

HEADQUARTERS

Illinois Soldiers' and Sailors' Home

QUINCY, ILLINOIS

Martin Taylor July 14th 1916
 (0) of the town of *Carlinville*, in the County of *Mississippi*, and State of *Illinois*, formerly a Soldier of the United States of America, in the war against (1) *of 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 *74* years old; that he is *5* feet and *7* inches high; that he is of *Dark* complexion, *Brown* eyes, and *Dark* hair; that he was born in the town of *New Market* in the *Mo* of *Mo*, on the *Mo* day of *Mo*, 1 *Mo*; that he has been (2) *Mo* enrolled in the U. S. A. service; *Mo* in the war against *Mo*, and *Mo* in the war of the late Rebellion; and that he has been (3) *Mo* honorably discharged from the service of the United States. That the following is a true statement of the time, place, and 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>Oct - 6th 1864 Springfield Ill</i>	<i>Oct 1864 Memphis Tenn</i>	<i>P</i>	<i>Co. G Regt. 32nd U.S. Colored</i>	<i>Dis at close of war</i>
2nd.				<i>Co. Regt. 32nd U.S. Colored</i>	<i>Ill. Colored St. Ark.</i>
3rd.		<i>(12)</i>		<i>Co. Regt.</i>	

That he now receives, on pension certificate number *769596*, a pension of *2.00* dollars a month, payable the *4th* day of next *Oct*, at the *P.O.* Pension Office.

That he owns property, real and personal, of the value of *Mo* 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 *Domestic Laborer*.

That he has (4) *Mo* wife; that he has *Mo* children now living; ages, respectfully, (5) *Mo* years. That his postoffice address is *Carlinville* State of *Illinois*; that his nearest railway station is *Carlinville Mo* on the *Chicago & Alton* Railway, in *Mississippi* 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 to *Geo J. Castle*, of *Carlinville*, County of *Mississippi* State of *Ill*; that, in case of his death, he desires all his personal effects to be sent to *Geo J. Castle* at *Carlinville* County of *Mississippi*, State of *Ill*.

That he has not heretofore been a member of any Soldiers', Sailors', or other Charitable Home or Institution. excepting the (6) *Mo*.

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) *Stomach trouble & general debility*.

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 *14* day of *July* 1916.

(9) *Geo J. Castle* Witness.
 (8) *Martin Taylor* Applicant.

STATE OF ILLINOIS

County of Macoupin } ss

J. Paul G. Oetjen a (10) Notary Public

to the town of Carlinville, in and for said County, do hereby certify that the above named applicant, to me personally and well known to be 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) Martin Taylor Affiant.

Subscribed and sworn to before me, this 14th day of July A. D. 1916.

Witness my hand and official seal.

[L. S.]

J. Paul G. Oetjen (12) Notary Public

CERTIFICATE OF IDENTIFICATION

I do hereby certify, upon honor, that I have personally known Martin Taylor 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 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)

C. F. Diesel
(14) Asst. Cashier
Carlinville Natl Bank

CERTIFICATE OF A LOCAL PHYSICIAN

I hereby depose and state that I have carefully examined the above named applicant Martin Taylor as to his disability, and I now find that he has (15) free stones 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.

Subscribed and sworn to before me, this 14th day of July 1916. And I certify

that I am personally acquainted with said affiant J. P. Denby 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.

J. P. Denby M. D.
J. Paul G. Oetjen (16) Notary Public

CERTIFICATE OF A SOLDIERS' HOME SURGEON

I hereby certify upon honor that I carefully and critically examined Martin Taylor the above named applicant, as to his mental and physical condition, at the Hospital of this Institution, on Thursday the 19 day of July 1916.; and that I found him to be of a sound mind, and to be incapable of earning his living by reason of his physical disability arising from (17) gall stones & old age

Witness my hand.

C. E. Cole
Home Hospital Surgeon.

HOSPITAL ILLINOIS SOLDIERS AND SAILORS HOME.

TO THE ADJUTANT:

QUINCY, ILL., May 1. 1898.

This is to certify that Elias Van Court #4232

late of E Co. 10 Reg. Ill. Vol., died in Hospital Age 52

Complications Exhaustion from Acute Enteritis.

