

HEADQUARTERS

Illinois Soldiers' and Sailors' Home

QUINCY, ILLINOIS

APR 8 - 1908

190

*William D. Edwards*, (0) of the town of *Carlinville*, in the County of *Madison*, 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 *48* years old; that he is *5* feet and *10* inches high; that he is of *Fair* complexion, *Blue* eyes, and *Gray* hair; that he was born in the town of \_\_\_\_\_ in the \_\_\_\_\_ of *Illinois*, on the *29* day of *Dec*, *1839*; that he has been (2) *1* enrolled in the U. S. A. service; \_\_\_\_\_ in the war against \_\_\_\_\_, 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 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>Aug 15 1862</i>	<i>July 15 1865</i>	<i>Private 1st Cl.</i>	<i>Co. 122 Regt. 1st Div. M. C.</i>	<i>Disch'd</i>
2nd.		<i>75</i>		<i>Co. Regt.</i>	
3rd.				<i>Co. Regt.</i>	

That he now receives, on pension certificate number *473,946*, a pension of *12* dollars a month, payable the *4* day of next *May*, at the *Spokane* Pension Office.

That he owns property, real and personal, of the value of *3000* 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 *Farmer*.

That he has (4) *7* wife; that he has *6* children now living; ages, respectfully, (5) *34, 32, 28, 26, 24, 22* years. That his postoffice address is \_\_\_\_\_, State of Illinois; that his nearest railway station is \_\_\_\_\_, on the \_\_\_\_\_ Railway, in \_\_\_\_\_ 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 \_\_\_\_\_, of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_; that, in case of his death, he desires all his personal effects to be sent to \_\_\_\_\_, 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) \_\_\_\_\_.

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) *Arteriosclerosis & Kidney trouble*

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 \_\_\_\_\_ day of \_\_\_\_\_, 190

(0) \_\_\_\_\_ Witness.

(8) *W D Edwards* Applicant.

STATE OF ILLINOIS

County of ILLINOIS } SS

I, W D Edwards, a (10) Notary Public

of the town of Adams, 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) W D Edwards Affiant.

Subscribed and sworn to before me, this \_\_\_\_\_ day of \_\_\_\_\_, A. D. 190\_\_\_\_\_

Witness my hand and official seal.

[L. S.] \_\_\_\_\_ (12) Notary Public

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, and an honest man and a capable physician, in the community and among his fellow physicians where he lives.

\_\_\_\_\_, (16) \_\_\_\_\_

CERTIFICATE OF A SOLDIERS' HOME SURGEON.

I hereby certify upon honor that I carefully and critically examined William D Edwards the above named applicant, as to his mental and physical condition, at the Hospital of this Institution, on Wednesday the 8 day of April, 1908; and that I found him to be of \_\_\_\_\_ sound mind, and to be \_\_\_\_\_ incapable of earning his living by reason of his physical disability arising from (17) Chronic Rheumatism, Chronic Cystitis

Witness my hand Chas E Emerson Home Hospital Surgeon.

STATE OF ILLINOIS, }  
 COUNTY OF ADAMS. }

In the matter of the relationship of William E. Edwards  
Edina Mo, being first duly sworn according to law,  
 deposes and says that he formerly resided at Edina Mo,  
 that he is \_\_\_\_\_ married, that his wife, Nancy E. Edwards  
 resides at Edina Mo, 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>Frank Edwards</u>	<u>Son</u>	<u>Rulledge Mo</u>
<u>Miss Edwards</u>	<u>"</u>	<u>I. J.</u>
<u>Laura E. Chappell</u>	<u>Daughter</u>	<u>Callum Mo</u>
<u>Sam Edwards</u>	<u>Son</u>	<u>Edina Mo</u>
<u>Oliver Spran</u>	<u>Daughter</u>	<u>Trust Hill Mo</u>
<u>John Walters</u>	<u>"</u>	<u>Edina Mo</u>

And further affiant saith not.

