

HEADQUARTERS
Illinois Soldiers and Sailors Home,

QUINCY, ILLINOIS.

Samuel J. Dennison, ⁽⁹⁾ of the town of *Waverly Ill Jan 16th* 1903
 County of *Morgan* and State of *Illinois*, formerly a Soldier of the United States
 of America, in the war against ⁽¹⁾ *the 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 *84* years old; that he is *5* feet and *8* inches high; that he is
 of *Dark* complexion, *Brown* eyes, and *Black* hair; that he was born in the ~~town~~ *State of Kentucky*
 in the *year 1818* of *May*, on the *11th* day
 of *May*, 18*48* that he has been ⁽²⁾ *once* enrolled in the U. S. A. service; in the war
 against *the Rebellion*, and in the war or the late Rebellion; and that he has been ⁽³⁾ honorably dis-
 charged 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>Waverly Ill 1862</i>	<i>Washington D.C. Pri</i>		<i>Co. G Regt. 101st Ill</i>	<i>Close of War</i>
2d.	<i>August 14 1862</i>	<i>June 7 1865</i>		<i>Co. Regt.</i>	
3d.				<i>Co. Regt.</i>	

That he now receives, on pension certificate number *12189*, a pension of *12.00* dollars a month,
 payable the day of next at the Pension Office.

That he owns property, real and personal, of the value of *Six Hundred* 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 *Labourer*

That he has ⁽⁴⁾ *a* wife; that he has *4* children now living; ages, respectively, ⁽⁵⁾ *28-26-20-58*
 years. That his postoffice address is *Waverly*, State of *Illinois*; that his nearest railway station is
Waverly, on the *Ill. & M. R.R.* Railway, in *Morgan* 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
S. J. Dennison, of *Waverly*, County of *Morgan* State of
Illinois; that, in case of his death, he desires all his personal effects to be sent to *him*
Waverly, at *Morgan* County of *Illinois*, State of

That he has not heretofore been a member of any Soldiers', Sailors', or other Charitable Home or Institution, excepting the
⁽⁶⁾ *None*

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⁾ *Old age and Rheumatism and 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 cheer-
 fully 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 *16th* day of *Jan 16* 1903
⁽⁹⁾ *W. J. Leonard*, Witness. ⁽⁸⁾ *Samuel J. Dennison* Applicant.
Mark

STATE OF ILLINOIS,

COUNTY OF

Wabery

ss.

I, J.H. Wampler

a (10)

Notary Public

of the town of Wabery, in and for said County, do hereby certify that the above named Applicant, to me personally and well known to be the identical person here represents himself to be, this day personally appeared before me, and that I then and there, at his request, plainly read to him the 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.

Samuel J. Denison, Affiant.

Subscribed and sworn to before me, this 16th day of January, A. D. 1903.

and official seal.

L. S.

J.H. Wampler, Notary Public

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) Hernia of right side and general debility from old age 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.

Samuel J. Denison, M. D.

Subscribed and sworn to before me, this 16th day of January, 1903.

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.

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 the 20th day of Jan, 1903; and that I then found him to be of a sound mind, and to be capable of earning his living by reason of his physical disability arising from (17) Old Age

Samuel J. Denison, Friday

Witness my hand.

C.E. Ehler, asst Home Hospital Surgeon.

Waverly Ill Jan 16-1903

Supt of Soldiers Home

Quincy Ill

Dear Sir

Inclosed find all
Papers required by you in
the Application of S J Harrison
for Admission to the Home.

Kindly send all Papers to
me - as he is hardly able to
look after any business
matters. Yours in F C & L

J. M. Joy
Post. Commander

W. 13
W
Warrantly Ills.
March 31 - 1864

Superintendent
Quincy Soldiers Home.

Dear Sir: I have
been recently called to
see Saml. Hemison an ex-
soldier and one of the in-
mates of your home, away
on furlough. He wishes me
to state to you the facts
in regard to his condition
so that you may grant him
an extension of time for re-
porting. My judgement
is that he ought not to leave
his residence for the
present under any con-
ditions or doct. of his ~~own~~

