

ORDER FOR COPIES
OF VETERANS RECORDS

NJC Use

INSTRUCTIONS FOR COMPLETING THIS FORM

Submit a separate set of forms for each veteran.
Do NOT remove any of the pages of this 3-part set. A payment of \$5.00 is required for EACH file checked in Block 1. PREPAYMENT IS REQUIRED. Make check payable to National Archives Trust Fund (NNMS).

Mail completed form with payment to:

Cashier (NJC)
National Archives Trust Fund
8th & Pennsylvania Avenue, N.W.
Washington, DC 20408

AMOUNT
ENCLOSED

\$10.00
(\$10.00)

☐ ORDER FILLED
☐ Partial ☒ Complete
1. CHECK RECORD
DESIRED☒ PENSION
☒ BOUNTY-LAND
WARRANT APPLICATION
(Service before
1856 only)
☒ MILITARY

REQUIRED MINIMUM IDENTIFICATION OF VETERAN

Items 2, 3, 4, 5 (and 6, when applicable) MUST be completed or your order cannot be serviced.

2. VETERAN (Give last, first, and middle names)

MIKESELL, JACOB R.

3. BRANCH OF SERVICE IN WHICH HE SERVED

☐ Army ☐ Navy ☐ Marine Corps

4. STATE FROM WHICH SERVED

IOWA

5. WAR IN WHICH, OR DATES BETWEEN WHICH HE SERVED 1864-67

CIVIL WAR IN ATLANTA, GA.

6. IF SERVICE WAS CIVIL WAR

☐ Union ☐ Confederate

PLEASE PROVIDE THE FOLLOWING INFORMATION, IF KNOWN

7. UNIT IN WHICH HE SERVED (Name of
regiment or number, company, etc., name of
ship) IOWA CAVALRY

CAPT. BEN F. CRAIL

8. IF SERVICE WAS ARMY, ARM IN WHICH HE SERVED If other, specify:

☐ Infantry ☒ Cavalry ☐ Artillery

9. KIND OF SERVICE

☒ Volunteers ☐ Regulars

10. Pension or Bounty Land File No.

306,168

11. DATE OF BIRTH

1840

12. PLACE OF BIRTH (City, County, State, etc.)

PREBLE CO. OHIO

13. NAME OF WIDOW OR OTHER CLAIMANT

14. DATE OF DEATH

15. PLACE OF DEATH (City, County, State, etc.)

17. PLACE(S) VETERAN LIVED AFTER SERVICE

16. IF VETERAN LIVED IN A HOME FOR SOLDIERS, GIVE LOCATION (City & State)

FAIRFIELD, IOWA

18. YOUR NAME &
ADDRESS

Do NOT write below - Space is for our reply to you.

☐ RECORD
FILE
ENCLOSED
☐ Pension \$5
☐ Bounty
Land \$5
☐ Military \$5NUMBER OF FILES FROM WHICH
COPIES WERE REPRODUCED

2

☐ WE WERE
UNABLE
TO
COMPLETE
YOUR
ORDER

☐ REQUIRED MINIMUM IDENTIFICATION OF VETERAN WAS NOT PROVIDED. Please
complete items 2 (give full name), 3, 4, and 5, and resubmit. Your order and remittance are
returned to you.

☐ A SEARCH WAS MADE BUT
THE RECORDS YOU REQUEST-
ED WERE NOT FOUND.

☐ Pension
☐ Bounty Land
☐ Military

☐ When we do not
find a record
for a veteran,
this does not
mean that he
did not serve.
You may be
able to obtain
information
about him from
the State
archives.

☐ Your order and your remittance
are returned to you.

☐ Because extended search time was
involved, a formal refund must be
issued by the US Treasury, which
will take 6-8 weeks for processing.

REFUND AUTHORIZING SIGNATURE (Complete Name)

REFUND
AMOUNT
☐ We found _____ pension or bounty land files and _____ military service files of the same name
(or similar variations). You may order copies by returning the enclosed, marked forms.

☐ See attached forms/leaflets/information sheet.

☐ Other:

Print or type your name and address within the block below.

ADELAIDE B. PORTER

171 E 3RD STREET

COSTA MESA, CA 92627

(Zip Code)

NUMBER OF THESE
ANK FORMS YOU
WOULD LIKE SENT TO

SEARCHED

FILE DESIGNATION

DATE

4/27/83
MIKESELL, Jacob R
Co. F 3 Iowa Cav
SC 306.168

Do NOT use this form to request photocopies of records relating to service in World War I or II, or subsequent service.

Write to: National Personnel Records, 9700 Page Boulevard, St. Louis, MO 63132.

TYPES OF RECORDS THAT CAN BE ORDERED WITH THIS FORM

PENSION APPLICATION FILES based on United States (not State) service before World War I. Pension files usually include an official statement of the veteran's military service, as well as information of a personal nature. Pensions based on military service for the Confederate States of America were authorized by some Southern States but not by the Federal Government until 1959. Inquiries about State pensions should be addressed to the State archives or equivalent agency at the capital of the veteran's State of residence after the war.

BOUNTY-LAND WARRANT APPLICATION FILES based on United States (not State) service before 1856. Documents in a bounty-land warrant application file are similar to those in a pension application file. In addition, these files usually give the veteran's age and place of residence at the time the application was made.

MILITARY SERVICE RECORDS based on service in the United States Army (officers who served before June 30, 1917; enlisted men who served before October 31, 1912); Navy (officers who served before 1903; enlisted men who served before 1886); Marine Corps (officers and enlisted men who served before 1896); and Confederate armed forces (officers and enlisted men, 1861-65). In addition to persons who served in regular forces raised by the Federal Government, volunteers fought in various wars chiefly in the Federal Government's interest from the Revolutionary War through the Philippine Insurrection, 1775-1902.

IMPORTANT INFORMATION

When you send more than one form at a time, each form may be handled separately and you may not receive all of your replies at the same time.

When because of the size of a pension or bounty-land warrant application file, we are unable to provide copies of all documents, we send copies of the documents we think will be most useful to you. You may order copies of all documents in a file by making a specific request. We will notify you of the cost of the copies. We will also advise you of the cost of reproducing any military service records that cannot be furnished for the \$5.00 fee. Prepayment is required.

Often there are many files for veterans of the same or nearly the same name. If there are five or fewer files for men with the same name as the individual in whom you are interested, we will examine all the relevant files and compare their contents with the information that you have provided us. If the veteran's identity seems obvious, we will furnish you a copy of the file we think is the correct one.

Compilations of information concerning most military service performed by individuals in volunteer organizations during the nineteenth and early twentieth century are available, but such records were not compiled for Regular Army officers who served before 1863 and for Regular Army enlisted men and Navy and Marine Corps personnel who served during most of the nineteenth century. Records pertaining to such service are scattered among many files and vary in content, but we can furnish information on the military careers of individuals who served in these organizations. Because of Department of Defense restrictions on personnel records, we cannot provide photocopies of files pertaining to military service that ended less than 75 years ago; however, we are usually able to provide certain unrestricted information from these files. Military service records rarely contain family information.

The record of an individual's service in any one organization is entirely separate from his record of service in another organization. We are ordinarily unable to accurately establish the identity of individuals of the same name who served in different organizations. If you know that an individual served in more than one organization and you desire copies of all of the military service records, submit a separate form for the service record in each organization.

