

ILLINOIS SOLDIERS AND SAILORS HOME

APPLICATION OF HUSBAND AND WIFE FOR ADMISSION

STATE OF ILLINOIS } ss.
County of Adams

On this 21 day of Sept A. D., 1909, personally appeared before me, Martin V Parker, who being duly sworn, upon oath says:—

1. My name is (1) Martin V Parker, and my age is 72 years. I am 5 feet and 10 inches high. I am of Fair complexion, gray eyes and gray hair. I was born in the town of Jefferson in the county of _____, state of Ohio, on the 30 day of Jan 1837.

I have been enrolled in the U. S. A. service: once in the war against (2) Rebellion, and in the war of the late Rebellion. I have been (3) _____ times discharged from the service of the United States. The following is a true statement of the time and place of my enrollment and discharge from said service, and the cause of my discharge, and my rank at the respective date, is as follows:

No.	When and where enrolled	When and where discharged	Rank	Company and regiment	Cause of discharge
1st.	<u>July 31 - 1862</u>	<u>June 5 - 1865</u>	<u>Pri</u>	<u>Its vol Co. 85 Regt.</u>	<u>ex of Service</u>
2nd.	<u>Astoria Ill</u>	<u>Washington Dc</u>		<u>Co. Regt.</u>	
3rd.		<u>35 Ill</u>		<u>Co. Regt.</u>	

2. I now receive on pension certificate numbered 7367853, a pension of 15 dollars per month, payable the 4 day of next Oct, at the Chicago Illinois Pension Office.

3. On the 10 day of Jan A. D. 1883, at Jacksonville in the county of Morgan, in the state of Illinois, I was lawfully married to Bliza J McCarroll, with whom I have ever since, and am now living with and supporting as my lawful wife.

4. I have (4) 4 children now living, ages respectively 48 41 42 years. My postoffice address is Jacksonville State of Illinois, my nearest railway station is Jacksonville, on the Four railway in Morgan County, in said state. In case of illness or death I desire that notice be sent to Mrs Della Whitney, in the town of Jacksonville, county of Morgan, state of Illinois

The name and address of the _____

I have been enrolled in the U. S. A. service: once in the war against (2) Rebellion, and in the war of the late Rebellion. I have been (3) once times discharged from the service of the United States. The following is a true statement of the time and place of my enrollment and discharge from said service, and the cause of my discharge, and my rank at the respective date, is as follows:

No.	When and where enrolled	When and where discharged	Rank	Company and regiment	Cause of discharge
1st.	July 31-1862	June 5-1865	Pri	Alb Vol # Co. 85 Regt. Inf	ex of Service
2nd.	Astoria Ill	Washington Dc		Co. Regt.	
3rd.		35 Ill		Co. Regt.	

2. I now receive on pension certificate numbered 736,853, a pension of 15 dollars per month, payable the 4 day of next Oct, at the Chicago Illinois Pension Office.

3. On the 10 day of Jan A. D. 1883, at Jacksonville in the county of Morgan, in the state of Illinois, I was lawfully married to Bliza J McCarbide, with whom I have ever since, and am now living with and supporting as my lawful wife.

4. I have (4) 4 children now living, ages respectively 48-41-42 years. My postoffice address is Jacksonville State of Illinois, my nearest railway station is Jacksonville, on the Four railway in Morgan County, in said state. In case of illness or death I desire that notice be sent to Mrs Della Whitney, in the town of Jacksonville, county of Morgan, state of Illinois.

The name and address of the person to whom all my personal effects shall be sent in case of death is, same, at same, in the county of same state of same. My trade or occupation is that of a Carpenter.

5. I am so far disabled by reason of age and infirmity as to be incapable of earning a living for myself, and my said wife is without separate property or income sufficient to afford herself with a living, or which combined with my means will enable us to live in comfort; that I have not heretofore been a member of any Soldiers or Sailors Home, or other charitable institution, except (5) —.

