

3-562.

ACCRUED PENSION.

Act of March 2, 1895.

Handwritten notes:
K. M. P.
700

C. W. W. Division.

Certificate No. 798,464, Last issue July 27, 1892.

Pensioner, John Sanders, Act. of June 27, 1890.

Date of death, August 11, 1896.

Claimant, Gilly Sanders, Widow

Mud Creek

Jackson Co.

Ala.

Certificate is filed. Voucher not filed.

Submitted for al. - April 16, 1898.

M. S. Stines Examiner.

BOARD OF REVIEW.

MA
Approved for

Admission

Payable to Widow as above

Ford Reviewer, April 22, 1898

CERTIFICATE DIVISION.

Accrued Pension Certificate and Order { Issued April 28, 1898
Mailed May 2, 1898

Payable to Widow

Original certificate and voucher

W.M. Div. *A. S.* Extr.

Department of the Interior,
BUREAU OF PENSIONS,

Washington, D. C. Jan. 13, 1897.

Respectfully referred to the Chief
of R. F. O. War Dept. request
ing a report of the service of
soldier as of Joseph Roswell
Co., Fla. Indian War
1836-37.

RECORD & PENSION OFFICE
1418317
WAR DEPARTMENT

Address: "Chief of the Record and Pension Office,
War Department, Washington, D. C."

Record and Pension Office,

WAR DEPARTMENT,

Washington, JAN 15 1897

Respectfully returned to

COMMISSIONER OF PENSIONS.

There are no records on file in
this office of

Capt. Rawcees
Co. of Fla. Indian
War, 1836-37.

PENSION
OFFICE.
JAN 16 1897
U. S.

W. & N.
JAN 16 1897
P. RECEIVED. B.

Mid. 640.763
John Saunders D. 3 Ohio
Co. & Old War.

W. D. Murphy
Commissioner.

BY AUTHORITY OF THE SECRETARY OF WAR:

A. P. Mumforth
Colonel, U. S. Army, Chief of Office.

Address: "Chief of the Record and Pension Office,
War Department, Washington, D. C."

Record and Pension Office,

WAR DEPARTMENT,

Washington, APR 28 1901

Respectfully returned to the

Commissioner of Pensions,

with the information that in the
case of John Saunders
Co. D 3d Ohio Cav.
sold for no medical
report has been found
attached to that furnished
in reports of Dec 14
88 & Jan 12 89 herewith



BY AUTHORITY OF THE SECRETARY OF WAR:

J. B. Hinworth
Chief, Record and Pension Office.

Per
(323) *m.*

3-464 ent.

C. D. Wynn Div. *Ex.*

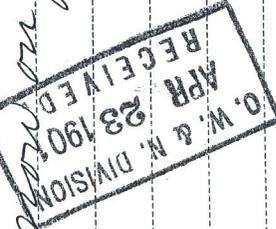
Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C. April 15 1901

Respectfully referred to the Chief of the
Record and Pension Office, War Department,

requesting a full ~~military~~ medical his-
tory of the soldier as shown by
records herewith file.



No other report on file.

Wm. H. H. No. 76277

Name of the Soldier.

Co. A. 3 Reg't *Ambr. 4th W. Va.*

M. Chay
Commissioner.

DISABILITY AFFIDAVIT.

STATE OF Alabama
COUNTY OF Jackson } SS.

In the Matter of the Original INVALID Pension Claim No. _____
of John Saunders, late Priv. U.S.A., 3rd Ohio Cav. Bn.

ON THIS 13th day of October A. D. 1888, personally appeared before me, a
Justice of the Peace in and for the aforesaid County, duly authorized to administer
oaths, John Saunders, aged 66 years, a resident of
vicinity of Rankinsville in the County of Jackson, and State
of Alabama, well known to me to be reputable and entitled to credit,
and who, being duly sworn, declares in relation to his claim for pension as follows: My Post Office Address is....
Alto, Jackson Co., Alabama.
[Give present address in full.]

For 5 years immediately preceding my enlistment into the service of the United States on the 27th
day of August, 1862, I resided in the following-named places: Jackson Co.,
Alabama, near Alto P. O.
[Give all the places in which you resided during the period above stated prior to your enlistment.]

and my occupation was that of a Blacksmith
Since my discharge from said service on the 17th day of June, 1865, I have resided in
Jackson County, Alabama, near Alto P. O.
[Give the name of each place with date of any change of residence.]

and my occupation has been that of a Blacksmith and Farmer
I further state that the disability for which I claim a pension arises from Erysipelas on Left Leg,
which was contracted from exposure, cold and continuous
hard riding about the 22nd day of March, 1863, after
The battle of Chicamauga, Tenn., and sent to Genl Hospital
at Chattanooga, Tenn., about the 3rd day of April, 1863,
and then Hospital of Lookout Mountain, remaining about
a month in said Hospital.

