
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.

COMPLETE FILE ENCLOSED

BEST AVAILABLE COPY.

THE NATIONAL ARCHIVES

SOLDIER'S CERTIFICATE

No. 777696

VETERAN

William L. Hengel

RANK

Port and Board

SERVICE

Co E 11 Reg Inf

CAN NO.

101006

SUMMIT NO.

26

RICHARD R. ELMORE, M.D.
525 SECOND STREET
(ST. CHARLES PLACE)
LOUISVILLE, KY.

June 20, 1925.

To whome it may concern.

I hereby certify that in the spring of 1923 I attended
W.L. Hazelip for a severe carbuncle and arterio sclerosis.

I also attended Mr. Hazelip in fall of 1923 for arterio
sclerosis .

Mr. Hazelip is a man said to be 82 or 83 years old and is
in general feeble condition and requires the services of an
attendant to care for him.

R.R. Elmore M.D.

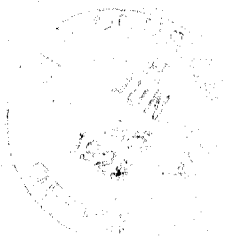
STATE OF KENTUCKY
COUNTY OF JEFFERSON

Subscribed and sworn to before me by R.R. Elmore this
22nd day of June 1925.

I further certify that said R.R. Elmore is a reputable
physician in regular and active practice and personally known
to me.

My commission expires May 1, 1928.

William Furlong
Notary Public, Jefferson Co. Ky.



Invalid Division

Innr. certificate No

777676

claim of

William L. Hazeligo

E. 11th Ky Inf.

Section 2, act of
May 1-1920.

DR. CHAS. O. TYDINGS

STATION E, ROUTE 2, BOX 148,

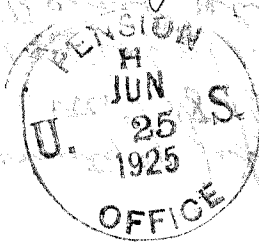
LOUISVILLE, KY.

To Whom It May Concern

This certifies that I have treated Wm. L. Hazelip for Arterio Sclerosis, High Blood Pressure and Chronic Intestinal Toxemia from Dec. 12th 1921 (three months) and at irregular intervals up to and including present date; that he has been confined to bed or house or both from 2 to 3 months each year, needing bed room attendant during such confinements and also to accompany him when able to leave the house. That he might not have an attack of Vertigo or possible apoplexy unattended, and that at home or away ascending or descending stairs unattended would be too risky.

June 17, 1925

Chas. O. Tydings



State of Kentucky, County of Jefferson:
Sworn to before me this 18 day of
June 1925, and I certify that affiant
is a regularly practicing physician
in good professional standing and
that I have no interest, direct or in-
direct, in the prosecution of this
claim.

W. A. Doyle, Jr. Notary Public
in & for Jefferson County, Kentucky.

Put
Seal
Here.

Invalid Divisions
Ins. Certificate No
777676
claim of
William A. Hazeltine
E. 11th W. Inf.
Section 2, act of
May 1-1920.

RECEIVED
JUN 20 1925
JAMES O. JAMES

Preserved

EXPIRATION OF MAY 1, 1920

8-420

DIVISION

LC

CLASS

Orig. No.

Cert. No. 777676

Soldier Hazelt

REVIEWER

DATE

ADJUDICATING DIV.

Ret'd on Review

Rejected

MEDICAL DIV.

LAW DIV.

FINANCE DIV.

SPECIAL EX. DIV.

COMMISSIONER

DEPUTY COMMISSIONER

SECRETARY

ADMITTED FILES

MISCELLANEOUS

ADMITTED

Admitted Files

Record Div

Adjudicating Div

Finance Div

Law Div

Miscellaneous

6-387

GOVERNMENT PRINTING OFFICE

Invalid Division

March 31, 1926.

Hon. M. H. Thatcher
House of Representatives

My dear Mr. Thatcher:

Referring to the claim for raise to correct the date of commencement of increase under section 2, act of May 1, 1920, No. 777676 of William L. Hazelip, whose address is General Delivery, Louisville, Ky., and who served in Co. B, 11 Ky. Inf., I have to advise you that the claim is rejected on the ground that the evidence on file fails to show that by reason of age and physical or mental disabilities claimant needed the regular personal aid and attendance of another person prior to May 21, 1925, the date of commencement of his increase.

Claimant has this day been advised as above.

Very truly yours,

Winfield Scott

WINFIELD SCOTT.
Commissioner.

ERL:ocp

Invalid Division

October 26, 1925.

Hon. M. H. Thatcher
House of Representatives

My dear Mr. Thatcher:

Referring to this claim for reissue to correct the date of commencement of increase under section two, act of May 1, 1920, I. C. 777676, of William L. Hazelip, whose address is General Delivery, Louisville, Ky., and who served in Co. B, 11 Ky. Inf., I have to advise you that it is rejected on the ground that the evidence on file fails to show that claimant required the regular aid and attendance of another person prior to May 21, 1925, the date from which the increase was made to commence.

Claimant has this date been advised as above.

Very truly yours,


WINFIELD SCOTT
Commissioner.

JHK/edg

Invalid Division.

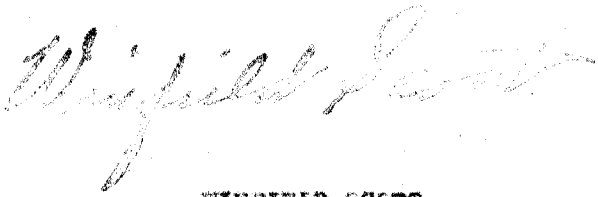
Oct. 12, 1925.

Hon. M.H. Thatcher
1004 Realty Building
Louisville, Kentucky.

My dear Mr. Thatcher:

In response to your inquiry relative to claim I.C. 777,676, of William L. Hazelip, whose address is General Delivery, Louisville, Kentucky, I have to advise you that the papers forwarded by you have been received and evidence filed in support of this claim is now being considered by the Medical Division and if found to establish the claim, it will be approved for allowance and you and the claimant will be advised when the certificate of pension is issued. Should anything further be required, a letter of advice will be promptly sent to the claimant.

Very truly yours,



LMA

WINFIELD SCOTT
Commissioner.

Invalid Division
I. O. 777676
William L. Hazelip
E. 11 Ky. Inf.

June 11, 1925.

Mr. William L. Hazelip,
General Delivery,
Louisville, Ky.

Sir:

In your claim for increase under section 2, act of May 1, 1920, you should state under oath as definitely as possible the month and day of the month in 1921 from which you first required the regular personal aid and attendance of another person, and furnish the evidence indicated in paragraph 2 of the circular letter herewith.

Respectfully,



WILDER S. METCALF
Commissioner.

CBH/1c

ACT OF MAY 1, 1920

INCREASE

Claimant William L. Hazelip
 P. O. Genl del. Rank Por. & Corp.
 County Louisville, Service Co. E, 11 Ky. Inf.
 State Kentucky
 Rate, \$ 72 per month, commencing May 21, 1925.

STATE REPRESENTATIVE. - None.

APPROVAL

Submitted for Med. ex. June 11, 1925, L. B. Heringway, Examiner.

Approved for

Approved for

INCREASE, SECTION 2,
ACT OF MAY 1, 1920.

Not warranted from prior
date

MEH

L. B. H.
7/29/25.
no examination

June 11, 1925, H. A. Gady
 Reviewer.
 192 ,
 Rereviewer.

July 31, 1925, J. L. Curry
 Medical Examiner.
 Medical Referee.

Enlisted , 18. ; honorably discharged , 18.

Enlisted , 18. ; honorably discharged , 18.

Enlisted , 18. ; honorably discharged , 18.

Length of pensionable service years, months, days.

Pensioned at \$ 50 per month, under ACT OF MAY 1, 1920, as Civil War veteran.

PRESENT CLAIM, ACT OF MAY 1, 1920

Declaration filed May 25, 1925.

Claimant does write.

No, M. C.

INVALID. (Series _____)

Cert. No. **777676**

Name, *William L. Hazlip*
Rank, *Private*; Service, *Co. C, 11th Reg. Ill. Inf.*

Original Roll: *Louisville*
Agency: Transf'd _____, 18____, to _____
" _____, 18____, to _____

Issued *June 7*, 18*99*
Mailed *14*, 18*99*
Rate and Period, \$ *6*, from *Sept. 26*, 18*99*

Disability: *Rheumatism & naso-pharyngeal catarrh.*

Issued *July 25*, 18*99*
Mailed *Aug 7*, 18*99*
Rate and Period, \$ _____, from *June 27*, 18*99*

Disability: _____

Disability: _____

Issued, *Apr 17*, 18*97*
Mailed _____, 18____
Rate and Period, \$ *1 1/2*, from *Feb. 18*, 18*97*
Deductions: *0*
Disability: *a*

Issued *Aug 7*, 18*92*
Mailed *AUG 8*, 18*92*
Rate and Period, \$ *19*, from *May 18*, 18*91*

Disability: _____

Disability: _____
ACT OF MAY 11, 1912

INDORSEMENTS

*Det. for medical relief of limb inf'd of
operation of mchase June 1st
O.E.M.*

Dr.

3-556.

No. 797.676.
Name, Hazelip -
Co. E, 11th Reg't, Ky. Inf.

CHIEF BOARD OF REVIEW:

Medical examination has been ordered
by me in this case to-day. Please see in-
dorsement on jacket.

THOS. FEATHERSTONHAUGH,
Medical Referee.

Jan 17th, 1895
(12163-25,000.) 6-111
no in - no reason to
change rank

P. Louisville

3-364

Increase
ACT OF MAY 11, 1912.

Cert. No.

777,676

Claimant

William L. Hazelip

P. O.

313-314 Realty Building

Rank

Private and Corporal

County

Louise Jefferson

Service

E. H. Kentucky Inf.

State

Kentucky

Rate, \$

25- per month, commencing *June 6 1914*

B. #30-

from June 6 1914.

Approved for Increase
\$40 from June 10, 1913
\$6 from — 19
Act of June 10, 1913
Rev.
Agent to pay.
JUN 22 1914

ATTORNEY OR STATE REPRESENTATIVE.
(Order April 25, 1907.)

Name

Fee, \$

P. O.

Articles filed

, 19

APPROVAL.

Submitted for

Adm. August 3, 1914

, 1914,

J. B. Algate

Examiner.

Approved for

increase

Rate \$

25-

per month; age

70

years.

Date of birth June 6 1844.

Length of pensionable service: *3* years, *2* months, *29* days.

Deductions in service from any cause: *None* years, months, days,

on account of

August 4, 1914,

H. W. Grubb
Legal Reviewer.

Aug 5, 1914,

J. P. Engle
Re-Reviewer.

Enlisted *September 18, 1861*; honorably discharged *December 16, 1864*

Enlisted *No other service*, 18; honorably discharged, 18

Enlisted, 18; honorably discharged, 18

Length of pensionable service: *3* years, *2* months, *29* days.

Pensioned at \$ *19.00* per month, under *ACT OF MAY 11, 1912*

PRESENT CLAIM, ACT OF MAY 11, 1912.

Declaration filed

May 9, 1914

Age shown by evidence

70

years; date of birth alleged

June 6

, 1844

Claimant does write.

No, M. C.

Louisville, Ky. May 6th, 1914.

Miss Sherley Gallagher,
Washington, D. C.

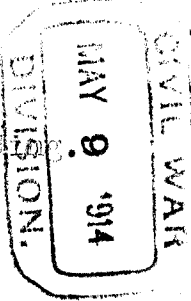
Dear Miss Gallagher:

I write you to find out when my pension
will be increased according to your records.

Please let me hear from you at once,
and oblige,

Yours truly,

William L. Hazelip



313-314 Realty Building.

May
777676

Louisville, Ky. July 29, 1914.

Commissioner of Pensions,
Washington, D.C.

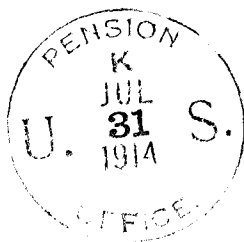
Dear Sir:

I am herewith inclosing to you my affidavit as to my age, as well as a certificate showing the record in my family bible which was copied from the family bible of my father which is now lost.

The date of my enlistment and the date of my discharge will show the age that I gave at the time I entered the service, and these are accessible to you.

Yours very truly,

William L. Hagelip



State of Kentucky,

County of Jefferson,

I, J. Reginald Clements, a Notary Public, in and for Jefferson County, Kentucky, certify that the following is a true and correct copy of an entry in the bible this day produced to me by William L. Hazelip; William L. Hazelip was born June 6th, 1844.

And following said entry is the following:

Elizabeth F. Clark was born August 23d, 1846. His wife.

Ida Hazelip was born March 14th, 1866.

Arthur Hazelip was born August 13, 1870. These were the children of W. L. Hazelip, and Elizabeth F. Clark.

Martin Hazelip, the father of W. L. Hazelip, was born April 17th, 1821. Elizabeth Hazelip, wife of Martin Hazelip was born December 18th, 1824.

Martin Hazelip died in 1856. Elizabeth Hazelip died in 1898. And the appearances of the entries all show entries to have been made many years ago.

On the preceding page is an entry of the marriage of said William L. Hazelip which is as follows:

William L. Hazelip and Elizabeth F. Clark, were married March 23d, 1865, which entry appears to have been made about the time of said marriage.

And I further certify that the bible in which said records appear was printed many years ago, as it is of ancient

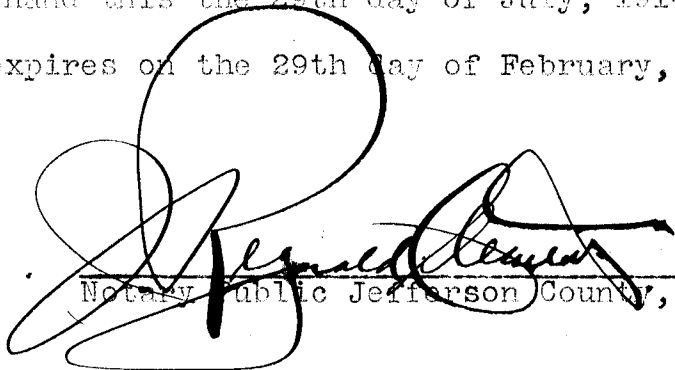
appearance and was published by the old printing firm of John E. Potter and Company 614-617 Sansom Street, Philadelphia, which is one of the old time publishing houses, and bears the certificate "Collins Printer".

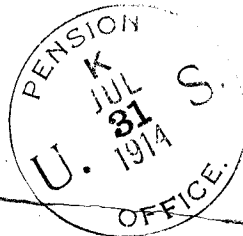
Said bible is printed in very old type and the bible shows appearance of many years of usage, though same is intact. The bible does not contain any date of publication, which is the reason why the date is not given exact.

I further certify that the record of the birth of William L. Hazelip bears no mark or marks of erasure or alteration, and from the appearance of the writing I believe the entry was made many years ago. The same is true of all of the entries mentioned.

