

Territory of Dakota }
County of Brown }

I Benjamin J Daniels being first duly sworn
do depose and say that I am a regular
licensed practicing Physician and am the
Physician of Edwin Barlow the applicant for
increase of Pension whose affidavit is hereto
attached. I have been his Physician for
the last eighteen months. That at the present
time the said Edwin Barlow is entirely
incapacitated for work or labor of any kind
that his trouble or disability is caused by
gun shot wound in left breast and has
increased since I first knew him until the
present time. The wound has finally developed
permanent organic disease of the
heart viz valvular difficulty of the heart &
Hypertrophy. in my judgment that I have
no interest in the application of the said
Edwin Barlow either directly or indirectly.

Benjamin J. Daniels, M.D.

subscribed and sworn to before me by Benjamin
J Daniels this 2^d day of April A.D. 1886

J R Beebe
Notary Public