# APPLICATION FOR ADMISSION

## and Sailors, Home Illinois Soldiers

#### TRUSTEES.

DANIEL DUSTIN, Sycamore, DeKalb County, Ill. L. T. DICKASON, Danville, Vermillion County, Ill. THOMAS W. MACEALL, Quiney, Adams County, III.

#### OFFICERS.

J. G. ROWLAND, Superintendent.

S. B. SHERER, Secretary and Adjutant. R. H. CARNAHAN, Quartermaster and Commissary.

R. W. McMAHAN, Surgeon.

	Transition and an arrangement	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JAM	ES D. MORGAN, Tre	asurer.
STATE OF	Mimmis	1	2 0 × 1	N	*
COUNTY C	F Clinton	88.		*	
On this	2,3	day of	IME	A. D. 188 <b>%</b> , pe	rsonally appeared before me
(1) a/ X	County &	lerk 0	1	within and for the	County and State aforesaid
(2) COM	islian Zic	Kel:	aged67	years; height <b>5</b>	feet 10 inches
complexion_	dank, eyes	Day, hair GAL	4 a resident of (3)	Carlyle	
County of	Christon	_State of _ Ollin	MNO, being	g duly sworn, deposes a	and says, that he was born in
(4) J	many	<u> </u>	and h	as been enlisted in the	service of the United States
(5)	one	t	imexduring the (6)	CONSOL	
war, and hor	norably discharged from	m each enlistment, as	follows:		
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.	aug 1et 1861	St downs	Co. I Mair Regt 5th Rug Jus	Oct 20th 1862	disability
2d.		- augustion C	Co.	18	- Variable State of the State o
			Regt		
3đ.	18		Co	18	
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4th.	18		Co	18	
<u>.                                      </u>			Regt		·
That he i	s disabled as follows: (	n daving	N 1000 0	rud being o	ld and disable
ti bert	mu and 1	alor-		J	18
11	, <b>9</b>	7. 4.		The second	- A
<del></del>			Whose	. ,	
and has been	receiving 600	Ast - Dollars no	r month Pension, on C	ertificate No. 30 9	350 payable at
	a Kaisai		K. L. L. L.	C.M.	and being unable, on
count of his	disability, to earn his	0 0,	or, desires admission to		= 50 (907) 50

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 pasts. 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.
John 6 Lampen ) Christien Liebel
MP Murray Post Office Address, Carlyle m.
Sworn to and subscribed before me, the day and year first above written, and I hereby certify that the foregoing affidavit was read over
and fully explained to OMISMAN JACKEL before he executed it.
(TI) Louis Coloring
County Oler K.
CHARTIST OF THE OF THE ON
CERTIFICATE OF IDENTIFICATION.  (AS-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.)
I HEREBY CERTIFY that I know the above named AMMANAMA ACTION and that I believe the declaration signed by him to be true.
(°) A Mill Owner of the decisiation signed by him to be add.
County Clerk
URGEON'S CERTIFICATE.
blu T' O bal
I certify that I have carefully examined (2)
Co Volunteers, and that he is (10) permanently temporarily disabled for obtaining his subsistence by manual labor.
page of injury of photoso,
Place of State of State of Obsability of las al Aller on left leg - also foot
Onditactor of Disastry)
Complications, 1 March from a cut
Present condition of Applicant, Old, telle Hard of heavy gand
mable to work on account of the ulcer
an leg.
(10) a.G. Mels afrigan, SURGEON.
Sworn to and subscribed before me, this 23 day of June A.D. 1888, and I hereby certify that the
said Of Maffig an is known to me as a fjurgeon in actual practice and reputable in his profession.
(11) Knus Olwang
Onuty Clark

*	
Occupation, Carpeyler	NAME AND ADDRESS OF NEAREST RELATIVE,
Married or Single, EMGU [If a widower, so state.]	- Communication factories
Children under 16 years, MNUL	) Carlyle Ills
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e e	
er e	ORDER FOR ADMISSION.
e e	Culy 2 d
	Chrystian Zachlo
The above application is hereby ap	roved, and (2)
of 5th	Reg't Woo-Guy Vols., will be admitted to the Illinois Soldiers' and Sailors'
Co.,	Reg't Vols., will be admitted to the Illinois Soldiers' and Sailors'
Home at Quincy.	Manuel
	Superintendent Illinois Soldiers' and Sailors' Home.
*	Superintendent Itunois Soldiere dina Salore Roma.

### 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.
- 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.

Register No. 1935

APPLICATION FOR ADMISSION

TO THE

ILLINOIS SOLDIERS' AND SAILORS' HOME

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SUPERINTENDENT.

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Received June 2 6 1888

Notice of approval sent fleet No 188 8

Register No. 1935

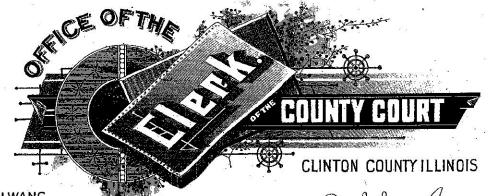
# ILLINOIS SOLDIERS' AND SAILORS' HOME

QUINCY, ILLINOIS

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LOUIS ELWANG,

Carlyle, James 23 1888

J & Rowland Supt. Dear Sir

Enclosed you will please find application of Christian Zickel if correct and he will be admitted into the Soldiers Home please send, notice me and if not please return the Discharge

Your Respectfully Louis Elwangener