#HEADQUARTERS

Illinois Soldiers and Sailors Home,

0	QUINCY,	ILLINO	0 60 6	
	Ų.	Luia,	7002 Jel. O.	7. 17 1904
Marrie 1	mant, (0)	of the town of.	Trenton	, in the
County of Colmton	and State of If	mm	, formerly a Sold	ier of the United States
of America, in the waragainst that he be admitted as a member of		11h		, respectfully asks
To enable the authorities to de	termine whether or not he is l	egally entitled	to become a member of sa	id Home, he declares
and states the facts to be that he is	now years old;	hat he is	Qfeet and engl	inches high; that he is
of fare con	nplexion, files ey	1/) /	hair; that he wa	4
of Jelmany	, 1842; that he has been (2) on se	enrolled in the U.S.A. serv	rice;/in the
war against the Louth,	and in the war of the	late Rebellio	n; and that he has been (3) once honorably
discharged from the service of the				
mentand dischargefrom said thereof namely:	service, and that the cause o	f his discharg	e, and of his rank at t	he respective date
No. When and Where Enrolled.	When and Where Discharged.	. Rank.	Company and Regiment,	Cause of Discharge.
1st. at It Louis	at atlanta	Pewati,	Co. Co. Regt. 15- th	Expiration
2d. July 16 1861	Georgia Sel	~	Co. Regt. Wolnstur	of Syrvice
3d.	tracker 21st 141.		Co. Regi.	
That he now receives, on pension	on certificate number 5.22	4.3.9 ar	pension of Carah	dollars a month,
	lay of next	15		Pension Office.
That he owns property, real an	7	7/ +		no more; that he has
no means of self-support other than				
That he has (4) wife; t				
years. That his postoffice address i	s Trinton		State of Illinois; that his n	earest railway station
			Railway, in Column	County,
in said State; that the name and	Almans, of Trent	N - 20	<i>V V</i> -	th shall be given, is
1 . 1 . 0	, in case of his death, he desire		a a a a a a a a a a a a a a a a a a a	reph and
Dominic Strans, at	Tunton com	ity of	witors State of	Illinois
That he has not heretofore bee	n a member of any Soldiers',	Sailors', or oth	er Charitable Home or Insti	itution, excepting the
(6)				
That he is now a bona fide re- last two years, or has served in an	. Tilingia guaraniandian			
That he is so far disabled by (7) Bludder disabled	I has regarden of	Herni	as Shidney	and)
Bludden dise	1.0	- O al	Hill	of Africa of the state of the adaptive species and the state of the st
e municipality	Adamy Off D. Associated	and the	Juddin Mary Juddin	
as to now be incapable of earning	his own living.			
That he has at all times, heretoned has not at any time been engaged in That if he shall be admitted to conform to the rules and regulations that he will cheerfully do and perforthat he will promptly, and willing	fore, supported and adhered to , or countenanced, or aided, or be a member of the said Hom s made, or that shall hereafter m any and all things that shally, obey all lawful orders that	abetted, the ce, he will, in a be made, for the late of the second the shall received to the shall received the shall received.	cause of the late Rebellion, Il things and in every respe the government and disciple of him by those there in autl tive from any officer of the 1	ect, comply with and ine of the same; and hority over him; and
in Testificany Whereof, he flass	et his hand this 17 to	7 1 day of	Octobera	LO 190 4
1111		11	VY WOLD IN	019 168

