APPLICATION FOR ADMISSION

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Illimois Soldiers' and Sailors' Home

L. T. DIĆKA	TRUSTEE: USTIN, Sycamore, De SON, Danville, Verm	Kalb County, Ill.	S. I	G. ROWLAND, Superin B. SHERER, Secretary	and Adjutant. termaster and Commissary.	ez [®]
THOMAS V	7. MACFALL, Quincy	, Adams County, Ill.		MES D. MORGAN, Tr		
STATE OF	111	i e				-,
COUNTY O		88.	_		e e e	· .
	16. 20	dom of the	Decem	Les A D 100 8 -	ersonally appeared before m	
On this_	me or or	day of		₩ ::		γ_{I_1}
(1)				within and for th	e County and State aforesaid	i,
(2) Hr	edrick !	Ryamer	aged <u>6</u> 2	years; height	5 feet 8 inches	3,
complexion_	light; eyes 13	lue, hair blon	La resident of (3)	Bould	~	
County of	Chailes	011		20 40	and says, that he was born in	
	-	_istate of				
(*)	1 mun	0 1891	1 time and	has been enlisted in th	e service of the United State	3
5) O.efr	familes.		mes during the $\binom{6}{2}$	War of the	Rebellion	ر_
var, and hon	orably discharged from	n each enlistment, as f	ollows:			- 13100 - 131
No. of Enlistments.	When Enlisted, With Rank.	Where Enlisted, Town and State.	Company and Regime Mustered in.	nt Date and Place of Dis- charge, with Rank,	Cause of Discharge.	•
	0.11.0	St-Louis ho	Col 4th mot	Apr 26 1865	7	P
1st.	Suff 2 1861	Or privis mo	Regt	Conferal	Disabilit	10
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4th.	18		Co	18	•	ř
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ML -4 L - :-	7:L1.1 6-11 /	4 /	/	# Ola		1
rnat ne is	disabled as follows: (1) Graces	1	116	· non	.00
nign	1 arm	Combi	ned u	with De	3 to entim	y
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1.00			· · · · · · · · · · · · · · · · · · ·	······································		15
11 1	eceiving	Dollans non	month Pension, on	Cortificate No.	payable at	

Agency, from

account of his disability, to earn his living by manual labor, desires admission to the Illinois Soldiers' and Sailors' Home.

_18____, and being unable, on

The said applicant further swears, that he has not been engaged in, or aided or abetted the late rebellion in the United States; and that he was not a member of any Soldiers' or Sailors' Home June 15, 1887; and further, that he has been a bona fide resident of the State of Illinois for the last two years past. And said applicant further stipulates and agrees that he will abide by and obey all the rules and regulations made by the Board of Trustees, or by their order; that he will perform all duties required of him, and obey all lawful orders of the Officers of the Home.

WITNESS,	
Robert Danielter	2 (1) fraincrois primmings
_ court goughter	- Offar
Jasohh close	Post Office Address, Baulder III.
Sworn to and subscribed before me, the day and y	year first above written, and I hereby certify that the foregoing affidavit was read over
7, 1	/r
and fully explained to Tribrien	before he executed it.
-	(II) John M Davis
· · · · · · · · · · · · · · · · · · ·	Man Pilia
	- World in white
CERTIE	TICATE OF IDENTIFICATION.
(AST The following Certificate must be signed by the	Mayor or City Clerk of the city, or by a County Officer, or by a Justice of the Peace, and attested by an official seal.)
	07
I HEREBY CERTIFY that I know the above nam	1
and that I believe the declaration signed by him to	The tare MA 2000 and
	(8) The Will the Agriculture
·	Malery Pull
p.	
U was so success to see the	RGEON'S CERTIFICATE.
I certify that I have carefully examined (2)	Fredrick Breamer
Co. Reg't 4 mo	Volunteers, and that he is (10) permanently temperately disabled
for obtaining his subsistence by manual labor.	
Date of Injury or Disease, Lan	½day 18.63
no lehal	(har and)
Place of Ascarte	State of State of
Character of Disability, Tracke	me of the lacrumon
Complications, de la complications	est water
•	
Present condition of Applicant,	
	MM of X
e e	(10) SURGEON.
Sworn to and subscribed before me, this 22	day of Secender A. D. 188 Kand I hereby certify that the
said	is known to me as a Surgeon in actual practice and reputable in his profession.
jource	or move to me a conjecte in accour practice and reputation in his projession.
and the second	(11)

25	
Occupation, Januar	Name and Address of Nearest Relative,
Married or Single, Midown [If a widower, so state.]	- Carolin Haass soughter
Children under 16 years,	14mm, clinton Co. Lee
4 20	<u>:</u>
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,	ORDER FOR ADMISSION.
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	, 188 °
r g*	
The above application is hereby approved,	and (2) Vraderick Kramur
Co 24"	Mo. Cav. Vols., will be admitted to the Illinois Soldiers' and Sailors
	vois, will be admitted to the lithiois Soldiers and Sallors
Home at Quincy.	
	1 maud
#	Superintendent Illinois Soldiers' and Sailors' Home
w w	Superimented Itimos Soldiers and Satiors Home
EXP	PLANATIONS AND DIRECTIONS.
	MINITIONS AND DIRECTIONS.
·	PLICATION REFER TO THE DIRECTIONS BELOW, AND MUST BE CAREFULLY SERVED IN FILLING THE BLANKS:
1. Name and Title of Magistrate.	the control of the co
=	
2. Applicant's Name.	

- 3. Post Office Address.
- 4. Town, County, State (or Nation).
- 5. State the number of times actually mustered into the service of the United States.
- 6. Give the name of the War, (Mexican, or Civil).
- 7. Here state minutely the cause and nature of the disability; if by wounds, state the nature of the wounds, and when and where received; if by disease, state the nature of disease, and when and where contracted.
- 8. Signature of Applicant and Post Office Address. Two witnesses are required if he makes his mark.
- 9. This Certificate must be signed by the Mayor or City Clerk of the City, by a County Officer, or Justice of the Peace of the Town in which the applicant resides. No application will be approved until this direction has been complied with.
- 10. If the Certificate of Examination is officially signed by a Surgeon-General of a State, or by a United States Examining Surgeon, or by a Surgeon designated for that purpose by the Superintendent of the Home, it need not be sworn to. One of the words "permanently" or "temporarily" in the Certificate must be erased by the Surgeon.
- 11. Official Signature of Magistrate or Notary.

The soldier or sailor making this application, must forward to the Superintendent his Discharge, or a certified copy thereof from their last enlistment, and Pension Certificate, before his application will be approved. These papers will be retained by the Superintendent, and returned to the member when he is discharged. This rule is adopted to prevent the loss of such papers and certificates, and to hinder fraudulent practices.

After filling out this application and executing it as above directed, forward it, with the other papers, to the Superintendent, whose name is printed on the first page of this sheet.

(43-Do not fill out this biank.)

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LLINOIS SOLDIERS' AND SAILORS' HOME

Farlench Tarenson

Admitted Heg't Vols.

Admitted APPROVED BY

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Received Oze 26 1888

Notice of approval sent - Dr. 26 188 V

Illinois Soldiers' and Sailors' Home! Surgeon's Office Respectfully returned to GEN. C. E. EAPPIN-COTT, Superintendent. I have carefully examined Frederick Knamer late Co. 4 Reg't McO. Car. late Co disabled by fractur

BMM/shales-Surgeon. Register No. 1107

ILLINOIS SOLDIERS' AND SAILORS' HOME

QUINCY, ILLINOIS

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