

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.

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

TRUSTEES:

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

Head Quarters

Illinois Soldiers and Sailors Home

Near Quincy, Illinois,

JAN 25 1894

, 1894.

Thomas M Hunt, (1) of the Town of *Grand*, in the County of *Macoupin*, and State of *Illinois*, formerly a Soldier of the United States of America, in the war against (1) *Late 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 *71* years old, that he is *5* feet and *9 1/2* inches high; that he is of *Fair* complexion, *Dark* eyes, and *Gray* hair; that he was born in the town of *Columbia* in the *Adair County* of *Kentucky*, on the *5* day of *May*, 18*27*; that he has been (2) *once* enrolled in the U. S. A. service; in the war against Mexico, and in the war of the late Rebellion; and that he has been (3) *once* 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 of 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>Jacksonville</i>		<i>Pri</i>	<i>Co. I Regt. of Ill. of war</i>	
2d.				<i>Co. Regt.</i>	
3d.				<i>Co. Regt.</i>	

That he now receives, on pension certificate number *207285*, a pension of *\$10.00* dollars a month, payable the *4* day of next *April*, at the *Chicago* Pension Office.

That he owns property, real and personal, of the value of *750* dollars, and no more; that he has no means of self-support other than that above named; that his trade or occupation is that of a *Laborer*.

That he has (4) *no* wife; that he has *4* children now living; aged, respectively, (5) *above 21* years. That his postoffice address is *Grand*, State of Illinois; that his nearest railway station is *Grand*, on the *CP&A* Railway, in *Macoupin* 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 *Mollie Overstreet*, of *Grand*, County of *Macoupin*, State of *Illinois*; that, in case of his death, he desires all his personal effects to be sent to *Mollie Overstreet*, at *Grand*, County of *Macoupin*, State of *Illinois*.

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

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) *Old age and gunshot wound in Right Hip*

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 *25* day of *January*, 189*4*.

(8) *Wm Parsons* (9) *T. Hunt*

STATE OF ILLINOIS,

COUNTY OF Macoupin } ss.

I, Geo W Bowers, a⁽¹⁰⁾ Notary Public

of the town of Triarc, 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) _____
Affiant.

Subscribed and sworn to before me, this 25 day of January, A. D. 1898 Witness my hand and official seal.

L. S.

Geo W Bowers
notary public

CERTIFICATE OF IDENTIFICATION.

I do hereby certify, upon honor, that I have personally known Thomas M Hunt, 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. 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,⁽¹²⁾ Geo W Bowers
⁽¹²⁾ Notary Public

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 ⁽¹³⁾ _____

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 _____, A. D. 189____. 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, as an honest man and a capable physician, in the community and among his fellow physicians where he lives.

⁽¹⁴⁾ _____

CERTIFICATE OF SOLDIERS HOME SURGEON.

I hereby certify upon honor that I carefully and critically examined _____, the above named Applicant, as to his mental and physical condition, at the Hospital of this Institution, on _____ the _____ day of _____, 189____; and that I then found him to be of _____ sound mind, and to be _____ capable of earning his living by reason of his physical disability arising from ⁽¹⁷⁾ _____

Register No. _____

Application for Admission

NO. _____

Illinois Soldiers' and Sailors' Home.

Application Approved by

Superintendent.

Application Received _____, 189__.

Transportation and Order to Report in person

sent _____, 189__.

Admission Denied _____, 189__.

Admission Granted _____, 189__.

JAN 25 1893

Grand Ill
my discharge is in the office at the house
and I have forgotten the date of enlistment
and discharge you can find it on file
in the adjutant's office
Capt. B. P. McDaniel

J. M. Keert
Gen. H. C. Jones



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 Certificate 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 Macon } ss.

On this Sixth day of May A. D. 1892 before me

Frank G. Wood, a Notary Public

within and for the County and State aforesaid personally appeared Thomas M. Hunt aged 68 years, height 5 feet 9 inches, complexion fair, eyes dark, hair dark, a resident of Quincy County of Macon State of Illinois, who being duly sworn, deposes and says, that he was born in Adair Co., Kentucky and has been enlisted in the service of the United States One time during the Civil war; and was honorably discharged from each enlistment as follows:

State each enlistment separately, and cause of discharge.

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>Private</u>	<u>Jacksonville, Ill.</u>	<u>Co. I</u> <u>Regt. 107</u>	<u>Nov 10 1864</u> <u>Private</u>	<u>by reason of a</u> <u>Camp Butler wound in Battle</u>
2d.	18		Co. Regt.	18	
3d.	18		Co. Regt.	18	

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

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

That he is disabled as follows: was wounded in hip by fire shot at Georgia

If no pension is received, so state.

and has been receiving Ten Dollars per month, pension, on Certificate No. 2072351 payable at Chicago Ill. Agency, from June 17th 1888

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.

Have two witnesses sign and fill all the blanks carefully.

