

Thomas H. Stanwood was born 28 Aug 1835 in Salisbury Cove, Bar Harbor, Hancock County, Maine to Calvin and Betsy (McDermot) Stanwood. He enlisted as a volunteer soldier in Company A, 1st Maine Heavy Artillery in Lincoln, Penobscot County, Maine on 21 July 1862, and was discharged 13 June 1865 at Philadelphia, Pennsylvania. His claim for pension, #883,893, was filed 21 July 1890 and the original file is held at the National Archives and Records Administration in Washington, D.C. Over the course of the following 21 years until his death in 1911, Thomas submitted many documents in an effort to obtain an increase in his monthly pension. From these we learn Thomas was a typical Stanwood – fair in complexion with blue eyes, 5' 8" in height and 165 lbs. A lumberman, he stated his rheumatism began in 1878 due to "working in lumber woods and driving on rivers...for 16 or 17 years."

A brief timeline of Thomas' life is included below, with selected images from his pension following, as photographed by John Bursley.

28 August 1835	Birth at Salisbury Cove, Bar Harbor, Hancock, Maine
1854	Marries Elisa Crocker
July 1856	Son Henry E. Stanwood born
1856	Divorces Elisa Crocker
21 July 1862	Enlists in Company A, 1 st Maine Heavy Artillery unit and serves alongside his brother, George F. Stanwood.
25 June 1864	Death of brother, George F. Stanwood, who died as result of gunshot wounds received in battle on 19 May 1864.
18 Sep 1864	Marries Betsy C. Richardson (likely his cousin, daughter of Nicholas and Hannah [Stanwood] Richardson, b. 1842) in Bangor, Penobscot, ME
6 Dec 1866	Wife Betsy (Richardson) Stanwood purchases North half of Lot No. 32 from William B. Hayford in consideration of \$50.
5 Oct 1868	Sale of North of Half of Lot No. 32 (Woodville, ME) to Timothy Fuller in consideration of \$65.
1870	Son George F. Stanwood born
1872	Son William H. H. Stanwood born
4 July 1881	Mother Bridgit (McDermot) Stanwood dies and is buried at South Cemetery, Chester, Penobscot, ME.
15 Sep 1884	Father Calvin Stanwood dies and is buried at South Cemetery, Chester, Penobscot, ME
19 Nov 1888	Struck by train of cars and thrown off a bridge near Bruce's Crossing, MI
1888	Wife Betsy C. (Richardson) Stanwood dies
24 July 1890	Residing at Trout Creek, Ontonagon, MI
20 Jan 1892	Residing in North Woodville, Penobscot, ME; "stopping with friends"
1 June 1894	Residing in North Woodville, Penobscot, ME
13 Aug 1894	Admitted to the National Home for Disabled Volunteer Soldiers in Milwaukee, WI.
19 Apr 1897	Transferred from the National Home for Disabled Volunteer Soldiers in Milwaukee, WI (NW Branch) to Togus (Eastern Branch) in Augusta, ME.
2 May 1900	Transferred from the National Home for Disabled Volunteer Soldiers Eastern Branch in Augusta, Maine to the NW Branch in Milwaukee, WI.
14 Oct 1900	Inquires about his previous request to increase his pension "so I can live outside of the homes in my old state of Maine where my people now reside."
18 Sep 1901	Physicians recommend increase in pension to \$12/month; full amount apparently not granted
6 Apr 1904	Pension of \$8/month; physicians again recommend \$12/month
11 May 1908	Transferred back to the Eastern Branch of the National Home for Disabled Volunteer Soldiers in Augusta, ME; receiving pension of \$15/month.
13 Sep 1911	Dies at National Home for Disabled Volunteer Soldiers in Augusta Maine of Cerebral Hemorrhage. Monthly pension at time of death was \$20.

ACT OF FEBRUARY 6, 1907.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Maine
County of Kennebec } ss.

On this 30 day of August, A. D. one thousand nine hundred and ten, personally appeared before me, a Notary Public within and for the county and State aforesaid, Thomas H. Stanwood, who, being duly sworn according to law, declares that he is 75 years of age, and a resident of National Soldiers Home county of Kennebec, State of Maine; and that he is the identical person who was ENROLLED at Lincoln Maine under the name of Thomas H. Stanwood, on the 21st day of July, 1862, as a Private, in Company A. 1st Maine Heavy Artillery (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 Philadelphia, Pa. (State name of war, Civil or Mexican.) on the 13th day of June, 1865. 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, 5 feet 8 inches; complexion, Light; color of eyes, Blue; color of hair, Brown; that his occupation was Farmer; that he was born August 28th, 1835, at Mount Desert Island, Maine.

