



Dear Patron:

We regret that the enclosed photocopies are the best we were able to obtain using our normal reproduction process. This is caused primarily by the age and faded conditions of some of the documents from which these copies were made.

COMPLETED FILE ENCLOSED

BEST AVAILABLE COPY.

THE NATIONAL ARCHIVES

CERT. NO. 871061

PENSIONER:

Sarah E.

Widow OF

VETERAN:

John M. Piles

CAN

65370

BUNDLE NO:

8

North Mill House Th. 11-11-11

6-15-02

Cleveland, O.

Aug 5/26.

Winfield Scott.

Commissioner of Pensions.

Sir:-

My mother was
married Mar. 17/64 which
her record shows. My
father John M. Piles
went back to his regiment
and served until the close
of the Civil War.

Hoping this is satisfactory.

Yours truly

Mrs. Nancy Peck
3720 N. 31 St

Peer

110

Order 194

100

100

My "reser" "injury"
of left arm? It was
alleged as the result
of vaccination in ap-
plication filed July
16/89.

J. D. S.
4

(2-17-93.)

Loughran

Re-rating and Increase of Pension.

STATE OF Ohio, COUNTY OF Darke, ss.

On this 27 day of February, A. D. 1888, personally appeared before me, the undersigned, duly authorized to administer oaths within and for the County and State aforesaid, John M. Piles, aged 47 years, a resident of the County and State aforesaid, who, being duly sworn according to law, declares that he is a pensioner of the United States, duly enrolled at the rate of _____ dollars per month, under Pension Certificate No. 127589, by reason of a disability from injury left leg & ankle, pension was allowed. for injury to left leg & ankle incurred in the service of the United States while a Private in Co. E, of the 71st Regiment of 0 Vols. That he believes himself to be entitled to an increase of pension on the account of his rate being unjustly low and disproportionate to his degree of disability.

He claims that during the time from his discharge to this date his rate has not been in accordance with his disability, nor in proportion to the rate allowed to others for similar and equivalent disabilities, and therefore he asks that his rating be corrected and he be RE-RATED from his discharge to date in accordance with law.

That he appoints WILLIAM FITCH & CO., of Washington, D. C., his true and lawful attorneys to prosecute his claim; that his Postoffice is Wayton Ohio, State of Ohio.

Claimant sign here John M Piles

Also personally appeared Grafton Kennedy residing at Wayton Ohio, and F. M. Burnett residing at Wayton Ohio, persons whom I certify to be respectable and entitled to credit, and who being duly sworn, say they were present and saw John M. Piles, the claimant sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of said claimant, and their acquaintance with him, that he is the identical person he represents himself to be, and that they have no interest in the prosecution of this claim.

Grafton C Kennedy
F. M. Burnett
Two witnesses sign here.

SWORN TO and subscribed before me, on the day first above written; and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to applicant and witnesses before swearing, and that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

[Signature]
Signature.
Sept 2nd
Official Character.

INVALID,
CLAIM RE-RATING AND INCREASE.

John M. Piles, Applicant,
Co. *E - 71st*, Regiment of
Ohio Volunteers.
No. *127,509*



FILED BY
WILLIAM FITCH & Co.,
WASHINGTON, D. C.

DECLARATION FOR THE INCREASE OF AN INVALID PENSION.

TAKE NOTICE.—If this declaration is executed before a Justice of the Peace or a Notary Public, the certificate of the CLERK OF THE COURT, as to the official character and genuineness of the signature of such officer must be attached. Neglect to comply with this requirement, will cause trouble and delay. Form on other side.

STATE OF Ohio }
COUNTY OF Darke } ss:

On this 15 day of March, A. D. one thousand eight hundred and eighty six
personally appeared before me, a Notary Public within and for the County and State
of said, John M. Piles (Claimant's name), aged 45 years, a resident of
Arcanum, County of Darke State of Ohio

who, being duly sworn according to law, declares that he is a pensioner of the
United States, enrolled at the Columbus Pension Agency at the rate of \$4.00
dollars per month, by reason of disability from Injuries left leg + ankle
(Here name the disability for which pension was granted.)
incurred in the Military service of the United States while Private Company E. 71st
Ohio (Here state rank, company, and regiment, if in the Army,
or if in the Navy.)

That he believes himself to be entitled to an increase of pension on account of Increase of
Disability for which already pensioned
(Here state the reasons for applying for increase. If on account of increase of the disability for which already pensioned, that should be
described. If on account of disability for which not pensioned, the location of the wound or injury, the name of the disease, and the time
place, and circumstances of its origin.)

That he hereby appoints with full power of substitution
TUCKER & EVANS, of Washington, D. C.,
his true and lawful attorneys, to prosecute his claim.

His Post Office address is Arcanum
1. D. W. Shepherd
2. Edgar Stimmetz
John M. Piles
(Signature of Claimant.)

Also personally appeared D. W. Shepherd, residing at Arcanum
Darke County Ohio, and Edgar Stimmetz, residing at
Arcanum Ohio, persons whom I certify to be respectable and entitled to credit, and who,
being by me duly sworn, say they were present and saw John M. Piles, the claimant, sign
his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance
of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that
they have no interest in the prosecution of this claim.

(If witnesses sign by mark two persons who can write sign here.)
1. D. W. Shepherd
2. Edgar Stimmetz
(Signatures of Witnesses)

Sworn to and subscribed before me this 15th day of March, A. D. 1886
and I hereby certify that the contents of the above declaration, &c., were 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.
Notary Public D. C. C.
(Official Character.)

[L. S.]

STATE OF }
COUNTY OF } ss:

I certify that Esq., who hath signed his name to the foregoing 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.

Witness my hand and seal of office, this day of 188 ..

[L. S.]

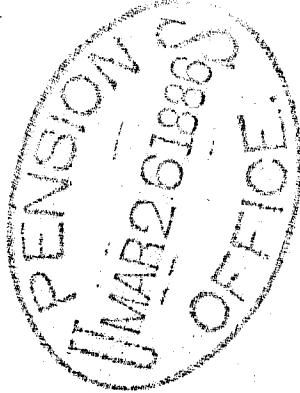
Clerk of the

INVALID.

CLAIM FOR INCREASE.

John M. Piles
Co. E 71st Reg't.
Ohio Vols.

Pension Cert. No.



Filed by

TUCKER & EVANS,

Attorneys,

Rooms 30, 32 and 34 Gunton Building

Washington, D. C.

For an INCREASE OF INVALID PENSION

State of Ohio, County of Montgomery, ss:

On this 14 day of Sept A. D. 1905, personally appeared before me a Dpty. Clk. Court of Comm. Pleas within and for the County and State aforesaid John M. Files
(Claimant's name should be written here)

aged 65 years, a resident of the County of Montgomery State of Ohio, who being duly sworn, according to law, deposes as follows, to-wit:

I am a pensioner of the United States, duly enrolled at the..... pension agency, at the rate of dollars per month, Certificate No. 127,509, by reason of disability incurred in the military service of the United States, while a member of Company "B" of the 71st Regiment of Ohio Inf. Volunteers, and my present physical condition is such that I believe I am entitled to receive an increase of pension. I am pensioned for

Injury of left leg and ankle and disease of eyes and lungs.

State here the disability or disabilities for which you are pensioned, just as they are written in your Pension Certificate) has increased.
That since I last applied for an increase of my pension my disability.....

If your disability or disabilities have increased since you last applied for increase, state that fact on the lines after the word "disability"

WITH FULL POWER OF SUBSTITUTION, I HEREBY APPOINT M. V. TIERNEY & CO. OF WASHINGTON, D. C., my true and lawful attorneys, to prosecute my claim. My Post-Office address is #1721 Monument Ave., Dayton, County of..... State of Ohio.

John M. Files
(Claimant's Signature)

1.....
2.....
(Two witnesses who can write sign here)

Also personally appeared David Shriedeker residing at..... Dayton Ohio and Samuel M. Watson residing at Dayton Ohio persons whom I certify to be respectable and entitled to credit, and who being by me duly sworn say they were present and saw

..... the claimant, sign his name (or make his mark) to the foregoing declaration, and that they have every reason to believe from the appearance of said claimant, and from their acquaintance with him, that he is the identical person he represents himself to be, and that they have no interest, direct or indirect, in the prosecution of this claim

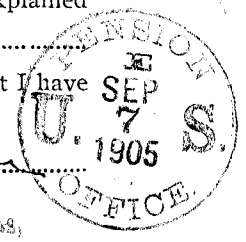
Signatures of Witnesses: David Shriedeker
Samuel M. Watson

Sworn to and subscribed before me 14 day of Sept A. D. 1905, and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant and witnesses before swearing, including the words.....

