

HEADQUARTERS  
**Illinois Soldiers and Sailors Home,**  
 QUINCY, ILLINOIS

*Wm C Bonds*, (0) of the town of *Meradosia*, in the County of *Morgan*, and State of *Illinois*, formerly a Soldier of the United States of America, in the war against (1) *Late Rebellion*, respectfully asks that he be admitted as a member of said Home.

To enable the authorities to determine whether or not he is legally entitled to become a member of said Home, he declares and states the facts to be that he is now *57* years old; that he is *5* feet and *8* inches high; that he is of *Light* complexion, *Blue* eyes, and *Gray* hair; that he was born in the town of *Cass Creek* in the State of *Ill*, on the *23* day of *January*, 1846; that he has been (*active*) enrolled in the U. S. A. service; in the war against *the late Rebellion*; and that he has been (*honorably*) discharged from the service of the United States. That the following is a true statement of the time and place of his enrollment and discharge from said service, and that the cause of his discharge, and of his rank at the respective date thereof namely:

No.	When and Where Enrolled.	When and Where Discharged.	Rank.	Company and Regiment.	Cause of Discharge.
1st.	<i>Mo</i>	<i>August 26 1864</i>	<i>Pvt</i>	<i>E. Co. 28 Regt. Ill.</i>	<i>Transferred to</i>
2d.	<i>August 26 1864</i> <i>Natchez, Miss</i>	<i>July 10 1865</i> <i>Mount City Ill</i>	<i>1st Lt</i>	<i>U.S. Navy</i>	<i>U.S. Navy</i>
3d.				<i>Co. Regt.</i>	

That he now receives, on pension certificate number *32575*, a pension of *Six* dollars a month, payable the *4* day of next *January* at the *Chicago* Pension Office.

That he owns property, real and personal, of the value of *Nothing* dollars, and no more; that he has no means of self-support other than the above named; that his trade or occupation is that of a *Painter*.

That he has (4) *2* wife; that he has *3* children now living; ages, respectively, (5) *Age 14, 30* years. That his postoffice address is *Quincy*, State of Illinois; that his nearest railway station is *Quincy*, on the *Ill. & M. R.R.* Railway, in *Adams* County, in said State; that the name and address of the person to whom he desires notice of his illness or death shall be given, is *Captain F. Hill*, of *Layton*, County of *Schuyler*, State of *Ill*; that, in case of his death, he desires all his personal effects to be sent to *Opportia F. Hill*, at *Layton* County of *Schuyler* State of *Ill*.

That he has not heretofore been a member of any Soldiers', Sailors', or other Charitable Home or Institution, excepting the (6) *Leavenworth Kansas*.

That he is now a bona fide resident of the State of Illinois, and has continuously lived and resided in said State for the last two years, or has served in an Illinois organization.

That he is so far disabled by (7) *Rheumatism & Piles*

as to now be incapable of earning his own living.

That he has at all times, heretofore, supported and adhered to the government of the United States of America, and that he has not at any time been engaged in, or countenanced, or aided, or abetted, the cause of the late Rebellion.

That if he shall be admitted to be a member of the said Home, he will, in all things and in every respect, comply with and conform to the rules and regulations made, or that shall hereafter be made, for the government and discipline of the same; and that he will cheerfully do and perform any and all things that shall be required of him by those there in authority over him; and that he will promptly, and willingly, obey all lawful orders that he shall receive from any officer of the Home, so long as he shall remain a member thereof.

In Testimony Whereof, he has set his hand this *19* day of *December* 190*3*.  
 (9) *Jos W. Shahan* Witness. *William C. Bonds* Applicant.

See above statement

STATE OF ILLINOIS, } ss.

County of .....

I, ..... a (10) .....

of the town of ..... in and for said County, do hereby certify that the above named applicant, to me personally and well known to be the identical person he represents himself to be, this day personally appeared before me, and that I then and there, at his request, plainly read to him his application, aforesaid, which he then and there fully understood, and that he was, by me, thereupon duly sworn, and then and there deposed and said that he was the applicant above named, and that he was fully acquainted with matters and things stated and set forth in his said application, and that the same and each of them were true in substance and in fact as he had therein stated.

(11) ..... Affiant.

