DECLARATION OF RECRUIT.

I, William J. Carson desiring to ENLIST in the Army of the United States, for the term of ~~FIVE~~ Three YEARS, Do declare, That I am Twenty One years and months of age; that I have neither wife nor child; 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 ~~five~~ Three years.

GIVEN at Bellefontaine Ohio

The 2d day of September 1861 William J Carson

Witness:

W. F. Johnston

No. 21

William J. Carson

Enlisted at Bellefontaine, Ohio

September 2d 1861

By S. H. Young Capt

1st Regiment of Infantry

_____ enlistment; last served in Company ( )

Reg't of _____.

Discharged _____ 18 .

619

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 enlisting as a SOLDIER in the ARMY OF THE UNITED STATES for the period of FIVE YEARS.

GIVEN at

The day of

Witness:

A.G.O. Residence — North Greenfield, Logan Co., Ohio.
Vide a.g.201.(ORD)

Gov. Print. Off. May, 1861.

STATE OF Ohio TOWN OF Bellefontaine

I, William J. Carson born in Washington, Co
in the State of Pennsylvania aged Twenty One years,
and by occupation a Farmer Do HEREBY ACKNOWLEDGE to have
voluntarily enlisted this Second day of September
18 61, as a **Soldier** in the Army of the United States of America, for the
Three period of ~~Three~~ *FIVE YEARS*, unless sooner discharged by proper authority: Do also Three
agree to accept such bounty, pay, rations, and clothing, as are, or may be, established by law. And I, William J Carson do solemnly swear, that I will bear true faith and allegiance to the ***United States of America***, and that I will serve them honestly and faithfully against all their enemies or opposers whomsoever; and that I will observe and obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the Rules and Articles of War.

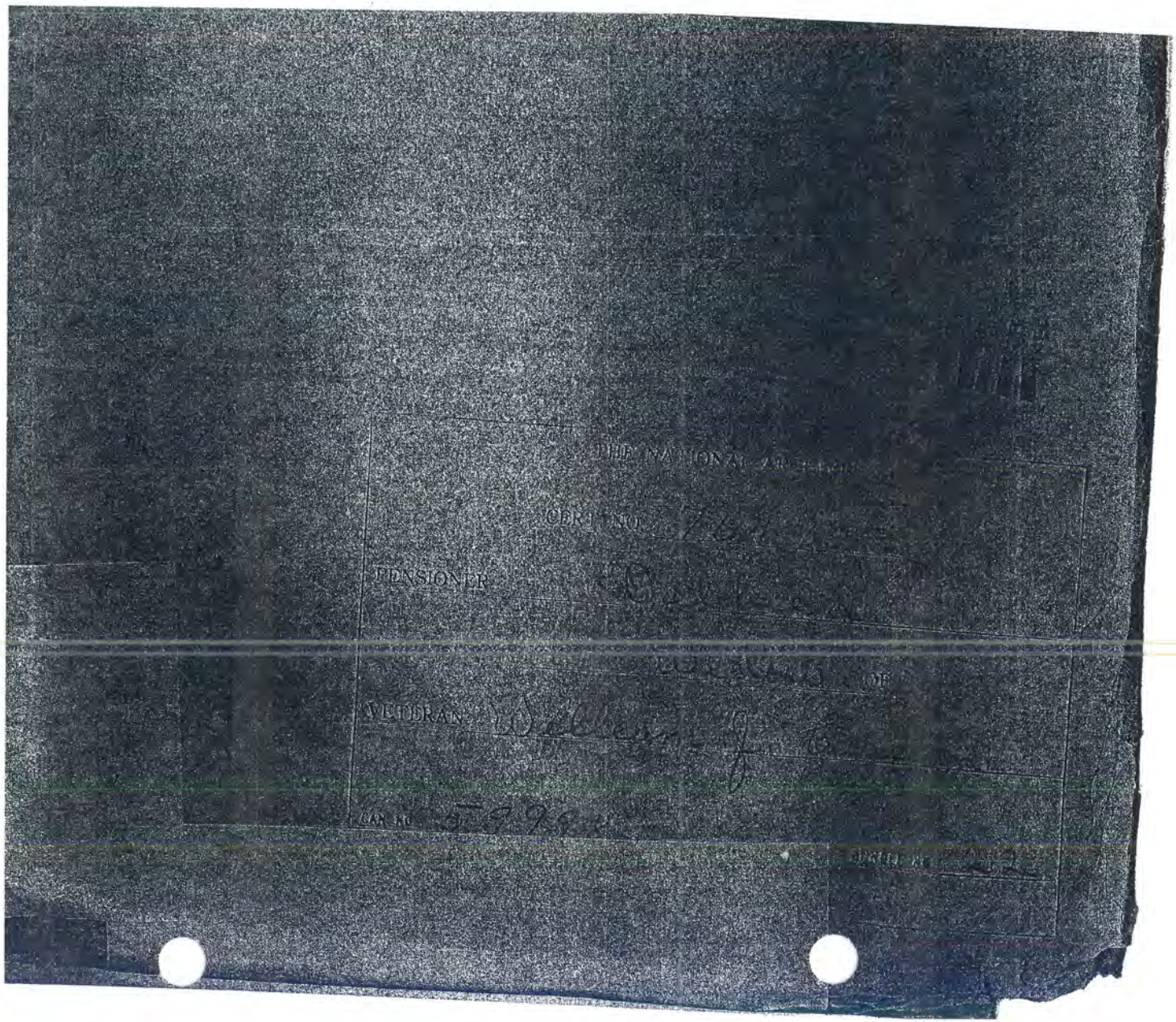
Sworn and subscribed to, at Bellefontaine Ohio
this Second day of September 18 61, } William J Carson
BEFORE A. F. Johnston J.P.

I CERTIFY, ON HONOR, That I have carefully examined the above named Recruit, agreeably to the General Regulations of the Army, and that in my opinion he is free from all bodily defects and mental infirmity, which would, in any way, disqualify him from performing the duties of a soldier.

J. H. Young
Capt. 15th Infy
~~EXAMINING SURGEON~~ Mustering Officer

I CERTIFY, ON HONOR, That I have minutely inspected the Recruit, William J. Carson previously to his enlistment, and that he was entirely sober when enlisted; that, to the best of my judgment and belief, he is of lawful age; and that, in accepting him as duly qualified to perform the duties of an able-bodied soldier, I have strictly observed the Regulations which govern the recruiting service. This soldier has Grey *eyes*, Brown *hair*, Fair *complexion*, is Five *feet* 5½ *inches* high.