That his several places of residence since leaving the service have been as follows: Woodville, Maine 1865 - for six weeks, 1865 to 1867. Hiram, Me. 1867 to 1869. Woodville, Me. 1869 to 1879 Saginaw, Mich. 1879 to 1889. Various parts in Mich. 1889 to 1895. In Lumber district. 1895 to 1897. Nat. Sld. Home (State date of each change, as nearly as possible.)

That he is 15th a pensioner. That he has heretofore applied for pension Certificate Number 883, 893 (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 National Soldiers Home, Hospital, county of Kennebec, State of Maine.
Thomas H. Stanwood
(Claimant's signature in full.)

Attest: (1) _____
(2) _____

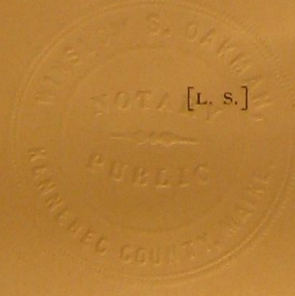
Also personally appeared William E. Choate, residing in National Soldiers Home Me and Charles S. Davis, residing in National Soldiers Home Me, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw Thomas H. Stanwood, the claimant, 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 2 years and 2 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.

Validity as to execution
S. A. Cuddy,
Chief, Law Division.

William E. Choate
Charles S. Davis
(Signatures of witnesses.)

SUBSCRIBED and sworn to before me this 30th day of August, A. D., 1910 and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant and witnesses before swearing, including the words _____, erased and the words _____, added; and that I have no interest, direct or indirect, in the prosecution of this claim.

Wm. S. Ouelman
(Signature)
Notary Public
(Official Character.)



Pres. 1897 to 1899. Nat. Home, Me. 1897 to 1907 Sold Home. Pension 1907 to 1910 Nat. Soldiers Home, Me.

3-014
ACT OF FEBRUARY 6, 1907.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Wisconsin
County of Milwaukee } 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, Thomas H. Stanwood, who being duly sworn according to law, declares that he is 72 years of age, and a resident of National Home county of Milwaukee, State of Wisconsin; and that he is the identical person who was ENROLLED at Lincoln regt. under the name of Thomas H. Stanwood on the 21 day of July, 1862 as a private, in Co. A. 1 Me. Regt. Arty.
(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 Philadelphia Pa. on the 13 day of June, 1865. 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, 5 feet 8 1/2 inches; complexion, light; color of eyes, blue; color of hair, light; that his occupation was Chamberman; that he was born August 28, 1835 at Salesbury Cove on the coast of Maine.

That his several places of residence since leaving the service have been as follows: mostly in the State of Michigan and the National Home, Wisconsin.
(State date of each change, as nearly as possible.)

That he is no a pensioner. That he has no heretofore applied for pension Certificate number 883, 893.
(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 National Home, county of Milwaukee State of Wisconsin.
Thomas H. Stanwood
(Claimant's signature in full.)

Attest: (1) J. L. Black

(2) Dr. J. Regan

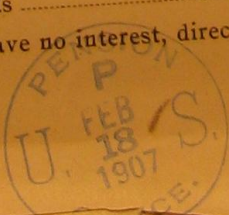
Also personally appeared W. D. Black residing in National Home Wis and Dr. J. Regan residing in National Home Wis persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw Thomas H. Stanwood, the claimant, sign his name (or ~~make 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 4 years and 8 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.

VALID
W.S., LAW.

J. L. Black
Dr. J. Regan
(Signatures of witnesses.)

SUBSCRIBED and sworn to before me this 15th day of February, 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; and the words _____, added; and that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]



Dr. J. Regan
Notary Public
(Official character.)
My commission expires June 27, 1909.

883893
Milwaukee

3-357.

Cert. N. 883893

ACT JUNE 27, 1890.

Increase INVALID PENSION.

Claimant, Thomas H. Stanwood
P. O. Station Military Home
County Milwaukee
State Wisconsin
Rank Corporal
Company A
Regiment 1st Mevol H, a
Rate, \$ 10- per month, commencing January 22, 1904
10 and 1/2 - from April 6-1904

Pensioned for Partial increasing to total inability to earn a support by manual labor

RECOGNIZED ATTORNEY.

Name J. W. Morris Fee, \$ 2.00
P. O. Washington, D.C. Agent to pay.

APPROVALS.

Submitted for adm. Sept 29, 1904, G. H. Watteris, Examiner.

Approved for affection of back
Rheumatism resulting disease
of heart, piles & senile debility (old)
Vertigo, shortness of breath, disease
of Kidney, Bladder, Catarrh
indigestion, impaired eyesight &c
hearing, fracture of left wrist
and partial paralysis (new)
alleged July 22, 1904.

Approved for Rheumatism
and resulting disease
of heart and senile debility
and senile debility.
Aggregate of disabilities shown, permanent in character: \$ 12
from April 6-1904.