..... erased, and the words..... added; and that I have no interest, direct or indirect, in the prosecution of this claim.

Declaration and power of attorney valid.
S. A. Cuddy,
Chief, Law Division.
WLB. 9/8

James O. Danley
(Signature)
Dpty. Clk. Court of Com. Pleas,
(Official Character)
DAYTON, OHIO.



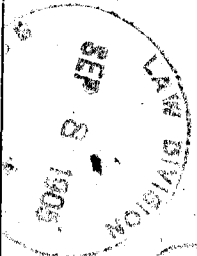
FILED

INVALID CLAIM
FOR
Increase of Pension.

John M. Piles
Applicant

Co. B.
71st
Reg't
Volunteers

Certificate No. *127,505*



FILED BY

I. V. TIERNNEY & CO.,
Attorneys at Law,

W. A. SHEPHERDSON, D. C.



RESULTING DISABILITIES.

CHRONIC DIARRHŒA may result in diseases of kidneys, Rheumatism, disease of heart, disease of liver, piles, fistula in ano, general debility, nervous debility, paralysis, consumption, disease of spleen, dyspepsia, disease of stomach, disease of rectum, disease of abdominal viscera, dropsy, asthma, nervous derangement, spinal irritation, disease of lungs, ulceration of bowels and vertigo.

RHEUMATISM may result in disease of heart, paralysis, disease of legs, disease of eyes and varicose veins.

SUNSTROKE may result in debility, nervous prostration, mental derangement, vertigo, disease of brain, insanity, disease of spine, deafness, disease of heart, paralysis, disease of eyes and epilepsy.

MEASLES may result in disease of lungs, disease of heart, disease of eyes, atrophy of testicles, asthma, bronchitis and chronic otorrhœa.

MALARIAL POISONING may result in disease of liver, disease of spleen, debility, indigestion, disease of heart, disease of kidneys, dropsy, neuralgia, disease of abdominal viscera and derangement of stomach and bowels.

ASTHMA may result in disease of lungs, loss of voice, emphysema, dilatation of right side of heart and dropsy.

TYPHOID FEVER may result in disease of lungs, disease of kidneys, disease of heart, disease of legs, enlargement of legs, debility, nervous debility, varicose veins, diarrhœa and derangement of nervous system.

GUN-SHOT WOUNDS may result in various disabilities, the character of which depends upon the location of the wound, etc.

INJURY OF ABDOMEN may result in spinal irritation, disease of stomach, disease of liver, peritonitis and adhesions.

INTERMITTENT FEVER may result in disease of lungs, rheumatism, debility and heart disease.

DISEASE OF HEART may result in disease of lungs, bronchitis, anasarca, paralysis and brain softening.

TYPHOID-MALARIAL FEVER may result in affection of the head, affection of stomach and debility.

FEVER may result in debility, chronic diarrhœa, rheumatism, ulcers of legs and deafness.

DEAFNESS may result in disease of brain and spinal irritation.

SMALL-POX may result in disease of leg and disease of eyes, suppurative otitis, deafness—partial or complete.

CATARH may result in bronchitis, disease of stomach, disease of middle ear, deafness and cerebral abscess.

TYPHUS FEVER may result in dyspepsia and hepatitis.

MALARIAL FEVER may result in indigestion, debility, nervous prostration and chronic dysentery.

INJURY OF SPINE may result in paralysis, locomotor ataxia, debility, neuralgia, epilepsy, curvature, hip-joint trouble and femoral abscess.

VACCINATION may result in loss of use of arm and blood poisoning. **DIPHTHERIA** may result in paralysis and disease of throat.
N. B.—The paralysis of diphtheria is usually *transient*.

VARICOSE VEINS may result in ulcers.

SCURVY may result in varicose veins and ulcers.

SCIATICA may result in injury of back and hip.

DISEASE OF ABDOMINAL VISCERA may result in disease of rectum.

GUN-SHOT WOUND OF HEAD may result in insanity, paralysis, disease of brain, disease of eyes, neuralgia and epilepsy.

GUN-SHOT WOUND OF LEG may result in varicose veins, rheumatism and paralysis.

INJURY OF HEAD may result in deafness, epilepsy, paralysis and insanity.

DISEASE OF LIVER may result in rheumatism, jaundice; often results in pleurisy of right lung.

JAUNDICE may result in debility, disease of liver and dropsy.

FEVER AND AGUE may result in disease of spleen.

BRAIN FEVER may result in epilepsy.

CONCUSSION may result in deafness, disease of brain and spinal irritation.

TYPHOID-PNEUMONIA may result in diseases of lungs and disease of throat.

ABSCCESS may result in varicose veins.

INJURY TO BACK may result in curvature of spine, paralysis and disease of kidneys.

INJURY OF CHEST may result in disease of lungs.

PLEURISY may result in pleuritic adhesions, displacement of heart and phthisis.

MALRIA may result in intermittent fever.

LOSS OF ONE EYE may result in affection of the other.

DISEASE OF LUNGS may result in disease of heart.

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of

The absence of a member from a session the name of the absentee, must be indorsed upon

(3-105.)
Department of the Interior,
BUREAU OF PENSIONS,
Oct 30, 1893

Insert character and number of claim.

Increase
[State above whether for original, increase, or restoration.]

Name and rank of claimant.

John M. Piles
Company E, 71 Reg't Ohio Vols

Claimant's post-office address.

22 Cymus St. Dayton O

Nature of Claim

No. 127509

Soldier:

Service:

John M. Piles
E 71 Ohio Vols
It is desired in this case that the examination be made with special reference to

Cause of disability.

in the service, viz: Injury of left
Dis of left arm, lungs

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of four

He makes the following statement upon w

Here give the claimant's statement as briefly and as compactly as possible.

My disabilities are
I am totally unable
account of lungs

Injury of left leg
and ankle, disease of
eyes, disease of
left arm from un-
pure vaccine matter,
disease of lungs &
heart rheumatism.

Here give a full description of the disabilities, in accordance with Book of Instructions.

Upon examination we find the following
respiration, 19; temperature, 99; he
pounds; age, 52 years.

Injury of left leg and ankle.
No shortening, unless the
Disease of eyes. Eye balls
slight opacities - pup
respond to light and r
below 4 at 12 feet well
widen X at 16 feet w
Disease of left arm, 7
of this arm midway bet
are also three scars
below the vaccine scar,
Copper colored - not dr

The actual and probable origin of every existing disability must be fully set forth.

Whenever a disability is shown, or is believed to be due to or aggravated by vicious habits the opinion of the board must be stated. When not due to such habits this fact must be stated.

No thickening or hardening of tissue beneath or around them - there is a similar scar on inner surface of arm just above elbow joint and one on inner surface of left thigh two inches below perineum. This scar is same in color, and physically but is about 3 inches in diameter - there is also a scar in left groin probably result of a suppured gland, as applicant describes an abscess there. Disease of lungs. Chest symmetrical measurements 29 1/2 to 32 1/4 - there is a crepitant rale heard over lower portion of both lungs - No dullness or resonance. Respiratory murmur normal over both lungs except in lower portion as above mentioned.

This is a test examina-
tion; then for compl
fully with all the
requirements set forth
in pamphlet of instructions
for 1893 in regard to
each disability.

THOS. FEATHERSTONHAUGH,
Medical Referee.

Civil and foreign surgeons are required to make oath on the back of Certificate. 0-4 [OVER.]

W. E. Hoover, Pres. C. W. King, Sec'y. W. R. Thompson, Treas.

N. B. - Always forward a certificate of examination whether a disability is found to exist or not.

invited to the outfit, they should be used when the entrance and exit member from a session, must be indorsed u

These special instructions are forwarded for your information, and when the claimant reports you will read them carefully before making an examination, and return them with your certificate.

Very respectfully,

THOS. FEATHERSTONHAUGH,
Medical Referee.

Dr.

[OVER.]

6-236

12140 b-20 m

of, [unclear] for restoration.]

