Certificate of Service, 1

Pension Certificate, 1

Contract of Service, 1

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Los Same Roma Some Some Some Some Stories Joseph Jama letter Man. Home. The south is the second CERTIFICATE DIVISION.

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NOTICE OF ISSUE.

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS WASHINGTON

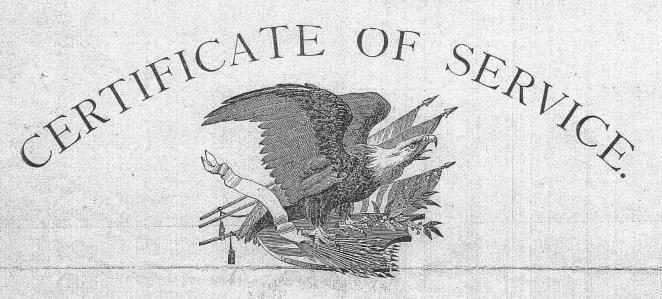
MAY 31'1921

Superintendent	
Soldiers & Sailors Home,	
Quincy, Ill.	
Sir;-	
You are hereby notified that the claim f	or Increase
pension has been allowed in favor of	
Howard L. Young	
	January 21, 1921,
Certificate No. 722,288 Rate of pension \$ 72. per month from	January 21, 1921,
Rate of pension \$ 72. per month from	
Rate of pension \$72. per month from	
Rate of pension \$ 72. per month from	
Rate of pension \$ 72. per month from ####################################	
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The act of July 4, 1884, provides that the fee for the prosecution of a pension claim shall be \$10 only, unless a larger fee, not exceeding \$25, is agreed upon under a special written contract. The fee will be paid to the attorney, or other person entitled thereto, out of the pension allowed. Should the attorney or other person demand or receive for his services any greater compensation, he would subject himself to the penalties provided in the statute, as follows:

Any agent or attorney or other person instrumental in prosecuting any claim for pension or bounty land who shall directly or indirectly contract for, demand, or receive or retain any greater compensation for his services or instrumentality in prosecuting a claim for pension or bounty land than is herein provided, or for payment thereof at any other time or in any other manner than is herein provided, or who shall wrongfully withhold from a pensioner or claimant the whole or any part of the pension or claim allowed and due such pensioner or claimant, or the land warrant issued to any such claimant, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall, for every such offense, be fined not exceeding \$500, or imprisoned at hard labor not exceeding two years, or both, in the discretion of the court. the court.

A 500 Pay velothing for allowed on claim No. 197203 by Cert Mo 441779 May 14. 1904



To all Mjom it May Concern:

This is to Certify, That Howard Lyounghho was executed on the 13 day of February; one thousand eight hundred and sixty-five, to serve one years, was Discharged on the 16 day of January, 1866, by swith company, at Atlanta, Ga., while holding the goade of corporal in Co. J., 150 Regiment of Illinois Infantry Colunteers

This Gertificate 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 8, 1878, 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."

Biven at the Way Department, Washington, O. C., this 21 day of <u>February</u>, A. Q. 1896.

By authority of the Secretary of War:

Colonel, U. S. Army Chief. Record & Pedeion Office.

441983.

SHORT WILL.

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

IN THE NAME OF GOD, AMEN.

I, Moward Z Jonny of Illinois Soldiers' and Sailors' Hom
in the County of Adams and State of Illinois, being of sound mind and memory, and conside
ing the uncertainty of this frail and transitory life, do, therefore, make, ordain, publish an
declare, this to be my last Will and Testament.
First. I order and direct that my Execut hereinafter named, pay all my ju
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 bequeat
all worldly goods of which I may die possessed,
to My Am
Milliam F. Gorney 3129 Za Sael Ol
3/29 La Vall IV
Mari- Ula
Milyoung:
13903 Krunens
13903. KENNERLY aue

3/29 La Sael St Struis Ello 13903. KENNERLY ane Lastly, I make, constitute and appoint for Sun well Supt or his fucciss is office to be Execut of my last Will and Testament, hereby revoking all former Wills by me made. _ to be Execut____ In Witness Whereof, I have hereunto subscribed my name and affixed my seal, the in the year of our Lord One Thousand Nine Hundred_ Howard Lx young SEAL This instrument was, on the day of the date thereof, signed, published and declared by the said testator_ __ 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.

