

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of BartowMaria Hight

who, being sworn, says on oath, that she is a bona fide resident of said County of

Bartow

State of Georgia, and that she has RESIDED in said State

continuously ever since Aug-1842

That she is the Widow of

James Hight

who was a soldier in Company

of the 18

Regiment of

9a

Volunteers, that he enlisted in said regiment on or about the month of

May

1862, and served in the Army up to

in June

1862

That he lost his

life on the

day of June

1862

(State here

particulars of the husband's death, when, where and from what cause.)

He died in hospital in Ashland Virginia in June 1862 of measles

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1864

I have been paid a pension as a resident of Bartow County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me,

this 14 day of Jan 1902.G W Nindricks, Ordinary.

Post-Office

herMaria x Hight
mark

State of Georgia,

Bartow

County,

Ordinary of said County, certify that I am well

acquainted with Mrs. Maria Hight, who made the above affidavit and

am satisfied that the facts therein stated are true, and I know she is the individual she represents

herself to be, and that she has continuously resided in this State since the

day of

1890Given under my official signature and seal, this the 14 day of Jan 1902.

Official Seal.

G W Nindricks

Ordinary of

Bartow County.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY COMES MRS.

County of BartowMaria Hight

who, being sworn says on oath, that she is a bona fide resident of said County of

Bartow

State of Georgia, and that she has RESIDED in said State

continuously ever since 10 months ago from 1882 That she is the Widow ofJames Hight

who was a soldier in Company

of the 18

Regiment of

9a

Volunteers, that he enlisted in said regiment on or about the month of

May

1862, and served in the Army up to

in June

1862

That he lost his

life on the

day of June

1862

(State here

particulars of the husband's death, when, where and from what cause.)

He died in a hospital in Ashland Virginia in June 1862 of measles

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1864

I have been paid a pension as a resident of Bartow County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,

this 27 day of Jan 1903.G W Nindricks, Ordinary.

Post-Office

herMaria x Hight
mark

State of Georgia,

Bartow

County,

Ordinary of said County, certify that I am well

acquainted with Mrs. Maria Hight, who made the above affidavit and

am satisfied that the facts therein stated are true, and I know she is the individual she represents

herself to be, and that she has continuously resided in this State since the

day of

18Given under my official signature and seal, this the 27 day of Jan 1903.

Official Seal.

G W Nindricks

Ordinary of

Bartow County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow COUNTY.

I, Mariah Hite of Bartowville Ga hereby authorize

to receive and receipt for the pension paid hereon, and request that he remit same to me at Bartowville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 13

day of Jan 1904.

Mariah Hite [L. S.]
mark

Executed in presence of

W. C. Walton
C. C.

TO THOSE HERETOFORE PAID.

1904.

No. 1319

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mariah Hite
or
Bartow County,
Widow of James Hite
Co. A Regiment 18th Ga

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

FEB 9

* 1904.

AND HANDED TO

67
Geo. W. Bartow, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow COUNTY.

I, Mariah Hite of Bartowville Ga hereby authorize

to receive and receipt for the pension paid hereon, and request that he remit same to me at Bartowville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 29

day of Jan 1905.

Mariah Hite [L. S.]
mark

Executed in presence of

W. C. Walton

TO THOSE HERETOFORE PAID.

1905.

No. 165

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mariah Hite
or
Bartow County,
Widow of James Hite
Co. A Regiment 18th Ga

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

FEB 7

* 1905.

AND HANDED TO

69

Geo. W. Bartow, State Printer, Atlanta.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Barlow

PERSONALLY COMES MRS.

Manah Hite

who, being sworn says on oath, that she is a bona fide resident of said County of Barlow State of Georgia, and that she has resided in said State continuously ever since the year of age now 76. That she is the Widow of James Hite who was a soldier in Company 18 of the 90 Regiment of GA

Volunteers, that he enlisted in said regiment on or about the month of May 1862, and served in the Army up to in Jan 1862. That he lost his life on the day of June 1862 (State here

particulars of the husband's death, when, where and from what cause.) He died of measles in a hospital in Ashland in Virginia June 18 62

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854

I have been paid a pension as a resident of Barlow County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 18 day of Jan 1904. G.W. Nudricks Ordinary. Manah Hite Post Office Mark

State of Georgia, Barlow County. I, G.W. Nudricks Ordinary of said County, certify that I am well acquainted with Mrs. Manah Hite who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 18 day of Jan 1904.

G.W. Nudricks

Ordinary of Barlow County

Official Seal

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Barlow

PERSONALLY COMES MRS.

Manah Hite

who, being sworn says on oath, that she is a bona fide resident of said County of Barlow State of Georgia, and that she has resided in said State continuously ever since 1842. That she is the Widow of James Hite who was a soldier in Company 18 of the 90 Regiment of GA

Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to May 1st 1862. That he lost his life on the 1st day of May 1862 (State here

particulars of the husband's death, when, where and from what cause.) He died in hospital in Virginia May 1st 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1850

I have been paid a pension as a resident of Barlow County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 29 day of Jan 1905. G.W. Nudricks Ordinary. Manah Hite Post Office Mark

State of Georgia, Barlow County. I, G.W. Nudricks Ordinary of said County, certify that I am well acquainted with Mrs. Manah Hite who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 29 day of Jan 1905.

G.W. Nudricks

Ordinary of Barlow County.

Official Seal

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

I, Manoh Hite hereby authorize
Guthrie of Cartersville Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Adamsville Ga
In Witness Whereof, I have hereunto set my hand and seal, this
day of Jan 1906.

Executed in presence of

G. B. Cloud & P

Manoh Hite [L. S.]
mark

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

I, Manoh Hite hereby authorize
Guthrie of Cartersville Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Cartersville Ga
In Witness Whereof, I have hereunto set my hand and seal, this
day of Jan 1907.

Executed in presence of

Manoh Hite [L. S.]
mark

High Maria
Barlow County
To Those Heretofore Paid.

1906.

No. 721

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. Manoh Hite

OF

Barlow County,

Widow of Manoh Hite

Co. D Regiment 18th

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

JAN 29 1906,

AND HANDED TO

The Pensioner's Name and Post-office to John W. Lindsey, Wash.

High Maria
Barlow Co
To Those Heretofore Paid.

1907.

No. 1060

WIDOW'S PENSION

For year ending Dec. 31, 1907.

PAID TO

Mrs. Manoh Hite

OF

Barlow County,

Widow of Manoh Hite

Co. D Regiment 18th

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 4 1907,

AND HANDED TO

The Pensioner's Name and Post-office to John W. Lindsey, Wash.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Barlow

PERSONALLY COMES Mrs.

Maniah Hite

who, being sworn, says on oath that she is a bona fide resident of said County of Barlow State of Georgia, and that she has resided in said State continuously ever since 10 years of age. That she is the Widow of James Hite who was a soldier in Company A of the 18 Regiment of GA Volunteers, that he enlisted in said regiment on or about the month of June 1861 and served in the Army up to June 1862. That he lost his life on the day of June 1862. (State here particulars of the husband's death, when, where and from what cause.) He died in Ashland Va. in 1862 of measles

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854.

I have been paid a pension as a resident of Barlow County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

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

Maniah Hite
Post Office Ashland

State of Georgia,

County of BarlowI, G. W. Hendricks

Ordinary of said County, certify that I am well acquainted with Mrs. Maniah Hite, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1890.

Given under my official signature and seal, this the 6 day of Jan 1906.

{ Official }
Seal

Ordinary of Barlow County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavits must bear date after January 1st, 1906.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Barlow

PERSONALLY COMES Mrs.

Maniah Hite

who, being sworn says on oath, that she is a bona fide resident of said County of Barlow State of Georgia, and that she has resided in said State continuously ever since 10 years of age. That she is the Widow of James Hite who was a soldier in Company A of the 18 Regiment of GA Volunteers, that he enlisted in said regiment on or about the month of May 1862, and served in the Army up to in June 1862. That he lost his life on the day of June 1862. (State here particulars of the husband's death, when, where and from what cause.) He died at Ashville Va. of measles in June 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854.

I have been paid a pension as a resident of Barlow County, for the year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 18 day of Jan 1907. Ordinary.

Maniah Hite
Post Office Ashland

State of Georgia,

County of BarlowI, G. W. Hendricks

Ordinary of said County, certify that I am well acquainted with Mrs. Maniah Hite, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18.

Given under my official signature and seal, this the 18 day of Jan 1907.

{ Official }
Seal

Ordinary of Barlow County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.

Georgia I. George W. Hudnuck
Ordinary of said County
hereby certify that the within witnesses
to wit. Linford Abernathy, J. P. Cox,
C. C. Hudstetter, Caroline Dunn,
Sarah Hudstetter, D. B. Chandler,
Nancy Dunn are known to me
to be persons of good reputable
character and are worthy of belief
as witnesses.

Given under my hand and seal this the
23rd day of Nov. 1891.

G. W. Hudnuck
Ordinary

Georgia } In person came before
Barrow County } me Linford Abernathy
a resident of said County, who after being
sworn says on oath, that he has known
Maria Hight of said County from her
childhood up till now. He has lived
within 12 miles of said Maria ever since
she was a small child. He knows that
in March 1854 she was married to
James Hight. Her maiden name
was Maria Summy. He went after
Esq. Willis Little to marry the said
James Hight to the said Maria
Summy. Esq. Little married them
at his house. He witnessed the
marriage; that the said James
Hight enlisted in Capt. F. M. Ford's
Company, Company H of the 18th Co
infantry volunteers in March 1862;
that the said James Hight and
Maria Hight lived together openly
as man and wife till James Hight
joined the Army; that the said

Georgia 30 Wadsworths Ordinary
Barren County 3 of said County Certify that
William McRenton and Thomas Clifford
are worthy of belief in any Court
of Justice.

Given under my hand and seal
Office this Nov 24-1891

W. Wadsworth
Ordinary

James Hight never came home
from the war, that the said James
Hight was reported to have died of
Malaria in Virginia; that the said
Maria Hight has lived a widow
ever since the death of her husband
James Hight; that she has never lived
out of ~~her~~ neighborhood since her
husband went to the war in fact
she has lived in this same neighborhood
ever since she was a child.

Witness Wadsworth

Linford Chernuthy
more
Sworn to and Subscribed before me this
November 23rd 1891

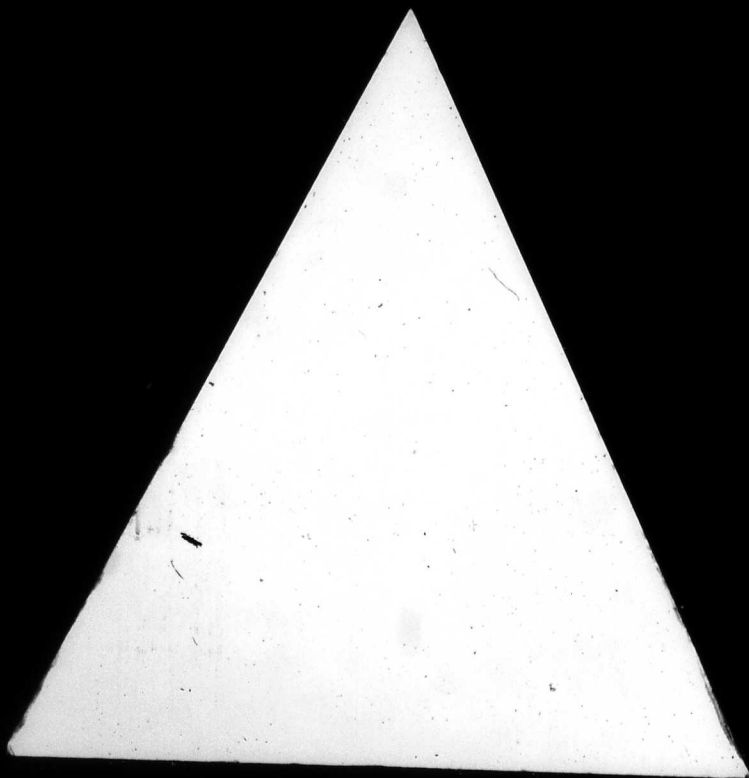
W. Wadsworth
Ordinary, Barren
County, Ga

Georgia } I am sworn before me
 Bartow County } D. B. Chandler, C. B. Shufstetter
 and J. P. Coy. and in oath say that they
 never wrote, or had written, or caused to be
 written, or signed or authorized any one to
 write or sign their names to the letter dated
 at Cleweth Oct. 24, 1891, to the Governor of Ga.
 in reference to Maria Hight's pension claim
 or any thing else and whoever wrote that letter
 did it without our knowledge or consent.
 That letter is false and was written by
 D. B. Chandler and C. B. Shufstetter
 before me Nov. 23rd 1891 } J. P. Coy
 C. W. Shufstetter }
 Ordway Bartow }
 County Georgia }

We further swear that Caroline Damm
 lives in Ga. in Bartow County. She has always
 lived in Ga. except a visit to Indiana &
 two visits to Texas. Her home is with C. B.
 Shufstetter in this County. C. B. Shufstetter
 sworn to and subscribed } J. P. Coy
 before me Nov. 23-1891 }
 C. W. Shufstetter }
 Ordway }

Before me, Nov. 23-1891
Spencer
Ordway

Mark



POWER OF ATTORNEY.

STATE OF GEORGIA.

Barlow County.

Know all Men by these Presents, That I,

E. A. Hill

of

Barlow

County,

do hereby appoint

E. B. Smith

of

Barlow

County,

my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS

WHEREOF, I have hereunto set my hand and seal this

15

day of

1891

Executed in the presence of us:

E. A. Hill
E. B. Smith

DIRECTOR.

If allowed, send amount by

me at

and oblige,

to



Widows' Pension

PAID TO

Mrs. C. Hill

OF

Barlow

COUNTY.

Widow of Adam Hill

\$100.00.

Warrant Issued

1891

AND HANDLED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Bartow County.

Know all Men by these Presents, That I, *C. A. Hill*

of *Bartow*

County, in said State, do hereby appoint *R. B. Smith*

of *Leasville Bartow Co. 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 as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *15* day of *April* 189*0*.

Executed in the presence of us:

W. A. Hill
W. A. Hill

DIRECTIONS.

If allowed, send amount by

me at

, and oblige,



Warrant Issued

\$100.00.

Widow of Adam Hill

County.

W. A. Hill

Widow's Pension

PAID TO

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Bartow*

In person came before me, the undersigned Ordinary in and for the County of *Bartow*

Mrs. *C. A. Hill*

, who being sworn according to law, says under

oath that she is the widow of *Adam Hill*

, who was a soldier in

the service of the Confederate States, and served as a member of Company *D*

, of the

1st Regiment of *Georgia*

Volunteers; that he enlisted in said

service on or about the *10th* day of *October* 186*1*

, and was in the

Confederate Army up to *Oct. 1st* 186*2*

That while in the

Army, he was on the

day of *October* 186*2* (See Note No. 1)

Contracted a disease of the bladder from which he never recovered that he was never well after he was sent home. That he got worse gradually until the 30th day of November 1863 when he died in Cassville Bartow County Georgia.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the *1st* day of *November* 185*8*, and that she has resided in Georgia continuously since the day of *December* 18*47*; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the *15th* day of *April* 189*0*.

W. A. Hill

C. A. Hill

Ordinary.

Note 1. State in blank above the date of the death of the husband, and how, and when, and where he died. And in case his death resulted from disease, state how the disease is *known* positively to have resulted from the service of the soldier in the Army and not from any other cause.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Bartow } In person came before me, the undersigned Ordinary
Brookshire, J. W. Jackson & S. Vinick } and for said County, witnesses
 and Brookshire, J. W. Jackson & S. Vinick } (each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
 Mrs. C. A. Hill } of the County of Bartow
 State of Georgia, is the widow of Adam Hill } who was a soldier in
 Company C of the 1st Regiment of GA Volunteers.
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the 1st day of Oct 1862.

That while in said service, or by reason of said service in the Army, he lost his life as follows: He contracted a disease of the bladder while in camp as a soldier in Savannah GA. he got home in Oct 1862. he was sick when he was sent home. he never got any better but continued to get worse. he lingered an invalid, sick and suffering from said disease till Nov 1863 when he died in Cassville Bartow County, GA. The Mrs. Adam Hill def. as he enlisted in the service that he was a stout healthy man before and when he enlisted. that we know him when he came home from the Army. know him till his death. lived close neighbors to him. we are perfectly satisfied that his death was the result of his service in the Army. Dr. Stady who was his physician and who is dead, said his disease was caused from the service in the Army and that he had a disease of the bladder which began in

We further swear that Mrs. C. A. Hill was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in Bartow County of the State of Georgia.

Sworn to and subscribed before me, this, the

15 day of April 1891.

E. W. Brookshire
 Ordinary.

J. E. Brookshire
J. W. Jackson
S. Vinick

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 3.

STATE OF GEORGIA,

County of Bartow

I, E. W. Brookshire Ordinary

In and for said County of Bartow
 State of Georgia, hereby certify that I am acquainted with Mrs. C. A. Hill
 the applicant for a pension in this case, and know, from my own knowledge, or from positive proof presented to me by reputable witnesses, that she resides in this County, and that she resided in the State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also certify that the witnesses whose testimony she presents to sustain her claim are known to me to be truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 15 day of April 1891.

