



THE NATIONAL ARCHIVES
DEPENDENT'S ORIGINAL

NO. 87556

APPLICANT: *Chloe Wright*

Mother

OF

VETERAN: *William H Wright*

CAN NO.: *53*

BUNDLE NO.: *49*

7
Died May 19. 64

Guilford New Ham. Co. Conn.

Died Jan 15. 64

No Burial

First Died Apr. 13. 64 - Martine, Vermont

Atty. Sept 16. 70 decess P. 26. 26. 35 Cui. 18.

No. 57556

ACT OF JULY 14, 1862.

Chloe Wright
New Haven Co. Ct, Mother
of William W. Wright
Priv. Co. D, 55 Mass
died at home,
June 15, 1864, diarrhoea

Dis. May 19, 64

Pension Office

ABANDONED

186

Respectfully referred to the Adjutant
General, for official evidence of service
and death.

REJECTED

Joseph W. Barrett

No other claim,
C. W. Moore

Commissioner.

June 20/78

871.5036

Received, March 27, 1865

~~Henry Rogers~~

~~New Haven~~

C. W. Barrett Lt.

Washington D. C. Attorney.

574

March 19th 64

Cir 9 ev. decto

" 2 dep & super

19

Jan'y 19th 67 Letter for
proof, as above, and
Cir. again enclosed,

Oct. 29th 1868

Condition reported

to Commr (By order.)

Cir proof furnished whatever.

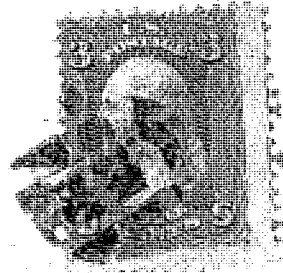
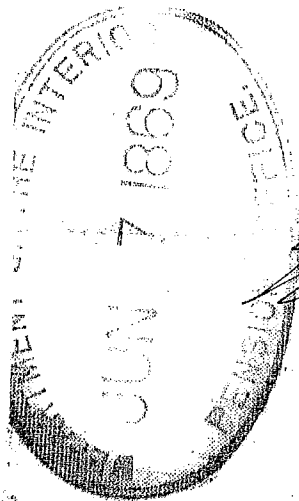
June 8/69 Letter to Court in reply to
writing or death

(Par 2 & 3) ... ability of
husband, celibacy of son length
of time & aunts contributed before
& after intestate & value Court's
property.

Sept. 16 70 - Atty Cir 18 -

Oliver & P. 26 2675

W. J. H.



Don
The Hon. Comptroller of Treasury
Washington

D. C.

Att

No. 87336

ACT OF JULY 14, 1862.

Chloe Knight

New Haven Co. Conn.

Mother of

William H. Knight

Co. "D", 55. Mass. vols

Died at home June 15/64

Chronic Diarrhea

Pension Office,

186

Respectfully referred to the Adjutant General, for official evidence of service and death.

Joseph W. Bennett

Commissioner.

Duplicate of No. 87,536

Barnes

Received, January 16 1867.

Clement W. Bennett

Washington

Attorney.

ARMY OF THE UNITED STATES CERTIFICATE OF DISABILITY FOR DISCHARGE.



William H Wright a *Private*, of Captain *William Nutt's* Company, (*A.*) of the *Fifth* *Regiment* of United States *Infantry* was enlisted by *Sergeant J. L. Allen* of the *Fifth* *Regiment* of *Massachusetts* at *Bedford Mass* on the *fourteenth* day of *May*, 1863, to serve *three* years; he was born in *Windsor County* in the State of *Vermont*, is *Twenty Nine* years of age, *5* feet *2 1/2* inches high, *Dark* complexion, *Blue* eyes *Black* hair, and by occupation when enlisted a *Farmer*. During the last two months said soldier has been unfit for duty *63* days.* *This means disease was contracted last September & October whilst doing picket duty on the North End of Gully Island and he has been unable to do duty the most of the time for the past six months His case is really worse than he represents it to be*

STATION: *Folly Island S. C.*
DATE: *April 27th 1864*

William Nutt Captain
55th Mass Vol
Commanding Company.

