

# ILLINOIS SOLDIERS' AND SAILORS' HOME

## APPLICATION OF HUSBAND AND WIFE FOR ADMISSION.

Finneas L. Lindsey of the town of Keyesport  
Clinton in the County of Clinton and State of  
Illinois an honorably discharged Soldier  
of the U. S. Army in the war against Rebellers  
and his wife Francis K. Lindsey respectfully ask to be admitted  
as members of said Home.

To enable the authorities to pass on their eligibility, the said Finneas L. Lindsey  
declares the following statements to be true and correct: that his personal description is as follows: age 43 yrs.,  
height 5 ft. 8 inches; complexion White Fair; eyes Blue;  
hair Light

That he was born in \_\_\_\_\_ County of Todd  
State of Ky on the 18 day of February, 1843,  
that he has been 1 times enrolled Mar 1 1864; and 3 times honorably discharged  
from the U. S. service as follows, to-wit:

S.	When and where Enrolled.	When and where Discharged.	Rank.	Company and Regiment.	Cause of Discharge.
1st.	<u>Camp Butler Aug 14 1861</u>	<u>Nov 6 1863</u>	<u>Sergeant</u>	<u>Co. D. 6<sup>th</sup> Regt. U.S. Colored</u>	
2nd.		<u>Dec 1863</u>		<u>Co. Regt. Steady Artil.</u>	
3rd.				<u>Co. 19<sup>th</sup> Regt. Ill. Inf.</u>	

said Finneas L. Lindsey further avers that he and his said wife  
Francis K. Lindsey (who is now of the age of fifty years or older),  
were lawfully married prior to the first day of January, A. D. 1890; and that he has ever since been living with her  
and supported her as his lawful wife.

That he is now a bona fide resident of the State of Illinois and has continuously lived in the said state for the  
last two consecutive years; or, that he has served in an Illinois organization.

That he now receives, on pension certificate number 1036271, a pension of 25 dollars a month,  
payable the 4 day of next Oct at the D. B. Pension Office.

That he owns property, real or personal, of the value of Nothing dollars and no more; that he has  
no means of self support other than the above named; that his trade or occupation is that of a laborer (working now)

That he has a wife; that he has 3 children now living; ages, respectively, 27-25 & 20  
years. That his postoffice address is Keyesport, State of Illinois; that his nearest railway sta-  
tion is Keyesport, on the B. & O. R. Railway, in Clinton County in said  
State; that the name and address of the person to whom he desires notice of his illness or death shall be given, is

Sherwood Lodge #79 D.O.H. of Keyesport, County of Clinton, State  
of Illinois; that, in case of his death, he desires all his personal effects to be sent to J. B.  
Lindsey, at Keyesport County of Clinton, State of Ill.

That he has not heretofore been a member of any Soldiers' Sailors' Home or Institution, excepting the  
Never been member of any Home

That he is so far disabled by Armed & Old age

as to be now incapable of earning his own living.

That he has at all times, heretofore, supported and adhered to the government of the United States of America.

That if he and his said wife Francis K. Lindsey shall be admitted to be members of the said  
Home, he does hereby obligate himself that should his said wife so request, he will deposit with the Superintendent  
so much of his said pension money as the Superintendent may deem necessary for the purpose of clothing said wife.  
And he and his said wife do hereby jointly promise that they will in all things and in every respect, comply with and  
conform to the rules and regulations now in force, or that shall hereafter be made for the government and discipline  
of the Home, and they further obligate themselves and promise that they will cheerfully obey all orders they may  
receive from any officer of the Home, so long as they shall remain members thereof.

In testimony whereof they have hereunto set their hands this 17 day  
of July, 1916.  
O. L. Welch Witness.  
Finneas L. Lindsey  
Francis K. Lindsey  
Applicants.

**Certificate of Identification**

I do hereby certify, upon honor, that I have personally known Finnes & Lindsey and Francis K. Lindsey, the above applicants, for at least two years last past, and that to the best of my knowledge and belief, the statements contained in their foregoing application are entirely true, and especially that as to the time of their residence in Illinois, or his service in an Illinois organization. And I further state that they have no known mental disorder and that they require no special attendants; that they can properly be allowed to go at large and that they can safely be quartered with feeble and helpless men and women.

WITNESS my hand (8) O. L. Welch

Keokuk

(9) Illinois

**Certificate of a Local Physician**

I hereby depose and state that I have carefully examined the above named applicant Finnes L Lindsey as to his disability and I now find that he has (10) Toxiodical attack of Asthma, due to emphysema of lungs

to such an extent as to prevent him from earning a living for himself and wife. And I hereby certify that they have no known, manifest or discoverable disorder; that they have no need of attendants; that they may properly be allowed to go at large and that they can safely be quartered with men and woman who are old and feeble.

Ernest Dickmann

M. D.

Subscribed and sworn to before me, this 18 day of July A. D. 1916. And I certify

that I am personally acquainted with said affiant Ernest Dickmann, and that I know him to be a physician in active practice and in good repute, and an honest man and a capable physician in the community and among his fellow physicians, where he lives.

