# Civil War Pension File of Peter Harris Part One Table of Contents

File #48777 - Miscellaneous Notes	2-11
Military Discharge Papers	12-13
Claim for Pension, 3/17/1865	14
Surgeon's Certificate, 3/17/1865	15
Officer's Certificate, 3/21/1865	16
Assistant Adjutant General's Statement, 7/26/1865	17
Approval for Invalid Pension, 8/26/1865	18
Affidavit of Peter Harris, 9/14/1867	19
Surgeon's Examination, 9/14/1867	20
Surgeon's Examination, 10/9/1867	21-22
Affidavit of Peter Harris, 11/8/1867	23-25
Approval for Pension Increase, 11/27/1867	26
Surgeon's Certificate, 9/5/1868	27
Surgeon's Certificate, 9/4/1873	28-29
Surgeon's Ceritifcate, 9/4/1875	30-31
Surgeon's Certificate, 9/7/1877	32-33
Claim for Pension Increase, 6/5/1878	34-35
Surgeon's Certificate, 7/3/1878	36
Pension Review, 7/13/1878	37
Pension Review, 8/25/1881	38



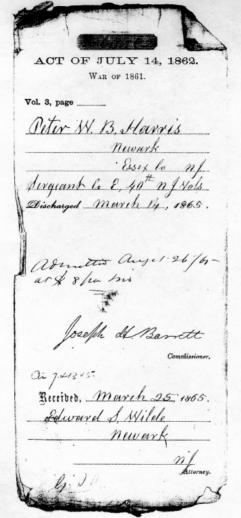
New Jersey Beter M. B. Rank Desgt Company &. Regiment 4.0 N. J. Vola. Irenton Agency Plate per month, \$ 8 ommencing 14 Marche 1865 Certificate duted 3.0 At 11ge 1865 and sent to Colo De Maile N.J. Act of 14 July, 1862. Book G. Not Dage 5 f.

Department f the Interior, PENSIN OFFICE. September 1868. Cestificate of Dischar sout to Pensioner, officent

for Ponsion, or Allery, in compliance with request

herewith filad.

Tobsles



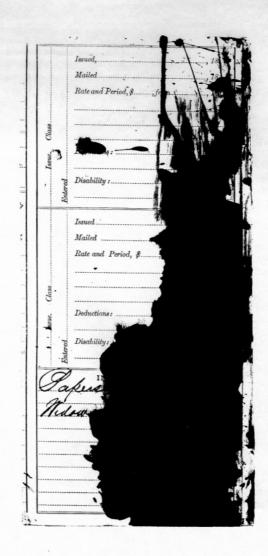


\$ 13.00 \$ 13.00 JUL -25: -1872 -108 Juno 8, 1878 ine Put to co stagenty of Lousal with Widows to 282767. Sept. 18, 1882.

(3-230.) INVALID. (Series 17.6.297.64 Cert. No. 48. Rank, Sergt Original Roll: Trenton Transf'd. Agency. on ending Deductions: Mailed Rate and Period, \$..... Deductions: Disability : .. [8246—10 M.]

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-114	a made and shrive charges from
40	n.f. b. yo not. D-

Cert. No. 48777 & SW of right fore arm.



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### NOTE 1.

The company commander will here add a statement of all the facts known to him concerning the disease or wound, or cause of disability of the soldier; the time, place, manner, and all the circumstances under which the injury occurred, or disease originated or appeared; the duty, or service, or situation of the soldier at the time the injury was received or disease contracted, skaling particu-nity and the state of the larly whother the injury was received or the disease con-tracted in the line of his duty; and whatever other facts may aid a judgment as to the cause, immediate or remote, of the disability, and the circumstances attending it.

When the facts are not known to the company com When the Jacks are not known to the company com-mander, the certificate of any officer, or affidavit of other person having such knowledge, will be appended—as the surgeon in charge of a hospital, the officer commanding a detachment of recruits, &c., &c.

### NOTE 2.

When a probable case for pension, special care must be basen to state the degree of disability—as 4, 1, &c., &c.; to describe-particularly the disability, wound, or disease; the extent of which it deprives him of the use of any limb or faculty, or affects his health, strength, activity, constitution, or capacity to labor or earn his subsistence. The surgeon will said, from his knowledge of the facts and circumstances, and from the evidence in the case, his circumstances, and from the evidence in the case, his limited to the constance of the control of the constance of the control of t paragraph will state that the "discharge was given by consent of the soldier, after a personal examination, and for disability, the nature, degree, and origin of which are correctly described in the white certificate." Par. 1266 Regulations, Edit. 1861. Medical officers, in giving certificates of disability, are to take particular care in all cases that have not been under

to take particular care in all cases tant have not been under their charge; and especially in epilepsy, couvulsions, chronic rheumatism, derangement of the urinary organs, ophthalmis, ulcens, or any obscure disease lishle to be feigned or purposely produced; and in no case shall such certificate be given until after sufficient time and exami-nation to detect any attempt at deception.

### DIRECTIONS

This certificate will be made out in depicted by the satisfier's con-passy commander, or where slower commanding the separate demand-ness to which he belongs, and sust by him to the surgeon who has charge of the booptial where the soleller is slot. The surgeon will papers to the regimental, detachment, or post commander, who will forward these, with his action molecule threats, though the proper to a division, to he corps, department, or other commander or officer to whom the authority to discharge emissed men may be specially

énlegand. These certificates, after having received the action of the highest authority to which they are required to be sent, will be returned forcept the same channel to the required to place of educational commander, where will, the discharge is arthorized by the enforce commander, where will, the discharge is arthorized by the enforce commander, where will, the discharge is arthorized by the enforce commander, where the paper; see that the soldier is fruitheded with the profile final examination in deplicate, and forwards forts of these coefficients define to the Adquaint General Dishell States Army, as Washington, D. C., they will not, under any circumstances, be given into the hands of the soldier.

### CERTIFICATE OF DISABILITY FOR DISCHARGE

Madical Director Description due Las

HEADQUARTERS DEPARTMENT OF THE EAST,

NEW YORK CTTY, March 9th, 1865.

To be discharged

By TONMAND OF

Capt. and A. D. C., A. A. A. G.

Adjutant General's Office! War. 28 1835. Diuplicate for the Bonsfen Diffice

Received (A. G. Office) .... 186

THE UNITED STATES ARMY OF FOR DISCHARGE. Regiment of the United S December, 1860, to serve Corres in the State of ... ersey, is thirty six years of age, five feet 6/2 inches high, fast complexion, grey eyes, the Brown hair, and by occupation when enlisted a cache Recy Matter During the last two months said soldier has been unfit for duty 60 days. Has complete Descriptive list, was wounded at Poter hong Valune 18th 1664. Has admitted into this Gen Hort August 25th 1664 from Sovell' U Gen Hospe Sortmouth Grove B. S. STATION . Mc Tongal Gen Hoop yp- Pros Hamis GERTIFY, that I have carefully examined the said monsess Resisting of anidale things of performing the duties of hen also fractions. Phialey. 1/2 in charge of Hosp. Sausteanth day of March, 1865, at . nmanding the But Koofe The Soldier desires to be addressed at Town ...... County "See Note 1 on the back of this. | 1 See Note 2 on the back of this. (A. G. O. No. 100 & 101-First.) [DUPLICATES.]

# INVALID'S CLAIM FOR PENSTON.

State of New Jersey, Essex County.	s.		
On this leve tree it	day of march ,	A. D. 1865 , personally appe	eared before me,
hederik H.	Leve , a Judge of th	e Court of Common Pleas, wi	thin and for the
	Peho To. B. Harris		
	in said county o		who, being duly
	clares that he is the identical Post		who
	United States, at Brank, &		ay of Dec.
lunder in the year	r 1882, as a Vol Serceant	in Company & . comm	anded by Captain
James Steven	r 1883, as a Vol Sergean Ly	Regiment of New Most	6 Volunteers,
in the war of 1861, and was	honorably discharged on the	4 day of ellar	ol , in
	e in the service aforesaid, and in th		
			0
ar Vetersting	Va on the 18th day	of June 1864	he was
wounded in	the right and be	low the ellow	Ly a difle
	wel to Lovell le		
R. J. where he	arrived June	26 and the	w den-
ained intil	The 25th day	of aucust u	hen he
	1-1-7	6 2 111	1000
was removed	to he Dougall	send work of	The othery
les MMN. a	and There remains	wind until I	he date
of his desc	hays a afen	sail	
and that he makes this de- by reason of the disability	claration, for the purpose of being above stated.	placed on the Pension Roll of	the United States,
	0	, phi	10
	Joseph magory	ev70.13 × 1	Lauis
Also personally appeared	Joseph macory	and g. heark	
residents of hear	in the State of	new luxur	, persons whom
	e, and entitled to credit, and who		
	N. B. Hanis make		
	on to believe, from the appearance		
	erson he represents himself to be;		
in the prosecution of this	elaim.	1 his	
		asiph + maso	iy
	Sen	new M Foremu	1
Sworn to and subscr	ibed before me, the day and year fi		
no interest, direct or inc	lirect, in the prosecution of this of	claim; that I believe the affia	nts to be credible
persons, and the claimant	is the person he represents himself	to be. deltal I has	I know here
Applicant's Post-01	is the person he represents himself	Thous tipe	- Houle
1. 00	. 0	1. 14 Ly	10
11 Sheff.	ed of	Murat pro	la
Ma			

Examining Surgeon's Certificate. Newara Ny Many, 1865-I hereby Certify, That I have carefully examined? Applicant. Potes M B Maris, late a Serpearly Co E. 40 ch Meg Now York Wols in the service of the United States, who was discharged at Fork Johny L. WY on the 14 day of Morel 186.5, and is an applicant for an invalid pension, by reason of alleged disability resulting from a gon that we want In my opinion the said Tates M. B. Harris promo of is Wholly incapacitated for obtaining his subsistence by manual labor from the cause above stated Judging from his present condition, and from the evidence before me, it is my belief that the said disability . O come in the service aforesaid in the line of duty The disability is persuanent in degare To more particular description of the applicant's condition is subjoined : A bele was received in the fore arm gather obliged els Particular Cemoval of the aboling the radius the bosisus lef for to performance of Manuel Lewice . He will inframe some on assefulness lotters his disability in became according to the disability and the limbine aporie Levi Cedana Exammelia

# Officer's Certificate.

I gent Chamberlany do hereby certify that I am
do hereby certify that I am
Wapluin of Company 6 of the tortieth
Regiment of Mew York Voluntiers and am acquainted with Pole of
B. Karrid who was a member of my Couch any and as I
am informed is an applicant for an Invalid Pension. I do further say that the said Yele, W.
13 Marris was mustered into the service on or about the 29 4
day of December 1863, having become disabled from doing duty as a soldier from
on or about the Eshkerick day of serve 1864, while in the service of
the United States, and in the line of his duty as a soldier in the manner and at the place as follows. viz:
at Petersburg Va on the 18th day of June 1864 he was wounded in the right and below
The elbor by a refle ball
The state of the s

That said soldier was in good health at the time he entered the service.

Dated at Dormp new Pelerstring of this 2/2 day of March

Popl By & 40 the Provos

Washington J. C., Judes j'W", 1865. Sis I have the honor to acknowledge the receipt from your Office of application for Pension No. CH, 162, and to return it herewith, with such information as is furnished by the files of this Office At appears from the Rolls on file in this Office, that was enrolled on the \_\_\_, 186 , at day of Regiment of Volunteers, 10 years, or during the war, and mustered into on the day of service as a 186 , al Volunteers, to solve Regiment of years, and during the war? On the Mouston Roll of Co. 5' of that Regiment, for the months of Mchaw afrit. 1865, he is reported Such Ceter. 21.13. Lawris is · Discharges on account of disability Which 14. 1865, Istalune of dishly not staffed. I am Sir very respectfully Your obedients servantes Calient Deck Assistant Adjutant General. The Commissioner of Pensions Washington & D C. Memoranda ? Samo of applicants Address 3 -

town.

WAR OF 1861.

ACT JULY 14, 1832. Brief in case of Peles It 13. Harris late a Sergt.

POST OFFICE ADDRESS OF APPLICANT:

newark cases to hig Enlisted Dec. 216, 1863, Discharged Mar 14 , 1865.

### CLAIM FOR AN INVALID PENSION.

Capt Chamberlen Celips that Sorgt Hami was wounted in the right arm below the elbow by a rifle ball on the 18 of June 164 at Pelinobusq la

of resection of mir ob this of who right arm right radius having bean also fractiones-

Commercia my Dr Clark man 14 \$105 who getifies that Sent Francis is disables in the right for arm by a gun shot wound which obliges the removat of the choice of the radius . His rand is useles for the performance of manual dervices

Annual examination

Admitted Charges 26 th, 1865, to a Pension of \$ 8 per month, commencing Disability Total Permanend in Some Disabled by G M. Brifu for arm Bramining Clerk. Cit I della Cons

Mame and Residence of Agent.