6. That I desire to become a member of the Illinois Soldiers and Sailors Home, and my said wife Elizaj Parker, desires to become a member of the home with me, and joins me in this application for membership therein. That I have at all times heretofore, supported and adhered to the government of the United States of America, and that I have not at any time been engaged in, or countenanced, or aided, or abetted, the cause of the late Rebellion. That if we shall be admitted to be members of said Home, we 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 we will cheerfully do and perform any and all things that shall be required of us, by those in authority over us, and that we will promptly and willingly obey all lawful orders that we shall receive from any officer of the Home, so long as we shall remain members thereof.

IN TESTIMONY WHEREOF we have set our hands this 21 day of Sept, 1909.

(7) C. A. Lester
Witness

(8) Martin W. Parker
Elizaj Parker
Crane
Applicants

CERTIFICATE OF IDENTIFICATION

I do hereby certify, upon honor, that I have personally known.....

and....., the above applicants, for at least two years last past, and that to the best of my knowledge and belief, the statements contained in their foregoing application are entirely true, and especially that as to the time of their residence in Illinois, or his service in an Illinois organization. And I further state that they have no known mental disorder and that they require no special attendants; that they can properly be allowed to go at large and that they can safely be quartered with feeble and helpless men and women.

WITNESS my hand (8).....

(9).....

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 (10).....

.....
to such an extent as to prevent him from earning a living for himself and wife. And I hereby certify that they have no known, manifest or discoverable disorder; that they have no need of attendants; that they may properly be allowed to go at large and that they can safely be quartered with men and women who are old and feeble.

.....
M. D.

Subscribed and sworn to before me, this.....day of..... A. D., 19..... 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, and an honest man and a capable physician in the community and among his fellow physicians, where he lives.

(11).....

CERTIFICATE OF A SOLDIERS HOME SURGEON

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 (10)

to such an extent as to prevent him from earning a living for himself and wife. And I hereby certify that they have no known, manifest or discoverable disorder; that they have no need of attendants; that they may properly be allowed to go at large and that they can safely be quartered with men and women who are old and feeble.

M. D.

Subscribed and sworn to before me, this _____ day of _____ A. D., 19____. 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, and an honest man and a capable physician in the community and among his fellow physicians, where he lives.

(11) _____

CERTIFICATE OF A SOLDIERS HOME SURGEON

I hereby certify upon honor that I have carefully and critically examined Martin V.

Parker, the above named applicant as to his mental and physical condition, at the hospital of this Institution, on the 21 day of Sept, 1909; and that I found him to be of a sound mind, and to be inc capable of earning his living by reason of his physical disability arising from (12)

Impaired eyesight & Age
His wife has rheumatism.

Witness my hand

W. C. Stahl
Home Hospital Surgeon

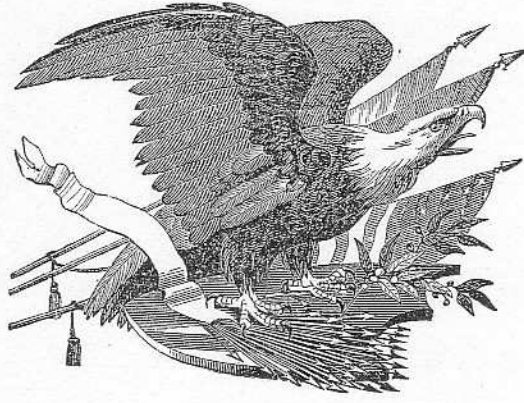
ORDER ADMITTING APPLICANT

The application of the said _____ and _____, together with the said several certificates, signatures and jurats, having been found to be duly and formally made, and the Superintendent being satisfied that the applicants have shown themselves to be lawfully entitled to admission to the Home, it is hereby ordered that he is now duly admitted as a member thereof, this _____ day of _____, 19____

Superintendent

8755

CERTIFICATE OF SERVICE.



