

592

*Hann, Daniel*

**Co. G, 155 Indiana Infantry**

*Private*

*Private*

CARD NUMBERS.

1	27829104	26
2	27832163	27
3	27832260	28
4	27832346	29
5	27832430	30
6	88383676	31
7		32
8		33
9		34
10		35
11		36
12		37
13		38
14		39
15		40
16		41
17		42
18		43
19		44
20		45
21		46
22		47
23		48
24		49
25		50

Number of personal papers herein.

Book Mark:

*R-9064.996*

See also

S 0310 4117 Y P O Ret  
Domestic JC 702781 6/2/16  
16

William C.

Statement of Service Reference Slip.

Office Pension  
 Claim No. 2070278  
David Adams  
(Name)  
, Co. G, 155 Regt Inf

To Med Div. 6-2-, 1916  
 For ke. part, and receipt  
Jolson  
Personnel

no additional records for  
 ✓ 2 cards vtd,

Statement furnished 6-3, 1916  
AGS

873

David Adams  
, Co. G, 155 Regt Inf

Inclosures. 1

- |                               |                           |
|-------------------------------|---------------------------|
| Bed Cards.....                | Final Statements.....     |
| Burial Records.....           | Furloughs or L. of A..... |
| Certs. of Dis. for Disch..... | Med. Certificates.....    |
| C. M. Charges.....            | Med. Des. Lists.....      |
| Descriptive Lists.....        | Orders.....               |
| Discharge Certificates.....   | Pris. of War Record.....  |
| Enlistment Papers.....        | Resignations.....         |

Other papers relating to--

- |                             |                          |
|-----------------------------|--------------------------|
| Admission to Hosp'l.....    | Furlough or L. of A..... |
| Casualty Sheet.....         | Med. Examination.....    |
| Confinement.....            | Misc. Information.....   |
| Contracts.....              | Pay or Clothing.....     |
| Death or Effects.....       | Personal Reports.....    |
| Desertion.....              | Rank.....                |
| Discharge from Hosp'l.....  | Transfer to Hosp'l.....  |
| Discharge from Service..... | Transfer to V. R. C..... |
| Duty.....                   | Transportation.....      |
- AGS

NOTE: This blank will be used for both enlistments and re-enlistments. It is to be filled out in all cases by the recruiting officer (not the superintendent) to the Adjutant General, one to accompany the accounts of the officer who pays bounty, &c., and one for the Adjutant General of the State. The Regiment and Company in which the soldier last served should be given on the back.

IN ALL CASES PRECEDING PAYMENT OF BOUNTY, PENSION, &c. A MUSTER-IN ROLL MUST, IN ALL CASES, BE FILED IN THE ADJUTANT GENERAL'S OFFICE AS EVIDENCE OF MUSTER-IN. THE MUSTERING OFFICER, COMMISSARY, OR ASSISTANT COMMISSARY OF MUSTERS, AS THE CASE MAY BE, WILL COUNTERSIGN BOTH ENLISTMENTS AS HAVING MUSTERED THE SOLDIER INTO THE SERVICE OF THE UNITED STATES BEFORE EITHER OF THEM IS GIVEN TO THE DISBURSING OFFICER.

### DECLARATION OF RECRUIT.

I, Samuel H. Brown desiring to  
 VOLUNTEER as a Soldier in the Army of the United States, for the term One YEAR  
 Do Declare, That I am 17 years and \_\_\_\_\_ months  
 of age; that I have never been discharged from the United States service on account of disability, or by  
 sentence of a court martial, or by order before the expiration of a term of enlistment; and I know of no  
 impediment to my serving honestly and faithfully as a soldier for One year.

GIVEN at Rockville I d,  
 the 27 day of March 1865

Witness:

George P. Anderson Samuel H. Brown  
 Adjutant General of the State  
 Adjutant General of the State

Call for 300,000 Men, Dec. 20th, 1864

No. 15

Samuel H. Brown  
 Volunteered at Rockville, Ind.  
March 17th 1865

By George P. Anderson  
157 Regiment of Indiana Volunteers.

enlistment last served in Company \_\_\_\_\_  
 Reg't of \_\_\_\_\_

Discharged \_\_\_\_\_ 1865

Reside in Rockville to  
Lawrence Township,  
Madison County,  
9 Congressional District, Indiana.

### CONSENT IN CASE OF MINOR.

I, \_\_\_\_\_ Do CERTIFY, that I am  
 the \_\_\_\_\_ of \_\_\_\_\_ that the  
 said \_\_\_\_\_ is \_\_\_\_\_ years of age, and that  
 hereby freely give my CONSENT to his volunteering as a SOLDIER in the ARMY OF THE UNITED STATES  
 for the period of \_\_\_\_\_ years.

