


 THE OFFICERS AND MEMBERS

— OF —

Corporal *Die* Post No. *22* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *Corporal Die* Post No. *22* of *Missouri* Grand Army of the Republic, basing my application on the following facts:
 I am *40* years of age, and was born in *Summitt County* State of *Ohio*, now residing at *Kirksville Adair Co* State of *Missouri*, am by occupation a *poor Postmaster*

I served during the late rebellion as follows:

First enlisted *February 25th* 1862 as *private* in Co. *"K"* *2nd* Regiment *W. Va. Cav* for the period of *3* years, and was discharged therefrom as *Corporal*, at *Cape Girardeau Mo* on the *28th* day of *July* 1864, by reason of *Re-enlistment*

¹ I also re-enlisted *January 29th* 1864 as *private* in Co. *"E"* *13th* Regiment *Mo. Vet Cav* and was discharged therefrom as *Sergt.* on the *13th* day of *May* 1866 by reason of *E. O. No 33 Head* *2^d Dep't of the Mo. State St Louis Mo March 10th 1866*

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* 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. D. Wilson*
 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.

APPLICATION OF

J. D. Miller
 Late *Sargt* Co. "*L. U.*" *13th*
 Reg't *Ma. Cav.* for
 Membership in the Grand Army of the Republic.

Recommended by *C. Inrade*

Christian Stawitz

HEAD-QUARTERS

Corporal *Dis. Post No. 22*
 Department of *MO* *Aug. 1882*
 Received and referred to the Examining
 Committee.

Christian Stawitz
 Post Commander

Aug. 15th 1882

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

W. H. Moore
A. B. Kelley } Committee.

Applicant { Elected *Aug. 15th* 1882
 { Mustered *Aug. 15th* 1882

No. on Des. Book
O. D. Heims
 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 *Summitt County Ohio* 4. Color *Mixed*
5. Regiment or Vessel serving in when wounded *13th Ma. Cav*
6. What Army or Squadron.....
(As Army of the Potomac, Mississippi Squadron, &c., &c.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, &c.) *Cav.*
8. How many times wounded? *once* 9. Ages when wounded *21*
- 10, 11. Dates when wounded and names of engagements *Battle of Independence*
Sept 1864
12. Parts of the body wounded or disabled *Left ear grazed*
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars. *For slight to report to Head Quarters*
14. Kind of missile *musket ball*
15. Rank when wounded *Sargt*

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....

Reported to Department Headquarters.....

Post Surgeon.