Mc/lay Charles Co C., 154 N. Y. Inf. Private SergeautOARD NUMBERS. 12938/58 *3363388677 19938356 *33186726 199384598 *33186726 199385988 *356 *33186726 199385988 *356 *33186726 199385988 *356 *33186726 199385988 *356 *33186726

Book Mark: R. P. 366,075.

See also.

Che 154 1.4. Charles Me Kay Pr. Co. 6, 134 Reg't 1. H. Appears on Hospital Muster Roll No. 3 U. S. A. General Hospital, Nashville, Tenn., Attached to hospital: When....., 186 . How employed..... Last paid by Maj..... to, 186 . Bounty paid \$ 100; due \$ 100 Present or absent..... Remarks: Returned to duty Book mark:____

Charles Mc Kan, Co. C., 154 Reg't New York In Appears on Returns as follows: Appears on Ret	112	154	N. Y.
Appears on Returns as follows: (ing 1963 to Jan 1964 albaen) after conscripts and July 24/63. July 24/63. July 24/63. Man to puly 184/4 baent aick			
ing 1963 to Jan 1964 alasin after consorpto am July 24/63. Tel & mch/34 abaent, detache at Elmina n. J. since July 24/63. Man to pely 1864 abaent sick	, Co	, 154 Reg't	New York Inf
February abaent, detache at Elmira n. y. aince July 24/63 Man to pely 1804 absent aick			
July 24/63 Man to pely 1804 absent sick	nun	24100.	
Man to pely 1804 alosent sick	at El	mira n. J.	detacher
since may 25/64.	man to pul	17/84 aloser	itaiok
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Book mark:	Cook mark:	i Kayde	