If there are more than five files, we will not make a file-by-file check to see if the information in the numerous files matches that provided for the veteran in whom you are interested. In such cases, we suggest that you visit the National Archives and examine the various files, or hire a professional researcher to examine the files for you. We do not maintain a list of persons who do research for a fee; however many researchers advertise their services in genealogical periodicals, usually available in libraries.

More information about the availability of records pertaining to military service may be found in our free genealogical information leaflets and forms. These may be requested by writing to:

Reference Services Branch (NNIH)
Washington, DC 20408

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TO SPECIAL EXAMINER'S REPORT.

Claim of *Jacob R Mikee*

No. *306168*

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Department of the Interior,

OFFICE OF SPECIAL EXAMINER, U. S. BUREAU OF PENSIONS

At Fairfax, Iowa
March 10, 1903

NOTICE OF SPECIAL EXAMINATION.

Case of Jacob R. McKeel, No. 306168
To " " ", Claimant:

You are hereby notified that, by order of the Commissioner of Pensions, the undersigned will on the 10 day of March, A. D. 1903, and continuing thereafter as long as may be necessary at Fairfax, County of Jefferson and State of Ia, and elsewhere if necessary, conduct a special examination of the aforesaid pension claim, at which time and place all available and material witnesses will be heard.

And you are further notified that you have the privilege of being present, in person or by attorney, during said special examination, and of cross-examining said witnesses and of introducing any material evidence on your own behalf if you so desire.

Walter D. Sykes
Special Examiner.

I acknowledge service of copy of above notice this 10th day of March, 1903
and desire the examination to begin at once

2

Walter D. Sykes
Jacob R. McKeel

ORIGINAL.

(FOR A BOARD.)

Claim No. 516.877Name of the claimant, Jacob R. MikesallRank, PrivateCompany, HRegiment, 3rd Regt Iowa Cav, volsPost-office address, Fairfield, Iowa.

ADDRESS OF THE BOARD:

Post office, FairfieldCounty, JeffersonState, IowaDate of examination, 24. Dec., 1884.

WE HEREBY CERTIFY that in compliance with the requirements of the law* we have carefully examined this applicant, who claims that while in the service of the United States at or near a place named Keokuk, Iowa, and while in line of duty, on or about the 30th

Cause of disability.

day of September, 1861, he incurred hemorrhage of the lungs

Degree of disability.

and that in consequence thereof he is Total disabled for earning his subsistence by manual labor

His pulse-rate is 96 per minute; his respiration 20; his temperature normal; his height is 5 feet and 10 inches; he weighs 145 pounds, and states that he is 47 years of age.

Touching the cause and degree of the disability for which he claims a pension, he makes the following

Here give the statement of the claimant fully, but as compactly as possible.

statement:

Was obliged to abandon his occupation as a blacksmith because the smoke and dust made him cough.
Has a cough nearly all of the time, and expectorates matter streaked with blood.

SUBJECTIVE SYMPTOMS.

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the present condition of the claimant.

The examination reveals the following objective facts in support of his statements:

The results of auscultation and percussion of his chest are negative.

The first elongation of the uvula, the lining of the pharynx red and thickened, and the follicles enlarged. The inflammation extends into the nose, and also into the larynx.

OBJECTIVE SYMPTOMS.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment, probable that the disability was incurred in the service as he claims, and that it has not been aggravated or prolonged by vicious habits. He is, in our opinion, entitled to a Total

rating for the disability caused by disease of the pharynx as above described for that caused by , and for that caused by ,

the sum of which aggregates Total

* See the back.

Here give rating for each cause of disability, and state the aggregate.

J. B. Oliver, Pres.,
Rich. J. Mohr, Sec'y,
Samuel W. Campbell, Treas., } BOARD.

ORIGINAL.

(FOR A BOARD.)

Claim No. 524877

Name of the claimant, Jacob R. MiskellRank, PrivCompany, 4thRegiment, 3rd Iowa VolPost-office address, Winfield Iowa

ADDRESS OF THE BOARD:

Post office, BurlingtonCounty, Des MoinesState, IowaDate of examination, July 15th, 1885.

WE HEREBY CERTIFY that in compliance with the requirements of the law* we have carefully examined this applicant, who claims that while in the service of the United States at or near a place named Kentucky Iowa, and while in line of duty, on or about the day of June, 1861, he incurred Hemorrhage of lungs

Cause of disability.

Degree of disability.

and that in consequence thereof he is disabled for earning his subsistence by manual labor. His pulse-rate is 95 per minute; his respiration 20; his temperature; his height is 5 feet and 9 inches; he weighs 144 pounds, and states that he is 49 years of age.

Here give the statement of the claimant fully, but as compactly as possible.

Touching the cause and degree of the disability for which he claims a pension, he makes the following statement: Had attack of Hemorrhage from lungs at Kentucky Iowa fall 1861 - lost at that time half ten cent pay - was four longed, remained home 3 months at that time - was on light duty & missed out with pay - Had one average one attack per year - losing not more than two to three pounds but occasionally when he has colds expectorates bloody sputum

SUBJECTIVE SYMPTOMS.

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the present condition of the claimant.

The examination reveals the following objective facts in support of his statements: We find dulness in left lung through auscultation & further confirmatory murmur has slight hyper trophy & cystic bellows murmur of heart - Have emphysema in fistula & granulation

OBJECTIVE SYMPTOMS.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment, probable that the disability was incurred in the service as he claims, and that it has not been aggravated or prolonged by vicious habits. He is, in our opinion, entitled to a Grade rating for the disability caused by dis of lungs, for that caused by dis of lungs, and for that caused by dis of lungs, the sum of which aggregates Grade

Here give rating for each cause of disability, and state the aggregate.

* See the back.

J. W. Holman, Pres.,
Daniel McWick, Sec'y,
G. M. Crawford, Treas., } BOARD.

State of Iowa In the Claim of J.R.
Jefferson County J. Miskell Co F 3rd
Iowa Val Carl
No 526877

Personally appeared before me Charles P.
Lippel Clerk of the Dist Court in and for
the County and State of Iowa Capt B F
Bozail age 53 years Post office address
Hayfield Jefferson County Iowa
who being duly sworn Says in relation
to the Claim of J.R. Miskell that
I was Capt of Co. F 3rd Iowa Val
Carl and well and intimately acquain-
ted with the said J.R. Miskell
while he was a member of said Co F
3rd Iowa Val Carl and that during the
summer of 1862 said J.R. Miskell was sick
with disease of the lungs and so low with
said disease that I had his discharge made
out and partially approved, when he
began to recover and his discharge was
withdrawn. I frequently heard him
complain of his lungs during the remainder
of his term of service

B. F. Bozail

Subscribed and sworn to by B F Bozail
before me this 30th day of December 1884
I have no interest in this claim

9 Chas. P. Lippel
Clerk Dist Court

He further declares that he has no interest in said case, and is not concerned in its Prosecution.

Attest, when the affiant signs BY MARK, two persons.

Signature of Affiant,

Benjamin F. Lutzell

State of *Iowa*, County of *Jefferson*, SS:

Sworn to and subscribed before me, this day, by the above-named affiant and I certify that I read said affidavit to said affiant, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me; that he is a creditable person, and so reputed in the community in which he resides.

WITNESS my hand and official seal, this *12* day of *March* 189*5* -

Wm. L. Long
(Signature)

This Affidavit is not to be executed until the testimony embodies the statement called for by Order 229.

L. S.

Clark Dist Court

(Official character.)