C. E. Eli
Asst. Surgeon.

Form 65.—500—2-27-'93.

ILLINOIS SOLDIERS AND SAILORS HOME.

TO THE ADJUTANT:

Quincy, Ill., May 1st 1898.

Elias Van Court E Co. 10th Ill. Cavl. Regt.

died in Hospital at 1, A. M. Cause of death, Exhaustion from Acute Enteritis

Names of Relatives or Friends Robert Van Court

Palmyra Ills.

Reg. No. 4232

Edward Hood. Wardmaster.

Illinois Soldiers & Sailors Home.

Surgeon's Office, Feb. 6. 1898.

To the Superintendent:

I have carefully examined

Elias Van Court.

late Co. Reg't

late Co. Reg't

and find him disabled by Old

muscular dislocation

of Left Hip & Arm

Chronic Diarrhoea

& Chronic Rheumatism.

.....

.....

.....

.....

.....

.....

.....

late Co

Reg't

C. E. E. E. E.
and Surgeon.

and find him

Elias Van Court
Co. E. 10th Reg. Ill. Inf.
Admitted March 1, 1898.

Age 52

Nativity: Wisconsin

Widowed

Religion: Protestant

Father Van Court

Palmyra, Ill.

Disease - Rheumatism

Diarrhoea Chronic.

Died in Hospital

May 1st 1898 at 1.00.

a.m.

Sent to Palmyra, Ill., for

burial May 2d 1898 at

1.30 p.m.

M. M. Davidsohn,
Chaplain.

READ THE MUTUAL CONDITIONS OF THIS CONTRACT

to which the Shipper agrees by accepting this receipt containing the same.

ADAMS EXPRESS COMPANY.

180 A (NOT NEGOTIABLE.)

May 10 1898

RECEIVED OF Illinois Soldiers & Sailors Home

One Valise and Case

Valued at \$ *3.00*

Marked

Robert J. Vancouver - Palmyra Ill
Effects of Elias Vancouver - deceased May 1 1898 - 4232

When it is mutually agreed is to be forwarded to our Agency nearest or most convenient to destination only, and there delivered to other parties to complete the transportation.

It is part of the consideration of this contract, and it is agreed, that the said Express Company ARE FORWARDERS ONLY, and are not to be held liable or responsible for any loss or damage to said property while being conveyed by the CARRIERS to whom the same may be by said Express Company entrusted, or arising from the dangers of Railroads, Ocean or River Navigation, Steam, Fire in Stores, Depots, or in Transit, Leakage, Breachage, or from any cause whatever, unless, in every case, the same be proved to have occurred from the fraud or gross negligence of said Express Company, or their servants; nor, in any event shall the holder thereof demand beyond the sum of FIFTY DOLLARS, at which the above property forwarded is hereby valued, unless otherwise herein expressed, or unless specially insured by them, and so specified in this receipt, which insurance shall constitute the limit of the liability of the Adams Express Company.

And if the same is entrusted or delivered to any other Express Company, or Agent which said Adams Express Company are hereby authorized to do, such Company or person so selected shall be regarded exclusively as the agent of the shipper (or owner, and as such, alone liable, and the Adams Express Company shall not be, in any event, responsible for the negligence or non-performance of any such Company or person; and the shipper and owner hereby severally agree that all the stipulations and conditions in this receipt contained, shall extend to and inure to the benefit of each and every Company or person to whom the Adams Express Company may entrust or deliver the above described property for transportation, and shall define and limit the liability therefor of such other Company or person. It being understood that this Com-

pany relies upon the various Railroads and Steamboat lines of the country for its means of forwarding property delivered to it to be forwarded, it is agreed that this Company shall not be liable for any damage to said property caused by detention of any train of cars or upon any Steamboat upon which said property shall be placed for transportation, nor by the neglect or refusal of any Railroad or Steamboat Company to receive and forward the said property.

In no event shall the Adams Express Company be liable for any loss or damage unless the claim therefor shall be presented to them, in writing, at this office, within thirty days after this date, in a statement to which this receipt shall be annexed.

All articles of GLASS, or contained in glass, or any of a fragile nature, will be taken at Shipper's risk only, and the Shipper agrees that the Company shall not be held responsible for any injury, by breakage or otherwise, nor for damage to goods not properly packed and secured for transportation.

