

Note Carefully: Army discharge or certificate of service must be sent, and all directions carefully complied with, or the application will be returned.

See "EXPLANATIONS AND DIRECTIONS" on Third Page.

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
J. R. LOTT, Secretary and Adjutant
R. H. CARNAHAN, Quartermaster and Commissary
R. W. McMAHAN, Surgeon
JAMES D. MORGAN, Treasurer

STATE OF Illinois
COUNTY OF Macoupin

On this 23rd day of October A. D. 1870 personally appeared before me
⁽¹⁾ W. W. Freeman a Notary Public within and for the County and State aforesaid,
⁽²⁾ Charles P. Baldwin aged 57 years, height 5 feet 8 inches,
complexion light, eyes blue, hair dark, a resident of ⁽¹⁾ Carlinville
County of Macoupin State of Illinois who being duly sworn, deposes and says, that he was born in
⁽⁴⁾ Perry Edwards County Virginia and has been enlisted in the service of the United States
One time during the ⁽⁴⁾ Civil War

and honorably discharged from ~~the~~ 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>Oct 23rd 1864</u>	<u>McQuire St. Joseph</u>	<u>Co. 'D' 43rd Regt. No. Vols.</u>	<u>Aug 5th 1865 Butcher Barnetown</u>	<u>Experation of term</u>
2d.	<u>18</u>		<u>Co. _____</u>	<u>as per above</u>	
3d.	<u>18</u>		<u>Co. _____</u>	<u>18</u>	
4th.	<u>18</u>		<u>Co. _____</u>	<u>18</u>	

That he is disabled as follows: ⁽¹⁾ By reason of Age and resultant disabilities with Sustaining Rheumatism and loss of hearing and speech

~~and has been receiving~~

~~Dollars per month pension, on Certificate No.~~

~~payable at~~

~~Agency from~~

having no other 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 said applicant further swearing 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 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,

W. W. Freeman
Patrick Fitzgerald

(¹) Charles P. Baldwin

Post Office Address, Learville, 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 Charles P. Baldwin before he executed it.

(¹¹)

W. W. Freeman
Notary Public

NAME AND ADDRESS OF NEAREST RELATIVE.

Read? Yes Write? Yes
Occupation Cooper
Married Single, Widower
(If a Widower so state)

(Name) Thomas Baldwin Relation)

Children under 16 years, None

(Address) Pumpkins Depot Appomattox Co. Virginia

CERTIFICATE OF IDENTIFICATION.

(²) 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.

I HEREBY CERTIFY that I have known the above named, Charles P. Baldwin, for the last 8 months past, and that I believe the declaration signed by him to be true.

(Give Official Title)

Commander Dan Mack Post
No. 387-Department Lee G.A.R.

SURGEON'S CERTIFICATE

I certify that I have carefully examined (²) Charles P. Baldwin,
Co. 1 Regt. 43 Mo. Inf. Volunteers and that he is (¹⁰) permanently temporarily disabled
as follows: by strain of a previously fractured ankle, and permanently
Date of Injury or Disease by twisted when making The strain was produced
on 13 inst. Learville
Place of Learville State of Illinois
Character of Disability strain of previously fractured ankle and
Complications, severe rheumatism
Present Condition of Applicant, poorly nourished, affected with
catarrh and bronchitis

(¹²) A. C. Corr. M.D. SURGEON.

Sworn to and subscribed before me, this 23^d day of October A. D. 1890, and I hereby certify that
the said A. C. Corr. M.D. is known to me as a Surgeon in actual practice and reputable in his profession.

(¹¹) M. B. Dugger
County Clerk of Macoupin County Ill

ORDER FOR ADMISSION.

Nov. 8, 1890

The above application is hereby approved, and (³)

I. Co. 143 Regt. Mo. Inf. You will be admitted to the

Illinois Soldiers and Sailors Home, at Quincy.

Superintendent Illinois Soldiers and Sailors Home.

O. K. Macd

NOTE CAREFULLY.
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 a Commander or Adjutant G. A. R. Post, 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.

SPECIAL NOTICE.

Applicants must send their discharge, or a certified copy thereof, from their last enlistment, with their application; if discharge is lost, destroyed, or is in the pension office at Washington, D. C., then write to the Adjutant-General of the State to which you were accredited, for a certified copy of your last enlistment and discharge, giving your full name, Company and Regiment. If a pensioner, send pension certificate also. 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.

If the "explanations and directions" above are fully complied with, prompt attention will be given to them, otherwise there must be delay.

Applicants are notified that the notice sent them of the approval of their application, does not insure their admission to the Home. The final order for admission is not given until the applicant has been examined by the Home Surgeon, and such examination must clearly prove the disability of the applicant.

The applicant should bring a serviceable suit of clothing with him, if possible, to be used when he leaves the Home. It is not expected that members will wear the clothing belonging to the State, when they go away on furlough, or are discharged. A valise may be brought; but a trunk is objectionable.

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.

ILLINOIS SOLDIERS AND SAILORS HOME.

QUINCY, November 14th, 1887.

