

Adams, E. M.
Barlow
ACT OF OCT. 24, 1887.
(For Those Already Enrolled)
No. 2693
SOLDIER'S PENS
1896.
Name E. M. Adams
County Barlow
Disability Wounded &
Amount, \$100.00
By E. M. Adams
RICHARD JOHNSON,
Secretary Executive D
WARRANT HANDED TO
341 A
Geo. W. Harrison, State Printer, Atlanta.
No data

Adams, E. M.
Barlow
ACT OF OCT. 24, 1887.
(For Those Already Enrolled)
No. 314
INVALID
SOLDIER'S PENS
1897.
Name E. M. Adams
County Barlow
Disability Total
Amount, \$100.00
217
RICHARD JOHNSON,
Commissioner of P
WARRANT HANDED TO
att. gms
Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears E. M. Adams of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 17 day of March 1845; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States and served as a private in Company E, of the 1st Regiment of Georgia Volunteers, Wofford's Brigade; that whilst engaged in such military service in the State of Georgia, on the day of 1864, he was wounded, injured or diseased as follows:

Contracted Chloria which became chronic, also Rheumatism, and almost totally blind from disease contracted in the army, and is totally unable to do any amount of labor.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Barlow County been allowed a pension of One hundred dollars, for the year 1896.

Sworn to and subscribed before me, this, 18th day of Jan, 1896, E. M. Adams mark

NOTE.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks, Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 18th day of Jan, 1896.



G. W. Hendricks
Ordinary Barlow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears E. M. Adams of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 17 day of March 1845; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States and served as a private in Company E, of the 1st Regiment of Georgia Volunteers, Wofford's Brigade; that whilst engaged in such military service in the State of Georgia, on the day of 1864, he was wounded, injured or diseased as follows:

He contracted corn which resulted in chronic earache and loss of eye sight—almost completely rendering him totally incompetent to perform manual labor.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Barlow County been allowed an invalid pension of One hundred Dollars, for the year 1896.

Sworn to and subscribed before me, this, 18th day of Feb, 1897, E. M. Adams mark

NOTE.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks, Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 18th day of Feb, 1897.



G. W. Hendricks
Ordinary Barlow County.

Sworn to and subscribed before me, this, the 18th day of Jan'y 1896. } E. M. Adams
G. W. Hendricks mark
Notary—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Barlow County.

I, G. W. Hendricks, Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 18th day of Jan'y 1896.



G. W. Hendricks
Ordinary Barlow County.

Sworn to and subscribed before me, this, the 5th day of Feb'y 1897. } E. M. Adams
G. W. Hendricks mark
Notary—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Barlow County.

I, G. W. Hendricks, Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 5th day of Feb'y 1897.



G. W. Hendricks
Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, E. M. Adams, hereby authorize G. W. Hendricks of Barlowville Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by check.

at Barlowville Ga.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th day of Jan'y 1898.

E. M. Adams [L. S.]
mark

Executed in presence of

B. F. Bitch
W. J. King

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, E. M. Adams, hereby authorize G. W. Hendricks of Barlowville Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by check.

at Barlowville Ga.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 7th day of Jan'y 1898.

E. M. Adams [L. S.]
mark

Executed in presence of

J. A. Pomeroy

ACT OF 18 OCT. 1862.
(For Those Already Enrolled.)

No. 2388

INVALID

SOLDIER'S PENSION.

1898.

Name E. M. Adams
County Barlow
Disability Totaly
Amount, \$ 100.00
2/18 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

4/14

W. J. King

COLE SECTION 150.
(For Those Already Enrolled.)

No. 2388

INVALID

SOLDIER'S PENSION.

1899.

Name E. M. Adams
County Barlow
Disability Deceased
Amount, \$ 100.00
4/14 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

4/14

W. J. King

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears E. M. Adams of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 17 day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company D, of Baker's Regt. of Bakers Volunteers, Woods's Brigade; that whilst engaged in such military service in the State of Georgia, on the 15 day of January 1865, he was wounded, injured or diseased as follows:

From exposure in the army, he contracted
deafness and hoarseness, which rendered
him almost totally blind. That he is helpless
and totally unable to do any amount of
any kind of labor

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 24th, 1898. I have heretofore under said law as a resident of Barlow county been allowed an invalid pension of one hundred Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 15 day of January 1898. E. M. Adams
G. W. Hendricks my

NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15 day of January 1898.
G. W. Hendricks
Ordinary Barlow County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears E. M. Adams of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company D, of Baker's Regt. of Bakers Volunteers, Woods's Brigade; that whilst engaged in such military service in the State of Georgia, on the 15 day of January 1865, he was wounded, injured or diseased as follows:

Contracted deafness, has heart disease
and almost totally blind. Caused from
exposure while in the service

Deponent makes application for the pension to which he is entitled for the year ending October 24th, 1899. I have heretofore under said law as a resident of Barlow County been allowed an invalid pension of one hundred Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 15 day of January 1899. E. M. Adams
G. W. Hendricks my

NOTE—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15 day of January 1899.
G. W. Hendricks
Ordinary Barlow County.