Case No. 1512

Case No. 1512

5th Ohio Vol

Rank, Private

1 Dayton O

Post-office address of the board, Dayton, O

at in compliance with the requirements of the law we have carefully

[Date of examination]

, 189 3

who states that he is suffering from the following disability, incurred

by a fall left leg and ankle - Dislocation of hip

and injury heart & nervous system.

statement upon which he bases his claim for

dollars per month

in the following conditions: Pulse rate, 88 - 104
height, 5 feet 3 inches; weight, 108
all these conditions were present at the time of the examination and have since remained the same.

the following objective conditions: Pulse rate, 88 - 104

height, 5 feet 3 inches; weight, 108

all these conditions were present at the time of the examination and have since remained the same.

the following objective conditions: Pulse rate, 88 - 104

Continue record of examination here.

in frequent cough with slight expectoration -
 marked but not extreme emaciation - General
 appearance feeble - throat red and inflamed -
 Heart Apex beat in fifth space 1/2 inch to right
 of nipple line - area of dullness not increased -
 impulse perceptible by palpation only - action
 and rhythm normal. No murmurs - both
 sounds normal. No edema or cyanosis, slight dyspnea
 on exercise - No hypertrophy or dilatation -
 Rheumatism, No enlargement, swelling or tenderness
 of joints. No atrophy - No contraction of tendons or
 muscles - no crepitation or limitation of motion.
 No evidence of intimate use of alcohol.
 Except as above stated all organs seem normal.

BA Review
 Dec 5/93
 1-26

U.S. PENSION OFFICE
 1893
 266
 DEC
 1893

SURGEON'S CERTIFICATE

IN CASE OF

John M. Felt
 Co. E, 71 Regt Ohio Vol

Applicant for *increase*

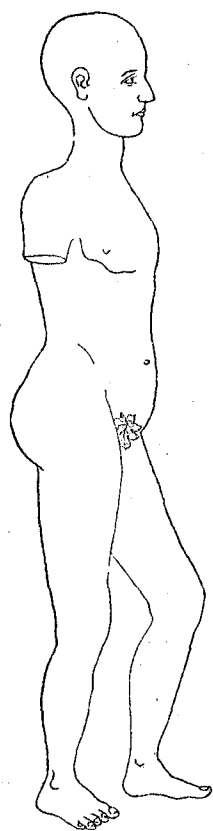
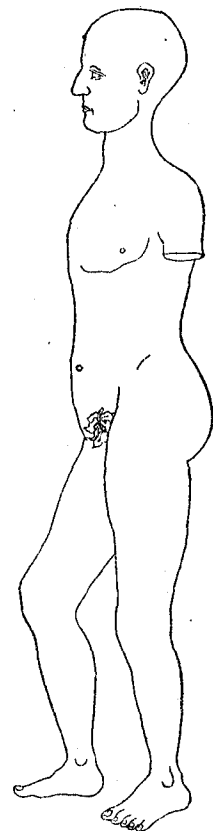
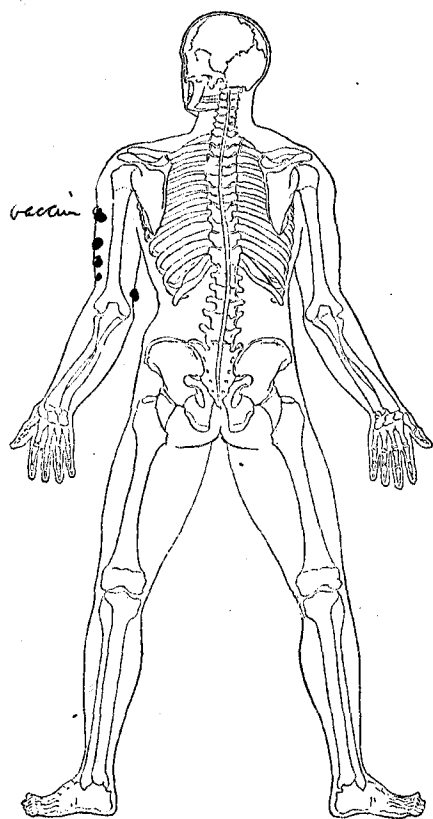
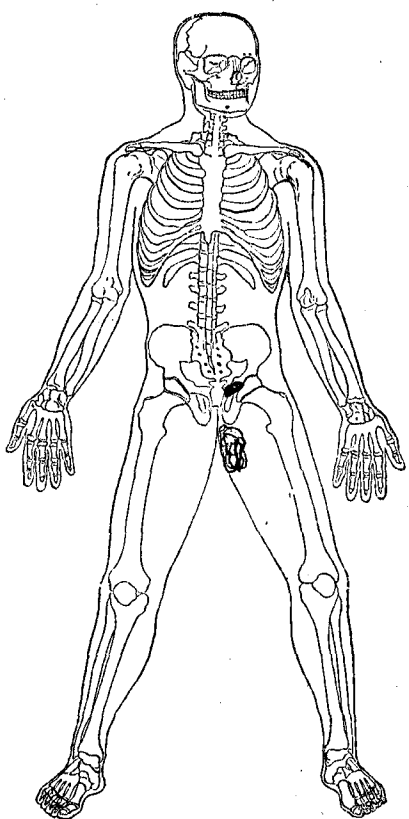
No. *127,554*
 DATE OF EXAMINATION:
Dec. 16, 189*3*

W. E. Hoover, Pres.,
Chas. King, Sec'y,
W. R. Thompson, Treas.,
 BOARD.

Post office, *Dayton*
 County, *Montgomery*
 State, *Ohio*

P. S.—Write your Post-office address plainly and in full.

Medical Dr.
Dec 7/93



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1862.]

No. 127589

Name: *John M Piles*
Rank: *Private* Comp'y: *E.*
Reg't: *71 Ohio Pos.*
Cincinnati } Agency.

RATE PER MONTH, AND DATE OF COMMENCEMENT.

1st Issue: \$ *4⁰⁰* Comm'g *Jan'y. 2. 1877.*
2d Issue: } Comm'g
3d Issue: } Comm'g

DATE OF CERTIFICATE, AND TO WHOM SENT.

1st Issue: *Apr. 2. 1877* Sent to *Apr 8/77*
Wm. H. R. McConnell Greenville
2d Issue: *72/10* Sent to
3d Issue: Sent to

Act 14th July, 1862. Bk. G., Vol. *18*, Page *140*

Registering Clerk: *Volmes*
Injury to left Leg + ankle.

Mar 30/75. Dischs (2) to pens

ISSUES OF PENSION
Dec. 1. 65.
Jan'y. 74.
June 16. 79.
June 19. 79.
Inc. rej. July 8/83.
May 1886.
Sept 15/88. Inev. el. atty. gen.
Nov 1. 1893. Ex. Crd.
Pod Dayton, Ohio
Mar 2/94. Rej. Act June 7/90.

(No. 1.)

War of the Rebellion.

Act of July 14, 1862.

INVALID PENSION—ORIGINAL.

Feb 25, 1874
27.509

James M. Piles & Co. 1/2

Claimant, John M. Piles,
P. O. Arcanum,
County, Darke,
State, Ohio,
Rank, Private,
Company, D,
Regiment, 71st Ohio, Mols.

Subsequent service filed Jan. 13th, 1873.

From _____, 18____, to _____, 18____, in _____
Attorney, N. K. McWhorter, Greenville, O.

Fee, \$ 10 (No contract) Material evidence filed since July 8, 1870.

Discharged (taken from Adjutant General's Report, Nov. 30th, 1865.

Rate of pension, \$ 4 per month, from Jan. 13th 1873, 1874.

Disabled by injury to left leg and ankle.

Brief for admission submitted July 17th, 1873.
W. H. Benson, Ex'r.

Declaration filed Jan. 13th, 1873, alleging disability from injury to left leg and ankle, received Feb. 14th, 1865, while being transported from Huntsville, Ala., to New Market, Tenn., en route for Virginia, that the train was thrown from the track, by a rail having been removed by the rebel cavalry, breaking the small bone of claimant's left leg and dislocating the ankle.

MEDICAL EXAMINATIONS.

The certificate of disability for discharge given by _____, Surgeon, says _____

Ex. Surg. Carter Otwell Finds injury to left leg and ankle Dis. 3/4

State of New York, County and City of New York ss
 Dr C. N. Hoagland being duly sworn according
 to law says that he was Surgeon of the 71st Reg Ohio
 Vol. Inf in the Service of the U.S. that on the 14th day of
 Oct A.D. 1865 while enroute from Huntsville Ala
 to New Market East Tenn the R.R. train upon
 which the Said Regiment was being transported was
 thrown from the track and wrecked and that in
 said wreck private John M. Piles the applicant in this
 case had his left ankle dislocated and the fibula
 of the same leg broken just above the ankle, that
 he helped to dress the wound on the spot and treat-
 ed the same afterward in Reg Hospital at New
 Market East Tenn, that the Said limb did not
 recover from the disability of the said wound
 during the remainder of the said John M. Piles
 Service, that it was and still is his opinion that
 the disability would be permanent and that it
 would disable the said applicant from perform-
 ing the manual labor of his occupation of gun-
 watal and has

State of New York,
 City and County of New York, } ss.

