

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

(FORM CWM #62)

Requester Information

CAMP AND DEPARTMENT NAME: GETTYSBURG CAMP #12 (PA DEST.)  
(Please print or type)

ADDRESS: PO Box 3176

CITY: GETTYSBURG

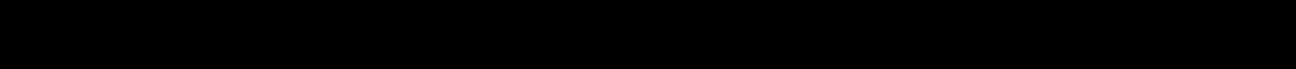
STATE: PA ZIP CODE: 17325

NAME OF CONTACT PERSON: CHARLES E. KUHN JR, PDC (JVC-IN-C)

ADDRESS: 464 LACE MEADE DR

CITY: EAST BETHUN

STATE: PA ZIP CODE: 17316

PHONE(S): 

Memorial or Monument Information

NAME OF MEMORIAL: 11<sup>TH</sup> MASS. INF. MONUMENT (MN200)

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

SICKLES AVE & EMMITSBURG RD.

WHEN WAS IT BUILT: I THINK LATE 1800'S

WHO OWNS IT: IN TRUST W/ NPS

WHO IS FINANCIALLY RESPONSIBLE FOR IT: POSSIBLY NPS BUT THIS IS QUESTIONABLE

ARE MATCHING FUNDS AVAILABLE: No FROM WHERE: \_\_\_\_\_

ARE OTHER SOURCES OF FUNDS AVAILABLE: YES FROM WHERE: REGIONAL HEADQUARTERS  
NPS & FRIENDS OF NPS

AMOUNT BEING REQUESTED: \$500<sup>00</sup>

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

<u>MAINTENANCE HOLES</u>	<u>400<sup>00</sup></u>
<u>MODELING OF CLAY MOCK UPS</u>	<u>2000<sup>00</sup></u>
<u>REPLICATION OF ARM</u>	<u>20000<sup>00</sup></u>
<u>REPAIR PEDISTAL</u>	<u>3000<sup>00</sup></u>
<u>REPLICATION OF SWORD</u>	<u>2000<sup>00</sup></u>
<u>INTALATION OF SWORDS</u>	<u>1000<sup>00</sup></u>
<u>MATERIALS</u>	<u>3000<sup>00</sup></u>
	<u>Total 31,400<sup>00</sup></u>

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

N.P.S.

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

1/2 NPS PERSONNEL

WHO WILL RECEIVE THE FUNDS IF GRANTED: NPS (GETTYSBURG)