

CLAIMANT'S TESTIMONY.

— 20: —

State of Maryland, County of Anne Arundel, ss.

In the matter of the application for Pension

of _____ personally comes the claimant, who

being first sworn on oath, says: I have not been shipped either in Land or Naval Service since Sept. 1865

I have merely been hired to work at the experiments Battery near Annapolis under Capt. Masbury

My Post Office address is 45 West St. Annapolis State of Maryland
County of Anne Arundel

When signed by mark, two Witnesses. George Harold
Car McGraw John L. Lucas (Signature)

Subscribed and sworn to before me, this 17th day of June 1891. The affiant is the person.....represents.....himself to be and a credible witness. I certify that I read said affidavit to said affiant and acquainted him with its contents before.....he executed the same. I am not interested in this claim. Witness my hand and seal the day and year above written.

Car McGraw (Official Signature) [SEAL]

Signature signature on file in the Pension Office

3-173.

O. M. W.
Div.
Cert. No. 13899.
Horace Lucas
Co. _____ Reg't _____

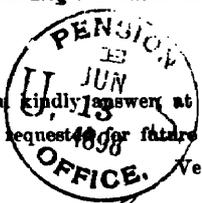
E. M. A.
Es'r.

Department of the Interior,
BUREAU OF PENSIONS,

Washington, D. C., *June 4*, 189*8*.

Sta:

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. Horace Lucas
72 Cathedral St
Annapolis Md

Commissioner.

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

Answer: *Yes - Elizabeth Lucas - Elizabeth Brown*

No. 2. When, where, and by whom were you married? Answer:

28th January 1869 - Annapolis, Md, Rev. Samuel Cooper

No. 3. What record of marriage exists? Answer:

Certificates

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

No. 5. Have you any children living? If so, please state their names and the dates of their birth. Answer: *Yes - 5 co, Mattie Lucas born 14th*

January 1870 - Emma Lucas born July 16th 1871.

Date of reply, *11th June*, 189*8*.

Horace Lucas
per [unclear]

Horace Lucas
(Signature)

BUREAU OF NAVIGATION
 230620
 AUG 23 1900
 DEPARTMENT OF THE INTERIOR

Department of the Interior,
 BUREAU OF PENSIONS,

Aug 21, 1900

Requests descriptive list and history of
 service of *Horace Lucas*
 in claim No. *13899*

BUR. OF PENS.
 DEPARTMENT OF THE INTERIOR
 NOV 1 1907

No. 230620

ENDORSEMENT.



August 21, 1900

Respectfully returned to the Commissioner of Pensions with the statement that the records of this Bureau show that Horace Lucas enlisted at Navy Yard Washington Oct. 3, 1861 as 1st Class Boy for one year and served at Navy Yard, Washington and on board "Herrick Line" to January 1, 1863 when that vessel was captured. Discharged from Vermont Sept. 18, 1865

W. C. ...
 Chief of Bureau.
 Further correspondence in this case requires the return of these papers.

Div.

In. 13899

Horace Lucas

U.S. Army

Department of the Interior,

BUREAU OF PENSIONS.

Washington, D. C., Aug 29, 1905

Sir: To aid this Bureau in preventing any one falsely personating you, or otherwise committing fraud in your name, or on account of your service, you are required to answer fully the questions enumerated below.

You will please return this circular under cover of the inclosed envelope which requires no postage.

Very respectfully,

Mr Horace Lucas
72 Cathedral St.
Annapolis, Md.

V. Warner

Commissioner.

1. When were you born? Answer. Nov 1845
2. Where were you born? Answer. King's County, N.Y.
3. When did you enlist? Answer. second day of Oct 1861
4. Where did you enlist? Answer. at Washington D.C.
5. Where had you lived before you enlisted? Answer. had not intitled before
6. What was your post-office address at enlistment? Answer. Washington D.C.
7. What was your occupation at enlistment? Answer. 1 class B.C.
8. When were you discharged? Answer. 10 Day of September 1865
9. Where were you discharged? Answer. at Brooklyn New York
10. Where have you lived since discharge? Give dates, as nearly as possible, of any changes of residence.
Annapolis Md
11. What is your present occupation? Answer. carpenter
12. What is your height? Answer. 5 feet 3 inches. Your weight? 150
The color of your eyes? Brown The color of your hair? White Your complexion?
Are there any permanent marks or scars on your person? If so, describe them.
no marks at all
13. What is your full name? Please write it on the line below, in ink, in the manner in which you are accustomed to sign it, in the presence of two witnesses who can write.

Horace Lucas

1. Charles W. Wooten

2. Charles A. Wooten

Date: September, 1905

[Witnesses who can write sign here.]



3-014.

ACT OF FEBRUARY 6, 1907.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Maryland }
County of Charles } ss.

On this 29th day of May, A. D. one thousand nine hundred and seven, personally appeared before me, a Justice of the Peace within and for the county and State aforesaid, Isaac Lucas, who, being duly sworn according to law, declares that he is 37 years of age, and a resident of Indian Head county of Prince Georges, State of Maryland; and that he is the identical person who was ENROLLED at Washington, D. C. under the name of Isaac Lucas, on the 2nd day of October, 1861, as a first class boy, in U. S. Navy.

in the service of the United States, in the Civil war, and was HONORABLY DISCHARGED at Brooklyn, N.Y. on the 19th day of September, 1865. That he also served several U.S. Steam Vessel Service.

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 3 inches; complexion, light brown; color of eyes, brown; color of hair, dark; that his occupation was Stage Wailer; that he was born King George Co. Va. 1843.

That his several places of residence since leaving the service have been as follows: Annapolis Md., Camp Head of Maryland, Indian Head Md., Annapolis Md.

That he is a pensioner. That he has heretofore applied for pension his pension number is 13899.

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 Indian Head, county of Charles, State of Maryland.

Attest: (1) Henry P. Beaumont, Justice of the Peace, Charles County, Md. (2) Francis O. White, Justice of the Peace, Charles County, Md.

Also personally appeared Francis O. White, residing in Indian Head and Charles White, residing in Indian Head, 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 Isaac Lucas, 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 30 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.

Signatures of witnesses: Francis O. White, Charles White.

Validity accepted S. A. Cuddy, Chief, Law Division, per JTH 6 28 07

and sworn to before me this 29th day of May, A. D. 1907, 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, and the words, added; and that I have no interest, direct or indirect, in the prosecution of this claim.

Notary Public, S. A. Cuddy, Chief, Law Division, Office.

Signature of Justice of the Peace: Henry P. Beaumont, Justice of the Peace.

Official character: Justice of the Peace.

Department of the Interior, BUREAU OF PENSIONS, Washington, D. C., June 10 1907.

In the above entitled claim for pension the genuineness of the signature of Henry P. Beaumont, and his official character on May 29, 1907, as a Justice of the Peace for the County of Charles, should be attested by the clerk of the county, or of a court of record, or by the officer whose duty it is to keep the records. The certificate should be on the blank at the foot hereof, and must bear the impress of the seal of the county, court, or attesting officer. When received it will be placed on file for future reference, so that persons filing papers executed before the officer named above during his term of office may refer thereto, thus avoiding the necessity of filing a certificate in each case. If for any reason a complete certificate can not be furnished, you should so state, returning this circular.

