

Proof of Disability.

TO BE EXECUTED BY A COMMISSIONED OFFICER, ORDERLY SERGEANT, OR TWO COMRADES OF THE SOLDIER'S COMPANY AND REGIMENT, HAVING PERSONAL KNOWLEDGE OF THE CIRCUMSTANCES UNDER WHICH THE DISABILITY WAS INCURRED, ON ACCOUNT OF WHICH PENSION IS CLAIMED. IF POSSIBLE GET THE EVIDENCE OF A COMMISSIONED OFFICER OR ORDERLY SERGEANT, BUT IF IT IS NOT POSSIBLE TO SECURE SUCH EVIDENCE, THEN GET THE AFFIDAVITS OF TWO OR MORE COMRADES.

State the nature of the wound or injury received, and in what part of the body located; or the name and nature of the disease or disability incurred. State what caused the disability, and upon what particular duty the soldier was engaged at the time it was incurred. If on special duty, by whose order was he acting. If the injury was a rupture, be particular to state its location, and whether you saw it at the time of, or immediately after, its occurrence, or at any time while in the service. State whether you saw him at the date of, or immediately previous to, discharge; also when, where and whether the disability named then existed. State whether the soldier was in sound bodily health, and especially free from the disabilities upon which claim for pension is based, at the time he enlisted, and immediately preceding the date of incurring his disabilities. State your source of information, whether present at the time and place, and an eye-witness to the facts related. If in command of company when the disability was incurred, so state.

Before filling in this affidavit, the witness should read carefully the instructions, and conform thereto in every particular, as far as his knowledge of the facts will allow.

If possible, this affidavit should be in the hand-writing of affiant; if not, the affiant should state the reasons why.

Prepare your statement on a separate sheet of paper, correct it carefully, and then transfer it to this blank.

State of Ohio County of Athens SS

In the matter of the Pension Claim of French B White

Co. I 1st Reg't C H A Vols., personally came before me,

a notary public in and for the aforesaid County and State,

Wm H Lefever
(Name of affiant)

of Trimble County of

Athens State of Ohio, who, being duly sworn, declares

in relation to the aforesaid claim that his age is 47 years; that he is the identical person who served as a

private in Co. I 1st Reg't C H A

Vols., and knows the above soldier, who was a member of Co. I 1st Reg't C H A

that on or about the 5th day of July, 1863, while in the line of duty, and without fault

or improper conduct on his part, at or near Haxington State of

Kentucky, said soldier incurred Chronic Diarrhea

(Here state the time and manner in which the wound or other injury was received.)

then in January 1864 said French B White

had a government team to Point Isabel on

the Cumberland river, where he took very

sick with chronic diarrhea, where he was

left by his company and I did not expect

to see him alive again. Then the regiment

marched across the mountains to Knoxville Tenn

and said French B White joined us there in

March or April 1864, and continued with

the regiment till July 1865 when we were

sent out. He had chronic diarrhea

nearly all the time after he joined us at

Knoxville in the spring of 1864 till he was

sent out.

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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REPRODUCED AT THE NATIONAL ARCHIVE

Before filing in this affidavit, the witness should read carefully the instructions, and conform thereto in every particular, as far as his knowledge of the facts will allow.

If possible, this affidavit should be in the hand-writing of affiant; if not, the affiant should state the reasons why.

Prepare your statement on a separate sheet of paper, correct it carefully, and then transfer it to this blank.

State of Ohio County of Utters ss

In the matter of the Pension Claim of French B White

Co. I 1st Reg't C H A Vols., personally came before me,

a notary public in and for the aforesaid County and State,

Wm H Leffever (Title of officer administering oath)

(Name of affiant) of Trimble, County of Utters, State of Ohio, who, being duly sworn, declares

in relation to the aforesaid claim that his age is 44 years; that he is the identical person who served as a

private in Co. I 1st Reg't C H A

Vols., and knows the above soldier, who was a member of Co. I 1st Reg't C H A

that on or about the fall of day of 1863, while in the line of duty, and without fault

or improper conduct on his part, at or near Lexington, State of

Kentucky, said soldier incurred Chronic Diarrhea

(Here state the time and manner in which the wound or other injury was received.)

then in January 1864 said French B White

Describe the wound or injury, the part of the body wounded or injured, and all the circumstances attending it. If sickness, state time and place when contracted, what caused it, the name of the sickness, and how it affected him. All facts known to affiant relative to soldier's medical treatment for his disability while in the service should be stated, giving time and place, if possible.)

drove a government team to Point Isabel on the Cumberland river, where he took very

sick with chronic diarrhea, where he was

left by his company and I did not expect

to see him alive again. Then the regiment

marched across the mountains to Knoxville Tenn

and said French B White joined us there in

March or April 1864, and continued with

the regiment till July 1865 when we were

mustered out. He had chronic diarrhea

nearly all the time after he joined us at

Knoxville in the spring of 1864 till he was

mustered out in July 1865. After that he went

to Wisconsin and I have not seen him

since. I was raised in the same neighborhood

with him and knew him to be strong and

healthy till after he went into the army

That the facts stated are personally known to the affiant by reason of his being in the

(Here state whether affiant was with the company at the time the

claimant contracted his disability, or whether his knowledge was otherwise obtained. eye witness to the

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