

HEADQUARTERS

# Illinois Soldiers and Sailors Home,

QUINCY, ILLINOIS

SEP 18 1905

190

William Madden, (0) of the town of Lebinton, in the County of De Witt, and State of Illinois, formerly a Soldier of the United States of America, in the war against (1) Rebeller, respectfully asks that he be admitted as a member of said Home.

To enable the authorities to determine whether or not he is legally entitled to become a member of said Home, he declares and states the facts to be that he is now 71 years old; that he is 5 feet and 4 inches high; that he is of Ruddy complexion, Hazel eyes, and Gray hair; that he was born in the town of March in the Harrick of Ind, on the 10 day of March, 1835; that he has been (2) 1 enrolled in the U. S. A. service; in the war against Rebeller, and in the war of the late Rebellion; and that he has been (3) 1 honorably discharged from the service of the United States. That the following is a true statement of the time and place of his enrollment and discharge from said service, and that the cause of his discharge, and of his rank at the respective date thereof namely:

No.	When and Where Enrolled.	When and Where Discharged.	Rank.	Company and Regiment.	Cause of Discharge.
1st.	<u>Terra Haute</u> <u>Nov 10 '1844</u>	<u>Java</u> <u>Nov 16 '1845</u>	<u>Pvt</u>	<u>Co 7 Regt. Ind Inf</u>	<u>Mustered Out</u>
2d.				Co. Regt.	
3d.				Co. Regt.	

That he now receives, on pension certificate number 1003760, a pension of 10 dollars a month, payable the 4 day of next Oct, at the Chicago Pension Office.

That he owns property, real and personal, of the value of 200 dollars, and no more; that he has no means of self-support other than the above named; that his trade or occupation is that of a Blacksmith

That he has (4) 74 wife; that he has 3 children now living; ages, respectively, (5) 49.45.32 years. That his postoffice address is Lebinton, State of Illinois; that his nearest railway station is Lebinton, on the Lebinton Railway, in Lebinton County,

in said State; that the name and address of the person to whom he desires notice of his illness or death shall be given, is Laura Mackery, of Lebinton, County of Vermillion, State of Illinois; that, in case of his death, he desires all his personal effects to be sent to Lebinton, at Lebinton County of Lebinton State of Lebinton.

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

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) Lebinton

as to now be incapable of earning his own living.

That he has at all times, heretofore, supported and adhered to the government of the United States of America, and that he has not at any time been engaged in, or countenanced, or aided, or abetted, the cause of the late Rebellion.

That if he shall be admitted to be a member of the said Home, he will, in all things and in every respect, comply with and conform to the rules and regulations made, or that shall hereafter be made, for the government and discipline of the same; and that he will cheerfully do and perform any and all things that shall be required of him by those there in authority over him; and that he will promptly, and willingly, obey all lawful orders that he shall receive from any officer of the Home, so long as he shall remain a member thereof.

In Testimony Whereof, he has set his hand this 18 day of Sept 1905

(9) W. H. Lawrence Witness.

(8) William J. Madden Applicant.

STATE OF ILLINOIS,

County of Adams } ss.

I, W. J. Hadden, a (10) JP

of the town of Romney, in and for said County, do hereby certify that the above named applicant, to me personally and well known to be the identical person he represents himself to be, this day personally appeared before me, and that I then and there, at his request, plainly read to him his application, aforesaid, which he then and there fully understood, and that he was, by me, thereupon duly sworn, and then and there deposed and said that he was the applicant above named, and that he was fully acquainted with matters and things stated and set forth in his said application, and that the same and each of them were true in substance and in fact as he had therein stated.

(11) William J Hadden  
Affiant.

Subscribed and sworn to before me, this 18 day of Sept, A. D. 1905.

Witness my hand and official seal.

[L. S.]

W. J. Hadden (12) JP

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 contained in his foregoing application are entirely true, and especially that as to the time of his residence in Illinois, or service in an Illinois organization. And I further state that he has no known mental disorder; and that he requires no special attendant; and that he can properly be allowed to go at large; and that he can safely be quartered with feeble and helpless men.

Witness my hand, (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 discoverable mental disorder; that he has no need of an attendant; that he may be properly allowed to go at large; and that he can safely be quartered with men who are old and feeble.

....., M. D.

Subscribed and sworn to before me, this.....day of.....190..... And I certify that I am personally acquainted with said affiant....., and that I know him to be a physician in active practice, and in good repute, as an honest man and a capable physician, in the community and among his fellow physicians where he lives.

.....(16).....

CERTIFICATE OF SOLDIERS HOME SURGEON.

I hereby certify upon honor that I carefully and critically examined William J Hadden the above named Applicant, as to his mental and physical condition, at the Hospital of this Institution, on Monday he 18th day of September 1905; and that I found him to be of.....sound mind, and to be capable of earning his living by reason of his physical disability arising from (17).....

