

NATIONAL ORGANIZATION
SONS OF UNION VETERANS OF THE CIVIL WAR

CIVIL WAR MEMORIAL ASSESSMENT FORM

PLEASE:

1. Type or print, using a ball-point pen, when filling out this form. Legibility is critical.
2. 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
 Other (flag pole, G.A.R. buildings, stained glass windows, etc.)

Affiliation

- G.A.R. (Post Name & No. Luke Mayfield Post No. 516) _____ Luke M M.O.L.L.U.S
 SUVCW (Camp Name & No. _____) _____ (Please describe below)
 WRC (Corps Name & No. _____)
 ASUVCW (Aux Name & No. _____)
 DUVCW (Tent Name & No. _____)
 LGAR (Circle Name & No. _____)
 Other _____

Original Dedication Date 5-30-1896 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 Girard Cemetery
City/Village Girard Township Girard County Macoupin
State Illinois.

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 Village of Girard
Dept./Div. Cemeteries
Street Address 1010 W. North Street City _____
Girard State IL Zip Code 62640 Contact Person _____
Debra Burnett Telephone () 217-627-3441

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.) tan granite

SUVCW -- CIVIL WAR

Material of the Sculpture = Stone Concrete Metal Undetermined
If known, name specific material (color of granite, marble, etc.) white concrete
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? No If so, describe _____

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

Monument or Base: Height 20 FT Width 10 FT Depth 10 FT or Diameter _____
Sculpture: Height 7 FT Width 3 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.

With cheers for the liv ing and tears for the dead, we erect this monument to the memory of the heroes who fought the battles which
decided forever that this union of states is a nation of free men.

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) .

large pillar with concrete figure of infantry soldier in greatcoat at parade rest. Maintained in exceptional condition is if brand-new.

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 1-7-2012

Your Name Greg carter PCC

Address 1601 S. 24th Street Apt. 407

City Quincy

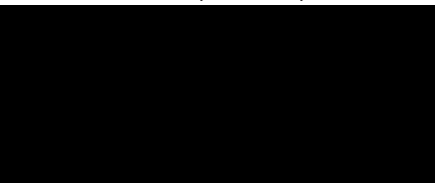
State IL Zip Code 62301

Telephone ([REDACTED])

What Order or Organization is submitter a member of? SUVCW & MOLLUS

Please send this completed form to

Walt Busch, PDC, Chair



Thank you for your help, and attention to detail. SONS OF UNION V

CIVIL WAR VETERANS OF THE National Civil War Memorials Committee

