*, 189__
Approved for *high inguinal hernia*, (*complete*)
(old) *Hernia of right side (new) Aligned*
January 14, 1896
Diagnosed by *rectum Huntery, (also new)*
aligned June 30, 1897.
Diagnosed by *same*
Dec. 30, 1898, Allyn, Legal Reviewer.
revised
Jan'y 6 - 1899, Medical Referee.

Enlisted *June 3*, 180__ *3* Honorably discharged *July 25*, 186__ *5* Last paid
Discharged at *\$ 8* July 19, 1890; *Dec. 10* *\$ 10* Dec. 4, 1891
to *\$ 6* March 4, 1895 Pension under other laws at \$ _____, for

Original declaration, act June 27, 1890, filed *July 17*, 189__*1*; alleged *rupture of left*
side Sept. 18, 1891 Alleged *same* *dearthly* *business*
ing with age

PRESENT CLAIM, ACT OF JUNE 27, 1890.

Declaration filed *Jan'y. 14*, 189__*6*, alleges *hernia* *and* *and*
hernia of right side *Supplemental Declaration*
filed June 18, 1897 alleged *left* *hernia*, *Diagnosed*
by *Allyn and Huntery* *Wills*

John H. Morrison

ACT JUNE 27, 1890.

INVALID PENSION.

Claimant, Charles Howard,
 Rank Corporal,
 P. O. R. F. D. #23, McComb,
 Company D
 County Hancock,
 Regiment 1. Ohio Vol. H. A.
 State Ohio.
 Rate \$ 10 per month, commencing December 20 1905

Pensioned for Paralysis - inability to earn a support by manual labor

RECOGNIZED ATTORNEY.

Name C. A. Stockton,
 P. O. Findlays, Ohio.
 Fee, \$ 2
 Agent to pay.

APPROVALS

Submitted for Exam. 22, 1906 W. W. Johnson, Examiner.

Approved for Double inguinal hernia
(complete) (Old)
Lumbago, piles, cystitis
of feet and bladder. (New)
alleged Nov 13 1905

Approved for double inguinal hernia
dissect of feet and return
and mild debility

Aggregate of disabilities shown, permanent in character: \$ 10.00
from December 20, 1905.

June 23, 1906, R. M. Matthews
WESTERN, Legal Reviewer.
 190

Taylor, Juske
Jan'y 24, 1906
Medical Examiner.
Medical Referee.

Enlisted June 2, 1862; honorably discharged Jan'y 25, 1865.
 Enlisted _____; honorably discharged _____, 186____.

Pensioned at \$ 8.50 per month. Last paid to
double ing. hernia (complete)

PRESENT CLAIM, ACT OF JUNE 27, 1890.
 Declaration filed Nov 13, 1905, alleges ~~ANOTHER PENSION & COURT'S JURISDICTION~~
feet, piles, etc. of bladder!

Declaration for Pension

Under the Act of February 6, 1907

State of Ohio, County of Hamilton, ss:

On this 14th day of February, A. D. one thousand nine hundred and

twelve, personally appeared before me Frank R. Wright

a Notary Public within and for the County and State aforesaid

Charles Howard a resident of the Township

of Hamilton County of Hamilton

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

the identical Charles Howard who was ENROLLED on the 3rd

day of June, 1863, in Company in Co. E 101st Ohio

(Here state rank in company and regiment in Military service, or vessel, if in Navy.)

Army in the service of the

United States in the Civil War, and served at least 90 days, and was HONOR-

(Civil or Mexican) (90 days if Civil War; 60 days if Mexican)

ABLY DISCHARGED at Cincinnati Ohio, on the 25th day of July, 1865.

That he has never been employed in the military or naval service otherwise than as stated

above never

(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 68 years of age, having been born on the 2nd day of October 1838.

and asks for a pension of \$ 12 per month [62 years of age, \$12; 70 years, \$15; 75 years or over, \$20].

That he has never applied for pension under application No. 581,430. That he

is a pensioner under Certificate No. 581,430. (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 February 6, 1907.

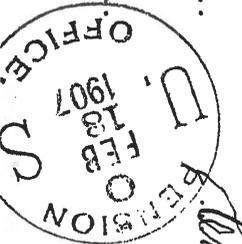
He hereby appoints, with full power of substitution and revocation,

his true and lawful attorney to prosecute this claim. That his POST-OFFICE ADDRESS is McGook, RR. 23,

County of Hamilton, State of Ohio

1. Geo. W. Muter Charles F. Howard
(Claimant's signature—FULL name).

2. W. B. Smith
(Two witnesses who write sign here)



ACT OF MAY 11, 1912.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Ohio, County of Nauvoo, ss:
 On this 21 day of May, A. D. one thousand nine hundred and Twelve, personally
 appeared before me, a Notary Public within and for the county and State aforesaid,
Charles Howard who, being duly sworn according to law, declares that he is 73 ^{years}
 years of age, and a resident of McLough county of Nauvoo
 State of Ohio; and that he is the identical person who was ENROLLED at McLough,
Nauvoo Co. Ohio under the name of Charles Howard
 on the 8th day of June 1863 as a sergeant in Co. C. 1st
Regt. Heavy Artillery Ohio
 (Here state rank, and company and regiment in the army, or vessels if in the Navy.)
 in the service of the United States, in the Civil war, and was HONORABLY DISCHARGED
 at Amoyville Penn on the 25 day of July, 1865
 That he also served in no other service
 (Here give a complete statement of all other services, if any.)