Chronic Articular Rheumatism of Both Anales

Witness my hand

Geo E Rosenthal  
usor

Home Hospital Surgeon.

ORDER ADMITTING APPLICANT.

The application of the said William J. Hadley, together with the said several certificates, signatures, and jurates, having been found to be duly and formally made, and the Superintendent being satisfied that the Applicant has shown himself to be lawfully entitled to admission to the Home,—it is hereby ordered that he be now duly admitted as a member thereof, this 18 day of Sept 1905

WM. SOMERVILLE  
Superintendent.

HOW TO FILL APPLICATION BLANKS.

- |  |  |
|--|--|
| <ol style="list-style-type: none"> <li>0. Give full name of the Applicant.</li> <li>1. Either "Mexico, the late Rebellion, or Spain."</li> <li>2. Here say once, twice, or three times.</li> <li>3. Here say once, twice or three times.</li> <li>4. Here say a wife or no wife.</li> <li>5. Here give their ages, from youngest to oldest.</li> <li>6. Here give the name of any Home or other Institution of which he has been a member.</li> <li>7. Here state, <i>in his own words</i>, what it is that ails or disables him.</li> <li>8. Here Applicant will sign his full name, or make his mark.</li> <li>9. Here the witness will sign <i>his</i> name.</li> <li>10. Here write "Notary Public," "Justice of the Peace," or "Clerk of Court."</li> <li>11. Here Applicant will sign his <i>full name</i>, or make his mark.</li> </ol> | <ol style="list-style-type: none"> <li>12. Signature and title of the Justice or Notary.</li> <li>13. To be made and signed by any Judge of any County or State Court, by any Mayor, County or Circuit Clerk, Justice of the Peace, Police Magistrate, or Adjutant or Commander of any G. A. R. Post.</li> <li>14. Here write official title.</li> <li>15. The physician here will state tersely, but fully, as far as he can learn, <i>every</i> cause or disorder that tends in any degree to render the Applicant <i>incapable of earning his own living</i>.</li> <li>16. Name and official title of Notary or Justice.</li> <li>17. Here state <i>minutely</i> what disorder, ailment, disease, or cause, it is that, in your judgment, <i>disables the Applicant and renders him incapable of earning his own living</i>.</li> </ol> |
|--|--|

SPECIAL INFORMATION FOR APPLICANT.

READ THIS CAREFULLY.—For it will *avail you nothing*, when you come before the Superintendent for examination on the facts alleged by you in your application, *to say that you are ignorant* of what is *here* and *herein* plainly and explicitly set forth for your information:

1. Have some capable person, *who writes a fair hand*, fill all the blanks in your application.
2. Have every blank in the application properly filled, and every Certificate, except that of the Surgeon of the Home, duly made and signed, and every jurat duly executed, signed and sealed by the Clerk, Notary or Justice of the Peace making the same.
3. Send your application, so prepared, by mail or otherwise, *with your last discharge and all your pension papers*, to the Superintendent of the Home.
4. On his receipt of your application, and your last discharge, and all your pension papers, all in due form, transportation will be sent you, and you will be ordered to report at the Home *for examination by the Home Surgeon as to your disability*, and for examination by the Superintendent *as to the allegations of fact made by you in your application for admission*.
5. If *all your statements are found to be true*, and the Surgeon found you to be *so far disabled as to render you incapable of earning your own living*, you will then be admitted to the Home, and not otherwise.
6. If, for any reason, you are found *not to be eligible for admission*, you will not be admitted to the Home.
7. If you fail to be admitted, no transportation to your home will be furnished you. *Therefore, you should bring sufficient money to pay your return fare*.
8. When permitted to leave the Home on Furlough, or on Pass of two or more days' duration, *you will be required to wear your citizen's clothing. You will not be allowed to wear Home or State Clothing, when so absent*.

TO BE ELIGIBLE FOR ADMISSION.

1. The law requires that you shall have served in the U. S. A. service, in the army or navy, in the war with Mexico, the late Rebellion, or the Spanish War.
2. That you shall have been honorably discharged from that service.
3. That you shall have lived and resided, CONTINUOUSLY and in good faith, FOR THE LAST TWO YEARS, in the State of Illinois, or served in an Illinois organization.
4. That you shall have been rendered INCAPABLE OF EARNING YOUR OWN LIVING, AND SHALL NOW BE INCAPABLE OF EARNING YOUR OWN LIVING, through the exigencies of your military service, by reason of old age, or by means of some other PRESENT DISABILITY.
5. That you shall have NO PROPERTY OR OTHER SUFFICIENT MEANS OF LIVING.
6. That you shall be of sane mind; that you shall not be in need of an attendant; that you shall be capable of ministering to your own personal wants; that you shall have NO CONTAGIOUS OR INFECTIOUS DISEASE that would render your residence in the Home DANGEROUS to others; that you may safely be quartered with men who are feeble and incapable of self-defence.
7. NO INSANE OR DEMENTED PERSON CAN BE RECEIVED OR CARED FOR AT THIS INSTITUTION. The State has elsewhere provided for the care and treatment of such persons.

