

# ORGANIZER'S REPORT

To Tom Willmering

Commander, Department of at Large Sons of Union Veterans of the ~~Civil War~~

SIR:—

I have the honor to report that pursuant to your order I organized Phelps

Camp No. 66, Department of at Large Sons of Union Veterans of the Civil War, on the 13 day of July, 1994, at Springfield in the state of MO, with 15 members, whose names are as follows:

13 July 1994,  
Forwarded this date, to Department Headquarters.

Respectfully yours in F. C. & L.,

Robert Clanton

Organizer.

Approved:

Thomas R. Willmering  
Department Commander.

Robert Clanton

~~XXXXXXXXXXXX~~

Steve Cottrell

~~Joey Furtak~~

Craig Jones

Francis Kunkler

Kip Lindberg

David Long

Robert Neuman

Jeff Patrick

Michael Price

John Rutherford

John Sutton

Steve Weldon

Tim Wilkinson

Todd Wilkinson

BRIAN SHAY

KENIN W HAGEMAN

EARL SLAVENS

## ASSOCIATES

DAN DAWSON

HERBERT W. JACKSON



(Form 26)

# Application for Camp Charter

## HEADQUARTERS

Department of .....

### SONS OF UNION VETERANS OF THE CIVIL WAR

OCTOBER 29 1994

Received this day at these Headquarters

Robert M. Petrovic  
Dep't Secretary

OCTOBER 29 1994

Approved and respectfully forwarded to Headquarters  
Commandery-in-Chief

Thomas R. Wellmering  
Dep't Commander

## HEADQUARTERS, COMMANDERY-IN-CHIEF SONS OF UNION VETERANS OF THE CIVIL WAR

..... 19.....  
Respectfully returned to Headquarters of the Department of

Sons of Union Veterans of the Civil War

### APPROVED

You will immediately proceed to initiate the within petitioners and report your action to these Headquarters, by reporting the name and number of the Camp, date of institution, and a full list of officers, on Form No. 23.

By command of

Allen H. Moore  
Commander-in-Chief

David J. Wallace  
National Secretary

## HEADQUARTERS

Department of at Large .....

### SONS OF UNION VETERANS OF THE CIVIL WAR

July 18 1994

Robert Clayton is hereby appointed to execute this order. You will collect and receipt for the amount due Department Headquarters as per bill enclosed. Erase from this list all who are not present for initiation, and make your return at once to the Dep't Secretary.

The number of this Camp shall be 66 .....

By Command of Thomas R. Wellmering  
Department Commander.  
Robert M. Petrovic Department Secretary

..... 19.....  
Respectfully returned to Headquarters, Department of  
at Large

I have obeyed the instructions above, and enclose \$25.00  
Please acknowledge receipt.

Name of Camp Phelps No 66

Located at Springfield MO

Place of Meeting Visitor Center Wilson Creek National Battlefield

Meeting Night to be determined

#### OFFICERS

Commander Robert Clayton

Address No. Rt 1 Box 178 Conway Missouri

Sr. Vice Camp Comdr. David Long

Jr. Vice Camp Comdr. None

Camp Patriotic Instructor Jeff Patrick

Camp Chaplain ~~None~~ STEVE WELDON

Camp Secretary John Rutherford

Camp Treasurer (same as above)

Robert Clayton Organizer

Received back at Department Headquarters.....  
..... 19.....

List of Officers, etc., furnished Commander-in-Chief on  
Form No. 23 ..... 19.....

..... Department Secretary

### INSTRUCTIONS

A Camp may be formed by the authority of the Department Commander, acting by direction of the Commander-in-Chief, on application made in due form, of persons eligible to membership. An application for a Camp Charter shall be accompanied by a charter fee of \$25.00.

Camps may be named after living persons, but it is advised and customary to name them after deceased persons, or after battles and towns and cities.

The Camp Organizer (appointed by Department Commander) will arrange a date and place for institution. Names of applicants may be added to the application any time before the ceremony of institution.