A reply within thirty days is requested. Very respectfully, Isaac Lucas, Commissioner.

PENSION DIVISION JUN 11 1907

3-364.

Original No. _____

Certificate No. 13899

13899

ACT OF FEBRUARY 6, 1907.

Reissue

Claimant, Norace Lucas
 P. O., Indianheads
 County, Charles
 State, Maryland
 Rate, \$ 2 per month, commencing June 7-1907.

Rank, First-Class Boy
 Company, U. S. S. Harriet Lane of Vermont
 Regiment, U. S. Navy

STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name, None
 P. O., _____

APPROVAL.

Submitted for admission November 9, 1907, A. Pope, Examiner.
 Approved for admission.

Edge over 62;
Rate \$12 per month.

Reissue to allow under Act of February 6, 1907.

Deduct sub payments and drop name from rolls under Act of June 27, 1890;
Nov. 14, 1907, V. M. Tucker, Legal Reviewer. Nov. 15, 1907, J. A. Paul, Re-Reviewer.

Enlisted October 3, 1861; honorably discharged September 17, 1865
 Enlisted _____, 18; honorably discharged _____, 18
 Enlisted _____, 18; honorably discharged _____, 18
 Pensioned at \$ 6 per month, under act of June 27, 1890.

PRESENT CLAIM, ACT OF FEBRUARY 6, 1907.

Declaration filed June 7, 1907
 Date of birth alleged, 1843
 Age shown by evidence 62 Record shows born in 1844 years.
Has hitherto stated that he was born in July 1845.
 Claimant does not write.

J. E. Mudd, M. C.

DROPPED FROM ROLL
MAY 1895
Not ratable under Act June 27 1890

Oct 17/96. Cert of 411. 3. 4. 1898
A Reg of Renewal
June 8, 1899 club & ally Co
Boston & Co. id. of Co.
rest under act of June 27 1890

Aug 30/90.
Removal of War. for full
med & Hamlet history
J. C. Law

Aug. 21, 1900. Auditor for
payments since March, 1899
W. S. Law

Oct. 30, 1900. 6 vouchers + 6 checks
Treasury.
April 18/06 club & ally getting
notice of Reg of the Reg

INVALID. (Series) Cert. No. 10899
13.899



Name, Horace Lucas
Rank, 1st. Lieut. U.S. Army; Service, Vermont

Original roll: Washington
Agency: Trans of a
DEAD.

Issued Oct. 15, 1891
Mailed 27, 1891
Rate and period, \$ 6., from Aug. 8, 1890
Action complete
by Board of Revision.
Deductions: Rev.
Disability: Rheumatism

Issued "May 20", 1891
Mailed " 26 ", 1891
Rate and period, \$ 6.00, from Sept. 26, 1890
Deductions:
Disability: Partial inability to earn support of manual labor.

Issued Nov. 16, 1897
Mailed NOV 18 1897
Rate and period, \$ 12., from June 7, 1890
Act of Feb. 6, 1907.

Deductions: 0
Disability: a June 13 1909
ALL FOR ADVANCE OF MONTH
W. V. H.
Issued , 189
Mailed , 189
Rate and period, \$, from , 188

Deductions:
Disability:

INDORSEMENTS.

June 22. Letter of Reg of June
Club & Ally's. H. & Co. 1890.
to drop, sent to H. & Co.
May 1, 95. P. to drop Auditor.
G. J.

Issue. Class. Chief
Entered
Issue. Class. Renewal
Entered

INVALID PENSION.

REISSUE TO ALLOW UNDER "GENERAL LAW."

Pensioner, *George C. Miller* Af 538719
 P. O., *Annapolis* Rank, *Pair*
 County, *Anne Arundel* Company,
 State, *Maryland* Regiment, *50th U.S. Inf*
 Rate, \$ _____ per month, commencing *Feb 19, 1890* ✓

REJECTED

RECOGNIZED ATTORNEY.

Name, *Chas. J. Donnelly & Co.* Fee, *25.00*; Agent to pay.
 P. O., *City* Articles filed *March 17, 1890* ✓

APPROVALS.

Approved for *shell wound left hip and results*
 Submitted *July 29, 1890* Examiner, *J. H. Levere* ✓
 Approved for *shell wound left hip*
 Supplemental to allow under general law pension to cease July 27, 1890, by reason of allowance of claim under Act of June 27, 1890. *no disability since filing.*

Legal Reviewer *Frank* Med. Ex'r. *W. A. ...* Med. Reviewer.
 Re-Reviewer. *Feb 13, 1890*

HISTORY OF CLAIMS AND FORMER ACTION.

Enlisted *Feb 23, 1864* Last paid to \$ _____
 Discharged *May 27, 1865*
 Pensioned from *July 28, 1890* at \$ *6.00* under the Act of June 27, 1890, for *rheumatism*

In declaration filed *July 28, 1890* under Act of June 27, 1890, alleged *shell wound of left hip*

Declaration filed *Nov 11, 1890* alleged *rheumatism and shell wound of left hip*

PRESENT CLAIM.

Declaration filed *Feb 19, 1890* under general law *shell wound of left hip in front of Petersburg, Va. July 30, 1864.*

DECLARATION FOR AN ORIGINAL INVALID PENSION.

This must be Executed before a Court of Record or some Officer thereof having custody of the Seal.

State of *Maryland* County of *Anne Arundel*:

On this *5th* day of *February* A. D. one thousand eight hundred and *eighty-six* personally appeared before me *Black* of the *Circuit Court* a Court of Record within and for the county and State aforesaid *George C. Miller* aged *48* years, who, being duly sworn according to law, declares that he is the identical *George C. Miller* who was ENROLLED on the *24* day of *Feb* 18 *64* in company *D* of the *30* regiment of *U.S. Inf* commanded by *Capt. Whistler* and was honorably DISCHARGED at *Alexandria Va* on the *27* day of *May* 18 *65*. That his personal description is as follows: Age *48* years; height *5* feet *2* inches; complexion *black* hair *black*; eyes *black*. That while a member of the organization aforesaid in the service and in the line of his duty at *Petersburgh* in the State of *Va.* on or about the *30* day of *July* 18 *64* he received *a wound* Here state name or nature of disease, or the location of wound or injury. If disabled by disease, state fully its cause; if by wound or injury, the precise manner in which received.

That on the 30th of July my company "D" was marching toward Petersburg when a shell exploded on my left and a piece of it struck me on its left hip making a flesh wound. I was felled and covered with dirt and lay there senseless until I came to in the City Point Hospital.

That he was treated in hospitals as follows: *General hospital at City Point, Va. from thence to General hospital at Alexandria Va.* Here state the names or numbers, and the localities of all hospitals in which treated, and the dates of treatment.

That he has *not* been employed in the military or naval service otherwise than as stated above. Here state what the service was, whether prior or subsequent to that stated above, and the dates at which it began and ended.