Charles Me Kay Co. 154 Reg't N. M. Infantry.	Mc 154 N. G. Charles M Kay Pat , co.b 154 Reg't N. G. Inf	Mr. 154 /1.4. Charles M. Kay Cht, co. S., 154 Regit - 124	Charles Mixay
270	Appears on	Appears on	Reg't / fl
Appears on Company Descriptive Book	Hospital Muster Roll	Hospital Muster Roll	Appears on
			Hospital Muster Roll
of the organization named above.	of U.S. A. General Hospital,	of No. 3 U.S. A. General Hospital,	of No. 3 U. S. A. General Hospital,
DESCRIPTION.	at Elmira, N. Y.,	at Nashville, Tenn.,	
Age 18 years; height 5 feet 6 inches.	10 1	(1)	at Nashville, Tenn.,
Complexion Din	for Mich & apl, 1864.	tor May , free , 1864.	for suit and , 1864.
Eyes Blk ; hair Blk	Attached to hospital:	Attached to hospital:	Attached to hespital:
Where born Manofield, NY	When, 186 .	When3, 1864.	When, 186 .
Occupation Vaddler	How employed	How employed	How employed total vi
ENLISTMENT.	r - (- 11 b - Wei		1000
When July 26, 1862	Last paid by Maj, 186 .	Last paid by Maj.	Last paid by Maj Tichardson
Where allegany	Bounty paid \$	to,186 ,	to 11.87.2/ , 1863.
By whom A. Holeh Miss; term 3 y'rs.	Present or absent	Present or absent 700; due \$ 100	Bounty paid \$ 100; due \$ 100
	Remarks: Returned to Duty	Remarks Two mouther pary due	Present or absent
Remarks:	Mch. 4.64	TWINITES THE WAY TO THE TOTAL TO	Remarks: Tach to Salot for
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M. 154 N.Y. Charles M. Y. Br, Co. C, 154 Reg't N. Y. Infantry.	Malles My Kay Charles My Kay Cery Co. C., 154 Reg't N. Y. Infantry.	MC 154 N.Y. Charles MC Cay Ro, Co. C, 154 Reg't N. Y. Infantry.	M. 1.54 M.Y. Oharles M. M. May. Safe. Co. O. 154 Regi M. N. Ola.
Appears on	Appears on Co. Muster-out Roll, dated	Appears on	NOTATION.
Company Muster Roll	Ar Soladens burg Miller 1865.	Company Muster Roll	Book mark: P. P. 366075
for Jan + Sel., 186 X	Muster-out to date Muster-out to date 11, 186 5.	for Meh Tapl., 1865.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Present or absent Mescul	Last paid to City 31, 1864.	Present or absent Percut	Record and Pension Office,
Stoppage, \$ 100 for		Stoppage, \$ioo for	WAR DEPARTMENT,
***************************************	Clothing account:		Washington, afil. 13, 1894.
Due Gov't, \$ 100 for	Last settled 4 2 6, 1864; drawn since \$ 100	Due Gov't, \$	Medal of honor awarded
	Due soldier \$; due U. S. \$	Par ACII	for most distinguished gal-
Remarks:	Am't for cloth'g in kind or money adv'd \$ 100	Remarks: Mone a Cirple	Hap La May 8, 86st.
,	D 17 0 0 0 0 0	apl.1/64 in place	Dajo, ora. 21 ay or over
	Due U. S. for arms, equipments, &c., \$ 100	Oschand might	
	Bounty paid \$ 75 100; due \$ 75 100	-c wonagia	•
	Remarks: Monoted to till		
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leharles Mc Lay Co. C, 154 Reg't N. Y. Infantry.	Charles McKay PZ., Co. C, 154 Reg't N. Y. Infantry.	Co. C, 154 Reg't N. Y. Infantry.	Males McKay M. y. 154 N. Y. Charles McKay M., Co. C, 154 Reg't N. Y. Infantry.
Appears on	Appears on	Appears on	Appears on
Company Muster Roll for Many Muster Roll Present or absent 100 for 1864.	Company Muster Roll for Self Mach, 1864 Present or absent Stoppage, \$	Company Muster Roll for July 2d August, 1864. Present or absent July, Stoppage, \$ 100 for	Company Muster Roll for Nov File , 186 4 Present or absent Present Stoppage, \$
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Remarks: In Hospital since May 15, 1664. Transportation \$255	Remarks:	Remarks: In Hospital Lines May 25, 1564.	Remarks:
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-	Charles MCKay Co., 154 Reg't N. Y. Infantry.	Charles MC day Pur., Co. C, 154 Reg't N. Y. Infantry.	Me 154 N. Y. Charles Mc Kay Oat, Co., 154 Reg't N. Y. Infantry.	Charles McKay
	Appears on a	Appears on	Appears on a	, Co. C, 154 Reg't N. Y. Infantry.
	Detachment Muster Roll		Detachment Muster Roll	Appears on
•	for Avrilec 1863. Station Elming W. J.	for and Muster Roll Present or absent Abunt.	of the organization named above. for fand 1864. Station Elman M. J.	for March and Muster Roll Present or absent Present.
	Present or absent his in	Stoppage, \$ioo for	Present or absent Absent	Stoppage, \$
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A (Due Gov't,\$ 100 for	Remarks: On detached service Elming N. M. since July 24/63.	Due Gov't, \$ īoō for.	Remarks: Dr. detached service at
ē	Remarks: Setailed to proceed to M. J. do receive and conduct drofted men to their Reglo by S. G. 134 He. 2, 11 Corps 1863.	Transportation \$ 1.55	Remarks: Melasled to proceed to N. Y. So receive a conduct drefted men to the in Regto by S.C. 134 Dle. 2. 11 Corps 1863 Sich in Harpl & numbered in	Transfortation \$2.55
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		9	the transfer of the way-of	LACE LESS TO THE STATE OF THE S

