

# POWER OF ATTORNEY.

Form 5.

STATE OF GEORGIA,

Bartow County.

KNOW ALL MEN BY THESE PRESENTS, That I,

John A. Gladden

of Bartow

County, in said State, do hereby appoint

Charles W. Hendrick my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States [or of this State], as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In WITNESS WHEREOF, I have hereunto set my hand and seal this 13<sup>th</sup>

day of March 1894

John A. Gladden [L. S.]

Executed in the presence of us:

B. E. Griffin  
John H. Hargreaves  
Bartow Co. JURY

If allowed, send amount by \_\_\_\_\_ to

me at \_\_\_\_\_, and oblige,

# FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

Form 1.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears John A. Gladden of Bartow

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and

resident of Georgia, and has been continuously since the second day of

November 1880; that he enlisted in the military service of the Con-

federate States (or the State of \_\_\_\_\_) during the war between the

States, and served as a Sgt in Company B of 3rd Regt

2nd Volunteers Cavalry Brigade; that whilst engaged

in such military service, at the battle of \_\_\_\_\_ in the State

of \_\_\_\_\_, on the \_\_\_\_\_ day of August 1862, he was

disabled as follows: A shell exploded near him, and

a piece of the shell passed through his companion,

John McWhick, and killed him, a small piece passed

through Applicant's arm, producing a slight wound,

but the jar received from the explosion

of the shell so affected the nervous sys-

tem of Applicant as to produce Nervous

Rheumatism, which disease Applicant has

had ever since, and has become so intense

and painful, and so preyed upon his Nervous

system, that he has become permanently and

practically incompetent to perform the ordinary

manual vocations of life.

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 thereunder, ending October 26th, 1893.

Sworn to and subscribed before me this the

14 day of March 1894

Charles W. Hendrick

Ordinary.

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

NOTE.—Do not trouble to mention wounds which do not trouble.

Gladden, John A.  
Bartow Co.  
No. 3700

Soldier's Pension.  
1894

Name J. A. Gladden  
County Bartow  
Disability Rheumatism  
Amount \$ 50  
3/15

W. H. HARRISON,  
Secretary Executive Department.

WARRANT MADE TO  
Charles W. Hendrick  
Clerk, Executive Department.

## Affidavit for Witnesses.

STATE OF GEORGIA,

County of Barlow }

PERSONALLY appears before me, the undersigned, Ordinary in and for said County,  
George S Cobb, A N Dodgen and  
John C Dodgen each of whom, being duly sworn according to law,  
 severally say, under oath, that they are personally well acquainted with John  
A Gladden whose application is herewith presented for a pension,  
 and that they served with him in the army, and from our personal knowledge he was injured by  
 the service as follows: (give full statement, and tell in your own language how badly applicant is  
 disabled from work. If he does any labor, or can do any, state what.) The said  
John A Gladden in the year 1868, contracted  
Rheumatism while in line of duty, of for he  
became affected with the Rheumatism, he was  
placed on light duty for a short time, and was  
then furloughed and was never afterwards  
able for field duty, and since the war  
has suffered from said Rheumatism and  
is now so affected with said disease that  
he is practically incompetent to perform  
the ordinary manual vocations of life.

*Captain New*

We personally know above stated facts. We were with him in the army and have known  
 him ever since. Applicant is permanently disabled as stated and has been so to our certain  
 knowledge ever since 18\_\_\_\_. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me this

15<sup>th</sup> day of March 1894G W Swadwick

ORDINARY.

NOTE.—The Ordinary will see that the full text of the Affidavit is understood by the witnesses, and that they are legally  
 qualified to the same.

2. Witnesses are asked to make their statements full and explicit.



## COURT OF ORDINARY,

STATE OF GEORGIA,

County. }

PERSONALLY comes before me \_\_\_\_\_ Ordinary of said County,  
 and \_\_\_\_\_, both known to  
 me as reputable physicians of said County, who being severally sworn, say on oath that they  
 have carefully examined \_\_\_\_\_ and after such personal examination  
 say that the applicant has been injured as follows:

We have treated applicant professionally for \_\_\_\_\_ years.

Sworn to and subscribed before me this

day of \_\_\_\_\_ 1893.

Ordinary.

NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability result-  
 ing therefrom.

NOTE.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier.  
 Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,

Barlow County. }

I, G W Swadwick Ordinary of said County,  
 do certify that I am well acquainted with John A Gladden the  
 applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his  
 said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents  
 himself to be, and that he resides in this County. I also certify that the foregoing witnesses  
 are persons of respectability, and that their statements are worthy of full credit and belief.

Given under my official signature and seal this 14<sup>th</sup> day of March 1894

Ordinary Barlow County.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow* County.

KNOW ALL MEN BY THESE PRESENTS, That I

*J. A. Gladden*

County, State of Georgia, do hereby appoint

of *Barlow* County, Georgia, to be my true and lawful attorney in fact, for

*John A. Gladden*

me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *6<sup>th</sup>* day of *Feb'y* 1895. *John A. Gladden* [L. S.]

Executed in presence of us

*W. H. Stephens*  
*M. M. Keys*

## DIRECTIONS.

Send money to me as follows, by \_\_\_\_\_ to \_\_\_\_\_ P. O. \_\_\_\_\_ County, Georgia.

*Gladden, John A.*  
*Barlow Co.*

(For Those Already Enrolled.)

No. *96*

**SOLDIER'S PENSION.**

**1895.**

Name *J. A. Gladden*  
County *Barlow*  
Disability *Rheumatism*  
Amount, \$ *50.00*  
*3/4*

1895.  
RICHARD JOHNSON,  
Secretary Executive Department.

WARRANT HANDED TO

*W. H. Stephens*  
Geo. W. Harrison, State Printer, Atlanta.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow* County.

*John A. Gladden* hereby authorize *George W. Hendricks* of *Barlowville Ga*

to receive and receipt for the pension paid hereon and request that he remit same to \_\_\_\_\_ by *check* at *Barlowville, Ga*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *10* day of *Feb'y* 1896. *John A. Gladden* [L. S.]

Executed in presence of us

*K. S. Anderson*  
*W. H. Alexander*

*Gladden, John A.*  
*Barlow Co.*

(For Those Already Enrolled.)

No. *2683*

**SOLDIER'S PENSION.**

**1896.**

Name *John A. Gladden*  
County *Barlow*  
Disability *Rheumatism*  
Amount, \$ *50.00*  
*3/4*

1896  
RICHARD JOHNSON,  
Secretary Executive Department.

WARRANT HANDED TO

*W. H. Stephens*  
Geo. W. Harrison, State Printer, Atlanta.



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Barlow* County, }  
Personally appears *J. A. Gladden* 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 *2nd* day of *Nov.* 1830; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States; and served as a *Private* in Company *B*, of *Kennedy's* Brigade; that whilst engaged in such military service at the battle of *Phillips Legion* in the State of *Virginia* on the *18th* day of *May* 1864, he was wounded as follows: *He contracted Rheumatism from sweat of shell and exposure, which he was subjected to in the service, which renders him almost incapable to perform the ordinary vocations of life*

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

Sworn to and subscribed before me, this, the *6th* day of *Feb* 1895. *John A. Gladden*

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

STATE OF GEORGIA,

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

Given under my official signature and seal, this *6th* day of *Feb* 1895.



Ordinary *Barlow* County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Barlow* County, }  
Personally appears *John A. Gladden* 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 *2nd* day of *Nov.* 1830; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served as a *Private* in Company *B*, of *Phillips Leg.* of *Volunteers*, *Kennedy's* Brigade; that whilst engaged in such military service in the State of *Virginia* on the *18th* day of *May* 1864, he was wounded, injured or diseased as follows:

*He was injured by an explosion of a shell or shelling him as produce Rheumatism which renders him permanently disabled to perform manual labor &c*

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

Sworn to and subscribed before me, this, the *6th* day of *Feb* 1895. *John A. Gladden*  
*G. W. Hendricks* Ord.

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

STATE OF GEORGIA,

*Barlow* County, }  
I, *G. W. Hendricks* Ordinary of said County,

do certify that I am well acquainted with *John A. Gladden* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *10th* day of *Feb* 1896.



Ordinary *Barlow* County.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

*Bartow* County. }  
 I, *J. A. Gladden* hereby authorize *J. W. Hendricks* of *Bartowville Ga*  
 to receive and receipt for the pension paid hereon and request that he remit same to  
 at *me* by *Chick*  
 at *Bartowville Ga*  
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *8*  
 day of *Feb* 1897.  
*J. A. Gladden* [L. S.]

Executed in presence of

*L. G. Raper Jr*  
*W. B. Wilson*

# POWER OF ATTORNEY.

STATE OF GEORGIA,

*Bartow* County. }  
 I, *John A. Gladden* hereby authorize *J. W. Hendricks* of *Bartowville Ga*  
 to receive and receipt for the pension paid hereon and request that he remit same to  
 at *me* by *Chick*  
 at *Bartowville Ga*  
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *12*  
 day of *January* 1898.  
*John A. Gladden* [L. S.]

Executed in presence of

*L. G. Raper Jr*  
*W. B. Wilson*

**SOLDIER'S PENSION.**

**1897.**

Name *J. A. Gladden*  
 County *Bartow*  
 Disability *Brill disease*  
 Amount, \$ *50.00*  
*2/7* 1897.

RICHARD JOHNSON,  
 Commissioner of Pensions.

WARRANT HANDLED TO

*WNA*

SEE W. HARRISON, STATE PRINTER, ST. AUSTIN.

*No data*

**SOLDIER'S PENSION.**

**1898.**

Name *John A. Gladden*  
 County *Bartow*  
 Disability *Mult injury*  
 Amount, \$ *50.00*  
*2/8* 1898.

RICHARD JOHNSON,  
 Commissioner of Pensions.

WARRANT HANDLED TO

*WNA*

SEE W. HARRISON, STATE PRINTER, ST. AUSTIN.

*No data*

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Barlow* County.

Personally appears *J. A. Gladden* 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 *2* day of *Nov* 1830; 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 *Sergeant* in Company *B*, of *Phillips*

*Legion of Va. Volunteers*, *Jaynes*'s Brigade; that whilst engaged in such military service in the State of *Virginia*, on the day

of *Spring* 1864, he was wounded, injured or diseased as follows:

*He was struck by an explosion of shell, which produced serious inflammation, which has become so bad as to render him unable to perform manual labor*

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

*Fifty* Dollars, for the year 1896.

Sworn to and subscribed before me, this, the *12* day of *Feb* 1897. *J. A. Gladden*

*G. W. Hudrick* Ordinary

POST OFFICE *Barlow*

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

STATE OF GEORGIA,

*Barlow* County.

I, *G. W. Hudrick* Ordinary of said County,

do certify that I am well acquainted with *J. A. Gladden* 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 *3* day of *Feb* 1897.

*G. W. Hudrick* Ordinary *Barlow* County.

