

# Neighbor's Affidavit.

NOTE.—This should be sworn to before a CLERK of the COURT or his DEPUTY, or any NOTARY PUBLIC or JUSTICE of the PEACE, provided if executed before a Notary or Justice, the certificate of the court must be attached unless the Notary or Justice has a certificate already on file in the Pension Office. In such case the Notary or Justice must state that such certificate is on file. Neglect to comply with this requirement will cause trouble and delay.

STATE OF Wisconsin }  
COUNTY OF Vernon } SS.

NOTE.—For testimony of employers or near neighbors of soldier, (other than relatives) who have known him before his enlistment or since his discharge and return from the army.

NOTE.—The witnesses, if not themselves equal to the task of drawing the affidavits, should go to some Notary Public, Justice of the Peace, or other officer or competent person, and have the blank filled out and properly executed.

### INSTRUCTIONS.

Read Carefully.

The witnesses must state :  
1st. Their respective ages and occupations ; the length of time they have known the soldier, and in what year or years of the said period they have employed, worked with, or for, him, or lived in the same neighborhood with him.

2nd. If they knew him before his enlistment, what his physical condition was at the time, and that he was then sound and free from disability, and especially free from the diseases which caused the soldier's death—naming the disease.

3rd. If they have employed, or worked with, the soldier since his return from the army, they should state where it was and at what business, or if they have known him as neighbors only, they should state about what distance from him they lived ; how frequently, on an average, each week month or year, they saw him and conversed with him, and how intimate they were with him during this time, and from what disease or disability he has suffered during all the time they employed him, worked with him, or lived near him and how severely ; whether at any time during this period he was obliged to stop work, was confined to his bed or house, or was wholly unable to do any manual labor because of his alleged disabilities, and give dates as near as recollected when such attacks occurred and how long they lasted, and how severe they were. In this connection, if the witnesses have been his employers, or have worked with or for the soldier, they should state about what proportion of a sound able-bodied man's work he was able to do—whether one-fourth, one-third, one-half, two-thirds, three-fourths, or as the case may have been ; what his actual earnings were, and whether or not the wages paid him were less in amount, and how much less on account of his inability to labor, than were paid to others physically sound and doing the same kind of work. They should

In the matter of Pension claim Claim No. \_\_\_\_\_  
of French B. White  
ON THIS 25<sup>th</sup> day of March, A. D. 1890, personally appeared before me a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Gilbert D. Taylor aged 46 years, a resident of Wheatland, in the County of Vernon and State of Wisconsin, whose post-office address is W. Soto Wisconsin

well known to me to be respectable and entitled to credit, and who, being duly sworn, declares in relation to the aforesaid case as follows : That I have been well and personally acquainted with French B. White of Retreat for about 20 years, I have lived neighbor to him & worked with him & for him & he was always complaining more & less of Chronic Diarrhea & Rheumatism while I was with him that is he claimed that was what ailed him he often had to stop work on account of pain in his arms & shoulders caused by Rheumatism I hardly ever see him but he is complaining, I was not acquainted with him before the war, therefore could not say as to his health before I knew him but I know he has suffered a great deal since I do not think he could do any hard labor as a healthy man he has always claimed he was entitled to a pension but neglected to file a claim

Of course I could not say positively as to what ailed him not being a physician & could not be certain that he was entitled to a pension

Blank is prepared by, and for the exclusive use of, CHARLES J ALDEN, La Crosse, Wis.

Return all blanks not needed in this case to CHARLES J. ALDEN, La Crosse, Wis.

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NOTE.—The witnesses, if not themselves equal to the task of drawing the affidavits, should go to some Notary Public, Justice of the Peace, or other officer or competent person, and have the blank filled out and properly executed.

INSTRUCTIONS.

Read Carefully.

The witnesses must state :

1st. Their respective ages and occupations ; the length of time they have known the soldier, and in what year or years of the said period they have employed, worked with, or for, him, or lived in the same neighborhood with him.

2nd. If they knew him before his enlistment, what his physical condition was at the time, and that he was then sound and free from disability, and especially free from the diseases which caused the soldier's death — naming the disease.

3rd. If they have employed, or worked with, the soldier since his return from the army, they should state where it was and at what business, or if they have known him as neighbors only, they should state about what distance from him they lived ; how frequently, on an average, each week month or year, they saw him and conversed with him, and how intimate they were with him during this time, and from what disease or disability he has suffered during all the time they employed him, worked with him, or lived near him and how severely ; whether at any time during this period he was obliged to stop work, was confined to his bed or house, or was wholly unable to do any manual labor because of his alleged disabilities, and give dates as near as recollected when such attacks occurred and how long they lasted, and how severe they were. In this connection, if the witnesses have been his employers, or have worked with or for the soldier, they should state about what proportion of a sound able-bodied man's work he was able to do—whether one-fourth, one-third, one-half, two-thirds, three-fourths, or as the case may have been; what his actual earnings were, and whether or not the wages paid him were less in amount, and how much less on account of his inability to labor, than were paid to others physically sound and doing the same kind of work. They should also state how they are able to say what his disabilities have been and are now, and they should describe fully and clearly the symptoms as they appear to them in his case ; in fact describe his physical condition fully during each year of their acquaintance with him,—the date and immediate cause of the soldier's death.

In the matter of Pennairn Chama Claim No. \_\_\_\_\_  
Branch B. White  
of \_\_\_\_\_  
ON THIS 75<sup>th</sup> day of March, A. D. 1890, personally appeared  
before me a Notary Public in and for the aforesaid County, duly authorized to  
administer oaths, Silas D. Taylor, aged 46 years, a resident  
of Wheatland, in the County of Vernon and State of  
Wisconsin, whose post-office address is Wg Soto Wisconsin

well known to me to be respectable and entitled to credit, and who, being duly sworn, declares in relation to the

aforesaid case as follows : That I have been well and personally acquainted with French B. White  
of Retrol for about 20 years, I have lived  
neighbor to him & worked with him & for him  
& he was always complaining now & then of  
Chronic Diarrhea & Rheumatism. While I was  
with him that is he claimed that was what  
ailed him he after had to stop work  
on account of pain in his arms & shoulders  
caused by Rheumatism I hardly ever see him  
but he is complaining, I was not acquainted  
with him before the war, therefore could not  
say as to his health before I knew him  
but I know he has suffered a great deal  
since I do not think he could do any  
hard labor as a healthy man he has always  
claimed he was entitled to a pension but  
neglected to file a claim

Of course I could not say positively as to  
what ailed him not being a Physician I  
would not be a competent judge but that is  
what he called it to me

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*he* further declares that *he has* no interest in said case and *is* not concerned in its prosecution.

*Silas P. Taylor*

[If affiants sign by mark, two persons who can write sign here.]

[Signatures of affiants.]

State of *Wisconsin* County of *Vernon* 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 nowise 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.

*James H. Rogers*  
[Official signature.]

*Notary Public long on file at*  
[Official Character.] *Pennington office*

[L. s.]

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 thereunto is genuine

Witness my hand and seal of office, this \_\_\_\_\_ day of \_\_\_\_\_, 18\_\_\_\_

[L. s.]

Clerk of the \_\_\_\_\_

*Oct 6/34*

Additional Evidence

CLAIM OF

*French B. White*

*4 / Ohio H. Galt*

AFFIDAVIT OF

No. *722888*

*B*



FILED BY CLAIMANT'S ATTORNEY,

CHARLES J. ALDEN,

U. S. PENSION CLAIM AGENT

AND WAR CLAIM ATTORNEY,

La Crosse, Wis.