

18WIS

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. _____) (Please describe below) DUVCW (Tent Name & No. Clara Barton Tent No. 3 _____) Other: _____

Original Dedication Date 1930 _____ 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.

LocationThe Memorial is *currently* located at:

Street/Road address or site location Riverside Cemetery _____

City/Village Oshkosh _____ Township _____ County Winnebago _____

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 _____ Dept./Div. _____

Street Address _____

City _____ State _____ Zip Code _____

Contact Person _____ 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.) sand colored granite _____

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 = _____

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 5 foot Width 3.5 foot Depth 10 inches or Diameter _____
 Sculpture: Height _____ Width _____ Depth _____ 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.

 IN LOVING TRIBUTE TO ALL UNION VETERANS WHO SO LOYALLY SERVED GOD
 AND THEIR COUNTRY IN THE GREAT CONFLICT 1861-1865
 ERECTED BY
 Clara Barton Tent No.3
 Daughters of Union Veterans
 OF THE CIVIL WAR
 1930

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

condition is extremely good

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 5/31/2007
Your Name Kim J. Holtemes
Address W2570 Archer Ave City Pine River
State WI Zip Code 54965 Telephone [REDACTED]

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



IN LOVING TRIBUTE
TO ALL UNION VETERANS WHO
SO LOYALLY SERVED GOD AND
THEIR COUNTRY IN THE GREAT
CONFLICT - 1861 - 1865

ERECTED BY
CLARA BARTON TENT NO. 3,
DAUGHTERS OF UNION VETERANS
OF THE CIVIL WAR

1930