J. H. Young
Capt. 15th Infy
RECRUITING OFFICER.



JB

3—173.

C No. 87995

Name, William J. Carson

Co. E, 1 Bak 15 Reg't U S Inf

Chief A & N Division:

Medical examination has been ordered by me in this case to-day. Please see indorsement on jacket.

SAM HOUSTON,
Medical Referee.

MAY 13 1908, 190

6—806

3–014.

ACT OF FEBRUARY 6, 1907.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Indiana } ss.
County of Delaware }

On this 5 day of November, A. D. one thousand nine hundred and Ten, personally appeared before me, a Clerk of the Circuit Court within and for the county and State aforesaid, William J. Carson, who, being duly sworn according to law, declares that he is 70 years of age, and a resident of Muncie county of Delaware, State of Indiana; and that he is the identical person who was ENROLLED at Bellfontaine Ohio under the name of William J Carson, on the 2nd day of September, 1861 as a Private, in 1st Battalion Co E 15th U.S. Infantry
(Here state rank, and company and regiment in the Army, or vessels in the Navy.)

in the service of the United States, in the Civil War war, and was HONORABLY DISCHARGED
(State name of war, Civil or Mexican.)
at Ft Adams R. I., on the 2nd day of September, 1864
That he also served
(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 5 1/2 inches; complexion, Fair; color of eyes, Grey; color of hair, Brown; that his occupation was Farmer; that he was born August 30th, 1840, at Washington Co Pennsylvania

That his several places of residence since leaving the service have been as follows: up to Oct 1872 De Graff Logan Co Ohio since then in Muncie Delaware Co. Indiana
(State date of each change, as nearly as possible.)

That he is Now a pensioner. That he has heretofore applied for pension
Certificate #877995
(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.

That his post-office address is Muncie, county of Delaware, State of Indiana

William J. Carson
(Claimant's signature in full.)

Attest: (1) John W Mansfield
(2) Enoch Swanson

Also personally appeared Benjamin C Bowman, residing in Muncie, Indiana and William G. White, residing in Muncie Indiana persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw William J. Carson, the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of the claimant and their acquaintance with him of 20 years and 20 years, respectively, that he is the identical person he represents himself to be, and that they have no interest in the prosecution of this claim.

Benjamin C. Bowman
William G White
(Signatures of witnesses.)

SUBSCRIBED and sworn to before me this 5th day of November, A. D. 190..., and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant and witnesses before swearing, including the words ..., erased, and the words ..., added; and that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

J. Keller
(Signature.)
Clerk Delaware Circuit Court
(Official character.)

8—803

3—402.

Certificate No. 67995

Name William J. Carson

Department of the Interior,

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,

William Leighty Carson
U. S. Pension Agent,
Indianapolis, Indiana.

H. Clay Evans
Commissioner.

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

Answer. Yes. Deborah J. Carson - Maiden name Conn.

Second. When, where, and by whom were you married?

Answer. March 27, 1866. Muncie, Ind. Rev. Burt, M. E. Church.

Third. What record of marriage exists?

Answer. Marriage records of Delaware Co. Ind. - Certificate in my possession.

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

Clarence Henry Carson, March 2, 1867.

Date of reply, May 9, 1898

William J. Carson
(Signature.)

0-8

5301b750m1-98

WIDOW'S DECLARATION FOR PENSION.

ACT OF April 19, 1908

State of Indiana, County of Delaware, ss:

On this 16 day of December, 1913, personally appeared before me, a Clerk Circuit Court, within and for said County and State, Debbie J. Carson, aged 65 7/12 years, a resident of Indianapolis, County of Marion, State of Indiana, who being sworn according to law declares that she is the widow of William J. Carson who enlisted under the name of William J. Carson at Bellefontaine Ohio, on the 2 day of Sept. 1861 in Private Co. E-15 Reg. U.S. Inf., and served at least ninety days in the war of the Rebellion who was honorably discharged Sept. 2, 1864 and who died at Indianapolis Ind. Nov. 13, 1913

That she was married under the name of Debbie J. Conn to said William J. Carson on the 27 day of March, 1866 by J. B. Burt M. Gos, at Muncie Ind.

here being no legal barrier to said marriage. That she had not been previously married. or otherwise married

That the soldier had not been previously married. or otherwise married

That she has not remarried since soldier's death. or otherwise remarried

That the following are the names and dates of birth of all the children of the soldier now living under sixteen years of age: no children under 16 years of age

	Born		Born
	Born		Born

That she has not heretofore applied for a pension

That the soldier was a pensioner by Certificate No. 87,995

That she makes this declaration for the purpose of being placed on the Pension Roll of the United States under the provision of Act of April 19, 1908

That she hereby appoints EARL PATTERSON, of Muncie, in the State of Indiana, her true and lawful Attorney, with power of substitution, to prosecute her claim. That her Post Office address is #3002 Park Ave. Indianapolis Ind.

Debbie J Carson

ATTORNEY FILED

LAW DIVISION,

Attest:

RECEIVED, U. S. DEC 18 1913 OFFICE

AN ACT

GRANTING PENSIONS TO CERTAIN ENLISTED MEN, SOLDIERS, AND OFFICERS WHO SERVED IN THE CIVIL WAR AND THE WAR WITH MEXICO.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled:

That any person who served ninety days or more in the military or naval service of the United States during the late civil war, or sixty days in the war with Mexico, and who has been honorably discharged therefrom, and who has reached the age of sixty-two years or over, shall, upon making proof of such facts according to such rules and regulations as the Secretary of the Interior may provide, be placed upon the pension roll, and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years, twelve dollars per month; seventy years, fifteen dollars per month; seventy-five years or over, twenty dollars per month; and such pension shall commence from the date of the filing of the application in the Bureau of Pensions after the passage and approval of this Act: *Provided*, that pensioners who are sixty-two years of age or over, and who are now receiving pensions under existing laws, or whose claims are pending in the Bureau of Pensions, may, by application to the Commissioner of Pensions, in such form as he may prescribe, receive the benefits of this Act; and nothing herein contained shall prevent any pensioner or person entitled to a pension from prosecuting his claim and receiving a pension under any other general or special act: *Provided*, that no person shall receive a pension under any other law at the same time or for the same period that he is receiving a pension under the provisions of this Act: *Provided, further*, that no person who is now receiving or shall hereafter receive a greater pension under any other general or special law than he would be entitled to receive under the provisions herein shall be pensionable under this Act.

