

The said applicant further swears, that he has not been engaged in, or aided or abetted the late rebellion in the United States; and that he has never been a member of either of the Branches of the National Home for Disabled Volunteer Soldiers. And said applicant further stipulates and agrees that he will abide by and obey all the rules and regulations made by the Board of Trustees, or by their order; that he will perform all duties required of him, and obey all lawful orders of the Officers of the Home.

WITNESS.

W. W. Head } John Fitzgerald
John C. Newby } Master

Sworn to and subscribed before me the day and year first above written, and I hereby certify that the foregoing affidavit was read over, and fully explained to John Fitzgerald before he executed it.

(11) Walter Harwood
Clack County Court

CERTIFICATE OF IDENTIFICATION.

I HEREBY CERTIFY that I have every reason to believe, after an examination of his discharge papers, that John Fitzgerald is the identical person described therein, and that the above declaration signed by him is true.

(9) C. J. Nelson
Comdr Darvian Post 329
Morris Ills

SURGEON'S CERTIFICATE.

I certify that I have carefully examined (2) John Fitzgerald
Co. A Reg't 53 Mich Volunteers, and that he is (10) permanently ~~temporarily~~ disabled for obtaining his subsistence by manual labor.

Date of Injury or Disease, _____ day, _____ 18__

Place of _____ State of _____

Character of Disability, Old age. Paralysis of right side

Complications, _____

Present condition of Applicant, aged. Decrepit. Paralysis of right side.

(10) R. M. McMechan, SURGEON.

Sworn to and subscribed before me, this 14 day of April A. D. 1887, and I hereby certify that the said _____ is known to me as a Surgeon in actual practice, and reputable in his profession.

(11) _____