Certificate No. *306 168*

GENERAL AFFIDAVIT.

CLAIM OF

Jacob B. Nilesell

Co. *F*, 3rd Regt.

Iowa Cav. Vols.

REPLY TO CALL

No. _____

Dated _____

This blank is to be used for all classes of testimony, including officers, comrades, physicians, and neighbors.

5705

FILED BY

WM. H. LOPP,

Attorney for Claimant,

WASHINGTON, D. C.

Printed & Bound, 1895.

GENERAL AFFIDAVIT.

State of Iowa, County of Jefferson

In the matter of Pension Invalid Claim Certificate No. 306,168
of Jacob R. Mickel, Co. F, 3 Regt Iowa Cavalry Volunteers.
(Name of Claimant.)

Personally came before me, a clerk dist court in and for the aforesaid
County and State, Benjamin F. Ludgell, aged 60 years,
(Name of witness in full.)
a citizen of Jefferson, County of Iowa, State
(Post-Office Address.)
of Fairfield, well known to me to be reputable and entitled to credit and
who, being duly sworn, declares in relation to the aforesaid case as follows:

I, Benjamin F. Ludgell personally acquainted with Jacob R. Mickel
and have known him since 1861 and resided in the same camp
company with him from 1861 til 1864 & no he was left
in the hospital sick at Mexico Mo in the summer
or fall of 1862 and that he contracted chronic
diarrhea while on the march from Iron Mountain
to Little Rock Arkansas in the summer of 1863
and that he was sick at Gravelly Springs
Alabama in the spring of 1865 with what was
called malarial poisoning and that he was
discharged & have lived in
the same town with him ever since and
no he was doctored by Dr. Crosswell and Dr. Woods
while they were living & donat no other doctor
him this latter since. This is my written
statement in making the same I was not aided or
prompted or did I use any written or printed
form or paper as dictated by any other
person. not attached as an exhibit to this
testimony. Benjamin F. Ludgell

WM. H. LOFF, ATTORNEY FOR CLAIMANT.

GENERAL AFFIDAVIT.

State of Iowa, County of Jefferson, ss:

In the matter of

*Claim of Jacob R Mikezell
Co F 3rd Regt Iowa Vol Cavalry*

ON THIS *18* day of *Dec* A. D. 189*4* personally appeared before me,
a *Notary Public* in and for the said County, duly authorized to admin-
ister oaths, *Richard J. Gudgeon* aged *57* years,

a resident of *Frankfield* in the County of Jefferson, and State of
Iowa, whose postoffice address is *Frankfield Ia* well known

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

THAT I WAS A MEMBER OF CO; F, 3RD, REGT IOWA VOL, CAVLY AND
WAS WELL AND INTIMATELY ACQUAINTED WITH THE CLAIMANT JACOB R.
MIKESELL WHILE IN THE SERVICE, THAT ON THE MARCH FROM PILOT
KNOB MO TO LITTLE ROCK ARK, CLAIMANT HAD A SEVERE SPELL OF
CHRONIC DIARRHOEA CAUSE FROM BAD FOOD AND WATER, AND WAS OFF DUTY
ON ACCOUNT OF SAID DISABILITY FOR SOME TIME, ALOS AT GRAVELY
SPRINGS ALA- SAID CLAIMAN INCURRED RHEUMATISM FROM EXPOSURE,
AND WAS OFF DUTY FOR SOME TIME ON ACCOUNT OF RHEUMATISM AT MEM-
PHIS TEN- ALSO CLAIMAN INCURRED MALARIAL POISONING AT THE SAME
PLACE GRAVELY SPRINGS ALA- AND DURING THE REMAINDER OF HIS TER-
M OF SERVICE HE WAS OFF AND ON DUTY BUT NO TIME A WELL MAN,
I KNOW THESE FACTS FROM HAVING BEEN IN THE SAME CO, AND REGT
WITH THE CLAIMANT AND SEEING HIM MOST EVERY DAY, AND BEING IN
THE SAME MESS WITH HIM ALL OF THE TIME ABOVE STATED,

I FURTHER STATE THAT THIS STATEMENT WAS TYPE WRITTEN IN MY PRESE-
NCE AND FROM MY OWN ORAL STATEMENTS MADE AT THE TIME, AND THAT
I DID NOT USE AND PRINTED OR WRITTEN STATEMENT OR RECITAL PREPA-
RED BY ANY ONE,

I further declare that I have no interest in said case and I am not concerned in its
prosecution. ~~I certify that this statement was type written in my presence and from
my own oral declaration, made to the Notary who reduced this statement to type
writing in my presence, and from my oral statement then made on this~~ day of

189 to

at

~~Iowa, and that I did not use any written or printed statement or recital, prepared or
dictated by any other person.~~

Richard J. Gudgeon

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GENERAL AFFIDAVIT.

State of Iowa, County of Jefferson, ss:

In the matter of

*Jacob R. Mikesell of Com-
pany "D" 3rd Regt Iowa Vol Cavalry*

ON THIS *18* day of *Dec* A. D. 189*4* personally appeared before me,

a *Notary Public* in and for the said County, duly authorized to admin-
ister oaths, *B. F. Gudgeon* aged *47* years,

a resident of *Fairfield* in the County of Jefferson, and State of
Iowa, whose postoffice address is *Fairfield Ia* well known
to me to be reputable and entitled to credit, and who, being duly sworn, declares in
relation to aforesaid case, as follows:

THAT I WAS A MEMBER OF CO; F. 3RD, REGT IOWA VOL, CAVLY AND
WAS WELL AND INTIMATLY ACQUAINTED WITH THE CLAIMANT JACOB R.
MIKESELL WHILE IN THE SERVICE, THAT ON THE MARCH FROM PILOT
KNOB MO TO LITTLE ROCK ARK, CLAIMANT HAD A SEVER SPELL OF
CHRONIC DIARROEA CAUSE FROM BAD FOOD AND WATER, AND WAS OFF DUTY
ON ACCOUNT OF SAID DISABILITY FOR SOME TIME, ALOS AT GRAVELY
SPRINGS ALA- SAID CLAIMANT INCURRED RHEUMATISM FROM EXPOSURE,
AND WAS OFF DUTY FOR SOME TIME ON ACCOUNT OF RHEUMATIM AT MEM
PHIS TEN- ALSO CLAIMANT INCURRED MALARIAL POISONING AT THE SAME
PLACE GRAVELY SPRINGS ALA- AND DURING THE REMAINDER OF HIS TER
M OF SERVICE HE WAS OFF AND ON DUTY BUT NO TIME A WELL MAN,
I KNOW THESE FACTS FROM HAVING BEEN IN THE SAME CO, AND REGT
WITH THE CLAIMANT AND BEING HIM MOST EVERY DAY, AND BEEING IN
THE SAME MESS WITH HIM ALL OF THE TIME ABOVE STATED,

I FUTHER STATE THAT THIS STATEMENT WAS TYPE WIRTTEN IN MY PRESE
NCE AND FORM MY OWN ORRAL STATEMENTS MADE AT THE TIME, AND THAT
I DID NOT USE AND PRINTED OR WRITTEN STATEMENT OR RECITAL PREPA
ARED BY ANY ONE,

~~I further declare that I have no interest in said case and I am not concerned in its
prosecution. I certify that this statement was tupe-written in my presence and from
my own oral declaration, made to the Notary who reduced this statement to type-
writing in my presence, and from my oral statement then made on this~~