Sec. 2. That rank in the service shall not be considered in applications filed hereunder.

Sec. 3. That no pension attorney, claim agent, or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under this Act.

APPROVED: *February 6, 1907.*

W.O. 1,019,203

3—1081

Indianapolis

PENSIONER DROPPED

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

OFFICE OF THE DISBURSING CLERK

JAN 3 1914, 191

Certificate No. 87995

Class ACT OF [illegible] 1912

Pensioner

Soldier William J. Carson

Service E & C. 45 U.S. Inf

The Commissioner of Pensions.

SIR: I have the honor to report that the above-named pensioner who was last paid at $ 25, to 4 Nov, 1913 has this day been dropped from the roll because of Death

Dec. 13-1913,

Culver, Ind

PLATE DESTROYED

Very respectfully,

[signature]

Disbursing Clerk.

Chief, Finance Division.

NOTE.—Every name dropped to be thus reported at once, and when cause of dropping is death, state date of death when known.

6—2249

M. H.

3-1638.

INCREASE

Cert. No. 87,995

Wm J. Carson

P. O.,

County,

State,

Application filed May 2, 1908

Service, E 15 U.S. Inf.

MAY 1 3 1908 [redacted] Plymouth, Ind.

Atty Patterson, Mich.

J.B.

Attorney, A. I. Patterson

P. O., Muncie

County, , State, Ind.

Adjutant General's Office,

Washington, D. C.,

May 10, 1867.

Sir:

I have the honor to acknowledge the receipt from your Office of application for Pension No. 58,199, and to return it herewith, with such information as is furnished by the files of this Office:

It appears from the records of this Office that William J. Carson was enlisted ~~at~~ 2d September 1861 for the period of 3 years. On the Muster Roll of Co. E 1st Batt 15th Regiment of U.S. Infantry for the months of January & February, 1863, he is reported "Private, absent sick at Parole Camp Annapolis Md." Roll of Co "C" of that Regt (to which he was transferred) for Sept & Oct 1864 reports him "Discharged at Fort Adams R.I. Sept 1-1864, by reason of Expiration of term of service," Nature of disease not stated. I am, sir, very respectfully,

Your obedient servant,

Chas. J. Brock

Assistant Adjutant General.

(92)

The Commissioner of Pensions,

Washington, D. C.

Memoranda:

~~Name of Applicant~~ .....

~~Address~~ .....

T.W.S.

Also personally appeared Clara E. Warner residing at Chicago Ill, and Florence Buchanan residing at Muncie Ind, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were present and saw Debbie J. Carson the claimant, sign her name (or make her mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and acquaintance with her of 50 years and 43 years respectively, that she is the identical person she represents herself to be; and that they have no interest in the prosecution of this claim.

Clara E. Warner.
Florence Buchanan
Signatures of Witnesses.

Subscribed and sworn to before me, this 16 day of Dec., 1913, and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to applicant and witnesses before swearing, including the words — erased, and the words Declaration and power of attorney valid as to execution. Wallace Streater Chief, Law Division. added; and that I have no interest, directly or indirectly, in the prosecution of this claim.

John W. Mansfield
Signature
Clerk Circuit Court
Official Character

[L. S.] Healy

O. & Fugc

No. 87.995

No WIDOW'S CLAIM.

CLAIMANT.

Debbie J. Carson

Soldier William J. Carson

Service Pri. Co. E. 15 Reg. U. S. Inf. & 15 U.S. Inf.

Address 3002 Park Ave. Indianapolis Ind

FILED BY
J. EARL PATTERSON,
ATTORNEY,
MUNCIE, - INDIANA.

Date of Execution Dec. 16, 1913.

Act of April 19, 1908

Hines

RECORD DEC 19 1913 DIVISION

DIVISION DEC 19 1913

Debbie J. Carson, wife of
William J. Carson
E-15 U. S. Inf.
Died Orig. 1019, 203

Filed By
J. Earl Patterson
Muncie Ind

OFFICE

Board of Health and Charities

CITY HALL

Indianapolis, Dec. 29 1913.

CERTIFIED COPY OF CERTIFICATE OF DEATH

Full Name William J. Carson

Sex Male Color White

Date of Birth August 30, 1840

Age 73 Years 3 Months 13 Days

Single, Married, Widowed or Divorced Married

Name of Husband or Wife Deborah Carson

Birthplace Pennsylvania

Name of Father Henry Carson

Birthplace of Father America

Maiden Name of Mother Mary McCall

Birthplace of Mother Unknown

Occupation Retired

Usual Residence 3002 Park Ave.

Date of Death December 13, 1913

Cause of Death Diabetes

Duration 2 Years

Contributory —

Duration —

Place of Death At Residence

Signed C. H. Mayfield M. D.

Address City

Place of Burial Muncie, Indiana

Undertaker B. S. Todd Co.

I hereby certify that the foregoing is a true copy of the Mortality Records in our office of the death of

William J. Carson

W. F. Morgan M. D.
Secretary Board of Health and Charities.

Opal J. Jousey Clerk

38

Debbie J. Carson
widow of
William J. Carson
Private Co. E. 15 Reg. U. S.
Inf.
Act April 19, 1908

Filed by
J. Earl Patterson
atty. for Claimant
Mitchell Ind

HOOSIER PRINTING CO., MUNCIE, IND.

William J. Carson TO Debbie J. Conn

Be it Remembered, *That ~~heretofore, to-wit~~: on this* 24th *day of* March 1866 ~~A. D. 191~~, *the following Marriage License was issued, to-wit:*

Indiana, to-wit: Delaware County, ss:

To All Who Shall See These Presents, Greeting:

Know Ye, *That any person* empowered *by law to solemnize* marriages *is hereby* authorized *to join together as Husband and Wife,* William J. Carson *and* Debbie J. Conn *and for so doing, this shall be his sufficient authority.*

In Testimony Whereof, I, Geo. W. Spilker *Clerk of the Delaware Circuit Court, hereunto subscribe my name and affix the Seal of said Court, at Muncie, ~~Indiana~~, this* 24th *day of* March 1866, ~~191~~

25

~~(SEAL)~~

Geo. W. Spilker, Clerk.