I, CHARLES E. LOEW, Clerk of the City and County of New York, and also Clerk of the
 Supreme Court for the said City and County, being a Court of Record, DO HEREBY
 CERTIFY, That

Before whom the annexed deposition taken, was, at the time of
 taking the same, a Notary Public, of New York, dwelling in said City and County,
 duly appointed and sworn and authorized to administer oaths to be used in any
 Court in said State, and for general purposes; and that the signature thereto
 genuine, as I verily believe.

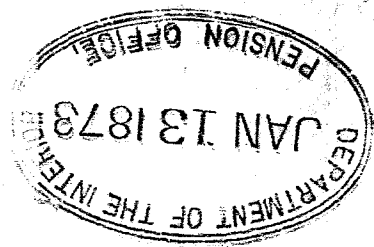
In Testimony Whereof, I have hereunto set my hand and affixed the Seal of the
 said Court and County, the day of 187

[Signature]
 Clerk.

erate or
 interest whatsoever

[Signature]
 Notary Public

37679/
7061.a. a. 0 (13) 73



State of Ohio Darker County ss

W. H. McConnell being first duly sworn according to law says that he was Colonel of the 71 Reg Ohio Vol Inf in the Service of the United States and was present and saw priv John M. Piles of Company E. of said Regiment receive a fracture of the fibula and dislocation of the ankle of the left leg, on the 14th day of February A. D. 1865 by the wrecking of the train of cars in which his command was being transported from Huntsville Alabama to East Green, that he was treated for said wound by Dr. C. N. Hoagland Surgeon of the Regimental in Regimental Hospital, that he did not recover from the disability of said wound during the remainder of his term of service so as to be able to march, that affidavit has been acknowledged with the said John M. Piles from the time of his discharge from service to this date and knows that he has been compelled by said disability to abandon his usual occupation of farmer, that the disability has not been aggravated or prolonged by intemperance or other bad habits

That this affidavit is made because the address of his company officers can not be ascertained and that he has no other interest in the prosecution of this claim than his fee of ten dollars for services as attorney in the case

Sworn to and subscribed before me this 9th day of January A. D. 1873 and I hereby certify that I have no interest whatever in the prosecution of this claim

W. H. McConnell
Committee Clerk
Clerk of the Court of Common Pleas Darker Co Ohio

DEPARTMENT OF THE INTERIOR
PENSION OFFICE
JAN 13 1873

70
73

15

15

15

15

15

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Inc.
[State above whether for original, increase, or restoration.]

Pension Claim No. 127,509

Name and rank of claimant.

John M. Tales, Rank, Pvt.

Claimant's post-office address.

Company E, 71 Reg't Ohio Inf. Lexia Ohio State,

[Post-office address of the Board.]

Payson Ohio [Date of examination.] July 8th, 1891.

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz: Inj. to left leg. & ankle. Dis. of eyes heart & lungs. Rheumatism & dis. of left arm. from Vaccination

Cause of disability.

If pensioner fill in the amount; if not, erase the whole line.

and that he receives a pension of Four dollars per month.

He makes the following statement upon which he bases his claim for Inc. [Original, increase, restoration, &c.]

Here give the claimant's statement as briefly and as compactly as possible.

States that he suffers constantly from severe pain in his left leg, & ankle; that his disease of eyes is impairing his vision, so that he cannot tell what an object is across the street without the aid of glasses. That he has hemorrhage of left lung every spring. his rheumatism troubles him daily, also his heart. He complains of his left arm from effects of vaccination. Plans to be almost entirely disabled from manual labor.

Upon examination we find the following objective conditions: Pulse rate, 80; respiration, 34; temperature, 99; height, 5 feet 5 inches; weight, 130 pounds; age, 50 years.

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

The find claimant in feeble health. muscles soft & flabby & hands indicating little or no manual labor. The find injury to left leg, the tibia has been fractured about 2 inches above ankle. A scar is visible as large as a nickel, tender & adherent, he limps slightly. The left leg is 1/2 in shorter than the right & the circumference of point of fracture is 1/2 in less than corresponding measurement of right leg. Motion is limited as to the lateral movement of foot to 1/4 degree. The find moist rales over apex of left lung, & slight dullness on percussion. Expansion ^{of chest} normal. right lung normal. He has a hacking cough & evidences of Ch. bronchitis exists, also chronic Pharyngitis. Crepitation of both shoulders is fossid & an inability to raise his arms above a horizontal position. The left arm is tender & poor from effects of former vaccination, & is at this point 1/2 in longer in circumference than the right. He says this arm grows very sore, & the evidence favors this statement. V. of right eye, D-60, of left D-80. with aid of glasses right eye D-30, left eye D-20. Evidences exist of former granulations of both eye lids of both eyes. No other disability found to exist.

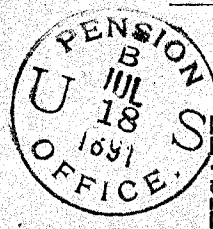
Rate for EACH cause of disability.

He is, in our opinion, entitled to a 6/8 rating for the disability caused by Inj. to left leg. 4/8 for that caused by Dis. of Eyes, and 4/8 for that caused by Dis. of Lungs 2/8, Rheumatism, 2/8 Dis. of left arm.

L. M. Jones, Pres. J. M. Galloway, Sec'y. C. A. Anthony, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

Blank lined area for notes or additional information.



SURGEON'S CERTIFICATE

IN CASE OF

John M. Filer
C. E. 71st Reg't Ok. Inf.

Applicant for *Disch.*

No. *127,509*

DATE OF EXAMINATION:
July 8th, 189*1*.

L. M. Young, Pres.,
C. M. Gallowsay, Sec'y,
R. A. M. Sturmy, Treas.,

BOARD.

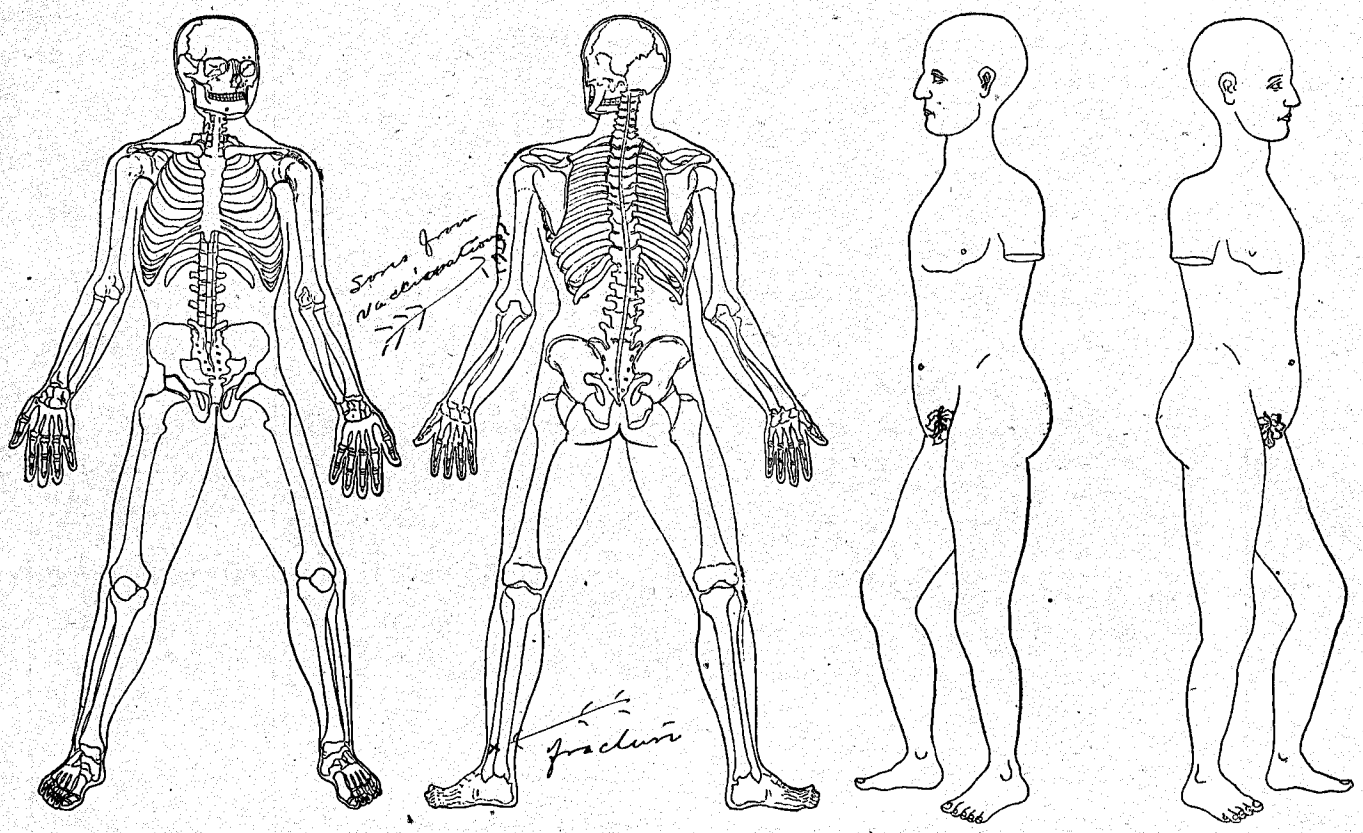
Post office, *Levia*

County, *Greene*

State, *Ohio*

P. S.—Write your Post-office address plainly and in full.

M. J. S.



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25 1882.]

