

HEADQUARTERS
Illinois Soldiers and Sailors Home,
 QUINCY, ILLINOIS

Oct 13th 1905

Thomas D. McLaughlin, (0) 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) 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 72 years old; that he is 5 feet and 3 inches high; that he is of Fair complexion, Blue eyes, and gray hair; that he was born in the town of London in the Franklin of Pa., on the 28 day of May, 1834; that he has been (2) once enrolled in the U. S. A. service; in the war against Rebellion, and in the war of 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.	August 2 ^d 1862	June 7 1865	Pri	Co. "E" Regt. 101 st	close of war
2d.	at Jacksonville	Washington		Co. Adjt. Inf'y	
3d.	Lee	D6		Co. Regt.	

That he now receives, on pension certificate number 861.225, a pension of 12 dollars a month, payable the 4 day of next Jan 1906, at the Chicago Pension Office.

That he owns property, real and personal, of the value of none 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 carpenter.

That he has (4) a wife; that he has 8 children now living; ages, respectively, (5) 35. 45. 38. 27. 24. 26. 23 years. That his postoffice address is Jacksonville, State of Illinois; that his nearest railway station is Jacksonville Ill, 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 John Ruyle, of Jacksonville, County of Morgan, State of Illinois; that, in case of his death, he desires all his personal effects to be sent to John Ruyle, 627 S. Prairie, 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) 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

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 13th day of Oct 1905

(9) J. L. Summers Witness. (8) Thomas D. McLaughlin Applicant.

STATE OF ILLINOIS.

County of ... J. L. SIMMS, 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) Thomas S. McLaughlin, Affiant.

Subscribed and sworn to before me, this 13th day of Oct, 1905.

Witness my hand and official seal.

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

CERTIFICATE OF IDENTIFICATION.

I do hereby certify, upon honor, that I have personally known Thomas D. McLaughlin 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) George H. Dumas, Chief of Police (14)

CERTIFICATE OF A LOCAL PHYSICIAN.

I hereby depose and state that I have carefully examined the above named Applicant Tho. D. McLaughlin as to his disability, and I now find that he has (15) Rheumatism of both shoulders of Pectoral muscles on left side occasionally of diaphragm & lumbar muscles enlargement of prostate gland & conditions with such attack of cold as broken down to such an extent as to prevent him from earning his own living. And I hereby certify that he has no known, manifest, or discernible 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.

E. S. Herritt, M. D.

Subscribed and sworn to before me, this 13th day of Oct 13th 1905. And I certify that I am personally acquainted with said affiant E. S. Herritt M D, 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.

J. L. Simms (16)

CERTIFICATE OF SOLDIERS HOME SURGEON.

I hereby certify upon honor that I carefully and critically examined Thomas D. McLaughlin the above named Applicant, as to his mental and physical condition, at the Hospital of this Institution, on Thurs. he 19 day of Oct, 1905; and that I 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) Right Inguinal Hernia, Rheumatism & Age.

Witness my hand C. E. Chley, asst. Home Hospital Surgeon.

STATE OF ILLINOIS, } ss.
 COUNTY OF ADAMS.

In the matter of the relationship of Thomas S M Laughlin

, being first duly sworn according to law,
 deposes and says that he formerly resided at Jacksonville Ill,
 that he is married, that his wife, Sarah M Laughlin
 resides at Springfield 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>Wm N M Laughlin</u>	<u>Son</u>	<u>Jacksonville Ill</u>
<u>Thomas "</u>	<u>"</u>	<u>Springfield "</u>
<u>Juniatta Rule</u>	<u>Daughter</u>	<u>Jacksonville "</u>
<u>Sarah E M Laughlin</u>	<u>"</u>	<u>Springfield "</u>
<u>Mollie M Mamas</u>	<u>"</u>	<u>" "</u>
<u>Benj M Laughlin</u>	<u>Son</u>	<u>" "</u>
<u>Charles "</u>	<u>"</u>	<u>" "</u>
<u>Anna "</u>	<u>Daughter</u>	<u>" "</u>

And further affiant saith not.

Subscribed and sworn to before me, this

T. S. M Laughlin
19th day of Oct

A. D. 1905.

[Signature]
W. D.

INVENTORY of the Effects of

Thos. D. McLaughlin

No. *7277*

late *E* Co. *102nd* Reg't *Ill. Inf.*

Vols., who died

on the *28* day of *July* 19*10*, at *Illinois Soldiers and Sailors Home.*

ARTICLES

VALUE

Dolls. Cts.

HOW DISPOSED OF.

Personal effects

We certify that the above Inventory is correct, and that we have, this _____ day of _____ 19____, carefully examined each of the articles therein named, and have written opposite each our estimate of its value, and what disposition should, in our opinion, be made of it.

Mrs John W. R. ...

APPROVED:

Superintendent.

Board of Appraisers.

Claim No. 104234
Disallowed July 21, 1950
MVA

To all whom it may Concern.



Know ye, That Thomas S. McLaughlin
a Private of Captain Myron H. Lunt's
Company, (E), 101st Regiment of Illinois Infantry
VOLUNTEERS, who was enrolled on the 3rd day of August
one thousand eight hundred and sixty two to serve three years or
during the war, is hereby **Discharged** from the service of the United States
this 21st day of June, 1865, at New
Washington D. C. by reason of G. O. No. 77 was Dept. C. S.
(No objection to his being re-enlisted is known to exist.)*

Said Thomas S. McLaughlin was born in Franklin County
in the State of Pennsylvania, is 28 years of age.
5 feet 8 1/2 inches high, Dark complexion, Light eyes,
Dark hair, and by occupation, when enrolled, a farmer
Given at New Washington this 21st day of
June 1865

"This discharge does not bar payment up to time of arrival at State Treasury" *Edwards*

*This sentence will be erased should there be anything in the conduct or physical condition of the soldier rendering him unfit for the Army.