To all Whom it May Concern:

This is to Certify, That Martin V. Parker, who was enrolled on the 31 day of July, one thousand eight hundred and sixty-two, to serve three years, was Discharged on the 5 day of June, 1865, by with company, at Washington, D.C., while holding the grade of private in Co. H, 85 Regiment of Illinois Infantry Volunteers

This Certificate is given upon evidence that the original discharge has been lost or destroyed, and in all cases upon the condition imposed by the Act of Congress approved March 3, 1873, that it "shall not be accepted as a voucher for the payment of any claim against the United States for pay, bounty, or other allowance, or as evidence in any other case."

Given at the War Department, Washington, D. C., this 5 day of October, A. D. 1895.

By authority of the Secretary of War:

T. C. Amisworth
Colonel, U. S. Army
Chief, Record & Pension Office.
20

Hospital Illinois Soldiers and Sailors Home.

Quincy, Ill., Feb. 16. 1916

TO THE ADJUTANT:

This is to Certify, That Martin V. Parker Reg. No. 8756
late of Co. A. 85 Reg't, Ill. Inf
died in Hospital, Apts. 84. Cause of Death Septicemia
O. E. Cole, M.D.
Surgeon.

Illinois Soldiers' and Sailors' Home.

Quincy, Ill., Feb 16 1916

To the Adjutant:

Martin V Parker Co. H 85 Ill Inf Regt.
 died in Hospital at 8.45 A M., aged 79 years.

Names and address of Relatives and Friends

Reg. No. 8755

B S Barnes

Hospital Steward.

Hospital Illinois Soldiers and Sailors Home.

Quincy, Ill., Feb. 16. 1916

TO THE ADJUTANT:

This is to Certify, That Martin Parker Reg. No. 8755
 late of Co. H 85 Reg't, Ill. Inf.
 died in Hosp. Age 75 Cause of Death Septicemia
C. E. Ellis
 Surgeon.

ILLINOIS SOLDIERS AND SAILORS HOME

Quincy, Ill., Sept 21st 1909

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 Certificates	WITNESS
<u>Martin V Parker</u>	<u>8755</u>	<u>H</u>	<u>85</u>	<u>Ill</u>	<u>35</u>	<u>734 853</u>	<u>C. E. Lester</u>
<u>Martin V Parker</u>							

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

In the matter of the relationship of Martin V Parker

, being first duly sworn according to law,
 deposes and says that he formerly resided at Jacksonville Illinois,
 that he is now married, that his wife, Eliza Parker
 resides at Jacksonville Illinois, 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.
Eliza Parker	Wife	Jacksonville Ills
Joseph W Parker	Son	Denver Colorado
James Alex Parker	Son	" "
William Parker	Son	" "
Nora Gward	Daughter	" "

Martin V Parker

And further affiant saith not.

Subscribed and sworn to before me, this 21st day of Sept

A. D. 1909

B. A. Lester J.P.

DUPLICATE

ILLINOIS SOLDIERS' AND SAILORS' HOME

Record of Martin V. Parker Reg. No. 8755 Co. H Regt. 85 Ill. Inf. State

BAKER-VANTER CO. MANUFACTURERS CHICAGO-IOLYOKE

MONTH	DATE		PERSON TO BE NOTIFIED IN CASE OF DEATH	P. O. ADDRESS	RELATIONSHIP	REMARKS
	DAY	YEAR				
2	3	16	Frederick Still,	Murrayville, Ill.		

COTTAGE INVENTORY

B. S. Barnett Sergeant, Cottage No. 74
 Received the above described personal effects of *Martin V. Parker*

Registry No. 8755
B. S. Barnett Hospital Steward

HOSPITAL RECORD

Died 8:45 P. M. Feb. 16, 1916.

HOSPITAL INVENTORY

Received personal effects.

John E. Wright

I hereby certify that the above is a true and correct inventory of the personal effects of Martin V. Parker Deceased.

Approved:

A. S. Barnes Hospital Steward

_____ Adjutant