It is further agreed that said Company shall not, in any event, be liable for any loss, damage or detention, caused by the acts of God, Civil or Military authority, or by Rebellion, Piracy, Insurrection, or Riot, or the dangers incident to a time of war, or by any riotous or armed assemblage.

If any sum of money, besides the charge for transportation, is to be collected from the consignee on delivery of the above described property, and the same is not paid within thirty days from the date thereof, the Shipper agrees that this Company may return said property to him at the expiration of that time, subject to the conditions of this receipt, and that he will pay the charges for transportation both ways, and that the liability of this Company for such property while in its possession for the purpose of making such collection, shall be that of Warehousemen only.

For the Company,

W. D. Koad

FREIGHT

SEE REVERSE SIDE.

SHIPMENTS FORWARDED BY FASTEST PASSENGER TRAINS IN CHARGE OF MESSENGERS.

ADAMS EXPRESS COMPANY,

Forwarders by Express to all parts of the United States.

Connections made, and rates given, to

CANADA,

MEXICO,

AUSTRALIA,

and all parts of

EUROPE,

ASIA and

AFRICA.

MONEY ORDERS.

On Sale, payable at nearly every Express Office in the United States.

The only system of sending money through the mails furnishing a receipt which, in case orders are lost, delayed, stolen or destroyed, insures the purchaser against loss.

The rates are less than for any other method of sending money where absolute security is afforded.

Express Money Orders can be purchased during any hour of the day and no written application is required.

RATES:

Not over \$5.00	5 cts.
" " 10.00	8 "
" " 20.00	10 "
" " 30.00	12 "
" " 40.00	15 "
" " 50.00	18 "
" " 60.00	20 "
" " 75.00	25 "
" " 100.00	30 "
Over \$100.00	at above rates.

Rates as low as by any Responsible Express Co.

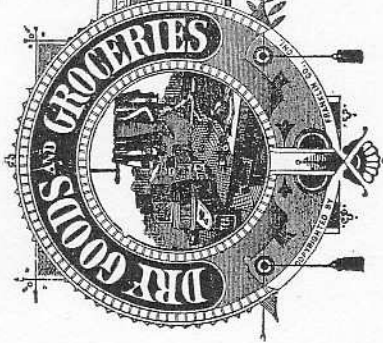
Special Rates on Printed Matter.

This Company has about 6,000 Agencies and operates nearly 40,000 Miles of Railroads.

CASH HOUSE OF

W. C. MARTIN, ::

DEALER IN



GENERAL MERCHANDISE

Palmyra, Ill., 5/9 1898

E L Higgin Adlt
Whiney Ill

Dear Sir.

I write you a few lines in
regard to Robt. J. Vancoart and

Ella. H. Vancoart, children
of Elias Vancoart decd. who died at
the sailors home. And left some of his
effects to those children. Those are
the rightful children that should receive
them. The name Robt. J. was sent last
the right name is Robt. J. Vancoart.

Respectly yours

W. C. Martin

I write this for the children

Palmyra, Ill.,
May, 9, 1898.

E. I. Higgins, Adjutant.

Dear Sir,

As I have received a card from you stating that the effects of Elias Vancourt were left to Robert G. Vancourt and my sister Ella H. Vancourt. My name is Robert I. Vancourt instead of Robert G. Vancourt. It is only a mistake in the initial. I am Elias Vancourt's son and Ella H. Vancourt is my sister. We are

the only Vancourt
family that we know
of. We would like to
have the effects of
our father. We will
appreciate them very
much. Send them
to me and oblige.

Yours respectfully
Robert J. Vancourt
Palmyra Ill.

Will of

Eliza Hancock

1832

In the Name of God, Amen.

I, Elias Van court of Soldiers 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 the worldly effects of whatever nature, of
which I may be possessed, to the Illinois
Soldiers & Sailors Home, to be sent to my Son
Post J. Van court, Palmyra Ill and
my daughter Ella St Van court of the
same place.

Lastly, I make, constitute and appoint Capt Wm Brownville 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 Seventh day of February in the year of our Lord,
 One Thousand Eight Hundred and ninety eight

Elias Van court 

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

J. P. Ricker

Glen H. Bush

INVENTORY.