WITNESS,
Francis G. Wood
B. W. Edwards

Thomas M. Hunt
Grand C. & A.
Post-office Address, Grand 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 Thomas M. Hunt before he executed it.

Frank G. Wood
[Name of Magistrate]

Fill all these blanks carefully.

Read? yes Write? yes
Occupation Farmer
Married or Single Married
Children under 16 years none

Notary Public
NAME AND ADDRESS OF NEAREST RELATIVE
(Name) Chas. Hunt (Relation) Brother
(Address) Waverly Ill.
also some sons and wife

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 Thomas M. Hunt 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.

R. S. Cowan
(Give Official Title) Mayor City Quincy

LOCAL PHYSICIAN'S CERTIFICATE.

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

I certify that I have carefully examined The applicant Thomas M. Hunt
Company I Regiment 101 Ill Volunteers, and that he is disabled as follows:
Gunshot wound of hip He has also suffered from
disease of Liver & Bowels
Character of Disability With this Gunshot & Discharge & Pile
Complications Frequent Discharges of Blood (portal Conflux)
Present Condition of Applicant Unable to perform Labor

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.

R. S. Cowan SURGEON.
Sworn to and subscribed before me, this 18th day of May A. D. 1892 and I hereby certify that the said R. S. Cowan is known to me as a Surgeon in actual practice and reputable in his profession.
Frank G. Wood
Notary Public

ORDER FOR ADMISSION.

The above application is hereby approved, and Thomas M. Hunt
Co. 101 Reg't APPROVED Vols., will be admitted to the Illinois
Soldiers and Sailors Home, at Quincy.
J. G. ROWLAND, Sup't.
Superintendent Illinois Soldiers and Sailors Home.

(DO NOT FILL OUT THIS BLANK.)

Register No. *2268*

APPLICATION FOR ADMISSION
TO THE
Illinois Soldiers and Sailors Home

OF
Thomas M Hunt

Private & 1st Regt Illinois Vols.

Co. Reg't Vols.

Co. Reg't Vols.

Admitted 189.....

APPROVED BY
J. R. ...
Superintendent.

No.

Received JUL 3 1892 789

Notice of approval sent *July 2 1892*

GOVERNOR:
JOHN P. TANNER,
SPRINGFIELD.

OFFICERS:

WM. SOMERVILLE, Superintendent.
E. L. HIGGINS, Adjutant.
DR. J. J. GOLDEN, Surgeon.
DR. C. E. ENLE, Ass't Surgeon.
DR. C. A. WELLS, Ass't Surgeon.

BOARD OF TRUSTEES:

COL. C. V. CHANDLER, Macomb.
CAPT. J. W. NILES, Sterling.
CAPT. W. O. WRIGHT, Freeport.

OFFICERS OF THE BOARD:

COL. C. V. CHANDLER, President.
WILLIAM MURRAY, Secretary.
E. H. OSBORN, Treasurer.

HEADQUARTERS

Illinois Soldiers and Sailors Home.

QUINCY, ILL., APR 10 1900 1

The effects of Thos. M. Hush who died at
this Home Mar. 30 1900 are here subject to your order
If not shipped within 30 days they will be
sold for the benefit of the Home

In case they are to be expressed go to the
Express Agent at your place and guarantee charges
and have him authorize Express agent here to receive
and ship. They weigh about 20 pounds

The above note must be complied with
before shipment - 2" notice - comply with the above

E. L. Higgins
Adj't

Respectfully
Wm. Somerville
Supt

Chas. Overstreet
Wm. E. L.

This I guarantee
M. D. Reed

INVENTORY of the effects of Thomas M. Hurt
 late I Co., 101 Reg't Ills Infy Vois., who died
 on the 30 day of March 1900, at Illinois Soldiers and Sailors Home for D. V. S.:

NO. OR QUANTITY.	ARTICLES.	VALUE.		BE DISPOSED OF.
		DOLLS.	CTS.	
	Satchel ¹⁰ ⁵⁰ ⁻		60	Illinois Soldiers & Sailors Home Quincy Ill. APR 18 1900 <i>Murray, papers and effects sent to Adams Exp. Co. to Chas. Overland Navy Ill.</i> E. L. Higgins Adyt
	2 Trousers ¹⁰⁰ ¹⁰ ²⁰ & 2 Shirts		130	
	Bag contg. tools for Repair ²⁵ ⁵⁰		25	
	2 Knives ¹⁰ ¹⁰ Pr Spectacles		20	
	Hammer - Hatch ⁰⁵ ⁰¹ Box		06	
	Whet Stone ⁰¹ ⁰¹ Brush		02	
	Amoial (chrom) Watch ¹⁰⁰ ¹⁰⁰ ^{ans} ^{lechain}		100	
	Scarf pin ⁰⁵ ⁰⁵ Pr Eye Glasses		10	
	Pocket Book contg 2 ²⁵ ²⁵			
		3	63 + 220	

We certify that the above Inventory is correct, and that we have, this 2 day of April 1900, 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.