The Organizer will first obligate all the applicants, as in Ritual. As soon as the recruits are initiated, proceed with the selection of a name, and the election and installation of the officers. After this, open the Camp in form, each officer filling his proper station, the Organizer assisting the Camp Commander. Exemplify the work upon two volunteer members, the Organizer acting as guide.

Organizers must make full duplicate reports on Form No. 23 immediately, and forward to the Department Commander, who will forward one to the National Secretary.

## Organizer's Report of

Phelps ..... Camp No. 66

Department of at Large

Town or City Springfield Missouri

## OFFICERS INSTALLED:

Commander Robert Clanton

P. O. Address Rt 1 Box 148 Conway MO

Senior Vice Com. David Long

Junior Vice Com. None

Chaplain ~~None~~ STEVE WELDON

Secretary John Rutherford

P. O. Address Rt 1 Box 145-A Marionville, MO

Treasurer (Same as above)

P. O. Address

Patriotic Instructor Jeff Patrick

P. O. Address 2817 W. Maywood Springfield MO

Hall Located at Wilson Creek National Battlefield

Meets TBA ..... Evenings

## NOTE:

This report must be forwarded to Department Headquarters IN DUPLICATE. One will be filed by the Department Secretary who will forward the duplicate to the National Secretary.

All names must be legibly written.

The charter cannot be issued until these reports are received.

# Application for Employer Identification Number

(For use by employers and others. Please read the attached instructions before completing this form.)

EIN  
 OMB No. 1545-0003  
 Expires 4-30-94

**1** Name of applicant (True legal name) (See instructions.)  
Phelps Camp # 66, Sons of Union Veterans of the Civil War

**2** Trade name of business, if different from name in line 1  
 \_\_\_\_\_

**3** Executor, trustee, "care of" name  
John C. Rutherford, Treasurer

**4a** Mailing address (street address) (room, apt., or suite no.)  
RR 1, Box 145-A

**5a** Address of business (See instructions.)  
 \_\_\_\_\_

**4b** City, state, and ZIP code  
Marionville, MO 65705

**5b** City, state, and ZIP code  
Springfield, MO

**6** County and state where principal business is located  
Greene County, Missouri

**7** Name of principal officer, grantor, or general partner (See instructions.) ▶  
John C. Rutherford, Treasurer

**8a** Type of entity (Check only one box.) (See instructions.)

<input type="checkbox"/> Individual SSN	<input type="checkbox"/> Estate	<input type="checkbox"/> Trust
<input type="checkbox"/> REMIC	<input type="checkbox"/> Plan administrator SSN	<input type="checkbox"/> Partnership
<input type="checkbox"/> State/local government	<input type="checkbox"/> Other corporation (specify) _____	<input type="checkbox"/> Farmers' cooperative
<input type="checkbox"/> Personal service corp.	<input type="checkbox"/> Federal government/military	<input type="checkbox"/> Church or church controlled organization
<input type="checkbox"/> National guard	<input type="checkbox"/> Other (specify) ▶ _____	

Other nonprofit organization (specify) Eraternal If nonprofit organization enter GEN (if applicable) \_\_\_\_\_

**8b** If a corporation, give name of foreign country (if applicable) or state in the U.S. where incorporated ▶

Foreign country	State
_____	_____

**9** Reason for applying (Check only one box.)

<input type="checkbox"/> Started new business	<input type="checkbox"/> Changed type of organization (specify) ▶ _____
<input type="checkbox"/> Hired employees	<input type="checkbox"/> Purchased going business
<input type="checkbox"/> Created a pension plan (specify type) ▶ _____	<input type="checkbox"/> Created a trust (specify) ▶ _____
<input checked="" type="checkbox"/> Banking purpose (specify) ▶ <u>Checking</u>	<input type="checkbox"/> Other (specify) ▶ _____

**10** Date business started or acquired (Mo., day, year) (See instructions.)  
July 13, 1994

**11** Enter closing month of accounting year. (See instructions.)  
December

**12** First date wages or annuities were paid or will be paid (Mo., day, year). Note: If applicant is a withholding agent, enter date income will first be paid to nonresident alien. (Mo., day, year) . . . . . ▶ N/A