Superintendent.



DANVILLE BRANCH, NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS.

LOCAL MANAGER:

GENERAL THOMAS J. HENDERSON, Princeton, Ill.

GOVERNOR:

COLONEL ISAAC CLEMENTS.

MAJOR M. J. BARGER, Treasurer.  
MAJOR D. C. JONES, Surgeon.  
CAPTAIN R. B. WHEELER, Quartermaster.

CAPTAIN JOHN W. NEWLON, Commissary of Subsistence,  
REV. STEPHEN N. MOORE, Chaplain.  
REV. THOMAS A. PARKER, Chaplain.

National Home, Danville, Ill., August 15th, 1905.

Captain S. P. Mooney,  
Adjutant, Illinois State Home.

Sir:

Answering your letter of the 14th instant, I am directed by the Governor to state that the records of this Branch show that William J. Hadden, late G Company, 57th Indiana Infantry, was admitted to this Branch Home on January 10th, 1900, and dropped from rolls for absence without leave on July 14th, 1905. During the time he was a member here he was before the Governor six times, four times for coming in drunk, once for bringing in whisky and coming in drunk and once for being drunk and disorderly in quarters.

Respectfully yours,

*M. A. Platt,*

Adjutant.

PROVOST COURT.

QUINCY, ILLINOIS.

Feb. 6 1907

Accusation against William J. Hadden

Register No. 7241 Cottage No. 21

Charge 1st Absence without leave

Specifications: ~~That~~ Since Jan 22  
reported him absent on Jan 26  
have no report from him up  
to this date.

Charge 2nd \_\_\_\_\_

Specifications: That \_\_\_\_\_

Feb 7<sup>th</sup> 1907

The above William Hadden  
has been a soldier for more  
than ten years =

Serg't Police

H. Holden 21  
Serg't ~~Provost Guards~~

Plea to Charge 1st \_\_\_\_\_ Finding \_\_\_\_\_

Plea to Charge 2nd \_\_\_\_\_ Finding \_\_\_\_\_

Penalty Discharge for a year  
Collecting returned to W. Amey  
Serje

Barville Ills March 4 1904

General Delivery

Agt Soldiers and Sailors Home

Lewisburg Ill

Dear Sir please send to the above  
address my papers - Together with my  
Voucher I have been afflicted with Infl-  
amatory Rheumatism & ever since I arrived  
here - Will be back to the Home as  
soon as able Have not been off the  
premises since I came Please send  
them right away as I will have to

MAR 9 - 1907

Send for my mail, and have to  
depend on others to get it - so if you  
send them immediately I will know  
when to send for it

Yours Truly

William J. Gadden Latéco &  
57 2nd Infantry

No. 1005760

2/24/11



REGISTER No. 7241

18  
12

# Illinois Soldiers and Sailors Home

QUINCY, ILLINOIS.

William J. Hadden  
Clinton Co. Miss. Co. Ill.  
Co. G 57 Reg't 1st Inf

Co. \_\_\_\_\_ Reg't \_\_\_\_\_

Co. \_\_\_\_\_ Reg't \_\_\_\_\_

### CONTENTS.

Admission Paper 1

Army Discharge \_\_\_\_\_

Certificate of Service \_\_\_\_\_

Pension Certificate 1005.760 Will 1

Admitted Sept 18<sup>th</sup> 1905

Feb 7 1907 Dis. 19<sup>th</sup> Assoc

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IN THE NAME OF GOD, AMEN,

I, William J. Hadden of Illinois Soldiers and Sailors Home, in the County of Adams and State of Illinois, being of sound mind and memory, and considering the uncertainty of this frail and transitory life, do, therefore, make, ordain, publish and declare, this to be my last Will and Testament.


First. I order and direct that my Executor hereinafter named, pay all my just debts and funeral expenses as soon after my decease as conveniently may be.

Second. After the payment of such funeral expenses and debts, I give, devise and bequeath all worldly goods of which I may die possessed,

to My Daughter  
Laura Hadden  
Grape Creek  
Franklin County  
Illinois

Lastly, I make, constitute and appoint Samuel Supt or his Successor in office to be Executor of this my last Will and Testament, hereby revoking all former Wills by me made.

In Witness Whereof, I have hereunto subscribed my name and affixed my seal, the 18 day of Sept in the year of our Lord One Thousand Nine Hundred 1900

William J. Hadden 

This instrument was, on the day of the date thereof, signed, published and declared by the said testator William J. Hadden to be his last Will and Testament, in the presence of us, who at his request have subscribed our names hereto as witnesses in his presence, and in the presence of each other.

W. Lawson  
J. Winger