Given under my hand this the 29th day of July, 1914.

My commission expires on the 29th day of February, 1916.


Notary Public Jefferson County, Kentucky



ACT OF MAY 11, 1912.

Cert. No. 777676.

Claimant, William L. Hagelip
 P. O., Louisville Rank, Private
 County, Jefferson Service, Co. E.
 State, Kentucky 11th Ky. Inf.
 Rate, \$ 19 per month, commencing May 18, 1912.

No ATTORNEY OR STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name, _____ Fee, \$ _____; Agent to pay.
 P. O., _____ Articles filed _____, 19 ____

APPROVAL.

Submitted for Adm. July 31, 1912, H. L. Keen, Examiner.Approved for Admission Rate \$ 19 per month; age 67 years.

Reissue from Act of February 6, 1907

Length of pensionable service: 3 years, 2 months, 29 days.Deductions in service from any cause: none years, _____ months, _____ days,

on account of _____

Aug 5, 1912, Geo. Meyer Aug 5, 1912, E. Grachtenbush
 Legal Reviewer. Re-Reviewer.

Enlisted Sept 18, 1861; honorably discharged Dec 16, 1864

Enlisted _____, 18 ____; honorably discharged _____, 18 ____

Enlisted _____, 18 ____; honorably discharged _____, 18 ____

Length of pensionable service: 3 years, 2 months, 29 days.Pensioned at \$ 12 per month, under act Feb 6, 1907.

PRESENT CLAIM, ACT OF MAY 11, 1912.

Declaration filed May 18, 1912Age shown by evidence 67 years; date of birth alleged June 6, 1844

Claimant does _____ write.

CIVIL WAR

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Kentucky, County of Jefferson, ss:

On this 17th day of May, A. D. one thousand nine hundred and twelve, personally appeared before me, a Notary Public, William L. Hazelip, who, being duly sworn according to law, declares that he is 68 years of age, and a resident of Louisville, county of Jefferson, State of Kentucky; and that he is the identical person who was ENROLLED at Brownsville, Kentucky, under the name of William L. Hazelip, on the 18th day of September, 1861, as a Private, in Co. E, Eleventh Regiment Kentucky Infantry Volunteers
(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 war, and was HONORABLY DISCHARGED at Bowling Green, on the 16th day of December, 1864. That he also served (No other service)
(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, Six feet 00 inches; complexion, fair; color of eyes, blue; color of hair, light; that his occupation was farmer; that he was born June 6th, 1844, at Near Brownsville, Edmonson County, Kentucky.

That his several places of residence since leaving the service have been as follows: Brownsville, Glasgow Junction, Lakeland and Louisville. Left Brownsville for Glasgow Junction about 1871; left Glasgow Junction for Lakeland about 1896 + left Lakeland in 1900
(State date of each change, as nearly as possible.)

That he is a pensioner under certificate No. 777,676. 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 Louisville, county of Jefferson, State of Kentucky.

Attest: (1) [Signature] (2) [Signature] William L. Hazelip
(Claimant's signature in full)

SUBSCRIBED and sworn to before me this 17th day of May, 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 _____

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

Mary C. Roberts
(Signature)
Notary Public Jefferson Co. Ky,
Commission Expires Mar. 4 1914,
(Official character)
Room 308 Custom House,
LOUISVILLE, KY.

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

ACT OF MAY 11, 1912.

CLAIM FOR PENSION.

Certificate No. 777676

Name, William L. Hazelip

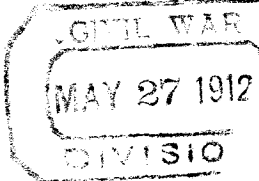
Service,

Room 212 Custom House
Louisiana Ky

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-five dollars per month; two 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.

Louisville

Original No. _____

Certificate No. _____

ACT OF FEBRUARY 6, 1907.

Claimant, *William L. Hazelip*
P. O., *Room 212 Custom House*
County, *Louisville*
State, *Kentucky*
Rank, *Private and Sergeant*
Company, *E*
Regiment, *11 Kentucky Vol Inf*
Rate, \$ _____ per month, commencing *February 18, 1907*

RECOGNIZED ATTORNEY.

Name, _____
P. O., _____

APPROVAL.

Submitted for *adm*, *April 3, 1907*, *W. A. Kellogg*, Examiner.
Approved for *Admission*.

Age over 62.

Rate \$12 per month.

Reissue to allow under Act of February 6, 1907. Deduct sub-payments and drop name from rolls under Act of June 27, 1890.

April 15, 1907, J. Wood Legal Reviewer. *April 16, 1907, O. U. J. Kis* Re-Reviewer.

Enlisted *September 18, 1861*; honorably discharged *December 16, 1864*.

Enlisted _____, 18 _____; honorably discharged _____, 18 _____

Enlisted _____, 18 _____; honorably discharged _____, 18 _____

Pensioned at \$ *8.00* per month, under *Act of June 27, 1890*.

PRESENT CLAIM, ACT OF FEBRUARY 6, 1907.

Declaration filed *February 18, 1907*
Date of birth alleged, *June 6, 1844*
Age shown by evidence *sixty-two* years.

Claimant does _____ write.

L. J. H. Eberley
J. Y. H., M. C.

ACT OF FEBRUARY 6, 1907.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Kentucky
 County of Jefferson } ss.

On this 15th day of February, A. D. one thousand nine hundred and Seven, personally appeared before me, a Notary Public within and for the county and State aforesaid, William L. Hazelip, who, being duly sworn according to law, declares that he is 62 years of age, and a resident of Louisville county of Jefferson, State of Kentucky; and that he is the identical person who was ENROLLED at _____ under the name of William L. Hazelip, on the 18th day of September, 1861, as a Private, in Company E Eleventh Regiment of Kentucky Infantry Volunteers (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 Bowlinggreen, Kentucky (State name of war, Civil or Mexican.) on the 16th day of December, 1864. 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, Six feet 00 inches; complexion, Fair; color of eyes, Blue; color of hair, Light; that his occupation was a Farmer; that he was born June 6th, 1844, at Edmonson County, Ky.

That his several places of residence since leaving the service have been as follows: Brownsville, Glasgow Junction, Lakeland and Louisville, all in the State of Kentucky (State date of each change, as nearly as possible.)

That he is _____ a pensioner. That he has _____ heretofore applied for pension Certificate # 777676 (If a pensioner, the certificate number only need be given. If not, give the number of the former application, if one was made.)

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 February 6, 1907.

That his post-office address is Louisville, county of Jefferson, State of Kentucky

Attest: (1)

(2)

Also personally appeared G. W. Long, residing in Leitchfield Ky. and Hortense Horton, residing in Louisville Ky., persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw William L. Hazelip, the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of the claimant and their acquaintance with him of 50 years and 14 years, respectively, that he is the identical person he represents himself to be, and that they have no interest in the prosecution of this claim.

G. W. Long
Hortense Horton
 (Signatures of witnesses.)

SUBSCRIBED and sworn to before me this 15th day of Feb, A. D. 1907, 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,

[L. S.]

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

Mary C. Roberts
 (Signature.)

(Official character.)

Notary Public, Jefferson Co. Ky.
 Commission Expires Mar. 12 1916.

3-014.

ACT OF FEBRUARY 6, 1907.

CLAIM FOR PENSION.

Certificate No. 77767.6

Name, William L. Hazelip

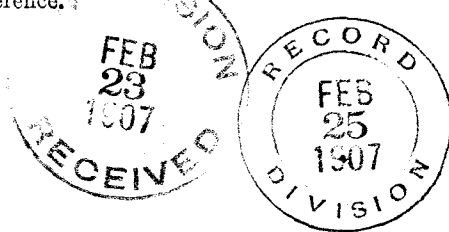
Service, Civil War

Co. E. 11th Regt Ky Vol Inftry

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.



AN ACT

GRANTING PENSIONS TO CERTAIN ENLISTED MEN, SOLDIERS, AND OFFICERS WHO SERVED IN THE CIVIL WAR AND THE WAR WITH MEXICO.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled:

That any person who served ninety days or more in the military or naval service of the United States during the late civil war, or sixty days in the war with Mexico, and 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, twelve dollars per month; seventy years, fifteen dollars per month; seventy-five years or over, twenty dollars per month; and such pension shall commence from the date of the filing of the application 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.

APPROVED: February 6, 1907.

6-303

Reissue to correct ³⁻³⁷¹ ~~date of commencement~~ Cert. No. 777676

ACT OF MAY 1, 1920

of INCREASE

Claimant William L. Hazelup
P. O. Genl Delivery Rank Private and Corporal
County Louisville Service Co. E 11 Reg Inf
State Kentucky
Rate, \$..... per month, commencing

REJECTED

Mar. 31, 1926
ERL

STATE REPRESENTATIVE None

APPROVAL

Submitted for Reissue, Oct 9, 1925, R. P. Withers, Examiner. ✓
to correct date of commencement

Approved for

Approved for rejection

REISSUE TO CORRECT DATE
OF COMMENCEMENT,
SEC. 2, ACT OF MAY 1, 1920
(October 10, 1925) H. G. Cady
REVIEWER, INVALID DIV.

Reissue to change date of
commencement not
warranted.

Harriet L. D. Stanton
Medical Examiner. Medical Reviewer.
OCT 15 1925
1925, 1925, C. S. Manning
Medical Referee

Enlisted, 18.....; honorably discharged, 18.....

Enlisted, 18.....; honorably discharged, 18.....

Enlisted, 18.....; honorably discharged, 18.....

Length of pensionable service years, months, days.

Pensioned at \$ 72.00 per month, under ACT OF MAY 1, 1920, as Civil War veteran.

PRESENT CLAIM, ACT OF MAY 1, 1920

affidavit
Declaration filed Oct 3, 1925

Claimant does write.

Hon. M. H. Chalcher, M.C.

H.R.

St. Jamesway

3-1647

Act. of May 1, 1920

Cert.

777676

Name,

William L. Hazelip

Application filed

May 25, 1925

Service,

E. H. Ky. Ins

June 11/25 - put (let) into force,
aid began, - inv. from that date,
L. B. H., San Diego

June 25 1925 Ex Bd Louisville, Ky. - EPO

26

20

C-2

Oct. 12, 1925, Hon. M.H. Thatcher adv. claim
is cons. by Med. Div. LMA. In. Div.

3-2229

ORDER MEDICAL EXAMINATION

ACT OF MAY 1, 1920.

NO.

777 676

William L. Hazeltine

JUN 18 1925



Warman
[3-216 a.]
Belmont
2/11 No. *922480*
Act of June 27, 1890.

William L. Hagelip
P. O. *Glasgow Junction*
Barren Co. Ky.
Service: *E. M. Ky Inf.*

Enlisted: *Sept. 18*, 1861.
Discharged: *Dec. 18*, 1864.
Application filed: *Sept. 26*, 1890.
Alleges: *Dis. of Heart by*
to R. Reg. Catarrh & Dis. of
Any other Claim filed: *Back Pain & Rheumatism*

Numerical No. *456,676*

Attorney: *Claimant*

P. O. *106, 130*
Recognized. Contract.

Cert. of Dis. Searched for *(3041-50,000)*, 18

May 28, 1891, D.
Md. May 28, 1891, D. Service
Va. No. Clerk Sub Service. Sels
W. Va. need. 1/4. ord. at
Glasgow, Ky. 5/2/91.
G. A. H.

N. C.
S. C. Dec 1891 at Am.
FLA. Erie reg. npt. by +
GA. Whithin min. claim. HEN
ALA.
MISS.
LA.
TEX.
KY.
TENN.
MO.
ARK.
D. C.
U.S.C.T.

No.

Act of Feb. 6, 1907.

2/22

Cert. 777 676

Name, William L. Hazelip

Application filed Feb. 18, 1907

Service, E 11 Ky Inf.

Encl

Congressional

UNDER ACT OF JUNE 27, 1890

(8-1639.)

INCREASE.

Cert. No. *777,676*
William L. Hazelip
P. O. *Room 212 Custom House*
County, *Louisville*

State, *Ky.*

Application filed *June 12, 1906*
Service, *E - 11" Ky, Inf*

JUN 18 1906

Wm. L. Hazelip
Ky. Wm. L. Hazelip
June 18, 1906. Hon. J. M. Richardson notified
and same has been ordered. W.L.H.

Attorney, *Clint*

P. O.,

County, , State,

(181 50m.)

J. P.

M. L. W.

Under Act June 27, 1890.

(3-217.)

INCREASE.

Claim to

No. 777 676

William L. Hazelip

P. O., Glasgow Junction

County,

State, Ky.

Application filed, Jan 25, 1892

State Service, Co. 11th Ky. Inf.

61 Litchfield & Hayson

to 16 April '94

Nov 12th 1894 A. G.'s report returned for

full military history, O. E. W.

May 1895 Atty Hazelip sent call for

2nd 3rd for injury of ankle, O. E. W.

July 1895 P. M. at Glasgow Junction

sent credibility call, O. E. W.

Disability.

Attorney, R. C. Hazelip

P. O., Litchfield

County, , State, Ky.

(Order 107. — 100 M.)

M.

Civil War Division
Inc Act of May 11, 1912.

Cert.

777,676

Name,

Wm L. Hazelip

Lanville

Ky

Application filed

, 191

Service,

A 11 Ky Inf

May 22 1862 ~~at the battle of Shiloh~~

J. A.

met
777676
Louisville

3-357.

Per. No. 777676

ACT JUNE 27, 1890.

Swagar INVALID PENSION.

Claimant, *William L. Hazlip*
P. O. *Room 212 Custom House* Rank *Private*
City *Louisville* Company *E*
State *Kentucky* Regiment *11 Ky. Vol. Inf.*
Rate, \$ _____ per month, commencing _____

Pensioned for _____ inability to earn a support by manual labor

F NO RECOGNIZED ATTORNEY.

Name _____ Fee, \$ _____
P. O. _____ Agent to pay.

APPROVALS

Submitted for *Adm* *July 18*, 190*6*, *McL Buckley*, Examiner.

Approved for *Rheumatism and*
new pharyngeal
catarrh old.

Approved for *spermaticus*
Catarrh, indigestion and
smile debility.

Disease of heart and
indigestion now allayed

Aggregate of disability shown, permanent in character: \$ *8*
from June 27th 1906.

June 12, 1906
Similarity and diagnosis
under 71.

July 19, 1906, *C. E. Luby*
Legal Reviewer
So. Div.
Re-Reviewer.

July 20th 1906, *James Houston*
Medical Examiner
Medical Referee.

Enlisted *September 18*, 186*4*; honorably discharged *December 16*, 186*4*

Enlisted _____, 186____; honorably discharged _____, 186____

Pensioned at \$ *6.00* per month. Last paid to _____

PRESENT CLAIM, ACT OF JUNE 27, 1890.