Charles Mc Gay Charles Mc Glay Ref. Co., 154 Reg't N. Y. Infantry. Appears on a Detachment Muster Roll of the organization named above. for. July l. Aug. 1863. Station Banachschas Elminal. Y. Present or absent Results Stoppage, \$ 100 for Remarks: Letailed la procesa le My. le receive and conduct drofted men le their Regto by S. O. 184 H. 2. 11 Coops 1863.	Company Muster Roll for Per Valle 100 for 100	Albarler May any M.Y. Appears on a Detachment Muster Roll of the organization named above. for Sept to Cet 1863. Station Elmura A. J. Present or absent Present Stoppage, \$ 100 for Due Gov't, \$ 100 for Remarks: Azek pay due from the 2t of February 1863 & the 30 of April 1863, It having much received any are ger for these true amounths. Outsided by proceeds (N.J. la receive 4.	Company Muster Roll for Novel Alected 1863. Present or absent Alected 1863. Stoppage, \$ 100 for Remarks: On duty at Elmira If y Transpert time 155
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Me 1 154 IN.Y.	M. 154 N.Y.	₩ 154 N. Y.	Me 154 N.Y.
Charles McKey	Charles Mi Kay.	Jeharles Mc Kay	Scharles Mc Hay
Reg't N. Y. Infantry.	Pat Co. C, 154 Reg't N. Y. Infautry.	Co. C, 154 Reg't N. Y. Infantry.	Co. C, 154 Reg't N. Y. Infantry.
Appears on Special Muster Roll	Appears on	Appears on	Appears on
for , 1869.	Company Muster Roll	Company Muster Roll	Company Muster Roll
Present or absent	for Mar & apr. , 1863.	for Many End Jame, 1863.	for July and August, 1863.
C			
Stoppage, \$100 for	Present or absent Present.	Present or absent	Present or absent Nosur
Due Gov't, \$	Stoppage, \$100 for	Stoppage, \$	Stoppage, \$
	Due Gov't, \$	Due Gov't, \$	Due Gov't, \$
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Put., Co.C., 154 Reg't N. Y. Infantry. Age S. years. Appears on Company Muster-in Roll of the organization named above. Roll dated Pauce Town My., Sep 24, 1862.	Company Muster Roll for Cleft 34 to Oct 31., 1862. Present or absent Present.	Males McKay Put., Co. C, 154 Reg't N. Y. Infantry. Appears on Company Muster Roll for Dole, 1867. Present or absent Present.	Company Muster Roll for Jan & Feb., 1863. Present or absent.	
Muster-in to date Soined for duty and enrolled: When July 26", 186 2. Where Ollegany. Period 3 years.	Stoppage, \$	Stoppage, \$	Stoppage, \$ioō for Due Gov't, \$ioō for Remarks:	
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DECLARATION FOR INVALID PENSION

(ACT OF JUNE 27, 1890.)

State of Minnesota,
County of Otter Tail \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
On this 20 th day of November A. D. one thousand with
hundred and ninety- ONL personally appeared before me, a Notary Public
within and for Ottop Tail County, and State afore-
said, Charler M. McKar aged 57 years, a resident of
the City of For ques Falls country of Otter Tail
State of Winners and who, being duly sworn according to law, declares that he is the
al am mand
identical Charles W My ay who was enrolled on the 25th ny 10151
day of July 1867, in Gere state rank, company and regiment in military service, or yessel if in the navy.)
as a private
in the service of the United States, in the War of the Rebellion, and served at least ninety days, and
was honoraply discharged at Bladensburg on the 25%
y of Jane 1865 That he is unable to earn a support by
manual labor by reason of Lastial & sight fragality
of high arm and I helder caused
By gree Shot Wound received
at 19hth tong la July 157/86:
That said disabilities are not due to his vicious habits, and are to the best of his knowledge and be-
lief of a permanent character. That he has NEVET applied for pension under application
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 June 27, 1890.
He hereby appoints the Adjutant General of the State of Minnesota, of St. Faul, Minnesota, his
true and lawful attorney to prosecute his claim. That his post office address is
Firgus Falls county of Our Paul State of Morn
Attest: Lillian & Signature, What XXVIII My az
Rt. 7
1001
N. B.—When duly filled out and attested, return to Adjutant General, State of Minnesota, St. Paul, Minn., who prosecutes all

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1 19	Also pe	rsonally appear	d Peter	Imsor.			residing	at
XF = 24	Fings	is tall	min	and M	CSin	rcoln		79
	residing at.	terque	Talla	mperson	whom I ce	ertify to be 7	respectable and	en-
		it, and who, being	is bu me dul	u sworn. sav t	heu were pre	sent and saw	Charl	ED
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	Sworn to an	d subscribed be	fore me, this	202	day of.	novu	bv A. D. 18	21901
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	The Act of	June 27, 1890, require	es in case of a sole	dier: d not be filed unles	s called for).			
	(2) A mini (3) A meni	mum service of ninet al or physical disabili	y days. ty of a permanent	character not due t	o vicious habits.	(It need not have	originated in the ser	vice.)
	by the rank held.	es under the act are gi						
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Department of the Inter BUREAU OF PENSIONS Washington, D. 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 You will please return this circular under cover of the inclosed envelope which requires no postage. Very respectfully, Commissioner) 1. When were you born? Answer. 2. Where were you born? Answer. 3. When did you enlist? 4. Where did you enlist? Answ 5. Where had you lived before you enlisted? 6. What was your post-office address at enlistment? 7. What was your occupation at enlistment? 8. When were you discharged? Answer. 9. Where were you discharged? Answer. 10. Where have you lived since discharge? Give dates 12. What is your height? Answer. feet for inches. The color of your eyes? The color of your hair? The complexion? Are there any permanent marks or scars on your person? If so, describe them. of noos one at base of nost and 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.