I CERTIFY, that I have carefully examined the said *Wm. H. Wright* of Captain *Nutt's* Company, and find him incapable of performing the duties of a soldier because of *Disease of heart (hypertrophy and endocarditis) with chronic bronchitis of left lung, and great debility. He has been unfit for duty since November 1863. The above complaints were contracted since enlistment. Degree of disability total. Not fit to enter the Invalid Corps*

W. S. Brown
55th Reg. Mass. V. Surgeon.

DISCHARGED, this *Nineteenth* day of *May*, 1864, at *Folly Island S. C.*
A. S. Harkness
Colonel
Commanding the Reg't

The Soldier desires to be addressed at
Town _____ County _____ State _____

* See Note 1 on the back of this. † See Note 2 on the back of this.

NOTE 1.

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

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

NOTE 2.

When a *probable* case for *pension, special care* must be taken to state the *degree* of disability—as $\frac{1}{2}$, $\frac{1}{3}$, &c., &c.; to describe particularly the disability, wound, or disease; the extent to which it deprives him of the use of any limb or faculty, or affects his health, strength, activity, constitution, or capacity to labor or earn his subsistence. The surgeon will add, from his knowledge of the facts and circumstances, and from the evidence in the case, his professional opinion of the cause or origin of the disability. In the case of discharges by Medical Inspectors, the last paragraph will state that the "discharge was given by consent of the soldier, after a personal examination, and for disability, the nature, degree, and origin of which are correctly described in the within certificate."

Par. 1260 Regulations, Edit. 1861.

Medical officers, in giving certificates of disability, are to take particular care in all cases that have not been under their charge; and especially in epilepsy, convulsions, chronic rheumatism, derangement of the urinary organs, ophthalmia, ulcers, or any obscure disease liable to be feigned or purposely produced; and in no case shall such certificate be given until after sufficient time and examination to detect any attempt at deception.

DIRECTIONS.

This certificate will be made out in *duplicate* by the soldier's company commander, or other officer commanding the separate detachment to which he belongs, and sent by him to the surgeon who has charge of the hospital where the soldier is sick. The surgeon will then fill out and sign the surgeon's certificate, and forward these papers to the regimental, detachment, or post commander, who will forward them, with his action endorsed thereon, through the proper channel, to his division commander; or, if the troops are not attached to a division, to his corps, department, or other commander or officer to whom the authority to discharge enlisted men may be specially delegated.

These certificates, after having received the action of the highest authority to which they are required to be sent, will be returned through the same channel to the regimental, post, or detachment commander, who will, if the discharge is authorized by the endorsement of the proper authority, sign the soldier's discharge, and the last certificate on this paper; see that the soldier is furnished with the proper final statements in duplicate, and forward BOTH of these certificates *direct* to the Adjutant General United States Army, at Washington, D. C.; they will not, under any circumstances, be given into the hands of the soldier.



Adjutant General's Office,
May 28 1864.
Duplicate for the Pension Office

Samuel J. Cook
Asst. Adjt. Genl

CERTIFICATE OF DISABILITY FOR DISCHARGE

IN THE CASE OF

Wm. H. Wright
a private in Co. D
55th Reg't of Mass. Vols.

Approved
M. Lindley
Asst. Surg. Gen.
Act. Med. Director

Headquarters Dept of the South
Fulton Head S.C. May 15/64

To be Discharged
By reason of physical disability

By Order of
Brig Gen J. P. Hatch
W. J. M. Surger
Capt. & Col. Gen.

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

New Haven
5th June 1869

Dr Sir

Mrs Eliza Wright of
Benevolence in this State
mother of Henry Wright of
the 55th Mass Reg^t who was
killed in the service made
application for her pension
Some two years ago thro
Mr Frank Prescott of this
city and could learn
to her satisfaction whether
it has been granted or
not. May I be informed
of the facts in the case,
very Resp^{tly}

Chas Foster

Adjutant General's Office,

Washington, D. C.,

December 2nd, 1865

Sir:

I have the honor to acknowledge the receipt from your Office of application for Pension No. 87,556, and to return it herewith, with such information as is furnished by the files of this Office.

