Mit Hamse Class El Mett John 12/89 Date of Warrant Ochy 20/ Entered on record
Schy 20 1889
With M.
SECRETARY EXECUTIVE DEPARTMENT. am Doule NOTES. In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the law granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the parments provided, the following suggestions are submitted:

1. It an applicant has been awounded, the description of the wound should be carefully and tolly set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. It 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 daw makes no allowance for an arm or leg, unless the arm or leg, bas been rendered authorities.

3. It will not answer to say that an arm in "substantially uscless 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 uscless."

4. It the application is to a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that suless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially uscless."

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

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

The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points. APPLICATION FOR ALLOWANGE. am Joule 3. m. Jubelandin Elkely de 1189 recould it nute.

Benneth, Damue K

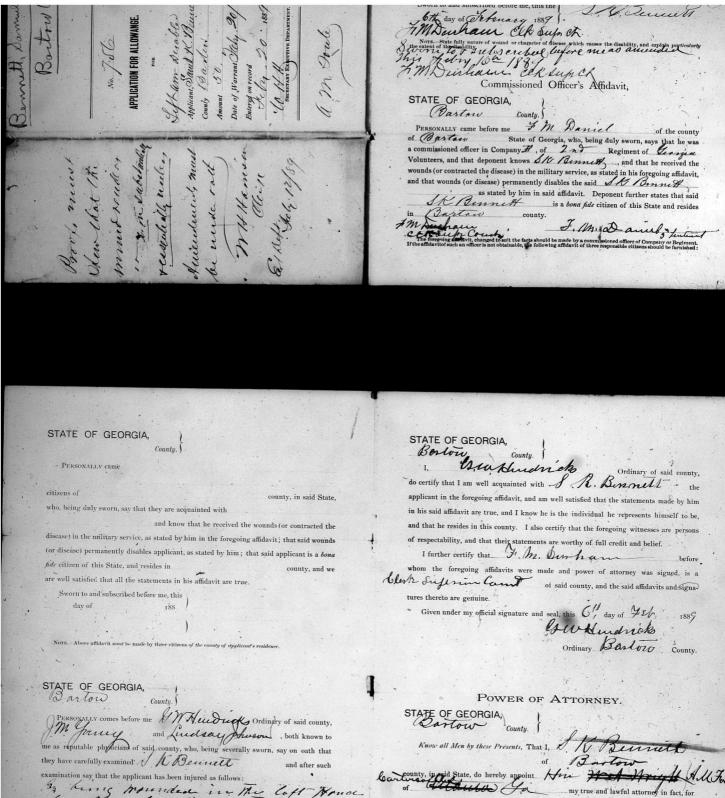
For Use of Applicants Who Have not Heretofore Drawn.

and to enable all parties interested to understand tres the rules adopted by the Governor touching the ston of the wound should be carefully and tally set toon of the wound should be carefully and tally set outment of facts showing the action of the contented in the service, a tall and carefully stated lifty by positive proofs to the service.

ially useless for ordinary pursuits of life, etc."
use to the arm or leg, but the limb must for all
used to be a fair construction of the Act, and the
to require the constant use of crutch or sitch,

idded to any of the allidavits, the amendmust show that the amendments have county of the residence of the applicant.

11 Cara and Heretologic Diawn.
STATE OF GEORGIA,
(Bartow County.)
PERSONALLY appears Sam & Bennett of Bartow county,
State of Georgia, who, being duly sworn, says on oath that he is a hong fide citizen and
resident of said State, and has been such since the (day of his buth) 23 day of
that he enlisted in the military service of the Con
rederate States (or of the State of the gias) during the war between the
of Za 9 Regiment
of Verryia Volunteers Bennings & Brigade; that whilst engaged
in such military service, at the battle of Lettleburg in the State
of Course, on the 2 and day of July 1863, he was wounded as follows: a minnier ball placing through his left
hand entiring got the wrist and passing out through
the palm of the hand distraying the use of said hand
and gram the effects of land gun shet wound
his entire arm has purished away to a consider
nable extract Denvision of 1111111
and equitally welles and the left am is pubstantially o
Deponent designs 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, 1880.
Sworn to and subscribed before me, this the
6th day of Jefonary 1889
Manhaur Elk Sup ch.
O Norre.—State fully nature of wound or character of Alexand middle and the state of the state o
Sworn, to I sules crebel before me as amended
my Heby 100 1889
M. M. Dunhami Ceklupich
Commissioned Officer's Affidavit.
STATE OF GEORGIA,
(Bartow County.)
PERSONALLY came before me & M Daniel of the country
of (Bastan State of Georgia who being dely sweet and
a commissioned officer in Company 4 , of 2 h Periment of
volunteers, and that deponent knows 2/V / Cinness 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 Al Junne
as stated by him in said affidavit. Deponent further states that said
is a bona fide citizen of this State and resides
in Cartain county.
consult Court of Mind anuly
The foregoing andayit, changed to suit the facts should be made by a commissioned officer of Company or Regiment. If the affidayit of such an officer is not obtainable, the following affidayit of three responsible citizens should be furnished:



in the last Nonce is left Hand and Rendering a sufferent 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 Effect of soil mend hiers song It huden me. To. In witness whereof I have hereunto set my hand and seal, this day of Tebruary 188 Sworn to and subscribed before me, this fames In fore ing In. of

day of Formany 1889

Well udriets

18 Sh Bennets (L.S.)

my true and lawful attorney in fact, for

& Mousham Clk Dup Court Frank O Durham S

me Oralinary of said county,	Carlow County.
Ith Juney and Luidsay Thuson , both known to	County.
me as reputable physicians of said county, who, being severally sworn, say on oath that	Know all Men by these Presents, That I, & /V Dennet
they have carefully examined of M. Bennett and after such	of Bartow
examination say that the applicant has been injured as follows:	Country, in gold State, do hereby appoint How Hard Months Alli
	· (d) · · · · · · · · · · · · · · · · · · ·
In tring mounded in The last Would	my true and lawful attorney in fact, for
his left Hand and Rendering to suffering	me and in my name, to receive and receipt for whatever amount of money I may be entitled
his left Hand and Kindering a supplanting	to from the State of Georgia by reason of the injury received as aforesaid in the military ser-
addentitle wills with the true fain	vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
ferined away and Trebotay and Soonty northy	authorizing my said attorney to receipt in my name for any Warrant that may be issued by
mer is and from from good disable of from	the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
The office of soit mond hieros or go for human ne. 5.	In witness whereof I have hereunto set my hand and seal, this
	day of February 188 11-0
Sworn to and subscribed before me, this James M. Lours M.	
Of day of 40 truey 1889 \	Executed in the presence of us:
4 Whendricks	
ORDINARY.	J. M. Dunham Clk Sup Court
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 College had to be some the college that the same than	Frank ONarham
Arrandy by Aloting (hot 1) on in is seemedly and	
Substantially useles and still suppose from desolity	
I wom hat subscribe of the 12/197 Green ward & Michange man Med	
Directory for formation,	
For Applicants Haratafara Alland D	
For Applicants Heretofore Allowed Pensions.	For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,	STATE OF GEORGIA,
PERSONALLY appears A by Bennelly & (Barley)	11.6
State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and	PERSONALLY appears S. R. Bonnell of Barlow
resident of said State and has been auch	County, State of Georgia, who, being duly sworn, says on oath that he is a large
Marth 1844 that he enlisted in the military service of the Con-	State State, and has resided therein continuously over since at
federate States (or of the State of) during the war between the	day of Inarch 18 114; that he enlisted in the military service of the Confederate States (or of the State of
States, and served as a fring to in Company H, of the Regiment	during the war between the
of All Volunteers Bernings 's Brigade; that whilst engaged	States, and served as a Wolmberg B in Company H, of 2 th Regiment
in such military service, at the hattle of Guldon handle	of Volunteers Renamings 's Brigade; that whilst engaged in such military service at the battle of Section 1.
of finn on the day of Auto 1863 he was	in such military service at the battle of settly strong in the State of Rence, on the 3 nd say of July 1863 hours
wounded as follows: That the ong to the thank	wounded as follows: I had through the left hand
near the week front which rendered	wind a some wall when a lost
the left and Substantially land	from the wife which wound renders
executionly unites,	in the wife with authoritable to
	essentially useless
the state of the s	
Deponent desires to participate in the benefits of the Ani arrange of the	Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the ellipse.
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 fog, the year ending of october 26, 1800. I have benefited for the end of the control of the	and the acts amendatory thereof, and makes application for the allowance to which he is entitled
of D 3.0 00	for the year ending October 26, 1891. I have heretofore been allowed a pension of dollars, for the year ending October 26, 1891. They have heretofore been allowed a pension of dollars, for the year ending October 26, 1891.
Sworn to and subscribed before me, this the	Sworn to and subscribed before me, this, the
11/1 1 day of Hydy 1890	day of Hoh 1801.
Mateuducko Owinary	Grow Sendricks Ordinary
Nors.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.	Norz. 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.
POWER OF ATTORNEY.	
STATE OF GEORGIA	POWER OF ATTORNEY.
dra. [A.a.	STATE OF GEORGIA
KNOW ALL MEN BY THESE PRESENTS, That I, S. Dinnell of Barton for House	Barton County.
ANUW ALL MEN BY THESE PHESENIS, That I,	
of the union	
countratin said State de hander annies 0/101 dl % 444	Know all Men by these Presents, That I. R. Bengult
of Mountain State, do hereby appoint Hon, A. he, Houte	of Bartow County, State of Georgia, do hereby appoint.
me and in my name to receive and refer to my true and lawful attorney in fact, for	of Bartons County, State of Georgia, do hereby appoint.
of William William my and the form 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 Service of the Confed	of Bartons County, State of Georgia, do hereby appoint of Gartons County, State of Georgia, do hereby appoint of Gartons with the County of Market State of Georgia, do hereby appoint of Gartons the State of Georgia on me and in my name, to receive and receipt for whatever amount of money I may be entitled
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; thereby authorizing was said attorage, to receive the received to the confederate states (or of this State), as stated in the foregoing affidavit;	of County State of Georgia, do hereby appoint of County State of Georgia of 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 attracts to merchy authorizing my said attracts to merchy authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing the confederate States (or of the Confederate States).
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.	of County. State of Georgia, do hereby appoint. County, State of Georgia, do hereby appoint. Of Manual County. State of Georgia, do hereby appoint. Of Manual County. State of Georgia appoint. Of the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States for of this State, as stated in the foregoing affidavit; hereby authorizing my said autorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money, which may be ready.
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 associated. IN WENESS WHEREOF, I have, hereunto set my hand and seal this	Know all Men by these Presents, That I
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 WINESS WHEREOF, I have hereunto set my hand and seal, this day of Habby 189	Know all Men by these Presents, That I
of Military 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 Marrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN USENESS WHEREOF, I have hereupto set my hand and seal, this day of H. B. O. 189	Know all Men by these Presents, That I
of Military with the control of the	Know all Men by these Presents, That I
of Military 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 Marrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN USENESS WHEREOF, I have hereupto set my hand and seal, this day of H. B. O. 189	Know all Men by these Presents, That I
of Military with the control of the	Know all Men by these Presents, That I
of Multi-New Months of the property of the pro	Know all Men by these Presents, That I
of Military with the control of the	Know all Men by these Presents, That I

STATE OF GEORGIA STATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, That I, of Burton of Burton counts in said State, do hereby appoint of Burton 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 tor any sum of money which may be coming to me for the reason aforesaid. IN WINESS WHEREOF, I have hereupto set my hand and seal; this day of House of the States of the S	POWER OF ATTORNEY. STATE OF GEORGIA, County, Know all Men by these Presents, That I
STATE OF GEORGIA, County, County, Ordinary of said county, do certify that I am well acquainted with 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.	STATE OF GEORGIA, Law County. I, County Ordinary of said County, do certify that I am well acquainted with Separated 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 gay of Hely 1890 Ordinary Bastone County.	Given under my official signature and seal, this H day of Holy 1891. Ordinary Bandow County.
APPLOGNON FOR ALLOWANGE. APPLICATION FOR ALLOWANGE. APPL	Application for Allowance of the state of th

For Applicants Heretology Altered Peneanary or sacrossa

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			J	
or Applicants Hereto	ofore Alle	owed	Pensio	ns.
STATE OF GEORGIA,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	31100	· Onloid	110.
Partow county.	en.	0	,,	
Personally appears 9	y, State of Georg	Ilms	rett	
oath that he is a bong fide citizen and resid	ent of Georgia	and has bee	en such contin	uously
the military service of the Confederate State	The Wall	10/	44, that he en	nlisted
iring the war between the States, and served	25 /2	1' . ~ . /	in Company	1
2" th Regiment of Slura	ia Volunte	ers 10 /	222222	2_'s
igade; that whilst engaged in such military s	on the	e of year	tysbuli	9
11/1 186.3 he	was wounded as	follows:	Gum	she
the left hand	hottu u	rist	Joint	1
the left hand re	ally no	Elless	ciwaa	in
Decorate decise to a distant de la la				
Deponent desires to participate in the bene acts amendatory thereof, and makes applice e year ending October 26, 1892. I have her		wance to whi	ich he is entitle n of	, and ed for
Sworn to and subscribed before me this the		4010	ne	
3th day of March 189	2.}	4/20	well	
Nore State fully nature of wound or character of die	y.			
Nore.—State fully nature of wound or character of dis				rly the
POWER OF	ATTO	RNE	¥.	
STATE OF GEORGIA.	2.3			
Know all Men by these Presents, That				
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nty, in said State, do hereby appoint				
and in my name, to receive and receipt for	whatever amoun	and lawful at of money l	attorney in fac I may be entitle	t, for ed to
and in high failing, to receive and receipt to in the State of Georgia by reason of the inju Confederate States (or of this State), as state additional to the company of the state of the	ry received as af	oresaid in th	e military serv	ice of
or any sum of money which may be coming	to me for the rea	ay be issued ason aforesai	d by the Gove	rnor
c	unto set my hand	and seal this	s	
			г	L. S.]
	-			
Executed in the presence of us:	7			
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Executed in the presence of us:	TION			
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Executed in the presence of us:	County, G		e eni	·. o.