Be it Further Remembered, *That ~~afterwards, to-wit~~: on this* 17th *day of* May 1866 ~~191~~, *the following Certificate ~~of Marriage~~ was filed in my office, to-wit:*

Indiana, to-wit: Delaware County, ~~ss:~~

This Certifies, *That I joined in Marriage, as Husband and Wife,* William J. Carson *and* Debbie J. Conn *on the* 27" *day of* March 1866 ~~191~~

J. B. Burt M. Gos

State of Indiana, Delaware County, ss:

I, JOHN W. MANSFIELD, Clerk of the Circuit Court, within and for the County of Delaware, and State of Indiana, do hereby certify the foregoing to be true and correct copies of the Marriage License and Certificate of the marriage of William J. Carson *to* Debbie J. Conn *as the same now appears upon the Marriage Record now on file in my office.*

In Witness Whereof, *I have hereunto subscribed my name and affixed the seal of said Court, at Muncie, Indiana, on this* 16" *day of* December 1913

John W. Mansfield
Clerk Delaware Circuit Court, Indiana.

PENSION H DEC 18 1913 U. S. OFFICE

3–173.

O. W. & A. Div. ~~J. H. C.~~ Ex'r.

Inv. Ex. No. 87995,

William J. Carson,

Co. E, 15th Reg't U. S. Inf. (1st Batt'l).

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Oct. 18th, 1897.

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. William J. Carson,
Muncie, Delaware Co.
Ind.

Commissioner.

RECEIVED. OCT 25 1897

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

Answer: Yes. Deborah J. Carson. Deborah J. Conn.

No. 2. When, where, and by whom were you married? Answer: March 27, 1866. Muncie, Indiana. — Rev J. B. Bert. M. E. Church.

No. 3. What record of marriage exists? Answer: Marriage records of Delaware Co., Ind. and certificate in my possession signed by Rev. Bert and Geo. W. Spilker, Clerk of Court.

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: One.

Clarence Henry Carson March 2, 1867.

PENSION E OCT 25 1897 U. S. OFFICE.

Date of reply, October 23, 1897.

William J. Carson.
(Signature)

0-2

8-732

No. 769753

Act of April 19, 1908.

Debbie J.
widow of
William J. Carson

Rank Pvt

Company E + L

Regiment 1 Battn. 15 U.S. Inf

Rate per Month $ 12

Commencing Dec 18 1913

Ending INCREASED TO $40 PER MONTH FROM JUNE 4, 1928 - ACT MAY 23, 1928

Group 2 Agency

Issued Jany 29 1914, 190 .

~~Mailed~~ , 190 .

Fee, $

(3-230.)

Duplicate Jacket

VALID. (Series) 1102

Cert. No. 87995

Name, William J. Carson

Rank, Pvt ; Service, Co E 15 U.S. Inf

Original Roll: Indianapolis

Agency: Transf'd , 18 , to

" , 18 , to

Issued Dec 24 , 1889

Mailed , 18

Rate and Period, $ 2.00 from Sept 2 , 1889

Deductions:

Disability: Chro diarrhoea

Issued Nov 10 , 1889

Mailed " 14 , 1889

Rate and Period, $ 6 from Sept 26 , 1889

Deductions:

Disability: Chr diarrhoea

Issued Dec 18 , 1889

Mailed " 26 , 1889

Rate and Period, $ 10 , from Aug 28 , 1889

Deductions:

Disability: Chro diarr. & recurl. disease of stomach & rectum

Issued , 18

Mailed , 18

Rate and Period, $, from , 18

INDORSEMENTS.

[illegible] P.O. [illegible] Dir. [illegible] Welt & John T. [illegible] [illegible] certified [illegible]

[illegible] U.S. Court not [illegible] cause of [illegible] [illegible] under gen'l [illegible] a L.

[illegible] 13875—3 M.]

(3—230.)

INVALID. (Series

Cert. No. 97 995

Name, William J. [illegible]

Rank, Pvt. Service, Co. [illegible]

Agency: Original Roll: Indianapolis

Transf'd ..., 18 ... to

" ..., 18 ... to

Issued: July 6 [illegible]

Mailed: " [illegible]

Rate and Period, $ 12 from [illegible]

Deductions:

Disability: [illegible]

Issued:

Mailed:

Rate and Period, $ [illegible] from

Deductions: over

Disability:

Issue Class: [illegible]

Fee $ [illegible]

[illegible] ..., 18

[illegible] ..., 18

[illegible] from ..., 18

ENDORSEMENTS

[illegible] Atty [illegible]

[illegible] Atty

[illegible] as a

[illegible] July 6 [illegible]

(EXAMINING SURGEON'S VOUCHER.)

3–340.
(Old No. 3–100.)

TO THE EXAMINING SURGEON.

The claimant named on the outside of this circular has been directed to report himself to you for examination within three months of the date hereof, when the validity of the order will cease.

Should he present himself, please examine him and make your report to this Bureau at once, in accordance with the instructions of the pamphlet already transmitted to you.

---

(1) Orders for examination are issued in duplicate, one to the claimant and one to the examining surgeon, or board of examining surgeons. These orders should be carefully compared before an examination is made, as certificates of examination made upon orders issued to other boards or surgeons will not be accepted or paid for, except in cases in which this Bureau may direct such action by special instructions.

Any order received by a surgeon which is intended for another, should be immediately remailed to this Bureau in a separate envelope, together with the envelope in which it was received.

(2) If the order to the surgeon fails to reach him, and the applicant presents himself with *his* order, the examination should be made; or, if the claimant presents himself without an order, and the surgeon has one in his possession authorizing the examination, it should be made.

(3) Orders for examination received by the surgeons should be carefully filed, and at the expiration of three months from their respective dates, if the claimants have not reported, they must be returned and each order of this character must be indorsed "*Claimant* failed to appear within the specified time."