It appears from the Rolls on file in this Office, that William H. Wright was enrolled on the 27th day of May, 1863, at Leadville Mass in Co. "D", 55th Regiment of Mass Volunteers, to serve three years, or during the war, and mustered into service as a Private on the 31st day of May 1863, at Leadville Mass, in Co. "D", 55th Regiment of Mass Volunteers, to serve three years, or during the war. On the Muster Roll of Co. "D" of that Regiment, for the months of May and June 1864, he is reported "Discharged for Disability by Order of Genl. Hatch May 27th 1864"

I am, Sir, very respectfully

Your obedient servant,

W. H. Hazard

The Commissioner of Pensions,
Washington, D. C.

Assistant Adjutant General.

Memoranda

Name of applicant _____
Address _____

got

Department of the Interior,

PENSION OFFICE,

Nov 24, 1865.

Sir:

You are respectfully requested to furnish official evidence of the enrollment, muster, service, duty, and cause of death of Wm
H. Wright, who was a Priv
in Co. D, 55 Regiment of Mass Vol.,
reported died June 15, 1864, of Diarthrosis

If the above name is not found on the Rolls of said Company, but a similar name is found, this fact should be stated, and whether you have good reason for believing him to be the soldier inquired for.

Please attach this Circular to your report, and return the same to this Office.

No. 87556

Respectfully, yours,

Joseph M. Barrett

Commissioner.

The Adjutant General, U. S. A.,

Washington, D. C.

87 556

Wright

W B G

Covered

No Iron Appliances
L

Mother's Application for Army Pension.

This Army Pension Declaration must be executed before a Judge or Clerk of a Court of Record, and if before the Judge, the Clerk thereof will certify said Judge's official capacity and signature, and attest the same under the seal of the Court.

A Justice of the Peace must not authenticate this paper. If he does, the work is utterly useless, and must be all done over again before a Judge or Clerk of a Court of Record, as above stated.

State of Connecticut }
County of New Haven } SS.

On this 11th day of January, A. D. 1867, personally appeared before the undersigned, (1) Judge of the (2) Probate Court, a Court of Record within and for the County and State aforesaid, Mrs. Sarah Wright aged forty nine years, a resident of the (3) Town of Guilford in the State of Connecticut who, being first duly sworn according to law, doth on her oath make the following declaration, in order to obtain the benefits of the provisions made by the act of Congress approved July 14, 1862: That she is the widow of (4) Sampson Wright, deceased, and mother of (5) William H. Wright, deceased, who was a Private in Company D, commanded by Captain William Mitta in the 55th Regiment of (6) Massachusetts Infantry commanded by Gen. A. S. Hartwell in the war of 1861, and who died (7) since discharge from the service aforesaid, at Guilford in the State of Connecticut, on or about the 15th day of June, A. D. 1864, from (8) Chronic Diarrhea incurred in the service aforesaid and whilst in the line of his duty (9) in the service of the United States

She further declares that her said son, upon whom she was wholly or in part dependent for support, having left no widow or minor child under the above mentioned act, and refers to the evidence filed herewith, and that in the proper department, to establish her claim. She also declares that she has not, in any way, been engaged in, or aided or abetted, the rebellion in the United States; that she is not in the receipt of a pension under the 2d section of the act above mentioned, or under any other act, nor has she again married since the death of her son, the said William H. Wright.

She appoints Clement W. Bennett of Washington D. C. her attorney, with full power of substitution and revocation in her said behalf, and authorizes him to receive the Pension Certificate when issued. Her Post Office is at Guilford County of New Haven and State of Connecticut. That her domicile or place of abode is (10) in said Guilford, about half a mile from the Public Square.

If applicant makes her mark, let two persons who can write their names attest her signature. The Officer administering the oath cannot be one of the attest- ing parties.

ATTEST:

Hesther E. Sanderson Chlor X Wright
Horace Howley Applicant.

Sworn to, subscribed, and acknowledged before me the day and year first above written, and also personally appeared Horace Howley and Hesther E. Sanderson residents of the (3) Town of Guilford in the State of Connecticut, 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 Mrs. Sarah Wright (11) make her (12) mark to the foregoing declaration; and they further swear that they have every reason to believe, from the appearance of the applicant and their acquaintance with her, that she is the identical person she represents herself to be, and that they have no interest in the prosecution of this claim.