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Danton County, Personally appears of N. Commett of Barton. County, State of Georgia, who, being duly sworn, says on oath that he is a bone fide citizen and resident of said State, and has resided sherein continuously ever since the of the Confederate States (or of the State of during the war, between the federate States (or of the State of during the war, between the of the Confederate States (or of the State of during the war, between the States, and served as a formal of the States, and the States of the States, and the States of the States
PERSONALLY appears S. N. Bennett of Bartom County, State of Georgia, who, being duly sworn, says on oath that he is a bone fide citizen and resident of said State, and has resided sherein continuously ever since the 1844; that he enlisted in the military service of the Con during the war, between the federate States (or of the State of 100 during the war, between the federate States (or of the State of 100 during the war, between the federate States (or of the State of 100 during the war, between the federate States (or of the State of 100 during the war, between the federate states of 100 during the war, between the federate state to the federate states of 100 during the war, between the federate states of 10
Personally appears of R. Omnaell of Bario and County, State of Georgia, who, being duly sworn, says on oath that he is a bone fide citizen and resident of said State, and has resided sherein continuously ever since the day of March. 18th; that he enlisted in the military service of the Confederate States (or of the State of line Company 1, of 25 h Regimen of Wolunteers Responses 1 in Company 1, of 25 h Regimen of Language 1 in the State of line 1 in the State of Language 1 in the State of L
County, State of Georgia, who, being duly sworn, says on oath that he is a bone fide citizen and resident of said State, and has resided sherein continuously ever since the 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 of Wolunteers Bergarage of in Company of the Regimen of Wolunteers Bergarage of States, and served as a first all of the State of the Stat
day of March 1844; that he enlisted in the military service of the Con during the war between the States and served as a first at the in Company 4. of 27 M. Regimen of the Wolunteers Blyonary 2. 's Brigade; that whilst engaged in such military service at the battle of letters by day of first the war wounded as follows: Wounded as follows: When the State of the Stat
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 first of wounder service at the battle of destroyable of States, and served as a first of the States, and served as a first of the Confederate of States, and served as a first of the Confederate of States, and served as a first of the States of States, and the States of State
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States and served as a print at in Company of The Regimen of the Volunteers Blasoning is Brigade; that whilst engaged in the State of Letty being the Lord of Letty being in the State of Letty being the Lord of Letty being the
Volunteers Reporting 5 Brigade: that whilst engaged in the State of Letters of the 1863 he was sometimes of Letters of the 1863 he was wounded as follows: Letters that the through the transfer the wounded as follows: Letters that the transfer the could be the transfer the letters the transfer the letters the transfer the letters that the letters the letters the letters the letters the letters that the letters t
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and he acts a mendatory thereof, and makes application for the allowance to which he is entitled for work of year ending October 26, 1893. I have herectolore been allowed a pension of day of March 1893. August 1893. August 1893. August 1893.
wounded as follows: Less that wround through the stand wounded as follows: Less that wround through the stand have the levels found, while less than the levels found, while less than the levels found, while less than the less than the less than the less to praticipate in the benefits of the Act, approved October 24th, 1887, and he acts amendatory, thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for 1899 - 90 (8) 1893. Sworm to and subscribed before me, this, the less than the less t
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and he acts amendatory thereof, and makes application for the allowance to which he is entitled for he year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for 1889-90-9179 22 Sworth to and subscribed before me, this, the day of 1891-1893. June 1893. June 1893. June 1893.
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and he acts amendatory thereof, and makes application for the allowance to which he is entitled for he year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for 1889-91-91492 Sworth to and subscribed before me, this, the day of 1891-1893. June 1893. June 1893.
Deponent desires to praticipate 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 he year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for 1851-91-91-91-91-91-91-91-91-91-91-91-91-91
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and he acts amendatory thereof, and makes application for the allowance to which he is entitled for he year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for 1889 - 90 - 917 92 work to and subscribed before me, this, the day of 1891 1893.
he year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for 1889-90-91-91-92 Sworth o and subscribed before me, this, the day of Manuelle Oninney Lay of Manuelle Oninney
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he year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for 1889-90-91-914 92 worth to and subscribed before me, this, the day of March 1893.
dollars, for 1889-94 91 92 worry to and subscribed before me, this, the day of March 1893. June 1893. June 1893.
Swort to and subscribed before me, this, the day of March 1893. Subscribed before me, this, the day of March 1893.
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SWNeunies Oning
and lungs on many
NOTE-State fully nature of wound or character of disease, which causes the disability, and explain particularly the extent of the
STATE OF GEORGIA,)
Daylow County
1. Historials
e 1 VB Ordinary of said County,
certify that I am well acquainted with . R. Wennett the
oplicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
id affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
vidual he represents himself to be, and that he resides in this County.
I further certify that
fore whom the foregoing affidavits were made and power of attorney was signed is a

For Applicants Heretolory Allowed Persons.

POWER OF ATTORNEY.