GIVEN at \_\_\_\_\_ Indiana,  
 the \_\_\_\_\_ day of \_\_\_\_\_ 1865

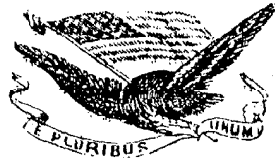
Witness:

To be neatly filled up in Triplicate. One copy to be sent to Adjutant General of the State, two copies to be sent to the Provost Marshal General of the State by the District Provost Marshal.

### VOLUNTEER ENLISTMENT.

STATE OF

INDIANA.



TOWN OF *Henry*

*Ship*  
*Fulton County*

I, *David Harmon*, born in *Michigan Co* in the State of *Michigan*, aged *Eighteen* years, and by occupation a *Farmer*, Do HEREBY ACKNOWLEDGE to have volunteered this *21* day of *March*, 186*5*, to *(1865)* serve as a **Soldier** in the Army of the United States of America, for the period of \_\_\_\_\_ YEAR unless sooner discharged by proper authority: Do also agree to accept such bounty, pay, rations, and clothing, as are, or may be, established by law for volunteers. And I, *George P. Anderson*, do solemnly swear, that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies or opposers whomsoever; and that I will observe and obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the Rules and Articles of War.

Sworn and subscribed to, at *Kokeshaw Ind.*, this *21st* day of *March*, 186*5*,  
BEFORE *George P. Anderson*  
*Sub Lieutenant*

I CERTIFY, ON HONOR, That I have carefully examined the above named Volunteer, agreeably to the General Regulations of the Army, and that, in my opinion, he is free from all bodily defects and mental infirmity, which would in any way disqualify him from performing the duties of a soldier.

*David Harmon*

EXAMINING SURGEON.

I CERTIFY, ON HONOR, That I have minutely inspected the Volunteer, *David Harmon* previously to his enlistment, and that he was entirely sober when enlisted; that, to the best of my judgment and belief, he is of lawful age; and that, in accepting him as duly qualified to perform the duties of an able-bodied soldier, I have strictly observed the Regulations which govern the recruiting service.

This soldier has *Blue* eyes, *Light* hair, *Dark* complexion, is *5* feet *4 1/2* inches high.

*George P. Anderson 2nd Lieut*

*1865* Regiment of Indiana Volunteers,  
X RECRUITING OFFICER.

Mustered into the service of the United States, for \_\_\_\_\_ year from date of enlistment, in Company \_\_\_\_\_ of the \_\_\_\_\_ Regiment of Indiana Volunteers, on the \_\_\_\_\_ day of \_\_\_\_\_ 186*5*, at \_\_\_\_\_ City, Ind.  
*Call of High School for the 1865*  
*Call of High School for the 1865*  
*Call of High School for the 1865*

26 | 155 | Ind.

Daniel Hann

Pl., Co. G, 155 Reg't Indiana Infantry.

Age 18 years.

Appears on Co. Muster-out Roll, dated

Mr. Hoover Oct, Aug 4, 1865:

Muster-out to date Aug 4, 1865:

Last paid to never paid, 186 .

Clothing account:

Last settled . . . . ., 186 ; drawn since \$ . . . . . 100

Due soldier \$ . . . . . 100; due U. S. \$ 22 1/2 . . . . . 100

Am't for cloth'g in kind or money adv'd \$ . . . . . 100

Due U. S. for arms, equipments, &c., \$ . . . . . 100

Bounty paid \$ 30 1/2 100; due \$ 66 2/3 100

Remarks: New Sutter \$4.00.

Book mark:

Hann Copyist

26 | 155 | Ind.

Daniel Hann

Co. G, 155 Reg't Indiana Infantry.

Appears on

Company Descriptive Book

of the organization named above.

DESCRIPTION.

Age 18 years; height 5 feet 4 1/2 inches.

Complexion dark

Eyes blue; hair light

Where born Miamana Ind.

Occupation farmer

ENLISTMENT.

When Nov 24, 1865.

Where Rochester

By whom A.P. Anderson; term one y'rs.

Remarks: Never discharged.

*Daniel Hamm*

Appears with rank of *Capt.* on

**Muster and Descriptive Roll of a Detachment of U. S. Vols. forwarded**

for the 157 Reg't Indiana Infantry.\* Roll dated *Mich 30 1865.*

Where born *Miami, Ind.*

Age *27* years; occupation *Classroom*

When enlisted *March 27 1865.*

Where enlisted *Rochester, Ind.*

For what period enlisted *1* years.

Eyes *Blue*; hair *Light*

Complexion *Dark*; height *5 ft. 4 in.*

When mustered in *March 30 1865.*

Where mustered in *Mich. Co. - Ind.*

Bounty paid \$ *100*; due \$ *100*

Where credited *C. S. Attermy 2p.*

*Dulles, Va.*

Company to which assigned

Remarks: *Writings to Bounty*

Book mark: *Edwards*

*Daniel Hamm*

Appears on

**Company Muster and Descriptive Roll**

of the organization named above. Roll dated *Sept 10 1865.*

Where born *Miami, Ind.*

Age *18* yrs; occupation *farmer*

When enlisted *Mar 27 1865.*

Where enlisted *Rochester*

For what period enlisted *1* years.