Oct 4, 1904 G. H. Watteris
Oct 11, 1904 G. H. Watteris Legal Reviewer.
Oct 7, 1904 M. Shorr
Oct 12, 1904 M. Shorr Re-Reviewer.

Wolman Medical Examiner.
Oct 5, 1904 G. H. Watteris Medical Referee.

Enlisted July 21, 1862; honorably discharged June 15, 1865;
Enlisted _____, 186 ; honorably discharged _____, 186

Pensioned at \$ 8 per month. Last paid to for affection of back, rheu-
matism and resulting disease of heart,
piles and senile debility.

PRESENT CLAIM, ACT OF JUNE 27, 1890.

Declaration filed Jan 22, 1904 alleges decrease, also vertigo,
shortness of breath, Kidney and bladder disease,
catarrh, indigestion, failing sight and hearing,
fracture of left wrist, partial paralysis, filed Sept 26,
1904. Applicant alleges injury to left wrist.

Claimant does _____ write. _____, M. C.
Certificate not filed.

Partial inability to earn a support
\$10 per month later age 68 years Rate
\$10.50 from January 22, 1904

This Blank For Use of Pensioner Under New Law Only.

DECLARATION FOR THE INCREASE OF AN INVALID PENSION.

State of Wisconsin, County of Milwaukee ON THIS 15 day of January A. D. one thousand 1914

before me, the undersigned, duly authorized to administer oaths within and for the County and State aforesaid, personally appeared, Thomas H. Stanwood

late a Corporal in Company M of the 1st Regiment of Volunteers, aged 69 years, who being duly sworn according

to law, declares that he is a pensioner of the United States, duly enrolled at the Milwaukee Pension Agency, at the rate of 8 dollars per month, under Pension Certificate No 293,293

by reason of disability resulting from partial inability to earn a support by manual labor.



That he believes himself entitled to an increase of pension for disability above stated, and hereby makes application therefor. under THE ACTS OF JUNE 27, 1890, and MAY 9, 1900.

On account of an increased disability, and he thinks the rate of pension he is now receiving is unjustly and unreasonably low and disproportionate to the rate drawn by other pensioners for similar or equivalent disabilities.

He also claims additional pension for and is suffering from Heart disease, Vertigo, Shortness of breath, Kidney, Bladder disease, Cataract, Piles, Deformed Indigestion, Badly feeling, aught and hearing, Fracture of left wrist rendering the hands almost useless, Rheumatism, Partial Paralysis extending over his whole system, particularly in arms and hands, legs and feet, Sore back and General debility.

That said disabilities are not due to vicious habits and are to the best of his knowledge and belief permanent.

That he hereby appoints, with full power of substitution and revocation J. W. MORRIS, of Washington, D. C., his true and lawful attorney, to prosecute said claim.

His Post Office address is National Home County of Milwaukee

State of Wisconsin. He further respectfully ask that his medical examination be by the Board at Wells Bldg. Milwaukee, Wis.

Thomas H. Stanwood Signature of Claimant

If claimant signs by mark, two persons who can write must sign here.

HISTORY OF DISABILITY.

To be filled up and sworn to by Claimant.

State of Wisconsin, County of Milwaukee ss:

ON THIS 17th day of September, A. D. 1904, before me, a

Notary Public in and for the aforesaid County, duly authorized to administer oaths,

personally appeared Thomas H. Stanwood, a resident of National Home

in the County of Milwaukee, and State of Wisconsin

whose post office address is The Same

well known to me to be reputable and entitled to credit, and who being duly sworn, declares as follows,

That I am the identical person who under that name served in Co. "A", 10th Reg't.,

Me. Reg. Army Vols.

I further state that injury of left wrist

for which I claim pension,

I incurred on or about Fall of 1888, at or near Baineville Mead

under the following circumstances, to wit: During fall of 1888 I was

working for the Nestor Lumber Co in the woods

near Baineville Mead - On one evening in about

October 1888 at about 8 PM I was going to the

Post Office at Bruce's Crossing for my mail.

I had to cross a railroad trestle across a creek

the trestle being more than 20 feet in height - while thus

crossing a train came along and as the night was dark

I had no means of saving myself - and was struck on the right

side by the engine and hurled over the bridge to the ground below.

Three of my ribs were broken by the engine & my left hand was injured by the fall

the ribs have reunited and do not now trouble me, hence I make no claim for them.

JOHN W. MORRIS, of Washington, D. C., being my true and lawful attorney, with full power of

substitution, is hereby authorized by me to prosecute this claim to completion, before the Commissioner of

Pensions, on appeal to the Secretary of the Interior, or before the Committees of Congress, as may be found

necessary or deemed by him best for my interest.

John J. Cantwell

William Soffey



Thomas H. Stanwood

Signature of Claimant.

If Claimant signs by mark, two persons who can write must sign here.

Physician's Affidavit.