State of new fersey Country of Essign 355.

On this 14 day of Exptember AD 1867 person ally appeared before me a findge of the court of Common Pleas Peter n. B. Harris aged 34 years. a resident howark country of Essex and State of new persery who being duly sworn declares that he is a pensioner of the United States duly enrolled at the Trenton h. f. Pension agency, at the rate of \$8. per month, by reason of disability incurred in the military service of the United States, and that this prosent physical condition is such that he believes him self entitled to receive an increased pension of \$ 15. as provided for in the first section of the supplementary pension act. approved fine sip 1860- That he was a beigt in bo. 8.40" Regt. n. J. Bols. Her further declares that he is disabled in the following manner to wit: by a around in the right forearm rendering it entirely useless And he hereby constitutes and appoints Edward & milds of newark h & his altorney to prosecute this his claim and receive his certificate

Edward Than Them Let The M. B + Haris

The athan Orban Leb & 66 Sheffield St.

Also personally appeared Edward Rove and facot B. Orceland arhora & certify to be credible persons who being duly sworn, declare Each for himself, that they well know fiter M. B. Harris who signed the foregoing declaration in their presence; and that he is

## ACT OF JUNE 6, 1856. SURGEON'S EXAMINATION FOR INCREASE OF PENSION.

The official Surgeon will transmit his examination direct to the Pension Office, and inform the Pensioner. If supposed to be entitled to increased pension, to prepare his application and forward the same with his pension certificate.

This report should be forwarded whather the possioner is thought to be entitled to increase or not.

The Surgeon will accumrately describe the pensioner's present disability, and state whether it has been entirely or partially support to the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks) and the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks (printed Surgeon and Conference or not the efficial blanks) (printed Surgeon and Conference or not the efficial blanks) (printed Surgeon and Conference or not the efficial

	1 ne ometal blanks furnished Surgeons are for their exclusive use.
	STATE of New Jersey COUNTY of Eastern.
	They of Newach
	It is hereby certified, That Petgr W 13 Harres formerly a of Captain Music James & Mansey Company, &
	who, it appears by his pension certificate, was originally inscribed on the great Robellers
	Agency at the rate of syll dollars per month, on account, as he states of
	while in the line of duty in the military service of the United States, on or about the Captleant
	in the State or Territory of // Quica , is still suffering in
Here specify the particular disease or in- jury.	Ensequence of said with a will are
	The disability originates entirely from the injury or disease on account of which he was originally pensioned, as follows:  The night arm is of no value A is to dis-
Here state fully and ac- curately the character of the pension-	atter as to render fill the form man
er's disability, and how he is at present af- fected there- by; also state	shalling then were about three inches
whother the disability is permanent in its present degree.	according to pere and the head
	The is no possibiles of empronement
	intoler act of pine 1906
	1/10
	Muce lack Examining Surgeon.

Eder B. B. Hownis

## SURGEON'S EXAMINATION FOR INCREASE OF PENSION.

The official Surgeon will transmit his examination direct to the Pension Office, and inform the Pensioner, if there is increased disability, to prepare fish application and forward the same with his pension certificate.

This report to be forwarded whether there is increased disability or not. The Surgeon will suitably describe in what manner the original disability has been increased, and whether it has been entirely or partially caused by vicious habits.

STATE NEW JONEY COUNTY Essex
Town Or Money
Oct. 9th , 186 %
It is hereby certified, That Peter In B. Harris
formerly a dergeant of Captain Stevens' Company O
formerly a Sergeant of Captain Stevens' Company, & in the 41th Regiment of M.J. Valz, in the war of late Ribellion
who, it appears by his pension certificate, was originally inscribed on the rolls of the Agency in Fonts, and since paid at Funta (1)
Agency at the rate of dollars per month, on account, as he states, of Muschot Mrund
while in the line of duty in the military service of the United States, on or about the
the in the inde of duty in the mintary service of the United States; on or about the
day of June . 186 A at a place called in fint of Outneburg.
in the State or Territory of Wymia , is not only still disabled in
consequence of said injury, but, in my opinion, his disability to obtain his subsistence by manual
labor has increased since his pension was allowed, so that it amounts to State (3" Grade)
disability.
The increased disability originates entirely from the injury or disease on account of which he
and any of another of which he

was originally pensioned, as follows:

Right arm was struct by a convidad ball about 2 moches below the elbow. Both Rasius and Alna were forcetured, and about 1/3 of the Uma have been executed, having 13 joining the elbow joint.
The Rasius was fracture about midway between albow and used write, a portion has deen last, and the union, the assesses is weast. He has not power of grasping with the hand, not have to fen to write write. I thenever he mades the effort to use the line, it is followed by severe pain and someness in regum of Eltow soint. I often this pair and romeness exists with out any assignable cause. Wis disability is 2- miralent to loss of his trans, is wholly permanent, and is not in any Day alpendent upon ricious tradition Examining Surgeon.

Applications

for all merease
by

Reter M. B. Hamis
Riv. Rest moss

claim no-4877-201

Edwards. Milly prevash

State of heropersey County of Esself 35.5. On this 8th day of november A.D. 186) personally appeared before me liter W. B. Hams aged 12 years, a resident of hewark in the Country of Essex and State of new Jersey, who being duly swo according to law, declares that he is a pensioner of the United States, duly enrolled at the Frenton h. p. pension agency, at the rate offo. per mouth, by reason of disability incurred in the military service of the United States as a Sergeant in bo. "E" 40" Righ. newperkey volo, and that his present physical condition is such that he believes himself subtled to receive an increased from Sion of the Third grade provided for in the first section of the supplementary pension act, approved frme 6" 1866. Herfurther declares that he is disabled in the following manner to wit: by a wound in right forearm, rendenug the right ann useless in manual labor of any kind. And he hereby constitutes Ind appoints Edwards. Whole of newash. prosecution of this claim Elward Dobbins Eter & Bairfarns Gumo Smits

Also personally appeared before me fames Smith and milliam He Campela I hewark herofersey, whomed certify to be credible persons, who being duly sworn according to law, declare. Each for himself, that they will know Reter W. B. Hearn's who made his mark to the foregoing declaration in their presence; and that he is the identical person he represents himself to be, and that he is disabled publicationly in the manner alleged in baid declaration, They further swear that they have no interest in this claim, nor in its prosecution

Milliam H. Camfield

Swoom to & Subsenbed before me this & day of hovember A.D. 186); and I hereby certify that thave no interest direct or indirect, in the prosecution of this claim and that I made known the contents of the above to all the deponents before recupion THELES.

STATE OF NEW JERSEY, COUNTY OF ESSEX,

A See TOWARDS TOWARD DOWN OF Essex, and Clerk of the County of Essex, and Clerk of the Circuit Court and Court of Common Pleas of said County, do hereby certify that said Courts are Courts of Record, Trax The described to the Great of the above of the Court in and for said County, duly commissioned and swort and gnalified to act as such, that I am well acquainted with the hand-writing of such Paragraphy.

In Testimony whereof, I have hereunto set my hand and affixed the seal of said Courts and County, at Newark, this fourtements day of Arvicuber A. D. 1867, M. T. Fusium Bury Clerk.



### WAR OF 1861.

ACT JUNE 6, 1866.

Brief in case of Seler H B Harris Sents of Company & , 40 Regiment N.J. Vor

POST OFFICE ADDRESS OF APPLICANT:

hewark Essex. Go by

Enlisted Dec 21 , 1862 , Discharged Mw 14

, 1865.

## CLAIM FOR AN INCREASED INVALID PENSION.

DECLARATION AND IDENTIFICATION IN DUE FORM.

PROOF EXHIBITED.

Cutifical, title any 20 10 Surrenter

Learn totally and per manenthy disables by & strong the night arm totally and per manenthy disables by & strong the night arm the arm is of no value and his widely to furform.

Necessary labor is equivalent to the loss of the hours borry fitter makes almost three manes about three makes religion to the arm is account for months of the hours to feestile to be of any value

Admitted lies by . Alter of my by for arm

Line 6. 1866.

Disabled by . Alt of right for arm

La Milde ergs

Name and Residence of Agent.

Name and Residence of Agent.

[BIENNIAL, ANNUAL, OR SEMI-ANNUAL EXAMINATION.]

# Gramining Surgeon's Certificate.

Nuvart N.D. Sept 3th, 1868.
The M. B. Ranis, who was a Somework a E.
40 N. Teles in the war Skhellers and was granted an invalid pension, to be paid now at the Agency in
Finter , by reason of alleged disability resulting from 9.8 W. , which he states to have been received
in the line of duty while he was in the military service of the United States.
In my opinion the said pensioners disability, from the cause aforesaid, continues at Folal 3" Units.
A more particular description of the applicant's condition is subjoined: Has in no way mykerner some last scane
Oct. 1867
. 16. 11.
The state of the s
inc strice.
Auprothell
Swamining Surgeon.

4 SURGEON'S CERTIFICATE · 4

DUPLACATE

PERPODICAL EXAMINATION

IN CASE OF

SUSA WB. Regin, H.J. V.

No. 48777

DATE OF EXAMINATION,

El. H. M.

By Tart | Examining Surgeon. 5

() JOT 2 . 16 ...

OF

Biennial, Innual, or Semi-annual Examination, on which the Pensioner draws his Pension.

	State: Pan Chesey County; Open
	Post Olice Design of As V
	Post Office: Peward John 4., 1870.
	Poter WB Harris That My have carefully examined
Pensioner's ser- vice.	
give Certificate	and was granted an Invalid Pension under Certificate No. 48.7 77
to be paid.	to be paid now at the Agency in New of State of by reason of alleged disability resulting from 1. 8 W.
	by wason of autogen assaulty resulting from 1.0 M.
	line of duty while he was in the mility while he was in the
State whether	line of duty while he was in the military service of the United States.  In Cur chinion the said Provinces stratility of the United States.
nes: and, if so, its present degree.	In Cur opinion the said Densigner's disability, from the cause aforesaid, continues at MILL 3 Wake (F. 17)
	the Gensioner's condition is
	subjoined:
scription.	Height, J. D; weight, 20; complexion, Hisie;
	Height, 5.6; weight, 130; complexin, Histor; age, 24 9; respiration, 15; pulse, 2
	I. S. W. of right arm low of portion of Radius I ulna - loss of rotation, flexion spromation. Complete loss gues of arm
	+ ulund Vin al The opportion of Radius
	Complete line of rotalion, flexin spromation.
	soupen coes of use of arm
	Am of a
-	Amorbuel
-	12 19
	2. Millian
	ol. Melle
	Bonning Surgeon 1

DUPLICATE.

SURGEON'S CERTIFICATE

PERIODICAL EXAMINATION

Reter W. B. Harris

Co. E Register Wy

Note Of Examination,

Off U. 1875

Examining Surgeon

## SURGEON'S CERTIFICATE

Biennial, Annual, or Semi-annual Examination, on which the Pensioner draws his Pension.

State Hew June Come Cere
State Hew Juney County: Exect 4. 1875.
President hereby certify, That WE have carefully examined
Letter M B. Harris , who was a deergent
8. 6. 40 N.V. V in the war of 1864 65
Be particular granted an Invalid Pension under Certificale No. 48727 to be paid pour
Agency where at the Agency in Truton no by reason of alleged
Be particularly granted an Invalid Pension under Certificate No. 48777, to be paid now as a special point of the County where at the Agency in Tructon 12 by reason of alleged disability resulting from
which he states to have been received in the line of duty while he was in the military
service of the United States.
State whether disability con- tinating continues at Jotal 3 France 1880 and
A more particular description of the Pensioner's condition is subjoined:
Particular des Height, 5, 6; weight, 130; complexion, d'air; age, 5/
respiration. 18; pulse, 70
On SMIC O. 1.
Gadies & When - Loss of rolation flexuon & promotion, complete less of use of arm - equal to loss of arm
Gadies & Ulner - Loss of rotation
Mexion & promation, coupleto less
of use of arm - equal to loss of arm
A Company of the Comp
Amortanes
Mortung
2A a /
J& Oslom
acelitain Meren
Transing Surgeof.

SURGEON'S CERTIFICATE

PERIODICAL EXAMINATION

Metr M. D. Alanin.
Co. E. 40 Regit, My U.
No. U8777

DATE OF EXAMINATION,

Board of Examining Surgeon. S.
Merraul

## SURGEON'S CERTIFICATE

Biennial, Annual, or Semi-annual Examination, on which the Pensioner draws his Pension.