STATE OF ILLINOIS,
County of Colinton Ss. I, Mary Olerding, a (10) Motary Proble
of the town of Julian, in and for said County, do hereby certify that the above named applicant, to me
personally and well known to be the identical person he represents himself to be, this day personally appeared before me, and
that I then and there, at his request, plainly read to him his application, aforesaid, which he then and there fully understood,
and that he was, by me, thereupon duly sworn, and then and there deposed and said that he was the applicant above named, and
that he was fully acquainted with matters and things stated and set forth in his said application, and that the same and each of
them were true in substance and in fact as he had therein stated.
(11) Chick see Friches,
Subscribed and sworn to before me, this 17 th day of Olyllo, A. D. 190.
Subscribed and sworn to before me, this
Wigness my hand and ometal sear.
[I. S.] Mary Swiding (12) Notary Cubic
OFF TIPICATE OF IDENTIFICATION
CERTIFICATE OF IDENTIFICATION.
I do hereby certify, upon honor, that I have personally known And And And And
the above Applicant, for, at least, two years tast passed; and that to the best of my knowledge and benef, the statements contained in his foregoing application are entirely true, and especially that as to the time of his residence in Illinois, or service in an
Illinois organization. And I further state that he has no known mental disorder; and that he requires no special attendant; and
that he can properly be allowed to go at large; and that he can safely be quartered with feeble and helpless men.
that he can properly be allowed to go at large, and that he can builty be quantoted with
Witness my hand, (13) 1 John J. Commar as
Commander J. a R Cast
number 569
CERTIFICATE OF A LOCAL PHYSICIAN.
I hereby depose and state that I have carefully examined the above named Applicant. Change
I hereby depose and state that I have earthry examined the story of the state of th
as to his disability, and I now find that he has (15) Junia Calney and
Bluddes dinine also dean of the igro
to such an extent as to prevent him from earning his own living. And I hereby certify that he has no known, manifest, or dis-
coverable mental disorder; that he has no need of an attendant; that he may be properly allowed to go at large; and that he can
safely be quartered with men who are old and feeble.
17approx, M.D.
Subscribed and sworn to before me, thisday of
certify that I am personally acquainted with said affiant, and that I
know him to be a physician in active practice, and in good repute, as an honest man and a capable physician, in the community
and among his fellow physicians where he lives.
(1b)
CERTIFICATE OF SOLDIERS HOME SURGEON.
I hereby certify upon honor that I carefully and critically examined Windrew Traces
the above named Applicant, as to his mental and physical condition, at the Hospital of this Institution, on the
he day of Novessler 1904; and that I found him to be of sound mind, and to be
capable of earning his living by reason of his physical disability arising from (17) thould measure
himmin and unpaired vision
herry and was our
'Onn' Y
Witness my hand
Home Hospital Surgeon.

	Courses Trucas	NAME
	6934	Registered Number
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201 A 4 4 2	c)	Reg't
	O ho	State
		Term of Service
XMick	684.525	Number of Certificate,
es finaces	a S Woodback	WITNESS,

LLINOIS SOLDIERS AND SAILORS HOME.

The undersigned hereby instruct the clerk in charge of Post Office at Soldiers Home to deliver all mail from the Pension Department to the Superintendent.

REGISTER No. 6937 Illinois Soldiers and Sailors Home

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STATE OF ILLINOIS, ss. county of adams.

	ly resided at Irente t his wife, is 10eau	n Ill
	, and that	the names, relationship ar
	ns only, of affiant who would be his h	
at this time, are as follows, to-wi	t:	
NAMES.	RELATIONSHIP.	RESIDENCE.
reph Knaws	Son	Morsten &
miniet Anaus		
J I	£	· Particular
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	я	

ILLINOIS SOLDIERS AND SAILORS HOME. QUINCY, ILL.

IN THE NAME OF GOD, AMEN,

If Missen Mail of Illinois Soldiers and Sailors Home,
in the County of Adams and State of Illinois, being of sound mind and memory, and
considering the uncertainty of this frail and transitory life, do, therefore, make,
ordain, publish and declare, this to be my last Will and Testament.
First. I order and direct that my Executhereinafter named, pay all
my just debts and funeral expenses as soon after my decease as conveniently may be.
Second. After the payment of such funeral expenses and debts, I give, devise
and bequeath all worldly goods of which I may die possessed,
1. 4. 11 11
to my ours fresh Tinaus
and Dominica Unaus
Brain III
/ But alling
<i>}</i>
<i>f</i>
Lastly, I make, constitute and appoint monitorial Sable
or his Auccesses in Office to be Execut of this
my last Will and Testament, hereby revoking all former Wills by me made.
In Witness Whereof, I have hereunto subscribed my name and affixed my seal,
the day of Sometime in the year of our
Lord One Thousand Nine Hundred Some from
1 de la lace
× (Includ fallie) Bent
This instrument was, on the day of the date thereof, signed, published and declared
by the said testator Masses (News to be his last Will
and Testament, in the presence of us, who at his request have subscribed our names
hereto as witnesses in his presence, and in the presence of each other.
Man & Michestra
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