

APPLICATION OF

Kovner Bernhardt

Late _____ Co. _____
Reg't _____ for

Membership in the Grand Army of the Republic.

Recommended by Comrade

Chas Mueller

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee.

F. W. Strauss
Post Commander.

188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

H. Kesselring
Wm. Shosberg
Val. Paul } Committee

Applicant { Elected *Oct 25* 1891
 { Mustered *Oct 25* 1891

No. on Des. Book _____
Juliushardt
Adjutant.

Copyright, 1885, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To _____ Post No. _____ Dep't of _____ G. A. R.

I have the honor to make application for membership in _____ Post No. _____ Department of _____ Grand Army of the Republic, basing my application on the following facts:

I am 69 years of age, and was born in Elvase State of _____, now residing at Helus State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 16th 1861, as Corporal in Co. F Pacific Regiment Ballou's for the period of 3 months, and was discharged therefrom as Sergeant at Pacific on the 19th day of Sept 1861, by reason of expiration of term

I also re-enlisted _____ 18, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18

(Signature) _____

Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Valentine Puchel
ate *Primo* Co. *9*
13 Reg't *600* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
Adams Harselberg

HEADQUARTERS
P. M. Teles Post No. *152*
Department of *Wisconsin* 188*4*

Received and referred to the Examining
Committee.
R. L. Allen
Post Commander.

July 26 188*4*
The undersigned Examining Committee
respectfully report favorably upon
the within application.

Henry Steinhilber
John H. Carter
Committee.

Applicant { Elected *July 26* 188*4*
Mustered *July 26* 188*4*

No. on Des. Book *27*
Comman George
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

— OF —

O. N. Keeler Post No. *152* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *O. N. Keeler* Post No. *152* of *Missouri* Grand Army of the Republic, basing my application on the following facts:

I am *44* years of age, and was born in *Suhl* State of *Germany*, now residing at *Osselle* State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *March 25th* *1862* as *Private* in Co. *F.* *1st* Regiment *Inf. Mo.* for the period of *3* years, and was discharged therefrom as *Private*, at *Sulphur Springs* on the *15th* day of *February* *1864* by reason of *Discharged in the Veteran Service*

I also re-enlisted *February 16th* *1864* as *Private* in Co. *F.* *13* Regiment *Miss. Cav.* and was discharged therefrom as *Private* on the *18th* day of *April* *1866* by reason of *Gen Ord 33. Sept Missouri March 10. 1866.*

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have *not* made previous application for membership to the Grand Army of the Republic and filed the same with *Post No.* *Department of* on the *day of* *18*

(Signature).

Valentin Paebel

Residence, No. *Osselle, St. Louis Society*

I on honor recommend *Valentin Paebel* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

Edw. H. ...
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Stephen Coil

Late Private Co. B
70th Reg. Reg't Inf for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

J. N. Rubin Post No. 152

Department of Missouri 1897

Received and referred to the Examining Committee.

J. W. Thomas

Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the within application.

Thos. B. Boyd
Chas. F. Balkman

Committee

Applicant { Elected 188
Mustered 188

No. on Des. Book Julius Hardt

Adjutant

Copyright, 1897, by John S. Murray, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To..... Post No..... Dep't of..... G. A. R.

I have the honor to make application for membership in..... Post No..... Department of..... Grand Army of the Republic, basing my application on the following facts:

I am 46 years of age, and was born in Wayne Co State of Kentucky, now residing at Park Royal State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted December 1863, as private in Co. H 30th Regiment Kentucky Infy for the period of 12 months and was discharged therefrom as private, at Frankfort Ky on the day of April 1865, by reason of close of War

¹I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have ²made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

Adam K. Johnson
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

William Rattler

Late *Private* Co. *B.*

18 Reg't *Mo.* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

D. N. Keller Post No. *152*

Department of *Mo.* *1887*

Received and referred to the Examining Committee.

Post Commander

188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

F. Ousefort
H. Kesselring
M. Bergquist } Committee

Applicant { Elected _____ 188
Mustered _____ 188

No. on Des. Book _____

Julius Harold Adjutant.

Copyright, 1886, by JOHN S. KOUNTZ, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled? _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Mo G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Mo Grand Army of the Republic, basing my application on the following facts:

I am 50 years of age, and was born in Germany State of Mo., now residing at Fox Creek, am by occupation a farmer

I served during the late rebellion as follows:

First enlisted Sept 16, 1861, as Private in Co. F Pacific Mo 76 Gds for the period of 3 months years, and was discharged therefrom as Private, at Pacific Mo on the 18 day of Sept 1861, by reason of Expiration of time

¹I also re-enlisted Dec 28 1861 as Private in Co. B 18 Regiment Mo Vols and was discharged therefrom as Private at Washington D C on the 6 day of July 1865 by reason of General Order No 77

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have 1 made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of

on the 18 day of 18

(Signature).

William Rottker

Residence, No. Street.

I on honor recommend Wm Rottker to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 2.00

F. W. Steiner
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Bernard Fumsteg
Late *Private* Co. *A*
H Reg't *11th Inf* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
F. W. Stearns
HEADQUARTERS
Keeler Post No. *152*
Department of *Mo. Jan 28 1894*
Received and referred to the Examining
Committee.
Julius Howard
Post Commander.

188
The undersigned Examining Committee
respectfully report _____ favorably upon
the within application.

H. Hesselring
F. Ossefort
John Paffroth } Committee

Applicant { Elected *January 28 1894*
Mustered *May 27 1894*
on Des. Book *8*
Louis Grauer
Adjutant.

Copyright, 1886, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. M. Keeler Post No. 152 Dep't of Mo G. A. R.

I have the honor to make application for membership in D. M. Keeler Post No. 152 Department of Mo Grand Army of the Republic, basing my application on the following facts: *

I am 50 years of age, and was born in on the Atlantic coast State of Germany, now residing at Bonhomme State of Missouri, am by occupation a Laborer

I served during the late rebellion as follows:

First enlisted Aug. 17 1864 as Private in Co. A 41 Regiment Mo Inf. Vol. for the period of one years, and was discharged therefrom as Private, at Benton Barracks Mo on the 11 day of July 1865, by reason of Expiration of the war

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature) Bernard J. Fumsteg
Residence, No. mark Street.

I on honor recommend Bernard J. Fumsteg to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 2.00
F. W. Steiner
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Julius Hards

Late *Sevate* Co.

Reg't _____ for _____

Membership in the Grand Army of the Republic.

Recommended by Comrade _____

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee.

William Heffeling
Post Commandery

188

The undersigned Examining Committee report _____ favorably upon the within application.

Gustav Grauer
F. Rosenbaum
F. Berthold Committee

Applicant { Elected _____ 188
Mustered _____ 188

No. on Des. Book _____

Julius Hards
Adjutant.

Copyright, 1882, by JOHN S. KOWYK, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To *D. N. Keeler* Post No. *152* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *D. N. Keeler* Post No. *152* Department of *Missouri* Grand Army of the Republic, basing my application on the following facts:

I am *38* years of age, and was born in *Germany* State of *Germany*, now residing at *Oakfield* State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *1861*, as *Private* in Co. *1st* Regiment *1st* for the period of *1* years, and was discharged therefrom as *Private*, at *1862* on the *15* day of *August* 18, by reason of *Discharge*

¹I also re-enlisted *1862*, as *Private* in Co. *1st* Regiment *1st* and was discharged therefrom as *Private* at *1862* on the *15* day of *August* 18, by reason of *Discharge*

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have *2* made previous application for membership to the Grand Army of the Republic and filed the same with *1862* Post No. *152* Department of *Missouri* on the *15* day of *August* 18

(Signature) *D. N. Keeler*
Residence, No. *152* Street. *152*

I on honor recommend *D. N. Keeler* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *1.00*

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Herman Mueller

ate *Comp* Co. *9*
1st Reg't *Mo. Vol* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS
9th Mo. Post No. 152

Department of *Missouri* 1886

Received and referred to the Examining Committee.

Post Commander.
1886

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected 1886
Mustered 1886

No. on Des. Book *315*

Adjutant.

Copyright, 1885, by JOHN S. KOWERS, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. N. Keller Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in J. N. Keller Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 53 years of age, and was born in Germany State of Prussia, now residing at Box 100 State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted Sept 20th 1861, as Private in Co. D 1st Regiment Missouri Vol. for the period of 1 years, and was discharged therefrom as Private, at St. Louis, on the 15 day of Nov 1862, by reason of illness

I also re-enlisted 1863, as Private in Co. D 1st Regiment Missouri and was discharged therefrom as Private at St. Louis on the 15 day of Nov 1862, by reason of illness

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. 152 Department of Missouri on the 15 day of Nov 1862

(Signature).

Residence, No. 152 Street.

I on honor recommend J. N. Keller to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION



August Steuermagel
Late *Co. D* *1st* *Batt.*, Reg't for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

D. H. Fisher Post No. *159*

Department of *Missouri* 1890

Received and referred to the Examining Committee.

Bernat Walter
Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the within application.

M. Bouquet
F. Berthold
G. Grauer } Committee

Applicant { Elected *June 29* 1890
Mustered *June 29* 1890

No. on Des. Book *Julius Howard*
Adjutant.

Copyright, 1886, by JOHN S. KOURTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To..... Post No..... Dep't of..... G. A. R.

I have the honor to make application for membership in..... Post No..... Department of..... Grand Army of the Republic, basing my application on the following facts:

I am 66 years of age, and was born in Germany State of Saxony, now residing at St. Albans State of Mo, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 9 of June 1861, as Lieutenant in Co. D Regiment Paripii Battalion for the period of 3 month years, and was discharged therefrom as 2d Lieut, at St. Louis on the 18 day of Sept. 1861, by reason of time out

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

J. W. Berthold

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

1 Other enlistments are to be added.

2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Fred Rosenbaum

Late *Private* Co. *D.*

2nd Reg't. *Battalion* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

D. N. Kulin Post No. *152*

Department of *Missouri* 1889

Received and referred to the Examining Committee.

Ernst Walter
Post Commander.

188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

Gustav Grauer
A. Bouquet
Wm. Bierke } Committee

Applicant { Elected *Oct 27* 1889
Mustered *Nov 24* 1889

No. on Des. Book _____
Julius Hards
Adjutant.

Copyright, 1885, by JOHN S. KOUZEX, Commander-in-Chief
Grand Army of the Republic.

WAS 6 11/27/1904, PMS. PMS. 104.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To *D. W. Keeler* Post No. *132* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *D. W. Keeler* Post No. *132* Department of *Missouri* Grand Army of the Republic, basing my application on the following facts:

I am *51* years of age, and was born in *Germany* State of *Hannover*, now residing *at in Franklin Co near Hollon P. O.* State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *9th June* 1861, as *Private* in Co. *D* Regiment *1st Battalion* for the period of *9 month* years, and was discharged therefrom as *Private*, at *Pacific* on the *16th* day of *Sept* 1861, by reason of *expiration of time*

¹I also re-enlisted *18*, as *in Co.* Regiment *and was discharged therefrom as* at *on the* day of *18*, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have ²made previous application for membership to the Grand Army of the Republic and filed the same with *Post No.* Department of *on the* day of *18*

(Signature).

Residence, No. *Street.*

I on honor recommend *to the favorable consideration* of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

1 Other enlistments are to be added.

2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Richard Schuttner
Late _____ Co. *O.*
5th Reg't *Cav. M. G.* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
P. M. Thomas

HEADQUARTERS
Keeler Post No. *152*

Department of *Missouri* 188*4*
Received and referred to the Examining
Committee.

Robert L. Allen
Post Commander.

June seventh 188*4*
The undersigned Examining Committee
respectfully report _____ favorably upon
the within application.