	State: Manferrey County: Esses
	Post Office: Marrack Sept 7 . 1877.
Pensioner's	Me hordy certify, That the pave carefully examined
ce.	felin M. B. Harris who was a Sarge-
	609. 40 Hyo in the war 0/1861-65 and was
particular ve Cerita-	granted an Invalid Pension under Certificate No. 48777, to be paid now at the Agency in Maskington O.C., by reason of alleged disability resulting from A.S. W and
ency where paid.	at the Agency in Mashington D.C., by reason of alleged
	disability resulting from 4.5. W and
	which he states to have been received in the line of duty while he was in the military
	service of the United States.
te whether Rity con- s; and, if ts present	In our opinion the said Pensioner's disability, from the cause aforesaid, continues at 14.22
	A more particular description of the Pensioner's condition is subjoined:
tioular dos-	4:45 6 :4 130
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	Examining Surgeon.



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All the blanks in this form should be carefully filled and the requirements of the Norzs strictly observed.

An honorable discharge from the service in all cases is necessary.

Declarations of claimants, either for original pension or for increase of pension already granted, must be made before a court of record, or before some officer thereof having custody of its said; said officer being fully authorized and empowered to administer and certify any eath or affirmation relating to any pension or application therefor, and the said of the pension of the pension of a pension of a pension of the pension of the pension of the declaration and other papers should be as legible and as clear in statement as possible.

Where any evidence is already on file in any department of the Government, a definite description of and specific reference to it will reader it available in any subsequent claim.

The post office address (naming street and number in all large cities) of the applicant, attorney, and witnesses, should be demodded in or accompany every application, and all evidence in each claim; and each change of residence of said partial whild communication of the pension of the original pension of the pension of

recognized.

All facts, testimony of which is required to establish a claim, must be proven by the affidavits of two or more credible witnesses unless other evidence is specified.

The statements of claimants, unless duly corroborated, are not accepted as evidence.

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 sey interest, direct or indirect, in the prosecution of the claim.

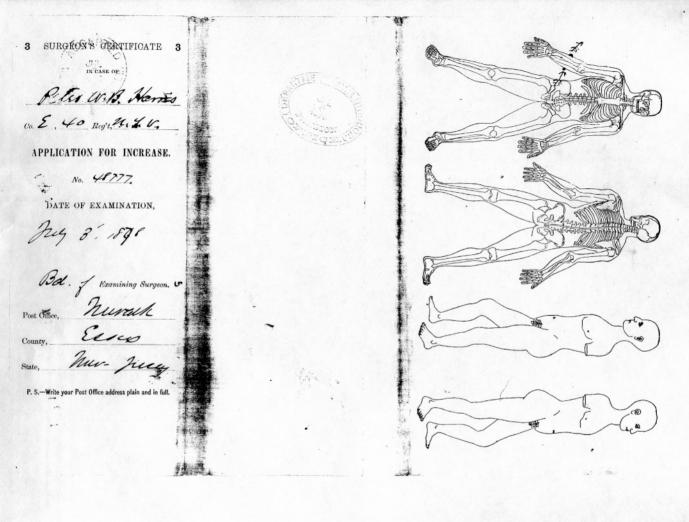
Persons destring to complete claims pudding at the decease of the claimants, must furnish a duly verified certificate of their authority as heirs or legal representatives.

With all claims for arrears, increase, or restoration to the rolls, the original pension certificate must be returned, or explanative of its absence must be given under each.

To facilitate the adjudication of claims, all the requisite evidence that is available should be forwarded with the application.

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County of Ciss	SS.
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n de Pension	Agency at the rate of dollars per month, b
reason of disability incurred in th	ie
of Company 6	4)14 my val
that his present physical condition	n is such that he believes himself entitled to receive an increased pension; an
that he herewith returns his presen	
He further declares that he	e is disabled in the following manner, to wit: (2) . Sun Shat
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to prosecute his claim; that his re	sidence is No. 73, in Plane street, of Muran
	st office address is 13 Plans It Mewalk ny
(Attest,)-Two witnesses who can	0
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J. N. Manefild	
Also personally appeared.	Wallet Ole Free hour residing a
Morrack Tix	and Ja Man Latel do , resulting to
residing at MCNUCLARY	, persons whom I certify to be respectable and entitled
o gredit, and who, being by me du	uly sworn, say they were present and saw.
Peter W.B. X	avu's ,, the claimant, sign his name (or make his mark) to the
elly IV.10, CV	anu, the claimant, sign his name (or make his mark) to the
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foregoing declaration; that they acquaintance with him, that he is in the prosecution of this claim.	and subscribed before me this
foregoing declaration; that they acquaintance with him, that he is in the prosecution of this claim.	and subscribed before me this

Company and Regiment, if in the Army; and Yessel, &c., if in the Navy.
 Set forth extent of present disability as sequence of disability for which pension was originally allowed; how far incaparitated for manual labor, or dependent upon the personal aid or attendance of others.



West morean INVALID PENSION. Ister Mr. So. Harris 73. Blame LX (Rank, Sing) Aguart ) Company, Essey Co) & Q (Regiment, 40 A. Q Colo Altorney, Hank Barklett Samuel & Fee, \$ 10 per month, commencing Disabled by John Roy gon ann Submitted July 11, 187 & Danielandy, Examiner. Approved for Gentlehofore Approved for gent hot wound inght for a sue Jalysomen Reviewer Chalf 13 -, 1878, Mer 14 , 1865 - Certificate surrendered Course 6, 1878 Original application filed Mas 25-1865. Last paid at \$ 4, to June 4 1878. Increase application filed from 6, 1848. Pensioned , 18 ; from Mar 14 . 1865; at \$ 8 per month for Am Adam anne me to \$15- Jum June 6,66. 20 to \$18 from June 4.72 Sameed to \$14,0 " 4.1874.

Claims GAM RX gave anne

\* T.

Rank, Company. 12 York hos State. Regiment, arch 15-1865 per month, commencing June 6 1866. and and \$ 14- from June 4. 25. 1881. (Seah) dedall , Examiner. Approved for Discharged Man- 14 , 1865. Certificate surrendered 45 Original application filed Man 25 , 18 65. Last paid at \$ /4 Pensioned Mug 30 , 1863 from Max 14 , 18 65 at 8 per month Pom /me 6 66 - 8 5/8 /20mm REduced " 8/H H'77 - onbreak Kellet Claims

# Civil War Pension File of Peter Harris. Part Two Table of Contents

File #282767 - Miscellaneous Notes	2-7
Widow's Claim for Pension, 5/5/1881	8-9
Affidavit of Isabella W. Harris, 5/5/1881	10-11
Sworn Copy of Marriage	12-13
Affidavit of William Ferris, 10/7/1881	14
Affidavit of Isaac Haulenbeck, 12/22/1881	15-16
Affidavit of Joseph L. Miller, 9/25/1882	17-18
Affidavit of Catherine A. Gomer, 9/25/1882	19-20
Affidavit of John P. Morgan, 9/26/1882	21-22
Affidavit of Sarah Johnson and Eveline Barnett, 9/26/1882	23-24
Affidavit of Isabella W. Harris, 9/26/1882	25-26
Affidavit of Dr. William A. Smith, 9/28/1882	27-28
Affidavit of Alfred Payne, 10/16/1882	29-30

Albertion Ex'r. No. 2827 Clerk. Application filed: Attorney P. O.

(Spicial) it medical trali and that the winds her own aff, and that the worder as to origin a progress of discuss is the best she can obtain. lug. 2.83 . Su

No. 2827/67 Acts of July 14, 1862, and March 3, 1873. Leabel M. Harris Peter M. B. Warris Sugt. Co. E" 40 N. y. Tisks Died at April 25. 188 Inv. Cect. No. 48777 ...., 18 Application filed: May 6 Attorney: A. M. Dong A.W. Fitzgerald

"See old Jacker N. Hobut (Mrs. You. W.H. F. Filan) MASS. ted therein shall have been faceff facket and grown as 3-1081. (0ld No. 3-405.)

#### PENSIONER DROPPED.

### United States Pension Agency.

Cortificate No. 297.644
Craft Sport of Sport of

The Commissioner of Pensions.

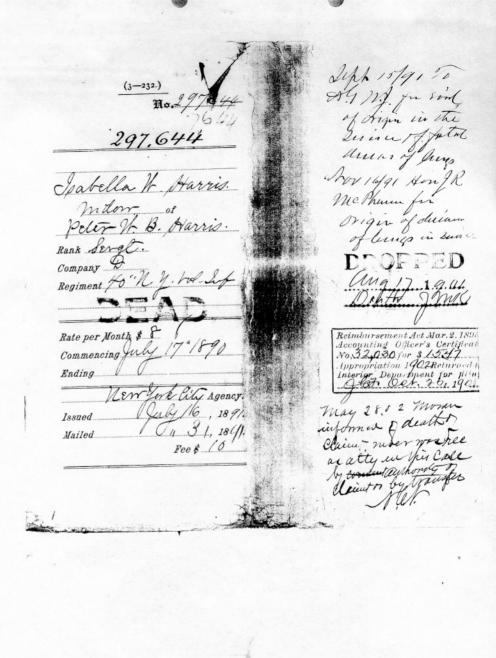
TR. I have the honor to report that the

may 4 90/ may 4 90/ ment house peraffe seported ment he date not given on montan dard dated any 9/90/

lery respectfully,

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 knewn.



#### WIDOW'S CLAIM FOR PENSION.

State of New Jerray	
County of Esker	
,~4 //	
ON THIS 3 day of Morey	, 1887, personally appeared before me, a
Lolerkof a Court of Record in and for the	e County and State aforesaid. Isabell
W. Harris a resident of	Nawark in the County of
Ester and State of New	//
	the Pension provided by the Act of Congress approved
	a W. B. Harris who was
10 - 1- 6	hy
in the 40 Regiment of Your York	· .
ber maiden name was. Isabell W. Waes	in the War of 1861; that
1 - 11 1 1	and that she was married
n ,	or about the day of
A- ()	the Country of
	Ker. David W. Bartine and
that she knows of no record evidence of said marriage A. K.S.	aft a swom copy of the
marriage contifecate hareants a	unayed.
2-	-240 2 1/2 1
SHE FURTHER DECLARES that said	M.13. Marris her
husband, died in the service of the United States as aforesaid	Newall
in the State of New Jersey	on or about the day of
April 181, of Thither	s Culmones, Contracto.
while in the moletany service of	The Government along states
1 + 710 0 11	that she has remained a widow ever since the death of
	and that she has not in any manner been engaged
in, or aided or abetted, the rebellion in the United States; and	she hereby appoints Os
esty of Nawall Ny.	as her lawful Attorney , with
power of substitution, and authorizes. June to present as	nd prosecute this claim, and to receive her pension cer-
tificates. The following	of birth and placeof residence of all the children
of her deceased husband who were under sixteen years of age a	at the time of his death
Augustur 6, Harris for	Jan 23 = 1868 V
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	n , h
My Post Office address is 744 3 Track of	evaile VIP,
If mark is made, two witnesses sule write sign here.	
office to make the attraction who attracted upon	
mu 11.	
Mu A Tmeif	Cell me de
mu 11.	Souliell with Har
mu 11.	Souliello Claimant, Har
George H. Neall	Soulielle Chammer, Har
George H. Neall  ALSO PERSONALLY APPEARED before me, I.	Soulellamin, Har
JEONGE H. Neall  JEONGE H. Neall  JEONGE HO. Neall  JEONGE HO. Neall resider	Ssafignaturo of Claimant, Har Allam A. Smith
George H. Neall  ALSO PERSONALLY APPEARED before me, Il.  and Lever Julia Nearly resider  County, and State of N. Nearly July	to me well known as credible persons, who being
JEONGE H. Neall  JEONGE H. Neall  JEONGE HO. Neall  JEONGE HO. Neall resider	to me well known as credible persons, who being
George H. Neall  ALSO PERSONALLY APPEARED before me, I and I was given by the Mean of the second duly sworn, declare, that they were present and saw said. So	to me well known as credible persons, who being
George H. Neall  ALSO PERSONALLY APPEARED before me, I and I was given by the Mean of the second duly sworn, declare, that they were present and saw said. So	to me well known as credible persons, who being
George H. Neall  ALSO PERSONALLY APPEARED before me, I.  and J. P. Personally Appeared before me, I.  duly sworn, declare, that they were present and saw said	to me well known as credible persons, who being
George H. Neall  ALSO PERSONALLY APPEARED before me, I and I was given by the Mean of the second duly sworn, declare, that they were present and saw said. So	to me well known as credible persons, who being
George A. Neall  ALSO PERSONALLY APPEARED before me, I and I will be the service of the service	to me well known as credible persons, who being
George H. Neall  ALSO PERSONALLY APPEARED before me, I and I was given by the Mean of the second duly sworn, declare, that they were present and saw said. So	to me well known as credible persons, who being
George A. Alal George Defore me, M. and M. a	to me well known as credible persons, who being

Note.—If there is any record evidence of the marriage, insert—except that of which a true copy is hereunto amezed, and append a certified cony of the record accordingly. The cause of death must be specified in the second clause of the declaration. The declaration and evidence of identity, must be made before a Court of Record, or before some officer of such a Court duly authorized to administer eaths, and having custody of its seal, which must be attached.