ATTEST:

If the witnesses, or either of them, make their mark, let two persons who can write their names attest the signature. The Officer administering the oath cannot be one of the attesting parties.

Two Witnesses.

Horace Howley
Hesther E. Sanderson

Sworn to and subscribed before me, this 11th day of January, A. D. 1867, and I hereby certify that I have no interest, direct or indirect, in the prosecution of this claim. I further certify that the foregoing declaration and joint affidavits were read over to and understood by the respective parties before they made their several signatures to the same.

Edward R. Sanderson
Judge of the Probate Court.
for the District of Guilford, Conn.

NOTE.—If the Clerk of the Court (Deputy will not answer) takes the declaration and affidavit instead of the Judge, he signs the foregoing certificate, (at bottom of reverse page,) and places the seal of the Court thereon, and the following certificate then goes unauthenticated; but if the Judge administers the oaths, he signs the said certificate, and then the Clerk himself authenticates the certificate hereto following:

This Certificate should be authenticated by the Clerk himself.

CLERK'S CERTIFICATE.

State of _____ } SS.
COUNTY OF _____ }

I, _____ Clerk of the _____ Court within and for the County and State aforesaid, do hereby certify that _____ before whom, the foregoing Pension Declaration and joint affidavit were made, and who has thereunto signed his name, was, at the time of so doing, a Judge of the _____ Court in and for the County and State above named, duly elected, qualified, and sworn; that all his official acts as such are entitled to full faith and credit, and that his said signature, as it above appears, is genuine.

GIVEN under my hand and seal of _____ Court at Office in _____ this _____ day _____ A. D. 186.

Clerk

[L. S.] _____ Court.

REMARKS.—In case the Deputy authenticates the Clerk's certificate, evidence may be required to show that the Deputy is duly appointed and authorized by law to sign the Clerk's name and use the seal of the Court—therefore, it is better to have the Clerk's own individual authentication at once, and thus save the trouble and expense of a general authentication certificate respecting the Deputy, which might be required if the papers were authenticated by him instead of the Clerk.

Forwarded by _____

MOTHER'S APPLICATION

FOR ARMY PENSION

War of 1861.

Act of July 14, 1862.

Mrs. *Chloe Smith*
Widow of *Samuel Smith*
and Mother of *William H. Smith*
Late a *Private* *D* Co. 1
of the *35* Regiment of *Massa* Inf

PENSION OFFICE CIRCULAR.

EXTRAOT. June 21, 1862.

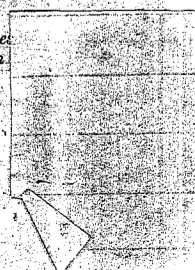
The forms should be exactly followed in every instance. No attorney will be regarded as having filed the necessary Declaration and Affidavits, as contemplated by the seventh section of the act, (July 14, 1862,) unless the forms, as well as the instructions given, are strictly complied with. JOS. H. HARBETT, Commissioner.

Res from R. A. Smith & Co

L. W. Bennett

INSTRUCTIONS

1. "Judge" or "Clerk."
2. Name of the Court.
3. "City," "Town," "Corporation," or "County," as the case may be.
4. Name of her husband.
5. Name of the soldier.
6. *Cavalry, Infantry, or Artillery, Volunteers of*.....(here give State) naming the troops as indicated according to the corps to which they belong. If of the regular service, in place of foregoing, add: "United States Infantry," "Cavalry," or "Artillery," as the case may be.
7. "Whilst in," or "since discharged from," as the case may be.
8. "Wounds," or "Rupture," or "the effects of Typhoid Fever," "Pneumonia," "Measles," "Rheumatism," "Chronic Diarrhea," "Dysentery," "Cholera Morbus," "Phthisis," or any other disease, physical disability, or injury, whatever it may be, naming it.
9. If killed in Battle, add: "Being killed in battle at.....date of his death," or if dying of wounds after Battle, instead of the foregoing, say: "Being received in battle or action at.....on the.....day of.....A. D. 18....."
10. "House No.....on.....street, between.....and.....streets, in the city of.....in the County and State aforesaid the other hand, the applicant resides in the country instead of the city, in place of the foregoing, say: "on the wagon leading from.....to.....about.....miles from.....the County seat of.....County, State above named."
11. "Sign" or "make."
12. "Name," or "mark," as the case may be.



