

ES.

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 description of the wound or disease 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 the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to hold that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. 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.
6. 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.
7. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA

Bartow County.

PERSONALLY appears Saml R Bennett of Barrow 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 such since the (day of his birth) 23 day of March 1844; 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 2nd Regiment of Georgia Volunteers Bennett's Brigade; that whilst engaged in such military service, at the battle of Gettysburg in the State of Penn on the 2nd day of July 1863, he was wounded as follows: a minnie ball passing through his left hand entering at the wrist and passing out through the palm of the hand, destroying the use of said hand and from the effects of said gun shot wound his entire arm has separated away to a considerable extent rendering the left hand and arm entirely useless and essentially useless and the left arm is substantially & essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the Act amendatory thereof, approved December 24, 1888, and makes application for the allowance to which he is entitled thereunder for the year ending October 26, 1889.

Sworn to and subscribed before me, this the

6th day of February 1889
 J. M. Durham, Clerk Sup. Ct.
 NOTE: State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
 Given that J. M. Durham before me as a witness
 this 6th day of Feb 1889
 J. M. Durham, Clerk Sup. Ct.
 Commissioned Officer's Affidavit.

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

Barrow County.

PERSONALLY came before me J M Daniel of the county
of Barrow State of Georgia, who, being duly sworn, says that he was
a commissioned officer in Company F, of 2nd Regiment of Georgia
Volunteers, and that deponent knows St. Bennett, 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 St. Bennett.

as stated by him in said affidavit. Deponent further states that said SK Bennett is a *bona fide* citizen of this State and resides in Bartow county.

J. M. Danaher
Ct. Sup. Court

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 affidavit of three responsible citizens should be furnished:

Poor, must
 show that the
 moral soundness
 is in substance
essentially real,
 otherwise must
 be made so.
 W. H. Harrison
 C. H. N.
 E. 1 Dept. July 12/39

APPLICATION FOR ALLOWANCE.

FOR

Left arm scabbed
Applicant, Samuel H. Bennett
County De Kalb
Amount 50.
Date of Warrant July 20/
Entered on record
July 20 1889
W. H. H.
SECRETARY EXCISE DEPARTMENT.

A. M. Doule

Bennett, Daniel
Bartow
 No. 706
 APPLICATION FOR ALLOWANCE.
 FOR
Left arm disabled
Applicant, Daniel H. Bennett
County Bartow
Amount \$50.
Date of Warrant July 20th
Entered on record
July 20th 1889
W. H. H.
 SECRETARY EXCISE DEPARTMENT.
A. M. Doble

Proof, must
show that the
wound renders
him substantially
permanently unable
to execute said
business.
W. H. H.
Ex. Dept. July 22/89

Sworn to and subscribed before me, this the
 6th day of February 1889.
J. M. Durham Clerk Sup. Ct.
 NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
Sworn to and subscribed before me as amended
This Feb. 16th 1889
J. M. Durham Clerk Sup. Ct.
 Commissioned Officer's Affidavit,
 STATE OF GEORGIA,
Bartow County.
 PERSONALLY came before me *J. M. Daniel* of the county
 of *Bartow* State of Georgia, who, being duly sworn, says that he was
 a commissioned officer in Company *F*, of *2nd* Regiment of *Georgia*
 Volunteers, and that deponent knows *S. K. Bennett*, 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 *S. K. Bennett*,
 as stated by him in said affidavit. Deponent further states that said
S. K. Bennett is a bona fide citizen of this State and resides
 in *Bartow* county.
J. M. Durham
Clerk Sup. Court
 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 affidavit of three responsible citizens should be furnished:

STATE OF GEORGIA,
 County.
 PERSONALLY came
 citizens of
 county, in said State,
 who, being duly sworn, say that they are acquainted with
 and know 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 disables applicant, as stated by him; that 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 1889

STATE OF GEORGIA,
Bartow County.
 I, *Geo. H. Hendricks* Ordinary of said county,
 do certify that I am well acquainted with *S. K. Bennett* 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. 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 *J. M. Durham* before
 whom the foregoing affidavits were made and power of attorney was signed, is a
Clerk Superior Court of said county, and the said affidavits and signa-
 tures thereto are genuine.
 Given under my official signature and seal, this 6th day of Feb. 1889
Geo. H. Hendricks
 Ordinary *Bartow* County.

STATE OF GEORGIA,
Bartow County.
 PERSONALLY comes before me *Geo. H. Hendricks* Ordinary of said county,
J. M. Young and *Lindsey Johnson*, both known to
 me as reputable physicians of said county, who, being severally sworn, say on oath that
 they have carefully examined *S. K. Bennett* and after such
 examination say that the applicant has been injured as follows:
By being wounded in the left hand
by a Minnie Ball passing through the
left hand and rendering the hand
essentially useless and the arm being
permanently injured and incapable of
performing any work.
 Sworn to and subscribed before me, this
 day of February 1889
Geo. H. Hendricks
 ORDINARY.

READ NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of
 the disability resulting therefrom.
Amputated by a Minnie Ball passing through the left hand and rendering the hand
essentially useless and the arm being permanently injured and incapable of
performing any work.
 Sworn to and subscribed before me, this
 day of February 1889
J. M. Young M.D.

POWER OF ATTORNEY.
 STATE OF GEORGIA,
Bartow County.
 Know all Men by these Presents, That I, *S. K. Bennett*
 of *Bartow*
 county, in said State, do hereby appoint *Geo. H. Hendricks* my true and lawful attorney in fact, for
 me and in my name, to receive and receipt for whatever amount of money I may be entitled
 to from the State of Georgia by reason of the injury received as aforesaid in the military ser-
 vice 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
 day of February 1889
S. K. Bennett (L.S.)
 Executed in the presence of us:
J. M. Durham Clerk Sup. Court
Frank O. Durham

POWER OF ATTORNEY.

STATE OF GEORGIA

Bartow County.

KNOW ALL MEN BY THESE PRESENTS, That I, *J. R. Bennett*

of *Bartow* County, State of Georgia, do hereby appoint *Wm. A. M. Fould* 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 *6th* day of *July* 189*0*

Executed in the presence of us:

John M. Bobbs
W. H. Hendricks

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

Know all Men by these Presents, That I, *J. R. Bennett* of *Bartow* County, State of Georgia, do hereby appoint *Wm. A. M. Fould*

of *Bartow* County, State of Georgia, do hereby appoint *Wm. A. M. Fould* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever 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 *11* day of *July* 189*1*.

Executed in the presence of us:

W. H. Hendricks
Wm. A. M. Fould

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

STATE OF GEORGIA,

Bartow County.

I, *Wm. A. M. Fould* Ordinary of said county, do certify that I am well acquainted with *J. R. Bennett* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

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 *6* day of *July* 189*0*

Ordinary

County.

STATE OF GEORGIA,

Bartow County.

I, *Wm. A. M. Fould* Ordinary of said County, do certify that I am well acquainted with *J. R. Bennett* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

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 *11* day of *July* 189*1*.

Ordinary

County.

APPLICATION FOR ALLOWANCE.

No. 1107

Arm. disab.

Applicant, *J. R. Bennett*

County, *Bartow*

Amount, *Fifty Dollars*

Date of warrant, *July 13*

Entered on record *July 13* 189*0*

Wm. A. M. Fould

WARRANT HANDED TO

Wm. A. M. Fould

No additional bills

Application for Allowance

No. 1107

Arm. dis.

Applicant, *J. R. Bennett*

County, *Bartow*

Amount, *50*

Date of Warrant, *July 13*

Entered on record *July 13* 189*1*

Wm. A. M. Fould

WARRANT HANDED TO

Wm. A. M. Fould

No additional bills

Bennett, S. H.
Bartow Co.
1890.
No. 1107
APPLICATION FOR ALLOWANCE
FOR THE YEAR ENDING OCTOBER 26, 1892.
Applicant, S. H. Bennett
County, Bartow
Amount, Fifty Dollars
Date of Warrant, July 13, 1892
Entered on record
July 13, 1892
WARRANT HANDLED TO
C. M. Gault
No additional fee

Bennett, S. H.
Bartow Co.
1891
PAID 1891
No. 1107
APPLICATION FOR ALLOWANCE
FOR THE YEAR ENDING OCTOBER 26, 1892.
Applicant, S. H. Bennett
County, Bartow
Amount, Fifty Dollars
Date of Warrant, July 13, 1892
Entered on record
July 13, 1892
WARRANT HANDLED TO
C. M. Gault
No additional fee

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Bartow County.

PERSONALLY appears S. H. Bennett
of Bartow County, State of Georgia, who, being duly sworn, says
on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously
since the 13th day of March 1844, that he enlisted
in the military service of the Confederate States (or of the State of
during the war between the States, and served as a private in Company
of 2nd Regiment of Georgia Volunteers, Benjamin's
Brigade; that whilst engaged in such military service at the battle of
in the State of Penn., on the 2nd day of
July 1863, he was wounded as follows: Gunshot
wound through the wrist joint of
the left hand rendering it substancially
useless and essentially useless

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 ending October 26, 1892. I have heretofore been allowed a pension of
50 Dollars for 2 years

Sworn to and subscribed before me this 3th day of March 1892.
S. H. Bennett
Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.

Know all Men by these Presents, That I,
of
County, in said State, do hereby appoint
my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever 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
day of 1892.

Executed in the presence of us: [L. S.]

DIRECTION.
Send money to me as follows, by
to
County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Bartow County.