PENSION.

ACT OF JULY 14, 1882.

Mrs. Jackell W. Karris

Widom of Peter M. A. Karris

E. Ch. 40 Roya.

FILED BY

FO. M. Doublet At

Office of the Company of

1

GINERAL AFFIDAVIT. State of Au County of Green In the matter of Isabel W. Harris, Weson of Feter M. A. Harris C. E. 40 N.4. Voer Pau Cor. No. 48.777

Personally came before me, a Collect of Locaruman Phina in and for aforesaid County
and State, Statell VI: 10001 in aged 5.3 years citizen of the Town of Newarls County of E. A. State of well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to aforesaid case, as follows: That she is the wison of the said Pater M. B. Karris Co & 40 N.Y. Voc. Pension Certificate so 48,777 who died at Newark My. April 25th 1881 That there is an unpaid amon Voucher of the said bustand for the time botween March H & and April 25th , and they the said Isabell asks that said amont be paid to ofer the widow of said soldier. The Person certificate, Vonahar and Inquestrate of the Register of Drack, of said soldier is herewith walned That the port office addens of said appleant is 744 Broad store Nowack My.

.....further declare that......no interest in said case, and......not concerned in

In the execution of papers and evidence, whenever a person witness signs by mark (†), two persons who can write itest the signature by signing their names opposite.

The official before whom papers are exec t nadmo catulopetent witness to a mark

Sworn to and subscribed before me this day by the above named affiant ; and certify that I read said affidavit to said affiant , and acquainted h w with its contents before a 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; that so he is a creditable person and so reputed in the community in which he reside Witness my hand and official seal this. Sign here .. ADD SEAL HERE. NOTE.—This should be sworn to before a CLERK OF COURT or JUSTICE OF THE PEACE. If before a JUSTICE, Men CLERK OF COUNTY COURT must add hie certificate of character on the back hereof, and not on a separate slip of paper. STATE OF ....., COUNTY OF ....., 88. I, ....., Clerk of the County Court in and for aforesaid name to foregoing affidavit, was at the time of so doing a.....in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine. 

Do It Never Dable (or leadice of the Descal will put his signature and seal impress (if he has one) on a sheet of paper, and a Clerk of Court will certify that they are genuine, staming when his commissionly as pitted find when his will expire, he can execute paperate be used in QNE DPARMENT ONLY during this years of Office githout activities only like it will be a considered to the paperate of the paperate of

no Seward parametricular before one N. P. of the name date need Co. Cloth's Certificate, on one only, if all are to be used in one case.

36 Write an affidavit just as you would write a letter, stating all the facts, circumstances, dates and places, as near as you can remember, and if of your own personal knowledge and observation, and state how you know what you say to be true.

GENERAL AFFIDAVIT.

OASH OFF

PORT

AFFIDAVIT OF

FILEID BY

C.C. C. D. ALL.

C.C. C. C. C. C. D. ALL.

C.C. C. C. D. ALL.

C.C. C. C. C. D. ALL.

C.C. C. C. C. D. ALL.

C.C.

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Santy of Bray & SS

matter of Okabell Tr. Harris wedow of Peter M.B. Warris Co.E. 40 \$ N.Y. Vol. Pew. Cov. No. 48777 ou this 5 - day of May A.D., 1881 before me blesk of bornmon Pleas bourt personally appeared Isabell M. Harris residing in the Cety of Newark N.J. and who being duly

Harris above named and the widow of Peter M.B.

following is a true copy of her marriage can

tificate.

This may existing to all persons citerated that on the day above written in the city of theward med state of the fact of the one part and Min Jacobselle M. Waster of the other part were by me (a minester of the Poopel) united in the honorable and sound bound of lawful marrays

Davie M. Partine

The avone is a correct copy of my marriage cer-

Subscribed and sworm to before our the day and you alm first stated, and further costiff that the cartificate herewith exhibited to me I have examined and believe it to be the true marriage certificate of the partie. some named, I am disinterested. Ma Admits blesk of bommmilless by Genovoe Definity

Sworn to and subscribed before me this day by the above named affiant; and certify that I read said affidavit to said affiant, and acquainted how 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; that he is a creditable person and so reputed in the community in which he resides

Witness my hand and official seal this Swenth day of October 186

ADD SEAL HERE.

nown

cert in file

Norm.—This should be sworn to hefore a CLERK OF COURT or JUSTICE OF THE PEACE if before a JUSTICE, then CLERK OF COUNTY COURT must add his certificate of character on the back hereof, and not on a separate slip of paper.

TALE OF COUN.	1 OF	, 88.
A STATE OF THE STA		
I,	, Clerk of the County Cou	rt in and for aforesaid
ounty and State, do certify that	, Esc	q., who hath signed his
ame to foregoing affidavit, was at the time of so doing	<u> </u>	in
ad for said County and State, duly commissioned and	sworn; that all his official acts are en	atitled to full faith and
edit, and that his signature thereunto is genuine.		
Witness my hand and seal of office, this	day of	18
*		
•••		

Clerk of the .....

portif, a Notary Public (or Justice of the Peace) will put his signature and seal impress (if he has one) on a sheet of paper, and a Clerk of Court will certify that they are geauine, stating when his commission was dated and when it will expire, he can execute papers to be used in ONE DEPARTMENT ONLY during his term of office without authentication by Clerk of Court.

\*\*Such Certificate for each Department where many authentications are required, will save much expense.\*\*\*

\*\*Such Certificate for each Department where many authentications are required, will save much expense.\*\*\*

\*\*Such Certificate for each Department where many authentications are required, will save much expense.\*\*\*

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\*\*Such Certificate for each Department where many are required, will save much expense.\*\*

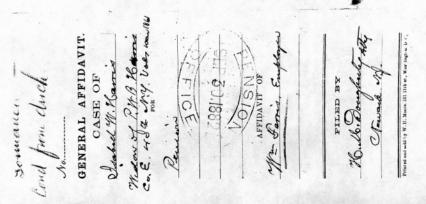
\*\*Such Certificate for each Department where many are required, will save much expense.\*\*

\*\*Such Certificate for each Department where many are required, will save much expense.\*\*

\*\*Suc

38 Several papers executed before one N. P. or J. P. on the same date need Co. Clerk's Certificate, on one only, if all are to be used in one case.

Write an affidavit just as you would write a letter, stating all the facts, circumstances, dates and places, as near as you can remember, and if of your own personal knowledge and observation, and state how you know what you say to be true.



late of New yerrs	y \ss.				
unty of Essex		1			
In the matter of claim	so of	Isabell.	1. 16ar	ns widow	
Peter 11. B. Kam	a late of	3 6. 40	to My	Tol mon	71
Personally came before me, a	landrate	4 <b>e</b>	in and for a	foresaid County	
William Took be	v		, aged 5	-3 vears	
zen of the Town of Post Office Add	& County	of Green	-n s	O State of	
New Jarrey					
og duly sworn, declares in relation to				,	
hat they were per	somelly as	a cutin	nately	acquain	Cd
it the said I	Pote Pete	517.B.K	amis	habing	
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361, That the san				b' m	,
said way	Ver de la	westo ou	the	said	
casis on his retor	on from the	war an	e form	a him	
broken down no	aw, healt	t gone	mate	todo	
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work necessary					
That the said "	Garris Ceri	Tuned	me aur	eled !	
That the said ?	Garris Ceri	Tuned	me aur	eled !	
That the said is until he died	in April	(881 of	consumer to The	fitim,	
That the said is until he aid in the and that in the	in April	1881 of aspenses	consumer to The s	ftin,	h.
That the said is until he aid in the and that in the	in April	1881 of aspenses	consumer to The s	ftin,	h.
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That the said is until he aid in the rud that in the	in April	1881 of aspenses	consumer to The s	ftin,	ha
That the said is until he aid in the and that in the	in April	1881 of aspenses	consumer to The s	ftin,	li.
That the said is until he aid in the and that in the	in April	1881 of aspenses	consumer to The s	ftin,	ha
That the said is until he aid in the and that in the	in April	1881 of aspenses	consumer to The s	ftin,	d.
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That the said is until he aid in the and that in the	in April	1881 of aspenses	consumer to The s	ftin,	
That the said is until he aid in the and that in the	in April	1881 of aspenses	consumer to The s	ftin,	
That the said is until he aid in the rud that in the	in Africa.	1881 of aspenses	ay woo	ption, laid entre westates	
That the said is and the death was the de in the military so	in Africa.	Connect of the W.S. in	de se	not concerned in	
That the said is until he and the said in	comis ceris in Africa of in Afr	asponents of the way. in ointerest in said	de se	ption, laid entre westates	a.
That the said is until he and and that in the death was the de in the military so	in Africa.	askeneus  of the  u.s. in  ointerest in said of  brase	de se	not concerned in	a.

Sworn to and subscribed before me this day by the above named affiant ; and f certify that I read said affidavit to said affiant , and acquainted Them with its contents before They 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 affiants is personally known to me; that they is a creditable persons and so reputed in the community in which they reside

Witness my hand and official seal this 224 day of Sign here Chrolis Loug

ADD SEAL HERE.

cert on file

NOTE.—This should be sworn to before a CLERK OF COURT or JUSTICE OF THE PEACE. If before a JUSTICE, then CLERK OF COUNTY COURT must add his certificate of character on the back hereof, and not on a separate alip of paper.

STATE OF, COUNTY OF, 88.
I,, Clerk of the County Court in and for aforesaid
County and State, do certify that, Esq., who hath signed his
name to foregoing affidavit, was at the time of so doing ain
and for said County and State, duly commissioned and sworns that all his official acts are entitled to full faith and
predit, and that his significant thereunts becamine.
Witness my hand and seal of office, thisday of
and contract of the
Clerk of the
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22 If a Notary Public (or Justice of the Peace) will put his signature and seal impress (if he has one) on a sheet of paper, and a Clerk of Court will certify that they are genuine, stating when his commission was dated and when it will expire, he can execute a Diere of Court will certify that only are genuine, rating when his commission was ance and when it will expire, he can execute papers to be used in ONE DEPARTMENT ONLY during his term of office without authentication by Clerk of Court. 13 Such Certificate for each Department where many authentications are required, will save much excepts. The Department where many authentications are required, will save much excepts. The Department where many authentications are required, will save much excepts. The Department of the Departmen

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nor Write an affidavit just as you would write a letter, stating all the facts, circumstances, dates and places, as near as you can remember, and if of your own personal knowledge and observation, and state how you know what you say to be true.



