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Abstract
The story of Clark Gardner, his double amputation, and his pension records are still surrounded by two other clouds of ambiguity concerning his neighbor and friend, Edward A. Rich, and Gardner’s wife. Rich relayed information to a special examiner about the nature of Gardner’s injuries. He claimed to know Gardner before the war began, revealing that Gardner had running sores on his right leg prior to enlisting in the 10th New York Heavy Artillery. This made the amputation he received in 1879 a result of this pre-existing condition instead of the sickness Gardner claimed to acquire from Staten Island. [excerpt]

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Clark Gardner: The Curious Case of Mr. Rich and Mrs. Gardner

April 11, 2014

By: Brianna Kirk, ’15

The story of Clark Gardner, his double amputation, and his pension records are still surrounded by two other clouds of ambiguity concerning his neighbor and friend, Edward A. Rich, and Gardner’s wife. Rich relayed information to a special examiner about the nature of Gardner’s injuries. He claimed to know Gardner before the war began, revealing that Gardner had running sores on his right leg prior to enlisting in the 10th New York Heavy Artillery. This made the amputation he received in 1879 a result of this pre-existing condition instead of the sickness Gardner claimed to acquire from Staten Island.

The flare-up of Gardner’s leg sores during his enlistment, then, based on the assumption that he did have a condition prior to the war, were not direct results of his time in the army. That being the case, his pension requests were undoubtedly fraudulent. However, Mr. Rich’s testimony had problems of its own. The man’s aging memory had failed him. Rich discovered in his confession to the examiners that he had in fact not known Gardner before the war. This crucial piece of information was the cause of Gardner’s pension investigation, and quickly discounted the old man’s claims as fake.

However, Gardner’s wife complicated the picture when the pension examiners determined that she had been married before, ironically to another Clark Gardner, who died during the war. To make matters even murkier, she applied for two pension increases in both of their names, attempting to receive double the amount of payment as a double widower. This tipped off the examiners that some type of fraud was involved, especially given the history of Gardner’s unexplained wounds that led to amputation. Further inquiries into the odd
coincidence revealed little; the investigations simply tapered off, and Clark Gardner’s true story remained unsolved.

As promised in the first piece on Gardner, I traveled to the National Archives and pulled Gardner’s Compiled Service Record with the hope that some answer to this historical mystery might be uncovered. The documents in his record did not provide much new information. It indicated when he was on furlough, the month and year he was transferred to the Veteran Reserve Corps (October 1863), and when he was discharged from service. The most interesting document found in Gardner’s record was a hospital note that stated that he was diagnosed with rheumatism and had gangrene in his left arm, forcing it to be amputated on August 28, 1864.

Though I was saddened by the fact that I could not find a more clear-cut and definitive answer to the origin of Gardner’s wounds, I was greatly relieved by the information in his file. When I first began my research in 2013, I expected to solve the mystery shrouding his past, but the fact that I was unable to reach concrete conclusions makes Clark Gardner more interesting and his story more compelling. The lack of evidence gives me and other scholars room to question, theorize, and investigate. Historical detective work is so engaging and it is the process, not necessarily the outcome, that is rewarding. The mystery behind Clark Gardner, his wounds, and his amputations remains, but the methods used to work towards solving the puzzle have been more fulfilling than an answer ever could be.

Sources:


Images:
Clark A. Gardner, Compiled Service Records, Record Group 94, National Archives, Washington, D.C.