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

AMK your seal here.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Barlow* County.

Personally appears *J. A. Gladden* 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 *23* day of *Nov* 1832; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the

States, and served as a *private* in Company *B*, of *Phillips*

*Legion of Va. Volunteers*, *Shupard*'s Brigade; that whilst engaged in such military service in the State of *Virginia*, on the day

of *May* 1864, he was wounded, injured or diseased as follows:

*He was seriously injured from the explosion of a shell, the effect of which totally disabled him from doing any kind of labor*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of *Barlow* county been allowed an invalid pension of

*fifty* Dollars, for the year 1897.

Sworn to and subscribed before me, this, the *12* day of *January* 1898. *John A. Gladden*

*G. W. Hudrick* Ordinary

POST OFFICE *Barlow*

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

STATE OF GEORGIA,

*Barlow* County.

I, *G. W. Hudrick* Ordinary of said County,

do certify that I am well acquainted with *J. A. Gladden* 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 *12* day of *January* 1898.

*G. W. Hudrick* Ordinary *Barlow* County.

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

AMK your seal here.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, J. A. Gladden hereby authorize G. W. Hendricks of Bartowville Ga

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

me by Check at Bartowville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5<sup>th</sup>

day of January 1899.

J. A. Gladden [L. S.]

Executed in presence of

J. R. Anderson

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, J. A. Gladden hereby authorize G. W. Hendricks of Bartowville Ga

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

me by Check at Bartowville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this

day of \_\_\_\_\_ 1900.

J. A. Gladden [L. S.]

Executed in presence of

W. M. Roberts Clerk

Gladden, J. A.  
Bartow County

(For Those Already Enrolled.)

No. 2225

INVALID

SOLDIER'S PENSION.

1899.

Name J. A. Gladden  
County Bartow  
Disability Rheumatism  
Amount, \$ 50 2/6 1899.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO

G. W. Hendricks

Geo. W. Harrison, State Printer, Atlanta.

No debt

Gladden, John A.

CODE SECTION 12A.

(For Those Already Enrolled.)

No. 875

INVALID

SOLDIER'S PENSION.

1900.

Name John A. Gladden  
County Bartow  
Disability Bodily injury  
Amount, \$ 50  
Warrant issued to 2/6 1900.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Hendricks

Geo. W. Harrison, State Printer, Atlanta.

No debt



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears J. A. Gladden 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 2<sup>nd</sup> day of Nov. 1830; that he enlisted in the military service of the Confederate States (or of the State of Virginia) during the war between the States, and served as a private & sergeant in Company B, of Phillips' Legion of Cavalry, Jung's Brigade; that whilst engaged in such military service in the State of Virginia, on the 1<sup>st</sup> day of May 1864, he was wounded, injured or diseased as follows:

Struck with a piece of a shell, producing nervous rheumatism, as a cause of which he is unable to perform manual labor

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1899. I have heretofore under said law as a resident of Barlow County been allowed an invalid pension of fifty Dollars, for the year 1898.

Sworn to and subscribed before me, this, 5<sup>th</sup> day of January 1899, at Post Office Barlowville Ga  
Chas. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 5<sup>th</sup> day of January 1899.

Ordinary Barlow County.



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears J. A. Gladden 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 County, and has resided therein continuously ever since the 2<sup>nd</sup> day of Nov 1830; that he enlisted in the military service of the Confederate States (or of the State of Virginia) during the war between the States, and served as a private in Company B, of Phillips' Legion of Cavalry, Jung's Brigade; that whilst engaged in such military service in the State of Virginia, on the 1<sup>st</sup> day of May 1864, he was wounded, injured or diseased as follows:

Struck with a shell in battle before Richmond, the effect of which rendered him permanently unable to perform manual labor

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

Sworn to and subscribed before me, this, 5<sup>th</sup> day of January 1900, at Post Office Barlowville Ga  
Chas. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 5<sup>th</sup> day of January 1900.

Ordinary Barlow County.



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County. }  
I, J. A. Gladden hereby authorize George W. Hendricks of Bartonsville Ga  
to receive and receipt for the pension paid hereon and request that he remit same to  
by check  
at Bartonsville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 29th  
day of January 1901. J. A. Gladden [L. S.]

Executed in presence of

J. A. Gladden

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County. }  
I, J. A. Gladden hereby authorize George W. Hendricks of Bartonsville Ga  
to receive and receipt for the pension paid hereon and request that he remit same to  
by check  
at Bartonsville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 7th  
day of July 1902. J. A. Gladden [L. S.]

Executed in presence of

J. Pickett

COPIES SENT FOR 1900  
(For Those Already Enrolled.)

No. 117

DISABLED

SOLDIER'S PENSION.

1901.

Name J. A. Gladden  
County Barlow  
Disability Wm. by shell  
Amount, \$ 27.00

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Hendrick

Gen. W. Harrison, State Printer, Atlanta.

No date

COPIES SENT FOR 1900  
(For Those Already Enrolled.)

No. 1864

DISABLED

SOLDIER'S PENSION.

1902.

Name J. A. Gladden  
County Barlow  
Co. B. Phillips  
Disability Wm. by shell  
Amount, \$ 27.00

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gladden

Gen. W. Harrison, State Printer, Atlanta.

No date

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ATTENDED PENSIONS

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears J. A. Gladden of said 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 2nd day of Nov 1880; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a private in Company B, of Phillips Legion Cavalry, Volunteers, 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 4th day of May 1864, he was wounded, injured or diseased as follows:

Remained permanently disabled from labor by a shell in the battle of the Wilderness in State of Virginia

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

Sworn to and subscribed before me, this 3rd day of January 1901, at Postoffice Barlowville Ga  
G. W. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with J. A. Gladden 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 3rd day of January 1901.  
G. W. Hendricks  
Ordinary Barlow County.



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears J. A. Gladden 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 2nd day of Nov 1880; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a private in Company B, of Phillips Legion Cavalry, Volunteers, 's Brigade; that whilst engaged in such military service in the State of Virginia, on the 4th day of May 1864, he was wounded, injured or diseased as follows:

In battle round Richmond he was disabled by the explosion of a shell which so impaired his health as to render him unable to earn a support by any occupation of life, said injury is permanent

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1902. I have heretofore, under said law, as a resident of Barlow County, been allowed an invalid pension of fifty Dollars, for the year 1901.

Sworn to and subscribed before me, this 3rd day of January 1902, at Post-office Barlowville Ga  
G. W. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with J. A. Gladden 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 3rd day of January 1902.  
G. W. Hendricks  
Ordinary Barlow County.



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

БОМЕР ОЕ ВЛЛОВИЕА



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, J. A. Gladden hereby authorize George W. Hendricks of Bartonsville, Ga

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

me by check at Bartonsville, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 3rd day of January 1903.

J. A. Gladden [L. S.]

Executed in presence of

W. C. Walton Clerk Sup. Court

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, J. A. Gladden hereby authorize George W. Hendricks of Bartonsville, Ga

to receive and receipt for the pension paid hereon, and request that he remit same to

me by check at Bartonsville, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 7th day of January 1904.

J. A. Gladden [L. S.]

Executed in presence of

W. C. Walton,  
Clk Sup's Court.

(FOR THOSE ALREADY ENROLLED.)

No. 1921

DISABLED

SOLDIER'S PENSION  
1903.

Name J. A. Gladden  
County Bartow  
Co. B Philadelphia Leg  
Disability  bodily  
Amount, \$ 50 <sup>10</sup>/<sub>10</sub> 1903.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

ady  
Gen. W. Mayhew, State Printer, Atlanta.

no date

(FOR THOSE ALREADY ENROLLED.)

No. 1533

DISABLED

SOLDIER'S PENSION  
1904.

Name J. A. Gladden  
County Bartow  
Co. B Philadelphia Legia  
Disability  bodily in Dr  
Amount, \$ 50

FEB 9 1904.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

ady  
Gen. W. Mayhew, State Printer, Atlanta.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

## STATE OF GEORGIA,

Barlow County.

Personally appears J. A. Gladden 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 2<sup>nd</sup> day of Nov 1830; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a private in Company B, of Phillips of Ga Volunteers, Payne's Brigade; that whilst engaged in such military service in the State of Virginia, on the 4<sup>th</sup> day of May 1864, he was wounded, injured or diseased as follows:

In the battle around Richmond by the explosion of a shell, he was thrown dead, but finally revived, and the effect ruined his nerves, and completely destroyed his health. On account of which he is entirely unable to do any kind of labor

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

Sworn to and subscribed before me, this 1<sup>st</sup> day of Jan'y 1903. J. A. Gladden Post-office Barlowville Ga

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

## STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with J. A. Gladden 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 3<sup>rd</sup> day of January 1903.

G. W. Hendricks Ordinary Barlow County.

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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

## STATE OF GEORGIA,

Barlow County.

Personally appears J. A. Gladden 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 2<sup>nd</sup> day of Nov 1830; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a private in Company B, of Phillips of Ga Volunteers, Payne's Brigade; that whilst engaged in such military service in the State of Virginia, on the 4<sup>th</sup> day of May 1864, he was wounded, injured or diseased as follows: Struck on hip with a piece of shell. The explosion of the shell caused concussion of his spinal column, producing nervous system, which renders him entirely unable to do any kind of business or labor of any sort

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of Barlow County, been allowed an invalid pension of fifty Dollars, for the year 1903.

Sworn to and subscribed before me, this 1<sup>st</sup> day of Jan'y 1904. J. A. Gladden Post-office Barlowville Ga

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

## STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with J. A. Gladden 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 3<sup>rd</sup> day of January 1904.

G. W. Hendricks Ordinary Barlow County.

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

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY, I, J. A. Gladden hereby authorize G. W. Shummers of Cartersville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me by CK at Cartersville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Jan 1906.

Executed in the presence of

E. F. R.

J. A. Gladden [L. S.]  
mark

# POWER OF ATTORNEY.

STATE OF GEORGIA.

Barlow COUNTY, I, J. A. Gladden hereby authorize G. W. Shummers of Cartersville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me by CK at Cartersville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Jan 1906.

Executed in the presence of

G. W. Shummers J.P.

J. A. Gladden [L. S.]  
mark

Gladden, J. A.  
Barlow County  
CROSS SECTION 1200.  
(FOR THOSE ALREADY ENROLLED.)

No. 1374

DISABLED

SOLDIER'S PENSION

1905.

Name J. A. Gladden  
County Barlow  
Co. B. Platoon Sign  
Disability Bodily injury  
Amount, \$ 5.74

1905.  
FEB 7

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

The Pension Bureau and National Co. of Atlanta  
and the Pension Bureau and National Co. of Atlanta

no date

Gladden, J. A.  
Barlow Co.

Cross Section 1200.  
(FOR THOSE ALREADY ENROLLED.)

No. 1374

DISABLED

SOLDIER'S PENSION

1906.

