

TO THE OFFICERS AND MEMBERS

OF

Compl'dy Post No. 22 Dep't of Mo G. A. R.

I have the honor to make Application for membership in Compl'dy Post No. 22 of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 48 years of age, and was born in Dearborn State of Ind, now residing at Leffler Mann Co., State of Mo, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted Aug 7th 1862 as Pvt in Co. 49th Regiment Ind Vol Inf for the period of 3 years, and was discharged therefrom as Sgt at Nashville Tenn on the 16 day of June 1865 by reason of Close of war

I also reenlisted 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 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.)

James M. Hanes

Residence No. Street.

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

Enclosed is proposition fee, \$

G. F. Newson (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

*James M. Howard*  
Private Co. "E." 19th

Reg't *Ind Vol Inf* for  
Membership in the Grand Army of the Republic.

Recommended by Comrade  
*J. F. Dawson*

## HEADQUARTERS

Post No. \_\_\_\_\_  
Department of \_\_\_\_\_ 188

Received and referred to the Examining Committee  
*Greg. Thompson & Lewis*

Post Commander \_\_\_\_\_  
188

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

*J. W. Howard* } Committee.  
*John Lewis* }

Applicant (Elected *May 4*) 188 *4*  
(Mustered) 188

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, &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 \_\_\_\_\_

Printed Figures refer to spaces on Form F.

Post Surgeon.