Whenever a claimant shall have been ordered before a board of examining surgeons, and shall appear for examination, all the members of said board shall participate in said examination; nor will any certificate be accepted from such board which fails to show that all the members of the board participated therein, save only and except that in case the claimant, on appearing, shall find a less number of surgeons than the full board, the examination may proceed with the consent of the claimant expressed in writing on the certificate reciting such fact, and agreeing nevertheless that the examination shall proceed; and in that case such claimant shall be held to have waived the privilege of the statute relative to examination by a full board. (See forms on back of Medical Certificate.)

This Circular **must be returned to this Bureau with your certificate of examination,** accompanied by your daily account, or in the event of the person named in it failing to report within the specified time, return it indorsed as required by paragraph 3 of the instructions quoted above.

Army Div.
Invd Co. No. 87995
William G. Carson
Co E 15 U.S. Inf.

THE ABOVE TITLE SHOULD BE INDORSED ON EVERY PAPER RELATING TO THIS CLAIM.

3—1852. E.D.L. Ex'r.

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C. April 13, 1903

Sir:

In the above noted claim for increase of pension you are advised that the claimant should state under oath whether he was in the military or naval service of the United States prior to September 2, 1861, or subsequent to September 1, 1864, and, if so, he should state the name and number of each company and regiment to which he belonged, or the names of all vessels on which he served, if in the navy, together with the dates of enlistment and discharge.

Very respectfully
E. F. Ware
Commissioner

Mr. R. J. Patterson
Muncie
Ind.

PENSION OFFICE U. S. MAY 11 1903

A.C

3—173.

No. 87-995

Name, William J. Carson

Co. B, 15 Reg't. N.S. Inf.

Chief Army Division:

Medical examination has been ordered by me in this case to-day. Please see indorsement on jacket.

SAM HOUSTON,
Medical Referee.

MAR 23 1907
, 190

0-12

ARMY DIV.

3—340
(Old No. 3—100.) L.D.L.

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C. Apl. 13 1903

Dr. L. W. Smith, *Secretary,*

Muncie

Co. Delaware Ind.
(State.)

Sir:

Mr. William J. Larson

P. O. Muncie

Co. Delaware Ind.
(State.)

late a Priv.

Co. E 15th *Regiment* U.S. Inf-
(State.)

an applicant for ~~but~~ Inc.

Invalid Pension No. 87995

has been directed to report himself to you for examination on account of disability from chronic diarrhoea and resulting disease of stomach and rectum claims constipation as a result.

(over)

PENSION OFFICE. U. S. MAY 28 1903

Are there any other disabilities?

Are there evidences of vicious habits?

Very respectfully,

E. F. WARE,
Commissioner.

0-4 8-2

Act of Feb. 6, 1907 3-730.

INVALID

Cert. No. 87995

Name, William J. Carson

Rank, Pvt ; Service, Co. "E" 1" Battln 15 Regt, and Co. "C" 1" Battln 15 Regt U S Inf

Agency: Original Roll: Indpls

Transf'd ..... , 1 , to .....

" ..... , 1 , to .....

Issued Nov. 18 1910

Mailed NOV 19 1910

Rate and period, $ 15 , from Nov 7, 1910

DEAD

Deductions:

Disability:

Issue. Class Pers. Entered 6 Fee, $ U 222

Issued Oct. 14 1912

Mailed OCT 15 1912

Rate and Period, $ 25 , from May 22 1912

Deductions: 0

ACT OF MAY 11, 191

Issue. Class Pres. Entered U 246 Fee, $

Issued

Mailed

Rate and period, $ ..... , from .....

Deductions:

Disability:

Issue. Class Entered Fee, $

Issued

Mailed

Rate and Period, $ ..... , from .....

Deductions:

Disability:

Issue. Class Entered Fee, $

INDORSEMENTS.

Sec'd cf 769753

DROPPY

JAN 3 1914

Dead

W.O. 1019203

Accrued Pension,
ACT OF MARCH 2, 1895.
Accrued-Pension Order
Issued Jan 29 1914
Payable to Widow
Sent
to Finance Division.

ARMY & NAVY DIVISION

I.Ctf. 87,995,
William J. Carson,
E, 1 Battln. 15 U.S.Inf.

Nov. 2, 1910.

Mr. William J. Carson,

325 W. Charles St.,

Muncie, Ind.

Sir:

In response to your letter of Oct. 21, 1910, received Oct. 22, you are advised that the blank form of application sent herewith may be used in preparing a claim for pension under the Act of February 6, 1907, in your above cited case.

Very respectfully,

Commissioner.

3-852

Culbertson Ex'r. DEPENDENT.

C & E 6/15 No. 1019203

Act of Act of April 19, 1908

Notified Jan 2, 1914

A. & N. S. mw.

Debbie J. Carson
3002 Park Ave
Indianapolis Ind
Wid
William J. Carson

Service E & C 15 U S Inf

Died Dec 13, 1913 - Indianapolis - Ind

No other claim. than
I Ctf. 87,995 of age

Dec 30, 1913. H.M.G.
Clerk.

Application filed: Dec 18, 1913

Attorney: J. Earl Patterson

P. O. Muncie
Ind

Attorney Filed.

Cert. of Dis. Searched for ____, 19
D.W.

FILES
JAN 2 1914
RECEIVED

☞ (This certificate to be filled in and signed by the secretary when full board is present.)

"I hereby certify that Dr. F. G. Jackson, Dr. J. R. McKinney, and Dr. C. W. Smith, were personally present and actually participated in the examination of Wm J Carson, the claimant in this case, on 3d day of November, 1897."

(Signature.) C. W. Smith

(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 ....., 18 ."

(Signature.)

U. S. W. & N. OFFICE. NOV 10 1897 18 1897

SURGEON'S CERTIFICATE

IN CASE OF William J Carson

Co. E, 15th Reg't U. S. Inf.

Applicant for Increase

No. 87995

DATE OF EXAMINATION: November 3, 1897.