OF THE EFFECTS OF

Charles John Bennett

LATE
E. Co. 16th Regt. Ill. Inf.

WHO DIED ON THE

1st May 1861

AT

ILLINOIS SOLDIERS AND SAILORS HOME.

FORD, V. S.

The Council shall, at its weekly meetings, separate the effects of deceased members of a perishable nature from the others, and shall recommend what disposition shall be made of the perishable articles. The recommendation, if approved by the Governor, shall be carried out by the Treasurer, unless such articles be claimed by the heirs of deceased members within a reasonable time, to be determined by the Governor. On or about June 30th and December 31st of each year, such effects of deceased members as have accumulated within the past six months, and have not been applied for by their heirs, shall be sold at auction for the highest bidder. Amounts realized from the effects of deceased members will be credited to their individual accounts, and be accounted for in the Posthumous Fund.

INVENTORY of the effects of Elias Van Court
 late E Co. 10th Reg't Ills. Cavl Vols., who died
 on the 5th day of May, 1898, at Illinois Soldiers and Sailors Home for D. V. S.:

NO. OR QUANTITY	ARTICLES	VALUE		HOW TO BE DISPOSED OF.
		DOLLS.	CTS.	
	¹⁰ 2 Coats, ²⁵ 2 Pr Ironers		125	MAY 10 1898 Expensed to - Capt J. Hancock Palmyra Ill J. Hancock Capt
	²⁵ 2 Hats ¹⁰ Pr Overalls		35	
	²⁵ 4 Shirts ¹⁵ 1 Shirt		40	
	⁰² Pr Shoes ⁰³ 3 Hdkfs		05	
	²⁵ Pr Overalls ⁰⁵ Knife		30	
	⁰¹ Hair Brush ⁰¹ Hat, ⁰⁵ Bands		07	
	⁰⁴ 4 Neck Ties, ¹³ Pr Spectacles		14	
	⁰¹ Pr Mittens ⁰¹ Knife		02	
	¹⁰ Valise		10	
			\$2 68	

We certify that the above Inventory is correct, and that we have, this 5 day of May 1898, 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.

No funds on hand

E. L. Higgins
J. M. Rizer
Wm. H. Bush

Board
 of
 Appraisers.

APPROVED:

SUPERINTENDENT.

APPLICATION FOR ADMISSION —TO THE— Illinois Soldiers' and Sailors' Home —AT QUINCY—

TRUSTEES.

DANIEL DUSTIN, Sycamore, DeKalb County, Ill.
L. T. DICKASON, Danville, Vermillion County, Ill.
THOMAS W. MACFALL, Quincy, Adams County, Ill.

OFFICERS.

J. G. ROWLAND, Superintendent.
S. B. SHERER, Secretary and Adjutant.
R. H. CARNAHAN, Quartermaster and Commissary.
R. W. McMAHAN, Surgeon.
JAMES D. MORGAN, Treasurer.

STATE OF Illinois
COUNTY OF Macoupin } ss.

On this 19th day of July A. D. 1898, personally appeared before me
(1) A Notary Public within and for the County and State aforesaid,
(2) Elias Van court aged 57 years; height 5 feet 10 inches,
complexion fair, eyes Blue, hair Light a resident of (3) Hettick
County of Macoupin State of Illinois, who, being duly sworn, deposes and says, that he was born in
(4) Wisconsin and has been enlisted in the service of the United States
(5) Two times during the (6) _____
war, and honorably discharged from each enlistment, as follows:

No. of Enlistments.	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>20th Feb 1864</u>	<u>Macoupin^{co}</u>	Co. <u>E</u> Regt <u>10th Ills Cavalry</u>	<u>22 Nov 1865</u> <u>San Antonio Tex</u>	<u>Expiration of Term</u>
2d.	_____ 18	_____	Co. _____ Regt _____	_____ 18	_____
3d.	_____ 18	_____	Co. _____ Regt _____	_____ 18	_____
4th.	_____ 18	_____	Co. _____ Regt _____	_____ 18	_____

That he is disabled as follows (7) droptical swelling Liver Complaint
Chronic Bronchitis & Rheumatism & piles

and has been receiving NO Dollars per month Pension, on Certificate No. _____ payable at _____ Agency, from _____ 18 _____, and being unable, on account of his disability, to earn his living by manual labor, desires admission to the Illinois Soldiers' and Sailors' Home.

