

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 _____ Post No. _____ Dep't of _____ G. A. R.

I have the honor to make application for membership in Corpl Div Post
No. 22 Department of Mo Grand Army of the Republic,
basing my application on the following facts:

I am 50 years of age, and was born in Monroe State of
Indiana, now residing at Kirksville
State of Mo, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted Aug 10th 1862, as Priv in Co. "No
50 Regiment E. M. M. for the period of 3 years, and
was discharged therefrom as Corpl, at Kirksville Mo
on the 15 day of Nov 1864, by reason of consolidation
with the 86th Regt E. M. M. Disbanded by Genl
Order

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 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).

James, M. Smith

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. 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.

[OVER]

APPLICATION OF

*Approved
J. H. D. Smith
22 Oct 1888*

James M. Smith
Late *Reg't* Co. *"H"*
50 Reg't *C.M.M.* for

MEMBERSHIP IN THE GRAND ARMY OF THE REPUBLIC.

Recommended by Comrade
J. C. Harris

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee.

Post Commander. _____

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

B. A. Bowman

Committee.

Applicant { Elected _____ 188
 { 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, etc., etc.)
7. Branch of Service, (Inf., Art., Cavalry, 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.