{ SEAL }

E. W. Brookshire

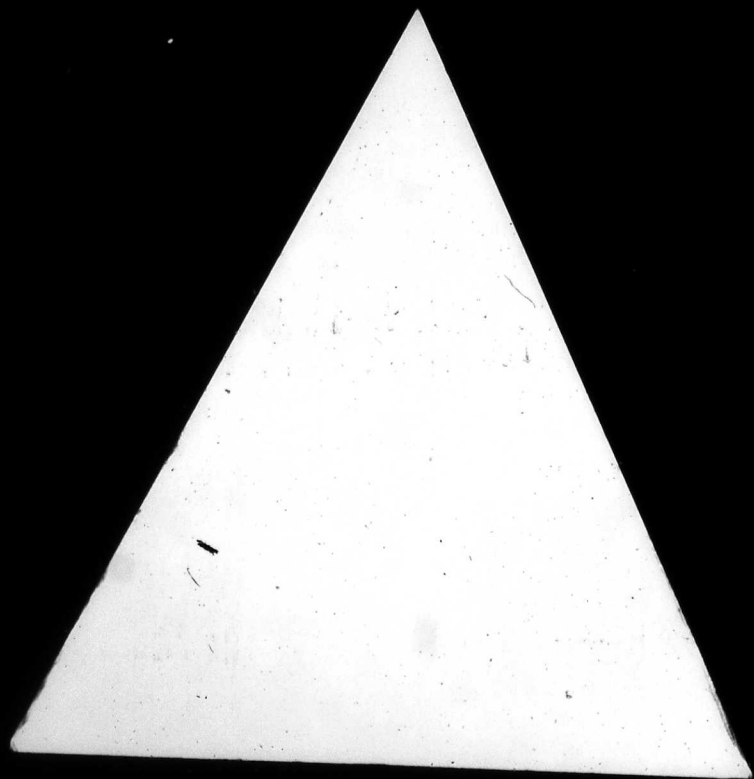
Ordinary.

Form No. 4.

NOTES.

- The pension is only payable to certain classes of widows.
- Those whose husbands were killed in service.
- Those whose husbands died in the army of wounds or disease contracted in the service.
- Those whose husbands went to the army and have never been heard from since the war.
- Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.
- Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.
- No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.
- The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.
- The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.
- Widows who have married since the service of their husbands in the army are not entitled.
- There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.
- If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary and testify. The attestation of a Justice of the Peace or Notary will not answer.
- Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.
- Fill out the "directions" below Power of Attorney, so that your Agent will know where and how to send the money.
- By order of the Governor.

W. H. HARRISON,
 Sec. Ex. Department.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County, }

James H. Hill

of Adams do Barlow will do

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

at Adams do Barlow will do

Witness my hand and seal this 21st day of April 1886.

Received in presence of

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

W. H. Stephens

Hill, James H.
Barlow

No. 99

INDIGENT PENSION

1895.

Name James H. Hill

County Barlow

Ground Ag. Indigent Pension
April 21st 1886

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Ex Dpt 10 July 1895
The proof and not
satisfactory the
will be made
Rich Johnson

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barton County.

I, James H. Hill hereby authorize
G. W. Hendrick of Cartersville Ga

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

at Adrianville Ga by Check

Witness my hand and seal this 27th day of April 1895.

Executed in presence of

W. F. Stephens
C. H. Leungus

James H. Hill
his
mark

Hill, James H.

Cartersville Ga

No. 99

INDIGENT PENSION

1895.

Name James H. Hill

County Barton

Ground G. W. Hendrick
April 27th 1895

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Geo. W. Harrison, State Printer, Atlanta.

Ex. Dep. to Sub. Dep.
The Insp. and
Inspecting it
Min. H. L. L.
Rich. Graham
Sec.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barton County.

Personally came before me Dr. J. H. Bradley and
J. P. Brumley both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully
James H. Hill, applicant for pension under the Act of 1894, and after

such personal examination, say that his precise physical condition is as follows:

Partial Paralysis - Loss of
vision of left eye from Trauma
Hernia of left Side - Inferior
joint age

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

Sworn to and subscribed before me, this
the _____ day of _____ 1895.

J. H. Bradley
J. P. Brumley

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

Ordinary in and for said County, hereby certify that the applicant James W. Hill resides in said County, and was a bona

fide resident of this State on the first day of January, 1894, and that the witness, viz: John P. Davis

Bowdoin W. J. Nelson & J. W. Gray

are of trustworthy character and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions, the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed.

I further certify that the tax digests of Barlow County show that applicant returned for taxation in his name in 1893, _____ dollars

of property, and in 1894, _____ dollars of property.

Witness my hand and seal of office this 2nd day of May 1895.

J. W. Newcomb Ordinary

of Barlow County.

NOTE.

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

Via Floyd County

I John P. Davis Ordinary in and for said County do hereby Certify that J. P. McConnell witness for the within applicant has this day appeared before the undersigned was duly qualified, answered and subscribed the same as witness in my presence and that said J. P. McConnell is of trustworthy character and entitled to full faith and credit Given under my hand and seal of Office This May the fourth 1895, John P. Davis Ordinary.

10. What is the applicant's occupation and physical condition? I do not know state of ge condition for ge green just as with that he has from Jeff Hill for 40 years he was discharge from cantalrat army on his account of maled self cause

11. Is the applicant unable to support himself by labor of any sort, if so, why?

Only know from what other pay Mr. J. P. Hillman pay an oath that he and his wife has separated Jeff Hill for 2 years with out receiving any pay

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

By the Hillman pay

13. What portion of his support for these two years was derived from his own labor or income?

I do not know his support cannot from his pay

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894?

I can't do it
ge green I said are with that he has merrales he is badly railed and the head also merrales
Jeff Hill for 40 years
Jeff Hill in the cantalrat army in the state of Tennessee for 9 months the year of 63 he was available discharge all the account of merrales

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

None

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

J. P. McConnell
John P. Davis, Ordinary

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Bartow County. }

James H. Hill of said State and County, desiring to avail himself of the Pension Act Approved December 15th, 1894, hereby submits his proofs, 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 post office) James H. Hill, Rt. Adams Bartow Co. Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Adamsville Bartow Co. Ga. In Ga. 47 years
3. When and where were you born? March 12, 1839, in Lincoln Co. N.C.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate
5. When and where did you enlist? 1864, 1865 at Calhoun Ga.
6. In what company and regiment did you enlist? Co. L 6th Regt. Ga. Cavalry
7. How long did you remain in that company and regiment? Five months
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
9. For how long a period did you discharge regular military duty? Five months
10. When, where and under what circumstances were you discharged from service? In Nov. at a point about 6 miles south of Sum. River near Blitts Ferry, in account of paralysis
11. What is your present occupation? Nothing at all
12. How much can you earn per annum by your own exertions or labor? Nothing as I am totally unable to pursue any occupation of any kind
13. What has been your occupation since 1865? I did a little Carpenting for about two years immediately after the war. Have not been able to work any since.
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? One hundred dollars. I have no income and am unable to earn any thing by work being totally unable to perform any kind of labor

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Floyd County. }

J. P. McConnell of said State and County, having been presented as a witness in support of the application of James H. Hill for pension under the Act approved December 15th, 1894, 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? J. P. McConnell, Rome, Floyd Co. Ga.
2. Are you acquainted with James H. Hill the applicant, if so how long have you known him? Only knew him during the war
3. Where does he reside, and how long has he been a resident of this State? Adamsville about 40 years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes, I was in same Co.
5. When, where and in what company and regiment did he enlist? Co. L 6th Ga. Cal. Calhoun Ga. Feb. 1863
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? I don't know of my own personal knowledge he was in the Confederate with me Jan 9 months
8. What property, effects or income has the applicant? (Give your means of knowledge.) I don't know
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? I don't know

15. What is your present physical condition and how long have you been in such condition? *I am paralyzed in both legs below my knees and on this account I am physically disabled to get about. I have been in my present condition since 1867 I partially recovered from the stroke I received in the Army 1863. and I was stricken again in 1867. and am still paralyzed and I never expect to be able to get about again, as I am now in my 72nd year*

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

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity, and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *I was paralyzed in both legs below my knees in the fall of 1863 and was on that account discharged from the Army. I partially recovered from this stroke, but was again stricken with paralysis in the fall of 1867 I think it was in September, and since that time I have not been able to labor at any calling*

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

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

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

Bartow County Ga (None)

21. How were you supported during the years 1893 and 1894? *I was supported by Mrs. Porthenia Lanham, my cousin.*

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I do not know what my support cost me. I contributed nothing in any way*

23. What was your employment during 1893 and 1894? What pay did you receive in each year?

Nothing

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

Give age and sex of children and their means of support? My wife is dead. My children do not live near me. Have 2 married daughters in different sections of the County and 2 sons in the west, married. They live far away from me.

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

No

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

No

No

Sworn to and subscribed before me this

27 day of *April* 1895.
G. W. Andrews
of *Bartow* County.

Ordinary

James A. Hill
mark Applicant.

Georgia Bartow County

Personally appeared before
me a Notary Public, in and for said
County, Dr. Joe P. Bowdoin, Col. John W. Gray
and Mr. J. H. Hilburn, of Adamsville, Ga.
who upon oath, says they have known
James H. Hill, of said State & County, for
a number of years and know him to
be totally disabled for any kind of work
on the acct of extreme old age.

We also know that he has no visible
means for a support, he has no income
of any kind and no property of any kind
he has been in this condition for several
years and has been kept up and furnished
a support or living by his friends who
are not his relatives. The said James
H. Hill can hardly get up when he is
down and can hardly walk he has been
in this condition for several years.

Sworn to before me, and subscribed,

this July 15th 1895.

Witness

A. W. Frausto,

C. M. Frausto & A. W.

Joe P. Bowdoin
John W. Gray
J. H. Hilburn

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, J. H. Hill, hereby authorize G. W. Woodall of Adairsville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Adairsville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of January 1897.

Executed in presence of

J. H. Hill
J. H. Hill

[L. S.]

POWER OF ATTORNEY.

State of Georgia,

County. }

I, J. H. Hill, hereby authorize G. W. Woodall of Adairsville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Adairsville Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13 day of July 1898.

Executed in presence of

J. H. Hill
J. H. Hill
R. G. Woodall

[L. S.]

ACT OF 13 DEC. 1896.
(For Those Already Enrolled.)

No. 1709

INDIGENT

Soldier's Pension.

1897.

Name J. H. Hill
County Barrow

2/2 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

G. W. Woodall

SEC. W. HARRISON, STATE PRINTER, ATLANTA.

No data

ACT OF 13 DEC. 1896.
(For Those Already Enrolled.)

No. 2287

INDIGENT

SOLDIER'S PENSION.

1898.

Name J. H. Hill
County Barrow

WARRANT ISSUED

1/25 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

G. W. Woodall

SEC. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears J N Hill of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 10th day of June 1844; that he is 24 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 11 months in Company L, of 6th Regiment of Co Cavalry; that his physical condition is as follows: utterly worn out from rheumatism all age.

that his property consists of the following items Nothing

of the value of Nothing Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Barlow county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, 28 day of July 1897. J N Hill Ordinary.

STATE OF GEORGIA,

Barlow County.

I, G W Dunderick Ordinary of said County, do certify that I am well acquainted with J N Hill 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 28 day of July 1897.



Ordinary Barlow County.

Note.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears J N Hill of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 10th day of June 1844; that he is 75 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 11 months in Company L, of 6th Regiment of Co Cavalry; that his physical condition is as follows: Paralyzed and helpless.

that his property consists of the following items none

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Barlow county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, 18 day of July 1898. J N Hill Ordinary.

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this 18 day of July 1898.



Ordinary Barlow County.

Note.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bolton County.

I, J. H. Hill, hereby authorize
G. W. Henderson of Bolton Co

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

J. H. Hill at Adamsville Ga
by Mail

Witness my hand and seal this 7 day of Jan 1899.

Executed in presence of

J. A. Brown } J. H. Hill (s.)
mark

Hill, J. H.
Bolton County

CODE REG. 1264

(For Those Already Enrolled.)

No. 3531

INDIGENT

SOLDIER'S PENSION,

1899.

Name J. H. Hill
County Bolton

WARRANT ISSUED

430 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

G. W. Henderson

Gen. W. Harrison, State Printer, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears J. H. Hill of Bartow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1 day of Jan 1888; that he is 70 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 11 Months in Company 2, of 6th Regiment of Geo. Cavalry; that his physical condition is as follows: Painful + general aching debility

that his property consists of the following items None whatever

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Bartow county been allowed a pension for the year 1898

Sworn to and subscribed before me, this, the 9 day of Jan 1899, J. H. Hill Minx
J. A. Parker Jr. Ordinary.

State of Georgia,

Bartow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with J. H. Hill 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 24 day of Jan 1899.



NOTARY PUBLIC

G. W. Hendricks
Ordinary Bartow County.

NOTE.—The blank spaces must be filled.

NOTE.—A Affidavit should not be attested before January 1st, 1899.

NAME, Hill, James H

WHEN AND WHERE BORN? Nov. 26, 1825 - Lincoln Co., N. C.

ENLISTED WHEN AND WHERE? Feb. 1863 - Calhoun, Ga.

COMPANY AND REGIMENT? Co I 6th Regt. Ga. Cavalry

NAME OF CAPTAIN AND COLONEL?

WOUNDED? In Nov., 1863- at Blithes' Ferry, Tenn., suffered stroke of paralysis - - discharged on account of this.

CAPTURED, WHEN AND WHERE?

RELEASED,

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, J P McConnell

No data

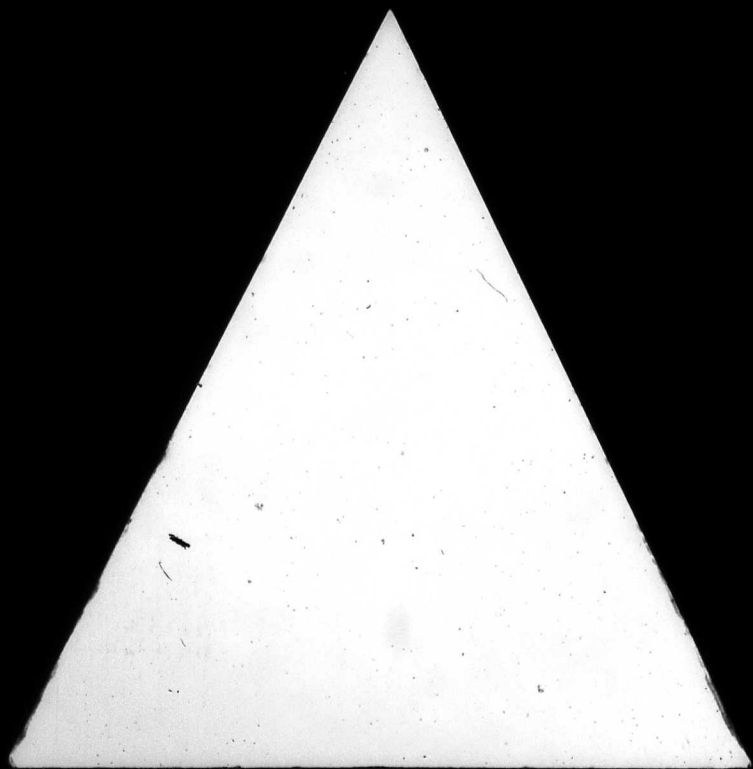
P.O.

1896

COUNTY.

Bartow

mh



POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

of Atlanta Ga my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 1st day of March 1898.

Executed in the presence of us

G W Hendricks
Whitney Barlow

DIRECTIONS.

Send money to me as follows, by check in care of G W Hendricks to Barlowville Ga P. O. Barlow County, Georgia.

William X Hill
mark

Hill, William
Barlow G.
(For Those Already Enrolled.)

No. 3064

Soldier's Pension.

1897.

Name William Hill
County Barlow
Disability chronic cough, asthma

Amount, \$ 50.
3/5 1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HAND TO

McIntire

No data.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, Wm Hill hereby authorize G W 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 31st day of January 1898.

Executed in presence of

J R Anderson
J A Aubrey
Danweaver

Wm Hill
mark

Hill, William
Barlow G.

(For Those Already Enrolled.)

No. 2400

INVALID

SOLDIER'S PENSION.

1898.