PERSONALLY appears S. H. Bennett of Bartow
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 13th day of
March 1844; 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 as a private in Company 4, of 2nd Regiment
of 4th Volunteers Benjamin's Brigade; that whilst engaged in
such military service at the battle of Gettysburg in the State
of Penn., on the 2nd day of July 1863, he was
wounded as follows: Gunshot wound through the right
hand, left hand near the wrist joint, which
renders the left arm substantially and
essentially useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and
the acts amendatory thereof, and makes application for the allowance to which he is entitled for
the year ending October 26, 1892. I have heretofore been allowed a pension of
50 dollars, for 1889-90-91-92

Sworn to and subscribed before me, this, the 3th day of March 1892.
S. H. Bennett
Ordinary

Note.—State fully 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,
Bartow County.

I, G. W. Sandricks, Ordinary of said County,
do certify that I am well acquainted with S. H. Bennett
the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.

I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
Justice of the Peace in and for said County, and the said affidavits and
signatures thereto are genuine.

Given under my official signature and seal, this 3th day of March 1892.
G. W. Sandricks
Ordinary
Bartow County.

STATE OF GEORGIA
POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever 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 day of March 1892.

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

Note—State fully 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,

Bartow County.

I, G. W. Hudnicks Ordinary of said County,

do certify that I am well acquainted with S. R. Bennett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that

before whom the foregoing affidavits were made, and power of attorney was signed, is a Barlow of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 15 day of March 1892.

DIRECTION.

STATE OF GEORGIA

POWER OF ATTORNEY

STATE OF GEORGIA,

Bartow County.

I, G. W. Hudnicks Ordinary of said county,

do certify that I am well acquainted with S. R. Bennett the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, 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 March 1892.

G. W. Hudnicks

Ordinary Bartow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

Know all Men by these Presents, That I S. R. Bennett

of Bartow County, State of Georgia, do hereby appoint

of Atlanta Ga my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever 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 15 day of March 1892.

S. R. Bennett [L. S.]

Executed in the presence of us:

G. W. Hudnicks Ordinary

Send money to me as follows, by Post Office Order

Cobb to Atlanta Ga P. O.

County, Georgia.

S. R. Bennett

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name S. R. Bennett

County Bartow

Disability Dis Am

Amount \$ 50

Entered on record March 7 1892.

W. H. HARRISON,

Secretary of Executive Department.

Applicant.

Geo. W. Harrison, State Printer, Atlanta, Ga.

Bennett, S. R.
Bartow Co

1893.

Application for Allowance

No. 86

For the Year Ending October 31, 1892.

FOR

Wendell Army

Applicant, S. R. Bennett

County, Bartow

Amount, 50

Date of Warrant, 3/16

Entered on record, 3/16 1892.

W. H. Harrison

Secretary Executive Department.

WARRANT PAID TO

M. R. Jones

Geo. W. Harrison, State Printer, Atlanta.

Bennett, S. H.
Bartow Co.
No. 1362
SOLDIER'S PENSION
1892.
FOR THE YEAR ENDING OCTOBER 26, 1891.
Name S. H. Bennett
County Bartow
Disability Left Arm
Amount, \$ 50
Entered on record March 7
W. H. HARRISON,
Surrogate of Superior Court.
Applicant

Bennett, S. H.
Bartow Co.
1893.
Application for Allowance
No. 86
FOR
Per the Year Ending October 26, 1892.
Wearable Army
Applicant, S. H. Bennett
County, Bartow
Amount, 50
Date of Warrant, 3/16
Entered on record, 3/16
Warrant Handed to
W. H. HARRISON, Surrogate of Superior Court, ALBANY, N. Y.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Bartow County.

PERSONALLY appears S. H. Bennett of Bartow 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 13 day of March 1844; 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 1, of 2th Regiment of Georgia Volunteers, Breming's Brigade; that whilst engaged in such military service at the battle of Gulphburg in the State of Alabama on the 2 day of July 1863, he was wounded as follows: that through the left arm near the wrist point rendering said arm substantially and essentially useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of 50 dollars, for the year 1893.

Sworn to and subscribed before me, this, the 18 day of March 1894. S. H. Bennett
Wm Hendricks Ordinary

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.

Bartow County.

I, Wm Hendricks Ordinary of said County, do certify that I am well acquainted with S. H. Bennett 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 7 day of March 1894.

Wm Hendricks
Ordinary Bartow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Bartow County.

Personally appears S. H. Bennett of Bartow

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 13 day of March 1844; 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 1, of 2th Regiment of Georgia Volunteers, Breming's Brigade; that whilst engaged in such military service at the battle of Gulphburg in the State of Alabama on the 2 day of July 1863, he was wounded as follows: Gun shot through the left wrist rendering the arm substantially and essentially useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of 50 dollars, for the year 1894.

Sworn to and subscribed before me, this, the 18 day of July 1895. S. H. Bennett
Wm Hendricks Ordinary

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.

Bartow County.

I, Wm Hendricks Ordinary of said County, do certify that I am well acquainted with S. H. Bennett 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 18 day of July 1895.

Wm Hendricks
Ordinary Bartow County.

Sworn to and subscribed before me, this, the 18th day of March, 1894. } S. H. Bennett
G. W. Hendricks Ordinary
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 S. H. Bennett 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 7 day of March, 1894.
G. W. Hendricks
Ordinary Barlow County.

Sworn to and subscribed before me, this, the 18th day of March, 1895. } S. H. Bennett
G. W. Hendricks Ordinary
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 Applicant 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 22nd day of March, 1895.
G. W. Hendricks
Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Barlow County. }
Know all Men by these Presents, That I, S. H. Bennett of Barlow County, State of Georgia, do hereby appoint A. M. Willis of Barlow County, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an 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 7 day of March, 1894.
S. H. Bennett [L. S.]
Executed in the presence of us
N. S. Anderson
G. W. Hendricks
DIRECTIONS.
Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Barlow County. }
Know all Men by these Presents, That I, S. H. Bennett of Barlow County, State of Georgia, do hereby appoint A. M. Willis of Barlow County, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an 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 22nd day of March, 1895.
S. H. Bennett [L. S.]
Executed in presence of us
N. S. Anderson
G. W. Hendricks
DIRECTIONS.
Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

(For Those Already Enrolled.)
8/1
Soldier's Pension.
1894.
Name S. H. Bennett
County Barlow
Disability Wounded Arm
Amount, \$ 50.00
3/2
W. H. HARRISON,
Secretary Executive Department.
WARRANT HANDLED TO
A. M. Willis
Geo. W. Harrison, State Printer, Atlanta.

Bennett, S. H.
Barlow Co.
(For Those Already Enrolled.)
No. 951
SOLDIER'S PENSION.
1895.
Name S. H. Bennett
County Barlow
Disability Wounded Arm
Amount, \$ 50.00
3/4
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDLED TO
A. M. Willis
Geo. W. Harrison, State Printer, Atlanta.

Bennett, S. H.
Barrow
(For These Already Enrolled.)
No. 81

Soldier's Pension.
1894.

Name S. H. Bennett
County Barrow
Disability Wounded Arm
Amount, \$ 50.00
1894.
3/2
W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDLED TO
S. H. Bennett
11/11/12

Bennett, S. H.
Barrow
(For These Already Enrolled.)
No. 951

SOLDIER'S PENSION.
1894.

Name S. H. Bennett
County Barrow
Disability Wounded Arm
Amount, \$ 50.00
1894.
3/2
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDLED TO
S. H. Bennett
11/11/12

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.
Questions for Applicants to Answer.

STATE OF GEORGIA.
Barrow County.
S. H. Bennett of said State and County, hereby applies for the pension provided by Act of 1910, 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? (Give County and Post-office) S. H. Bennett - Barrow, Alabama

2. How long and since when have you been a continuous resident citizen of this State? I have lived in Georgia all my life 68 yrs

3. Did you enter in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? In the Confederate Army

4. When and where, and in what Company and Regiment did you enlist? May 1st, 1861, Co. # 1, 2nd Regt. Ga. Col.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Oct 14, 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? April 9, 1865, Appomattox Court House Virginia

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were I was there present

a. Where was your Command when you left it? "

b. When did you leave the Command? "

c. For what cause did you leave? "

d. By whose authority did you leave? "

e. For how long was your leave granted? In what way? "

f. Why did you not return to your Command after leave expired? "

g. In what way were you prevented? "

h. What effort did you make to return? "

i. Were you captured during the war? Yes

1. If so, when, and where? In what prison were you held and when were you released? July 1865, Belle Isle Prison, New York - July 1865

9. What property of every description was owned, in the use, possession and control of yourself, wife, and its cash value on the 4. Nov. 1908? (Make list by items and value) I own nothing in 1908, but a little old mule and a cow - worth \$50.00 each - together about \$100.00 - wife has none

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None at all

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list) I now have two little mules and two cows all worth about \$100.00 - no more

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? \$200.00 - from pension

13. Are you drawing a pension of any amount from this State or the United States? Yes from the State

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? I have applied and am waiting for the pension

Sworn to and subscribed before me, this the 11th day of Oct, 1912
S. H. Bennett
Ordinary of Barrow County.

Barrow County.
S. H. Bennett
Wounded Arm
Amount, \$ 50.00
1894.
3/2
W. H. HARRISON,
Secretary Executive Department.

Barrow County.
S. H. Bennett
Wounded Arm
Amount, \$ 50.00
1894.
3/2
W. H. HARRISON,
Secretary Executive Department.

Barrow County.
S. H. Bennett
Wounded Arm
Amount, \$ 50.00
1894.
3/2
W. H. HARRISON,
Secretary Executive Department.