~~189 to at~~

~~and that I did not use any written or printed statement or recital, prepared or
dictated by any other person.~~

B. F. Gudgeon

AFFIDAVIT OF NEIGHBORS

STATE OF
COUNTY OF

Don
Jefferson
late

SS

In the matter of the claim of

J R McKesell

Company

of the

3

Regiment

Don

Vols., Personally came before me a

Clark Dist Court

in and for said County and State

A B Culbertson

who being

duly sworn says that his Post-Office address is

Town of Burlington

County of

Jefferson

State of

Don

and that his age

is

48

years and is by occupation a

attorney at law

That he has been well and personally acquainted with

J R McKesell

above named since his return from the army, from some time in the month of

18

to some time in the month of

18

and during

said period has had continuous personal Knowledge of his health and Physical condition, that during all the period covered by this affidavit he has been disabled with

Memorise of the Lungs

as he claimed and as affiant believes so that he was not able to perform as much labor as an ordinary able bodied man, but that on the contrary during the period covered by this affidavit, he was confined to his bed at least *one half* of his time each year, and was entirely disabled for ordinary manual labor at least *one half* of the time each year, and that, taking the time from month to month and year to year, for the period covered by this affidavit, he did not and could not do or perform to exceed *1/2* as much Manual Labor as an ordinary able bodied man, that he was not, to affiant's knowledge, afflicted with any other disability save the above recited, at any time during the period covered by this affidavit. Affiant further declares in reference to said soldiers condition during the period covered by this affidavit, as follows :

(Here recite particularly his condition during the period covered by this affidavit, going to show to what extent he was disabled for ordinary Manual Labor, so as to make your statement clear and full as the facts warrant.)

I know that he has not been able to perform more than one half as much work as a able bodied man.

That during the period covered by this affidavit, said soldier was by occupation a that he always sustained a good reputation for truth and veracity, was a man of good moral character, and did not aggravate, increase or prolong his disability by, Intemperance or other bad habits. That these statements are based upon affiant's personal knowledge, and that affiant's means of having personal knowledge of these things was as follows:

(Read carefully and state definitely all your means of Personal knowledge. If he worked with you or lived in the same house, state from what date to what date, state the distance you live from him, about how often you saw him and all that would go to show probable Personal knowledge on your part of his condition during the period covered by this affidavit.)

He lived with me a part of this time. I have seen him most every week since his return from the service and has worked for me frequently since his return from the service but was not able to do a full days work at any time since his return from the service.

(If related erase the words NOT RELATED and over it state relationship plainly.)

I further declare that I have no interest in said case and am not related to applicant, nor am I concerned in the prosecution of this claim.

Witness' signature

W B Culbertson doct. W.S. &

Subscribed and sworn to by the above named affiant before me and I certify that the contents of the forgoing affidavit was fully made known and explained to affiant and each of the blank spaces carefully filled before signing or swearing and that affiant is a credible person and so seputed in the community in which he resides, and that I have no interest and am not concerned in the prosecution of this claim.

(Seal)

Officers Name

Chas P. Lippel

NOTE: This should be sworn to before a Clerk of the Court, a Notary Public or Justice of the Peace, if before a Notary or Justice, the Clerk of Court must add his Certificate of Character on the back hereof and not on a slip of paper.

Above sworn to on the

26th

day of

May

1883

20

NEIGHBOR OR CITIZEN'S AFFIDAVIT.

For the testimony of employees, or near neighbors, or fellow workmen, of soldier who have known him since his discharge and return from the army.
The witness should prepare this affidavit in his own handwriting; if he can not do so, have it done by the officer before whom he executes the same.

State of Iowa, County of Jefferson, ss:

IN THE MATTER OF the Original Invalid Pension Claim No. _____ of

Jacob R. Mikesell Company, 7 Regiment, 9th Inf Vols.

ON THIS 3rd day of Dec A. D. 1891, personally appeared before me, a clerk of the District Court in and for the aforesaid County, duly authorized to administer oaths, Abt Snook

aged _____ years, whose Post Office address is Fairfield County Jefferson State of Iowa and who, being duly sworn, declares in relation to aforesaid case as follows:

That he is well and personally acquainted with the above named claimant, and has been personally acquainted with him about _____ years from 1865 to 1881, and that on his discharge from the army in 1865 he was suffering from

(If witness did not know claimant at discharge, mark out these lines.)

Chronic Diarrhoea Rheumatism
and Malarial Poisoning and
has continued to suffer
and complain of said
disabilities at various times
during all these years. I
know these facts from
intimate acquaintance
and hearing him complain

NOTE.

Read Carefully.

The witness must state whether he was the employer or was employed by claimant, or is a fellow workman, or neighbor of claimant, showing what was his physical condition from disability, for which pension is claimed, NAMING THE DISABILITY at the date of his first acquaintance with claimant, or at the date of his discharge from the service, and what it has been EACH YEAR SINCE to the present time, and to what extent he has been incapacitated from earning a living by manual labor, and the extent of such inability, whether one-fourth, one-third, one-half or three-fourths, and that he knows the above facts from personal knowledge.

The above disabilities affect in the following manner: In my
opinion he is fully 3/4
disabled

The above affidavit is from personal knowledge, and that he has no interest in said claim.

Abt Snook

(Signature of Affiant.)

(If Affiant signs by mark, two witnesses who can write sign here.)

This Blank is prepared by DR. WM. H. LOPP, Indianapolis, Ind., and is exclusively to be used for his business.

Return to
 Plaintiff. and do
 not give the facts
 of his belief or give
 what symptoms of such
 disease he observed in
 the disease of him
 manifest



he further declares that he has no interest in said case, and is not concerned in its prosecution.
 Signature of Affiant: Robert X. Clunkenbeard
 (Name and Service, if in the Army.)

State of Iowa, County of Wapello, ss:

Sworn to and subscribed before me this day by the above-named affiant, and I certify that I read said affidavit to said affiant, including the words _____ erased and the words _____ added, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is known personally by me and is a credible person.
 (State whether affiant is known personally, and whether he is a credible person, and what is his general reputation for truth. This certificate of credibility should be in handwriting of officer.)



Witness my hand and official seal this 19th day of August 1897

G. T. Slavens
 (Official Signature)
Notary Public
 (Official Character)
Ottumwa Iowa
 (Postoffice of Officer.)

Is your Certificate on file in Pension Bureau? Answer _____

Certificate No. 306,168

CLAIM OF

Jacob. Mitchell
 (Soldier)
 Co. F., 3^d Regt.
Iowa Cav., Vols.

REPLY TO BUREAU CALL

No. _____
 Dated _____
 NEIGHBORS' TESTIMONY.
 CONTINUANCE.

FILED BY
WM. H. LOPP,
 Attorney for Claimant,
WASHINGTON, D. C.

Copyright 1897, by Wm. H. Lopp.

GENERAL AFFIDAVIT

State of Iowa, County of Wapello, SS.:

In the matter of Pension Invalid Claim Certificate No. 306-165
of Jacob R. Mikesell, Co. F. 3rd Cavalry, Reg't. Iowa Volunteers.
(Name of Claimant.)