W. E. Edwards  
Ed day of April  
O. P. Lawson

Subscribed and sworn to before me, this \_\_\_\_\_  
 A. D. 1908.

*Quid*

To all whom it may  
concern  
August 4  
1865



Concer  
R. L. Wilson  
P.M. U.S.A.



Know ye, That William D. Edwards is  
Private of Captain Abraham C. Shuler's  
Company, ("E"), 122<sup>nd</sup> Regiment of Illinois Infantry  
VOLUNTEERS who was enrolled on the Fifteenth 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 Fifteenth day of July, 1865, at Mobil, Ala  
in compliance with ~~orders of~~ Gen. G. O. Roberts, No 64, Mil. S. M. S. and G. O. No 94  
War, Dept. A. G. S., May 15<sup>th</sup> 1865  
(No objection to his being re-enlisted is known to exist.)

Said William D. Edwards was born in Centers Co  
in the State of Tennessee, is Twenty Two years of age,  
Five feet Ten inches high, Fair complexion, Blue eyes,  
Light hair, and by occupation, when enrolled, a Farmer  
Given at Mobil, Ala this Fifteenth day of  
July 1865.

Edmund  
Lt Col 1<sup>st</sup> Mich Cav  
and Abner Commanding the Regt

\* 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.]

Abraham C. Shuler  
Capt 122<sup>nd</sup> Ills Infy Bats  
Commanding Co "E"

This soldier has participated in the following  
Engagements Viz

Supela Miss July the 14 & 15. 1863

Nashville Tenn Dec the 14 & 15. 1863

Seige and storming of Fort Blakely Alabama from  
April the 3<sup>d</sup> to April the 9<sup>th</sup> 1865

Abraham C. Hulse  
Capt. Com. Co. E. 122<sup>nd</sup>  
Ill. Vol. Inf.

Sparks & Selwain

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 \_\_\_\_\_  
\_\_\_\_\_ 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  
at \_\_\_\_\_ on the \_\_\_\_\_ day  
\_\_\_\_\_ by reason of \_\_\_\_\_  
Sworn and subscribed to before me the 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 \_\_\_\_\_  
\_\_\_\_\_ L. R. \_\_\_\_\_  
\_\_\_\_\_ in the year \_\_\_\_\_  
\_\_\_\_\_ in the State of \_\_\_\_\_  
\_\_\_\_\_ Clerk of the \_\_\_\_\_

ILLINOIS SOLDIERS & SAILORS HOME

QUINCY, ILL., Aug 21<sup>st</sup> 1915.

William L. Edwards

Co. E 1<sup>st</sup> Reg't Ill. Inf Register No. 6079 Cot. 12

is hereby \_\_\_\_\_ honorably DISCHARGED from this Home by

reason of Own request

L. Murphy  
ADJUTANT

John G. Miller  
SUPERINTENDENT

ILLINOIS SOLDIERS & SAILORS HOME

QUINCY, ILL., Aug 24 1915

Sarah J. Cutler

Co. \_\_\_\_\_ Reg't \_\_\_\_\_ Register No. 515 Cot. 7

is hereby \_\_\_\_\_ honorably DISCHARGED from this Home by

reason of Own Request

L. Murphy  
ADJUTANT

John G. Miller  
SUPERINTENDENT

Hospital Illinois Soldiers and Sailors Home.

Quincy, Ill., Mar 21 1914

TO THE ADJUTANT:

This is to Certify, That Nancy E Edwards Reg. No. \_\_\_\_\_  
*female* wife of Wm D Edwards  
 late of Co. \_\_\_\_\_ Reg't. \_\_\_\_\_  
 died in hospital Cause of Death Cerebral Hemorrhage  
body shipped to Edwars  
Mar 19/1914 \_\_\_\_\_  
H P Binnie  
 a. Surgeon.

Illinois Soldiers and Sailors Home.