Name Wm Hill
County Barlow
Disability Wound arm
Amount, \$ 50.00

2/7 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HAND TO

W H

W. H. HARRISON, SECRETARY EXECUTIVE DEPARTMENT.

No data.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Barlow County, }

PERSONALLY appears William Hill 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~~ for forty years; 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 9, of 18th Regiment of Ga. Volunteers Wofford's Brigade; that whilst engaged in such military service at the battle of Red Bank in the State of Virginia on the 12 day of Oct, 1864, he was wounded as follows: shot out the elbow joint of the left arm, rendering arm useless

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

fifty dollars, for the year 1896 paid William Hill Sworn to and subscribed before me, this, 14 day of Dec, 1894, G.W. Hendricks Ordinary mark

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

STATE OF GEORGIA, }

Barlow County, }

I, G.W. Hendricks Ordinary of said County, do certify that I am well acquainted with William Hill 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 4 day of March, 1894



G.W. Hendricks Ordinary Barlow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Barlow County, }

PERSONALLY appears Wm Hill of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1856; 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 9, of 18th Regiment of Ga. Volunteers Wofford's Brigade; that whilst engaged in such military service in the State of Virg, on the 12 day of October, 1864, he was wounded, injured or diseased as follows:

shot through left arm, elbow joint & nage, left arm. Died in battle of Red Bank in Virg Oct-12 1864

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 paid Wm Hill Sworn to and subscribed before me, this, 31 day of January, 1898, G.W. Hendricks Ordinary mark

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

STATE OF GEORGIA, }

Barlow County, }

I, G.W. Hendricks Ordinary of said County, do certify that I am well acquainted with Wm Hill 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 31 day of January, 1898.



G.W. Hendricks Ordinary Barlow County.



COURT OF ORDINARY.

BARTOW COUNTY.

G. W. HENDRICKS, Ordinary.

Cartersville, Ga.,

1897

Dear Judge:
Inclosed you will find application of Will Hill invalid pensioner who has been drawing a pension for several years as a citizen of Cherokee County. Please send his check as soon as you conveniently can.

Very truly,
G. W. Hendricks

POWER OF ATTORNEY.

STATE OF GEORGIA,

Waynes County.

I, Sam Hill hereby authorize Gust H. Kendrick of Cartersville to receive and receipt for the pension paid hereon and request that he remit same to me by Stiterson at Cartersville.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 20 day of January, 1890. Sam Hill [L. S.]

Executed in presence of

John H. Cook

(For These Already Enrolled.)

No. 2227

INVALID

SOLDIER'S PENSION.

1899.

Name Will Hill
County Bartow
Disability
Amount, \$ 50 00 2/16 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

G. W. Hendricks

GEO. W. HARGISS, STATE PRINTER, ATLANTA.

Mo date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Dartow County.

Personally appears

Wm Hill

of

Dartow

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 _____ 40 years; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company E, of 12th Regiment of Ga Volunteers, Jeffers's Brigade; that whilst engaged in such military service in the State of Ga, on the 12 day of Oct 1864, he was wounded, injured or diseased as follows:

Was hit with piece of shell on left arm at elbow and the elbow joint was taken out.

Deponent makes application for the pension to which he is entitled for the year ending October 28th 1890. I have heretofore under said law as a resident of Dartow County been allowed an invalid pension of \$500 Dollars, for the year 1890.

Sworn to and subscribed before me, this, the

20 day of Jan

1890.

POST OFFICE

Dartow

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 Wm Hill 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.

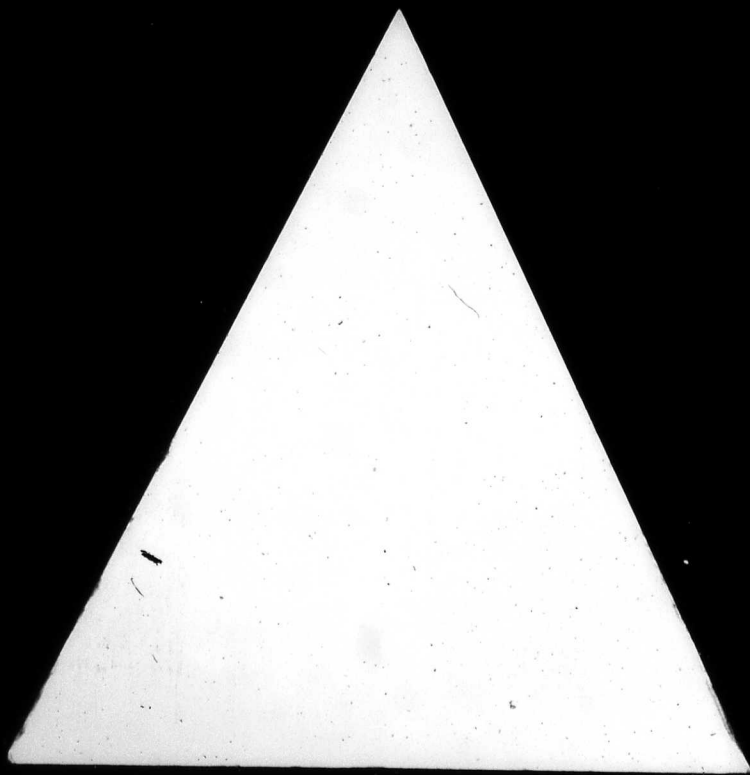
Given under my official signature and seal, this 24

day of January 1890.

G W Hendricks

Ordinary Barlow County.





Hite, Malinda
1178 Bartow
189

**APPLICATION FOR PENSION
DUE DECEASED SOLDIER**

UNDER ACT 1891.

— BY —

Mrs. M. Hili
Widow of M. Hili
County Bartow

Approved and Paid

Apr 29 1891

Richard Johnson,
Sec. Executive Department.

APPLICATIONS FOR PENSIONS DUE DECEASED SOLDIERS.

Under Act Approved October 9, 1891.

STATE OF GEORGIA,

COUNTY OF Barlow

Personally appears before me Mrs. Malinda Hite
of said County of Barlow State of Georgia, who, being duly
sworn, says on oath that she is the widow of Wm Hite

who was a disabled Confederate soldier, and whose name had been duly enrolled as entitled to a pension
of fifty Dollars annually from
the State of Georgia. That said Wm Hite

died on the 9th day of November 1900, in
Barlow County and that at his death, his right to said pension for
the year ending October 26, 1899 had accrued, but had not been paid to him for the said pension year.

Applicant, as his widow, applies for the amount which would have been paid him had he lived to this time.

Sworn to and subscribed before me, this 6th day of Feb, 1901 } Malinda Hite
G.W. Andricks Ordinary. mark

If allowed, I authorize G.W. Andricks

to receive and receipt for the amount.

Attest G.W. Andricks Ord Malinda Hite
Malinda Hite mark
Subscribed and sworn to before me and certified as next of kin for any dependent minor children of the deceased soldier who
disappeared, by altering the same to suit the facts.

STATE OF GEORGIA,

COUNTY OF Barlow

I, G.W. Andricks, Ordinary of said County, do certify

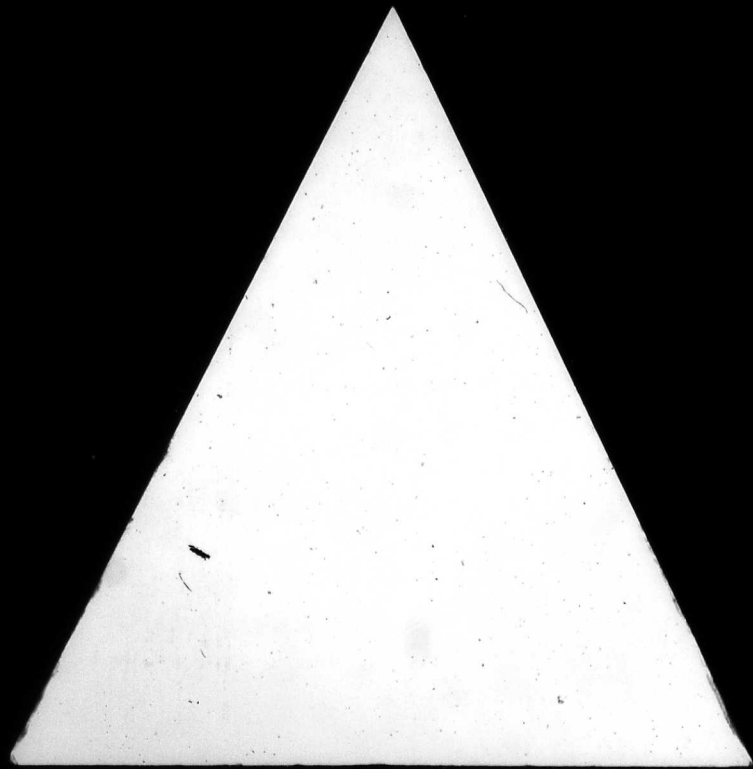
that I am personally acquainted with Mrs. Malinda Hite

that I know personally, or from sworn testimony of witnesses before me, that she is the widow of
Wm Hite, a deceased Confederate soldier, who has been allowed
a pension under the law on account of disability proven, and that at the date of his death his right to a
pension had accrued but had not been paid for the current pension year.

Given under my official signature and seal, this 6th day of
February 1901

SEAL

G.W. Andricks
Ordinary.



NOTES.

In order to avoid unnecessary delay 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 Government touching the payment 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 in the application, and followed by a plain statement of facts showing the extent of the disability. If applicant is disabled by disease, the description of the disease should be given, tracing the history of the disease should be given, tracing the disability to its source, and showing that the applicant is unable to perform the duties of his position.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and permanently useless.
3. There is no qualification to the law, that an arm is "substantially useless for ordinary pursuits of life, etc." purposes be "substantially and essentially useless." Reference to the arm or leg, but the limb must for all practical purposes be a wounded leg; it would seem to be a fair construction of the Act and the law that the applicant should not only show that the injury is such as to require the constant use of crutch or stick, but that the arm or leg is rendered substantially and permanently useless.
4. If papers are returned by the medical authorities as "not disabled," the applicant must show that the arm or leg has been rendered substantially and permanently useless.
5. If papers are returned by the medical authorities as "not disabled," the applicant must show that the arm or leg has been rendered substantially and permanently useless.

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

W. H. Williams
May be certified
but must be not
satisfactory.
W. H. Williams
 No. 1848 *Barrows*

APPLICATION FOR ALLOWANCE

FOR
Disability from Boy's wounds
 Applicant, *William H. Williams*
 County *Barrows*
 Amount *50*
 Date of Warrant *April 9/1889*
 Entered on record
April 9 1889
 C. H. H.
 SECRETARY EXECUTIVE DEPARTMENT.

W. H. Williams

NOTES.

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

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

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

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

4. If 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.

APPLICATION FOR ALLOWANCE

Disability from Body Wounds
Applicant, William Hite
County, Bartow
Amount, 50
Date of Warrant, April 9
Entered on record, April 9
1889
SECRETARY SELECTIVE DEPARTMENT

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears William Hite 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 birth day of

1838; 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 H, of 18th Regiment of Georgia Volunteers Shoos's Brigade; that whilst engaged in such military service, at the battle of Lawson's farm in the State of Virginia, on the 27 day of June, 1862, he was wounded as follows:

shot with musket ball striking below & near the left nipple, ramming around the body, and wound breaks out and discharges matter very often and from which he still suffers. He was also wounded in the left hip, breaking the bone, making the left leg, one and a half inches shorter than the right, producing effects which wounds he is unable to completely get from the ordinary means of treatment.

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

Sworn to and subscribed before me, this the

4 day of March, 1889, William Hite or Wm. H. Hite
Wm. H. Hite
Notary Public for Georgia

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,

Bartow County.

PERSONALLY came before me A. M. Ford of the county of Bartow State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company H, of Eighth Regiment of Georgia Volunteers, and that deponent knows William Hite, 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 William Hite

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

Sworn to and subscribed before me, this 4 day of March, 1889, A. M. Ford
A. M. Ford
Notary Public for Georgia

If the affidavit of such an officer is not obtainable, the following affidavit of three responsible citizens should be furnished:

STATE OF GEORGIA,

County, }

PERSONALLY came

citizens of

county, in said State,

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

and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a bona fide citizen of this State, and resides in _____ county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this

day of

1889

NOTE.—Above affidavit must be made by three citizens of the county of applicant's residence.

STATE OF GEORGIA,

County, }

PERSONALLY comes before me

Ordinary of said county,

J. M. Young and *J. H. Mayfield*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *William Hite*, and after such

examination say that the applicant has been injured as follows: *was shot in the left thigh with a Minie Ball entering near the joint and is still in the thigh causing it to persist any so he is not able to work and was wounded in the right side with a Minie Ball passing in and out and near the back which renders him infirm and unable to do manual labor.*

Sworn to and subscribed before me, this

day of

March

1889

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,

County, }

I, _____

Ordinary of said county,

do certify that I am well acquainted with *William Hite* 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 *F. M. Dunham* before whom the foregoing affidavits were made and power of attorney was signed, is a *Col. Superior Superior Court* of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *4* day of *March*, 1889*W. H. Hite*Ordinary *Bartow* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

Know all Men by these Presents, That I, _____

*William Hite*of *Bartow*

county, in said State, do hereby appoint *Hon. N. A. Wright* of *Albany 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 *4*

day of

March

1889

William Hite (L. S.)

Executed in the presence of us:

Frank P. Dunham
F. M. Dunham
Ed. B.

Sent to Carters
Ball Ga. by Express
and oblige
William Hite

STATE OF GEORGIA,

Barlow County.

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

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

Given under my official signature and seal, this 6 day of July, 1890.

Wm. H. H. H.

Ordinary Barlow County.

Hite, William
Barlow Co.
1890.

No. 298
APPLICATION FOR ALLOWANCE.
FOR THE YEAR ENDING MARCH 31, 1891.

Wm. H. H. H.
Applicant, William Hite
County, Barlow
Amount, 50
Date of warrant, July 6 1890

Entered on record
July 6 1890
W. H. H.
RECORDING CLERK

WARRANT ISSUED TO
Wm. H. H.

No additional data

STATE OF GEORGIA,

Barlow County.

I, Wm. H. H. H. Ordinary of said County, do certify that I am well acquainted with William Hite 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 July, 1891.

Wm. H. H. H.

Ordinary Barlow County.

Hite, William
Barlow Co.
1891.

No. 291
APPLICATION FOR ALLOWANCE.
FOR THE YEAR ENDING MARCH 31, 1891.

Wm. H. H.
Applicant, William Hite
County, Barlow
Amount, Forty Dollars
Date of Warrant, July 13.

Entered on record
July 13. 1891
W. H. H.
RECORDING CLERK

WARRANT ISSUED TO
Wm. H. H.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears William Hite 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 3rd day of March 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 N, of 18th Regiment of 1st Volunteers Hood's Brigade; that whilst engaged in such military service, at the battle of Fredericksburg in the State of Virginia, on the day of Aug 1862, he was wounded as follows:

He was shot with a minnie ball in the left hip joint the result of which rendered the left leg four inches shorter than the other. The hip joint is dislocated and the leg jerks away. He was also shot in the right breast which would settle him matter and that he is entirely incompetent to do manual labor.

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 \$5.00 dollars.

Sworn to and subscribed before me, this 11th day of July 1890.

Wm. H. Hite
Wm. H. Hite
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, William Hite of Bartow County, State of Georgia, do hereby appoint Sam. H. Hite 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 6 day of July 1890.

Executed in the presence of us:

J. G. Bell
Ordinary

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears William Hite 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 contiguously ever since the 3rd day of March 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 N, of 18th Regiment of 1st Volunteers Hood's Brigade; that whilst engaged in such military service at the battle of Fredericksburg in the State of Virginia, on the day of Aug 1862, he was wounded as follows:

Shot through the left hip with a ball which wound rendered the left leg substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of \$5.00 dollars, for 1889 & 1890.

Sworn to and subscribed before me, this 12 day of July 1891.

Wm. H. Hite
Wm. H. Hite
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, William Hite of Bartow County, State of Georgia, do hereby appoint Sam. H. Hite 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 12 day of July 1891.

Executed in the presence of us:

J. G. Bell
Ordinary

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

STATE OF GEORGIA,

Barlow County.

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

do certify that I am well acquainted with William Hite 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 3 day of March 1892.

G. W. Harrington

Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

Know all Men by these Presents, That William Hite of Barlow County, State of Georgia, do hereby appoint

of Barlow County, my true and lawful attorney in fact for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 16 day of March 1892.

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

W. F. Harrington
G. W. Harrington
DIRECTOR.

Send money to me as follows, by _____ to _____ P. O.

STATE OF GEORGIA

County, Georgia.

Hite, William
Barlow Co.
No. 1393

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name William Hite

County Barlow

Disability Dr. Leg

Amount \$35 00

Entered on record March 7 1892.

W. H. HARRINGTON,
Secretary of Executive Department.

AGENT.

W. H. Hite

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

Hite, William
Barlow Co.

1893

Application for Allowances

No. 98

For the Year Ending October 31, 1892.

Applicant William Hite

County Barlow

Amount 35 00

Date of Warrant 3/7

Entered on record March 7 1893.

W. H. Hite

W. H. Hite

W. H. Hite

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

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County. }
 PERSONALLY appears William Hite
 of Barlow County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously since the 13 day of March 1868; 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 H, of 18th Regiment of 1st Volunteers Harts's Brigade; that whilst engaged in such military service at the battle of Shallowford in the State of Virginia, on the day of June 1862, he was wounded as follows:

He lost his left hip with a minor ball which rendered his left leg substantially and essentially useless.

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

Twenty Dollars for several years

Sworn to and subscribed before me this the 16 day of March 1893.

