

RULES AND REGULATIONS, G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and Sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has, at any time, borne arms against the United States.

To Corpl Dix Post, No. 22 Dep't of Mo. G. A. R.

I have the honor to make application for membership in Corpl Dix
Post, No. 22 Department of Mo. Grand Army of the Republic,

basing my application on the following facts:

I am 52 years of age, and was born in Stens Co. State
of Ohio, now residing at Adair County
State of Mo, am by occupation a Farmer

I served during the late Rebellion as follows:

First enlisted ^{about} August 7th 1861, as Private in Co. "D"
31st Regiment Ohio, I. V. for the period of 2 years, and

was discharged therefrom as Private at St Louis Mo.
on ^{or about} the Aug 6th day of August 1861, by reason of Order from
the War Department, and was mustered into Miss M. Brigade,
and Discharged about February 1865. Battery "E" 1st Mo. S. A.

I also re-enlisted April 6th 1865, as Private in Co. "F"
33rd Regiment Ind. I. V. and was discharged therefrom as Private
at _____ on the 16th

day of June 1865, by reason of War Dept Washington D.C.

By the spect of war
I have never borne arms against the United States, and have never been convicted 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. _____ Dep't
ment of _____ on the _____ day of _____ 18__

(Signature) Samuel Everett
Residence Adair Co. Mo. Residence, No. Lacrosse Mo. Macou Co.

I, on honor, recommend Samuel Everett to the favorable con-
sideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____
John M. Davis
(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. Any failure to report all the facts required by this application may render the
muster-in null and void.
1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Samuel Everett

Late *Rif* Co. *F*
33rd Reg't *Ind. I. V.* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

John M Davis

HEADQUARTERS

Co. D Post, No. *27*
Department of *Mo* 1895

Received and referred to the Examining Committee.

O. E. Snyder
Post Commander.

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The undersigned Examining Committee respectfully report favorably upon the within application

J. T. Atterberry
Garns & Harrison Com. ittee.

Applicant } Elected *Feb 28* 1895
 } Mustered 189

No. on Des. Book

Adjutant.

Riverside Printing Co., Milwaukee, Wis.

Atterberry
Harrison
Haley

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'try, Cav., Marine, Sailor).....
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.

LEP
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SPII