Name J. A. Gladden  
County Barlow  
Co. A Regiment 35  
Disability Bodily injury  
Amount, \$ 5.74

1906.  
JAN 29

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

The Pension Bureau and National Co. of Atlanta  
and the Pension Bureau and National Co. of Atlanta

no date



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow COUNTY.

Personally appears J. A. Gladden 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 3rd day of Nov 1830; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the

States, and served as a Private 1st in Company B, of Phillips Sign of Ga. Cav. Volunteers. Young is Brigade; that whilst engaged in such military service in the State of Virginia, on the 14th day of May 1863, he was wounded, injured or diseased as follows:

Struck nearly a hunting shell. Shrapnel or  
as to cause nervous convulsions and tremors  
spasmodic and I since the shell went  
through his arm. His health since from  
the shock principally

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Bartow County, been allowed an invalid pension of fifty Dollars, for the year 1904.

Sworn to and subscribed before me, this 5th day of Jan 1905. J. A. Gladden mark  
G. W. Dimerick's Ordng. Post-office.

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

STATE OF GEORGIA,

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 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 \_\_\_\_\_ 1905.

Ordinary \_\_\_\_\_ County.

NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1, 1906.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Bartow County.

Personally appears J. A. Gladden 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 1st day of Child 1830; that he enlisted in the military service of the Confederate States, (or of the State of \_\_\_\_\_) during the war between the

States, and served as a Private 1st in Company B, of Phillips Sign of Ga. Cav. Volunteers. Young is Brigade; that whilst engaged in such military service in the State of Virginia, on the \_\_\_\_\_ day of May 1863, he was wounded, injured or diseased as follows:

Struck by the explosion of a shell  
the result of which it was as to cause  
nervous spasmodic that he is now totally  
unable to any amount of any kind of labor

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Bartow County, been allowed an invalid pension of fifty Dollars, for the year 1905.

Sworn to and subscribed before me, this 8th day of Jan 1906. J. A. Gladden mark  
G. W. Dimerick's Ordng. Post-Office.

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

State of Georgia,

Bartow County.

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

Given under my official signature and seal, this \_\_\_\_\_ day of Jan 1906.

Ordinary Bartow County.

NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1st, 1906.

Georgia  
 Bartow County } Personally come before me the  
 indwigner John A. Barker who  
 on oath says that he is a  
 practicing Physician and has been for many  
 years and that very shortly after coming  
 out of the service of the Confederate  
 Army, He as a Physician treated John  
 Gladden who had also but recently come out  
 of the Confederate Army for Rheumatism  
 and that it was then and is still his opinion  
 that said Rheumatism was brought on by  
 exposure from service in the Army and that  
 frequently for days from attacks of said  
 Rheumatism said Gladden was totally  
 unable to do anything or to get up from  
 his bed as excrement was said from  
 from said attacks of Rheumatism in his  
 legs and in other parts of his body and he  
 still suffers with said Rheumatism as he gets  
 older to such an extent as much of his time  
 as to be wholly unable to do anything

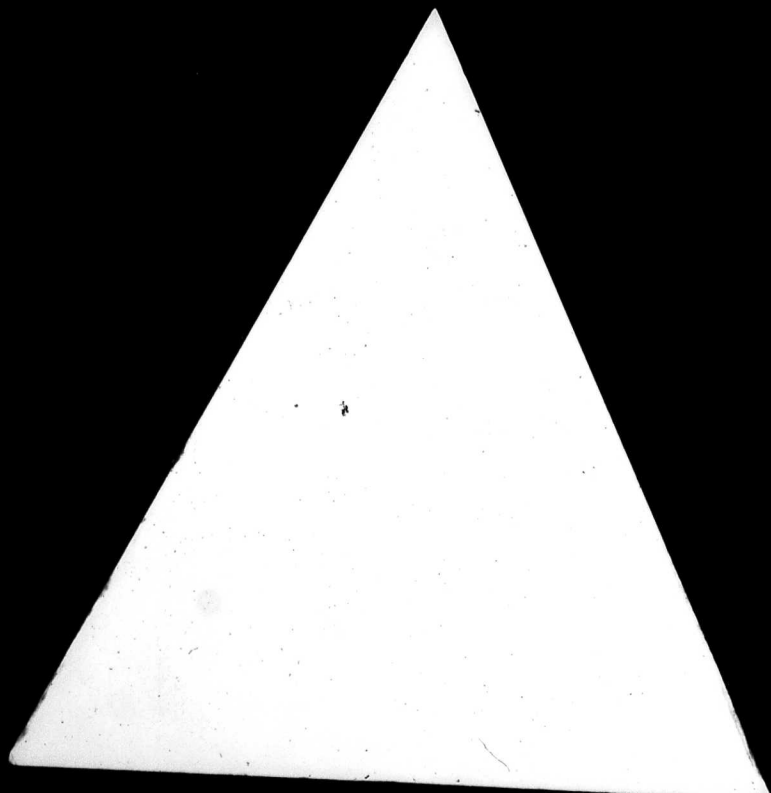
Sworn to and subscribed }  
before me Mch 14<sup>th</sup> 1894 }  
C. W. Hendricks }  
Ordinary }  
Borlough Co. Pa }

Personally appeared before me the undersigned  
A. S. Riddle who upon oath says that he is  
a practicing Physician and that he has  
for several months past been treating  
John A. Gladden for Rheumatism said  
Rheumatism of long standing and that  
said Rheumatism is in his opinion  
incurable and disables said John A.  
Gladden from labor and renders him  
unable to make a living for himself  
& family.

A. S. Riddle M.D.

Sworn to and subscribed me }  
March 14<sup>th</sup> 1894 }  
C. W. Hendricks }  
Ordinary }  
Borlough Co. Pa }





POWER OF ATTORNEY

STATE OF GEORGIA,

Bartow County,

of Bartow County, hereby authorize Geo Haddock

to receive and collect for the pension allowed and that he

Witness my hand this 10<sup>th</sup> day of Sept 1897

Geo Haddock Ordinary,

Bartow County, Geo Haddock

{SEAL}

Bylagden, Lou A  
Bartow County

No. \_\_\_\_\_

WIDOW'S  
INDIGENT PENSION.

Name M. L. A. Gladden  
County Bartow  
Widow of John A. Gladden

Approved \_\_\_\_\_

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. HARRISON, STATE PRINTER, ATLANTA

11/8/07

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, M. L. N. Gladden hereby authorize G. W. Anderson of Barlow County to receive and receipt for the pension allowed and that he remit the same to me at Barlowville by his check or registered mail.

Witness my hand this 70th day of Sept 1907

Executed in presence of

G. W. Anderson Ordinary,

Barlow County.

SEAL

WIDOW'S

INDIGENT PENSION.

Name M. L. N. Gladden

County Barlow

Widow of John H. Gladden

Approved

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

11/8/07

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Barlow County.

I, M. L. N. Gladden of said State and County, desiring to avail myself of the pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed December 19, 1900; hereby submit herewith, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.)  
Barlowville Ga
2. How long and since when have you been a resident of this State?  
Since 1863 all my life
3. When and where were you born?  
1836 Jackson County Ga
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case)  
1863 in Ga. M. L. N. Gladden married May 31st 1863 in Barlow Co Ga
5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States?  
Barlow Co Ga
6. How long did your husband serve in said Company and Regiment?
7. When and where did your husband's Company and Regiment surrender and was discharged?
8. Was your husband present at the time and place when his Company and Regiment surrendered?
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?
10. When and where did your husband die?  
Oct. 17th 1906, Barlowville Ga
11. Which of the following grounds do you base your application for pension, viz.: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty?  
Age and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and when you lost your sight?  
I have not been able to earn a support several years
13. What has been your occupation since your husband's death?  
Nothing
14. How much can you earn gross, by your own exertion or labor?  
Nothing
15. What property, real or personal, or income do you have or possess, and its gross value?  
None at all
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you made of the same?  
None at all
17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what property did you therein for taxation?  
Barlow County
18. How have you been supported since death of husband, and especially for 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907?  
Have been supported by my son in law
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income?  
Nothing
20. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907—How much did you receive for each year?  
Had no employment
21. Have you a family? If so, who compose such family? Give their means of support? Have they any lands or other property?  
Have no family live with my son in law
22. Have you ever made application for pension before?
23. How many applications have you made for a pension; and under what date?  
None

Sworn to and subscribed before me, this the 10th day of Oct 1907  
G. W. Anderson Ordinary,  
of Barlow County.



# QUESTIONS FOR WITNESSES.

STATE OF GEORGIA.

Barlow County, Ga.  
N. J. Collins

been present as a witness in support of the application of Mrs. J. A. Gladden for a Pension under the Act of 1900, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?  
Barlowville Ga.
2. How long have you known her?  
My first years
3. Where does she reside, and how long since when has she been a resident of this State?  
Barlowville Ga. Born and reared in this State. I had
4. When and where was she born?  
About 1836, in N.C. or near there
5. Were you ever acquainted with her husband?  
Yes
6. Where did she reside in 1861?  
Barlowville Ga.
7. When and to whom was he married?  
May 1863 to Mrs. R. H. Varnum
8. When and where was he born?  
About 1836, in N.C. or near there
9. How long have you known him?  
My first years
10. When and where did he enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this?  
1861, Big Shanty, Co. B. Phillips' Regt. I was present
11. Were you a member of the same Company and Regiment?  
Yes
12. How long did he perform regular military duty?  
Four years
13. When and where was his Company and Regiment surrendered and discharged from service?  
April 26, 1865, Greensboro N.C.
14. Were you with the Company when it surrendered?  
I was
15. Was John A. Gladden the husband of applicant present?  
He had a furlough at the time
16. If not present, where was he?  
He had been furloughed
17. When and where did he leave his Command?  
I do not know
18. For what cause?  
By authority granting furloughs
19. By whose authority he left?  
By authority granting furloughs
20. How do you know all this? (State fully and clearly.)  
I was with him and know (When I speak John A. Gladden was a good boy and faithful soldier)
21. When and where did John A. Gladden die?  
Oct 17 - 1906 in Barlowville Ga
22. Where did he reside at his death and how long had he been a resident of Georgia at his death?  
Barlowville Ga. Since I have known him
23. Do you of your own knowledge know that applicant is the lawful widow of John A. Gladden?  
I do not know
24. Has she remained unmarried since her soldier husband's death, and is now his widow?  
She has not. She is John A. Gladden's lawful widow
25. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?  
She has no property. I know personally. Have known her since they were married
26. What property, effects or income did applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition did she make of it?  
Had none of all
27. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom?  
Has not. Had mine to sell or use. Has lived with her son in law
28. What is applicant's physical condition and her chances and ability to earn a support?  
She is very feeble and old. She is totally unable to earn anything.

