

TO THE OFFICERS AND MEMBERS

— OF —

Corp Dy Post No. *22* Dep't of *Mo:* G. A. R.

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

I am *51* years of age, and was born in *Sebanon Co* State of
Pennsylvania, now residing at *Adair Co*
State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows: *Private*

First enlisted *January* 18*62* as _____ in Co. *M*

Second Regiment *M S M* for the period of *3*

years, and was discharged therefrom as *Private* at *Prenton Mo*

on the *8th* day of *April* 18*63* by reason of _____

Disability never was in any regular engagement was

in several guerilla chases with after Porter

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 convicted by Court-Martial 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 _____ Post No. _____

Department of _____ on the _____ day of _____ 18 _____

(Signature) *William Noring*

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.

1 If other enlistments, they are to be added.

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

[OVER.]

✠ APPLICATION ✠

— OF —

Wm. Krueger

Lake Private Co. 16th

Reg't *Mo. Cav. 11th* for
Membership in the Grand Army of the Republic.

Recommended by Comrade

James W. Hughes

HEADQUARTERS

Capt Dix Post No. *23*

Department of *Mo. Aug 2^o* 188*3*

Received and referred to the Examining Committee

R. H. Bourn
Post Commander.

188

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

J. H. Kinross
J. H. Kinross Committee.

Applicant Elected *Sept 10* 188*3*

Mustered *Aug 22* 188*3*

No. on Des. Book

J. F. House
Adjutant.

4891
15
5891

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 *in Lebanon Co Pennsylvania* 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 *right hip hit by fall of horse*
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars *and my eyes Badly damaged while in service and Chronic Disbarment and have never recovered from it yet*
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.