E. L. Higgins
J. E. Minger
 Board of Appraisers.

APPROVED:

\$28 on hand
 SUPERINTENDENT.



WHITE & HEINLY,
PROPRIETORS.



Litchfield, Ill., April 3rd 189

Mr. Summerville

Dear Sir, I

Just got back here last
night and learned
that my father
was dead. I please let
me know when he was
buried. would have liked
to have seen him but
it was impossible for
me to come down as I
have been out of work
all winter. please send me
his watch and other belongings
if he did not dispose of

Them otherwise as I would
like to keep them. Kindly
address me at Waverly Ill.
and let me know about it
and if you send his things
express to same address

Hoping to hear from you
at once I am most
respectfully yours.

John Hurt

Waverly Ill.
P.O. Box 73

APR -7 1900

Effects mailed to Chas. W. W. W. W.
Guard Ill.

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.)

APR 17 1900 189

RECEIVED OF Illinois Soldiers & Sailors Home

2 Valises 2nd Overcoat Effects of Thomas M. Hunt (2268)

Valued at \$ 7.00

Marked Charles Overstreet - Waverly Illinois

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

As 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, Leaking, Breackage, 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 the servants thereof; 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 consigned or delivered to any other Express Company, or Agent (whichever 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, shall be 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 and bind them 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 other 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 if 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 by all 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,

H. D. Rood

FREIGHT

SEE REVERSE SIDE.

Waverly Illinois

April 9

Mr. Higgins please send
the things of J.M. Hurt to
my address here as I have
moved here and oblige
truly C. has. Overstreet

APR 10 1900

comply with
instructions

Waverly Illinois



Waverly Jan 24 1900

Pa I will write to you once
more this makes three I have wrote
to you and no answer, if you are to
sick to write get some one else to write
for you and if you send that address
to Centralia as I am going to leave here
this morning I am needing it very bad
let me no at once I don't no what
I will do with out it and I had got to
leave here address to Centralia John Hurt

two M

AUG 11 1900

Bingham Illinois

Aug. 10 1900

Mr. Higgins the last letter I got from my
Father before he died he said he had left the
money at Headquarters for them to keep for
him and I thought I would write and find
out about it. Please let me know about it
as I am sick and not able to work at present
and if I can get it as it would help me
out until I get able to work. I would
not have asked it if it was not for the
condition I am in. would be obliged if
you would ans. at once and let me know
about it truly, John Hurt address as above.

ILLINOIS SOLDIERS AND SAILORS HOME.

Quincy, Ill., March 30 1890

To the Adjutant:

Thomas M. Hurt I Co. 101 Ill. Infy Regt.

died in Hospital at 6³⁰ P M., aged 72 years.

Names and address of Relatives or Friends Mrs. Mollie Overstreet (daughter)

Litchfield Ills

Edmund Hook

Reg. No. 2268

Hospital Steward.

Hospital Illinois Soldiers and Sailors Home.

Quincy, Ill., March 31st 1890

To the Adjutant:

This is to certify that

Thomas M. Hurt

late of I Co. 101 Reg. Ill Infy Vol., died in Hospital March 30th 1890

Complications

Chronic Diarrhoea

J. J. Golden Surgeon.

Illinois Soldiers & Sailors Home.

Surgeon's Office, Feb 4 1898

To the Superintendent:

I have carefully examined

Thomas M. Hunt.

late Co. Reg't

late Co. Reg't

and find him disabled by Senile
Debility

C. E. Ellis
Asst Surgeon.

Thomas M. Hunt,
Co. I. 101 Reg. Ills. Inf.
Admitted July 21, 1899.

Age 76 years -

Midwestern

Religion - Protestant.

Disease - Critic Cornoid
Ulcer -
Chronic Diarrhea

Died in Hospital
March 30, 1900 at
6:30 p.m.

Buried with Military
Honors in Home
Cemetery March 31st
1900 at 1:30 p.m.

M. M. Davidson
Chaplain.

Mrs. Mollie Coustatz,
Litchfield, Ills.

Illinois Soldiers & Sailors Home.

Surgeon's Office, July 15 1894

To the Superintendent:

I have carefully examined

Thomas M. Hurt

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

late Co. _____ Reg't _____

and find him disabled by age which unfit him for hard labor.

R. W. Macken
Surgeon

Register No. 2268

ILLINOIS SOLDIERS' AND SAILORS' HOME

QUINCY, ILLINOIS

Thomas M. Hurt

Lizard, Macoupin Co

I CO. 101 REG'T Ill. Inf.

CO. _____ REG'T _____

CO. _____ REG'T _____

CONTENTS

Admission Paper 1

Army Discharge _____

Certificate of Service _____

Pension Certificate 1 # 207235 Will _____

Admitted July 15, 1892

Discharged on full pay one year 1-24-96

Readmitted 2-5-98

Died in Hospital 6:30 P.M. 3-30-00

Effects turned over to Q.M. Dept 1-14-01

20th Write party 4-5-00

June 19-1900, gave with to P.A.

R.M. Dept