County, Georgia. TATE OF GEORGIA, Ty true and lawful attorney in fact, for sea and in my true and lawful attorney in fact, for sea and in my true and lawful attorney in fact, for sea and in my true and lawful attorney in fact, for sea and in my true and lawful attorney in fact, for sea and in my true and lawful attorney in fact, for sea and in the foreign created in the military service of the Considerate States (or of this State), as stated in the foreign created in the military service of the Considerate States (or of this State), as stated in the foreign created in the military service of the Considerate States (or of this State), as stated in the foreign created in the military service of the Considerate States (or of this State), as stated in the foreign created in the military service of the Considerate States (or of this State), as stated in the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an well acquisited with A. A. Statement and publication the foreign affidavit, and an application the foreign affidavit, and an well acquisited with A. A. Statement and dividual be represents himself to be add dividual by the foreign affidavit, and an well acquisited with A. A. Statement and dividual by the foreign affidavit and the statements and dividual by the foreign affidavit and the statements and dividual by the foreign affidavit and the statements and dividual by the for	y in fact, for se entitled to applicant in the foregoing affidavit, and am well satisfied that the statements made by him in said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the dividual he represents himself to be, and that he resides in this County. [L. s.] [County of said County, and the said affidavits a signature at hereto are genuine. [L. s.] [L. s.] [D. s.] [
County, in said State, do hereby appoint. My true and lawful attorney in fact, for on the State of Georgia by reason of the injury received as a storest in the military service of of mits State of Georgia by reason of the injury received as a storest in the military service of year and this State), as stated in the foregoing affidavit, hereby authorizing yeal attorney to receive that it is State), as stated in the foregoing affidavit, hereby authorizing roa any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money that he resides in this County. In the control of the foregoing affidavit, and any well at a sundant and the foregoing affidavit, and must alight that the statem has a fail affidavit are true, and that the foregoing affidavit, and any will applied the representations and affidavit are true, and that the foregoing affidavit, and any will applied the representation in the foregoing affidavit, and any will applied the representation in the foregoing affidavit provides in this County. In the foregoing affidavit, and any will affidavit the foregoing affidavit provides in this foregoing affidavit provides and affidavit are true, and that the foregoing affidavit provides and affidavit are true, and that the foregoing affidavit provides and affidavit are	y in fact, for sentitled to applicant in the foregoing affidavit, and am well satisfied that the statements made by him in said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the 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, in the county of said County, and the said affidavits as signatures thereto are genuine. Given under my official signature and seal, this Out day of March 18 P. O. 21 VIE OF GEORGIA
County, in said State, do hereby appoint. My true and lawful attorney in fact, for on the State of Georgia by reason of the injury received as a storest in the military service of of mits State of Georgia by reason of the injury received as a storest in the military service of year and this State), as stated in the foregoing affidavit, hereby authorizing yeal attorney to receive that it is State), as stated in the foregoing affidavit, hereby authorizing roa any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money which may be coming to me for the reason afforcash; hereby authorizing for any sund money that he resides in this County. In the control of the foregoing affidavit, and any well at a sundant and the foregoing affidavit, and must alight that the statem has a fail affidavit are true, and that the foregoing affidavit, and any will applied the representations and affidavit are true, and that the foregoing affidavit, and any will applied the representation in the foregoing affidavit, and any will applied the representation in the foregoing affidavit provides in this County. In the foregoing affidavit, and any will affidavit the foregoing affidavit provides in this foregoing affidavit provides and affidavit are true, and that the foregoing affidavit provides and affidavit are true, and that the foregoing affidavit provides and affidavit are	y in fact, for se entitled to applicant in the foregoing affidavit, and am well satisfied that the statements made by him in said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the 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, in the county of said County, and the said affidavits signatures thereto are genuine. Given under my official signatures and seal, this Annual County of said County and the said affidavits. P. O. P. O. CLYLE OF GEORGIA
County, in said State, do hereby appoint my true and lawful attorney in fact, for on the State of Corogin by reason of the injury receives and receipt for wheever amount of money I may be entitled to the conference States (or of this State), as stated in the foregoing affidavit, hereby anthorizing year all attended to complete on any Warmat that may be insured by the Governor, for your discovery which may be coming to me for the reason afforeast). IN WITHERS WHEREOF, I have bereauth set my hand and seal this. IN WITHERS WHEREOF, I have been under my official signatury and seal, this County, and the signature of the signature	ordinary of said Co do certify that I am well acquainted with
county, in said State, do hereby appoint. In and in my name, to receive and receipt for whatever amount of money I not be in act, for one the State of Georgia by reason of the injury received as aforesaid in the military surrout of money I not be in act, for one of the state of Georgia by reason of the injury received as aforesaid in the military surrout of the consecence is my name for any Warrant that may be issued by the Governor, followed the state of the consecence is my hand and seal this. In the presence of us: [L. s.] DIRROUTEDET. Send money to me as follows, by County, Georgia. DIRROUTEDET. County, Georgia. Pro. Pro	do certify that I am well acquainted with I. R. Benneth applicant in the foregoing affidavit, and am well satisfied that the statements made by him is said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the dividual he represents himself to be, and that he resides in this County. [L. s.] [L. s.] [L. s.] Given under my official signatures and seal, this Autouv County and the said affidavits were made and power of attorney was signed. Given under my official signatures and seal, this Autouv County and the said affidavits were made and power of attorney was signed. Given under my official signatures and seal, this Autouv County and the said affidavits were made and power of attorney was signed. Given under my official signatures and seal, this Autouv County and the said affidavits. Given under my official signatures and seal, this Autouv County and the said affidavits. County and the said affidavits.
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said affidavit are tive, and that his disabled, to the catent he claims, and I he divided by recognity by reason of the injury received as aforesaid in the military service of example of the confederate as aforesaid in the military service of yes aid attorney to receipt in my name for any Warrant the probability and the military service of the confederate of the catent he desired, and the military service of the confederate of the catent he desired, and the military service of the confederate of the catent he desired, and the military service of the confederate of the catent he desired, and the military service of the confederate of the catent he desired, and the military service of the confederate of the catent he desired, and the military service of the confederate of the catent he desired, and the dividual he represents himself to be, and that he resides in this Control. [In the correct of the confederate of the catent he desired, and the hist disabled, to the extent he claims, and I he dividual he represents himself to be, and that he resides in this Control. [In the correct of the confederate of the catent he desired, and the dividual he represents himself to be, and that he resides in this Control. [In the correct of the confederate of the catent he desired, and the dividual he represents himself to be, and that he resides in this Control. [In the correct of the confederate of the catent he desired, and the dividual he represents himself to be, and that he resides in this Control. [In the correct of the confederate of the catent he desired here of the catent he desired here of the catent here of the confederate of the confedera	se entitled to ray service of y authorizing to dividual he represents himself to be, and that he resides in this County. Lighther certify that Defore whom the foregoing safidavits were, made, and power of attorney was signed, of said. County, and the said affidavits signatures thereto are genuine. Given under my official signature and seal, this of the day of the said. P. O. SLYLE OL CEORGY.
TATE OF GEORGIA	[L. s.] Lighther certify that before whom the foregoing affidavits were made and power of attorney was signed. [L. s.] Constitution of said County, and the said affidavit signature and seal, this for day of March Whom the foregoing affidavits were made and power of attorney was signed. Signatures thereto are genuine. Constitution of said County, and the said affidavit signature and seal, this for day of March Whom the foregoing affidavits were made and power of attorney was signed. Constitution of said County, and the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and seal, this for day of March Constitution of the said affidavit signature and se
TATE OF GEORGIA	[L. s.] Lighther certify that before whom the foregoing affidavits were made and power of attorney was signed. [L. s.] Constitution of said County, and the said affidavit signature and seal, this County and seal, thi
For any sum of money which may be coming to an after the reason aforesaid. IN WITNESS WHEREOF, I have becoming to an after the reason aforesaid. IN WITNESS WHEREOF, I have become be unit betting the properties of the reason aforesaid. Executed in the presence of us: [L s.] DIRECTION. Send money to me as follows, by. County, Georgia. P. O. P.	[L. s.] Lighther certify that before whom the foregoing affidavits were, made and power of attorney was signed, of said County, and the said affidavit signatures thereto are genuine. Given under my official signature and seal, this for day of March Light of the said affidavit ordinates: Daylow Co
Executed in the presence of us: [L s.] DIRECTION. Send money to me as follows, by County, Georgia. DIRECTION. Send Money to me as follows, by TATE OF GEORGIA POWER OF ATTORNEY.	[L. s.] before whom the foregoing affidavits were made and power of attorney was signed. of said County, and the said affidavit signatures thereto are genuine. Given under my official signature and seal, this Juz day of March Whom and the said affidavit County and the said affidavit of said County, and the said affidavit and the said affidavit of said County, and
Executed in the presence of us: Executed in the presence of us: Executed in the presence of us: DINEDITION.	[L. s.] signatures thereto are genuine: Given under my official signature and seal, this O' day of March P. O. SIVIE OF GEORGIA
Executed in the presence of us: [L. s.] Comparison of said County, and the signature shereto are genuine. County Georgia. County	Given under my official signature and seal, this One day of March (Alone Ordinator Daylow Co
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Send money to me as follows, by County, Georgia. P. O.	Napore all Maria Diagraphy Co.
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ant in the foregoing amount, and am well satisfied that the statements made by him in his	d county, Know all Men by these Presents, That I. R. Bessmett of Bess of County, State of Georgia do hereby appearance.
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dual he repesents himself to be, and that he resides in this county.	d county, Know all Men by these Presents, That I S. R. Desarett the the of Destroy County, State of Georgia, do hereby appoint in his
Given under my official signature and seal, this day of MProt 1892. the Confederate States (or of this State), as stated in the foregoing afficiati; hereby my said attorney to receipt in my name for any Warrant that may be issued by the	d county, Know all Men by these Presents, That I S. R. Bessare I the of DON'D Wy Jones County, State of Georgia, do hereby appo
my said attorney to receipt in my name for any Warrant that may be issued by the	the is the me and in my name, to receive and receipt for whatever amount of money! may be entitled from the Stiffe of Georgia by reason of the injury recreed as aforesaid in the military service.
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1 / Jeni	the County, State of Georgia, do hereby appo im in his he is the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name, to receive and receipt for whatever amount of money I may be entitled from the State of Georgia by reason of the injury received as aforesaid in the military service 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, 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, the
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and Make It was all	de county, the of County, State of Georgia, do hereby appoint in his in his he is the from the State of Georgia by reason of the injury received as aforesaid in the military service the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receive in my name for any Warrant that may be issued by the Governor, 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, the day of Limits. County.
Wallet Williams	de county, the of County, State of Georgia, do hereby appoint in his in his he is the from the State of Georgia by reason of the injury received as aforesaid in the military service the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receive in my name for any Warrant that may be issued by the Governor, 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, the day of Limits. County.
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- State of the sta	de county, the of County State of Georgia, do hereby appoint in his im in his of All All of Trues me and in my name, to receipt for whatever amount of money I may be entitled from the Stitle of Georgia by reason of the injury received as aforesaid in the military service the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizin my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or lor any sum of money which may be coming to me for the reason aforesaid. IN WINESS WHEREOF, I have hereunto set my hand and seal, the day of All of the second of the season aforesaid. Executed in the presence of us: Language States of the season aforesaid. Executed in the presence of us:
	A county, the county the county to receipt for whatever amount of money I may be entitled to the confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizin my said attorney to receipt in my name for any Warrant that may be issued by the Governor, of the county of the county to me county to me county to me for the reason aforesaid. IN WINESS WHEREOF, I have hereunto set my hand and seal, the day of the county of the count
Well to Melonth ya	de county, the of Sunday all Men by these Presents, That I Research county, State of Georgia, do hereby appoint in his of All Audie my these presents, That I Research 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 the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorisin my said attorney to receipt in my name for any Warrant than ybe issued by the Governor, or lor any sum of money which may be coming to me for the reason aforesaid. IN WINESS WHEREOF I have hereunto set my hand and seal, the day of the county of the county of the presence of us: Send money to me as follows, by The Office Order Send money to me as follows, by The Office Order to All Worth Law
Coph County Googie	de county, the of County, State of Georgia, do hereby appoint in his of Allaule may these Presents, That I R Bessett of Allaule my these Presents, That I R Bessett me and in my name, to receive and receipt for whatever amount of money I may be entitled from the State of Georgia by reason of the injury received as aforesaid in the military service, the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizin my said attorney to receipt in my name for any Warrant may be issued by the Governor, of or 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, the day of March 1893. Send money to me as follows, by John State Order Send money to me as follows, by John State Order County Georgie.
Coph County Googie	de county, the of County, State of Georgia, do hereby appoi min in his he is the me and in my name, to receive and receipt for whatever amount of money I may be entitled from the State of Georgia by reason of the injury received as aforesaid in the military service the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizin my said attorney to receipt in my name for any Warrant that may be issued by the Governor, 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, the day of Mark 1893. Send money to me as follows, by The County Sending Orders Send money to me as follows, by The County Sending Orders County Sending Orders Orders County Sending Orders
Coph County Googie	de county, the of County State of Georgia, do hereby appoint in his of Allaula my name, to receive and receipt for whatever amount of money I may be entitled from the State of Georgia by reason of the injury received as aforesaid in the military service the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizin my said attorney to receipt in my name for any Warrant than ybe issued by the Governor, of or any sum of money which may be coming to me for the reason aforesaid. IN WINESS WHEREOF I have hereunto set my hand and seal, the day of the state of the

SOLDIER'S PENSION.

1892.
FOURTHE VEAR EXIDER OF COUNTY, BUTCHEN FOR MINERAL PROPERTY.

COUNTY, BUTCHEN BOYON, 1892.

W. H. HARKISON, 1892.

1883.

No. S.C.
Application for Allowance

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STATE OF GEOLOIAGE

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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

PERSONALLY appears S. M. Binnitt of Barlow County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the odd day of Mth. 1844; that lie enlisted in the military service of the C 1849; that he enlisted in the military service of the Confederate States (or of the State of federate States (or of the State of) during the war between the States, and served as a fill a (t in Company #, of 2 th Regiment of Gill Company #, of 2 th Regiment of Gill Company #, of 2 th Regiment in the State of Film in the State of Film on the day of July 1863, he was wounded as follows: That through the left arm mear (he would found undersity and assentially lead assentially lead assentially leads assentially leads as sentially leads assentially leads as sentially leads assentially leads as sentially leads as sen) during the war between the

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

Sworn to and subscribed before me, this, the day of March hu Mudich Ortinary

STATE OF GEORGIA, Sunt in. 1, Www.ducks do certify that I am well acquainted with IK, Ren nett 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 MM 1894.

hw Neudicks Ordinary Danlow County

For Applicants Heretofore Allowed Pensions.

For Applicants Herelolore Allower Pension :-

STATE OF GEORGIA, Berlow County. Spersonally appears S. C. Bennutt 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 of a day of 1844; that he enlisted in the military service of the Conday of The TWN 1844; that he enlisted in the military service of the Confederate States (or of the Spate of) during the war between the States, and served as a March in Company H, of at the Regiment of H Volunteers, Germany 's Brigada: that whilst engaged in such military service at the battle of States, and you will be state of Renny on the a day of July 1863, he was wounded as follows: They book through the less wounded as follows: They book through the Less William States of March 2018 William States

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

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 the second of the second of the year 189 second of the second of the second of the year 189 second of the second of

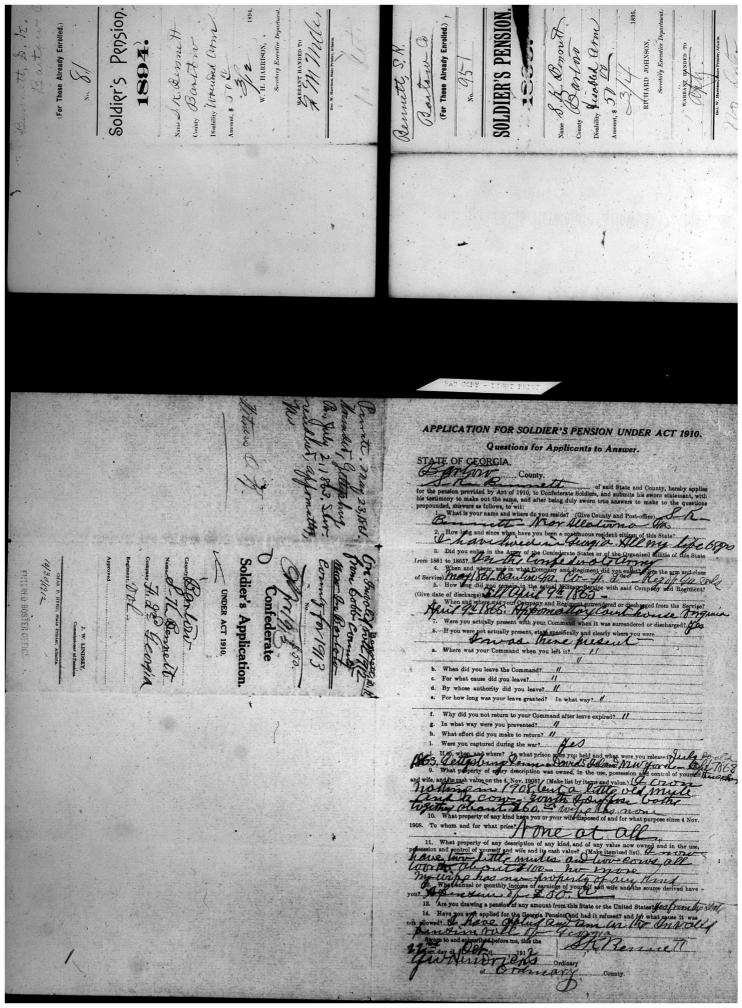
STATE OF GEORGIA, County.