J. W. LINDSEY,
Commissioner of Pensions.
10/30/1912
ENTERED POSTED OFFICE

1. Why did you not return to your Command after leave expired? //

2. In what way were you prevented? //

3. What effort did you make to return? //

4. Were you captured during the war? *Yes*

5. If so, when and where? *In what prison were you held and when were you released?* *July 1901*

6. What property of any description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value.) *Nothing in 1908 but a little old mule and 12 cows - worth \$500.00 - together about \$600.00 - wife has none*

7. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? *None at all*

8. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list.) *I now have two little mules and two cows, all worth about \$100.00 - no more*

9. What annual or monthly income of earnings of yourself and wife and the source derived have you? *\$200.00 - from the State*

10. Are you drawing a pension of any amount from this State or the United States? *Yes, from the State*

11. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? *I have applied and am on the small pension roll of Georgia*

Sworn to and subscribed before me, this the *22nd* day of *Oct* 191*2* at *Barrow* Ordinary of *Barrow* County.

BAD COPY - LIGHT PRINT

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Barrow County.

John G. Heard of said State and County is hereby presented as a witness in support of the application of *S. K. Bennett* for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? *John G. Heard, near Marietta, Cobb Co. Ga.*
2. How long and since when have you known *S. K. Bennett* the applicant? *For fifty years*
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? *Barrow, Ga. Ga. I have been acquainted with him for the last fifty years*
4. When, where and in what Company and Regiment did *S. K. Bennett* enlist during war from 1861 to 1865? (Give date and place.) *May 1861 Barrow, Ga.*
5. How did you obtain your information of this Service? *I was present & accompanied the Co. from its surrender*
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *From May 1861 to Feb. 1865*
7. When and where was his Command surrendered or discharged (give date and place.) *Fourth of April, Appomattox Court House, Va.*
8. Were you personally present at the Surrender? *I was not*
9. If not, where were you and how came you there? *I left Va. Feb. 1. 1865 on a private mine train, full of powder, & could not return on account of the mine train, & I did not return to the State of Ga.*
10. Was the applicant personally present with his Command at surrender? *I understand he was*
11. If not where was he and how came him there?
12. When did he leave his Command? *Where was his Command when he left it?* *for what cause did he leave?* *By whose authority did he leave* *and how long was he granted leave?* *How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically).*
13. In what way was he prevented from returning to his Command? *How do you know?*
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? *If so, when and where?* *In what prison was he held?* *and when released?*

Sworn to and subscribed before me, this the

24th day of *October* 191*2*

John G. Heard

Ordinary

of *Cobb* County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Barrow County.

Personally before me comes *S. K. Bennett* who on oath says that they are freeholders residing in said County and we know the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make list by items and value.)

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.)
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full values? or was it made to obtain a pension?

Sworn to and subscribed before me, this the

22nd day of *Oct* 191*2*

of *Barrow* Ordinary, County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Barrow County.

S. K. Bennett Ordinary of said County, certify that I know the applicant *S. K. Bennett* for Pension is the person he represents himself to be and resides in said County. That I also know *John G. Heard* the witness swearing to the service and *John G. Heard* who are freeholders, that they are all 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. That the Tax Returns of *Barrow* shows that *S. K. Bennett* and wife value for tax is in 1908 \$ *103* for 1909 \$ *103* for 1910 \$ *107* Sworn under my hand and official seal of office this *26th* day of *Oct* 191*2* at *Barrow* Ordinary, County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall 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 and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *From May 1861 to Feb 1865*

7. When and where was his Command surrendered or discharged (give date and place) *North of Appomattox Court House Va*

8. Were you personally present at the Surrender? *I was not*

9. If not, where were you and how came you there? *I left Va Feb 1 1865 on a private train, I was not present at the surrender of the 1st Va Cavalry.*

10. Was the applicant personally present with his Command at surrender? *I was not*

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

12. When did he leave his Command? _____ Where was his Command when he left it? _____ for what cause did he leave? _____

By whose authority did he leave _____ and how long was he granted leave? _____ How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) _____

13. In what way was he prevented from returning to his Command? _____ How do you know? _____

14. What effort did he make to return to his Command and how do you know? _____

15. Was applicant captured as a prisoner _____ If so, when and where? _____

In what prison was he held? _____ and when released _____

Sworn to and subscribed before me, this the *24th* day of *October* 1912 *John G. Heard* Ordinary of *Cobb* County.

Being in the hands of the Court House, I am not present at the surrender of the 1st Va Cavalry.

of _____ Ordinary, _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.
Bartow County.
 I, *Guthrie* Ordinary of said County, certify that I know the applicant *John G. Heard* is the person he represents himself to be and resides in said County. That I also know *John G. Heard* the witness swearing to the service and _____ who are freeholders, that they are all 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. That the Tax Returns of *Bartow* shows that *John G. Heard* and wife value for tax is in 1908 \$ *2* for 1909 \$ *103* for 1910 \$ *107* for 1911 \$ *263* day of *Oct* 1912

Sworn under my hand and official seal of office this _____ day of _____ 1912
Guthrie Ordinary of *Bartow* County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall 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 and certified by him.
 4. The applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

Georgia Murray County
 Personally came before me Jasper Richardson who on oath says that he surrendered with S K Bennett at Appomattox Court House Va with Lee Army in 1865
 Sworn to and subscribed before me } *Jasper Richardson*
Oct 18 1912 } *man*
J. M. Campbell
 Ordinary of Murray Co

Bennett, S. K.
 NAME _____ YEAR *1865* COUNTY *Bartow*
 WHEN AND WHERE BORN? *Resident of Georgia, all his life, 35 years.*
 ENLISTED WHEN AND WHERE? *May 1861, - Canton, Georgia.*
 RANK: _____
 COMPANY AND REGIMENT? *Co. F. 2nd Regt. of Ga. Vols.*
 NAME OF CAPTAIN AND COLONEL? *John G. Heard, Commander of the Co.*
 WOUNDED? _____
 CAPTURED, WHEN AND WHERE? *July 1865, captured at Gettysburg, Penn., in Prison, David's Island, New York.*
 RELEASED? *From Prison, David's Island, N.Y. Paroled Sept. 1865, then exchanged.*
 WHEN AND WHERE SURRENDERED? *April 9, 1865, - Appomattox Court House, Virginia.*
 IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? _____
 DIED, WHEN AND WHERE? _____
 BURIED: _____
 WITNESSES: *Commander of the Company, -* No date.

Sum to Gro
Subscribed before me } Gaspar Richardson
Oct 18. 1892. mark
(C.K.)
J.M. Campbell
Ordinary of Murray Co

CAPTURED, WHEN AND WHERE? July 1865, captured at Gettysburg, Pa.
In Prison, David's Island, New York.
RELEASED: From Prison, David's Island, N.Y. Paroled Sept. 1865,
then exchanged.
WHEN AND WHERE SURRENDERED? April 9, 1865, Appomattox Court H
Virginia.
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?
DIED, WHEN AND WHERE?
BURIED:
WITNESSES: General Hospital, Company,-- No data.

No. 1107
STATE OF GEORGIA, } Atlanta, Ga., Feb 13 1890
EXECUTIVE DEPARTMENT.

Mr. S K Bennett 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

Arm disabled Fifty 1001 Dollars

He is entitled to receive the sum of 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 Hanson GOVERNOR.

CLERK EXECUTIVE DEPARTMENT.

50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 1001 Dollars,
per above voucher, this 13 of Feb 1890

S K Bennett, by his
Atty in fact, Will Foster

1891.
No. 785
STATE OF GEORGIA, } Atlanta, Ga., Feb 13 1891.
EXECUTIVE DEPARTMENT.

Mr. S K Bennett 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 Acts

approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for

Arm disabled

He is entitled to receive the sum of 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, W H Hanson GOVERNOR.

CLERK EXECUTIVE DEPARTMENT.

50

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

Fifty Dollars,
per above voucher, this 13 of Feb 1891.

S K Bennett
By A M Fouts

of John H. Bennett 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 Arm disabled

He is entitled to receive the sum of Fifty 00/100 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.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/100 Dollars,
per above voucher, this 13 of July 1890.

S. K. Bennett, by his
att. in fact, W. H. Foute.

Mr. John H. Bennett of the County
of Barton 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 Arm disabled

He is entitled to receive the sum of Fifty 00/100 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,

W. H. Harrison

SECY EXECUTIVE DEPARTMENT.

GOVERNOR.

50

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

Fifty Dollars,
per above voucher, this 13 of July 1891.

S. K. Bennett
By W. H. Foute.

Barton

Maimed Soldiers.

Voucher No. 1107

Amount \$ 50

Paid to S. K. Bennett

For Arm disabled

July 13 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

W. H. Foute

Bennett, S. K.

Barton

1891.

Maimed Soldiers.

Voucher No. 785

Amount \$ 50

Paid to S. K. Bennett

For Disabled Arm

July 13 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

W. H. Foute

Audited

1889.

COMPTROLLER-GENERAL.

Barton

Maimed Soldiers.

Voucher No. 756

Amount \$ 50

Paid to Samuel K. Bennett

For Left arm

disabled
July 20 1889.

Included in Warrant No.

issued to Treasurer.

1889.

WARRANT CLERK.

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

W. H. Foute

Feb'y 13 1890

Included in warrant No. _____
issued to Treasurer.

18

WARRANT CLERK.

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

Am Foute

Feb'y 13 1891.

Included in warrant No. _____
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Am Foute

disabled Feb'y 20. 1889

Included in Warrant No. _____
issued to Treasurer.