[A. G. O., No. 99.]



Edwards

Capt 150th M. A. Vols
Commanding the Reg't.
A. C. M., 1st Div., 20th A. C.

Myron H. Lunt
Capt Comdg.
Co. C. 101st Ill. Vols.

OATH OF IDENTITY.

.....
of the Town of.....
County of..... in the State of.....

On this..... day of..... in the year
one thousand eight hundred and sixty..... personally appeared
before me, the undersigned, a Justice of the Peace for the County
and..... above mentioned,.....
who, being duly sworn according to law, declares that he is the
identical..... who was
a..... in the Company commanded by
Captain..... in the Regiment
..... commanded by.....

that he enlisted on the..... day of.....
for the term of..... and was discharged
a..... on the..... day
of..... by reason of.....

Sworn and subscribed to before me this day and year above written.

I certify that..... before
whom the above affidavit purports to have been made, is a Justice
of the Peace duly authorized to administer oaths, and that the
above is his signature.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed
my official seal, this..... day of.....
..... in the year.....
at..... in the State of.....

Clerk of the.....

*This discharge was filed for Record
January 22nd 1867 and duly
Recorded in the Recorders Office
in Morgan County Illinois in
Book No. 1. of Soldier Discharges
a Page 258. Stephen Sutton clk
Recorder*

CO. 101st REGT. ILL. INF.

1867

RECORDED

13845

INVALID.

I, Thomas D McLaughlin, make oath that I am the identical person named in pension certificate No. 861225 dated 16 Apr 1907, in my possession and now exhibited; that I performed the service upon which said certificate was issued; that I have not been employed or paid in the Army, Navy, or Marine Corps of the United States during any part of the period for which pension is therein provided or is now due thereon; that I am entitled to and hereby make claim for payment of Twenty two and 50/100 DOLLARS \$ 22.50 pension now due, at the rate of 15 dollars per month, from JULY 4 1910 to OCTOBER 4 1910

and that my post-office address to which I desire the check in payment mailed is as follows:

Street and No. or R. F. D. route.

Pensioner's signature must be written here in full as name appears in the head of this voucher.

Post office.

If pensioner signs by mark or illegibly, two witnesses who write.

State.

State of _____, County of _____, ss.

Subscribed and sworn to before me this _____ day of _____, 1910, and I certify that the pensioner, above named, *has this day exhibited to me his pension certificate*, above described, and was fully identified as the pensioner named therein.

[L. S.]

Magistrate's signature.

Official character.

(Seal must be above this line.)

Post-office address.

2059

(If any erasures or alterations appear on this voucher, the magistrate must certify above his signature to the jurat that they were made before its execution.)

3-1000.

\$22.50

861225

From JULY 4 1910 To OCTOBER 4 1910

PAYMENT WILL NOT BE MADE ON THIS VOUCHER IF EXECUTED BEFORE THE DATE LAST GIVEN.
PENSIONER'S NAME MUST BE SIGNED HERE AND POST-OFFICE ADDRESS GIVEN AS ABOVE.

Name.

Street and No. or R. F. D. route.

Post-office.

One-half paid wife
Act. of March 3, 1899.

State.

Commissioners order
 dated Apr 30 1908

Illinois Soldiers and Sailors Home.

Quincy, Ill. July 28 1900

To the Adjutant:

Thomas M Laughlin Co. E 101st Inf Regt.

died in Hospital at 6:15 A M., aged 76 years.

Names and address of Relatives and Friends

Reg. No. 7277

G S Barnes Hospital Steward.

Hospital Illinois Soldiers and Sailors Home.

Quincy, Ill. July 29 1900

TO THE ADJUTANT:

This is to Certify, That

Thos M Laughlin

Reg. No. 7277

late of Co.

E 101

Reg't.

1st Inf.

died in

Hospital

Age 76

Cause of Death

Heat Prostration

T B Mot

Surgeon.

copy

SHORT WILL.

ILLINOIS SOLDIERS' AND SAILORS' HOME, QUINCY, ILL.

IN THE NAME OF GOD, AMEN.

Thomas S. McLaughlin of Illinois Soldiers' and Sailors' Home in the County of Adams and State of Illinois, being of sound mind and memory, and considering the uncertainty of this frail and transitory life, do, therefore, make, ordain, publish and declare, this to be my last, Will and Testament.

First. I order and direct that my Execut *or* hereafter named, pay all my just debts and funeral expenses as soon after my decease as conveniently may be.

Second. After the payment of such funeral expenses and debts, I give, devise and bequeath all worldly goods of which I may die possessed,

to *My soul in hand*
John W. Reche
Jacksonville
Morgan County
Illinois

Lastly, I make, constitute and appoint *Wadsworth Supt or his*
Successors in Office to be Execut *or* of this my last Will and Testament, hereby revoking all former Wills by me made.

In Witness Whereof, I have hereunto subscribed my name and affixed my seal, the *19* day
October in the year of our Lord One Thousand Nine Hundred *Five*
Signed Thomas S. McLaughlin [SEAL]

This instrument was, on the day of the date thereof, signed, published and declared by the said testator *Thomas S. McLaughlin* to be his last Will and Testament, in the presence of us, who at his last request have subscribed our names hereto as witnesses in his presence, and in the presence of each other.

Signed B. P. Lawson
Signed J. O. Winget