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Ohio, County of Cuyahoga, ss:

On this 4th day of June, A. D. one thousand nine hundred and twelve, personally appeared before me, a John M. Piles within and for the county and State aforesaid,

who, being duly sworn according to law, declares that he is 72 years of age, and a resident of Cleveland, county of Cuyahoga,

State of Ohio; and that he is the identical person who was ENROLLED at Pymont, Montgomery County, Ohio, under the name of John M. Piles,

on the 28 day of October, 1861, as a Private, in Company E, 71 Ohio Regiment.

(Here state rank, and company and regiment in the Army, or vessels if in the Navy.)

in the service of the United States, in the Civil war, and was HONORABLY DISCHARGED

at San Antonio, Texas, on the 13th day of November, 1865.

That he also served (Here give a complete statement of all other services, if any.)

That he was not employed in the military or naval service of the United States otherwise than as stated above. That his personal description at enlistment was as follows: Height, 5 feet 5 inches; complexion, Fair; color of eyes, Hazel; color of hair, Brown; that his occupation was Farmer; that he was born August 26, 1840, at Housburg, Noble County, Ohio.

That his several places of residence since leaving the service have been as follows: Arcanum, Darke County, Ohio, Dayton, Montgomery County, Ohio, and Cleveland, Cuyahoga County, Ohio.

That he is a pensioner under certificate No. 127509. That he has applied for pension under original No.

That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the act of May 11, 1912.

That his post-office address is Cleveland, county of Cuyahoga.

Attest: (1) F.A. Shepherd, (2) W.E. Shepherd, John M. Piles (Claimant's signature in full.)

SUBSCRIBED and sworn to before me this 4th day of June, A. D. 1912, and I hereby certify that the contents of the above declaration were fully made known and explained to the applicant before swearing, including the words San Antonio and

[L. s.] and the words PENSION, added; and that I have no interest, direct or indirect, in the prosecution of this claim.

Validity as to execution S. A. Cushman Chief. L. D. Division per W E S

U.S. OFFICE JUN 5 1912

F.A. Shepherd Notary Public (Official character.)

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



ACT OF MAY 11, 1912.

CLAIM FOR PENSION.

Certificate No. 127509.

Name, John M. P. Jones

Service

INSTRUCTIONS.

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

ACT APPROVED MAY 11, 1912.

That any person who served ninety days or more in the military or naval service of the United States during the late Civil War, who has been honorably discharged therefrom, and who has reached the age of sixty-two years or over, shall, upon making proof of such facts, according to such rules and regulations as the Secretary of the Interior may provide, be placed upon the pension roll and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years and served ninety days, thirteen dollars per month; six months, thirteen dollars and fifty cents per month; one year, fourteen dollars per month; one and a half years, fourteen dollars and fifty cents per month; two years, fifteen dollars per month; two and a half years, fifteen dollars and fifty cents per month; three years or over, sixteen dollars per month. In case such person has reached the age of sixty-six years and served ninety days, fifteen dollars per month; six months, fifteen dollars and fifty cents per month; one year, sixteen dollars per month; one and a half years, sixteen dollars and fifty cents per month; two years, seventeen dollars per month; two and a half years, eighteen dollars per month; three years or over, nineteen dollars per month. In case such person has reached the age of seventy years and served ninety days, eighteen dollars per month; six months, nineteen dollars per month; one year, twenty dollars per month; one and a half years, twenty-one dollars and fifty cents per month; two years, twenty-three dollars per month; two and a half years, twenty-four dollars per month; three years or over, twenty-five dollars per month. In case such person has reached the age of seventy-five years and served ninety days, twenty-one dollars per month; six months, twenty-two dollars and fifty cents per month; one year, twenty-four dollars per month; one and a half years, twenty-seven dollars per month; two years or over, thirty dollars per month. That any person who served in the military or naval service of the United States during the Civil War and received an honorable discharge, and who was wounded in battle or in line of duty and is now unfit for manual labor by reason thereof, or who from disease or other causes incurred in line of duty resulting in his disability is now unable to perform manual labor, shall be paid the maximum pension under this Act, to wit, thirty dollars per month, without regard to length of service or age.

That any person who has served sixty days or more in the military or naval service of the United States in the War with Mexico and has been honorably discharged therefrom, shall, upon making like proof of such service, be entitled to receive a pension of thirty dollars per month.

All of the aforesaid pensions shall commence from the date of filing of the applications in the Bureau of Pensions after the passage and approval of this Act: *Provided*, That pensioners who are sixty-two years of age or over, and who are now receiving pensions under existing laws, or whose claims are pending in the Bureau of Pensions, may, by application to the Commissioner of Pensions, in such form as he may prescribe, receive the benefits of this Act; and nothing herein contained shall prevent any pensioner or person entitled to a pension from prosecuting his claim and receiving a pension under any other general or special Act: *Provided*, That no person shall receive a pension under any other law at the same time or for the same period that he is receiving a pension under the provisions of this Act: *Provided further*, That no person who is now receiving or shall hereafter receive a greater pension, under any other general or special law, than he would be entitled to receive under the provisions herein shall be pensionable under this Act.

Sec. 2. That rank in the service shall not be considered in applications filed hereunder.

Sec. 3. That no pension attorney, claim agent, or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under this Act, except in applications for original pension by persons who have not heretofore received a pension.

Sec. 4. That the benefits of this Act shall include any person who served during the late Civil War, or in the War with Mexico, and who is now or may hereafter become entitled to pension under the Acts of June twenty-seventh, eighteen hundred and ninety, February fifteenth, eighteen hundred and ninety-five, and the joint resolutions of July first, nineteen hundred and two, and June twenty-eighth, nineteen hundred and six, or the Acts of January twenty-ninth, eighteen hundred and eighty-seven, March third, eighteen hundred and ninety-one, and February seventeenth, eighteen hundred and ninety-seven.

Sec. 5. That it shall be the duty of the Commissioner of Pensions, as each application for pension under this Act is adjudicated, to cause to be kept a record showing the name and length of service of each claimant, the monthly rate of payment granted to or received by him, and the county and State of his residence; and shall at the end of the fiscal year nineteen hundred and fourteen tabulate the record so obtained by States and counties, and shall furnish certified copies thereof upon demand and the payment of such fee therefor as is provided by law for certified copies of records in the executive departments.

Rejet.

Injury to left arm
from vaccination on disability
transfer since date of
Jelmy Claiming

Jennings
Exp

BOARD OF REVIEW.

Department of the Interior,

BUREAU OF PENSIONS.

Chief of Certificate Division.

After issue of the certificate in this case
please return the papers to Adjudicating
Division for the necessary notification to the
Attorney and claimant of the rejection of
claim ^{for injury of left arm from} ~~under the~~ ^{injury} ~~vaccination.~~

W. B. F. Schubert

Reviewer.

W. B. F. Schubert
_____, 1894

No. _____

Name _____

Service _____

Department of the Interior,
BUREAU OF PENSIONS.

This slip should be attached to brief in admitted cases that have been called up by members of present Congress.

By direction of Commissioner:

CHAS. A. McKEVITTE,
Chief Clerk.

Middle Division,

Invalid Claim,

cd
No. *127,509*, of

John M. Pites

P. O. *Dayton*

Ohio

Hon. *Paul J. Berg. Mc*

called up this case *Nov 6*, 189*4*,

and should be informed of its adjudication.

Jennings
Examiner.

No. 127,509

ARREARS OF PENSION.

INVALID.

ACTS OF JANUARY 25 AND MARCH 4, 1879.

Certificate No. 127,579

Acts of January 25 and March 3, 1879.

Columbus

BRIEF FOR ARREARS OF INVALID PENSION.

Name, John M. Pike

Rank, Priv., Company E, 71 Regiment Miss. Inf.

P. O. address, Arcanum, County Marke, State Miss.

Discharged from service Nov. 30, 1865

Subsequent service from X, 18 , to , 18

Was first pensioned from Jan'y 2, 1874, at the rate of \$ 4 per month.