W. H. Hite
 G. W. Hendricks 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,

Barlow County. }

Know all Men by these Presents, That I,

William Hite
 of Barlow County, in said State, do hereby appoint

W. H. Hite 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 16 day of March 1893.

Executed in the presence of us:

W. H. Hite
 G. W. Hendricks
 Ordinary.

Send money to me as follows, by

to P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County. }

PERSONALLY appears William Hite 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 13 day of March 1868; 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 H, of 18th Regiment of 1st Volunteers Harts's Brigade; that whilst engaged in such military service at the battle of Shallowford in the State of Virginia, on the day of June 1862, he was wounded as follows:

He lost his left hip with a minor ball which rendered his left leg substantially and essentially useless.

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

Twenty Dollars for 1889-90-91-92

Sworn to and subscribed before me, this, the 16 day of March 1893.

W. H. Hite
 G. W. Hendricks Ordinary.

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

STATE OF GEORGIA,

Barlow County. }

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with William Hite 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 Justice of the Peace 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.

G. W. Hendricks
 Ordinary.

Barlow County.

STATE OF GEORGIA
 POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow COUNTY.

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *6th* day of *March* 1894.

Executed in the presence of us

J. P. Smith
W. H. Harrison

DIRECTIONS.

Send money to me as follows, by

to _____ P. O.
County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

KNOW ALL MEN BY THESE PRESENTS, That I

County, State of Georgia, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *6th* day of *March* 1894.

Executed in presence of us

R. S. Anderson
W. H. Harrison

DIRECTIONS.

Send money to me as follows, by

to _____ P. O.
County, Georgia.

Nite, W. M.
Bartow Co.

(For Those Already Enrolled.)

No. *93*

Soldier's Pension.

1894.

Name *W. M. Nite*
County *Barlow*
Disability *Wounded leg*
Amount, \$ *20 00*

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDLED TO

J. M. Nite

Geo. W. Harrison, State Printer, Atlanta.

Nite, William
Bartow Co.

(For Those Already Enrolled.)

No. *963*

SOLDIER'S PENSION.

1895.

Name *William Nite*
County *Barlow*
Disability *Wounded leg*
Amount, \$ *20 00*

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

W. M. Nite

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Bartow County.

PERSONALLY appears Wm. Hite 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 23 day of March 1888; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States and served as a private in Company H, of 18th Regiment of Volunteers, Good's Brigade; that whilst engaged in such military service at the battle of Gaines Farm in the State of Virginia, on the day of June 1862, he was wounded as follows: Gun shot wound in the left hip which renders his leg substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of \$14 dollars, for the year 1893.

Sworn to and subscribed before me, this, the 6th day of March 1894, } Wm. Hite his }
G. W. Newdick Ordinary } mark

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

STATE OF GEORGIA.

Bartow County.

I, G. W. Newdick Ordinary of said County, do certify that I am well acquainted with Wm. Hite 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 March 1894.



G. W. Newdick
Ordinary Bartow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears William Hite 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 23 day of March 1888; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States and served as a private in Company H, of 18th Regiment of Volunteers, Good's Brigade; that whilst engaged in such military service at the battle of Gaines Farm in the State of Virginia, on the day of June 1862, he was wounded as follows: Gun shot wound in left hip rendering left leg substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of \$14 dollars, for the year 1894.

Sworn to and subscribed before me, this, the 6th day of March 1895, } William Hite }
G. W. Newdick Ordinary } mark

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

STATE OF GEORGIA,

Bartow County.

I, G. W. Newdick Ordinary of said County, do certify that I am well acquainted with William Hite 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 2d day of Feb 1895.



G. W. Newdick
Ordinary Bartow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County,

Personally appears Wm Hite 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 28th day of March, 1868; 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 H, of 18th Regiment of Ga Volunteers, Hood's Brigade; that whilst engaged in such military service in the State of Virginia, on the _____ day of June, 1862, he was wounded, injured or diseased as follows:
I shot in the left hip with minnie ball rendering left leg substantially and essentially useless

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Barlow county been allowed a pension of sixty dollars, for the year 1890.

Sworn to and subscribed before me, this, 16th day of July, 1896.
G W Hendricks Ord mark

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

STATE OF GEORGIA,

Barlow County,

I, G W Hendricks Ordinary of said County, do certify that I am well acquainted with Wm Hite 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 8th day of July, 1896.



G W Hendricks
Ordinary Barlow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County,

Personally appears Wm Hite 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 28th day of March, 1868; 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 H, of 18th Regiment of Ga Volunteers, Hood's Brigade; that whilst engaged in such military service in the State of Virginia, on the _____ day of June, 1862, he was wounded, injured or diseased as follows:
I shot in the left hip in battle of Camus Farm in the State of Virginia which wound practically disabled me from leg

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 sixty Dollars, for the year 1896.

Sworn to and subscribed before me, this, 16th day of July, 1897.
G W Hendricks Ord mark

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

STATE OF GEORGIA,

Barlow County,

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

Given under my official signature and seal, this 16th day of July, 1897.



G W Hendricks
Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

Wm Hite
Hendricks hereby authorize G.W.
of Cartersville Ga

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

at Cartersville Ga by chuck

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th

day of January 1898. Wm Hite [L. S.]

Executed in presence of

Wm Hite
J A Jenkins

ACT OF 21 OCT. 186.
(For Those Already Enrolled.)

No. 2401

INVALID

SOLDIER'S PENSION.

1898.

Name Wm Hite
County Barlow
Disability Wound leg
Amount, \$ 50.00

2/17 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Wm Hite

W. H. HARRISON, STATE PRINTER, ATLANTA.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

Wm Hite
Hendricks hereby authorize G.W.
of Cartersville Ga

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

at Cartersville Ga by Cartersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 7th

day of Feb 1898. Wm Hite [L. S.]

Executed in presence of

Wm Hite

ACT OF 21 OCT. 186.
(For Those Already Enrolled.)

No. 2238

INVALID

SOLDIER'S PENSION.

1898.

Name Wm Hite
County Barlow
Disability Wound leg
Amount, \$ 50.00

2/17 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Wm Hite

W. H. HARRISON, STATE PRINTER, ATLANTA.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears Wm Hite 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 March 1888; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 18th Regiment of Co Volunteers, Hindo's Brigade; that whilst engaged in such military service in the State of Vir, on the day of June 1862, he was wounded, injured or diseased as follows:

Gun shot in left hip, battle of Gaines farm, totally disabling left leg

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 five Dollars, for the year 1897.

Sworn to and subscribed before me, this, 10th day of July 1898. POST-OFFICE mark
G W Hendricks Ordway

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 Wm Hite the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 10th day of July 1898.

G W Hendricks
Ordinary Barlow County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears Wm Hite 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 March 1888; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 18th Regiment of Co Volunteers, Hindo's Brigade; that whilst engaged in such military service in the State of Virginia, on the 26 day of June 1862, he was wounded, injured or diseased as follows:

Gun shot wound in left hip, battle of Gaines farm, totally disabling left leg

Deponent 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 five Dollars, for the year 1897.

Sworn to and subscribed before me, this, 10th day of July 1898. POST-OFFICE mark
G W Hendricks Ordway

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 Wm Hite the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 10th day of July 1898.

G W Hendricks
Ordinary Barlow County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, Wm. Hite hereby authorize

of

Bartowville Ga

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

by

Chas. Hite

at

Bartowville Ga relaying to 20th for Mr.

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

day of July 1900.

[L. s.]

Executed in presence of

J. L. Burroughs

COURT SECTION 1888

(For Those Already Enrolled.)

No. 277

INVALID

SOLDIER'S PENSION.

1900.

Name

Wm. Hite

County

Bartow

Disability

Invalid

Amount, \$

5.00

Warrant issued Jan 13 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Spending

Gen. W. Harrison, State Printer, Atlanta.

No data

Audited April 10 1889:

COMPTROLLER GENERAL

Voucher No 1848

Amount, \$ 50.

Paid to William Hite

For Disability

from body money
April 9 1889.

Included in Warrant No
issued to Treasurer.

1889.

WARRANT CLERK

W. J. Campbell, State Printer, Constitution & Co.,

W. A. W.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears William Hite 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 County, and has resided therein continuously ever since the 25 day of March 1888; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 18th Regiment of Georgia Volunteers, Hood's Brigade; that whilst engaged in such military service in the State of Georgia, on the 26 day of March 1864, he was wounded, injured or diseased as follows:

Wounded by a musket ball in left hip
Battle of Gaines Farm, which
renders the leg substantially and
permanently disabled.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Georgia County been allowed an invalid pension of Five Dollars, for the year 1899.

Sworn to and subscribed before me, this, 11th day of May 1900. POST OFFICE Barrow

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

STATE OF GEORGIA,

Bartow County.

I, Wm H Hite Ordinary of said County, do certify that I am well acquainted with William Hite 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 11th day of May 1900.

Ordinary Wm H Hite County.



No. 1848

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. April 9 1889.

Mr. William Hite of the County of Bartow having filed his application in the Executive

Department for an allowance under the Act approved October 24, 1887, as amended by Act Dec. 24, 1883, and the same having been allowed for Disability from body wounds He is entitled to receive the sum of Five 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 the receipt on this voucher, and return same to Executive Department for warrant.

By the Governor.

W H Harrison

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Five 00 Dollars,
per above voucher, this 9 of April 1889.
Wm Hite
Wm H Hite

Barton

Maimed Soldiers.

Voucher No. 398

Amount \$50⁰⁰

Paid to William Hite

For Disabled leg

July 6. 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

A. M. Fauto

Hite, William

Barton

1891.

Maimed Soldiers.

Voucher No. 791

Amount \$50⁰⁰

Paid to William Hite

For Leg disabled

July 12 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

A. M. Fauto

No. 398

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga., Feb'y 6 1890.

Mr.

William Nite

of the County

of Bartow

having filed his application in the Executive

Department for an allowance under the Act approved October 24, 1887, as amended by Act,

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

Disabled Leg

He is entitled to receive the sum of-

Fifty & 00/100

Dollars

for such disability, the same being the amount due for the year ending October 24, 1890

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

By the Governor,

W. N. Harrison

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

per above voucher, this

6

of Feb'y

Dollars,

1890

William Nite, by his
Atty in fact A. M. Fouts.

1891.

No. 791

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb'y 13 1891.

Mr.

William Nite

of the County

of Bartow

having filed his application in the Executive

Department for an allowance under the Act approved October 24, 1887, as amended by Acts

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

Leg disabled

He is entitled to receive the sum of-

Fifty

Dollars

for such disability, the same being the amount due for the year ending October 24, 1891.

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

By the Governor,

W. N. Harrison

SECY EXECUTIVE DEPARTMENT.

\$

50 00

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

Fifty

Dollars,

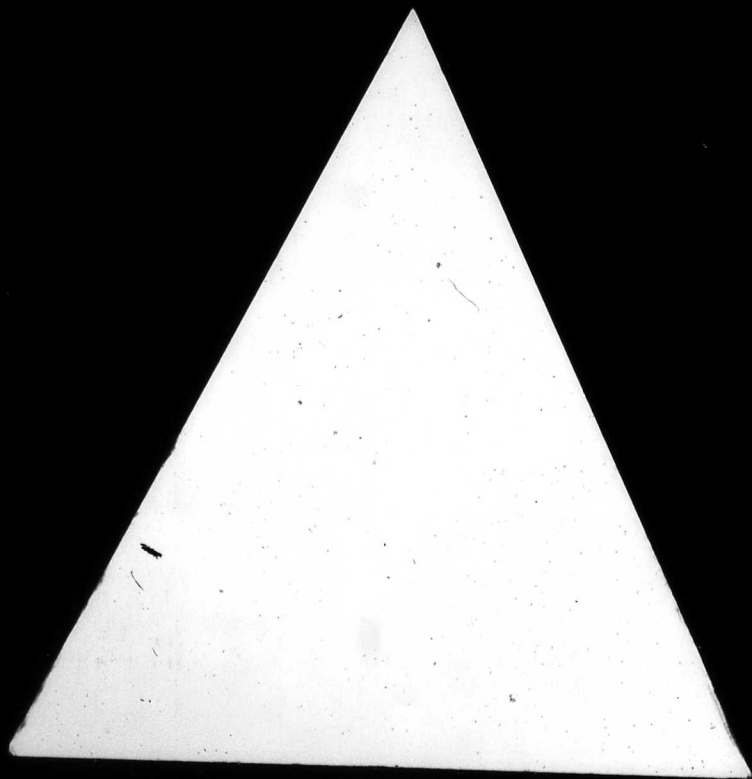
per above voucher, this

13

of Feb'y

1891.

William Nite
By A. M. Fouts



POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY,

hereby authorize

Wm. J. Stecker of *Rockdale Ga*

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

me at *Concord Ga*

by *Wm*

Witness my hand and seal, this *8th* day of *Jan* 1906.

Executed in the presence of *James J. Stecker* [L.S.]

James J. Stecker

Cover Section 1554.
(FOR THOSE ALREADY ENROLLED.)

No. *2206*
Wm. J. Stecker Co. *1905*

INDIGENT
SOLDIER'S PENSION
1906.

Name *J. J. Nolder*
County *Barlow*
Co. *B-36* Regiment *Ga*

WARRANT ISSUED

JAN 29 1906.

JOHN W. LINDSEY.

Commissioner of Pensions.

WARRANT HANDED TO

The FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MAN.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow COUNTY, }
J. J. Holder hereby authorize
Geo. Lindsey of Cartersville Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Cartersville Ga
by CK

WITNESS my hand and seal, this 8th day of Jan 1906.

Executed in the presence of

James J. Holder [L. S.]

J. J. Bray m7477

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow COUNTY, }
J. J. Holder hereby authorize
Geo. Lindsey of Cartersville Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Cartersville Ga
by CK

WITNESS my hand and seal, this 11th day of Jan 1907.

J. J. Holder [L. S.]

Executed in presence of

Cons. Service 1894.

(FOR THOSE ALREADY ENROLLED.)

No. 2206 1906

INDIGENT
SOLDIER'S PENSION
1906.

Name J. J. Holder
County Bartow
Co. B-36 Regiment Ga

WARRANT ISSUED

JAN 29 1906

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Tel. Pensioner's Pension and Pensions Co., 100 N. Main St., St. Louis, Mo.

Ind

Cons. Service 1894.

(FOR THOSE ALREADY ENROLLED)

No. 3568

INDIGENT
SOLDIER'S PENSION
1907.

Name J. J. Holder
County Bartow
Co. B-36 Regiment Ga

WARRANT ISSUED

FEB 4 1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Tel. Pensioner's Pension and Pensions Co., 100 N. Main St., St. Louis, Mo.

Ind

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Bartow County.

Personally appears J. J. Holden of Bartow

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 10 day of Feb, 1886; that he is 70 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company B, of 26th Regiment of Georgia; that his physical condition is as follows: Broken down generally from disease and old age

that his property consists of the following items:

of the value of \$300 Dollars. I am now earning by my labor, \$30 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 8th day of Jan, 1906.

James J. Holden
Ordinary.

State of Georgia,

Bartow County.

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

do certify that I am well acquainted with J. J. Holden 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 8th day of Jan, 1906.

G. W. Hendricks
Ordinary Bartow County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Bartow County.

Personally appears J. J. Holden of Bartow

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 10 day of Feb, 1886; that he is 71 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company B, of 26th Regiment of Georgia; that his physical condition is as follows: He is merely able to get about. Has rheumatism

that his property consists of the following items:

of the value of \$300 Dollars. I am now earning by my labor, \$30 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 Bartow County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this 8th day of Jan, 1907.

J. J. Holden
Ordinary.

State of Georgia,

Bartow County.

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

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

Given under my official signature and seal, this 4th day of Jan, 1907.

G. W. Hendricks
Ordinary Bartow County.

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



1912
65
1847

Holmes, Virginia
Barton Co.
OK 1910

+ No. _____

**Confederate
Soldier's Application.**
UNDER ACT 1910.

County Barton
Name Unish Holden
Company "E"
Regiment 8th Va. Bat.

Approved _____
ENTERED ROSTER OFFICE

ER 36

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, ALBANY.

11/4/11 11/9-1911

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Carleton County.

Uniah Holden of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office) Uniah Holden, Ocasville, Ga.
2. How long and since when have you been a continuous resident citizen of this State? I have lived in Ga. since birth age 65
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) 1861 in Union Co. Ga. in Co. E. 8th Ga. Inf.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Left early in 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 26, 1865. Cummins, Mo.
7. Were you actually present with your Command when it was surrendered or discharged? No
8. If you were not actually present, state specifically and clearly where you were I was on detail scouting
- a. Where was your Command when you left it? near fountain, Ga.
- b. When did you leave the Command? Early part of 1865
- c. For what cause did you leave? sent out on detail service
- d. By whose authority did you leave? Captain Penn
- e. For how long was your leave granted? in what way? No limited leave
- f. Why did you not return to your Command after leave expired? I was cut off
- g. In what way were you prevented? by being in way of the enemy
- h. What effort did you make to return? did all I could
- i. Were you captured during the war? No
- 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 cash value on the 4 Nov. 1908? (Make list by items and value.) One Horse 100 & Car - 25-00 - Household 25-00
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? No
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.) One Horse 100 - Car 25 - House hold - 25-00
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 cause it was not allowed? No

Sworn to and subscribed before me, this the

20th day of Apr. 1910 Uniah Holden
Uniah Holden Ordinary,
 of Carleton County.

