

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 _____ Post No. _____ Dep't of _____ G. A. R.

I have the honor to make application for membership in Capt Dix Post No. 22 Department of Mo Grand Army of the Republic, basing my application on the following facts:

I am _____ years of age, and was born in _____ State of _____, now residing at Wicksville State of Mo, am by occupation a _____

I served during the late rebellion as follows:

First enlisted Dec 10th 1861, as Priv in Co. 26 54 Regiment Ill Inf for the period of 3 years, and was discharged therefrom as Capt, at _____ on the 20th day of Nov 1862, by reason of _____

I also re-enlisted Feb 10th 1865 as Priv in Co. 62 2 Regiment Ill Cav and was discharged therefrom as Sergt at Nashville Tenn on the 4 day of Nov 1865, by reason of Genl Order No 147 was Supt &c

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

I have _____² made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature).

Residence, No. _____ Street.

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

Enclosed is proposition fee, \$ _____

(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]

*Wm. Williams
J. Snyder*

PO address Sublette mo

APPLICATION OF

W. J. Kimble
Late *Post* Co. *N. 57*
and Co. 2 Reg't *M. Co.* for

MEMBERSHIP IN THE GRAND ARMY OF THE REPUBLIC.

Recommended by Comrade

J. Snyder

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.

W. J. Kimble
W. Williams
J. Snyder } Committee.

Applicant { Elected *Oct 20* 188
Mustered *Feb 2* 188

No. on Des. Book _____

Adjutant.

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., Cavalry, 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 _____

Printed figures refer to spaces on Form F.

Post Surgeon.