(3-11-3)

NAME OF SOLDIER: Scott, Torres L.

NAME OF DEPENDENT: Widow. Scott, Sarah L.

Minor,

SERVICE: Corp. K 10th Iowa Inf.

DATE OF FILING.	CLASS.	APPLICATION NO.	CERTIFICATE NO.	STATE FROM WHICH FILED.
1873 Dec 30	Invalid,	212 147	166 269	
1890 Sep 2	Widow,	475 929	377 581	Ill.
	Minor,			

ATTORNEY:

REMARKS: W 2-12-B