F. G. Jackson, Pres., } BOARD.
J. R. McKinney, Sec'y, } BOARD.
C. W. Smith, Treas., } BOARD.

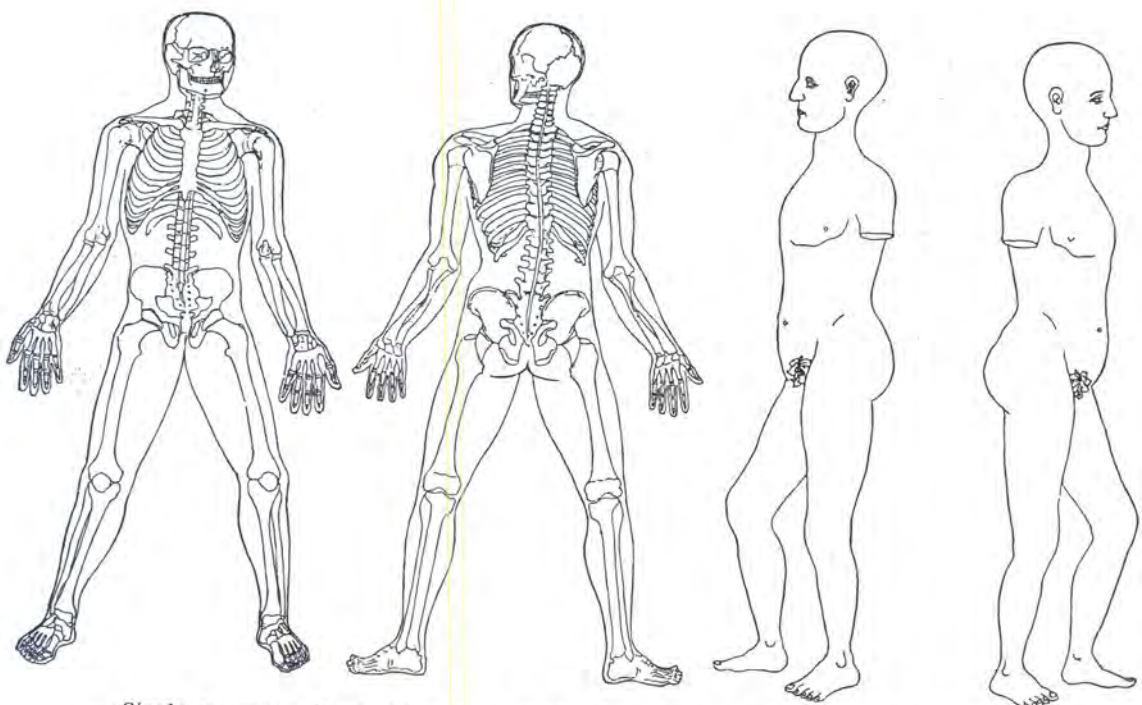
Post office, Muncie,

County, Delaware,

State, Indiana,

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

C. W. Smith



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 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.*]

5—552

6—552

☞ 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, etc.

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. Increase Pension Claim No. 87995
[State above whether for original, increase, or restoration.]

Name and rank of claimant. William J Carson, Rank, Private

Company E, 15" Reg't U. S. Inf. | Muncie Indiana State,

Claimant's post-office address. Muncie, Indiana | [Post-office address of the Board.]

November 3, 1897.
[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: _____

If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of _____ dollars per month.

He makes the following statement upon which he bases his claim for _____
[Original, increase, restoration, &c.]

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

Upon examination we find the following objective conditions: Pulse rate, _____; respiration, _____; temperature, _____; height, _____ feet _____ inches; weight, _____ pounds; age, _____ years.

Here give a full description of the disabilities, in accordance with Book of Instructions. No venereal diseases or vicious habits evident.

Disability: Chronic Diarrhoea & resulting disease of Stomach & Rectum, trouble extending to ascending & descending Colon, '17; Pain of back Spine & Head, '15; Injury of sight, '6; Impairment of left leg, 10/48.

This claimant is so disabled from Chronic Diarrhoea & results as to be incapacitated in a degree equivalent to the loss of a hundred foot for the purposes of manual labor.

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 March 2, 1895, requiring "that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to."

F. G. Jackson, Pres. C. H. Smith, Sec'y. D. R. McKinney, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. If sufficient space is not afforded for the necessary statements called for, additional paper should be neatly attached.

6—552

☞ (This certificate to be filled in and signed by the secretary when full board is present.)

"I hereby certify that Dr. F. G. Jackson, Dr. D. R. McKinney, and Dr. C. H. Smith were personally present and actually participated in the examination of Williams Carson, the claimant in this case, on 3d day of November, 1897."

(Signature.) C. H. Smith.

(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 ....., 18 ."

(Signature.)

.....

SURGEON'S CERTIFICATE

IN CASE OF

Williams J. Carson

Co. E, 15th Reg't U.S. Inf.

Applicant for Increase

No. 877995.

DATE OF EXAMINATION: November 3, 1897.

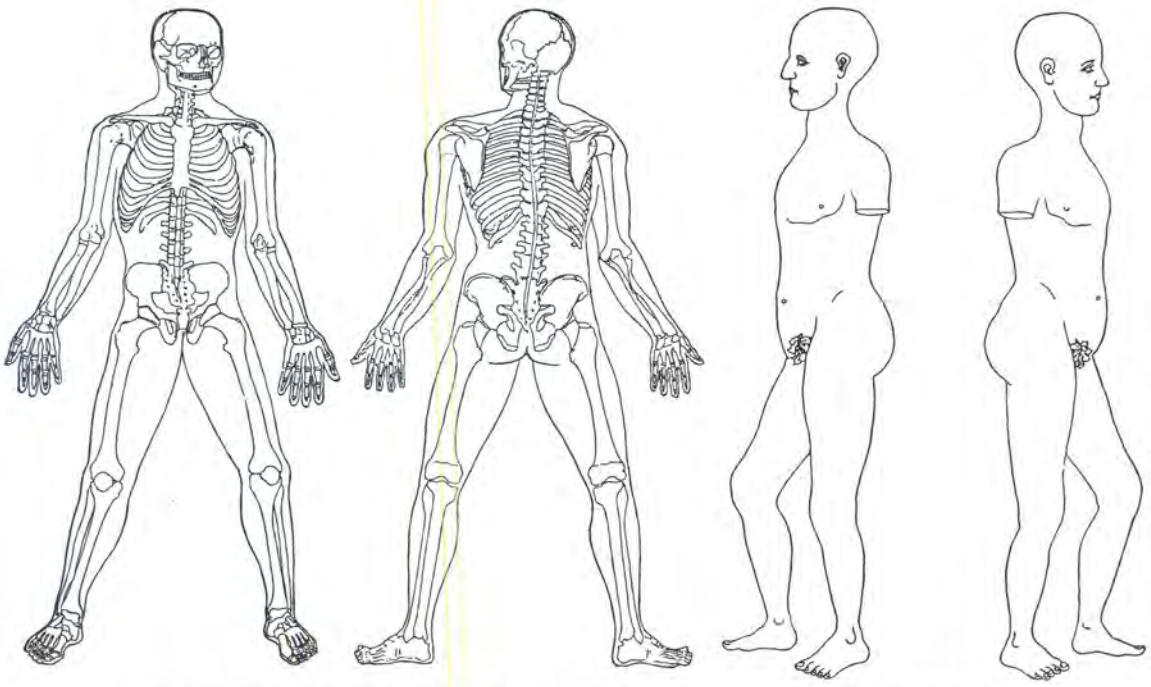
F. G. Jackson, Pres.,
C. H. Smith, Sec'y,
D. R. McKinney, Treas.,
BOARD.

