

# NATIONAL ORGANIZATION SONS OF UNION VETERANS OF THE CIVIL WAR CIVIL WAR MEMORIAL ASSESSMENT FORM

**PLEASE:**

- Type or print, using a ball-point pen, when filling out this form. Legibility is critical.
- Do not guess at the information. An answer of, "Unknown," is more helpful.
- Include a photograph of each viewable side and label it with name & direction of view.

- Thank You.

**Type of Memorial**

- Monument *with* Sculpture                      \_\_\_ Monument with Cannon  
 \_\_\_ Monument without Sculpture                      \_\_\_ Historical Marker                       Plaque

**Affiliation**

- \_\_\_ G.A.R. (Post Name & No. \_\_\_\_\_)                      \_\_\_ M.O.L.L.U.S.  
 \_\_\_ W.R.C. (Corps Name & No. \_\_\_\_\_)                      \_\_\_ Other Allied Order  
 SUVCW (Camp Name & No. Camp Harrison 52-3)                      (Please describe below)  
 \_\_\_ DUVCW (Tent Name & No. \_\_\_\_\_)  
 \_\_\_ Other: \_\_\_\_\_

**Original Dedication Date** New (May 29, 2006) Please consult any/all newspaper archives for a local paper's article that would have information on the first dedication ceremony and/or other facts on the memorial. Please submit a copy of your findings with full identification of the paper & date of publication. Thank you.

**Location**

The Memorial is *currently* located at:  
 Street/Road address or site location Wisner Cemetery  
 City/Village Wisner Township \_\_\_\_\_ County Cuming

The front of the Memorial faces:  North    \_\_\_ South    \_\_\_ East    \_\_\_ West

**Government Body, Agency, or Individual Owner** (of private cemetery that Memorial is located in)...

Name City of Wisner Dept./Div. \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City Wisner State NE Zip Code 68791  
 Contact Person Bandy Woldt Telephone (    ) \_\_\_\_\_

If the Memorial has been moved, please list former location(s)...

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Physical Details**

Material of Monument or base under a Sculpture or Cannon = \_\_\_ Stone  Concrete \_\_\_ Metal \_\_\_ Undetermined  
 If known, name specific material (color of granite, marble, etc.) \_\_\_\_\_

Material of the Sculpture = \_\_\_ Stone  Concrete \_\_\_ Metal \_\_\_ Undetermined  
 If known, name specific material (color of granite, marble, etc.) \_\_\_\_\_  
 If the Sculpture is of metal, is it solid cast or "hollow?" \_\_\_\_\_

Material of Plaque or Historical Marker / Tablet = concrete

Material of Cannon = \_\_\_ Bronze \_\_\_ Iron - Consult known Ordnance Listing to confirm  
 Markings on muzzle = \_\_\_\_\_

Markings on Left Trunion \_\_\_\_\_ Right Trunion \_\_\_\_\_  
 Is inert ammunition a part of the Memorial? \_\_\_ If so, describe \_\_\_\_\_

**Approximate Dimensions** (indicate unit of measure) - taken from tallest / widest points  
 Monument or Base: Height 4 ft Width 3 ft Depth 6" or Diameter \_\_\_\_\_  
 Sculpture: Height 4 ft Width 4 ft Depth 3 ft or Diameter \_\_\_\_\_

For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue and attach to this form. Please describe the "pose" of each statue and any weapons/implements involved (in case your photos become separated from this form). Thank you!

**Markings/Inscriptions** (on stone-work / metal-work of monument, base, sculpture)  
 Maker or Fabricator mark / name? If so, give name & location found \_\_\_\_\_

The "Dedication Text" is formed: \_\_\_ cut into material  raised up from material face

Record the text (indicate any separation if on different sides...) Please use additional sheet if necessary.

G. A. R.  
1861 - 1865

**Environmental Setting**

(The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.)

**Type of Location**

- |  |                    |                     |
|--|--------------------|---------------------|
| <input checked="" type="checkbox"/> Cemetery | ___ Park           | ___ Plaza/Courtyard |
| ___ "Town Square"                            | ___ Post Office    | ___ School          |
| ___ Municipal Building                       | ___ State Capitol  | Other: _____        |
| ___ Courthouse                               | ___ College Campus | _____               |
| ___ Traffic Circle                           | ___ Library        | _____               |



**Surface Coating**

Does there appear to be a coating?  Yes  No  Unable to determine

If known, identify type of coating.