That he has not been in the military or naval service of the United States since the *27* day of *May* 18 *65*. That since leaving the service this applicant has resided in the County of *Anne Arundel* in the State of *MD.* and his occupation has been that of a *Systeman*. That prior to his entry into the service above named he was a man of good, sound physical health, being when enrolled a *farmer*. That he is now

disabled from obtaining his subsistence by manual labor by reason of his injuries above described, received in the service of the United States; and he therefore makes this declaration for the purpose of being placed on the invalid pension roll of the United States. He hereby appoints, with full power of substitution and revocation, *Chas. J. Donnelly & Co., Successors to*

Thomas J. McElhenny, of Washington, D. C.,

his true and lawful attorney to prosecute his claim. That he has *not* received *not* applied for a pension; that his residence is No. *6* *McPleasant* street

Annapolis Md. and that his post office address is *St. Anne's*
Daniel Price
Nathan Ross
 (Two witnesses who can write signs here.)

Annals 1864
Mr Ramm

Dear Sir, my
No. 756564 when I first
came home I live in
Warren ^{street} and the second
place I lived was in
Blacken street there was no
numbers then and the
third place was on Colled
ave and it had no number
and the 4th place was on
North west street, North E-
pleasant street is the
last place and I am
living there now I
was wounded in the
left side on the 30th day
of July 1864 since then

REPRODUCED AT THE NATIONAL ARCHIVES

REPRODUCED AT THE NATIONAL ARCHIVES

my whole left side has
been affected and I
am also affected in the
kidney my first doctor
since coming home
was Dr Washington Gluck
but Master General my
second was Dr Wm Bishop
my third was Dr Thompson
Dr Tyck lives on State
circle Dr Bishop lives on
cornhill street Dr Thompson
lives on main street my
occupation has been
hard crabs in the
summer in the winter
when I am able I work
after as a diver my
earnings was not really
5,000 a year the whole
summer (I was not able
to work on the account

of my disability my
master has been
annoyed every since
I left the service

reply to call No 13

Geo Miller
Company D. 30th
United States reg-



PROOF OF DISABILITY.

NOTE: The applicant must be executed by a Commissioned Officer, if possible, but, if not possible to secure such evidence, then two of the soldiers comrades may testify.

County of Maryland State of Maryland, ss:
ON THIS 2nd day of March A. D. 1890 personally appeared before me, a

Justice of the Peace in and for the aforesaid County, duly authorized to administer oaths,

James M. Allen aged 65 years, a resident of Annapolis

in the County of Anne Arundel and State of Maryland aged _____ years, a resident of _____

in the County of _____ and State of _____ who being

duly sworn according to law, state that he is acquainted with George C. Miller

applicant for Invalid Pension, and know the said George C. Miller to be the identical

person of that name who enlisted or volunteered as a private in Company D. 30th

Regiment of U. S. C. & V. vols., and who was discharged at Jackson's Hospital on or about _____ day of _____ 1864

by reason of _____

[Here insert the reason of soldier's discharge, if known; if not known, so state; or, if he died, so state.]

That the said George C. Miller while in the line of his duty, at or near Petersburg Va

in the State of Virginia did, on or about the 30th day of July, 1864, become disabled in the following manner, viz:

By explosion of a shell and Miller was

wounded in the right hip, whereby he was disabled and sent to Hospital at City Point Va, and thence to Wagon and then to

Army Hospital, where he was finally dis-

charged.

That the facts stated are personally known to the affiant, by reason of I was Orderly Ser.

[Here state whether affiant was with the command at the time the claimant contracted his disability, or whether his knowledge was otherwise obtained. All the facts known to the affiant relative to the soldier's medical treatment for his disability while in the service should be stated, giving time and place if possible.]

George C. Miller and know from personal observation at the time

that he was treated for his disability while in the service

and that he was not permitted to return to duty with us

by reason of his wound

DR: 8
80007

No. 756564

WAR DEPARTMENT,
RECORD AND PENSION DIVISION.

Respectfully returned to the Commissioner of Pensions.

George C. Miller

Co. D. Reg't 30 M.A.C.V.

was enrolled July 23 1864

and W. O. Miller May 27 1864

at Wagon P. O. for 90 77

25.0 Apr 2 1865

Name George C. Miller

has not been found on

roll of C. O. 30 M.A.C.V.

From Feb 23 1864, to Oct 31 1864

he held the rank of Private.

Write nothing to the left of this line.

and during that period the rolls show him present except as follows:

Aug. 31. 64 Present in Am.

Stripler Regiment since

July 20th 64 came to get

with 1 Co. in a company

must return in 90 days

(they receive pay for

nothing additional during

upon the rolls

The medical records show him treated as follows: As Serge Miller to

wounded, Sept Shenandoah Shanty

shall at the battle of Petersburg

Nov. July 30th. Grant Aug. 30th

6th. W. I. 45 M. Aug 6 to

Dec 7th. Wagon P. O. 77

Rank + pay 2 to Major's

ranked full general of 1877

at 40

Nothing additional from

By authority of the Secretary of War:

George C. Miller

Captain and Asst Surgeon, U. S. Army

Date Feb 5 1890

(COMMISSIONER OF PENSIONS.)

PHYSICIAN'S AFFIDAVIT.

TAKE NOTICE.—The affidavit should, if possible, be in the handwriting of the affiant; the marginal instructions must be carefully observed before writing out the statement. All the facts in possession of affiant as to the origin and continuance of the disability should be fully set forth, and the dates of treatment should be specially given. If the affidavit is prepared from memoranda in possession of the physician, that fact should be stated.

And deponent further state that *he is* well acquainted with the claimant, having known him for at least *thirty* years, and further, that *his* knowledge of the facts above stated *is* derived from said acquaintance, and from having served as *Officer* of Company *D* of the *20th* Regiment of *N.C.I.* volunteers, from the day of *February* 1867 to the day of *December* 1865. And deponent further state that claimant was a sound and able-bodied man at and prior to enlistment, so far as *he* knew, and that *he is* totally disinterested in this claim.

Post-office address of affiant is *No 4 White Row, Annapolis Anne Arundel County, Md Maryland*
James M. Allen (Signature of affiant.)
STATE OF *Maryland* COUNTY OF *Anne Arundel*

State of *Maryland* County of *Anne Arundel*, ss:

In the pension claim No. _____ of *George E. Miller* late of *Company D, 36th Reg Colored Troops* (Company and regiment of service, if in the Army; or vessel and rank, if in the navy.)

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 creditable person.

Personally came before me a *Justice of the Peace* in and for the aforesaid county and State, *W. G. Cook* Magt., a citizen of *Maryland* whose post-office address is *Annapolis Maryland* well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to aforesaid case as follows:

[L. S.] _____ (Official Signature.)
Justice of the Peace (Official Character.)

That he is a practicing physician, and that he has been acquainted with said soldier for about *thirty* odd years and that *the said George E. Miller was a slave*

_____, Clerk of the County Court in and for aforesaid County and State, do certify that _____ 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; and that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

(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.)