The state of the s
East Div (Old No. 3-178.)
Plain No. 1277773 Department of the Interior
6 15 4 Reg May Just BUREAU OF PENSIONS,
Washington, D. C. December 13, 190%.
Sir:
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,
The Sugue Falls Falls Commissioner.
I Minn,
No. 1. Are you a married man? If so, please state your wife's full name, and her maiden name.
Answer: 1/20, Elizabeth Lockhant Mollary Elizabeth
No. 2. When, where, and by whom were you married? Answer: July 23md 1890
Ked The Hambly - at Fingur tally min
No. 3. What record of marriage exists? Answer: CErly Cale
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: 425. Clara & On au
Died Feby 7" 1887 Forger Falls Minne
No. 5. Have you any children living? If so, please state their names and the dates of their
Sorth Grace McKay Sept 13 1870
Blander Marrare 8 " 1 1 1 20" 187-
Georgia Romaine 2018 11" 1880
Mildred Janes " may 23d 1893
NE 0 18" 1001
Date of reply 2 8 , 190 ! Charlet M McKay
(Signature.)

	1.
	3-833.
	1 Oast Div. (Old No. 3-060.)
	Claim No 1277793
#um	Department of the Interior,
<u> </u>	ON THE HOUSE BUREAU OF PENSIONS,
NO	
SIO	15 4, My Juf Washington, D. C. Vecenbul 13,1901.
RECORD & PENSION OF FI	SR: L
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23	CV
~	* I will be full military and medical history and personal description, including birthplace and occupation,
	Marles 11 May, who, it is alleged, enlisted suly 25, 18 67
	at as a private in Colo 154 Reg't,
	My Suf and was discharged June 25 1867
	Bladensburg &Md.
	at Standing Orig,
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	It is also alleged that on or about July , 18.63, he was disabled
	It is also alleged that on or about July 1, 1863, the was disabled by Sunshat houseld of right arm,
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	by Grushet Ground of right arm,
	4.
	by Grushet Ground of right arm,
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R	by Grushet Ground of right arm,

Very respectfully,

The Chief of the RECORD AND PENSION OFFICE, WAR DEPARTMENT. MAD O

Commissioner.

Det. M Rollo Elmis 3-333. Ny ang 31, Oct 31 Dec 3 slede lin present WAR DEPARTMENT RECORD AND PENSION OFFICE. Respectfully returned to the Commissioner Kay not found Charles Me 9 Co. 6/54 Reg't age, it years; occupation, soldle plexion, duk ; color of eyes, sleet color of hair, wesek From MMM. 186 to Mart. 186 The medical records show him treated as he held the rank of PVY CM Bgf follows: Feb 18 to mar, 4, 64 Ruberla mar 14.64 Convalescent: furloughed mar 14 & returned and during that period the rolls show him present except as follows: Aug 3(63 to duty apr. 8. 64, June 3 to On Det service for Con-2,64 Pleurisy double By authority of the Secretary of we 30/64 on Hosp since Chief of Uffice. Perm. Date UE (: 14 1901 (COMMISSIONER OF PENSIONS.)

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postoffice address, and also state how they gain a knov

GENERAL AFFIDAVIT FOR ANY PURPOSE

State of Minnesota.	
county of Other Jail 188.	OD OUCENASIA
In the matter of Ony. Dy Pension Claim account of	Here give soldier's name.
\(\subset\)	Pension office No
appeared before me Charles W	C. MEHay
a resident of JErgus Jallo County of	Que Sail
State of whose P. O. address is JE	0 .
a respectable citizen and entitled to credit, who, being duly sworn, years of age; that he ha no interest in said claim.	, says thathe is
was not in the sulitary secret of	\$ The Miled States
156. 1765 - Luc 25, 1862, nor	and server 15 since