State of Wisconsin, County of Milwaukee ss:

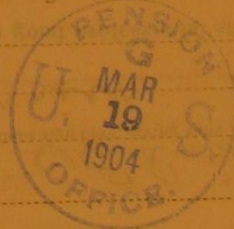
In the Pension Claim of Thomas H. Stanwood
late of Co. "A," 1st Regt. Me. V. Art. 1st

Before me, a _____, in and for the County and State
aforesaid, personally appeared Doctor C. E. Richards
whose residence and Post Office address is 288 Green St. Milwaukee Wis
well known to me to be reputable and entitled to credit, and who being duly sworn, declares in relation to the
aforesaid case as follows:

That I am a Practicing Physician, and have been acquainted with said soldier about _____ years

That I have made a personal examination of the soldier above named, and find he is affected as follows,

Applicant should here fully describe the nature and present condition of the claimant's disability.
I find a slight mitral murmur evidently due to
a former Rheumatic Endocarditis. Evidence of former
Arteriosclerosis still being present in some enlargement
of the aorta with impaired motion. There is impaired
vision especially of left eye. I also find some
large internal piles inclined to bleed. Heart
Action causing short and rapid breathing upon
slight exertion. I find no other positive signs
of disability. For the applicant seems to be
generally well getting around slowly and with
some difficulty.
On my this age (69) and his heart disability
he is in my opinion totally disabled for the
performance of manual labor.



In my opinion the claimant is disabled for the performance of manual labor, on account of the above named
disabilities, to the extent of 100 an ordinary man's labor.
(1-2, 2-3, 3-4, or total)

(3-145 a.)

Act of June 27, 1890.

INVALID PENSION

854,195

Claimant, *Thomas H. Stanwood*
 P.O., *North Woodville*
 County, *Penobscot*
 State, *Me.*
 Rank, *Corporal* *Subsequently Co.*
 Company, *A.*
 Regiment, *8. Me. Vol. Inf.*

Rate, \$ _____, per month, commencing _____

Disabled by _____

RECOGNIZED ATTORNEY.

Name, *James James* Fee, \$ *10* Agent to pay.
 P.O., *Washington D.C.* Articles filed, _____, 189 _____

APPROVALS.

Submitted for *Ad. May 19*, 189*4* *Fred. Metzger* Examiner.

Approved for *Disease of Spine.* Approved for _____

*Loss of use of right arm
 referred to Med Ref for opinion
 not rated*

Metzger
 Legal Reviewer.

Medical Referee.

June 1, 189*4* _____, 189 _____

Not now pensioned under other laws. Last paid to _____, 189 _____, at \$ _____

Pensioned from _____, 18 _____, at \$ _____, for _____

SERVICE SHOWN BY RECORD.

Enlisted *July 21*, 18*62* ✓ honorably discharged *June 13*, 18*65*

Re-enlisted _____, 18 _____, honorably discharged _____, 18 _____

Declaration filed *July 29*, 189*4*, alleges permanent disability, not due to vicious habits,

from *disease of spine, general debility, and partial
 loss of use of right arm and internal injury caused
 by a railway accident. Filed Aug. 23/94. San. Co. Me.*

Notes

ACT OF JUNE 27, 1890.

DECLARATION FOR INVALID PENSION.

To be executed before a Notary Public, Justice of the Peace, or any officer competent to administer oaths who has a Seal

State of Michigan, County of Ontonagon, ss.

On this 24th day of July, A. D. one thousand eight hundred and ninety-

personally appeared before me, John W Foster

a Notary Public within and for the County and State aforesaid,

Thomas H. Stanwood, aged 56 years, a resident of the

of Trout Creek, County of Ontonagon, State of

Mich., who, being duly sworn according to law, declares that he is the identical

Thomas H. Stanwood, who was ENROLLED on the 21st day of

July, 1862, in Co. A. 18 Regt. Maine Inf. (Here state rank, company and regiment in Military service, or vessel, if in the Navy)

in the war of the rebellion, and served at least ninety days, and was HONORABLY DISCHARGED at

Phila. Pa., on the 13 day of June, 1865. That he

is partly unable to earn a support by manual labor by reason of disease of (Here name the disease or injuries from which disabled.)

Spine and general debility and partial loss of use of right arm and internal injury caused by railway accident. That said disabilities are not due to his

vicious habits, and are to the best of his knowledge and belief permanent. That he has not

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,

JAMES TANNER, of Washington, D. C.,

his true and lawful attorney to prosecute his claim, the fee to be TEN DOLLARS as prescribed by law. That

his POST-OFFICE ADDRESS is Trout Creek, County of

Ontonagon, State of Mich.

Thomas H. Stanwood (Claimant's signature.)

Henry G. Fuller

J. W. Taylor

(Two witnesses who write sign here.)

Claimant's Affidavit.

