

TO THE OFFICERS AND MEMBERS

OF

Corporal Dix Post No. 22 Dept of Missouri G. A. R.

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

I am 48 years of age, and was born in France State of
Kirksville, now residing at
State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted Aug. 1861, as Private in Co. "H"
7th Regiment Mo. Cav. for the period of 3 years, and
was discharged therefrom as Private, at Little Rock, Ark.
on the _____ day of _____ 1864 by reason of Reenlistment

I also re-enlisted 1864 as Private in Co. "H"
7th Regiment Mo. Cav. and was discharged therefrom as
Private at Little Rock Ark on the 5th
day of Sept. 1865 by reason of Close of war

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 _____ Post No. _____ Department of _____

on the _____ day of _____ 18 _____

(Signature)

P. J. Sharr

Residence, No. _____

Street _____

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

Enclosed to proposition fee, \$ _____

P. J. Heiny
(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 existences, they are to be added.
2. If this is the first application, write the word "not" in this space.

APPLICATION OF

*Bernard
Bulby
Wright*
Philip J. Sharp
Late *Private* Co. *A*
7th Reg't *Mo. Cav* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
B. F. Heiny

HEADQUARTERS
Corporal Dix Post No. *22*
Department of *Mo. Aug 7* 188*4*

Received and referred to the Examining
Committee.
Post Commander
Post Commander.

Elected 188

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

John Bernard
Abigail
Joseph Wright } Committee

Applicant { Elected *Aug 30* 188*4*
 { Mustered *11* 188*4*

No. on Des. Book
Adjutant.

Under Dispensation

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 _____

Printed figures refer to spaces on Form F.

Post Surgeon.