28. Is applicant able to earn a support at labor of any sort, if not, why?  
She is totally unable to earn anything
29. How was she supported for 1903, 1904, 1905, 1906 and 1907?  
In absence of her old age
30. How much did applicant contribute to her support for last two years?  
No thing
31. Give a full and complete statement of applicant's physical condition?  
She is a feeble, old, lame, nervous, quite infirm
32. What interest have you in the recovery of this pension by the applicant?  
None

Sworn to and subscribed before me this 10th day of Sep 1907  
J. A. Gladden Ordinary, Barlow County, Ga.  
Witnesses

## AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,  
Barlow County,  
Personally before me comes Dr. J. A. Goodwin and Dr. T. L. Arnold, both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. J. A. Gladden, applicant for a Pension under act of 1900, and after such personal examination say that her physical condition is this: She is very old, feeble, nervous and totally unable to earn anything by any kind of business

and we have no interest in said pension if allowed.  
Sworn to and subscribed before me this 10th day of Sep 1907  
J. A. Gladden Ordinary, Barlow County, Ga.  
Dr. J. A. Goodwin  
Dr. T. L. Arnold

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,  
Barlow County,  
I, J. A. Gladden, Ordinary, in and for said County, hereby certify that the applicant, Mrs. J. A. Gladden, resides in said County, and has been a bona fide resident of this State since the 10th day of Sep 1907, and that the witnesses, Mr. J. A. Collins and Mr. J. A. Gladden, are of trustworthy character, and that their statements are entitled to full faith and credit.  
I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.  
I further certify that the tax digest of Barlow County shows that applicant returned for taxation in her own name in 1899 \$ dollars worth of property, and in 1900 \$ dollars worth of property, in 1901 \$ dollars worth of property, in 1902 \$ dollars worth of property, and in 1903 \$ dollars worth of property.  
Witness my hand and official seal this 10th day of Sep 1907  
J. A. Gladden Ordinary, Barlow County, Ga.

- Notes.--1 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."  
2. Additional affidavits may be attached, if blank spaces are insufficient.  
3. All affidavits must be made before Ordinary.  
4. Only widows who were the wives of the dead husbands while they were soldiers need apply--and are now widows. Those married since the 9th of April, 1865, not entitled.  
5. Witnesses and two Physicians are necessary to make out claims.  
6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

Birth in Tennessee, census, 1900, 1910, 1920, 1930, 1940, 1950, 1960, 1970, 1980, 1990, 2000, 2010, 2020, 2030, 2040, 2050, 2060, 2070, 2080, 2090, 2100, 2110, 2120, 2130, 2140, 2150, 2160, 2170, 2180, 2190, 2200, 2210, 2220, 2230, 2240, 2250, 2260, 2270, 2280, 2290, 2300, 2310, 2320, 2330, 2340, 2350, 2360, 2370, 2380, 2390, 2400, 2410, 2420, 2430, 2440, 2450, 2460, 2470, 2480, 2490, 2500, 2510, 2520, 2530, 2540, 2550, 2560, 2570, 2580, 2590, 2600, 2610, 2620, 2630, 2640, 2650, 2660, 2670, 2680, 2690, 2700, 2710, 2720, 2730, 2740, 2750, 2760, 2770, 2780, 2790, 2800, 2810, 2820, 2830, 2840, 2850, 2860, 2870, 2880, 2890, 2900, 2910, 2920, 2930, 2940, 2950, 2960, 2970, 2980, 2990, 3000, 3010, 3020, 3030, 3040, 3050, 3060, 3070, 3080, 3090, 3100, 3110, 3120, 3130, 3140, 3150, 3160, 3170, 3180, 3190, 3200, 3210, 3220, 3230, 3240, 3250, 3260, 3270, 3280, 3290, 3300, 3310, 3320, 3330, 3340, 3350, 3360, 3370, 3380, 3390, 3400, 3410, 3420, 3430, 3440, 3450, 3460, 3470, 3480, 3490, 3500, 3510, 3520, 3530, 3540, 3550, 3560, 3570, 3580, 3590, 3600, 3610, 3620, 3630, 3640, 3650, 3660, 3670, 3680, 3690, 3700, 3710, 3720, 3730, 3740, 3750, 3760, 3770, 3780, 3790, 3800, 3810, 3820, 3830, 3840, 3850, 3860, 3870, 3880, 3890, 3900, 3910, 3920, 3930, 3940, 3950, 3960, 3970, 3980, 3990, 4000, 4010, 4020, 4030, 4040, 4050, 4060, 4070, 4080, 4090, 4100, 4110, 4120, 4130, 4140, 4150, 4160, 4170, 4180, 4190, 4200, 4210, 4220, 4230, 4240, 4250, 4260, 4270, 4280, 4290, 4300, 4310, 4320, 4330, 4340, 4350, 4360, 4370, 4380, 4390, 4400, 4410, 4420, 4430, 4440, 4450, 4460, 4470, 4480, 4490, 4500, 4510, 4520, 4530, 4540, 4550, 4560, 4570, 4580, 4590, 4600, 4610, 4620, 4630, 4640, 4650, 4660, 4670, 4680, 4690, 4700, 4710, 4720, 4730, 4740, 4750, 4760, 4770, 4780, 4790, 4800, 4810, 4820, 4830, 4840, 4850, 4860, 4870, 4880, 4890, 4900, 4910, 4920, 4930, 4940, 4950, 4960, 4970, 4980, 4990, 5000, 5010, 5020, 5030, 5040, 5050, 5060, 5070, 5080, 5090, 5100, 5110, 5120, 5130, 5140, 5150, 5160, 5170, 5180, 5190, 5200, 5210, 5220, 5230, 5240, 5250, 5260, 5270, 5280, 5290, 5300, 5310, 5320, 5330, 5340, 5350, 5360, 5370, 5380, 5390, 5400, 5410, 5420, 5430, 5440, 5450, 5460, 5470, 5480, 5490, 5500, 5510, 5520, 5530, 5540, 5550, 5560, 5570, 5580, 5590, 5600, 5610, 5620, 5630, 5640, 5650, 5660, 5670, 5680, 5690, 5700, 5710, 5720, 5730, 5740, 5750, 5760, 5770, 5780, 5790, 5800, 5810, 5820, 5830, 5840, 5850, 5860, 5870, 5880, 5890, 5900, 5910, 5920, 5930, 5940, 5950, 5960, 5970, 5980, 5990, 6000, 6010, 6020, 6030, 6040, 6050, 6060, 6070, 6080, 6090, 6100, 6110, 6120, 6130, 6140, 6150, 6160, 6170, 6180, 6190, 6200, 6210, 6220, 6230, 6240, 6250, 6260, 6270, 6280, 6290, 6300, 6310, 6320, 6330, 6340, 6350, 6360, 6370, 6380, 6390, 6400, 6410, 6420, 6430, 6440, 6450, 6460, 6470, 6480, 6490, 6500, 6510, 6520, 6530, 6540, 6550, 6560, 6570, 6580, 6590, 6600, 6610, 6620, 6630, 6640, 6650, 6660, 6670, 6680, 6690, 6700, 6710, 6720, 6730, 6740, 6750, 6760, 6770, 6780, 6790, 6800, 6810, 6820, 6830, 6840, 6850, 6860, 6870, 6880, 6890, 6900, 6910, 6920, 6930, 6940, 6950, 6960, 6970, 6980, 6990, 7000, 7010, 7020, 7030, 7040, 7050, 7060, 7070, 7080, 7090, 7100, 7110, 7120, 7130, 7140, 7150, 7160, 7170, 7180, 7190, 7200, 7210, 7220, 7230, 7240, 7250, 7260, 7270, 7280, 7290, 7300, 7310, 7320, 7330, 7340, 7350, 7360, 7370, 7380, 7390, 7400, 7410, 7420, 7430, 7440, 7450, 7460, 7470, 7480, 7490, 7500, 7510, 7520, 7530, 7540, 7550, 7560, 7570, 7580, 7590, 7600, 7610, 7620, 7630, 7640, 7650, 7660, 7670, 7680, 7690, 7700, 7710, 7720, 7730, 7740, 7750, 7760, 7770, 7780, 7790, 7800, 7810, 7820, 7830, 7840, 7850, 7860, 7870, 7880, 7890, 7900, 7910, 7920, 7930, 7940, 7950, 7960, 7970, 7980, 7990, 8000, 8010, 8020, 8030, 8040, 8050, 8060, 8070, 8080, 8090, 8100, 8110, 8120, 8130, 8140, 8150, 8160, 8170, 8180, 8190, 8200, 8210, 8220, 8230, 8240, 8250, 8260, 8270, 8280, 8290, 8300, 8310, 8320, 8330, 8340, 8350, 8360, 8370, 8380, 8390, 8400, 8410, 8420, 8430, 8440, 8450, 8460, 8470, 8480, 8490, 8500, 8510, 8520, 8530, 8540, 8550, 8560, 8570, 8580, 8590, 8600, 8610, 8620, 8630, 8640, 8650, 8660, 8670, 8680, 8690, 8700, 8710, 8720, 8730, 8740, 8750, 8760, 8770, 8780, 8790, 8800, 8810, 8820, 8830, 8840, 8850, 8860, 8870, 8880, 8890, 8900, 8910, 8920, 8930, 8940, 8950, 8960, 8970, 8980, 8990, 9000, 9010, 9020, 9030, 9040, 9050, 9060, 9070, 9080, 9090, 9100, 9110, 9120, 9130, 9140, 9150, 9160, 9170, 9180, 9190, 9200, 9210, 9220, 9230, 9240, 9250, 9260, 9270, 9280, 9290, 9300, 9310, 9320, 9330, 9340, 9350, 9360, 9370, 9380, 9390, 9400, 9410, 9420, 9430, 9440, 9450, 9460, 9470, 9480, 9490, 9500, 9510, 9520, 9530, 9540, 9550, 9560, 9570, 9580, 9590, 9600, 9610, 9620, 9630, 9640, 9650, 9660, 9670, 9680, 9690, 9700, 9710, 9720, 9730, 9740, 9750, 9760, 9770, 9780, 9790, 9800, 9810, 9820, 9830, 9840, 9850, 9860, 9870, 9880, 9890, 9900, 9910, 9920, 9930, 9940, 9950, 9960, 9970, 9980, 9990, 10000

OFFICE OF  
COURT OF ORDINARY,  
BARTOW COUNTY.

G. W. HENDRICKS, Ordinary.

CARTERSVILLE, GA. *Sept 10<sup>th</sup>* 190*7*

State of Georgia, Bartow County.  
To Any Ordained Ministers of the Gospel, Justice  
of the Inferior Court, Judge of the Superior Court  
or Justice of the Peace.

You are hereby authorized to join John A. Gladden and Lou A. Garrison in lawful Bonds of Matrimony agreeably to the Constitution and laws of this State.

Given under my hand & seal of office this  
30<sup>th</sup> day of May 1860.

Nathan Land Ordinary.

Georgia - Bartow County.

I hereby certify that the marriage of the persons named  
in the above license actually took place and was  
duly solemnized before me this 31<sup>st</sup> day of May 1863.

