

TO THE OFFICERS AND MEMBERS

Corporal Dix Post No. 22 Dep't of Mo. 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 Ontario, Co. State of New York, now residing at Kirksville, Missouri, am by occupation a Carpenter

I served during the late rebellion as follows:

First enlisted August 13th 1861, as Private in Co. K 39th Regiment (A. I. D.) for the period of 3 years, and was discharged therefrom as at Chattanooga, Tenn., on the 12th day of August 1864 by reason of expiration of term of service

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 never 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).

Curtis Rainier Residence, No. Kirksville Mo. Street.

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

Enclosed to 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 endorsements, they are to be added. 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Curtis Rainier

Late a *Private* Co. *K.*

39 Reg't *O.V.C.* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

B. F. Heiny

HEADQUARTERS

Corporal Six Post No. *22*

Department of *Mo* *May 27* 188*4*

Received and referred to the Examining Committee.

Post Commander.

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

L. W. Chase
J. R. ...
John ...

Committee

Applicant { Elected *May 27* 188*4*
Mustered *" "* 188*4*

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., 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.