

TO THE OFFICERS AND MEMBERS

— OF —

Capt. L. J. Post No. *22* Dep't of *Miss.* G. A. R.

I have the honor to make Application for membership in *Capt. L. J.*
Post No. *22* of *Missouri* Grand Army of the Republic, basing
my application on the following facts:

I am *37* years of age, and was born in *Sullivan County* State of
Missouri, now residing at *McPherson*
State of *Miss.*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *Aug 11th* 1864, as *Private* in Co. *42nd*
42nd Regiment *Miss. Vol Inf.* for the period of *one*
years, and was discharged therefrom as *Private* at *Nashville*
on the *28th* day of *June* 1865, by reason of
instructions from War Dept.

I also re-enlisted _____ 18, as _____ in Co. _____
_____ Regiment _____ and was discharged therefrom as _____
_____ at _____ on the _____
day of _____ 18, by reason of _____

I have never borne arms against the United States, and have never been con-
victed 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 _____ Post No. _____
Department of _____ on the _____ day of _____ 18

(Signature.)

Francis D. Keller

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, \$ _____

J. W. Howard

(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.]

76 The Pherson
 + APPLICATION +
 — OF —

Issued by John D. Keller
 Private Co. G 42
 Reg't 1st Inf for
 Membership in the Grand Army of the Republic.
 Recommended by Comrade
J. W. Howard

HEADQUARTERS
Capt Dix Post No. 22
 Department of Nov 15 1883
 Received and referred to the Examining Com-
 mittee W. Lauglin
W. Harris
A. H. Brown
 Post Commander.

Nov 15 1883
 The undersigned Examining Committee respect-
 fully report favorably upon the within
 application.
W. D. Lauglin
W. Harris
W. H. Brown
 Committee.

as Elected Dec 20 May 5 1883
 Applicant (Mustered May 5 1883)
 No. on Des. Book _____
 Adjutant.

Notified Dec 3 1883
 Mar 4 1884
 Mustered
 New Myer
 Townsend
 Helwig
 Anderson
 Brevet Issued &
 Instructed

2891
 68
 4791

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, &c., &c.)
7. Branch of service (Inf., Art., Cav., Marine, Sailor, &c.) _____
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.