## APPLICATION FOR ADMISSION

-то тне-

## Illimois Soldiers' and Sailors' Home

	TRUSTEE	S.		क्रक	içers.
DANIEL D	USTIN, Sycamore, De	Kalb County, Ill.	J. G	ROWLAND, Superir	ntendent.
	ASON, Danville, Vern		R. F	. SHERER, Secretary T. CARNAHAN, Quart	and Adjutant, termaster and Commissary.
THOMAS	W. MACFALL, Quinc	y, Adams County, Ill.	B. V	V. McMAHAN, Surged MES D. MORGAN, Tre	on.
STATE OF	Illin	}ss.	la l		
COUNTY	Francis	2	1 . 1	7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
On this	Inventy S	exemplay of	ovembe	A. D. 188_8, pe	ersonally appeared before me
(1) J. 1/2	a. Dewr	s a Nota	my Publi	within and for the	e County and State aforesaid,
(2) C 2	amed /	eme.	aged 5 4	years; height	feet 5 inches,
complexion 4	Dark, eyes x	ark, bair Les	a resident of (3)_	Key 23/	orl
County of	Clinton	_State of	who, bein	g duly sworn, deposes	and says, that he was born in
(4)	exmun	<u> </u>			service of the United States
(5)	re like	2 <b>4</b> ti	imes during the (6)	war of	7. Reblin
war, and hon	orably discharged from	n each enlistment, as t	follows:	1	
No. of Enlistments.	When Enlisted, With Rank.	Where Enlisted, Town and State.	Company and Regiment Mustered in.	Date and Place of Dis- charge, with Rank,	Cause of Discharge.
1st.	<del>786/0</del> 1862	St Louis mo	Co. I 6 mo Can	A/ 9 1866	Experation
			Regt	18	bern of the
2d.	18		Co		
3d.	18		Co	18	<del></del>
			Regt		· · · · · · · · · · · · · · · · · · ·
4th.	18		Co	18	*
			Regt		
That he is	disabled as follows: (	offe a	Sund	Burne	1 8 / 1
Hers	the	Rub	1-	M- 1	1 1:41 -
harry	the	hanes	x Du	e a company	and a
					Juan grow
ad has been re	eceiving	Dollars per	month Pension, on Co	ertificate No.	payable at

\_\_\_\_\_18\_\_\_\_, and being unable, on

Agency, from\_

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

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,	1		~	
Thankes of not	((8)	aspoca a	Leine	<u>_</u>
A - 12 M	Part Office	on Addross		TII.
Mackson Hearter	-/	ee Address,		
Sworn to and subscribed before mg the day and year first	above written, and I he	reby certify that the f	regoing affidavit was read	i over
and fully explained to Thomas Air	~e /	before he execut	ed it	
*	(T1) 12	fin Ma	davis	
		Max	org Pullic	
	E OF IDENTIFIC		51	
(***The following Certificate must be signed by the Mayor of and att	or City Clerk of the city, tested by an official seal.)	or by a County Officer,	or by a Justice of the Peace,	
	6	mas (c	Training	
I HEREBY CERTIFY that I know the above named	0.70	2 0	· www	
and that I believe the declaration signed by him to be true	(0)	GM D	lord Oler	10
	(*)	0		
		· · · · · · · · · · · · · · · · · · ·	The second secon	
TRCEO	N'S CERTIFICAT	rie.		
of a second		15		
I certify that I have carefully examined (2)	romas	11 um		10000
Co. S Reg't Mo Cur	Volunteers, an	d that he is (10) perm	anently t <del>emporaril</del> y disa	bled
for obtaining his subsistence by manual labor.			·	
Date of Injury or Disease,	day		18	
Place of	State o	f		
2 rent	Enow 13	whelen.		
Character of Disability,		up con		
Complications,				
Present condition of Applicant, tin all	e lo	hulom	2 manua	<u>L</u> .
Control Control of Ingression,			50 Y W	
2 a hor				
			<u>»</u>	-
(10)	Min	7 Han	surgeon.	
(10)-	1			
Sworn to and subscribed before me, this	day of // Ove	MULL A. D. 188	5, and I hereby certify that	t the
said MM & Hors Sung out is	known to me as a Surg	eon in actual practice o	nd reputable in his profess	sion.
	1/2	1. 12.	Davis	
e e	(11)	www.	De la companya della companya della companya de la companya della	
	U	Malary	Muhli	<u>e</u> _
107 NO.		A		