Eyes *Blue*; hair *Light*

Complexion *Dark*; height *5 ft. 4 in.*

When mustered in *Mar 30 1865.*

Muster-in to date *186*

Where mustered in *Mich. Co.*

Bounty paid \$ *37 1/2*; due \$ *66 1/2*; 100

Where credited *Angl. West Agency*

*Mich. Co.*

Company to which assigned

Remarks: *Writings to Bounty*

*Daniel Hamm*

Appears on

**Company Muster Roll**

for *April 10 1865.*

Present or absent *Present*

Stoppage \$ *100* for

Due Gov't \$ *100* for

Remarks:

Book mark:

*Wright*

*Daniel Hamm*

Appears on

**Company Muster Roll**

for *May 2 June 1865.*

Present or absent *Present*

Stoppage \$ *100* for

Due Gov't \$ *100* for

Remarks:

Book mark:

*Wright*

\* This roll shows this man recruited for the 157 Reg't Indiana Inf. which failed to complete its organization, but he actually served in the 157 Reg't Indiana Infantry - R. and P. 364, 366.

\* This organization subsequently became Co. G. 462 Reg't Ind. Inf.



THE NATIONAL ARCHIVES

CERT. NO. 831915

PENSIONER:

Nancy E.

Widow

OF

VETERAN:

Daniel Hann

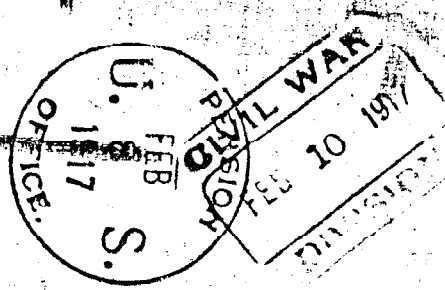
FILE NO.

5



H. O. No. 1078967

Helen E. widow  
Daniel Hamm  
P. O. 155<sup>th</sup> Ind. Infy.  
Act April 19<sup>th</sup> 1908 Amended.



C. W.  
m. e. l. p.  
1

Plymouth, Ind.  
Feb. 6<sup>th</sup>, 1917.

Commissioner of Pensions,  
Washington, D. C.,  
Dear Sir:

The above case was filed  
Sept. 23<sup>rd</sup> 1916. Evidence completing case  
was filed Nov. 2<sup>nd</sup> 1916. This claimant is  
very needy and would very much like  
the assistance financially that her  
pension would give her. Please permit  
me to ask that further action in her case  
be taken at an early date. Her P. O.  
address is Plymouth, Marshall Co. Indiana.

Respectfully,  
H. W. Love at  
Plymouth, Ind.

Receipt acknowledged by  
Mail & Supplies Division.

2 Briefs

3-438

Cert. 7027

Act. May 11, 1912

*ans  
gr 2*

ACCRUED PENSION

Class Invalid

Pensioner Daniel Hann,

Date of death September 19, 1916 Certificate not filed.

Claimant Nancy E. Hann,  
General Delivery, Plymouth,  
Marshall County,  
Indiana.

Attorney no atty.

Address —

The fee of \$ 40.00 allowed on issue of  
to  
of to be paid when  
payment is made on accrued.

Resub. for adm. Sept 26, 1917 Wallace, W. J., Exr  
Submitted adm. Mch 10, 1917 Wallace, W. J., Examiner.  
Re-sub. " June 28, 1917 Wallace W. J.

Approved for Admission.

Pay in accordance with above.

Geo. S. Livingston Reviewer, Sept. 29, 1917.

J. M. Piffel Rereviewer, Oct. 1, 1917.

U.S.S. Hon. Jas. E. Watson  
M.C. Hon. W. B. Barnhart  
et

Claimant — writes.

616 10  
Plymouth, Ind.  
Aug. 24<sup>th</sup> 191

Nancy E. Hann  
Wid. Daniel Hann  
Co. G, 155<sup>th</sup> Ind. Infy.  
H. O. No. 1078964 Act April  
19<sup>th</sup>, 1908. Amended.

Hon. Commissioner of Pensions.  
Washington, D. C.

Dear Sir:

The above described case was  
filed Sept 23<sup>rd</sup> 1916 under above act. Was  
completed early in November 1916. Should  
have been allowed as early as Jan. 1

The claim is purely under Act of April 19  
May has it not been allowed? Can  
we have an adjudication of this case?  
and when? These are the questions I  
want answered. This claimant needs  
re-money. Should have had it long ago  
Your reply is awaited with interest.