F. St. Ours
Ch. Bisher } Committee.
D. Barron

Applicant { Elected *June 7th* 188*4*
Mustered *June 7th* 188*4*

No. on Des. Book *23*
Herman Kange
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

— OF —

L. H. Keeler Post No. *152* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *Keeler* Post No. *152*
of *Keeler* Grand Army of the Republic, basing my application on the following facts:

I am *53* years of age, and was born in *Michigan* State of
Lumley, now residing at *Fox Creek*
State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *1862* as *Private* in Co. *E*
5th Regiment *1st* *Missouri* for the period of *3* years, and
was discharged therefrom as *Private* at *St. Joseph*
on the *1st* day of *1865* by reason of *illness*

I also re-enlisted *1865*, as *Private* in Co. *E*
5th Regiment *1st* *Missouri* and was discharged therefrom as *Private*
at *St. Joseph* on the *1st* day of *1865*, by reason of *illness*

I have never borne arms against the United States, and have never been convicted by Court
Martial of Desertion, nor of any other infamous crime.

I have *not*² made previous application for membership to the Grand Army of the Republic
and filed the same with *Keeler* Post No. *152* Department of *Missouri*

on the *1st* day of *1865*

(Signature).

Charles W. Schuttner

Residence, No. *152* Street.

I on honor recommend *Charles Schuttner* to the favorable consideration
of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *1.00*

F. W. Steiner

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

F. W. Stenberg
ate *Capt* Co. *F*
2 *Reg't* *1st* for

Membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS
J. N. Keller Post No. *152*
Department of *Missouri* 1887
Received and referred to the Examining Committee.

Post Commander.
January 20 1887
The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected *Jan 30th* 1887
Mustered *Jan 30th* 1887
No. on Des. Book *47*
Wm. H. Goodman
Adjutant.

Copyright, 1885, by JOHN S. MOUNTZ, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F. Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To S N Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in S N Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 65 years of age, and was born in Germany State of Prussia, now residing at Fox Creek State of Missouri, am by occupation a Mechanic

I served during the late rebellion as follows:
First enlisted June 1861, as Capt in Co. D 3rd Regiment Inf for the period of 3 years, and was discharged therefrom as Capt at Pacific on the 11th day of Sept 1861, by reason of Exp

I also re-enlisted 18, as 18 in Co. 18 Regiment and was discharged therefrom as 18 at 18 on the 18 day of 18, by reason of 18

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with 18 Post No. 18 Department of 18 on the 18 day of 18

(Signature) 18
Residence, No. 18 Street. 18

I on honor recommend H. W. Stoyberg to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 18

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.
1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

F. W. Steiner
ate *Private* Co. *16*
30th Reg't *Miss. Inf.* for

Membership in the Grand Army of the Republic.

commended by Comrade

Michael Bonquet

HEADQUARTERS

Keller Post No. *152*

Department of *Missouri* 1884

Received and referred to the Examining Committee.

Robert L. Allen
Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon within application.

Wm. Ackerman
William G. Grouce
John C. Clark } Committee.

licant { Elected 1884
Mustered 1884

on Des. Book *16*

Comman George
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

- No. on Des. Book..... 2. Name.....
- Where born..... 4. Color.....
- Regiment or Vessel serving in when wounded.....
- What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
- Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
- How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....

12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....

14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

—OF—

Keeler Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 of Grand Army of the Republic, basing my application on the following facts:

I am 44 years of age, and was born in St. Louis County State of Missouri, now residing at Pinckney County State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted August 16th 1862 as Private in Co 76, 30th Regiment Mo. Light for the period of 3 years, and was discharged therefrom as Private, at St. Louis Mo. on the 20 day of March 1863 by reason of disability

I also re-enlisted 18 , as in Co. Regiment and was discharged therefrom as at on the day of 18 , by reason of

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have not² made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature) F. W. Steines
Residence, No. Pinckney Co. Mo.

I on honor recommend F. W. Steines to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

Adam Kappelring
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Sigurd Wiedman
to *Bugler* Co. *F*
Reg't *Light Artillery*

Membership in the Grand Army of the Republic.

Recommended by Comrade
W. K. ...

HEADQUARTERS

Keller Post No. *152*

Department of *Missouri* 1889

Received and referred to the Examining Committee.

Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon within application.

Luigi Redman
Henry ... Committee.

Applicant { Elected *April 28* 1889
 { Mustered 188

No. on Des. Book
Julius ... Adjutant

Copyright, 1884, by JOHN S. KOUNTZ, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 47 years of age, and was born in St. Louis County State of Missouri, now residing at Green P. O. State of Missouri, am by occupation a Blacksmith.

I served during the late rebellion as follows:

First enlisted first day of May 1861, as Private in Co. F first Regiment Mo. Light Artillery for the period of 3 years, and was discharged therefrom as Private, at Paso Cavallo on the 31 day of January 1864, by reason of Enlisting in the Liberan Volunteers

¹I also re-enlisted 1st of February 1864, as Bugler in Co. F first Regiment Light Artillery and was discharged therefrom as Private at Benton Barracks on the 11 day of August 1865, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not² made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18

(Signature)

August Wiedman

Residence, No. _____ Street.

I on honor recommend August Wiedman to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Adam Hejlsing
(To be signed by comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

1 Other enlistments are to be added.

2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Wm. C. Wingless
of the *Brack Co. B*
Reg't Bat'ry for
Membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS
Weller Post No. *157*
Department of *Missouri 1887*
Received and referred to the Examining
Committee.

Post Commander
July 31st 1887
The undersigned Examining Committee
respectfully report favorably upon
within application.

Committee

Applicant { Elected *July 31st* 1887
Mustered *July 31st* 1887
in Des. Book *57*
Wm. H. Hartman
Adjutant

Copyright, 1885, by JOHN S. KOURTZE, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J N Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in J N Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 42 years of age, and was born in Franklin State of Missouri, now residing at Clayton State of Missouri, am by occupation a Clerk

I served during the late rebellion as follows:

First enlisted June 1861, as Private in Co. B Pacific Regiment 3rd Br. for the period of 3 months and was discharged therefrom as Private at Pacific Mo on the 11th day of Sept 1861, by reason of eff

I also re-enlisted 18 , as in Co. Regiment and was discharged therefrom as at on the day of 18 , by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend Mr C. Wiggles to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

John Miller

ate _____ Co. _____
Reg't _____ for

Membership in the Grand Army of the Republic.

Recommended by Comrade _____

HEADQUARTERS

Post, No. _____

Department of _____ 189

Received and referred to the Examining Committee.

Post Commander. _____

189

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

J. P. ...
W. M. ...
H. ... } Committee.

Applicant { Elected _____ 189
Mustered _____ 189

No. on Des. Book _____

Adjutant. _____

The State Co., Printers, Buffalo, N.Y.

To be Filled by, or for, the Post Surgeon, on or before the Night of Muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service (Infant., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of Engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon. _____

RULES AND REGULATIONS, G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and Sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has, at any time, borne arms against the United States.

To _____ Post, No. _____ Dep't of _____ G. A. R.

I have the honor to make application for membership in _____

Post, No. _____ Department of _____ Grand Army of the Republic,

having my application on the following facts:

I am 60 years of age, and was born in _____ State
of _____, now residing at Ellendale Post Office
State of _____, am by occupation a _____

I served during the late Rebellion as follows:

First enlisted June 14 1861 as Private in Co. C
Regiment 1st Regt. Pa. Cavalry for the period of _____ years, and
was discharged therefrom as Private, at 7
on the _____ day of _____ 18____, by reason of _____

~~I also re-enlisted _____ 18____ as _____ in Co. _____
Regiment _____ and was discharged therefrom as _____
at _____ on the _____
day of _____ 18____, by reason of _____~~

I have never borne arms against the United States, and have never been convicted of Deser-
tion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the
Republic, and filed the same with _____ Post, No. _____ Depart-
ment of _____ on the _____ day of _____ 18____

(Signature.)

Residence, No. _____

I, on honor, recommend John W. White to the favorable considera-
tion of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

Edwin B. ...
(To be signed by a Comrade of the Post.)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.
Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Frank Buschman

Late *Private* Co. *I & C.*

2^d Mo. Art. Reg't for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

D. H. Keeler Post No. *152*

Department of *Missouri* 1890

Received and referred to the Examining Committee.

Ernest Walter
Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the within application.

Wm. H. Cray
Michael Bragg
Henry Kephling
Committee.

Applicant { Elected 188
 { Mustered 188

No. on Des. Book

Adjutant.

Copyright, 1885, by JOHN S. KOONTZ, Commander-in-Chief
Grand Army of the Republic.

MADE IN THE UNITED STATES OF AMERICA

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....
NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....

Reported to Department Headquarters.....

Post Surgeon.

Printed figures refer to spaces on Form F.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Mo. G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 48 years of age, and was born in Germany State of Prussia, now residing at Kepler St. Louis Co State of Mo., am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 1861, as Private in Co. E. 2^d Mo Regiment Light Art. for the period of 3 years, and was discharged therefrom as Heavy, at _____ on the _____ day of _____ 1863, by reason of converting regiment

I also re-enlisted 1863, as Private in Co. G. 2^d Mo Regiment Light Art. and was discharged therefrom as _____ at _____ on the _____ day of _____ 1865, by reason of the War closed

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18

(Signature).

Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Delam Kefelising
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Fred Wiegler
Late *Serjt* Co. *B*
Pacific Reg't. Batt'n for
Membership in the Grand Army of the Republic.

Recommended by Comrade
HEADQUARTERS
S. W. Keeler Post No. *152*
Department of *Missouri* 189*3*
Received and referred to the Examining
Committee.
Stephen Schilling
(Post Commander)

188
The undersigned Examining Committee
respectfully report favorably upon
the within application.

Joseph Grauer
Thomson
Christ Krause
Thos. Ostermann } Committee.

Applicant { Elected *29 Jan* 189*3*
Mustered *26 Feb* 189*3*

No. on Des. Book
Julius Hardt
Adjutant.

Copyright, 1886, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 71 years of age, and was born in Prussia State of _____, now residing at Oshterton State of Missouri, am by occupation a Merchant

I served during the late rebellion as follows:

First enlisted June 8th 1861, as 2^d Lieutenant Co. B Pacific Regt. No. 16 Guard for the period of 3 years, and was discharged therefrom as 2^d Lieut., at Pacific on the 18th day of Sept 1861, by reason of expiration of term

I also re-enlisted _____ 18 _____, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18 _____, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature).

Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Henry Levinhorn

ate *Private* Co. *3rd* Reg't *Mo Vol* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

J. N. Keller Post No. *152*

Department of *Missouri* 1887

Received and referred to the Examining Committee.

Post Commander.

August 28th 1887

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected *Aug 28th* 1887
Mustered *Aug 28th* 1887

No. on Des. Book *55*
W. H. Hartman
Adjutant

Copyright, 1885, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Kuler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Kuler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 37 years of age, and was born in Germany State of Prussia, now residing at Box 1014 State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 1861, as Private in Co. 3rd Regiment Mo Vol for the period of 3 months years, and was discharged therefrom as at on the 18 day of 18, by reason of

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the 18 day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not² made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend Henry Drain to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

1 Other enlistments are to be added.

2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Henry Kesselring
ate. *Private* Co. *18th F.*
2nd Reg't *draft* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
John C. Clark

HEADQUARTERS
Heeler Post No. *152*
Department of *Missouri* 188*4*

Received and referred to the Examining
Committee.
Robert C. Allen
Post Commander.

..... 188
The undersigned Examining Committee
respectfully report..... favorably upon
..... within application.

Michael Bayard
Frank Kessinkamp
John Freyberger Committee.

Applicant { Elected..... 188*4*
 { Mustered..... 188*4*

No. on Des. Book *17*
Henry Kesselring
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

GO TO THE OFFICERS AND MEMBERS

— OF —

Keeler Post No. *152* Dept of *Missouri* G. A. R.