From my said discharge to the present time, I have received the following medical treatment for said disease
Not treated by physician, used home medicine.
[Give the name and address of each physician employed, and the date when each commenced and ceased to treat you. If any of them are deceased, so state.]
Had chronic diarrhoea after before the battle of
Perryville, Ky., treated by the Reg'l Surgeon, his
name unknown to me, contracted about end of
September, 1862, causing general debility.

Since the origin of the disability for which pension is claimed, I have suffered with the following acute diseases:
Pain and misery in left leg, General debility,
[Mention all attacks of acute disease, the time when such attacks occurred, their character and violence.]
rheumatic pains in left hip and knee, &
shoulder.

for which I was treated by Dr. used home medicine.
[Name and address and date of treatment.]

12/

And during all of the said time my physical condition and ability to perform manual labor has been as follows:...

From the time of discharge to the year of 1875 I was 1/2 disabled to perform manual labor, and from 1875 to the present day I am about 3/4 disabled to perform manual labor.

I further state that the entire service rendered by me is as follows: Enlisted on 27th day of August, 1862 in Co. D, 3rd Regt. Ohio Cav. Discharged on June 17th 1865.

and that I have not served in the Army or Navy either prior or subsequent thereto.

Charles Becken
D. J. D. Brown

John Sanders
Claimant's Signature.

[Two witnesses who can write here.]

State of Alabama, County of Jackson, ss.

Sworn to and subscribed before me this day, by the above-named affiant; and I certify that I read said affidavit to said affiant, and acquainted him with its contents before he executed the same. I further certify that I am nowise interested in said case, nor am I concerned in the prosecution. The following interlineations and erasures were made before executing said affidavit:

W. R. Woolly
Justice of the Peace.

NOTE.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, or JUSTICE OF THE PEACE. If before a JUSTICE or NOTARY, then CLERK OF COUNTY COURT must add his certificate of Official character hereon, and not on a separate slip of paper.

I, John H. Norwood, Judge, Clerk of the County Court in and for aforesaid County and State, do certify that W. R. Woolly Esq., who hath signed his name to the foregoing affidavit was at the time of so doing Justice of the Peace in and for said county and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

John H. Norwood
Clerk of the Judge of Probate

[L. S.]

DISABILITY AFFIDAVIT.

No. Claim of John Sanders, late Private Co. D, 3rd Regt. Ohio Cav. Ala.

For Annals' Business.

FILED BY J. J. PATTON, ATTORNEY AT LAW WASHINGTON, D. C.

Index Original Invalid Claim No. 674,664

John Sanders Co "D" 3rd Reg't Ohio Col Cavalry

ARRANGE PAPERS IN INVALID CLAIMS—1. Declaration; 2. Soldier's statements as to origin; 3. A. G.; 4. S. G.; 5. Cert. of Dis. Let history as to origin, continuance, &c., follow in regular order.

IN WIDOWS' AND DEPENDENT RELATIVES' CLAIMS—Let evidence of soldier's death, marriage, dependence, &c., follow evidence of origin and continuance of fatal disease.

o 6-113

NO.	NAME AND P. O. ADDRESS.	DATE OF FILING.	SUBJECT.
1	<i>John Sanders</i>	<i>Nov-2-1888</i>	<i>Dec'd Claimant alleges Empysemas</i>
"	<i>Atto, Alabama</i>	<i>"</i>	<i>left leg, Ch'diar & gen'l debility</i>
2	<i>" "</i>	<i>Nov-2-1888</i>	<i>Reply to circular 62</i>
3	<i>A G report</i>	<i>Jan'y-12-1889</i>	
4	<i>f G report</i>	<i>Dec-15-1888</i>	
5	<i>Lt William Latham</i>	<i>Jan'y-29-1890</i>	<i>Origin</i>
"	<i>Trenton, Ala</i>	<i>"</i>	
6	<i>Dr George W. Culver</i>	<i>Jan'y-29-1890</i>	<i>Origin & Continuance</i>
"	<i>Lim Rock, Ala</i>	<i>"</i>	
7	<i>James M. Hudson MD</i>	<i>June-28-1889</i>	<i>Continuance</i>
"	<i>Trupelo, Alabama</i>	<i>"</i>	
8	<i>W. C. Mamado MD</i>	<i>June-28-1889</i>	<i>Continuance</i>
"	<i>Scottsboro, Ala</i>	<i>"</i>	
9	<i>Chattanooga Tenn Basil</i>	<i>Mar-15-1889</i>	<i>No disability</i>
10	<i>" " "</i>	<i>Dec-14-1889</i>	<i>" "</i>

677, 664

John Sanders

This claim is submitted for Rejection on the ground that Claimant has not been disabled in a pensionable degree, by reason of causes alleged, since the date of filing the claim,

Examiner

Jan'y 30 1890

Act April 19, 1908.

3-1081.

PENSIONER DROPPED.

DEPARTMENT OF THE INTERIOR

UNITED STATES PENSION AGENCY

KNOXVILLE, TENN.