I, Ardinary 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 and seal and seal seal of the day of the seal of the Ordinary Darlow County

Sworn to and subscribed before me, this, the day of March 1894. Note-State fully the nature of wound or character of disease which causes the disability, and explain particularly the eatent of the disability, resulting from the wound or disease. STATE OF GEORGIA, Survive County, I, Wound the applicant in the foregoing affidavit, and an 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 March 1894. Ordinary Bancow County. Ordinary Bancow County.	Sworm to and subscribed before me, this, the Sworm to the day of Sworm to the day of Sworm to the day of the day of the dashility, resulting from the wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease. STATE OF GEORGIA, County, I, Luxicularly County, do certify that I am well acquainted with 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 the state of the signature and seal, this day of the state of the signature and seal, this day of the state of the signature and seal, this day of the state of t
POWER OF ATTORNEY. STATE OF GEORGIA, COUNTY. Know all Men by these Presents. That I, I Benneth County, State of Georgia, do keeply appoint. H. M. Willes of Southern my true and lawful attorney in fact, for me and in my name, to receive and 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. And Decented in the presence of us M. S. Janderson DIRECTIONS. Send money to me as follows, by to P. O. County, Georgia.	POWER OF ATTORNEY. STATE OF GEORGIA, BOMON County. KNOW ALL MEN BY THESE PRESENTS, That I, S. R. Benney. County. State of Georgia, do hereby appoint of During and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of among 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 Warrrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WINNESS WHERROF, I have hereunto set my finand and seal, this day of Hology 1895. Executed in presence of us WHERROF, I have hereunto set my finand and seal, this day of Hology 1895. Executed in presence of us DIRECTIONS. Send money to me as follows, by 160. P.O. County, Georgia.
Soldigr's Papsion. Soldigr's Papsion. Name N. R. Rensouch County Bearing Urrectored Orgin. Installing Urrectored Orgin. Amount, & N. M. HARBISON, Secretary Executive Department, W. H. HARBISON, Secretary Executive Department, WARRENT HANDED TO T. M. M. M. M. M. M. M.	SOLDIER'S PENSION. Solding Lacked Grin. Distribitive Lacked Grin. Solding Lacked Grin. Sording Executive Department. Naturally Mandre TO. Natural Mandre To. Na

Boston Co.



	10. What property of any kind have you or your will disposed of and for what purpose since 4 Nov. 1906. To whom and for what price 1 The Control of the Con
	11. What property of any description of any kind, and of any value now owned and in the use,
	passession and pontrol of vouriet and vise and its cash value, Make insmired list). I would have been compared and in the use, have made the cash value of Make insmired list). I would have for the cash value of the insmired list.
	What Applied or monthly morne of assistant of any King
	13. Are you drawing a pension of any amount from this State or the United Statest flow from the Market Statest flow from the Statest flow flow from the Statest flow from the Statest flow from the Statest flow flow from the Statest flow flow flow flow flow flow flow flow
	14. Have you wan applied for the Georgia Pension and had it reduced and for what game it was not silowed. It was a subject to the Control of
	Byogn to and subscript before me, this the SARRessace II
	Guttino Peps Ordinary
	of Otansensy County.
	$\boldsymbol{\varphi}$
BAD COPY	- LIGHT PRINT
QUESTIONS FOR WITNESS AS TO SERVICE.	AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA,	STATE OF GEORGIA.
Griff County.	County.
John y Heard of said State and County is hereby presented	Personally before me nomes
asks witness in support of the application of . A. Bernell for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded	says that they are freehalders residing in said County and we knowwho on oath
answers as follows:	the applicant (or pension and we know the property that is now in the use, possession and control of himself and wife and of its wash value to wit: (Make List by items and value,)
1. What is your name and where do you resider flow you Aleand.	
2. How jong and since when have you known S. R. Blomesh, the applicant?	1. What property if any half
Jou pagas dear	What property, if any, has been sold or even away by the applicant or his wife since 4 Nov 1908? (State it fully by items.)
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? Bashard He. Lan 2 have been	2. When and to whom was it sold or even to?
a guarded with him to the last till	3. What was the price paid or stated to be said?
4. When, where and in what Company and Regiment did.	What relation is the party to applicant? What disposition was made of the proceeds of the sale?
war from 1861 to 1865? (Give date and place) Mars 1861 hanton Que.	8. Was the disposition of this property made in good faith and full values? Sworn to and subscribed before me, this the
5. How did you obtain your information of this Service! I than present	Jovern to and supernoed peters me, this the
6. How long within your own personal knowledge did he perform actual william and in	Ordinary,
this Company and Regiment? (give date) Trans Mars 1861 to Teb 1864-	County.
7. When and where was his Command surrendered or discharged (give date and place). Grick of agent approximation court some Us.	ORDINARY'S CERTIFICATE.
8. Were you personally present at the Surrender? 2 11000 man	STATE OF GEORGIA,
9. If not, where were you and how came you there? I have not not the second	County.
10. Was the applicant personally present with his Command at surrender of Alexander As were	Ordinary of said County, certify that I know
11. If not where was he and how came him there?	for Possion is the person he represents himself to be and resides in
	said County. That I also know All Solution the witness swearing to the
12. When did he leave his Command?	they are all residents of said County and were duly sworn by me before in the said that
By whose authority did he leave.	That the
ong was he granted leave?	Tax Returns of State and wife value for tax is in 1908 \$ 100 \$ 100 \$ 100 \$ 100 \$
ll that you have stated to be true? If of your own knowledge (Tell clearly and specifically)	C. Sworn under my hand and official scale of # 1
13. In what way was he prevented from returning to his Command?	4 Word Ordinary,
low do you know?	of Barton: County.
14. What effort did he make to return to his Command and how do you know?	NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following world "You do solemnly swear that you will true answer make to each question asked you and the evidence you shall give shall be the whole truth as hele you God?"
15. Was applicant captured as a prisoner	NOTES 1. Before any questions are massered the Orlinary shall swear applicant and all witnesses in the following worth "You do solemnly wear, that you like 100 per or the state of the world shall give shall be the whole truth; so kelp you God!" All the shall give shall be the whole truth; so kelp you God! I make the proper and the swidence you and the swidence you are the state of the state of the state of the state of the swidence you are the swidence you are the swidence you are the swidence you are the swidence of the swidence you are the swidence when the swidence you control of sail and wife, affidavits of freeholdery interestants.
In what prison was he held?	and \$20, amounts of Inchesiden
·	MARKET THE STORY
Sworn to and subscribed before me, this the John & Alexand	

Ordinary, Cook

6. How long within your own personal knowledge did he perform actual military serv this Company and Regiment? (give date) Trans. Mary 1861 to July 1865 S. Were you personally present at the Surrender 2 12 and not 9. If not, where were you and how came you there? I start Wa Felt 1 Ness ma a suggest of the start of the sta 11. If not where was he and how came him these?..... 12. When did he leave his Command?.....for what cause did he leave?By whose authority did he leave.... 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? 14. What effort did he make to return to his Command and how do you know?....In what prison was he held?... John & Heard

Georgia murray County or gasper Richardson who on each says Their he Surrendered with SK House Va wish Les armey m 1865-Jasper Richardsa Swam to and Sules circles before me Det 18.1912. In Complete ardinary of more Co

ORDINARY'S CERTIFICATE.
STATE OF GEORGIA. County.
the applicant A Barried for Posteion is the person he represents himself to be and resides in
said County. That I also know the witness swearing to the
service and who are treeholders, that
they are all residents of said County and were duly sworn by me before signing the foregoing suitavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Box Low how that R. Bernoud and wife
value for tax is in 1908 \$ for 1909 \$ 60 for 1910 \$ 107
Sworn under my hand and official seal of office this. 262 day of Oct 1912 Ordinary, of 3 and one County.
NOTES 1. Before any questions are nauvered the Ordinary shall sever applicant and all witnesses in the following words "You do solemnly sear that you will true nauvere make to each question asked you and the evidence you 2. Additional state the whole truit; so help you God." 2. Additional state the make before the Ordinar spaces are implicant. 3. All guidaries must be made before the Ordinar spaces are implicant. 4. Inephilant has no property it all in his passession, use of control of self and wife, affidavits of fresholder subsciences.

WHEN AND WEERE BORN? ENLISTED WHEN AND WHERE? RANK: NAME OF CAPTAIN AND COLONELS WOUNDED? CAPTURED, WHEN AND WHERE? To Friend, Dovid's Island

RELEASED then orthogon, Devid's Telent, I.Y. Perolet Se

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

WHEN AND WHERE SURRENDERED?

DIED, WHEN AND WHERE?

BURIED:

Swam to and Jasper Bichardson CAPTURED, WHEN AND WHERE? Bules circles before me (Q.K.) In Complete ardinary of ming Co IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? DIED, WHEN AND WHERE? No. 1107 Allanta, Sa. Hely 18 190 No. 785 Allanta, Ba. Tely 12 1891. STATE OF GEORGIA, STATE OF GEORGIA, Mr. & R. Bennett Baston having filed his application in the Executive Mr. Sellett Department for an allowance under the Act approved October 24, 1887, as amended by Act, Ganton having filed his application in the Executive approved, Dec. 24, 1888, and the same having been examined and allowed for Department for an allowance under the Act approved October 24, 1887, as amended by Acts Um disables approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for He is entitled to receive the sum of Hifty 100/ Um disabled for such disability, the same being the allowance due for the year ending October 24, 18

The Treasurer will pay the same and the first receipt on this youcher, and return same The Treasurer will pay the same and hold his receipt in this outher and return same to cutive Department for warrant. Executive Department for warrant. CLERK EXECUTIVE DEPARTMENT. H. I nontin ONSHOT AMERICAN SECV EXECUTIVE DEPARTMENT. RECEIVED OF STATE TREASURER, R. U. HARDEMAN, \$ 50 RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia. per above voucher, this 18 of Hely OK Bennett, by his atty in fach, All Fouter

S K Bount Foute.

Department for an allowance under the Act approved October 2 approved, Dec. 24, 1888, and the same having been examined at	pplication in the Executive	NKI		
		Mr. 2.00 Se	ellell of the	County
		of Garton	having filed his application in the Ex	
arm asables	nd allowed for	Department for an allowance un	der the Act approved October 24, 1887, as amended	
He is entitled to receive the sum of Fifty 10	11		11, 1889, and the same having been examined and allo	
		Urm disa		
The Treasurer will pay the same and The Treasurer will pay the sam	r ending October 24, 18	He is entitled to receive the sum of	or 2 (100010 10)	Dollars
to Executive Department for warrant.	s voicher, and return same	for such disability, the same being t	the all wance die for the year anding October 24, 189)1.
AIII	The state of the s		me and hold his receipt on this outher and return sa	
OF GEORGE	GOVERNOR.	Executive Department for warrant.	S. WENUSA 33	,
By the Governor, Court Harnson			7. V. m	m
CLERK EXECUTIVE DEPART.	MENT	By the Governor,	Gover	RNOR.
DEFARI.	ALENT.		amsin	
M. Him		, _0,0,0,0	Sec'y Executive Department.	1.
, 30				
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,		. 50		
A 11- 2 OOL			• • • • • • • • • • • • • • • • • • • •	
Jufy To	Dollars,	RECEIVED OF R. U. HARDEMAN, T	Treasurer of the State of Georgia.	
per above voucher, this 18 of	chy 1890	Olifly -	D	Pollars,
OKBO	ingett 1:	per above voucher, this * 13	of Febra 1891.	
atty in to	ach, All Foute		SK Bennett	
	AM Soute,		By A M Four	to .
			7 0, 200	~
			The state of the s	
	"Rennett & D.			
D. A	Bennett, L. K.			
Barton	Bennett, S. L.		B	
	Batan		Barton	
Barton Maimed Soldiers.	1891,			
Maimed Soldiers.	Batan	Audited	Maimed Soldier	Ś.
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Maimed Soldiers. Voucher No. 1107 Amount 8 5 0	1891. eMaimed Soldiers: Voucher No. 785	Audited	Maimed Soldier 1889. Voucher No. 756	`s.
Maimed Soldiers. Voucher No. 1107 Amount 8 5 0	1891. Maimed Soldiers. Voucher No. 785 Amount \$ 50		Naimed Soldier 1889. Voucher No. 756 Amount. \$50.	
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Maimed Soldiers. Voucher No. 1107 Amount 8 5 0	1891. Maimed Soldiers. Voucher No. 785 Amount \$ 50		Naimed Soldier 1889. Voucher No. 756 Amount. & SU. Paid Baul K. Bau For Left ann	
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Maimed Soldiers. Voucher No. 1107 Amount & S.O. Paid to B.K. Pennett For Arm disables	1891. Maimed Soldiers: Voucher No. 785 Amount \$ 50 Paid to Al Securell For Desabled Aims		Naimed Soldier 1889. Voucher No. 756 Amount. & St. Paid Baul & Bau For Left ann Usables	wet

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WARRANT CLEEK

W. J. Campbell, Wasp Printer, Constitution Job College

M. M. Campbell, Wasp Printer, Constitution Job College

M. M. M. Campbell, Wasp Printer, Constitution Job College

Deeby 13 Fery 13 1891. Included in warrant No. Am Fronte NAME, Bennett, Samuel K. WHEN AND WHERE BORN? ENLISTED WHEN AND WHERE? COMPANY AND REGUENT? Private, Co. F, 2d Regiment Ga. Vols. Benning's Brigade. NAME OF CAPTAIN AND COLONEL? F. M. Daniel 3d Lieutenant. ED? At Gettysburg Pa., July 2, 1865 in left hand, entire arm CAPTURED, WHEN AND THERE? WHEN AND WHERE SURRENDERED? IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? DIED, WHEN AND WHERE? WITNESSES, F. M. Daniel 3d Lt.Dr. J. M. Young, Dr. Lindsay Johnson . No data.