Soldier's Application.

UNDER ACT 1910.

Confederate

No.

Uniah Holden
Carleton Co.
GA.

County

Carleton

Name

Uniah Holden

Company

"E"

Regiment

8th Ga. Inf.

Approved

ENTERED ROSTER OFFICE

J. W. LINDSEY,

Commissioner of Pensions

CHAS. F. STEIN, SR., CLERK, ATLANTA.

11/9/11

11/9-1911

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

County.

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

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov. 1908? (State it fully by items.)

2. When and to whom was it sold or given to?

3. What was the price paid or stated to be paid?

4. What relation is the party to applicant?

5. What disposition was made of the proceeds of the sale?

6. Was the disposition of this property made in good faith and full value?

or was it made to obtain a pension?

Sworn to and subscribed before me, this }
day of _____ 1911.

Ordinary,

of _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

County.

I, _____ Ordinary of said County, certify that I know the applicant _____ for Pension is the person he represents himself to be and resides in said County. That I also know _____ the witness swearing to the service and _____ who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of _____ shows that _____ and wife value for tax is in 1908 \$ 102. for 1909 \$ 107. for 1910 \$ 114.5.

Sworn under my hand and official seal of office this _____ day of _____ 1911.

Ordinary,

of _____ 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.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

County.

_____ of said State and County is hereby presented as a witness in support of the application of _____ 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? _____

_____ Co. _____ R.R.D. #1

2. How long and since when have you known _____ the applicant?

_____ About 49 years, since 1861.

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? _____

_____ In Bartow Co. Ga. all his life

4. When, where and in what Company and Regiment did _____ enlist during war from 1861 to 1865? (Give date and place), _____

_____ 1861, Gordon Co. Campy "B" 84th Regt

5. How did you obtain your information of this Service? _____

_____ Company

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) _____

_____ From Bull Run in 1861 till early in 1865

7. When and where was his Command surrendered or discharged (give date and place) _____

_____ April 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 do not know

10. Was the applicant personally present with his Command at surrender? _____

_____ I do not know

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

_____ He was detained as a deserter for what cause did he leave? _____

_____ By whose authority did he leave? _____

_____ How do you know

all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)

_____ I do not know

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? _____

_____ I do not know

15. Was applicant captured as a prisoner? _____

_____ If so, when and where? _____

_____ In what prison was he held? _____

_____ and when released? _____

Sworn to and subscribed before me, this } _____

_____ day of _____ 1911

_____ Ordinary,

of _____ County.

I do certify that _____ is a citizen of Gordon Co. Ga. that he was taken by one _____ and his statements are entitled to full faith and credit

_____ M.R. Rawlin, Ordinary

NAME **Holden, Uriah** YEAR **1912** COUNTY **Bartow**

WHEN AND WHERE BORN? **Resident of Georgia, 65 years.**

ENLISTED WHEN AND WHERE? **1861, - Gordon County, Georgia.**

RANK

COMPANY AND REGIMENT? **Co. H. 5th. Ga. Batta.**

NAME OF CAPTAIN AND COLONEL?

CUMMED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? **Command surrendered: April 26, 1865, - Greensboro, North Carolina.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **On detail, scouting. Left Command early part of 1865, near Greensboro, Ga. Sent out on detail service, authority of Capt Fern. - No limited time, detailed to learn the situation. Unable to return to his Command by the enemy.**

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. **Ephraim Moss, --- Same Company ---**
W.F. Mathews, --- Co. D. 6th. Ga. Cavalry, ---

No data.

mb.

I hereby authorize and constitute _____ of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1921, through my deceased husband, _____ Pension Roll and paid from _____ who was on _____ day of _____ 1921. Witness my hand this _____ day of _____ 1921. Attested before me: _____ County for 19, _____

GEORGIA.

County.

Holden, Uriah
Bartow Co. E
1921

1921

Application for Pension Due Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

BY

Mrs. *Elizabeth Holden*

Widow of *Uriah Holden*

of *Bartow* County

Co. _____ Regt. _____

Date of Death *Jan 187* 1921

Approved and ordered paid *12* -

12/12 1921.

J. W. Lindsey
J. W. LINDSEY,

Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval before you pay out the money.

Atlanta Printing Co. Atlanta, Ga.

1 *25* *Revised* *1921*

George Barton County.
 Personally came before me, W. F. Matthews
 of said County, and on oath says he
 was in Co. D, 6th Cavalry in the regular
 Confederate Service, that he was present and
 surrendered under Gen. W. J. Worth in the
 13th day of May 1865; that he personally
 knows that Ulrich Holden of said
 County was a member of Co. D, 8th Ga
 Battalion, and that he the said
 Ulrich was present at the Surrender
 at Appomattox, Va. on May 19th 1865,
 and that the said Ulrich Holden did
 then and there surrender and was
 discharged from the Service; that he
 has personally known the said Ulrich
 Holden all his life and personally
 knows of the above stated facts.
 Sworn to and Subscribed
 before me, Oct. 9th 1911. W. F. Matthews
 J. H. Anderson
 Ordinary, Barton
 County, Ga.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Bartow County

Personally before me comes Mrs. Elizabeth Holden of said County, who
 after being duly sworn, on oath says that she is the widow of Ulrich Holden
 who was duly enrolled as an Infantry Pensioner from the County
 of Bartow and was paid a Pension of One hundred
 Dollars from Bartow County for 1892, and that the said
Holden died in 1891 County on
 the 1st day of Jan, 1921, and at the time of his death a Pension of 105.00
 was due him from Bartow County and unpaid for 1921.
 Applicant further swears that she married the said Ulrich Holden
 on the 10th day of September, 1879, in Appomattox County and
 State of Ga, and resided with him from the date of marriage to his death as his
 lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be
 paid to her.

Sworn to and subscribed before me this 28th day of May, 1921.

J. J. Baker, Ordinary, Mrs. Elizabeth Holden
 (SEAL.) 28th County.

AFFIDAVIT OF WITNESS

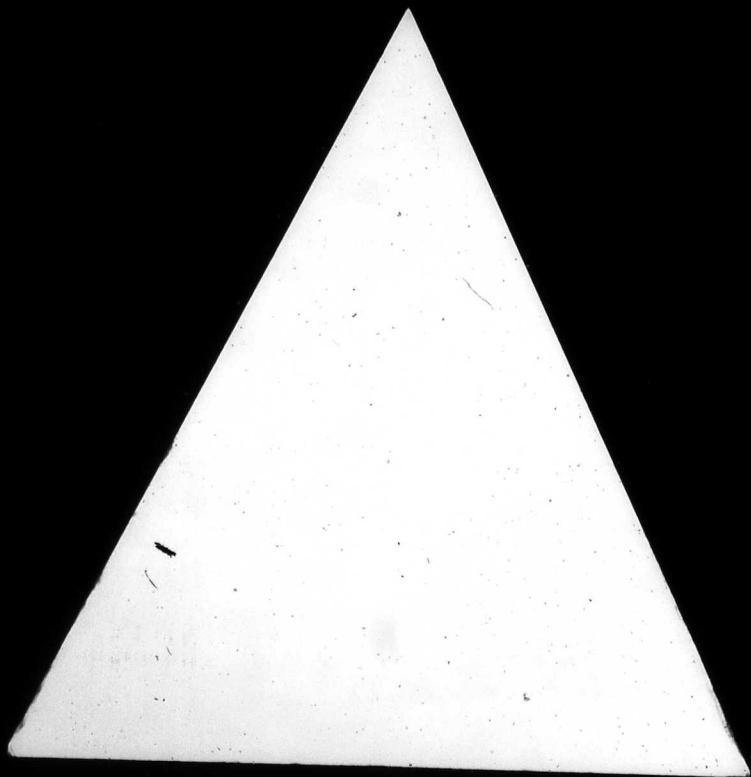
STATE OF GEORGIA, Bartow County

Personally before me comes W. F. Matthews who
 on oath says that he knew Ulrich Holden while in life
 and that he knows Mrs. Elizabeth Holden the
 above applicant; that he knows that the said Ulrich Holden
 and Elizabeth Holden were in due form of law married in the County
 of Bartow in the State of Georgia
 on the 10th day of Sept, 1879, and that they resided together
 as husband and wife from date of marriage to the day of his death on the 1st
Jan, 1921, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 31st day of May, 1921.

W. F. Matthews
Bartow Ordinary, Mrs. Elizabeth Holden
 (SEAL.) County.

Note 1st—This form can be used by guardian or minor children where there is no widow.
 2d—Ordinary must send in all cases certificate of marriage attached hereto, if marriage is not proven by witness.
 3d—This form is for widows of Disabled soldiers who died after October 25th and for widows and dependent children of Service
 soldiers who died after January 1st.
 4th—Ordinary should examine the blank carefully and see that it is fully and correctly completed, and the seals affixed, and that the
 back, when folded, is filled out.
 5th—Pay out no money on this application until it is approved in the Pension Office, and returned to you as your authority to pay.
 6th—Return this application with your final settlement to the Pension Office.



BAD COPY - LIGHT PRINT

House, Dewey
Barlow
No. *1*
Disapproved 9/20/06
INDIGENT PENSION.
190
Name *Dewey House*
County *Barlow*
Co. *A Detach 1st 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.

9/20/06

Dissein of fee
9/20-1906
was not in the
military service of the
Confederate State or
the organized militia
of the state during duty in
Conscript Camp was
not military duty
for which a Pension
is paid
J. W. Lindsey
Comr of Pen

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow

COUNTY.

I, *Dewey House*

Barlow

Justly authorize

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

at *Barlow* to be

Witness my hand and seal, this *11th* day of *Sept* 1906

Dewey House
Barlow

Executed in presence of

[L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barrow COUNTY.

I, Henry House hereby authorize
Gardner Hicks of Cartersville Ga

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

Witness my hand and seal, this 10th day of July 1906

Executed in presence of

Henry House [L.S.]
mark

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb COUNTY.

of said State and County, having been presented
as a witness in support of the application of Henry House for pension
under section 1254, Code, 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? B. G. Greer, Seneca
Cobb County Ga.
2. Are you acquainted with Henry House, the applicant; if so how
long have you known him? Yes, 25 years
3. Where does he reside, and how long and since when has he been a resident of this State?
Cartersville, Barrow Co. Ga. ever since he has lived
4. When, where and in what company and regiment did he enlist, and how do you know?
November 1863, 1st Regt. Randolph's 1st Ga. Co. A. Cavalry, 1st Div. 1st Army
5. Were you a member of the same company and regiment? No, I was member of 1st Army Cavalry
6. How long did he perform regular military duty from Nov 1863 to April 1865
7. When and where was his command surrendered? April 1865 at Macon Ga
8. Were you present when it surrendered? Yes
9. Was applicant present? Yes
10. If he was not present, where was he? He was present

When did he leave his command? May 1865 For what cause?
By what authority he left? No choice How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.)
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?
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?
15. Is the applicant unable to support himself by labor of any sort; if so, why?
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code
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? None
Sworn to and subscribed before me, this 23rd day of July 1906
John G. Greer Ordinary. B. G. Greer Witness.

*Answer given
7/20/06
was not in the
military service of the
Confederate States, but
the organization made
of the army duty in
November 1863 was
not military duty
for which a pension
is paid
B. G. Greer
Clerk of Court*

*House, Henry
Cartersville, Ga.
No.
Disapproved 9/20/06*

INDIGENT PENSION.

190

Name Henry House
County Barrow
Cn. A. Arthur as Regt.
Approved _____ 1906

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

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

9/20/06

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow COUNTY.

Personally came before me On F. R. Colburn and
A. Y. Colburn, both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined carefully

Drewry House, applicant for pension under Section 1254, Code, and after
such personal examination say that his precise physical condition is as follows:

He is quite old and feeble, and
is unable to do but little work
of any kind

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

Sworn to and subscribed before me, this

10th day of July, 1906

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow COUNTY.

I, G. W. Hindrick, Ordinary, in and for said County, hereby certify
that the applicant, Drewry House, resides in said County, and has
been a bona fide resident of this State since the day of , 1890

and that the witnesses, viz: Drs. F. R. Colburn, A. Y. Colburn,
R. M. Postillo, Lewis F. Shaw and John A. Cook
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 Barlow County shows that applicant
returned for taxation in his name in 1901 Dollars of
property, and in 1902 Dollars of property; in 1903 Dollars of property; in 1904 Dollars of property; in 1905 Dollars of property.

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

Witness my hand and seal of office, this 31st day of July, 1906

Ordinary.

of Barlow County.

NOTE.

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

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Barlow COUNTY.

Drewry House of said State and County, desiring
to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, 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.)
Drewry House, Barlowville, Ga.
2. How long and since when have you been a resident of this State? I have lived
in Georgia since I was eleven years old
3. When and where were you born? 1850 in South Carolina
4. When and where, and in what company and regiment did you enlist or serve? In 1863 at
Camp Randolph in Company A,
Detachment Company J
5. How long did you remain in such company and regiment? From Nov 1863 till December
in April 1865
6. When and where was your company and regiment surrendered and discharged? At Macon
Georgia April 1865
7. Were you present with your company and regiment when it was surrendered? Yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause
and by whose authority?
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
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 not
been able to work for several years I am
64 years old past the time to work
13. What property, real and personal, or income, do you possess, and its gross value? none
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? I have not had any
property in more than ten years
15. In what County did you reside during those years, and what property did you then return for taxation?
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? nothing
have supported by my two boys, with whom I live
17. How much did you support cost for each of those years, and what portion did you contribute thereto by your
own labor or income? I do not know
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?
Nothing at all
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-
stead, or other property? Their ages and how employed? Have no property, my
wife has been dead twenty years, my boys have
been in the army and are now in the
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? None

Sworn to and subscribed before me this

10th day of July, 1906

Ordinary.

of Barlow County.

Drewry House
G. W. Hindrick Applicant.

Every question must be answered.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

COUNTY.

Personally came before me

and

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

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

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

Sworn to and subscribed before me, this the

day of

190

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

COUNTY.

I, John Austin Ordinary, in and for said County, hereby certify
that the applicant resides in said County and has

been a bona fide resident of this State since the day of 189
and that the witnesses, viz.: B. F. Guss

are of trustworthy character, and that his 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 County shows that applicant
returned for taxation in his name in 1901 Dollars of
property and in 1902 Dollars of property in 1903

Dollars of property in 1904
Dollars of property in 1905
Dollars of property

In my opinion the foregoing claim is made in good faith

Witness my hand and seal of office, this 23rd day of July 1906
John Austin Ordinary.
of B. F. Guss County.

NOTE.

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

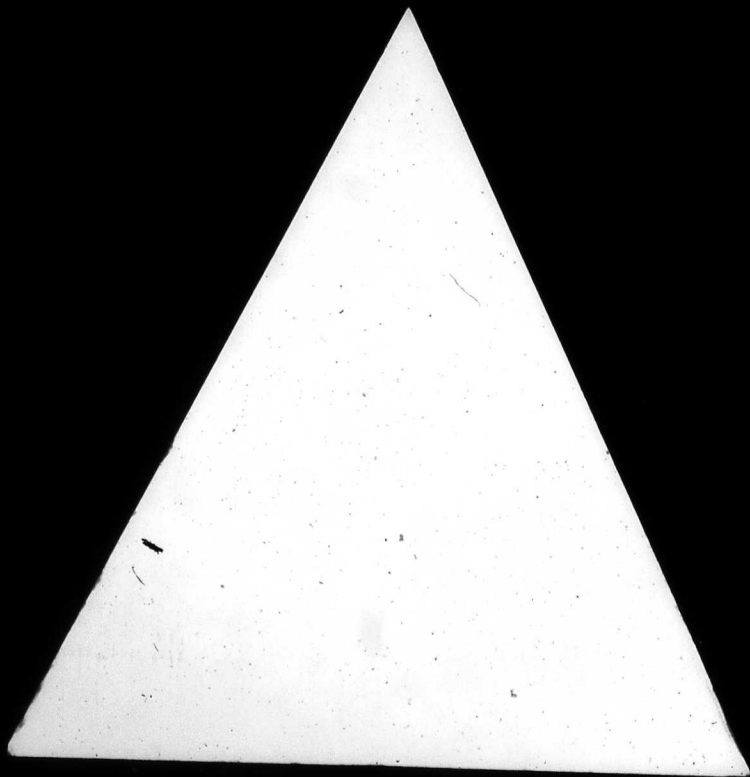
Georgia
Bartow County } Personally came before me
John S. Leak of said county,
known to me to be honorable
and honest, and on oath says, that he has known
Drewy House of said county personally
for fifteen years; that said Drewy House
is an old man, very feeble, has no property
or income from any source and has not had
since I have known him, nor has been able
to support himself; that he has lived with,
and been supported by, his son, R. M.
House; that he is entirely incompetent
and unable to earn any thing at all by his
labor or otherwise, on account of old
age and infirm condition, being I would
say about 80 years of age.

Sworn to and Subscribed }
before me, July 28th 1906 }
G. W. Hendricks
Ordinary Bartow Co., Fla.

