



Before filling in the blanks read carefully the explanations and directions on the margin, and again 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.

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

DIRECTIONS.

Fill all the blank spaces carefully.

STATE OF Illinois
COUNTY OF Macoupin ss.
On this 4th day of July A. D. 1890, before me
(1) W. W. Freeman, a Notary Public within and for the County and State aforesaid,
personally appeared (2) Thomas B. Jones aged 54 years, height 5 feet 6
inches, complexion Light, eyes Blue, hair Light, a resident of (3) Leartsville
County of Macoupin State of Illinois, who being duly sworn, deposes and says, that he was born in
(4) Green Morgan, Wales and has been enlisted in the service of the United States
(5) One times during the (6) Civil
war; and honorably discharged from each enlistment as follows:

State each enlistment separately, and cause of discharge.

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

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>May 13th 1864</u>	<u>Atton Mo</u>	<u>Co. "D" 123rd Regt. Ills 20th</u>	<u>Sept 24th 1864</u>	<u>Expiration of term of service</u>
2nd.	18			18	
3rd.	18			18	
4th.	18			18	

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

That he is disabled as follows: (7) Diseased Lungs, and Dropsy

If no pension is received, so state.

and has been receiving _____ Dollars per month, pension, on Certificate No. _____ payable at _____ Agency from _____

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 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,

Have two witnesses sign and fill all the blanks carefully.

Charles E. White
John M. Schlepfer

(*) Thomas R. Jones

Nearest R. R. Station, Lea & Co on what R. R. _____

Post-office Address, Leaunsville, 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 R. Jones before he executed it.

Read? yes Write? yes
Occupation Miner

(11) W. W. Freeman
Notary Public

NAME AND ADDRESS OF NEAREST RELATIVE

Fill all these blanks carefully.

Married ~~single~~ _____
[If a Widower, so state.]

(Name) Margaret Jones (Relation) wife

Children under 16 years Seven (7)

(Address) Leaunsville, Ill

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 R. Jones 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.

(9) John D. Kinkead
(Give Official Title) Commander Dan Marshall
Post No. 339 - Dept. Illinois
G. A. R.

LOCAL PHYSICIAN'S CERTIFICATE.

I certify that I have carefully examined (*) Thomas R. Jones

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

Company D Regiment 133 Ills Volunteers, and that he is disabled as follows:

Character of Disability Phthisis Pulmonalis

Complications Hepatitis

Present Condition of Applicant Ascites General Anasarca

I further certify that said applicant is sane, and has no spells of mental disturbance, and can safely be assigned quarters with other comrades.

Sworn to and subscribed before me, this 3rd day of July A. D. 1890, and I hereby certify that

the said W. H. Heward is known to me as a Surgeon in actual practice and reputable in his profession

(10) W. H. Heward SURGEON.
(11) W. W. Freeman
Notary Public

ORDER FOR ADMISSION.

The above application is hereby approved, and (*) Thomas R. Jones, 1890

D Co., 133 Reg't Ills Vols. will be admitted to the Illinois Soldiers and Sailors Home, at Quincy.

W. H. Heward
Superintendent Illinois Soldiers and Sailors Home.

Admission July 11 90
Newspaper in 015

(DO NOT FILL OUT THIS BLANK.)

Register No. 1633

APPLICATION FOR ADMISSION

TO THE

Illinois Soldiers and Sailors Home

OF
Thomas R. Jones

Co. 133 Reg't 211 Vols.

Co. Reg't Vols.

Co. Reg't Vols.

Admitted July 18 1890

APPROVED BY
S. H. Michael

Superintendent.

No. _____

Received July 13 1890

Notice of approval sent July 13 1890

J. H. Camp.

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Illinois Soldiers and Sailors Home,

Quincy Ill. July 18 1890

TO THE SUPERINTENDENT

Illinois Soldiers and Sailors Home,

Quincy, Ill.

Dear Sir:

Having been admitted as a member of the Home, I make this request, that in case of my unaccountable disappearance, dangerous illness or decease while a member thereof, you shall advise

Margret Jones wife
who resides at Carlinville Macoupin Co

In the event of my decease while a member of this Home, it is my request, and I do hereby direct that you shall deliver to Same as above who resides at any and all my personal effects of every kind and nature whatever, including any and all papers I may have relating to my enlistment and discharge from the army, and pension papers:

This request I make voluntarily, being of sound mind, fully realizing the intent and effect thereof.

WITNESSES TO SIGNATURE:

Fred B. Nichols
A. Howell

Thomas Philip Jones

Late of Co. 133 Regt. Ill

And now a Member of the Illinois Soldiers and Sailors Home.

Register No. 1633

Carlinville Ill 7-11-90
 Superintendent S & S. Home Co.
 Did you receive the Discharge
 of Thos R. Jones, late of Co. "D" 133rd
 Regt Ills Vol, whose application
 for admittance into the Home
 is filed in your office. Please
 let me hear from you at once,
 as this is an urgent case
 on behalf of Thos R. Jones
 W. W. Freeman

REPLACEMENT

X

May 12, 1864
 September 24, 1864

JONES, Thomas R. Pvt. D. 133th Ill. Inf July 23, 1890

Sunset
 Ill. S. & S. Home Quincy Ill.
 Managing Officer Ill. S. & S. Home
 Quincy, Illinois #1633 1-6-P.

JUN 13 1940

Illinois Soldiers & Sailors Home.

Surgeon's Office July 18 1890

To the Superintendent:

I have carefully examined

Thomas R. Jones
late Co. D 133 Reg't Ill. Inf
late Co. _____ Reg't _____

and find him disabled by Phthisis
pulmonalis.

His disability enti-
tles him to ad-
mission to the
Home

B. W. Ormahan
Surgeon

Register No. 1633

ILLINOIS SOLDIERS' AND SAILORS' HOME
QUINCY, ILLINOIS

Thomas R Jones
Carlinville, Macoupin Co.
D CO 133 REG'T Ill. Inf
CO _____ REG'T _____
CO _____ REG'T _____

CONTENTS

Admission Paper 1
Army Discharge 1, sent to Mrs. Margaret Jones,
Springfield 2/16/92
Certificate of Service
Pension Certificate _____ Will _____

Admitted July 23, 1890
Died July 23, 1890