AUG 29 1911, 191

Certificate No. 462771

Class WIDOW

Pensioner Gully Sanders

Soldier John Sanders

Service Pri. Co. D. 3rd Ohio

Vol. Cav.
The Commissioner of Pensions.

SIR: I have the honor to report that the above-named pensioner who was last paid at \$12.00, to 4 Nov., 1910 has been dropped because of death.

Died Dec. 2, 1910.

Very respectfully,

M. R. Rule

United States Pension Agent.

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

ORIGINAL INVALID CLAIM.

Soldier, John Sanders
 P. O., Atto Rank, Private
 County, Jackson Company, "D"
 State, Alabama Regiment, 3rd Ohio vol Cav
 Rates, \$ _____ per month, commencing _____



Pensioned for _____

RECOGNIZED ATTORNEY.

Name, J. C. De Putreau Fee, \$ 25-, Agent _____ to pay.
 P. O., Washington, D.C. Articles filed Nov - 2 -, 1888.

APPROVALS.

Approved for Rejection for Erysipelas left leg, Chronic Diarrhoea & general debility
 Submitted Jan'y - 30 -, 1890 V. B. McFaul Kenner, Examiner.

W. Mc

Approved for Rejection on the ground Approved for rejection - notable disability
from disability from Erysipelas from Erysipelas of left leg, chr.
of left leg, Chronic diarrhoea diarrhoea & general debility
general debility since date of not shown since filing claim.
filing claim, subject to
Approval of Medical Referee

Feb. 12/90 Kelly, Legal Reviewer. Foster, Med. Ex'r. Eady, Med. Reviewer,
 _____, 1888, _____, Re-Reviewer. Apr 5, 1888, Ho Stugran, Med. Referee.

IMPORTANT DATES.

Enlisted, August - 27 -, 1862 service from _____
 Mustered _____, 18 _____, to _____, 18 _____, in _____
 Discharged June - 17 -, 1865
 Declaration filed November - 2 -, 1888. Not in service since June - 17 -, 1865
 ("See Testimony")

BASIS OF CLAIM.

Claimant states that near Chickamauga, Tenn, on or about
 March 22-1863, he contracted Erysipelas of left leg from exposure,
 cold, & continuous hard exercise. He contracted Chronic diarrhoea
 near Perryville, Ky, shortly before the battle at that place. He is
 now affected with general debility

Claimant writes

NOTICE TO CLAIMANT

This Contract is Permissible Under the Law, but Not Compulsory.—Read the following Copy of the Statute.

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

SEC. 3. That section 4785 of the Revised Statutes is hereby re-enacted and amended, so as to read as follows:

“SEC. 4785. No agent or attorney or other person shall demand or receive any other compensation for his services in prosecuting a claim for pension or bounty-land than such as the Commissioner of Pensions shall direct to be paid to him, not exceeding \$25; nor shall such agent, attorney, or other person demand or receive such compensation, in whole or in part, until such pension or bounty-land claim shall be allowed: *Provided*, That in all claims allowed since June 20, 1878, where it shall appear to the satisfaction of the Commissioner of Pensions that the fee of \$10, or any part thereof, has not been paid, he shall cause the same to be deducted from the pension, and the pension agent to pay the same to the recognized attorney.”

SEC. 4. That section 4786 of the Revised Statutes is hereby amended so as to read as follows:

“SEC. 4786. The agent or attorney of record in the prosecution of the case may cause to be filed with the Commissioner of Pensions duplicate articles of agreement without additional cost to the claimant, setting forth the fee agreed upon by the parties, which agreement shall be executed in the presence of and certified by some officer competent to administer oaths. In all cases where application is made for pension or bounty-land, and no agreement is filed with the Commissioner as herein provided, the fee shall be \$10 and no more. And such articles of agreement as may hereafter be filed with the Commissioner of Pensions are not authorized, nor will they be recognized except in claims for original pensions, claims for increase of pension on account of a new disability, in claims for restoration where a pensioner's name has been or may hereafter be dropped from the pension rolls on testimony taken by a special examiner, showing that the disability or cause of death, on account of which the pension was allowed, did not originate in the line of duty, and in cases of dependent relatives whose names have been or may hereafter be dropped from the rolls on like testimony upon the ground of non-dependence, and in such other cases of difficulty and trouble as the Commissioner of Pensions may see fit to recognize them; *Provided*, That no greater fee than \$10 shall be demanded, received, or allowed in any claim for pension or bounty-land granted by special act of Congress, nor in any claim for increase of pension on account of the increase of the disability for which the pension had been allowed: *And provided further*, That no fee shall be demanded, received, or allowed in any claim for arrears of pension or arrears of increase of pension allowed by any act of Congress passed subsequent to the date of the allowance of the original claims in which such arrears of pension or of increase of pension may be allowed.”