Quincy, Ill., March 19 1914

To the Adjutant:

Emily Edwards Co. \_\_\_\_\_ Regt. \_\_\_\_\_

died in Hospital at 2:45 M., aged \_\_\_\_\_ years.

Names and address of Relatives and Friends \_\_\_\_\_

Reg. No. 642

C S Barnes Hospital Steward.

8079.

REGISTER NO.

ILLINOIS SOLDIERS AND SAILORS HOME  
QUINCY, ILLINOIS.

*William D. Edwards* <sup>and wife</sup>  
*Mary S. Edwards, nee Carter*  
*Surv. Order Edwards 515.*

Co. \_\_\_\_\_ Reg't \_\_\_\_\_  
Co. \_\_\_\_\_ Reg't \_\_\_\_\_  
Co. \_\_\_\_\_ Reg't \_\_\_\_\_

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Admission Paper \_\_\_\_\_  
Army Discharge \_\_\_\_\_ *Pension 1200*  
Certificate of Service \_\_\_\_\_  
Pension Certificate \_\_\_\_\_ *Will 1111 W.W.*

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*Aug 26<sup>th</sup> 1909 Disch on fur*  
*January 11<sup>th</sup> 1914 R.A.*  
*August 21<sup>st</sup> 1915 Dis. O.R.*  
*March 8<sup>th</sup> 1916 R.A.*  
*Disson Feb Mar 9 1917*  
*Both R.A. Oct 14 - 1921 1922*  
*Wife died on 7<sup>th</sup> Aug 21*  
*Husband dis. P.F. April 4, 1924*



# ILLINOIS SOLDIERS' AND SAILORS' HOME

## APPLICATION OF HUSBAND AND WIFE FOR ADMISSION.

March 5<sup>th</sup> 1916  
William L. Edwards of the town of Carlinville  
 in the County of Macoupin and State of  
Illinois an honorably discharged Soldier  
 of the U. S. Army in the war against of the Rebellion  
 and his wife Sarah J. Edwards respectfully ask to be admitted  
 as members of said Home.

To enable the authorities to pass on their eligibility, the said William L. Edwards  
 declares the following statements to be true and correct: that his personal description is as follows: age 76 yrs.;  
 height 5 ft. 10 inches.; complexion Fair; eyes Blue;  
 hair Gray.  
 That he was born in \_\_\_\_\_ County of Franklin,  
 State of Tennessee, on the 29<sup>th</sup> day of Dec., 1839;  
 that he has been once enrolled; and once honorably discharged  
 from the U. S. service as follows, to-wit:

S	When and where Enrolled.	When and where Discharged.	Rank.	Company and Regiment.	Cause of Discharge
1st.	<u>Milwood Ill.</u> <u>Aug. 15. 1864</u>	<u>Mobile. Ala.</u> <u>July 15. 1865</u>	<u>Priv</u>	<u>Co 6<sup>th</sup> Regt Dec 2nd</u>	<u>muster out.</u>
2nd.				<u>Co. Regt.</u>	
3rd.				<u>Co. Regt.</u>	

said William L. Edwards further avers that he and his said wife  
Sarah J. Edwards, (who is now of the age of fifty years or older),  
 were lawfully married prior to the first day of January, A. D. 1890; and that he has ever since been living with her  
 and supported her as his lawful wife.

That he is now a bona fide resident of the State of Illinois and has continuously lived in the said state for the  
 last two consecutive years; or, that he has served in an Illinois organization.

That he now receives, on pension certificate number 773 916, a pension of 30 dollars a month,  
 payable the 1<sup>st</sup> day of next May, at the Washington Pension Office.