1889

WARRANT CLERK.

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

Am Foute

NAME, Bennett, Samuel K.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

COMPANY AND REGIMENT? Private, Co. F, 2d Regiment Ga. Vols. Benning's Brigade.

NAME OF CAPTAIN AND COLONEL? F. M. Daniel 3d Lieutenant.

WOUNDED? At Gettysburg Pa., July 2, 1863 in left hand, entire arm
perished away.

CAPTURED, WHEN AND WHERE?

RELEASED,

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, F. M. Daniel 3d Lt. Dr. J. M. Young, Dr. Lindsay Johnson.
No data.

P.O. 1889

COUNTY. Bartow.

No. 756

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } *Atlanta, Ga. Feb'y 20th 1889*

Mr. *Samuel K. Bennett* 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
Left arm disabled
He is entitled to receive the sum of *Eighty two* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.
The Treasurer will pay the said and hold his receipt for this voucher, and return same to
Executive Department for warrant.

By the Governor
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

50.
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Eighty two Dollars.
per above voucher, this *20* of *Feb'y* 1889.
S. M. Foute, atty. in fact.
for Saml. K. Bennett.

NAME OF CAPTAIN AND COLONEL? F. M. Daniel 3d Lieutenant.

WOUNDED? At Gettysburg Pa., July 2, 1863 in left hand, entire arm
perished away.

CAPTURED, WHEN AND WHERE?

RELEASED,

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, F. M. Daniel 3d Lt. Dr. J. M. Young, Dr. Lindsay Johnson.
No data.

P.O. 1889

COUNTY. Bartow.

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

Left arm disabled

He is entitled to receive the sum of *Fifty 00/100* Dollars

for such disability, the same being the allowance due for the year ending October 24, 1889:

The Treasurer will pay the said and hold his receipt for 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,

Fifty 00/100

per above voucher, this *20* of *July* 1889.

S. M. Forte, atty. in fact.
for Samuel K. Bennett.

Pension office Sept. 27th 1915

The Records of Co. C. rolls show that husband of applicant was absent on Horse Detail from Sept. 21st 1864. No further record found of him. Amend and state where was husband from Sept. 21st 1864 to surrender of his command. Why he did not return to command after furlough expired. Then prove same to be true. Was not present at surrender.

J.W. Lindsey, Com of Pensions.

Best of Day (Mrs)
R. N. Beck
Barton County

No. 7200-0-2

Widow's Pension

UNDER ACT 1910

County Barton

Name Mrs. One Beck

Widow of R. N. Beck

Co. B. R. Beck

Beck's Regiment

9/23-1915 J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer

9/9-1914
12/31-1914

Pension office
The Records of Co. C
on Horse Detail from
Sept. 21st 1864
Amend and state, where
his command. Why he
then prove same to

Co. B. *Richard. High*
Reuben. Christman
William. Christman
9/23-1914
J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer

9/9-1914
13/31-1914

Pension office Sept. 27th 1915

The Records of Co. C. rolls show that husband of applicant was absent on Horse Detail from Sept. 21st 1864. No further record found of him.

Amend and state, where was husband from Sept. 21st 1864 to surrender of his command. Why he did not return to command after furlough expired. Then prove same to be true. ~~was not present at surrender.~~
J. W. Lindsey, Com of Pensions.

Widow's Pension

UNDER ACT 1910

Becky High
Richard County
No. 7200-1914

County

Richard

Name

Wm. D. High

Widow of

R. N. High

Co.

B. High

State

Georgia

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer

9/9-1914
13/31-1914

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

STATE OF GEORGIA,
Bartow County.

Personally before me comes *Mrs. D. C. Best* of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of 1910, and submit testimony to make out the same, true answers makes to the following questions to-wit:

1. What is your name, and where do you reside? *D. C. Best, Bartowville, Ga.*
2. How long and since when have you been a continuing resident of the State of Georgia? *I have lived in Ga. since I was 8 years old.*
3. When, where and to whom were you married? *1867, near Bartowville, Bartow County, Ga. to R. N. Best.*
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.) *1861, Bartowville, Ga. Co. B. Phillips Legion of Cavalry.*
5. When and where did the Commands of your husband surrender or discharge from the army?
6. Was your husband personally present at the time of the surrender or discharge of this Command? *Yes.*
7. If he was not present state clearly where he was?
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?
 - g. Was he captured by the enemy at any time?
 - h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
9. When and where did your husband die? *Bartowville, Ga. Sep. 12, 1910.*
10. Were you residing together when he died? *Yes.*
11. If not, how long had you resided apart?
12. 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 and where situated.) *I never owned any property.*
13. 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.) *I have not sold any property.*
14. What property of any description of any value have you now? Give list and cash value. *I have about \$1300 in cash.*
15. What are your annual earnings or income from any source and their value? *None.*
16. Have you or your husband heretofore been paid a pension by the State? *No.*
If so, when and for what cause were you or your husband placed on the Roll?

Sworn to and subscribed before me this the *18* day of *Aug* 1915.
Wm. Lindsey Ordinary.
of *Bartow* County.

g. 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? Cartersville Ga. Sep 12 1910
k. Were you residing together when he died? yes
l. If not, how long had you resided apart?
m. 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 and where situated).
I never owned any property
n. 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).
I have not sold any property
o. What property of any description of any value have you now?
p. Give list and cash value I have about \$200 in notes in my
q. What are your annual earnings or income from any source and their value?
none
r. Have you or your husband heretofore been paid a pension by the State? no
s. If so, when and for what cause were you or your husband placed on the Roll?

Sworn to and subscribed before me this the
18th day of Aug. 1915
Guthrie
Ordinary.
of Barlow County.

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

STATE OF GEORGIA,

Barlow County.

Personally before me comes John S. Leach & J. N. Cobb who after being duly sworn true answers to make, to the following questions, answers as follows:

1. What is your name and where do you reside? John S. Leach & J. N. Cobb, Cartersville Ga
2. How long and since when have you known Orin Beal applicant?
known him fifty years more than fifty years
3. How long and since when has he continuously resided in this State? (Give date). Here
4. When and to whom was she married? 1866 Mrs Orin Beal How do you know? husband
5. How long and since when did you know R. N. Beal her husband?
more than fifty years
6. When and where did R. N. Beal the husband of Applicant die?
Sept 13 1910, Cartersville Ga
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?
no
9. Were they divorced?
no
10. When, where and in what Company and Regiment did R. N. Beal enlist?
May 1861, Cartersville, Ga. Company B, Phillips Legion of Cavalry
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from May 1861 to April 1864
12. When and where did his Command surrender, and was discharged?
April 16 1865, Cartersville, Ga
13. Were you personally present when it was surrendered? yes If not where were you present and how came you there?
present
14. Was the husband of applicant personally present at surrender? yes If not where was he? was present when, where and for what cause did he leave his Command? (Give date). 1864 By whose authority did he leave his Command? 11 and how long was he granted leave? 11 How do you know all this?
we were in the same company and knew personally as to the facts stated
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
11
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?
11

Sworn to and subscribed before me this the
18th day of Aug. 1915
Guthrie
Ordinary.
of Barlow County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Barlow County.

Personally before me comes R. N. Beal & Orin Beal who on oath says that they are freeholders of said County and that they know Mrs Orin Beal 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	<u>none</u>	\$
Notes and accounts due	<u>small</u>	\$
Total	<u>small</u>	\$

Schedule (B).

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

Personal property	<u>small</u>	\$
Money, Notes and Accounts	<u>small</u>	\$

Schedule (C).

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

<u>none</u> Acres of land.. worth	<u>11</u>	\$
<u>none</u> Horses and Mules	<u>11</u>	\$
<u>none</u> Cows and Hogs	<u>11</u>	\$
<u>none</u> Other Property	<u>11</u>	\$
<u>none</u> Income and Earnings	<u>11</u>	\$
Total Value of all property and effects	<u>11</u>	\$

Sworn to and subscribed before me this the
18th day of Aug. 1915
Guthrie
Ordinary.
of Barlow County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

I, Guthrie Ordinary of said County do certify that I know Mrs Orin Beal 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 on the 4th Nov. 1908.

That I also know John S. Leach & J. N. Cobb the witness who swears to the service of husband, and R. N. Beal & Orin Beal 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.

That the Tax Returns Mrs Orin Beal Returned for Tax is for 1908 \$ 11 for 1910 \$ 11 for 1911 \$ 11 for 1912 \$ 11 for 1913 \$ 11 for 1914 \$ 11 for 1915 \$ 11 for 1916 \$ 11 for 1917 \$ 11

Sworn under my hand and official seal of office this 18 day of September 1915

(SEAL.) Guthrie Ordinary, 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. Only widows who married prior to first January 1870, are entitled.
4. All affidavits must be made before the Ordinary.
5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some person, or by general reputation.

April 16, 1905. G. S. Gurnston V. B.
13. Were you personally present when it was surrendered? yes If not where were you present and how came you there?
14. Was the husband of applicant personally present at surrender? yes If not where was he? was present when, where and for what cause did he leave Command? (Give date.) 1.1.1 By whose authority did he leave his Command? 1.1.1 and how long was he granted leave? 11 How do you know all this? we were in the same company and knew personally all the facts stated
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 Aug, 1915 John S. Leake Geo H. Cobb
G. S. Gurnston Ordinary.
of Bartow County.

