## DECLARATION FOR WIDOW'S PENSION. ACT OF APRIL 19, 1908.—AMENDED BY ACT OF SEPTEMBER 8, 1916.

State of Mani, Cour	ntn of W Lords ag.
Blate of Mann, Cour	ity of a final fin
On this day of Ool	, 19/16,, personally appeared before me, a
No tary Public within and for the Count	y and State aforesaid, Rose J. Ingram.,
who, being duly sworn by me according to law, declares	that she is years of age and that
he was born 2/, 14	
That she is the widow of John H. Ing	
	Newfane, Vermont
inder the name of John H. Ingram	, as a Private in
Co. I, 8th Vt. Vol. Infty. (Here state company and regiment, if in the A	(Rank.)
and was honorably discharged. June 28th	1 865
days or more during the Civil War.	, 1.000, naving served ninety
lays or more during the Civil War.  That he also served.  No othe	r service.
(Here give a complete statement of all other military, naval, or That otherwise than as herein stated said soldier	
n the United States service.	SAASCAM ) wasemployed
That she was married to said soldier ( xxxixx)	August 13th , 1896 ,
inder the name of Rose J. May	, at
Dover, N. H.,	by Rev. James Thurston ;
hat she hadxxbeen previously married; that he h	
Her first husband divorced.  (Here state all prior marriages of either, and give the names and	
(Here state all prior marriages of either, and give the names and His first wife divorced.	dates and places of death or divorce of all former consorts.)
HID TIIDD WITE GIVOLOGUS	
and that neither she nor said soldier (XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	married otherwise than as stated above.
(If any former husband rendered military or naval service, here describe	same and give number of any pension claim based thereon.)
That the following are the <i>only</i> children of the soldie rears of age, namely:  No children.  (If he left no children, the claima	
, born, 1,	, at
, born, 1,	, at
, born, 1	, at
, born, 1,	, at
, born, 1, 1	, at
That the above-named child of the soldier (c	or sailor) { is }now receiving a pension,
(is a)	(are)
and that such child	lly andcared for by her.
That she hasxxheretofore applied for pension,	the number of her former claim being 714,865;
hat said soldier (xxxaxior) wasxxa pensioner, the	
That she hereby appoints E. C. Strong	of Washington, D.C., her true
and lawful attorney to prosecute this claim.	(Address.)
11.12	Rose & Jagram
(Signature of first witness.)	(Claimant signature of full.)
- Kranfink Mani	R F D 1 Box 46
(Address of first witness.)	R. F. D. 1, Box 46, (Claimant's address in full.)
(2) Jan S. Buslaid	Wells, York Co., Maine.
(Signature of second witness.)	William Strag
(Signature of first witness.)  (Address of first witness.)  (Signature of second witness.)  (Address of second witness.)	
(Address of second witness.)	
Subscribed and sworn to before me this 23.	down of Cont
Subscribed and sworn to before me this and I hereby certify that the contents of the above declar	
pplicant before swearing, including the words	
erased, and the words	
and the proposed the first state of this state	***
	1 1 10 1
/ on c X	Shen W Brusloni (Signature.)

Gerty No 5750 8 John Ho Lupan	Jepartment of Bureau of	EAST DIV.  DEC 22 1808  The Interior,  Pensions,
Co. Reg't	Washington, D. C.,	overber 301898
che John Hon		
No. 2. When, where, and by work of Asgust 1996, 2.  No. 3. What record of marriage	Cose Jane May hom were you married? Answ Dover, M. Ho. Ren exists? Answer: Married? Answer: Married?	Ingram. Hose Jane Brus er: on the 13th day James Thurston iage Certificate Vice at Dover N. H.
No. 4. Were you previously made and place of her death or divorce Diversed. District Court County of Stuteman Early No. 5. Have you any children birth. Answer:	arried? If so, please state the name.  See. Answer: ALL Signal  Judgic ral Single of living? If so, please state their	neclia. M. Cheaney.
Date of reply, Dec 15th	, 189.8. Laka	H Sungara

## DECLARATION FOR ORIGINAL INVALID PENSION.

TO BE EXECUTED BEFORE A COURT OF RECORD OR SOME OFFICER THEREOF HAVING CUSTODY OF ITS SEAL.