I have the honor to make application for membership in *Keeler* Post No. *152*
of *Missouri* Grand Army of the Republic, basing my application on the following facts:

I am *44* years of age, and was born in *Sitzbachem Baden* State of
Germany, now residing at *Orville*
State of *Missouri*, am by occupation a *Carpenter*

I served during the late rebellion as follows:

First enlisted *22nd* of *April* 1861, as *Private* in Co. "*No. 7*"
3rd Regiment *Infantry* for the period of *3* months
and was discharged therefrom as *Private*, at *St. Louis*
on the *16* day of *Aug* 1861, by reason of *expiration of term of*
Service Re-enlisted *23rd* day of *Sept* 1861 for *3* years in
Comp. K. 12 Regt *Inf.* for the period of *3* years or during the
I also re-enlisted *Sept 23* 1861, as *Private* in Co. "*K*"
12th Regiment *Mo. Duffy* and was discharged therefrom as *Corp.*
at *St. Louis* on the *23rd*
day of *Sept* 1864 by reason of *expiration of term of*
Service

I have never borne arms against the United States, and have never been convicted by Court
Martial of Desertion, nor of any other infamous crime.

I have *not*² made previous application for membership to the Grand Army of the Republic
and filed the same with *Post No. 152* Department of *Missouri*
on the *18* day of *18*

(Signature)

Residence, No. *Orville St. Louis Co. Mo.*

I on honor recommend *Henry Kesseling* to the favorable consideration
of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *1.00*

John C. Woods
(To be signed by a Comrade of the Post.)

Note.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over.]

APPLICATION OF

Frederick Ossendorf

Late *Private* Co. *D*

Inds Reg't *Battalion*

Membership in the Grand Army of the Republic.

Recommended by Comrade

Julius Hardt

HEADQUARTERS

D. N. Keeler Post No. *152*

Department of *Missouri* 1890

Received and referred to the Examining Committee.

Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the within application.

M. Baugust

Theo. A. Cragg

A. Kesselring

Committee

Applicant { Elected 1890
Mustered 1890

No. on Des. Book *Julius Hardt*
Adjutant.

Copyright, 1885, by JOHN S. KOURTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.

Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 68 years of age, and was born in Germany State of Prussia, now residing at Albion State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 9th of June 1861, as Private in Co. D Pacific Regiment Bath for the period of 3 month years, and was discharged therefrom as Private, at St. Louis on the 18 Sept day of 1861, by reason of expiration of term

¹I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have ²made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature) Residence, No. Street.

I on honor recommend to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Joseph Cimpel
ate. *Private* Co. *Batt. F.*
4th Reg't *Mo. Art.* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

John C. Clark

HEADQUARTERS

Kear Post No. *152*

Department of *Missouri* 188*4*

Received and referred to the Examining Committee.

Robert W. Allen
Post Commander.

May 24 188*4*

The undersigned Examining Committee respectfully report favorably upon the within application.

H. H. ...
Wm. ...
John ...
Committee.

Applicant { Elected *May 24* 188*4*
Mustered *May 24* 188*4*

No. on Des. Book *211*

Wm. ...
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.

Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

OF

Keeler Post No. *152* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *Keeler* Post No. *152* of *Keeler* Grand Army of the Republic, basing my application on the following facts:

I am *50* years of age, and was born in *Steinbach, Prussia* State of *Germany*, now residing at *Melrose, St. Louis Co.* State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *August 7th* 1862, as *Private* in *Battalion F* *4* Regiment *Miss. Artillery* for the period of *3* years, and was discharged therefrom as *Private*, at *St. Louis, Mo.* on the *20* day of *July* 1865, by reason of *Genl. Order No. 105 Dept. of June 2nd 1865*

I also re-enlisted *18*, as *18* in Co. *18* Regiment *18* and was discharged therefrom as *18* at *18* on the *18* day of *18*, by reason of *18*

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have *not* made previous application for membership to the Grand Army of the Republic and filed the same with *18* Post No. *18* Department of *18* on the *18* day of *18*

(Signature) *Joseph J. Ginn*
Residence, No. *Melrose, St. Louis Co. Mo.*

I on honor recommend *Joseph Ginn* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *1.00*

John G. Deland
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.
1 If other enlistments, they are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

F. W. Steines

Late *Private* Co. *26.*

30th Reg't. *Miss. Inf.* for

Membership in the Grand Army of the Republic.

Recommended by Comrade
Michael Bouquet

HEADQUARTERS
Keeler Post No. *152*

Department of *Missouri* 1884

Received and referred to the Examining Committee.

Robert A. Allen
Post Commander.

..... 188

The undersigned Examining Committee respectfully report..... favorably upon..... e within application.

Wm. Ackerman
William Graver
John C. Clark } Committee.

Applicant { Elected..... 1884
Mustered..... 1884

..... on Des. Book *16*

Wesman George
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.

Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

— OF —

Keeler Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152
of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 44 years of age, and was born in St. Louis County State of
Missouri, now residing at Pine Bluff County
State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted August 16th 1862 as Private in Co. 76,
30th Regiment Mo. Infy for the period of 3 years, and
was discharged therefrom as Private, at St. Louis Mo.
on the 20 day of March 1863 by reason of disability

I also re-enlisted 18, as Private in Co. 76,
30th Regiment Mo. Infy and was discharged therefrom as
Private at St. Louis Mo. on the
day of 20 1863, by reason of disability

I have never borne arms against the United States, and have never been convicted by Court
Martial of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic
and filed the same with Keeler Post No. 152 Department of
Missouri on the 20 day of March 1863

(Signature)

Residence, No. 152 Keeler Missouri

I on honor recommend F. W. Steiner to the favorable consideration
of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

Adam Repelbing
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

1 If other enlistments, they are to be added.

2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

August Wiedner
of the *Bugler* Co. *F*
No. *10* Reg't *10th*

Membership in the Grand Army of the Republic.

Recommended by Comrade
W. H. ...

HEADQUARTERS

Keller Post No. *152*

Department of *Missouri* 1889

Received and referred to the Examining Committee.

Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the application within application.

Lawrence ...
Henry ... Committee.

Applicant { Elected *April 20* 1889
 { Mustered 188

No. on Des. Book
Julius ... Adjutant.

Copyright, 1880, by JOHN S. KOURTZ, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded. _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Keeler Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 47 years of age, and was born in St. Louis County State of Missouri, now residing at Greene P. O. State of Missouri, am by occupation a Blacksmith

I served during the late rebellion as follows:

First enlisted first day of May 1861, as Private in Co. F first Regiment No. Light Artillery for the period of 3 years, and was discharged therefrom as Private, at Paso Cavallo on the 31 day of January 1864, by reason of Enlisting in the Libran Volunteers

¹I also re-enlisted 1st of February 1864, as Bugler in Co. F second Regiment Light Artillery and was discharged therefrom as Private at Benton Barracks on the 11 day of August 1865, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not² made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18____

(Signature) August Wiedner
Residence, No. _____ Street.

I on honor recommend August Wiedner to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Adam Kefauver
(To be signed by Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Wm. C. Wingler
of *Prussia* Co. *B*
Reg't *Pat. Coy* for
Membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS

W. C. Wingler Post No. *152*
Department of *Missouri* 188*7*
Received and referred to the Examining
Committee.

Post Commander.

July 31st 188*7*
The undersigned Examining Committee
respectfully report favorably upon
within application.

Committee.

Electant { Elected *July 31st* 188*7*
Mustered *July 31st* 188*7*
in Des. Book *154*
Wm. J. Haseman
Adjutant

Copyright, 1887, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

NOTE: No. 100,000.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To *J. N. Kuller* Post No. *152* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *J. N. Kuller* Post No. *152* Department of *Missouri* Grand Army of the Republic, basing my application on the following facts:

I am *42* years of age, and was born in *Franklin* State of *Missouri*, now residing at *Clayton* State of *Missouri*, am by occupation a *Clerk*

I served during the late rebellion as follows:

First enlisted *June* 18*61*, as *Private* in Co. *B* *Pacific* Regiment *22d* *Mo* for the period of *3* months and was discharged therefrom as *Private* at *Pacific Mo* on the *11th* day of *Sept* 18*61*, by reason of *exp*

¹I also re-enlisted *18*, as *in* Co. *Regiment* and was discharged therefrom as *at* on the *day of* *18*, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have *not* made previous application for membership to the Grand Army of the Republic and filed the same with *Post No.* *Department of* on the *day of* *18*

(Signature)
 Residence, No. *Street.*

I on honor recommend *Wm C. Winkler* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *_____*

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Ed. S. Cooper

ate *Surg* Co. *13* Reg't *Hy Coy* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS
E. N. Keeler Post No. *152*

Department of *Missouri* 1887

Received and referred to the Examining Committee.

Post Commander.

Aug 28th 1887

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected *Aug 28th* 1887
Mustered *Aug 28th* 1887

No. on Des. Book *54*
Wm A S Hartman
Adjutant.

Copyright, 1887, by JOHN S. KOUZTZ, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in J. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 50 years of age, and was born in Indiana State of Ellisville, now residing at Missouri, am by occupation a Surgeon

I served during the late rebellion as follows:

First enlisted 18, as Surgeon in Co. 13th Regiment Ky Inf. for the period of 3 years, and was discharged therefrom as Surgeon, at 18, by reason of

¹I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend Ed. S. Cooper to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

John P. Pafford
of *Private* Co. *B.*
4th Reg't. *Mo. Inf.* for
membership in the Grand Army of the Republic.

Recommended by Comrade
Adrian Kesselring

HEADQUARTERS
B. V. Keeler Post No. *182*
Department of *Missouri* 188
Received and referred to the Examining Committee.

R. L. Allen
Post Commander.

September 27 1884

The undersigned Examining Committee respectfully

recommends favorably upon the within application

Adrian Kesselring
W. H. Stearns Committee.

Commonwealth

Rank { Elected *Sept 27* 1884
Mustered *Sept 27* 1884

on Des. Book *30*
Seaman Keizer
Adjutant.

Copyright, 1884, by ROBERT B. BEATH, Commander-in-Chief
Grand Army of the Republic.

To be filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY:

Entered on Medical Description Book No.
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1866, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 38 years of age, and was born in St. Louis County State of Missouri, now residing at Melrose State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted August 19th 1861, as Private in Co. "C." 4th Regiment Mo. Infantry for the period of 1 years, and was discharged therefrom as Private, at Benton Barracks on the 11th day of July 1861 by reason of Termination of War Sept March 29th 1865

I also re-enlisted 18, as 18 in Co. 18 Regiment 18 and was discharged therefrom as 18 on the 18 day of 18, by reason of 18

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have ~~not~~^{not} made previous application for membership to the Grand Army of the Republic and filed the same with Post No. 152 Department of Missouri

on the 18 day of 18

(Signature).

John Pappath

Residence, No. Melrose Street.

I on honor recommend John Pappath to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.65

August Steiner

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Wm. Haag
ate *Capt* Co. *E*
2nd - Reg't *3rd* for
Membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS

G. H. Keller Post No. *132*
Department of *Missouri* 188*7*
Received and referred to the Examining
Committee.

Post Commander.

January 30th 188*7*
The undersigned Examining Committee
respectfully report favorably upon
the within application.

Committee.

Applicant { Elected *Jan 30th* 188*7*
Mustered *Jan 30th* 188*7*

No. on Des. Book *46*
Wm. A. Hoffman
Adjutant

Copyright, 1885, by JOHN S. KOUZEL, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To E. W. Keller Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in E. W. Keller Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 69 years of age, and was born in Germany State of Prussia, now residing at Hollon, Missouri Co State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted Jan 1861, as Capt in Co. E Regiment 22 for the period of 3 months years, and was discharged therefrom as Capt, at Paris on the 15 day of July 1861, by reason of Exp

¹I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend Wm Haag to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Am Douglas

Late *Private* Co.

4th Reg't *Ill* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

C. W. Keeler Post No. *132*

Department of *Missouri* 188*7*

Received and referred to the Examining Committee.

Post Commander.