Arrears of pension due at the rate of \$ 4 per month from Dec. 1, 1865
and ending January 1 1874.

\$388.13.

Date, May 29, 1879 M. Smidge
Examiner.

Approved for issue:

J. H. Patrick
Reviewer.

Bureau of Pensions,

BOARD OF REVIEW.

Chief of the Certificate Division :

After issue of the certificate in this case please return the papers to Adjudicating Division for action upon the other disabilities, under ruling of May 1, 1885.

Kallogg
Rethewer.

April 20, 1891

No. *127509*

Name *John M. Piles*

Service *Art Co E 71 Ohio Is*

M6

Increase INVALID PENSION. *127509* *127509*

Claimant, *John M. Giles*
P.O., # *17* *Sheets St. Dayton* Rank, *private*
County, *Montgomery* Company, *"E"*
State, *Ohio* Regiment, *71 Ohio Vol. Inf.*

Rate, \$ *14* per month, commencing *February 5, 1896*

Disabled by *Injury to left leg & ankle, & disease of eyes & lungs*

RECOGNIZED ATTORNEY:

Name, *W. L. Eckman* Fee \$ *2*, Agent _____ to pay.
P.O., *Wah. Mil. Home Ohio* Articles filed _____, 18 ____

APPROVALS:

Submitted for *April 6*, 18 *94* *Leamaker*, Examiner.

Approved for *Injury to left leg + ankle & dis. of eyes + lungs. Alleged res. rheumatism, lumbago, dis. of heart, chest, stomach, & bowels referred to Med. Ref.*
Hemingway
April 9, 1896, _____, Legal Reviewer.

Approved for *injury to left leg, ankle and disease of eyes and lungs. 17/18 from February 5, 1896. Rheumatism, lumbago, disease of heart, chest, stomach, and bowels not accepted as results.*
Cyrre
April 11, 1896, _____, Medical Referee.

Enlisted *Oct. 30*, 1861
Discharged *Nov. 30*, 1865 Last paid to _____ at \$ *10*

Pensioned from *Jan. 2*, 1874, at \$ *4* for *injury to left leg & ankle*

Original declaration filed *Jan. 3*, 1873, alleged *injury to left leg & ankle*

Inc. rej. June 27/85. Inc. rej. Dec. 1/88 & Mch. 3/90.
Chain. rej. under Act June 27/90) Feb. 2/94
Inc. to \$10 fr. Jan. 16/89 for inj. to left leg & ankle & dis. of lungs & eyes.

Arrears allowed from *Dec. 1*, 1865 to *Jan. 1*, 1874 at \$ *4*.

PRESENT CLAIM.

Declaration filed *Sept. 6*, 1895 *perjured cause & res. rheumatism, heart dis. lumbago & dis. of chest, stomach & bowels.*
Hon. Paul J. Sorg *writer*

EDH/EBK

EBK
Civil War Division,
Wid. Orig. 1139, 213,
Sarah E. Piles,
John M. Piles,
E, 71 Ohio Inf.

May 7, 1919.

Orion L. Neff, Atty.,
403 American Trust Bldg.,
Cleveland, Ohio.

Sir:

In the above-cited claim for pension, there should be furnished the sworn statements of credible witnesses who knew claimant and soldier while they resided in Dayton, Ohio, and one witness, to consider with that of Frank S. Story, who knew them in Cleveland, Ohio, showing whether they were ever divorced, and whether they lived together as husband and wife during the period of their acquaintance with them, as the statement of Cathern S. Story only covers a period of seven years, and is of no value except to cover that period.

No affidavit can be considered satisfactory that fails to state the age and post-office address of the witness, and how he knows the facts stated.

Do not fail to inscribe on each paper filed the soldier's name and service, and the number of the claim.

Very respectfully,

H. C. FREMAN

Acting Commissioner.

+ acc'd

Emf.

Notified

Apr 17, 1919

MAY 7 1919

*neff. g. v. s. s.
Further proof of non-
divorce & rehabilitation
E.S.*

Ex'r.

✓ DEPENDENT.

E 71

No. *1275-09*

Act of *Act of April 19, 1908*
amended by Act Sept. 8, 1916.

*Sarah E. Piles
3524 Krather Ave
Cleveland, Ohio
Widow
John M. Piles*

Service *E 71 - Oh. Inf.*

Died *Mar 24 - 1919 Cleveland, Oh.*
No other claim. than
J. C. 1275-09

April 16, 1919 *H. A. S.*
Clerk.

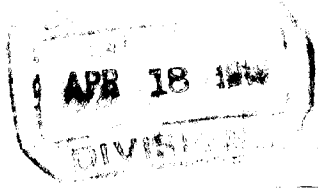
Application filed: *Apr 8 - 1919*
Attorney: *Orion L. Neff*
403 American Trust Bldg
Cleveland, Ohio, O.

Attorney's Mark

Cert. of Dis. Searched for _____, 19

Ⓟ

M. D.



EDH/EBK

IN REPLY REFER TO

Civil War Division,
Wid. Orig. 1139,213,
Sarah E. Piles,
John M. Piles,
E, 71 Ohio Inf.

3-1865

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

WASHINGTON May 7, 1919.

Orion L. Neff, Atty.,
403 American Trust Bldg.,
Cleveland, Ohio.

Sir:

In the above-cited claim for pension, there should be furnished the sworn statements of credible witnesses who knew claimant and soldier while they resided in Dayton, Ohio, and one witness, to consider with that of Frank S. Story, who knew them in Cleveland, Ohio, showing whether they were ever divorced, and whether they lived together as husband and wife during the period of their acquaintance with them, as the statement of Cathern S. Story only covers a period of seven years, and is of no value except to cover that period.

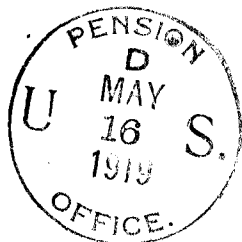
No affidavit can be considered satisfactory that fails to state the age and post-office address of the witness, and how he knows the facts stated.

Do not fail to inscribe on each paper filed the soldier's name and service, and the number of the claim.

Very respectfully,

E. C. Sieman

Acting Commissioner.



LAW OFFICES
OF

O. L. NEFF.

Rooms 28 & 29.
236 SUPERIOR ST.

OFFICE TEL. MAIN 3227 X.
RESIDENCE TEL. SOUTH 411 L.

Cleveland, O., April 7th. 1919

Commissioner of Pensions.
Washington, D. C.

Dear Sir;-

Please find enclosed application for a
Widow's Pension from Sarah E. Piles, widow of John M. Piles, late private
CO. E. 71st. Regt. O. V. I.

When I get the Number of the case I will forward additional evidence.

Trusting to hear from you at your earliest convenience I remain,

Yours truly.



O. L. NEFF

LAW OFFICES
OF

O. L. NEFF.

103 America Trust Bldg.
ROOMS 28 & 29.
236 SUPERIOR ST.

OFFICE TEL. MAIN 3227 X.
RESIDENCE TEL. SOUTH 411 L.

O. L. Neff
Cleveland, O., April 11th, 1919.

The Commissioner of Pensions.

Washington, D. C.

Dear Sir;-

Please find inclosed two affidavits to be filed with the papers of Sarah E. Piles, widow of John M. Piles, private Co. E. 71st Regt. O. V. I. - Widow's Pension Claim - No. 127509.

If further evidence is required I will endeavor to supply it.

Yours truly.

GW/OLN.

O. L. Neff



Dr. Hoover says
that at the time
he examined John
M. Piles, nothing was
said about his
arm nor about any
effects of Vaccination,
but that afterward it
was spoken of and
Dr. Hoover thinks the
statement was made
by Piles to the Board
of Surgeons who
examined him -

Respectfully
Wm. Humphreys
J. C.

Dayton, Ohio.
July 16. 1894.

127.509



ACT OF JU

14⁶

John M. Giles
Arcanum.

Darke Co. Ohio.
Pct. Co. "E." 71. Ohio. Infy. Vol.

Discharged Nov. 30., 1865.

40

Received Jan 13., 1873.

A. R. McConnell
Greenalls, Darke Co.
Ohio.

Attorney.

Act of Feb. 6, 1907.

4
71

Cert. 127.509

Name, John M. Piles

#9524 Kather Road S.W.
Cleveland, Ohio.

Application filed Mc Ly 1491

Service, C-71 Ohio Sup.
March 23. 1911. Outd. by J.S.W.

C-2

M. D.

Steel

[3-216 a.]

Ex'r.

Law. of No. 124509

Act of June 27, 1890.