Res p.  
H. H. Love, At  
Plymouth, Ind.

# INDIANA STATE BOARD OF HEALTH

No. 1792

## DIVISION OF VITAL STATISTICS

INDIANAPOLIS, IND.

I, J. N. HURTY, Secretary of the State Board of Health, do hereby certify the following to a true and correct copy of the CERTIFICATE OF DEATH of

**PLACE OF DEATH**  
 County of Marshall Daniel B. Hawn  
 Township of Center on file with the State Board of Health of Indiana.  
 Year 1916 Vol. — No. —  
 Town of — Page — Registered No. 1476  
 or  
 City of Plymouth (No. — St.; — Ward)

[If death occurs away from USUAL RESIDENCE give facts called for under "Special Information."]

**FULL NAME** Daniel B. Hawn [If death occurs in a Hospital or Institution give its NAME (street and number.)]

PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH	
*SEX <u>Male</u>	*COLOR OR RACE <u>White</u>	*SINGLE, MARRIED, WIDOWED OR DIVORCED (Write the word) <u>Married</u>	*DATE OF DEATH <u>Sept 19</u> 191 <u>6</u> <small>(Month) (Day) (Year)</small>	
**NAME OF HUSBAND OR WIFE (of deceased) <u>Nancy J. Hawn</u>			*I HEREBY CERTIFY, that I attended deceased from <u>Feb. 10</u> 191 <u>6</u> to <u>Sept 18</u> 191 <u>6</u>	
*DATE OF BIRTH (of deceased) <u>Feb. 5</u> 18 <u>49</u> <small>(Month) (Day) (Year)</small>			that I last saw him alive on <u>Sept 18</u> 191 <u>6</u> and that death occurred, on the date stated above, at <u>30</u>	
*AGE <u>67</u> years, <u>7</u> months, <u>11</u> days <small>If LESS than 1 day, ... hrs. or ... min.</small>			The CAUSE OF DEATH* was as follows: <u>Cerebral apoplexy</u>	
*OCCUPATION (a) Trade, profession, or particular kind of work. (b) General nature of industry, business, or establishment in which employed (or employer) <u>Carpenter</u>			Contributory (SECONDARY) <u>—</u> yrs. <u>—</u> mos.	
*BIRTHPLACE OF DECEASED (State or country) <u>Ind.</u>			*Signed <u>J. W. Edison</u> M. <u>Sup. Bd.</u> , 191 <u>6</u> (Address) <u>Plymouth</u>	
PARENTS	*NAME OF FATHER <u>Andrew Hawn</u>		*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES state (1) MEANS OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.	
	*BIRTHPLACE OF FATHER (State or country) <u>Germany</u>		*LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OR RESIDENTS) At place of death ... yrs. ... mos. ... ds. In the State ... yrs. ... mos.	
	*MAIDEN NAME OF MOTHER <u>Lydia Beach</u>		Where was disease contracted, (if not at place of death?) Former or Usual Residence	
*BIRTHPLACE OF MOTHER (State or country) <u>Michigan</u>			*PLACE OF BURIAL OR REMOVAL <u>Union Cem. North of</u> DATE OF BURIAL <u>Sept 20</u> 191 <u>6</u>	
*THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>Nancy J. Hawn</u> (Address) <u>Plymouth Ind.</u>			*UNDERTAKER <u>J. C. Bunnell &amp; Son</u> WAS THE BODY EMBALMED? <u>Yes</u>	
*BURIAL PERMIT ISSUED BY <u>J. S. Martin</u>			*ADDRESS <u>Plymouth Ind.</u> EMBALMER'S LICENSE No. <u>105</u>	
Filed <u>Sept 20</u> 191 <u>6</u> <small>Name and Address of Health Officer or Deputy</small> <u>Plymouth Ind.</u>				

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and caused my official seal to be affixed, at Indianapolis this 12<sup>th</sup> day of October in the year of our Lord one thousand nine hundred and 1916

J. N. Hurty

*inked  
all  
C.C.*

Daniel Hann } BE IT REMEMBERED, That heretofore, to-wit:  
to }  
Nancy Ellen Snider } on the 3 day of July A. D. 1869.  
the following Marriage License was issued, to-wit:

STATE OF INDIANA, Fulton COUNTY, ss:

To Any Person Empowered by Law to Solemnize Marriages:

You are hereby authorized to join together as HUSBAND AND WIFE

Daniel Snider (Error) and Nancy Ellen Snider  
according to the laws of the State of Indiana, and for so doing this shall be your authority.

IN TESTIMONY WHEREOF, I, V. Gould, Clerk of

[L.S.]

the Fulton Circuit Court, hereunto subscribe my name  
and affix the seal of said Court, at Rochester  
this 3d day of July, 1869.

Vernon Gould Clerk.  
Fulton C.C.