Witness my hand and official seal of office this _____ day of _____ 18____.

NOTES.
The Physician's Affidavit must show the following facts: (1) Whether or not the soldier was to enlistment; (2) length of time he has known him; (3) intimately acquainted with the soldier; (4) at opportunity he has had of observing his physical condition, whether as a neighbor or as a neighbor; (5) how long he has lived to him; (6) whether he knew that the soldier was a soldier at enlistment; (7) should so state if true; (8) if he has been in the service of the claimant while in the military service; (9) if he was a surgeon or while the claimant was home on furlough; (10) if he should be treated; (11) the claimant's physical condition at such times; (12) as well as the date of treatment; (13) if he has treated the soldier since discharge; (14) giving the nature of his condition at the time of the discharge; (15) the period during which he attended him should be stated, with the extent or nature to which the claimant has been unable to perform manual labor during each year from the date of his discharge to the present time; (16) if the case may be, the nature of the disability.

belonging to my father at the time of his enlistment in the Army, and at that time this Soldier was perfectly sound and in good health - if otherwise I would have known it. I did not treat him while in the Army at any time. I have prescribed for him several times for Rheumatism - this trouble is the result of a wound at the left hip joint from a splinter from a shell and exposure attending a Soldiers life. His disability is a bout 3/4 hours. This affidavit was written by myself on the 2nd day of October 1893 at Annapolis, Maryland and I was not aided or prompted by any written or printed statement or report prepared or dictated by any person and not attached as an exhibit to my testimony.

[L. S.] _____ 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 OF THE PEACE, then CLERK OF COUNTY COURT must add his certificate of character hereon, and not on a separate slip of paper.

ADDITIONAL EVIDENCE.

PROOF OF DISABILITY.

CLAIM OF *George E. Miller, Co. D "30th Regt."*

FILED BY *CHARLES J. DONNELLY & CO., ATTORNEYS, WASHINGTON, D. C.*

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

WASHINGTON, D. C., January 2, 1916.

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

Very respectfully,

G. C. Miller
Commissioner.

GEORGE C. MILLER,
66 CLAY ST.,
538719 ACT MAY
ANNAPOLIS, MD.

Annapolis, Md. *March 1* 1916

Mrs. *Amie M. Blackman*
Wife of

Mrs. E. H. B. Parker & Son
Funeral Directors

92 WEST STREET

ANNAPOLIS MD.

Phone 645 M

For Burial of her Father
Mrs George C Miller
Casket & Box
Embalming
Suits Burial Suit
Hears
5 Carriages
Grave Shaving
Receive Payment
E. H. B. Parker & Son

MAR 28 1916
OFFICE

10.00
8.00
6.00
15.00
4.50
31.50

Recd from
Annapolis March 9/1916
Mrs Amie Blackman
4.50 for grave of her father
Mrs Geo Miller
Capt and captain

MAR 28 1916
U. S.

FOLD HERE.

FOLD HERE.

FOLD HERE.

No. 1. Date and place of birth? Answer. *Anna arundel County Maryland 1844*
The name of organizations in which you served? Answer. *Co. D 80 Regiment*

No. 2. What was your post office at enlistment? Answer. *Annapolis MD*

No. 3. State your wife's full name and her maiden name. Answer. *Maiden Name Catherine Ross*

No. 4. When, where, and by whom were you married? Answer. *on 25 of March 1869 by
Rev Daniel Draper minister*

No. 5. Is there any official or church record of your marriage?
If so, where? Answer.

No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her death or divorce. If there was more than one previous marriage, let your answer include all former wives. Answer.

I was not his married but once and my only wife was Dearest

No. 7. If your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any military or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. Answer. *my wife was not married before her marriage to me*

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

No. 9. State the names and dates of birth of all your children, living or dead. Answer. *Jesse Miller was
Born July 13-1870 Dead William Miller Born June
17-1873 living Anne Miller Bleckton living
Born August-17-1876 Charles Miller Dead
was Born Oct-13 1878 George Miller Junior was
Born March 14-1882 living*

FOLD HERE.

READ LAW AND INSTRUCTIONS ON BACK OF THIS BLANK BEFORE USING IT.

3-044

APPLICATION FOR REIMBURSEMENT.

(This application, when properly executed before some officer having authority to administer oaths for general purposes, should be forwarded, together with the pension certificate and itemized bills of all expenses, to the Commissioner of Pensions, Washington, D. C.)

STATE OF Maryland COUNTY OF Anne Arundel

On this 2th day of March, A. D. one thousand nine hundred and 16 personally appeared before me, a Notary Public within and for the County and State aforesaid, Amie C. Blackston, aged years, a resident of Annapolis, County of Anne Arundel, State of Maryland, who, being duly sworn according to law, makes the following declaration in order to obtain reimbursement from the accrued pension for expenses paid (or obligation incurred) in the last sickness and burial of George Miller, who was a pensioner of the United States by certificate No. 538,719, on account of the service of George Miller in Co. D. 30. Regiment United States Cavalry That pension was last paid to December 4, 1916

That the answers to questions propounded below are full, complete, and truthful to the best of my knowledge, information, and belief, and that no evidence necessary to a proper adjustment of all claims against the accrued pension is suppressed or withheld.

1. What was the full name of the deceased pensioner? George Miller who was a Private Co. D. 30. Regiment
2. In what capacity was decedent pensioned? (As invalid soldier or sailor, or as a widow, minor child, dependent relative, etc.)
3. If decedent was pensioned as an invalid soldier or sailor—
 - (a) Was he ever married? (Answer yes or no.) yes
 - (b) How many times, and to whom?
 - (c) If married, did his wife survive him? (Answer yes or no.) no
 - (d) If so, is she still living? (Answer yes or no.) no
 - (e) If not living, give full names and dates of death of all wives betty Miller died on the 16 of September 1898
 - (f) Was he ever divorced? (Answer yes or no.) no
 - (g) If so, is the divorced wife still living? (Answer yes or no.) no (If living, a copy of the decree of divorce must be filed.)
 - (h) If not living, give her full name and the date of her death she is not living died September 16 1898
4. Did pensioner leave a child under 16 years of age? (Answer yes or no.) no
5. Is any such child still living? (Answer yes or no.) no
6. Were any sick or death benefits paid on pensioner's account? If so, give name of society and amount paid none
7. Was there insurance (life, accident, or health) in force on life of pensioner at time of death? (Answer yes or no.) no
8. If so, give the name of each company in which a policy was carried and the amount in which each policy was written none at all
9. Who was the beneficiary named in each policy? none
10. What was the relation of each beneficiary to the pensioner?
11. Were the premiums paid by the deceased pensioner? none
12. If not paid by the deceased pensioner, state the amount of premiums paid by each person who made payment on that account none at all

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

W. H. K. Wick
[Affiant's signature. Give rank and service, if in the army.]

Sworn to and subscribed before me this 2nd day of October, A. D. 1896 and I hereby certify that the affiant is a practicing physician in good professional standing; that the contents of the above declaration, &c., 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.