Adams, E. M.
Barlow
ACT OF OCT. 24, 1887.
(For Those Already Enrolled.)
No. 2388
INVALID
SOLDIER'S PENSION
1898.
Name E. M. Adams
County Barlow
Disability Deafness
Amount, \$ 100.00
2/18
RICHARD JOHNSON,
Commissioner of Pensions
WARRANT HANDLED TO
4/14
GEO. W. HARRISON, STATE PRINTER, ATLANTA

Adams, E. M.
Barlow
OUR SECTION USE.
(For Those Already Enrolled.)
No. 2388
INVALID
SOLDIER'S PENSION
1899.
Name E. M. Adams
County Barlow
Disability Deafness
Amount, \$ 100.00
2/14
RICHARD JOHNSON,
Commissioner of Pensions
WARRANT HANDLED TO
G. W. Hendricks
GEO. W. HARRISON, STATE PRINTER, ATLANTA

STATE OF GEORGIA.

Danbury County.

I, John J. Williams Ordinary of said County,
do certify that I am well acquainted with E. M. Adams the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this 7th
day of January 1898.

Ordinary Garino County.

STATE OF GEORGIA

Garlin County.

I, W. W. Henderson Ordinary of said County,
do certify that I am well acquainted with E. M. Adams the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this 17th
day of June, 1899.

Ordinary Barlow County

STATE OF GEORGIA.

Galton County.

I, E. M. Adams hereby authorize
E. W. Richards of Cortezville Ga
to receive and receipt for the pension paid hereon and request that he remit same to
E. M. Adams by check
at Adamsville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9 day of Nov 1900.

Executed in presence of

James P.

STATE OF GEORGIA

County.

I, G. M. Adams hereby authorize George
W. Hendricks of Cartersville Ga
to receive and receipt for the pension paid hereon and request that he remit same to
by check
at Cartersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 12
day of January 1901 his

Executed in presence of

Rt Woodall

Name E. M. Adams
County Barlow
Disability Trinity doubled
Amount, \$ 160.⁰⁰
Warrant issued Feb 19 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Funding

co. W. Harrison, State Printer, Atlanta.

No. 2165

Adams, Emerita M.
Pastor, Court

(For Those Already Enrolled.)

No. 1166

DISABLED

**SOLDIER'S PENSION.
1901.**

Name E. M. Adams
County Barren
Disability Chronic D.D.
Amount, \$ 100.00

1/29 1901.

JOHN W. LINDSEY.

Commissioner of Penitents,

VARRANT HANDED TO

Kivikunth

W. Harrison, State Printer, Atlanta.

Adams, E. M.
Barton Co.
CODE SECTION 186
(For Those Already En-
No. 368
INVALID
SOLDIER'S PEN-
1900
Name E. M. Adams
County Barton
Disability Total \$100.00
Amount, \$100.00
Warrant issued July
JOHN W. LINDSEY
Commissioner
WARRANT HANDED TO
J. W. Lindsey
No data

Adams, E. M.
Barton Co.
CODE SECTION 186
(For Those Already En-
No. 1166
DISABLED
SOLDIER'S PEN-
1901.
Name E. M. Adams
County Barton
Disability Disease
Amount, \$100.00
1129
JOHN W. LINDSEY
Commissioner
WARRANT HANDED TO
J. W. Lindsey
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barton County.

Personally appears E. M. Adams of Barton

County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State and County, and has resided therein continuously ever since the 17 day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company C, of the 1st Regiment of Ga Militia, Wofford's Brigade; that whilst engaged in such military service in the State of Ga, on the day of 1864, he was wounded, injured or diseased as follows:

Contracted chronic dysentery which made him almost blind.

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1900. I have heretofore under said law as a resident of Barton County been allowed an invalid pension of One hundred Dollars, for the year 1899.

Sworn to and subscribed before me, this, 19th day of Jan 1900, POST OFFICE, W. H. Adams

NOTE.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barton County.

I, Geo. W. Lindricks, Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 9 day of Jan 1900.

Ordinary Barton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barton County.

Personally appears E. M. Adams of Barton

County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 17 day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company C, of the 1st Regiment of Ga Militia, Wofford's Brigade; that whilst engaged in such military service in the State of Ga, on the day of 1864, he was wounded, injured or diseased as follows:

He contracted shingles, which became chronic, and heart disease, and so affected his eyes that he is almost blind.

Deponent makes application for the pension to which he is entitled for year ending October 20th, 1901. I have heretofore under said law as a resident of Barton County, been allowed an invalid pension of One hundred Dollars, for the year 1900.

Sworn to and subscribed before me, this the 19th day of Jan 1901, POST OFFICE, W. H. Adams

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barton County.

I, Geo. W. Lindricks, Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 19th day of Jan 1901.

Ordinary Barton County.

Sworn to and subscribed before me, this, the 19th day of Nov 1900. } E. M. Adams
COUNTY OF Barlow POST OFFICE Adamsville Ga

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 9 day of July 1900.
Ordinary Barlow County.