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State of A	w Jerry	Janntn	of Great	55.
	41	e	1 . 2	/
In the matter of	Claim to 2 Poto W.B.	-02767	Vertical 1	como
widowoo	1 de 11.19.	Mams Ce	6 40 71	7. 02
ON THIS 2	5 day of	tope	A. D. 1882 personally	appeared before me a
Joany!	where	in and for the afore	esaid County, duly author	ized to administer oath-
Joseph.	L. Miller	aged 55 years,	a resident of	ewach
in the County of	seen	and State of	Now In	eary
	e reputable and entitled to e			1
an fallama.				
Thes	A he was A	correctly	and cul	walely
acare	co with The	they gain a knowledge of the	2007 The facts to which they reality	1-
to sel	is acquaint	-	16118 N	1-6
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A District on the				
A MALE STATE OF THE SECOND				
				.1
H Post Office addr	ress is 30 Elm urther declare that he 1	et. Na	vade:	• •
Deponent	urther declare that he	no interest in sa	id case and	not concerned in its
prosecution.				
	2			
		6	roseph L	25:00.
If Afflants alon by mark	two persons who can write sign	hara I	organ V	ouce.

	and the words ca	ilistoneel	in _	be same. I further certify that I
nowise	interested in said case	, nor am I concerned in its	prosecution; and that said affia	ant personally known
	at a		no 1	7 0
			/ pprof )	(8)gnature]
L. S.			Note	my Ouce
	C	est on file		[Official Character ]
T	lo comite shot			Court in and for aforesald County
	lo certify thattion and affidavit was	at the time of so daine	Esq., who h	hath signed his name to the fore
			all his official acts are entitle	in and for in and to full faith and credit, and the
	re thereunto is genuine		an are onload acas are emille	in to tun faith and credit, and the
	Witness my hand and s	seal of office, this	lay of	188
(L. S.)			Clerk of the	
Note.	—This should be sworn	to before a CLERK OF C	OURT, NOTARY PUBLIC.	OF JUSTICE OF THE PRACE
and not	on a separate slip of p	Y, then CLERK OF Coaper.	OUNTY COURT, must add	or JUSTICE OF THE PEACE.  I his certificate of character her
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4				

	G .
State of New Carry County of	Escep 55.
in the matter of claim to 282 767 of I	pascel morams
in the matter of claim No 282, 767 of I	E. G. HO NY. Vacs
ON THIS 25 day of Sept A.	D. 18824 personally appeared before me a
Notary Public in and for the aforesaid	County, duly authorized to administer ouths
Catharine A Gomer aged 54 years, a re	sident of Acade
In the County of Excess and State of	New Jereon
well known to me to be reputable and entitled to credit, and who, being duly	
as follows:	
as TOLIOWS: That she has trown the said	ets to which they testify.
early childhord having hered a	the same neighborhouse
for near of the time up to time of	his death in April 1881.
These the said leter was store	y and healthy prior
to and alientisting of the	· Marchant
from the was in very poor bealt	and with a cough
that continued and the gree	v steadily worse
until his death and that his	death in the es-
Tomation of deponent was the d	ined recall of
disease constacted and the to	and ships andered
in said war. Deponent is no	in am way re
later to above names parties; a	nd that the said
Isabell is identifical as the word	
and that the has nor remarre	4
	v. a A
Her Post Office address is 148 areado plant	, , , , ,
Her Post Office address is 148 Farade struck of She turber declare that she has no interest in said or	se and not concerned in its
prosecution.	
t and the second	Marin & Gomes

	w derecy	COUNTY OF.		
including the words	ou before me this day by th	e above-named afflant, and I	certify that I read said affidav	vit to said
ensed, and the words				
and acquainted her	with its contents	before she		
nowise interested in said		n its prosecution; and that said	d the same. I further cert	
and that	credible person.	we proceed on , and list said	amant personal	ly known
	4 14 5	Mus	36,00	7~
			[Signature]	
L. S.		No	tony du	uc
	can on flo		[Omejal Character.]	
I		Clerk of the Cou	unty Court in and for afores	aid County
State, do certify that		Esq., wi	oo hath signed his name to	the fore
declaration and affidavit	was at the time of so doing			n and for
County and State, duly c	ommissioned and sworn; t	hat all his official acts are en	titled to full faith and cred	it, and tha
signature thereunto is ger	utine.			
Witness my hand	and seal of office, this	day of	188	
	0-		•••••••••••••••••••••••••••••••••••••••	•
[L. 8.]		Clerk of the		
hote.—This should be a before a JUSTICE or NO and not on a separate slip	worn to before a CLERK OF TARY, then CLERK OF	F COURT, NOTARY PUBL COUNTY COURT, must	IC, or JUSTICE OF THE add his certificate of char	PEACE.
and the out is acquirate and	or paper.		47	moter net
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S INC.	2. 3		143	>
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OLTION OF A STATE OF THE STATE	20 7 15	m/ 88 /	5/ 5	
ADDITIONAL EVIDENCE CLAIM OF CLAIM OF	The state of the s		2 2	

A 1
State of New Jersey County of Essey 55.
In the matter of claim to of charbell w Karris widow
of Peter MB. Kams lat of Co.E. 40 New York Tres
ON THIS 20 day of A. D. 1882 personally appeared before me a
forcery Pullia in and for the aforesaid County, duly authorized to administer oath
John H. Morgan aged 7/ years, a resident of New all
in the County of Except and state of New Versey
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to aforestid case
as tollows: That he has Known applelicant and her late
as follows: That he has known appleaned and her late (NOTE-Affants should state how they gain a knowledge of the facts to which they testify.)
husband for more than 30 years being a near
neighbor and interestly acquainted with them, and
That the said Mariell is not the wider of the said
Peter prior to and at entertment in the late
was was a some strong man, attacking to his
duties requesty. That we his return from the
was deported mot him and found him broken
was deponent met him and found him broken deron in health, the result of wounds and disease
incident to the service, and with a congle that
Continued to grow worse with be died in April
1881, Kin death in the opinion of departed
being the result of dudare contracted in the
service Stated.
Wir Part Office address to 46 2 Brand st. Neward NA
the Post Office address is 462 Brand st. Newark NA  Not concerned in its
prosecution.
John DMargan
from Filleday
If Affants sign by mark, two persons who can write sign here.] [Signature of Affant.]

Sworn to and subscribed before me this day by the above named affiant ,	and I certify that I read said affidavit to said affic
including the words	
erased, and the words	adi:
and acquainted him with its contents before he e	xecuted the same. I further certify that I am
nowise interested in said case, nor am I concerned in its prosecution; and the	
and that he is credible person.	00
1 //M	y Huover
Control (state)	(Signature)
L. s	Motoryouver
Cast in file	[Official Character]
1 Clerk of	the Comity Court is and for wloowald County
	the commy court is and for moresard Country i
declaration and affidavit was at the time of so doing	in and for s
declaration and affidavit was at the time of so doing.  County and State, duly commissioned and sworn; that all his official acrs	in and for s
declaration and affidavit was at the time of so doing.  County and State, duly commissioned and sworn; that all his official acrs	in and for a are entitled to full faith and credit, and that
declaration and affidavit was at the time of so doing.  County and State, duly commissioned and sworn; that all his official acts a gnature thereunto is genuine.	in and for a are entitled to full faith and credit, and that
declaration and affidavit was at the time of so doing.  County and State, duly commissioned and sworn; that all his official acts a grature thereunto is genuine.	in and for a are entitled to full faith and credit, and that
declaration and affidavit was at the time of so doing  County and State, duly commissioned and sworn; that all his official acts signature thereunto is genuine.  Witness my hand and seal of office, this	in and for a are entitled to full faith and credit, and that
declaration and affidavit was at the time of so doing  County and State, duly commissioned and sworn; that all his official acts signature thereunto is genuine.  Witness my hand and seal of office, this	in and for a are entitled to full faith and credit, and that
declaration and affidavit was at the time of so doing  County and State, duly commissioned and sworn; that all his official acts signature thereunto is genuine.  Witness my hand and scal of office, this lay  [L. S.] Clerk of the	in and for a are entitled to full faith and credit, and that of
	in and for a are entitled to full faith and credit, and that of

State of New Olersey	88		
In the matter of Claims AD. 3. worldow of Peter M-B- Hoa	93, 767	orderles	d. W. Kamis
widow of Peter M. B. Hos	2	8	
Personally came before me, and State, and State, Samuel Garreto citizen of the Town of Manual Post Office Address.	my Public	ė in	and for aforesaid County
and State, Sarah I where	~	apec	1 59 years
and Excluse Barnet	-	arrer	59
citizen of the Town of Manage	County of	Esser	State of
New Jessey well	known to me to	be reputable and en	titled to credit, and who,
being duly sworn, declare in relation to aforesaid	case, as follows:		
That they recide a in the city aforesand	· No	136 Com	merce el
in the city aforesan	a that	they ha	ene troom
The said Soldier, and	a his	widow, de	applicant
the said Soldier, and above named for men they were near neigh	re than	23 year	15 That
they were near neigh	Coors of	The said	& Harris
and rife and Kum of the the said Harris and les the	mu pla	some t	worledge
they the said Hams	, phor	to and a	theneg
entistment in the	ate w	er, was	2 domes
strong man, and	attende	to he	duties
and burnes regula	rly .	Theat	They saw
him on his return }	Sow the	J was an	de testify
That he was broken	down	in hear	ett and
continued in a ver	y nuis	male con	raiter for
a long time and	that	he neve	necimenal
his health but con	Toursed	in feel	a Reach
until he died in	April	1881	Deprent
and not in any w	an re	tales to	applicant
are not in any w	d.		
17.7			TA AMERICA
Thing further declare that Thing	ha.	interest in said sace	nd Quehot ormania :-
its prosecution.		involest in said case, a	aux
		1	
1	Signature of	Sarah &	Jomson
2	Affiants.	Golden &	Sarnett

Note.—In the execution of papers and evidence, whenever a person or witness signs by mark (†), two persons who can write must attest the signature by signing their names opposite.

The official before whom papers are executed is not a competent witness to a mark.

Sworn to and subscribed before me this day by the above named affant ; and I certify that I read said affidavit to said affiant , and acquainted Cherwith its contents before the q 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 affian copersonally known to me; that the conditable person and so reputed in the community in which Unequeside Witness my hand and official seal this 26 cm day of Refuleruble, ... 188 Z Sign here to deward De Relaction Andrew Preserve ADD SEAL HERE. certonfiles Nors.—Should this be sworn to before any other officer than a CLERK OF COURT, then the proper CLERK OF COURT must add his certificate of character on the back hereof, and not on a separate slip of paper.

STATE OF, COUNTY OF, ss.
I,, Clerk of the County Court in and for aforesaid
County and State, do certify that, Esq., who hath signed his
name to foregoing affidavit, was at the time of so doing ain
and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and
tredit, and that his signature thereunto is genuine.
Witness my hand and seal of office, thisday of18
Clerk at the

per If a Notary Public (or Justice of the Peace) will put his signature and seal impress (if he has one) on a sheet of paper, and a Clerk of Court will certify that they are genuine, stating when his commission was dated and when it will expire, be can execute papers to be used in ONE DEPARTMENT ONLY during his term of office without authentication by Clerk of Court. Certificate for each Department where many authentications are required, will save much expense. "Gat
Several papers executed before one N. P. or J. P. on the same date need Co. Clerk's Certificate, on one only, if all are to be

marwirte an affidavit just as you would write a letter, stating all the facts, circumstances, dates and places, as near as you can remember, and if of your own personal knowledge and observation, and state how you know what you say to be true.



State of New Lovery Country of Excep 55.
In the matter of claim to. 282 767 of Isabell W Harris
In the matter of claim to. 282767 of Isabell W Karris Late median of Pater 7000 Vernie lating & & 40 Ny. Vos
ON THIS 26 day of Sept A. D. 1882- personally appeared before me a
in and for the aloresaid County, duly authorized to administer outh-
Isabell Wharris aged 54 years, a resident of Newsch.
in the Country of Essery and State of New Jersey
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to aforestid case
as follows:
That she is the identical Isalell Wharis
above named. That she has not seen any of
The officer or men of her late husbands regiment
seven his return from the war and is not able
to family any testimony from that source.
That she can prove by a large amount of
testing of neighbors and others that her late
husband was a sound storng man prov to and
at acclistment and that he returned from sand
serve broken down in health and Contind thus
until he blied and that his death was the result of
and service. Sine toldier was distinct by
Dr Wordhull late of this city, on his return from this war,
and this was Continued for several years. Was afternoon
doctored by Dr Sandford; both physicians an non
dead, was altaded by Dr Tr. A. Smith prin
to and at time of death
44 Poet Office address is
further declare that no interest in said case and not concerned in its
prosecution
A . M
If Adiants sign by mark, two persons who can write sign here.   Sabella W Harris  (Signature of Adiant.)
a amana sign of mara, two persons who can write sign here.] [Signature of Aillant.]