Sept 4th 188*7*

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected *Sept 4th* 188*7*

Mustered *Sept 4th* 188*7*

No. on Des. Book *36*

Wm J. Harman Adjutant.

Copyright, 1887, by JOHN S. KOURTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of master of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....

Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To E. N. Keuler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in E. N. Keuler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 40 years of age, and was born in Germany State of Prussia, now residing at Evanska State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 1861, as Private in Co. 1st Regiment Missouri Inf for the period of 1 years, and was discharged therefrom as Private, at Evanska on the 15 day of July 1862, by reason of Discharge

I also re-enlisted 1862, as Private in Co. 1st Regiment Missouri Inf and was discharged therefrom as Private at Evanska on the 15 day of July 1862, by reason of Discharge

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Evanska Post No. 152 Department of Missouri on the 15 day of July 1862

(Signature).

Residence, No. Evanska Street.

I on honor recommend Mr Goergis to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 0.00

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Dominique Barroni
1st *Private* Co. *16*
First Reg't *Louisiana* *Infantry*
Membership in the Grand Army of the Republic.

Recommended by Comrade
Michael Bouquet
HEADQUARTERS
Keller Post No. *154*
Department of *Missouri* 1884

Received and referred to the Examining
Committee.
Robert G. Allen
Post Commander.

188
The undersigned Examining Committee
respectfully report favorably upon
within application.

Martin Clemons
John Walter
Edwin Kesselring
Committee.

Applicant { Elected 1884
Mustered 1884

on Des. Book *19*
German Berger
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

OF

Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 50 years of age, and was born in Genoa State of Italia, now residing at Melrose, St. Louis Co. State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 15th 1861, as Private in Co. G. 4th Regiment Louisiana Inf. for the period of 3 years, and was discharged therefrom as Private at N. Orleans, La. on the 29th day of October 1865, by reason of Expiration of term of service

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have not² made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature) Dominique Barroni
Residence, No. Melrose, St. Louis Co. Mo.

I on honor recommend Dominique Barroni to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

M. E. Barrett
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Christian Krauch
ate. *Private* Co. *7th*
6th Reg't *Buff. Vol. Col.*

Membership in the Grand Army of the Republic.

Recommended by Comrade
J. M. Steiner

HEADQUARTERS
D. M. Keefer Post No. *152*

Department of *Missouri* 188*4*

Received and referred to the Examining Committee.

R. P. Allen
Post Commander.

Sept 27 188*4*

The undersigned Examining Committee respectfully report favorably upon the within application.

D. Baroni
G. Cooper
E. Schuttner } Committee

Applicant Elected *Sept 27* 188*4*

Mustered *Sept 27* 188*4*

No. on Des. Book *131*

Herman Heinge
Adjutant.

U. S. GOVERNMENT PRINTING OFFICE

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book.....
2. Name.....
3. Where born.....
4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....

Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

OF

D. H. Keeler Post No. 152 Dept of *Missouri* G. A. R.

I have the honor to make application for membership to *D. H. Keeler* Post No. 152 of ~~the~~ Grand Army of the Republic, basing my application on the following facts:

I am 48 years of age, and was born in *Germany* State of *Germany*, now residing at *Fox Creek* State of *Missouri*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted in the *Third* 18th *Months* Service Regiment for the period of *3* years, and was discharged therefrom as *Private*, at *Washington D.C.* on the *4th* day of *April* 18⁶⁶, by reason of *Expiration of term of Service*

¹I also re-enlisted *April 5th* 18⁶⁵ as *Private* in Co. *F* *6th* Regiment *U.S. Veterans Vol. Batt.* and was discharged therefrom as *Private* at *Washington D.C.* on the *4th* day of *April* 18⁶⁶, by reason of *Expiration of term of Service*

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have ~~not~~² made previous application for membership to the Grand Army of the Republic and filed the same with *Post No. 152* Department of *Missouri* on the *4th* day of *April* 18⁶⁵

(Signature) *Joseph S. Swartz*
Fox Creek Street

I on honor recommend *Christian Krauch* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *1.65*
F. W. Steiner
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Fred. Neumann
Late *Capt* Co. *27*
Rachel *W* Reg't for
Membership in the Grand Army of the Republic.

Recommended by Comrade
Adam K. Kefeling

HEADQUARTERS
D. V. Keeler Post No. *152*

Department of *Missouri* 189*2*
Received and referred to the Examining
Committee.

Charles Francis
Post Commander

188
The undersigned Examining Committee
respectfully report favorably upon
the within application.

H. W. Walter
Henry Kefeling Committee
Wm. Neumann

Applicant { Elected *March 27* 189*2*
Mustered *March 27* 189*2*

No. on Des. Book
Julius Hard
Adjutant

Copyright, 1885, by JOHN S. KOUZS, Command-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Fredrick Neumann Post No. 162 Dept of Mo G. A. R.

I have the honor to make application for membership in D. N. Keller Post No. 162 Department of Mo Grand Army of the Republic, basing my application on the following facts:

I am 55 years of age, and was born in Germany State of _____, now residing at Yonkers Mo State of _____, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 15 1861, as Captain in Co. D 90th Ill Regiment _____ for the period of 3 years, and was discharged therefrom as Jan 10, at St Charles on the 10 day of _____ 1864 by reason of Expulsion

¹I also re-enlisted _____ 18 _____, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18 _____, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____² made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature) Fredrick Neumann
Residence, No. _____ Street.

I on honor recommend Fredrick Neumann to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

John K. Kelling
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Man Mathis
ate *Private Co*
Regt. *1st* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
W. H. Miller Post No. *1152*

HEADQUARTERS

Department of *Missouri* 1887

Referred to the Examining
Post Commander.

The undersigned Examining Committee
respectfully recommends favorably upon
within application.

Committee

Applicant { Elected *July 31st* 1887
Mustered *July 31st* 1887
on Des. Book *52*
W. B. Hartman
Adjutant

Copyright 1887 by Wm. B. Hartman, Commander-in-Chief
Grand Army of the Republic

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
- 10, 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Figured figures refer to spaces on Form F.

Post Surgeon

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. N. Kuler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in J. N. Kuler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 49 years of age, and was born in Germany State of Prussia, now residing at Bonhomme State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 1st 1861, as Private in Co. D Pacific Regiment Bat 1st for the period of 3 months, and was discharged therefrom as Private, at Pacific Mo on the 15th day of Sept 1861, by reason of expiration

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have never made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature)
Residence, No. Street.

I on honor recommend Mr. Kuler to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1. Other enlistments are to be added.
- 2. If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Chas. Pappath

Late *Princk* Co. *D*

Pacific Reg't. *Battalion*

Membership in the Grand Army of the Republic.

Recommended by Comrade

F. Berthold

HEADQUARTERS

D. N. Keeler Post No. *152*

Department of *Missouri* 1891

Received and referred to the Examining Committee.

Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the within application.

Fred. Meines

Wm. Mosberg

John May

Committee

Applicant { Elected *Jan 25* 1891
Mustered *Jan 25* 1891

No. on Des. Book

Julius Hardt

Adjutant.

Copyright, 1886, by JOHN S. KOUNTZ, Commander-in-Chief Grand Army of the Republic.

U. S. GOVERNMENT, FOR SALE.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....

3. Where born..... 4. Color.....

5. Regiment or Vessel serving in when wounded.....

6. What Army or Squadron?.....

(As Army of the Potomac, Mississippi Squadron, etc., etc.)

7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....

8. How many times wounded?..... 9. Ages when wounded?.....

10. 11. Dates when wounded and names of engagements.....

12. Parts of the body wounded or disabled.....

13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....

14. Kind of Missile.....

15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.

Reported to Department Headquarters.....

Printed figures refer to spaces on Form P.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 81 years of age, and was born in Germany State of Pruussia, now residing at Melrose State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 16th 1861, as Private in Co. E Pacific Regiment Battalion for the period of 3 Months was discharged therefrom as _____, at _____ on the _____ day of Sept 1861, by reason of being out

¹I also re-enlisted _____ 18 _____, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18 _____, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____² made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature) _____
Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

H. W. Barthold
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Louis Bauer
Reg't D for
membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS

N. Kuler Post No. 152
Department of Missouri 1887

Received and referred to the Examining Committee.

Post Commander,

May 29th 1887

The undersigned Examining Committee fully report favorably upon within application.

Committee

Elected May 29th 1887
Mustered May 29th 1887

Des. Book 150
Wm. H. St. Herman
Adjutant

Copyright, 1887, by JOHN S. KOWITZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
 3. Where born _____ 4. Color _____
 5. Regiment or Vessel serving in when wounded _____
 6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
 7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
 8. How many times wounded? _____ 9. Ages when wounded? _____
 10. 11. Dates when wounded and names of engagements _____
 12. Parts of the body wounded or disabled _____
 13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
 14. Kind of Missile _____
 15. Rank when wounded _____
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.
- Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. N. Keller Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in J. N. Keller Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 52 years of age, and was born in Germany State of _____, now residing at Metross State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 1861, as Private in Co. D Regt. 3rd Inf for the period of 3 months, and was discharged therefrom as Private, at Pacific on the 15th day of Sept 1861, by reason of expiration

¹I also re-enlisted _____ 18 _____, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18 _____, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature).

Residence, No. _____ Street.

I on honor recommend Louis Graw to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

William Craver
late *Private* Co. *B*
4th Reg't *Mo. Cav.* for

Membership in the Grand Army of the Republic.

Recommended by Comrade
William Kusselberg

HEADQUARTERS
Keeler Post No. *152*

Department of *Missouri* 1884

Received and referred to the Examining Committee.

Robert G. Allen
Post Commander.

June 7th 1884

The undersigned Examining Committee respectfully report favorably upon the within application.

G. Gousser
J. Freymeyer
J. Walker } Committee.

Applicant { Elected *June 7th* 1884
Mustered *June 7th* 1884

No. on Des. Book *34*

Thomas George
Adjutant

BE A HYPOCRISIT, PER PHRASE

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.

Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

OF
D. K. Keeler Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 of Grand Army of the Republic, basing my application on the following facts:

I am 44 years of age, and was born in Maubroun State of Germany, now residing at Melrose State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted February 20th 1862, as Private in Co. C. 4th Regiment Mo. Cav. for the period of 3 years, and was discharged therefrom as Private, at Vicksburg, Mississippi on the twentieth day of February 1865, by reason of Expiration of term of service

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature)

Gustav Grouer

Residence, No. Main St. St. Louis

I on honor recommend Gustav Grouer to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.65

D. K. Keeler
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Carrion Jones

ate. *13th* Reg't *Ma Caval*

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

D. M. Miller Post, No. *142*

Department of *Ill* 189

Received and referred to the Examining Committee.

Post Commander.

189

The undersigned Examining Committee respectfully report favorably upon the within application.

Adrian H. ...
W. Miller
Paula Committee.

Applicant { Elected *Adrian H.* 189

{ Mustered *Adrian H.* 189

No. on Des. Book *141*

Adrian H. ... Adjutant

To be Filled by, or for, the Post Surgeon, on or before the Night of Muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____

3. Where born _____ 4. Color _____

5. Regiment or Vessel serving in when wounded _____

6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)

7. Branch of service (Infant., Cav., Marine, Sailor, etc.) _____

8. How many times wounded? _____ 9. Ages when wounded? _____

10. 11. Dates when wounded and names of Engagements _____

12. Parts of the body wounded or disabled _____

13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____

14. Kind of Missile _____

15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS, G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and Sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has, at any time, borne arms against the United States.

To D. W. Keller Post, No. 152 Dept of Mo G. A. R.

