

RULES AND REGULATIONS, G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and Sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has, at any time, borne arms against the United States.

To Corporal Dix Post, No. 22 Dep't of MO G. A. R.

I have the honor to make application for membership in Coyl Dix
Post, No. 22 Department of Missouri Grand Army of the Republic,

basing my application on the following facts:

I am 60 years of age, and was born in Lesles County State
of Illinois, now residing at Adair County
State of MO, am by occupation a Farmer

I served during the late Rebellion as follows:

First enlisted Aug 1st 1861, as Sergeant in Co. "H"
7th Regiment MO. Cav. Vols for the period of 3 years, and
was discharged therefrom as Sergeant at St Louis MO
on the 7th day of February 1863, by reason of surgeons
cert of disability

~~I also re-enlisted _____ 186____, as _____ in Co. _____
Regiment _____ and was discharged therefrom as _____
at _____ on the _____
day of _____ 186____ by reason of _____~~

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

I have _____ made previous application for membership to the Grand Army of the
Republic, and filed the same with Wm A. Wood Post, No. 101 Depart-
ment of MO, on the _____ day of _____ 18____

(Signature) Wm P. Linder
Residence, No. Jeff. P. L. Adair Co. MO

I, on honor, recommend William T. Linder to the favorable con-
sideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

John M. Davis
(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. Any failure to report all the facts required by this application may render the
muster-in null and void.

1 Other enlistments are to be added.

2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Wm P. Linder

Late *Serjt* Co. "*H*"
7th Reg't *Mo Cav* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

Wm M Davis

HEADQUARTERS

Capt D Post, No. *22*

Department of *Mo.* 189*9*

Received and referred to the Examining Committee.

Post Commander.

189

The undersigned Examining Committee respectfully report favorably upon the within application

W B Beall
H A Butler
Sd Conder Committee.

Applicant { Elected *Apr 13* 189*9*
Mustered *July 6* 189*9*

No. on Des. Book

Adjutant.

Bell
Fisk Conder
Williams
Butler

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 (Inftry, Cav., Marine, Sailor).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of Engagements.....
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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.....
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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.