(11) O. L. Welch  
Notary Public

**Certificate of a Soldiers' Home Surgeon**

I hereby certify upon honor that I have carefully and critically examined Finnes L Lindsey, the above named applicant as to his mental and physical condition, at the hospital of this Institution, on the 1 day of Aug, 1916; and that I found him to be of a sound mind, and to be un capable of earning his living by reason of physical disability arising from (12) Asthma & age. His wife Francis K. Lindsey has no disability

Witness my hand O. E. Eddy  
Home Hospital Surgeon

**Order Admitting Applicant**

The application of the said \_\_\_\_\_ and \_\_\_\_\_ together with the said several certificates, signatures and jurats, having been found to be duly and formally made, and the Superintendent being satisfied that the applicants have shown themselves to be lawfully entitled to admission to the Home, it is hereby ordered that he is now duly admitted as a member thereof, this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

Superintendent

## How to Fill Out Application Blank

1. Name of Applicant.
2. Soldier or Sailor.
3. Army or Navy.
4. Here insert either Mexico, the late Rebellion, or Spain.
5. Full name of wife.
6. Here state the number of times enrolled.
7. Here state number of times discharged.
8. In this state concisely the exact dates and places of enlistment and discharge, Rank, Company, Regiment and Cause of Discharge.

The purpose of all other blank spaces in this application is so self-evident as to require no special explanation.

## Special Information for Applicant

READ THIS CAREFULLY—For it will *avail you nothing*, when you come before the Superintendent for examination on the facts alleged by you in your application, *to say that you are ignorant* of what is *here* and *here-in* plainly and explicitly set forth for your information:

1. Have some capable person *who writes a fair hand*, fill all the blanks in your application.
2. Have every blank in the application properly filled, and every certificate, except that of the Surgeon of the Home, duly made and signed, and every jurat duly executed, signed and sealed by the Clerk, Notary or Justice of the Peace making the same.
3. Send your application, so prepared, by mail or otherwise, *with your last discharge and all your pension papers*, to the Superintendent of the Home. *Marriage Certificate*
4. On his receipt of your application, and your last discharge, and all your pension papers, all in due form, transportation will be sent you, and you will be ordered to report at the Home for *examination by the Home Surgeon as to your disability*, and for examination by the Superintendent *as to the allegations of fact made by you in your application for admission*.
5. If *all statements are found to be true*, and the Surgeon found you to be *so far disabled as to render you incapable of earning your own living*, you will then be admitted to the Home, and not otherwise.
6. If for any reason, you are found *not to be eligible* for admission, *you will not be admitted to the Home*.
7. *If you fail to be admitted*, no transportation to your home will be furnished you. *Therefore, you should bring sufficient money to pay your return fare*.
8. When permitted to leave the Home on furlough, or on pass of more than two days' duration, *you will be required to wear your citizen's clothing*. *You will not be allowed to wear Home or State clothing, when so absent*.
9. Clothing for female members must be furnished by themselves or their husbands, and the Superintendent will hold back all pension money belonging to the husband until the wife is properly clothed, and can use pensioner's money for the purpose of clothing the wife, when pensioner neglects or refuses to do so himself.
10. No transportation can be sent to applicants residing outside the State of Illinois.

## To be Eligible for Admission

1. The law requires that you shall have served in the U. S. A. service in the army or navy, in the war with Mexico, the late Rebellion, or the Spanish war.
2. That you shall have been honorably discharged from that service.
3. That you shall have lived and resided, *continuously* and in good faith, *for the last two years*, in the State of Illinois or served in an Illinois organization.
4. That you shall have been rendered *incapable of earning your own living*, through the exigencies of your military service, by reason of old age, or by means of some other *present disability*.
5. That you shall have *no property or other sufficient means of living*.
6. That you shall be of sane mind; that you shall not be in need of an attendant; that you shall be capable of ministering to your own personal wants; that you shall have *no contagious or infectious disease* that would render your residence in the Home *dangerous* to others; that you may safely be quartered with men or women who are feeble and incapable of self-defense.
7. That in case you have ever been a member of any other Home, you must present a proper discharge from such Home before you can be admitted.
8. *No insane or demented person can be received or cared for at this institution*. The State has elsewhere provided for the care and treatment of such persons.

Superintendent.

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REGISTER NO. 10943

ILLINOIS SOLDIERS' AND SAILORS' HOME  
QUINCY, ILLINOIS

\_\_\_\_\_ and wife  
Miss S. Sindsey  
Francis R. Sindsey No. 884  
Kingsport, Clinton  
Sergt. Co. D. 6<sup>th</sup> Reg't U.S. Colored Heavy Artil.  
Box Co. E. 29<sup>th</sup> Reg't Ill. Inf.  
 \_\_\_\_\_ Co. \_\_\_\_\_ Reg't \_\_\_\_\_

CONTENTS:

Admission Paper 1  
 Army Discharge 3  
 Certificate of Service \_\_\_\_\_  
 Pension Certificate 1 # 1036.771 Will \_\_\_\_\_

Admitted August 15<sup>th</sup> 1916.

dis OR July 2 1917

Stamp sent - 7-19-16