Charles IN MORRE

SURGEON'S CERTIFICATE.
Insert character and number of China No. 12 77 793
claim. Pension Claim No.
Name of claim. Charles 1. 10 = 1 lag Address Asrqua Hall P. O.
Company 1./34 Reg't 10. State.
Claimant's post- Hugas Halls, Wolum. March 9, 1902 office address. [Datgoof gramination:].
From shot would of right arm and partial paralysis
Cause of disa-
He receives a pension of dollars per month.
Here give the Claimant's statement (as since your day here)
briefly and as discovered by film:
of origin and cause of highest was the collar bonic and
abilities and
the manner in which they affect him.
The outlines of the human skaleton and figure upon the back of this cartificate should be used to indicate precisely the location
The outlines of the human skeleton and figure won the back of this certificate should be used to indicate precisely the location of a disease or injury, the entrange and exit of a missile, an amputation, etc.
Birthplace, Jacobield My; age, 5 7 years; height, 5.10;
weight, 195 pounds; complexion, dark; color of eyes, brown;
color of hair, from; occupation, R. R. Roeur; permanent marks and
scars other than those described below,, accupation,, permanent marks and
We hereby certify that upon examination we find the following objective conditions:
Pulse rate, 80. 86. //6; respiration /8.22 38; temperature, 95,4;
Here give a full [Sitting, standing, after exercise.] [Sitting, standing, after exercise.]
description of the disabilities,
in accordance with Book of Instructions.
no murmer, us na principally, allacion, us o dem
Egaussis or Ryspuoses!
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the Board, or any member thereof, rela-
cause of any 1/ / Acre and 3 & the
disability of , State of Office of internal and was fundamental of the stated.
Whenever a disability is shown
or is believed to be due to or aggravated by
the opinion of
the board must be stated. When not due
to such habite this fact must be stated.
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N. D. De not use heaks of certificates for any purpose other than indicated by printed matter thereon

N. B.—Do not use backs of certificates for any purpose other than indicated by printed matter thereon. When additional space is needed to complete report of examination use blank certificate (old No. 2-1156.) properly numbered, and attach it to the back and upper margin of this sheet. Marginal entries must never be made.
6-552

Form No. 101. 42-1902. 2M Note.—Affiants should give their age, postoffice address, and also state how they gain a knowledge of the facts to which they testify.

GENERAL AFFIDAVIT FOR ANY PURPOSE.	
State of Minnesota,	
County of Other Zoil	
In the matter of Ongmal Pension Claim account of Charles Who Kay	
of Co. "C 154 Reg't A. J. Luf Pension office No. 12777 On this 234 day of Spil A. D. 1903, personally	93
appeared before me M. J. Duncon en D.	
a resident of Grey Calls County of Oller Zail	
State of Munesola whose P. O. address is Surgers Lalls les	cia
a respectable citizen and entitled to credit, who, being duly sworn, says that he is years of age: that he had no interest in said claim.	
and that he has known he said	
Charles W lackor for litteen sears and has	ì
Charles or luckon for lifteen years and has has been his formies physicion for the)
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and furthermond Knows that claimont	to,
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Knows that plainont is deserving of a	.,
knowledge of claim out - and furthermore knows that plainsont is deserving a reasonable pension for disabilities who were incurred in the service on the	<i>a</i>
2 4. O. Dungan (n'il	_
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	and sworn to before me to at the foregoing affidavit		axplained to affia		
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and that I have	no interest, direct or ind	lirect in this of	aim.		
una tinti I nace	no interest, direct or the	irect, the these co	2/39	in her	W
			NOTARY PUBLIC, O	official Signature.] OTTER TAIL CO., MINI PIRES OCT. 4th, 1909.	1.
			P. O. FERGU	JS FALLS, MINN.	
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Note.—Affiants should give their age, postoffice address, and also state how they gain a knowledge of the facts to which they testify.

AFFIDAVIT FOR ANY PURPOSE. County of Cattonau Pension Claim account of 1524 Reg't... A. D. 1903, personally appeared before me.County of whose P. O. address is wow a respectable citizen and entitled to credit, who, being duly sworn, says that he is years of age; that.....hehas ... no interest in said claim. Drockley Hulps



POWER OF AT Dake COUNTY OF know all Men by these Presents, That I, have made, constituted and appointed, and by these presents do make and appoint, with full power of substitution, MILO B. STEVENS & CO., of successors or legal representatives, my true and lawful Attorneys, to... giving and granting unto my said attorneys, full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully and to all intents and purposes as I might or could do if personally present; hereby ratifying and confirming all that my said attorneys, etc., shall lawfully do or cause to be done by virtue hereof. P. O. Address. A. D. 190 A, personally BE IT KNOWN, that on this the appeared before me the above named ... READ OVER TO him, in the hearing and presence of the two attesting witnesses, the contents of the foregoing Power of Attorney, voluntarily signed and acknowledged the same to befree act and deed.