BE IT FURTHER REMEMBERED, That afterwards, to-wit: on the 2d day  
of August, 1869, the following Certificate of Marriage was filed in my office, to-wit:

STATE OF INDIANA, Fulton COUNTY, ss:

THIS CERTIFIES, That I joined in Marriage as HUSBAND AND WIFE

Daniel Hann and Nancy Ellen Snider  
on the 4 day of July, 1869.

Moses M. Kee Justice Seal  
attest: V. Gould Clerk.

STATE OF INDIANA, Fulton COUNTY, ss:

I, Andrew K. Babcock, Clerk of the Circuit Court within  
and for the County of Fulton, and State of Indiana, do hereby certify  
the foregoing to be true and correct copies of the Marriage License and Certificate of Marriage

Daniel Hann to Nancy Ellen Snider  
as the same now appears upon the Marriage Record now on file in my office.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed the seal  
of said Court, at Rochester, Indiana,  
on this 30th day of September, 1916.

Andrew K. Babcock Clerk.  
Fulton Circuit Court, Ind.



# GENERAL AFFIDAVIT.

NO. 12110  
216 11  
MAY 11 1917

State of Indiana, County of Marshall

In the Matter of Pension Claim Wid. Orig. No 1078964 Nancy E.  
wid. of Daniel Hann C. G. 155<sup>th</sup> Dnd. Vol. Infy.

ON THIS 9<sup>th</sup> day of April A. D. 1917, personally appeared before me  
Natony Public

Nancy E. Hann aged 67 years, a resident of Plymouth  
in the County of Marshall and State of Indiana well known to me to be reputable

and entitled to credit, and who, being duly sworn, declares in relation to aforesaid case as follows:

(NOTE Affiants should state how they gain a knowledge of the facts to which they testify.)

I am the claimant herein and in reply to office call dated March 29<sup>th</sup> 1917 do under oath state that during my husband's last illness I worked very hard caring for him and may have made a mistake myself as to the date of his death. Our undertaker's record shows that my husband died Sept 19<sup>th</sup> 1916 and this date I believe to be correct.

In the summer of 1850 my husband lived in his home near Kingsburg, Miami County, Indiana. He was then but a babe in arms. In the summer of 1860 he lived with his parents near Akron, Fulton County, Indiana. This is as nearly as I can give this part of my statement.

I will further state that many years ago my husband bought a family Bible and our names and ages were recorded therein. It is about twenty five years old. They were taken from the Family Bible of our parents and the entries read as follows:  
Daniel Hann born Feb. 6<sup>th</sup> 1849.

Ellen Hann born Oct. 2<sup>nd</sup> 1849.  
These are our correct ages, but the old Bible cannot be found now at least I would have been where to find it. And I desire that final  
the rest of this affidavit is missing

# Declaration for Widow's Pension.

ACT OF APRIL 19, 1908

State of Indiana, County of Marshall SS:  
ON THIS 23<sup>rd</sup> day of September A. D. one thousand nine hundred and seven  
personally appeared before me, a Clerk Circuit Court within and for the County and State  
foresaid Nancy E. Hann aged 67 years, a  
resident of Plymouth County of Marshall  
State of Indiana who, being duly sworn according to law, makes the following declaration

in order to obtain pension under the provisions of the ACT OF CONGRESS APPROVED APRIL 19, 1908.

That she is the widow of Daniel Hann who was  
Enrolled under the name of Daniel Hann

at Private in Co. G. 155<sup>th</sup> Regt. Ind. Vols. on the 27<sup>th</sup> day of March 1865.  
and honorably discharged Aug. 4<sup>th</sup> 1865 having served ninety days or more during the late war  
of the rebellion. That the soldier was not in the MILITARY OR NAVAL SERVICE of the United States except  
as stated above.

That she was married under the name of Nancy E. Snyder to said soldier  
at Fulton County Indiana on the 4<sup>th</sup> day of July 1869.  
by J. P. Kee; that there was no legal barrier to the marriage;  
that she had not been previously married; that the soldier had not been previously married.  
No former marriage.

That the said soldier died Sept 18<sup>th</sup> 1916 at Plymouth, Indiana  
that she was not divorced from him; that she has not remarried since his death.  
That the NAMES and DATES OF BIRTH of all the children of the soldier, now living and under SIXTEEN  
YEARS OF AGE at the date of the soldier's death, are as follows: (If the soldier left no children, the claimant should so state.)

There are none  
born \_\_\_\_\_, 18\_\_\_\_, at \_\_\_\_\_  
born \_\_\_\_\_, 18\_\_\_\_, at \_\_\_\_\_  
born \_\_\_\_\_, 18\_\_\_\_, at \_\_\_\_\_  
born \_\_\_\_\_, 18\_\_\_\_, at \_\_\_\_\_  
born \_\_\_\_\_, 18\_\_\_\_, at \_\_\_\_\_

That she has not heretofore applied for pension  
If prior application has been made the number thereof, the service on which it was based

and the name of the soldier should be stated  
That she hereby appoints, with full power of substitution and revocation,  
H. H. Love of Plymouth, Indiana

her true and lawful attorney to prosecute this claim, and directs that the sum of Ten Dollars be paid him for his services.

