

9-18-1861

Lurvey, Lemuel

Adjutant General

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FORM FOR EXAMINING A RECRUIT.

NAME *Samuel Survey*, age *22 yrs*, occupation
Farmer, born in *Int. Desert*.

1. Have you any disease of Brain, or imperfection in eye-sight, or hearing? *None*
2. Have you any disease of throat, or difficulty of utterance? *None*
3. Have you any disease of Lungs or Heart? *None*
4. Have you any disease of Stomach, Liver, Bowels, or Urinary Organs? *None*
5. Have you any Bone, Joint, or Muscle incapacitated by any cause, from performing its natural office? *None*
6. Have you been vaccinated within seven years? *Yes.*

REMARKS.

Survey does not appear very strong, but I can detect no actual disease.

DATE: *Sept. 18th 1861*

RENDEZVOUS: *Orland Me.*

Geo. A. Wheeler M.D. Examining Surgeon.