**13** Enter highest number of employees expected in the next 12 months. Note: If the applicant does not expect to have any employees during the period, enter "0." . . . . . ▶

Nonagricultural	Agricultural	Household
<u>0</u>	<u>0</u>	<u>0</u>

**14** Principal activity (See instructions.) ▶ Patriotic & Fraternal non-profit organization

**15** Is the principal business activity manufacturing? . . . . .  Yes  No  
 If "Yes," principal product and raw material used ▶ \_\_\_\_\_

**16** To whom are most of the products or services sold? Please check the appropriate box.

<input type="checkbox"/> Public (retail)	<input type="checkbox"/> Other (specify) ▶ _____	<input type="checkbox"/> Business (wholesale)	<input checked="" type="checkbox"/> N/A
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**17a** Has the applicant ever applied for an identification number for this or any other business? . . . . .  Yes  No  
 Note: If "Yes," please complete lines 17b and 17c.

**17b** If you checked the "Yes" box in line 17a, give applicant's true name and trade name, if different than name shown on prior application.

True name ▶ _____	Trade name ▶ _____
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**17c** Enter approximate date, city, and state where the application was filed and the previous employer identification number if known.

Approximate date when filed (Mo., day, year)	City and state where filed	Previous EIN
_____	_____	_____

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete. Telephone number (include area code)

Name and title (Please type or print clearly.) ▶ John C. Rutherford, Treasurer (417) 258-XXXX

Signature ▶ \_\_\_\_\_ Date ▶ September 13 1994

Note: Do not write below this line. For official use only.

Please leave blank ▶	Geo.	Ind.	Class	Size	Reason for applying

**By-Laws of the Phelps Camp #66,  
Sons of Union Veterans of the Civil War  
Springfield, Missouri**

**Preamble**

We, the descendants and inheritors of the legacy of the soldiers, sailors and marines who served in the Army and Navy of the United States of America during the Civil War of 1861-1865, having joined the patriotic and fraternal order of the Sons of Union Veterans, do hereby pledge ourselves to commemorate our forefathers deeds, to render loyal service to our country and to promote respect and honor to the flag.

**Article I**

The name of the camp shall be: Phelps Camp #66, Springfield, Missouri.

**Article II**

Meetings will be held at least four (4) times a year. Special or emergency meetings may be called by the Camp Commander. Members will be notified by phone and/or mail as to the date, time and place of meetings. If he fails to do so, the Senior Vice Commander shall have the right to do so automatically. Note: Commemorations are not considered meetings.

**Article III**

Dues are to be paid no later than January 31 of each year. Minimum yearly dues shall not exceed more than five dollars (\$5.00) over the amount required by National Headquarters.

**Article IV**

Membership is open to all persons qualified by the rules set by the National Headquarters and shall be two types: (1) Regular and (2) Associate. There can be no more than one associate for every two regular members per national constitution. A quorum shall be 10% of the total membership.

**Article V**

The officers of the camp shall be: Commander, Senior Vice Commander, Junior Vice Commander, three members of the Camp Council, Patriotic Instructor, Chaplain, Secretary, Treasurer (Secretary-Treasurer), Historian, Guide, Color Bearer and Guard. The Commander, Secretary and Treasurer shall not serve on the Camp Council.

Section 1. Duties of the officers shall be as specified in the National regulations and may be changed at the discretion of the Camp Commander.

Section 2. The Camp Guard will be uniformed per camp regulations and the constitution of National Headquarters as the Camp feels necessary.

**Article VI**

Awards: National awards will follow prescribed procedures. Camp awards are at the discretion of the Camp Commander after recommendation of the Camp Council.

#### **Article VII**

**Ceremonies:** The official ceremony of the Camp will be the Zagonyi's Charge, that is to be held annually on October 25, or other dates specified. We urge support for other patriotic events and organizations.

#### **Article VIII**

These By-Laws can be amended or added to with a majority of the total active votes cast. Absentee ballots will be accepted. All alterations and amendments will have a waiting period of sixty (60) days after proposal before they can be voted on.

#### **Article IX**

The Camp, being strictly non-sectarian and non-partisan, shall not foster sectarian or partisan beliefs.