I have the honor to make application for membership in

Post, No. 152 Department of Mo Grand Army of the Republic,

basing my application on the following facts:

I am 60 years of age, and was born in Ohio State
of Mo, now residing at Boyer
State of Mo, am by occupation a Laborer

I served during the late Rebellion as follows:

First enlisted 1862 18, as Private in Co. _____
100 Regiment _____ for the period of 2 years, and
was discharged therefrom as Private at Forest Leavenworth
on the 11 Jan day of _____ 1864 by reason of Wound

I also re-enlisted _____ 18, as _____ in Co. _____

_____ Regiment _____ and was discharged therefrom as _____
at _____ on the _____
day of _____ 18, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the Republic, and filed the same with D. W. Keller Post, No. 152 Department of Mo on the 10 day of March 1882

(Signature.)

Residence, No. Boyer St Louis Co Mo

I, on honor, recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

(To be signed by a Comrade of the Post.)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

Any failure to report all the facts required by this application may render the muster-in null and void.

1 Other enlistments are to be added.

2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Mr. A. F. Hartman
ate *Pratt* Co. *I*
Pacific Reg't *Bethel* for
Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS
J. N. Hahn Post No. *152*
Department of *Missouri* 188*6*
Received and referred to the Examining
Committee.

Post Commander.
..... 188*6*
The undersigned Examining Committee
respectfully report..... favorably upon
the within application.

} Committee.
.....
.....

Applicant { Elected..... 188*6*
Mustered..... 188*6*
No. on Des. Book *43*

Adjutant.
Copyright, 1885, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

MARK A. HINTON, PRES. PRINTED.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. W. Keller Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in J. W. Keller Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 55 years of age, and was born in Germany State of Germany, now residing at Fox Creek State of Missouri, am by occupation a farmer

I served during the late rebellion as follows:

First enlisted Jan 1861 1861, as Private in Co. D 10th Regiment Illinois for the period of 3 years, and was discharged therefrom as Private, at Rock Island on the 15 day of Feb 1861, by reason of etc

I also re-enlisted 18 1861, as Private in Co. D 10th Regiment Illinois and was discharged therefrom as Private at Rock Island on the 15 day of Feb 1861, by reason of etc

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. 152 Department of Missouri

on the 18 day of 1861

(Signature) Mr. J. F. Fairman

Residence, No. Street.

I on honor recommend to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Charles Muller

ate *Private* Co. *F*

2nd Reg't *1st* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

J. A. Keenan Post No. *152*

Department of *Massachusetts* 188*6*

Received and referred to the Examining Committee.

Post Commander.

188*6*

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected 188*6*

{ Mustered 188*6*

No. on Des. Book *44*

Adjutant.

Copyright, 1885, by JOHN S. KOURTZ, Commander-in-Chief Grand Army of the Republic.

WALK & WYATT, PR. 1885.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

- 1. No. on Des. Book _____ 2. Name _____
- 3. Where born _____ 4. Color _____
- 5. Regiment or Vessel serving in when wounded _____
- 6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
- 7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
- 8. How many times wounded? _____ 9. Ages when wounded? _____
- 10. 11. Dates when wounded and names of engagements _____

12. Parts of the body wounded or disabled _____

13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____

14. Kind of Missile _____

15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. W. Kuler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in J. W. Kuler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 60 years of age, and was born in Germany State of Prussia, now residing at Fort Union State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 1861, as Private in Co. H 10th Missouri Regiment for the period of 3 years, and was discharged therefrom as Private, at Fort Union on the 12 day of Sept 1861, by reason of Exp

I also re-enlisted 18, as Private in Co. H 10th Missouri Regiment and was discharged therefrom as Private at Fort Union on the 12 day of Sept 1861, by reason of Exp

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have Not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature) Residence, No. Street.

I on honor recommend to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Ernest Koch
of the *Parade* Co. *E*
U.S. Reg't *1st* for
Membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS

J. N. Keller Post No. *1522*
Department of *Massachusetts* 1887
Received and referred to the Examining
Committee.

Post Commander.

April 24th 1887
The undersigned Examining Committee
respectfully report favorably upon
the within application.

Committee.

Applicant { Elected *April 24th* 1887
 { Mustered *April 24th* 1887

No. on Des. Book *18*
Wm. A. St. Hartman
Adjutant.

Copyright, 1886, by JOHN S. KOUVITZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. N. Keller Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in J. N. Keller Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 52 years of age, and was born in Germany State of Prussia, now residing at Labadie State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted the 3rd of May 1861, as Private in Co. C 16th S. Regiment Regular Battalion Mo. Vol. for the period of 3 months years, and was discharged therefrom as at on the 27th day of August 1861, by reason of at

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the 18 day of 18, by reason of at

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have 2287 made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature). Residence, No. Street.

I on honor recommend Ernest Hoch to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

John Schaag
Late Private Co. F
1st Michigan Reg't _____ for

Membership in the Grand Army of the Republic.

Recommended by Comrade
A. Kesselring

HEADQUARTERS
Keller Post No. 152

Department of Ill. 1890

Received and referred to the Examining Committee.

Ernst Walter
Post Commander.

_____ 188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

H. Kesselring
Wm. Heinricien
F. Wray } Committee

Applicant { Elected _____ 1890
 { Mustered _____ 1890

No. on Des. Book _____
Julius Schaag
Adjutant.

Copyright, 1885, by JOHN S. KOURY, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 49 years of age, and was born in Germany State of Darmstadt, now residing at Orville State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 15th August 1861, as Private in Co. _____ Regiment _____ for the period of 5 months years, and was discharged therefrom as Private, at St. Louis on the 4th day of February 1862, by reason of expiration of term

¹I also re-enlisted 24th February 1862, as Private in Co. F 1st Mo. Regiment U. S. Val. and was discharged therefrom as Private at Polla Mo on the 6th day of April 1865, by reason of expiration of term

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature)

Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

D. N. Keeler
(To be signed by Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Charles Martin

Late _____ Co. _____
Reg't _____ for _____

Membership in the Grand Army of the Republic.

Recommended by Comrade _____

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee.

Post Commander _____

188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

Charles Maeller
Valentin Frank
J. W. Steiner } Committee.

Applicant { Elected _____ 188
 { Mustered _____ 188

No. on Des. Book _____

Adjutant _____

Copyright, 1885, by JOHN S. KOUNZ, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To O. W. Keeler Post No. 152 Dep't of Mo. G. A. R.

I have the honor to make application for membership in O. W. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 63 years of age, and was born in New York State of New York, now residing at Glennan Linn works State of Missouri, am by occupation a Labourer

I served during the late rebellion as follows:

First enlisted 1857, as Private in Co. C 1st Regiment U. S. Regulars for the period of 5 years, and was discharged therefrom as Private, at Fort Clark, Texas on the 1856 day of expiration of term of enlistment

I also re-enlisted June 17 1861 as Sergeant in Co. G 6th Regiment Mo. Vol. Inf. and was discharged therefrom as Sergeant at St. Louis Mo on the 16th day of July 1862, by reason of disability

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the Republic and filed the same with Post No. _____ Department of _____ on the _____ day of _____ 18_____

(Signature).

Residence, No. _____ Street.

I on honor recommend Charles Martin to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Charles Martin
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Frederic Utter

Late *private* Co. *D*

1st Reg't *Battalion*

Membership in the Grand Army of the Republic.

Recommended by Comrade *L. Graver*

HEADQUARTERS

Keeler Post No. *152*

Department of *Missouri* 1888

Received and referred to the Examining Committee.

Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected *Febr. 26* 1888
Mustered *May 26* 1888

No. on Des. Book
Louis Graver
Adjutant.

Copyright, 1887, by JOHN S. KOUNZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Keeler Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 63 years of age, and was born in Germany State of Hanover, now residing at near Melrose State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted June 15th 1861, as Private in Co. D 7th Regiment Battalion for the period of 3 months years, and was discharged therefrom as Private, at Pacific Mo. on the 26 day of Sept. 1861, by reason of expiration of time

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of

on the day of 18
(Signature) Fredrick Ulter
Residence, No. Street.

I on honor recommend Fredrick Ulter to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 2.00
Yanis Grauer
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.
1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

August Steiner
at *Private* Co. *B.*
71st Reg't *Inf.* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

Joseph Campbell

HEADQUARTERS

D. N. Keeler Post No. *157*

Department of *Massachusetts* 188*4*

Received and referred to the Examining Committee.

R. B. Allen
Post Commander.

July 26 188*4*

The undersigned Examining Committee respectfully report favorably upon the within application.

M. Bouquet
Robert H. ...
John ...
Committee.

Applicant { Elected *July 26th* 188*4*
Mustered *July 26th* 188*4*

No. on Des. Book *661*

Heaman ...
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

— OF —

D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152
of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 37 years of age, and was born in St. Louis County State of
Missouri, now residing at Malvern
State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted Sept 14 1862 as Private in Co. B
41st Regiment Mo. Inf. for the period of 2 years, and
was discharged therefrom as Private, at St. Louis Missouri
on the day of 18 , by reason of

¹I also re-enlisted 18 , as in Co.
 Regiment and was discharged therefrom as
at on the
day of 18 , by reason of

I have never borne arms against the United States, and have never been convicted by Court
Martial of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic
and filed the same with Post No. Department of
on the day of 18

(Signature) August G. Steiner
Residence, No. Street.

I on honor recommend August Steiner to the favorable consideration
of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

Herman Baeyer
(To be signed by a Comrade of the Post.)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Euler Hardt

ate *Private* Co. *D*
25th Reg't *Inf* for

Membership in the Grand Army of the Republic.

commended by Comrade

HEADQUARTERS

W. Keeler Post No. *102*

Department of *Missouri* 1887

Received and referred to the Examining Committee.

Post Commander.

April 24th 1887

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected *Apr. 24th* 1887
 { Mustered *Apr. 24th* 1887

No. on Des. Book *49*
Wm. H. Harbman
Adjutant

Copyright, 1887, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To J. A. Kuler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in J. A. Kuler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 56 years of age, and was born in Germany State of Missouri, now residing at Missouri State of Missouri, am by occupation a Farmer.

I served during the late rebellion as follows:
First enlisted Jan 9 1861, as Private in Co. D 24th Regiment 2nd Div. for the period of 3 months years, and was discharged therefrom as Private, at Paris on the 15th day of Sept 1861, by reason of expiration

I also re-enlisted 18, as in Co. in Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature) _____
Residence, No. _____ Street.

I on honor recommend Julius Hardt to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Date 10/1/18 Co. 2
1st Regt. 2nd for
Membership in the Grand Army of the Republic.

Recommended by Comrade
Shelley

HEADQUARTERS.

1st Regt. 2nd Post No. 189
Department of Ill.
Received and referred to the Examining
Committee
Charles L. Hartney
Post Commander.

The undersigned Examining Committee re-
spectfully report favorably upon the
within application.

Shelley
Committee.

Applicant { Elected 10/1/18 1898
Mustered 10/1/18 1898

No. on Des. Book 100
Adrian K. Johnson
Adjutant.

To Be Filled By, Or For, the Post Surgeon, On Or Before the Night of Muster of This Applicant.

1. No. on Des. Book
2. Name
3. Where born
4. Color
5. Regiment or Vessel serving in when wounded
6. What Army or Squadron?
- (As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service (Inf'try, Cav., Marine, Sailor)
8. How many times wounded?
9. Ages when wounded?
10. ii. Dates when wounded and names of Engagements
11. Parts of the body wounded or disabled
12. State Results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars
13. Kind of Missile
14. Rank when wounded
- NOTE.—If not wounded or disabled, so state distinctly.
15. Entered on Medical Description Book No.
16. Reported to Department Headquarters

Post Surgeon.

RULES AND REGULATIONS, G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership—Soldiers and Sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership, who has, at any time, borne arms against the United States.