And if in the adjudication of any claim for pension in which such articles of agreement have been or may hereafter be filed it shall appear that the claimant had, prior to the execution thereof, paid to the attorney any sum for his services in such claim, and the amount so paid is not stipulated therein, then every such claim shall be adjudicated in the same manner as though no articles of agreement had been filed, deducting from the fee of \$10 allowed by law such sum as claimant shall show that he has paid to his said attorney.

Any agent or attorney or other person instrumental in prosecuting any claim for pension or bounty-land who shall directly or indirectly contract for, demand, or receive or retain any greater compensation for his services or instrumentality in prosecuting a claim for pension or bounty-land than is herein provided, or for payment thereof at any other time or in any other manner than is herein provided, or who shall wrongfully withhold from a pensioner or claimant the whole or any part of the pension or claim allowed and due such pensioner or claimant, or the land-warrant issued to any such claimant, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall for every such offense be fined not exceeding \$500, or imprisoned at hard labor not exceeding two years, or both, in the discretion of the court.

APPROVED JULY 4, 1884.

Return both copies.

No.

PENSION CLAIM OF

John Saunders,

(Name of claimant.)

“D” Co. B. S. Reg't.

Ohio Cavalry Vols.

FEE AGREEMENT.

FILED BY

J. C. DEPUTRON,

(Late Principal Examiner U. S. Pension Office.)

Attorney for Claimant,

WASHINGTON, D. C.

AA.

(3-010a.)

AA.

[Act of June 27, 1890.]

DECLARATION FOR INVALID PENSIONS.

To be Executed before a Court of Record or some Officer thereof having Custody of its Seal.

State of Alabama, County of Jackson, ss:

ON THIS 16 day of July A. D. one thousand eight hundred and ninety... personally appeared before me William B. Parrott of the J. P. court, a court of record within and for the County and State aforesaid John Sanders aged 48 years, a resident of the vicinity of Bloto P. D. county of Jackson State of Alabama, who, being duly sworn according to law, declares that he is the identical John Sanders who was enrolled on the 27th day of August 1862, as Private in Company "D", 3rd Regt. of Ohio Cas. Vols. [Here state rank, company, and regiment in military service, or vessel, if in the Navy.]

in the war of the Rebellion, and served at least ninety days, and was honorably discharged at Nashville, Tenn., on the 17th day of June 1865

That he is... unable to earn a support by reason of crystallization of left leg, [Here name the diseases or injuries from which disabled.] rheumatic pains in left hip, knees & shoulder, and general debility, resulting from chronic diarrhoea, contracted while in aforesaid service.

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief permanent. That he has... applied for pension under application No. 677664 That he is a pensioner under certificate No. 677664 [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 June 27, 1890. He hereby appoints

J. C. DePUTRON, Washington, D. C.,

his true and lawful attorney to prosecute his claim. That his post-office address is Alto, county of Jackson, State of Alabama.

John Sanders
Claimant's Signature

Attest:
Abner A. Cox
Thomas H. Cox

also personally appeared Alexander Cox residing at Alto Jackson
County Alabama and Thomas H. Cox residing at
Alto Jackson Co. Ala. 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 John Sanders
 _____, the claimant, sign his name (make his mark) to the foregoing
 declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with
 him for 16 years and 16 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.

X Alexander Cox
 X Thomas H. Cox
 (Signature of Witnesses.)

Sworn to and subscribed before me this 16 day of July A. D. 1890
 and I hereby certify that the contents of the above declaration, &c., were fully made known and ex-
 plained 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.

*filed
 Aug 6/88
 Aug 6/89*

William G. Peacock
 (Signature.)
W. G. P.
 (Official Character.)

- The act of June 27, 1890, requires, in the case of a soldier:
- (1) An honorable discharge (but the certificate need not be filed unless called for).
 - (2) A minimum service of ninety days.
 - (3) A permanent physical disability not due to vicious habits. (It need not have originated in the service.)
 - (4) The rates under the act are graded from \$6 to \$12, proportioned to the degree of inability to earn a support, and are not affected by rank held.
 - (5) A pensioner under prior laws may apply under this one, or a pensioner under this one may apply under other laws, but he can not draw more than one pension for the same period.

355992

AA.

(8-010a.)

SOLDIER'S APPLICATION.

Name John Sanders
 Service Private Co. "D" 37
Regt. of Ohio Cav. 1862
 Address Alto, Jackson Co.,
Alabama.

J. C. DePutron,
 Attorney.
Washington, D.C.
 Address.



Filed by
J. C. DEPUTRON,
 WASHINGTON, D. C.



Executed July 16 1890
 F. B. CLARKSON, PRINTER, U.S. DEPT. OF WAR.

3-146 b.

LAW:

Reissue to

Claimant, *John Sanders*

P. O., Rank, *Pri*

County, Company, *W*

State, Regiment, *3 Ohio Vol. Cav.*

Rate, \$ per month, commencing

ACT OF JUNE 27, 1890.