W. H. K. Wick

Maryland State Archives Documents for the Classroom, MSA SC 2221-8-14

copy

MEDICAL EVIDENCE.

AFFIDAVIT OF M. D.

CLAIM OF Amie C. Miller

LATE OF Co. D. 30. Regt. United States Cavalry

FOR Survivors Pension

No. 538,719

FILED BY

CHARLES J. DONNELLY & CO., ATTORNEYS, WASHINGTON, D. C.

F. B. CLARSON, PRINTER, 101 Penn. Ave., Washington, D. C.

REPRODUCED AT THE NATIONAL ARCHIVES

6-1072

MAILED 24 1916

- 13. Is there an executor or administrator, or will application be made for appointment of any person as administrator? *no*
- 14. Did the deceased pensioner leave any money, real estate, or personal property? *none*
- 15. If so, state the character and value of all such property *none*
- 16. What was the assessed value (last assessment) of the real estate? *none*
- 17. How was the pensioner's property disposed of? *none*
- 18. Did pensioner leave an undorsed pension check? (Answer yes or no.) *no*
- 19. What was your relation to the deceased pensioner? *his daughter*
- 20. Are you married? (Answer yes or no.) *yes*
- 21. What was the cause of pensioner's death?
- 22. When did the pensioner's last sickness begin? *Feb. 20, 1914*
- 23. From what date did the pensioner become so ill as to require the regular and daily attendance of another person constantly until death?
- 24. Give the name and post-office address of each physician who attended the pensioner during last sickness
- 25. State the names of the persons by whom the pensioner was nursed during the last sickness
Annice Blackston No. 66 Clay St
- 26. Where did the pensioner live during last sickness? *No. 66 Clay St Annapolis Md*
- 27. Where did the pensioner die? *No. 66 Clay St*
- 28. When did the pensioner die? *March 1, 1914*
- 29. Where was the pensioner buried? *in the Brewers Hill cemetery*
- 30. Has there been paid, or will application be made for payment to you or any other person, any part of the expenses of the pensioner's last sickness and burial by any State, County, or municipal corporation? (Answer yes or no.) *no*
- 31. State below the expenses of the pensioner's last sickness and burial. Write the word none where no charge is made in case of any item of expense noted.

(Each charge entered below should be supported by an itemized bill of the person who rendered the service or furnished any supplies for which reimbursement is demanded, and should show, over his signature, by whom paid, or who is held responsible for payment, and contain the name of the pensioner for whom the expense was incurred or service rendered.)

NAME.	NATURE OF EXPENSES.	STATE WHETHER PAID OR UNPAID.	AMOUNT.
<i>Ambrose Garcia M.D.</i>	Physician <i>Visits</i>	<i>Unpaid</i>	<i>4 00</i>
<i>Rodney B. Williams M.D.</i>	Medicine <i>Visits</i>	<i>Phys & Q</i>	<i>1 50</i>
<i>Annice Blackston</i>	Nursing and care		<i>10 00</i>
<i>G. H. Parker</i>	Undertaker		<i>82 50</i>
	Livery		<i>21 00</i>
<i>Robt. M. Davis</i>	Cemetery <i>Brewers Hill</i>		<i>4 50</i>
	Other expenses and their nature:		
	TOTAL		

32. Is the above a complete list of all the expenses of the last sickness and burial of the deceased pensioner? (Answer yes or no.)

That my post-office address is No. *66* on *Clay* street, town or city of *Annapolis* County of *Anne Arundel* State of *Maryland*

(When the claimant for reimbursement is a married woman, she is required to sign the application with her own full name, not using the Christian name or the initials of her husband, and all bills should be receipted to her in her own name.)

Annice E. Blackston
(Claimant's signature in full.)

Also appeared *Chas. Wooten* and *Annie E. Brown* who, being duly sworn, say that they saw *Annice E. Blackston*, the claimant, sign *her* name (or make *her* mark) to this application; that they know the claimant herein and that their answers to the following questions are true:

- 1. Did pensioner (if a soldier or sailor) leave a widow or a minor child under age of sixteen years surviving? *none at all*
- 2. When did the pensioner die? *March 1, 1916*
- 3. Did pensioner leave any property? If so, state its character and value *none*
- 4. We knew pensioner _____ years. We believe above statements to be true because _____

Name *Annie E. Brown* Name *Charles H. Wooten*
P. O. Address *West Annapolis, Md.* P. O. Address *Annapolis, Md.*
Subscribed and sworn to before me, this *27th* day of *March*

A. D. 191*6*; and I certify that the contents of the foregoing application were fully made known and explained to the claimant and witnesses before swearing, that I have no interest, direct or indirect, in the prosecution of this claim, and I further certify that the reputation for credibility of the witnesses whose signatures appear above is *good*.

DECLARATION ACCEPTED AS A CLAIM UNDER THE ACT OF MARCH 2, 1898.

Joe Garner
(Signature)
Notary Public
(Official character)

CHIEF, LAWSTATEMENT OF ATTENDING PHYSICIANS.
PER *[Signature]*
Give date of the pensioner's death *March 1, 1916*
Give date of commencement of pensioner's last sickness *July 20, 1916*
From what date did the pensioner require the regular and daily attendance of another person constantly until death? *July 20*
During what period did you attend the pensioner? *July 24 to March 1*
State nature of disease from which pensioner died *Arterio Sclerosis*

Give name of each person who rendered service as nurse, and who has made or will make a charge for such service *Annice Blackston*

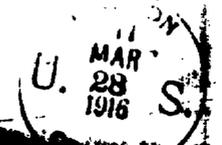
Give name of any other physician who attended the pensioner in last sickness *Dr R. B. Williams*

Does your bill include a charge for all medicine furnished the pensioner during last sickness? *Visits only*
Has your bill been paid; if so, by whom? *No*

Mention any other facts within your knowledge which in your opinion would be helpful in adjusting this claim for reimbursement:

I certify that the foregoing statement is correct.
March 24 1916
Mar 25 1916

Ambrose Garcia M.D.
Attending Physician
Rodney B. Williams M.D.
Attending Physician



APPLICATION FOR REIMBURSEMENT.

(This application, when properly executed before some officer having authority to administer oaths for general purposes, should be forwarded, together with the pension certificate and itemized bills of all expenses, to the Commissioner of Pensions, Washington, D. C.)

STATE OF Maryland
 COUNTY OF Anne Arundel

On this 11th day of June, A. D. one thousand nine hundred and seventeen
 personally appeared before me, a Notary Public within and for the County and State aforesaid,
Miss Kate Jasker aged 37 years, a resident of
Annapolis County of Anne Arundel, State of
Maryland, who, being duly sworn according to law, makes the following declaration in order
 to obtain reimbursement from the accrued pension for expenses paid (or obligation incurred) in the last sickness and burial of
George H. Jasker alias George Jasker, who was a pensioner of the United States by
 certificate No. 29751, on account of the service of United States as a Private
 in Co. H. 30. Regiment who was enrolled 11th day of Mar. 1864
(Describe when by company and regiment, etc., if in the Army, or by the words U. S. Navy, if in the Navy.)
 That pension was last paid to Captain J. H. 1914

That the answers to questions propounded below are full, complete, and truthful to the best of my knowledge, information, and belief, and that no evidence necessary to a proper adjustment of all claims against the accrued pension is suppressed or withheld.

