

E.R.O.
1937
J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.
10.29-1919

Ordinary of said County, certify that I know
the person he represents himself to be and
is the witness swearing to the
duly sworn by me before signing the foregoing
their statements are entitled to full faith and
credence.
day of Oct 1919

Ordinary's Certificate

STATE OF GEORGIA,
Barlow COUNTY.
I, G. A. Allday, Ordinary of said County, certify that I know
the applicant, G. A. Allday, for pension is the person he represents himself to be and
resides in said county. That I also know the witness swearing to the
service; that they are both residents of said county and were duly sworn by me before signing the foregoing
affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and
credit. See Record from war department
Sworn under my hand and official seal of office this 7 day of Oct 1919
G. A. Allday Ordinary
of Barlow County.
(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses 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 give shall be the whole 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 of the county in which the applicant or witness resides and
must be certified by such Ordinary.

Application for Soldier's Pension Under Act 1910 Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,
Barlow COUNTY.
G. A. Allday of said State and County, hereby applies
for the pension provided by Act of 1910 as amended by Act of 1919, to Confederate Soldiers, and submits
his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to
make to the questions propounded, answers as follows, to-wit:
1. What is your name and where do you reside? G. A. Allday in Barlowville Ga
2. How long and since when have you been a continuous resident citizen of this State? I have
lived in Georgia for 21 years
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from
1861 to 1865? Confederate States Army
4. When and where, and to what Company and Regiment did you enlist? (Give the arm and class of
Service) 1861. 1st Georgia Cavalry Co. H. 8th Texas Cavalry
5. How long did you remain in the actual military service with said Company and Regiment? (Give
date of discharge) Until the end of the war April 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 26th 1865. Guntersville N.C. I think
7. Were you actually present with your command when it was surrendered or discharged? No
8. If you were not actually present, state specifically and clearly where you were. I was
in Camp Chase, Virginia
a. Where was your command when you left it? I was captured
I was captured
b. When did you leave the command? Just after Battle of Mansfield
c. For what cause did you leave? I was captured there
d. By whose authority did you leave? I was a prisoner
e. For how long was your leave granted? In what way? No
f. Why did you not return to your command after leave expired? Had no money
g. In what way were you prevented? I was in a prisoner
h. What effort did you make to return?
i. Were you captured during the war? Yes
j. If so, when and where? In what prison were you held and when were you released? The day
after the battle of Mansfield I was captured and was in prison
k. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed? No

Sworn to and subscribed before me, this the
7 day of Oct 1919
G. A. Allday Ordinary
of Barlow County.
(SEAL)

Confederate Soldier's Application Under Act 1910—As Amended by Act of 1919.

No. 100
County Barlow
Name G. A. Allday
Company A
Regiment 8th Texas Cavalry
Approved

J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.
10.29-1919

E.R.O.
1937
10.29-1919

Allday, C.H.
Barlow Co.
No. 10. 11/12/20
Confederate
Soldier's Application
Under Act 1910—As Amended by Act of 1919.
County Barlow
Name C.H. Allday
Company A
Regiment 8th Inf. Cavalry
Approved

E.P.O.
1937
J. W. LINDSEY,
Commissioner of Pensions.
Byd Printing Co. State Printer, Atlanta.
10.29-1919

- Where was your command when you left it? Franklin
a. He was captured
b. When did you leave the command? Just after Battle of Franklin
c. For what cause did you leave? He was captured there
d. By whose authority did you leave? He was a prisoner
e. For how long was your leave granted? In what way? 2
f. Why did you not return to your command after leave expired? was in prison
g. In what way were you prevented? He was in a prisoner prison
h. What effort did you make to return?
i. Were you captured during the war? yes
j. If so, when and where? In what prison were you held and when were you released? The day after the battle of Franklin he was captured
k. Are you drawing a pension of any amount from this State or the United States? no
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? no

Sworn to and subscribed before me, this the
10th day of Dec 1921
Geo H. Allday
Ordinary
of Barlow County
(SEAL)

STATE OF GEORGIA, Barlow County

I, Geo H. Allday, Ordinary of said County, do certify that I personally know Mrs C. H. Allday, the applicant, and that she is the lawful widow of C. H. Allday, and was on the Pension Roll of said Barlow County, and was paid a Pension from Barlow County for 19, and at the time of his death on the 1st day of August 1920, there was due to him and unpaid his Pension of One hundred Dollars from the State of Georgia, and I know W. C. Griffin, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 21st day of December, 1921.
(SEAL) Geo H. Allday Ordinary
County.

Allday, C.H.
Barlow Co.
No. 11/12/20

1920

Application for Pension Due
Deceased Soldier
(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY
Mrs. C. H. Allday
Widow of C. H. Allday
of Barlow County
Old or New new
Date of Death Aug 1st 1920

Approved and ordered paid 180
Oct 1/20 1920
J. W. LINDSEY,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval before making any payment, and then return it with your pay-roll for payment along in the Pension Office.

Geo H. Allday
Ordinary

GEORGIA, Barlow County.

I hereby authorize and constitute Geo H. Allday, of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1920 through my deceased husband, C. H. Allday, who was on the Pension Roll and paid from Barlow County for 1920.

Witness my hand this 21st day of December, 1921.

Attested before me:
W. C. Griffin
Mrs C. H. Allday

*Allday, C. H.
Barlow, C.
N*

1920

Application for Pension Due Deceased Soldier
(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY *C. H. Allday*
Widow of *C. H. Allday*
of *Barlow* County
Old or New *New*
Date of Death *Aug 14/18* 1920

Approved and ordered paid *1/2*
by *Jan 1920* 1920
1/2 *1/2* 1920
W. Lindberg
J. W. LINDBERG,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval before you pay out the money, and then return it to the Pension Office for permanent filing in the Pension Office.

*Barlow, C. H.
N*

GEORGIA, *Barlow* County.

I hereby authorize and constitute *W. C. Giffins* of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1920, through my deceased husband, *C. H. Allday*, who was on *the* Pension Roll and paid from *Barlow* County for 1920.

Witness my hand this *21* day of *December*, 1921.

Attested before me:
W. C. Giffins *not C. H. Allday*

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 3, 1901.

STATE OF GEORGIA, *Barlow* County

Personally before me comes Mrs. *Mrs. C. H. Allday* of said County, who after being duly sworn, on oath says that she is the widow of *C. H. Allday* who was duly enrolled as a *Service Soldier* Pensioner from the County of *Barlow* and was paid a Pension of *One Hundred* Dollars from *Barlow* County for 1920, and that the said *C. H. Allday* died in *Barlow* County on the *14* day of *Aug*, 1920, and at the time of his death a Pension of \$*100.00* was due him from *Barlow* County and unpaid for *1920-1920*.