Sworn to and subscribed before me, this the 19th day of July 1901. } E. M. Adams
COUNTY OF Barlow POST OFFICE Adamsville Ga

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with E. M. Adams the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 19th day of July 1901.
Ordinary Barlow County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, E. M. Adams hereby authorize G. W. Hendricks of Adamsville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Adamsville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 4th day of July 1902.
E. M. Adams [L. S.]

Executed in presence of

J. A. Brown

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, E. M. Adams hereby authorize G. W. Hendricks of Barlow to receive and receipt for the pension paid hereon and request that he remit same to E. M. Adams by check at Adamsville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11th day of July 1903.
E. M. Adams [L. S.]

Executed in presence of

J. A. Brown

(FOR THOSE ALREADY ENROLLED.)

No. 1887

DISABLED

SOLDIER'S PENSION

1902.

Name E. M. Adams
County Barlow
Co. 1st Regiment Batavia
Disability Alcoholism & Nerv
Amount, \$ 117.10

No. 1131 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT FORWARDED TO

Ordinary

Adamsville Ga

(FOR THOSE ALREADY ENROLLED.)

No. 1913

DISABLED

SOLDIER'S PENSION

1903.

Name E. M. Adams
County Barlow
Co. 1st Regiment Batavia
Disability Alcoholism & Nerv
Amount, \$ 100

No. 710 1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT FORWARDED TO

Ordinary

Adamsville Ga

COOK SECTION FOR
(FOR THOSE ALREADY ENROLLED.)

No. 1887

DISABLED

**SOLDIER'S PENSION
1902.**

Name *E. M. Adams*
County *Barlow*
Co. *A* Regiment *Baker*
Disability *discharge & hand*
Amount, \$ *100.00*

No. 1131

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

JOHN W. LINDSEY, ALABAMA PRINTER, ALABAMA.

COOK SECTION FOR
(FOR THOSE ALREADY ENROLLED.)

No. 1913

DISABLED

**SOLDIER'S PENSION
1903.**

Name *E. M. Adams*
County *Barlow*
Co. *A* Regiment *Baker*
Disability *discharge & hand*
Amount, \$ *100.00*

No. 1131

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

JOHN W. LINDSEY, ALABAMA PRINTER, ALABAMA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *E. M. Adams* of *Barlow* County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of *March* 1848; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *Baker* Regiment of *Volunteers*, *Wofford's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *10th* day of *July* 1864, he was wounded, injured or diseased as follows: *lost left eye which became chronic producing heat & pain and also causing him to lose his sight*

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. I have heretofore, under said law, as a resident of *Barlow* County, been allowed an invalid pension of *one hundred* Dollars, for the year 1901.

Sworn to and subscribed before me, this the *14th* day of *July* 1902, *E. M. Adams* Post-office *Barlow*

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *E. M. Adams* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *14th* day of *July* 1902. *G. W. Hendricks* Ordinary *Barlow* County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *E. M. Adams* of *Barlow* County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the *17th* day of *March* 1848; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *Baker* Regiment of *Volunteers*, *Wofford's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *10th* day of *July* 1864, he was wounded, injured or diseased as follows: *lost left eye which became chronic producing heat & pain and also causing him to lose his sight*

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of *Barlow* County, been allowed an invalid pension of *one hundred* Dollars, for the year 1902.

Sworn to and subscribed before me, this the *14th* day of *July* 1903, *E. M. Adams* Post-office *Barlow*

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *E. M. Adams* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *14th* day of *July* 1903. *G. W. Hendricks* Ordinary *Barlow* County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

One hundred Dollars, for the year 1901.
Sworn to and subscribed before me, this the E. M. Adams
day of July 1902. Post-office Monticello
G. W. Hendricks Ordinary of said County.

STATE OF GEORGIA,

Barlow County, }
I, G. W. Hendricks Ordinary of said County,
do certify that I am well acquainted with E. M. Adams
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.

Given under my official signature and seal, this 4th
day of July 1902.

G. W. Hendricks
Ordinary Barlow County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

DO NOT WRITE

ending October 26th, 1903. I have heretofore, under said law, as a resident of
Barlow County, been allowed an invalid pension of
One hundred Dollars, for the year 1902.

Sworn to and subscribed before me, this the E. M. Adams
day of July 1903. Post-office Monticello
G. W. Hendricks Ordinary of said County.

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain
particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County, }
I, G. W. Hendricks Ordinary of said County,
do certify that I am well acquainted with E. M. Adams
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.

Given under my official signature and seal, this 10th
day of July 1903.

G. W. Hendricks
Ordinary Barlow County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County, }
I, E. M. Adams hereby authorize
G. W. Hendricks of Cartersville Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
G. W. Hendricks by Cartersville Ga
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16
day of July 1904.

E. M. Adams [L. S.]
Executed in presence of
G. J. Bray Notary

DISABLED
SOLDIER'S PENSION
1904.

Name E. M. Adams
County Barlow
Co. 1 Regiment Barlow
Disability Boily disabled
Amount, \$ 100

1904.