The state of the s
State of Jenion
Mudham County, SS.
On this 13 day of ADDIMILE A. D. one thousand eight hundred and eighty. Mills
personally appeared before me, Court of the hand a court of
record within and for the County and State aforesaid, Lohn State Sung aged
Mandham State of, who, being duly sworn according to law declares
that he is the identical At the American Ingmant who was ENROLLED on
the
of Venuest commanded by Capto, A. M. Oolland
and was honorably DISCHARGED at Hashington D.C. on the 28 day
of
That while a member of the organization aforesaid, in the service and in the line of his duty at
Muschuster, in the State of Congruence on or about the day
of Sovember 1864, he contracted disease of
Here state name or nature of disease, or the location of wound or injury. If disabled by
Ridning Caused by Marin in lifting trys build disease, state fully its causes; if by wound or injury, the precise manner in which received.
my fortifications and exposure incident
to the service - Has had land back fine
Itrain of same received as above stated and
1864 - also & orques across Small of back
my constitution of the con
That he was treated in hospitals as follows: The manes or numbers, and the localities of all hospitals in which treated and she dates
That he was treated in hospitals as follows: Tras much tracted and the localities of all hospitals in which treated and the dates Moshallal nor by the Suncient or assistant funda-
Mosfordal nor by the Sungern or assistant Aungus of treatment.
Mosfortal nor by the surgern or assistant Aurgu
Mosfordal nor by the Sungern or assistant Aungus of treatment.
Mosford nor by the Sungern or assistant August of treatment.  That he has Man been employed in the military or naval service otherwise than as stated above. Here state what
Mosfalal nor by the Sungern on assistant Augustof treatment.  That he has Man been employed in the military or naval service otherwise than as stated above.
That he has Manne 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 Manne or numbers, and the localities of all hospitals in which treated and the dates  That he has Manne 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 since leaving the service this applicant has resided in the Amana por hour fame. A one-
That he has Manne 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 Many the service this applicant has resided in the Acceptance of the State of the State of the State of the State of the service above named he was a man of good, sound, physical health, being when
That he has M. W. 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 prior to his entry into the service above named he was a man of good, sound, physical health, being when enrolled a form that he is now a stated above. That he is now a stated a disabled from obtaining his subsistence by
That he has Many 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 prior to his entry into the service above named he was a man of good, sound, physical health, being when enrolled a substantial above by reason of his injuries, above described, received in the service of the United States; and he there-
That he has M. M. Deen 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 prior to his entry into the service above named he was a man of good, sound, physical health, being when enrolled a form that he is now a 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.
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That he has Many whether prior or subsequent to that stated above, and the dates at which it began and ended.  That prior to his entry into the service above named he was a man of good, sound, physical health, being when enrolled a program of his injuries, above described, received in the service of the United States.  That he appoints which for the purpose of being placed on the invalid pension roll of the United States.  That he appoints which for the purpose of being placed on the invalid pension roll of the United States.  That he is claim.  That he is claim.  That he is claim.  That he provided the service of the United States.  That he appoints of the purpose of being placed on the invalid pension roll of the United States.  That he is claim.  That he appoints of the purpose of being placed on the invalid pension roll of the United States.  That he appoints of the purpose of being placed on the invalid pension roll of the United States.
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That he has M. A. Comment to the stated above, and the dates at which it began and ended.  That since leaving the service this applicant has resided in the Manual for house that of a formulation of the purpose of being placed on the invalid pension roll of the United States:  that he appoints Manual for the purpose of being placed on the invalid pension roll of the United States:  that he appoints Manual for the purpose of being placed on the invalid pension roll of the United States:  that he appoints Manual for the purpose of being placed on the invalid pension roll of the United States:  that he appoints Manual for the purpose of being placed on the invalid pension roll of the United States.  That he is now for the purpose of being placed on the invalid pension roll of the United States.  That he appoints Manual for the purpose of being placed on the invalid pension roll of the United States.  That he appoints Manual for the purpose of being placed on the invalid pension roll of the United States.  That he appoints Manual for the purpose of being placed on the invalid pension roll of the United States.  That he appoints Manual for the purpose of being placed on the invalid pension roll of the United States.  That he appoints Manual for the purpose of being placed on the invalid pension roll of the United States.  That he appoints Manual for the purpose of being placed on the invalid pension roll of the United States.  That he has Manual for the purpose of being placed on the invalid pension roll of the United States.  That he has Manual for the purpose of being placed on the invalid pension roll of the United States.

- Rufane Yers ont Oct 2 oth 1880 Hon Comissioner The Time from Discharge 1865 to 1874 my Residence was Newfane TO Address Williamsville Occipation Teamster & Fearming From 18 44 To 17 or 78 I resided at West Action Mass Occupation The same as above From 1877 or 78 My Bresidence was Dover MA (PO Address East Dover WT) until 18 88 My Buieness being Driving Geam Since 1888 My Residence has been Muhane TO Address East Dover 44 Occupation farming when able. I enlisted Aug 15: 1864 as Absciruit for the 8th af 604 and Joined the Regiment soon after and While at work on Fortifications at or near Winchester 4a while in the Line of Duty incured the Disability on which I base my Claim by Namely Weakness & Lameness across Back caused by Labor on Yortifications lifting Loge 9166 and Exposure by laying on ground taking cold I the Present My Disabilities have stradily a merented to the Fresent different times I employing a Thysicen at several different times I employed Dr. E. S. Blakesley of Williamsville 44 in 1866 for a long time His Affat in not Trousable as he is Dead. I do employed Dr. H. Chapin who is also Dead, The last Thysician enployed by me is Dr of I White who resides at Williamsville 4th who has treated me for Bidney Frombles in Connecion with other Disease I have been unable to do my week frequently the Time verying from three or hour Days to Eight or Gen Weeks yours Bespectly John H Ingram

## State of Vermont

County of Windham

SS.

In the matter of claim for pension No.714.865, of Rose J.Ingram widow of John H.Ingram, late member of Co.I,8th Regiment Vermont Veteran Vol. Inft., personally appeared byfore me a Justice of the Peace, in and for said County of Windham, Alvin Brown, agred 75 years and Hermon M.Brown, agred 52 years, both residents of East Dover, in said State of Vermont, and first being duly sworn, declares in relation to the aforesaid case as follows:

That they have known both Rose J.Ingram and the said John H.Ingram all their lives, that they well remember the first ax marriage of said John H.Ingram to one Francelia M.Cheney, which occurr d about the year 1874, that previous to this said marriage said John H.Ingram lived in the neighborhood of deponents and often visited him and that he was not married previous to his marriage to said Cheney: if he had been we both should have known of it as we were intimate.

Said depunents further aver that they both have been well acquainted with the said Rose J.Ingram from her early school days to the present time, that they both knew here previous to her marriage to Mandin D.May and that she was not married \*\*x\* previous to her marriage to said May, which occured about the \*\*year 1877.

Had she been so married we should have known of it as we were both intimate with her and saw her very often.

we further say that we have no interest in this claim for pension and are not concerned in its prosecution.

Out of Brown Brown Mass.

Dated this 25th day of July, A.D. 1901 Herman Mass.

OF AUGO

THE STATE OF THE S