Applicant further swears that she married the said *C. H. Allday* on the *10* day of *Dec*, 1896, in *Barlow* County and State of *Ga*, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this *21* day of *December*, 1921.
W. C. Giffins, Ordinary.
Barlow County. *Mrs. C. H. Allday* (L. S.)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, *Barlow* County

Personally before me comes *W. C. Giffins*, who on oath says that he knew *C. H. Allday* while in life and that he knows Mrs. *C. H. Allday*, the above applicant, that he knows that the said *C. H. Allday* and *C. H. Allday* were in due form of law married in the County of *Barlow* in the State of *Ga* on the *10* day of *Dec*, 1896, and that they resided together as husband and wife from date of marriage to the day of his death on the *14* day of *August*, 1920, and I know that she is his dependent widow.

Sworn to and subscribed before me this *21* day of *Dec*, 1921.
W. C. Giffins, Ordinary.
Barlow County. *W. C. Giffins*

INSTRUCTIONS:
1st. This form can be used by guardian, or minor children, where there is no widow.
2nd. The Ordinary must, in all cases, send certificate of marriage attached hereto, if marriage is not proven by suitable evidence for same. Such a certificate is entirely too bulky for use in any sort of pension paper.
3rd. Avoid the use of the enormously large form of marriage certificate in common usage throughout this State, suitable only for framing. This form is for widows of disabled soldiers who died after October 20th, and for widows and dependent children of Service soldiers who died after November 1st.
4th. The Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals attached, and that the facts when filled in are true.
5th. Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to make the payment.
6th. Return this application with your final settlement to the Pension Office.
7th. The widow shall pay-roll for the pension of her husband, against her name opposite his name thereon.
8th. The pension for only one year can be covered by one voucher. Each year's pension is a separate and distinct transaction and must be so treated. If widow of a "war" pensioner, and her husband is a separate and distinct transaction, she must make two yellow applications—one for each year. Attach a separate marriage license to each yellow blank.

paid to her.

Sworn to and subscribed before me this 9th day of December, 1921.
W. H. Anderson, Ordinary.
Bartow County. Mr. C. A. Allday (L. S.)
(SEAL)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Bartow County

Personally before me comes W. G. Griffin, who
on oath says that he knew C. A. Allday while in life
and that he knows Mrs. C. A. Allday, the
above applicant; that he knows that the said C. A. Allday
and C. A. Allday were in due form of law married in the County
of Bartow in the State of Ga on
the 10 day of Dec, 1926, and that they resided together
as husband and wife from date of marriage to the day of his death on the 14 day of
August, 1926, and I know that she is his dependent widow.

Sworn to and subscribed before me this 31 day of Dec, 1921.
W. H. Anderson, Ordinary.
Bartow County. W. G. Griffin
(SEAL)

INSTRUCTIONS:
1st. This form can be used by guardian, or minor children, where there is no widow.
2nd. The Ordinary must, in all cases, send certificate of marriage attached hereto, if marriage is not proven by wit-
ness.
3rd. Avoid the use of the enormously large form of marriage certificate in common vogue throughout this State, suit-
able only for framing, which a certificate is entirely too bulky for use in any sort of pension paper.
4th. This form is for widows of disabled soldiers who died after October 31st, and for widows and dependent children
of service soldiers who died after November 1st.
5th. The Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals
affixed, and that the back when folded, is filled in.
6th. Pay and be money on this application until it is approved in the Pension Office, and returned to you as your
authority to make the payment.
7th. Return this application with your final settlement to the Pension Office.
8th. The widow signs pay-roll for the pension of her husband, signing her name opposite his name thereon.
9th. The pension for only one year can be covered by one voucher. Each year's pension is a separate and distinct
transaction and must be so treated. If widow of a "new" pensioner who was due 1915 and 1916 pensions, she must make
two yellow applications—one for each year. Attach a separate marriage license to each yellow blank.

NAME: Allday, C. A.
(Charles) YEAR 1920 COUNTY Bartow.

WHEN AND WHERE BORN? A resident of Georgia 21 years.

ENLISTED WHEN AND WHERE? Sept. 10 or 25, 1861, Houston, Texas.

RANK:

COMPANY AND REGIMENT? Company A, 8th Texas Cavalry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? Sept. 8, 1864, Dickson County, Tenn.
Received at Camp Chase, Ohio, Sept. 17, 1864.

RELEASED: Paroled May 2, 1865, and received at Vicksburg, Miss.
for exchange May 12, 1865.

WHEN AND WHERE SURRENDERED? "I think, Command surrendered Apr. 26,
1865 at Greensboro, North Carolina."

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Camp Chase, Ohio prison.

DEED, WHEN AND WHERE?

BURIED:

WITNESSES: no witnesses, A war record attached.

mt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? Sept. 8, 1864, Dickson County, Tenn.
Received at Camp Chase, Ohio, Sept. 17, 1864.

RELEASED: Paroled May 2, 1865, and received at Vicksburg, Miss.
for exchange May 12, 1865.

WHEN AND WHERE SURRENDERED? "I think, Command surrendered Apr. 26,
1865 at Greensboro, North Carolina."

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Camp Chase, Ohio prison.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: no witnesses, A war record attached.

mt.

COUNTRY

Ordinary's Certificate

I, E. Gables, Ordinary of said County, do certify that I know Mrs. Mamie Kemler Allday the applicant for pension, that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J. W. Allday, the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy, and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 25 APRIL 1917.

SEAL OF ORDINARY

E. Gables Ordinary

(1917)

(SEAL OF ORDINARY)

of

1. Have any witnesses answered the *Ordinary* said case application in the following manner:
a. Yes
b. No
c. No answer
d. No response
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Additional affidavits may be attached if the Court in which the applicant or witness resides and must be certified by each *Ordinary* to be true and correct.
4. All affidavits must be made *in person* by the applicant or the Court in which the applicant or witness resides and must be certified by each *Ordinary* to be true and correct.
5. Fill out the last of the application carefully.
6. Do not take the application from any witness who is already receiving a pension.
7. Do not take the application from any witness who is already receiving a grant.

Widow's Application

Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendments of 1920 and 1937.

County Bartow
Name Mrs. Nannis Hamritter Allday
Widow of C. A. Allday
Date of Marriage Dec. 10, 1886
Date of Husband's Death Aug. 14, 1920
Company Co. A
8 Texas Cavalry
Regiment
Approved DEC 27 1937 193 A
L. H. Green William
Director.

Allday, Roy Arthur Homer (m)
 Bartow
 County

State Dept: Public Welfare,
Atlanta, Sept. 27, 1937.

Chas. A. Allday enlisted as a private in Co. A, 8th Regt. Texas Cavalry Sept. 25, 1861.

...Captured, Dickson County,
Tenn., Sept. 8, 1864. Paroled,
Camp Chase, O., May 2, 1865.
Exchanged May 12, 1865.

Director Confederate Records
Div.

JUL 24 1937

State Dept: Public Welfare,
Atlanta, Sept. 27, 1937.

Chas. A. Allday enlisted as a
Private in Co. A, 8th Regt.
Texas Cavalry Sept. 25, 1861.
...Captured, Dickson County
Tenn., Sept. 8, 1864. Paroled,
Camp Chase, O., May 2, 1865.
Exchanged May 12, 1865.