COUNTY. Bartow.

No. 756 STATE OF GEORGIA, Manta, Ga Hebry +20 100 9 Mr. Samuel K. Bennett of the County of Barters. 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 Seft arm disables He is entitled to receive the sum of 1880 to 1 By the Governor CLERK EXECUTIVE DEPARTMENT. RECEIVED OF STATE TREASURER, R. U. HARDEMAN, Fift xoos per above voucher, this of Hely

disabled Hely 20.

Included in Warrant: No. issued to Treasurer.

am Fronte

All toute, att infach.

OF CAPTAIN AND COLONEL? F. M. Daniel 3d Lieutenant. 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 ED? At Gettysburg Pa., July 2, 1865 in left hand, entire arm Geft am disables He is entitled to receive the sum of 1000 for the year ending October 24, 1889.

The Treasurer will pay the same and lost its receiptor this you have an indicator same to Executive Department for warrant. CAPTURED, WHEN AND THERE? RELEASED, WHEN AND WHERE SURRENDERED? By the Governor Warnison IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? CLERK EXECUTIVE DEPARTMENT. DIED, WHEN AND WHERE? 5.0 BURIED, RECEIVED OF STATE TREASURER, R. U. HARDEMAN, Fifty xoor WITNESSES, F. M. Daniel 3d Lt.Dr. J. M. Young, Dr. Lindsay Jo No data. Dollars. per above voucher, this All Forte, att infach. for Saul. & Buritt. P.O. 1989 COUNTY. Bartow.

Amend and state, where was husband from Sept. 21st.1864 to surrender of his command. May be did not return to command after furlough expired Then prove same to be true, when to tresent at surrender. J.W. Likadsey, Com of Persions. The Recoms of Co. C. rolls show that husband of applicant as absent on Horse Detail from Sept. 21st 1984 .No further record found of him. Widow's Pension UNDER ACT 1910 Barton Name MM, One Book aR.N. Des L W. LINDSEY, 13/31-1916

Pension office Sept. 27th 1915

Amend and state, whe his command. Why he Then prove same to Horse Detail fro The

Alach Jegs 48 -19 J. W. LINDSEY,

13/31-1916

Pension office Sept. 27th 1915

The Recogs 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 bradsey, Com of Pensions.

Widow's Pension UNDER ACT 1910 5161-12/2 L W. LINDSEY.

Barlin County. Personally before me comes MW Drie G. of said State and County, fter 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: g questions to-wit:

1. What is your name, and where do you reside? Otil Bush Cantenstrille 4M 1. What is your name, and where do you reside? ATT BLAN COMMONIAL OF 2. How long and since when have you been a continuing resident of the State of Georgia?

3. When, where and to whom were you married? State I State Brand The Brand Land ATT L. N. Beart

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 Mola Brand D. Bran 6. Was your husband personally present at the time of the surrender or discharge of this Com 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? For how long was he granted leave of absence? What was his physical condition when he left his Command?____ What effort did he make to return to his Command? 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 When and where did your husband die? Contins villa Ja - Depr 12" 1910 j. When and where did your muscane.
k. Were you residing together when he died?

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

STATE OF GEORGIA,

k. Were you residing together when he died?

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

9. What property of any description did you own, hold or control for your use and, its cash value, Nov. 4, 1908? (State same by items and ephere situated).

10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) 11. What property of any description of any value have you now?

list and cash valued Name Charles Band on machine of

12. What are your annual earnings or income from any source and their value? 13. Have you or your husband heretofore been paid a pension by the State?

> - Ordinary of Borton County.

Inra Uric Dest

If so, when and for what cause were you or your husband placed on the Roll?

g" day of aug 1965

Gut undrich

Questions for the Witnesses as to Service of Husband and Marriage.	AFFIDAVIT OF TWO FREEHO
STATE OF GEORGIA,	STATE OF GEORGIA.
Dartin County.	Bartisi County
Personally before me comer for S. Seal B.J. N. bobb who after	000
being duly sworn true answers to make, to the following questions, answers as follows:	are freeholders of said County and that they know Mar.
1. What is your name and where do you reside? The sach if Il both boutening (a)	of said County and know what property she owned on 4th Nov. 1908, a
2. How long and since when have you known Darks Continued applicant?	by Schedule (A) as follows
3. How long and since when has she continuously resided in this State? (Give date.)	Personal property no ne
Thomas him sitty pears more than sity years	Notes and accounts due
4. When and to whom was she married 2867, mas one dalyn	Total
5. How long and since when did you know A. N. Best her	Schedule (B). We know the property sold or given away since Nov. 4th, 1908, it
husband? more than diff years her	Personal property
6. When and where did A. N. Best	Money, Notes and Accounts
the husband of Applicant die? Apt 1941910, Cartin ville Go	Schedule (C).
7. Were the applicant and her husband living together as husband and wife at the date of his	We also know what property she has now in her possession, use
death?ALA	Manua Horses and Mules
8. If not, how long did they live apart before his death?	- Marke Cows and Hogs
Were they divorced? We apart before his death?	Other Property
9. When, where and in what Company and Regiment did . N. Best enlist?	Income and Earnings new
May 1861 Joanville Sa, Company Di	Total Value of all and anter at a .
Holly Lizin of Baraly	Sworn and subscribed before me this the
	8 of the day of aug 10/4
10. Were you a member of the same Company?	Gudinary Colores Ordinary
11. How long within your personal knowledge did be perform actual military service with his Company and Regiment History May 1861. While Bound 1860	of Bantow County
12, When and where did his Command surrender, and was discharged?	ORDINARY'S CERTIFICATE
April 1865 Gunston N. 6	STATE OF GEORGIA,
18. Were you personally present when it was surrendered?AeAIf not where	M8 0 1 = 1
were you and how came you there?	County.
1//11-	that, I know MM. One Be the
14. Was the husband of applicant personally present at surrender?	is the person she represents herself to be and she is a bona fide contin
where was he? 400 faco cut when, where and for what	
cause did he leave Command? (Give date.)By whose	County and was on the 4th Ngv., 1908 That I also know faller from the Land Leader.
authority did he leave his Command?and how	to the service of husband, and have property to the service of husband, and have property to the freeholders. That all of them are now residents of said County and were
long was he granted leave?How do you know all this?	signing the foregoing affidavits and that they all are truthful trustwort
live wine in the dance everyong and	enditied to full faith and credit.
Know promadly as to the facto Deated ! "	That the Tax Returns MINO ON STATE TO THE TOTAL OF THE TO
15. For what cause, if you know of your own knowledge, was he prevented from returning to	for 1914 \$
his Command? 1111 a rum	Sworn ander my hand and official seal of office this
16. What effort did he make to return to his Command and how do you know this? Of your	Deplulin 19/5
own knowledge or how?	(SEAL.)
1 1 00 1	Bani
Sworn to and subscribed before me this the John Steak	(SEAL.) NOTES 1. Before any questions are answered the Ordinary shall arrow and the Ordinary shall arro
day of the 19/1) he by Q e c	"You do solemnly swear that you will true answers make to each of the questyou shall give will be the truth. Bo help you God.?"
TWAINS 10 Ordinary	NOTES 1. Before any questions are answered the Ordinary shall swear applicant and s "You do colemnly swear that you will true answers make to each of the ques you shall give will be the return. So help you God." 2 descriptions a mid-wis may be attached if bank spaces are insufficient. 3 distribution with the contraction of the standard 150 are entitled. 4 distribution with the contraction of the standard 150 are entitled. 5 distribution of the standard o
of Barlin	5 Attach certified copies of marriage license if obtainable. If not, prove marriage license if obtainable.

j. When and where did your husband die? Costontille Ja Apr 12." 1	ain
k. Were you residing together when he died? # & # DEL	110-
k. Were you residing together when he died? 1. If not, how long had you resided apart? 9. What property of any description did you own, hold or control for your use and its value Nov. 4. 1908; 6 (State same his tions and when white her his property of any description of the property of the same his property of the sam	
value, Nov. 4, 1908? (State same by items and exhere situated).	cash
I recurs Garried Grap property	
10. What property of any kind have you sold or given away since Nov. 4, 1908? What w	
ceived for it and what did you do with the proceeds thereof? (Cinc its	
I have not ould any property	(
11. What property of any description of any what	
11. What property of any description of any value have you now? Give list and each value AMBL Charles BARL was median.	
12. What are your annual earnings or income from any source and their release	
il one	
13. Have you or your husband heretofore been paid a pension by the State?	
If so, when and for what cause were you or your husband placed on the Roll?	
Sworn to and subscribed before me this the	
-1-0 day of 19/15	
WHINDITA Ordinary.	
Rod S	
of Dorlow County.	
AFFIDAVIT OF TWO FREEHOLDERS.	
STATE OF GEORGIA,	
Bartisi County	r
Personally before me comes les attended by the on oath says that	
are freeholders of said County and that they know Mo. Drie lotte with	
of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set	out
by Schedule (A) as follows	
Personal property \$	
Notes and accounts due Noval \$	
Total \$	
Schedule (B). We know the property sold or given away since Nov. 4th, 1908, its cash value to be as follow:	
Personal property \$	
Money, Notes and Accounts \$	
Schadule (C)	
We also know what property she has now in her possession, use and control to-wit:	
Manual Horses and Mules	
- Mark Cows and Hogs \$	
Other Property\$	
Income and Earnings	
Total Value of all property and effects side side for	in
Sworn and subscribed before me this the	
Sel of day of aug 1014 and Saforis	_
Gual. 2	
of County.	
Property and the second	
ORDINARY'S CERTIFICATE.	
STATE OF GEORGIA,	
County.	
I, Ordinary of said County do certi	fy
that, I know Mo One So the applicant for pension. Si	ne
is the person she represents herself to be and she is a bona fide continuing resident citizen of sa County and was on the 4th Nov., 1908.	iď
That I also know falley I will forth lead the witness who swea	
to the service of husband and Ball - Darcos & lo hi le	
freeholders. That all of them are now residents of said County and	
signing the foregoing affidavits and that they all are truthful, trustworthy, and their statements at	•
That the Tax Returns MR Orac BReturned for Tax is for	or
1008 9 for 1010 8 for 1912 8 UT for 1913 8 DV	
for 1914 \$	
Sworn ander my hand and official seal of office this day of day of	
(SEAL)	*
Da Lote	
(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 following	
you shall give will be the truth. So help you God.?" 2 Additional sfidevite may be attached if blank spaces are insufficient. 3 Only widow who marked.	
NOTES 1. Before any questions are asserted the Ordinary shall awar applicant and the witness in the following words you shall give will be the trath. So help you God, "" 2. Additional additive that has been as a second of the questions asked you and the evidence you shall give will be the trath. So help you God," " 2. Additional additive than you be attached if hains space are insufficient, and a second of the great second of the second you have a second of the questions asked you and the second you have a second of the questions as a second of the questions as a second of the questions asked you are a second of the questions as a second of the questions asked you and the great second of the property of the	

	18. Were you personally present when it was surrendered? All If not where ere you and how came you there?
	1//11-
t	14. Was the husband of applicant personally present at surrender? If not there was he? Was Assaurable when, when, where and for what
	nse did he leave Command? (Give date.) By whose thority did he leave his Command? and how
r	ng was he granted leave?How do you know all this?
1	me wind the Danne everyong and
	15. For what cause, if you know of your own knowledge, was he prevented from returning to
	16. What effort did he make to return to his Command and how do you know this? Of your a knowledge or how?
	Sworn to and subscribed before me this the John Sheahu (11th day of Charles 1975 Ino H. Coff FUNTAIN TO SHE
	July Jedinary A. Coff
	County.

Application for Pension Due to a Deceased Pensioner (To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)

UKDINAKY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I. Ordinary of said County do certify that, I know MM. 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 all the service of husband, and I also know are to the service of husband, and I also know are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing and avairable and that they all are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn ander my hand and official seal of office this.