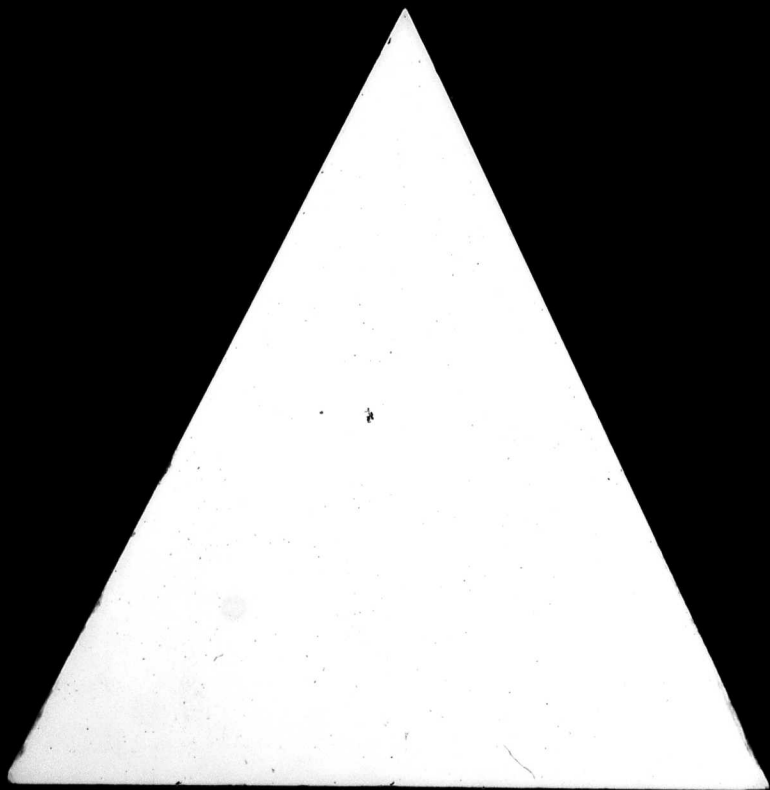
E. M. Gault M. C.

Recorded July 17<sup>th</sup> 1863

Nathan Land Ordinary

True copy of the Record. Book "E" page 260.

G. W. Hendricks  
Ordinary





# NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the law governing the subject, the following suggestions are made, which are approved by the Attorney General.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proof to the service.
2. The law makes no allowance for an arm or a leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary purposes of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If an applicant is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to require the applicant to state as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If papers are returned for correcting, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly made.
6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received.

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

Gladden, Robert,  
Boston Co

## APPLICATION FOR ALLOWANCE

Decided by Recommend  
Applicant Robert Gladden  
County Barton  
Amount 150

Date of Warrant Aug 29  
Entered on Record Aug 29 1889  
J M H  
SECRETARY EXECUTIVE DEPARTMENT.

E 1957  
AMW Monte

## NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physicians, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

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

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

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

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

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

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

For Use of Applicants Who Have not Heretofore Drawn.

## STATE OF GEORGIA,

Barlow County

PERSONALLY appears Rollie Gladson 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 been such since the four years day of 18 ; that he enlisted in the military service of the Con-

Federate States (or of the State of \_\_\_\_\_) during the war between the States, and served as a private in Company A, of 55th Regiment of Georgia Volunteers James's Brigade, that whilst engaged in such military service, at the battle of Seven Pines in the State of Virginia, on the 31<sup>st</sup> day of May, 1862, he was wounded as follows: By a line of shot thru the leg.

wounded as follows: By a piece of shell striking  
and breaking the skull line the upper part of  
the right temple, the result of which wound  
impaired his mind to such an extent that he is  
incapable of conducting any business, and he still grows  
worse. He is physically subject to the same labor  
as he could stand heat or cold. He is unable to ride horse  
back more than a few miles, and cannot stand long or noisy  
and the act amendatory thereof, approved December 24, 1888, and make application for  
the allowance to which he is entitled for the year thereafter ending October 26, 1889.

Sworn to and subscribed before me, this the

day of Aug 1888 road to seaman  
Gustavus A. Ordway mate  
Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

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

Commissioned Officer's Affidavit.

## STATE OF GEORGIA

Haralson County

PERSONALLY came before me Jefferson Reed of the county  
of Brookston State of Georgia, who, being duly sworn, says that he was  
a commissioned officer in Company B of 35 Regiment of GA  
Volunteers, and that deponent knows Robt. Gladwin 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 Robert

Robt. Gladden as stated by him in said affidavit. Deponent further states that said Robt. Gladden is a bona fide citizen of this State and resides in Barlow county.

Suzann Leona Subscribed  
before me Aug 15<sup>th</sup> 1889

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

Sh. Lanningport  
Ordinary, Haralson County Ga.

STATE OF GEORGIA,

County.

PERSONALLY came

citizens of \_\_\_\_\_ county, in said State,

who, being duly sworn, say that they are acquainted with \_\_\_\_\_

and know that he received the wounds (or contracted the

disease) in the military service, as stated by him in the foregoing affidavit; that said wounds

(or disease) permanently disables applicant, as stated by him; that said applicant is a bona

fide citizen of this State, and resides in \_\_\_\_\_ county, and we

are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this \_\_\_\_\_

day of \_\_\_\_\_

STATE OF GEORGIA,

Barlow

County.

PERSONALLY comes before me \_\_\_\_\_ Ordinary of said county,

J. R. Mayfield and D. Hamster, both known to

me as reputable physicians of said county, who, being severally sworn, say on oath that

they have carefully examined Robt. Gladden and after such

examination say that the applicant has been injured as follows: By a shell

wound in upper right side of frontal

bone the frontal plate being fractured and

irregularly depressed. It has impaired

sight in right eye also resulted in mental

and physical disability

Can not stand heat or cold nor

any rough exercise. Right ventricle damaged

Sworn to and subscribed before me, this \_\_\_\_\_

day of July 1889

J. W. Lumbards

ORDINARY.

READ NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA,

Barlow

County.

I, \_\_\_\_\_ Ordinary of said county,

do certify that I am well acquainted with Robt. Gladden the

applicant in the foregoing affidavit, and am well satisfied that the statements made by him

in his said affidavit are true, and I know he is the individual he represents himself to be,

and that he resides in this county. I also certify that the foregoing witnesses, are persons

of respectability, and that their statements are worthy of full credit and belief.

I further certify that \_\_\_\_\_

before whom the foregoing affidavits were made and power of attorney was signed, is a

Ordinary \_\_\_\_\_ of said county, and the said affidavits and signatures

thereto are genuine.

Given under my official signature and seal this 28 day of Aug. 1889

J. W. Lumbards

Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow

County.

Know all Men by these Presents, That I, Robt. Gladden

of Barlow

county, in said State, do hereby appoint \_\_\_\_\_

of \_\_\_\_\_ Ga my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever amount of money I may be entitled

to form the State of Georgia by reason of the injury received as aforesaid in the military ser-

vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby

authorizing my said attorney to receipt in my name for any Warrant that may be issued by

the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this 28

day of August 1889

Executed in the presence of us:

J. P. Durham

J. W. Lumbards

Ordinary

Leave money with  
Winney at Barlowville  
Robt. Gladden



STATE OF GEORGIA,

*Bartow* County,

I, *Gov. H. H. Huddicks* Ordinary of said county, do certify that I am well acquainted with *Robert Gladden* 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 *13* day of *Feb*, 189*0*

Ordinary

*Bartow*

County.

*Gladden, Robert*

*Bartow Co.*

**1890.**

*135*

No. *1378*  
APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING OCTOBER 31, 1890.

*Dec by H. H. Huddicks*

*Applicant, Robert Gladden*

County, *Bartow*.

Amount, *\$150.00*

Date of warrant, *Feb 18*

Entered on record

*July 10* 189*0*

*C. W. H. H.*

RECEIVED BY THE SECRETARY OF THE DEPARTMENT OF AGRICULTURE

WARRANT ISSUED TO

*Wm. H. H. H.*

*Wm. H. H. H.*

STATE OF GEORGIA,

*Bartow* County,

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

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

Given under my official signature and seal, this *11* day of *Feb*, 189*1*

Ordinary

*Bartow*

County.

*Gladden, R.*

*Bartow Co.*

**1891**

Application for Allowance

No. *1810*

FOR THE YEAR ENDING OCTOBER 31, 1891.

*Dec by H. H. Huddicks*

*Applicant, R. Gladden*

County, *Bartow*.

Amount, *\$150.00*

Date of Warrant, *Feb 18*

Entered on record

*July 10* 189*1*

*C. W. H. H.*

RECEIVED BY THE SECRETARY OF THE DEPARTMENT OF AGRICULTURE

WARRANT ISSUED TO

*Wm. H. H. H.*

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



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Bartow* County.

PERSONALLY appears *Robert Gladden* 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 been such continually since the *four* day of *April* 18*62*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *private* in Company *A*, of *85*th Regiment of *Volunteers* *Thomas*'s Brigade; that whilst engaged in such military service, at the battle of *Seven Pines* in the State of *Virginia*, on the *31st* day of *May* 1862, he was wounded as follows: *that in the right temple with a piece of a shell which fractured the skull & thus rendering him maimed as well as physical to totally unable and incompetent to do any kind of business.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of *85.00* dollars.

Sworn to and subscribed before me, this *13* day of *Feb* 1890, *Robert Gladden* *mark*  
*G.W. Studdicks* Ordinary

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

## POWER OF ATTORNEY.

STATE OF GEORGIA

*Bartow* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Robert Gladden*

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *13* day of *Feb* 1890, *Robert Gladden* *mark* [L. S.]

Executed in the presence of us: *J. F. Gunn*

*G.W. Studdicks* Ordinary

DIRECTION.

Send money to me as follows, by *Reage the money with no Studdicks Bartowville*

*Bartow* County, Georgia.

*Robert Gladden* *mark*

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Bartow* County.

PERSONALLY appears *R. Gladden* 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 day of *1845*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *private* in Company *A*, of *85*th Regiment of *Volunteers* *Thomas*'s Brigade; that whilst engaged in such military service at the battle of *Seven Pines* in the State of *Virginia*, on the *31* day of *May* 1862, he was wounded as follows: *that in the right temple with a piece of a shell which fractured the skull & thus rendering him maimed as well as physical to totally unable and incompetent to do any kind of business.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of *85.00* dollars, for *1889 & 1890*

Sworn to and subscribed before me, this *11* day of *Feb* 1891, *Robert Gladden* *mark*  
*G.W. Studdicks* Ordinary

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

## POWER OF ATTORNEY.

STATE OF GEORGIA,

*Bartow* County.

Know all Men by these Presents, That I, *R. Gladden* of *Bartow* County, State of Georgia, do hereby appoint *Rev. A.M. Houder*

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *11* day of *Feb* 1891, *Robert Gladden* *mark* [L. S.]