Post office, Valparaiso,

County, Porter,

State, Indiana.

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



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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.*]

Page, 1,

3—111.

☞ 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, etc.

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.

Name and rank of claimant.

Claimant's post-office address.

Increase Pension Claim No. 87995.
[State above whether for original, increase, or restoration.]

William J. Carson, Rank, Private.

Company E, 15" Reg't U. S. Inf. | Muncie Indiana State,
[Post-office address of the Board.]

Muncie, Indiana, | November, 3, 1897
[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: Chronic Diarrhoea & resulting disease of Stomach & Rectum trouble extending to ascending & descending Colon, Pain of back, Spine & head, Injury of sight, and that he receives a pension of Ten dollars per month.

Cause of disability.

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

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 compactly as possible.

He states that he contracted Chronic diarrhoea in Libby & Pemberton prisons, in which he was confined for 3 months, & was reduced to 64 pounds in weight; with the diarrhoea he has been troubled, in its different forms ever since, frequently troubled most with Constipation, during which periods he is unable to have an operation from the bowels without using a rectal injection. Left leg is painful & weak, Has been laid up with it for six weeks, just now able to get out. Sewing Machine agent.

Upon examination we find the following objective conditions: Pulse rate, 90 sitting; respiration, 30; temperature, 98.6; height, 5 feet 6 1/2 inches; weight, 192 pounds; age, 57 years. A large, fleshy man, well nourished, with prominent abdomen, muscles, skin & Jaluns soft, Tongue red, fissured, furred, white at tip, & brown on dorsum, Tenderness over right hypochondriac region & over the epigastrium, Liver slightly enlarged, Stomach dilated, Spleen normal, Tenderness in right & left Iliac regions, with evidences of impaction in Ascending & descending Colon, & considerable impaction in region of the Sigmoid Flexure, Rectal Mucus membrane, tender & inflamed, & covered with a muco-purulent, offensive secretion, & showing a considerable amount of Cicatricial Contraction, Causing narrowing of the Rectal lumen, no fissure, fistula, or prolapsus but some ulceration of the Rectal mucus membrane, Pain in Right & Left Lumbar regions, & over the Sacrum, & ascending upward on either side of the Spine to the head, (Myalgia,) Tenderness also extending down the left leg along the distribution of the Sciatic nerve & branches; Leg atrophied, measuring 15 1/4 inches at the Calf, right leg measuring 15 3/4 inches; Left leg just above the Ankle measuring 9 inches, right, 10 1/2 inches, Left ankle appears to be tender, with Sensation impaired 1/2, & quite weak, with impairment of the extensors of the foot. The impairment of left leg doubtless being due to Sciatica from infection, or from pressure of impacted Colon, or both. Exam. of Eyes reveals a slight Chronic Conjunctivitis, both eyes, Corneae transparent, Pupils average normal size & respond readily to light & shade, Vision of either & both eyes, without glasses, 20/80, with glasses, + lens 1 D. 20/20. Urinalysis negative. Other organs normal.

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

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 March 2, 1895, requiring "that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to."

F. T. Jackson, Pres. C. W. Smith, Sec'y. D. R. McKinney Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. If sufficient space is not afforded for the necessary statements called for, additional paper should be neatly attached.

6—552

An examination must not be made by one member of a board except upon a special order of the Commissioner of Pensions.

☞ (This certificate to be filled in and signed by the secretary when the full board is present.)

"I hereby certify that Dr. T. G. Jackson, Dr. G. W. H. Kemper, and Dr. C. H. Smith were personally present and actually participated in the examination of William J. Gason, the claimant in this case, on 20 day of May, 1902.

(Signature.) C. H. Smith,

(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.) .....

SURGEON'S CERTIFICATE

IN CASE OF William J. Gason,

Co. E, 15th Reg't U.S. Inf.,

APPLICANT FOR Increase,

No. 87,935.

DATE OF EXAMINATION: May 20, 1903.