That her Post-Office address is Gen. Delivery Plymouth  
County of Marshall, State of Indiana

ATTEST: Joseph Moslander Nancy E. Hann  
Mary E. Moslander Signature of Claimant—full name



DEPARTMENT OF THE INTERIOR  
BUREAU OF PENSIONS

WASHINGTON, D. C., January 2, 1915.

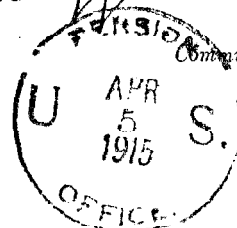
SIR: Please answer, at your earliest convenience, the questions enumerated below. The information is requested for future use, and it may be of great value to your widow or children. Use the inclosed envelope, which requires no stamp.

Very respectfully,

*G. M. Saenger*  
Commissioner.

DANIEL HANN,  
PLYMOUTH, IND.  
702781

ACT MAY



FOLD HERE.

No. 1. Date and place of birth? *Answer. 1847 april 6 miania co indiana*  
The name of organizations in which you served? *Answer. 1st Indiana infantry  
rochester indiania*

No. 2. What was your post office at enlistment? *Answer.*

No. 3. State your wife's full name and her maiden name. *Answer. ellen flar or ellen vides*

No. 4. When, where, and by whom were you married? *Answer. 1869 rochester Ind*

No. 5. Is there any official or church record of your marriage?  
If so, where? *Answer. rochester Ind*

No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her death or divorce. If there was more than one previous marriage, let your answer include all former wives. *Answer. none*

FOLD HERE.

No. 7. If your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any military or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. *Answer. none*

No. 8. Are you now living with your wife, or has there been a separation? *Answer. i am living with her now*

No. 9. State the names and dates of birth of all your children, living or dead. *Answer. mary andrew  
effia*

FOLD HERE.

*Western* Div.  
No. 702,781  
*Samuel Hann*  
Co. *7 155 Regt*

Department of the Interior,

BUREAU OF PENSIONS.

Washington, D. C., *Oct 20*, 1897

Sir:

Will you kindly answer, at your earliest convenience, the questions enumerated below? The information is requested for future use, and it may be of great value to your family.

Very respectfully,

*Samuel Hann*  
*Barrow*  
*Alaska*

*W. C. Brant*  
Commissioner

No. 1. Are you a married man? If so, please state your wife's full name, and her maiden name.

Answer: *Yes. Nancy Ellen (Snyder)*

No. 2. When, where, and by whom were you married? Answer: *In 1869 I think at Fulton Co. Ind. by Mr McKee Justice of Peace at Elletts. Don't know McKees Christian name*

No. 3. What record of marriage exists? Answer: *Don't know*

No. 4. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer: *No.*

No. 5. Have you any children living? If so, please state their names and the dates of their birth.

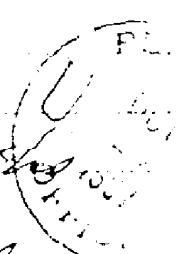
Answer: *Mary Leiter, Effah Louisa Hattery and Andrew Hann.*

*Mary is 26 years of age*  
*Effah " 22 " " "*  
*Andrew " 24 " " "*

*Can't give exact date of their births*

Date of reply, *Oct 25*, 1897

*Daniel Hann*  
(Signature)





Certificate No. 702481  
Name, *David Hamm*

Department of the Interior,  
BUREAU OF PENSIONS,

Washington, D. C., January 15, 1898.

SIR:

In forwarding to the pension agent the executed voucher for your next quarterly payment please favor me by returning this circular to him with replies to the questions enumerated below.

Very respectfully,

*J. Daniel L. Bright* *W. May Grand*  
U.S. Pension Agent, Commissioner.  
Plymouth  
Indianapolis, Ind  
Marshall Co

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer. *Ellen Hamm. Ellen Snyder*

Second. When, where, and by whom were you married?

Answer. *July 4/1869. Rochester Fulton Co Ind*

Third. What record of marriage exists?

Answer. *From My Bible Copy Mr Key*

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer. \_\_\_\_\_

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer. *Mary Elizabeth Hamm June 16/1871*  
*Andrew Hamm May 19/1873. Effah Hamm March 1871*

Date of reply, *May 4*, 189*8*

*David Hamm*  
(Signature)

DECLARATION FOR ORIGINAL INVALID PENSION.

To be Executed before a Court of Record or some Officer thereof having Custody of its Seal.