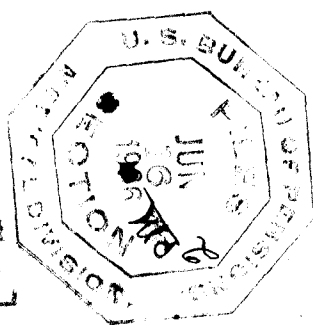
Declaration filed *June 12*, 190*6*, alleges *Long pensioned*
Cansee and heart trouble and indigestion

Claimant does _____ write.
Certificate not filed.

Wm. J. M. Richardson M. C.
Swagar Shirley

SOUTHERN.

Give immediate attention
CONGRESSIONAL CALL



Southern

Division.

Department of the Interior,

BUREAU OF PENSIONS.

Washington, D. C., JUN 16 1906, 190

No. Claim,

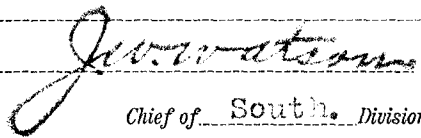
Cert. No. 777,676.

Claimant,

Soldier, William L. Hazelip,

Co. E, 11th Reg't Ky. Vol. Inf.

Respectfully referred to the Medical
Referee for action and advice to
Hon. J. M. Richardson, who filed
the claim for increase June 12,
1906.



Chief of South. Division.

DECLARATION FOR INCREASE OF PENSION.

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

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Kentucky
 County of Jefferson } ss:

On this 8th day June, A. D. one thousand nine hundred and six
 personally appeared before me, a _____ within and for the county
 and State aforesaid, William L. Hazelip, who, being duly sworn according
 to law, declares that he is 62 years of age and a resident of Louisville
 County of Jefferson, State of Kentucky; that he served as a
8th Corporal in Co. E. 11 Regiment Ky. Vol. Infantry, and that he is a pensioner
[Here state rank, and company and regiment in the Army, or vessel if in the Navy.]
 of the United States under the act of June 27, 1890, enrolled at the Louisville
 Pension Agency at the rate of Six dollars per month, by reason of partial inability
 to earn a support by manual labor, his pension certificate being numbered 777 676

That he believes himself to be entitled to an increase of pension on account of the following-named disabilities,
 to wit: Rheumatism, naso pharyngeal Catarrh,
[Here state cause of disability, as age, or name of disease, or nature of injury.]

Heart disease, and Indigestion

That none of said disabilities are due to vicious habits, and that they are to the best of his knowledge and belief
 of a permanent character

That he was born on the 6th day of June, in the year 1844, at Edmonson Co.
Kentucky, and that his personal description is as follows: Height, 6 feet 1 3/4 inches;
 complexion, Light; hair, light grey, eyes, blue

That he was not employed in the military or naval service prior to his enlistment in, 1861

That he has not been employed in the military or naval service since his discharge in, 1864

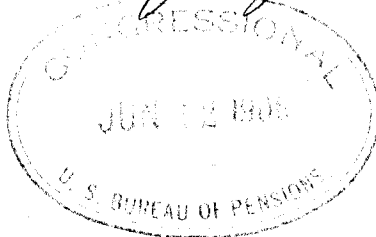
[Here state what the service was, whether prior or subsequent to that stated above, and the dates at which it began and ended.]

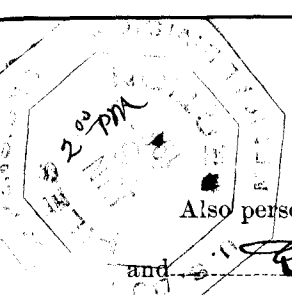
That his post-office address is Room 212 Custom House, Louisville
 County of Jefferson, State of Kentucky

William L. Hazelip
[Claimant's signature]

Attest: (1) Horace Norton

(2) W. H. Long





Also personally appeared Mortense Horton, residing at Louisville, Ky.,
and Albington, residing at Leitchfield, Ky., 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; that they have every reason to believe, from the appearance of said claimant and their acquaintance
with him of ten years and fifty years respectively, that he is the identical person he
represents himself to be; and that they have no interest in the prosecution of this claim.

Mortense Horton
Albington
(Signatures of witnesses.)

SWORN to and subscribed before me this 8 day of June, A. D. 1906

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

Validity accepted
S. A. Goodrich,
Chief, Law Division.
per L. L. 6-13-06

Mary E. Roberts
(Signature.)
Notary Public, Jefferson Co. Ky.
My Commission Expires Mar. 12 1910.
(Official character.)

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

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

Sum of 4446768

3-004.

By M. J. Division.

CLAIM FOR INCREASE.

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

Name: Mr. L. Hagelap

Service: Co. E. 11 Ky Inftry

RECEIVED

JUN 13 1906

U. S. DEPT. OF PENSIONS

FILED BY Con J. M. Richardson

claimant

0-2

6/13/06

Declaration for the Increase of Pension and for New Disability under Act of June 27, 1890.

State of Kentucky, County of Barren, ss:

On this 22 day of June, A. D. one thousand eight hundred and ninety two personally appeared before me, a Police Judge in

within and for the county and State aforesaid, William L. Hazlet aged 48

years, a resident of the Town of Glasgow Junction county of Barren

State of Kentucky, who, being duly sworn according to law, declares that he is a pensioner

of the United States, enrolled at the Louisville Pension Agency, at the rate

of 6 dollars per month, Certificate No. 777676, by reason of disability from Rheumatism

and Naso Pharyngeal Catarrh

disability for which pension was granted.

That he was a Captain in Co. E 11th Regt. Reg Vols.

Here state rank, company, and regiment, if in Army—vessel, if in Navy

and Rebelle

That he believes himself to be entitled to an increase of pension on account of a failure to give him

Here state the reason for

the rating Concursate with his actual disabilities resulting
applying for increase. If on account of increase in the disability for which already pensioned, that should be described.
from Rheumatism and Naso Pharyngeal Catarrh and because
he was given no rating on Heart disease, injury to right leg
disease of Kidney and disease or weak Spine for all
of which he asked a rating in application No 922780

And he also believes himself to be entitled to a further increase of pension on account of the following

disabilities for which he has not heretofore been pensioned. Injury to hip back and shoulder

If either of these new disabilities are result of an injury or

received by being thrown by or from a mule at Glasgow Junction
by Dec 22, 1891 also for sprained right ankle and fractured
bone and injury in right foot which injuries were received
December 22, 1891 at Glasgow Junction Ky while getting off of
his mule stepped on a rock which rolled and struck him in the belly
very large weighing 247 lbs and suffered with Rheumatism could not perform
That said disabilities are not the results of his vicious habits and are to the best of his knowledge permanent

in character; that he appoints R. B. Hazlet of Letchfield

County of Grayson, State of Kentucky

his true and lawful attorney to prosecute his claim. That his POST-OFFICE ADDRESS is Glasgow

Junction, County of Barren, State of Kentucky
and he asks that he be ordered before the board at Letchfield
Ky or Elizabethtown Ky for Examination William L. Hazlet

Signature of claimant.

Attest:

R. B. Hazlet Jr
Judge



Also personally appeared R. C. Hazelip Jr, residing at Glasgow
Glasgow Junction, and Eugene Hazelip
residing at Glasgow Junction, persons whom I certify to be

respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw
William L Hazelip, 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.

R. C. Hazelip Jr
Eugene Hazelip
Signatures of Witnesses.

Sworn to and subscribed before me this 22nd day of June 1892.

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

[L. S.] words _____ erased,

and the words and Rissu

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

From June 19-91
to Aug. 31-94. H.E.W.

Official Signature: J. M. Dusk

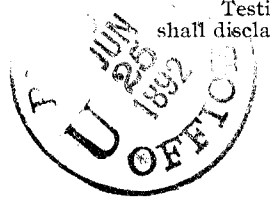
Official Character: Police Judge in & for B.C.

Certificate of Official Authority on file in Pension Office

The POST-OFFICE ADDRESS (naming street and number in all large cities) of the applicant, attorney, and witnesses
should be embodied in or accompany every application, and all evidence in each claim; and each change of residence of
said parties, while communicating with the Pension Office or the pension agents, should be stated.

Pensions, are by law, exempted from any liability on account of the obligations of the pensioners, and no lien upon
them can be recognized.

Testimony in support of allegations made in a declaration may be taken before any officer having a seal, and who
shall disclaim any interest, direct or indirect, in the prosecution of the claim.



In of 777676 Ad

DISABILITY.

Claim for Increase and New Disability under Act
of June 27, 1890.

William L Hazelip Applicant.

Co. E 11th

Reg't.

By Ought

Vols.

Pension Certificate No. 777.676

FILED BY

R. C. Hazelip
Litchfield Ky

Printed and Sold by W. H. Moore & Co., Box 616,
Washington, D. C.

Act of June 27, 1890.

Increase, **INVALID PENSION.**

✓ Claimant, *William L. Hazelip*, *Let. #777676*
 ✓ P. O., *Glasgow Junction*, Rank, *Corporal, Co. 1st Regt.*
 ✓ County, *Barren*, Company, *"E."*
 ✓ State, *Ky.*, Regiment, *11 Ky. Vol. Inf.*
 Rate, \$ _____ per month, commencing _____

Disabled by _____

RECOGNIZED ATTORNEY:

✓ Name, *W. L. Hazelip*, Fee \$ *2.*, Agent to pay.
 ✓ P. O., *Leitchfield, Ky.*, Articles filed _____, 189 _____

APPROVALS:

Submitted for *September 10, 1895*, Examiner, *H. E. Weston*
 Approved for *Rheumatism and naso-pharyngeal catarrh (old noise)*, Approved for *Rheumatism and naso-pharyngeal catarrh \$6*
Reject this dis. disease of heart kidneys & spine, *No increase*
injury to rt leg, hip, back, shoulder, right, *No other notable disability shown*
foot & ankle not disabled thereby, as
per action Med Ref
Oct 2, 1895, *Cony*, Legal Reviewer. *William L. Hazelip*, Medical Referee.
Sept 21, 1895

✓ Enlisted *September 18, 1861*, Honorably discharged *December 16, 1864*, Last paid
 to _____, at \$ *6*, for *Rheumatism & naso-pharyngeal*
 ✓ *catarrh*,
No Pension under other laws at \$ _____, for

ended
 Original declaration, act June 27, 1890, filed *September 26, 1892*; alleged *Rheumatism,*
disease of heart, catarrh of head, disease of kidneys
and spine, and injury of right leg.

PRESENT CLAIM, ACT OF JUNE 27, 1890.

Declaration filed *June 25, 1892*, alleges *Pensioned disabilities*
and heart disease, injury to right leg, disease of
kidneys and spine, injury to hip, back and shoulder,
sprained right ankle, & injury of right foot.

Blunt writes.

St. M. C.

State of Kentucky 3
County of Boone 3

On this 22nd day of June 1892
personally appeared before me a
Police Judge within and for
the County of Boone said William L. Hays
who being sworn says that he is a Quaker
under Certificate No 777.676 and make
this statement in explanation of the facts
and circumstances under which he received
the injuries claimed for in his application
as having been received respectively Decr
2^d and 22^d 1891

That on the 2^d day of Decr 1891 at
Glasgow junction Ky this Claimant mounted
his Mule to go out to look after some hands
working in a Corn field the mule became
frightened jumped with him and threw
him over its head on to the rock on the street
injuring his hip back and shoulder
That again on the 22^d day of Decr 1891
at Glasgow junction Ky while getting off of
his Mule he stepped on a rock which
rolled with him and threw him upon
the ground spraining his right ankle
and fracturing a bone in and otherwise
injuring his right foot - That these injuries
were received while attending to his legitimate
business in the effort to support himself



And finally that he weighs 247 lbs
and is stiffened from Rheumatism
excessive flesh and other injuries
to such an extent that he was in such
a case unable to protect himself from the
falls and injuries - that it was not
the result of any vicious habit or
negligence on his part

William L. Hozeloff

Witness & W. Hozeloff & Co

Sworn to before me by William L
Hozeloff June 22 1892 and I
Certify that I have no interest in his
claim

J M Duke D. G. H. B.

Certificate on file in Pension Office.

State of Kentucky
County of Barren

On the 22nd day of June 1892
personally appeared before me a
Police Judge in within and for
the County and State aforesaid William
L. Hazlett to me well known who being
Sworn Says that he is the identical person
who filed Application No 92278th under
act of June 27th 1890 for an Invalid
Pension, that a Certificate No 777.676 was
on the 7th day of June 1892 issued to him for
\$6 per month for "Rhumatism and Naso
Pharyngeal Catarrh" Ignoring his injuries
therein claimed for, to wit disease of heart,
injury to right leg, Muscular Rhumatism,
in the muscles of the neck and shoulders
disease of Kidneys, or weakness in back
and spine. He now asks that he be ordered
before the board of Examining Surgeons at
Elizabeth Town or Leitchfield Ky (neither
of which board is known to him but both
accessible by Rail Road) and that he
be thoroughly examined and voted on
these injuries and allowed a just
rating on same from date of filing original
application. That the board by which
he was examined had on it two Demo-
crats - not without prejudice to his claim



As he believes he believes that he did not
have a fair and impartial examination
and noting that he now be examined on
these as well as new disabilities alleged
in his application submitted herewith

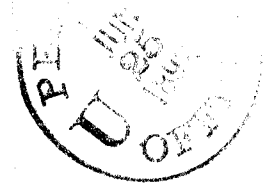
William L. Hazlip

Witness

R. L. Hazlip Jr

Subscribed and Sworn to before me
this 22nd day of June 1892 and I
Certify that I have no interest in said claim

Wm Duke Agt
Certificate on file in Pension Office



State of Kentucky
County of Barren }

on this the 15th day of June 1895
personally appeared before me a Police
Judge in & for the County and State
officesaid Robt. A. Sumner of Glasgow
Junction well known to me to be reputable
& entitled to full credit who being
duly sworn says that he resides in
the Town of Glasgow Junction Barren
County Ky. & that his Post Office is Glas-
gow Junction Ky. that he is well acquainted
with Wm. L. Hazelip who lives in said
Town & that he was present on the 22nd
of December 1891 in the Town of Glasgow Junction
when the said Wm. L. Hazelip while getting
off of his mule stepped on a rolling
rock which throwing him he being
very large & stiffened with Rheumatism
was unable to protect himself from the
fall by reason of the rolling of said
rock and in said fall his right ankle
was sprained a bone in his right foot
was said to be broken & seemed to
be considerably injured I can say
from my personal knowledge & belief
said injury to right foot & ankle
was not the result of any vicious habit

I know said Hazelip well and
know of no vicious habits by him
My knowledge of the above facts
are derived from living a neighbor
to said Hazelip & being present when
said accident happened & helping
to carry said Hazelip in his house
& seeing him when his foot & ankle
was sore at various times
and I further state the foregoing
testimony was all written by J. M. Dush
in my presence and only from my oral
statements here made at Glasgow
Ky. to J. M. Dush who reduced them to
writings in my presence and that in
making the same I did not use
any printed or written statements to
aid me in making same or was
prompted by any other person
and that I have no interest in
said claim and I further
state that W. L. Hazelip is still suffering
with his right foot & ankle or he
complains of the same all the time
this is ^{from} my observation I see him almost
daily & he is still lame in said leg & foot

Robert A. S. Dummer

Subscribed & sworn to before me
by Robert A. Dummer who is known to me to
reputable and entitled to belief and
I certify that I have no interest in
said claim

Robert A. Summery

Subscribed & sworn to before me
by Robert Summery who is known to me to
reputable and entitled to belief and
I certify that I have no interest in

Given under my hand as Police
Judge in & for the County & State aforesaid
this June 15th 1845

J. M. Smith P. S. J. B. C.

I have a certificate of official character
on file in Washington D.C.