1. What was the full name of the deceased pensioner? George H. Jasker alias George Jasker
2. In what capacity was decedent pensioned? (As invalid soldier or sailor, or as a widow, minor child, dependent relative, etc.)
as a Landsman from United States Discharged Sept. 4 1865
3. If decedent was pensioned as an invalid soldier or sailor—as a sailor
 - (a) Was he ever married? (Answer yes or no.) yes
 - (b) How many times, and to whom? Married once, Adeline Parnes
 - (c) If married, did his wife survive him? (Answer yes or no.) no
 - (d) If so, is she still living? (Answer yes or no.) no
 - (e) If not living, give full names and dates of death of all wives
 - (f) Was he ever divorced? (Answer yes or no.) no
 - (g) If so, is the divorced wife still living? (Answer yes or no.) no (If living, a copy of the decree of divorce must be filed.)
 - (h) If not living, give her full name and the date of her death

4. Did pensioner leave a child under 16 years of age? (Answer yes or no.) no
5. Is any such child still living? (Answer yes or no.) no
6. Were any sick or death benefits paid on pensioner's account? If so, give name of society and amount paid no
7. Was there insurance (life, accident, or health) in force on life of pensioner at time of death? (Answer yes or no.) no
8. If so, give the name of each company in which a policy was carried and the amount in which each policy was written
9. Who was the beneficiary named in each policy?
10. What was the relation of each beneficiary to the pensioner?
11. Were the premiums paid by the deceased pensioner?
12. If not paid by the deceased pensioner, state the amount of premiums paid by each person who made payment on that

13. Is there an executor or administrator, or will application be made for appointment of any person as administrator? no
14. Did the deceased pensioner leave any money, real estate, or personal property? Home, mortgaged
15. If so, state the character and value of all such property \$300.
16. What was the assessed value (last assessment) of the real estate?
17. How was the pensioner's property disposed of? To his daughter Kate Jasker
18. Did pensioner leave an unpaid pension check? (Answer yes or no.)
19. What was your relation to the deceased pensioner? daughter
20. Are you married? (Answer yes or no.) no
21. What was the cause of pensioner's death? Pneumonia
22. When did the pensioner's last sickness begin? Oct. 15th 1914
23. From what date did the pensioner become so ill as to require the regular and daily attendance of another person constantly until death? From the beginning of his illness
24. Give the name and post-office address of each physician who attended the pensioner during last sickness
Dr. John Bidout, Annapolis, Md
25. State the names of the persons by whom the pensioner was nursed during the last sickness
His only daughter Kate Jasker, who gave up her place to nurse her father
26. Where did the pensioner live during last sickness? In his house 75 Pleasant St.
27. Where did the pensioner die? 75 Pleasant St.
28. When did the pensioner die? Nov. 5th 1914
29. Where was the pensioner buried? National Cemetery, Annapolis, Md
30. Has there been paid, or will application be made for payment to you or any other person, any part of the expenses of the pensioner's last sickness and burial by any State, County, or municipal corporation? (Answer yes or no.) no
31. State below the expenses of the pensioner's last sickness and burial. Write the word *none* where no charge is made in case of any item of expense noted.

(Each charge entered below should be supported by an itemized bill of the person who rendered the service or furnished any supplies for which reimbursement is demanded, and should show, over his signature, by whom paid, or who is held responsible for payment, and contain the name of the pensioner for whom the expense was incurred or service rendered.)

NAMES.	NATURE OF EXPENSES.	STATE WHETHER PAID OR UNPAID.	AMOUNT.
<u>Dr. John Bidout</u>	Physician	<u>no</u>	<u>15.00</u>
	Medicine	<u>unpaid</u>	<u>5.50</u>
	Nursing and care		
	Undertaker	<u>paid by</u>	
	Livery	<u>County</u>	
	Cemetery	<u>no charge</u>	
<u>Kate Jasker</u>	Other expenses and their nature: <u>Medicine</u>	<u>paid</u>	<u>2.00</u>
	TOTAL		

32. Is the above a complete list of all the expenses of the last sickness and burial of the deceased pensioner? (Answer yes or no.) yes
 That my post-office address is No. 75 on Pleasant street,
 town or city of Annapolis, County of Anne Arundel,
 State of Maryland
 (When the claimant for reimbursement is a married woman, she is required to sign the application with her own full name, not using the Christian name or the initials of her husband, and all bills should be receipted to her in her own name.)

Kate Jasker
(Claimant's signature in full.)

DEPOSITION B

Case of Edward Taster alias, No. 38,116
George H. Taster

On this 29 day of March, 1899, at
Annapolis, county of
State of MD, before me, H. H. Lockwood, a
special examiner of the Bureau of Pensions, personally appeared

Thomas Sarah, who, being by me first duly sworn to
answer truly all interrogatories propounded to him during this special
examination of aforesaid claim for pension, deposes and says:

I am 70 years of age; my post-office address is Clay st
this city. I have no trade & only do
light jobs. I enlisted in Co. H. 30 U S C T
and was transferred into the U S Navy.

I knew this claimant since he was a
small chap - we grewed up together &
acted together. I knew him then by
the name of Ned Taster & this is the
only name I ever knew him by. The
name I now know as Edward Taster
is the same person I knew as a boy
and enlisted in the army with me
but I dont now know what name
he served under but I do know that
he is the same man who enlisted the
same time I did & now & always did
go by the name of Ned Taster. I know
he was transferred into the Navy but
didnot serve in the same vessel I did
I was on the Drabark but I saw him
while at Ft Fisher & knew him to be
the same person I knew as a boy but
I cant now recall what vessel he
served on & dont know if he served in
any other name but Edward Taster.

I dont recall if I ever made an
affadavit in his claim for pension.
I do now recall that I did make a
statement for him in his pension claim.

I recall that I made a statement that
I had known him since we were boys
and enlisted in the army & was transferred
together into the Navy on board the U S S
New Hampshire & this was a recruiting
ship & he was transferred to one ship
while I was put on the Drabark - but
he went by the name of Ned Taster as
far as I know - he is the identical
person who enlisted with me & was
on the U S S New Hampshire and after
the war was over came back here & has
lived here under the name of Ned Taster.
The only name I have ever known him by -
he never told me that he served under the
name of George. I know he now lives
in Washington D C since last fall.

I dont know another man who served
in the Army or Navy with me by the
name of Taster if he served by the
name of George he must have been
the same man for I was with him
& know he was the only man by this
name on this ship at the same time
I was & also in the same company of
the 30 U S C T. The only man by this
name was the Ned Taster I now know
& have known as the same who served
with me - I have understood questions
and I have been recorded correctly
at St. B. Sunderland Thomas Sarah
man

Deponent.