Director Confederate Records
Div.

Widow's Application

Under Act of 1910--As Amended by Act of
1919, and Constitutional Amendments
of 1920 and 1937.

County: Bartow
Name: Mrs. Nannie Hamiter Allday
Widow of: C. A. Allday
Date of Marriage: Dec. 10, 1896
Date of Husband's Death: Aug. 14, 1920
Company: Co. A, Texas Cavalry
Regiment: 8th
Approved: DEC 27 1937
1937
J. F. Adair, Director

Ordinary's Certificate

STATE OF GEORGIA,

Bartow COUNTY.

I, R. M. Gaines, Ordinary of said County, do certify
that I know Mrs. Nannie Hamiter Allday the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resident
citizen of said State since January 1st, 1920; that I also know J. F. Adair,
the witness who swears to the service of husband and/or the marriage; that both of them are now residents
of said County and were duly sworn by me before signing the foregoing affidavits, and that they are
truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 23rd day of July, 1937.
(SEAL OF ORDINARY) R. M. Gaines Ordinary.
of Bartow County.

INSTRUCTIONS:

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 whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1920, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

(Under Act of 1910, as Amended by Act of 1919, and Constitutional
Amendments of 1920 and 1937.)

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Bartow

COUNTY.

Personally appears before me, Mrs. Nannie Hamiter Allday, said State and County
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the
Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after
being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County) Mrs. Nannie Hamiter Allday, Cartersville, Bartow County, Georgia.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life.
3. Give date, or year, of your birth. Dec. 15, 1860. Age? 77.
3. (1) When, (2) where and (3) to whom were you married? Cartersville, Ga. Dec. 10, 1896. C. A. Allday.
- a. Have you married since the death of first and soldier husband? No.
- b. When and where did your first husband die? Aug. 14, 1920, Cartersville, Ga.
- c. Were you residing together when he died? Yes.
- d. If not, how long had you resided apart?
- e. Are you now a widow? Yes.
- f. Have you or your husband heretofore been paid a pension by the State? Yes.
- g. If so, when and for what cause were you or your husband placed on the roll? 1920, confederate soldier. placed on roll in Bartow County, Ga. 1920.

SECTION II. soldier. placed on roll in Bartow County, Ga. 1920.

Answer the following questions if your husband was not a pensioner:

1. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
2. When and where did the Commands of your husband surrender or discharge from the Service?
3. Was your husband personally present with his Command when it was surrendered or discharged?
4. If he was not present, state specifically and clearly where he was?
5. When did he leave the Command?
 - a. For what cause did he leave?
 - b. By whose authority did he leave?
 - c. For how long was his leave of absence granted? d. In what way?
- e. What was his physical condition when he left his Command?
- f. What effort did he make to return to his Command?
- g. In what way was he prevented from going back to his Command?
- h. Was he captured by the enemy at any time?
- i. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the

23rd day of July, 1937.
R. M. Gaines Ordinary.
of Bartow County.
(SEAL OF ORDINARY)

Mrs. Nannie Hamiter Allday
Applicant.

Ordinary's Certificate

STATE OF GEORGIA,

Bartow COUNTY.

I, R.M. Gaines, Ordinary of said County, do certify that I know Mrs. Nannie Hamiter Allday the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J.P. Adair, the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 23 day of July, 1937.
(SEAL OF ORDINARY) R.M. Gaines Ordinary.
of Bartow County.

INSTRUCTIONS:

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 whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1920, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

(State name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.

2. When and where did the Commands of your husband surrender or discharge from the Service?
3. Was your husband personally present with his Command when it was surrendered or discharged?
4. If he was not present, state specifically and clearly where he was?
5. When did he leave the Command?
 - a. For what cause did he leave?
 - b. By whose authority did he leave?
 - c. For how long was his leave of absence granted?
 - d. In what way?
- e. What was his physical condition when he left his Command?
- f. What effort did he make to return to his Command?
- g. In what way was he prevented from going back to his Command?
- h. Was he captured by the enemy at any time?
- i. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the 23 day of July, 1937.
R.M. Gaines Ordinary
of Bartow County.
(SEAL OF ORDINARY)

Mrs. Nannie Hamiter Allday
Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of _____

Before me, the Ordinary of said County, comes Mrs. _____, who, after being duly sworn, deposes and says:

1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;
2. That her deceased husband was not a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;
3. That she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased soldier husband;
4. That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.

Sworn to and subscribed before me, this the _____ day of _____, 1937.

Ordinary,

County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

Bartow

COUNTY.

J.P. Adair, of said State and County is hereby presented as a witness in support of the application of Mrs. Nannie Hamiter Allday for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County)
J.P. Adair, Cartersville, Bartow County, Georgia.
2. How long and since when have you known Mrs. Nannie Hamiter Allday applicant
Fifty Years, or more.
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State?
Cartersville, Bartow County, Georgia. All her life.
4. When and to whom was she married? Dec. 10, 1896 to C.A. Allday they lived together for years here.
5. How long and since when did you know C.A. Allday her husband?
From 1896 upto date of his death.
6. When and where did Aug. 14, 1920 Cartersville, Georgia.
7. Were 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?
DO

If the husband of the applicant was a pensioner, DO NOT answer the following questions.

9. When, where and in what Company and regiment did _____ enlist? (Give date and place)
10. How did you obtain your information of this service?
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)
12. When and where was his Command surrendered or discharged? (Give date and place.)
13. Were you personally present with this Command when it was surrendered? If not, where were you _____ and how came you there?
14. Was the husband of applicant personally present with his Command at its surrender? If not where was he? _____ and how came him there? When, where and for what cause did he leave his Command? (Give date.) By whose authority did he leave his Command? _____ and how long was he granted leave? How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically.)

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?

17. Was he captured as a prisoner? If so, when and where? _____ and when released?

Sworn to and subscribed before me, this the 23 day of July, 1937.
R.M. Gaines Ordinary
of Bartow County.
(SEAL OF ORDINARY)

J.P. Adair
(Witness)

If the husband of the applicant was a pensioner, DO NOT answer the following questions.

9. When, where and in what Company and regiment did ... enlist?
(Give date and place)

10. How did you obtain your information of this service?

11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)

12. When and where was his Command surrendered or discharged? (Give date and place.)

13. Were you personally present with this Command when it was surrendered?

If not, where were you ... and how came you there?

14. Was the husband of applicant personally present with his Command at its surrender?

If not where was he? ... and how came him there?

When, where and for what cause did he leave his Command? (Give date.)

By whose authority did he leave his Command?

and how long was he granted leave?

How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically)

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?

17. Was he captured as a prisoner? ... If so, when and where?

In what prison was he held?

Sworn to and subscribed before me, this the

25 day of July, 1937.

B. M. Gaines Ordinary

of Bartow County.

(SEAL OF ORDINARY)

J. P. Allen
(Witness)

STATE OF GEORGIA, COUNTY OF BARTOW.

MARRIAGE CERTIFICATE.

