

ORDER FOR COPIES OF VETERANS RECORDS

Please see Page 1 of this form for instructions.

Date Received (month)

1997 JUL 17 11 00 AM

647537

(16)

1. FILE TO BE SEARCHED (Check one box ONLY)		<input checked="" type="checkbox"/> PENSION (Give last, first, and middle names)		<input type="checkbox"/> BOUNTY-LAND WARRANT APPLICATION (Service before 1856 only)		<input type="checkbox"/> MILITARY	
REQUIRED MINIMUM IDENTIFICATION OF VETERAN Items 2, 3, 4, 5 (and 6 when applicable) MUST be completed or your order cannot be serviced.		2 VETERAN (Give last, first, and middle names) <i>Weir, David</i>		3 BRANCH OF SERVICE IN WHICH HE SERVED <input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Marine Corps		6 IF SERVICE WAS CIVIL WAR <input type="checkbox"/> Union <input type="checkbox"/> Confederate	
4 STATE FROM WHICH HE SERVED <i>South Carolina</i>		5 WAR IN WHICH, OR DATES BETWEEN WHICH, HE SERVED <i>Revolutionary</i>		PLEASE PROVIDE THE FOLLOWING INFORMATION, IF KNOWN			
7 UNIT IN WHICH HE SERVED (Name of regiment or number, company, etc. name of ship) <i>Wounded at Cowpens, SC. According to Family History</i>		8 IF SERVICE WAS ARMY, ARM IN WHICH HE SERVED <input type="checkbox"/> Infantry <input type="checkbox"/> Cavalry <input type="checkbox"/> Artillery		9 KIND OF SERVICE <input type="checkbox"/> Volunteers <input type="checkbox"/> Regulars		12 PLACE(S) VETERAN LIVED AFTER SERVICE <i>Fairfield Co., S.C. possibly Chester Co., S.C.</i>	
10 PENSION/BOUNTY-LAND FILE NO. <i>86</i>		11 IF VETERAN LIVED IN A HOME FOR SOLDIERS, GIVE LOCATION (City & State)		12 PLACE(S) VETERAN LIVED AFTER SERVICE (continued)			
13 DATE OF BIRTH <i>12/25/1730</i>		14 PLACE OF BIRTH (City, County, State, etc.) <i>Irish, Ireland</i>		17 NAME OF WIDOW OR OTHER CLAIMANT <i>JANE (TAM) McChurkin Weir</i>		15 DATE OF DEATH <i>1/15/1821</i>	
16 PLACE OF DEATH (City, County, State, etc.) <i>Fairfield or Chester, S.C.</i>		Do NOT write below - Space is for our reply to you					

YES We have located the file you requested above. The cost is \$5.00 for the file. *only one*

We have copied all or part of the file for you. Make your check or money order for \$5.00, payable to NATIONAL ARCHIVES TRUST FUND (NNMS). Do NOT send cash. Return your payment AND this invoice in the enclosed envelope. If the return envelope is missing, send your payment AND this invoice to: Cashier (NJ), National Archives Trust Fund, 8th and Pennsylvania Avenue, NW, Washington, DC 20408. We must have this invoice to match your payment with your copies. WE WILL HOLD THESE COPIES AWAITING RECEIPT OF PAYMENT FOR 30 DAYS ONLY, FROM DATE STAMPED BELOW.

NO We were unable to locate the file you requested above.

REQUIRED MINIMUM IDENTIFICATION OF VETERAN WAS NOT PROVIDED. Please complete items 2 (give full name), 3, 4, 5, and 6, and resubmit your order.

A SEARCH WAS MADE BUT THE FILE YOU REQUESTED ABOVE WAS NOT FOUND. When we do not find a record for a veteran, this does not mean that he did not serve. You may be able to obtain information about him from the archives of the State from which he served.

See attached forms, leaflets, or information sheets.

NNMS USE ONLY	SEARCHER <i>11/27</i>	DA <i>7/16/97</i>	647537	THIS IS YOUR MAILING LABEL. Print your name (Last, First MI) and address within the block below. PRESS FIRMLY - the information MUST appear on all copies.
	FILE DESIGNATION <i>Weir, David</i> <i>R-11286</i>	NAME (Last, first, middle) <i>Stanley, Richard H</i>		
NATIONAL ARCHIVES TRUST FUND BOARD NATF Form 80 (7-84)			CITY STATE <i>2 ANNAN, KS 64205</i>	(Zip Code)

MAILROOM