To D. H. Keeler Post, No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in D. H. Keeler
Post, No. 152 Department of Missouri Grand Army of the Republic,
basing my application on the following facts:

I am 68 years of age, and was born in St. Louis County State
of Missouri, now residing at Hallow
State of Missouri, and by occupation a Farmer

I served during the late Rebellion as follows:

First enlisted June 1861, as Private in Co. E
Pacific Battalion Mo. Ho. Regt. for the period of 90 days, and
was discharged therefrom as Private at Pacific Mo
on the 18 day of September 1861, by reason of Expiration of
time

I also re-enlisted October 1861, as Private in Company
Kings Regiment Road Patrol and was discharged therefrom as Private
at Benton Barracks Mo on the
day of January 1862 by reason of Expiration of time

I have never borne arms against the United States, and have never been convicted of Desertion, nor
of any other infamous crime.

I have not made previous application for membership to the Grand Army of the
Republic, and filed the same with _____ Post, No. _____ Department
of _____ on the _____ day of _____ 18

(Signature) August Stahlbach
Residence No. Hallow Mo

I, on honor, recommend August Stahlbach to the favorable
consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is Proposition fee, \$ 2.00

Charles Schindler
(To be signed by a Comrade of the Post.)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any
failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

John Meier
Late Private Co. D
1st Regt. Battalion for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee.

Ernst Walter
Post Commander.

188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

Committee

Applicant { Elected _____ 188
 { Mustered _____ 188

No. on Des. Book _____

Jacobus Board
Adjutant.

Copyright, 1885, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

MADE & PRINTED IN THE U.S.A.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(An Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____

12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Post No. Dep't of G. A. R.

I have the honor to make application for membership in L. N. Keeler Post No. 152 Department of Mo. Grand Army of the Republic, basing my application on the following facts:

I am 66 years of age, and was born in Germany State of Hanover, now residing at State of, am by occupation a

I served during the late rebellion as follows: First enlisted 9 June 1861, as Private in Co. D Regiment Pacific Base for the period of 3 months years, and was discharged therefrom as Private, at St. Louis on the 18th day of Sept 1861, by reason of expiration of term

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

William Sumner

Late *Private* Co. *B.*
1st Reg't *Mo. Cav* for

Membership in the Grand Army of the Republic.

Recommended by Comrade
Herman Jager

HEADQUARTERS
Keller Post No. *152*

Department of *Missouri* 1884

Received and referred to the Examining Committee.

R. C. Allen
Post Commander.

July 26th 1884
The undersigned Examining Committee respectfully report favorably upon the within application.

Henry Kefeling
Michael Brannon
John Walker
Committee.

Applicant { Elected *July 26th* 1884
Mustered *July 26th* 1884

No. on Des. Book *25*
Georain George
Adjutant.

Small text at bottom left of page.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

— OF —

D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 of Grand Army of the Republic, basing my application on the following facts:

I am 52 years of age, and was born in Germany State of Prussia, now residing at Berlin State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 1864, as Private in Co. E 1st Regiment Mo Cav. for the period of 3 years, and was discharged therefrom at on the day of 1865, by reason of Expiration of term of service

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature) William Steiner Residence, No. Bonham Street

I on honor recommend William Steiner to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

Adam Reeling (To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. 1 If other enlistments, they are to be added. 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Nel Furrer

State *Prussia* Co. *F*

Prussia Reg't *Poland* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

D. N. Kuler Post No. *152*

Department of *Missouri* 1887

Received and referred to the Examining Committee.

Post Commander.

July 31st 1887

The undersigned Examining Committee respectfully report favorably upon the within application.

Committee.

Applicant { Elected *July 31st* 1887
Mustered *July 31st* 1887

No. on Des. Book *53*
W. A. F. Hartman
Adjutant.

Copyright, 1885, by JOHN S. KOUZEL, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Kuler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Kuler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 62 years of age, and was born in Germany State of Germany, now residing at Fox Creek State of Missouri, am by occupation a gun smith

I served during the late rebellion as follows:

First enlisted Jan 1861, as Private in Co. F. Pacific Regiment. Bat Iny for the period of 3 months years, and was discharged therefrom as Private at Pacific Mo on the 15th day of Sept 1861, by reason of expulsion

¹I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature)

Residence, No. Street.

I on honor recommend Wal Funk to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Henry Johnson

Late Private Co. D

Reg't _____ for

Membership in the Grand Army of the Republic.

Recommended by Comrade

Thomas A. Keimann

HEADQUARTERS

D. W. Keeler Post No. 152

Department of Missouri 1894

Received and referred to the Examining Committee.

Julius Harsh Post Commander.

188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

Joseph P. ...
Dr. Steiner
John ...
Committee.

Applicant { Elected June 24 1894
Mustered 4 11 1894

No. on Des. Book 85

Louis Grauer
Adjutant.

Copyright, 1886, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book 85 2. Name Henry Johnson
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Keeler Post No. 152 Dept of Mo G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 57 years of age, and was born in Ohio State of Ohio, now residing at Glencoe State of Mo, am by occupation a Laborer

I served during the late rebellion as follows:

First enlisted Allan Ells 1867, as Private in Co. D Regiment 14th for the period of 3 years, and was discharged therefrom as a Private at Springfield Ells on the June 6 day of 1865 by reason of General Order from War Department

I also re-enlisted 18 , as in Co. Regiment and was discharged therefrom as at on the day of 18 , by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have not made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend Henry Johnson to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

Thos. F. Ackerman
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

W. P. Ritchey
Late *Private Co. "K"*
Eleventh Reg't Mo. Infy. for
Membership in the Grand Army of the Republic.

Recommended by Comrade
Norman Keizer

HEADQUARTERS
Keizer Post No. *152*
Department of *Missouri* 1884
Received and referred to the Examining
Committee.

Robert G. Allen
Post Commander.

.....188
The undersigned Examining Committee
respectfully report.....favorably upon
he within application.

John C. Clark
Alex. Becker
St. Onger } Committee.

Applicant { Elected.....1884
Mustered.....1884

No. on Des. Book *20*
Norman Keizer Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book *20* 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

— OF —

Keeler Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 of Grand Army of the Republic, basing my application on the following facts:

I am 45 years of age, and was born in Randolph State of Arkansas, now residing at Albenton, St. Louis Co. State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted July 21st 1861, as Private in Co. K. 11th Regiment Mo. Infy. for the period of 3 years, and was discharged therefrom as Corporal, at Hollins Springs Mississippi on the Tenth day of January 1863, by reason of disability

¹I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have ~~not~~² made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of

on the day of 18

(Signature)

Residence, Albenton St. Louis Co. Street.

I on honor recommend W. J. Ritchey to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

Norman Keizer
(To be signed by a Comrade of the Post.)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

1 If other enlistments, they are to be added.

2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

Wm Kissing

Late _____ Co. *J*

9th Mo. Reg't Infantry for

Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

D. H. Heekin Post No. *152*

Department of *Missouri* 1889

Received and referred to the Examining Committee.

Ernest Walter
Post Commander.

Oct 27th 1889

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

John Raffrath
Wm Hassberg
Chas Schueller } Committee

Applicant { Elected *Oct 27* 1889
Mustered *Oct 27* 1889

No. on Des. Book _____
Julius Hardt
Adjutant.

Copyright, 1882, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

MADE & PRINTED BY THE NATIONAL

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to space on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. U. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. U. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 72 years of age, and was born in Germany State of Prussia, now residing at Hollow P O State of Missouri, am by occupation a Saddler

I served during the late rebellion as follows:

First enlisted April 1861, as Private in Co. E 3d Regiment Missouri Volunteers for the period of 3 months, and was discharged therefrom as Private, at _____ on the _____ day of _____ 1861, by reason of expiration

of term

_____ 18 _____ as _____ in Co. _____
_____ Regiment _____ and was discharged therefrom as _____
_____ at _____ on the _____
day of _____ 18 _____, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____? made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature) _____

Residence, No. _____ Street.

I on honor recommend Mr. Kissing to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

John P. B. B. B.
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Chas. Schuddig
Late Private Co. E.
Pacific Reg't Batt for
Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS
Post No. _____

Department of _____ 188
Received and referred to the Examining
Committee.

Post Commander.

188

The undersigned Examining Committee
respectfully report _____ favorably upon
the within application.

Frederic Rosenbaum
Charles Krauer Committee
W. M. Herthold

Applicant { Elected _____ 188
Mustered _____ 188
No. on Des. Book _____

Adjutant.
Copyright, 1886, by JOHN S. KOUWYK, Commander-in-Chief
Grand Army of the Republic.
BURL & BRETHERTON, PHILADELPHIA.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F. Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To _____ Post No. _____ Dep't of _____ G. A. R.

I have the honor to make application for membership in _____ Post No. _____ Department of _____ Grand Army of the Republic, basing my application on the following facts:

I am 34 years of age, and was born in Germany State of Prussia, now residing at Rockfield P. O. State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 16th day of June 1861, as Private in Co. E Parviz Regiment Battalion Mo. Steam Guards for the period of 9 months and was discharged therefrom as Private at Parviz Mo. on the 18th day of Sept 1861, by reason of expiration of term

I also re-enlisted _____ 18, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 (Signature) _____

Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Julius Pohlig (To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added,
2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Chas. Cole

Late *Private* Co. *6*

144th Ill Reg't *Inf* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

Fred Steiner

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee.

Ernest Waller

Post Commander

188

The undersigned Examining Committee respectfully report _____ favorably upon the within application.

A. Bedman

Chas. Muller

Fred Muog

Committee

Applicant { Elected _____ 188
Mustered _____ 188

No. on Des. Book _____

Julius Hardt

Copyright, 188, by JOHN S. KOURTY, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To..... Post No..... Dep't of..... G. A. R.

I have the honor to make application for membership in..... Post No..... Department of..... Grand Army of the Republic, basing my application on the following facts:

I am 37 years of age, and was born in England State of....., now residing at Glasgow State of Missouri, am by occupation a Line Surgeon

I served during the late rebellion as follows:

First enlisted 20 of Sept 1864, as Private in Co. E 144 Ill. Regiment U. S. Vol. for the period of 1 year, and was discharged therefrom as Private, at Springfield Ill. on the 14 day of July 1865, by reason of by order of War Dep't

I also re-enlisted 18, as..... in Co..... Regiment and was discharged therefrom as..... at..... on the..... day of 18, by reason of.....

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have made previous application for membership to the Grand Army of the Republic and filed the same with..... Post No..... Department of..... on the..... day of..... 18

(Signature):.....

Residence, No..... Street.

I on honor recommend..... to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$.....

J. W. Steiner (To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added,
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

William [unclear]
Late *Private* Co. *E*
4 Reg't *1st* for
Membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS.

D. W. Hill Post, No. *1562*
Department of *Ill.*
Received and referred to the Examining
Committee
J. W. [unclear]
Post Commander

The undersigned Examining Committee
respectfully report *favorably* upon the
within application.
Charles [unclear]
William [unclear] Committee

Applicant { Elected
 { Mustered
No. on Des. Book

To Be Filled By, Or For, the Post Surgeon, On Or Before the Night of Muster of This Applicant.

1. No. on Des. Book
 2. Name
 3. Where born
 4. Color
 5. Regiment or Vessel serving in when wounded
 6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
 7. Branch of service (Infantry, Cav., Marine, Sailor)
 8. How many times wounded? Ages when wounded?
 9. 11. Dates when wounded and names of Engagements
 10. 12. Parts of the body wounded or disabled
 13. State Results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.
 14. Kind of Missile
 15. Rank when wounded
- NOTE.—If not wounded or disabled, so state distinctly.
- Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Post Surgeon.

RULES AND REGULATIONS, G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership—Soldiers and Sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership, who has, at any time, borne arms against the United States.

To Post No. 152 Dept of Ill G. A. R.