This is to certify that Marriage record BOOK I Page 444, in this office, shows that C. A. Allday and Nannie Hamiter, were joined in the Holy bonds of Matrimony by B. P. Allen M. G. on Dec 30, 1896.

This July 23, 1937.

B. M. Gaines
Ordinary, Bartow County, Georgia.

Georgia, Bartow County,

I, J. W. Jones, make solemn oath that I was the undertaker in charge of the burial of C. A. Allday, that I buried the said C. A. Allday Aug. 16, 1920

John W. Jones

Sworn to and subscribed to before me,

This July 23, 1937.

B. M. Gaines
Ordinary, Bartow County, Georgia.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

Honorable R. M. Gaines, Ordinary,
Bartow County,
Cartersville, Georgia.

WHEREAS:

MRS. NANNIE HAMITER ALLDAY, WIDOW OF C. A. ALLDAY,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1920, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January, 1938, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 1937.

B. M. Gaines
Director, Confederate Division
State Department of Public Welfare

Georgia, Bartow County,
I, J. W. Jones, make solemn oath that I was the undertaker in charge of the
burial of C. A. Allday, that I buried the said C. A. Allday Aug. 16, 1920

John W. Jones

Sworn to and subscribed to before me,

This July 23, 1937.

R. M. Ginn
Ordinary, Bartow County, Georgia.

WHEREAS:

MRS. NANNIE HAMISTER ALLDAY, WIDOW OF C. A. ALLDAY,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to January 1st, 1920, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January, 1938, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December, 1937.

R. M. Ginn
Director, Confederate Division
State Department of Public
Welfare

POWER OF ATTORNEY

GEORGIA.

County, }
Barlow

I, *Elisha Allen*, hereby authorize *Charles D. Smith*

of *Barlowville Ga.*

to receive for the pension allowed, and request that he remit same to

Barlowville Ga.

at my hand and seal, this

day of *March* 1901.

Witness my hand and seal, this

day of *March* 1901.

at *Barlowville Ga.*

INDIGENT
 SOLDIER'S PENSION
 1901.

Name *Elisha Allen*

County *Barlow*

Floyd County 1900

WARRANT ISSUED
 1/12 9 1901.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO
G. H. Hendricks

No data

POWER OF ATTORNEY

STATE OF GEORGIA.

County, }
Barlow

I, *Elisha Allen*, hereby authorize *Charles D. Smith*

of *Barlowville Ga.*

to receive and receipt for the pension allowed and request that he remit same to

Barlowville Ga.

at *Barlowville Ga.*

Witness my hand and seal, this

day of *March* 1901.

at *Barlowville Ga.*

Executed in presence of

Elisha Allen

(For Those Already Enrolled.)
(From Floyd Co 1900)
 No. *1140*

INDIGENT
 SOLDIER'S PENSION.
 1901.

Name *Elisha Allen*

County *Barlow*

Floyd County 1900

WARRANT ISSUED
 1/12 9 1901.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO
G. H. Hendricks

No data

WARRANT ISSUED
1/29 1901.

JOHN W. LINDSEY,
Commissioner of Prisons

WARRANT HANDED TO
J. W. Hendricks

Geo. W. Harrison, State Printer, Atlanta

No data

authorize
did request that he remit same to
[L. S.]

ORNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, Elisha Allen hereby authorize J. W. Hendricks
of Bartow Co. Ga.

to receive and receipt for the pension allowed and request that he remit same to
at Bartow Co. Ga.
by [Signature]

Witness my hand and seal, this 11th day of Jan 1901.
[Signature]

Executed in presence of

[Signature]

(For Those Already Enrolled.)
(From State to 1900)

INDIGENT

SOLDIER'S PENSION.

1901.

Name Elisha Allen
County Bartow
Alford County 1900
WARRANT ISSUED
1/29 1901.

JOHN W. LINDSEY,

Commissioner of Prisons

WARRANT HANDED TO

J. W. Hendricks

Geo. W. Harrison, State Printer, Atlanta

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.

I, Elisha Allen hereby authorize
J. W. Hendricks of Bartow Co. Ga.

to receive and receipt for the pension allowed and request that he remit same to
at Adams Co. Ga.
by [Signature]

Witness my hand and seal, this 8th day of Jan 1902.
[Signature]

Executed in presence of

[Signature]
Bartow Co.

(FOR THOSE ALREADY ENROLLED.)

No.

9145

INDIGENT

SOLDIER'S PENSION

1902.

Name Elisha Allen
County Bartow
Co. B
Regiment 48
Ga. Inf.
WARRANT ISSUED
1/31 1902.

JOHN W. LINDSEY,

Commissioner of Prisons

WARRANT HANDED TO

Crady

Geo. W. Harrison, State Printer, Atlanta

Allen, Eliza
 (For Those Already Enrolled.)
 From *March 1900*
 CODE SECTION 171
INDIGENT
SOLDIER'S PENSION.
1901.
 Name *Eliza Allen*
 County *Barlow*
Alford County 1910
 WARRANT ISSUED
 11/12/9
 1901.
 JOHN W. LINDSEY,
 Commissioner of Pensions
 WARRANT HANDLED TO
W. H. Speck
 No data

Allen, Eliza
Barlow County
 (For Those Already Enrolled.)
 CODE SECTION 171
 No. *3145*
INDIGENT
SOLDIER'S PENSION
1902.
 Name *Eliza Allen*
 County *Barlow*
 Co. *B* - Regiment *48*
Barlow
 WARRANT ISSUED
 11/31/1902
 JOHN W. LINDSEY,
 Commissioner of Pensions
 WARRANT HANDLED TO
Grady
 Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Barlow County.
 Personally appears *Eliza Allen* of *Barlow*
 County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen
 and resident of said County and State, and has resided in said State continuously ever
 since the *15th* day of *Oct* 18*74*; that he is *67* years old and
 by occupation a *farmer* 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 for the term of *3 yrs* in Company *B*, of *48th* Regiment
 of *Georgia*; that his physical condition is as
 follows: *Has Rheumatism and heart disease so*
as to render him unable to earn a support
at any calling
 that his property consists of the following items

of the value of *3* Dollars, that by reason of his physical
 condition and poverty he is unable to support himself by his own exertion or labor, and
 that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th,
 1894, and the Acts amendatory thereof, and makes application for the pension to which he
 is entitled for the year 1901. I have heretofore as a resident of *Barlow Alford*
 county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this the *12th*
12th day of *January* 1901. *Eliza Allen*
G. W. Nundrick Ordinary.

STATE OF GEORGIA.

Barlow County.
 I, *G. W. Nundrick* Ordinary of said County,
 do certify that I am well acquainted with *Eliza Allen* 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 *12th*
 day of *January* 1901. *G. W. Nundrick*
 Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.
 NOTE.—Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

Barlow County.
 Personally appears *Eliza Allen* of *Barlow*
 County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen
 and resident of said County and State, and has resided in said State continuously ever
 since the *15th* day of *Oct* 18*74*; that he is *67* years old and
 by occupation a *farmer* 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 for the term of *3 yrs* in Company *B*, of *48th* Regiment
 of *Georgia*; that his physical condition is as
 follows: *Rheumatism*

that his property consists of the following items *None*

of the value of *None* Dollars, that by reason of his physical
 condition and poverty he is unable to support himself by his own exertion or labor, and
 that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th,
 1894, and the Acts amendatory thereof, and makes application for the pension to which he
 is entitled for the year 1902. I have heretofore as a resident of *Barlow*
 county been allowed a pension for the year 1901.

