FORM CWM #61

>This form may be photocopied.<

PAGE 1

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

Type of Memorial (check all applicable) Monumentwith Sculpture without Sculpture with Cannon standalone Standalone Cannon Standalone Sta			
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: GAR James B. Sample Post Duvew Sarah J. Thompson Tent 28			
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 River front Park			
The Memorial is currently located at: Street/Road address or site location Aff Ave. H City/Village &/or Township Fort Madison County Lee State Towa Zip Code 52627			
The front of the Memorial faces:North South East West			
Government Body, Agency, or Individual Owner			
Name City of Fort Madison Dept./Div. Parts and Recreation			
Street Address 811 Ave E			
Street Address SIL Ave E City Fort Madison State Fowa Zip Code 52627 Contact Person Telephone (319) 372-7700 ext			
Is Memorial on the National Register of Historic PlacesYesV\(\infty\) ID # if known			
Is Memorial on the National Register of Flictorio Flagos			
For Monuments with/without sculpture: Physical Details Material of Monument or base under a Sculpture or Cannon =Stone Concrete MetalOther If known, name specific material (color of granite, marble, etc.)			
Material of the SculptureStone Concrete MetalOther Is it hollow or solid?If known, name specific material (color of granite, marble, etc.)			
>This form may be photocopied.<			

FORM CWM #61		Page 2
For Historic Marker or Plaque:		
Material of Plaque or Historical Marker / Tablet =	nze	
For Cannons with/without monument:		
Material of Cannon = BronzeIron Type of Ca	annon (if known)	RifledYES NO
Markings: Muzzle	Base Ring/Breech Right Trunion	
Markings: Muzzle Left Trunion Yes Yes	No	
[For camp/department monuments officer's use: Cannon or	list of known ordnance] _	YesNo
For Other Memorials: (flag pole, G.A.R. buildings,		
What best describes the memorial		
Materials of the Memorial		
Complete for All Memorials Approximate Dimensions (indicate unit of measure)	- taken from tallest / wides	st points
/6 Height		
For Memorials with multiple Sculptures, please record this inform	ation on a congrate sheet of r	paper for each statue (service, pose, etc
Markings/Inscriptions (on stone-work / metal-work of	f monument, base, sculptu	re)
Maker or Fabricator mark / name? If so, give name & local	ion found	
Please attach legible photographs of all text &/or Record t narrative sheet if necessary.		Please use the addendum –
See attached		

Environmental Setting (The general vicinity and immediate locale surrounding a memorial can play a major role in its overall condition.)
Type of Location Cemetery School Traffic Circle Park Plaza/Courtyard Town Square" Courthouse Courthouse Courthouse Town Square Courthouse Courthouse Courthouse College Campus
General Vicinity Rural (low population, open land) Suburban (residential, near city) Town Urban / Metropolitan
Immediate Locale (check as many as may apply) IndustrialCommercialStreet/Roadside within 20 feetTree Covered (overhanging branches) Protected from the elements (canopy or enclosure, indoors)Protected from the public (fence or other barrier)
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 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. Addendums attached to this electronic file are the Monument's Condition and the Narrative forms. Only the Monument's Condition form is required if you are requesting grant money using form CWM-62 SUVCW Memorial Grant Application Form and Instructions. Thank you.
Inspector Identification Your Name Tom Gaard Address IGS41 Vallequiem Lane City Clive State Towa Zip Code 50325
Are you a member of the Allied Orders of the G.A.R.? If so, which one? SUUCW Grenville Dodge Camp #75
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.

Department of Iowa - Civil War Monuments

Lee County - Fort Madison

Boulder and PlaqueThis large boulder with GAR plaque is in Riverfront Park near the cannons and flags. It was dedicated in 1930. Photos taken 8/3/10.