J. M. Smith

ACT OF JUNE 27, 1890.

INVALID PENSION.

777696
Sourville

Claimant, William L. Hazelip
P. O., Glasgow Junction Rank, Private
County, Barren Company, E
State, Ky Regiment, 11th Ky Vol Inf
Rate, \$ _____, per month, commencing September 26 1890

Disabled by _____

RECOGNIZED ATTORNEY.

Name, _____ Fee, \$ _____ Agent to pay.
P. O., _____ Articles filed, _____, 189 _____

APPROVALS.

Submitted for Ad Oct 17, 1891, H. E. Warner, Examiner.
Resub ad May 16, 1892 H. E. Warner

Approved for Admission
and naso-pharyngeal
catarrh - no other
notable disability shown

H. H. Hough Shirley
Legal Reviewer. Medical Referee.
May 20th 1892. June 1, 1892

Adm. now pensioned under other laws. Last paid to _____, 18 _____, at \$ _____
Pensioned from _____, 18 _____, at \$ _____, for _____

SERVICE SHOWN BY RECORD.

Enlisted Sept 18, 1861, _____ honorably discharged Dec 16, 1864
Re-enlisted _____, 18 _____ honorably discharged _____, 18 _____

Declaration filed Sept 26, 1890, alleges permanent disability, not due to vicious habits,

from rheumatism, disease of heart, catarrh of head
disease of kidneys and spine & injury of right leg
Wrote None

State of Kentucky

County of Barren

On this the 13th day of June 1895 -
personally appeared before me J. M. Duke
a Police Judge in and for the County & State
aforesaid Dr W. S. Blakeman known
to me to be reputable & entitled to full
credit who being sworn says that
he resides in the County of Barren
and State of Kentucky and that his
post office address is Glasgow Junction
Ky. and that he is well acquainted
with Wm. L. Hazelip who lives said
Town that he was present in the said
Town of Glasgow Junction Ky. on December
22nd 1891 when said Hazelip while
getting off of his mule stepped on
a rock which rolled throwing him
he being very large and stiffened with
Rheumatism was unable to protect
himself from the fall by reason of the
rolling of said rock and in said
fall his right ankle was sprained
and a bone in right foot believed
to have been broken. From which his
right ankle & foot seemed to be badly
injured and is still in bad condition
and that I can say from my own
knowledge to the best of my

~~I~~ belief said injury to right
ankle and foot was not the result
of any vicious habit

I know said Hezelip well and
know of no vicious habits ~~for~~ him
and ~~and~~ further state that the foregoing
testimony ~~was~~ was all written in
my presence and was only from
our oral testimony here and was
made at Glasgow Junction Ky. to J. M. Dyer
who reduced the same to writing in
my presence and that in making same
I did not see and was not prompted
or aided by any written or printed
statement or recital prepared or dictated
by any other person and that ~~and~~ have
no interest in said claim

W. S. Blakeman, M.D.

Subscribed and sworn to before me
by Mr W. S. Blakeman well known
to me to be reputable and entitled
to belief and I certify that I am not
interested in said claim

Given under my hand this June 13th
1895
J M Dyer P. J. & J.

I have a certificate of official character
on file in pension office at Washington

WCC
J M Dyer P. J. & J.



DECLARATION FOR INVALID PENSION.

ACT OF JUNE, 27, 1890.

To be executed before a Court of Record or some Officer thereof having custody of its Seal, or a Notary Public, or a Justice of the Peace, whose Official Signature shall be verified by his own Official Seal, if he has one, or by the proper Clerk, under Seal.

State of Kentucky, County of Grayson, ss:

On this 24 day of September, A. D. one thousand eight hundred and ninety

personally appeared before me, a Notary Public

within and for the county and State aforesaid William L. Hazelip

aged 46 years, a resident of the Town of Glasgow Junction, county of

Barren, State of Kentucky, who, being duly sworn according to law,

declares that he is the identical William L. Hazelip who was enrolled on the

18th day of September, 1861, in Company "E" 11th

Regiment of Ky Light Vols Here state rank, company, and regiment in military service, or

vessel, if in the Navy.

in the service of the United States in the War of the Rebellion, and served at least ninety days, and was

honorably discharged at Bowling Green Ky, on the 16th

day of Dec, 1864. That he is unable to earn a support

by manual labor by reason of Rheumatism - Denial of the heart - Injury

to right leg muscular Rheumatism in the muscles of the

neck and shoulders - Catarrh of the head disease of

the kidneys or weakness in back and loins - weakness of spine

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief per-

manent; that he has applied for pension under application No. ; that he is a

pensioner under Certificate No. If a pensioner, the certificate number only need be given; if not, give the number of the former application, if one was made.

That he makes this declaration for the purpose of being placed on the pension-roll of the United States under

the provisions of the Act of June 27, 1890.

He hereby appoints, with full power of substitution and revocation, Himself

of Glasgow Junction

State of Kentucky, his own and lawful attorney to prosecute his claim, and to receive

therefor a fee of ten dollars, that his post-office address is Glasgow Junction

county of Barren, State of Kentucky

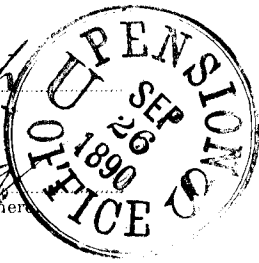
William L. Hazelip

Claimant's signature.

Attest: 1 R. L. Hazelip

2 G. L. Long

Two witnesses who can write signature.



Also personally appeared R. C. Hazelip, residing at Leitchfield
and G. W. Long, residing at Leitchfield Ky, persons whom I
certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and
saw Wm L. Hazelip, the claimant, sign his name (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 for 45 years and 35 years, respectively, that he is the identical
person he represents himself to be; and that they have no interest in the prosecution of this claim.

R. C. Hazelip
G. W. Long
Signatures of witnesses.

SWORN TO AND SUBSCRIBED before me this 24 day of September, A. D.

1890, 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
[L. S.] words.....erased and the words.....
.....added, and that I have no interest,
direct or indirect, in the prosecution of this claim.

Wm Hazelip
Signature.

My Commission Expires in 1894 Notary Public for Ky
Official character

NOTES.

The act of June 27, 1890, requires, in case of a soldier:

- (1) An honorable discharge (but the certificate need not be filed unless called for).
- (2) A minimum service of ninety days.
- (3) A permanent physical disability not due to vicious habits. (It need not have originated in the service.)
- (4) The rates under the act are graded from \$6 to \$12, proportioned to the degree of inability to earn a support, and are not affected by the rank held.
- (5) A pensioner under prior laws may apply under this one, or a pensioner under this one may apply under other laws, but he cannot draw more than one pension for the same period.

456676

ACT OF JUNE 27, 1890.

SOLDIER'S APPLICATION.

Name W. L. Hazelip

Service Co. B 11th

Regiment 1st Regt. W. Va.

Address Glasgow Junction

Barren County

Kentucky

No other claim

11-24-90 CWT

FILED BY

W. L. Hazelip (Claimant)

Glasgow Junction

Date of execution Sept 24 1890

Printed and sold by W. H. Moore & Co., Box 666, Washington, D. C.

Affidavit of Claimant

State of Kentucky County of Barren
In the Pension Claim of W. R. Hazlip
No. 922780. Came before me a Police Judge
in & for the aforesaid County W. R. Hazlip
Late of Co. E. 11th Ky. Vol. Infantry a
Corporal whom I believe to be a creditable
person & entitled to full faith & credit
disposes & says in answer to 2nd No.
2. Near Brownsville Ky. in the year 1869,
while plowing yoke of oxen near a poplar
tree the Plow caught in a root & broke
it & the end sprang back & struck him
in right leg near ankle & arm near head
ring same & disabled him for 12 months & was
under treatment of Drs J. B. Stevenson & J. G. Wilson
& it has never entirely recovered from said
injury. also Rheumatism Muscular Muscles
of Shoulder & neck Catarrh of the head &
heart disease & Measles while in the
army, was treated at Hospital in Cal.
hoon, Ky. disease of the Kidneys weakness
of Back & Loins & weakness of Spine
was discharged at Bowling Green Ky.
Dec. 16th 1864. & the above disease is
not the cause of Vicious Habits & he has
never applied for Pension before the 24th
day of Sep. 1870. his Post office address is Exlar-
gus Junction Ky.

W. R. Hazlip

Subscribed & Sworn to before me by W. R. Hazlip this 1st

1st day of January 1892
J M Dunn of Ky.



W. A. Stogdale
Pension Claim No 900,785
Filed in Ky. to call
No. 2.

MAY 4 287879 16 11

Write nothing above this line.

(3-060 a.)
MILITARY SERVICE.

NAME OF SOLDIER:

William L. Hazelips

Eastern Div. Bureau of Pensions,
Ex'r. *May 2*, 1891
No. *922780*
Invalid

SIR:

It is alleged that the above-named man enlisted
Sept. 18, 18*61*, and served as a *Private*
in Co. *E*, 11th Reg't *N.Y. Vol. Inf.*
also as a _____ in Co. _____, Reg't _____
and was discharged at
Boroling Green, Ky.
on *Dec. 16*, 18*64*.

No. of prior claim ☒

The War Department will please furnish an official statement
in this case, showing date of enrollment and date and mode of
termination of service.

Very respectfully,
Gen. B. Ramo
Commissioner.
THE OFFICER IN CHARGE OF THE
RECORD AND PENSION DIVISION,
WAR DEPARTMENT. 0-4

War Department,
Record and Pension Division,

MAY 4 1891

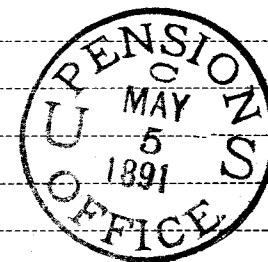
Respectfully returned to the

COMMISSIONER OF PENSIONS.

The rolls show that *William L. Hazelips*

mentioned in the preceding indorsement, was enrolled

Sept. 18, 1861, and *M.O. with*
Co. Dae, 16, 1864.



BY AUTHORITY OF THE SECRETARY OF WAR:

Per J. C. Amundson
Captain and Asst Surgeon, U. S. Army.

3855 b-50 m

ACT JUNE 27th, 1890

3-402.

Certificate No. 222625

Name, James Halsey

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., January 15, 1898.

SIR:

In forwarding to the pension agent the executed voucher for your next quarterly payment please favor me by returning this circular to him with replies to the questions enumerated below.

Very respectfully,

W. H. Evans

Commissioner of Pensions.

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer. Maria Flannigan

Second. When, where, and by whom were you married?

Answer. May 29th 1852 Albany N. Y. Rev. Mr. Corney

Third. What record of marriage exists?

Answer. Records of St Johns Catholic Church Albany N. Y.

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer. No.

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer. James A. Halsey born Albany N. Y. Oct 3^d 1855
William H. Halsey " " " " 15th 1857

Date of reply, , 189

James Halsey
RETURN TO
U. S. PENSION AGENCY,
MILWAUKEE, WIS.

5301b750m1-98

RECORD & PENSION OFFICE
NOV 26 1894
1120117
WAR DEPARTMENT

H. E. W.

3-464 aa.

Southern Division.

Department of the Interior,
BUREAU OF PENSIONS,

Washington, D. C. Nov 24, 1894.

*Respectfully referred to the Chief of the
Record and Pension Office, War Department,
requesting a full military and medical history*

(Descriptive list.)

of the soldier.

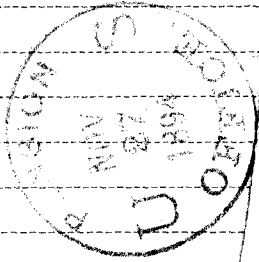
*Please examine all records likely to afford
any information as to diseases, wounds, or
injuries incurred by him while in the service.*

No other report on file.

676
Claim No. *777 676*
Name, *William J. Hazelip,*
Co. *E 11* Reg't. *Ky. Vol. Inf.*
Wm. Lehman
Commissioner.

The medical records show him treated as follows

No record found.



By AUTHORITY OF THE SECRETARY OF WAR:

J. A. Muir

Colonel, U. S. Army, Chief of Office

Per
J. M.

Washington, D. C.,

(COMMISSIONER OF PENSIONS.)

(280)

State of Kentucky
County of Grayson

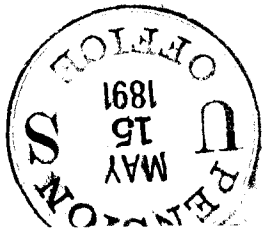
I R. L. Hazelip being sworn as the
law directs State that My Age is 53 years
that My Post Office address is Litchfield
Ky that I am personally well and
intimately acquainted with William
L. Hazelip who resides at Glasgow
junction Ky and who was during the
late war a Member of Company E
11th Regiment of Ky Light Vols and
have known him continuously from
Childhood and know that he has not
Served in the Military or Naval Service
of the United States since the date of
his discharge from said Organization
Decr 16th 1864 and that I have no
pecuniary interest in his Application
No 922,780 under act of June 27th 1890
for an Invented Machine

R. L. Hazelip
Late 1st Lieut Co B 35 Ky Vol

Witness Subscribed and Sworn to before
me by R. L. Hazelip May 8th 1891 and
I Certify that I have no interest in said
Claim

H. H. Hazelip
Notary Public for Grayson Co Ky

Orig In vol'd No 922780
W L Hozell
60 E 11th St Ky Lft
Proof of non Subsequent
Series



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.

Name and rank of claimant.

Claimant's post-office address.

Pension Claim No.

922780.

(State above whether for original, increase, or restoration.)

Rank,

William L. Hazeltine

pri

Company E, 11th Reg't

Vol. Inf. Glasgow Ky

State,

[Post-office address of the Board.]

Glasgow Kentucky

May 13

1891.

[Date of examination.]

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

Cause of disability.

in the service, viz: injury to right leg, rheumatism dis of heart, Catarrh & dis of back spine & kidneys

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

and that he receives a pension of \$15.90 dollars per month.

He makes the following statement upon which he bases his claim for

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

I claim a pension on account of an injury to my right leg, rheumatism dis of heart, Catarrh and dis of back spine and kidneys all of which I claim I contracted since the war. I claim I am totally disabled for manual labor.