(SEAL.)

y questions are answered the Ordinary shall swear applicant and the witness in the following words: obtaining swear that you will true answers make to each of the questions asked you and the evidence all give will be the truth. So help sink asked you can be a supported by a state of the property of the control of the property of the

Guyhmind Ordinary, County.

(Under Act Approved August 15, 1904)

of said County, who, after	
1	being sworn,
me of death which commend	10 l
day of	noga
a estate of any mile	
oo 1	to pay these
sworn statements f	ully and cor
C/4 Zuff	i
	of said County, who, after of said County, ar of said County, who, after of said County, ar of

GEORGIA, Bartoy County. I. Bartoy County. I. County of said County, do cert I county. I county of said County, and that said person is of truthful and trustworthy character, entitled so f I faith and credit; that I also knew Mark Dear while in life and that this w the same person whose name appears on the Pension Roll of County of		EDTIETO	TIP OF O		
faith and credit; that I also knew Mus Ora Best while in life and that this we the same person whose name appears on the Pension Roll of Sarlow Countyr a was paid a Pension of and I now believe said persioner 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 a tached hereto. Given under my hand and official seal, this 29 M Wast Must Must Must Must Must Must Must Mu		EKILFICA	TE OF O	RDINARY	
faith and credit; that I also knew Mrs Ora Best while in life and that this we the same person whose name appears on the Pension Roll of Sarlow Countyr a was paid a Pension of Jan	GEORGIA, /30	istow	W		,
faith and credit; that I also knew Mrs Ora Best while in life and that this we the same person whose name appears on the Pension Roll of Sarlow Countyr a was paid a Pension of Jan	1. Q.n	9	Gounty		10/4
faith and credit; that I also knew Mrs. One Best while in life and that this we the same person whose name appears on the Pension Roll of Sarloto Countyr a was paid a Pension of and I now believe said persioner 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 a tached hereto. Given under my hand and official seal, this 29 M Wasting of the said County and I now believe said persioner 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 a tached hereto.	that I personally know	6 H	Freff	Ordinary of	said County, do certi
faith and credit; that I also knew Mrs Ora Best while in life and that this we the same person whose name appears on the Pension Roll of Sarlow Countyr a was paid a Pension of Jan	citizen of said County, and t	hat said person is	of truthful and		who is a reside
was paid a Pension of Guarder (\$1700) Dolla in said County for 192, and I now believe said pensioner to be dead; and that the instructions at to foot of this voucher have been carefully observed in making up this voucher and the bills which are a tached hereto. Given under my hand and official seal, this 29 M. Chilled County of the cou	faith and credit; that I also	knew Miss	Des R.	4-	acter, entitled to f
in said County for 1922, and I now believe said persioner 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 a tached hereto. Given under my hand and official seal, this 29 th this way.					
cached hereto. Given under my hand and official seal, this	was paid a Pension of	Fellow	C TON OI,	nol	County, a
tached hereto. Given under my hand and official seal, this	in said County for 192 9	and I now believe	said pensioner to	Low.	(STO OO) Dolla
tached hereto. Given under my hand and official seal, this	foot of this voucher have bee	n carefully obser	and in make	be dead, and that	the instructions at the
		*	vou in making u	p this voucher and	the bills which are a
		d official seal, this	291	c non	1 6
				11/11	1 192/
				www	Count

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

, who died without owning sufficient property to pay this bill. alta. The Ordinary must see to it that each bill is perfectly legitimate in every respect, so pay this one.

attached neathy to this blank, after this blank has been properly completed as indiscised.

the completed wonder—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.

symmetry must be pain out that it is recurred to you as your authority to make our payments.

Sth. Return this application, and attached bills, with your final settlement, to the Pension Department.

Sth. Ordinary should see that the back of this blank, when folded, is filled out.

Orie Saxon Best of Enrice Floyd County, who, after being sworn, on oath says that he knew Mrs. Orie Saxon Bestof said County, and that said Pensioner County, in this State, on the 24th day of July 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. Swort to and subscribed before me, any Johnson Ordinary Floyd (Seal of Ordinary) CERTIFICATE OF ORDINARY arrow GEORGIA I. M. M. Gryns Court hat I personally know Edw PSist the same person whose name appear on the Pegsion Roll of Duntow County, and was paid a Pension of Harry My (85) Dollars in said County for 19.2-4,, 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 ... (Seal of Ordinary) INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their a greath item and the value of it, and each date. The above and foregoing account is rendered for services in the last illness (or for funeral exper 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly to pay this bill. ached neatly to this blank, after this blank has been properly complied as indicated.

4th. The completed venicher—this blank and the bills—must be sent to the Pension Department for approval and no spin support to the properly to make the paying the paid out until it is returned to you as your authority to make the paying the 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

County

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness) (Under Act Approved August 15, 1904)

GEORGIA.

Floyd

wy Johnsonbrainary Zw Buch tamany Bartow (Seal of Ordinary) (Seal of Ordinary) CERTIFICATE OF ORDINARY Barton Count CERTIFICATE OF ORDINARY GEORGIA. ..., Ordinary of said County, do certify a m Laines ..., Ordinary of said County, do certify who is a resident that I personally know of said County, and that said person is of truthful and trustworthy character, entitled to full and credit; that I also knew. Una Possil while in life and that this was citizen of said County, and that said person is of truthful and trustworthy character, entitled to full the same person whose name appear on the Pension Roll of Owntow County, and was paid a Pension of Figure 1 Dollars in said County for 19.24, and I now believe said pensioner to be dead; and that the instructions at faith and credit; that I also knew Mrs Ona Best the same person whose name appears on the Pension Roll of Barlow County, and was paid a Pension of State appears on the remon roll of County, and was paid a Pension of State of County for 182 , 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 at-Given under my hand and official seal, this. (Seal of Ordinary) Given under my hand and official seal, this 29 11 (Seal of Ordinary) Barton INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their a giving each item and the value of it, and each date. INSTRUCTIONS:

[Instructions]

[Instructions] 2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, due, unpaid," etc.) "The above and foregoing account is rendered for services in the last illness (or for funeral expenses,"as the case may 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. ached matty to this biant, after this biant has been properly completed as inducated.

4th after the completed voucher—this biank and the bills—must be sent to the Pension Department for approval and no must be paid out until it is returned to you as your authority to make the payment. ard. 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. Sth. Return this application, and attached bills, properly receipted, to the Pens 6th. Ordinary should see that the back of this blank, when folded, is filled out. 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no make the 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 6th. Ordinary should see that the back of this blank, when folded, is filled out.

Flore BARTOW

19 29

Application for Pension

Due Deceased Pensioner (UNDER ACT 1904)
(To pay expenses of last illness and funeral)

Approved and ordered paid of

Ordinary

P. M. Gaines

Amount \$ 100 00

Heb. 20, 1930, R. de 4 La Commission

For Mrs. Orie Saxon Best Date of Death July 24th

Ordinary: Fill out above in full and a

..., who died without owning sufficient property to pay this bill. ent, to the Pension Department. Barlow County 192 Application for Pension **Due Deceased Pensioner** (UNDER ACT 1919) (To pay expenses of last illness and funeral) For Mrs Ona Best Date of Death July 24 1929 Approved and ordered paid
Och 10, 19 29 Ordinary: Fill out above in full and send this blank to Pension Department for ap-proval. 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.

statements fully and completely

who is a resident

James Ordinary

.....while in life and that this was

Paid in error, Agamded

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 beak to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

P. M. Farrierding

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.

COURT OF ORDINARY
BARTOW COUNTY

GAINES. ORDINARY

Cartersville, Ga., July 9

1930

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

Dear Sir:

I have your favor with check for \$600.00 for funeral expenses. I hote 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. Colé, the undertaker March 15, 1930. It must be that I in some manner got two claims filed for this benefit : lease 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 yours of the yours ordinary Bartow County, Ga.

ROME, GA., Aug. 1, 1929

Rome, GA., October, 9, 1929.

M Rs. Orie Best

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

Dear Sir:

I have your favor with check for \$600.00 for funeral expenses. I hote 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. Colê, the undertaker March 15, 1930. It must be that I in some manner got two claims filed for this benefit . lease 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.

Bartow County, Ga.

Rome, GA., Aug. 1, 1929 M Rs. Orie Best Rome, Ga. Emmett Gole DIRECTOR OF FUNERALS 5-7 SIXTH AVENUE July,24,1929, The above and foregoing account is remered for Funeral expenses of Mrs.Orie Best, who died with out coming sufficient-property to pay this ball

Sang Johnson Ordinary

County

Sworn to and subscribed before me this 30 Day

Ordinary Floyd Co. Ca.

Received of R.M.Gaines, Ordinary , Bartow county, One Hundred (\$100-00) furbral benefit from the Pension department.

Tis March 15, 1930.

Autumntt

STATE OF GEORGIA.

County.

Co

POWER OF ATTORNEY.

Wartow Co O.K. No. 84
INDIGENT PENSION
Name B. F. Bibl.
county Barlow from y
RICHARD JOHNSON, Secretary Executive Department.
WARRANT HANDED TO
Geo. W. Harrisch, State Printer, Atlanta.

POWER OF ATTORNEY. STATE OF GEORGIA, County.	AFFIDAVIT OF PHYSICIANS. STATE OF GEORGIA, County. Personally gauge before me Doubley Doubley Doubley Doubley Doubley Doubley Doubley Doubley Doubley Applicant for pension under the Act of 1894, and after the personal examination, say that his precise physical condition is as follows: Conguna Caulonio i Conguna Auro
INDIGENT PENSION ISSOS. Name B. F. Bebl. County But Ost. Ground French Property Ground French Department WARRAST HANDED TO WARRAST HANDED T	
	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 the day of africant 1895.

in Carrie

RICHARD JOHNSON,

EY.

Mon St.	INDIGENT PENS	BE	Intring Hon	RICHARD JOHNSON, Seveling Escentive D., WARRESTE HARRING and	Masse Printer, All
0 3		Nume	• Ground	.	

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

Sworn to and subscribed before me, this
the Hyperstanding 18

Approximately

Ordinary

} R.S. Pradley

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Sanlow County.
CIU No. Vis Or
I, Ordinary in and, for said County, hereby certify that
B & Bills
the applicant resides in said County, and was a bona
fide resident of this Store on the first day of January, 1894, and that the witnesses, viz:
S. D. Duchard
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 County show that applicant
returned for taxation in his name in 1893. Mathing
dollars
of property, and in 1894, Mulling dollars of property.
16-
Witness my hand and seal of office, this \ \ \ day of \ My 1895.
esto Nenonello Ordinary
B D Ordinary
of Warton County.
NOTE
Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words:
truth, so help you God." the questions asked of you, and the evidence you shall give will be the whole
· , , , , , , , , , , , , , , , , , , ,

10. What is the applicant's occupation and physical condition: He has no Vecupation. Physical condition is based on the has no had been been as the has not been supplied to the house of the had been been as the had been been as the house of the house o	
Occupation. Physical Condition is he	1
The continue of the state of th	
brom Heart houble.	in
	`
11c Is the applicant unable to convert him 10.	
the cause of his ill health, he being hundle to exert hundle, without bringing on bod newways on the bod newways one	1
to out the Marit the aling runs	ale
Led men all though oring bu	
our mouns offell))
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 ince	ome?
Nm.	
14. Give a full and complete statement of the applicant's physical condition that entitles him to a room	
14. Give a full and complete statement of the applicants physical condition that entitles him to a pen under the Act of December 15th, 1894? He has been declined	2_
we were your the will the the	
Carlotte of Calls Hall Mariens ha	
which are extend and borked as to	
Time sulvey surble to work of any Coll	
, and any care	49.