Executed in the presence of us: *J. F. Gunn*

*G.W. Studdicks* Ordinary

DIRECTION.

Send money to me as follows by *Express to G.W. Studdicks*

*Bartow* County, Georgia.

*Robert Gladden* *mark*

STATE OF GEORGIA.

Barlow County,  
I, G. W. Hurdick Ordinary of said county,  
do certify that I am well acquainted with Robt. Gladden the  
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his  
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the  
individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this 9 day of March 1892.

G. W. Hurdick  
Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County,  
Known all Men by these Presents, That I Robt. Gladden  
of Barlow County, State of Georgia, do hereby appoint

Wm. Wells my true and lawful attorney in fact, for  
me and in my name, to receive and receipt for whatever amount of money I may be entitled to  
from the State of Georgia by reason of the injury received as aforesaid in the military service of  
the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing  
my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or  
for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this  
10 day of March 1892.

Executed in the presence of us:  
G. W. Hurdick  
G. W. Hurdick  
Direction.

Send money to me as follows, by \_\_\_\_\_ to \_\_\_\_\_ P. O.

STATE OF GEORGIA,  
County, Georgia.

Gladden, Robert  
Barlow Co  
No. 2689

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name Robert Gladden  
County Barlow  
Disability Paralyzed Hand  
Amount \$ 50.00  
Entered on record March 19 1892.  
W. H. HARRISON,  
Secretary of Executive Department.  
AGENT.  
A. H. Tate  
Geo. W. Harrison, State Printer, Atlanta, Ga.

Gladden, Robert  
Barlow Co

1893

To Building 608 94

No. 41  
Application for Allowance

March 20  
Applicant Robt Gladden  
County Barlow  
Amount, 50  
Date of Warrant, 3/17  
Entered on record, 3/17

Wm Wells  
WARRANT HANGING BY  
Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA  
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

Barlow County, State of Georgia, who, being duly sworn, says of Barlow County, State of Georgia, and has been such continuously since the day of 1866; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H of 35 th Regiment of G.W Volunteers Thomas's Brigade: that whilst engaged in such military service at the battle of Seven Pines in the State of Virginia, on the 31st day of May 1862, he was wounded as follows: Shot in right temple with shell, fracturing his skull, and as a result so affected his mind and memory that he could think and do business, could not recollect &c &c

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of \_\_\_\_\_

Fifty Dollars for *three years*  
 Sworn to and subscribed before me this the *10* day of *March* 1892. } *Robert F. Gladden*  
*Swainsburg* Ordinary. *mmd*

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

## POWER OF ATTORNEY

STATE OF GEORGIA.

Dartmouth County.

Know all Men by these Presents, That I

Court, in said State, do hereby appoint John Hite  
of Cartersville Ga my true and lawful attorney in fact, for  
me and in my name, to receive and receipt for whatever amount of money I may be entitled to  
from the State of Georgia by reason of the injury received as aforesaid in the military service of  
the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing  
my said attorney to receipt in my name for any Warrant that may be issued by the Governor,  
or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this

day of March 1892

Executed in the presence of us :

W. J. Stephens  
Isaac Hendrickson Ordman

**DIRECTION.**

Send money to me as follows, by

ic

P. O.

County, Georgia.

**For Applicants Heretofore Allowed Pensions.**

STATE OF GEORGIA.

Barlow Coun

PERSONALLY appears

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of 1887, that he collected in the

may of 1861; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States and served as a Private in Company 4, of 85th Regiment of VA Volunteers, Thomas's Brigade; that whilst engaged in such military service at the battle of Seven Pines in the State of Virginia, on the 31 day of May, 1861, he was wounded as follows: Shot in the upper right temple with a piece of shell, rendering him permanently disabled to perform manual labor

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

Sworn to and subscribed before me, this, the 16 day of March, 1893, dollars, for 189-20-91-92 Robt. L. Gladden

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

STATE OF GEORGIA.

Baptist County.

I,

do certify that I am well acquainted with Robert Gladden the \_\_\_\_\_ 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 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  
notary public in and for the County of \_\_\_\_\_ of said County, and the said affidavits and  
signatures thereto are genuine.

Given under my official signature and seal, this 16 day of March 1893.

## Ordinary

Country

STATE OF GEORGIA

POWER OF ATTORNEY



Audited August 31 1889.  
Wm. S. Wright  
COMPTROLLER-GENERAL

Barton

Maimed Soldiers.

Voucher No. 2894

Amount \$ 50

Paid to Robert Gladden  
For Disabled by Skull  
Wound  
Aug 29 1889.

Included in warrant No.

issued to Treasurer.

1889.

WARRANT CLERK.

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

A. M. Foute

Audited 18

COMPTROLLER-GENERAL.

Barton

Maimed Soldiers.

Voucher No. 1378

Amount \$ 50.<sup>00</sup>

Paid to Robt Gladden  
For Disabled by  
skull wound  
Feb 18 1890.

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

A. M. Foute



No. 2597

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. Aug 29 1889.

Mr. Robert Gladden of the County  
of Barton having filed his application in the Executive  
Department for an allowance under the Act approved October 24, 1887, as amended by Act,  
Dec. 24, 1888, and the same having been allowed for  
Disabled by Skull wound  
He is entitled to receive the sum of Fifty 00 Dollars  
for such disability, the same being the allowance due for the year ending October 24, 1889.  
The Treasurer will pay the same and hold his receipt on this voucher, and return same  
to Executive Department for warrant.

By the Governor,

M. N. Harrison

CLERK EXECUTIVE DEPARTMENT.

50  
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00

per above voucher, this

29 of August 1889.

Robert Gladden  
By A. M. Fouts,  
Atty. in fact.

No. 1378

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb 18 1890

Mr. Robert Gladden of the County  
of Barton having filed his application in the Executive  
Department for an allowance under the Act approved October 24, 1887, as amended by Act,  
approved, Dec. 24, 1888, and the same having been examined and allowed for  
Disabled by Skull wound  
He is entitled to receive the sum of Fifty 00 Dollars  
for such disability, the same being the allowance due for the year ending October 24, 1890.  
The Treasurer will pay the same and hold his receipt on this voucher, and return same  
to Executive Department for warrant.

By the Governor,

M. N. Harrison

CLERK EXECUTIVE DEPARTMENT.

50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00

per above voucher, this

18 of Feb 1890

Robert Gladden  
By A. M. Fouts, Atty. in fact.

AUDITED  
Audited FEB 27 1891 1891.  
*Wm. A. Wright*  
COMPTROLLER GENERAL.

*Gladden, R.*

*Barton*

1891.

Maimed Soldiers.

Voucher No. 1810

Amount \$ 50.

Paid to *R. Gladden*

For *Dis' by skull*

*Wm. A. Wright*  
*Feb 26* 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

*W. A. Wright*

1891.

No.

1810

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT. }

Atlanta, Ga. Feb 26, 1891.

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

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

By the Governor,

W. M. Harrison

Sec'y EXECUTIVE DEPARTMENT.



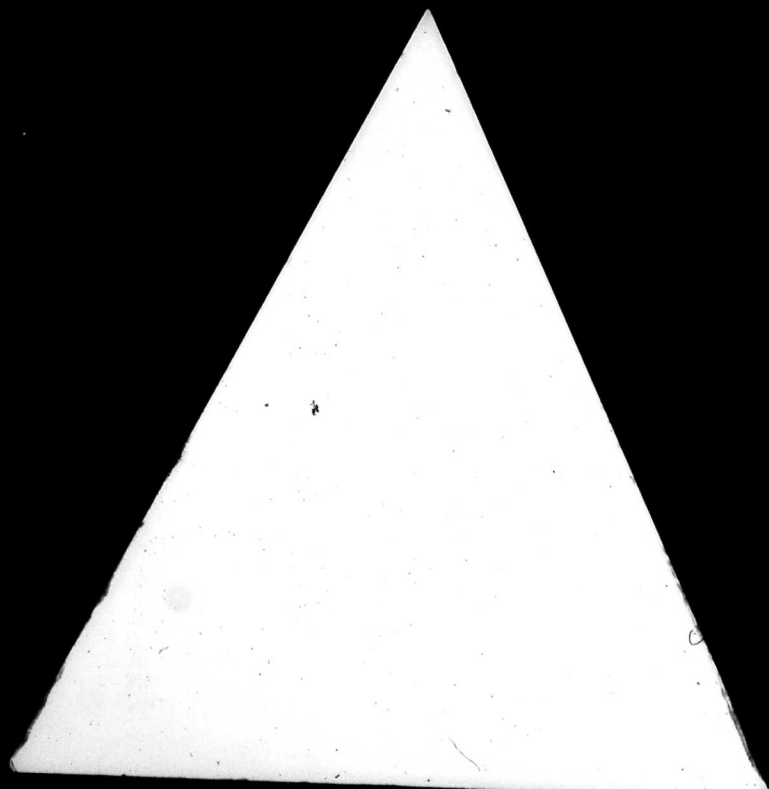
GOVERNOR.

\$ 50.

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

Fifty Dollars,  
 per above voucher, this 26 of Feb, 1891.

R. GladdenW. M.





# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow COUNTY.

W. E. Lindsey of Bartow County, Fla.

do hereby authorize

Witness my hand and seal, this 15th day of April, 1906

Executed in presence of

W. E. Lindsey (L.S.)

Ganton, W.E.  
Bartow County

No. 1907  
**INDIGENT PENSION.**  
B-60 1907

Name W. E. Lindsey  
County Bartow  
Co. B 60 Fla Regt.   
Approved 190

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write name of Applicant, Company and Regiment on back as indicated above.

Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr.,  
Atlanta, Georgia.

4/20/06

81441

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

I, W. E. Stanton hereby authorize  
G. W. Lindrick of Cartersville Ga

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

Witness my hand and seal, this 15<sup>th</sup> day of Sept 1906

W. E. Stanton [L. S.]

Executed in presence of

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Barlow COUNTY.

W. E. Stanton of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give, State, County and Postoffice.)  
W. E. Stanton, Allatoona Barlow Co. Ga
2. How long and since when have you been a resident of this State? I have lived in Georgia all my life except from 1846 to 1902
3. When and where were you born? Dec. 19<sup>th</sup> 1837 in Bushy Grove, in Co. B - 1<sup>st</sup> Ga. Battalion
4. When and where and in what company and regiment did you enlist or serve? Sept. 1862
5. How long did you remain in such company and regiment? Till Feb. 1862. It was then merged into the 60<sup>th</sup> Ga. Regiment. I was discharged from the Regiment Aug. 1862
6. When and where was your company and regiment surrendered and discharged? April 9<sup>th</sup> 1865 at Apomattox
7. Were you present with your company and regiment when it was surrendered? I was not
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was at West Point Ga. in the Georgia Militia Co. B. Regiment to which I then belonged
9. How much can you earn (gross) per annum by your own exertions or labor? perhaps \$800
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? I have unable to earn a support for the last four years. I am badly crippled. I have to use a cane continually all the time. Can't do anything at all.
13. What property, real and personal, or income, do you possess, and its gross value? I have no property of any kind. Have been due me
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? None at all.