John M. Piles

P.O. Nat Mil Home

Montgomery Co Ohio

Service: E 41 Ohio Inf

RECEIVED

Enlisted: , 18

Discharged: , 18

Application filed: 23 Oct , 1890

Alleges:

Any other Claim filed: 124509

Numerical No. 485373

Attorney: J. W. Fitzgerald

P.O. National Mil Home
Ohio

Recognized. Contract.

Cert. of Dis. Searched for , 18 .

DMN

May 20. 91 Ex. ord

Kenia Ohio

April 12/96 very
best obtainable evidence

of extent of dis. from
date of filing & date
of the first exam. & dis.

PA. ~~...~~

~~Nov 28/93 Call for Mil. & Med. history
" " Special Ex. for standing of
Dr. E. C. Hoover - Call for one comrad
as to origin & course of injury of left
arm, & to John Ham for intelligence~~

~~OHIO, Dec. 1/93 Test. Eli Wallace Samuel
Smyder & Capt Worley by Special Ex -
Killed also consumption, dis. of eyes, & inj. of left
arm.~~

MICH. -

No.

INVALID DIVISION.

No. 180,470

Claim of John M. Piles.

Co. 7th Reg't, O.

Post Office: Arcanum,

County: Darke,

State: O.

Referred by J. L. P.

TO MEDICAL DIVISION

On this 25 day of Feb., 1874.

Returned to

On this ___ day of ___, 187 .

ACTION:

1/2

Injury to left leg

and ankle

Wounds repaired

19th Feb 20 74

H. G.

J. L. Ford

Chief of Division.

INVALID. (Series

Cert. No. 127009

Name, John M. Giles

Rank, Pri; Service, Col Inf

Original Roll: Columbus

Agency, Transf'd

18... to

Issued,, 18

Mailed, 18

Rate and Period, \$, from, 18

Deductions:

Disability:

Issued, Dec 10, 1897

Mailed, " 21", 1897

Rate and Period, \$ 10, from Aug 16, 1897

Deductions:

Disability: Injury to left leg & ankle & disease of lungs & eyes

Issued, Apr 20, 1898

Mailed, " 25", 1898

Rate and Period, \$ 14, from Feb 5, 1898

Deductions:

Disability: Injury to left leg & ankle & disease of eyes & lungs

INDORSEMENTS.

Jan 14 1895 Atty submit and ... of injury of left ... from impure vaccination ... Atty (Eckman) submit ... alleged results not accepted ... of personal cause ... Atty ... M & T ... of Inc cig

Vertical text on the left margin: Rec'd, Issue, Class, Entered, Fee, \$ 10, \$ 2.00, \$ 2.00

Sept 20/06. atty Peter Tierney & club advised via agent. Jersey.

W

INVALID Act of Feb. 6, 1907

Cert. No. 127509

Name, John M. Piles

Rank, Pvt.; Service, Co. C, 71st Ohio Inf.

Original Roll: Columbus

Agency: Transf'd .1 to G-3

Issued ^{Aug} Mch. 30-1911

Mailed MAR 31 1911

Rate and period, \$ 15, from Mch. 14-1911

Deductions: 0

Disability:

DEAD

Issued Mch 26 1913

Mailed MAR 27 1913

Rate and Period, \$ 25, from June 5th 1912

+ \$ 30, Aug 26 1915

Deductions: 0

Disability:

Issued

Mailed

Rate and period \$ Accrued Pension, ACT OF MARCH 2, 1895.

Accrued Pension Order Issued June 16, 1919

Deductions Payable to Indent

Disability: M8D

Issued

Mailed

Rate and Period, \$, from

Deductions:

Disability:

See this Cert to 871061

INDORSEMENTS.

DROPPED

APR 14 1919 CET FINAN

4 Issue. Class Recd Entered 4.267 Fee, \$

5 Issue. Class Recd Entered 21.294 Fee, \$

Cert. 127509
Act May 11, 1912

Gr 3

ACCRUED PENSION

Class Invalid

Pensioner John M. Piles

Date of death March 24, 1919 Certificate is filed.

Claimant Sarah E. Piles Widow
3524 Krather Avenue
Cleveland

Cuyahoga County
Ohio

Attorney Orion L. Neff
403 American Trust Bldg
Address Cleveland
Ohio

~~subject to be collected~~
The fee of \$ none allowed on issue of
to
of to be paid when
payment is made on accrued.

APL

Submitted for Adm. June 4, 1919, J. C. Stoxton, Examiner.

Approved for admission
Pay widow as above

A. B. Cassman, Reviewer, June 7, 1919

W. D. Pettus, Rereviewer, June 7, 1919

Claimant _____ writes. No M. C.

CIVIL WAR

ACT OF MAY 11, 1912,

as amended by the act of March 4, 1913.

Cert. No. 127509

Claimant, John M. Piles

P. O., General Delivery, Cleveland Rank, Private

County, Cuyahoga Service, E 71 Ohio Inf

State, Ohio

Rate, \$ 25 per month, commencing June 5, 1912.

\$ 30 commencing August 26, 1915.

Approved for Increase.
 \$ 40 from June 10, 1913
 \$ 100 from 1913
 Act of June 10, 1913
 Fee, \$ 10.00 Agent to pay.
 Articles filed JUL 12 1913, 19

ATTORNEY OR STATE REPRESENTATIVE

(Order April 25, 1907.)

Name, None

Fee, \$ 10.00 Agent to pay.

P. O., None

Articles filed JUL 12 1913, 19

Removal Division.

APPROVAL.

Submitted for Adm. Feb. 11, 1913, J. Asch, Examiner.

Approved for admission Rate \$ 25.00 per month; age 71 1/2 years.

Reissue from act of February 6, 1907.

Date of birth: August 26, 1840.

Length of pensionable service: 4 years, 1 month, 1 day.

Deductions in service from any cause: none years, months, days.

on account of

March 22, 1913, J. M. Payne, Legal Reviewer. March 25, 1913, W. H. Hamblin, Re-Reviewer.

Enlisted October 30, 1861; honorably discharged Nov. 30, 1865

Enlisted, 18; honorably discharged, 18

Enlisted, 18; honorably discharged, 18

Length of pensionable service: 4 years, 1 month, 1 day.

Pensioned at \$ 15 per month, under Act of February 6, 1907.

PRESENT CLAIM, ACT OF MAY 11, 1912.

Declaration filed June 5, 1912

Age shown by evidence 71 1/2 years; date of birth alleged August 26, 1840

Claimant does write.

ACT OF FEBRUARY 6, 1907.

MW.
127509
Columbus

Claimant, John M. Piles
P. O., 3524 Kratter Road S.W.
County, Cleveland
State, Ohio
Rank, Private
Company, E.
Regiment, 71 Ohio Vol. Inf.
Rate, \$ _____ per month, commencing March 14, 1911.

STATE REPRESENTATIVE.

(Order April 25, 1907.)

CIVIL WAR
PLAN

Name, Wm A. Taylor
P. O., State House, Columbus Ohio

APPROVAL.

Submitted for ad. March 27, 1911, MS Neely, Examiner.
Approved for Admission

Age over 70
Rate \$15 per month

Review to allow under Act of February 6, 1907 Deduct sub. payments and drop name from rolls under general law.

Mar 28, 1911, J. M. Davis, Legal Reviewer. Mch 28, 1911, R. D. Bush, Re-Reviewer.

Enlisted October 30, 1861; honorably discharged November 30, 1865

Enlisted _____, 18 ; honorably discharged _____, 18

Enlisted _____, 18 ; honorably discharged _____, 18

Pensioned at \$ 14 per month, under general law.

PRESENT CLAIM, ACT OF FEBRUARY 6, 1907.

Declaration filed March 14, 1911.

Date of birth alleged, August 26, 1840.

Age shown by evidence 70 1/2 years.

Claimant does _____ write.

70 1/2

No. _____, M. C.

No.

(3-145.)

let # 127.509.

INCREASE INVALID PENSION.

Claimant, John B. Piles,

P.O., 1525 West 1st St.

Rank, Private

County, Dayton

Company, Co

State, (Montgomery Co.) Ohio

Regiment, 7th Ohio Vol. Inf.

Rate, \$ per month, commencing

REJECTED

Disabled by

RECOGNIZED ATTORNEY:

Name, Thomas L. Eckman

Fee \$ 2, Agent to pay.

P.O., National Military Home, Ohio

Articles filed, 18

APPROVALS:

Submitted for July 16, 1897.

James B. Kern, Examiner.

Approved for injury to left leg and ankle & disease of eyes & lungs.