"You shall true answers make to each of the questions asked of you, and the witnesses in the following words:	
crute, so nelp you God."	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 vary live years, and Differs at times with norms prortrationed to Desch and a little with norms prortrationed
	under the 4ct of December 15th, 1894? He has been declined
	in health for a little on thouse
	Nilling ax 15 mills of the find
	to the homens production
	him dutidy two ble to work of any Citting
	To come of any citing
	15. What interest have you in the recovery of a pension by this applicant?
· · · · · · · · · · · · · · · · · · ·	Sworn to and subscribed before me, this } Sile Prichard
	the day of the 1895.
	Mostuments Propriet
	· · · · · · · · · · · · · · · · · · ·
The state of the s	
	QUESTIONS FOR WITNESS.
OUECTIONS FOR APPLICATION	
QUESTIONS FOR APPLICANT.	
STATE OF SECOND	STATE OF GEORGIA,
STATE OF GEORGIA, County.	Darling County
County.	county.)
B. F. Bixon	S.C. Brichard, of said State and County, having been presented
of said State and County, desiring	
to avail himself of the Pension Act Approved December 15th, 1894, hereby submits his proofs, and after	as a witness in support of the application of D, H, Bibb for pension
being duly sworn true answers to make to the following questions, deposes and answers as follows:	under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the
1. What is your name and where do you reside? (give State, County and post office)	following questions, deposes and answers as follows:
Bibb. Adainville Barton O. Ga	1. What is your name and where do you reside? S. G. Pholiant, &
2 When the state of the state o	Maismille Barton Canaty Gy
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?	
Near Alamaile Ja, Frice 1811	2. Are you acquainted with 19 ft, Beth , the applicant, if so
3. When and where were you born Hine 8 1845, 111 8. 6.	how long have you known him? Herry years
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate	
200 Militia & Confederate Army of in the Georgia Militia & Confederate	3. Where does he reside, and how long has he been a resident of this State? Han helle
5. When and where did you enlist? Meh 1863 at Mandy will St	- Darlow Cola Dine Heby 1871 - Ty years
6. In what company and regiment did you enlist? Cob 48.6 Cavalry	4. Do you know of his having served in the Confederate army or the Georgia militia? How do you
7. How long did you remain in that company and regiment? Sell Close of war	de d
	know this? I de, I served in The same Company
8. If you were discharged from same and joined another, or if you were transferred to another, give an	
account of such discharge or transfer?	5. When, where and in what company and regiment did he enlist? Things 14 1863, Ot
3	X 100
9 Forhamber 11 11 m. Au CA 21 CA	Maryville S. Co.
9. For how long a period did you discharge regular military duty? If DA Mouth	6. Were you a member of the same company and regiment?
10. When, where and under what circumstances were you discharged from service? Caine	
hime in may 1865 from the Dervice, not howing	7. How long did he perform regular military duty, and what do you know of his service as a Confed-
& unnivered, but ofterwood did so infune 1865 8	erate soldier, and the time and circumstances of his discharge from the service? Chaut hor
	He as and three mounts. He made a good
11. What is your present occupation? Nothing	Salde Soul Prost of more a good
12. How much can you earn per annum by your own exertions or labor?	Golder Derved litt the end of the wor
Nothing	
* in the state of	8. What property, effects or income has the applicant? (Give your means of knowledge.)
	(Give your means of knowledge.)
13. What has been your occupation since 1865? Henned derne, milled one	arguainte with his condition
hurchowind some and worker of Cosper	alguarited with his Condition
less hade some	The state of the s
11 What I was a second of the	9. What property effects on long 22.1
14. What sum would be necessary for your support for this pension year, and how much are you able to	9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition,
contribute thereto either in labor or income? The him noted Salan not	if any, did he make of same?
The lot out is bute any amount by later	
Hove no income genaunt of toom	
- Comment	The state of the s
	A STATE OF THE RESERVE OF

The new distriction make allow a single same of part of the state of the same consequences are disting as a more district. A construction for the foregoed before a superior specific of the superior of the same consequences are the same consequences of the same consequences of the same of the same are the same consequences of the same of the same are the same consequences of the same of the same are the same consequences of the same of the same are the same consequences of the same	13. What is your proved and with the providence of the product of the production of	
The wast of the thirty punch on the punch of	11. What is made private marginal marketin and low long heavy or here is and markety of the property of the state of the property of the property of the state of the property of the state of the property of the state of the property of the property of the state of the property of the state of the property	
Members and the plant of principle of the and plant to the plant of th	Message has the filter growth of the second	company and regiment?
Now the major major and the last of the second of the seco	A correction of the special condition and how large how you have been been been as a fine of the special condition and how large how you have been been been as a fine of the special condition and how large how you have been been been been been been been be	military duty, and what do you know of his service as a Confe
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18. What property, effects or income do you possess? 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any	18. What property, effects or income do you possess? 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same?	110
18. What property, effects or income do you possess? 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any	18. What property, effects or income do you possess? 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same?	County, and if so, how much? Did you ever apply for such aid?
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any	19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same?	70
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Applicant.	Elli Ma Drick	Applicant.
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of The Principle County	of WV MUND	County.

Little in Whole has Office of my Constantly Olmost Los Prices, and I have been mubble to exect Magnet Litter in Wolking or performing any Kind of Manned lover drice hat live without great pain, and new I cannot toold but a very that distance without stopping le rest, in account of thoromers foreith Cued Separa pain in the requirity may heat 18. What property, effects or income do you possess? 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same?	Sworn to and subscribed before me this the Sworn to and subscribed before me this the Order of Jack County. Sworn to and subscribed before me this the Order of Jack County. Order of Jack County. Sworn to and subscribed before me this the Order of Jack County. Order of Jack County. Order of Jack County. Sworn to and subscribed before me this the Order of Jack County. Ordinary. Ocunty.
POWER OF ATTORNEY. STATE OF GEORGIA, County. Lendwicks of Caulins well. Ga to receive and receipt for the pension paid hereon and request that he remit same to by. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this I have day of 1897. Executed in presence of Les Prichard	POWER OF ATTORNEY. State of Georgia, Darly County. D. J. Bible hereby authorize IV at Control of
How the same and t	Aantane G. F. Solidier Phose stready Enrolled.) No. 2266 INDIGENT Solidier PENSION, 1899. Name G. H. Wold. Coming Color Ord. WARRANT ISSUED 1999. RICHARD JOHNSON, Comming Color ord. WARRANT ISSUED The Color ord. WARRANT ISSUED The Color ord.

B. M. B. T. B. Act of M. Indigent Soldier's Pension I.S.D. T. Name D. M. D. D. County County RICHARD JOHNSON, County RICHARD JOHNSON, County The Market Market of Presion WARRANT BLANDED TO WAR	March O. F. March Inses Already Enrolled. NO. 22.66 INDIGENT SOLDIER'S PENSION, 1898. Name Of H. Colled. County Colled Colled. WARRANT ISSUED // P. S. LISSUED // P.
For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, County. Personally appears B. F. Bibb of Barlow	For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, County. Personally appears B. A. Bible of Bardense
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%; that he is years old and by occupation a former; that he enlisted in the military service of the Confederate States (of of the State of in Company Gof Ath Regiment of in Company Gof Ath Regiment of its that his physical condition is as follows: I would be supported by the following items of the states, and served for the term of the states, and the states of the states, and the states of the states	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 Alby 18 H; that he is I years old and by occupation a former ; hat he enlisted in the military service of the Confederate States (or of the State of during the were between the States, and served for that term of the service of the Confederate States (or of the State of during the were between the States, and served for that term of the service of the Confederate States (or of the State of the Confederate States (or of the State of the confederate States) in Company of the Regiment of the States, and served for that the spanning of the States, and served for the state of the States, and served for the State of the Confederate States (or of the State of the confederate States) in Company of the States, and served for the State of the confederate States (or of the State of the confederate States) between the States, and served for the State of the confederate States (or of the State of the confederate States) between the States, and served for the States, and served for the States of the confederate States (or of the State of the confederate States) between the States, and served for the States of the confederate States (or of the States) between the States, and served for the States of the confederate States (or of the States) between the States of the confederate States (or of the States) between the States of the confederate States (or of the States) between the states of the confederate States (or of the States) between the States of the confederate States (or of the States) between the states of the confederate States (or of the States) between the states of the confederate States (or of the States) between the states of the confederate States (or of the States) between the states of the confederate States (or of the States) between the states of the confederate States (or of the States) between the states of the St
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 1897. I have heretofore as a resident of county been allowed a pension for the year 1890. Sworn to and subscribed before me, this, the day of the pension to which he is entitled for the year 1890. Sworn to and subscribed before me, this, the day of the pension to which he is entitled for the year 1890. Sworn to and subscribed before me, this, the day of the pension to which he is entitled for the year 1890. Sworn to and subscribed before me, this, the day of the pension to which he is entitled for the year 1890.	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 1898. I have heretofore as a resident of Danton county been allowed a pension for the year 1897 Sworn to and subscribed before me, this, the day of Lawy 1898. Ordinary.
County. I, Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by hims 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 Analysis and the statements made by himself to be and that he resides in this County. Given under my official signature and seal, this Analysis and the statements made by himself to be and that he resides in this County. Ordinary Ordinary County.	State of Georgia, County. I, County. Ordinary of said County, do certify that I am well acquainted with D. D. D. D. L. 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. Civen under my official signature and seal, this /9' day of Manay 1898. Ordinary D. M. County. Note—The blank spaces must be filled.

sworn to and subscribed before me, this, the day of last County. STATE OF GEORGIA, County. State of Georgia 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 of the last o	sentitled for the year 1898. I have heretofore as a resident of Salow county been allowed a pension for the year 1897. Sworn to and subscribed before me, this, the 1898. Grdinary. State of Georgia, County. I, County. I, County. I, County. I, County. I, County. In the applicant in the foregoing affidavit, and aim 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 19 'L day of Manay 1898. Ordinary County. Ordinary County. Ordinary County. Ordinary County. County.
POWER OF ATTORNEY. STATE OF GEORGIA, Barbor County, U. B. H. Bebb of Canles welledged to receive and receipt for the pension allowed, and request that he remit same to at Adain while to Witness my hand and seal this Witness my hand and seal this Executed in presence of B. H. Barbor (L. S.)	POWER OF ATTORNEY. STATE OF GEORGIA, Darlar County, I. B. J. Bibb hereby authorize of Cartes Vill Mill to receive and receipt for the pension allowed, and request that he remit same to at Adain ville Ga by Chief Witness my hand and seal, this J day of Jaca, 1900. Executed in presence of Adain Bibb [L. S.]
County County Denoise. Name County C	County County 25 Too. SOLDIER'S PENSION, TOOO. INDIGENT SOLDIER'S PENSION, TOOO. WARRANT ISSUED SUMMERY 25 TOO. JOHN. W. BINDSEY, COMMISSION OF PRESENT. WARRANT ISSUED SUMMERY 25 TOO. JOHN. W. BINDSEY, COMMISSION OF PRESENT. WARRANT HANDED TO SUMMERS HANDED TO SU

(For Those Aiready Enrolled.)	No. 33 2 3	INDIGENT	SOLDIER'S, PENSION	1899.	Name C. F. Bull.	WARRANT ISSUED # 30 18	RICHARD JOHNSON,	HAMBED TO	Geo. W. Harrigen, State Popular, Atlanta.	Billy Bottom co.	CODE SEC. 1264. (For Those Already Enrolled.)	NO. 2/06	INDIGENT	SOLDIER'S PENSION	1900.	Name B. J. Bill County State U. U.	T ISSUED	anna	JOHN. W. SINDSBY, Commissioner of Pensions.	Tundricho
							•				y 9 1 1 1 2	at .								