That he was not employed in the military or naval service of the United States otherwise than as stated above. That his personal
 description at enlistment was as follows: Height, 5 feet 11 inches; complexion, Fair; color of
 eyes, Blue; color of hair, Dark; that his occupation was Farmer; that he
 was born Oct 21st, 1838, at Cleveland Ohio

That his several places of residence since leaving the service have been as follows: has always lived
in Ohio
 (State date of each change, as nearly as possible.)

That he is a pensioner under certificate No. 581430 That he has not applied for pension under original
 No. Paid at Columbus Agency on 11/15/12 for No.
 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 May 11, 1912

That his post-office address is P. O. No. 23, Mr Couch county of Nauvoo
 State of Ohio
 Attest: (1) J. Bellinger Charles Howard
 (2) M. Holstein (Claimant's signature in full.)

Subscribed and sworn to before me this 21 day of May, A. D. 1912
 certify that the contents of the above declaration were fully made known and explained to the
 applicant before swearing including the words
swear and I have interest
 and that I have interest, direct or indirect, in the prosecution of this claim.
 [L. S.] Notary Public
 (Signature)
 (Official character.)

Accepted
 Notary Public
 Division



IF A PENSIONER DO NOT FAIL TO GIVE CERTIFICATE NUMBER

374

Act June 27, 1890,

3-402.

Certificate No. 581430 Department of the Interior,
Name, Charles Edward Board BUREAU OF PENSIONS,

Washington, D. C., January 15, 1898.

SIR:

In forwarding to the pension agent the executed voucher for your next quarterly payment please favor me by returning this circular to him with replies to the questions enumerated below.

Very respectfully,

R. G. Rice,

U. S. Pension Agent,

Columbus, Ohio.

Henry Board

Commissioner.

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer. Yes; Elizabeth Howard, Elizabeth Rogers.

Second. When, where, and by whom were you married? By Charles Percy, sig

Answer. 18 59 March 30, County of Township Hancock Co

Third. What record of marriage exists?

Answer. Probate Judge Office Hancock Co, O.

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer. No.

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer. One Henry Howard Born 1861 Aug 1st

Date of reply, June 4, 1898

Charles Howard

0-3

DEPARTMENT OF THE INTERIOR

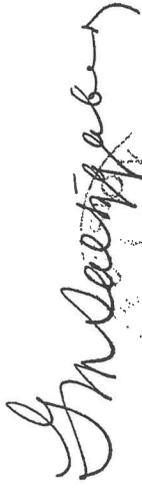
BUREAU OF PENSIONS

WASHINGTON, D. C., January 2, 1915.

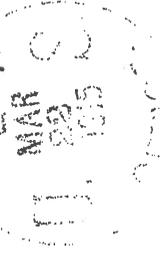
SIR: Please answer, at your earliest convenience, the questions enumerated below. The information is requested for future use, and it may be of great value to your widow or children. Use the inclosed envelope, which requires no stamp.

Very respectfully,

CHARLES HOWARD,

MC'CUMB, O.
ACT MAY581430
R. 23


Commissioner.

FOLD
HERE.

- No. 1. Date and place of birth? *Answer.* Born Oct 21st 1838 Cleveland Ohio
- The name of organizations in which you served? *Answer.* 1st Ohio Heavy Artillery,
- No. 2. What was your post office at enlistment? *Answer.* Bullmore Putnam Co. N. York
- No. 3. State your wife's full name and her maiden name. *Answer.* Elizabeth Howard, Maiden name
- No. 4. When, where, and by whom were you married? *Answer.* Married in Mass. 24th 1857,
Married in Pleasant Pl. Hancock Co. by Chas Purdy, Justice
- No. 5. Is there any official or church record of your marriage?
If so, where? *Answer.* May 18 in Lindley O.
- No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her death or divorce. If there was more than one previous marriage, let your answer include all former wives. *Answer.* No.

FOLD
HERE.

- No. 7. If your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any military or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. *Answer.* None of that

- No. 8. Are you now living with your wife, or has there been a separation? *Answer.* Yes

- No. 9. State the names and dates of birth of all your children, living or dead. *Answer.*

Lucy A. Howard, Aug 4th 1861

FOLD
HERE.Date March 19th 1915

(Signature) Charles X Howard
his

G. P. 272