A. G. O. Form No. 101. 4-2-1902. 2M

GENERAL AFFIDAVIT.

NOTE. - Affiants should give their age, postoffice address, and also state how they gain a knowledge of the facts to which they testify

GENERAL AFFIDAVIT FOR ANY PURPOSE.

State of Minnesota, County of Otter Tail.

Charles m mcKay

In the matter of Pension Claim account of Charles MMCKary

Seral of Co. "C" 154" Reg't N. Y. Volo Pension office No.

On this Fourth day of august A. D. 1903, personally

a resident of Fergus Falls County of Otter Tail.

State of Minnesota whose P. O. address is Fergus Falls.

a respectable citizen and entitled to credit, who, being duly sworn, says that he is Sixty Seven years of age: that he has no interest in said claim.

and that he has Known the Claimant Charles W Mc Kay since December 1886 and during that time, said claimant has been a pober peaceful man of good habits. Peter Winsor.

U. SEP S.)
OFFICE.

NOTE.-Affiants should give their age, postoffice address,

ENERAL AFFIDAVIT FOR ANY PURPOSE: North Dakota 88.-0 8 County of Kichlan Pension Clom am account of Charles M me 154 Regit ny Volo Pension office No.... A. D. 1909, personally day of angus an atonCounty of. State of North Dallote whose P. O. address is Wah heten a respectable citizen and entitled to credit, who, being duly sworn, says thathe is in the claim and 88 years of age; that he he That he first Sufferred from Piler on the March Known as the Campaign of the Caroliniar, during on this man en Hinter and early from Dareax hardships & to Deontra Just granny Mão land from grough and mouffiel Catarrh Level developed Early in 1864, clontracted took a Several cold who from the MEavers and this rax frevult, To the best of my Bnowledge and Fels my Company who wast present at the ball It Lave, no record But on account of being wounded at O Getteroon and not going to the rear but remain my Regiment, I was detailed a few months later on recomiting service and sent to Elius n. 4. and it was while on this service and in the which catalorh presulted, Charles m mcKay ENSIC

Late Gergt Co C. 154th

appeared before me

State of Minnesota,

In the matter of Org. Inv. Pension Claim account of.

County of OTTER TAIL,

GENERAL AFFIDAVIT. GENERAL AFFIDAVIT FOR ANY " 154th Reg't N.Y.Inf. Vols. Pension claim

years of age; that he taxxxxxxxxxxxxiin said claim, and make S the following statement: name is Charles W. McKay in Les that name on 6. 6 154 Res

whose P. O. address.

Charles W McKay



and that I have no intere he words Ferger ? leweste & Ferger ? very the words full Palote Malpe	egoing affidavit was st, direct or indirect allo, otto Ta Tack on 5 v 6.2 Malpelm, Recht to concerted by	t, in this claim	Notary Pablic. Richle Walipalon Ly commission compared to the magistrate who	o executes this affidavit, he
Affidavits should be			74	ng.
Witnesses should sta	te how they gained	a knowledge o	f the facts to which t	they testify.
				w t
653			«	
	3.0			R.HO.RID.
ADDITIONAL EVIDENCE. Pension Claim Eastern Division. Org. Inv. No. 1277793.	yec't of Charles W. McKay, late Priv. Co. "C "154th Reg't New York Infantry Volunteers.	· AFFIDAVIT OF		ADJUTANT GENERAL OF MINNESOTA AT ST. PAUL, MINN. On. 190

I was

DECLARATION FOR INCREASE OF PENSION.

