

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

Type of Memorial (check all applicable)

Monument with Sculpture without Sculpture with Cannon standalone Cannon
 Historical Marker Plaque Other (flag pole, G.A.R. buildings, stained glass windows, etc.)

Affiliation

GAR MOLLUS SUVCW WRC ASUVCW
 LGAR DUVCW Other

If known, record name and number of post, camp, corps, auxiliary, tent, circle or appropriate information of other groups:

Original Dedication Date 18 June 2014 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 Historic SanduskyHouse, 757 Sandusky Drive, Lynchburg, VA, 24502
 GPS Coordinates 37.380204 N / -79.196607 W
 City/Village &/or Township Lynchburg
 County N/A State Virginia Zip Code 24502

The front of the Memorial faces: North South East West

Government Body, Agency, or Individual Owner

Name Placed by Taylor-Wilson Camp #10 with permission of the Historic Site and its Board of Directors (the Camp did not surrender ownership)
 Dept./Div. Dept of the Chesapeake
 Street Address _____
 City _____ State _____ Zip Code _____
 Contact Person Mark R. Day Telephone (540) 797-7754 ext _____

Is Memorial on the National Register of Historic Places Yes No ID # if known _____

For Monuments with/without sculpture:**Physical Details**

Material of Monument or base under a Sculpture or Cannon = Stone Concrete Metal Other
 If known, name specific material (color of granite, marble, etc.) _____
 Material of the Sculpture Stone Concrete Metal Other Is it hollow or solid? _____
 If known, name specific material (color of granite, marble, etc.) _____

For Historic Marker or Plaque:

Material of Plaque or Historical Marker / Tablet = Granite Base with Bronze Plaque

For Cannons with/without monument:

Material of Cannon = _____ Bronze _____ Iron Type of Cannon (if known) _____ Rifled _____ YES _____ NO

Markings: Muzzle _____ Base Ring/Breech _____

Left Trunion _____ Right Trunion _____

Is inert ammunnition a part of the Memorial? _____ Yes _____ No

[For camp/department monuments officer's use: Cannon on list of known ordnance] _____ Yes _____ No

For Other Memorials: (flag pole, G.A.R. buildings, stained glass windows, etc.)

What best describes the memorial

Materials of the Memorial

Complete for All Memorials

Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points

7 inches _____ Height 22.5 inches _____ Width 16 inches _____ Depth or _____ Diameter

For Memorials with multiple Sculptures, please record this information on a separate sheet of paper for each statue (service, pose, etc) 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

Please attach legible photographs of all text &/or Record the text in the space below. Please use the addendum – narrative sheet if necessary.

This Marker is dedicated to the memory of the Union Soldiers who numbered around a hundred, most of them mortally wounded, who after the Battle of Lynchburg June 17 - 18, 1864 , were under the care of Drs. John J Terrell and Edward A. Craighill at Sandusky's barn, which stood to the Northwest of the main house

18 June 2014
Erected by the Taylor-Wilson Camp #10
Sons of Union Veterans of the Civil War

See Attached Photo

[REDACTED]

[REDACTED]

[REDACTED]

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to the memory of the Union soldiers,
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18 JUNE 2014
ERECTED BY THE TAYLOR-WILSON CAMP #10
SONS OF UNION VETERANS OF THE CIVIL WAR

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CIVIL WAR MEMORIAL ASSESSMENT FORM
ADDENDUM – NARRATIVE

[Generally used to record the text of monuments, but may be used for any other useful information, such as if the monument has been moved or if you have information about the day of dedication. May repeat use of page as often as necessary.]

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City/Village and/or Township Lynchburg

County N/A State Virginia Zip Code 24502

TEXT

[Large empty rectangular box for text entry]

Inspector's Name [Signature]
ADDENDUM FORM CWM #61 >This form may be photocopied.<

Date 10 May 2021
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