STATE OF GEORGIA,
Bartow County.
I, John S. Leake Ordinary of said County do certify that, I know Mrs. Ora Best 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 on the 4th Nov., 1905.
That I also know John S. Leake the witness who swears to the service of husband, and Geo H. Cobb 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.
That the Tax Returns Mrs. Ora Best Returned for Tax is for 1905 7 for 1910 8 for 1911 8 for 1912 8.00 for 1913 8.00 for 1914 8.00 for 1915 8 for 1916 8 for 1917 8 for 1918 8 for 1919 8
Sworn under my hand and official seal of office this 19th day of September, 1915.
(SEAL) G. S. Gurnston Ordinary,
Bartow 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. Only widows who married prior to first January 1870, are entitled.
4. All affidavits must be made before the Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Application for Pension Due to a Deceased Pensioner
(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)
(Under Act Approved August 15, 1904)

GEORGIA, Floyd County.
Personally before me, the Ordinary of said County, comes E. W. Best
Orie Saxon Best of Bartow County, who, after being sworn, on oath says that he knew Mrs. Ora Best of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Floyd County, in this State, on the 24th day of July, 1929 and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 195.00, per sworn statements fully and completely ITEMIZED hereto attached.
Sworn to and subscribed before me, Danny Johnson Ordinary
Floyd County
(Seal of Ordinary) E. W. Best

CERTIFICATE OF ORDINARY

GEORGIA, Bartow County.
I, R. M. James Ordinary of said County, do certify that I personally know E. W. Best, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. Ora Best while in life and that this was the same person whose name appears on the Pension Roll of Bartow County, and was paid a Pension of Twenty & no more (\$20.00) Dollars in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.
Given under my hand and official seal, this 12th day of October, 1929.
(Seal of Ordinary) R. M. James Ordinary,
Bartow County.

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

Application for Pension Due to a Deceased Pensioner
(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)
(Under Act Approved August 15, 1904)

GEORGIA, Bartow County.
Personally before me, the Ordinary of said County, comes C. H. Griffin of said County, who, after being sworn, on oath says that he knew Mrs. Ora Best of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Floyd County, in this State, on the 24th day of July, 1929 and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 195.00, per sworn statements fully and completely ITEMIZED hereto attached.
Sworn to and subscribed before me, R. M. James Ordinary
Bartow County
(Seal of Ordinary) C. H. Griffin

CERTIFICATE OF ORDINARY

GEORGIA, Bartow County.
I, R. M. James Ordinary of said County, do certify that I personally know C. H. Griffin, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. Ora Best while in life and that this was the same person whose name appears on the Pension Roll of Bartow County, and was paid a Pension of Twenty & no more (\$20.00) Dollars in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.
Given under my hand and official seal, this 29th day of July, 1929.
(Seal of Ordinary) R. M. James Ordinary,
Bartow County.

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "Just, true, due, unpaid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

ITEMIZED hereto attached.
Sworn to and subscribed before me,
Harry Johnson Ordinary
Floyd County
(Seal of Ordinary)

Edw. Best

CERTIFICATE OF ORDINARY

GEORGIA, *Barlow* County.

I, *R. M. Gaines* Ordinary of said County, do certify that I personally know *Edw. Best*, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew *Mrs. Ora Best* while in life and that this was the same person whose name appears on the Pension Roll of *Barlow* County, and was paid a Pension of *Twenty five* (\$25.00) Dollars in said County for 19 *29*, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this *12th* day of *November* 19*29*,
R. M. Gaines Ordinary
Barlow County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____, who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filed out.

ITEMIZED hereto attached.
Sworn to and subscribed before me,
R. M. Gaines Ordinary
Barlow County
(Seal of Ordinary)

C. H. Luffin

CERTIFICATE OF ORDINARY

GEORGIA, *Barlow* County.

I, *R. M. Gaines* Ordinary of said County, do certify that I personally know *C. H. Luffin*, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew *Mrs. Ora Best* while in life and that this was the same person whose name appears on the Pension Roll of *Barlow* County, and was paid a Pension of *Twenty five* (\$25.00) Dollars in said County for 19*29*, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this *29th* day of *November*, 19*29*,
R. M. Gaines Ordinary
Barlow County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____, who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filed out.

For *Frank BARTON* County

19 *29*

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness and funeral)

R. M. Gaines Ordinary

For *Mrs. Orie Saxon Best*

Date of Death *July 24th* 19*29*

Amount \$ *100.00*

Approved and ordered paid *of*

Feb. 20, 1930. J. C. L. Lawrence
Commissioner of Pensions.

22 1/2
Paid in error, refunded

Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

For *Barlow* County

19 *29*

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

For *Mrs. Ora Best*

Date of Death *July 24 1929*

Amount \$ *100.00*

Approved and ordered paid

Oct. 10, 1929

JOHN W. CLARK,

Commissioner of Pensions.

Paul Nugent
R. M. Gaines

Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

22. 1930.
Paid in error, refunded

Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

Paul M. Gaines
P. M. Gaines
Clerking

Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

OFFICE OF
COURT OF ORDINARY
BARTOW COUNTY
R. M. GAINES, ORDINARY

Cartersville, Ga., July 9 1930

Hon. R. DeT. Lawrence
Commissioner of Pensions
State Capitol
Atlanta, Georgia.

Dear Sir:

I have your favor with check for \$400.00 for funeral expenses. I note one of these is for the expenses of Mrs. Ora Saxon Best. I am returning you this claim that you may check this up as our records show that this amount was paid to Mr. Cole, the undertaker March 15, 1930. It must be that I in some manner got two claims filed for this benefit. Please advise me your records in this matter at once, and I will return the check to you, as I am sure this claim has been paid.

Please send me some blank forms for the pensioner to sign, authorizing some other party to receive their pensions.

Very truly yours,
R. M. Gaines
Ordinary Bartow County, Ga.

Rome, Ga., October 2, 1929. 192
M Estate, Mrs. Orié Anna Saxon Best
Rome, Ga.
IN ACCOUNT WITH
Emmett Cole
DIRECTOR OF FUNERALS
5-7 SIXTH AVENUE
Lincoln Ambulance Service
TELEPHONE 407.

July, 24, 1929, To Casket	-----	\$150.00
Embalming	-----	25.00
Hearse (Rome To Cartersville)	20.00	
Total	----	\$195.00

The above and foregoing account is rendered for Funeral Expenses of Mrs. Orié Anna Saxon Best, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me, this 10th day of Oct 1929
Harry Johnson Ordinary
Floyd County

Rome, Ga., Aug. 1, 1929 192
M. Re. Orié Best
Rome, Ga.
IN ACCOUNT WITH
Emmett Cole
DIRECTOR OF FUNERALS
5-7 SIXTH AVENUE
TELEPHONE 407

July, 24, 1929, Casket	-----	\$150.00
Embalming	-----	25.00
Funeral Coach	-----	20.00
Total	----	\$195.00

The above and foregoing account is rendered for Funeral expenses of Mrs. Orié Best, who died without owning sufficient property to pay this bill

Sworn to and subscribed before me this 30th day of July 1929
Harry Johnson Ordinary
Floyd Co. Ga.

Received of R. M. Gaines, Ordinary, Bartow county, One Hundred (\$100.00) funeral benefit from the Pension department.
This March 15, 1930.

Hon. R. Def. Lawrence,
Commissioner of Pensions
State Capitol
Atlanta, Georgia.

Dear Sir:

I have your favor with check for \$600.00 for funeral expenses. I note one of these is for the expenses of Mrs. Ora Saxon Best. I am returning you this claim that you may check this up as our records show that this amount was paid to Mr. Cole, the undertaker March 15, 1930. It must be that I in some manner got two claims filed for this benefit. Please advise me your records in this matter at once, and I will return the check to you, as I am sure this claim has been paid.

Please send me some blank forms for the pensioner to sign, authorizing some other party to receive their pensions.

Very truly yours,

R. M. Gaines
Ordinary Bartow County, Ga.

Harry Johnson Ordinary
Floyd County

Rome, Ga., Aug. 1, 1929 192

M. Rs. Orie Best

Rome, Ga.

IN ACCOUNT WITH

Emmett Cole

DIRECTOR OF FUNERALS

5-7 SIXTH AVENUE

TELEPHONE 407

July, 24, 1929,	Casketing-----	\$150.00
	Funeral Coach-----	25.00
	Total	\$175.00

The above and foregoing account is rendered for funeral expenses of Mrs. Orie Best, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me this 30 Day of Aug 1929

Harry Johnson
Ordinary Floyd Co., Ga.

Received of R. M. Gaines, Ordinary, Bartow county, One Hundred (\$100.00) funeral benefit from the Pension department.
This March 15, 1930.

Emmett Cole

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow
County.

B. F. Bibb
W. H. Smith of *Barlow* Ga. hereby authorizes

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

at *Maconville* by *Chick*

Witness my hand and seal this *24* day of *April* 1895.

Executed in presence of

A. A. Galt *J. M. Bibb*

W. H. Smith

Bibb B. F.
Barlow
O.K. No. *84*

INDIGENT PENSION
1895.

Name *B. F. Bibb*
County *Barlow*
Ground *Infantry & Cavalry*
April 1895

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Atty

Geo. W. Harrison, State Printer, Atlanta.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

EX. 111
name to me
by Clerk
1895
H. B. Bitt

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

B. F. Bitt

hereby authorize

G. W. Hendricks of Cartersville Ga

to receive and receipt for the pension allowed and request that he remit same to me at Cartersville Ga by Check

Witness my hand and seal this 24 day of April 1895.

Executed in presence of

A. A. Bates, B. H. Bitt
H. B. Bitt

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow County.

Personally came before me J. P. Bowdoin

R. S. Bradley

both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully B. F. Bitt

applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

Angina Pectoris (organic disease of heart)

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this 24 day of April 1895.