I have the honor to make application for membership in _____

Post, No. 152 Department of Ill Grand Army of the Republic,

basing my application on the following facts:

I am 45 years of age, and was born in Germany State
of _____, now residing at Chicago
State of Ill, and by occupation a Fireman

I served during the late Rebellion as follows:

First enlisted _____ 1861, as Private in Co. C
4 Regiment 11th Infantry for the period of 3 years, and
was discharged therefrom as Sgt, at St Louis
on the May day of _____ 1862, by reason of expiring

I also re-enlisted _____ 186 , as _____ in Co. _____

Regiment _____ and was discharged therefrom as _____
at _____ on the _____
day of _____ 186 , by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____, made previous application for membership to the Grand Army of the Republic, and filed the same with _____ Post, No. _____ Department

of _____ on the 25 day of _____ 1

(Signature.) William Remond

Residence No. Chicago

I, on honor, recommend J. W. Starnes to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is Proposition fee, \$ _____

William Remond
(To be signed by a Comrade of the Post.)

NOTE—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

James Senior
ate *Private Co. 'G.*
17 Reg't *Infantry* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
John C. Clook
HEADQUARTERS
Capt. Keeler Post No. *152*
Department of *Missouri* 188*4*
Received and referred to the Examining
Committee.
Robert C. Allen
Post Commander.

May 24 188*4*
The undersigned Examining Committee
respectfully report *favorably* upon
the within application.

John Taylor
Alex. B. Baker
P. Kainkamp } Committee.

Applicant { Elected *May 24* 188*4*
Mustered *May 24* 188*4*

No. on Des. Book *22*
Heorn King
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....
NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

— OF —

Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 36 years of age, and was born in Jefferson County State of Missouri, now residing at Emeka State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 1864 as Private in Co. "G" Regiment Infantry for the period of 100 ^{days} years, and was discharged therefrom as Private at Springfield Ill. on the 1st day of June 1864 by reason of Exposure

¹I also re-enlisted 18 as Private in Co. "G" Regiment Infantry and was discharged therefrom as Private at Springfield Ill. on the 1st day of June 1864 by reason of Exposure

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have not² made previous application for membership to the Grand Army of the Republic and filed the same with James Irwin Post No. 152 Department of Missouri on the 1st day of June 1864

(Signature) James Irwin (IRWIN)
Residence, No. Emeka St. Louis Co. Mo. Street.

I on honor recommend James Irwin to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

John C. Irwin
(To be signed by a Comrade of the Post.)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.
1 If other enlistments, they are to be added.
2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Anton Dentschmann
Sergeant Co. B
Reg't Reg't Infantry for
membership in the Grand Army of the Republic.

Recommended by Comrade
Adam Kesselring

HEADQUARTERS
Feiler Post No. 152

Department of Missouri 1889
Received and referred to the Examining Committee.

Conrad Walker
Post Commander.

1889
The undersigned Examining Committee
will faithfully report favorably upon
within application.

Henry Kesselring
Vol. Paulhel
F. Steiner } Committee.

Applicant { Elected *March* 1889
Mustered 1889

in Des. Book
Julius Hardt
Adjutant.

Copyright, 1889, by JOHN S. KOUNTZ, Commander-in-Chief
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Keller Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keller Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 50 years of age, and was born in _____ State of Germany, now residing at Green State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted August 1861, as Sergeant in Co. B First Regiment Mo. Infantry for the period of _____ years, and was discharged therefrom as Sergeant, at De Soto during war on the _____ day of November 1865, by reason of the end of war

¹I also re-enlisted _____ 18 _____, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18 _____, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____² made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature).

Anton Deitzmann

Residence, No. _____ Street.

I on honor recommend Anton Deitzmann to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Robert Kreschmer
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

Andrew McKee

ate _____ Co. _____
Reg't _____ for

embership in the Grand Army of the Republic.

commended by Comrade *William Kessel*
2019

HEADQUARTERS

Keeler Post No. *152*

epartment of *Missouri* 1888

Received and referred to the Examining Committee.

Post Commander.

188

The undersigned Examining Committee respectfully
port. _____ favorably upon the within application

Committee.

applicant { Elected _____ 1888

{ Mustered *June 24, 1888*

on Des. Book _____

Louis Graver
Adjutant.

Copyright, 1888, by ROBERT B. HEATH, Commander-in-Chief
Grand Army of the Republic.
REGISTERED, 1888, FOR U.S.A.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____

3. Where born _____ 4. Color _____

5. Regiment or Vessel serving in when wounded _____

6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)

7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____

8. How many times wounded? _____ 9. Ages when wounded? _____

10. 11. Dates when wounded and names of engagements _____

12. Parts of the body wounded or disabled _____

13. State results of wounds. If amputation, what member? If paralysis, loss of sight,
or any other disability followed, give full particulars _____

14. Kind of Missile _____

15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY:

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Post Surgeon.

Printed figures refer to spaces on Form F.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 58 years of age, and was born in Germany State of Prussia, now residing at Bellefontaine St. St. Louis Mo State of _____, am by occupation a Carpenter

I served during the late rebellion as follows:

First enlisted August 1868 as Private in Co. D 90th Regiment Mo. Volt for the period 3 years, and was discharged therefrom as Private at Columbus Mo on the _____ day of _____ 18____, by reason of _____

I also re-enlisted _____ 18____, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18____, by reason of _____

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18____

(Signature).

Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER]

APPLICATION OF

Frederick Barthold
Late *Private* Co. *B.*
15 Reg't *Mo. Infy* for
Membership in the Grand Army of the Republic.

Recommended by Comrade
Michael Bouquet

HEADQUARTERS
D. H. Keeler Post No. *182*
Department of *Missouri* 1884

Received and referred to the Examining
Committee.

R. L. Allen
Post Commander.

Sept 27 1884

The undersigned Examining Committee
respectfully report favorably upon
the within application.

Gustav Grover
Chas. Bouquet Committee.
Theo. A. Cange

Applicant { Elected *Sept 27* 1884
Mustered *Sept 27* 1884

No. on Des. Book *29*
Herman Kenize Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book..... 2. Name.....
3. Where born..... 4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?.....
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?..... 9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.

Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

OF

S. N. Keller Post No. *152* Dep't of *Missouri* G. A. R.

I have the honor to make application for membership in *S. N. Keller* Post No. *152* of *Missouri* Grand Army of the Republic, basing my application on the following facts:

I am *48* years of age, and was born in *Germany* State of *Pussia*, now residing at *Franklin* State of *Franklin*, am by occupation a *Carpenter*

I served during the late rebellion as follows:

First enlisted *24th* 186*2* as *Private* in Co. *C*, *15th* Regiment *Mo. Infantry* for the period of *3* years, and was discharged therefrom as *Private* at *Nashville Tenn* on the *16th* day of *June* 186*5*, by reason of *instruction from War Dept May 29th 1865*

I also re-enlisted *18* as *Private* in Co. *C*, *15th* Regiment *Mo. Infantry* and was discharged therefrom as *Private* at *Nashville Tenn* on the *16th* day of *June* 18*65*, by reason of *instruction from War Dept May 29th 1865*

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the Republic and filed the same with *Post No. 152* Department of *Missouri*

on the *18* day of *June* 18*65*
(Signature) *F. W. Berthold*
Residence, No. *Oakfield, Franklin Co Mo*

I on honor recommend *F. W. Berthold* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ *1.65*

F. W. Berthold
(To be signed by a comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

George B. Bilby
Grade Private 1st Cl.
111 Reg't _____ for

Membership in the Grand Army of the Republic.

Recommended by Comrade
John C. Clark

HEADQUARTERS
Keeler Post No. 152
Department of Missouri 1884

Received and referred to the Examining Committee.
Robert L. Allen
Post Commander.

_____ 188
The undersigned Examining Committee respectfully report _____ favorably upon the within application.

Alex. Becker
Fassmeyer John
John B. Kuller } Committee.

Applicant { Elected _____ 1884
Mustered _____ 1884.

No. on Des. Book 18
Herm. Heinger
Adjutant.

WAR & SHERIDAN, THE PRESS

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____
NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form P.

Post Surgeon.

TO THE OFFICERS AND MEMBERS

OF

Keeler Post No. 152 Dept of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152
of Grand Army of the Republic, basing my application on the following facts:

I am 51 years of age, and was born in Luzerne County State of
Pennsylvania, now residing at Waukegan, Adams Co. Mo
State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted August 14th 1862 as Private in Co. A
116 Regiment Ill. for the period of 3 years, and
was discharged therefrom as Private, at Washington D.C.
on the 7 day of June 1865, by reason of Expiration of
term of service

I also re-enlisted 18 as in Co.
Regiment and was discharged therefrom as
at on the
day of 18, by reason of

I have never borne arms against the United States, and have never been convicted by Court
Martial of Desertion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the Republic
and filed the same with Post No. Department of
on the day of 18

(Signature)

Residence, No. Waukegan Mo

I on honor recommend George Billy to the favorable consideration
of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.00

John C. Delouck
(To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee.

- 1 If other enlistments, they are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

APPLICATION OF

George Remmelberg
Late Private Co. 16
First Reg't. U.S.A.C. for
Membership in the Grand Army of the Republic.

Recommended by Comrade
M. Bouquet

HEADQUARTERS
D. N. Keeler Post No. 152
Department of Missouri 1891
Received and referred to the Examining
Committee.

Post Commander,
_____ 188
The undersigned Examining Committee
respectfully report _____ favorably upon
the within application.

Christ Krausch
W. Clump
Gott. Grauer } Committee

Applicant { Elected Jan. 25 1891
Mustered Jan. 25 1891

No. on Des. Book _____
Julius Hardt
Adjutant.

Copyright, 1885, by JOHN S. KOURTZY, Commander-in-Chief
Grand Army of the Republic.
MADE & PRINTED IN U.S.A.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to space on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 53 years of age, and was born in Germany State of Hanover, now residing at Allenbon State of Missouri, am by occupation a Merchant

I served during the late rebellion as follows:

First enlisted 7th day of May 1861, as Private in Co. 16 first Regiment W. S. R. C. for the period of 3 month years, and was discharged therefrom as Private, at St. Louis on the 26th day of August 1861, by reason of expiration of term.

I also re-enlisted 18, as 18 in Co. 18 Regiment 18 and was discharged therefrom as 18 at 18 on the 18 day of 18, by reason of 18.

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have 2 made previous application for membership to the Grand Army of the Republic and filed the same with 18 Post No. 18 Department of 18 on the 18 day of 18

(Signature)

Residence, No. 18 Street.

I on honor recommend 18 to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 18

M. Brown
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[over]

APPLICATION OF

George Redman
State *Virginia* Co. *D*
20th Reg't *Main* for
membership in the Grand Army of the Republic.

Recommended by Comrade
Adam Kesselring

HEADQUARTERS
Keeler Post No. *152*

Department of *Mo* 188*5*
Received and referred to the Examining Committee.

Post Commander.

188
The undersigned Examining Committee respectfully
report *favorably* upon the within application

Ad. Kesselring
Wick Burquitt Committee.
Dominic Beams

Applicant { Elected *July 28* 188*0*
 { Mustered *Same day* 188*5*

No. on Des. Book
F. H. Steiner

Adjutant:
Copyright, 1884, by ROBERT B. BEAVER, Commander-in-Chief of
Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE BRIEFLY:

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV--CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Belen Post No. 152 Dep't of Mo G. A. R.

I have the honor to make application for membership in Belen Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 43 years of age, and was born in Maine State of Maine, now residing at Pond State of Missouri, am by occupation a Merchant

I served during the late rebellion as follows:

First enlisted Aug 5 1862 as Private in Co. D 20th Regiment Maine for the period of 3 years, and was discharged therefrom as Private, at Washington D C on the 1st day of June 1863 by reason of Expiration of term of enlistment

I also re-enlisted _____ 18, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18, by reason of _____

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18

(Signature) Lorenzo Redman
Residence, No. _____ Street.

I on honor recommend Lorenzo Redman to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 1.65

John G. [Signature]
(To be signed by Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.
1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.
[over]

APPLICATION OF

Mr. X. Blunt
Late Carroll Co. B
Carroll Reg't Battalion
Membership in the Grand Army of the Republic.

Recommended by Comrade

HEADQUARTERS

Post No. _____

Department of _____ 188

Received and referred to the Examining Committee.