201

W.

OFFICERS:

MAJOR GEORGE W. FOGG, SUPERINTENDENT. GENERAL JAMES D. MORGAN. TREASURER. CAPTAIN B. P. MCDANIEL, ADJUTANT. CAPTAIN JAMES P. MOORMAN, QUARTERMASTER. EDMUND B. MONTGOMERY, SURGEON.

Head Quarters

EDWARD W. GOODENOUGH, ASS'T SURGEON. EMILY W. LIPPENCOTT, MATRON.

TRUSTEES:

CAPTAIN WILLIAM STEINWEDELL, QUINCY, ILL. COLONEL JAMES A. SEXTON, CHICAGO, ILL. GENERAL LEWISTB. PARSONS, FLORA, ILL.

Allinois Holdiers and Hailors Home

Near Quincy, Illinois.
me Bunker Keinedles July 6, 1896
Howard & Young, (1) of the Town of Butter Kill, in the
County of Macaupin, and State of Illuraco, formerly a Soldier of the United
States of America, in the war against(1) of the Late or beller, 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 years old, that he is feet and inches high;
that he is of light complexion, light eyes, and light hair; that he was born in the town of fosterlangh in the State for Elemons, on the day
of March, 18/4; that he has been (2) enrolled in the U. S. A. service; in the
war against Mexico, and
his enrollment, and dischargefrom said service; and of the cause of his discharge, and of his rank at the
respective datethereof, namely:
No. When and Where Enrolled. When and Where Discharged. Rank. Company and Regiment, Cause of Discharge.
1st. 13" dois of deby Jany 16-1866 Co. G Regt. 150 Ile Int. Enterande
2d. May - 1864 Sept - 1864 Pat co. Fregt. 133 7 of war
3d. Springfield Ills Springfield Co. Regt. (3 months.
That he now receives, on pension certificate number 7 2 238 8., a pension of dollars a month,
payable the day of next before, at the Levienge Pension Office.
That he owns property, real and personal, of the value of
means of self-support other than that above named; that his trade or occupation is that of a Labour
That he has (4) a wife; that he haschildren now living; ages, respectively,(5) /3-/3-/1-6
years. That his postoffice address is Junker Lell , State of Illinois; that his nearest railway station is
Bushw Kell, on the 6 6 4 91 L, Railway, in Macoufin 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 Affective Journal of Bernew Kill County of Meacon Meacon State of
Joung, at Benther Keill, County of Macaulin, State of Allinis
That he has not heretofore been a member of any Soldiers', Sailors', or other Charitable Home or Institution
excepting the(6) novel
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) his eye sight being so bad

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 fully , 189.

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ORDER ADMITTING APPLICANT., together with the said several The application of the said... 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 day of ... GE W FOGG, Constituence a. Pl HOW TO FILL APPLICATION BLANKS. 11. Here Applicant will sign his full name, or make his Give full name of the Applicant. Either "Mexico and the late Rebellion," or one of mark. Signature and title of the Justice or Notary. To be made and signed by any Judge of any county 13. 2. Here say once, twice, or three times. 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. 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. 14. Here write official title. 6. Here give the name of any Home or other Institution of which he has been a member.

7. Here state, in his own words, what it is that ails or disables him.

8. Here Applicant will sign his full name, or make his mark.

Here the witness will sign his name. Here write "Notary Public," "Justice of the Peace," or "Clerk of Court."

The physician will here state tersely, but fully, as far as he can learn, every cause or disorder that tends in any degree to render the Applicant incapable of earning his own living.

16. Name and official title of Notary or Justice.

17. Here state minutely what disorder, ailment, disease, or cause, it is that, in your judgment, disables the Applicant and renders him incapable of earning his own living.

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 otherwise, 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 Illnois.
- 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 reassn 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 Mas elsewhere provided for the care and treatment of such persons.

Superintendent.

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Allinais Saldiers' and Saitors' Home.

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Superintendent.	