

HEADQUARTERS
Illinois Soldiers and Sailors Home,
QUINCY, ILLINOIS

George W. Hamilton of the town of *Jacksonville*, in the 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 *63* years old; that he is *5* feet and *8* inches high; that he is of *Fair* complexion, *Blue* eyes, and *Light* hair; that he was born in the town of *Jacksonville* in the State of *Illinois*, on the *13* day of *July*, 1844, that he has been (2) *once* enrolled in the U. S. A. service; in the war against *Rebellion*, and in the war or the late Rebellion; and that he has been (3) *once* 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>Oct 15 1861 Jacksonville Ill</i>	<i>Sept 23 1863 Patches Mo</i>	<i>Private</i>	<i>Co. 2 Regt. Ill LA</i>	<i>Superseded by disability</i>
2d.				Co. Regt.	
3d.				Co. Regt.	

That he now receives, on pension certificate number *957 204*, a pension of *Six* dollars a month, payable the *15* day of next *April*, 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 *Baker*.

That he has (4) *one* wife; that he has *no* children now living; ages, respectively, (5) _____ years. That his postoffice address is *Jacksonville*, State of *Illinois*; that his nearest railway station is *Jacksonville*, on the *Wabash* 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 *William Hamilton*, of *Jacksonville*, County of *Morgan* State of *Ill*; that, in case of his death, he desires all his personal effects to be sent to *William Hamilton*, at *Jacksonville* County of *Morgan*, State of *Ill*.

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

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) *Heart trouble & kidney disease*

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 *3rd* day of *February*, 190*3*.

(9) *Joseph A. Shahan* Witness. (8) *George W. Hamilton* Applicant.

STATE OF ILLINOIS,

ss.

COUNTY OF _____

L. _____

, 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 _____ Tuesday the 3 day of _____, 1903; and that I then found him to be of a sound mind, and to be incapable of earning his living by reason of his physical disability arising from (17) _____

Nervous Debility

Witness my hand

W. E. Phelps
and

Home Hospital Surgeon.

To all whom it may Concern:



Know Ye, That George W. Hamilton
late A. Co. 95 Regiment Ill Inf

a member of THE NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS, who was
admitted on the 13th day of September, one
thousand nine hundred and eleven, is hereby

Honorably Discharged

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

Said George W. Hamilton was born in Illinois
is 64 years of age 5 feet 8 1/2 inches high,
complexion, fair eyes, blue hair, gray, and by occupation when
admitted a Painter

Pensioner at \$ 22 per month. Certificate No. 644051

Given at NORTHWESTERN Branch, National Home D. V. S.,
this 23 day of December, 1911

[Signature]
Governor.

Oklahoma City Okla T.
February 25th 04

Adjt - S. P. Hooney
I. S. S. Hanks
Quincy Ills.

Dear Sir

I was called to Okla
from Colo. some time ago, & on account of sickness
of my niece. You sent me order for half fair
transportation to this point which I rec^d. and used.
Many thanks for the same. I did not get through my
business in Colo. and wish to return to settle up my
affairs before returning to Quincy, and would like
order for half fair back to Pueblo. If agreeable.

Yours Respectfully
George W. Hamilton

818 N. Broadway.

Oklahoma City -
Okla T.

A. B. My furlough expires
2 day of March 1904. Please
extend three months
and oblige
G. W. H.

Okla. to Ark City on a D. & G.
Ark City to Pueblo on M. & P.

Jacksonville Ills.

Jan 27th 03

Superintendent -

Ills L & Howard

Quincy Ills. 3.

Dear Sir

Enclosed please find my
discharge from Danville Branch
N.H. with other papers will fill -
application blanks at home. If you
can send order for half fare
passage will pay for it.

Yours Respectfully

George W. Hammett

Jacksonville

No 852 W. College Ave Ills.