Subscribed and sworn to before me, this ..... day of ..... A. D. 190.....

Witness my hand and official seal.

[L. S.] ..... (12) .....

CERTIFICATE OF IDENTIFICATION.

I do hereby certify, upon honor, that I have personally known ..... the above Applicant, for, at least, two years last passed; and that to the best of my knowledge and belief, the statements contained in his foregoing application are entirely true, and especially that as to the time of his residence in Illinois, or service in an Illinois organization. And I further state that he has no known mental disorder; and that he requires no special attendant; and that he can properly be allowed to go at large; and that he can safely be quartered with feeble and helpless men.

Witness my hand, (13) .....

(14) .....

CERTIFICATE OF A LOCAL PHYSICIAN.

I hereby depose and state that I have carefully examined the above named Applicant ..... as to his disability, and I now find that he has (15) ..... to such an extent as to prevent him from earning his own living. And I hereby certify that he has no known, manifest, or discoverable mental disorder; that he has no need of an attendant; that he may be properly allowed to go at large; and that he can safely be quartered with men who are old and feeble.

....., M. D.

Subscribed and sworn to before me, this ..... day of ..... 190..... And I certify that I am personally acquainted with said affiant ..... and that I know him to be a physician in active practice, and in good repute, as an honest man and a capable physician, in the community and among his fellow physicians where he lives.

(16) .....

CERTIFICATE OF SOLDIERS HOME SURGEON

I hereby certify upon honor that I carefully and critically examined ..... the above named Applicant, as to his mental and physical condition, at the Hospital of this Institution, on ..... he ..... day of ..... 1903; and that I found him to be of ..... capable of earning his living by reason of his physical disability arising from (17) .....

Witness my hand .....

..... asst Home Hospital Surgeon.

STATE OF ILLINOIS, }  
 COUNTY OF ADAMS. } ss.

In the matter of the relationship of William C Bonds

, being first duly sworn according to law,  
 deposes and says that he formerly resided at Quincy Abundance Ill,  
 that he is Quincy married, that his wife, Katie Bonds  
 resides at Quincy Ill, and that the names, relationship and  
 residences of all, and the relations only, of affiant who would be his heirs in the event of his death,  
 at this time, are as follows, to-wit:

NAMES.	RELATIONSHIP.	RESIDENCE.
<u>Cynthia Hill</u>	<u>Daughter</u>	<u>Dayton</u> <u>Schuyler Co Ill</u>
<u>John C. Bonds</u>	<u>Son</u>	<u>Unknown</u>
<u>Franklin Bonds</u>	"	<u>Quincy</u>
[scribble]	[scribble]	[scribble]
[scribble]	[scribble]	[scribble]
[scribble]	[scribble]	[scribble]
[scribble]	[scribble]	[scribble]
[scribble]	[scribble]	[scribble]
[scribble]	[scribble]	[scribble]
[scribble]	[scribble]	[scribble]
[scribble]	[scribble]	[scribble]

And further affiant saith not.

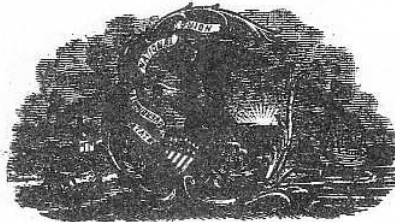
William C. Bonds

Subscribed and sworn to before me, this 19<sup>th</sup> day of \_\_\_\_\_

A. D. 190.....

# United States of America

State of



Illinois

ADJUTANT GENERAL'S OFFICE

Springfield, March 21, 1911.

**It is Hereby Certified,** *That it appears from the Records of this Office, that*

William C. Bond,

Enlisted on the date not given, ----- at not given, -----

and was mustered into the service of the United States as a ----- Re-Grunt, -----

in Company E. 28th ----- Regiment, Illinois Volunteer Infantry, -----

for the period of ----- Not given, ----- on the date not given. -----

Discharged August 26, 1864 at Natchez, Mississippi by sentence of Court Martial.

His residence at date of enlistment is stated as Not given.

This Certificate is issued at the request of J.O. Anderson, Supt.,  
Soldiers' Home,  
Quincy, Illinois.

Frank S. Dickson,  
The Adjutant General of Illinois.  
Chief of Staff.