STATE OF Maine COUNTY OF Kennebec SS:

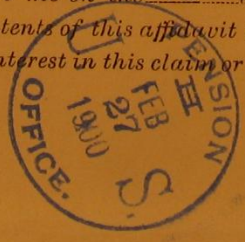
In claim No. 18,893 of Thos. H. Stanwood of Co. A of the 18th Regt. of Me. Vols. personally appeared before the undersigned authority, duly authorized to administer oaths within and for said County, the above named claimant, who being duly sworn,

states that he, while a member of said Company and Regiment and in the line of duty contracted "Rheumatism", about the — day of March 1878, at, or near Rockmans in the State of Michigan, under the following circumstances, viz: working in lumber woods and driving on Rivers & Springs for 16 years; I have felt it worse for the last 3 or 4 years past I supposed Rheumatism was not in at first, I asked the questions of the Dr. & he said there fore it should be that cause is not due to vicious habits, and is permanent in character, has been mentioned in my last application for which he makes claim for pension under Act of June 27, 1890. I was troubled badly, same words, this year than ever.

Thomas H. Stanwood
Affiant's Signature.

If affiant signs by mark two witnesses sign here.

Sworn to and subscribed before me on the 16th day of February 1900 ~~189~~, and I hereby certify that the contents of this affidavit were fully made known to the witnesses before signing and I have no interest in this claim or its prosecution.



George B. Cice
Notary Public
Official Signature.

L.S.

Hon. Genl. P. T. Taylor, Washington, D.C.

I have the honor to respectfully request your favor to facilitate my pension claim which is now pending before the Commission of Pensions since my examination before the Board of Surgeons Feb 18th 1877. It was called up last winter or in March I forget which, I furnished some new evidence that was required & I have not heard from it since. My enlistment was in the 8th Me of Co. A, I enlisted at Lincoln Penobscot County Maine in 1862, after we were transferred to the 1st Maine Heavy Artillery I am 64 years old, I am not able to do any work, I receive 6 per month under the general law, this increase is under the law of 1870 possibly by helping me in this claim you will confer a great favor, as I wish to leave this country do what I can, if I get the increase I think I can live outside of the homes in my old state of Maine where my people now reside, Respectfully,

Thomas H. Stanwood
 a. 18 me vols
 1 me + a

My Certificate, 183,893.

National Home Bldg. Oct 14th 1905

cu

General Affidavit.

STATE OF _____ COUNTY OF _____ SS:
In claim No. 883893 of T. H. Stanwood of Co. A of
the 18th Regt. of Me Vols., Personally appeared before the undersigned duly au-
thorized to administer oaths within and for said County, of Penobscot
aged 54 years, whose P. O. is Howland, County of Penobscot
State of Maine, who being duly sworn, states in relation to said claim as follows to-wit:

*This is to certify that I am well acquainted
with Thomas H. Stanwood for over thirty
years as a neighbor and know that
his lameness of the ^{right} back and Piles are
not caused by any vicious habits
Therefore I state to the best of my knowledge
are not due to vicious habits*

And affiant further states that he has no interest in this claim.

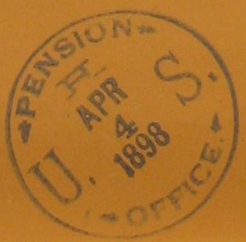
Witness E. R. Bailey
If affiant signs by mark two witnesses sign here.

George A. Moran
Affiant's Signature.

Sworn to and subscribed before me on the 22 day of March 1898, and I hereby
certify that the contents of this affidavit were fully made known to the witnesses before sign-
ing and I have no interest in this claim or its prosecution.

E. R. Bailey
Official Signature.
Justice of the Peace

L.S.



3-173.

Eastern Div.

Certificate No. 582893

Thomas H. Stanwood

Co. A, Reg't 2nd U.S.A.

Department of the Interior,

BUREAU OF PENSIONS,

EAST. DIV.
DEC 11 1897
RECEIVED

Washington, D. C., December 1, 1897

Sir:

Will you kindly answer, at your earliest convenience, the questions enumerated below? The information is requested for future use, and it may be of great value to your family.

Very respectfully,

Thos. H. Stanwood

Randolph

Vt.

[Handwritten Signature]

Commissioner.

No. 1. Are you a married man? If so, please state your wife's full name, and her maiden name.

Answer: *his name was Betty C. Richardson died in 1885*

No. 2. When, where, and by whom were you married? Answer: *Bangor Me*

Spire Perkins about Sept 1865

No. 3. What record of marriage exists? Answer: *I could not answer*

the question. Probably a record was made by Perkins

No. 4. 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: *yes married at Pottaugusford*

Maine about 1854 Divorced 1858, Eliza C. C. C.

No. 5. Have you any children living? If so, please state their names and the dates of their birth. Answer: *3 living*

Henry H. Stanwood Born July 1856

Wm. William Stanwood Born 1872

George Stanwood Born ~~1878~~ 1870

Date of reply, Dec 6, 1897.