Sworn to and subscribed before me, this the *8th*
8th day of *Jan* 1902. *Eliza Allen*
G. W. Nundrick Ordinary.

STATE OF GEORGIA.

Barlow County.
 I, *G. W. Nundrick* Ordinary of said County,
 do certify that I am well acquainted with *Eliza Allen* 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 *9th*
 day of *January* 1902. *G. W. Nundrick*
 Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.
 NOTE.—Affidavit should not be attested before January 1st, 1902.

Sworn to and subscribed before me, this the 12th day of January 1901. *Elisha Allen*
G.W. Nundrick Ordinary.

STATE OF GEORGIA,
Barlow County.
I, G.W. Nundrick Ordinary of said County,
do certify that I am well acquainted with *Elisha Allen* 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 12th
day of January 1901.
G.W. Nundrick
Ordinary Barlow County.



NOTE - The blank spaces must be filled.
NOTE - Affidavit should not be attested before January 1st, 1901.

county been allowed a pension for the year 1901.
Sworn to and subscribed before me, this the 8th day of Jan 1902. *Elisha Allen*
G.W. Nundrick Ordinary.

STATE OF GEORGIA,
Barlow County.
I, G.W. Nundrick Ordinary of said County,
do certify that I am well acquainted with *Elisha Allen*
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 9th
day of January 1902.
G.W. Nundrick
Ordinary Barlow County.



NOTE - The blank spaces must be filled.
NOTE - Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.
I, *E. Allen* hereby authorize
G.W. Nundrick of *Barlow County*
to receive and receipt for the pension allowed and request that he remit same to
me at *McDonville Ga*
by *check*
Witness my hand and seal, this 10 day of Jan 1903.
Elisha Allen [L.S.]

Executed in presence of
J. O'Brien

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.
I, *Elisha Allen* hereby authorize *George W.*
Nundrick of *Barlow County*
to receive and receipt for the pension allowed and request that he remit same to
me at *McDonville*
by *check*
Witness my hand and seal, this day of Jan 1904.
Elisha Allen [L.S.]

Executed in presence of
G. W. Nundrick

CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)
No. 3777
INDIGENT
SOLDIER'S PENSION
1903.
Name *E. Allen*
County *Barlow*
Co. *B* Regiment *48*
WARRANT ISSUED
40 1903.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
my
Gen. Harrison, State Printer, Atlanta.

no data

CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)
No. 2286.
INDIGENT
SOLDIER'S PENSION
1904.
Name *Elisha Allen*
County *Barlow*
Co. *B* Regiment *48*
WARRANT ISSUED
79 1904.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
my
Gen. W. Harrison, State Printer, Atlanta.

Alleged to be
Barlow County

COURT SECTION 1284.
(FOR THOSE ALREADY ENROLL)

No. *377*

INDIGENT
SOLDIER'S PENS
1903.

Name *E. Allen*
County *Barlow*
Co. *B* Regiment *48*
4th

WARRANT ISSUED
3/0

JOHN W. LINDSEY,
Commissioner of Pen

WARRANT HANDED TO
any

no data

Allen, Elisha
Barlow

Alleged to be
Barlow County

COURT SECTION 1284.
(FOR THOSE ALREADY ENROLL)

No. *228*

INDIGENT
SOLDIER'S PENS
1904.

Name *Elisha Allen*
County *Barlow*
Co. *B* Regiment *48*
4th

WARRANT ISSUED
7/9

JOHN W. LINDSEY,
Commissioner of Pen

WARRANT HANDED TO
any

Allen, Elisha
Barlow

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *E. Allen* of *Barlow*
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the *15* day of *Oct* 18*84*; that he is *68* years old and
by occupation a *none*, that he enlisted in the military service of the Con-
federate States (or of the State of *Miss* 1862) during the war between the
States, and served for the term of *3* yrs in Company *B*, of *48th* Regiment
of *Miss*; that his physical condition is as
follows: *Had Arteriosclerosis and Rheumatism*

that his property consists of the following items: *none*

of the value of _____ Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1903. I have heretofore as a resident of *Barlow*
county been allowed a pension for the year 1902.

Sworn to and subscribed before me, this the *16*
day of *Jan* 1903.
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County,
do certify that I am well acquainted with *E. Allen*
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 *10*
day of *Jan* 1903.

G. W. Hendricks
Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *Elisha Allen* of *Barlow*
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the *15* day of *Oct* 18*84*; that he is *69* years old and
by occupation a *farmer*, that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of *3* yrs in Company *B*, of *48th* Regiment
of *Miss*; that his physical condition is as
follows: *He is worn out from age
and has Arteriosclerosis*

that his property consists of the following items:

of the value of _____ Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of *Barlow*
County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the *16*
day of *Jan* 1904.
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County,
do certify that I am well acquainted with *Elisha Allen*
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 *13*
day of *Jan* 1904.

Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1904.

1903, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Bartow County been allowed a pension for the year 1902.

Sworn to and subscribed before me, this the 10 day of Jan 1903.
G.W. Hendricks Ordinary.

STATE OF GEORGIA,

Bartow County.
I, G.W. Hendricks Ordinary of said County, do certify that I am well acquainted with E. Allen 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 10 day of Jan 1903.

G.W. Hendricks
Ordinary Bartow County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1903.

1903, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Bartow County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 10 day of Jan 1904.
G.W. Hendricks Ordinary.

STATE OF GEORGIA,

Bartow County.
I, G.W. Hendricks Ordinary of said County, do certify that I am well acquainted with E. Allen 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 10 day of Jan 1904.

G.W. Hendricks
Ordinary Bartow County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.
I, Elisha Allen hereby authorize G.W. Hendricks of Bartow County, Ga. to receive and receipt for the pension allowed, and request that he remit same to my at Bartow, Ga. by OK

WITNESS my hand and seal, this 11 day of Jan 1905.
Elisha Allen [L. S.]

Executed in the presence of

J. B. Elrod

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.
I, Elisha Allen hereby authorize G.W. Hendricks of Bartow County, Ga. to receive and receipt for the pension allowed, and request that he remit same to my at Bartow, Ga. by OK

WITNESS my hand and seal, this 6 day of Jan 1906.
Elisha Allen [L. S.]

Executed in the presence of

G. B. Elrod

CODE SECTION 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 3713

INDIGENT

**SOLDIER'S PENSION
1905.**

Name Elisha Allen
County Bartow
Co. B Regiment 48

WARRANT ISSUED

FEB 7 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

JOHN W. HARRISON, HANGERS, FOSTER PRINTING, ATLANTA.

m data

CODE SECTION 1234.
(FOR THOSE ALREADY ENROLLED.)