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

Upon examination we find the following objective conditions: Pulse rate, 70; respiration, 19; temperature, 98; height, 6 feet 1 inches; weight, 245 pounds; age, 47 years. Heart sounds normal, indistinct but can be located as surface was slightly abraded only from scar to knee is swollen very hard no redness no discoloration. Has never ulcerated seems to be sound. He complains of great stiffness and soreness of both shoulder joints - might see others - he has such an enormous deposit of fat arms and shoulder joints so large a satisfactory examination cannot be made, but he seems to use his arms freely. Has been to Hot Springs, Ark. twice for treatment for rheumatism as far as we are able to determine heart acts regular uniform in rate and impulse. He is severely fat but his left thorax from heart to clavicle is perceptibly enlarged, he cannot raise left arm vertically on account of stiffness and soreness and over cervical vertebrae he complains of tenderness and a drawing sensation sometimes giving him a stiff neck. Lungs are normal over both chests. His throat is red elongated & very much enlarged under with right nasal cavity almost occluded. in fact naso-pharyngeal structure seems involved. He is, in our opinion, entitled to a

Rate for EACH cause of disability.

rating for the disability caused by injury to right leg, 4/8 for that caused by rheumatism, and 0 for that caused by

dis heart, 2/8 for Catarrh, 2/8 for lumbar, 0 for back & spine

0 for kidneys

W. J. Taylor, Pres. J. S. Lamb, Sec'y. H. H. Bennett, Treas.

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

producing fetid discharges from nose - no discharge from ears, but superabundant secretion of Cerumen. He complains of great tenderness over region of kidneys with swelling & stiffness of lumbar region under arms healthy. There is no evidence whatever of disease of spine except pain and tenderness over region of kidneys or lumbar vertebrae as above described habits good

Acid 1/2.

"No other disfigurement to exist"



SURGEON'S CERTIFICATE

IN CASE OF
William J. Hazelip
Co. E 11th Reg'ty Vol. Infy

Applicant for Surgical

No. 922780

DATE OF EXAMINATION:
May 13, 1891.

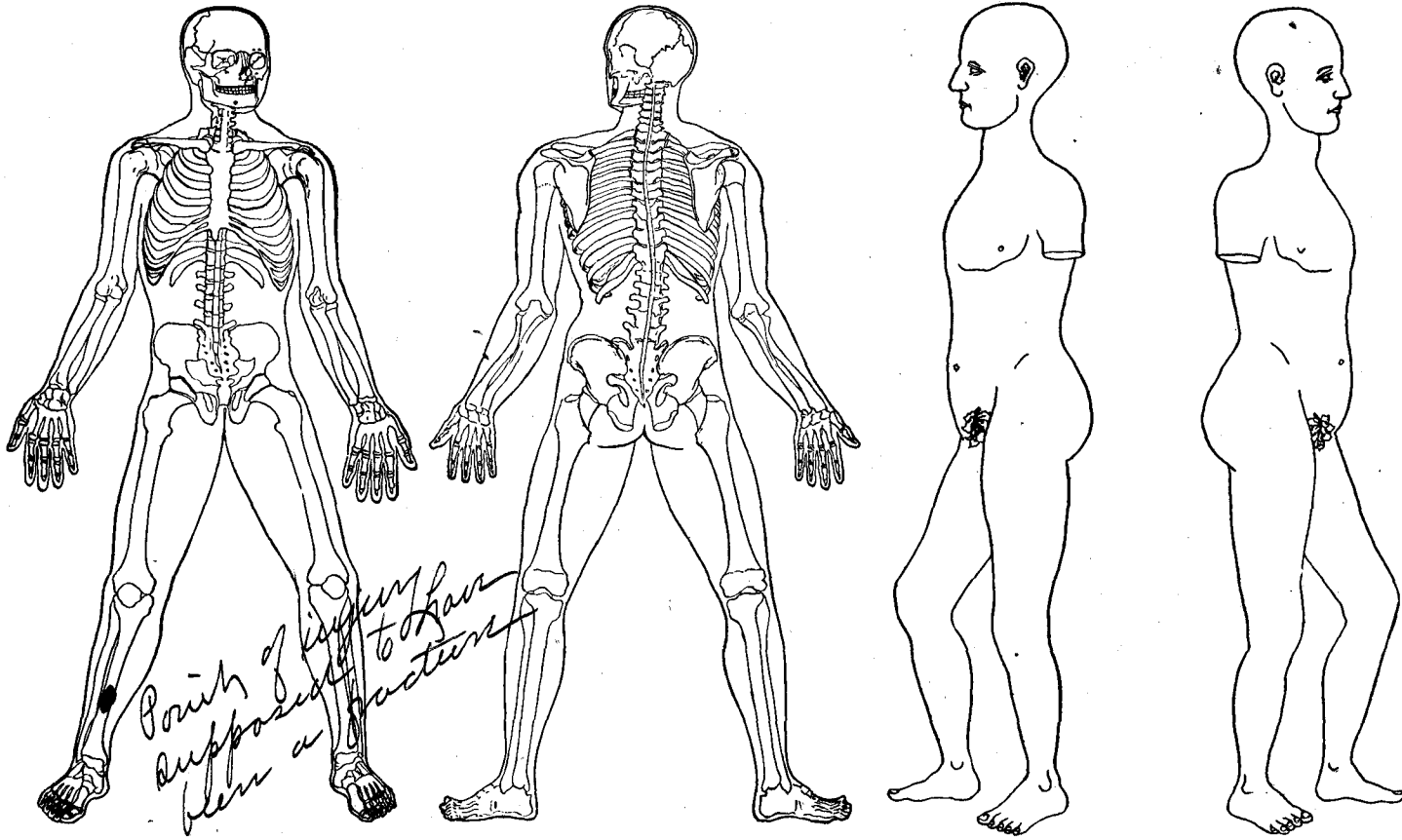
W. J. Hazelip, Pres.,
J. J. Leach, Sec'y,
E. H. Greenwood, Treas.,

BOARD.

Post office, Glasgow
County, Barren
State, Kentucky

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

Acid



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.]

Test

3-106.

Department of the Interior,

RA

BUREAU OF PENSIONS,

Jan. 12, 1895

Nature of Claim: Act of June 27, 1890.

No. Cert. *477676*

Soldier: *William L. Hazelip*

Service: *E. 11" Reg. Vol. Inf.*

It is desired in this case that the examination be made with special reference to—

*rheumatism,
disease of heart,
catarrh; disease of
kidneys, spine, and
injury to right leg.
injury to back and right shoulder
and sprained right ankle and*

This is a test examination to determine whether soldier is incapacitated for earning his support by manual labor, by reason of alleged or other permanent disabilities not due to vicious habits. Please report occupation, exact age, height, weight, state of nutrition and muscular development, condition of palms and general physical appearance. Note in what manner and from what causes he is disabled, being careful to describe clearly the seat, character, and extent of all lesions found, in accordance with general instructions of 1893, and in a way that will enable this Bureau to determine the degree of his inability to earn a support.

Compliance with Pars. 6, 12, and 101, Instructions of 1893, is required in every case.

*There is a record of
syphilis. Please report
fully in compliance
with Par. 101.*

J. L.

THOS. FEATHERSTONHAUGH,

Medical Referee.

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

14352 b-50 m

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. Increase Pension Claim No. 777676
[State above whether for original, increase, or restoration.]
 Name and rank of claimant. William L. Hazelup, Rank, Priv
 Company E, 11th Reg't Ky Infy | Glasgow Kentucky State,
[Post-office address of the Board.]
 Claimant's post-office address. Glasgow Junction Ky | March 27th, 1895.
[Date of examination.]

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

Cause of disability. in the service, viz: Rheumatism disease of Heart. Catarrh
dis of Kidneys & Spine and injury to right leg - injury to
back and right shoulder & sprained ankle & foot
 and that he receives a pension of \$6.00 dollars per month.

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

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

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

I claim increase of Pension because my present
disabilities have increased viz Rheumatism & heart-
disease, Catarrh disease of Kidneys & Spine & injury
to right leg; injury to back & left shoulder &
sprained right ankle and foot. I claim to be
almost totally disabled for manual labor

Upon examination we find the following objective conditions: Pulse rate, 68-79; Standing
 respiration, 19; temperature, 98 $\frac{1}{4}$; height, 6 feet 1 inches; weight, 245
 pounds; age, 36 years.

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

Rheumatism - This man is a sufferer
from Chronic Rheumatism affecting him generally
but especially left Shoulder - complains of
general stiffness & soreness and his movements
indicate the same. There are at present no objective
signs but we are fully persuaded that Soldier
is effected with the disease above stated.

Heart disease - aware of dullness
and apex beat normal - force & rhythm normal.
No cardiac abnormality found to exist

No disease of Lungs found

Catarrh - we find some evidences of
Catarrh in "scabby crusts" in nasal passages
claimant says he blows them out quite frequently
sometimes mixed with streaks of blood. complains
frequently with frontal headache which he attributes to
Catarrhal trouble. we discover no evidences of
Syphilis complying with Par No 10.

Disease of "Kidney and Spine is a
misnomer being purely Rheumatic (Lumbago).
The pain in the lumbar region being the only
symptom of which Soldier complains. Chemical
analysis shows no abnormality of urine.

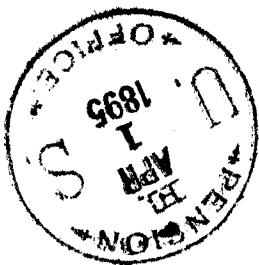
We discover no injury of Shoulder or leg
But there are slight evidences of a sprain

W. J. Taylor, Pres. H. J. Taylor, Sec'y. W. J. Shipley, Treas.

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

or injury of right ankle & foot: one member of this Board Dr Shipley attended claimant at time of injury and says that it was quite a serious injury of ankle - no dislocation but a strain - claimant has a slight limp in right leg in walking, which we decide is result of said strain -

This man's occupation is a Merchant is of unusual height and weight - state of nutrition and muscular development is good and his general appearance would indicate good health - but we decide that he is $\frac{2}{3}$ disabled on account of rheumatism & injury of right ankle. Other disabilities found - habits good



SURGEON'S CERTIFICATE

IN CASE OF

William C. Hazeltine

Co. E, 11th Reg't Ky Infy

Applicant for Increase

No. 777676

DATE OF EXAMINATION:

March 27th, 1895.

J. J. Taylor, Pres.,
S. J. Taylor, Sec'y,
W. C. Shipley, Treas.,

BOARD.

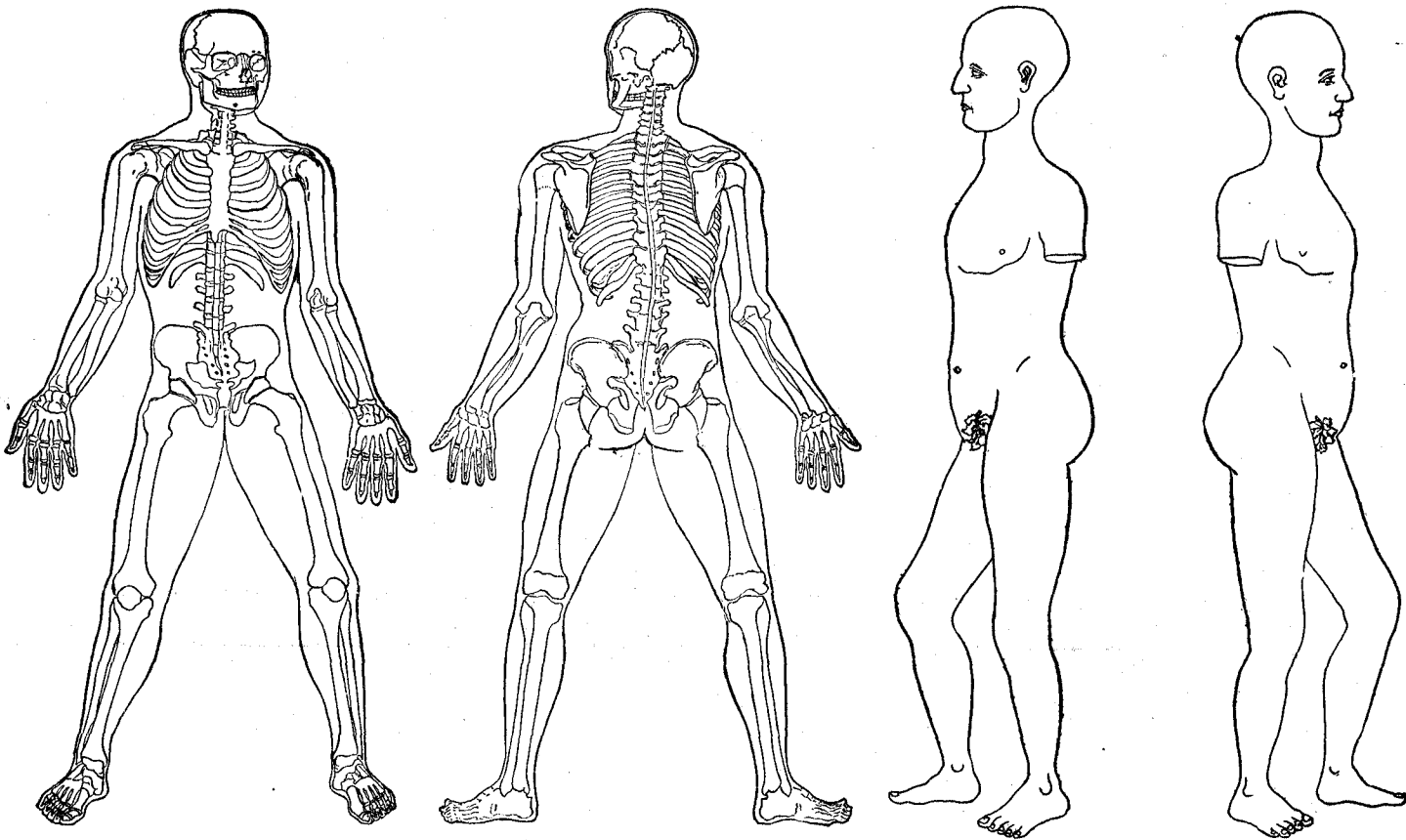
Post office, Glasgow

County, Warren

State, Kentucky

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

Melan



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.]

SURGEON'S CERTIFICATE.

Insert character and number of claim.

Name of claimant.

Claimant's post-office address.

Names of disabilities.

Pension Claim No.

Address of Board.

P. O. State.

[Date of examination.]

He receives a pension of 6 dollars per month.

Here give the claimant's statement (as briefly and as compactly as possible) in regard to the date of origin and cause of his disabilities and the manner in which they affect him.

He makes the following statement in regard to the origin of his disabilities and date when first discovered by him: Rheumatism 30 yrs Cataract
since service - in heart 15 or 20 yrs

Birthplace, Edmonton Co Ky; age, 61 years; height, 6-1 1/2 weight, 234 pounds; complexion, Fair; color of eyes, Blue; color of hair, Light Grey; occupation, none; permanent marks and scars other than those described below,

We hereby certify that upon examination we find the following objective conditions:

Pulse rate, 60-64-72; respiration, 18-18-21; temperature, 98 4/5;
 [Sitting, standing, after exercise.] [Sitting, standing, after exercise.]

Here give a full description of the disabilities, in accordance with Book of instructions, and make a separate paragraph for each disability.