State of Indiana }
Hulton County, ss:

On this 4th day of April A. D. one thousand eight hundred and eighty nine personally appeared before me, Clerk of the Circuit Court, a court of record within and for the County and State aforesaid, Daniel Harn aged 42 years, a resident of the town of Bloomingburg county of Hulton

State of Indiana, who, being duly sworn according to law, declares that he is the identical Daniel Harn who was ENROLLED on the 27th day of March, 1865, in Company G of the 155 Regiment of Ind. Inf. commanded by Capt. Geo. P. Anderson and was honorably DISCHARGED at Indianapolis, Ind. on the 4th day of August, 1865; that his personal description is as follows: Age, 42 years; height, 5 feet 4 1/2 inches; complexion, dark; hair, light; eyes, blue.

That while a member of the organization aforesaid, in the service and in the line of his duty at Indianapolis in the State of Indiana on or about the middle of April, 1865, he contracted erysipelas affecting his blood causing boils, eruptions and constant misery.

That he was treated in hospitals as follows: Hos. at Indianapolis, Ind. from about April 16th to 25th 1865.

That he has not been employed in the military or naval service otherwise than as stated above. That he has not been in the military or naval service of the United States since Aug. 14th 1861.

That since leaving the service this applicant has resided in the county of Hulton in the State of Indiana, and his occupation has been that of a farmer. That prior to his entry into the service above named he was a man of good, sound physical health, being when enrolled a farmer. That he is now permanently disabled from obtaining his subsistence by manual labor by reason of his injuries, above described, received in the service of the United States: and he therefore makes this declaration for the purpose of being placed on the invalid pension roll of the United States.

He hereby appoints, with full power of substitution and revocation, his true and lawful attorney

to prosecute his claim. That he has not received nor applied for a Pension. That his POST-OFFICE ADDRESS IS Bloomingburg county of Hulton State of Indiana.

Daniel Harn (Claimant)

ATTEST:

# DECLARATION FOR INVALID PENSIONS.

UNDER ACT OF JUNE 27, 1890.

This can be executed by a Clerk of the Court or a Notary Public.

State of Indiana, County of Marshall, SS:  
On this 6<sup>th</sup> day of August A. D. one thousand eight hundred and  
ninety — personally appeared before me Notary Public A  
Justice of the Peace (Official character.) within and for the County and State  
aforesaid Daniel Hann aged 43 years, a resident of  
the town of Bloomington County of Fulton  
State of Indiana who being duly sworn according to law, declares

that he is the identical Daniel Hann  
who was ENROLLED on the 27<sup>th</sup> day of March 1865.  
in Co "G" 155<sup>th</sup> Regt Ind. Vol.  
(Here state rank, company, and regiment in Military Service, or vessel if in the Navy.)

in the War of the Rebellion and served at least ninety days, and was honorably DISCHARGED  
at Dover Delaware on the 10<sup>th</sup> day of August 1865.

That he is now unable to earn a support by reason of  
(Here state fully the name or nature of the disease or injury from which you are debilitated.)  
Chronic diarrhoea & no pills - Rheumatism  
we'd. of heart & disease of spine

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief permanent.

That he has not applied for a pension under application No. —; that he is a pensioner under certificate No. —  
(If a pensioner, certificate number only need be given; if not, give the number of the former application, if one was made.)

That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the Act of Congress of June 27, 1890. He hereby appoints, with full power of substitution and revocation, **W. H. NUSBAUM, of Auburn, Ind.**, his true and lawful attorney to prosecute his claim, and agrees to allow him Ten Dollars, the fee prescribed by law.

That his postoffice address is Bloomington  
County of Marshall State of Indiana

James D. Townsend Daniel Hann  
Jacob Deemy (Signature of claimant.)  
(Two witnesses who can write sign here.)

Also, personally appeared James D. Townsend  
residing at Argos Ind and Jacob Deemy  
residing at Argos Ind  
persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn say that they are present and saw Daniel Hann the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with him for 10 years and 3 years, respectively, that he is the actual person he represents himself to be; and that they have no interest in the prosecution of this claim.

If Affiants sign by mark, two persons who can write sign here.

James D. Townsend  
Jacob Deemy  
(Signature of affiants.)

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Indiana, County of Marshall, ss:

On this 17 day of May, A. D. one thousand nine hundred and twelve, personally appeared before me, a Clerk Marshall Circuit Court within and for the county and State aforesaid,

Daniel Haur, who, being duly sworn according to law, declares that he is 66 years of age, and a resident of Plymouth, county of Marshall

State of Indiana; and that he is the identical person who was ENROLLED at Rochester Indiana, under the name of Daniel Haur

on the 27 day of March, 1865, as a Private, in Company G. Regiment 155. Infantry

(Here state rank and company and regiment in the Army, or vessels if in the Navy.)

in the service of the United States, in the Civil war, and was HONORABLY DISCHARGED

(State name of war, Civil or Mexican.)

at Dover, Delaware, on the 4 day of August, 1865

That he also served \_\_\_\_\_ (Here give a complete statement of all other services, if any.)