FEB 9

JOHN W. LINDSEY,
Comptroller of Pension.

WARRANT HANDED TO
G. W. Hendricks

Geo. W. Harrison, State Printer, ATLANTA.

No data

Audited Feb. 17 1891.

W. M. Hendricks
COMPTROLLER GENERAL.

1891.

Maimed Soldiers.

Voucher No. 915

Amount \$ 100

Paid to E. M. Adams

for Boily disabled

Barlow

July 18 1891.

Included in warrant No. _____
issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, ATLANTA.

Geo. W. Harrison, State Printer, Atlanta.

'ORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Dartm County

Personally appears E. M. Adams of Boston
County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said State, and has resided therein continuously ever since the 17th day of March 1845; that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served as a private in Company A, of Bowling Regiment
of 64 Mississippi Volunteers 1862 1863 1864 1865 1866 1867 1868 1869 1870 1871 1872 1873 1874 1875 1876 1877 1878 1879 1880 1881 1882 1883 1884 1885 1886 1887 1888 1889 1890 1891 1892 1893 1894 1895 1896 1897 1898 1899 1900 1901 1902 1903 1904 1905 1906 1907 1908 1909 1910 1911 1912 1913 1914 1915 1916 1917 1918 1919 1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 1962 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040 2041 2042 2043 2044 2045 2046 2047 2048 2049 2050 2051 2052 2053 2054 2055 2056 2057 2058 2059 2060 2061 2062 2063 2064 2065 2066 2067 2068 2069 2070 2071 2072 2073 2074 2075 2076 2077 2078 2079 2080 2081 2082 2083 2084 2085 2086 2087 2088 2089 2090 2091 2092 2093 2094 2095 2096 2097 2098 2099 2100 2101 2102 2103 2104 2105 2106 2107 2108 2109 2110 2111 2112 2113 2114 2115 2116 2117 2118 2119 2120 2121 2122 2123 2124 2125 2126 2127 2128 2129 2130 2131 2132 2133 2134 2135 2136 2137 2138 2139 2140 2141 2142 2143 2144 2145 2146 2147 2148 2149 2150 2151 2152 2153 2154 2155 2156 2157 2158 2159 2160 2161 2162 2163 2164 2165 2166 2167 2168 2169 2170 2171 2172 2173 2174 2175 2176 2177 2178 2179 2180 2181 2182 2183 2184 2185 2186 2187 2188 2189 2190 2191 2192 2193 2194 2195 2196 2197 2198 2199 2200 2201 2202 2203 2204 2205 2206 2207 2208 2209 2210 2211 2212 2213 2214 2215 2216 2217 2218 2219 2220 2221 2222 2223 2224 2225 2226 2227 2228 2229 2230 2231 2232 2233 2234 2235 2236 2237 2238 2239 2240 2241 2242 2243 2244 2245 2246 2247 2248 2249 2250 2251</

186 , he was wounded, injured or diseased as follows:
 Has heart disease, can't have to leave from
 exposure in the Army, and has been almost
 totally blind from the effect of said disease
 contracted in the service

ending October 31st 1900
One hundred
for the pension to which he is entitled for the year
have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1900.

Sworn to and subscribed before me, this the 16 day of Jan 1904.
Geo W. Hendricks, Clerkman
E. M. O'Day
Post-office, Montrose

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA, }
Barlow County. }

I, G. W. Hendricks Ordinary of said County,
do certify that I am well acquainted with E. M. Adams
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.

Given under my official signature and seal, this 14th
day of June, 1904.

Ordinary Wm. W. W. W. County Wm. W. W.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1904.

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

Mr. Wm. H. Burton of the County of Burton having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for total disability by Wm. H. Harrison He is entitled to receive the sum of One Hundred Dollars for such disability, the same being the allowance due for the year ending October 24, 1891.

The Treasurer will pay the same and hold his receipt on this voucher and return same to Executive Department for warrant.

By the Governor,

SEC'Y EXECUTIVE DEPARTMENT

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia

per above voucher, this 16 of 1891

Exposure in the Army, and have been almost
totally blind from the effect of said exposure
Contracted in the service

for the pension to which he is entitled for the year
ending October 24, 1887, under said law, as a resident of
Barlow County, been allowed an invalid pension of
One hundred Dollars, for the year 1903.

Sworn to and subscribed before me, this 16th day of Jan. 1904. E. M. Adams
Post-office Monticello

Notary - State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Barlow County.

I, E. W. Hendricks, Ordinary of said County,
do certify that I am well acquainted with E. M. Adams
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.

Given under my official signature and seal, this 16th day of Jan. 1904.

Ordinary E. W. Hendricks County.

NOTE - Fill all blanks and of Company and Regiment.
NOTE - All vouchers and affidavits must bear date after January 1, 1904.

of having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
He is entitled to receive the sum of One hundred Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

The Treasurer will pay the same and hold his receipt on this voucher and return same to
Executive Department for warrant.

By the Governor.

SECY EXECUTIVE DEPARTMENT.

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

per above voucher, this 10th of Jan. 1891.