Rheumatism history of acute. Has lumbago motion limited by pain no atrophy of muscles. There is left sciatica tenderness on pressure over noted, along course of nerve. Left arm is lifted above horizontal with difficulty. Due to pain. other wise muscles joints and tendons normal. Heart apex dull not visible sound force & rhythm normal no hypertrophy dilatation cedema or dyspnea

Facts within the knowledge of the Board, or any member thereof, relative to the cause of any disability found should be stated.

Cataract nasopharyngeal of more than moderate degree tonsils inflamed & enlarged. Nares much inflamed & also pharynx. No loss of structure. There is partial occlusion of eustachian tubes. R. hearing equals ordinary conversation at 3 feet not at 6 ft. Left equals ordinary at 3 ft not at 6 ft.

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.

Indigestion Tongue coated. skin sallow. Liver and spleen normal. Loss of all molar teeth - nutrition good. stomach distended and painful on pressure. He is constipated

Lungs Chest symet. 41-44 Cough expectoration free to catarrh. no rales - adhesion & consolidation cedema or dyspnea

Urine amber acid elev 1020 no albumen or sugar

We find aggregate permanent inability to earn his support by manual labor due to age - rheumatism cataract - deafness - indigestion & nervous rating of 810 per month no evidence vicious habits

When rates are recommended solely on subjective evidence the strongest reasons must be given therefor.

H. H. Duke, Pres. W. M. Shaubert, Sec'y. W. H. Brown, Treas.

An examination must not be made by one member of a board except upon a special order of the Commissioner of Pensions.

(This certificate to be filled in and signed by the secretary when the full board is present.)

"I hereby certify that Dr. W. H. Duke, Dr. Geo M Shaukey, and Dr. W M Thompson, were personally present and actually participated in the examination of William L Hazelrigg, the claimant in this case, on 27 day of June, 1906 (Signature.) Geo M Shaukey

(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.)

"I, _____, the applicant for (increase or original) pension referred to in this medical certificate, hereby consent to be examined by Dr. _____ and Dr. _____, the examining surgeons here present (waiving examination by full board), on this _____ day of _____, 1906."

Witnesses to mark. { _____ (Signature of Applicant.) _____

SURGEON'S CERTIFICATE

IN CASE OF

William L Hazelrigg

Co. E, 11 Reg't 4th Inf

APPLICANT FOR Inc

No. 277676

DATE OF EXAMINATION:

June 27, 1906

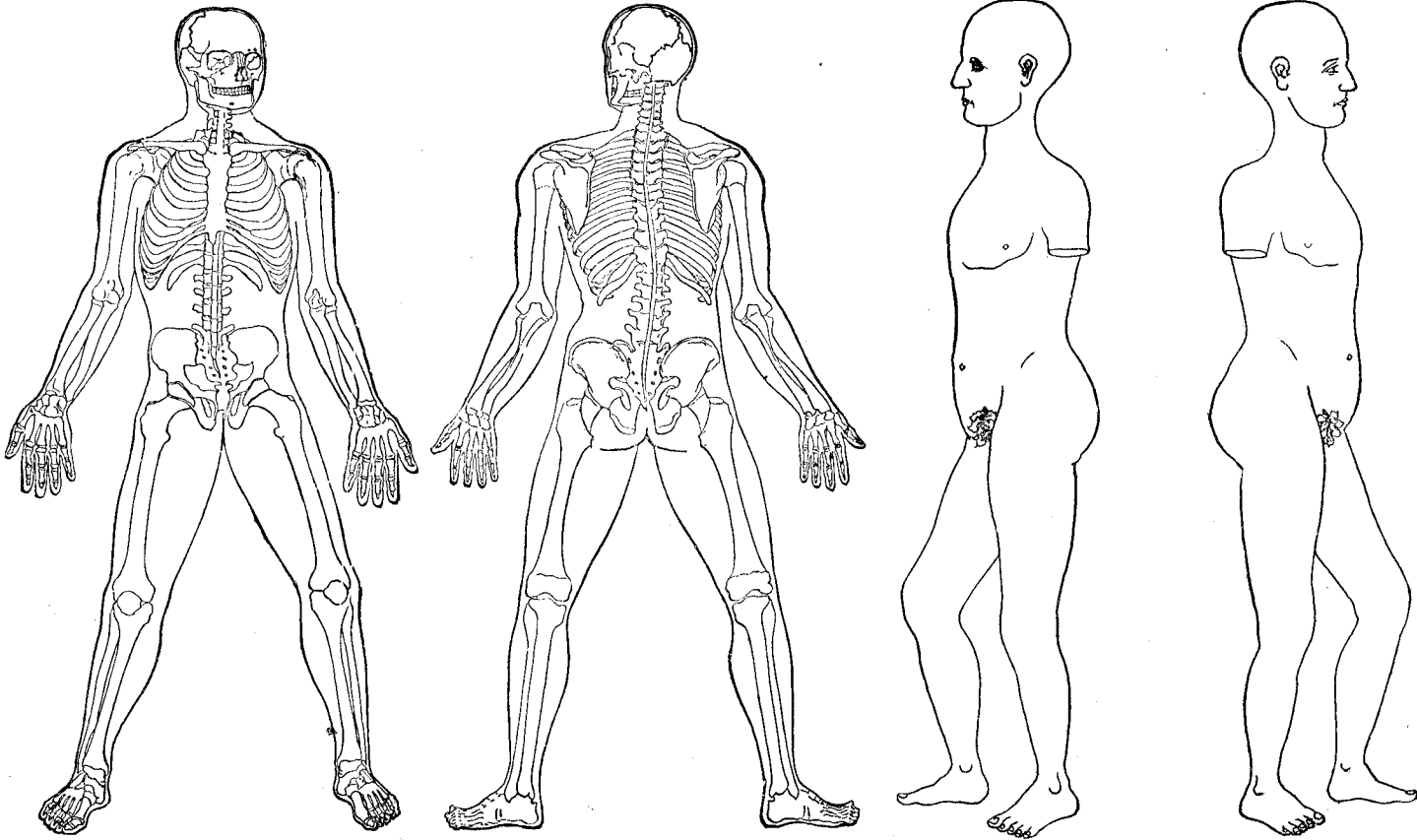
W H Duke, Pres.,
Geo M Shaukey, Sec'y,
W M Thompson, Treas.,
BOARD.

Post office, Louisville

County, Jefferson

State, Kentucky

Do not use backs of certificates for any purpose other than indicated by printed matter thereon. 6-532a



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

(Paste continuation sheet, if used, here.)

SURGEONS PARTICIPATING IN THE EXAMINATION MUST PERSONALLY SIGN THIS REPORT.

AN EXAMINATION MUST NOT BE MADE BY ONE MEMBER OF A BOARD EXCEPT UPON A SPECIAL ORDER OF THE COMMISSIONER OF PENSIONS

(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.)

"I, _____, the applicant for (increase or original) pension referred to in this medical certificate, hereby consent to be examined by Dr. _____ and Dr. _____, the examining surgeons here present (waiving examination by full board), on this _____ day of _____, 19 ____."

Witnesses to mark. _____ (Signature of Applicant.) _____

CERTIFICATE OF MEDICAL EXAMINATION

IN CASE OF Mr. William L. Hargis

Co. 11 Regt

APPLICANT FOR Increase

July 17, 1925

DATE OF EXAMINATION:

Pres., Sec'y, Treas.,

BOARD.

Post office Franklin

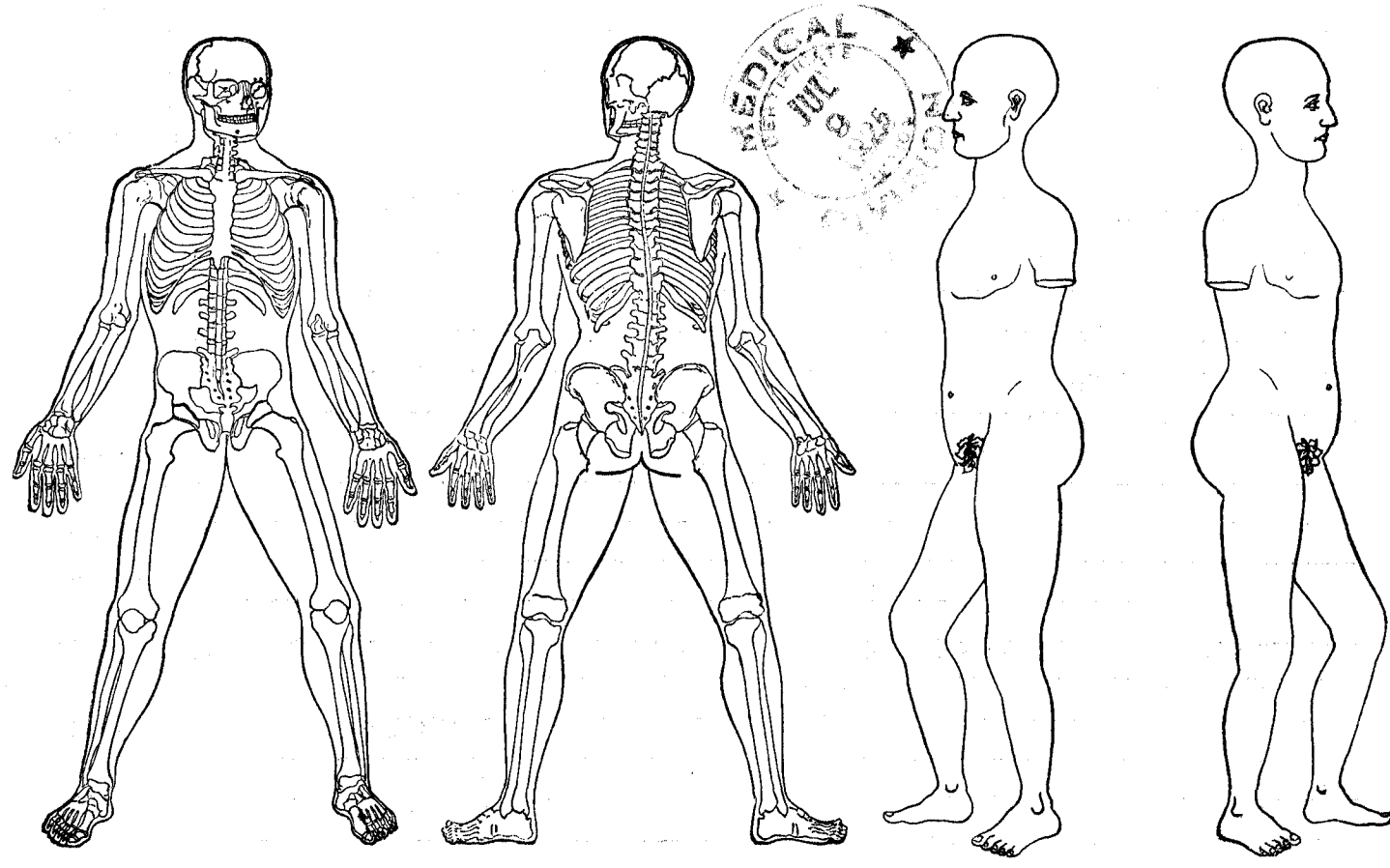
County Jefferson

State Kentucky

Do not use back of this form for any purpose other than indicated by the instructions on the back. G-552a

JUL 28 1924

RECEIVED



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

(Paste continuation sheet, if used, here.)

Certificate No. 777676

Name, *Wm. L. Hazelip*

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., January 15, 1898.

SIR:

In forwarding to the pension agent the executed voucher for your next quarterly payment please favor me by returning this circular to him with replies to the questions enumerated below.

Very respectfully,



Commissioner.

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer. *I am married Elizabeth Francis Hazelip, Clark*

Second. When, where, and by whom were you married?

Answer. *in 1865 - at Brownsville, Ky. By James L. Clark*

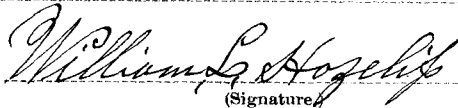
Third. What record of marriage exists?

Answer. *I cannot tell the License was delivered to the clerk*

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer. *I was not*

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer. *I have no children living 2 dead*Date of reply, *May 4th*, 1898


(Signature)

0-8

5301b750m1-98

DECLARATION FOR PENSION

Act of May 1, 1920

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION

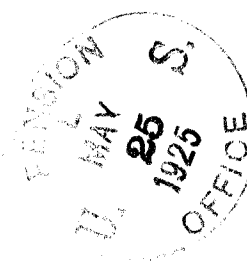
READ CAREFULLY THE INSTRUCTIONS ON THE REVERSE HEREOF

State of Kentucky, County of Edmonson, ss:On this 21st day of May, 1925, before me, the undersigned, personally appeared William L. Hazelip, who makes the following declaration as an application for pension under the provisions of the act of Congress approved May 1, 1920:That he is Eighty years of age; that he was born June 6th A.D. 1844 at Brownsville, Edmonson County, KentuckyThat he is the identical William L. Hazelip whoENLISTED September 18, 1861, at Brownsville, Kentucky, under the name of William L. Hazelip, in Company E, "Eleventh Ky. Infantry" (Here state company and regiment, if in the Army; or vessel, if in the Navy.) and was honorablyDISCHARGED December 23, 1865, at Bowling Green, Kentucky served the United States in the Civil War.That he also served None (Here give a complete statement of all other military or naval service, if any, at whatever time rendered.)That otherwise than herein stated he was Not employed in the United States military or naval service.That his personal description at time of first enlistment was as follows: Height _____ feet _____ inches; complexion Light color of eyes Blue; color of hair Light; that his occupation was FarmerThat since leaving the service he has resided at Brownsville, Ky, and Louisville Kyand his occupation has been Farmer, Merchant, Member Legislature, Justice of Peace, Louisville Ky, Bailiff Federal Court, St. Louis, State Day LaborerThat he requires the regular personal aid and attendance of another person and has required such aid and attendance since 1921on account of the following disabilities: High blood pressure, Stomach and bowel trouble (State in this space the nature of any and all disabilities.)That he Did Not serve in the Army, Navy, or Marine Corps of the United States between April 6, 1917, and February 9, 1922, or at any time during said period.That No member of his family served in the Army, Navy, or Marine Corps of the United States between April 6, 1917, and February 9, 1922, or at any time during said period.

(If any members of claimant's family were in the military or naval service during the period mentioned, state the full name under which each such member served, with the designation of the organization in (or vessel on) which such service was rendered, together with the dates of enlistment and discharge. State also whether any such members are dead and, if so, give the names.)

That he has applied for pension under Original No. _____; that he is Now a pensioner under Certificate No. 777676(1) Pleas Sanders (Signature of first witness.) William L. Hazelip (Claimant's signature in full.)Brownsville Ky (Address of first witness.) General Delivery, Louisville Ky (Claimant's address in full.)(2) Leonard Lindsey (Signature of second witness.)Brownsville Ky (Address of second witness.)Subscribed and sworn to before me this 21st day of May, 1925, 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 _____figures 777676 erased, and the words 777676 added; and that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]



Declaration accepted
as a claim under Sec.
2, act of May 1, 1920.
Chief, Law Div.