	NAME AND ADDRESS OF NEAREST RELATIVE,
•0	Occupation, OT armer
M	Married or Ginele, Melitsed Gertruede Line
C	Children under 16 years, Rom / Ley ses front Its
87	
	ORDER FOR ADMISSION.
(4)	<u>92e / 3", 188</u> 0
	The above application is hereby approved, and (2) themes 7 Common Towns
	1 5"
_	Co., 3 Reg't Mo. Cav, Vols., will be admitted to the Illinois Soldiers' and Sailors'
H	ome at Quincy.
	Je/Kin//www.
	Summing and Thinks Galling and The Control of the C
	Superintendent Illinois Soldiers' and Sailors' Home.
	EXPLANATIONS AND DIRECTIONS.
	THE FIGURES IN THE BODY OF THIS APPLICATION REFER TO THE DIRECTIONS BELOW, AND MUST BE CAREFULLY OBSERVED IN FILLING THE BLANKS.
1.	Name and Title of Magistrate.
	Applicant's Name.
	Post Office Address.
4.	Town, County, State (or Nation).
	State the number of times actually mustered into the service of the United States.
	Give the name of the War, (Mexican, or Civil).
	Here state minutely the cause and nature of the disability; if by wounds, state the nature of the wounds, and when and where received.
	y by usease, state the nature of disease, and when and where eontracted.
	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.
0.	If the Certificate of Examination is officially signed by a Surgeon Capacal of a State on by a United States Business of

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.

(\*\* De not fill out this blank.)

Register No. 1052

APPLICATION FOR ADMISSION

TO THE

LLINOIS SOLDIERS' AND SAILORS' HOME

					30.000
	Jan Vols.	Vols.	Vols.	188 8	
h	Reg't Mes C	<i>t</i>	t	18/	BY
100	Reg'n	Reg't_	Reg't_	7	APPROVED BY
muse	00.00	89	Co.	Admitted &	9
La		ļ		Adm	

SUPERINTENDENT.

No.

Received From 2 9 1888

Notice of approval sent Itas 2 9 188 f

The same of the sa

whom it may Concertification of the concertification o Know ye, That Thomas of Captain It Levit UM I Company (14) 5 Thegiment of Convalry VOLUNTEERS who was enrolled on the Lending one thousand eight hundred and Sixty two to serve Three during the war, is hereby Discharged from the service of the United Sta day of April, 1865, at Saint Saint Messoure by reason of Odpiration line & Serve No objection to his being re-enlisted is known to exist.\*) rate Thomas Kine was born in Germany , is went sine wyears fire feet fire inches high, foris complexion, Brown hair, and by occupation, when enrolled, a De Given at Sount Louis Me this \*This sentence will be erased should there be anythin in the conduct or physical condition of the soldi-rendering him unfit for the Army. A. G. O. No. 99.] Commanding the Regit Now, ti, Therefore apt. L. & U. S. Carly Mush, & Dish Officer



Major Roland Sup Soldiers 4
Sailors Home I want a
Furlough for three months
Thomas Kime

Illinois Soldiers' 🚂 Sailors' Mome.
Surgeon's Office, OLC 13.188.8
Respectfully returned to J. G. ROWLAND,
Superintendent.
Thomas Keine
late Co.C. 5 Reg't Mo Cac-
late Co. Reg't
and find him disabled by Tiff-
the has double
inguing and
a ventral herris
which entitles
him to admission
to the Home
13/WWhitehan
SURGEON.

Register No. 1052

## ILLINOIS SOLDIERS' AND SAILORS' HOME

QUINCY, ILLINOIS

Thomas Kin Keysfort,	101
momas um	1 . 1
Leusbart -	Ellmois
To your transfer of the second	
CORE	G"T
0	hu a.
I co 5th RE	G'T MO CAU
CORE	~>₁,
KEA	3 L
CONTENTS	
,	El .
Admission Paper /	
Army Discharge	\$
Army Discharge	
Certificate of Service	
Pension Ceruificate	Will
Admitted 12-13-88	1 <del>0.</del>
Bull to IR	1 1/1/
Application De	2 1/29/88
Application Revolution Sischarged and L.	hada na aludi
ascuriga a monto	1119/
II .	25
e e	
	<i>i</i>
	<i>j</i>
· · · · · · · · · · · · · · · · · · ·	
	·····
*	<i>.</i>
A42329—5M—3-41)	8
*	