The law governing admissions to the Home as laid down in Section 3, of the Act to Establish and Maintain a Soldiers and Sailors Home approved June 25, 1885, and the amendment thereto, in force June 15, 1887, is as follows:

"The object of the Soldiers and Sailors Home shall be to provide a home and subsistence for honorably discharged ex-soldiers and sailors who served in the War of the Rebellion and the Mexican War, who are now, and shall be prior to the time they may apply, bona fide residents of the State for two years, and who are not now inmates of National Soldiers and Sailors Homes, claiming residence in this State, who may have become disabled through the exigencies of such service, or who, by reason of old age, or other disabilities are disqualified from earning a livelihood: Provided, that soldiers who are in the poor-houses of this State, shall be admitted to the Home in the first instance."

EXTRACTS FROM THE RULES AND REGULATIONS OF THE BOARD OF TRUSTEES.

ADMISSION.

No person shall be admitted to the benefits of the Home until he shall have submitted a formal application in writing or print, signed by himself, and the same shall have been favorably acted upon by the Superintendent of the Home. Such application shall be accompanied by an honorable discharge, or proof thereof, and evidence satisfactory to said Superintendent, as follows:

- 1st. That he served in the army or navy of the United States, during the late Rebellion or the Mexican War.
- 2nd. That he has been a bona fide resident of Illinois for the last two years past preceding his application.
- 3rd. That he was not an inmate of any Soldiers or Sailors Home, June 15th, 1887.
- 4th. That he is disabled from a wound or wounds received while in the service of the United States, or from sickness or disability contracted therein, or needs the aid or benefits of the Home, in consequence of physical disability.
- 5th. That he has, at the date of his application, no property or means of support, and that he is unable to support himself by his own efforts and labor.
- 6th. Applicant's name in full, his age and occupation, place of nativity, and place of residence at the time of application.
- 7th. The Company and Regiment or Vessel in which he served.
- 8th. The dates and places of his enlistment and discharge.
- 9th. If the applicant is a United States pensioner, he must file his pension certificate with his application, for safe keeping by the Home while he remains a member thereof. Under present rules, the pensioner has full control of his pension money.
- 10th. The applicant's agreement to conduct himself properly, and submit to the rules, regulations and discipline of the Home.
- 11th. The applicant shall also furnish satisfactory proof of his identity.
- 12th. The friends of applicants are hereby notified, that insane, or men of unsound minds, must not be sent here, as the Home can not give them the care and attention such cases require.

Adopted November 14th, 1887.

J. G. ROWLAND,
Superintendent.

(DO NOT FILL OUT THIS BLANK.)

Register No. 1763

APPLICATION FOR ADMISSION

To the

Illinois Soldiers and Sailors Home

Charles P. Mallon

L Co. 43 Reg't Mo. City Vol.

Co. Reg't Vols.

Co. Reg't Vols.

Admitted 18

H. L. Hall

Superintendent.

No. _____

Mar 4 1890

Received, _____

Notice of approval sent, _____

ILLINOIS SOLDIERS' AND SAILORS' HOME

QUINCY, ILLINOIS

Charles P. Baldwin
Carlinville Macoupin Co
I. CO. 43 REGT Mo. Inf

CO. REG'T

CO. REG'T

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Admission Paper 1

Army Discharge

Certificate of Service

Pension Certificate 966 224 Will

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Received on furlough 11/8/90
 Discharged his request 5/28/95
 Readmitted 5/12/09
 Died on furlough 7/15/11

No. 3549

BURIAL PERMIT

OFFICE OF THE BOARD OF HEALTH.

QUINCY, ILL.,

July 17 1911

Permission is hereby granted to bury

in Soldiers Home Cemetery.

Altum p.m.

Sexton

H. R. Holzmann

C. P. Baldwin

M. S. Oster
Secretary of Board of Health.

3-1139.

Department of the Interior,

U. S. Pension Agency at

Topeka, Kansas.

Herewith are transmitted new pension certificate, issued in your case, and voucher for first payment thereon. The voucher should be executed on or after the date last given therein and returned to this Agency for payment. A voucher, the amount of which includes an attorney's fee, can not be accepted if executed before the attorney to whom the fee is payable.

To obtain payment on the new voucher it will be necessary for you to return TO THIS AGENCY your old pension certificate, or furnish an affidavit satisfactorily accounting for your inability to do so. The affidavit must state when, where, and how the old certificate was lost, destroyed, or otherwise disposed of. The old pension certificate or affidavit accounting for it should be mailed WITH THE NEW VOUCHER and not before.

Any old voucher you may have should also be returned, and you should be careful to see that the envelope is properly addressed to this Agency and that it bears the requisite amount of postage.

Walter S. McLean

6-1215

U. S. Pension Agent.

1907 - Buried.

Charles P. Baldwin

J = Letter.

10th Row.

5th Division.

July 17th, 1911.

H. R. Holzmann

Illinois Soldiers & Sailors Home.

Surgeon's Office, NOV 8 1871

To the Superintendent:

*I have carefully examined
Chas. F. Baldwin*

late Co I 43 Regt N.C. Inf.

late Co. _____ Reg't _____

*and find him disabled by injury
to R. ankle*

*The disability
entitles him to
admission to the
Home*

M. McManam

Surgeon