S.



(16)

NORTHWESTERN BRANCH, NATIONAL HOME FOR D. V. S.

MAR 23 1914

....., 191.....

SIR:

In reply to your *request* of the *18<sup>th</sup> inst*, applying  
for your discharge from the Home, I have been directed by the Governor to  
send you herewith enclosed your *Pen # 32595*  
*and Home discharge*

which *are* all the paper *is* belonging to you on file at this Branch.

Very respectfully,

*H. H. Valentin*

ADJUTANT.

*William C. Jones*

*Quincy Dr*

To all whom it may Concern:



Know Ye, That William C. Bonds  
late \_\_\_\_\_ Co. \_\_\_\_\_ Regiment Ulmar

a member of THE NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS, who was  
admitted on the 20 day of December, one  
thousand nine hundred and \_\_\_\_\_, is hereby

**Honorably Discharged**

by reason of Own Request  
No objection to his readmission is known to exist

Said William C. Bonds was born in Illinois  
is 66 years of age 5 feet 8 inches high,  
complexion, light eyes, blue hair, dark, and by occupation when  
admitted a Carpenter

Pensioner at \$ 13<sup>50</sup> per month. Certificate No. 32575

Given at NORTHWESTERN Branch, National Home D. V. S.,  
this 23 day of March, 1914

Amicus Huber  
Governor.

# Illinois Soldiers and Sailors Home.

*List of clothing returned by Members to Q. M.*

Quincy, Ill. June 15 1914

To Q. M. S.

Sir: Bond M<sup>o</sup> C No. 6570 is

this day an O. S.

The following is a full list of all the State clothing in his possession:

Blouse.	Trousers.	Vests.	Shirts.	Undershirts.	Drawers.	Shoes.	Socks.	Hats.	Suspenders.	Night Shirts.	Over Coats.		
1	1	1			2			1	1				

*Of which the following articles are in the laundry.*

--	--	--	--	--	--	--	--	--	--	--	--	--	--

I hereby certify that the above is true and correct.

Gas W. Walker

Sergeant Cottage No. Hapt

O. S. Spruill

1350  
167

REGISTER No. 6590

# Illinois Soldiers' & Sailors' Home

QUINCY, ILLINOIS.

*William E. Bonds*  
*Meredonia Morgan Co Ill*

Co. \_\_\_\_\_ Reg't \_\_\_\_\_  
E Co. 28<sup>th</sup> Reg't *Meredonia*  
Co. *Old* Reg't *Mary*

### CONTENTS

Admission Paper *1*  
Army Discharge \_\_\_\_\_  
Certificate of Service \_\_\_\_\_  
Pension Certificate *1 32.575* Will *✓*  
Admitted *December 19<sup>th</sup>* 1903

*Left 11<sup>th</sup> Div. 4<sup>th</sup> on ~~Jan~~*  
*March 20 1911 R. A.*  
*Dis ORV Nov 20 1911*  
*R. A. Mar. 21<sup>st</sup> 1914*  
*Dis Avos June 16 1914*  
*Writing OK*



# ILLINOIS SOLDIERS AND SAILORS HOME.

*Quincy, Ill., December 19 1903*

*The undersigned hereby instruct the clerk in charge of Post Office at Soldiers Home to deliver all mail from the Pension Department to the Superintendent.*

NAME	Registered Number	Co.	Reg't	State	Term of Service	Number of Certificate.	WITNESS.
<i>Mrs. Bonds</i>	<i>6590</i>	<i>E</i>	<i>28</i>	<i>Ill</i>	<i>Inf</i>	<i>32575</i>	<i>Joseph D. Stehan</i> <i>William C. Bonds</i>
		<i>US</i>			<i>20</i>		

6590

St. Louis Mo

Sept 18<sup>th</sup> 1864

Adjutant Soldiers Home  
Quincy Ill

Please send  
me my Discharge from  
Sailors & Soldiers Home  
my furlough expired  
Sept- 15<sup>th</sup> I was at  
work and could not  
write Before I am a  
member of Hospital 22  
you will Grately Oblige  
a comrade

W. C. Bond late  
Co. E. 28<sup>th</sup> Ill. address  
W. C. Bond  
907 Market St.  
St. Louis mo