room to and subscribed before me this day by the above named afflant, and I certify that I reaching the words acquainted her with its contents before. All executed the same. I is interested in said case, nor am I concerned in its prosecution; and that said afflant. It that she is a credible person.  Cut on fix  Clerk of the County Court in an Esq., who hath signed aration and affldavit was at the time of so doing that all his official acts are entitled to full fail the thereunto is genuine.  Witness my hand and scal of office, this day of Clerk of the County Court in an action and affldavit.  Clerk of the day of the County Court in an action are described by the county of the cou	further certify that I am in personally known to me description of the start of the
acquainted New with its contents before whe executed the same. I see interested in said case, nor am I concerned in its prosecution; and that said afflant is that whe is a credible person.  **Court on file**  **Clerk of the County Court in an Esq., who hath signed aration and affldavit was at the time of so doing try and State, duly commissioned and sworn; that all his official acts are entitled to full fail ture thereunto is genuine.  **Witness my hand and scal of office, this day of the courty Court in part and his centre of the courty Court in an official acts are entitled to full fail ture thereunto is genuine.	further certify that I am in personally known to me blue blue of haracter.  defor aforesaid County and his name to the foregoing in and for said that and credit, and that be seen to be seen to be said that and credit, and that be seen to be s
that whe is a credible person.  Location file  Cut on file  Cut on file  Clerk of the County Countring  Clerk of the County Countring  Type and affidavit was at the time of so doing  try and State, duly commissioned and sworn; that all his official acts are entitled to full fail  sture thereunto is genuine.  Witness my hand and scal of office, this  Clerk of the	personally known to me sture.  Black  ture.  defor aforesaid County and his name to the foregoing in and for said that and credit, and that bit had credit, and that bit had credit.
that whe is a credible person.  Location file  Cut on file  Cut on file  Clerk of the County Countring  Clerk of the County Countring  Type and affidavit was at the time of so doing  try and State, duly commissioned and sworn; that all his official acts are entitled to full fail  sture thereunto is genuine.  Witness my hand and scal of office, this  Clerk of the	personally known to me sture.  Black  ture.  defor aforesaid County and his name to the foregoing in and for said that and credit, and that bit had credit, and that bit had credit.
that she is a credible person.  Education for the County Court in an Clerk of the County Court in an Esq., who hath signed arration and affidavit was at the time of so doing try and State, duly commissioned and sworn; that all his official acts are entitled to full fail the thereunto is genuine.  Witness my hand and scal of office, this day of the court	Blace  Ablic of  Addressed County and his name to the foregoing in and for sale than deredit, and that bit in the sale in the
Clerk of the County Cart in an Clerk of the County Cart in an Esq., who hath signed aration and affidavit was at the time of so doing atty and State, duly commissioned and sworn; that all his official acts are entitled to full fail ture thereunto is genuine.  Witness my hand and soal of office, this day of Clerk of the County County County of this sentitle and JUSTICE or NOTARY PUBLIC, or JUSTICE and JUSTICE or NOTARY, then CLERK OF COUNTY COUNTY on the sentitle sentitle and this sentitle and JUSTICE or NOTARY.	d-for aforesaid County and his name to the foregoing in and for said the and credit, and that his
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Claim to 282.767

State of New forlegges Doruty of Essex. 3 In the matter of claim No. 282. 767- of leabel W. Harris widow of Peter 1. B. Harris late of les &, 40th Regiment New York vol. Personally Cauce before me a block flown. Pleas in and for afond County and Hate William AS mith M.D. aged 62 year- Oction of the city of Newara Evenily of Esty State of Are fively torse Known to we to be reputable and wititled to endit and who being duly savore deduct in relation to afordail claim es follows That he is a physicin in nogela fractice and ordides at 282 Broad 11 in the city afortaid that he threw. Peter M. B. Harris for several apres. That Said Havis was under his can fire august 28 1880 until his decade in April 1881 That Raid Harris had Pathing Pulmonalis. of which disease he died Defencent furker top he has the own the Harris to be in Juble hereth for horand your atthough not under his case the function declars that he has no island in said Date and is not conserved in its prosecution You A Swith HO D.

Vale Lung, 47 Reg. My Stalerog,

State of New Gersey } 8.6. Sevorn to and subscribes by me this Sept, 28 A. &, 48 and I am disinterested Mr. A.Smith bleck of Common Pleas by G. S. Moore Deputy

State of New Derson Country of Essen 55.
In the matter of claim no. 282. 767 of Inabell 10 Hamo
in the matter of claim to 282. 767 of Irabell W Harmo widow of Potentia. Harmo late of Co. E. 40 N.Y. Trees
ON THIS 6 day of A. D. 188 personally appeared before me a lin and for the aforesaid County, duly authorized to administer oaths
Alfred y laine aged 3 8 years, a resident of Viewaile
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to aforestid case
as follows: The was permate acquaited with the [WOTE-Atthente should estaty how they gain a knowledge of the facts to office they teatify.]
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of second contracted in said Larre . What the
Peter, the has not commend, and is a vortigue woman.
His Post Office address is 137 Walnut N Newart M.
Noe further declare that he has no interest in said case and so not concerned in its prosecution.
11/1 1 10

If Affients sign by mark, two persons who can write sign here

Affrice & laune

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# Civil War Pension File of Peter Harris Part Three Table of Contents

Adjutant General's Statement, 7/24/1883	2
Request for Medical History, 8/2/1883	3
Surgeon General's Statement, 11/14/1883	4-5
Affidavit of Joseph Seden, 7/21/1883	6-7
Affidavit of Henry Garrabrandt, 8/10/1883	8-9
Affidavit of William Walker, 10/17/1883	10-11
Affidavit of Dr. Milton Baldwin, 12/20/1887	12-15
Affidavit of Isabella W. Harris, 7/15/1889	16-19
Declaration for Widows Pension, 7/10/1890	20-21
Miscellaneous Papers	22-25
Affidavit that Claimant has not Remarried, 11/1/1890	26-27
Affidavit of Edith McGrugar and Phebe Denman, 2/19/1891	28-29
Marriage Documents	30-32
Records of Peter Harris' Death	33-39
Transcript of Birth for Augustus Harris'	40

Special 282767

## Mar Department,

ADJUTANT GENERAL'S OFFICE,

Washington, Leely 24, 188 B

Respectfully returned to the Commissioner of Pensions. Peter M. B. Harris, a presente of Company" E", 40 Progriment Trees Ofork Volunteers, was enrolled on the 14th day of June, 1861, at youkers metebelia loofer 8 yel. 7.6 1 and is reported ou will of loo to June 30 1822 present July V leng 1862 Ebberet Detailed our Divileur. L' bilance Corps. Sept VOet 1862 present Detailer to Cumbulance levels- how Del 1862 sum most June V Febry 1868 Cobsent Detailed at Brig. lem. , bilunce Coople musch + april 1863 & ame not. Trumferred to lac"D." SumBest. Roll for many June 1868 muest. Reculation a bet bol Dic 21 1868. Present to april 30 1864- heary & June 18764 absent wounded June 18 1864 hebs tetenburg Du Toursfernd to loo & "Lewe Kept july & Cent 1.8te4 about sick. Same report to Febry 28 1865. On march Vapril 1868 Dischaffed on account of Dil. ability murch 14 18 to 5 - Righ was Engaged in assault Seize and cupture of Petersburg Da June 16 1864 to april 3 1866 Tools Imbulance Des of army loss with which thegt some one not on fele Cent of disability carroborates date

How him wounded severe June 18 64. Location of wound &B not stated. No hortel record of regt. or auch Det 3 corps in file

of descharge Sist of Cas. 1 Big. 3 Dit. 2" Corps

John Joy Mindam General.

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[3-065.]

## Department of the Inter.

PENSION OFFICE,

August 2

1883

Sir.

Directions to Examiners.

Give as far as possible the names of all companies and numbers of all regiments, and the arm of the service in which soldier served, with the dates of enliatments and transfers, and date, place, and cause of discharges or It is respectfully requested that you furnish as full a medical history as practicable in the following-described case:

Name and Service of Soldier.

Peter H. B. Narris, Pot. bo." E" 40 N. y. Vol. Edito June 14, 61
May + June. 63. France to 60." E"
July + May, 64, France to 60." E"

" Sergt " Wich " Euch. 14. 65

Allegations of Claimant in regard to Fatal Disease or Injury.

Phthis Pulmonalis

Give name of disease or nigary, time and place of origin or receipt; (if wounded in action; the name of the settion;) mention hospitals in which treated, in order of date, giving name, (or number, oharacter, (whether regimental, post, brigade, division, corps, or general,) definite location, and as near as practicable dates of admission and exit (or duration of treatment is

Please furnish full oudical history, examining the nearly of regimental, division, corps and other hospitals likely to afford evidence as to treatment for the alleged or other disease

Report of Adjutant General U. S. Army.

Poll to time 30.62, Present: Intytolog 62. About detailed on the distance of the sound the state of the sound the sound the sound to the sound t

Man. + Apr. 65. Dich & for Disab. Meh. 14. 65. from. Medongall ly H., Th. Schuyler. A. Y.

Death of Soldier.

Canen - Phthis Pulmonalis.

Give date, place, and cause of death, stating particularly whether soldier was then in service or discharged, or on furlough, and when on furlough give he spital or place from which furloughed.

[7665—10 M.]

No. 257538

#### War Department,

#### Surgeon General's Office,

RECORD AND PENSION DIVISION.

Nov. 14, 1888 Washington, D. C.,

Sir:

I have the honor to return herewith your request for a report of hospital treatment in Claim No. 282 767, with such information as is furnished by the records filed in this Office, viz: that - William R. Harris, Sol Co. D. 40 Weevyork subsered depot Fild Hope De a. C. Buly Point 22 June 22/64 Wounded, and was sent to G. H. June 23/bx, that Peter To B. Namis, Soh, Co & 40 My rob entend Towell Genting Portmout brove & I June 26/64 from bity Pour with & of fracture right when, receives at Petersburg No June 18/6x, 2 maker of Wha removed excision I wicher fine 15/6x, and was transferred any 24/64 that he entered the Dougall of A Forthhugher Ly Mark ang 20 fox with & sell right and fuloughed Nov, y/by - re-admitted Nov, ch/by, and discharges from service Mich 14/65, Records of he reght any 63 ( date of commence of to click wofby furnish no evidence in the case - said words allow to to any by are not onfile

Acting
By order of the Surgeon General:

Commissioner of Pensions.

per 2213

Please return this circular with your report. The Surgeon General U. S. Aimy. Claim No. 282767 . Nodows AUG '7

State of New Dessey, Country of Essex, 55.
Sille of Division of the State
Clai No. 387 767 of Jealed 1.
In the matter of the control of the
The matter of Clair No. 282.767 of Saled M. Harris wilaw of M. Harris Co. E" 40 My Vie,
ON THIS 2 / day of Oluley A. D. 1883; personally appeared before me a
in and for the aforesaid County, duly authorized to administer oaths
1 11.1. In the same
In and for the aforesaid County, duly authorized to administer oaths  Joseph Joseph Law aged 47 years, a resident of Thewards
in the Country of Escap and State of Faul Juney
well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case
as follows: March
(Nora-Affants should state how they gain a knowledge of the facts by which they testify)
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man. Flest deponent worked with him several
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Has Post Office address is
The further declare that he has no interest in said case and not concerned in
further declare that the no interest in said case and not concerned in
its prosecution.
Joseph Beden
[If Affiants sigh by mark, two persons who can write sign here.] [Signature of Affiants.]
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	<i>a</i>
State of New Years	, County of Gasey , ss.
in the matter of claim to 2	82767 of Janbel W
Harris widow of 3	to 713 6 amis 68. 40 NYV
ON THIS 10 day of Spece	A. D. 1883; personally appeared before me a
Notary Public in	A. D. 1883; personally appeared before me a
Henry construct aged	60 years, a resident of Nquale
in the County of Sarry	and State of New Jassey
	and who, being duly sworn, declared in relation to aforesaid case
as follows:	1 1 - 1
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and faithful in the	discharg of his
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forther declare that hadeas	wich of. Newark of.  no interest in said case and is not concerned in
Its prosecution.	Henry Garraband
	January )
(If Afflants sign by mark, two persons who can write sign here.)	(Signature of Affiants.)

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tizen of the Town of Post Office Address	County of State of
Van Jerry well 1	known to me to be reputable and entitled to credit, and who,
sing duly sworm declares in relation to aforesaid ca	ise, as follows:
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Department, That he	then made in congle nor
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Little Comments	on his relience from the downy
as was completely on	oken down in beauth, lies
e confirmal Congle,	and that excluse often
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The war recell of the	is service in the way state.
Jan Rollin all	told deponent that he
	in the service and was
The state of the file	on that accounts
- David Ward Poarry	continued to fail steadily
the congo never left	him but grow work you by
year intel we deed	, and that in the opinion
	soldiers death was the
result of the service	as stated. That Rais Harris
was a man of stead	ex halis and the
applicant Isatel is no	on the wilm of a few of selia.
and is a vertuous wo	man Tepment of the cit the
The further declares that he	no interest in said case, and a net concerned in
ts prosecution.	10000000000000000000000000000000000000
1	mill. 1918/ 00.
	Signature Milliami, B. Malle

Sworn to and subscribed before me this day by the above named affiant ; and I certify that I read said affidavit to said affiant , and acquainted h the 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; that he is a creditable person and so reputed in the community in which he reside S Witness my hand and official seal this... Sign here ..... ADD SEAL HERE. Norz.—Should this be sworn to before any other officer than a CLERK OF COURT, then the proper CLERK OF COURT must add his certificate of character on the back hereof, and not on a separate slip of paper. STATE OF....., COUNTY OF....., ss. I, ....., Clerk of the County Court in and for aforesaid name to foregoing affidavit, was at the time of so doing a.....in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine. ..... Clerk of the..... If a Notary Public (or Justice of the Peace) will put his signature and seal impress (if he has one) on a sheet of paper, and a Clerk of Court will cortify that they are genuine, stating when his commission was dated and when it will expire, he can execute papers to be used in ONE DEPARTMENT ONLY during his term of office without authentication by Clerk of Court. Certificate for each Department where many authentications are required, will save much expense. The man are required, will save much expense. The man are required to be made as the man are required to be made as the result of the man are required to be made as the result of the man are required. The man are required to be made as the result of the man are required to be made as the required to be required to be made as the required to the required to be made as the required per-Write an affidavit just as you would write a letter, stating all the facts, circumstances, dates and places, as near as you can remember, and if of your own personal knowledge and observation, and state how you know what you say to be true. AFFIDAVIT 173 OF BY