No. 2203

INDIGENT

**SOLDIER'S PENSION
1906.**

Name Elisha Allen
County Bartow
Co. B Regiment 48

WARRANT ISSUED

JAN 29 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

JOHN W. HARRISON, HANGERS, FOSTER PRINTING, ATLANTA.

m data

Allen, Elisha
Barlow County

COSS SECTION 1334.
(FOR THOSE ALREADY ENROLLED)

No. *3713*

INDIGENT
SOLDIER'S PENSION
1905.

Name *Elisha Allen*
County *Barlow*
Co. *B* Regiment *48*

WARRANT ISSUED
FEB 7

JOHN W. LINDSEY,
Commissioner of A

WARRANT HANDED TO

Geo. W. HARRISON, CLERK FOR STATE PRINTER.

no date

Allen, Elisha
Barlow County

COSS SECTION 1334.
(FOR THOSE ALREADY ENROLLED)

No. *2203*

INDIGENT
SOLDIER'S PENSION
1906.

Name *Elisha Allen*
County *Barlow*
Co. *B* Regiment *48*

WARRANT ISSUED
JAN 29

JOHN W. LINDSEY,
Commissioner of A

WARRANT HANDED TO

Geo. W. HARRISON, CLERK FOR STATE PRINTER.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *Elisha Allen* of *Barlow* County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the *15* day of *Oct* 18*84*; that he is *70* years old and by occupation a *farmer*, 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 for the term of *3 yrs* in Company *B*, of *48*th Regiment of *Georgia*; that his physical condition is as follows: *He has Rheumatism and other diseases which render him unable to labor.*

that his property consists of the following items:

of the value of *350* Dollars. I am now earning, by my labor, *350* Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of *Barlow* County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the *14* day of *Jan* 1905. *Elisha Allen*
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *Elisha Allen* 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 *14* day of *Jan* 1905.

G. W. Hendricks
Ordinary *Barlow* County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Barlow County.

Personally appears *Elisha Allen* of *Barlow* County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the *15* day of *Oct* 18*84*; that he is *71* years old and by occupation a *farmer*, 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 for the term of *3 yrs* in Company *B*, of *48*th Regiment of *Georgia*; that his physical condition is as follows: *Has Rheumatism and other complications*

that his property consists of the following items:

of the value of *11* Dollars. I am now earning by my labor, *11* Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of *Barlow* County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the *6* day of *Jan* 1906. *Elisha Allen*
G. W. Hendricks Ordinary.

State of Georgia,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *Elisha Allen* 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 *6* day of *Jan* 1906.

G. W. Hendricks
Ordinary *Barlow* County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Barlow County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 14 day of Jan 1905.

Ordinary.

STATE OF GEORGIA, }

Barlow County. }

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with Elisha Allen 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 Jan 1905.

Ordinary Barlow County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1905.

is entitled for the year 1906. I have heretofore, as a resident of Barlow County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 6 day of Jan 1906.

Ordinary.

State of Georgia, }

Barlow County. }

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with Elisha Allen 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 6th day of Jan 1906.

Ordinary Barlow County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY. }

I, Elisha Allen, hereby authorize G. W. Hendricks of Barlow Co. to receive and receipt for the pension allowed, and request that he remit same to me at Adairsville Ga by CR

Witness my hand and seal, this 5th day of Nov 1907.

Elisha Allen [L. S.]

Executed in presence of

Elisha Allen
L. B. Ebbert, N.Y.

Form 1284.
(FOR THOSE ALREADY ENROLLED)

No. 3786

INDIGENT SOLDIER'S PENSION 1907.

Name Elisha Allen
County Barlow
Co. B Regiment 48

WARRANT ISSUED

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

JOHN W. LINDSEY, CHIEF CLERK, ATLANTA.

Allen, Elisha
Barlow County

no date

Allen, Eliza
Barlow County

Cons. Section 1304.
(FOR THOSE ALREADY ENROLLED)

No. *3786*

INDIGENT
SOLDIER'S PEN
1907.

Name *Eliza Allen*
County *Barlow*
Co. *B* Regiment *4*

WARRANT ISSUED

JOHN W. LINDEY,
Commissioner of

WARRANT HANDED TO

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Barlow County.

Personally appears *Eliza Allen* of *Barlow* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1834; that he is *72* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of *3 yrs* in Company *B*, of *48*th Regiment of *Geo. Wm*; that his physical condition is as follows: *He is only afflicted with Rheumatism*

that his property consists of the following items:

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of *Barlow* County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____ day of *Jan* 1907. *Eliza Allen*
Geo W. Lindsey Ordinary.

State of Georgia,

Barlow County.

I, *Geo W. Lindsey* Ordinary of said County, do certify that I am well acquainted with *Eliza Allen* 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 _____ day of *Jan* 1907.

Geo W. Lindsey
Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1907.

follows: He is severely afflicted with
Rheumatism

that his property consists of the following items:

of the value of _____ Dollars. I am now earning
by my labor, _____ Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1907. I have heretofore, as a resident of Barlow
County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 1st day of Jan, 1907. Elisha Allen
Geo. Hendricks Ordinary.

State of Georgia,

Barlow County.

I, Geo. Hendricks Ordinary of said County,

do certify that I am well acquainted with Elisha Allen
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 5
day of Jan, 1907.

Geo. Hendricks
Ordinary Barlow County.



Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1907.

NOTES.

In order to avoid unnecessary delay to applicants, and to enable all parties interested to understand the laws granting allowances for disabled soldiers, as well as the rules adopted by the Governor touching the payments provided for by the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant, and physician, and followed by a statement of facts in the hands of the physician, and a full and carefully stated history of the disease should be given, tracing the disability back to its source.

2. The law requires no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.

3. It will not answer to say "the arm is 'substantially useless for ordinary pursuits of life, etc.' There is no qualification to this clause of the Act in reference to the arm or leg, but the limb must for all purposes be 'substantially and essentially useless.'"

4. If papers are returned for correction, and the amendments are added to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.

5. The certificate of any other will not be received in any case.

6. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

7. No payments can be made for any past year.

W. H. HARRISON,
 Clerk Ex. Dept.

Allen, J. W.
 Bartow Co.
 1890.

H. A. S.

No. 1102
 APPLICATION FOR ALLOWANCE.

FOR—
 Loss of Arm
 Applicant, J. W. Allen.
 County, Bartow
 Amount, \$100.
 Date of warrant Feb 13
 Entered on record Feb 13 1890
 W. H. H.
 SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO
 A. M. Monte

Date of warrant *July 13*
 Entered on record *July 13*
1044
 SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO
AM Monte

W. H. HARRISON,
 Clerk Ex. Dept.

...or leg, unless the arm or leg has been substantially useless for ordinary pursuits of the Act in reference to the arm or leg, and essentially useless for the arm or leg before an officer, and the proofs must not be received in any case. Ordinary of the county of the residence specially requested to call the attention

NOTES.