Audited

1889.

COMPTROLLER-GENERAL

Barlow
Maimed Soldiers.

Voucher No. 2399

Amount, \$ 50.

Paid to E. M. Adams

For Disability from
Disease

June 20 / 1889.

Included in Warrant No.
issued to Treasurer.

1889

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office.

H. J. Capen

Audited

18

COMPTROLLER-GENERAL

Barlow

Maimed Soldiers.

Voucher No. 1110

Amount \$ 100.

Paid to E. M. Adams

For Totally disabled
from Disease

July 13 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office.

A. M. Frouth

For Disability from
Disease
June 20/ 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office.

H. J. Cooper

COMPTROLLER-GENERAL

Paid to O. M. Adams
For Totally disabled
from Disease
July 13 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office.

A. M. Founte

No. 2399

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. June 20 1889

Mr. E. M. Adams of the County
of Bartow having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Dec. 24, 1888, and the same having been allowed for

Disability from Disease
He is entitled to receive the sum of Fifty 00/ Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

The Treasurer will pay the same and hold his receipt on this voucher, and return same to
Executive Department for warrant.

By the Governor

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Dollars,

1889.

per above voucher, this
of June
Twenty Dollars
atly of Feb
E. M. Adams

No. 1110

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga., July 13 1890

Mr. E. M. Adams of the County
of Bartow having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for

Totally disabled by Disease
He is entitled to receive the sum of One Hundred 00/ Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890

The Treasurer will pay the same and hold his receipt on this voucher, and return same
to Executive Department for warrant.

By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ 100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred 00/ Dollars,
per above voucher, this 13 of July 1890.

E. M. Adams, by his atty.
in fact, A. M. Founte.

W. S. Hunt Nov 20

money between Mr. Henry D. Capers and
myself concerning the amount of which
he paid me and I have never seen
Mr. Capers since he paid me ~~the \$300~~
the \$300 and I paid his way to Atlanta
out of that which only left me \$38.50
I understand that he is at Fort. Graham Ala
I wrote to him 2 weeks ago and have
not received any answer yet.

Yours Truly
E. M. Adams

on or about the 20th of June 1889 Fifty Dollars of
Pension, Moorey allowed the said E. M. Adams
for disabilities and the said Henry D. Capers
claims that he only collected Forty Dollars
and claimed Ten Dollars of that after which
he would not charge anything only what
ever his expenses would be and the said
E. M. Adams paid the said Henry D. Capers
the expense for going to Atlanta Ga. & return
out of said Forty Dollars which was \$1.00
I am and subscribed me
This July 23rd 1889

W. S. Hunt N. D. J. P.

E. M. Adams
Mark

Dear Sir

Adairsville, Ga. July 27th 1889

Dr. King will send you a state-
ment with regard to the charges
filed in your office against me
by E. M. Adams.

- There is no doubt but that I
have no shadow of wrong attaching
to me, other than a desire to
serve one who is evidently in
- Caple of appreciating a kindness -

- The funds belonging to Adams, I
have taken from deposit in a sealed
envelope, and turned over to Dr. King
who will communicate with you

Very respectfully

H. D. Capers

W. S. Hunt
Adairsville

Adairsville, Ga.
July 30th 1889

Mr. W. H. Harrison
Atlanta, Ga.

Dear Sir,

Col. H. D. Capers
has come up and settled
with me in full, in
regard to my Pension
claim

Yours Truly
E. M. Adams

by C. W. Adams.

- There is no doubt but that I have no shadow of wrong attaching to me, other than a desire to serve one who is evidently in
- Caple of appreciating a kindness -

The funds belonging to Adams, I have taken from deposit in a sealed envelope, and turned over to Mr King who will communicate with you

Very respectfully

H. J. Capers

Y
H
Capt H. J. Harrison
Atlanta

Mr. W. H. Harrison
Atlanta Ga

Dear Sir,

Col H. J. Capers has come up and settled with me in full, in regard to my Pension claim

Yours Truly
C. W. Adams



Atlanta, Ga July 26 1889

W. H. Harrison,
Clerk Ex Dept

Sir -
Atlanta Ga

I have your letter handed to me in the lobby of the House of Representatives by a colored messenger. Why, I presume does your best day -

In this I refer to the fact that Mr C. W. Adams of Adamsville, in the County of



Atlanta, Ga

Benton, Georgia has filed an affidavit with you, in which he charges that I have appropriated to my own use \$20 Ga fund of \$50. which I receipted for at your office - I immediately went to your office, & informed you that I would file a counter affidavit and other affidavits showing that said Adams was guilty of a crime not recognized by the Code of Georgia, in any

Clerk Ex Delt

Atlanta Ga

Sir -

I have your letter handed
to me in the lobby of the House
of Representatives by a
Colored messenger. I have
Presume does your best day -

In this I refer to the fact
that Mr C. W. Adams of
Adairville, in the County of

DeKalb, Georgia has filed an
affidavit with you, in which
he charges that I have appro-
priated to my own use \$20
of a fund of \$50. which I
accepted for at your office -
I immediately went to your
Office, & informed you that
I would file a Counter affidavit
and other affidavits. showing
that said Adams was
guilty of a crime not recognized
by the Code of Georgia, in any

FOLSON'S
EUROPEAN HOTEL
L. B. Folson, Proprietor.
READING ROOM
RESTAURANT.
Nos 14, 16, 18, 20, Marietta St.
Nearly opposite Artesian Well
Atlanta, Ga.