Gilded  Painted  Varnished  Waxed  Unable to determine

Is the coating in good condition?  Yes  No  Unable to determine

**Basic Surface Condition Assessment (check one)**

In your opinion, what is the general appearance or condition of the Memorial?

Well maintained  Would benefit from treatment  In urgent need of treatment  Unable to determine

**Overall Description**

Briefly describe the Memorial (affiliation / overall condition & any concern not already touched on).

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

**Supplemental Background Information**

In addition to your on-site survey, any additional information you can provide on the described Memorial will be welcomed. Please label each account with its source (author, title, publisher, date, pages). Topics include any reference to the points listed on this questionnaire, plus any previous conservation treatments - or efforts to raise money for treatment. Thank you.

**Inspector Identification**

Date of On-site Survey \_\_\_\_\_

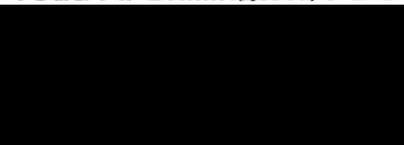
Your Name Norman D. Weber

Address Box 203 City Wishner

State NE Zip Code 68791 Telephone 

Please send this completed form to:

Todd A. Shillington, PDC



Thank you for your help, and attention to detail.

SONS OF UNION VETERANS OF THE CIVIL WAR  
National Civil War Memorials Committee

SONS OF UNION VETERANS OF THE CIVIL WAR  
CIVIL WAR MEMORIAL FUND REQUEST

(FORM CWM #62)  
Requester Information

CAMP AND DEPARTMENT NAME: Camp Harrison 53-2 Nebraska  
(Please print or type)

ADDRESS: Box 203

CITY: Wisner

STATE: NE ZIP CODE: 68791

NAME OF CONTACT PERSON: Norman D Weber

ADDRESS: Box 203

CITY: Wisner

STATE: NE ZIP CODE: 68791

PHONE(S): [REDACTED] E-MAIL: \_\_\_\_\_

Memorial or Monument Information

NAME OF MEMORIAL: Wisner GAR

LOCATION: (Name and address of cemetery or other location description, such as, corner of 3<sup>rd</sup> and Lincoln Street) \_\_\_\_\_

Wisner Cemetery Block #4

WHEN WAS IT BUILT: to be built May 2006

WHO OWNS IT: City of Wisner

WHO IS FINANCIALLY RESPONSIBLE FOR IT: Camp Harrison S.U.V.C.W.

ARE MATCHING FUNDS AVAILABLE: yes FROM WHERE: Camp Harrison

ARE OTHER SOURCES OF FUNDS AVAILABLE: No FROM WHERE: \_\_\_\_\_

AMOUNT BEING REQUESTED: 250<sup>00</sup>

DESCRIBE WORK THAT THESE FUNDS ARE NEEDED FOR: (Be specific, use back if necessary)

<u>cement base</u>	<u>75<sup>00</sup></u>
<u>2 cement pillars (4ft tall)</u>	<u>70<sup>00</sup></u>
<u>1 cement platform</u>	<u>35<sup>00</sup></u>
<u>2 cement soldiers (2ft tall)</u>	<u>70<sup>00</sup></u>
<u>1 cement plaque (2x4)</u>	<u>100<sup>00</sup></u>
<u>with lettering GAR 1861-1865</u>	
<u>paint &amp; finish</u>	<u>50<sup>00</sup></u>

WHO EVALUATED THE NEED FOR THE WORK AND WHAT ARE THEIR QUALIFICATIONS: \_\_\_\_\_

Camp Harrison

WHO WILL DO THE WORK DESCRIBED AND WHAT ARE THEIR QUALIFICATIONS: \_\_\_\_\_

Duncan Ornaments

WHO WILL RECEIVE THE FUNDS IF GRANTED: Duncan Ornaments

Wisner NE 68791