Revision under Departmental Decision of May 27, 1893, and Office Orders (No. 225) of June 9, 1893, and (No. 240) of August 26, 1893.

Respectfully referred to the Medical Referee for his opinion whether, under the above decisions, the pensioner is entitled to his present rate of \$.....?

Approved for continuation at \$..... per month

(Call attention to any pending claim for increase, former pension and rate under another law, or other essential fact.)

Wm. H. Steinhilber
Feb 8 1895, Medical Referee.

....., 189....., Reviewer.

NOTE.—If the present rate is continued on the above action, cut off the remainder of this blank at this point.

Reference for Notice of Reissue under another Law, Reduction, or Dropping.

Respectfully referred to the Chief of the Notification Section for legal notice to the pensioner that his pension under the above act will be.....

in accordance with the above opinion of the Medical Division (If action is solely upon conclusive legal grounds, erase this clause and state legal grounds.)

....., 189....., Reviewer.

Final Medical Action after Legal Notice and Hearing.

Upon all the evidence now filed in the case the medical action taken....., 189....., should....., 189....., Medical Referee.

Final Legal Action after Notice and Hearing.

Respectfully referred to the Chief of the..... Legal notice and hearing having been given the pensioner, the decision to..... the pension..... in accordance with the..... action of....., 189....., is....., 189....., Reviewer.

NOTE.—If after notification the action is to continue Board of Revision will send case to proper files; if to drop Finance Division will do so; if to reissue under another law or reduce, Board of Revision will forward to Board of Review.

ACTION OF BOARD OF REVIEW.

Approved for....., 189....., Reviewer.

S.F.S.

Schaepfer

Division, 5/18/92

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., May 25, 1892

Respectfully returned to the
Record & Pension Division
War Department for a
report of service of written
examined soldier as
John Sanders of
Co D. 3^d Regt. Ohio Cav
the former call being
been erroneously made
for John Sanders

Dep. No. 6474.664
John Sanders
Co D 3 Ohio Cav
Greenbaum
Commissioner.

Office of the Officer in charge of the Record and Pension Division,
War Department, Washington, D. C.

War Department,

Record and Pension Division,
MAY 27 1892

Washington, _____, 18

Respectfully returned to the
Office of Pensions
with the information that in the
case of John Sanders
of Co D "3" B. V. Cav.
name is found as
John Sanders as
called for. see
report of Jan'y 12, '89



BY AUTHORITY OF THE SECRETARY OF WAR:

Wainwright
Major and Surgeon, U. S. Army.

For Officer's or Comrade's Testimony.



The witness, whether Surgeon, Officer, or Comrade, should state fully, all he knows of claimant's condition prior to and at enlistment, how, when, and where he contracted his disability, naming his diseases, locating his injuries, and describing his symptoms, and how and to what extent he was disabled thereby in the service, at Discharge, and ever since so long as he has known him, and how the witness knows the facts to which he testifies.

William Latham whose Post Office is *Trenton*
in the County of *Jackson* State of *Mississippi* late
Private of Company *F* of the *3^d* Regiment of *Ohio Cavalry*
on oath, depose and say, that I was well acquainted with *John Sanders*,
late a *Private* in Company *"D"* of the *3^d* Regiment of *Ohio Cav. Vols.*
of the war of 1861; that at the time of his enlistment, said *John Sanders*
was *a sound and healthy man, free from any*
disease or injury.

and while in the military service of the United States, in the line of his duty, and without fault or improper conduct
of his own, on or about the *Last* day of *September* 1862 at *Peroville*
State of *Kentucky* and that then and there
he did contract Disease caused by
reason of Chronic Diarrhea and also
had Erysipelas in his left Leg
near the amanga in 1864
and have known him ever since his
Discharge and we have lived about
ten miles apart all the time since
we was discharged and when we would
meet he was complaining of his
injuries and also his eyes was injured
about Dec^r 1863 near Woodville Alabama
and he suffers a great deal from
said injuries and think he is entitled
to a Pension from the government
and ought to have a pension
marked three fourths of the time.

READ THIS CAREFULLY.

I know these facts from *being with said Comrade*
and I have no interest whatever in the prosecution of this claim for pension.

William Latham
Affiant's Signature.
Late a *Sergeant F* Co. *F* Reg't. *Ohio* Vols.

State of Alabama County of Jackson ss.

Sworn to and subscribed before me, this day by the above-named affiant, and I certify that I read said affidavit to said affiant including the words,.....erased, and the words.....added and acquainted him with its contents before he executed the same. I further certify that I am in no wise interested in said case nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

Dated this 4th day of January 1890

William T. Peacock J.P.
(Signature.)

[SEAL]

(Official character.)

I,..... Clerk of the County Court in and for aforesaid County and State, do certify that....., Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing..... in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit and that his signature thereto is genuine.

Witness my hand and seal of office, this.....day of.....188

[SEAL]

Clerk of the.....