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County.
BY DIDO DI
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 Arb 1871; that he is 5 24 years old and
by occupation a farmer; that he enlisted in the military service of the Confed-
and I have a state of the states,
in Company / th Regiment of the Regiment of th
follows: Has Angina Declaris which
render him shoble to do lober
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 Bortow county been allowed a pension for the year 1898
Sworn to and subscribed before me, this, the)
In Care Contract
this day of James 1899.)
ordinary.
8., 10
State of Georgia,
Daryon County.
1, When ricks Ordinary of said County.
do certify that I am well acquainted with R.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
day of law 1899.
~ // / / /
(Affix your and Sylvale Diells
Swifewicks Ordinary Borlow County

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Bartine County.
BIBU WART
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citize
and resident of said County and State and has resided in said State continuously ev
since the day of # 10 1 18 11; that he is J 4 years old an
by occupation a comment ; that he enlisted in the military service of the Confe
erate States (or of the State of) during the war between the State
and served for the term of 12 in Company 0, of the Regiment
I Capalry; that his physical condition is
follows: Has Highing Dectoris
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, an
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15t
1894, and the Acts amendatory thereof, and makes application for the pension to which l
is entitled for the year 1900. I have heretofore as a resident of Ballow
county been allowed a pension for the year 1899
Sworn to and subscribed before me, this, the
Adey of 1111/ 1900.
Juduries Ordinary.
State of Georgia,
Barliow County.
County.)
I, The Visio rich Ordinary of said County
do certify that I am well acquainted with J. A. Bibb th
applicant in the foregoing affidavit, and am well satisfied that the statements made by his
in his said affidavit are true, and I know he is the individual he represents himself to h
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and that he resides in this County.
and that he resides in this County. Given under my official signature and seal, this
and that he resides in this County. Given under my official signature and seal, this
and that he resides in this County. Gives under my official signature and seal, this
and that he resides in this County. Given under my official signature and seal, this
and that he resides in this County. Given under my official signature and seal, this

Sworn to and subscribed before me, this, the Aday of Jany County. State of Georgia, County Law County. I, Decorate 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 Jany County. Ordinary of said County, 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 Jany Law County. Ordinary of said County.	is entitled for the year 1900. I have heretofore as a resident of county been allowed a pension for the year 1890. Sworn to and subscribed before me, this, the lower of the year 1890. Sworn to and subscribed before me, this, the lower of the year 1890. Ordinary. State of Georgia, County. I, County. Ordinary of said County, do certify that I am well acquainted with 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. Cives under my official signature and seal, this day of the year lower low
POWER OF ATTORNEY. STATE OF GEORGIA. County I. B. Shir hereby authorize be receive and receipt for the pension allowed and request that he remit same to at lantenville by Witness my hand and seal, this /2 day of low 1901. Becutted in presence of Executed in presence of	POWER OF ATTORNEY. STATE OF GEORGIA, County. I. D. H. Bible hereby authorize for the pension allowed and request that he remit same to at a languable by Chack Witness my hand and seal, this Language for the pension allowed and request that he remit same to at languable Witness my hand and seal, this Language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request that he remit same to at language for the pension allowed and request the pension allowed and re
SOLDIER'S PENSION. INDIGENT SOLDIER'S PENSION. ILDOI. Name & County County County LINDSEY, INDIEN, PROJECT INDIEN, INDIEN, PROJECT INDIEN, INDIEN, PROJECT	COULD JER'S PENSION No. 3/3/ INDIGENT SOLDIER'S PENSION I BOQ. Only State of the state of t
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SOLDIER'S PENS INDIGENT For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, personally appears B. F. Bibb 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 suid State continuously ever since the day of fill the said that he is a bona jade citizen since the day of fill the said state continuously ever since the day of fill the said state of the confiderant states for of the State of the confiderant states for of the State of the said states for the said states for the said states for the said states for the said state said states for the said states f States, and served for the term of H in Company how are between the company how are between the company how are between the that his property consists of the following items 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 1991. I have heretofure as a resident of the year 1991 of 1990 country been allowed a pension for the year 1 STATE OF GEORGIA, County, Coun do certify that I am well acquainted with B, F, Bi 6 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 day of fluwory Gibb Nine Verson County.

INDIGENT LDIER'S PER

FOR THOSE ALREADY

FUR APPLICANTS HERETUFURE ALLOWED PENSIONS.
STATE OF GEORGIA,
Carlin County
B T AD'II
Personally appears W. H. Wibb of Wartow
County, State of Geoogia, 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 Avoy 1871; that he is 56 years old and
by occupation a former that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the state of 1/2 /10 in Company 6, of the Regiment of 1
follows: Aps angine Relieves
10110WS: No linging Riclips
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 1902. I have heretofore as a resident of Darliow
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Sworn to and subscribed before me, this the
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TWNubricko, Ordinary.
STATE OF GEORGIA,
Darling County.
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do certify that I am well acquainted with B. H. Dibb
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 Land 1902
AME YOUR MALE MALE MALE MALE MALE MALE MALE MALE
(here)
Ordinary Office County

dayof Allicary 1901 STATE OF GEORGIA, Grunty. Gounty. Govern under my official signature and seal, this day of Allicary Gounty. Govern under my official signature and seal, this Gounty. Govern The thack spaces mine des filled. Sour - Affidaxy should ned be attested before January 1st. 1901.	Sworn to and subscribed before me, this the day of Jamy 1002. STATE OF GEORGIA, County. County. County. County. County. I. When 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 Jamy County. Nove—The blank spaces must be filled. Nove—Affidavit should not be attested before January 1st, 1802.
POWER OF ATTORNEY. STATE OF GEORGIA, Borling County. I, B, H, Bills hereby authorize George W, Standworth of Dovland Parties Gen to receive and receipt for the pension allowed and recease that he remit same to at Constant III. by Witness my hand and seal, this / U day of Jany B. H. Bills Executed in presence of [L. s.]	POWER OF ATTORNEY. STATE OF GEORGIA, Bartow Countr. I, B. F. Bubb hereby authorize & W. Hen- Merchy of bantannile to receive and receipt for the pension allowed and request that he remit same to Me at Adams ville Witness my hand and seal, this 16 th day of January 1904. Executed in presence of Bray MPAP
COURTY COUNTY ENGINEER NO. 377. INDIGENT SOLDIER'S PENSION 1903. Name Q. F. G. L. L. Co. R. Regiment, P. C. Regiment, P. C. Omnissioner of Pension, Omnissioner of Pensioner Omnissioner of Pensioner	COON THOSE ALREADY ENROLLED, No. 8.2 2 4/ INDIGENT SOLDIER'S PENSION I BOO 4. COUNTY COUNTY COUNTY COUNTY JOHN W. LINDSEY, COUNTY COUNT

is entitled for the year 1902. I have heretofore as a resident of Barliow

FOR APPLICANTS HERETOFORE ALBOMED PENSIONS.

county been allowed a pension for the year 1 900

CONDIER'S PEN Name C. F. Commissioner of NARRANT ISSUED WARRANT HANDED TO WARRANT HAN	NOW ON H. ON HOLE ALREADY ENROL NO. 22 Y. INDIGENT SOLDIER'S PENS I BOO 4. COUNTY ON ALLEY OF COUNTY COUNTY ON ALLEY OF COUNTY JOHN W. LINDSEY, COMMISSION TO PROPERTY JOHN W. LINDSEY, COUNTY OF COUNTY JOHN W. LINDSEY, JOHN W. LINDSEY, COUNTY JOHN W. LINDSEY, JOHN W. L
	FOR APPLICANTS HERETOFORE ALLOWED PENSIONS: STATE OF GEORGIA. County.
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.	FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.
STATE OF GEORGIA, County.) Personally appears D. F. Biblo of Berlow 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 H; that he is I years old and by occupation a form, that he enlisted in the military service of the Confederate States (or of the State of during the par between the States, and served for the term of I that his physical condition is as follows: Has Angine patterns. Chimic forms	STATE OF GEORGIA, Barton County. Personally appears 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 5 years old and by occupation a farmer, that he emilitary service of the Confederate States (or of the State of South barolina) during set war between the States, and served for the term of 25 yrs in Company 6, of 4th Regiment of South barolina Caraby, that his physical condition is as follows: Angina fectoris.
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 Santon county been allowed a pension for the year 1902. Sworn to and subscribed before me, this the day 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. Sworn to and subscribed before me, this the day of the Act, approved December 15th, 1894, and 1894,	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 BANON County been allowed a pension for the year 1903. Sworn to and subscribed before me, this the day of the Act, approved December 15th, 1894. Ordinary. STATE OF GEORGIA, County. I, HANDANGERS Ordinary of said County, do certify that I am well acquainted with B. H. Double.
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 1903 Ann 1903 Ordinary Ordinary County. Nore—The blank spaces must be filled. Nore—Affidavit should not be attested before January 1st, 1906.	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

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, 1814, 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 county been allowed a pension for the year 1402. Sworn to and subscribed before me, this the) A A A A A A A A A A A A A A A A A A A	on or labor, and
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 County been allowed a pension for the year 1903.	on or labor, and
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 County been allowed a pension for the year 1903.	on or labor, and
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 heretefore as a resident of County been allowed a pension for the year 1902. County been allowed a pension for the year 1903.	
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 County been allowed a pension for the year 1902.	December 15.1
county been allowed a pension for the year 1402	on to which he
Smoon to and when the state of	
day of fary 1903.}	16
STATE OF GEORGIA	
1. Bantow County. S	f said County.
do certify that I am well acquainted with J3, H, Bibb-	
him in his said amdavit are true, and I know he is the individual he represents him all.	tements made
to be and that he resides in this County.	f
Given under my official signature and seal, this / 6 day of day of 1904 day of 1904 day of 1904	, , , , I
Ordinary County.	County.
Nore.—The blank spaces must be filled. Nore.—Affidavit should not be attested before January 1st, 1903. Nore.—Affidavit should not be attested before January 1st, 1904.	

January 1st, 1920; that I also know the word have no before direct the witness as to	thow Mrs. MARY Alice BADb., 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		STATE OF GEORGIA, COUNTY,	ORDINARY'S CERTIFICATE	To Be Put on Roll in Her Own Right Husband Was on the Pension Rol of Georgia. County Bartow Name Mary Alice Bibb Widow of B. F. Bibb Company Regiment. Date of Husband's Death July 10,10	ON When 1
the witness as to	the per	ertify th			JOHN W. CLARK, Commissioner of Pension	15.

and credit.

Given under my hand and official seal of office this 17 day of July 192 (SEAL OF ORDINARY).

. 192 6. . County

Bartow

Instructions.

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

2. Additional affidiart may be attached if blank passes are insurficient.

3. All affidorial must be made before the Ordinary of the county of residence.

4. Only widows who are married prior to first January, 1881, are critical.

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

signing the

IOHN W CLARK nissioner of Pensions

7-20-26 6.

Roll in Her Own Right W d Was on the Pension Roll of Georgia. Date of Husband's Death July 10,19. JOHN W. CLARK, mmissioner of Pension CH 97 -0 4

ORDINARY'S CERTIFICATE

COUNTY. 1, 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... 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

APPLICATION

DOW'S

STATE OF GEORGIA,

Given under my hand and official seal of office this 17 day of July , 192 6. J. W. Hendricks, Ordinary, (SEAL OF ORDINARY)

Bartow County

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. G.

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.

> J. W. Hendricks Ordinary, Bartow County, Ga.

By: B. Handricks.

that of deponent's own personal knowledge, Mrs. Bibb

was the same man who was on the pension roll of said State...

Sworn to and subscribed before me, this the 19 day of July 1916
Quelus R. market ordinary 010.

Fulton

(SEAL OF ORDINARY)

County in said State of Georgia on the 10 day of July

and that she has not since remarried; that she came the wife of B. F. Bibb

and wife, continuously, since 13 day of Dec. 1677, and that B. F. Bibb

County.

affidavit, is the lawful widow of B. F. Bibb

, who made the foregoing

, 18 77, that she and he had resided together as husband

who died in Bartow

joined by me in MATRIMONY, this 13th. day of Decbr., 1577.

Recorded Feby. 9th., 1878.

J. A. Howard, Ordinary.

M. B. Tuggle, M. G.

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.

> J. W. Hendricks Ordinary, Bartow County, Ga. By: B. Handincks

COURT OF ORDINARY

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.

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, (Sas) B. Hendri

CARTERSVILLE, GA. July 17

		er annum), on account of being	
Company	Regiment	(Volunteers, or St	ate Militia).
That she is now a bona fide			and she
has, continuously, resided there		//////////////////////////////////////	1111
Sworn to and subscribed be	fore me, this the		
19 day of July	, 1916	, ,	/
Elin Ruarb	of Ordinary	Mary alice . 13	ebh.
Ton	CC	(Applicant)	
of Tulton	County.		
(SEAL OF THE ORDINA	ARY.)		
Affidavit of Witness to	Prove Marriage an	d Date of Death of Hu	shand.
TATE OF GEORGIA.			Journa,
Pulton	COUNTY.		
	e ·	0	. 1.
Personally before me comes		.	nown to be
responsible and truthful perso			
at of deponent's own personal		, who made the	foregoing
fidavit, is the lawful widow of		who died in	Bartow
ounty in said State of Georgi			, 19.26
nd that she has not since remar			THE RESERVE OF THE PERSON NAMED IN
ne 13 day of Door	, 18 77 that she	and he had resided together a	s husband
nd wife, continuously, since 13	day of Dec.	1677, and that B.	F. Bibb
as the same man who was on th	e pension roll of said Sta	tefrom	Bartow
ounty	when he died.		
Sworn to and subscribed before	ore me, this the		
9 day of July	1976	1/10	
Elin Rimar	but Ordinary OV	9.1.Wooks	
Fulk	3		
(CELL OF CERTIFIED	County.		
(SEAL OF ORDINARY)			
	•		

450 Stewart Ave., Atlanta, Ga.

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 certificat and it will be hardly necessary for you to have a witness, b if Judge Jeffries suggests one, you may get Dr. Bowdoin, I a sure that Judge Jeffries will be very glad to assist you in every way possible, and Papa will appreciate his kindness.

Papa camehome 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, L am

Yours very truly, B. Hendricks