Pleas Sanders (Signature.)
Clk Edmonson Co Court (Official character.)
Brownsville Ky (Post office address of officer.)

CLAIMANT SHOULD ANSWER FULLY THE QUESTIONS ON THE BACK OF THIS DECLARATION.

BE SURE TO STATE THE DATE FROM WHICH REGULAR AID AND ATTENDANCE HAS BEEN REQUIRED.

Claimant should answer fully the following:

No. 1. Are you a married man? If so, state your wife's full name and her maiden name. Answer: No. Widower
Wife dead

No. 2. When, where, and by whom were you married to your present wife? Answer: Brownsville Tx
James Lock, Mch 23 1865

No. 3. What record of your marriage to her exists? Answer: County Court Record
Edmonson County

No. 4. Were you previously married? Answer: No If so, state the name of your former wife or wives, the date of your marriage to each, and the date and place of death or divorce of each former wife. Answer: _____

No. 5. Have you any children under 16 years of age living? If so, state their names and the dates of their birth. Answer: _____
I have no living children or grand children

William L. Hazelip
(Signature of claimant.)

Under the law a person may not receive pension from the Bureau of Pensions and compensation or vocational training pay through the United States Veterans' Bureau covering the same period of time. That part of the declaration referring to service between April 6, 1917, and February 9, 1922, should show whether the claimant or any member of his family rendered any service in the Army, Navy, or Marine Corps of the United States during said period, and if so, the full name under which such member served should be stated, together with the designation of the organization in (or the vessel on) which such service was rendered, with dates of enlistment and discharge. The term "family" includes: Child, legally adopted child, stepchild, father, mother, stepfather, stepmother, father and mother through adoption, and person who has stood in place of parent for a period of not less than one year prior to induction into service. ~~Compliance with these instructions will expedite the adjudication of the claim.~~

READ CAREFULLY.

If the applicant claims that, by reason of age and physical or mental disabilities, he is helpless or blind, or so nearly helpless or blind as to require the regular personal aid and attendance of another person, he should file with his application: The sworn statement of the attending or family physician, describing the disabilities which require the regular personal aid and attendance of another person, and giving the date from which such aid and attendance has been required; or, if the claimant is unable to procure such statement—The sworn statement of the claimant's attendant showing the character and frequency of the aid and attendance required, and from what date; whether the claimant is confined to the house or to his bed and, if so, whether for the whole or only a portion of the time; and the relationship existing between the attendant and the claimant.

INSTRUCTIONS.

Section 2 reads as follows: That every person who served ninety days or more in the Army, Navy, or Marine Corps of the United States during the Civil War, and who has been honorably discharged therefrom, or is now upon the pension rolls as a Civil War veteran, and every person who served sixty days or more in the War with Mexico, or on the coasts or frontier thereof, or en route thereto, during the war with that nation and was honorably discharged therefrom, and who is now, or hereafter may become, by reason of age and physical or mental disabilities, helpless or blind, or so nearly helpless or blind as to require the regular personal aid and attendance of another person, shall be entitled to and shall be paid a pension at the rate of \$72 per month.

Act Approved May 1, 1920.

3-026

Act Approved May 1, 1920.

Declaration for Pension.

Number.....

Claimant.....

Service.....

This form is only to be used by or in behalf of one who desires to claim original pension or under section 2 of the act of May 1, 1920, because he requires the regular personal aid and attendance of another person.

The declaration and testimony in support thereof should be executed before some officer authorized to administer oaths for general purposes.

GOVERNMENT PRINTING OFFICE

6-0172

State of Kentucky,

County of Edmensen...Sct.

I, Pleas Sanders, Clerk of the Edmensen County Court, do certify that the records of the Adjutant General's Report now on file in my office indicate the service record of William L. Hazelip a Veteran of the Civil War to be as follows:-

Rank: Corporal

Enlisted: Sept. 18th. 1861.

Re-enlisted Dec. 9th. 1861.

Place: Calheun, Ky.

Mustered out Dec 16th. 1864

At: Bowling Green, Ky.

S. O. 777,676 Ch.

Re 11 Ky. Inf

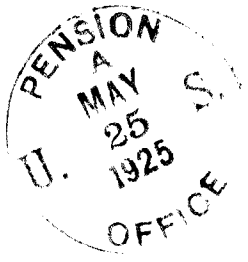
This certification is made from personal knowledge in order to correct the date of discharge as placed by Mr. Hazelip on his application for a raise in pension.

Mr. Hazelip is a man of advanced age and infirm which is the cause of the incorrect date of discharge given on his application. Mr Hazelip enlisted from the County and also returned to this County upon discharge from the Army.

The record from which the above enlistment record is taken is the Adjutant General's Report filed in my office.

The former application filed by Mr. William L. Hazelip was made by the applicant from personal memory and this is taken from the record. Mr, Hazelip was born in this County and lived here many years.

Attest: Pleas Sanders Clerk
Edmensen County Court



Med. Div. Co. June 12-25

STATE OF KENTUCKY

COUNTY OF JEFFERSON.

In Claim Inv. Ctf . No. 777,676 of William L. Hazelip
Co-E, 11th Kentucky Inf. (Civil War) Act of May 1, 1920
Section 2.

TO THE VOTERS OF FOURTH MAGISTERIAL DISTRICT OF JEFFERSON COUNTY,
KENTUCKY:

I am a candidate for Magistrate in this District. The office is not in a partisan sense, but under our system of voting all candidates must appear under some device. Being a Republican, I asked to be placed under their device, and was accorded the nomination without a primary contest.

I have held quite a number of offices. I was in the Legislature several times, and in my second race my first competitor called the whole people of the County together, and I was given the nomination. I was Steward of the Lakeland Asylum four years, and saved the State Seventy-five Thousand Dollars, according to the State Inspector. I had the ice and cold storage plant built. I saved thousands of dollars on five years fire insurance, besides large sums on coal and many other things, and in the management of the farm, dairy, and remodeling and building wards for patients, and many other improvements. I was U. S. Marshall for a number of years.

In 1911, while living in Oakdale, the people came to me daily, pleading with me to lead a campaign against the ring that had been in control for some nine years, collecting from the people seventy-five cents on the hundred dollars worth of property, giving the people nothing in return; the people having to send their children to the city to school paying tuition and carfare, which many poor people were not able to do. We put up a Citizens Ticket and cleaned them out, and in nine months had erected a school building and had about two hundred and fifty children going to school, the building did not cost the people a dollar- it was built with the tax money due the District by the Southern Pacific Railroad

I was reared on a farm and followed that occupation for a number of years. In my training and education my sympathies are, and always have been, with the farmer and the laboring people, having belonged to that class.

I served over three years in the Civil War for the preservation of the Union and in defense of the flag given us by our forefathers, and for which hundreds of thousands of our boys are now going to war to defend. My manner of life may be learned from those who have known me best. I could refer you to many business men in Louisville who have known me for many years.

I shall not be able to see all the voters before the election, and therefore, take this method of soliciting your support. Promises depend for their value upon the character and integrity of the man making them.

I promise to know no man in discharging my official duties. The humblest and most inexperienced shall have the same measure of justice as the rich and the learned. Equal and exact justice between man and man shall be the guiding principle of my decisions.

Soliciting your vote and active assistance, and with assurance of

RECEIVED
JUN 1 1920
JUN 1 1920
JUN 1 1920

#2

my hearty appreciateion, I am,

Very truly yours,

W. L. HAZELIP.

And from these statements, I was elected to the office of Magistrate in 1917, which office I filled during a time of four years and over.

Personally appeared before me Notary Public in and for said County and State, William L. Hazelip, applicant who being duly sworn in relation to the aforesaid claim, deposes and says:-

That the close confinement and hard work in this office of Magistrate brought upon me the troubles from which I am now suffering, high blood pressure, bowel and stomach trouble and other ailments, beginning between April 12, and 15th 1921.

During my term in office I worked night and day, many cases being appealed to the Quarterly and Circuit Courts of the County. I briefed all such appeals, stating the facts as introduced before me, citing the law governing such cases and was never reversed in a single one during my four years in this office. This is a record that has never been made by any other magistrate in Jefferson County.

After these dates I was confined to my room a great part of the time and my wife and her housewoman attended me from then to December 3, 1922, at which later time my wife had a fall, broke a thigh and was confined in Norton's Infirmary and tho treated by three or four of the leading physicians in this City, she died on December 15, 1922.

At her burial I was not allowed to get out of the carriage, my condition being such that my physician did not deem it safe for me to do so.

I had various ones of my friends and kin folks to attend me from the date of my wife's injury until July, 1923 when I was married to Sarah Hester Tatum, under a promise that she would nurse and take care of me for which I was to pay her or give her fifty dollars on the first of each month. This I did but on the 3rd of December 1923 she refused longer to attend me and sued for and later secured a divorce. I was then compelled to look to someone else for care and nursing. Soon after this separation I went to Florida in charge of a nurse, Walter Hazelip who stayed with me nursing me and preparing my food from that time until May 1st 1924 when I returned to Louisville, Kentucky. After arriving in Louisville Mrs. Blue and her housegirl at 956 South Fourth Street attended me until about July 1, 1924 when I went to Indian River Michigan seeking health. While there I was attended by various persons as I could get them.

I have not been financially able to hire a trained nurse to be with me constantly since my present afflictions, have made such care a necessity, so have had to accept a great of deal of attention given me gratis by my friends and relatives.

About September 1, 1924 I returned to Louisville Kentucky and soon after my niece Mrs. Bealmear came to Louisville and looked after me for quite a while, nursing me and accompanying me when I was able to go out, She being a trained nurse. Since then she has often given me a great deal of attention. Mr. Zach Hazelip has also attened on me taking me out to

his home where I spent some time. Then he brought me home and spent some time with me there.

I left Louisville Kentucky again on December 23, 1924 for Tampa Florida. I was there located with a Mrs. Blackburn who waited on me and nursed me until the date I left there, arriving in Louisville the last of April, or first of May, 1925. On my arrival I stopped at Mrs. Burton's 952 South Fourth Street who from then until present time has had me in charge and attended me continuously.

During all of the time covered by this affidavit my niece Mrs. Bealmear has made regular trips to visit me and look after me and recently took me with her to my half-sister, her mother- Mary Holman Dunn, at Brownsville, Kentucky, both going to and returning from Brownsville, to Louisville Mrs. Bealmear and her husband looked after and cared for me.

Since 1921 I have been able to do no labor of any kind and to attend to but little business.

I am unable to supply the affidavits of numerous persons named herein as having attended me during the past four years for the reason that they have moved away and I am ignorant of their present whereabouts.

My post office address is 952 South Fourth Street, Louisville, Kentucky.

William L. Hazelip

Subscribed and sworn to before me this 23rd day of June, 1925, and I certify that the contents of the foregoing affidavit were fully made known and explained to affiant before execution and that I have no interest direct or indirectly, in the prosecution of this claim.

Mary Rakestraw.
N. P. J. C. KY.

Invalid Division

Inv. Certificate No
777696

claim of

William L. Hoyle

E-11th Ky Inf.

Civil War

Section 2, Act of

May 1 - 1920.

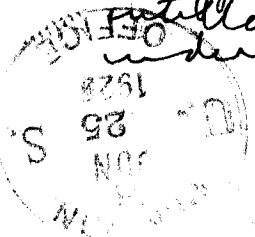
State of Kentucky, County of Jefferson, SS:
In Claim No. 677, 676 of Wm. D. Hazlip & 11 Ky
Inf. Civil War, § 2. Act of May 1, 1920.

Personally appeared before me a Notary Public in
and for said County and State Walter M. Hazlip aged
49 years, whose residence & P. O. address is 515-E Jefferson
St. Louisville, Ky. - who being duly sworn in relation
to the above said claim, Deposes and says:-

That he is a cousin of the pensioner above named, and such
has known him all his life and states of his own personal obser-
vation and knowledge has required regular attention and watching
by another person since the last of 1921 - and between that
time and Dec 1-1923 affiant saw the pensioner on an average
of once a month and observed his condition during that time or
at least part of that time his wife was living and performed
such acts of nursing as he needed and after her death various
persons looked after him until about Dec 1-1922, affiant
went to her with the pensioner and stayed during that month &
then near the last of the month took the pensioner to Euclid Fla.
where they remained and at New Orleans La. till they returned to Lou-
isville, Ky. the latter part of April 1924. since which date he has
seen pensioner from time to time and his condition of helplessness
has seemed about the same. That between Dec 1-1923 and May
1-1924 pensioner's condition was that of almost total helplessness.
affiant had to be with him all the time wherever he went. He would
tumble down any where that one of his dizzy spells came on. He com-
plained of high blood-pressure and stomach & bowel trouble.
That affiant had to give him enemas ^{3 or 5 times per week}, watch him and assist him in
going up and down stairs when at home, had to see that he was not
run down by traffic in traversing or crossing streets. That he had
to bathe him and massage him. That pensioner was confined to
his home all during month of Dec-1923. and about 2/3 of the time in
Florida. That in summer of 1924, to get away from the heat here, pen-
sioner went to Mich. for the summer, where he had friends who
could give him the attention he needed.

That affiant knows the facts stated by reason of his personal ob-
servation of the pensioner and by having himself performed the
acts of nursing stated. W. D. Hazlip

Subscribed and sworn to before me this 18 day of
June 1925 and I certify that the contents of the foregoing
deposition were fully read - known and explained
to affiant before executing them he is reputable and
entitled to credit and that I have no interest, direct or
indirect in the proceedings of this claim.



W. D. Hazlip Notary Public
in and for Jefferson County, Kentucky.

Invalid Division
Inv. Certificate No
777 676

Claim of
William L Hazeligo
E 11th Ky Inf
Section 2, Act
of May 1-1920.

State of Kentucky, County of Jefferson, S.S.:

In Claim Inv. Ct. - No 777,276 of Wm L. Hazlip Les' E.
11 - Ky. Inf. Civil War 25 Act of Mar 1-1920 -

Personally appeared before me a Notary Public in and for said county and State, Inez Bealmeat, aged 43 years, whose residence and P.O. address is No. 114 - Belmont St Frankfort, Ky, who being duly sworn in relation to the afore-said claim deposes and says: - That she is a graduate nurse of the Lakeside Ky - hospital and is the pensioners niece. That she has been in close touch with pensioner all the time, except the periods during which he has been absent from Louisville, Ky ever since his break-down in Dec-1921 and has stayed with him part of the time he was ill here both before and after the death of his wife in 1922. That ever since he has required the regular aid and attendance of another person and the duties required of the attendant forced her to be described as general nursing. The physician called his principal trouble high blood pressure - but he seemed to her a general break-down. That he has had frequent dizzy or fainting spells. That never at any time since Dec-1921, has it been safe for the pensioner to be left alone and constant care and watching has been necessary. That neither he nor any one else can tell when these attacks are impending.

That he has been frequently confined to the house during that time, at periods for a month at a time and more or less each month while he has been in Louisville.