- In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted:
1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
 2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
 3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
 4. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
 5. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.
 6. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.
 7. No payments can be made for any past year.

W. H. HARRISON,
 Clerk Ex. Dept.

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Barlow County.
 PERSONALLY appears *J. M. Allen* 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 been continuously since the *10th* day of *March* 1861, 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 *H*, of *18th* Regiment of *Georgia* Volunteers *Wofford's* Brigade; that whilst engaged in such military service, at the battle of *Gettysburg* in the State of *Pennsylvania*, on the *30th* day of *July* 1863, he was wounded as follows: *that in the left arm just below the shoulder with a piece of shell which lacerated the arm breaking the bone and as a result his said left arm was amputated near the shoulder joint.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder ending October 26, 1890.

Sworn to and subscribed before me, this the *10th* day of *August* 1890, *J. M. Allen's mark*
J. M. Allen's Ordinary

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease give full and connected history of disease, tracing it directly to the service.

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
Barlow County.
 PERSONALLY came before me *J. M. Ford* of the county of *Barlow* State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company *H*, of *18th* Regiment of *Georgia* Volunteers, and that deponent knows *J. M. Allen*, and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said *Allen*, as stated by him in said affidavit. Deponent further states that said *Allen* is a *bona fide* citizen of this State and resides in *Barlow* county.

Sworn to and subscribed before me this the *10th* day of *July* 1890, *J. M. Ford*
Cash Co. 18th Reg

The foregoing affidavit changed to suit the facts should be made by a commissioned officer of Company or Regiment. If the affidavit of such an officer is not obtainable the following affidavits of three responsible citizens should be furnished.

APPLICATION FOR ALLOWANCE.

No. *1102*
State of Arm
 Applicant *J. M. Allen*
 County, *Barlow*
 Amount, *\$100.*
 Date of warrant *July 13*
 Entered on record *July 13*
1044
 SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO
AM Monte

Allen, J. M.
Barlow Co.
1890.

1890.
No. 1102
APPLICATION FOR ALLOWANCE
State of Georgia
Applicant, J. M. Allen
County, Bartow
Amount, \$100.
Date of warrant July 13
Emergency record
J. M. Allen
WARRANT HANDED TO
J. M. Allen

entitled for the year ending October 26, 1890.
Sworn to and subscribed before me, this the 10th day of July 1890
J. M. Allen's mark
J. M. Allen's mark
NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease give full and connected history of disease, tracing it directly to the service.
Commissioned Officer's Affidavit.
STATE OF GEORGIA,
Bartow County.
PERSONALLY came before me J. M. Allen of the county of Bartow State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company A, of 18th Regiment of Georgia Volunteers, and that deponent knows J. M. Allen, and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said Allen as stated by him in said affidavit. Deponent further states that said J. M. Allen is a bona fide citizen of this State and resides in Bartow county.
Sworn to and subscribed before me this 10th day of July 1890
J. M. Allen's mark
J. M. Allen's mark
The foregoing affidavit, changed to suit the facts should be made by a commissioned officer of Company or Regiment. If the affidavit of such officer is not obtainable the following affidavit of three responsible citizens should be furnished:
J. M. Allen's mark
J. M. Allen's mark
J. M. Allen's mark

STATE OF GEORGIA,
County.
PERSONALLY came
citizens of
county, in said State,
who, being duly sworn, say that they are well acquainted with
and know, from having been with him in the army, that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disable applicant, as stated by him; the said applicant is a bona fide citizen of this State, and resides in
county, and we are well satisfied that all the statements in his affidavit are true.
Sworn to and subscribed before me, this
day of 1890

NOTE.—Above affidavit must be made by three citizens who personally know of the service of applicant and can state of their own knowledge precisely how he is disabled, and what disables him.
NOTE 2.—The attesting officer must see that each witness reads, or has read to him the affidavit he signs.

STATE OF GEORGIA,
Bartow County.
PERSONALLY comes before me J. M. Allen Ordinary of said county, J. B. Payfield and J. M. Jerning, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have carefully examined J. M. Allen and after such examination say that the applicant has been injured as follows:
Ball wound made visible in
interior of left arm near
shoulder joint. This having been
affirmed near shoulder joint

Sworn to and subscribed before me, this 10th day of July 1890
J. M. Allen's mark
J. M. Allen's mark
ORDINARY.
NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.
NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier. Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,
Bartow County.
I, J. M. Allen Ordinary of said county, do certify that I am well acquainted with J. M. Allen the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, are persons of respectability, and that their statements are worthy of full credit and belief.
I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
of said county, and the said affidavits and signatures thereto are genuine.
Given under my official signature and seal, this 10th day of July 1890
J. M. Allen's mark
Ordinary, Bartow County.

POWER OF ATTORNEY.
STATE OF GEORGIA
Bartow County.
KNOW ALL MEN BY THESE PRESENTS, That I, J. M. Allen's mark
of Bartow county, in said State, do hereby appoint J. M. Allen's mark
of Bartow county, my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of July 1890
J. M. Allen's mark
Executed in the presence of us:
J. M. Allen's mark
J. M. Allen's mark
DIRECTION.
If allowed, send amount by 10th day of July 1890
me at Ga and oblige,
J. M. Allen's mark

day of 189

NOTE.—Above affidavit must be made by three citizens who personally know the service of applicant and can state of their own knowledge precisely how he is disabled, and what disables him.
NOTE 2.—The attesting officer must see that each witness reads, or has read to him the affidavit he signs.

STATE OF GEORGIA,

Bartow County.

PERSONALLY comes before me *W. H. Hudnicks* Ordinary of said county, *J. H. Mayfield* and *J. M. Jerning*, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have carefully examined *J. W. Allen* and after such examination say that the applicant has been injured as follows:

*Ball wound made visible in
inside of left arm near
shoulder joint. This having been
hospitalized near shoulder joint*

Sworn to and subscribed before me, this

10th day of *July* 189*0*
W. H. Hudnicks

ORDINARY.

NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.
NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier. Also state how long physicians have known and treated applicant.

signatures thereto are genuine.

Given under my official signature and seal, this *10th* day of *July* 189*0*

Ordinary *Bartow* County.

POWER OF ATTORNEY.

STATE OF GEORGIA

Bartow County.

KNOW ALL MEN BY THESE PRESENTS, That I, *J. W. Allen*

county, in said State, do hereby appoint *Sam. A. M. Gout* of *Bartow* my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *10th* day of *July* 189*0*

Executed in the presence of us:

J. M. Jerning
W. H. Hudnicks Ordinary

DIRECTION.

If allowed, send amount by *with W. H. Hudnicks* and oblige,
me at *90*

J. W. Allen

Bartow

Maimed Soldiers.

Voucher No. *1102*

Amount \$ *100*

Paid to *J. M. Allen*
Loss of
Arm

July 13 189*0*

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

A. M. Gout

Audited

18

COMPTROLLER-GENERAL.

July 13 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK.

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

A M Route

No. 1102

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga.,

July 13 1890

Mr.

J M Allen
Barlow

of the County

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

Loss of Arm

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, 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.