Form of Declaration for Mother's Application for Army Pension.

State of Connecticut
County of New Haven } ss.

On this 7th day of February A. D. 1865 personally appeared before me, a clerk of the Probate Court for New Haven District Chloe Wright a resident of Gilford in the County of New Haven and State of Connecticut aged 48 years, who, being first duly sworn according to law, doth, on her oath, make the following declaration, in order to obtain the benefit of the provision made by the act of Congress; approved July 14, 1862: That she is the widow of Sampson Wright and mother of William Henry Wright who was a Private in Company D. commanded by Capt. Pitt in the 56th Regiment of Mass. Vols. in the war of 1861, who enlisted in May 1863 and was discharged in May 1864 on account of chronic Diarrhea contracted in the service aforesaid he died of the same at Gilford Conn on the 15th day of June 1864.
Her husband Sampson Wright father of William Wright died at Guilford Conn April 13th 1864

She further declares that her said son, upon whom she was wholly or in part dependant for support, having left no widow or minor child under sixteen years of age surviving, declarant makes this application for a pension under the above-mentioned act, and refers to the evidence filed herewith, and that in the proper department, to establish her claim.

She also declares that she has not in any way been engaged in, or aided or abetted the rebellion in the United States; that she is not in the receipt of a pension under the second section of the act above-mentioned, or under any other act, nor has she again married since the death of son; the said

And further she hereby appoints Henry Rogers of New Haven Ct her true and lawful attorneys, with full power of substitution, to prosecute this, her claim, and to receive the certificate to be issued thereon.

Edward H. Dawson.
L. W. Miller } witness

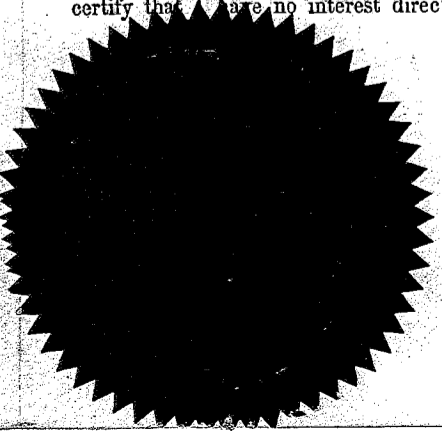
Chloe Wright
her
mark.

Also, personally appeared Henry Martin and Samuel Brown residents of New Haven Conn 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 said Chloe Wright make her mark to the foregoing declaration; and they further swear that they have every reason to believe from the appearance of the applicant, and their acquaintance with her, that she is the identical person she represents herself to be.

Edward H. Dawson.
L. W. Miller } witness

Henry Martin
Samuel X Brown
mark.

Sworn to and subscribed before me, this 7th day of Feb. A. D. 1865; and I hereby certify that I have no interest direct or indirect in the prosecution of this claim. the declaration was explained to her



Robert G. Terry clerk of
the Court of Probate
for the District of
New Haven



Mother's Army Pension
In case of
William Henry Wright
Co. D. 55th Regt
Mass. Vol.

Attorney
Henry Rogers
New Haven.
Conn.

Applicant
Chloe Wright
Guilford.
Conn.

1864

We Henry Martin & Samuel Brown
of New Haven Connecticut on
oath say that for eight years
last past we have been well
acquainted with Chloe Wright
Mother of Wm Henry Wright, late a
Private of Co. D, 55th Mass. Vols. and
we know that for a period of two years
years before the enlistment of said Wm
Henry Wright his said mother was
in great part dependent upon
her said son for support. Sampson
Wright husband of said Chloe Wright
and father of said Wm Henry, died at
Gulfport Conn on the 13th day of April 1864.
For several years before his death said
Sampson Wright had been unable
to do but little labor by reason of
an injury which he had rec^d & gen-
erally - Said Chloe Wright owns a
small house & garden which is all
the property which she possesses.
Her said son was a farmer & took
land to work having a share of
crops, which went to support his
mother & invalid father - we have

no interest in the Pension claim of Chloe Wright.

Wm Henry Wright died unmarried leaving his child

W. Miller } witness
N. C. Thomas }
Henry Martin
Samuel Brown



END