Statutory enactment, but which
should be recognized by gentlemen
who are worthy to be called Veterans
of Georgia, viz. the Crime of
ingratitude and Misrepresentation.

As to your threat to publish me,
I pay no attention to it whatever.
You are but the servant
of the Governor of this State
and if after my notice, now
served on you, by myself in
person, you make any such
publication, I simply ask that
you publish my Counter Affidavit
and that of the best men I
know of in the Community where
Adams lives - I will leave for

FOLSON'S
EUROPEAN HOTEL
L. B. Folson, Proprietor.
READING ROOM
RESTAURANT.
Nos 14, 16, 18, 20, Marietta St.
Nearly opposite Artesian Well
Atlanta, Ga.

Adairville tomorrow, where
I live, vote and have for
years been a Citizen. Not
under your threat, in 24
hours to pay Adams, but
within 24 hours to present
these Counter Affidavits
- Daring your threats -

Respectfully

Henry L. Rogers

Statutory Enactment, but which
should be recognized by gentlemen
who are worthy to be called Veterans
of Georgia. ~~is~~ the Crime of
ingratitude and Misrepresentation

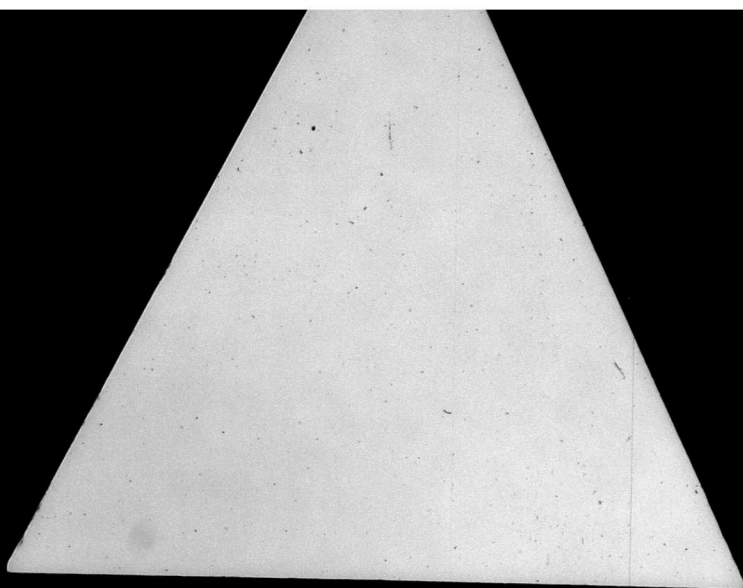
As to your threat to publish me,
I pay no attention to it whatever.

— You are but the servant
of the Governor of this State.
— and if after my notice, now
served on you by myself in
person, you make any such
publication, I simply ask that
you publish my Counter Affidavit
and that of the best men I
know of in the community where
Adams lives. — I will leave for

Adamsville tomorrow, where
I live, vote and have for
years been a citizen. not
under your threat, in 24
hours to pay Adams, but
within 24 hours to present
three Counter Affidavits
— Damn your threats. —

Respectfully

Henry J. Rogers



Adams, Fanny A.
Benton County (Mo)

OK 30411
No.

Widow's Pension

UNDER ACT 1910.

County Benton

Name Fanny A. Adams

Widow of Wm. Adams

A. Traylor Bat-
of Artillery.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/30/10

*U. Trajane Bat-
of Artillery.*

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/30/10

Application for Pension by a Widow Under Act of 1910.--Questions for Applicant.

STATE OF GEORGIA.

Bartow County.

Personally before me comes *Fanny A. Adams* of said State and County, and after duly sworn, on oath she desires to apply for a pension allowed under the Act of 1910, and she submits to me the following questions to wit:

1. What is your name, and where do you reside? *Fanny A. Adams*
2. How long and since when have you been a continuing resident in the State of Georgia? *Since 1899*
3. When, where and to whose service were you married? *1899, Bartow Co. Fla.*
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) *1863, 4th Regiment, Georgia Militia*
5. When and where did the Commands of your husband surrender or discharge from the army? *April 1865, Appomattox*
6. Was your husband personally present at the time of the surrender or discharge of this Command? *Yes*
7. If not, clearly where he was? *He was present*
8. Where was his Command when he left?
- a. For what cause did he leave his command?
- b. By whose authority did he leave his Command?
- c. For how long was he granted leave of absence?
- d. What was his physical condition when he left his Command?
- e. What effort did he make to return to his command?
- f. In what way was he prevented from going back to Command?
- h. Was he captured by the enemy at any time?
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- j. When and where did your husband die? *1906, Bartow Co. Fla.*
- k. Were you residing together when he died? *I was*
- l. If not, how long had you resided apart?
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) *None*
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) *None*
11. What property of any description of any value have you now? *None*
- Give list and cash value?
12. What are your annual earnings or income and their value? *Nothing*
13. Have you heretofore been paid a pension by the State? *No*
- If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the

11/30/10 day of *Nov*, 19*10*

Ordinary.

of *Bartow* County.

