HEADQUARTERS

Illinois Soldiers' and Sailors' Home

QUINCY, ILLINOIS O. T.A....., formerly a Soldier of the United States of America, in the war against (1) that he be admitted as a member of said Home. To enable the authorities to determine whether or not he is legally entitled to become a member of said Home, he declares and states the facts to be that he is now . 47 ... years old; that he is . 5 ... feet and ... 3 ... inches high; that he is eyes, and 3 ? A hair; that he was born in the town of of Indeana on the 14 day 1842; that he has been (2) enrolled in the U. S. A. service; in the in the war of the late Rebellion; and that he has been (3) discharged from the service of the United States. That the following is a true statement of the time . and place . of his enrollment .. and discharge .. from said service, and that the cause of his discharge .. , and of his rank at the respective date ... thereof namely: When and where Discharged. Rank. Company and Regiment. Cause of Discharge-No. When and where Enrolled, 7 Co. 4/ Regt and. Regt. and. Co. Regt. That he now receives, on pension certificate number 963 753, a pension of Jurily dollars a month, at the 2120x ville Tenpension Office. day of nextdollars, and no more: that he has That he owns property, real and personal, of the value of no means of self-support other than the above named; that his trade or occupation is that of a . Harmes That he has (4) 4 mife; that he has 8 ... children now living; ages, respectfully, (5) 18 to 50, State of Illinois; that his nearest railway station on the 21 6 en Railway, in 22 Will in said State; that the name and address of the person to whom he desires notice of his illness or death shall be given, is, County of....., State ; that, in case of his death, he desires all his personal effects to be sent to..... That he has not heretofore been a member of any Soldiers', Sailors', or other Charitable Home or Institution, excepting That he is now a bona fide resident of the State of Illinois, and has continuously lived and resided in said State for the last two years, or has served in an Illinois organization. That he is so far disabled by (7) . I. M. as to now be incapable of earning his own living. That he has at all times, heretofore, supported and adhered to the government of the United States of America, and that he has not at any time been engaged in, or countenanced, or aided, or abetted, the cause of the late Rebellion. That if he shall be admitted to be a member of the said Home, he will, in all things and in every respect, comply with and conform to the rules and regulations made, or that shall hereafter be made, for the government and discipline of the same; and that he will cheerfully do and perform any and all things that shall be required of him by those there in authority over him; and that he will promptly, and willingly, obey all lawful orders that he shall receive from any officer of the Home, so long as he shall remain a member thereof. Witness.

STATE OF ILLINOIS ss I,, a (10)	
County of	
of the town of, in and for said County, do hereby certify that the above named applicant, to personally and well known to be the identical person he represents himself to be, this day personally appeared before and that I then and there, at his request, plainly read to him his application aforesaid, which he then and there fully unstood, and that he was, by me, thereupon duly sworn, and then and there deposed and said that he was the applicant abnamed, and that he was fully acquainted with matters and things stated and set forth in his said application, and that same and each of them were true in substance and in fact as he had therein stated.	me, der-
(11)	
Subscribed and sworn to before me, thisday of, A. D. 190	
Witness my hand and official seal.	
[L. S.](12)	
CERTIFICATE OF IDENTIFICATION.	
I do hereby certify, upon honor, that I have personally known	
the above Applicant, for, at least, two years last passed; and that to the best of my knowledge and belief, the statements of tained in his foregoing application are entirely true, and especially that as to the time of his residence in Illinois, or service in Illinois organization. And I further state that he has no known mental disorder; and that he requires no special attenda and that he can properly be allowed to go at large; and that he can safely be quartered with feeble and helpless men.	an
Witness my hand, (13)	
(14)	
CERTIFICATE OF A LOCAL PHYSICIAN.	
I hereby depose and state that I have carefully examined the above named applicant	
, as to his disability, and I now find that he has (15)	-
to such an extent as to prevent him from earning his own living. And I hereby certify that he has no known, manifest, or decoverable mental disorder; that he has no need of an attendant; that he may be properly allowed to go at large; and that can safely be quartered with men who are old and feeble.	is- he
, M. D.	
Subscribed and sworn to before me, this	I
certify that I am personally acquainted with said affiant	at
(16)	
CERTIFICATE OF A SOLDIERS' HOME SURGEON.	
I hereby certify upon honor that I carefully and critically examined Surtin J. Page	
the 20th day of my 1909; and that I found him to be of sound mind, and by capable of earning his living by reason of his physical disability arising from (17) He was the found him to be of sound mind, and by the capable of earning his living by reason of his physical disability arising from (17) He was the found of the control of the	Y e
	5
Witness my hand QM Landow Home Hospital Surgeon	
Home Hospital Surgeon.	

To all whom it may Concern.



Jow ye,	That Justi	n S.Page		
lateprivate	F. Co.	41st.Regime	ntIllinois	Înfantry
	HE NATIONAL HOME	77		
thousand nine hu	indred and	thirteen		, is hereby
	Monor	ıbly D ischar	ged	
by reason of	His own re	quest		
No objection to I	nis readmission is	known to exist	except to t	he
	Pacific Branch			
Said_Justi	n S.Page	was born in	Indian	8.
is 74 years o	of age 5 feet	2 inches h	igh,	fair
complexion, blu	e eyes, gray	hair,		
Pensioner a	\$ \$25.00 per mo	nth. Certificate	No. 963,	753.
Given at	WES TERN		anch, National	Home D. V. S.,
thistwenty-	seventh day of	June	1916 WWW/	
				67

STATE OF ILLIN	OIS,
ADAMS COUNTY	

	, deceased, held at. Ill,s	S&S, Home Quincy Ill,s
in the County of Adams and State	of Illinois, on the 18 day of	September A. D. 191 9
We the undersigned Jurors	sworn to inquire of the death of Ju	stin S Page

Natural Causes, Probably, Heart Trouble,
The death occuring on the Grounds of the Illinois S & S Home
at about 6.30 ,Ocleck, P.M. September 11/1919

J.J.Linton FOREMAN

Jas, H, Oneill

J.A.Crawford

J.P.Johnston

W.B.Gilmer

L.A.Carns