GOVERNOR.

\$ 100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100

Dollars,

per above voucher, this

13 of July 1890

J M Allen, by his atty-in-fact,
A M Route.

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

Loss of arm

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, 18*90*

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

J. R. Gordon

By the Governor,

GOVERNOR.

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ *100*

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100

Dollars,

per above voucher, this

13 of *July* 18*90*

*J. M. Allen, by his atty-in-fact,
A. M. Foute,*

Allen, Sarah J. (Mrs)
Bartow County

No. *OK for 1911*

Widow's Application

To Be Put on Roll in Her Own Right, when
Husband Was on Roll at Death.

County *Bartow*

Name *S. J. Allen*

Widow of *Elisha Allen*

B 40. 200

Approved

J. W. LINDSEY
Commissioner of Prisons

Chas. P. Byrd, State Printer, Atlanta.

11/21/20

Widow of Elisha Allen
B 46 200
Approved _____
J. W. LINDSEY
Commissioner of Pensions
Chas. P. Byrd, State Printer, Atlanta.

11/21/10

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
Bartow County.

Personally before me comes S. J. Allen of said County, who, after being duly sworn, on oath says, that she is the widow of Elisha Allen, to whom in the County of Macon State of Ga she was married on the 20 day of Aug 1864 and that she remained his wife, and resided with him to the date of his death in Nov 1908 and that she has not since his death remarried. At the time of his death he was a resident of Bartow County, in Georgia said State of Georgia, and he was on the Independent Pension Roll of the State and paid a pension of \$60 in Bartow County for 10 08 per annum, on account of being a soldier in Company 48 Regiment 48 (Volunteers of State Militia.)

At the death of Elisha Allen he was in the use and possession of the following property. None of all
of the cash value of \$ None of all
What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.) None of all
Acres land 11 \$
Horses and Mules 1 \$
Hogs, Cows, etc. 1 \$
Total Cash value of all property 1 \$

That she is now a bona fide resident citizen of said County of Bartow and she has so continuously resided since 8th day of Oct 1845
Sworn to and subscribed before me, this the 14 day of Oct 1910 S. J. Allen
Wm. H. Anderson Ordinary,
of Bartow County.

Affidavit of Witnesses to Prove Marriage and to Whom--Date of Death of Husband.

STATE OF GEORGIA,
Bartow County.

Personally before me come B. B. Allen known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge S. J. Allen who made the foregoing affidavit, is the lawful widow of Elisha Allen who died in Bartow County in said State of Ga on 20 day of Nov 1908 and that she has not since remarried. That she became the wife of Elisha Allen on the 20 day of Aug 1864 and that the same man who was on the pension roll of said State from Bartow County when he died.

Sworn to and subscribed before me, this the 14 day of Oct 1910 B. B. Allen
Wm. H. Anderson Ordinary,
of Bartow County.

Widow's Application

To Be Put on Roll in Her Own Right, when Husband Was on Roll at Death.

County Bartow
Name S. J. Allen
Widow of Elisha Allen
B 46 200
Approved _____

J. W. LINDSEY,
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

11/21/10

1910
H. W. Anderson Ordinary,
of Barlow County.

Affidavit of Witnesses to Prove Marriage and to Whom--Date of Death of Husband.

STATE OF GEORGIA,
Barlow County

Personally before me come B. G. Allen known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge B. G. Allen who made the foregoing affidavit, is the lawful widow of China Allen who died in Barlow County in said State of GA on 26 day of Aug 1908 and that she has not since remarried. That she became the wife of Elisha Allen on the 1st day of Jan 1890 and that she was then a resident of said County and was then a bona fide continuing resident of said County and was on the pension roll of said State from Barlow County when he died.

Sworn to and subscribed before me, this the 4th day of Oct 1910 B. G. Allen
H. W. Anderson Ordinary,
of Barlow County.

STATE OF GEORGIA--WARREN COUNTY.

ORDINARY'S OFFICE--SS.

I, P. McHill Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of Marriage License of Elisha Allen to Sarah J. Lyons with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 26th day of Sept 1910
P. McHill
ORDINARY AND EX-OFFICIO C. C. C.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,
County.

Personally before me comes _____ who after being sworn on oath says, that they are freeholders of said County, and that they know _____ of said County and knew her said husband _____ at his death on the _____ day of _____ 191 _____ that she and he were in the use, possession and control of the following property at his death to wit: _____

of the value of \$ _____ That she is now in the use, possession and control of the following property to wit: _____

of the value of \$ _____

Sworn to and subscribed before me, this the _____ day of _____ 191 _____

Ordinary,
of _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Barlow County.

I, H. W. Anderson Ordinary of said County, do certify, that, I know Mrs. B. G. Allen the applicant for this pension and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the Barlow County pension roll.

That I also know B. G. Allen witness as to marriage and I also know _____ who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Barlow County shows that she returned property to the amount of nothing for 1908 \$ nothing for 1909 \$ nothing for 1910 \$ nothing

Sworn under my hand and official seal of office this 14th day of Nov 1910
H. W. Anderson Ordinary,
of Barlow 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 present, or by general reputation.

STATE OF GEORGIA—WARREN COUNTY.

ORDINARY'S OFFICE—SS.

I, P. McHill, Ordinary and ex-officio Clerk of the

Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of

Marriage License of Elisha Allen to Sarah J. Lynn

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 20th day of Sept, 1910.

P. McHill
ORDINARY AND EX-OFFICIO C. C. C.

of the value of \$ _____ That she is now in the use, possession and control of the following property to wit: _____

of the value of \$ _____

Sworn to and subscribed before me, this the _____

day of _____ 191 _____

_____ Ordinary,

of _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Barlow County.

I, G. W. Anderson, Ordinary of said County, do certify, that, I know Mrs. E. J. Allen the applicant for this pension and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the

That I also know W. E. Allen & Co. witnesses as to marriage and I also know _____ who I know to be a resident free holder of said County

that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Barlow County shows that W. E. Allen & Co. returned property to the amount of nothing for 1908 \$ nothing for 1909 \$ nothing for 1910 \$ nothing

Sworn under my hand and official seal of office this 14th day of Nov, 1910

(SEAL.)

G. W. Anderson
Barlow Ordinary;

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 present, or by general reputation.

Printed by J. McCallum, Augusta, Ga.

STATE OF GEORGIA

WARREN COUNTY.

To any Minister of the Gospel, Judge, Justice of the Inferior Court, or Justice of the Peace, or any Person authorized to celebrate:

These are to authorize and permit you to join in the Honorable State of Matrimony, Elisha Allen of the one part, and Sarah J. Lynn of the other part, according to the Rites of your Church: Provided there be no lawful cause to obstruct the same: and this shall be your authority for so doing.

Given under my hand, as Ordinary, for the County aforesaid, this First day of July, 1865.

I, R. A. Hickler, hereby certify, That Elisha Allen and Sarah J. Lynn were joined together in the Holy Rites of Matrimony, by me, on the 2d day of July, 1865.

R. A. Hickler