



Before filling in the blanks read carefully the explanations and directions on the margin, and extracts from the rules on third page.

Army Discharge, or Certificates of Service, or Pension Certificate, must be sent with this application, and all the directions carefully complied with, or the application will be returned, and much delay result.

NOTE THE EXPLANATIONS AND DIRECTIONS.

APPLICATION FOR ADMISSION
TO THE
ILLINOIS SOLDIERS AND SAILORS HOME,
AT QUINCY.

TRUSTEES.

L. T. DICKASON, Danville, Ill.
THOMAS W. MACFALL, Quincy, Ill.
JAMES I. NEFF, Freeport, Ill.

OFFICERS.

J. G. ROWLAND, Superintendent.
R. H. CARNAHAN, Quartermaster and Commissary.
FRANK F. PEATS, Adjutant.
R. W. McMAHAN, Surgeon.
JAMES D. MORGAN, Treasurer.

DIRECTIONS.

Fill all the blank spaces carefully.

STATE OF Illinois }
COUNTY OF Morgan } ss.
Or this 15th day of July A. D. 1891, before me
C. H. Tulliot a Notary Public within and for the County and State aforesaid
[Name and Title of Magistrate.]
personally appeared William J. Walker aged 48 years, height 5 feet 6
[Name of Applicant.] inches, complexion dark, eyes dark, hair dark, a resident of Franklin
County of Morgan State of Illinois, who being duly sworn, deposes and says, that he was born in
Jefferson Co. Tennessee and has been enlisted in the service of the United States
one times during the late
war; and was honorably discharged from each enlistment as follows:

State each enlistment separately, and cause of discharge.

The army discharge or certificate of service from LAST enlistment is SPECIALLY required.

No. of Enlistm'ts.	When Enlisted, With Rank.	Where Enlisted—Town and State.	Company and Regiment Mustered in.	Date and Place of Discharge, with Rank.	Cause of Discharge.
1st.	<u>July 28 1862</u> <u>Pr</u>	<u>Franklin Ills.</u>	Co. <u>H</u> Regt. <u>101st Ill. Infy</u>	<u>June 7 1865</u> <u>Private</u> <u>Mustered out</u> <u>Pr</u>	<u>mustered out.</u>
2d.	18		Co. _____ Regt. _____	18	
3d.	18		Co. _____ Regt. _____	18	

Here the applicant should state, in his own way, what his disability is.

That he is disabled as follows: Naso-pharyngeal. Catarrh

If no pension is received, so state.

and has been receiving 6 Dollars per month, pension, on Certificate No. 773708
payable at Chicago Agency, from July 23 1891

The applicant further states that he has no property nor means of support, and being unable, on account of his disability, to earn his living, desires admission to the Illinois Soldiers and Sailors Home.

The applicant must sign this, and swear to the statement.

The said applicant further swears that he has not been engaged in, aided or abetted the late Rebellion in the United States; and that he was not a member of any Soldiers or Sailors Home, June 15, 1887; and further that he has been a bona fide resident of the State of Illinois for the last two years. And said applicant further stipulates and agrees that he will abide by, and obey all the rules and regulations made by the Board of Trustees, or by their order; that he will perform all duties required of him and obey all lawful orders of the Officers of the Home.

WITNESS,

Have two witnesses sign and fill all the blanks carefully.

D. Bittleston

William T. Walker
Nearest R. R. Station, Franklin On what R. R. C.P. & T.
Post-office Address, Franklin Ill.

To be sworn to before an officer having a seal, or a J. P.

Sworn to and subscribed before me, the day and year first above written, and I hereby certify that the foregoing affidavit was read over and fully explained to William T. Walker before he executed it.

C. H. Tulest
[Name of Magistrate.]
Notary Public

Fill all these blanks carefully.

Read? No. Write? No.
Occupation Laborer.
Married or Single Single Widower
[If a Widower, so state.]
Children under 16 years none

NAME AND ADDRESS OF NEAREST RELATIVE.
(Name) Grace Curtis Walker (Relation) daughter
(Address) Warley Ill

CERTIFICATE OF IDENTIFICATION.

(The following Certificate must be signed by the Commander or Adjutant of a G. A. R. Post, the Mayor or City Clerk of the city, or by a County officer, or by a Justice of the Peace, and attested by an official seal.)

This is very important. Have it signed as directed.

I HEREBY CERTIFY that I have known the above named William T. Walker for the last two years past, and that I believe the declaration signed by him to be true, and I further state that he is not mentally afflicted so as to require a special attendant, and can safely be quartered in a sleeping room with others.

H. S. Kiplinger
(Give Official Title) Adj't J. S. Bunce Post-490 G.A.R. Dept. Ill.

LOCAL PHYSICIAN'S CERTIFICATE.

I certify that I have carefully examined William T. Walker

This is to be filled out by the applicant's family physician, or one in the neighborhood of the residence of the applicant.

Company No. Regiment 101 Volunteers, and that he is disabled as follows:

Articular and muscular Rheumatism worse at some times than others, aggravated by work.

Character of Disability Mass pharyngeal Catarrh also Catarrh

Complications of frontal sinus - sometimes producing

Present Condition of Applicant dizziness causing him to fall senseless.

If signed by U. S. Examining Surgeon this need not be sworn to.

I further certify that said applicant is sane and has no spells of mental disturbance, and can safely be assigned quarters with other comrades.

W. C. Mauley SURGEON.

Sworn to and subscribed before me, this 15 day of July A. D. 1892, and I hereby certify that the said W. C. Mauley is known to me as a Surgeon in actual practice and reputable in his profession.

C. H. Tulest
Notary Public

ORDER FOR ADMISSION.

The above application is hereby approved, and William T. Walker, 1892
No. Co. 101 Reg't Ill. Inf. Vols., will be admitted to the Illinois Soldiers and Sailors Home, at Quincy.

APPROVED.

J. G. ROWLAND, Superintendent Illinois Soldiers and Sailors Home.

Illinois Soldiers & Sailors Home.

Surgeon's Office July 24 1892

To the Superintendent:

I have carefully examined

Wm T Walker

late Co. H. 101 Reg't Ill. Inf.

late Co. _____ Reg't _____

and find him disabled by then
matism & Ca-
tarrh.

The disability
unfits him
temporarily for
hard labor.

R. W. Graham
Surgeon.

Illinois Soldiers & Sailors Home

Surgeon's Office, Aug 24 1893

To the Superintendent:

I have carefully examined

Wm T. Walker

late Co. H Reg't 101 Ill. Inf.

late Co. _____ Reg't _____

and find him disabled by
Heart Disease and naso-
pharyngeal catarrh.
His disability is suf-
ficient to entitle him
to admission to the
Home.

E. B. Montgomery
Surgeon