

TO THE OFFICERS AND MEMBERS

— OF —

Coop. Det Post No. 22 Dept of Md G. A. R.

I have the honor to make application for membership in Coop. Det Post No. 22 of Md Grand Army of the Republic, basing my application on the following facts:

I am 45 years of age, and was born in Mustkingers Co State of Ohio, now residing at Wicksville State of Md, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 12th 1861, as Private in Co. B 38th Regiment Ill. Infy Vol for the period of 3 years, and was discharged therefrom as Private at Chattanooga Tenn on the 15th day of Sept 1864, by reason of Expiration of term of Service

I also re-enlisted July 21 1864, as Serjt in Co. H 154th Regiment Ill. Infy and was discharged therefrom as Serjt at _____ on the Sept 18th day of Sept 1865, by reason of Gen Order

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Coop. Det Post No. 22 Department of Md

on the _____ day of _____ 18____

(Signature).

David C. Kirchner
Residence, No. Wicksville Md Street.

I on honor recommend David C. Kirchner to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$_____

J. H. [Signature]
(To be signed by a Comrade of the Post).

Note.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

1. If other enlistments, they are to be added.
2. If this is the first application, write the word "not" in this space.

[OVER.]

*Rawson
Beal
Davis*

APPLICATION OF

David C. Merchner

Late *Priv* Co. *B*

38 Reg't *J. I. Juffs* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

Jas. H. [unclear]

HEADQUARTERS

Post No. _____

Department of _____ *188*

Received and referred to the Examining Committee.

Post Commander _____

_____ *188*

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

Committee

*B. J. Rawson
G. A. Beale
J. M. Davis*

Applicant { Elected *Nov 6* 1884
 { Mustered *Nov 6* 1884

No. on Des. Book _____

Adjutant _____

*681
54
4991*

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
- _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
- _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Post Surgeon.