Under the Act of June 27, 1890, as amended by Act of May 9, 1900.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of North Dahota	
County of Richland \ss:	
On this 28 day may, A. D. one thousand nine hundred and SEVE	ζ.
personally appeared before me, a notary Public within and for the count	70
and State aforesaid, Charles me mckay, who, being duly sworn according	g
to law, declares that he is 60 years of age and a resident of Wahhaton	*
gounty of Richland, State of north Daslotz; that he served as	
Sug in Co C 154 Th 724 Vo and that he is a pensione	r
of the United States under the act of June 27, 1890, enrolled at the Milwauks	EU
Pension Agency at the rate of dollars per month, by reason of partial inability	y
to earn a support by manual labor, his pension certificate being numbered 10 70 993	
That he believes himself to be entitled to an increase of pension on account of the following-named disabilities	-
to wit: Catanth Pelay and Jumshot wou	nd
[Here state cause of disability, as age, or name of disease, or nature of injury.] n fright shoulder, received at Gattysfees	7
Jarly 15 1863.	-
0 0	
	20
That none of said disabilities are due to vicious habits, and that they are to the best of his knowledge and believe	ef
of a permanent character	. 8
That he was born on the 25 day of January, in the year 1847, at Manyfiel	
arougus Co / ,, and that his personal description is as follows: Height, 5 feet 1.0 inches	£ .
complexion, Dark; hair, Brown; eyes, Brown	3;
complexion, Dark; hair, Brown; eyes, Brown	3;
complexion, Dark; hair, Brown; eyes, Brown That he was Not employed in the military or naval service prior to July 21, 5, 186. That he has Not been employed in the military or naval service since for the prior to the prior t	3;
complexion, Dark; hair, Brown; eyes, Brown That he was Not employed in the military or naval service prior to July 21 5, 186. That he has Not been employed in the military or naval service since for the prior to	3;
That he has Not been employed in the military or naval service prior to July 2.1.5., 186 That he has Not been employed in the military or naval service since from 2.5., 186 [Here state word the service was, whether prior or subsequent to that stated above, and the date at which it began and ended.]	3;
That he has Not been employed in the military or naval service prior to July 2.1.5., 186 That he has Not been employed in the military or naval service since from 2.5., 186 [Here state what the service was, whether prior or subsequent to that stated above, and the date at which it began and ended.]	3;
complexion, Dark; hair, Brown; eyes, Brown That he was Not employed in the military or naval service prior to July 21, 5, 186. That he has Not been employed in the military or naval service since for the prior to the prior t	3;
That he has Not been employed in the military or naval service prior to July 2.1.5., 186 That he has Not been employed in the military or naval service since from 2.5., 186 [Here state what the service was, whether prior or subsequent to that stated above, and the date at which it began and ended.]	3;
That he has Not been employed in the military or naval service prior to home to have the service was, whether prior or subsequent to that stated above, and the date at which it began and ended.] That his post-office address is County of Richland, State of North Datlor County of Richland, State of North Datlor Charles M. M.	3;
That he has Not been employed in the military or naval service prior to home to have the service was, whether prior or subsequent to that stated above, and the date at which it began and ended.] That his post-office address is County of Richland, State of North Datlor County of Richland, State of North Datlor Charles M. M.	3;
That he has Not been employed in the military or naval service prior to July 2.1.5., 186 That he has Not been employed in the military or naval service since from 2.5., 186 [Here state what the service was, whether prior or subsequent to that stated above, and the date at which it began and ended.]	3;
That he has Not been employed in the military or naval service prior to home to have the service was, whether prior or subsequent to that stated above, and the date at which it began and ended.] That his post-office address is County of Richland, State of North Datlor County of Richland, State of North Datlor Charles M. M.	3;

		· Prof. San Aprela, of	
Also per	sonally ap	peared Aaron L Roll	farty, residing at Wahhaton nD
and Ala	itano	Par Hay, residing	at Wahfafon n.D., persons whom I
certify to be	respectable	200 20-01/	, being by me duly sworn, say they were present and saw
WYCOPA		the cla	aimant, sign his name (or make his mark) to the foregoing
The same of the sa	-		m the appearance of said claimant and their acquaintance years respectively, that he is the identical person he
represents his	mself to be	; and that they have no interest	in the prosecution of this claim,
		And the Annual Control of the	aum Larbets
**		3	alexander Stay
10000000	Sworn to	and subscribed before me this	28 day of May , A. D. 1907
9		and I hereby certify that the	he contents of the above declaration, etc., were fully made
		known and explained to t	the applicant and witnesses before swearing, including the
	[r. s.]	words	, erased, and the
	-	words	added; and that
i*i		I have no interest, direct of	r indirect, in the prosecution of this claim.
	197	Validity accepted	1
		S. A. Cuddy,	Laur Sigelman
		Chief, Law Division.	Note: Publica
2		per ECP. 6/3 07	Violog mous
_ -			My Commission Expires April 23, 1913.
			And the same of th

To be executed before some officer of a court of record having custody of its seal, a notary public, justice of the peace, or other officer authorized to administer oaths for general purposes. If such officer is not required by law to have and use a seal, his official character, signature, and term of office must be certified by the proper State, county, or city officer under his official seal, unless such a certificate has been filed in the Bureau of Pensions for general reference.