T. G. Jackson, Pres.,
C. H. Smith, Sec'y,
G. W. H. Kemper, Treas.,
} BOARD.

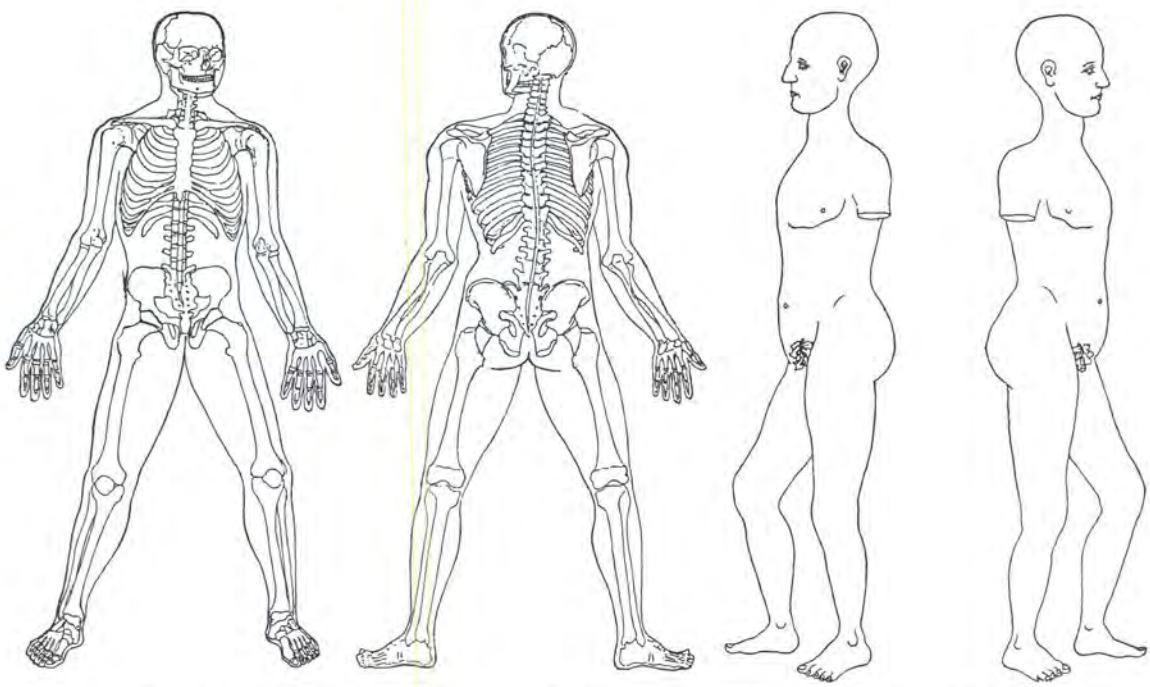
Post office, Spiceland,

County, Henry,

State, Ind.

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

PENSION OFFICE
MAY 28 1903



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

"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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(Old No. 3—111 g.)

6—552

SURGEON'S CERTIFICATE.

For use when additional space is needed to complete or amend report of examination.

Insert character and number of claim.

Increase, Pension Claim No. 87,995,

me of claimant.

William J Carson,

Private, Company E, 15", Reg't U.S. Inf. | Muncie, Indiana

[Rank] Muncie, Indiana | May 20, 1905,

[Date of examination.]

EXAMINATION—Continued.

inspiration: 38½ inches, forced expiration, normal resonance & normal respiratory murmur over all of both lungs,

Urinalysis:— Sp. G. 1030; acid; light yellow; no albumen; Fehling's test yields 25% of sugar; no pus; no blood; no mucus, History of capricious appetite for food & water; dry fauces. He urinates frequently & in large quantities, & complains of failing strength.

No venereal diseases or vicious habits evident. No other disability evident.

Disability:— Chronic diarrhoea & resulting disease of stomach & rectum, & constipation, 12/18; Glycosuria, 12/18,

F. G. Jackson, Pres. C. U. Smith, Sec'y. G. W. H. Kemper, Treas.

6—552

Page 2.

AN EXAMINATION MUST NOT BE MADE BY ONE MEMBER OF A BOARD [illegible]

☞ (This certificate to be filled in and signed by the secretary when the full board is present.)

"I hereby certify that Dr. F. G. Jackson, Dr. G. W. H. Kemper, and Dr. C. R. Smith were personally present and actually participated in the examination of William J. Carson, the claimant in this case, on 20 day of May, 1903."

(Signature.) C. R. Smith

(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.*) .....

U. S. PENSION OFFICE. MAY 28 1903

SURGEON'S CERTIFICATE

IN CASE OF William J. Carson

Co. G, 15th Reg't U.S. Inf.

APPLICANT FOR Increase,

No. 87,995.

DATE OF EXAMINATION: May 20, 1903.

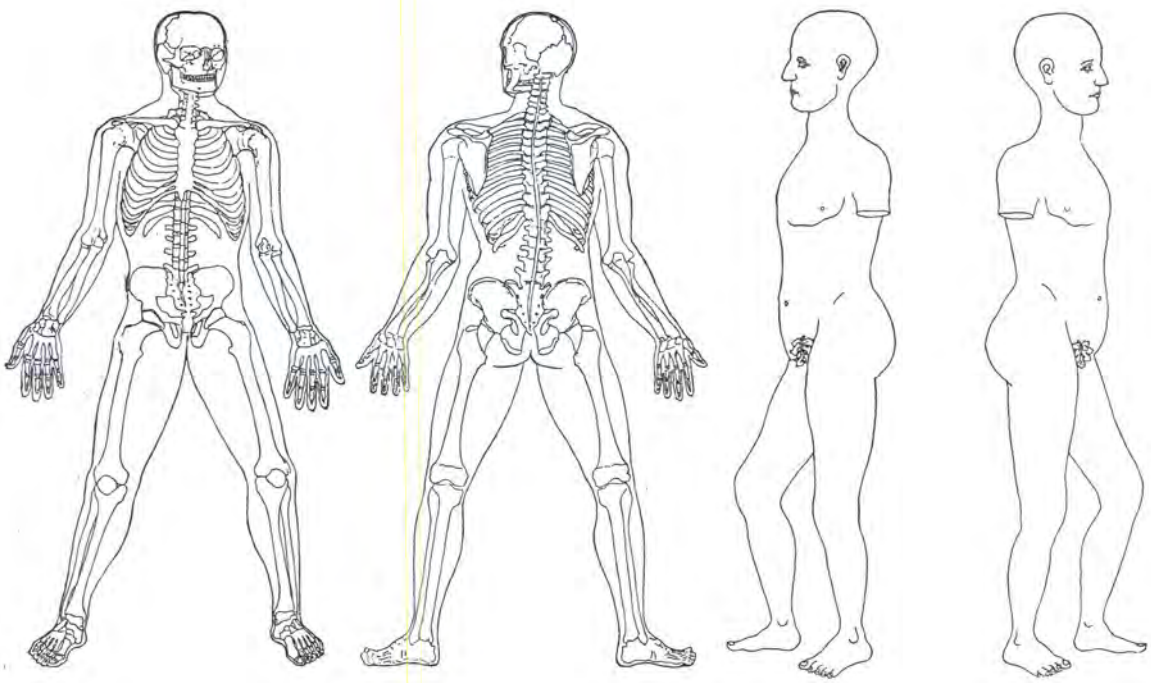
F. G. Jackson, *Pres.*,
C. R. Smith, *Sec'y*,
G. W. H. Kemper, *Treas.*,
} BOARD.

Post office, Wilmington,

County, Delaware,

State, Middletown

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



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6—552