George Gorman
Post Commander.

_____ 188
The undersigned Examining Committee respectfully report _____ favorably upon the within application.

M. Beaudet
John H. Hefling
Frank R. ...
Committee.

Applicant { Elected _____ 188
Mustered _____ 188

No. on Des. Book _____
Julius Herold
Adjutant.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To D. N. Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in D. N. Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 48 years of age, and was born in _____ State of New Jersey, now residing at Allenton State of Missouri, am by occupation a Merchant

I served during the late rebellion as follows:

First enlisted June 8th 1861, as Private in Co. B Pacific Battalion Mo. Home Guards for the period of 3 months and was discharged therefrom as Private, at Pacific on the 18th day of Sept 1861, by reason of Expiration of term

¹I also re-enlisted _____ 18, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18, by reason of _____

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have _____² made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18

(Signature).

Residence, No. _____ Street.

I on honor recommend _____ to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Pat Lib Goane
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

APPLICATION OF

Samuel G. ...

Late *Private G*
17 Reg't for

Membership in the Grand Army of the Republic.

Recommended by Comrade
Garlof Graver

HEADQUARTERS
Keller Post No. 152

Department of *MS* 1889

Received and referred to the Examining Committee.
Thos F. Ashmore
Post Commander.

188
The undersigned Examining Committee respectfully
report favorably upon the within application

Henry J. ...
W. M. ...
Committee.

Applicant { Elected 188
{ Mustered 188

No. on Des. Book
Adjutant.

Copyright, 1884, by RUFUS B. HEATH, Commander-in-Chief of Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book.....
2. Name.....
3. Where born.....
4. Color.....
5. Regiment or Vessel serving in when wounded.....
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.).....
8. How many times wounded?.....
9. Ages when wounded?.....
10. 11. Dates when wounded and names of engagements.....
12. Parts of the body wounded or disabled.....
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars.....
14. Kind of Missile.....
15. Rank when wounded.....

NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No.....
Reported to Department Headquarters.....

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To *Heller* Post No. *152* Dep't *Mo* U. S. A. R.

I have the honor to make application for membership in *Heller* Post No. *152* Department of *Mo* Grand Army of the Republic, basing my application on the following facts:.

I am *69* years of age, and was born in *Germany* State of *Germany*, now residing at *Central St Louis Co* State of *Mo*, am by occupation a *Farmer*

I served during the late rebellion as follows:

First enlisted *21 Nov* 1862 as *Private* in Co. *G* *17* Regiment *Mo Rif* for the period of *3* years, and was discharged therefrom as *30 Jan*, at *Jefferson Barracks* on the *30* day of *June* 1864 by reason of *General Disobedience*

I also re-enlisted *18*, as *Private* in Co. *G* *17* Regiment *Mo Rif* and was discharged therefrom as *30 Jan* at *Jefferson Barracks* on the *30* day of *June* 1864, by reason of *General Disobedience*

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have made previous application for membership to the Grand Army of the Republic and filed the same with *Heller* Post No. *152* Department of *Mo* on the *29* day of *May* 1886

(Signature) *Thannibal Gutierrez*
Residence, No. *Central St Louis Co*

I on honor recommend *Heller* to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

Thomas J. ...
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.
1. Other enlistments are to be added.
2. If this is the first application, write the word "not" in this space.
[over]

APPLICATION OF

Albert Paubel
Late *Private* Co. *B*
41st Reg't *M. Inf.* for

Membership in the Grand Army of the Republic.
Recommended by Comrade

HEADQUARTERS

Dr. Keeler Post No. *152*
Department of *Missouri* 188
Received and referred to the Examining Committee.
R. C. Allen
Post Commander.

188
The undersigned Examining Committee respectfully
report favorably upon the within application

Wm. H. Craig
Chas. J. Walker
Valentine Paubel
Committee.

Applicant Elected *Dec. 27* 188
Mustered *Jan 30* 188
No. on Des. Book

H. H. Cunningham
Adjutant.

Copyright, 1884, by ROBERT B. BEATH, Commander-in-Chief
Grand Army of the Republic.
18 2 1884-1885, PER. IN. 1884.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book *36* 2. Name *Albert Paubel*
3. Where born *Gulf of Mexico* 4. Color *white*
5. Regiment or Vessel serving in when wounded
6. What Army or Squadron?
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.)
8. How many times wounded? 9. Ages when wounded?
10. 11. Dates when wounded and names of engagements
12. Parts of the body wounded or disabled
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars
14. Kind of Missile
15. Rank when wounded

NOTE—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY:

Entered on Medical Description Book No.
Reported to Department Headquarters

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To GM Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in GM Keeles Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 39 years of age, and was born in Gulf of Mexico State of _____, now residing at Melrose State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 21st August 1864 as Private in Co. B. 41st Regiment Mo. Inf. for the period of 1 years, and was discharged therefrom as Private, at Benton Barracks on the 25th day of July 1865 by reason of expiration of term of service

I also re-enlisted _____ 18 _____, as _____ in Co. _____ Regiment _____ and was discharged therefrom as _____ at _____ on the _____ day of _____ 18 _____, by reason of _____

I have never borne arms against the United States, and have never been convicted by Court Martial of Desertion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the Republic and filed the same with _____ Post No. _____ Department of _____ on the _____ day of _____ 18 _____

(Signature).

Residence, 416 Fox Creek Street.

I on honor recommend Albert Puchel to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ _____

Adam Pfeiffering
(To be signed by a Comrade of the Post).

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- x Other enlistments are to be added.
- a If this is the *first* application, write the word "not" in this space.

{over}

APPLICATION OF

Julius Pablig

Late Private Co. *C.*

15th Reg't *No. 101* for

Membership in the Grand Army of the Republic.

Recommended by Comrade

Bertold

HEADQUARTERS

Keller Post No. *152*

Department of *Missouri* 1889

Received and referred to the Examining Committee.

E. Walker

Post Commander.

188

The undersigned Examining Committee respectfully report favorably upon the within application.

F. W. Berthold

Committee.

Charles Schaeffer

Wm. Kiersey

Applicant { Elected *April 28* 1889
Mustered 188

No. on Des. Book

Julius Pablig

Adjutant.

Copyright, 1889, by JOHN S. KOWERS, Commander-in-Chief Grand Army of the Republic.

To be Filled by, or for, the Post Surgeon, on or before the Night of muster of this Applicant.

1. No. on Des. Book _____ 2. Name _____
3. Where born _____ 4. Color _____
5. Regiment or Vessel serving in when wounded _____
6. What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
7. Branch of service, (Inf., Art., Cav., Marine, Sailor, etc.) _____
8. How many times wounded? _____ 9. Ages when wounded? _____
10. 11. Dates when wounded and names of engagements _____
12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____
14. Kind of Missile _____
15. Rank when wounded _____

NOTE.—IF NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____

Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

Post Surgeon.

RULES AND REGULATIONS G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and sailors of the United States Army, Navy or Marine Corps, who served between April 12th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has at any time borne arms against the United States.

To Keeler Post No. 152 Dep't of Missouri G. A. R.

I have the honor to make application for membership in Keeler Post No. 152 Department of Missouri Grand Army of the Republic, basing my application on the following facts:

I am 50 years of age, and was born in Solingen Prussia State of Germany, now residing at Oakfield Franklin Co State of Missouri, am by occupation a Farmer

I served during the late rebellion as follows:

First enlisted 29th of August 1862, as Private in Co. B 15th Regiment Missouri Volunteers for the period of 3 years, and was discharged therefrom as Private, at Nashville Tennessee on the 16 day of June 1865, by reason of Instruction from War Dept

I also re-enlisted 18, as in Co. Regiment and was discharged therefrom as at on the day of 18, by reason of

I have never borne arms against the United States, and have never been convicted of Desertion, nor of any other infamous crime.

I have made previous application for membership to the Grand Army of the Republic and filed the same with Post No. Department of on the day of 18

(Signature).

Residence, No. Street.

I on honor recommend Julius Pollock to the favorable consideration of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$

Frank Livacoff (To be signed by a Comrade of the Post)

NOTE.—If any details herein required are omitted, they must be furnished before being reported on by the Committee. Any failure to report all the facts required by this application may render the muster-in null and void.

- 1 Other enlistments are to be added.
2 If this is the first application, write the word "not" in this space.

[OVER]

OF

W. W. ...
ate Burl. Co.
16 Reg't Illinois for
embership in the Grand Army of the Republic.
Recommended by Comrade
H. H. ...

HEADQUARTERS
Wm. H. ... Post, No. 189
Department of Ill.
Received and referred to the Examining
Committee.
Post Commander.

189
The undersigned Examining Committee
respectfully report favorably upon
e. within application.

...
...
Walter Miller } Committee

Applicant { Elected 189
Mustered 189

on Des. Book
...

To be Filled by, or for, the Post Surgeon, on or before the Night of Muster of this Applicant.

- No. on Des. Book _____ 2. Name _____
- Where born _____ 4. Color _____
- Regiment or Vessel serving in when wounded _____
- What Army or Squadron? _____
(As Army of the Potomac, Mississippi Squadron, etc., etc.)
- Branch of service (Infant, Cav., Marine, Sailor, etc.) _____
- How many times wounded? _____ 9. Ages when wounded? _____
11. Dates when wounded and names of Engagements _____

12. Parts of the body wounded or disabled _____
13. State results of wounds. If amputation, what member? If paralysis, loss of sight, or any other disability followed, give full particulars _____

- Kind of Missile _____
- Rank when wounded _____
NOTE.—If NOT WOUNDED OR DISABLED, SO STATE DISTINCTLY.

Entered on Medical Description Book No. _____
Reported to Department Headquarters _____

Printed figures refer to spaces on Form F.

RULES AND REGULATIONS, G. A. R.

ARTICLE IV.—CHAPTER I.

Eligibility to Membership.—Soldiers and Sailors of the United States Army, Navy or Marine Corps, who served between April 4th, 1861, and April 9th, 1865, in the war for the suppression of the Rebellion, and those having been honorably discharged therefrom after such service, and of such State regiments as were called into active service and subject to the orders of U. S. General Officers, between the dates mentioned, shall be eligible to membership in the Grand Army of the Republic. No person shall be eligible to membership who has, at any time, borne arms against the United States.

To D. H. Keeler Post, No. 157 Dept of Mo G. A. R.

I have the honor to make application for membership in D. H. Keeler
Post, No. 157 Department of Missouri Grand Army of the Republic,
basing my application on the following facts:

I am 64 years of age, and was born in Hamilton State
of New York, now residing at Glencoe
State of Missouri, am by occupation a Laborer

I served during the late Rebellion as follows:

First enlisted May 28 1864, as Private in Co. D
18 Regiment Illinois Inf. for the period of 3 years, and
was discharged therefrom as Private, at Camp Butler Ill
on the 11 day of June 1864 by reason of Expiration
of Enrollment term

I also re-enlisted February 27 1865 as Private in Co. B
9 Regiment Illinois U. Corp. and was discharged therefrom as Private
at Washington D C on the 11
day of February 27 1866 by reason of Expiration of term

I have never borne arms against the United States, and have never been convicted of Deser-
tion, nor of any other infamous crime.

I have ~~not~~ made previous application for membership to the Grand Army of the
Republic, and filed the same with _____ Post, No. _____ Depart-
ment of _____ on the _____ day of _____ 18____

(Signature.)

Residence, No. Glencoe St Louis Mo.

I, on honor, recommend William Conway to the favor
tion of the Post, believing the foregoing statements to be true in every respect.

Enclosed is proposition fee, \$ 2.00

F. W. He
(To be signed by a Comradr

NOTE.—If any details herein required are omitted, they must be furnished before being repec
Any failure to report all the facts required by this application may render the m

- 1 Other enlistments are to be added.
- 2 If this is the first application, write the word "not" in this space.

[OVER.]

GAR Member Julius Hardt

