

1890 Veterans Schedule



State: _____ County: _____ City/Township: _____ Call Number/URL: _____
Enumeration District: _____ Sheet Number: _____ Enumeration Date: _____

Line Number	House No.	Family No.	Names of surviving Soldiers, Sailors, Marines and Widows	Rank	Company	Names of regiment or vessel	Date of Enlistment			Date of Discharge			Length of Service			Post Office Address	Disability incurred
							Day	Month	Year	Day	Month	Year	Day	Month	Year		
	1	2	3	4	5	6	7	8	9	10	11						

Notes: _____