Fanny A. Adams
mark

Widow's Pension

UNDER ACT 1910.

County

Bartow

Name

Fanny A. Adams

Widow of

U. Trajane Bat-

of

Artillery.

J. W. LINDSEY,

Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/30/10

1. If so, when and where captured and where a prisoner, and when and for what cause released?

2. When and where did your husband die? 1906, in Barlow Co. Ga

3. Were you residing together when he died? Yes

4. If not, how long had you resided apart?

5. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) None

6. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None

7. What property of any description of any value have you now? None

8. What are your annual earnings or income and their value? nothing

9. Have you heretofore been paid a pension by the State? no

If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 21st day of Apr 1910 G. W. Hendricks Ordinary of Barlow County.

Fanny A. Adams mark

Questions for the Witnesses as to Service of Husband and Marriage.

STATE OF GEORGIA,

Barlow County,

Personally before me comes Jas. Evans who after being duly sworn true answers to make the following questions, answers as follows:

1. What is your name and where do you reside? Jas. Evans

2. How long and since when have you known Fanny A. Adams applicant?

3. How long and since when has she continuously resided in this State? (Give date.) I have known her about seven years

4. When and to whom was she married? How do you know?

5. How long and since when did you know William Adams her husband?

6. When and where did William Adams die?

7. Where the Applicant and her husband living together as husband and wife at the date of his death? yes

8. If not, how long did they live apart before his death? 11

Were they divorced?

9. When, where and in what Company and Regiment did William Adams enlist?

1863, Barlow County, Ga. A Company of 100th Battery, Artillery

10. Were you a member of the same Company? I was not

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? About two years

12. When, and where did his Command surrender, and was discharged? April 9th 1865 Appomattox Va.

13. Were you personally present when it was surrendered? yes If not where were you I was present and how long you there?

14. Was the husband of applicant personally present at surrender? yes If not where was he? yes When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all this?

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command?

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the 21st day of Apr 1910 Jas. Evans Ordinary of Barlow County.

G. W. Hendricks mark

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Barlow County,

Personally before me comes Fanny A. Adams who on oath says that they are freeholders of said County and that they know

of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows.

Personal property \$

Notes and accounts due \$

Total \$

Schedule (B).

We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:

Personal property \$

Money, Notes and accounts \$

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

Acres of land worth \$

Horses and Mules \$

Cows and Hogs \$

Other property \$

Income and earnings \$

Total Value of all property and effects \$

Sworn and subscribed before me this the 21st day of Apr 1910 G. W. Hendricks Ordinary of Barlow County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County,

I G. W. Hendricks Ordinary of said County do certify that I know Fanny A. Adams the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov., 1908.

That I also know Jas. Evans the witness who swears to the service of husband, and W. A. My who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they are, truthfully, trustworthy, and their statements are entitled to full faith and credit. and I know he has nothing at all

That the Tax Returns for 1910 Returned for Tax is for 1908 \$ for 1910 \$ for 1910 \$

Sworn under my hand and official seal of office this 21st day of Apr 1910

SEAL. G. W. Hendricks Ordinary, Barlow County.

(SEAL.)

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. All affidavits must be made before the Ordinary.

4. Only widows who married prior to first January 1870, are entitled.

5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some person, or by general reputation.

5. How long and since when did you know William Adams her husband? I have known him since 1868 when he was

6. When and where did William Adams the husband of Applicant die? do not know exact date

7. Where the Applicant and her husband living together as husband and wife at the date of his death? yes

8. If not, how long did they live apart before his death? 11

Were they divorced?

9. When, where and in what Company and Regiment did William Adams enlist? 1863, Bartow County, Ga. A Company of Major's Battery of Artillery

10. Were you a member of the same Company? I was yes

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? about two years

12. When, and where did his Command surrender, and was discharged? April 9th 1866 Appomattox Va.

13. Were you personally present when it was surrendered? yes If not where were you I was present and how did you come there?

14. Was the husband of applicant personally present at surrender? yes If not where was he? yes When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all this?

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command?

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this 21st day of Sep 1930 James H. Evans Ordinary, G.W. Hendricks of Bartow County.