Every Question MUST Be Answered.

15. In what County did you reside during those years, and what property did you then return for taxation?  
Barlow County
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905?  
by my son
17. How much did your support cost for any of those years, and what portion did you contribute thereto by your own labor or income? My son has the support for a year
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?  
None at all. My son supports me
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home, stand, or other property? Their ages and how employed? I have no family with me at all. I stay with my grand daughter near Allatoona Ga
20. Are you receiving any pension? If so, what amount and for what disability? NO
21. Have you ever made an application for pension before? NO
22. How many applications have you ever made and under what class? NO

Sworn to and subscribed before me this the 15<sup>th</sup> day of Sept 1906  
G. W. Lindrick Ordinary.  
of Barlow County.

INDIGENT PENSION.

B-6 1904-07

Name W. E. Stanton  
County Barlow  
Age 60 Yrs Regt. 60

Approved 190

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Clerkery will write name of Applicant, Company and Regiment on back as indicated above.

Printed and Published by G. W. Lindrick, M. G.

4/20/06

1111

Stanton, W. E.  
Barlow County

No. 1904

## STATE OF GEORGIA.

COUNTY.

of said State and County, having been presented

as a witness in support of the application of \_\_\_\_\_ for pension  
under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and  
answers as follows:

1. What is your name and where do you reside?
  2. Are you acquainted with \_\_\_\_\_, the applicant; if so how long have you known him?
  3. Where does he reside, and how long and since when has he been a resident of this State?
  4. When, where and in what company and regiment did he enlist, and how do you know?
  5. Were you a member of the same company and regiment?
  6. How long did he perform regular military duty?
  7. When and where was his command surrendered?
  8. Were you present when it surrendered?
  9. Was applicant present?
  10. If he was not present, where was he?
- When did he leave his command? \_\_\_\_\_ For what cause?

By what authority he left? \_\_\_\_\_ How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.)

11. What property, effects or income has the applicant? (Give your means of knowledge.)  
*Has no property at all, or income*
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same?  
*Had none*

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?

14. What is the applicant's occupation and physical condition? *No occupation for the last five years. He is old and feeble and not physically able to labor*

15. Is the applicant unable to support himself by labor of any sort; if so, why? He is on  
account of old and feeble conditions

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? *He has been supported by his mother furnishing him money*

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254. Code: *He is ill. Cant work. It is*

19. Who composes family? What property have they? Children's ages and their earning capacity?

20. What interest have you in the recovery of a pension by this applicant?

Sworn to and subscribed before me, this the )  
25th day of Sept 1906 )  
G. W. Hendricks Ordinary.

### AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

COUNTY \_\_\_\_\_

Personally came before me \_\_\_\_\_ J. K. Klatte \_\_\_\_\_ and

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

W. E. Glanton, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Has left Eugene Hennis  
for which he has to wear  
a truss. He is also growing  
older & feeble.

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the }  
15 day of Sep 1901 }  
G. W. Henderson }  
Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

COUNTY.

I, W. W. Sander Ordinary, in and for said County, hereby certify

that the applicant W. E. Gordon resides in said County, and has  
been a bona fide resident of this State since the \_\_\_\_\_ day of \_\_\_\_\_, 189\_\_\_\_\_.

and that the witnesses, viz.: F. R. Calhoun, A. J. Calhoun

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 affidavit was read to the applicant and witness before same was signed

I further certify that the tax digest of Pastor County shows that applicant returned for taxation in his name in 1901.

property, and in 1902 \_\_\_\_\_ Dollars of property: in 1902 \_\_\_\_\_

Dollars of property: in 1904

\_\_\_\_\_ Dollars of property; in 1905

In my opinion the foregoing claim is \_\_\_\_\_ made in good faith.

Witness my hand and seal of office, this 13 day of Sept 1906

of Y. W. Hendricks Ordinary.  
of Bartow County.

## NOTES

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall truly answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the ordinary must certify to the character of the witness, and as to the execution of the proof as there set out.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, W. E. Glanton, hereby authorize

W. E. Glanton of Cortsville Ga

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

me at Cortsville Ga

by W. E. Glanton

Witness my hand and seal, this 20 day of Jan 1907.

W. E. Glanton [L. S.]

Executed in presence of

W. E. Glanton

Glanton W. E.  
Cortsville Ga

Cons Section 1264.  
(FOR THOSE ALREADY ENROLLED)

No. 3872

INDIGENT  
SOLDIER'S PENSION  
\* 1907.

Name W. E. Glanton  
County Cort  
Co. B Regiment 609

WARRANT ISSUED  
FEB 4 1907.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO

ONE W. E. GLANTON, 1111 WEST AVENUE, ATLANTA.

no date

6/14/11



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

*Co B-60th Geo Regt*

*Barton*

County

Personally appears

*W. E. Glanton*

of *Barton*

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 68 years old and by occupation farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of three in Company B, of 50th Geo Batt Regt of Geo Vol; that his physical condition is as follows: He is not completely nor  
able to earn a support

that his property consists of the following items:

of the value of 1 Dollars. I am now earning by my labor, 1 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 1st day of Jan 1907, *W. E. Glanton* his name  
*John Anderson* Ordinary.

State of Georgia,

*Barton*

County

I,

*John Anderson*

Ordinary of said County,

do certify that I am well acquainted with *W. E. Glanton* 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 30 15 day of Jan 1907.

*John Anderson*  
Ordinary *Barton* County.



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

Georgia } Personally before me, R. E. Woodyard  
 Township } Ordinary of said County, came Jno.  
 O. Cleveland who being duly sworn says that  
 he is personally acquainted with W. E. Glanton,  
 and that he and said W. E. Glanton belong  
 to Co B, 60 Ga Regt, and that they served  
 together in said company and Regt, until  
 W. E. Glanton was taken sick and honorably  
 discharged from service in 1862. All  
 of the above facts he knows personally.

Sworn to and subscribed before }  
 me, this April 28<sup>th</sup> 1906. } J. O. Cleveland  
 H. P. Woodyard }  
 Ordinary

Georgia } Personally before me came A. F.  
 Township } Simmons, who being duly sworn  
 says that he served in same company and  
 Regt, with W. E. Glanton, viz: Co B, 60 Ga,  
 and that said W. E. Glanton remained in  
 said company\* until he was honorably dis-  
 charged.

Sworn to and subscribed before me }  
 this April 28<sup>th</sup> 1906 } A. F. Simmons  
 H. P. Woodyard }  
 Ordinary

*cards not  
in file*

Georgia  
Troup County } Personally before me, H. Woodyard,  
Ordinary in and for said County. Came Geo  
V. Boddie, who being duly sworn, says that  
he is personally acquainted with W. E. Glanton  
and that he has said W. E. Glanton belonged  
to Co. B, 4th Georgia Battalion, and that he served with  
said Glanton in said Company & regiment  
18 months during the war between the  
States, during the latter part of the war  
sworn to and subscribed *G. V. Boddie*  
before me this August 20th, 1906  
H. Woodyard  
Ordinary, Troup County

NAME **Glanton, W. E.**

YEAR **1907** COUNTY **Bartow**

WHEN AND WHERE BORN? **Dec. 10, 1857, Troup County, Georgia**

ENLISTED WHEN AND WHERE? **Sept. 1861,**

RANK.

COMPANY AND REGIMENT? **Co. B, 4th Georgia Battn.  
March 1862 merged into 60th Regt. Georgia  
and Georgia Militia Cato's Regt.**

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? **Command: April 9, 1865, Appomattox, Va.**

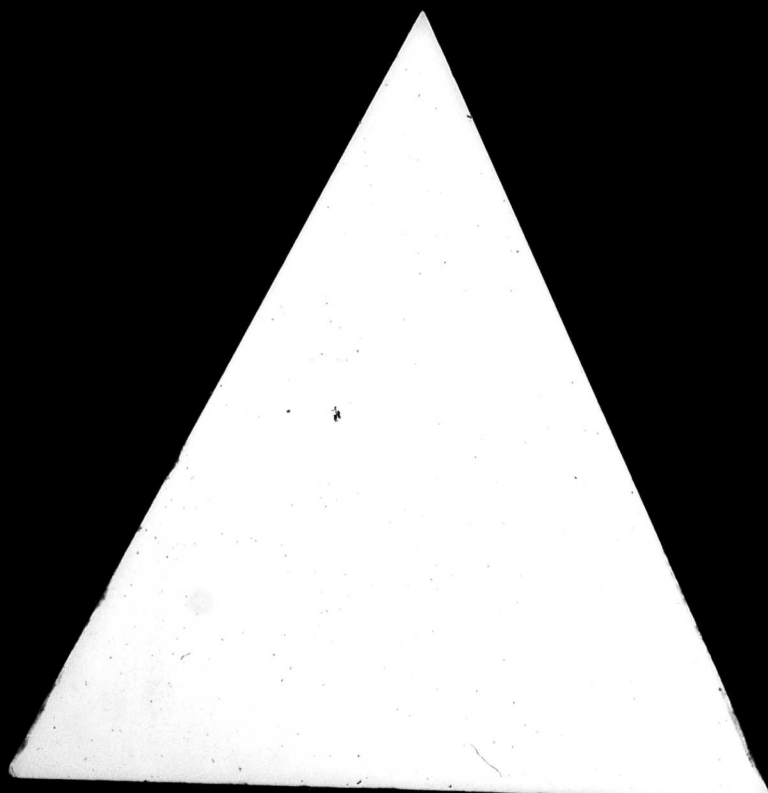
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **At West Point, Georgia in  
Georgia Militia Cato's  
Regt.**

DIED, WHEN AND WHERE?

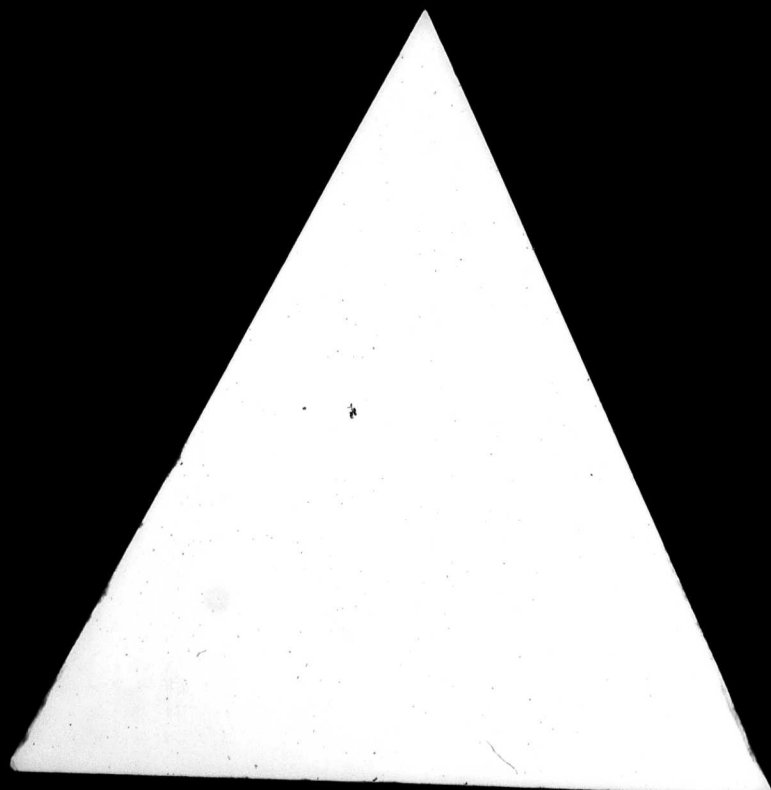
BURIED.