Approved for injury to left leg and ankle and disease of eyes and lungs. 14/18 No increase

Alleged rheumatism of heart, chest, stomach & bowels & general debility & lumbago. Ref'd to Med Referee

alleged rheumatism disease of heart, chest (except disease of lungs for which pensioned) stomach, bowels and general debility and lumbago not accepted as results.

July 22, 1897, Mohun, Legal Reviewer.

Aug. 3, 1897, J. F. Raub, Medical Referee.

Discharged Dec. 30, 1865. Last paid to

at \$ 14

Pensioned from Jan. 2, 1874, at \$ 4 - for injury left leg and ankle.

Original declaration filed Jan. 13, 1878; alleged injury left leg & ankle.

Increase rejected June 27, 85. Aug 18, 88 - March 31, 93.

claim Ad from 27th rejected July 2, 94.

Reissued at \$ 10 from Jan. 16, 89 - for injury of left leg & ankle and disease eyes & lungs.

increased to \$ 14 from July 5, 96.

Arrears allowed from Dec. 1, 1865, to Jan. 1, 1874, at \$ 4 -

PRESENT CLAIM.

Declaration filed Jan. 18, 1897. Increase: Pensioned causes & Resig.

rheumatism disease of heart, chest, stomach & bowels & lumbago and general debility, No m & b

Wiles

INCREASE INVALID PENSION.

Claimant, John M Piles

P. O., 1721 Monument Avenue

County, Dayton

State, Ohio

Rank, Private

Company, Co

Regiment, 71 Ohio Vol Inf.

Rate, \$ per month, commencing

Pensioned for

RECOGNIZED ATTORNEY.

Name, M B Turner & Co

P. O., City

Fee, \$ 20; Agent to pay. *see 16/03*

Articles filed, 1

REJECTED

APPROVALS.

Submitted for, Feb Nov 17, 1903

Approved for, injury of left leg and ankle and disease of eyes and lungs -

Rheumatism alleged as a result of med Red

Submitted for, Guffin & Co Examiner.

Approved for, injury of left leg and ankle and disease of eyes and lungs

14 / 18, no increase.

Rheumatism not accepted as a result.

Mr 19, 1903 W. W. Womelle
Legal Reviewer.

Brooker
Medical Examiner.

Staples
Medical Reviewer.
Acting
Medical Reviewer.

Enlisted Oct 20, 1861 Discharged Nov 30, 1865 Last paid to

Pensioned at \$ 14 per month for injury to left leg and ankle + dis of eyes + lungs

PRESENT CLAIM.

Declaration filed Feb 4, 1903, Inc Pens cause + res rheumatism + injury from vaccination to left arm

Claimant does write.

Increase INVALID PENSION.

Claimant, John M. Piles,
 P. O., 1722 Monument Ave, Dayton Rank, Private.
 County, Montgomery, Company, E.
 State, Ohio. Regiment, 71. Ohio Vol. Inf.

Rate, \$ _____ per month, commencing _____

Pensioned for _____

RECOGNIZED ATTORNEY.

Name, M. V. Tierney & Co. Fee, \$ 2; Agent to pay. Sept 24/06
 P. O., Washington, D.C. Articles filed _____

APPROVALS.

Submitted for Sept 11, 1906, E. O. Brown, Examiner.

Approved for injury to left leg and ankle and disease of eyes and lungs Approved for injury to left leg and ankle and disease of eyes and lungs.

14/18. No increase.

Sept 14, 1906, J. P. Quinn Legal Reviewer.
W. H. Mesh Re-Reviewer.

Sept 17, 1906, Samuel Medical Examiner.
Sam Houston Medical Referee.

Enlisted Oct 30, 1861 Discharged Nov 30, 1865 Last paid to _____

Pensioned at \$ 14 per month for injury to left leg & ankle, eyes, disease of eyes and lungs.

PRESENT CLAIM.

Declaration filed Sept 7, 1906 increased pensioned cause.

Claimant does _____ write.

Western

REJECTED
Sept 24/06

Increase **INVALID PENSION:**

Claimant, *John W. Piles*

P. O., *Arcanum*

County, *Darke*

State, *Ohio*

Attorney, *M. Loenshal, Toledo, Ohio*

Rank, *Priv.*

Company, *E.*

Regiment, *71st Ohio vols.*

Fee, \$10. a gt. pay

Rate, \$ _____ **per month, commencing**

Disabled by *Injury to left leg & ankle,*

Submitted *June 17th*, 18*85*, by

Newton, Examiner.

Approved for *Injury to left leg & ankle.*

Approved for *No increase*

MS

June 24, 1885, A. S. Stotter Reviewer.

ser.
June 27, 1885,

W. A. ...

Med. Referee.

Discharged *Nov. 30*, 18*65*

Certificate surrendered, 18 .

Original application filed *Jan. 13*, 18*73*

Last paid at \$ *4*, to , 18 .

Increase application filed *Feb. 17*, 18*85*

Pensioned, 18 ; from *Jan. 2*, 18*74*; at \$ *4*, per month

for *Injury to left leg & ankle.*

Arrears allowed

Claims *Same -*

Increase INVALID PENSION.

Claimant, John W. Piles
 P. O., Dayton Rank, Priv
 County, Montgomery Company, Co
 State, Ohio Regiment, 71 Ohio Vol Inf

Rate, \$ _____ per month, commencing _____

REJECTED
 SEP 1 1888

Disabled by Injury to left leg and ankle

RECOGNIZED ATTORNEY:

Name, Wm Fitch & Co Fee \$ 10, Agent _____ to pay.
 P. O., City Articles filed _____, 18 _____

APPROVALS:

Submitted for Aug 9, 1888 Woodard, Examiner.

Approved for injury to left leg and ankle Approved for No increase

Aug 14, 1888, Thorn, Legal Reviewer. Drusby Gray M. G.
Aug 18, 1888, Whitcomb, Medical Referee.

Discharged Nov-30, 1865 Last paid to _____, at \$ 4

Pensioned from Jan-2, 1874 at \$ 4 for injury to

Original declaration filed Jan 13, 1873 alleged injury to left leg and ankle

Inc rej - June 30 1880

Arrears allowed from Dec 1, 1865 to Jan-1, 1874 at \$ 4

PRESENT CLAIM.

Declaration filed Feb-7, 1888 Same

Writes

INVALID PENSION

REISSUE TO ALLOW ADDITIONAL DISABILITY.

127.509
Columbus 331

JAN

Pensioner, John M. Piles No. 127.509
 P. O., 22 Cayus St. Dayton Rank, Private
 County, Montgomery Company, "E"
 State, Ohio Regiment, 71. Ohio Vol. Inf.
 Rate, \$ 10 per month, commencing January 16, 1839.

In view of certificate dated April 2, 1874
 Deduct sub. payments.
 Pensioned for injury to left leg and ankle, and disease of lungs and eyes.

RECOGNIZED ATTORNEY

Name, M. P. Nolan Fee, \$ 10.00; Agent _____ to pay.
 P. O., Dayton Ohio Articles filed _____, 18 ____

APPROVALS.

Approved for Disease of eyes & lungs.
 Submitted November 8, 1894
 Approved for Injury to left leg and ankle (old) Approved for injury to left leg and ankle, 4/18. No increase.
Disease of lungs and eyes (new) For disease of lungs and eyes.
pension to commence Jan 16/89 6/18.

Rig injury left arm from vaccination - not disabled
thence since filing
Nov 27, 1894 Legal Reviewer.
W. P. Bennett Re-Reviewer.

W. Jennings, Examiner.
W. B. Bell, Med. Ex'r, P. H., Med. Reviewer.
Dec. 1, 1894, Med. Referee.

HISTORY OF CLAIMS AND FORMER ACTION.

Enlisted Oct. 30, 1861
 Discharged November 30, 1865 Last paid to _____, at \$ 4.00

Pensioned from January 2, 1874, at \$ 4.00, for Injury to left leg & ankle
 Increase Rejected June 27, 1885 Increase rejected Sept 1, 1888
 Increase Rejected March 31, 1893
 Act Jan 27, 1890 Rejected February 2, 1894

Original declaration filed January 3, 1873; alleged Injury to left leg and ankle
Feb. 17, 1885. March 26, 1886. Dec. 7, 1888 alleged Increase

Declaration filed Oct 23, 1890; alleged Injury to left leg & ankle. Left arm disabled
from vaccination. Weak eyes, weak lungs, general rheumatism, disease of heart
and general debility Act June 27, 1890.

Arrears allowed from December 1, 1865, to January 1, 1874, at \$ 4.00

PRESENT CLAIM.

Declaration filed January 16, 1839, alleged Increase. Injury to left arm from
vaccination. Weak eyes and weak lungs.
Claimant asserts Weak lungs & leg m. l.