Thomas H. Stanwood

(Signature)

General Affidavit.

STATE OF Mass, COUNTY OF Berk SS.
In claim No 54, 195 of Thos. H. Stanwood of Co. A of
the 18 Regt. of Vol. Vols. Personally appeared before the undersigned duly au-

thorized to administer oaths within and for said County, of Berk
aged 58 years, whose P. O. is North Woodville County of Berk
State of Mass, who being duly sworn, states in relation to said claim as follows to wit:

The reason I sent for this medical evidence
is because I want to see what in 1865
after being discharged. I have been in
three different hospitals one in Wisconsin
& two in Michigan. In the town of
Saline & Morgantown I have written to
them on two the towns when they
used to send two of the dead
prisoners one dead. The other one writes
that the hospital was burned with
its records I never had any answer
Physicians I have got medicine from
Directors on when ever I could obtain
it generally plenty of Saline Medicines

And affiant further states that he has no interest in this claim.

Flurence A Moran

Thomas H. Stanwood
Affiant's Signature.

If affiant signs by mark two witnesses sign here.
SWORN to and subscribed before me on the _____ day of _____ 1892, and I hereby
certify that the contents of this affidavit was fully made known to the affiant be-
fore signing and I have no interest in this claim or its prosecution

L. S.

George A. Moran
Official Signature.
Justice of the Peace

Claimant's Affidavit.

STATE OF Maine, COUNTY OF Seymour, SS:

In claim No. 854195 of Thos H. Stanwood of Co. A of the 18 Regt. of Me. Vols, personally appeared before the undersigned, authority duly authorized to administer oaths within and for said, County, the above named claimant, who, being duly sworn, states that he contracted is unable to obtain the necessary

of his Regimental surgeon for treatment
while on the service for the following reasons:
I have written to the Doctors of the
Regiment but cannot get any word
from them I have done all that I
can to find them but cannot do
it

for which he makes claim. for pension while a member of said Co. and Regt. in the line of his duty.

Bennie Moran
If affiant signs by mark two witnesses sign here.

Thomas H. Stanwood
Affiant's Signature.

SWORN to and subscribed before me on the _____ day of _____ 189 , and I hereby certify that the contents of this affidavit was fully made known to the affiant before signing and I have no interest in this claim or its prosecution

L. S.

George A. Moran
Official Signature
Public of the Peace

Claimant's Affidavit.

STATE OF Maine, COUNTY OF Penobscot, ss.

In claim No. 854195 of Thos. H. Stanwood of Co. A of the 18 Regt. of ME Vols, personally appeared before the undersigned authority, duly authorized to administer oaths within and for said County, the above named claimant, who, being duly sworn, states that he contracted

Lumber and materials of fuel about the
Indepth of 1868 at or near
Washington D C State of Maryland
in the Defenses

for which he makes claim, for pension while a member of said Co. and Regt. in the line of his duty.

Martin C. Moran

If affiant signs by mark two witnesses sign here.

Thomas H. Stanwood
Affiant's Signature.

SWORN to and subscribed before me on the 5 day of December 1891, and I hereby certify that the contents of this affidavit was fully made known to the affiant before signing and I have no interest in this claim or its prosecution

L. S.

George C. Moran
Official Signature
Justice of the Peace

13

General Affidavit

State of Merim County of Penobscot
 Statement of Thomas H Stanwood
 I was hurt by being struck by a
 train of Cars on the 10 day of
 November 1888 on the Delwath South
 Shore & Atlantic Rail Road in the
 State of Michigan Near Brewer crossing
 I was thrown from a Bridge and
 have not been able to do any work
 since it injured my right shoulder
 and internal injury in the right
 side I am stopping with friends
 here in Woodville Merim & am
 depending on this Pension for my
 support I served from July 1862
 untill June 1865 only one Substant
 Remember I enlisted in the
 18 Merim Regiment Co D Merim
 Vol Infantry transferred to
 the first Merim Heavy Artillery

Witness

Florence A. Mace

Thomas H Stanwood

Sworn to and subscribed before me on the
 20 day of January 1892 and I hereby
 certify that the contents of this Affidavit
 was fully made known to the
 Affiant before signing and I have no interest
 in this claim or its prosecution
 George A. Moore
 Justice of the Peace

General Affidavit.

STATE OF Maine COUNTY OF Benois SS.
In claim No. 827/95 of Thomas H. Stanwood of
the 18 Regt. of Maine Vols. Personally appeared before the undersigned duly au-
thorized to administer oaths within and for said County, Benois
aged 58 years, whose P. O. is No Woodville County of Benois
State of Maine, who being duly sworn, states in relation to said claim as follows to-wit:

I have known him before he went into
the Army & ever since that he has
been troubled with the lameness &
weakness of back at times ever since
he left the Army & for the last
four years he has not been able
to do any work except a few chores
he has not been able to walk but
with the help of crutches at times for
the last three years

And affiant further states that he has no interest in this claim.