G. W. Hendricks
Ordinary

J. P. Bowdoin
R. S. Bradley

INDIGENT PENSION

1895.

Name B. F. Bitt

County Barlow

Ground

Sworn to and subscribed before me, this 24 day of April 1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

P. F. Bible
 B. F. Bible
 W. H. No. 84
INDIGENT PENS
1895.
 Name B. F. Bible
 County Barlow
 Ground Indigent
 RICHARD JOHNSON,
 Secretary Executive Dep.
 WARRANT HANDED TO
Atty
 Geo. W. Harris, State Printer, Atlanta.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this
 the 24 day of April, 1895.
W. H. Hendricks
 Ordinary
John P. Borden
R. S. Bradley

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Barlow County.
 I, W. H. Hendricks Ordinary in and for said County, hereby certify that
 the applicant B. F. Bible resides in said County, and was a bona
 fide resident of this State on the first day of January, 1894, and that the witnesses, viz.:
S. C. Pritchard
 are of trustworthy character and that their statements are entitled to full faith and credit.
 I further certify that before answering the foregoing questions, the applicant and each witness took
 the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
 before same were signed.
 I further certify that the tax digests of Barlow County show that applicant
 returned for taxation in his name in 1893, nothing dollars
 of property, and in 1894, nothing dollars of property.
 Witness my hand and seal of office, this 18 day of May, 1895.
W. H. Hendricks Ordinary
 of Barlow County.

NOTE.
 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words:
 "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole
 truth, so help you God."

10. What is the applicant's occupation and physical condition? He has no
occupation. Physical condition is bad.
Has bad nervous spells. Said to be lame
from heart trouble.

11. Is the applicant unable to support himself by labor of any sort, if so, why? He is.
because of his ill health, he being unable
to exert himself, without bringing on
bad nervous spells

12. How was he supported during the years 1893 and 1894? By his wife

13. What portion of his support for these two years was derived from his own labor or income?
None

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension
 under the Act of December 15th, 1894? He has been declining
in health for a little over two years, and
suffers at times with nervous prostration.
to such an extent and so bad as to render
him entirely unable to work at any calling.

15. What interest have you in the recovery of a pension by this applicant? None
 Sworn to and subscribed before me, this
 the 24 day of April, 1895.
W. H. Hendricks Ordinary
S. C. Pritchard

9. For how long a period did you discharge regular military duty? *2 yrs & 3 months*
10. When, where and under what circumstances were you discharged from service? *Came home in May 1865 from the service, not having been injured, but afterwards did so in June 1865*
11. What is your present occupation? *Nothing*
12. How much can you earn per annum by your own exertions or labor? *Nothing*

13. What has been your occupation since 1865? *Handled some mill & saw, purchased some and worked at carpenter's trade some*

14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *One hundred dollars, not able to contribute any amount by labor have no income*

15. What is your present physical condition and how long have you been in such condition? *I am suffering from what I call Heart Trouble. Have been in this condition for two years, so as unfit and disabled me from doing any physical labor*

16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *Infirmary and poverty*

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *About two years ago I was affected with an acute pain near my heart and laid down my left arm, which has affected me constantly almost ever since, and I have been unable to exert myself either in walking or performing any kind of manual labor since that time without great pain, and now I cannot walk but a very short distance without stopping to rest, in account of shortness of breath and severe pain in the region of my heart.*

18. What property, effects or income do you possess? *None*

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same? *None*

Nashville, Tenn.

6. Were you a member of the same company and regiment? *I was*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *About two years and three months. He made a good soldier. Remained till the end of the war*

8. What property, effects or income has the applicant? (Give your means of knowledge.) *None. I am personally acquainted with his condition*

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *None*

20. In what County did you reside during those years and what property did you then return for taxation? *Barton County, Mo.*

21. How were you supported during the years 1893 and 1894? *By my wife*

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *One hundred dollars. I contributed nothing*

23. What was your employment during 1893 and 1894? What pay did you receive in each year? *Nothing*

24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *Yes, wife. Four children at home, aged 14, 11, 7 & 5. Three boys one girl. All minors and small.*

25. Are you receiving a pension under any law of this State, if so what amount and for what disability? *No*

26. Are you receiving any aid from your County, and if so, how much? Did you ever apply for such aid? *No*

Sworn to and subscribed before me this the *24* day of *April* 1895. *B. H. Bitt*
W. H. Hendricks Ordinary
 of *W. H. Hendricks* County.

17th, which has affected me constantly almost ever since, and I have been unable to exert myself either in walking or performing any kind of manual labor since that time without great pain, and now I cannot walk but a very short distance without stopping to rest, in account of shortness of breath and severe pain in the region of my heart.

18. What property, effects or income do you possess?

None

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same?

None

24. Are you married and have you a family? If so, is your wife living and how many children have you?

Give age and sex of children and their means of support? Yes, wife. 4 children at home, aged 14, 11, 7 & 5. Three boys one girl. All minors and small.

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?

No

26. Are you receiving any aid from your County, and if so, how much? Did you ever apply for such aid?

No

Sworn to and subscribed before me this the

24 day of April 1895.

Ordinary

County.

B. F. Bibb

Applicant.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

B. F. Bibb hereby authorize G. W. Hendricks of Cartersville 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 23rd day of January 1897.

B. F. Bibb [L. S.]

Executed in presence of

L. R. Richard
W. J. King

POWER OF ATTORNEY.

State of Georgia,

Barlow County.

B. F. Bibb hereby authorize G. W. Hendricks of Cartersville 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 1st day of January 1898.

B. F. Bibb [L. S.]

Executed in presence of

W. J. King
J. A. Bailey

Bibb, B. F.
Barlow Co.
ACT OF 13 DEC. 184.
(For Those Already Enrolled.)

No. 1694

INDIGENT

Soldier's Pension.

1897.

Name B. F. Bibb
County Barlow

2/2 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

G. W. H.

W. W. HARRISON, STATE PRINTER, ATLANTA.

No later.

Bibb, B. F.
Barlow Co.
ACT OF 13 DEC. 184.
(For Those Already Enrolled.)

No. 2266

INDIGENT

SOLDIER'S PENSION,

1898.

Name B. F. Bibb
County Barlow

WARRANT ISSUED

1/25 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

G. W. H.

W. W. HARRISON, STATE PRINTER, ATLANTA.

Bibb, B. F.
 Bartow Co.
 (For Those Already Enrolled.)
 No. 1694
 INDIGENT
 Soldier's Pension
 1897.
 Name B. F. Bibb
 County Bartow
 2/2 189
 RICHARD JOHNSON,
 Commissioner of Pensions
 WARRANT HANDLED TO
 G. W. H.
 No later -
 SEC. W. HARRISON, STATE PRINTER, ATLANTA.

Bibb, B. F.
 Bartow Co.
 (For Those Already Enrolled.)
 No. 2266
 INDIGENT
 SOLDIER'S PENSION,
 1898.
 Name B. F. Bibb
 County Bartow
 WARRANT ISSUED
 4/26 1898
 RICHARD JOHNSON,
 Commissioner of Pensions
 WARRANT HANDLED TO
 G. W. H.
 SEC. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears B. F. Bibb of Bartow 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 Spring 1871; that he is 51 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 2 1/2 yrs in Company C of 4th Regiment of S. C. Vol. Cavalry; that his physical condition is as follows: Suffering from Angina Pectoris Chronic.

that his property consists of the following items Nothing

of the value of Nothing 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 1897. I have heretofore as a resident of Bartow county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the 23 day of Jan'y 1897. B. F. Bibb Ordinary.

STATE OF GEORGIA,

Bartow County.

I, G. W. Hendrick Ordinary of said County, do certify that I am well acquainted with B. F. Bibb 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 30th day of Jan'y 1897. G. W. Hendrick Ordinary Bartow County.

NOTE—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears B. F. Bibb of Bartow 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 Feb'y 1871; that he is 52 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 2 years in Company B of 4th Regiment of S. C. Cavalry; that his physical condition is as follows: has Angina pectoris.

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 1898. I have heretofore as a resident of Bartow county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the 13th day of Jan'y 1898. B. F. Bibb Ordinary.

State of Georgia,

Bartow County.

I, G. W. Hendrick Ordinary of said County, do certify that I am well acquainted with B. F. Bibb 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'y 1898. G. W. Hendrick Ordinary Bartow County.

NOTE—The blank spaces must be filled.

is entitled for the year 1897. I have heretofore as a resident of Barlow
county been allowed a pension for the year 1897.
Sworn to and subscribed before me, this, the 13th day of January 1897, } B. F. Bibb
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 B. F. Bibb 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 13th day of January 1897.

G. W. Hendricks
Ordinary Barlow County.



Note—The blank spaces must be filled.

is entitled for the year 1898. I have heretofore as a resident of Barlow
county been allowed a pension for the year 1897.
Sworn to and subscribed before me, this, the 13th day of January 1898, } B. F. Bibb
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 B. F. Bibb 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 13th day of January 1898.

G. W. Hendricks
Ordinary Barlow County.



Note—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, B. F. Bibb, hereby authorize
G. W. Hendricks of Adairsville Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Adairsville Ga
by Check

Witness my hand and seal this 7th day of January 1899.

Executed in presence of J. A. P. Mc } B. F. Bibb (L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, B. F. Bibb, hereby authorize
G. W. Hendricks of Adairsville Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Adairsville Ga
by Check

Witness my hand and seal, this 9 day of January 1900.