Georgia
Bartow County } Personally came before me
Robert M. Pallido of said
county, known to me to be
honorable and honest, and on oath says
that he has known Drewy House of said
county intimately for four years; that the
said Drewy House is a very old and
infirm man; that he has not and has not
had any property or income whatever, is not
and has not been able to earn a support
during this time; that his son R. M. House
the married son of the said Drewy House
has supported and maintained the said
Drewy House during all these years
and is doing now, that applicant has
no interest in the recovery of a pension
by said applicant, the said Drewy House
Sworn to and Subscribed
before me, July 28th 1906 } R. M. Pallido
G. W. Hendricks
Ordinary Bartow Co., Fla.

Levi J. Shaw of said county appears before me
he being a man of exemplary character and
on oath says that he has known Drewy House
of said county, ten years; that said House has
not been able to earn a support for all these
times; that he has not had any property or any
income from any source; that R. M. House has
supported him and is supporting him now; that
applicant has no interest in a recovery of a pension
by applicant.
Sworn to and Subscribed before me } L. J. Shaw
July 28th 1906 }
G. W. Hendricks Ordinary
Bartow Co., Fla.

*you require Summary
Berlin Co. Ga*



POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County, }

Jesse F. Howell hereby authorize
W. H. H. H. H. H. of Camden Ga

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

Camden Ga, Chick

Witness my hand and seal this 26 day of March 1897.

Executed in presence of

C. J. Gude

Jesse F. Howell
mark

INDIGENT PENSION
1897.

Name Jesse F. Howell
County Barlow

Approved 7/1 1897

WARRANT HANDED TO

att

Geo. W. Harrison, State Printer, Atlanta.

2/27/97

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

Jesse F. Howell hereby authorize
G. W. Hendricks of Centerville Ga

to receive and receipt for the pension allowed and request that he remit same to me
at Centerville Ga by Chick.

Witness my hand and seal this 26 day of Nov 1897.

Executed in presence of

C. J. Luke

Jesse F. Howell
mark

INDIGENT PENSION

1897.

Name Jesse F. Howell

County Barlow

Approved

7/11

WARRANT HANDED TO

atg

W. W. ANDERSON, STATE PRINTER, ATLANTA.

8/2/97

Questions for Applicant.

STATE OF GEORGIA.

Barlow County.

Jesse F. Howell of said State and County, desiring to avail himself of the Pension Act approved December 16th, 1894, hereby submits his proofs, 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 post office) Jesse F. Howell, Centerville Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Centerville Ga. In Ga 5 1/2 years
3. When and where were you born? Nov 2, 1850. In Ga
4. When and where and in what company and regiment did you enlist or serve? From Nov. 1863
Regiment of Cavalry Company P. 64th Reg
5. How long did you remain in such company and regiment? From Nov. 1863
til May 12th 1865
6. For how long a period did you discharge regular military duty? About 1 1/2 yrs
7. When, where and under what circumstances were you discharged from service? May 12-1865
Kingston Ga. Close of War
8. What is your present occupation? Farming & stock raising
9. How much can you earn (gross) per annum by your own exertions or labor? \$125.00
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"? Infirmary & 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 been suffering from a wound I received in my side in battle of Kennesaw Ga. I have not been well a day since in account of that wound
13. What property, effects or income do you possess and its gross value? I have no property at all or income
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? Nothing
15. In what County did you reside during those years and what property did you then return for taxation? In Barlow County
16. How were you supported during the years 1895 and 1896? Nothing
my children
17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? I do not know About 15.00
18. What was your employment during 1895 and 1896? What pay did you receive in each year? Nothing except a little feeding money
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Wife and 4 children they work for a support. Live in homestead. They live by their daily labor
20. Are you receiving any pension, if so, what amount and for what disability? NO

Sworn to and subscribed before me this the

15 day of Aug 1897.

G. W. Hendricks

Ordinary.

of Barlow County.

Jesse F. Howell
mark
Applicant.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cherokee County.

A. Beggins, of said State and County, having been presented as a witness in support of the application of Jesse F. Norvell for pension under the Act approved December 15th, 1894, 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? A. Beggins
resides in Cherokee County Ga
2. Are you acquainted with Jesse F. Norvell, the applicant, if so how long have you known him? I have known him since 55 years
3. Where does he reside, and how long has he been a resident of this State? in Barlow Co
La I have known him in this State 55 years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? No. I have never met him except with him

5. When, where and in what company and regiment did he enlist? in 1862 at
Sevier, Tenn. in the 1st Ind. I. C. Co. Calvary

6. Were you a member of the same company and regiment? was of same Regt

7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? to the best of
my knowledge he served from Nov. 1862 to the
December in 1865. he was a good soldier
and before me on 24 Nov 1894 A. Beggins

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

With Law, G. M. Higginson and J. D. Lindley
being sworn say, Jesse F. Norvell has no property or income

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? Said Norvell had no property lost
for a year before last, nor for several years

10. What is the applicant's occupation and physical condition? Occupation has been
farming. He is totally unable to work at
any occupation at the present

11. Is the applicant unable to support himself by labor of any sort if so, why? He is
unable to do so by being afflicted and suffers
so intensely from a long time war

12. How was he supported during the years 1895 and 1896? By his neighbors
and his family

13. What portion of his support for these two years was derived from his own labor or income?

But very little, and up, perhaps 10 or 15

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He suffers from his wound
more than any thing else, and he is a
very badly afflicted and worn out

15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this

the 26 day of Nov 1897.

W. H. Law Witness

G. W. Lindrick Ordinary.

J. D. Lindley

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow County.

Personally came before me, A. J. Clahoun and
J. R. Clahoun, both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully

Jesse F. Norvell, applicant for pension under the Act of 1894, and after

such personal examination say that his precise physical condition is as follows:

Suffer with Rheumatism in the
muscles of the legs. Has had
much of liver & jaundice for the past 3
years, has been in bed for
several months.

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

Sworn to and subscribed before me, this

the 19 day of Feb 1897.

G. W. Lindrick Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

I, G. W. Lindrick, Ordinary in and for said County, hereby certify
that the applicant Jesse F. Norvell resides in said County, and was a bona
fide resident of this State on the first day of January, 1894, and that the witnesses, viz: W. H.
Law, G. M. Higginson and J. D. Lindley
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 heron prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same was signed.

I further certify that the tax digests of Barlow County show that applicant
returned for taxation in his name in 1895, no dollars
of property, and in 1896, no dollars of property.

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

Witness my hand and seal of office this 26 day of Nov 1897.

G. W. Lindrick Ordinary

of Barlow County.

NOTE.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." Additional affidavits may be attached if blank spaces are insufficient.

POWER OF ATTORNEY.

State of Georgia.

Barlow County.

J. F. Howell hereby authorize George W. Hendricks of Cartersville Ga

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

at Cartersville Ga by Chick

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18 day of January 1898.

J. F. Howell [L. S.]
mark

Executed in presence of

L. J. Burroughs
J. A. Jenkins

Howell, J. F.
Cartersville Co.

ACT OF 18 DEC. 1884.
(For Those Already Enrolled.)

No. 2289

INDIGENT

SOLDIER'S PENSION,
1898.

Name J. F. Howell
County Barlow

WARRANT ISSUED

191 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDSD TO

CHICK
SEC. W. HARRISON, STATE PRINTER, ATLANTA

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears J. F. Howell of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the he was one year old 18 ; that he is 57 years old and by occupation a ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 1 1/2 yrs. in Company of 6 th Regiment of Georgia Cavalry; that his physical condition is as follows: suffered from wound received in his side during the war, has lameness, he is very feeble and totally unable to do any amount of labor, any kind that his property consists of the following items none

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Barlow county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the 14 day of January 1898. } J. F. Howell
G. W. Hendricks Ordinary. mark

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this 14 day of January 1898.



Ordinary Barlow County.

NOTE.—The blank spaces must be filled.

NAME **Howell, Jesse F.** YEAR **1897** COUNTY **Bartow**

BORN AND WHERE BORN? **November 4th. 1840 South Carolina.
Resident of Ga. 51 years.**

ENLISTED WHEN AND WHERE? **November 1863 London, Tenn.**

RANK.

COMPANY AND REGIMENT? **Co. L. 6th. Ga. Regt. of Cavalry.**

NAME OF CAPTAIN AND COLONEL?

WOUNDED? **Battle of Resaca, Ga. wounded in side, have not been well
since account of that wound.**

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? **May 12th. 1865 Kingston, Ga. close of war.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. **A.B. Coggins. Same command. No data.**



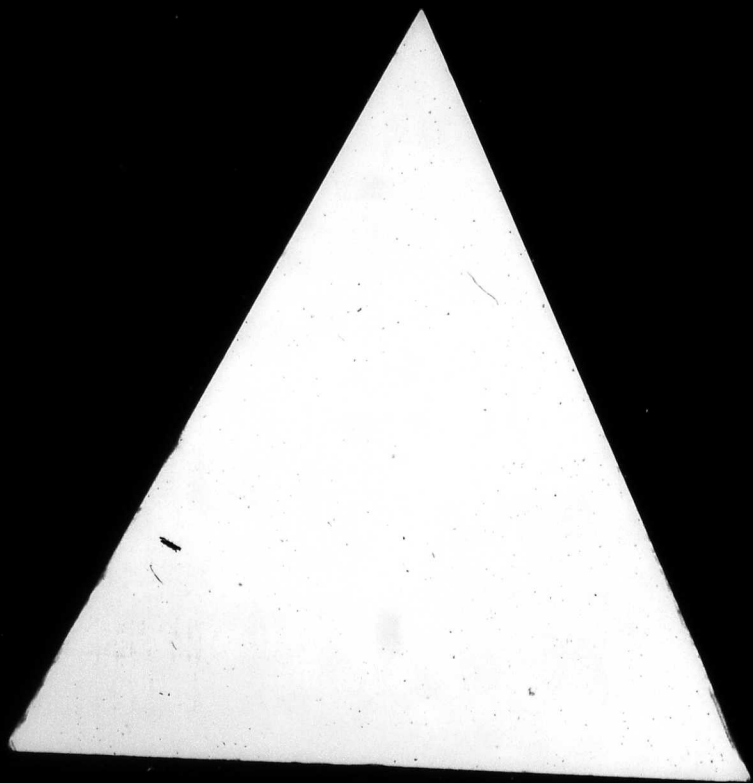
A. C. CONN., ORDINARY.

CHEROKEE COUNTY.

Canton, Ga., March 24 1897

I, A. C. Conn, Ordinary in and for said county
certify that A. B. Coggins is a citizen of said
county of honest worthy character whose statements
is entitled to full faith and credit
witness my hand and official seal
March 24 1897

A. C. Conn, Ord
Cherokee County Ga



Howell, M. S. (son)
Oct 1915
REC'd
Carlson
No. _____

Widow's Application

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

County *Barlow*

Name *M. S. Howell*

Widow of *J. F. Howell*

Approved *L. J. Fu*

J. W. LINDSEY
Commissioner of Pensions

Chas. F. Byrd, State Printer, Atlanta.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Barlow

County.

Personally before me comes J. P. Padgett & J. S. Wheeler who after being sworn on oath says, that they are freeholders of said County, and that they know M. S. Howell of said County and knew her said husband J. F. Howell at his death on the day of Jan 1897 that she and he were in the use, possession and control of the following property at his death to wit: 140 Acres of land on which he has and most of it timber and a life interest of the value of \$500 That she is now in the use, possession and control of the following property to wit: 140 Acres of land on which she has a life interest only. Rent for \$30 a year of the value of \$500. For 14 years last interest

Sworn to and subscribed before me, this the

26 day of Nov 1910.

G. W. Nundrick

Ordinary.

of Barlow County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow

County.

I, G. W. Nundrick Ordinary of said County, do certify, that, I know Mr. M. S. Howell the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 1st March 1878

That I also know Thomas Rindley witness as to marriage and I also know J. P. Padgett & J. S. Wheeler who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Barlow County shows that M. S. Howell returned property to the amount of property for 1908 \$ 450- for 1909 \$ 250 for 1910 \$ 450

Sworn under my hand and official seal of office this 28 day of Nov 1910

(SEAL.)

G. W. Nundrick Ordinary.

Barlow

County.

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

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Barlow

County.

Personally before me comes Mrs. M. S. Howell of said County, who, after being duly sworn, on oath says, that she is the widow of J. F. Howell to whom in the County of Barlow State of Georgia she was married on the 30-4 day of Jan 1897 and that she remained his wife, and resided with him to the date of his death in Jan 1897 and that she has not since his death remarried. At the time of his death he was a resident of Barlow County, in Georgia said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$60- in Barlow County for 1897 per annum on account of being a soldier in Company 6 Ga Regiment 6 Ga (Volunteers of State Militia.)

At the death of J. F. Howell he was in the use and possession of the following property None at

of the cash value of \$

What property of any kind and of any value have you in your use, control and possession now, and

the cash value, (State fully.)

120 Acres land worth \$500-

no Horses and Mules — \$

no Hogs, Cows, etc. — \$

Total Cash value of all property \$

That she is now a bona fide resident citizen of said County of Barlow and she has so continuously resided since day of March 1896

Sworn to and subscribed before me, this the

20th day of Sept 1910 M. S. Howell

G. W. Nundrick Ordinary, mark

of Barlow County.

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

STATE OF GEORGIA,

County

Personally before me come _____ known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. _____ who made the foregoing affidavit, is the lawful widow of _____ who died in _____ County in said State of _____ on _____ day of _____ 19 _____ and that she has not since remarried. That she became the wife of _____ on the _____ day of 18 _____ and that she and he had resided together as man and wife continuously since _____ day of _____ 18 _____ and that the _____ was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the _____

_____ day of _____ 191 _____

_____ Ordinary,

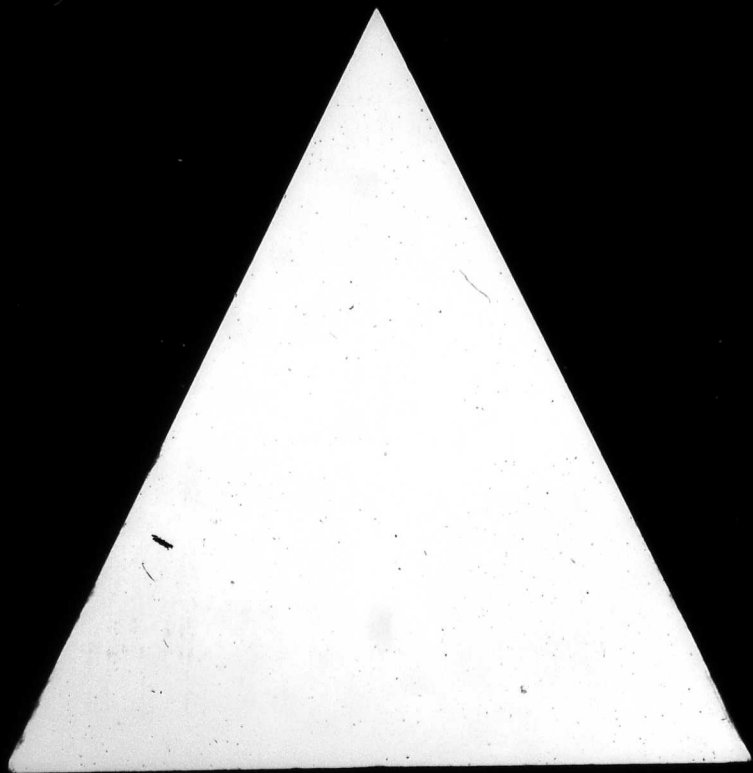
of _____ County.

Georgia. Bartow County.

Personally appeared before me, Thos. Pendley, of
said County, who after being sworn in oath says
that he remembers the time when J. F. Howell
and Miss M. S. Stegall (now Mrs. J. F. Howell)
were married which time, January 30th 1865
in Gilmer County, that he was present
at the marriage at J. F. Howell's ^{at the time} at night
of the day they were married; that she
and J. F. Howell lived together as man
and wife until his death which was
1897 in Bartow County; that she is
now his lawful widow, not having
remarried since the death of her soldier
husband, and that she lives in
Bartow County and has for many
years.

Sworn to and Subscribed
before me, Nov-36th 1910
E. N. DICKS
Ordinary Bartow Co. Ga.

Thos. ^{his} Pendley
mark



Hubbard, J. M. Co. E
Ok Jan 1924
Bartow Co. E

CONFEDERATE SOLDIER'S APPLICATION

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

County Bartow
Name J. M. Hubbard
Company _____
Regiment 32nd Co.
Approved Jan 14, 1924

Only certificate not made

Poor service but
proved by William

C. E. McGREGOR.
Commissioner of Pensions.

10/20/1923

STATE OF GEORGIA

Ordinary's Certificate

I, Bartow COUNTY, Bartow the applicant for pension; that he is the person

he represents himself to be, and that he has been, continuously, a bona fide placid citizen of said
State since January 1st, 1863; that I also know the witness who

swears to the service; that both of them are now residents of said County and weOrdinary sworn by
me before signing the foregoing affidavit, and they are truthful and trustworthy and their
statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 6 day of Jan 1924
(SEAL OF ORDINARY)
Hubbard, J. M. Ordinary
of Bartow County

Instructions:

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 you and the witnesses
asked you, and that you will not be false in your answers."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. The Ordinary of the County in which the applicant or witness resides and
must be certified by each Ordinary.
4. Fill out the back of the application carefully.