AFFIDAVIT

ring, 511

ASE

BENERAL

State of New Jersey S Essex County & Gersonally appeared Milton Baldwie. M. D. of the City of Newarth, County of Essex and State of New Jersey, Who being duly sworn, dotte depose and Day: Dan as physician, licensed to practice according to the laws of New Jersey, In the matter of claim for pension # 282767 of Mrs Isabella M. Harris of this City, Wichow of Vergeant Geter W. B. Harris, Company E. 40th Reg't New YorkStet. bolimiteers, founded in action at Petersburg Va. June 18th 1864, discharged from Me. Lougall Gen't Hospital March 14th 1865. by reason of Burgeon's Certificate of disability, having had while in hospital a resection of Middle third of the Ulna of the right arm, the right radius having been also fractured at Fort Schuyler. N. 4. Deportent Saith: I have Known the aforesaid Gergt Harris from his childhood and also both his parents, Now deceased, were Known to me, having been attended as family physician at various times by me; further this depresent lays: his father and mother both died in advanced years and

that there newer has been any Lung disease of a Consimiptive nature or any tendency to pulmonic disease of that kind Whatever, either in him or his parents, this deponent is therefore of the opinion that, the irritation and Uninterrupted discharge from his Boundo, Together with the broken down Constitution finally resulted in Consumption and that his death was from no other cause Whatever, de ponent further dotto Dery; that while the deceased soldier mas receiving a pension from the for. erument on account of his disability, he was frequently examined by Doctor Addison W. Boodhull ofthis City, now deceased and when the Said Harris died, he had no physician in regular attendance. further this stepment doth depose and say: that so for as the circum. Stances have Come & his Knowledge in his Opinion the Consumption Mas a sequel of the Mound and Helong series of symptoms which followed this occurrence and further I have no interest in this claim

for pension of Sabella W. Harris Midno, and make this affidavit, firmly believing that the applicant is justly entitled to a pension and further of have practiced medicine Since 1843 and was an acting Assistant Surgeon M.S.a. at Mards M. S. General Hospitals during the late War of the Rebellion and in the Hestimony es above given I have made a true statement of facts and have endeavorado lo give an honest opinion after a careful Consideration of all the Circumstances connected mith this matter. Subscribed and Swom to Sefore me this 20 day of } Milton Baldine Debnuck-Clas of Eksep Couly I

Affidarit of Milton Balduno M.S.

July 15 1889

Deate of New Jersey &

Hon Commission Lanner Pension Burear please take notis the Pension Chain of Isabell W Harris Widdow of Peter W & Harris No 282769 Peter W B Harris inlisted the 14 day of June 1861 and was discharged the 28 day of December 1863 at brandy station Va by reason of reaenlisting Vetren Volenter he was enrolled on the 21 day of December 1869 he was dis charged from the servis of the united st servis the 14 day of March 1865 at the Dougall Ge Hash It t Schuyler ory Tergens dertificut of disability and Resection of Middle third of ulna rite arm rite radius having ben also practured this is acoppy frome his discharges ihave got two honerable discharges he was wounded at battle of petersburg Va he was astrong healthy man neaver was such with Eny disease before the wore neather was he all through the ware untill after he was wounded when heave home he was very week and feeble he never was well ency more he suffered terable with his arm it never healed there was two places that discharged as long as there was ener flesh on it it all witherd away all his sholddier and his breast on the riteside was nothing but the skin and bone his allow was stiff he cold not bend it strait all fingers but his fore finger and thum was stiff what itell you is gods candid truth be neve docker docktered withe with eney doctord when Tactor Wood hull examined him pose his pension he told him he nave wold

he well ener more all he took wa syrups that we made our selfs and cod live oil icaled Doctor William smith ashort tione be pore he died he was astranger he did not examin him he sent his evedence down there doctor Wood hull is dead so count get his went all the witness icold get they are all there as for offisers icant find ener of the old ones they are all new ones when they reinlised they did not no him and the private what icold find they said he was well annuff through the wall they never sean him after he was wounded uplease My husband died other the 25, 1881 thave had ahard struggle to try to live since he died Government took my husbands healt and life and when he they took his pension and defet me penneyless sam very poor and avery hard working women and iam all most variffle with my pingers with rhumation can ageting old iam 62 ment september if live cam just aworking fore what little reat it is avery hard life god noes ithink and no that ian desurvin, and intitleed to apension as much as some ino gets it There is one inv hir husband was working when my husband died was not taking sick in a year after my husbang died he died and she gets hir pension long ago she is young and urnnining agood living besids

she had good priends and ihave got more can't iask afriend of you please do all you can idon't no what will be come of me ican pray fore you and god will neword you fore what you do iam telling you the touth if you dot my word send the hole government and sea fore them selfves please don't through this one side please let me no weather that is eneg prossheet fore me

Frome Isabell W. Harris Widdon of Peters W B Harris

Ewon By Ends ended before me as newark in the Country of Enex & bette of new Jorsey this 16 day of July and 1889 I certify that I am originally the contents of the Jorgang afficient and Juriber that I am in my interpreted in the from secution of this claim either aneetly or atherwise

Geo Webburghousen Ropring Can Burg Comme Par Li Ferray Rong Milan Cha Manie

# DECLARATION FOR WIDOW'S PENSION.

DECLARATION F	OR WIDOWS P	ENSION.
Act of	June 27, 1890.	
This Must be Selected Before a Court of	Herered or Some Palcer Thereof Having Custody	of its scal
-1 1 -	founts of Es	, 99
State of New Denny	, County of Gran	
ON THIS 10 day of Uz	, A. D. one thousand eight h	
personally appeared before me, a Nolone	( Assar of the O	/ an The
	the County and State aforesa	brela W
Harris -	, aged 63	years, a resident of
City newa	nk county of Ess	, State of
the Off	the, being duly sworn according to taw, declar	res that she is the widow of
(v) a 10 (2) 1 P	No I ten	w/3 Havin
Letin W 19 Harris	who enlisted under the name of	anne
at President R.	on the day of	P.a.
A. D. 18 / in Sergeau	ny, and regiment, if in the Military service; or vessel, i	f in Navy.)
Ny vals		<i>V</i>
and served at least ninety days in the late war of	the Rebellion, who was HONORABLY DISCHAR	GED. XXI
Fe 28"/863 and d	april 20	7 /8.8/.
().	abella W Wa	eker to said
That she was married under the same of Har	nie.	
very 0 3 0	Atie news	unk n
1856 by New MY 18a	, at	0
there being no legal barrier to such marriage	here was a former marriage of claimant or her husbane	i, state it here and how dissolved.)
	Peter W/3	Harris,
That she has not remarried since the death of t	the said (Name of soldier or	r sailor.)
That she is without other means of support than living under sixteen years of age of the soldier a	her daily labor That names and dates of are as follows:	birth of all the children now
5	born	, 18
	born	, 18
5	born	, 18
		18
(	, born	
	, born	, t8
Comment of the Commen	, born	, 18
That she has heretofore applied for pension and	the number of her former application is	
	and the plank correctly	· · · · · · · · · · · · · · · · · · ·
That she makes this declaration for the purpose	e of being placed on the pension roll of the	United States under the provi-
sions of the Act of June 27, 1890. She hereby	appoints	
SOULÉ & CO.x	of	/+
her true and lawful attorney Sto prosecute her	claim. That her post office address is 40	Centre el
newark, County of	Cesself State of	w.g.
Andrew B. 18n	od Isalella	W Harry
	(Signatu	are of Claimant.
Luge V Denn Two witnesses who can write, sign here.)	im	

30

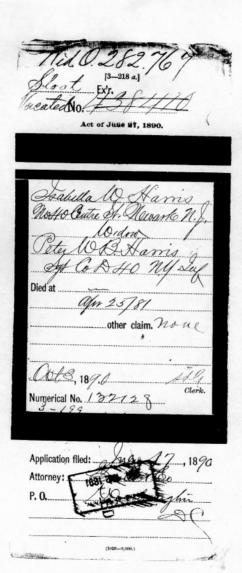
		0
Also	o personally appeared Audie & Knox	, residing at
N.	Eurole Md. and Gentle S.	residing at
c.	Founds A. persons whom I certify to b	be respectable and entitled to credit,
and who, bei		la Homis
laimant, sig	gn her name (or make her mark) to the foregoing declaration; that they h	nave every reason to believe from the
ppearance o	of said c'aimant and an acquaintance with her of	years and
	years, respectively, that she is the identical person	on she represents herself to be; and
hat they ha	ave no interest in the prosecution of this claim.	0.0
	And	drew & Min
	George	ge V Lleumen
Sworn	rn to and subscribed before me this 10 day of Jax	, A. D. 1800.
	and I hereby certify that the contents of the above declaration, &c., we	ere fully made known and explained
	to the applicant and witnesses 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.	Il Dougleuty
		(Official Signature.)
[L. S.]		(Official Character.)
	of June 27, 1890, requires, in widow's case:	
r. That	at the soldier served at least NINETY DAYS in the War of the Rebellion and not of soldier's death (death cause need not have been due to Army service	was HONORABLY DISCHARGED.
3. Tha	nat widow is "without other means of support than her daily labor,"	
a. Tha	at widow was married to soldier prior to June 27, 1890, date of the Act.	a toward after the passage of out in
3. Tha	nat widow is "without other means of support than her daily labor,"	

Chairmant Gaabella M. Marris soldier Peter M. A. Kaners Service Lo LO 40 M. y 9. L Address Prenear R Date of Brecution July 10/20 Property Citotras Filed by CO., Act of June 27, 1890.

WIDOW'S CLAIM.

Mindeling to Qe by J. H. SOULE, Washington, D. C.

O 'A 'MO- C



ME. N. H. VT. Mass. R. I. CONN. N. Y. N. J. DEL.

Index Ridero, Claim No. 438-4110 Citic NOB Harris Co De 40 Reg 1 2019. V

Arrange Papers in Invalid Claims—1. Declaration; 2. Soldier's statements as to origin; 3. A. G.;
4. S. G.; 5. Cert. of Dis. Let history as to origin, continuance, &c., follow in regular order.
In Widows' and Dependent Relatives' Claims—Let evidence of soldier's death, marriage, dependence, &c., follow evidence of origin and continuance of fatal disease.

.03	NAME AND P. O. ADDRESS.	DATE OF FILING.	SUBJECT.	
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	blannint Capus	h may a		
	Cleard	nor 29 90 L	late of death	
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1	Cardelia Meal	Cas	it widenkord	,
+	Gelen M Scarfers	5 Nov 29 90 De	unt defender	-
	newack Ity.		it willowhood " week dependen	
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ACT OF JUNE 27, 1890.

O. C. Deni

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## WIDOW'S PENSION.