Note.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, or JUSTICE OF THE PEACE, if before a JUSTICE or NOTARY then CLERK OF COUNTY COURT must add his certificate of character hereon, unless said, JUSTICE or NOTARY has his CERTIFICATE on file in Pension Department.

AFFIDAVIT

FOR

Commissioned Officer or Comrade.

No. 677664

CLAIM OF

John Sanders

Co. D. 3d Regt. Clay Vols.

For

Original Pension

AFFIDAVIT OF

William Estlin
[Name of Affiant]

Late Sergeant Co. F
[Rank]

Regt. Ohio Cav Vols.

FILED BY

J. C. DePUTRON,

ATTORNEY FOR CLAIMANT,

WASHINGTON, D. C.

(3-145 a.)

ACT OF JUNE 27, 1890.

J. I. R.

INVALID PENSION.

Claimant, *John Sanders* ✓
 P. O., *Alto* ✓ Rank, *private* ✓
 County, *Jackson* ✓ Company, *D* ✓
 State, *Alabama* ✓ Regiment, *3 Ohio Vol Cav.* ✓
 Rate, \$ _____, per month, commencing *July 21, 1890* ✓

Disabled by *Rheumatism & dis. of eyes.*

RECOGNIZED ATTORNEY.

Name, *J. C. De Putron* ✓ Fee, \$ *10.00* Agent to pay.
 P. O., *Washington D.C.* ✓ Articles filed, _____, 189__

APPROVALS.

Submitted for admission, *June 20, 1892* ✓ *S. F. Schaeffer*, Examiner.

Approved for *Admission* ✓ Approved for *Rheumatism and disease of eyes*
\$10.00

No other disabilities shown
Thos. DuGrand Medical Referee.

July 1, 1892 ✓ *Rymey* Legal Reviewer. *July 20, 1892*

not now pensioned under other laws. Last paid to _____, 18____, at \$ _____

Pensioned from _____, 18____, at \$ _____, for _____

SERVICE SHOWN BY RECORD.

Enlisted *Aug 27*, 18*62* ✓ honorably discharged *June 17, 1865* ✓

Re-enlisted _____, 18____, honorably discharged _____, 18____

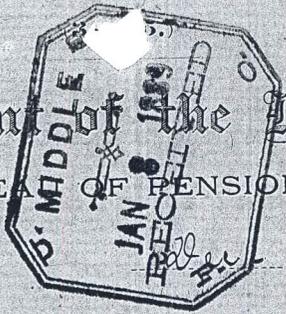
Declaration filed *July 21*, 1890, alleges permanent disability, not due to vicious habits,

from *erysipelas of left leg, rheumatism general debility*
resulting from chronic diarrhoea, Affidavit filed March
8, 1892 alleges disease of eyes contracted in *Nov. 1863* ✓

Claimant writes
advised by
Hon Geo Wheeler ✓ *M. C.*

V. P. J.
Mid. Div.

Department of the Interior,
BUREAU OF PENSIONS,



11- , 1888-

Sir:

Please furnish this Bureau a report of hospital treatment in the
Claim No. 677664- , of John Sanders. late a
priv. Co. D. 3^d Ohio. Cav. , from
the data given below.

CASE OF

John Sanders
Priv. Co. D, 3^d Regt Ohio Cav.
Claim No. 677664

WAR DEPARTMENT,

Surgeon General's Office,

Record and Pension Division,

Washington, D. C., Dec. 14, 1888.

This transcript from the records on file in this office is
respectfully furnished for the information of the

Commissioner of Pensions,

and embodies all the information which has been found on a
search of those records made in full compliance with the
inclosed request.

Middlesex
Dec 15 88

All papers pertaining to the case are herewith returned.

BY ORDER OF THE SURGEON GENERAL:

F. L. Ainsworth
Capt. and Assistant Surgeon, U. S. A.

PER

R. & P. Div. No. 525027 (214)

John G.

4. Discharged June 17- , 1865-

Very respectfully,

14

John Black,
Commissioner

The Surgeon General U. S. A.

Med. Div.

Department of the Interior,

BUREAU OF PENSIONS,

11-....., 1888.

Sir:

Please furnish this Bureau a report of hospital treatment in the
Claim No. 677664, of John Saunders, late a
priv. Co. H. 3^d Ohio Cav. from

the data given below.

NAME.	RANK.	CO.	REGIMENT.	DATE OF ADMISSION.	RECORD OF-
John Saunders	Priv. G.	G.	3 Ohio Cav.	1864 April	Genl. West's Regt. Army of the Cumberl. Chattanooga, Tenn.
John Saunders	—	G.	3 Ohio Cav.	1864 May	Genl. West's Regt. Lookout Mountain, Tenn.
John Saunders	Priv. G.	G.	3 Ohio Cav.	—	Genl. West's Regt. Chattanooga, Tenn. (Prescriptions, May 22, 64)

NOTE. ^o Prescription, May 22, 64 - "Irritation pleurae to breast"

4. Discharged June 17- 1865.

Very respectfully,

John O. Black,
Commissioner

SWORN to and subscribed before me this 11th day of June A. D. 188 9
and I hereby certify that the affiant is a practicing physician in good professional standing; that the contents of the above affidavit were fully made known to him 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.