APPLICATION FOR PENSION BY A SOLDIER

Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920.

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Barlow

COUNTY.

Personally appears before me, J. M. Hubbard of said State and County, and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post Office) J. M. Hubbard, near Cartersville, Ga. Bartow County
2. How long and since when have you been continuously, a bona fide resident citizen of the State of Georgia? I have lived in Ga. all my life
3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865? Yes, Sep 1861 - Company 6 Army
4. When and where, and in what Company and Regiment did you enlist? (State the arm and class of service, and give name of Colonel and Captain) Co. 6, 1st Regt. 1861-1865
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge.) From the 1st of Sep 1861 to the 1st of May 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 16, 1865 - near Richmond, Va.
7. Were you personally present with your Command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were I was absent in Ga.
- a. Where was your Command when you left it? near Atlanta, Ga.
- b. When did you leave the Command? In April 1865
- c. For what cause did you leave? Went in detail to an inner depot
- d. By whose authority did you leave? Chas. Whinn
- e. For how long was your leave of absence granted? In what way? For 30 days - leave of absence
- f. Why did you not return to your Command after leave expired? and I got there
- g. In what way were you prevented? by the enemy
- h. What effort did you make to return?
- i. Were you captured by the enemy at any time? Yes
- j. If so, when, and where? In what prison were you held and when were you released?
9. Are you drawing a pension of any amount from this State or the United States?
10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was it not allowed?

Sworn to and subscribed before me, this the

19th day of Oct, 1923
J. M. Hubbard Ordinary
Barlow County

(SEAL OF ORDINARY.)

Applicant.

CONFEDERATE SOLDIER'S APPLICATION

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

County Bartow
Name J. M. Hubbard
Company g
Regiment 22nd Ia
Approved Jan 14, 1924
C. E. McRECOR, Commissioner of Pensions
10/30/1923

Ordinary's Certificate

STATE OF GEORGIA,

Bartow COUNTY.

I, J. M. Hubbard, Ordinary of said County, certify that I know J. M. Hubbard the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J. M. Hubbard, the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 6 day of Feb, 1924

(SEAL OF ORDINARY.)

J. M. Hubbard Ordinary
of Barlow County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
4. Fill out the back of the application carefully.

STATE OF GEORGIA.

Ordinary's Certificate

Cherokee COUNTY.

I, Jacob M. May Ordinary of said County, certify that I know the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J. M. Hubbard, the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 20 day of Oct, 1923
(SEAL OF ORDINARY.) Jacob May Ordinary
of Cherokee County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
4. Fill out the back of the application carefully.

Questions of Witness as to Service

STATE OF GEORGIA,

Cherokee COUNTY.

J. M. Hubbard of said State and County is hereby presented as a witness in support of the application of J. M. Hubbard for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? W. M. Cole
Rocky Springs, Ga.
2. How long and since when have you known J. M. Hubbard the applicant?
Since 1863.
3. Where does he now reside, and since when has he been, continuously, a bona fide resident of this State, and how do you know? White, Sw. Dawson County
all his life.
4. When, where and in what Company and Regiment did J. M. Hubbard enlist?
(Give date and place) Sept 8-1864, Cambridge, Va.
Company "D," 32d Sw Reg, Hafford's Brigade.
5. How did you obtain your information of this Service?
He was present at the time.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) from Sept 8-1864 to
May 12-1865.
7. When and where was his Command surrendered or discharged? (Give date and place.)
at Greensborough, N. C.
8. Were you personally present when it was surrendered? No.
9. If not, where were you? at Kingston, Va. and how came you there? On detail.
10. Was the applicant personally present with his Command when it was surrendered? No.
11. If not, where was he? at Kingston, Va. and how came him there?
On detail.
12. When, where and for what cause did he leave his Command? (Give date.)
April 1865 at Atlanta, Va. sent to put in Johnston, Va.
By whose authority did he leave his Command? Capt. Harley
and how long was he granted leave? See defendant's letter. How do you know all that you have stated to be true? If of your own knowledge, state clearly and specifically
I was with him all the time.
13. In what way, if you know of your own knowledge, was he prevented from returning to his Command? (State clearly and specifically.) He had not got through with our work at Greensborough.
14. What effort did he make to return to his Command and how do you know this?

15. Was applicant captured as a prisoner? No if so, when and where?
in what prison was he held? _____ and

Sworn to and subscribed before me, this the
20 day of Oct, 1923
Jacob May Ordinary
of Cherokee County

(SEAL OF ORDINARY.)

W. M. Cole
Witness.

~~Hubbard, deceased~~ Estate of J.M. Hubbard, Deceased.

To services rendered as nurse in last illness for a month or more.

\$20.50.

GEORGIA, BARTOWCOUNTY.

The above and foregoing account is rendered for nursing and constant attention during his last illness of J. M. Hubbard, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me, this 1 day of June, 1929

Ordinary.

OTHER PHONE 144

RESIDENCE PHONES 239-243

Cartersville, Ga., June 1st 9, 1929

J M Hubbard deceased

M.

IN ACCOUNT WITH
JACKSON FURNITURE COMPANY
SUCCESSORS TO G. M. JACKSON & SONS
FURNITURE AND UNDERTAKING
22 WEST MAIN STREET

We Expect Payment in Full Promptly.

Interest 7 per cent Charged After 60 Days

5/16/29	To casket	50.00	
	To Hearse Trip	17.50	
	To Total amount		67.50

Georgia
Bartow County

The above and foregoing account is rendered for funeral expenses of J M Hubbard, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me this 1st day of June, 1929

R. M. Gamis
Ordinary

TERMS:

H. B. BRADFORD, M. D.
Pine Log, Ga.

M.

J. M. Hubbard Estate

White, Ga. - R. 1

May 10 1929 To med serv - \$6.00
" 15 " " " " 6.00
Ginger, Bartow County \$12.00
The above & foregoing account is rendered for services in the last illness of J M Hubbard who died without owning sufficient property to pay this bill
Sworn to & subscribed before me this 1st day of June 1929
H. B. Bradford, M. D.
R. M. Gamis, Ordinary

For Bartow County

192

**Application for Pension
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

R. M. Gamis Ordinary

For J M Hubbard

Date of Death May 16, 1929

Amount \$ 79.50

Approved and ordered paid

Oct 12, 1929

JOHN W. CLARK,

Commissioner of Pensions

Printed May 15, 1930
R. M. Gamis
Ordinary

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

Application for Pension Due to a Deceased Pensioner

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)

(Under Act Approved August 15, 1904)

GEORGIA, Barlow County.

Personally before me, the Ordinary of said County, comes W. J. Bryant

..... of said County, who, after being sworn, on oath says that he knew J. M. Hubbard

..... of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Barlow County, in this State, on the 16th day of May, 1929.

and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

R. M. Gaines Ordinary
Barlow County

(Seal of Ordinary)

W. J. Bryant

CERTIFICATE OF ORDINARY

GEORGIA, Barlow County.

I, R. M. Gaines, Ordinary of said County, do certify that I personally know W. J. Bryant

....., who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew J. M. Hubbard while in life and that this was the same person whose name appears on the Pension Roll of Barlow County, and was paid a Pension of Twenty, (\$ 20.00) Dollars

in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 22d day of May, 1929.

(Seal of Ordinary)

R. M. Gaines Ordinary
Barlow County

INSTRUCTIONS:

1. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.)

"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of, who died without owning sufficient property to pay this bill.

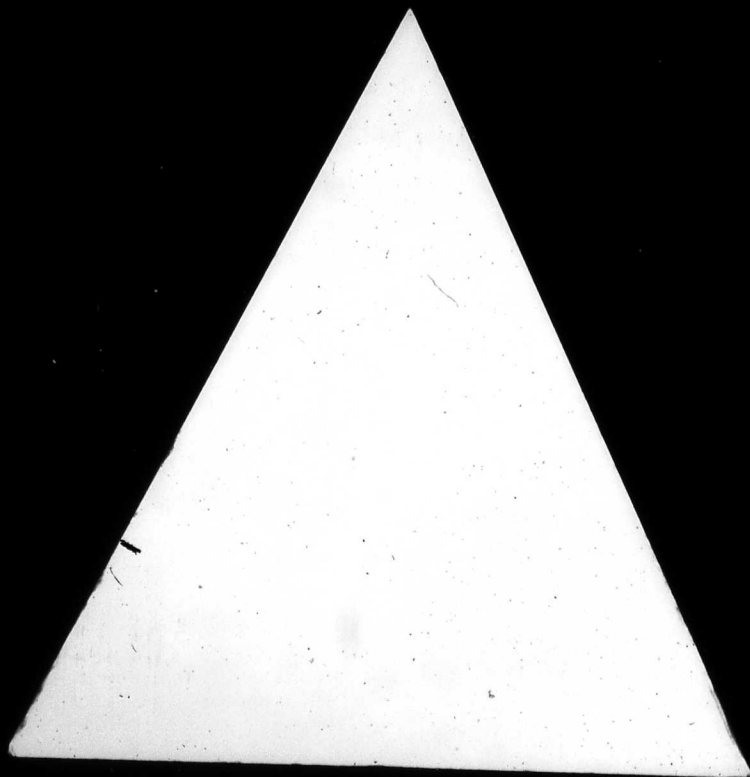
3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.

4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

5th. Return this application, and attached bills, with your final settlement, to the Pension Department.

6th. Ordinary should see that the back of this blank, when folded, is filled out.

6th. Ordinary should see that the back of this blank, when folded, is filled out.



POWER OF ATTORNEY.

STATE OF GEORGIA.

Barlow Co

COUNTY

W. E. Hubbard

of Barlow Co

do hereby and receive for the power thereof and require that the same shall be

Witness my hand and seal, this

day of

June 1898

1898

Executed in presence of

W. E. Hubbard

W. E. Hubbard

Hubbard N. E.
Barlow Co

No. *Barlow Co*

INDIGENT PENSION.

1908

Name *N. E. Hubbard*

County *Barlow*

Co. *B. 3rd Ho. Regt.*

Approved _____ 1908

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/4/08

POWER OF ATTORNEY.

STATE OF GEORGIA.

Barlow COUNTY.
N. E. Hubbard
W. Henderson hereby authorizes
Barlow

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

Witness my hand and seal, this *5* day of *Aug.* 190*8*

Executed in presence of *J. R. Turner* *CR & Hubbard*

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

Barlow COUNTY.
N. E. Hubbard of said State and County, desiring

to avail himself of the Pension Act (Section 1254, Code), hereby exhibits his proofs, 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.)*
N. E. Hubbard, Henderson 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 my first 8 years.*
3. When and where were you born? *1858, Tenn.*
4. When and where and in what company and regiment did you enlist or serve? *March 1862, Big Springs, Ball's Co., Georgia. Served July 13 - 1862 Ga. 1st Regt. Infantry.*
5. How long did you remain in such company and regiment? *Until April 26 - 1862 - the day of the surrender at Vicksburg.*
6. When and where was your company and regiment surrendered and discharged? *April 26 - 1862, near Grantville, N. C.*
7. Were you present with your company and regiment when it was surrendered? *Yes.*
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 present at the surrender, and was in the last battle.*
9. How much can you earn (gross) per annum by your own exertions or labor? *Very little.*
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"? *Infirmary & 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 been age weak and infirm for eight years, from then down from age and in fact I suffer from my wound in the hip, and am unable to hope for recovery.*
13. What property, real and personal, or income do you possess, and its gross value? *I have about fifty dollars personal property.*
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? *The above is all I have owned for many years, never owned any real estate in my life.*
15. In what County did you reside during those years, and what property did you then retain for taxation? *Barlow, Tenn. No property.*
16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *By the labor of myself and two sons.*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I am unable to say.*
18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? *We have lived on the farm, and we say we have no means of support but that the labor of our hands and the labor of our hands.*
19. Have you a family? If so, who composes such family? Give their names of support. Have they a home, stand, or other property? Their ages and how employed? *Yes, and three children, one is a boy, one is a girl, and one is a boy, all are in school.*
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 claim? *None.*

Sworn to and subscribed before me this *5* day of *Aug.* 190*8*.
W. Henderson Ordinary,
of *Barlow* County.
N. E. Hubbard Applicant.

Every Question Must Be Answered.

INDIGENT PENSION.

190*8*

Name *N. E. Hubbard*
County *Barlow*
Co. *B. 13th Ga. Regt.*
Approved *100*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write name of Applicant, Company and Regiment on back as indicated above.
Com. W. Henderson, State Printer, Atlanta, Ga.

9/4/08

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cherokee COUNTY.

N. W. Poot of said State and County, having been presented as a witness in support of the application of N. E. Hubbard 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? N. W. Poot, Cherokee County Ga
2. Are you acquainted with N. E. Hubbard, the applicant; if so, how long have you known him? known him 55 years
3. Where does he reside, and how long and since when has he been a resident of this State? Resides in Bartow Co, Resident of State 55 years
4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted in March 1862, (I was a member of same Co.)
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty? over three years
7. When and where was his command surrendered? Gunsborough Ark. April 26th 1865
8. Were you present when it surrendered? yes
9. Was applicant present? yes
10. If he was not present, where was he? Present
- When did he leave his command? For what cause?
- By what authority he left? I was in service with him How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.) Very small amt. of personal property.
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? About the same as now. Very little. has not disposed of any.
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? has not conveyed away any.
14. What is the applicant's occupation and physical condition? Farming. He is old and infirm.
15. Is the applicant unable to support himself by labor of any sort; if so, why? He is, because of his age and infirmities
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By his own labor and the help of his children
17. What portion of his support for these four years was derived from his own labor or income? Very little.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. By reason of his age, and wounds from the war & from his infirmities
19. Who composes family? What property have they? Children's ages and their earning capacity? His wife & three children, no property, childrens ages from 5-10 & 12 years.
20. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this the

10 day of Aug, 1908

N. J. Webb

Ordinary.

I solemnly swear that N. W. Poot is a citizen of this Co. and is of good moral character, and is worthy of said pension.

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Bartow COUNTY.

Personally came before me F. G. Galbraith and A. G. Lashburn, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully N. E. Hubbard, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He is growing old but feels best. Suffer from imperfect vision caused by trauma above left eye. He is unable to see a support. and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 10 day of Aug, 1908
F. G. Galbraith Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Bartow COUNTY.

I, G. W. H. H. H. Ordinary, in and for said County, hereby certify that the applicant, N. E. Hubbard, resides in said County, and has been a bona fide resident of this State since the 18 day of Aug, 1908, and that the witnesses, viz. F. G. Galbraith, A. G. Lashburn, N. J. Webb, Morrow and W. D. Sanham & C. 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 Bartow County shows that applicant returned for taxation in his name in 1901 Personal effects 137 Dollars of property; in 1902 Personal effects 121 Dollars of property; in 1903 Personal effects 185 Dollars of property; in 1904 Personal effects 115 Dollars of property; in 1905 Personal effects 160 Dollars of property; in 1906 Personal effects 185 Dollars of property.

Has my property from which he can derive any means of support

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

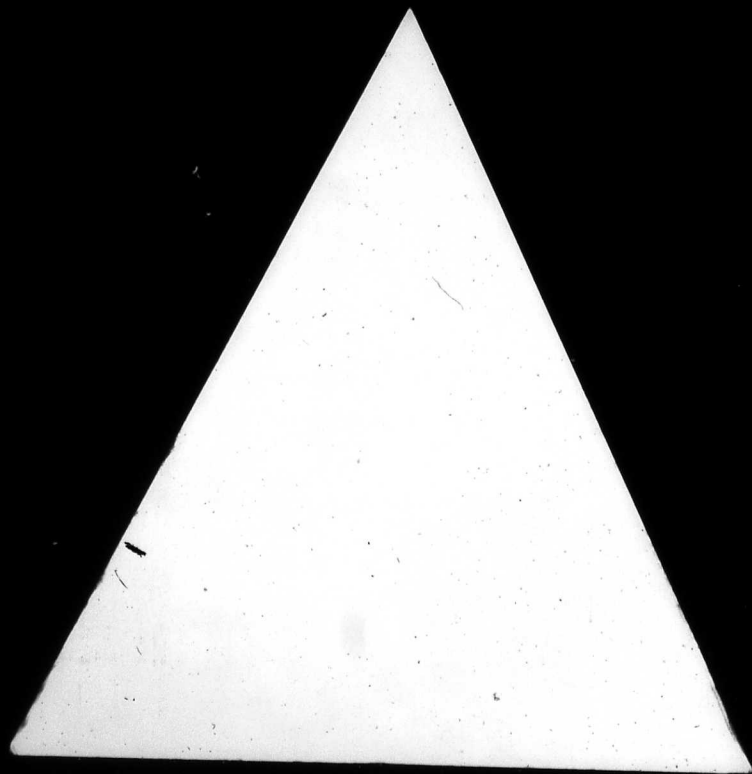
Witness my hand and seal of office, this 11th day of Aug, 1908

G. W. H. H. H. Ordinary.
of Bartow County.

NOTE.

