


TO THE OFFICERS AND MEMBERS


— OF —

Colonel D. Post No. *22* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *Colonel D.* Post No. *22* of _____ Grand Army of the Republic, basing my application on the following facts:

I am *33* years of age, and was born in *La Porte* State of *Indiana*, now residing at *Kirkville* State of *Missouri*, am by occupation a _____

I served during the late rebellion as follows:

First enlisted *Sept 15th 1862* as a *Musician* in Co. *G* *27th* Regiment *Missouri Inf.* for the period of *3* years, and was discharged therefrom as *Musician*, at *Indianapolis Ind.* on the *1st* day of *August* 1865, by reason of *the termination of the war*

¹ 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 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.) *J. B. Burre*
 Residence, No. *Kirkville Mo* 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.

APPLICATION OF

J. E. Pierce

Late _____ Co. _____

Reg't _____ for _____

Membership in the Grand Army of the Republic.

Recommended by C. grade

J. H. Kinnear

HEADQUARTERS

Corporal Six Post No. 22

Department of MO. Aug. 26 1882

Received and referred to the Examining Committee.

A. H. Boone

Post Commander

Aug. 26 1882

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

John P. Burton
J. H. Kinnear
J. A. Pinsman } Committee.

Applicant { Elected Aug. 26 1882
Mustered Aug. 26 1882

No. on Des. Book _____
P. A. Henry
Assistant

571
88
7111

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.....

Post Surgeon.

Printed figures refer to spaces on Form F