Plummer A. Leman
If affiant signs by mark two witnesses sign here

Hannah E. Ball
Affiant's Signature

SWORN to and subscribed before me on the 23 day of June 1892, and I hereby
certify that the contents of this affidavit was fully made known to the affiant be-
fore signing and I have no interest in this claim or its prosecution.

L. S.

George A. Moran
Notary Public

(3-111.)

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.

Original

Pension Claim No. 854196-

Name and rank of claimant.

Thomas H. Stanwood

Rank, Priv

Claimant's post-office address.

Company A, 18 Reg't Med Inf North Worcester Mass

Worcester Mass July 2

State,

1892

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz: Disease of Spine, general debility, partial loss of use of right arm and internal injury

Cause of disability.

and that he receives a pension of _____ 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 Original

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

Was thrown from a train in 1882, and lacerated his shoulder (right) Has pain through right side and it is so lame cannot lie on it; cannot use the right arm. the same injury started thru ribs. Has lame back, with prickly sensations and numb feeling thru arms and legs. Sometimes hips so lame cannot stoop over. Cannot work. Has difficulty passing water, with pain in trying to pass it.

Upon examination we find the following objective conditions: Pulse rate, 102; respiration, 18; temperature, 98°; height, 5 feet 8 inches; weight, 170 pounds; age, 58 years.

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

Eyes Augmented. Tongue Firm. Heart apex. 2 inches below nipple within nipple seems very in distinct especially second.

Lungs, left normal. lower lobe right - impeded to air.

Liver. Spleen enlarged and sensitive.

Renal region more on right side sensitive and skin anesthetic. Urine. Acid Sp. gr. 1012 Slight albuminous. no sugar.

Right shoulder joint has been dislocated down ward. tendons tense. some atrophy. joint stiffened cannot raise the arm above level with shoulder. Has had a Colles fracture of left wrist with usual deformity, and lame near following.

[Six eyeballs]

Bowels very tense, and tympanitic. with large deposit adipose tissue. The whole right side is tender to pressure.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a rating for the disability caused by dislocation shoulder and wrist for that caused by 7/18, and from malarial poisoning and results

J. H. McChesney, Pres. W. Merrick, Sec'y. Absent. Treas.

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

3-155.
Old No. 3-111.

SURGEON'S CERTIFICATE.

Insert character and number of claim.

Name of claimant.

Claimant's post-office address.

Names of disabilities.

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.

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

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

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.

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

Increase Pension Claim No. 885,807
Thomas H. Stanwood
Company A. 6. Reg't Me. Vol. H. A.
Nat'l Home, Milwaukee Co., Wis.

Address of Board. { 601 Grand Ave., P. O.
Milwaukee, Wis. State.

April 6, 1904
[Date of examination.]

Heart disease, enlarged prostate and reflex symptoms, lumbago, piles, injury to left wrist, impaired vision and general debility.

He receives a pension of \$8.00 dollars per month. He makes the following statement in regard to the origin of his disabilities and date when first discovered by him:
Heart trouble past 13 or 20 years, rheumatism past 15 or 20 yrs., injury to left wrist 14 years ago and trouble with back past 8 or 10 yrs.

Birthplace, Maine; age, 68 years; height, 5 - 8; weight, 160 pounds; complexion, light; color of eyes, blue; color of hair, light; occupation, lumberman; permanent marks and scars other than those described below, none

We hereby certify that upon examination we find the following objective conditions:
Pulse rate, 88 - 92 - 98; respiration, 24 - 28 - 28; temperature, normal.
[Sitting, standing, after exercise.] [Sitting, standing, after exercise.]

Heart,- Claims heart trouble past 13 or 20 years. By palpation we can locate the apex beat in the 5th interspace in the mammary line. Confirmed by auscultation. Pulse is feeble. There is a loud systolic murmur heard loudest at the apex and is transmitted to the left. Is a mitral regurgitant murmur. Precordial dullness extends 1/2 inch to the left of the mammary line. There is hypertrophy. No dyspnoea or cyanosis. There is arterial sclerosis of the arteries of the wrist and of the temples.

Vertigo,- The lizziness complained of we believe is due to the arterial sclerosis and his weak heart.

Spinal trouble,- Claims spinal trouble past 8 or 10 years. His reflexes are normal. Claims pain rheumatic in character in the lower portion of the spine. There is loss of motion in back amounting to 1/3.

Partial paralysis,- Claims he had an apoplectic stroke 14 years ago of left side. There is some weakness of the left arm and hand. Power of grasping in left hand impaired 1/2. No atrophy of muscles. He walks rather uncertain.