Personally came before me, a Notary Public in and for the aforesaid
County and State, Robert Clinkenbeard, aged 55 years,
(Name of witness in full.)
a citizen of Ottumwa, No. 124 North West Street,
(Post-Office Address.)
County of Wapello State of Iowa

well known to me to be reputable and entitled to credit, and who, being duly sworn,
declares in relation to the aforesaid case, as follows:

I have known Jacob R. Mikesell during
all the years since the war about the
spring of 1865. He has been an invalid
during all the years since he came
home and has been unable to perform
manual labor nearly the entire time.
He was afflicted with Rheumatism, Chronic
Dysentery and Malarial Poison. He has not
been able to perform manual labor not more
than one half of the time in any one
year. He was treated for the above diseases
by Drs. Clark (deceased) & Milligan, and Dr. Steel
of Hanfield Ga. and Dr. Richard Moore of
California. The above affidavit was
prepared in my presence and only
from my oral statement then made, and
that in making the same I did not use
and was not aided or prompted by any
written statement nor formula prepared
or dictated by any other person and not attached
as an exhibit. ~~not attached as an exhibit~~
to this testimony taken this 19 day of Aug, 1899
from my oral declaration made by G. T. Slavens
at Ottumwa Iowa Robert Clinkenbeard
Subscribed
mark

WM. H. HOFF, ATTORNEY FOR CLAIMANT.

NEIGHBOR OR CITIZEN'S AFFIDAVIT.

For the testimony of employees, or near neighbors, or fellow workmen, of soldier who have known him since his discharge and return from the army.
The witness should prepare this affidavit in his own handwriting; if he can not do so, have it done by the officer before whom he executes the same.

State of Iowa, County of Jefferson, ss:

IN THE MATTER OF the Original Invalid Pension Claim No. _____ of

"H" Company, 3rd Regiment Iowa Cav Vols.

ON THIS 19 day of Nov A. D. 1891, personally appeared before me, a Clerk of the District Court and for the aforesaid County, duly authorized to administer oaths, J. T. Axline

aged 45 years, whose Post Office address is Fairfield

County Jefferson State of Iowa and who, being duly sworn, declares in relation to aforesaid case as follows:

That he is well and personally acquainted with the above named claimant, and has been personally acquainted with him about 10 years from 1885 to 1891, and that on his discharge from the army in 1885 he was suffering from

(If witness did not know claimant at discharge, mark out these lines.)

Chronic Diarrhea, Rheumatism
and Malarial Poisoning.
(Name the Disability.)

and has continued to
suffer and complain of
said disabilities at various
times during all these
years — I know these
facts from intimate
acquaintance and hearing
him complain —

NOTE.

Read Carefully.

The witness must state whether he was the employer or was employed by claimant, or is a fellow workman, or neighbor of claimant, showing what was his physical condition from disability, for which pension is claimed, NAMING THE DISABILITY at the date of his first acquaintance with claimant, or at the date of his discharge from the service, and what it has been EACH YEAR SINCE to the present time, and to what extent he has been incapacitated from earning a living by manual labor, and the extent of such inability, whether one-fourth, one-third, one-half or three-fourths, and that he knows the above facts from personal knowledge.

The above disabilities affect in the following manner

In
my opinion he is fully
three-fourths disabled

The above affidavit is from personal knowledge, and that he has no interest in said claim.

(If Affiant signs by mark, two witnesses who can write sign here.)

J. T. Axline
24 (Signature of Affiant.)

This Blank is prepared by DR. WM. H. LOPP, Indianapolis, Ind., and is exclusively to be used for his business.

NEIGHBOR OR CITIZEN'S AFFIDAVIT.

For the testimony of employees, or near neighbors, or fellow workmen, of soldier who have known him since his discharge and return from the army.

The witness should prepare this affidavit in his own handwriting; if he can not do so, have it done by the officer before whom he executes the same.

State of Iowa, County of Jefferson, ss:

IN THE MATTER OF the Original Invalid Pension Claim No. _____ of

F Company, 3^d Regiment, Iowa Cav Vols.

ON THIS 19th day of Nov A. D. 1891, personally appeared before me, a clerk of the Dist Court in and for the aforesaid County, duly authorized to administer oaths, Jeremiah Sutton

aged 49 years, whose Post Office address is Fairfield

County Jefferson State of Iowa and who, being duly sworn, declares in relation to aforesaid case as follows:

That he is well and personally acquainted with the above named claimant, and has been personally acquainted with him about 30 years from 1865 to 1891, and that on his discharge from the army in 1865 he was suffering from

(If witness did not know claimant at discharge, mark out these lines.)

Chronic Diarrhoea, Rheumatism
and Malarial Poisoning and
has continued to suffer
and complain of said
disability at various
times during all these
years - I know these
facts from intimate
acquaintance and hearing
him complain

NOTE.

Read Carefully.

The witness must state whether he was the employer or was employed by claimant, or is a fellow workman, or neighbor of claimant, showing what was his physical condition from disability, for which pension is claimed, NAMING THE DISABILITY at the date of his first acquaintance with claimant, or at the date of his discharge from the service, and what it has been EACH YEAR SINCE to the present time, and to what extent he has been incapacitated from earning a living by manual labor, and the extent of such inability, whether one-fourth, one-third, one-half or three-fourths, and that he knows the above facts from personal knowledge.

The above disabilities affect in the following manner:

In
my opinion he is fully
three-fourths disabled

The above affidavit is from personal knowledge, and that he has no interest in said claim.

(If Affiant signs by mark, two witnesses who can write sign here.)

Jeremiah Sutton
23
(Signature of Affiant.)

This Blank is prepared by DR. WM. H. LOPP, Indianapolis, Ind., and is exclusively to be used for his business.

General Affidavit

State of Iowa County of Jefferson : ss

In matter of Pension Incalid Claim Certificate No 306-165 of Jacob R Mikesell Co. F. 3rd Cavalry Regt Iowa Volunteers. Personally came before me a Justice of the Peace in and for the afore said County and State B M Mikesell Aged 52 years a Citizen of Fairfield County of Jefferson and State of Iowa Well known to me to be a reputable and entitled to credit and who being duly sworn declares in relation to the aforesaid Case as follows

That he has known Jacob R Mikesell during all the years since the war about ~~about~~ the year 1865. He has been an invalid during all the years since he came home and has been unable to perform manual labor nearly the entire time. He has been afflicted with Rheumatism Chronic Diarrhea and malarial poison he has not been able to perform manual labor the greater part of the time since I have known him should say over one half of his time from those diseases above mentioned. He was treated for those diseases by Drs Milligan, Clark and Steele of Fairfield Iowa since all deceased. The above affidavit was prepared in my presence and only from my oral statement and that in making the same I did not use any printed or written statement. And he further declares he has no interest in said cause and is not concerned in its prosecution



General Affidavit

State of Iowa Jefferson County ss.

In the matter of Pension Invalid Claim Certificate No 306-165 of Jacob R Mikisell Co F 3 Regt Iowa Cavalry, Personally came before ^{me} a Justice of the Peace in and for the aforesaid County and State John T Exline aged 51 years a Citizen of Fairfield County of Jefferson State well known to me to be reputable and entitled to Credit and who being duly sworn declares in relation to the aforesaid Case as follows

I have known Jacob R. Mikisell all the years since 1883. He has been an invalid unable to perform Manual labor the greater part of the time since I have known him to the extent of one half or more, from the cause of Rheumatism Chronic Diarrhea & Malaria Poison. This I know by being personally intimate with him during all the years since 1883. I also know he was treated by Dr. Milliken since dead, for said disability.