Total \$

Schedule (B).
We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:
Personal property \$
Money, Notes and accounts \$

Schedule (C).
We also know what property she has now in her possession, use and control to wit:
Acres of land worth \$
Horses and Mules \$
Cows and Hogs \$
Other property \$
Income and earnings \$
Total Value of all property and effects \$

Sworn and subscribed before me this 19 day of Ordinary, County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Bartow County.
I G.W. Hendricks Ordinary of said County do certify that, I know Mrs. Fannie A. Adams the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908.
That I also know James H. Evans the witness who swears to the service of husband, and W. H. H. H. who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they are, are truthful, trustworthy, and their statements are entitled to full faith and credit. and I know he has nothing to do
That the Tax Returns Returned for Tax is for 1908 \$ for 1910 \$
Sworn under my hand and official seal of office this 21st day of Nov 1930
SEAL. G.W. Hendricks Ordinary, Bartow County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

TO PAY:-
1930. \$ 127
Cig. & C. Tax. \$
TOTAL.

For Bartow County

1932

Application for Pension Due Deceased Pensioner (UNDER ACT 1904)

(To pay expenses of last illness and funeral)

B. M. Gamis Ordinary
For Mrs. Fannie Adams

Date of Death Oct 13 1932
Amount \$ 127

Approved and ordered paid

R. M. LAWRENCE,
Approved and ordered paid.

DIRECTOR
VETERANS SERVICE OFFICE

PAID TO ORDINARY ON THIS CLAIM:

DATE 1935 FUND FROM WHICH PAID

1935 1930 1932

TOTAL 127.00

Cartersville, Ga., October, 17, 1932

Mr Geo. D. Adams

Cartersville, Ga.

IN ACCOUNT WITH

Cummings-Long-Owen, Inc.

Funeral Directors

104 West Main Street Quick Ambulance Service
PHONE 255

Casket	128 00
Embalming	15 00
Hearse Service	15 00
Total	158 00

Total amount of funeral expenses of

Mrs Fannie A. Adams

The above and foregoing account is rendered for funeral expenses for Mrs. Fannie Adams, who died with out owing sufficient property to pay this bill.

Cummings-Long-Owen, Inc.

Per. J. H. Hansen

Sworn to and subscribed before me this Oct. 17, 1932.

B. M. Gamis
Ordinary, Bartow County, Ga.

12. When, and where did his Command surrender, and was discharged? April 9th 1866 Appomattox Va.

13. Were you personally present when it was surrendered? Yes If not where were you? I was present and how did you come there?

14. Was the husband of applicant personally present at surrender? Yes If not where was he? Yes When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all this?

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command?

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the 21st day of Dec 1911 James H. Evans Ordinary, Barlow County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Barlow County.

I, Wm. Hendricks Ordinary of said County do certify that, I know Mrs. Fannie A. Adams the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov., 1908.

That I also know James Evans the witness who swears to the service of husband, and W. A. Muf who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all are truthful, trustworthy, and their statements are entitled to full faith and credit. and I know nothing of all

That the Tax Returns Returned for Tax is for 1908 \$ for 1910 \$

Sworn under my hand and official seal of office this 11th day of Nov 1911

SEAL. Wm. Hendricks Ordinary, Barlow County.

(SEAL)

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. All affidavits must be made before the Ordinary.

4. Only widows who married prior to first January 1870, are entitled.

5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

TO PAY-
1930. \$ 127
Cig. & C. Tax. \$
TOTAL.

For Barlow County

1932

Application for Pension
Due Deceased Pensioner
(UNDER AOT 1904)
(To pay expenses of last illness and funeral)

R. M. Gaines Ordinary

For Mrs. Fannie Adams

Date of Death Oct. 13 1932

Amount \$ 127

Approved and ordered paid

R. M. LAWRENCE,
APPROVED, Commissioner of Pensions.

Johnson
DIRECTOR
VETERANS SERVICE OFFICE

PAID TO ORDINARY ON THIS CLAIM:

DATE	FUND FROM WHICH PAID	AMOUNT
1935		127.00
1936		127.00
TOTAL		254.00

Cartersville, Ga., October, 17 1932.

Mr Geo. D. Adams

Cartersville, Ga.

IN ACCOUNT WITH

Cummings-Long-Owen, Inc.
Funeral Directors

104 West Main Street Quick Ambulance Service
PHONE 255.

Casket	128 00
Embalming	15 00
Hearse Service	15 00
Total	158 00

Total amount of funeral expenses of
Mrs Fannie A. Adams

The above and foregoing account is rendered for funeral expenses for Mrs. Fannie Adams, who died with out owning sufficient property to pay this bill.

Cummings-Long-Owen, Inc.
Per. J. P. Owens

Sworn to And subscribed before me this Oct. 17, 1932.

R. M. Gaines
Ordinary, Barlow County, Ga.

Received of R. M. Gaines, Ordinary of Barlow County, Georgia, One Hundred Twenty seven & no/100 (\$127.00) Dollars, to apply on funeral expenses Mrs. F. A. Adams--- from Pension Department.

This March 22, 1935

CUMMINGS, LONG, OWEN
Funeral Directors,

By J. P. Owens mjr.

A Certificate

STATE OF GEORGIA, County of Barlow

IN RE: Expenses last illness and funeral Mrs. F. Adams

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;
2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 8 day of August 1933.

(SEAL) R. M. Gaines Ordinary

(Ordinary will please complete and return immediately to A. L. Henson, Director, Veterans Service Office, State Capitol, Atlanta, Ga.)