

To Capt. Wm H. Kirkwood  
Supt. Ill. S. & S. Home,

Oct. 16 - 1895

I have this day examined Chas G. Anderson  
and find him so disabled by deafness, varicose veins  
of both legs and debility; age (66) as to be unable  
to earn a living.

E. B. Montgomery  
Surgeon

Illinois Soldiers & Sailors Home.

Surg. on's Office, Nov 21 1895

To the Superintendent:

I have carefully examined

Chas G. Anderson

late Co. E Regt 54th Ill Inf

late Co. Regt

and find him disabled by

varicose veins, both legs,

deafness, and general

debility of advancing

years. His disability

is confirmed & entire

incapacity to admission

to the Home.

E. B. Montgomery  
Surgeon.

Admitted:

George W. Fogg, Asst.

# APPLICATION FOR ADMISSION —TO THE— ILLINOIS SOLDIERS AND SAILORS HOME, AT QUINCY.

**TRUSTEES.**

WILLIAM STEINWEDELL, Pres., Quincy, Ill.  
LEWIS B. PARSONS, Flora, Ill.  
JAMES A. SEXTON, Chicago, Ill.

**OFFICERS.**

GEORGE W. FOGG, Superintendent.  
JAMES S. MORGAN, Treasurer.



Before filling in the blanks read carefully the explanations and directions on the margin, and extracts from the rules on third page.

Army Discharge, or Certificates of Service, or Pension Certificate, must be sent with this application and all the directions carefully complied with, or the application will be returned, and much delay result.

**DIRECTIONS.**  
Fill all the blank spaces carefully.

STATE OF ILLINOIS } ss.  
COUNTY OF MORGAN }

On this 17<sup>th</sup> day of Oct A. D. 1893, before me  
J. L. Simms, Notary Public  
[Name and Title of Magistrate.]  
personally appeared Charles J. Anderson, aged 54 years, height 5 feet 1.0  
[Name of Applicant.]  
inches, complexion Light, eyes Green, hair Grey, a resident of JACKSONVILLE,  
County of MORGAN, State of ILLINOIS, who being duly sworn, deposes and says, that he was born in  
Albany N. Y. and has been enlisted in the service of the United States  
1 times during the 1861-65  
war; and was honorably discharged from each enlistment as follows:

State each enlistment separately, and cause of discharge.

No. of Enlistments.	When Enlisted, With Rank.	When Enlisted—Town and State.	Company and Regiment Mustered in	Date and Place of Discharge, with Rank.	Cause of Discharge.
1st.	<u>Aug 10<sup>th</sup> 1862</u> <u>Private</u>	<u>Camp Point Ill.</u>	<u>Co. 6<sup>th</sup></u> <u>Regt. 89<sup>th</sup> Ill.</u>	<u>June 10 1865</u> <u>Nashville Tenn.</u>	<u>Services no longer required</u>
2d.	..... 18 .....	.....	Co .....	..... 18 .....	.....
3d.	..... 18 .....	.....	Co .....	..... 18 .....	.....

The army discharge or certificate of service from LAST enlistment is SPECIALLY required.

Here the applicant should state, in his own way, what his disability is.

That he is disabled as follows: General ruin of both legs. Partial Paralysis of nerves of right hand & Acufusus.

If no pension is received, so state.

and has been receiving 8 Dollars per month, pension, on Certificate No. 268676.  
payable at Chicago Agency, from March 20 1885

The applicant further states that he has no property nor means of support, and being unable on account of his disability, to earn his living, desires admission to the Illinois Soldiers and Sailors Home.

The applicant must sign this, and swear to the statement.

The said applicant further swears that he has not been engaged in, or aided, or abetted, the late Rebellion in the United States; and further that he has been a bona fide resident of the State of Illinois for the last two years. And said applicant further stipulates and agrees that he will abide by and obey all the rules and regulations made by the Board of Trustees, or by their order; that he will perform all duties required of him and obey all lawful orders of the Officers of the Home.

WITNESS:

Have two witnesses sign and fill all the blanks carefully

H. S. Skinner M.D. }  
J. L. Simms }

Charles G. Anderson  
JACKSONVILLE, <sup>On what R. R.</sup> *Wabash*  
Nearest R. R. Station, \_\_\_\_\_  
Post-office Address JACKSONVILLE, ILL.