Sworn to and subscribed before me this 29 day of March,
1899, and I certify that the contents were fully made known to deponent
before signing.

H. H. Lockwood
Special Examiner.

ACT OF MAY 11, 1912.
DECLARATION FOR PENSION.

3-014.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Maryland, County of Anne Arundel, ss:

On this 24th day of May, A. D. one thousand nine hundred and twelve, personally appeared before me, a U.S. Commissioner within and for the county and State aforesaid, Edward Tasher who, being duly sworn according to law, declares that he is 72 years of age, and a resident of Annapolis, county of Anne Arundel, State of Maryland; and that he is the identical person who was ENROLLED at Annapolis Maryland, under the name of Edward Tasher on the 23rd day of April, 1864 as a Soldier, in the Army & was Discharge from U.S. P. S. O'Leary New Hampshire here & Blower in the service of the United States, in the Army (State name of war, Civil or Mexican.) WAR, and was HONORABLY DISCHARGED

at Philadelphia Pa on the 4th day of September, 1865. That he also served has not been in any service as stated above.

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 6 inches; complexion, Black color of eyes, Black; color of hair, Black; that his occupation was a Farmer that he was born April, 1840, at Annapolis Maryland.

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

That he is a pensioner under certificate No. 29757. That he has applied for pension under original No. _____

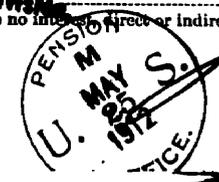
That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the act of May 11, 1912. That his post-office address is Po 75 Pleasant St, county of Annapolis, State of Maryland.

Attest: (1) Rose Ganner (2) Charles W. Watter Edward Tasher (Claimant's signature in full.)

SUBSCRIBED and sworn to before me on the 24th day of May, A. D. 1912, and I hereby certify that the contents of the above declaration were fully made known and explained to the applicant before swearing, including the words _____

[L. a.] per Law Division, added; that I have no interest direct or indirect in the prosecution of this claim.

William Brewer (Signature.)
U. S. Commissioner (Official character.)
Annapolis Md.



Finance Division 11174 3-1865

DEPARTMENT OF THE INTERIOR
 BUREAU OF PENSIONS
 WASHINGTON

FEB 22 1917 191

Kate Tasher
75 Pleasant St Annapolis Md

Your enclosed letter does not contain the data necessary to identify the case. If you will return it to this Bureau, with this circular, filling in the blank lines below as far as your information will permit, it will receive prompt attention.

His Certificate Number 29757 Full Name of pensioner Edward Tasher alias George Tasher Company _____ Regiment _____ State _____ Army or Navy? Navy Date of death his Died Nov 15 1914 from his Daughter Kate Tasher 75 Pleasant St Annapolis Md

Very respectfully,
John C. Gabe
 Commissioner.

IF A PENSIONER, DO NOT FAIL TO GIVE CERTIFICATE NUMBER.

Edward Tasker alias George H. Tasker, was a Landsman on U. S. Ss. Alleghany, New Hampshire and Clover,; he was discharged from the service of the United States on the 14th day of April, 1864, by reason of enlistment and that the said George H. Tasker was in Anne Arundel County, State of Maryland when he was enrolled and he was then 21 years of age, 5 ft. 7 in. high, black complexion, black hair and black eyes, and was by occupation a butcher.

Being 21 years of age when he enlisted makes him born in 1843, thereby being now 69 years of age.

That at the time he put in claim for pension under Act May 11, 1912, he could not find his original discharge and made a mistake as to the year he was born; that he has since found that paper, which says he was 21 years of age when he was discharged, and which he believes to be his correct age.

Edward ^{his} *Tasker*
mark

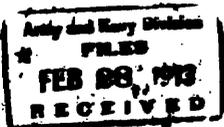
Witnesses:-

Frank N. S. [unclear]
Charles H. Wootter

Subscribed and sworn to before me this 26th day of February, 1913.

Nannie S. Stokett,

Notary Public.



DEPOSITION A

Case of John B. Anderson hw. Chf., No. 13,828

On this 19 day of January 1912, at
Annapolis, county of Anne Arundel
 State of Md. before me, L. S. Perkins
 Special Examiner of the Bureau of Pensions, personally appeared
John B. Anderson, who, being by me first duly sworn to
 answer truly all interrogatories propounded to him during this special
 examination of aforesaid claim for pension, deposes and says:

1 I am about 76 years of age, p.o. address No.
 2 149 St. John street, Annapolis, Md.; am a carpenter
 3 and laborer.

4 I am pensioned at \$12 per month, as of the
 5 United States, and am an applicant for increase on
 6 account of age.

7 I was born on the farm of Stephen Lee, near
 8 this city, on December 22, 1835. My father (I
 9 am told) was Benjamin Anderson, and my mother
 10 was Nancy (Boyd) Anderson. There were
 11 fourteen "head" of children, of my parents, and
 12 I am the only one living.

13 I was raised in this neighborhood, and was
 14 free born. My mother was a free woman, but
 15 my father was a slave and belonged to Alfred
 16 Sellman.

17 My first service was in the army. The 30th
 18 U.S.C. Infantry, which was encamped at College Green,
 19 Annapolis, was ordered to Alexandria, Va. in March,
 20 1863. I wanted to enlist in that regiment, but
 21 my mother would not let me, although I had two
 22 brothers-in-law, Isaiah Snowden and William Con-
 23 nett, in the regiment; I think Snowden was in
 24 Co. C and Connor in Co. D. I ran away from
 25 home and went to Washington, D.C. thinking to enlist
 26 there, but the 30th had gone to Alexandria, Va.
 27 and from there to the Bath of the Wilderness.
 28 At Alexandria I fell in with the 75th Mass.
 29 (colored) Infantry, with whose colonel, - Putnam,

ANDERSON, JOHN B.

MD

Invalid Application Number: 20845

Certificate Number: 13828

Widow Application Number: 1133734

Landsman: U.S.S. Santee and Constitution

Record Group 24, Bureau of Naval Personnel:

Muster Rolls of the U.S.S. Constitution

1 October, 1868, marked page "20"

"Complete Descriptive Muster Roll of the Crew of the U.S....."

Anderson, J.B. rate: landsman
 enlisted 13 feb, 1865 for 2 years in Newport RI,
 from the U.S.S. Santee
 aboard 1 July, 1866
 born in West River, MD
 31 years old
 carpenter
 negro, 5'4 3/4"

DEPOSITION

Case of John B. Anderson Tr. Off. No. 13,838

On this 19 day of January 1912 at Annapolis, county of Anne Arundel State of Md. before me, L. S. Perkins, Special Examiner of the Bureau of Pensions, personally appeared Claimant, continued, who, being by me first duly sworn to answer truly all interrogatories propounded to him during this special examination of aforesaid claim for pension, deposes and says:

with him till he died. His home was across the river from Philadelphia and on the way to Cape May. I now remember that he died at Camden, N. J. Col. Putnam's wife gave me a discharge from the army, and I went on home to Annapolis arriving here on January 2, 1864.