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

Georgia, Barton County
Personally came before me, H. M.
Marion, and H. L. Durham, of said
County, and on oath say that they
are acquainted with W. E. Hubbard
of said County, that they live in same
vicinity of Mr. Hubbard, and that they are
acquainted with the condition of W. E. Hubbard,
as to his physical and financial condition;
that said Hubbard is physically unable
to earn a support on account of his
old age, weak and infirm condition,
that he has no property or income from
any source; that he derives his support
from the labor of his son and what
he himself can do; that affiants have
no interest whatever in a recovery of a
pension by applicant.
Sworn to and subscribed H. M. Marion
before me Aug 5th 1908 J. L. Durham
W. H. Hendricks
Ordinary



POWER OF ATTORNEY.

STATE OF GEORGIA, }

Barlow

County.

Know all Men by these Presents, That I, *Mary Sheffman*

of

Barlow County Ga

County, in said State, do hereby appoint

A. W. Hill

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 as a widow of a Confederate Soldier, 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

28th

day of

April

1891.

Executed in the presence of us:

*J. E. McSwain**W. H. McSwain*

DIRECTOR.

If allowed, send amount by _____ and oblige
me at _____ to _____



Sheffman, Mary
1891.
Barlow
148 No. *3327*
Widows' Pension
— PAID TO —
Mrs. Mary Sheffman
— OF —
Barlow COUNTY.
\$100.00.
Warrant Issued
1891
AND HANDED TO
Geo. W. Harrison, State Printer, Atlanta

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,
Bartow County.

Know all Men by these Presents, That I,

Mary Huffman
of *Bartow County Ga*
County, in said State, do hereby appoint *A. W. Hite*

of *Centerville 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 as a widow of a Confederate Soldier, 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
28th day of *April*, 1891.

Executed in the presence of us:

J. E. Hildman
Wm. H. Hildman

DIRECTIONS.

If allowed, send amount by _____ to
me at _____, and oblige



AND HANDLED TO

Warrant Issued

\$100.00.

Bartow COUNTY.

Mrs. Mary Huffman
or

Widow's Pension

PAID TO

Apr. 30 1891

Bartow

Huffman, Mary
1891.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,

County of *Bartow*

In person came before me, the undersigned Ordinary in and for the County of *Bartow*

Mrs. *Mary Huffman*, who being sworn according to law, says under oath that she is the widow of *David Huffman*, who was a soldier in the service of the Confederate States, and served as a member of Company *I* of the *10th* Regiment of *Ga Infy* Volunteers; that he enlisted in said

service on or about the *2nd* day of *Aug*, 1863, and was in the *Confederate* Army up to *Dec 11th*, 1863. That while in the

Army, he was on the *W. Chant 10th* day of *Nov*, 1863. (See Note No. 1)

He became sick and sent to the hospital at Gal. 10th Ga where he remained till December the 12th 1863, when he was removed to the hospital at Marietta Ga. and he died in the hospital at Marietta Decmbr 14th just four days after he got there.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the *19th* day of *December*, 1844, and that she has resided in Georgia continuously since the _____ day of *January*, 1844; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the *28th* day of *April*, 1891.

Mary Huffman
Wm. H. Hildman
Ordinary. For Oath *Centerville Ga*

NOTE 1. State in blank above the date of the death of the husband, and how, and when, and where he died. And in case his death resulted from disease, state how the disease is known positively to have resulted from the service of the soldier in the Army and not from any other cause.

Affidavit for Three Witnesses.

Form No. 2.

State of Georgia,

County of Bartow } In person came before me, the undersigned Ordinary
Byrd O. J. Wade in and for said County, witnesses J. O. Brock
J. C. Wofford (each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say under oath, that from their own personal knowledge,
 Mrs. Mary Huffman of the County of Bartow
 State of Georgia, is the widow of David Huffman, who was a soldier in
 Company C of the 40 Regiment of Co. 40 Volunteers.
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the 2nd day of Aug 1863. That while in said service, or by
 reason of said service in the Army, he lost his life as follows: He was taken

sick and placed in the hospital in Dol
to Ga. where he remained till Decem
ber 1863, and he was then sent to the
hospital in Manila, So. where he
died in a very few days after he
was placed in the hospital at Manila

Mr. Wofford one of the witnesses
did not see personally as to the
time and place of the death of
Mr. Huffman. He only knows
of his death by being reported dead to
as above stated.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were
We were members of the same
Command

We further swear that Mrs. Mary Huffman was the wife of said
 soldier during the service, and that she has not intermarried since his death, and that she resides in
Bartow County of the State of Georgia.

Sworn to and subscribed before me, this, the
22 day of May 1891. J. O. Brock
C. W. Wofford Wade
 Ordinary. Wade

Note. Witnesses must not testify about things they may believe, but confine their statements to such facts as they per-
 sonally know.
J. C. Wofford

Form No. 3.

Certificate of Ordinary of the County of Applicant's Residence.

State of Georgia,

County of Bartow } C. W. Wofford Ordinary
 in and for said County of Bartow
 State of Georgia, hereby certify that I am acquainted with Mrs. Mary Huffman
 the applicant for a pension in this case, and know, from my own knowledge, or from positive proof
 presented to me by reputable witnesses, that she resides in this County, and that she resided in the
 State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also
 certify that the witnesses whose testimony she presents to sustain her claim are known to me to be
 truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in
 good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
29 day of May 1891.
C. W. Wofford
 Ordinary.

Form No. 4.

NOTES.

- The pension is only payable to certain classes of widows.
- Those whose husbands were killed in service.
- Those whose husbands died in the army of wounds or disease contracted in the service.
- Those whose husbands went to the army and have never been heard from since the war.
- Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.
- Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.
- No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.
- The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.
- The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.
- Widows who have married since the service of their husbands in the army are not entitled.
- There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.
- If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary of their County and testify. The attestation of a Justice of the Peace or Notary will not answer.
- If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.
- Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.
- Fill out the "directions" below Power of Attorney, so that your Agent will know where and how to send the money.
- By order of the Governor.

W. H. HARRISON,
 Sec. Ex. Department.

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Barlow
Charles H. Huddick Ordinary in and for said County of
Barlow State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Huffman the applicant for a pension in this case, and
know, from my own knowledge, (or from positive proof presented to me by reputable witnesses),
that she resides in this County, and that she resided in the State of Georgia on December 23,
1890, and has not lived out of the State since that date. That she is the widow of
Levi Huffman deceased, and as such has heretofore been allowed a
pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
20th day of February 1893.

Charles H. Huddick

Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Barlow County.
KNOW ALL MEN BY THESE PRESENTS, That I, Mary Huffman
of Barlow
County, in said State, do hereby appoint Charles H. Huddick
of my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to
from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi-
davit; 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 20th
day of February 1893.

Executed in the presence of us:

DIRECTIONS.

Send amount by Chas. H. Huddick to
me at Leicesterville and oblige
Mary Huffman

AND HANDLED TO
Chas. H. Huddick
1893

Warrant Issued

—OF—
Barlow COUNTY.

—PAID TO—

for year ending February 15th, 1893.

Widow's Pension.

No. 96

1893.

FOR THOSE HERETOFORE PAID.

Huffman Mary
Barlow Co

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Barlow
Charles H. Huddick Ordinary in and for said County of
Barlow State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Huffman the applicant for a pension in this case, and
know, from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1890, and has not lived out of the State since that date. That she is the
widow of Levi Huffman deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 20th day of February 1894.

Charles H. Huddick

Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Barlow County.
KNOW ALL MEN BY THESE PRESENTS, That I, Mary Huffman
of Barlow
County in said State, do hereby appoint Charles H. Huddick
of my true and lawful attorney in fact, for
me, and in my name, to receive and receipt for whatever amount of money I may be en-
titled to from the State of Georgia as a widow of a Confederate Soldier, 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 20th
day of February 1894.

Executed in the presence of us:

DIRECTIONS.

Send amount by Chas. H. Huddick to
me at Leicesterville and oblige
Mary Huffman

WARRANT ISSUED

AND HANDLED TO

1894.

—OF—
Barlow COUNTY.

—PAID TO—

for year ending February 15th, 1894.

WIDOWS' PENSION,

No. 109

1894.

FOR THOSE HERETOFORE PAID.

Huffman Mary
Barlow Co

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Dartow

Personally comes Mrs.

Mary Huffman

who being sworn, says on oath, that she is a bona fide resident of said County of

Dartow State of Georgia, and that she has resided in said Statecontinuously ever since Jan 1846 That she is the Widow ofDavid Huffman who was a Soldier in CompanyB of the 40 Regiment of GoVolunteers, that he enlisted in said Regiment on or about the month of August1863 and served in the Army up to Dec 4th 1863 That he lost hislife on the 21st day of Dec 1863 (State here

full particulars of the husband's death, when, where and from what cause.) (He

died by Rheumatism contracted from exposure in the service. He died in the Hospital at Marietta Ga Dec 14th 1863.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

3rd day of July 1893.

Ordinary.

Post-office

Mary Huffman

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Dartow

Personally comes Mrs.

Mary Huffman

who being sworn, says on oath, that she is a bona fide resident of said County of

Dartow State of Georgia, and that she has resided in said Statecontinuously ever since January 1846 That she is the Widow ofDavid Huffman who was a Soldier in CompanyB of the 40 Regiment of GAVolunteers, that he enlisted in said Regiment on or about the month of Augst1863 and served in the Army up to Decr 4th 1863 That he lost hislife on the 21st day of Decr 1863 (State here

full particulars of the husband's death, when, where and from what cause.) (He

died Decr 4th 1863 at Marietta Ga in the Hospital of Year

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

26th day of July 1894.

Ordinary.

Post-office

Mary Huffman

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Bartow
G. W. Hendricks Ordinary in and for said County of
Bartow State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Huffman the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1890, and has not lived out of the State since that date. That she is the
widow of David Huffman deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 14th day of July, 1895.
G. W. Hendricks Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Bartow County.
KNOW ALL MEN BY THESE PRESENTS, That I, Mary Huffman
of Bartow County in said State, do hereby appoint G. W. Hendricks
of Bartowville 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 en-
titled to from the State of Georgia as a widow of a Confederate Soldier, 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 Jan 24th 1895. Mary Huffman [L. S.]

Executed in the presence of us:

J. H. Harbrough } mark
John E. Harbrough }
DIRECTIONS.

Send amount by _____ to
me at _____, and oblige

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Bartow
G. W. Hendricks Ordinary in and for said County of
Bartow State of Georgia, hereby certify that I am acquainted with Mrs.
Mary Huffman the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she
resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived
out of the State since that date. That she is the widow of David Huffman
deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
the 14th day of July, 1895.
G. W. Hendricks Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Bartow County.
Mary Huffman 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 at Euclid Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14th
day of July, 1895.

Executed in the presence of

John E. Harbrough
John E. Harbrough
Joseph Loney

Mary Huffman [L. S.]
mark

1896.

No. 2429

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mary Huffman

Bartow County.

David Huffman

WARRANT ISSUED

1896.

AND HANDED TO

at

FOR THOSE HERETOFORE PAID.

1895.

No. 1593

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO

Mary Huffman

Bartow County.

David Huffman

WARRANT ISSUED

1895.

AND HANDED TO

at

FOR THOSE HERETOFORE PAID.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Barlow

Personally Comes Mrs.

Mary Huffman

who being sworn, says on oath, that she is a bona fide resident of said county of Barlow State of Georgia, and that she has resided in said State continuously ever since January 1846 That she is the Widow of David Huffman who was a Soldier in Company I of the 4th Regiment of Co

Volunteers, that he enlisted in said Regiment on or about the month of Aug 1868 and served in the Army up to December 1st 1868 That he lost his life on the Decbr the 4th 1868 (State here full particulars of the husband's death, when, where and from what cause) in the hospital at Marietta Ga of Rheumatism call inflammatory Rheumatism

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 20th day of Jan 1895.

John E. Yarbrough Ordinary.

Post-office Marietta

For Widows Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,
County of Barlow

Personally Comes Mrs.

Mary Huffman

who being sworn, says on oath, that she is a bona fide resident of said county of Barlow State of Georgia, and that she has resided in said State continuously ever since January 1846 That she is the Widow of David Huffman who was a Soldier in Company I of the 4th Regiment of Co Volunteers, that he enlisted in said regiment on or about the month of August 1868 and served in the Army up to December 1868 That he lost his life on the 4th day of December 1868 (State here full particulars of the husband's death, when, where and from what cause.) He died in the hospital at Marietta Ga of Acute rheumatism Dec 4th 1868

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Barlow County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this 17th day of Nov 1896.

John E. Yarbrough Ordinary.

Post-office Marietta

STATE OF GEORGIA, County of Bartow

Ordinary in and for said County of

GW Hendricks
I, Bartow State of Georgia, hereby certify that I am acquainted with Mrs. Mary Huffman the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of David Huffman deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this 8th day of Feb 1897.



GW Hendricks Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, Bartow County.

I, Mary Huffman hereby authorize J. W. Hendricks (ord) of Bartow County to receive and receipt for the pension paid hereon and request that he remit same to Me at Bartowville Ga

IN WITNESS WHEREOF, I have hereto set my hand and seal, this 5th day of February 1897.

Mary Huffman [L. S.]
Mary

Executed in the presence of

B. L. M. Sparbrough
John E. Sparbrough Jr

1897.

No. 2681

WIDOW'S PENSION,

for year ending February 15th, 1897.

Mary Huffman

of Bartow County.

widow of David Huffman

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

AND HANDED TO

1897.

POWER OF ATTORNEY.

State of Georgia, Bartow County.

I, Mary Huffman hereby authorize J. W. Hendricks (ord) of Bartow County to receive and receipt for the pension paid hereon and request that he remit same to Me at Bartowville Ga

IN WITNESS WHEREOF, I have hereto set my hand and seal, this 18th day of January 1898.

Mrs. Mary Huffman [L. S.]
Mary

Executed in the presence of

M. Sparbrough
John E. Sparbrough Jr

For Those Heretofore Paid.

1898.

No. 1074

WIDOW'S PENSION,

For year ending February 15th, 1898.

Mary Huffman

of Bartow County.

widow of David Huffman

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

AND HANDED TO

1898.

Mary

W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Bartow*

Personally Comes Mrs.

Mary Huffman

who, being sworn, says on oath, that she is a bona fide resident of said county of

Bartow

State of Georgia, and that she has resided in said State

continuously ever since *January* 18*76*. That she is the Widow of*David Huffman*

who was a Soldier in Company

I of the *40th* Regiment of *Georgia*Volunteers, that he enlisted in said regiment on or about the month of *August* 18*63*.1863 and served in the Army up to *December* 1863 That he lost hislife on the *4th* day of *December* 1863 (State here

full particulars of the husband's death, when, where and from what cause.)

*He died in Hospital at Marietta Ga
from Exposure and Rheumatism*

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844.

that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of

Bartow

County for the year ending February 15th, 1896, and now apply for

the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

15th day of *February* 1897.*John E. Hartsough Jr* Ordinary.

Post-office

Mrs Mary Huffman
Marietta Ga

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Bartow*

Personally Comes Mrs.

Mary Huffman

who, being sworn, says on oath, that she is a bona fide resident of said county of

Bartow

State of Georgia, and that she has resided in said State

continuously ever since *January* 18*44*. That she is the Widow of*David Huffman*

who was a Soldier in Company

I of the *Forty (40)* Regiment of *Georgia*Volunteers, that he enlisted in said regiment on or about the month of *Aug* 18*63*1863 and served in the Army up to *Dec* 1863 That he lost hislife on the *4th* day of *Dec* 1863 (State here

full particulars of the husband's death, when, where and from what cause.)

*died at Hospital Marietta Ga
from Exposure*Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1844. *Dec 1844*I have been allowed a pension as a resident of *Bartow* County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this

18th day of *January* 1898.*John E. Hartsough Jr* Ordinary.*Mrs Mary Huffman*
Marietta Ga

State of Georgia,

Bartow County.

Ordinary of said County, certify that I am well acquainted

with Mrs. *David Huffman* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that shehas continuously resided in this State since the *19th* day of *Jan* 1890.Given under my official signature and seal this *19th* day of *Jan* 1898.

Official Seal.

Ordinary of *Bartow* County.

POWER OF ATTORNEY.

State of Georgia,

Bartow County.

I, Mary Huffman hereby authorize E. W. Hendricks
Ordinary of Bartow

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

me at Bartonsville Ga

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

25 day of Jan 1899.

Executed in presence of

J. W. Williams Jr

Mary Huffman [L. S.]
Wife

Huffman, Mary
Bartow County
For Those Herebefore Paid.

1899.

NO. 2252

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Mary Huffman

OF

Bartow County

Widow of David Huffman

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1899.

AND HANDED TO

E. W. Hendricks
GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, Mary Huffman hereby authorize Gov
Hendricks of Bartonsville Ga

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

me at Bartonsville Ga

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

day of Jan 1900.

Executed in presence of

J. W. Williams Jr

Mary Huffman [L. S.]
Wife

Huffman, Mary
Bartow County
For Those Herebefore Paid.

1900.

NO. 2249

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. Mary Huffman

OF

Bartow County,

Widow of David Huffman

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1900.

AND HANDED TO

Hendricks
G. W. HARRISON, STATE PRINTER, ATLANTA