WITNESSES.

**George V. Boddie - Cato's Command - No data  
A. F. Simmons - same command - Co. B, 60th Ga. Regt.  
J. O. Cleveland -**







11/24-1910

The Cash value  
of this means  
property of the  
15th of the month  
around by the

W. L. Lundy

BARTON 22-1910

County / Dist 1911

## Confederate

## Soldier's Application.

UNDER ACT 1910.

**Coun**

Name \_\_\_\_\_

**Company**

Regiment

**Approved**

J. W. LINDSEY

### Commissioner of Pensions

CHAS. P. BYRD, State Printer, Alameda

### Questions for Applicants to Answer.

Barlow County

1. What is your name and where do you reside? (Give County and Post-office) O. H.

1. What is your name and where do you reside (Give County and Post-office) 0 4

2. How long and since when have you been a continuous resident citizen of this State? 12

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

4. When and where, and in what Company and Regiment, did you enlist? (Give the arm and class of Service) 1868 68th Co. 1st Regt. of Col. 1st Inf.

5. How long did you remain in the actual Military Service with said Company and Regiment?  
(Give date of discharge) From 1852 to April 29th 1861

9. When and where was your Company and Regiment surrendered or discharged from the Service?

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

8. If you were not actually present, state specifically clearly where you were.....

8. Where was your Command when you left it?

b. When did you leave the Command? 1/1/68

6. For what cause did you leave?

d. By whose authority did you leave?.....

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

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

8. In what way were you prevented? 1/

h. What effort did you make to return?.....

1. Were you captured during the war?.....

j. If so, when, and where? In what prison were you held and when were you released? .....

9. What property of every description was owned, in the use, possession and control of yourself and wife and its children as of the 1st day of January, 1900? *None*

and wire, and its cash value on the 4 Nov. 1908? (Make list by items and value.) Nov. News  
Spent by Wild Land all worth = £8.00

Not on personal property

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? Same Nov. 1908 it was

11. What property of any description of any kind, and of any value now owned and in the use.

possession and control of yourself and wife and its cash value? (Make itemized list).

*H. O. J.*

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused and for what reason? None

not allowed?.....

Sworn to and subscribed before me, this the 24th day of May, 1964.

day of Nov 1910 26 Nov  
Gardner Ordinary

of Berlin County.

# Confederate

UNDER ACT 1910.

Count Blum

Name D. H. Hooper

Company L-17 Via Beirut

Regiment 1st Pa Cavalry

Approved \_\_\_\_\_

**J. W. LINDSEY,**

Commissioner of Pensions

CHAS. F. BIRD, State Printer, Atlanta

# QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Bartow County.

R. L. Griffin of said State and County is hereby presented as a witness in support of the application of O. H. Glasgow for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? R. L. Griffin  
Bartonsville, Ga.
2. How long and since when have you known the applicant? O. H. Glasgow  
I have known him fifty years
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Bartow Co. Ga. He has lived in this State since birth
4. When, where and in what Company and Regiment did O. H. Glasgow enlist during war from 1861 to 1865? (Give date and place). 1862 Bartow Co. 3rd Va Cav
5. How did you obtain your information of this Service? I served in the same company with him
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). From enlistment to April 22, 1865
7. When and where was his Command surrendered or discharged (give date and place). April 26, 1865, Greensboro N. C.
8. Were you personally present at the Surrender? yes
9. If not, where were you and how came you there? I was present
10. Was the applicant personally present with his Command at surrender? yes
11. If not where was he and how came him there? He was present
12. When did he leave his Command? " Where was his Command when he left it? " for what cause did he leave? "  
By whose authority did he leave " and how long was he granted leave? " How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). I was with applicant in the army and know personally
13. In what way was he prevented from returning to his Command? " How do you know? "
14. What effort did he make to return to his Command and how do you know? "
15. Was applicant captured as a prisoner. no If so, when and where? "  
In what prison was he held? " and when released? "

Sworn to and subscribed before me, this 1st day of Sept 1910, by R. L. Griffin Ordinary,  
of Bartow County.

## AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Bartow County.

Personally before me comes R. L. Griffin who on oath says that they are freeholders residing in said County and we know O. H. Glasgow the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value). 400 Acres of wild land in Rocky Ridge in the 6th land district of the State of Georgia which has been there since about 1800.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items). None

2. When and to whom was it sold or given to? "
3. What was the price paid or stated to be paid? "
4. What relation is the party to applicant? None
5. What disposition was made of the proceeds of the sale? "
6. Was the disposition of this property made in good faith and full value? " or was it made to obtain a pension? None except the O. H. one

Sworn to and subscribed before me, this 1st day of Sept 1910, by R. L. Griffin Ordinary,  
of Bartow County.

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Bartow County.

I, G. W. Hendricks Ordinary of said County, certify that I know the applicant himself for Pension is the person he represents himself to be and resides in said County. That I also know R. L. Griffin the witness swearing to the service and J. H. Eliach who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Bartow Co shows that his and wife value for tax is in 1908 \$ nothing for 1909 \$ nothing for 1910 \$ 2250.  
Sworn under my hand and official seal of office this 1st day of Nov 1910  
G. W. Hendricks Ordinary,  
of Bartow County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. All affidavits must be made before the Ordinary and certified by him.  
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

Mr. Glasgow's mind is not right exactly. I think he was, has some land in some wild land, worth about \$2000.



has embezzled in some wild law, with the best of it

GEORGIA, Bartow County.

I, W. C. Walton, Clerk of Bartow Superior Court, do certify that on the first Tuesday in March, 1911, the real estate of O. U. Glasgow, of said county, was sold at public outcry by the Sheriff of said County to satisfy certain executions against said Glasgow. I further certify that there are a number of unsatisfied executions of record in the Execution Dockets of said Court against said Glasgow, the money for which said real estate was sold as aforesaid being insufficient to pay off all the executions against said Glasgow.

In witness whereof I hereunto set my signature and the seal of said Court, this April 27th, 1911.

W. C. Walton,  
CLERK.

Georgia Bartow County  
Personally came before me O. U. Glasgow  
of said County, and on oath says that  
at the time he filed his petition for  
sequestration, he was in possession of four  
hundred acres of land; and that he thought  
it was worth \$2000.00. Since filing said  
petition the land has been sold by the  
Sheriff of said County to satisfy certain  
executions against him, money for security  
debts; that the land sold for \$1500, and  
the said amount is not sufficient to pay  
all of the said executions; that he the  
said Glasgow has no property of  
any kind, no money or means of  
any amount whatever, totally broke  
up and in bad health &c.  
O. U. Glasgow  
monk

Sworn to and subscribed  
before me, April 29th  
1911.  
G. W. H. H. H.  
Ordinary

NAME Glasgow, O.W.

YEAR 1911 COUNTY Bartow

WHEN AND WHERE BORN? Resident of Georgia since Nov. 23rd, 1888.

ENLISTED WHEN AND WHERE? 1888,- Bartow County, Georgia.

RANK.

COMPANY AND REGIMENT? Co. I. 1st. Ca. Cavalry.

NAME OF CAPTAIN AND SARGEANT?

WOUNDS?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? April 26, 1865, Greensboro, North Carolina.

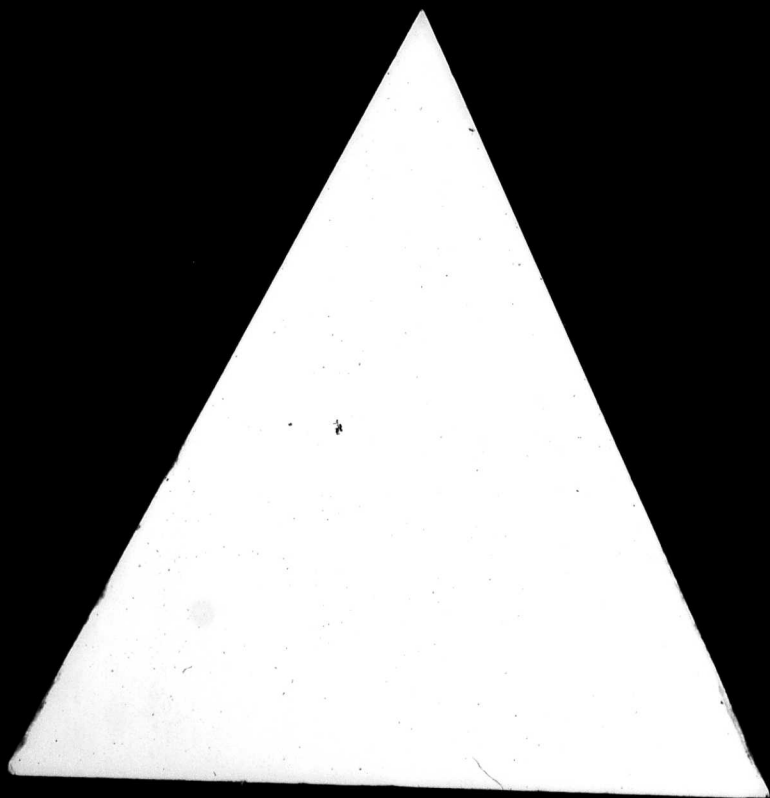
IF NOT INSTANTLY SURRENDERED, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. H.L. Griffin,- Same Company-

No data.



POWER OF ATTORNEY.

STATE OF GEORGIA.

Barlow County.

*Wm. S. Anderson* of Barlow County, Georgia, hereby authorize

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

at *Waverly, Ga.* *check*

Witness my hand and seal this *29* day of *Feb* 1898.

Excited in presence of *A. M. x Anderson*

*Wm. S. Anderson* [initials]

Pension Office 7/27/1898  
There should be some evidence other than the applicants going to show for how long he has been a resident of Georgia  
*Rich. Johnson*  
*Comp. of Pensioners*

*Glaspie, S. M.*  
Barlow County  
No.

INDIGENT PENSION  
1898.

Name *Glaspie, S. M.*  
County *Barlow*

Approved \_\_\_\_\_ 1898.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO