

Head Quarters

Illinois Soldiers and Sailors Home

Near Quincy, Illinois.

APR 11 1898, 1898.

Fredrick Sanderman, (P) of the Town of Mendota, in the County of Morgan, and State of Ill, 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 52 years old, that he is 5 feet and 5 inches high; that he is of Light complexion, Black eyes, and Light hair; that he was born in the town of Cayuga in the Cass of Ill, on the 9th day of January, 1846; that he has been (2) enrolled in the U. S. A. service; in the war against Mexico, and in the war of the late Rebellion; and that he has been (3) 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 of 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.	Feb 23 - 1865 Jacksonville Ill	Dec. 16, 1865 Pine Bluff Ark	Priv.	Co. G Regt. 18 Ill Inf	Order of Mar. Dept
2d.				Co. Regt.	
3d.				Co. Regt.	

That he now receives, on pension certificate number 440367, a pension of \$8.00 dollars a month, payable the 4 day of next July - 1898, at the Chicago Pension Office.

That he owns property, real and personal, of the value of \$0.00 dollars, and no more; that he has no means of self-support other than that above named; that his trade or occupation is that of a Harness Maker

That he has (4) no wife; that he has 2 children now living; ages, respectively, (5) 12 and 22 years. That his postoffice address is Mendota, State of Illinois; that his nearest railway station is Mendota, on the Watash 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 Anna Sanderman, of Mendota, County of Morgan, State of Ill; that, in case of his death, he desires all his personal effects to be sent to above named, at, County of, 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.

That he is so far disabled by (7) Chronic Deafness - & disorder of Rectum

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 11 day of April, 1898.

(8) E. L. Higgins, Witness.

(9) Fredrick Sanderman, Applicant.

COUNTY OF Adams

ss.

I, Giles H. Bush, a (10) Notary Public

of the town of Quincy, 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) Fredrick Sandman

Affiant.

Subscribed and sworn to before me, this 11 day of April, A. D. 1898. Witness my hand and official seal.

L. S.

Giles H. Bush (12) Notary Public

CERTIFICATE OF IDENTIFICATION.

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

James Neville

(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, A. D. 189. 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 Fredrick Sandman, the above named Applicant, as to his mental and physical condition, at the Hospital of this Institution, on Monday the 11th day of April, 1898; and that I then found him to be of sound mind, and to be incapable of earning his living by reason of his physical disability arising from (17) Hemorrhoids

& Chronic Diarrhea

Witness my hand

R. H. Jones

ORDER ADMITTING APPLICANT.

The application of the said Frederick Sanderson, 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 applicant has shown himself to be lawfully entitled to admission to the Home,—it is hereby ordered that he be now duly admitted as a member thereof, this 11 day of April, 1898.

W. S. Somerville

~~GEORGE W. FOGG~~
Superintendent.

HOW TO FILL APPLICATION BLANKS.

- | | |
|---|--|
| <ol style="list-style-type: none"> 0. Give full name of the Applicant. 1. Either "Mexico and the late Rebellion," or one of them. 2. Here say once, twice, or three times. 3. Here say once, twice, or three times. 4. Here say a wife, or no wife. 5. Here give their ages, from youngest to oldest. 6. Here give the name of any Home or other Institution of which he has been a member. 7. Here state, <i>in his own words</i>, what it is that ails or disables him. 8. Here Applicant will sign his full name, or make his mark. 9. Here the witness will sign <i>his</i> name. 10. Here write "Notary Public," "Justice of the Peace," or "Clerk of Court." | <ol style="list-style-type: none"> 11. Here Applicant will sign his <i>full name</i>, or make his mark. 12. Signature and title of the Justice or Notary. 13. To be made and signed by any Judge of any county or state court, by any Mayor, County or Circuit Clerk, Justice of the Peace, Police Magistrate, or Adjutant or Commander of any G. A. R. Post. 14. Here write official title. 15. The physician will here state tersely, but fully, as far as he can learn, <i>every</i> cause or disorder that tends in any degree to render the Applicant <i>incapable of earning his own living</i>. 16. Name and official title of Notary or Justice. 17. Here state <i>minutely</i> what disorder, ailment, disease, or cause, it is that, in your judgment, <i>disables the Applicant and renders him incapable of earning his own living</i>. |
|---|--|

SPECIAL INFORMATION FOR APPLICANT.

READ THIS CAREFULLY. For it will *avail you nothing*, when you come before the Superintendent for examination on the facts alleged by you in your application, to say you are ignorant of what is here and herein plainly and explicitly set forth for your information:

1. Have some capable person, *who writes a fair hand*, fill all the blanks in your application.
2. Have every blank in the application properly filled, and every Certificate, except that of the Surgeon of the Home, duly made and signed, and every jurat duly executed, signed and sealed by the Clerk, Notary or Justice of the Peace making the same.
3. Send your application, so prepared, by mail or otheswise, *with your last discharge and all your pension papers*, to the Superintendent of the Home.
4. On his receipt of your application, and your last discharge, and all your pension papers, all in due form, transportation will be sent you, and you will be ordered to report at the Home for *examination by the Home Surgeon as to your disability*, and for examination by the Superintendent *as to the allegations of fact made by you in your application for admission*.
5. If all your statements are found to be true, and the Surgeon finds you to be so far disabled as to render you *incapable of earning your own living*, you will then be admitted to the Home, and not otherwise.
6. If, for any reason, you are found not to be eligible for admission, you will not be admitted to the Home.
7. If you fail to be admitted, no transportation to your home will be furnished you. Therefore, you should bring sufficient money to pay your return fare.
8. When permitted to leave the Home on Furlough, or on Pass of two or more days duration, you will be required to wear your citizen's clothing. You will not be allowed to wear Home or State clothing, when so absent.

TO BE ELIGIBLE FOR ADMISSION.

1. The law requires that you shall have served in the U. S. A. service, in the army or navy, in the war with Mexico, or in the late Rebellion.
2. That you shall have been honorably discharged from that service.
3. That you shall have lived and resided, CONTINUOUSLY and in good faith, FOR THE LAST TWO YEARS, in the State of Illinois.
4. That you shall have been rendered INCAPABLE OF EARNING YOUR OWN LIVING, AND SHALL NOW BE INCAPABLE OF EARNING YOUR OWN LIVING, through the exigencies of your military service, by reason of old age, or by means of some other PRESENT DISABILITY.
5. That you shall now have NO PROPERTY OR OTHER SUFFICIENT MEANS OF LIVING.
6. That you shall be of sane mind; that you shall not be in need of an attendant; that you shall be capable of ministering to your own personal wants; that you shall have NO CONTAGIOUS OR INFECTIOUS DISEASE that would render your residence in the Home DANGEROUS to others; that you may SAFELY be quartered with men who are feeble and incapable of self-defence.
7. NO INSANE OR DEMENTED PERSON CAN BE RECEIVED OR CARED FOR AT THIS INSTITUTION. The State has elsewhere provided for the care and treatment of such persons.

W. S. Somerville

~~GEORGE W. FOGG~~
Superintendent.

STATE OF ILLINOIS
HENRY HORNER, GOVERNOR
DEPARTMENT OF PUBLIC WELFARE

GENERAL OFFICE

SPRINGFIELD

A. L. BOWEN, DIRECTOR
MRS. BLANCHE FRITZ, ASSISTANT DIRECTOR
JOHN C. WEIGEL, ADMINISTRATIVE ASSISTANT
JOSEPH E. RAGEN, SUPERINTENDENT OF PRISONS
JAMES P. COX, FISCAL SUPERVISOR
PAUL L. SCHROEDER, M. D., CRIMINOLOGIST
H. DOUGLAS SINGER, M. D., ALIENIST
W. C. JONES, SUPERVISOR OF PAROLES

August 1, 1938

Mrs. Barbara Hanna
208 S. 8th Street
Fort Pierce, Florida

Dear Madam:

Your letter of July 20th to
Director Bowen has been referred to me for
reply.

This is to advise you that I am
today forwarding your request to Captain K.
A. Elmore, managing officer of the Soldiers'
and Sailors' Home, Quincy, for his considera-
tion.

Very truly yours,

Blanche Fritz
Assistant Director.

BF:mj

cc: Captain K. A. Elmore
Managing officer
Soldiers' & Sailors' Home
Quincy, Ill.

The above for your information.

BF.

August 3, 1938

Mrs. Barbara Hanna,
208 S. 8th St.,
Fort Pierce Florida.

Dear Madam:

Your letter dated July 20 to Mr. A. L. Bowen, Director Department of Public Welfare, has been referred to this office for attention.

Please be informed that the law makes no provision for the admission of soldiers' daughters' to the Illinois Soldiers' & Sailors' Home. The State of Illinois does provide care for these soldiers' dependents at the Illinois Soldiers' Widows' Home, located at Wilmington, Illinois. Full information on eligibility may be had by writing the Managing Officer of that institution.

Very truly yours,

Kenneth A. Elmore,
Managing Officer.

AWM/M

LOCAL MANAGER:

GENERAL THOMAS J. HENDERSON, Princeton, Ill.

GOVERNOR:

COLONEL ISAAC CLEMENTS.

MAJOR M. J. BARGER, Treasurer.
DR. D. C. JONES, Surgeon.

CAPTAIN E. B. WHEELER, Quartermaster and C. of S.
REV. MELCHIOR AUER, Chaplain.

National Home, Danville, Ill.

June 3rd 1902

S. P. Mooney, Adjutant:

Illinois S. & S. Home.

Quincy, Ills.

In answer to yours of the 2^d inst. concerning Frederick Sandman
G. Co 18th Ills Infy. I am directed by the Governor to state that he
is a member of this Branch Home, now on furlough, a letter was
received May 30 from Mrs J. B. Seymour (sister) #1240 Michigan
Ave Chicago, stating he had met with an accident, and his
relatives at Meridisia Ills. could not care for him properly and
requested that Transportation be sent him to return to our Hospital
request for 1/2 fare was sent him at Meridisia.
If he requests his discharge from the Home over his own sign-
-ature, and will return the Home Clothing taken away by
him amounting to \$16³⁰, an honorable discharge from the
Home, and his papers can be sent at once,
Otherwise if he demands his papers without returning the Clothing
his papers will be sent him, and he will be carried absent
without leave 60 days, and then be dropped from the rolls owing the
Home the Amount for Clothing.

Very Respectfully
Geo. W. D. ...
Adjutant

LOCAL MANAGER:

GENERAL THOMAS J. HENDERSON, Princeton, Ill.

GOVERNOR:

COLONEL ISAAC CLEMENTS.

MAJOR M. J. BARGER, Treasurer.
 MAJOR D. C. JONES, Surgeon.
 CAPTAIN E. B. WHEELER, Quartermaster.

CAPTAIN JOHN W. NEWLON, Commissary of Subsistence.
 REV. MELCHIOR AUER, Chaplain.
 REV. FELIX C. DUFFY, Chaplain.

National Home, Danville, Ill., May 14, 1903.

S.P. Rooney,
 Adjt. Ills. S. & S. Home,
 Quincy, Ills.
 Sir:

In answer to yours of 13th inst., the Governor directs me to state that, as Frederick Sandman, late G, 18 Ills. Inf., is a member of this Branch Home, he can receive his papers only on the following conditions:

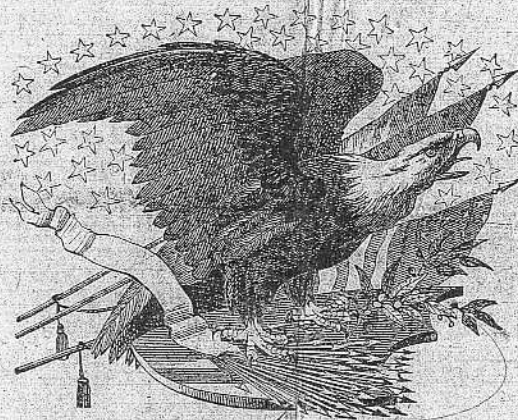
He is indebted to the Home for uniform clothing to the amount of \$16.30, and the rule is that he cannot take his discharge while so indebted.

His papers can be sent him, and he be dropped from the rolls, but this indebtedness must be squared up when he comes to be readmitted to a National Home.

Please advise us as to his wishes in the matter, as he may not wish to lose his membership under these conditions. His pension Certificate is in possession of this Home.

Respectfully,
 W. H. Platt, acting Adjt.

To all whom it may Concern.



Said Jan 2/66
W C Keister
Mesa

Know ye, That Frederick Sandman
a Private of Captain James R Green's
Company, (G) 18th Regiment of Missouri Infantry
VOLUNTEERS, who was enrolled on the Twenty Third day of February
one thousand eight hundred and Sixty Five did serve One year or
during the war is hereby **Discharged** from the service of the United States
this Sixteenth day of December 1865 at Pine Bluff Ark
Under Circular by reason of 30 from War Dept AGO Series of 1865
(No objection to his being re-enlisted is known to exist.)

Said Frederick Sandman was born in
in the State of Missouri is Nineteen years of age,
Five feet Two inches high, Light complexion, Hazel eyes,
Light hair, and by occupation, when enrolled, a Farmer
Given at Pine Bluff Ark this Sixteenth day of
December 1865.

Henry Sherman
Capt. Comdg. Muster
Commanding the Regt.
Dept of Ark

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

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

J. R. Green
Capt Co G 18
Mo Inf Vol

Fort Polk Fla. July 20-38.

Mr W. L. Bowen

Dear Sir.

I was advised by the adjutant of the Quincy S. S. home to write you, in regard, to entering the home as my parents were both members of the home in Quincy for a number of years. My father entered the home in 1898. and died there in

he was the harness maker under Capt Somerville also Capt Andrew I am a widow without support and as present. am living down here with my daughter who has been with U. P. A. but owing to ill health she was sent to the sanitarium & had to give up her

work in the sewing room. I was a resident of Quincy for 16 years & have been a widow for 4 years I am unable to work on account of rheumatism & I need a home badly: I shall be very glad to hear from you as soon as convenient about this.

Yours Truly.

Mrs Barbara Hanna
208 So 8th St
Ft Pierce
Fla

P.S. My fathers name was

Frederick Sandeman and his
records are in the Quincy S. S.
home

4364

Illinois Soldiers' and Sailors' Home

Quincy, Ill., Sept 25, 1920

To the Adjutant:

Frederick Sandman Co. G 18. Ill Inf Regt.

died in Hospital at 2¹⁵ M., aged 73 years.

Names and addresses of Relatives and Friends

Mrs. Harry B Godley (dau)
30th + State, Quincy Ill

Reg No.

4314

Gail Webber

Hospital Steward

11

(18516-1M-4-19)

Hospital Illinois Soldiers' and Sailors' Home

Quincy, Ill. Sept. 25 1920

To the Adjutant:

THIS IS TO CERTIFY, That

Frederick Sandman Reg. No. 4314

late of Co.

G. 18. Ill Inf.

Reg't

died in

Hospital, age 73

Cause of death

Cerebral Hemorrhage
C. E. Egan

Surgeon

Hospital Illinois Soldiers and Sailors Home.

Quincy, Ill., Mar 20th 1915

TO THE ADJUTANT:

This is to Certify, That Anna Sandman Reg. No. 108

late of Co. _____ Reg't, _____

died in Ill S & S Hospital Quincy Ill. Cause of Death Exhaustion Morphine Habit

Bert Smith
Surgeon.

Illinois Soldiers and Sailors Home.

Quincy, Ill., March 20th 1915

To the Adjutant:

Anna Sandman Co. _____ Regt. _____

died in Hospital at 5 P M., aged 65 years.

Names and address of Relatives and Friends _____

Reg. No. 108 L. S. Barnes Hospital Steward.

Illinois Soldiers and Sailors Home.

Soldiers Home Hospital, Ill., Sept 25 1920

To the ~~Farm Supt.~~ Adj. 4314

The Funeral of Frederick Sandman G/18 Ill Inf

will take place at 9 a m Sept 28, 1920

Gail I Webb Hospital Steward.

ILLINOIS SOLDIERS AND SAILORS HOME

Surgeon's Office *May 11* 190 *36*

Respectfully returned to the Superintendent. I have carefully examined

late Co. *G* Regt. *18th Ill. Inf*
late Co. Regt.

and found him

disabled by *Partial*
Ankylosis of R. Elbow
Traumatism of R & L
Thighs

Geo. E. Rosenhal
Asst Surgeon.

REGISTER No. *4314*

Illinois Soldiers' and Sailors' Home

QUINCY, ILLINOIS.

Frederick Sandeman & Wife
Mary A. Sandeman 108
Murderia Morgan Co. Ill
Co. *18th* Reg't *Ill Inf*

Co. Reg't
Co. Reg't

CONTENTS

Admission Paper

Army Discharge

Certificate of Service

Pension Certificate *440367*

FEB 10 1899 *Disch'd O. C. on full*

Readmitted May 1 1903

Dec 3 1904 Discharged on full

July 22 08 FA

Wife died Mar 20 - 1915

Admitted *APR 11 1898* 18

Died in Hosp't Sept 25 - 1920

ILLINOIS SOLDIERS AND SAILORS HOME

APPLICATION OF HUSBAND AND WIFE FOR ADMISSION

STATE OF ILLINOIS } ss.
 County of Adams

On this 14 day of September, A. D., 1908, personally appeared before me, Frederick Samman, who being duly sworn, upon oath says:—

1. My name is (1) Frederick Samman, and my age is, 62 years. I am 5 feet and 5 inches high. I am of fair complexion, blue eyes and dark hair. I was born in the town of Arzenville in the county of base, state of Illinois, on the 9 day of January 1845.

I have been enrolled in the U. S. A. service: in the war against (2) and in the war of the late Rebellion. I have been (3) one 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>Feb 23 1865</u> <u>Springfield Ill</u>	<u>Dec 16 1865</u> <u>Pine Bluff Ark Pri</u>		<u>Co. A Regt. 18</u> <u>Ill Inf</u>	<u>Under Circular 30</u> <u>War Dept A.G.O. 1865</u>
2nd.				<u>Co. Regt.</u>	
3rd.				<u>Co. Regt.</u>	

2. I now receive on pension certificate numbered _____, a pension of _____ dollars per month, payable the _____ day of next _____, at the _____ Pension Office.

3. On the 15 day of Sept, A. D. 1854, at Jacksonville in the county of Morgan, in the state of Illinois, I was lawfully married to Mrs Emma Selzgerald, with whom I have ever since, and am now living with and supporting as my lawful wife.

4. I have (4) no children now living, ages respectively _____ years. My postoffice address is Meridian State of Illinois, my nearest railway station is Meridian on the Wabash.

2. I now receive on pension certificate numbered....., a pension of.....dollars per month, payable the.....day of next....., at the.....Pension Office.

3. On the 15 day of Sept A. D. 1854, at Jacksonville in the county of Morgan, in the state of Illinois, I was lawfully married to Mrs Anna Subgerald, with whom I have ever since, and am now living with and supporting as my lawful wife.

4. I have (~~4~~) children now living, ages respectively.....years. My postoffice address is Meredosie State of Illinois, my nearest railway station is Meredosie, on the Wabasha railway, in Morgan County, in said state. In case of illness or death I desire that notice be sent to Barbara Young in the town of Meredosie, county of Morgan, state of Ill

The name and address of the person to whom all my personal effects shall be sent in case of death is, Mary Anna Sandman, at Meredosie, in the county of Morgan state of Illinois. My trade or occupation is that of a harness maker.

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) Danville Illinois.

6. That I desire to become a member of the Illinois Soldiers and Sailors Home, and my said wife Mary Anna Sandman, 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 14 day of September,

1908.

(7) L. B. Lockery
Witness

Fredrick Sandman
(6)
Mary Anna Sandman
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 certify upon honor that I have carefully and critically examined *Fredrick Samann*

on 1/21/11

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 Frederick Saranau
and Wife, the above named applicant as to his mental and physical condition, at the hospital of this
Institution, on the 15 day of September, 1918; and that I found him to be of _____ sound mind, and to be

capable of earning his living by reason of his physical disability arising from (12) Husband has
Rheumatism, Hemorrhoids and Chronic Bronchitis
Wife Rheumatism and Neuralgia
Husband's age 62 yrs Wife's age 64 yrs

Witness my hand D. M. Landon
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

Register No. 4314

JOINT APPLICATION FOR
ADMISSION

TO THE

ILLINOIS SOLDIERS and SAILORS HOME

Frederick Sandman
of *Frederick Sandman*
and wife. *40*

Application approved by

.....
Supt.

Admission granted..... *19*.....

✓

SHORT WILL.

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

IN THE NAME OF GOD, AMEN.

I, Fredrick Sandman 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 Executor hereinafter 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 Wife
Anna Sandman
Meredonia
Stu

Lastly, I make, constitute and appoint Wm Somerville Supt. or his Successor in office to be Executor 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 21 day of July in the year of our Lord One Thousand Nine Hundred Eight

Fredrick Sandman [SEAL]

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

D. Hawson
J. Minger

Mary A Sandman

Special Family
Division

March 23rd 1915

No 32

2766

Frederick Sandman
Co G. 18th Inf

Was buried in
Special Family Div
Sept 28 1960

Age 73

Ed Dillon