B. F. Bibb [L. S.]

Executed in presence of

J. A. P. Mc

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 3525

INDIGENT

SOLDIER'S PENSION,

1899.

Name B. F. Bibb

County Barlow

WARRANT ISSUED

2/30 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

G. W. Hendricks

One W. Harrison, State Printer, Atlanta.

No date

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 2106

INDIGENT

SOLDIER'S PENSION,

1900.

Name B. F. Bibb

County Barlow

WARRANT ISSUED

January 25 1900.

JOHN. W. HENDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Hendricks

One W. Harrison, State Printer, Atlanta.

No date

(For Those Already Enrolled.)

No. 3623-

INDIGENT

SOLDIER'S PENSION
1899.Name *B. F. Bibb*County *Barlow*

WARRANT ISSUED

7/30/18

RICHARD JOHNSON,

Commissioner of Pensions

WARRANT HANDED TO

W. Hendricks

Geo. W. Harrison, State Printer, Atlanta.

*no date**Barlow Co.
Bibb, B. F.*

(For Those Already Enrolled.)

No. 2106

INDIGENT

SOLDIER'S PENSION
1900.Name *B. F. Bibb*County *Barlow*

WARRANT ISSUED

January 25, 1900

JOHN. W. KINTSEY,

Commissioner of Pensions

WARRANT HANDED TO

Hendricks

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.Personally appears *B. F. Bibb* 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 *Feb* 18*71*; that he is *54* 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 *C. 64* of *4*th Regiment of *S. C. Cavalry*; that his physical condition is as follows: *Has Angina Pectoris which renders him unable to labor*

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 1899. I have heretofore as a resident of *Barlow* county been allowed a pension for the year 1898

Sworn to and subscribed before me, this, the *7th* day of *Jan* 1899, *B. F. Bibb* Ordinary.

State of Georgia,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *B. F. Bibb* 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 *Jan* 1899.



G. W. Hendricks
Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1900.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.Personally appears *B. F. Bibb* 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 *Feb* 18*71*; that he is *54* 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 *C. 64* of *4*th Regiment of *S. C. Cavalry*; that his physical condition is as follows: *Has Angina Pectoris*

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 1900. I have heretofore as a resident of *Barlow* county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the *7th* day of *Jan* 1900, *B. F. Bibb* Ordinary.

State of Georgia,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *B. F. Bibb* 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 *Jan* 1900.



G. W. Hendricks
Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1900.

is entitled for the year 1899. I have heretofore as a resident of Barlow county been allowed a pension for the year 1898
Sworn to and subscribed before me, this, the 7th day of July 1899. B. F. Bibb
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 B. F. Bibb 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 July 1899.



G. W. Hendricks
Ordinary Barlow County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1899.

is entitled for the year 1900. I have heretofore as a resident of Barlow county been allowed a pension for the year 1899
Sworn to and subscribed before me, this, the 9th day of July 1900. B. F. Bibb
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 B. F. Bibb 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 July 1900.



G. W. Hendricks
Ordinary Barlow County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, B. F. Bibb hereby authorize G. W. Hendricks of Barlow County to receive and receipt for the pension allowed and request that he remit same to me at Adamsville

Witness my hand and seal, this 12th day of Nov 1901.
B. F. Bibb [L. S.]

Executed in presence of

(For Those Already Enrolled.)

INDIGENT

SOLDIER'S PENSION.

1901.

Name B. F. Bibb
County Barlow

WARRANT ISSUED

11/29 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HAND TO

G. W. Hendricks

Ordinary of Barlow County

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, B. F. Bibb hereby authorize G. W. Hendricks of Barlow County to receive and receipt for the pension allowed and request that he remit same to me at Adamsville

Witness my hand and seal, this 14th day of July 1902.
B. F. Bibb [L. S.]

Executed in presence of

(For Those Already Enrolled.)

INDIGENT

SOLDIER'S PENSION

1902.

Name B. F. Bibb
County Barlow

Co. 10th Regiment 4th

WARRANT ISSUED

11/31 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HAND TO

G. W. Hendricks

Ordinary of Barlow County

No data

Bibb, P. F.
Barlow County
 (For Those Already Enrolled)
 No. *1743*
INDIGENT
SOLDIER'S PENSION
1901.
 Name *B. F. Bibb*
 County *Barlow*
 WARRANT ISSUED
1/29
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDLED TO
J. W. Hendricks
No data

Bibb, P. F.
Barlow County
 (FOR THOSE ALREADY ENROLLED)
 No. *3151*
INDIGENT
SOLDIER'S PENSION
1902.
 Name *B. F. Bibb*
 County *Barlow*
 Co. *C* of *4th* Regiment
S. C. Cavalry
 WARRANT ISSUED
1/31
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDLED TO
only
 U.S. W. Hendricks, State Prison, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *B. F. Bibb* 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 *July* 18*77*; that he is *56* years old and by occupation a *farmer* 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 for the term of *24* months in Company *B*, of *6th* Regiment of *S. C. Cavalry*; that his physical condition is as follows: *No Angina Pectoris*

that his property consists of the following items:

of the value of *100* 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* county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this the

day of *January* 1901.

J. W. Hendricks

Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *J. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *B. F. Bibb* 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 *January* 1901.

J. W. Hendricks
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 *B. F. Bibb* 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 *July* 18*77*; that he is *56* years old and by occupation a *farmer* 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 for the term of *24* months in Company *B*, of *6th* Regiment of *S. C. Cavalry*; that his physical condition is as follows: *No Angina Pectoris*

that his property consists of the following items:

of the value of *100* 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

day of *January* 1902.

J. W. Hendricks

Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *J. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *B. F. Bibb* 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 *January* 1902.

J. W. Hendricks
Barlow County.

NOTE - The blank spaces must be filled.

NOTE - Affidavit should not be attested before January 1st, 1902.

county been allowed a pension for the year 1901
Sworn to and subscribed before me, this 13th day of January 1901.
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

I, G. W. Hendricks County, Ordinary of said County, do certify that I am well acquainted with B. F. Bibb 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 13th day of January 1901.
G. W. Hendricks Ordinary Bartow County.

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

is entitled for the year 1902. I have heretofore as a resident of Bartow county been allowed a pension for the year 1901.
Sworn to and subscribed before me, this 13th day of January 1902.
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

I, G. W. Hendricks County, Ordinary of said County, do certify that I am well acquainted with B. F. Bibb 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 13th day of January 1902.
G. W. Hendricks Ordinary Bartow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.
I, B. F. Bibb hereby authorize George W. Hendricks of Bartonsville Ga to receive and receipt for the pension allowed and request that he remit same to me at Bartonsville Ga by check.
Witness my hand and seal, this 10th day of January 1903.
B. F. Bibb [L. S.]

Executed in presence of

J. J. Bragg J.P.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.
I, B. F. Bibb hereby authorize G. W. Hendricks of Bartonsville Ga to receive and receipt for the pension allowed and request that he remit same to me at Adairsville by check.
Witness my hand and seal, this 16th day of January 1904.
B. F. Bibb [L. S.]

Executed in presence of

J. J. Bragg J.P.

Bill B. Bibb
Bartow County
CODE SECTION 1284.
(FOR THOSE ALREADY ENROLLED.)
No. 3771.
INDIGENT
SOLDIER'S PENSION
1903.
Name B. F. Bibb
County Bartow
Co. 4th Regiment
WARRANT ISSUED
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
G. W. Hendricks, State Printer, Atlanta.

no date

Bill B. Bibb
Bartow County
CODE SECTION 1284.
(FOR THOSE ALREADY ENROLLED.)
No. 3241.
INDIGENT
SOLDIER'S PENSION
1904.
Name B. F. Bibb
County Bartow
Co. 4th Regiment
WARRANT ISSUED
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
G. W. Hendricks, State Printer, Atlanta.

B. F. Bibb
 CODE SECTION 1384.
 (FOR THOSE ALREADY ENROLLED)
 No. *377*
 INDIGENT
 SOLDIER'S PENSION
 1903.
 Name *B. F. Bibb*
 County *Bartow*
 Co. *B* Regiment *4*
 Warrant issued
 JOHN W. LINDSEY,
 Commissioner of
 Warrant handed to
 C. C. Harrison, State Printer, Atlanta

no data
B. F. Bibb
 CODE SECTION 1384.
 (FOR THOSE ALREADY ENROLLED)
 No. *377*
 INDIGENT
 SOLDIER'S PENSION
 1904.
 Name *B. F. Bibb*
 County *Bartow*
 Co. *B* Regiment *4*
 Warrant issued
 JOHN W. LINDSEY,
 Commissioner of
 Warrant handed to
 C. C. Harrison, State Printer, Atlanta

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County,

Personally appears *B. F. Bibb* of *Bartow* 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 *July* 18*71*; that he is *57* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *South Carolina*) during the war between the States, and served for the term of *3 1/2* in Company *B*, of *4*th Regiment of *South Carolina Cavalry*; that his physical condition is as follows: *Has Angina pectoris. Amic's form physically, very feeble*

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 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 *16* day of *Jan*, 1903, *B. F. Bibb*
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 *B. F. Bibb* 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 *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.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County,

Personally appears *B. F. Bibb* of *Bartow* 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 _____ 18*71*; that he is *58* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *South Carolina*) during the war between the States, and served for the term of *2 1/2 yrs* in Company *B*, of *4*th Regiment of *South Carolina Cavalry*; that his physical condition is as follows: *Angina pectoris*

that his property consists of the following items: *nothing*

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 *Bartow* County been allowed a pension for the year *1903*

Sworn to and subscribed before me, this *16* day of *Jan*, 1904, *B. F. Bibb*
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 *B. F. Bibb* 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 *January*, 1904, *G. W. Hendricks*
 Ordinary *Bartow* County.

