PAGE 1 OF 4

FORM CWM #61

NATIONAL ORGANIZATION

SONS OF UNION VETERANS OF THE CIVIL WAR

CIVIL WAR MEMORIAL ASSESSMENT FORM

 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 Osculpture Monument with Osculpture Historical Marker Plaque
Affiliation VG.A.R. (Post Name & No. E. D. kittow Post 602
Original Dedication Date Please consult any/all newspaper archives for a local paper's article that would have information on the <i>first</i> 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 Grant Park City/Village Township County Township
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 Cty of Galwa Dept./Div. Building Dept Street Address 312 1/2 N. Mark STREET City Galwa State 1/4 Zip Code 61036 Contact Person DOFF STEWART Telephone (815) 777-1050
Contact Person DOFF STEWART Telephone (815) 777-1050
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?" Solid	
	Material of Plaque or Historical Marker / Tablet =	
	Material of Cannon = $\sqrt{\text{Bronze}}$ Iron - Consult known Ordnance Listing to confirm Markings on muzzle = $\frac{\text{FAwcelf}}{\text{Reston}} + \frac{\text{Consult known Ordnance Listing to confirm Markings on Left Trunion}}{\text{Markings on Left Trunion}} \times \frac{\text{Right Trunion}}{\text{Right Trunion}} \times \frac{\text{Right Trunion}}{\text{If so, describe}}$ Is inert ammunition a part of the Memorial? $\frac{\text{NO}}{\text{Months of the Memorial}}$	Patent.
	Approximate Dimensions (indicate unit of measure) - taken from tallest / widest points Monument or Base: Height 8 Width 12 Depth 12 or Diameter Sculpture: Height 7 Width 3 Depth 2 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	
west/	Record the text (indicate any separation if on different sides) Please use additional sheet if necessary. FRONT - GRANT, OUR CITIEN SOUTH - SHROH, VICKSBURG, Chattanaga, Spote, I would, Petersburg Appoint to X North - Palo ALTO, Monterey, Molina Del Rey, Chaputepie, Beliant, Fort	Done Isun
EAST /	REAR - Relief Sculpture of Surrender at Appearation.	
	CANNON PLAQUE- FIRST Retted Common fined in combet in partle America,	
	Environmental Setting	
	(The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.) Type of Location	
9 "	Cemetery ✓ Park — Plaza/Courtyard "Town Square" — Post Office — School Municipal Building — State Capitol Other: Courthouse — College Campus — Traffic Circle — Library —	

The second of the second secon	urban (residential, an / Metropolitan	near city)
Immediate Locale (check as many as may apply) Industrial Commercial Street/Roadside within 20 feet Tree Covered (over the control of the co	ors)	
Condition Information		
Structural Condition (check as many as may apply) The following section applies to Monuments with Sculpture, and Morincluding the base for Monuments with Cannon. Instability in the s by a number of factors. Indicators may be obvious or subtle. V base.	culpture and its base	can be detected
	Sculpture	Base
If hollow, is the internal support unstable/exposed?		
(look for signs of exterior rust) Any evidence of structural instability? (look for cracked joints, missing mortar or caulking or plant growth) Any broken or missing parts? (look for elements (i.e., sword, musket, hands, arms, etc missing due to vandalism, fluctuating weather conditions, etc.) Any cracks, splits, breaks or holes?		
(also look for signs of uneven stress & weakness in the material)	2.	
Black crusting White crusting Etched, pitted, or otherwise corroded (on metal) Metallic staining (run-off from copper, iron, etc.) Organic growth (moss, algae, lichen or vines) Chalky or powdery stone Granular eroding of stone Spalling of stone (surface splitting off) Droppings (bird, animal, insect remains) Other (e.g., spray paint graffiti) - Please describe	Sculpture	Base
Does water collect in recessed areas of the Memorial?	/esNo	Unable to tell

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). STATUE OF GENERAL GRANT W. In Mounted Blakely Current to Left OF Memorial?
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 /-/7-20/0
Your Name Gray Caster Address 1408 26 STREET City Rockston State 12 Zip Code 6108 Telephone
State _/_ Zip Code _6/108 Telephone
Please send this completed form to:
Kevin P. Tucker, PDC, Chair
Thank you for your help, and attention to detail.

"GRANT OUR CITIZEN" STATUE Galeva, IL



MIBST NAPOLEON 12 Pdr Galeva, 12

