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

Type of Memor	•		•	with Conn	an standal	ana Cannan
With Sculpture _		Other (	without Sculpture with Cannon Other ( flag pole, G.A.R. buildings, staine			one Cannon
nistorical Marke	rPlaque	Other (	nag pole, G	A.R. buildings,	stained glass wil	ndows, etc.)
Affiliation						
	MOLLUS	SUVCW		WRC	ASUVCW	
LGAR		✓ Other			7.00 000	
If known, record name ar	nd number of post, o	camp, corps, aux	kiliary, tent, cir	cle or appropriate i	nformation of other ເ	groups:
Logan Museum, State Histo	rical Soc & Logan Atte	endance Center				
Original Dedication	<b>Date</b> 2014		Please c	onsult anv/all news	enaner archives for a	local naner's article
that would have informati	on on the <i>first</i> dedic	cation ceremony	and/or other f	acts on the memor	ial. Please submit a	copy of your findings
with full identification of the						
Location						
The Memorial is cu	•					
Street/Road addres	ss or site locati	on General John				
1613 Edith St			_ GPS Cod	ordinates <u> N37.76</u>	2199, W89.341682	
City/Village &/or To	ownship Murphys	boro				
County Jackson			_ State <u>⊩</u>		Zip Code	e <u>62966</u>
The front of the Me	emorial faces: _	North	_ South _	_ East <u>✓</u> W	est	
Government Body	y, Agency, or	Individual C	Owner			
Name Same as above	,, ,					
Dept./Div						
Street Address						
					Zip Code	
Contact Person UN	K					
			_ ·	· /		
Is Memorial on the	National Regis	ster of Histor	ric Places	Yes 🗸 N	lo ID # if known	1
	3		_			
Ear Manumanta u	م کریم ماکانیم/ ماکان					
For Monuments w	ith/without so	cuipture:				
Physical Details	or bass under a C	Soulatura or Ca	unnon =	Otana Oanana	ta Matal	Other
Material of Monument of Known, name specific	or pase under a S c material (color c	ocuipture or Ca of granite, mark	nnion =;	Sione Concre	ie ivietai	_Ouier
n known, name specili	c material (COIOF C	n granne, mark	ле, etc.)			
Material of the Sculptu				Other Is i	t hollow or solid?	
If known, name specific						

FORM GWM	1#01						F	AGE ≈
For Histo	oric Marker or Plaqu	 e:						
Material of	Plaque or Historical Marke	er / Tablet = Me	etal pole with zin	c/aluminum cast marke	r			
For Canı	nons with/without m	onument:						
Material of	Cannon = Bronze	Iron Ty	pe of Cannor	n (if known)		Rifled	YES	NO.
Markings: I	Muzzle n munition a part of the Mem		Bas	se Ring/Breech				
[For camp/	/department monuments of	fficer's use: Car	nnon on list o	of known ordnance	]Ye	esN	0	
For Othe	er Memorials: (flag pol	e, G.A.R. buil	dings, stain	ed glass windows	s, etc.)			
What bes	t describes the memoria	l						
Materials	of the Memorial							
_	ete for All Memori mate Dimensions (inc	als		en from tallest / wic				
7 ft	Height <sup>2.5 ft</sup>	Width 4 in	nch	Depth or	[	Diameter		
	ials with multiple Sculptures, <sub>l</sub> to this form. Please describe	the "pose" of eac	ch statue and a					
Marking	s/Inscriptions (on ston	e-work / metal-	work of mon	ument, base, sculp	ture)			
Maker or F	abricator mark / name? If	so, give name 8	& location fou	und				
	ach legible photographs of heet if necessary.	all text &/or Re	cord the text	in the space below	v. Please	use the ad	ldendum –	
See Photo								

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Environmental Setting (The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.)	
Type of Location  Cemetery Park Plaza/Courtyard "Town Square" Post Office School Municipal Building State Capitol Courthouse College Campus Traffic Circle Library Other: Museum	
General Vicinity Rural (low population, open land) Suburban (residential, near city) Town Urban / Metropolitan	
Immediate Locale (check as many as may apply)         Industrial Commercial Street/Roadside within 20 feet Tree Covered (overhanging branches)         Protected from the elements (canopy or enclosure, indoors) Protected from the public (fence or other barrier)	1
Any other significant environmental factor	
[To detail the condition of a monument used the addendum form for Monument's Condition]	
Supplemental Background Information In addition to your on-site survey, any additional information you can provide on the described Memorial will be welcome Please label each account with its source (author, title, publisher, date, pages). Topics include any reference to the point listed on this questionnaire, plus any previous conservation treatments - or efforts to raise money for treatment.  Addendums attached to this electronic file are the <i>Monument's Condition</i> and the <i>Narrative</i> forms. Only the <i>Monument Condition</i> form is required if you are requesting grant money using form CWM-62 SUVCW Memorial Grant Application Form and Instructions.  Thank you.  Inspector Identification  Date of On-site Survey  2/18/2020	nts nt's
Your Name Walter Busch	_
Address State MO Zip Code 63026	_
Telephone State 2.p See	_
Are you a member of the Allied Orders of the G.A.R.? If so, which one?  SUVCW MO -Grant Camp 68	_
Please send this completed form to:  Walt Busch, PDC, Chair 1240 Konert Valley Dr. Fenton. MO 63026	
Thank you for your help, and attention to detail.	

Sons of Union Veterans of the Civil War - Civil War Memorials Committee.