To be sworn to before an officer having a seal, or a J. P.

Sworn to and subscribed before me, the day and year first above written, and I hereby certify that the foregoing affidavit was read over and fully explained to *Charles G. Anderson* before he executed it

[Name of Magistrate] *J. L. Simms*  
*Notary Public*

Read? *Yes* Write? *Yes*  
Occupation *Farmer*  
Married or Single *Widower*  
[If a widower, so state,]  
Children under 16 years *No*

NAME AND ADDRESS OF NEAREST RELATIVE.  
(Name) *Winnie Anderson* (Relation) *Daughter*  
(Address) *Jacksonville, Ill.*

Fill all these blanks carefully.

CERTIFICATE OF IDENTIFICATION.

(The following Certificate must be signed by the Commander or Adjutant of a G. A. R. Post, a Mayor or City Clerk, or by a County officer, or by a Justice of the Peace, and attested by seal.)

This is very important. Have it signed as directed.

I HEREBY CERTIFY that I have known the above named *Charles G. Anderson* for the last two years past, and that I believe the declaration signed by him to be true, and I further state that he is not mentally afflicted so as to require a special attendant, and can safely be quartered in a sleeping room with others.

\* *John B. Holligan*  
(Give Official Title) *Comdr. & Cash*

LOCAL PHYSICIAN'S CERTIFICATE.

This is to be filled out by the applicant's family physician, or one in the neighborhood of the residence of the applicant.

I certify that I have carefully examined *Charles G. Anderson*  
Company *E*, *89th* Regiment *Ill. Inf.* Volunteers, and that he is disabled as follows.  
*Varicose veins of both lower limbs -*  
*also partial paralysis of nerves of -*  
Character of Disability *sensation in right hand.*  
Complications *Drapness.*  
Present Condition of Applicant *Same as above described*

If signed by U. S. Examining Surgeon this need not be sworn to.

I further certify that said Applicant is sane, and has no spells of mental disturbance, and can safely be assigned quarters with other comrades.

*H. S. Skinner* SURGEON.

Subscribed and sworn to before me, this *17* day of *Oct* A. D. 189*3*, and I hereby certify that the said *H. S. Skinner M.D.* is known to me as a Surgeon in actual practice and reputable in his profession.

*J. L. Simms*  
*Notary Public*

ORDER FOR ADMISSION.

The above application is hereby approved, and *Nov. 21 1893*  
*Charles G. Anderson*  
*E.* Co. *89th* Reg't *Ill. Inf.* Vols., will be admitted to the Illinois Soldiers and Sailors Home at Quincy.

*George W. Fogg*  
Superintendent Illinois Soldiers and Sailors Home.

UNITED STATES OF AMERICA  
STATE OF ILLINOIS

Adjutant-General's Office  
Springfield  
Sept 29, 1893

It is hereby Certified, That it appears from the Records of this Office, that  
C. G. Anderson enlisted on the 10th day of July 1862  
at Cann Point, Illinois and was mustered into the service of the United States as a  
Private in Company F 89th Regiment, Illinois Infantry  
for the period of three years and was mustered on the 25th day of  
August 1862, at Chicago Illinois  
Mustered out as Corporal with his Company and  
Regiment at Nashville Tennessee on the 10th  
day of June 1865 his services being no longer  
required

His residence at date of enlistment is stated at Cann Point, Illinois.  
This Certificate is issued at the request of Gen. W. T. Lamb, Jacksonville Ill.

Abel Overbury  
Adjutant-General of Illinois.

P.S.

Do you remember of reading  
in the Quincy Weekly Whig  
of June 24, 97 the account  
of the Roth paper sent to Mr.  
Roth during the war by a  
soldier who carried it in  
Libby Prison? I read in  
the Camp Point Journal of  
Aug 4<sup>th</sup> 97 that it was my  
father who carried it.  
As the old soldiers at the Home  
read the whig I thought pa's  
comrades would be pleased  
to know about it.

Respect.

Samuel A.

2703

Jacksonville, Ill.

Mr. C. L. Higgins,  
Dear Sir.

Yours of the 9<sup>th</sup>  
received for which I thank  
you very much. My father  
Charles G. Anderson died  
May 26, 1897 and was buried  
in Diamond Grove Cemetery  
in our city.

Thanking you for the  
past favors

I remain

Minnie Anderson