(SEAL)

John Sanders
(Official Signature.)
W. P. Kirk
Justice of the Peace
(Official Character.)

I, John H. Norwood Clerk of the County Court in and for aforesaid County and State, do certify that John Sanders Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing Justice of the Peace in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereto is genuine.

Witness my hand and seal of office, this 12th day of June 188 9

(SEAL)

John H. Norwood
Clerk of the County Court.

Note.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, or JUSTICE OF THE PEACE, if before a JUSTICE or NOTARY then CLERK OF COUNTY COURT must add his certificate of character hereon, unless said JUSTICE or NOTARY has his CERTIFICATE on file in Pension Department.

PHYSICIAN'S AFFIDAVIT.

No. 677, 664

CLAIM OF

John Sanders

Date

A Co., D

3 Reg't

Ohio

Vols.

FOR

Orval's Pension

AFFIDAVIT OF

J. M. Hudson
Rep. of Alabama

FILED BY

J. C. DEPUTRON,

Attorney at Law,

WASHINGTON, D. C.

For Officer's or Comrade's Testimony.

The witness, whether Surgeon, Officer, or Comrade, should state fully, all he knows of claimant's condition prior to and at enlistment, how, when, and where he contracted his disability, naming his diseases, locating his injuries, and describing his symptoms, and how and to what extent he was disabled thereby in the service, at Discharge, and ever since so long as he has known him, and how the witness knows the facts to which he testifies.

I, George W. Culver whose Post Office is Linrock
 in the County of Jackson State of Alabama late
private of Company F of the 2^d Regiment of Ohio Cavalry, 20th
 on oath, depose and say, that I was well acquainted with John Sanders,
 late a Private in Company "D" of the 3^d Regiment of Ohio Cav. Vols.
 of the war of 1861; that at the time of his enlistment, said John Sanders
 was a sound and healthy man, free from any
injury or disease whatever
 and while in the military service of the United States, in the line of his duty, and without fault or improper conduct
 of his own, on or about the Last day of September 1862 at Perryville
 State of Kentucky and that then and there
he did contract Disease Caused by reason
of Chronic Diarrhea and also had
Trichinosis in his left leg near
Chilodmanga in 1864
and have known him ever since
his Discharge and we have lived
about ten miles apart all the time
since the war and when we would meet
complaining of his troubles and also
his eye was injured in 1863 near
Woodville Alabama and he suffers
a great deal from his injuries
and I think he is entitled to a pension
and he is disabled three fourths of
his time from performing common labor

I know these facts from being with said applicant
 and I have no interest whatever in the prosecution of this claim for pension.

E. P. Stewart
J. S. Gillis

George W. Culver
 Applicant's Signature
 Late a private Co. F Reg't. 2^d Vols.

READ THIS CAREFULLY.

State of Alabama County of Jackson ss.

Sworn to and subscribed before me, this day by the above-named affiant, and I certify that I read said affidavit to said affiant including the words.....erased, and the words.....added and acquainted him with its contents before he executed the same. I further certify that I am in no wise interested in said case nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

Dated this 4 day of January 1890

William T. Peacock J. P.
(Signature.)

[SEAL]

(Official character.)

I, John H. Strawn Judge + Clerk of the County Court in and for aforesaid County and State, do certify that William T. Peacock, Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing an acting Justice of the Peace in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit and that his signature thereto is genuine.

and that his term of service will expire on the 1st Monday in August 1892 - Witness my hand and seal of office, this 9th day of January 1890

[SEAL]

John H. Strawn
Probate Judge, and Clerk of the County Court Office

Note.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, or JUSTICE OF THE PEACE, if before a JUSTICE or NOTARY then CLERK OF COUNTY COURT must add his certificate of character hereon, unless said, JUSTICE or NOTARY has his CERTIFICATE on file in Pension Department.

AFFIDAVIT

FOR
Commissioned Officer or Comrade.

No 677.664

CLAIM OF



Co D., 1st Reg't. Olney Vols.

For

Original Pension

AFFIDAVIT OF

George H. Luther
[Name of Affiant]

Late 1st Co., F

Reg't Ohio Vols.

FILLED BY

J. C. DePUTRON,

ATTORNEY FOR CLAIMANT,

WASHINGTON, D.C.

PHYSICIAN'S AFFIDAVIT.

State of Alabama County of Jackson 55.89

In the Pension claim, No. 677,664 of John Sanders
Original pensioner late of Co. D, Reg't. Ohio, Cal's Vols

Personally came before me, a Clerk of County Court in and for the aforesaid
Official character of magistrate.