Stomach trouble,- indigestion,- Complains of constipation and is obliged to take medicine to make his bowels move. No complaint of indigestion or stomach trouble. Mucous membrane of mouth and throat normal. Teeth are nearly all present but black and decaying. Abdomen is not distended, tender on pressure and no excessive tympany. Hepatic and splenic dullness normal. No evidence of stomach trouble.

Rectum,- piles,- There are two small pile tumors size of hazel nuts. Not bleeding or congested. No fissure, fistula or ulcer.

Back,- Claims pain rheumatic in character in lower portion of back. Some tenderness on pressure and loss of motion amounting to 1/3. The spinal trouble complained of we believe is lumbago.

Rheumatism,- Past 15 or 20 years. There is crepitation of all of the larger joints. No atrophy of muscles, loss of motion or contraction of tendons. There is marked stiffness

End Wall, Pres. J. J. [Signature], Sec'y. [Signature], Treas.

Single surgeons will use this blank, changing "we" to read "I."

Marginal entries must never be made.

3-156.
(Old No. 3-111g.)

SURGEON'S CERTIFICATE.

For use when additional space is needed to complete or amend report of examination.

Name of claimant.	Pension Claim No. 883,893	Address of Board.	601 Grand Ave.,	
	Thomas H. Stanwood,			Milwaukee, Wis.
	Corpl., Company A. S., Reg't Me. V. H. A.			
	Nat'l Home, Milwaukee Co., Wis.			
		[Date of examination, not of amendment.]		

EXAMINATION—Continued.

If used for amendment place date of the new matter at the beginning of same, following the word amended.

of joints of both hands but no loss of motion.

Injury to left wrist and hand,- Had a Colles fracture of left wrist 14 years ago. Lower end of the ulna stands out very prominently. Lower end of the radius is slightly roughened. Hand is turned inward 15 degrees toward the thumb.

Deafness,- Claimant hears ordinary conversation at 6 ft. External auditory canals are normal. No evidence of deafness.

Eyes,- Vision of right eye without glasses 15/80, left 4/120. No correction. He can read ordinary print with right eye with glasses but cannot with left. There is marked conjunctivitis of left eye. Pupils react to light and distance. The impaired vision is due to hypermetropia of both eyes with infection of the left eye.

General debility,- Claimant is old and feeble. Muscles are flabby. General condition is not very good. We believe he is unable to do manual labor of any kind.

Kidney and bladder trouble,- Complains principally of frequent urination. Has to get up several times every night. This we believe is caused by the enlarged prostate which is twice its normal size. Urine passed in presence of blood.- Urinalysis,- Color - amber. Reaction - acid. Sp. Gr. - 1018. No Sugar, Albumen or Sediment.

We find that the aggregate permanent disability for earning a support by manual labor is due to heart disease, enlarged prostate and reflex symptoms, lumbago, piles, injury to left wrist, impaired vision and general debility, not due to vicious habits and warrants a rate of \$12.00.

Except as stated above there are no other disabilities.

No evidence of vicious habits.

Marginal entries must never be made.

Emil Walsh, Pres. *J. J. [Signature]*, Sec'y. *R. [Signature]*, Treas.

(No. 37)

LOCAL MANAGER,
GENERAL JOSEPH S. SMITH, Bangor, Maine.

NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS

BRANCH OFFICERS.

COLONEL JOHN T. RICHARDS, Governor,
 MAJOR AUGUSTUS L. SMITH, Treasurer.
 MAJOR BERTRAND D. RIDLON, Surgeon.
 CAPTAIN GEORGE A. MITCHELL, Quartermaster.
 CAPTAIN WILLIAM J. GILLESPIE, Commissary of Subsistence.

CAPTAIN EDWIN L. CLARK, Adjutant and Inspector.
 MAJOR HENRY S. BURRAGE, D. D., Chaplain.
 REV. JOHN P. NELLIGAN, Chaplain.
 CAPTAIN WALTER S. A. KIMBALL, Senior Assistant Surgeon.

EASTERN BRANCH.

Post Office Address: National Soldiers' Home, Maine.

SEP 22 1911

TO THE UNITED STATES PENSION AGENT:

Augusta, Me.

SIR:

In accordance with instructions of the President of the Board of Managers, National Home for D. V. S., I have the honor to

transmit herewith Pension Certificate No. *883,893* of *Thomas H. Stanwood*

deceased, late of *A* Co., *1st* Reg't. *Maine Inf'ty*

who died at *the Grand*

on the *13th* day of *September*, 19*11*.

Cause of death *Cerebral Hemorrhage*

Social condition *Widowed*

The name, address and degree of relationship of his next of kin, so far as indicated by the records of this Home, are

as follows: *William H. Stanwood, Son*

*29 Lambert Street,
Medford, Mass.*

Very respectfully,

John Richards

GOVERNOR