That he owns property, real or personal, of the value of 3000 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 Farmer

That he has 1 wife; that he has 6 children now living; ages, respectively, 79 to 11  
5 1 2 4 5

State of Tennessee, on the 29<sup>th</sup> day of Dec., 1899;

that he has been once enrolled; and once honorably discharged from the U. S. service as follows, to-wit:

S	When and where Enrolled.	When and where Discharged.	Rank.	Company and Regiment.	Cause of Discharge
1st.	<u>Wilwood Dec. Aug. 15, 1864</u>	<u>Mobile, Ala. July 15, 1865</u>	<u>Pvt</u>	<u>Co 6<sup>th</sup> Reg Dec Ind</u>	<u>Mustered out.</u>
2nd.				Co. Regt.	
3rd.				Co. Regt.	

said William D. Edwards further avers that he and his said wife

Sarah J. Edwards, (who is now of the age of fifty years or older), were lawfully married prior to the first day of January, A. D. 1890; and that he has ever since been living with her and supported her as his lawful wife.

That he is now a bona fide resident of the State of Illinois and has continuously lived in the said state for the last two consecutive years; or, that he has served in an Illinois organization.

That he now receives, on pension certificate number 773,946, a pension of 30 dollars a month, payable the 1<sup>st</sup> day of next May, at the Washington Pension Office.

That he owns property, real or personal, of the value of 3000 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 farmer

That he has a wife; that he has 6 children now living; ages, respectively, 19 to 11 years. That his postoffice address is S & S Stone, State of Illinois; that his nearest railway station is S & S Stone, on the CB & I Railway, in Adams 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

Mrs. Laura Chappel, of Stinsonland, County of Knox, State of Mo; that, in case of his death, he desires all his personal effects to be sent to his wife

Sarah J. Edwards, at S & S Stone County of Adams, State of Illinois

That he has not heretofore been a member of any Soldiers', Sailors' Home or Institution, excepting the

none  
That he is so far disabled by (7) Age, Rheumatism and Kidney trouble

as to be now 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.

That if he and his said wife Sarah J. Edwards shall be admitted to be members of the said Home, he does hereby obligate himself that should his said wife so request, he will deposit with the Superintendent so much of his said pension money as the Superintendent may deem necessary for the purpose of clothing said wife. And he and his said wife do hereby jointly promise that they will in all things and in every respect, comply with and conform to the rules and regulations now in force, or that shall hereafter be made for the government and discipline of the Home, and they further obligate themselves and promise that they will cheerfully obey all orders they may receive from any officer of the Home, so long as they shall remain members thereof.

In testimony whereof they have hereunto set their hands this 8<sup>th</sup> day of March, 1916.

Robert E. Barr  
Witness.

William D. Edwards  
Sarah J. Miller Edwards  
Applicants.

\*See Sec. 3b, of act approved May 13, 1903, under caption of "Soldiers' and Sailors' Home," Chapter 23 Hurd's Revised Statutes of Illinois.

# ILLINOIS SOLDIERS' AND SAILORS' HOME

## APPLICATION OF HUSBAND AND WIFE FOR ADMISSION.

William D. Edwards of the town of Carlinville  
Jan 21<sup>st</sup> 1914  
 in the County of Macoupin and State of Illinois  
 an honorably discharged Soldier  
 of the U. S. Army in the war against of the Rebellion  
 and his wife Nancy E. Edwards respectfully ask to be admitted  
 as members of said Home.

To enable the authorities to pass on their eligibility, the said William D. Edwards  
 declares the following statements to be true and correct: that his personal description is as follows: age 74 yrs.;  
 height 5 ft. 10 inches; complexion Fair; eyes Blue;  
 hair Gray.