The above Affidavit was prepared by me without ~~any~~ any assistance or help from any one and from my own personal knowledge of the case. Given this 7th day of September 1897

John T. Exline
28



19
ACT OF MAY 11, 1912.

3-014.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Iowa, County of Jefferson, ss:

On this 1st day of Oct, A. D. one thousand nine hundred and Twelve, personally appeared before me, a Notary Public in and for Jefferson Co. Iowa, within and for the county and State aforesaid,

Jacob R. McKee who, being duly sworn according to law, declares that he is 75 years of age, and a resident of FAIRFIELD IOWA, county of Jefferson, State of Iowa; and that he is the identical person who was married at Fairfield Iowa

under the name of Jacob R. McKee, on the 1st day of August, 1868, as a Private, in 3d Regt. Iowa Vol. Cavalry

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

in the service of the United States, in the Civil War war, and was HONORABLY DISCHARGED at Atlanta Ga on the 1st day of August, 1868.

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 personal description at enlistment was as follows: Height, 5 feet 9 inches; complexion, Fair; color of eyes, Blue; color of hair, light; that his occupation was Blacksmith; that he was born September 29, 1837, at Princeton Ohio

That his several places of residence since leaving the service have been as follows: _____

Iowa

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

That he is a pensioner under certificate No. 306168. 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 FAIRFIELD IOWA, county of Jefferson, State of Iowa

Attest: (1) H. B. Heltnier (2) J. A. Heltnier

Subscribed and sworn to before me this 1st day of Oct, 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 _____, added; and that I have no interest, direct or indirect, in the prosecution of this claim.



Accepted for examination
S. A. Gandy,
Chief, Law Division.

Jacob R. McKee
(Claimant's signature)
Oct

A. Heltnier
(Signature)
Notary Public in and for Jefferson Co. Iowa
(Official character.)

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

24
201

DES MOINES AGENCY.

3-402.

Certificate No. 316168 Department of the Interior,
Name, Jacob R Mikesell 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,

W. H. Evans
Commissioner of Pensions.

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

Answer. Mrs Lettie Mikesell. Lettie Gates.

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

Answer. Jan 18 1860 Van Buren Co Iowa. Squire Schaefer.

Third. What record of marriage exists?

Answer. The licence in Keosauqua V. B. Co Iowa

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. No

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

Answer. No

Date of reply, JUL 4 - 1898, 189

Jacob R Mikesell
(Signature)
0-8 5301b750m1-98

244 Reg. Ret. for Jan. and Feb. '64 do not
report him absent.

Regimental Hospital Records, commencing
Sept 9 1861, and terminating Aug. 6, 1863,
show him as follows:

Sept 30, 1864. Admitted with Dysentery,
Oct 4, 1864. Returned to duty.

Company Morning Reports, commencing Oct 28/61
and terminating July 1/63, (incomplete)
show him; "rejoined the Company Hospital
at Houston July 25/63."

Nature of Sickness, except as shown by reports
from Hospital Records above given, not stated.

Medical Certificate on which furlough
was granted or extended, not on file.

Company Returns are not on file.

Thomas Ward
Assistant Adjutant General.

244-80

442
34

8268

War Department,

ADJUTANT GENERAL'S OFFICE,

Washington, June 4, 1885.

Respectfully returned to the Commissioner of Pensions.

Jacob R. Mikull, a Private of Company F,
3rd Regiment Iowa Cav. Volunteers, was enrolled on the
4th day of September, 1861, at Horsfield (3 yrs),
and is reported: On roll from enrollment to Oct. 31/61,
present. Nov. and Dec. '61 absent on Surgeon's
Certificate. Same report for Jan. and Feb.
/62. March and Apr. '62 present. Same report
to Aug. 31/62. Sept and October '62, absent sick
in hospital at Mexico, Mo. Nov. and Dec. '62
absent sick at Rolla, Mo. Jan. and Feb. '63
present. Same report to Dec. 31/63. Jan. and Feb. '64, not on file.
Reenlisted as a Vet. Vol. Jan. 1/64, at Little Rock, Ark.
March and April /64 present. Same report to
June 30/65. Mustered Out with Co. on Muster
Out Roll dated Aug. 9/65 at Atlanta, Ga.
Reg. Ret. for Nov. 61 reports him absent on furlough extended
J.H. from Nov. 25/61 to Jan. 18/62 at Jefferson Co. Ia.

Thos. Ward
Adjutant General.

8268-80

442
34

McC 940 ✓

3-1081

PENSIONER DROPPED

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

DEC 19 1918, 191

Certificate No. 306,168

ACT OF MAY 11, 1912

Class

Pensioner

Soldier

Service

Jacob R. Mikezell

F 3 Iowa Cav

The Commissioner of Pensions.

Sir:

I have the honor to report that the name of
the above-described pensioner who was last
paid at \$ 40, to OCT 4, 1918

has this day been dropped from the roll be-
cause of death. Dec 7 1918

JACOB R. MIKESELL,
FAIRFIELD, IOWA.

306168

Very respectfully,

W. H. Campbell

Chief, Finance Division.

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

6-2219

PLATE DESTROYED

327497
Jan 4, 1919
Canceled.

23
Mo | S Cav. | Iowa.

Jacob D. Milburn.

Priv., Co. F, 3 Reg't Iowa Cavalry.

Age 25 years.

Appears on Co. Muster-out Roll, dated

Sept. 17, 1864.

Muster-out to date, 186 .

Last paid to, 186 .

Clothing account:

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

Due soldier \$.....100; due U. S. \$.....100

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

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

Bounty paid \$.....100; due \$.....100

Valuation of horse, \$.....100

Valuation of horse equipments, \$.....100

Remarks: Discharged as a

Vol. V.C. Jan. 1, 1864.

Book mark:

J. H. Evans

M | 3 Cav. | Iowa.

Jacob R. Miksell
Pat., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll
for *Jan. r. Feb.*, 1865.

Joined for duty and enrolled:

When *Jan. 1*, 1864.*

Where *Little Rock* *

Period *2* years.*

Present or absent *Present*

Stoppage, \$ *100* for

Due Gov't \$ *100* for

Valuation of horse, \$ *100*

Valuation of horse equipments, \$ *100*

Remarks: *vet.*

*See enrollment on card from muster-in roll.

Book mark:

M | 3 Cav. | Iowa.

Jacob R. Miksell
Pat., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll
for *Mich. r. Apr.*, 1865.

Joined for duty and enrolled:

When *Jan. 1*, 1864.*

Where *Little Rock* *

Period *2* years.*

Present or absent *Present*

Stoppage, \$ *100* for

Due Gov't \$ *100* for

Valuation of horse, \$ *100*

Valuation of horse equipments, \$ *100*

Remarks: *vet.*

*See enrollment on card from muster-in roll.

Book mark:

M | 3 Cav. | Iowa.

Jacob R. Miksell
Pat., Co. F, 3 Reg't Iowa Cavalry.

Age *25* years.

Appears on Co. Muster-out Roll, dated
Atlanta, Ga., Aug. 9, 1865.

Muster-out to date *Aug. 9*, 1865.

Last paid to *Oct. 31*, 1864.

Clothing account:

Last settled *186*; drawn since \$ *100*

Due soldier \$ *100*; due U. S. \$ *12* ^{*64*} *100*

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

Due U. S. for arms, equipments, &c., \$ *8* ^{*50*} *100*

Bounty paid \$ *160* ^{*100*}; due \$ *240* ^{*100*}

Valuation of horse, \$ *100*

Valuation of horse equipments, \$ *100*

Remarks: *Veteran*

Book mark:

Struller

M | 3 Cav. | Iowa.