That he was not employed in the military or naval service of the United States otherwise than as stated above. That his description at enlistment was as follows: Height, 5 feet 4 1/4 inches; complexion, dark; color of eyes, blue; color of hair, light; that his occupation was farmer; that he was born April 6<sup>th</sup>, 1846, at Miami Co., Ind.

That his several places of residence since leaving the service have been as follows: until 1894, Marshall Co., Ind., since

(State date of each change, as nearly as possible.)

That he is a pensioner under certificate No. 702781. That he has \_\_\_\_\_ applied for pension under original No. \_\_\_\_\_

That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the act of May 11, 1912.

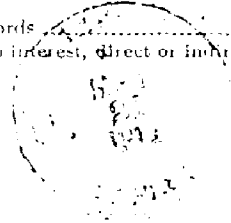
That his post-office address is Plymouth, county of Marshall, State of Indiana

Attest: (1) Lella E. Kitch | Daniel Haur  
(2) Jacob J. Otty | \_\_\_\_\_  
(Claimant's signature in full)

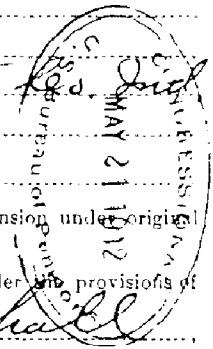
Subscribed and sworn to before me this 17<sup>th</sup> day of May, A. D. 1912 and I hereby certify that the contents of the above declaration were fully made known and explained to the applicant before swearing, including the words \_\_\_\_\_

[I. s.] \_\_\_\_\_ erased, and the words \_\_\_\_\_ added; and that I have no interest, direct or indirect, in the prosecution of this claim.

Ed. S. Kitch  
(Signature)  
Clerk Marshall Circuit Court  
(Official character.)



Validity of  
S. A. (2)  
Chief Clerk  
Division



IF A PENSIONER, DO NOT FAIL TO GIVE CERTIFICATE NUMBER.

#701206

# War Department,

RECORD AND PENSION DIVISION,

Washington, D. C., OCT 9 1889, 188

Respectfully returned to the Commissioner of Pensions,  
 Daniel Hann was enrolled on the 27<sup>th</sup>  
 day of March, 1865, at Rochester, in Co. G  
 155<sup>th</sup> Regiment of Ind. Inf. Volunteers, to  
 serve 1 year, or during the war, and mustered into service  
 as a private on the \_\_\_\_\_ day of \_\_\_\_\_, 1864,  
 at \_\_\_\_\_. On the Muster Rolls of Co. G of that  
 Regiment for the months of from enlistment to June 30, 1865,  
 he is reported present. He was M. O. with Co. Aug.  
 4, 1865, at Dover, Del.

Company Morning Reports show him as  
 follows viz. June 22/65 from duty to sick, June  
 24/65, from sick to duty.

No further evidence of disability.

lly.

By authority of the Secretary of War.

*F. C. Proctor*  
 Capt. and Assistant Surgeon, U. S. A.

Per

*[Signature]*



15  
8-1/16  
KMS  
3-1081  
3-888

PENSIONER DROPPED

DEPARTMENT OF THE INTERIOR  
BUREAU OF PENSIONS

3-888. M.O. 10/9/16 DL  
W O 1078964 Sep 1916

Certificate No. 702,781  
Class  
Pensioner Daniel Hann  
Soldier  
Service G. 155 Ind

The Commissioner of Pensions.

Sir:

I have the honor to report that the name of  
the above-described pensioner who was last  
paid at \$ 15 Aug 4 1916  
has this day been dropped from the roll be-  
cause of death Sept 18/16

DANIEL HANN  
PLYMOUTH IND  
702781 ACT MAY

Very respectfully,

*W. H. ...*  
Chief, Finance Division.

DATE DESTROYED

NOTE.—Every name dropped to be thus reported at once, and when cause of dropping is death, state date of death when known.  
6-2249

NANCY E HANN  
PLYMOUTH IND  
831915 ACT APR  
GEN DEL

8-1081

**DROP REPORT—PENSIONER**

..... Cert. No. ....

Pensioner .....

Soldier .....

Service .....

Class .....

**SECTION W**

**RECORD DIVISION**

....., 192

In the above-described case a declaration filed  
in this Division indicates that said pensioner died

....., 19.....

*Chief, Record Division.*

**FINANCE DIVISION**

JUL 12 1927....., 192

The name of the above-described pensioner who  
was last paid at the rate of \$ 30 per month  
to JUN 4 1927, 19....., has this day  
been dropped from the roll because of death

June 6, 1927

*J. Randall*  
*Chief, Finance Division.*