That he was born in \_\_\_\_\_ County of Franklin  
 State of Tennessee, on the 24<sup>th</sup> day of Dec., 1839;  
 that he has been once enrolled; and once honorably discharged  
 from the U. S. service as follows, to wit:

s	When and where Enrolled.	When and where Discharged.	Rank.	Company and Regiment.	Cause of Discharge
1st.	<u>milwood Ill.</u> <u>Aug. 15. 1862</u>	<u>Mobile Ala.</u> <u>July 15. 1865</u>	<u>Priv</u>	<u>Co. 6 11<sup>th</sup> Regt Ill Inf</u>	<u>Mustered out.</u>
2nd.				Co. Regt.	
3rd.				Co. Regt.	

said William D. Edwards further avers that he and his said wife  
Nancy E. Edwards, (who is now of the age of fifty years or older),  
 were lawfully married prior to the first day of January, A. D. 1890; and that he has ever since been living with her and  
 supported her as his lawful wife.

That he is now a bona fide resident of the State of Illinois and has continuously lived in the said state for the last  
 two consecutive years; or, that he has served in an Illinois organization.

That he now receives, on pension certificate number 770946, a pension of 23 dollars a month,  
 payable the 11<sup>th</sup> day of next February, at the Washington Pension Office.

That he owns property, real or personal, of the value of 3000<sup>00</sup> dollars and no more; that he has

#	When and where Enrolled.	When and where Discharged.	Rank.	Company and Regiment.	Cause of Discharge
1st.	milwood Ill. Aug. 15. 1861	mobile Ala. July 15. 1865	Priv	Co E 1st Regt Ill Inf	Muster out.
2nd.				Co. Regt.	
3rd.				Co. Regt.	

said William E. Edwards. further avers that he and his said wife Nancy E. Edwards. (who is now of the age of fifty years or older), were lawfully married prior to the first day of January, A. D. 1890; and that he has ever since been living with her and supported her as his lawful wife.

That he is now a bona fide resident of the State of Illinois and has continuously lived in the said state for the last two consecutive years; or, that he has served in an Illinois organization.

That he now receives, on pension certificate number 773946, a pension of 23 dollars a month, payable the 15<sup>th</sup> day of next February, at the Washington Pension Office.

That he owns property, real or personal, of the value of 5000<sup>00</sup> 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 Farmer

That he has a wife; that he has 6 children now living; ages, respectively, 17, 10, 3, 9 years. That his postoffice address is D. S. & S. Stone, State of Illinois; that his nearest railway station is D. S. & S. Stone, on the CB & O Railway, in Adams 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 Mrs Laura Chappel, of Stungland, County of Knott, State of Missouri; that, in case of his death, he desires all his personal effects to be sent to Samer party Mrs Laura Chappel, at Stungland, County of Knott, State of Missouri

That he has not heretofore been a member of any Soldiers', Sailors' Home or Institution, excepting the none.

That he is so far disabled by (7) Rheumatism and Kidney trouble.

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.

That if he and his said wife Nancy E. Edwards. shall be admitted to be members of the said Home, he does hereby obligate himself that should his said wife so request, he will deposit with the Superintendent so much of his said pension money as the Superintendent may deem necessary for the purpose of clothing said wife.\* And he and his said wife do hereby jointly promise that they will in all things and in every respect, comply with and conform to the rules and regulations now in force, or that shall hereafter be made for the government and discipline of the Home, and they further obligate themselves and promise that they will cheerfully obey all orders they may receive from any officer of the Home, so long as they shall remain members thereof.

In testimony whereof they have hereunto set their hands this 15<sup>th</sup> day of January, 1911.  
Robert E. Barr. Witness.  
William Edwards  
Nancy E. Edwards. Applicants.

\* See Sec. 3b. of act approved May 13, 1903, under caption of "Soldiers' and Sailors' Home," Chapter 23 Hurd's Revised Statutes of Illinois.

### 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) \_\_\_\_\_

\_\_\_\_\_

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 William R. Edwards, the above named applicant as to his mental and physical condition, at the hospital of this Institution, on the 24 day of Jan, 1914; and that I found him to be of a sound mind, and to be incapable of earning his living by reason of physical disability arising from (12) Chronic Muscular Rheumatism & Chronic Gastritis. His wife is disabled by Left Hemiplegia

Witness my hand \_\_\_\_\_

C. E. Cole

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