

TO THE OFFICERS AND MEMBERS

— OF —

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

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

I am 39 years of age, and was born in Courtland N.Y. State of
New York, now residing at Wickliffe
State of Mo, am by occupation a Teamster

I served during the late rebellion as follows:

First enlisted July 15 1864 as Private in Co. B
5th Regiment Mo Cav for the period of three
years, and was discharged therefrom as Ret Corp at St Louis Mo
on the 25th day of Sept 1864 by reason of
Expiration of term of Service

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 con-
victed by Court-Martial of Desertion, nor of any other infamous crime.

I have _____ 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. A. Range
Residence No. Wickliffe Mo Street.

I on honor recommend J. A. Range to the favorable consideration
of the Post, believing the foregoing statements to be true in every respect.
Enclosed is proposition fee, \$ _____

Jas. H. Kinnear
(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 —

J. A. Range
Det Regt Co. J 7th
 Reg't *Mt Cav* for
Membership in the Grand Army of the Republic.
 Recommended by Comrade

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee

Post Commander.

188

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

E. Gordon
John Burton Committee.

Applicant (Elected *Elected Aug 16 1883*)
 (Mustered *Aug 16 1883*)

No. on Des. Book _____

J. Johnson
 Adju'tant.

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.