Ky. - That she knows the facts stated by reason of her constant association with the pensioner and by having stayed with and visited him frequently all during the time covered by this affidavit. That she has no interest in this claim.

Inez Bealmeat.

Subscribed and sworn to before me this 18th day of June 1925 and I certify that the contents of the foregoing affidavit were fully read known and explained to affiant before execution and that I believe she is reputable and entitled to credit and that I have no interest, direct or indirect, in the prosecution of this claim.

W. A. Dwyer Notary Public,
in and for Jefferson County, Kentucky.

FILED
JUN 20 1925
JEFFERSON COUNTY, KY.

Invalid Division
Inv. Certificate no
777676

claim of
William L Hazelip
E 11th Ky Inf.
Civil War
Section 2, Act of
May 1 - 1920.

INVALID.

ENG

Cert. No.

777,676

Name,

William L. Hagelip

Rank,

Pvt. & Capt. Co. "E" 11

Ky Inf

Agency

or

Group No.

Original Roll:

Louisville

Transf'd

1

to

"

1

to

Issued

Aug. 7, 1914

Rate, \$

25

from

June 6, 1914

30

from

June 6, 1919

Deductions:

Disability:

ACT, OF MAY 11, 1912

Issued

Aug. 6, 1925

Rate, \$

72

from

May 21, 1925

Deductions:

ACT OF MAY 1, 1920

Disability:

Issued

Rate, \$

from

Deductions:

Disability:

Issued

Rate, \$

from

Deductions:

Disability:

INDORSEMENTS.

Sept. 10/14. Salary adv. 4

from 8-7-14. adv

Oct 28, 1925. Letter advising of the

negotiation of claim for release to correct date

of commencement of service Act May 1, 1920.

And Hon. Mr. Fletcher notified.

J.H. Smith

Mar. 31, 1926 - Claimant
letter of rejection
Hon. M. H. Thatcher
advised — E.R.

April 24, 1926

Circular of the act of
March 2 to G. W. Long
TDL Finance

Congress of the United States
House of Representatives
Washington, D. C.

1004 Realty Bldg.,
Louisville, Ky.
Oct. 1, 1925.

Hon. Wilder S. Metcalf,
Commissioner of Pensions,
Washington, D. C.

My dear Mr. Commissioner:-

Enclosed find application of William L. Hazelip, a Veteran of the Civil War, for the reopening of his application for pension to cover the difference between Fifty Dollars and Seventy - Two Dollars a month, to begin April 15, 1921; also the affidavit of Henrietta Sipes, showing personal knowledge of his disabled condition beginning in April, 1921. This affidavit is in response to information asked for in your communication to the claimant of June 11, 1925.

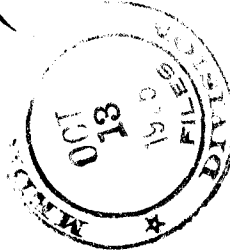
It is believed that this affidavit, together with affidavits on file at your office, amply establish the claimant's right to this additional pension, and I earnestly hope that you will find this to be the case and the payment may be promptly made.

I may say that I have known the claimant practically all my life and he is a man of high integrity and honor and his claim, I am sure, is absolutely justified.

Kindly have the matter acted on as early as may be possible and advise me of the result. The claimant is in need of the amount asked for in his application.

Respectfully,

M. H. Thatcher



INDEX
TO SPECIAL EXAMINER'S REPORT.

Claim of *Wm. L. Hazelup* No. _____

PAGES.	NAMES OF WITNESSES, ETC.	Exhibits.	Deposi- tions.	REPUTATION.
1	Index			
	Notice to claimant			
2 to 3.	Summary			
	Claimant's statement			
4 to 5.	<i>A. J. G. Wilson,</i>	-	<i>a.</i>	<i>Good.</i>

Invalid of _____
William L. Hazelip, Private Co
E, 11 Ky Vol Infantry,
Post Office, Glasgow Junction,
Barren Co, Ky,
Pensioned at \$6⁰⁰ per month
for rheumatism.

Bowling Green Ky.
Nov 1-1894

Hon Wm Lochren,
Commissioner of Pensions,
Washington D.C.

Sir:

I have the honor to submit
herewith the deposition of Doctor
J. G. Wilson of Glasgow Junction
Barren Co, Ky, a gentleman of
good business and professional
reputation, showing that one
Wm. L. Hazelip, whom I under-
stand is drawing a pension of
\$6⁰⁰ per month for rheumatism,
suffered with the syphilis several
years subsequent to his discharge,
with the possibility of it having
caused the disease for which he is

pensioned.

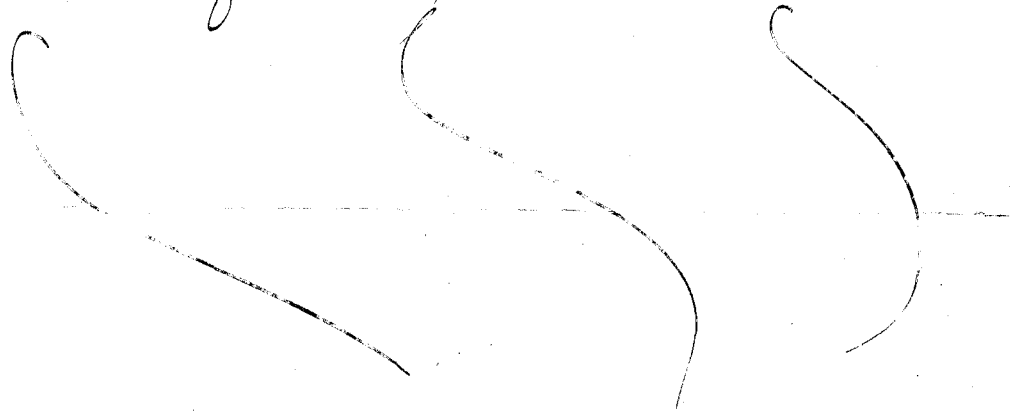
Dr Wilson made the admission regarding his treatment of Hazelip while engaged in casual conversation about another claimant, and I considered it to the interest of the Government to take a sworn statement from him which I did. I delayed the report in the case with the hope of obtaining corroborative testimony, but after careful inquiry found it impossible, none seeming to have any knowledge of it. I recommend that Hazelip be ordered before the Examining Board at Glasgow Barron Co. Ky.

Very respectfully.

W. H. Stovall,

Special Examiner.

I could not obtain the number of Hazelip's Certificate.



DEPOSITION *A.*Case of *Wm. L. Hazelip* No. —

On this *28th* day of *September*, 189*4*, at
Near Glasgow Junction County of *Barren*
 State of *Kentucky*, before me, *N. H. Stovall*, a
 Special Examiner of the Pension Office, personally appeared *Doctor*
Joel M. Wilson, who, being by me first duly sworn to answer
 truly all interrogatories propounded to him during this Special Examination of aforesaid
 pension claim, deposes and says: I am about *72* years old,

Occupation *Physician, Post Office, Glas-*
gow Junction, Barren Co. Ky.

I have practiced medicine *49* years.

I am a graduate of *McDowell Medical*
College, St. Louis Mo.

I have known *Wm. L. Hazelip* about *20*
 years.

Yes sir I have treated him.

I treated him for secondary syphilis ~~some~~
 about *1870*; and several years following.

The statement he made to me was that
 he caught it during the war and had
 suffered with it in its secondary form
 ever since. I know nothing of his primary

condition or whether he had been treated
 for the syphilis before he came to see me.

When I began treating him he had red blotches
 on the skin of his legs and forehead.

Several years after I began treating him
 he suffered with a tumor in his groin

which I considered the result of the syphilis.

I know of no disease he has at present.

He went to *Hol Springs Ark* about ten
 years ago for treatment for this syphilis
 and returned a cured man.

Yes sir I understand him perfectly.

pension. I do not know how much or for
what disease.

I understood your questions and my
answers are correctly recorded.

Joseph Wilson M. G.

Deponent.

Given to and subscribed before me this 28th day of September
1894, and I certify that the contents were fully made known to deponent before signing.

W. H. Howell

Special Examiner.

State of Kentucky }
County of Jefferson } Sct.

In the matter of the Invalid Pension Claim #777676 of William L. Hazelip, Co. E, 11th Ky. Inf., in the Civil War, this day personally appeared before me, Henrietta Sipes, who being by me first duly sworn deposes as follows:

My age is fifty years, and my Post office address Louisville, Kentucky.

That during the years, 1919, 1920 and 1921 and 1922 she was employed at the home of said claimant for much of the time, assisting his wife in doing the housework and waiting on Claimant; that claimant's health was fairly good up to about the 12th or 15th day of April, 1921, when he became ill and called in his family physician, Dr. C. O. Tydings who continued to attend him from time to time until the death of claimant's wife, December 15, 1922; after which date affiant ceased to work for Claimant; that from about the middle of April, 1921 affiant was with claimant much of the time until the death of wife, and knows his physical condition; that during this time claimant's condition was such as to require the regular personal attention of another person and that his wife and affiant personally attended him; that during the early part of this attack he began to lose flesh and strength and has ever since remained in a weak and emaciated condition. He weighed before becoming sick, 225 pounds, but soon lost weight until he weighed 150 pounds or less.

Henrietta Sipes

Subscribed and sworn to before me by Henrietta Sipes, personally known to me to be reputable and entitled to credit on oath,

this 30th day of September 1925. My commission expires on Nov 17/1925

Mary Rakestraw
Notary Public, Jefferson County, Kentucky.

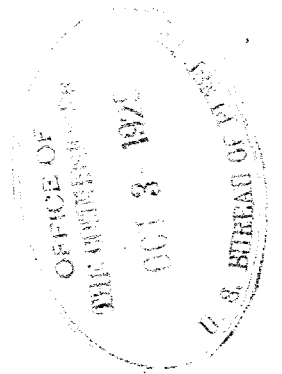
Inv. Pension Claims

#777676

of Affidavit

of Kennetha Sipes

William L. Hagler



TO THE HONORABLE COMMISSIONERS OF PENSION:-

In the matter of the claim of William L. Hazelip, Co E, 11th Kentucky Inf. #777676 allowed as of May 21, 1925, the claimant respectfully asks that said claim be reopened and that he be allowed at the rate of \$72.00 per month beginning April 15, 1921. ✓

In support of this request claimant states, that,

1. His condition became such as to require the regular personal attendance of another person not later than April 15, 1921, and that his condition required such attendance from that time until the date of his examination by the Board of Examining Surgeons as shown by the testimony of his family physicians, Dr. Chas O Tydings, and Dr. R R Elmore, by his own affidavit and by those of persons who attended him at different times, to wit: Walter M. Hazelip, and Mrs Inez Bealmear, and by the report of the Examining Surgeons.
2. That the \$72.00 per month is not sufficient to pay for his safety and comfort at the present time and that he needs the amount accrued between April 15, 1921, when his condition first made such attendance necessary, and May 21, 1925 when his pay under the increase then allowed began, in order to supplement this monthly allowance.
3. That he believes he filed all the proof called for by the Department, but is able and willing to supplement this by others who, attended him between the dates named, if so required.
4. Claimant states that his physical condition is such as to require prompt and favorable action by the Department if he is to enjoy the benefits of the law enacted by a grateful Government in order to provide for the care and comfort of those who in their youth and vigor offered their lives as a sacrifice on the altar of human liberty and National Unity.

OFFICE OF
THE COMMISSIONERS OF
PENSION
OCT 3-1921
U. S. BUREAU OF PENSION

5. Claimant has just discovered the whereabouts of Mrs. Henrietta Sipes who attended him much of the time from April 15, 1921 until the death of his wife in December 1915, and was with the family for two years before that date, and files herewith her affidavit stating the facts within her knowledge.

Respectfully submitted,

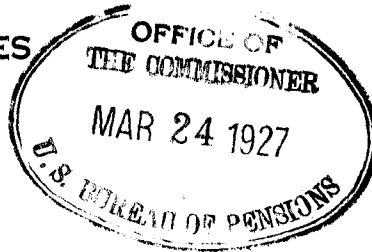
William L. Daggitt

M. H. THATCHER
5TH DISTRICT KENTUCKY

MEMBER
APPROPRIATIONS COMMITTEE

ad

CONGRESS OF THE UNITED STATES
HOUSE OF REPRESENTATIVES
WASHINGTON, D. C.
March 23, 1926.



Hon. Winfield Scott, Commissioner,
Bureau of Pensions,
Washington, D. C.

William L. Hazelip,
I.C. 777,676.

My dear Mr. Commissioner:

Kindly advise me as to the present status
of the above cited claim and greatly oblige,

Yours very truly,

M H Thatcher

Invalid Division
I.C. 777676
William L. Hazelip
Co. E, 11 Ky. Inf.

March 31, 1926.

Mr. William L. Hazelip
General Delivery
Louisville, Ky.

Sir:

Your claim for reissue to correct the date of commencement of increase under section 2, act of May 1, 1920, is rejected on the ground that the evidence on file fails to show that by reason of age and physical or mental disabilities you needed the regular personal aid and attendance of another person. prior to May 21, 1925 the date of commencement of your increase.

Respectfully,

WILLIAM SCOTT.
Commissioner.

MRL:ocp

Invalid Division
I C 777676
William L. Hazelip
E. 11 Ky Inf

October 26, 1925.

Mr. William L. Hazelip
General Delivery
Louisville, Ky.

Sir:

Your claim for reissue to correct the date of commencement of increase under section two, act of May 1, 1920, filed Oct. 3, 1925, is rejected on the ground that the evidence on file fails to show that you required the regular aid and attendance of another person prior to May 21, 1925, the date from which the increase was made to commence.

Respectfully,

WINFIELD SCOTT
Commissioner.

JHK/edg

966 S. 4th St, Louisville, Ky. 4/6/26-

The Honorable Commission of Pensions,
Washington, D.C.

Sir: William L. Hazelip, General
Delinery, Louisville, Ky., pensioned under
act of May 1, 1920, as private and Corporal,
Co. E. 11th Regt Ky. Inftry, Certificate # 777676,
died at 8:10 p.m. April 4th without having
taken his check from the P.O. I am
therefore asking for instructions in
the premises -

Respectfully,

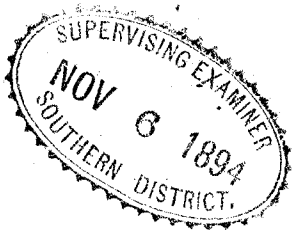
777676

G. O. Ferry.

COPIED AND REPORTED.

applied and called Exr of W. L. Hazelip, dead.





South Dist.

S. E. D.

No. 1000
Claimant: Wm. L. Hazelip,
Soldier: Samuel,
P. O. address: Glasgow Junction,
County: Barren State: Ky.
Recommendation: See Summary,
W. H. Stovall
Special Examiner.

REFERENCE.

Nov. 6th 1894
Respectfully referred
to
Chief Bd. of Revision,

A. W. Albert
Acting Chief S. E. Division.
RECOMMENDATION.

....., 189.....

Reviewer.

ACTION.

....., 189.....

Commissioner.