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

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 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. B. F. Bill Ordinary.

STATE OF GEORGIA,

Barlow County, }
I, L. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. F. Bill 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 Jan 1903. L. W. Hendricks Ordinary Barlow County.

Note.—The blank spaces must be filled.

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

that his property consists of the following items: nothing

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. B. F. Bill Ordinary.

STATE OF GEORGIA,

Barlow County, }
I, L. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. F. Bill 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 January 1904. L. W. Hendricks Ordinary Barlow County.

Note.—The blank spaces must be filled.

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

*Bibb, 1926 Mary Alice
Bartow County
Approved for S. L. C.*

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
Husband Was on the Pension Roll
of Georgia.

County Bartow
Name Mary Alice Bibb
Widow of E. F. Bibb
Company _____
Regiment _____
Date of Husband's Death July 10, 1926
Date of Marriage Dec. 13, 1877
Approved John W. Clark
19 July 26

JOHN W. CLARK,
Commissioner of Pensions.

7-20-26 C.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Bartow

COUNTY.

I, G. W. Hendricks,

Ordinary of said County, do certify that I

know Mrs. Mary Alice Bibb

the applicant for pension; that she is the person

who represents herself to be, and that she is continuously a bona fide resident of said County since

the witness as to

January 1st, 1920; that I also know _____

marriage, and that both the foregoing were duly sworn by me before signing the respective affi-

denits, and that they are truthful and trustworthy and their statements are entitled to full faith

and credit.
Given under my hand and official seal of office this 17 day of JULY, 1926.
(SEAL OF ORDINARY) G. W. Hendricks, Ordinary,

Bartow

County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You solemnly swear that you will truthfully answer 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. Affidavits must be sworn to before the Ordinary of the county of residence.
4. Only widows who are married before the death of their husbands are entitled to pension.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.

CATE

JOHN W. CLARK,
Commissioner of Pensions.

7-20-26 E.

Ordinary, do certify that I
for pension; that she is the person
a fide resident of said County since
the witness as to
before signing the respective affi-
statements are entitled to full faith

day of July, 1926.
John W. Clark, Ordinary,
County

applicant and the witness in the following
to each of the questions asked you and
of residence.
e entitled.
to prove marriage, by some person, or by

MARRIAGE LICENSE.

GEORGIA, BARTOW COUNTY.

To any Judge, Justice of the Inferior Court, Justice of the Peace,
or Minister of the Gospel:

You are hereby authorized to join B. F. Bibb and
Mary A. Lewis in the HOLY STATE OF MATRIMONY, according to the
Constitution and Laws of this State, and for so doing this shall
be your sufficient License.

Given under my hand and official signature this 6th. day
of Decbr., 1877.

J. A. Howard, Ordinary.

GEORGIA, BARTOW COUNTY.

I do Certify, That B. F. Bibb and Mary A. Lewis were
joined by me in MATRIMONY, this 13th. day of Decbr., 1877.

M. B. Tuggle, M. C.

Recorded Feby. 9th., 1878.

J. A. Howard, Ordinary.

Georgia, Bartow County.

I, G. W. Hendricks, Ordinary of Bartow County, do hereby
certify that the above is a true and correct copy of the
Marriage Record of Mary A. Lewis and B. F. Bibb, as same appears
of Record in this Office, in Book "G" of Marriage Records, Page
223. This July 13, 1926.

G. W. Hendricks,
Ordinary, Bartow County, Ga.
By: B. B. Hendricks

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Bartow COUNTY.

I, G. W. Hendricks, Ordinary of said County, do certify that I
know Mrs. Mary Alice Bibb, the applicant for pension; that she is the person
she represents herself to be, and that she is continuously a bona fide resident of said County since
January 1st, 1920; that I also know _____, the witness as to
marriage, and that both the foregoing were duly sworn by me before signing the respective affi-
davits, and that they are truthful and trustworthy and their statements are entitled to full faith
and credit.

Given under my hand and official seal of office this 17 day of July, 1926.

(SEAL OF ORDINARY)

G. W. Hendricks, Ordinary,
Bartow County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You 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 of the county of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

ORDINARY'S CERTIFICATE

joined by me in MATRIMONY, this 13th. day of Decbr., 1877.

STATE OF GEORGIA,

Bartow COUNTY.

M. B. Tuggle, M. G.

I, G. W. Hendricks, Ordinary of said County, do certify that I know Mrs. Mary Alice Bibb, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know _____, the witness as to marriage, and that both 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.

Recorded Feby. 9th., 1878.

J. A. Howard, Ordinary.

Given under my hand and official seal of office this 17 day of July, 1926.

(SEAL OF ORDINARY)

G. W. Hendricks, Ordinary,
Bartow County

Instructions.

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You 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 of the county of residence.
4. Only widows who are married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Georgia, Bartow County.

I, G. W. Hendricks, Ordinary of Bartow County, do hereby certify that the above is a true and correct copy of the Marriage Record of Mary A. Lewis and B. F. Bibb, as same appears of Record in this Office, in Book "G" of Marriage Records, Page 223. This July 13, 1926.

G. W. Hendricks
Ordinary, Bartow County, Ga.
By: B. F. Hendricks

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia.

STATE OF GEORGIA,

Bartow Fulton COUNTY.

Personally before me comes Mary Alice Bibb of said County, who, after having been duly sworn, says that she is the widow of B. F. Bibb to whom, in the County of Bartow State of Georgia she was married on the 13 day of Dec. 1877, and that she remained his wife, and resided with him to the date of his death in July 1926 and that she has not since his death remarried; at the time of his death he was a resident of Bartow County, in said State of Georgia, and he was on the Soldier Pension Roll of the State and paid a pension of \$ 200 in Bartow County for 19 25 (per annum), on account of being a soldier in Company _____ Regiment _____ (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia and she has, continuously, resided there all her life.

Sworn to and subscribed before me, this the

19 day of July, 1926

Arthur R. Warburton, Ordinary
of Fulton County.

Mary Alice Bibb
(Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Bartow Fulton COUNTY.

Personally before me comes Geo. W. Woods known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Bibb, who made the foregoing affidavit, is the lawful widow of B. F. Bibb who died in Bartow County in said State of Georgia on the 10 day of July, 1926, and that she has not since remarried; that she became the wife of B. F. Bibb on the 13 day of Dec., 1877, that she and he had resided together as husband and wife, continuously, since 13 day of Dec. 1877, and that B. F. Bibb was 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

19 day of July, 1926

Arthur R. Warburton, Ordinary
of Fulton County.

G. W. Woods

(SEAL OF ORDINARY)

OFFICE OF COURT OF ORDINARY BARTOW COUNTY G. W. HENDRICKS, Ordinary

CARTERSVILLE, GA. July 17, 1926.

Mrs. B. F. Bibb,
450 Stewart Ave.,
Atlanta, Ga.

Dear Mrs. Bibb:

Enclosed is an application for you to sign in order that you may be placed on the pension roll in your own right. Papa says you may go before Judge Jeffries and sign same, and have him to kindly file it with Col. John W. Clark, State Pension Commissioner, as early as possible, so that you may go on roll in your own name for the next quarterly payment. I am also enclosing a marriage certificate, and it will be hardly necessary for you to have a witness, but if Judge Jeffries suggests one, you may get Dr. Bowdoin. I am sure that Judge Jeffries will be very glad to assist you in every way possible, and Papa will appreciate his kindness.

Papa came home from the hospital Thursday afternoon. He stood the trip fine, and I believe he is going to get all right now. The doctor says he is very much encouraged over his condition, and he hopes to have him out before very long.

With kindest regards, I am

Yours very truly,

B. F. Hendricks

Dear Mrs. Bibb:

That she is now a bona fide resident citizen of said State of Georgia and she
has, continuously, resided there all her life. five 11/11/19

Sworn to and subscribed before me, this the

19 day of July, 1916
Arthur R. Rarab Ordinary Mary Alice. Bab
 of Fulton County (Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Barton, Fulton COUNTY.

Personally before me comes Jessie M. Wood, known to be
a responsible and truthful person, residing in said County, who after having been duly sworn, says
that deponent's own personal knowledge, Mrs. Bibb, who made the foregoing
affidavit, is the lawful widow of B. F. Bibb who died in Bartow
County in said State of Georgia on the 10 day of July, 1926,
and that she has not since remarried; ~~that she became the wife of B. F. Bibb~~
~~the 13 day of Dec., 1877,~~ that she and he had resided together as husband
and wife, continuously, since 13 day of Dec. 1877, and that B. F. Bibb
was 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

19 day of July, 1926
William R. Marshall, Ordinary
of Fulton County.

(SEAL OF ORDINARY)

Enclosed is an application for you to sign in order that you may be placed on the pension roll in your own right. Papa says you may go before Judge Jeffries and sign same, and have him to kindly file it with Col. John W. Clark, State Pension Commissioner, as early as possible, so that you can go on roll in your own name for the next quarterly payment. I am also enclosing a marriage certificate and it will be hardly necessary for you to have a witness, b if Judge Jeffries suggests one, you may get Dr. Bowdoin, b a sure that Judge Jeffries will be very glad to assist you in every way possible, and Papa will appreciate his kindness.

Papa came home from the hospital Thursday afternoon. He stood the trip fine, and I believe he is going to get all right now. The doctor says he is very much encouraged over his condition, and he hopes to have him out before very long.

With kindest regards, I am

Yours very truly,

B. Hendricks