The said applicant further swears, that he has not been engaged in, or 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 past. 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,

_____ }
_____ } (8) Elias Van Court
_____ } Post Office Address, Kellick Ill.

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 Elias Van Court before he executed it.

(11) W B Duggan
Notary Public

CERTIFICATE OF IDENTIFICATION.

(The following Certificate must be signed by 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.)

I HEREBY CERTIFY that I know the above named Elias Van Court and that I believe the declaration signed by him to be true.

(9) Thomas Austwick
Village Clerk

SURGEON'S CERTIFICATE.

I certify that I have carefully examined (2) Elias Van Court

Co. C Reg't Ill. Cav Volunteers, and that he is (10) permanently temporarily disabled for obtaining his subsistence by manual labor.

Date of Injury or Disease, Dec 20th day Dec 1864

Place of Near Brownsville State of Arkansas

Character of Disability, chronic deafness & noise assimilation
Complications, loss of hearing & tinnitus

Present condition of Applicant, not able to perform any manual labor

(10) John W. Mason, SURGEON.

Sworn to and subscribed before me, this 29th day of January A. D. 1888, and I hereby certify that the said John W. Mason is known to me as a Surgeon in actual practice and reputable in his profession.

(11) Ernest C. Lorenzo
Notary Public

Occupation, Farmer
Married or Single, Widower
[If a widower, so state.]
Children under 16 years, One

NAME AND ADDRESS OF NEAREST RELATIVE,

ORDER FOR ADMISSION.

_____, 188

The above application is hereby approved, and (2) _____

_____ Co., _____ Reg't _____ Vols., will be admitted to the Illinois Soldiers' and Sailors' Home at Quincy.

Superintendent Illinois Soldiers' and Sailors' Home.

EXPLANATIONS AND DIRECTIONS.

THE FIGURES IN THE BODY OF THIS APPLICATION REFER TO THE DIRECTIONS BELOW, AND MUST BE CAREFULLY OBSERVED IN FILLING THE BLANKS.

1. Name and Title of Magistrate.
2. Applicant's Name.
3. Post Office Address.
4. Town, County, State (or Nation).
5. State the number of times actually mustered into the service of the United States.
6. Give the name of the War, (Mexican, or Civil).
7. *Here state minutely the cause and nature of the disability; if by wounds, state the nature of the wounds, and when and where received; if by disease, state the nature of disease, and when and where contracted.*
8. Signature of Applicant and Post Office Address. Two witnesses are required if he makes his mark.
9. This Certificate must be signed by the Mayor or City Clerk of the City, by a County Officer, or Justice of the Peace of the Town in which the applicant resides. No application will be approved until this direction has been complied with.
10. If the Certificate of Examination is officially signed by a Surgeon-General of a State, or by a United States Examining Surgeon, or by a Surgeon designated for that purpose by the Superintendent of the Home, it need not be sworn to. One of the words "permanently" or "temporarily" in the Certificate must be erased by the Surgeon.
11. Official Signature of Magistrate or Notary.

The soldier or sailor making this application, must forward to the Superintendent his Discharge, or a certified copy thereof from their last enlistment, and Pension Certificate, before his application will be approved. These papers will be retained by the Superintendent, and returned to the member when he is discharged. This rule is adopted to prevent the loss of such papers and certificates, and to hinder fraudulent practices.

After filling out this application and executing it as above directed, forward it, with the other papers, to the Superintendent, whose name is printed on the first page of this sheet.

(Do not fill out this blank.)

Register No. _____

APPLICATION FOR ADMISSION

TO THE

ILLINOIS SOLDIERS' AND SAILORS' HOME

OF

_____ Co. _____ Reg't _____ Vols.

_____ Co. _____ Reg't _____ Vols.

_____ Co. _____ Reg't _____ Vols.

Admitted _____ 188

APPROVED BY

SUPERINTENDENT.

No. _____

Received _____ 188

Notice of approval sent _____ 188

[Faint handwritten notes and signatures at the bottom of the page]