Daimant & Make a de	for men		
P. O. Ha Centre It Me	A. M. K. E. L.	Soldier	etu M.B. Hani
4.	walls	Rank ale	egeant, co. le
County 214, State	25	Regiment	40, my ral, Suy
	/		
Rate, \$8 per month, commencing	14 17 , 189	10, and sper	month additional for each child, as follow
	( Born,	18	.)
<u> </u>	Sixteen,	, 18	. Commencing
	( Born,	, 18	.)
	Sixteen,	, 18	Commencing, 18
	∫ Born,	, 18	.)
	(Sixteen,	, 18	, Commencing, 18
	Born,	, 18	.[
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	( Born	, 18	.) Commencing, 18
	Sixteen.	,18	
	( Born,	, 18	Commencing, 18
	Sixteen,		Commonsis
	( Born,	18	.) Commencing , 18
	Sixteen,		Commencing 18
Payments on all former certificate		rtion of same t	ime to be deducted
	6 - 7		
All pension to terminate	***************************************	, 189, d	ate of
, o	Dy.		Articles Filed, 189
	APPRO	OVALS	7 7
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intermitted for Admission	mine 17.	189/,	ry C. Word Examin
())	military,	180/, Ke	my E. Word Examin
())	minuty,	, 1807., 2e	ary C. Was Examin
Tured for Admiss	, , , , , , , , , , , , , , , , , , ,	<i>O</i> h	
July 6, 18	59/.	m.x	Robins Legal Review
July 6, 18	59/.	m.x	Robins Legal Review
July 6, 18	59/. 18.05 per mout	M. S	Roberts J. Legal Review
The soldier was pensioned at \$	18.00 per mout	M. S	Lobert Legal Review of June 18 18 18 18 18 18 18 18 18 18 18 18 18
The soldier was pensioned at \$	18.00 per mout	M. S	Lobert Legal Review of June 18 18 18 18 18 18 18 18 18 18 18 18 18
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The soldier was pensioned at \$	18.00 per mout 18.6/	th for Fiscal	Lobert Legal Review of June 18 18 18 18 18 18 18 18 18 18 18 18 18
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The soldier was pensioned at \$ chalisted Linearlisted Lin	18 6/.  18 6/.  18 6/.  18 6/.  18 6/.  18 6/.	th for Jesus apply the Soldier's apply the Former mark	Pin filed Mich 25, 186  ringe of Man, 18  mer Myn, 18
The soldier was pensioned at \$ chilisted for the	18 6/.  18 6/.  18 6/.  18 6/.  18 6/.  18 6/.	th for Jesus apply the Soldier's apply the Former mark	Pin filed Mich 25, 186  ringe of Man, 18  mer Myn, 18
The soldier was pensioned at \$ consisted which the control of the	186/.  186/.  186/.  186/.  186/.	th for Jessen.  Soldier's app'n in  Former marriag  Cit's marriag	p'n filed Mch 25, 18 d under other laws May 6, 18 d riage of Mum, 18 mer 18 ge to soldier Sphin 9, 184 remorried 18
The soldier was pensioned at \$ chlisted for the honorably disch'd	18 6/.  18 6/.  18 6/.  18 6/.  18 6/.  18 .  18 .  18 .  18 .  18 .	th for Jezza	Printed Mich 25, 186  riage of Munice 18  ge to soldier Sepach 9, 186  remarried 18
The soldier was pensioned at \$ consisted which the control of the	18 6/.  18 6/.  18 6/.  18 6/.  18 6/.  18 .  18 .  18 .  18 .  18 .	th for Jezza	Printed Mich 25, 186  riage of Munice 18  ge to soldier Sepach 9, 186  remarried 18
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The soldier was pensioned at \$ control of the soldier was pensioned at \$ control of the soldier was the soldie	18.00 per mout 18.6/	th for Fiscal	Profiled Mak 25, 1 under other laws May 6, 1

# Affidavit that the Claimant has not Re-married, and that She is without other means of Support than her Daily Labor.

Act of June 27, 1890.

we, Cordelia Near	and Helen M
laudford of the town	of Newark country of
Essex and State of	Lew Jersey do solemnly swear
e are neighbors of Ilabella Italiana).	ers fessey do solemnly swear
eter n. B. Harris dece	ased, on whose account she applies for Pension under the
ions of the Act of June 27, 1890, and that for the past	oty which there
we have been well acquainted with the said . Gold	Man of Claimant.) ; that
our frequent intercourse and conversations, and from other	
re, that the said. Saarille It (Same of Challe)	has not re-married
the death of the above-mentioned Netes N	(Kame of Soldier)
TER, we say that if she had re-married we have reason to be	lieve that we should have known it.
Ve also believe from the knowledge we have of said widow	that she neither owns nor has in use any property of any
from which a revenue can be derived; that she has no incom	ne or present means of support than her daily labor.
(If dependent upon others not legally bound to support her, it should be	so stated. If in the rossession of any property, the full value of same.
	and the state of t
_	•
1	
	fordeling ford
	Cordelia heal.
ITEST:	
Mercy & Kumple	

Sworm to and subscribed before me this	
	Kany & Kumphrey Notary Weblec
Ι,	Clerk of the County Court in and for aforesaid County
and State, do certify that	, Esq., who has signed his name to the
	loing in and
for said County and State, duly commissioned and sworn; that his signature thereunto is genuine.	that all his official acts are entitled to full faith and credit, and
	day of, 18
[L. S.] Cl	erk of the
the Calmant has not Remark to without other means of Sup than her Daily Labor. Act of June 27, 1890.  CLAIDE OF  FILE. TO FAM.	Widow's Pension No. \$83.2 (24)  Fried by  SOULE & CO.,  ATTORNEYS,  WASHINGTON, - D.C.

Printed and for sule by J. H. SOULE, Washington, D. C.

Filed by Lincoln Post No. 11, Department of New Jersey, G. A. R.	., in support of the
claim for pension. Not 38.410 of Seabella Transages of 92/22 Jr. Sept Sen De Laste Reg Tille de Inter	3 Tharris
Sat Go D. Lot Ragt M. G. Ints	,
State of New Jersey \ ss:	
County of Essex	
Personally came before me, a Justice of the leave	in and for
County of Essex Personally came before me, a Justice of the Prace atoresaid County and State Scart Mar Gragger 32/6. Therete Deaman 32/6.	eserge nework,
person 5 of lawful age, who, being duly sworn, declare in relation to the afore	esaid case as follows:
That hay pre well and intimofely agencing	caris and
have become her for broken in we forestere	124.44
expectively and me derior that the is the	14 for 12
andtestilude Breame of the fact that	TRAL CHAS
an invalid Brother onto organiza allas	all constant
care and allentin and Orinch makes	1. L. L. Desgassir
for her to do anything for her wire Ring	again, gire
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fresible, and further defensent pays	da not
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afficient further declare that they beath no interest in said case, a	and are not
11	
Concerned in its prosecution.  Brick In In  Phille J &	e Gregar
1. OV 11 00 1	6
2 Mille 7 de	enman
18 If either affiant sign by X mark, two persons who write their names must sign as witnesses thereto.	

day of Hely , 189/, and SWORN TO AND SUBSCRIBED before me, this ... 1. 9. I hereby certify that the contents of the foregoing affidavit were fully made known and explained to the affiant before swearing thereto, including the words ... and the words that the affiant respectable and worthy of full credit, and that I have no to me well known and interest, direct or indirect, in the prosecution of this claim. L. S.

> ECEIVEL RECORD DI APR 23 1891

Additional Evidence

Z Act of June 27, 1890.



AFFIDAVIT OF FILED BY

FOR PENSION.

LINCOLN

NEW JERSEY. NECLARK,

Henark Leptember Frate of her Jersey? Welson a marmchae of full age defores and same as follows marmchae of full age this may autiful to all kersons interested that in the day where unten in the City of Herrark and state of The Borsey Mr Deterior Harris of the me park and Mise & satolla The Walker of the other men by me ( i minister of the limpel) United in the homerable and Loud fonds I lawful maniage Soria W. Bartine The above is a correct copy of the marning Haley Shut M. E. Thurch having the date of Lesters . 9 1846 Melson a. Marnichel Prater of Heleng et ME Church Oct 31 1890 Swom In Inbrombed to before me ar newand this 31 day of Octaber a all Collinghonsen Deforting Cless Court Comme Clan mil

Carlos Withour Chance automost thought the Money Chance Manney Ma

Act of June 27, 1890.



#### TRANSCRIPT

## FROM THE REGISTER OF MARRIAGES OF THE CITY OF NEWARK, N. J.

	ge, I plan ber 9th 1846	
Name of Man,	Peter M. B. Carrie	
	are to given	
Name of Worns	m, Isabella W. Walker	
Age of Woman	Mot govern	
Previous condi	ion of Man, ,	4.000
и и	" Woman, , ,	
Occupation of M	lan, , , ,	
Name of Parer	sts of Man,	
и и	· Woman,	200
Name of Officia	iting Clergyman or Magistrate, D. W.	Barting.

I hereby Certify, that the foregoing is a true Transcript from the Register of Marriages of the City of Newark, New Jersey, remaining on file in the office of the City Clerk of said city.

In Testimony Whereof I have hereunto set my

hand, and affixed the seal of said city, this September 1. D. 1882 Samuel & Pareberter.

RECORD OF DEATH

Peta My Po Marie

East Dui.
Labeler Whomis
Merca Whomis
Olic and Homis
Andrew Any.

The 282.76.

#### CITY OF NEWARK.

Jonny, State of New Herrien.

I, LIOCOMBULET City Clerk of the City of New Jersey, do hereby certify that the following is a true and correct transcript from the Record of Deaths in my office.

DATE OF DEATH-	NA	ME OF DECEASED.	SEX OF DECEASED.	MARRIED OR SINGLE.
apr 25.18	81 Peter W.	B. Harris	mule	Munica
AGE,	OCCUPATION.	PLACE OF DEATH.	PLACE	OF BIRTH.
58 41- 4 mis 17 Buy 16	aspenter	NEwwell NJ		1.6
1	NAMES OF PARENTS.		CAUSE OF DI	ватн.
, }	Land G. V. M.	Jamush Chi	thisis Dul	mouslis
MEDICAL.	ATTENDANT.		•	
William	A. Comethe	W.		

In Wilness Whencot, I have hereunto set my hand and affixed the seal of said city this Listidh day of A. D., 18 74

City Clerk.

STATE OF NEW JERSEY.

#### DEPARTMENT OF STATE.

I, Genry C. Kelsen, Secretary of State of the State of New Jersey, do hereby Certify, that the foregoing and annexed is a true copy of a certain Certificate of Death, as taken from and compared with the original now remaining on file in my office.

In Testimony Mhereof, I have here-

unto set my hand and affixed my Official Beal, at Frenton, this There day of September

A. Q. 1887.

Secretary of State

CERTIFIED COPY OF

### CERTIFICATE OF DEATH

OF

Geter W. B. Hamis

(1 JAN -810...

STATE OF NEW JEESEY,

SEP 6 1887

ADJUTANT GENERAL'S PEFICE

į

8001.

# STATE OF NEW JERSEY JAN -6

SEE PENALTY FO	R NON-REPORT.
	Hoanis
2. Age 55years month	18 17 Days Color While
3. Single, married, widow or widows. (Cross out all but) the right one.)	Occupation Carpenter
4. Birthplace U. S. u.	State or county. If of foreign birth, give how long in United States.
5. Last place of residence. newart &	Lucy Co N. J. [If a city, give name; if not, give]
6. How long resident in this State Ofnee	Birth were
7. Place of death 81 Plane St News	if in township, give name and county; if in an institution, so state.)
8. Father's name. John Co. Nam's	Country of birth - 2U. S.
9. Mother's name Namah "	Country of birth W. S.
10. I hereby certify that I attended. Ceter W	. B. Hamis une
during the last illness, and that he died on the	25 day of April 1881; and
that the cause of death was The thisis	Pulmonalis
Requested, by Optional.	Length of sickness
a. Primary disease	Mmcs. Smith M.D
b. Secondary disease (how long)	Medical Attendant.
c. Bernarks.	Residence 282 Broad At Newarte no
	Date April 28. 1881
Name and residence of Undertaker fohis	v Utter
Place of Burial Mit Pleaseach	
y mannananananananananananananananananana	

#### REPORT OF DEATH.

Name of Deceased Leter W.B. Name's

Date of Death april 25. 1881

Crewark City or Township

Essey County.

Name and P. O. Address of Person who gave the Permit of Burial.

Norg.—Certificates of Death and all Blanks are to be precured of Clerks of Cities or of County Boards of Health, or of Township Assessors, as provided by the law for the Registry of Marriages, Birthe and Deaths.

#### A TRANSCRIPT

# FROM THE REGISTER OF DEATHS OF THE CITY OF NEWARK, N. J.

/,	ten W.B. Harris
Date of Death, April	il 25th 1881
1ge, 55 years 41	nonthis 17 days
Condition, (Married, Sing	sie, Willow, on Willower,) Married
occupation, Carnen	rten.
Residence 8/ Pla	next Newark N. J.
Place of Nativity, Alan	iled States 6
Place of Death, 81	Plane st Newark M. J.
Names of Parents of Dece	eased, John Cand Heannah Harris
	hisis Pulmanalis
Place of Interment, MU	Dleasant Geneley Newark, M.
	6
hereby Certify that the City of Newark, New decity.	he foregoing is a true Transcript from the Register of Deaths fersey, remaining on file in the office of the City Clerk of In Testimony Whereof I have hereunto set my
	hand, and affixed the seal of said city, this
	Fourth day of
	May A. D. 1881
4	0 0 1 11

#### A TRANSCRIPT

FROM THE REGISTER OF BIRTHS OF THE CITY OF NEWARK, N. J.

Name of Ch	mid Augustus E. Harris
Date of Birt	th, January 23d 1868
Sex of Child	, Male
Names of P	Parents, Deter W.B. and Isabella W.
Occupation (	of Father, Not given
Name of Pl	hysician or Midwife making the Return, Um. A. Smith M.

I hereby Certify, that the foregoing is a true Transcript from the Register of Births of the City of Newark, New Jersey, remaining on file in the office of the City Clerk of said city.



In Witness Whereof I have hereunto set my hand, and affixed the seal of said city, this

Mineteenth day of September 1. D. 1882

City Clerk.