Jacob R. Miksell
Pat., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Descriptive Book
of the organization named above.

DESCRIPTION.

Age *25* years; height *5* feet *9* inches.

Complexion *fair*

Eyes *gray*; hair *light*

Where born *Little Rock, Ohio*

Occupation *farmer*

ENLISTMENT.

When *Jan. 1*, 1864.

Where *Little Rock*

By whom *Hay. Duffield*, term *3* y'rs.

Remarks: *Original enlistment*

Sept. 21. 1861. Veteran

No. 3 Cav. Iowa.

Jacob R. Miskell.
Private, Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Sept. & Oct., 1864.

Joined for duty and enrolled:

When Jan. 1, 1864.

Where Little Rock.

Period 3 years.*

Present or absent Present.

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

*See enrollment on card from muster-in roll.

Book mark:

358c)

Copyright

No. 3 Cav. Iowa.

Jacob R. Miskell.
Private, Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for July and Aug., 1864.

Joined for duty and enrolled:

When Jan. 1st, 1864.

Where Little Rock.

Period 3 years.*

Present or absent Present.

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

*See enrollment on card from muster-in roll.

Book mark:

358c)

Copyright

No. 3 Cav. Iowa.

Jacob R. Miskell.
Private, Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for May & June, 1865.

Joined for duty and enrolled:

When Jan. 1, 1865.

Where Little Rock.

Period 3 years.*

Present or absent Present.

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Veteran

*See enrollment on card from muster-in roll.

Book mark:

358c)

Copyright

Check Jan. 6, 1864 found in
on Bank Ord. No. 376.
A.G.O. found that there
is a discrepancy to Jan. 1st, 1864.

418910

10580524

JUN 29

M | 3 Cav. | Iowa.

Jacob G. Miksell.
Privt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for *Jan'y & Feby*, 1864.

Joined for duty and enrolled:

When *Jan'y 1*, 1864.*

Where *Little Rock Ark.**

Period *3* years.*

Present or absent *Absent*

Stoppage, \$.....100 for

Due Gov't, \$.....100 for

Valuation of horse, \$.....100

Valuation of horse equipments, \$.....100

Remarks: *Re-enlisted as a*

Vet. W.B. & furnished in
accordance with Special
Ord. No. 137, dated Little

* See enrollment on card from muster-in roll.

Book mark:

J. H. Evans
Chirist.

M | 3 Cav. | Iowa.

Jacob R. Miksell.
Privt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for *Mar & April*, 1864.

Joined for duty and enrolled:

When *Jan'y 1*, 1864.*

Where *Little Rock Ark.**

Period *3* years.*

Present or absent *Present*

Stoppage, \$.....100 for

Due Gov't \$.....100 for

Valuation of horse, \$.....100

Valuation of horse equipments, \$.....100

Remarks: *Furnished horse*
& equipments to Jan'y 10, 1864.
Bounty due \$50.

FROM SECOND AUDITOR'S ROLL.

* See enrollment on card from muster-in roll.

Book mark:

J. H. Evans
Chirist.

M | 3 Cav. | Iowa.

Jacob R. Miksell.
Privt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for *May and June*, 1864.

Joined for duty and enrolled:

When *Jan'y 1*, 1864.*

Where *Little Rock Ark.**

Period *3* years.*

Present or absent *Present*

Stoppage, \$.....100 for

Due Gov't \$.....100 for

Valuation of horse, \$.....100

Valuation of horse equipments, \$.....100

Remarks:

* See enrollment on card from muster-in roll.

Book mark:

J. H. Evans
Chirist.

M | 3 Cav. | Iowa.

Jacob R. Miksell.
Privt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for *Nov & Dec*, 1864.

Joined for duty and enrolled:

When *Jan'y 1*, 1864.*

Where *Little Rock* *

Period *2* years.*

Present or absent *Present*

Stoppage, \$.....100 for

Due Gov't \$.....100 for

Valuation of horse, \$.....100

Valuation of horse equipments, \$.....100

Remarks:

* See enrollment on card from muster-in roll.

Book mark:

J. H. Evans
Chirist.

M | 3 Cav. | Iowa.

Jacob R. Mikesell
Priv., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for May & June, 1863

Joined for duty and enrolled:

When Sep 4, 1861.*

Where Fairfield *

Period 3 years.*

Present or absent Present

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

*See enrollment on card from muster-in roll.

Book mark:

M | 3 Cav. | Iowa.

Jacob R. Mikesell

Priv., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Sep & Oct, 1863

Joined for duty and enrolled:

When Sep 4, 1862.*

Where Fairfield Ia *

Period 3 years.*

Present or absent Present

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Furnished his

own horse & Equip.
since July 15/63

*See enrollment on card from muster-in roll.

Book mark:

M | 3 Cav. | Iowa.

Jacob R. Mikesell
Priv., Co. F, 3 Reg't Iowa Cavalry.

Age 25 years.

Appears on a

Detachment Muster-out Roll

of the organization named above. Roll dated

Keokuk Iowa, Feb. 1, 1864.

Muster-out to date Feb. 1, 1864.

Last paid to Oct. 31, 1863.

Clothing account:

Last settled Feb. 1, 1863; drawn since \$ 43.38

Due soldier \$ 100; due U. S. \$ 100

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

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

Bounty paid \$ 100; due \$ 100

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Disch'd by virtue of enlist-

ment as Vet. Vol. per G.O. No. 191

Mr. Dept. furnished horse

& equipments to Jan. 12/64.

Book mark:

M | 3 Cav. | Iowa.

Jacob R. Mikesell

Priv., Co. F, 3 Reg't Iowa Cavalry.

Appears on

M. and D. Roll of Veteran Volunteers

of the organization named above. Roll dated

Keokuk Iowa, Feb. 1, 1864.

When enlisted Jan. 1, 1864.

When mustered in Jan. 1, 1864.

Bounty paid \$ 100; due \$ 60.100

Company to which assigned G.

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: \$ 13. advance pay

+ \$ 2. premium due

Book mark:

Valentine

M | 3 Cav. | Iowa.

Jacob R Mikesell

Pat., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Jan & Feb, 1863

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield *

Period 3 years.*

Present or absent Present

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

* See enrollment on card from muster-in roll.

Book mark:

358c)

Copyist.

M | 3 Cav. | Iowa.

Jacob R Mikesell

Pat., Co. F, 3 Reg't Iowa Cavalry.

Appears on Special Muster Roll

for Apr. 10, 1863

Present or absent Present

Stoppage, \$ 100 for

Due Gov't, \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

Book mark:

(359)

Copyist.

M | 3 Cav. | Iowa.

Jacob R Mikesell

Pat., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Nov & Dec, 1863

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield *

Period 3 years.*

Present or absent Present

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Furnishes his horse & Equipments

* See enrollment on card from muster-in roll.

Book mark:

358c)

Copyist.

M | 3 Cav. | Iowa.

Jacob R Mikesell

Pat., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for July & Aug, 1863

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield *

Period 3 years.*

Present or absent Present

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Furnishes his own horse & equipments

* See enrollment on card from muster-in roll.

Book mark:

358c)

Copyist.

M | 3 Cav. | Iowa.

Jacob R Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on
Company Muster Roll
for May & June, 1862.