Testimony in support of allegations made in a declaration may be taken before any officer whose authority and signature are duly certified, and who shall disclaim any interest, direct or indirect, in the prosecution of the claim.

		~ \		
M. K.	by Act of May 9, 1900.	m merla		
CLATM FOR I	-	Name: Chanker	SONIO W	EAST DIV. JUN 4 1907 RECE. VED.

	SURGEON'S CERTIFICATE.
Insert character and number of	Pension Claim No. 1238 767
claim. Name of claim-	Chan Whetan West we low so
ant.	Company 4-15 Reg't Ky July Board. State.
Claimant's post- office address.	Wakpeton want (Date examination.)
3	
Names of disa- bilities.	
	He receives a pension of dollars per month.
Here give the claimant's statement (as briefly and as	
compactly as possible) in regard to the date	for Cartinuous mark on account
of origin and cause of his dis- abilities and	gymekot rances gright wowy
which they affect him.	m i'al little i
	Birthplace, aut feeld — 19; age, 60 years; height 5-10;
	weight, pounds; complexion, ; color of eyes, boron, ; color of heir second in the seco
	color of hair, ; occupation, ; permanent marks and ; scars other than those described below,
AND IN THE	We hereby certify that upon examination we find the following objective conditions
	Pulse rate, 85/92/100, respiration, 22/32/30; temperature, 5;
	R 1 1 2
Here give a full description of the disabilities, in accordance	"Ection. Then are three interned poles
with Book of instructions, and make a	the dige of hand new to one large
separate para- graph for each disability.	no because fistula on molopae
WEINIEZ OWI	Colare There is Chrome trypeitron
Facts within the	whiteis & pharquegete entogenery
knowledge of the Board, or any member	1821 Engine in territories with
thereof, rela- tive to the cause of any	nasel foreathing
found should be stated.	Tunghot warrie, ouen middle of
	abherent to the claimado also
	Enlargement of bone showing
* 1	site of all freathers try builted
Whenever a disa- bility is shown	a strength of 3 rd + letela Angerrou
or is believed to be due to or aggravated by vicious habits	Tright hand pololed due to preixur
the opinion of the board must be stated.	inter case of torock al plexin causing
When not due to such habits this fact must	the attack of arm of the arm
be stated.	Frypothenar chingson is smaller on
	right them last side showing sleight
9	mining of alicencia y flexon
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recommended solely on sub- jective evi-	
dence the strongest rea- sons must be	Dear as DE diseased and The Lagrage to
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SURGEON'S CERTIFICATE

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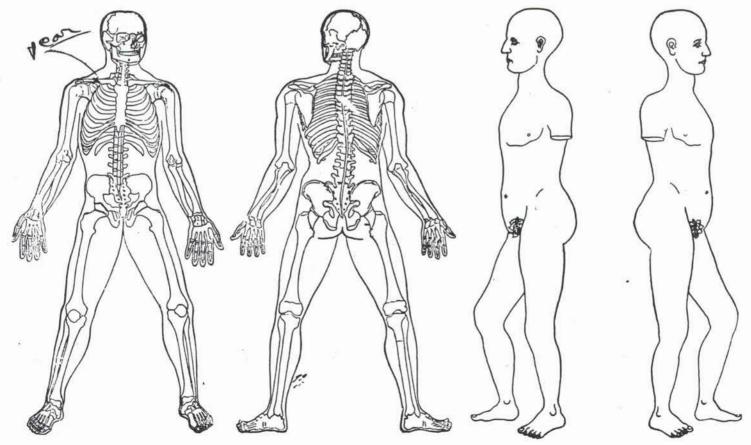
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The outlines of the human skeleton and figure should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

Q

SPECIAL ACT.

PENSIONER DROPPED.

DEPARTMENT OF THE INTERIOR

UNITED STATES PENSION AGENCY

Milwaukee, Wis.

OCT 29 1912 , 191

	001 29 1312 , 191
Certificate .	No 1070 993
Class	Charles W M. Kay
Pensioner	Charle WM Kay
Soldier	2-10-11-11
Service 2	gt-6 154 My

The Commissioner of Pensions.

SIR: I have the honor to report that the above-named pensioner who was last paid at \$30 ... to July #, 1912 has been dropped because of diath.

Note mil guun

Very respectfully,

J. T. Magdeburg United States Pension Agent.

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

6—2249