County, and State N. C. Womack M. D. a resident of Septtobors
in the County of Jackson and State of Alabama well known to

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

That he is a practicing physician, and that he has been acquainted with said Soldier for about 25 years,
and that I have been his family
Here embody all the facts known to the affiant in accordance with the marginal instructions. No erasures or interlineations will be
permitted unless the magistrate certifies in his jurat that they were made before executing the paper.

permitted unless the magistrate certifies in his jurat that they were made before executing the paper.
time
I have been acquainted
with claimant about 25 years
and never treated him before
enlistment not able to say as
to his death, have lived
about him ever since
surrender have been his
family physician since
and am informed as to
his physical condition
pronounce him unsound
not able to perform
manual labor on account
of being debilitated by chronic
diarrhea dysipplatis &c
have frequently consulted
in regard to his soundness
or fitness for favor of
pronounce his disabled
on average 3/4 I would
say acquired during his
service in the Federal Army

He further declares that he has been a practitioner of medicine for thirty years, and that he has no
interest, either direct or indirect, in the prosecution of this claim.

N. C. Womack M.D.
Affiant's Signature. Give rank and service, if in the army.

The Physician's Affidavit should be in his own hand writing and show the following facts: 1st. Whether or not he knew the soldier prior to enlistment; the length of time he has known him; how intimately, and what opportunities he has had of observing his physical condition, whether as his family physician or as a neighbor; and how near he has lived to him. If he knew that the soldier was a sound man at enlistment he should so state, adding, if true, that he has been throughout he would have known it. 2d. If he treated claimant while in the service, either as his regimental surgeon or while claimant was home on furlough that he should so state. The claimant's physical condition at such times should be clearly shown, as well as the nature of his disability and dates of treatment. 3d. If he has treated soldier since discharge he should so state, giving the date of his first treatment, what his physical condition was at the time, with a complete diagnosis of the disability, the period during which he treated him should be stated, with dates, as near as possible of the prescriptions. 4th. The extent to which claimant has been unable to perform manual labor since discharge, by reason of his disability should be shown fractionally, 1/2, 3/4, 5/8, 3/4, or totally as the case may be.

NOTICE

SWORN to and subscribed before me this 12th day of June A. D. 1889

and I hereby certify that the affiant is a practicing physician in good professional standing; that the contents of the above affidavit were fully made known to him 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.

(SEAL)

John H. Woodward
(Official Signature.)

Clerk of County Court.
(Official Character.)

I, _____ Clerk of the County Court in and for aforesaid County
and State, do certify that _____ Esq., who hath signed his name to the
foregoing declaration and affidavit, was at the time of so doing _____ in and
for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his
signature thereto is genuine.

Witness my hand and seal of office, this _____ day of _____, 188

(SEAL)

Clerk of the _____

Note.—This should be sworn to before a CLERK OF COURT, NOTARY PUBLIC, or JUSTICE OF THE PEACE, if before a JUSTICE or NOTARY then CLERK OF COUNTY COURT must add his certificate of character hereon, unless said JUSTICE or NOTARY has his CERTIFICATE on file in Pension Department.

PHYSICIAN'S AFFIDAVIT.

No. 677664

CLAIM OF

John Sanders

Late _____ Co., D

3rd Reg't Ohio Vols.

FOR

Invalid Pension

AFFIDAVIT OF

W. C. Norman M. D.

Scottsboro, Alabama

FILED BY

J. C. DEPUTRON,

Attorney at Law,

WASHINGTON, D. C.

(3-105.)

Department of the Interior,

BUREAU OF PENSIONS, ^{20th}
Washington City Dec 21 1888.

Nature of Claim *Original*

No. *677664*

Soldier: *John Sanders*

Service: *Private - co D - 3 Ohio Cav*

It is desired in this case that the examination be made with special reference to-

*Erysipelas of left leg, chronic
diphtheria and gen debility-*

*Give this soldier an exhaustive
examination, rating separately
all disabilities found -*

*Your attention is called
more particularly to the above
mentioned disabilities on which he
bases his claim for a Pension.*

*Follow closely the books of
instructions and give your own
diagnosis of the case*

John Campbell
Medical Referee.

THE SURGEON WILL DETACH THIS SLIP FROM THE "ORDER" AND RETURN IT WITH THE CERTIFICATE OF THE EXAMINATION.
(18508-20 M.) 6-236

(3-530.)

Bureau of Pensions.

This slip should be attached to brief in admitted cases that have been called up by members of present Congress

By direction of Commissioner:

A. W. FISHER,
Chief Clerk.

Middle Division,

Disy Claim,

No. *677664*, of

John Sanders

P. O. *Alto*

Jackson Co Ala

Hon. *Gov Wheeler*

called up this case *June 20*, 1892

and should be informed of its adjudication

S. F. Schaeffer,

Examiner.

o 6-032.