Joined for duty and enrolled:
When Sept 4, 1861.*
Where Fairfield.*
Period 3 years.*

Present or absent. Present
Stoppage, \$ 100 for
Due Gov't \$ 100 for
Valuation of horse, \$ 100
Valuation of horse equipments, \$ 100
Remarks:

*See enrollment on card from muster-in roll.

Book mark:

M | 3 Cav. | Iowa.

Jacob R Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on
Company Muster Roll
for July & Aug, 1862.

Joined for duty and enrolled:
When Sept 4, 1861.*
Where Fairfield.*
Period 3 years.*

Present or absent. Present
Stoppage, \$ 100 for
Due Gov't \$ 100 for
Valuation of horse, \$ 100
Valuation of horse equipments, \$ 100
Remarks:

*See enrollment on card from muster-in roll.

Book mark:

M | 3 Cav. | Iowa.

Jacob R Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on
Company Muster Roll
for Mar & Apr, 1863.

Joined for duty and enrolled:
When Sept 4, 1861.*
Where Fairfield.*
Period 3 years.*

Present or absent. Present
Stoppage, \$ 100 for
Due Gov't \$ 100 for
Valuation of horse, \$ 100
Valuation of horse equipments, \$ 100
Remarks: Furnished his
own horse & Equip.
since March 1/63

*See enrollment on card from muster-in roll.

Book mark:

M | 3 Cav. | Iowa.

Jacob R Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on
Company Muster Roll
for Nov & Dec, 1862.

Joined for duty and enrolled:
When Sept 4, 1861.*
Where Fairfield.*
Period 3 years.*

Present or absent. Absent
Stoppage, \$ 100 for
Due Gov't \$ 100 for
Valuation of horse, \$ 100
Valuation of horse equipments, \$ 100
Remarks: Sick in hospital
at Rolla Mo

*See enrollment on card from muster-in roll.

Book mark:

Mo | 3 Cav. | Iowa.

Jacob R Mikessell

Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Jan - Feb, 1862.

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield.*

Period 3 years.*

Present or absent. Absent

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Absent on Surgeon's
certificate. Has received
no pay from Government

*See enrollment on card from muster-in roll.

Book mark:

Hark
Copyright

(358c)

Mo | 3 Cav. | Iowa.

Jacob R Mikessell

Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Sept & Oct, 1862.

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield.*

Period 3 years.*

Present or absent. Absent

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Sick in Hospital
at Mexico Mo.

*See enrollment on card from muster-in roll.

Book mark:

Hark
Copyright

(358c)

Mo | 3 Cav. | Iowa.

Jacob R Mikessell

Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for March & April, 1862.

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield.*

Period 3 years.*

Present or absent. Present

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

*See enrollment on card from muster-in roll.

Book mark:

Hark

(358c)

Copyright

at Little Rock, Ark.
Jan. 1864

1895.

36178562

AUG.-7.

31
M | 3 Cav. | Iowa.

Jacob R. Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on Returns as follows:

Nov. 1861 Absent
on furlough.
Extended from
Nov. 25 to Dec.
15/61 Jefferson
Co. Iowa.

Dec. 1861
Feb. 1862 Absent without
leave.

Nov. 1862 Absent Hosp.
Lebanon since Nov.
15/62

Dec. 1862 Absent sick
in Hosp. at Rolla,
Mo. since Dec. 21/62

Jan. 1863 Absent sick
in Hosp. at Houston
Mo. since Jan. 25/63

Feb. 1864 Absent on furlough
30 days in Iowa from
Feb. 11/64 having certificate
(over)

Book mark:

(546)

J. Thomas
Copyist.

M | 3 Cav. | Iowa.

Jacob R. Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Nov & Dec, 1861.

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield.*

Period 3 years.*

Present or absent. Absent

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks: Absent on surgeon's
certificate. absent last
pay day

* See enrollment on card from muster-in roll.

Book mark:

(358c)

Hart
Copyist.

M | 3 Cav. | Iowa.

Jacob R. Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Age years.

Appears on

Company Muster-in Roll

of the organization named above. Roll dated

Keokuk Iowa Sept 4, 1861.

Muster-in to date Sept 4, 1861.

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield.*

Period 3 years.*

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

* See Muster-in roll shows enrollment and muster-in of this company as of same date. See enrollment on subsequent card or cards.

Book mark:

(356b)

Hart
Copyist.

M | 3 Cav. | Iowa.

Jacob R. Mikesell
Pvt., Co. F, 3 Reg't Iowa Cavalry.

Appears on

Company Muster Roll

for Sept 4 to Oct 31, 1861.

Joined for duty and enrolled:

When Sept 4, 1861.*

Where Fairfield.*

Period 3 years.*

Present or absent. Present

Stoppage, \$ 100 for

Due Gov't \$ 100 for

Valuation of horse, \$ 100

Valuation of horse equipments, \$ 100

Remarks:

* See enrollment on card from muster-in roll.

Book mark:

(358c)

Hart
Copyist.

VOLUNTEER ENLISTMENT.

STATE OF Arkansas TOWN OF Little Rock



I Jacob R. Mikesell born in Pocky Co
in the State of Ohio, aged 25 years,
and by occupation a Blacksmith Do hereby acknowledge
to have volunteered, this 1st day of January, 1864
to serve as a SOLDIER in the ARMY OF THE UNITED STATES OF AMERICA, for
the period of THREE YEARS, unless sooner discharged by proper author-
ity: Do also agree to accept such bounty, pay, rations, and clothing, as are
or may be, established by law for Veteran Volunteers. And I, Jacob R. Mikesell
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 Little Rock
this 1st day of Jan 1864
BEFORE Marshall } Jacob R. Mikesell
May 3rd Iowa Cav

I CERTIFY, ON HONOR, That I have carefully examined the above-named Volun-
teer, 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.

Geo. H. Carlier
Surg, 3rd Iowa, Cav,
Examining Surgeon.

I CERTIFY, ON HONOR, That I have minutely inspected the Volunteer, Jacob R. Mikesell,
previously to his enlistment, and that he was entirely sober when en-
listed; that, to the best of my judgment and belief, he is of lawful age; and that, in accept-
ing him as duly qualified to perform the duties of an able bodied soldier, I have strictly ob-
served the Regulations which govern the recruiting service. This soldier has Grey
eyes, Light hair, Fair complexion, is 5 feet 9 inches high.

Marshall
2nd Regiment of Iowa Cav Volunteers,
(A. G. O. No. 74 & 76.) Recruiting Officer.

Mustered into the service of the United States, in Company H of 2nd Iowa Regiment of Volunteers, on the
1st day of Jan, 1864, at Little Rock
Ark
Wm. H. Mikesell
Alfred Mikesell
John Mikesell
Marshall
Geo. H. Carlier
Surg, 3rd Iowa, Cav,
Examining Surgeon.

1727
Mikisell Jacob R
Co. F, 3 Iowa Cavalry.

Private | Private

CARD NUMBERS.

1	10579086	26	10581320
2	10579174	27	10581424
3	10579261	28	10581542
4	10579351	29	10581643
5	10579437	30	32589063
6	10579522	31	36178562
7	10579607	32	
8	10579705	33	
9	10579804	34	
10	10579900	35	
11	10579994	36	
12	10580093	37	
13	10580186	38	
14	10580274	39	
15	10580365	40	
16	10580452	41	
17	-105805608	42	
18	10562934	43	
19	10580524	44	
20	10580618	45	
21	10580731	46	
22	10580854	47	
23	10580980	48	
24	10581111	49	
25	10581216	50	

Number of personal papers herein 12