FORM CWM #61 Page 1 of 4

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
Affiliation
G.A.R. (Post Name & No) 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 6-12-1902 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 <i>currently</i> located at: Street/Road address or site location Stark County Courthouse
City/Village Toulon Township Toulon County Stark
State Illinois .
The front of the Memorial faces: X North South East West Government Body, Agency, or Individual Owner (of private cemetery that Memorial is located in)
Name County of Stark
Dept./Div. Public works
Street Address 130 W. Jefferson Street City
Toulon State L Zip Code 61483 Contact Person
<u>James Dison</u> <u>Telephone () 309-286-2541</u>
If the Memorial has been moved, please list former location(s).

FORM CWM #61 Page 2 of 4

Physical Details

Material of Monument or base under a Sculpture or Cannon =Stone XX Concrete Metal Undetermined If known name specific material (color of granite, marble, etc.)							
SUVCW CIVIL WAR							
Material of the Sculpture = Ston If known, name specific material (colo If the Sculpture is of metal, is it solid	r of granite, marble, etc.)						
Material of Plaque or Historical Mark	xer / Tablet =						
Material of Cannon =Bronze × Markings on muzzle = CANNON MELTED Markings on Left Trunion_ Is inert ammunition a part of the Me	_Iron - Consult known Ordnand	e Listing to confirm					
Markings on Left Trunion	Right Trunion						
Is inert ammunition a part of the Me	morial? If so, describe _						
Approximate Dimensions (indicate Monument or Base: Height \ Sculpture: Height Width	Width Depth c	or Diameter					
For Memorials with multiple Sculptur for each statue and attach to this for weapons/implements involved (in care	m. Please describe the "pose"	of each statue and any					
Markings/Inscriptions (on stone-w Maker or Fabricator mark / name? If s							
The "Dedication Text" is formed: ×	_ cut into material raised u	o from material face					
Record the text (indicate any separation In memory of the soldiers and sailors of Stark County.	on if on different sides) Please u	se additional sheet if necessary.					
Environmental Setting (The general vicinity and immediate locale sur Type of Location	rounding a memorial can play a major r	ole in its overall condition.)					
-	Del	DI (O)					
Cemetery	Park Post Office	Plaza/Courtyard School					
"Town Square" Municipal Building	State Capitol	Other:					
× Courthouse	College Campus	Outer					
Traffic Circle	Library						

FORM CWM #61 Page 3 of 4

General Vicinity Rural (low population, open land) Town	Suburban (residen Urban / Metropolita	
Immediate Locale (check as many as may apply) Industrial _X Commercial X	doors)	
Condition Information		
Structural Condition (check as many as may apply)		
The following section applies to Monuments with Sculpture, and including the base for Monuments with Cannon. Instability in the number of factors. Indicators may be obvious or subtle. Visually	sculpture and its base can	be detected by a
If hollow, is the internal support unstable/exposed?	Sculpture	Base
(Look for signs of exterior rust)		
Any evidence of structural instability? (Look for cracked joints, missing mortar or caulking or plant gr	rowth)	
Any broken or missing parts? (Look for elements (i.e., sword, musket, hands, arms, etc m due to vandalism, fluctuating weather conditions, etc.)	<u></u>	
Any cracks, splits, breaks or holes? (Also look for signs of uneven stress & weakness in the mater	ial)	
Surface Appearance (check as many as may apply)		
	Sculpture	Base
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		
Does water collect in recessed areas of the Memorial?	_ Yes <u>×</u> No Unable	e to tell

FORM CWM #61 Page 4 of 4

Surface	Coating
---------	---------

Does there appear to be a coating? Yes \times 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? X 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). 25 FT pillar featuring relief carvings of soldiers and sailors with a GAR emblem on the north face. The pillar is topped with an infantry						
soldier standing at parade rest in greatcoat. Monument formerly included a 3" ordnance rifle. This cannon was melted down following the						
attack on Pearl Harbor. Only the bases remain. Three benches flank the remainder of the memorial. The Memorial is in otherwise						
excellent condition.						

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 Su	rvey 10-8-2011			
Your Name Gregory M	M. Carter PCC			
Address 1601 S. 24th S	Street Apt. 407		City Quincy	
State <u>□</u> Zip (Code <u>62301</u>	Telephone (
What Order or Ord	anization is submitter a	member of?	SUVCW & MOLLUS	

Please send this completed form to



Thank you for your help, and attention to detail. Sons of Union V

CIVIL WAR VETERANS OF THE National Civil War Memorials Committee