

TO THE OFFICERS AND MEMBERS

— OF —

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 Hicksville Grand Army of the Republic, basing my application on the following facts:

I am 57 years of age, and was born in France State of Missouri, now residing at Adair County, am by occupation a Farmer.

I served during the late rebellion as follows:

First enlisted February 6th 1862, as Private in Co. 2nd Regiment Mo. Cav. for the period of 3 years, and was discharged therefrom as Private at Palmyra Mo on the day of November 1862 by reason of disability

~~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.)

Godfrey Sprang
Residence No. Resort Mo Street.

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

Enclosed is proposition fee, \$

B. J. Heiny
(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 —

Godfrey Sprang
Private Co. M 2nd

Reg't Mo. Cav for

Membership in the Grand Army of the Republic.

Recommended by Comrade

B. F. Heiny

HEADQUARTERS

Corporal Dix Post No. 22

Department of Mo. 188

Received and referred to the Examining Committee

W. S. E. Munson
D. S. Glenn
Post Commander.

188

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

J. J. Knud
D. S. Glenn
B. D. Munson
Committee.

Applicant Elected March 26, 1884
Mustered April 7th, 1884

No. on Des. Book

Adju'tant.

Notified April 14/84

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.