I stayed around here till February, 1864, when I went to work at the Navy Yard, and worked there for a year, loading cars of provisions and ammunition. A man named Blodgett was quartermaster. Then I went to Newport, R. I., and on February 12, 1865, I enlisted in the U.S. Navy, first going the U.S.S. "Saranac" was enlisted by a landsman for the term of 12 years. I served on that and the "Santee" for a little while I was on the "Dale" and the "Winnipeg." Was discharged from the "Santee" at the Annapolis Naval Academy on February 12, 1867, at noon. These are the only services I ever had, military or naval.

Q. Under what name did you enlist in Co. A, 75th U.S. C. Inf.?

A. I am not able to state whether I gave my name as John B. or as simply John Anderson.

Q. What became of the other Anderson who was in your company?

A. I don't know. I lost sight of him when we had a skirmish at Tenallytown near Washington.

30 I had become acquainted at Annapolis. Col. Putnam
31 name asked me what I was doing there. I told
32 him I wanted to join the 30th colored regi-
33 ment. He told me they had left there a day
34 or two before, and that I could join his
35 regiment (the 75th). I enlisted there in Co. A,
36 75th colored infantry. I cannot recall the names
37 of any of the officers of that company, nor any
38 member of it, except that there was another An-
39 derson (I think his first name was William) who
40 marched to my right hand, in ranks. We went
41 our Alexandria and down on the peninsula,
42 and lay in camp, but I don't remember the
43 name of the place. After I had been in ranks
44 for about a week, Col. Putnam made me his
45 mounted orderly.

A ball struck me in the lower part of the spine while on the way to Harper's Ferry, one dark night, after I had been in the 75th regiment about 6 months. The wound healed up and gave me but little trouble, then. Since the war, it has pained me a good deal in cloudy weather. I was put into the ambulance and taken to Harper's Ferry, where I went on duty again.

From Harper's Ferry we went to Fairfax county, Va. where there was an explosion where the Confederates blew up the railroad and hurt and killed a trainload of their own men. We remained in camp near Fairfax till December, 1863, when Col. Putnam went home on sick leave and died near Philadelphia of yellow jaundice. I went to his home with him, and stayed

John B. Anderson Depoent.

Subscribed and sworn to before me this 19 day of January 1912, and I certify that the contents were fully made known to the deponent before signing.

L. S. Perkins Special Examiner.

D.C. in September, 1863.

My height is 5 feet, 5 1/2 inches, complexion light brown, hair and eyes black (now growing grey). I gave my age as 30 years at enlistment in the Army, altho I believe I was then about 29. I have lived around Annapolis ever since my discharge.

My birth record was written into my mother's family Bible by Mrs. James O'Hara of the South River section when I was a baby. I was taught to read by Col. Putnam while in the Army, and after my discharge from the Army I could read the family Bible, and saw the record of my birth. That book was destroyed by a fire which burnt up my house in 1869, and my Army and Navy discharges were burnt up at the same time.

I have heard you read the various statements as to my age which occur in my applications, and in my statements to examining surgeons. I cannot account for these discrepancies, except to say that in some cases the persons who did the writing failed to correctly record what I said. Commissioner Brewer made one of these mistakes in making out my application. I called his attention to a mistake he had made in my age; he said it would not be noticed. I wanted him to write an explanation, but he declared it would make no difference. In making my statements as to age, I did not say how old I was, but stated the year I was born in, and

John B. Anderson
Deponent.

Subscribed and sworn to before me this _____ day of _____ 1911, and I certify that the contents were fully made known to deponent before signing.

Special Examiner.

DEPOSITION

Case of John B. Anderson Inv. No. 13,828

On this 19 day of January 1912 at Annapolis, county of Anne Arundel State of Md. before me, L. S. Patten, Special Examiner of the Bureau of Pensions, personally appeared Gladman, confirmed, who, being by me first duly sworn to answer truly all interrogatories propounded to him during this special examination of aforesaid claim for pension, deposes and says:

1 Let them figure it out themselves. I am
2 not very good at figures.
3 Two old colored men, Nelson Wells and
4 Philip Boston, knew me when I was a boy.
5 Wells was a fellow-slave with my father, owned
6 by sellman, as was also Boston. They live
7 4 miles south of Earth near in this county.
8 I know of no one else who can testify
9 to my age. These men are 6 or 7 years
10 older than I.

11 I do not care to be present or represented
12 at any further examination of my claim.

13 Q. If you were in the military service,
14 why did you state in your various applications
15 for pension that you had no service prior to
16 February, 1865?

17 A. I did not know that such statement
18 was on the applications. Later on, Commissioner
19 Julian Brewer told me that the Government
20 had found that the name John B. Anderson
21 was not on the Army rolls; so he said the
22 Army service might as well be left out, as it
23 would add anything to my case.

24 I have had two different wives. My first one,
25 Lavinia Smother, I married in Annapolis on March
26 2nd, 1859. She died in December 10, 1873. In
27 December, 1889, I married Mary Satterfield, in
28 this city. The ceremony was performed by Father
29 Miller. Mary had not been previously married.

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80 She ran away from me on September 10,
81 1896. She took up with black man
82 named Manuel Stewart; they were
83 sporting around Annapolis last week.
84 I filed application for divorce from Mary
85 in the spring of 1910, but my attorney,
86 Harrington Thompson, misappropriated
87 the money I paid him to have the suit
88 filed, but I am going to get a divorce
89 from her as soon as possible.

90 My first wife, Lavinia, died here in
91 Annapolis. Her death could be proved by
92 Catherine Tilden of Camp Parole. But I
93 fear - intend for Mary to have a red coat
94 of my pension.

95 I have heard you read the foregoing;
96 have understood your questions and my
97 answers are correctly recorded.
98 John B. Andersen

Deponent.

Subscribed and sworn to before me this 19 day of January
1912, and I certify that the contents were fully made known to deponent
before signing.

L. S. Perkins
Special Examiner.

ELIHU S. RILEY
ATTORNEY-AT-LAW
ARUNDEL BUILDING, WEST STREET
Navy--13,828.
ANNAPOLIS, MD., July 28, 1917.

To the Honorable
the Commissioner of the Pension Bureau:-
Dear Sir:-

I trust I will not offend by
"stirring up your pure mind" in regard to
the Claim of John B. Andersen, colored, of
Annapolis, Md., whose present pension No.
is--"Navy. 13,828."

The new claim of John B. Andersen is
that, under the Act of 1912, he is entitled
to an increase of pension on account of his
age. His age and his service will appear in
his Pension Papers in your office, under
the above number, to which I respectfully
refer you.

I am sure that your Department is
crowded with business matters, yet I cannot
well refuse the old veteran the help of
another letter from me to the Bureau. He
comes in the office with almost periodic re-
gularity to know what I have heard in his
behalf, and his observations are both queer
and pathetic when he finds that his plea
for the advance in his pension is still
marking time in the work of the Department.

If you can advance the aged soldier's
case, kindly favor both the petitioner and
the writers by giving this aid to him, appa-
rently just request.

Very Respectfully Yours,
Elihu S. Riley