

2. How long and since when have you known the applicant?  
 Since May 21<sup>st</sup> 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?  
 Linwood, Georgia. He has been a resident of Georgia a number of years; from personal correspondence

4. When, where and in what Company and Regiment did J. V. Pitt enlist during war from 1861 to 1865? (Give date and place)  
 Norfolk, Va. April 27, 1865 in Company F, 32<sup>nd</sup> North Carolina Volunteer Infantry, Daniels Brigade, Rhodes Division.

5. How did you obtain your information of this Service?  
 Frequent association with him. Rhodes Division, Cavalry Corps

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date)  
 About three years, I believe

7. When and where was his Command surrendered or discharged (give date and place)  
 At Appomattox Co. H. April 9, 1865

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

9. If not, where were you and how came you there?  
 At Petersburg, Va. Detained for duty at Hospital

10. Was the applicant personally present with his Command at surrender?  
 I believe he was

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

12. When did he leave his Command? Prior to May, 1864. Where was his Command when he left?  
 In Orange Co. Va. for what cause did he leave?  
 to transfer to Pickens command. By whose authority did he leave?  
 and how long was he granted leave?  
 How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)  
 I served in same regiment, Co. K, 32<sup>nd</sup> N. C. Volunteer. He was in Co. F

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

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

15. Was applicant captured as a prisoner? No If so, when and where?  
 In what prison was he held? and when released?

Sworn to and subscribed before me, this the 1<sup>st</sup> day of February 1913  
 J. Wallis Brunet  
 Notary Public for the State of Georgia.  
 Corporation Building, Petersburg, Va. County.

1908? State it fully by item.

- When and to whom was it sold or given to?
- What was the price paid or stated to be paid?
- What relation is the party to applicant?
- What disposition was made of the proceeds of the sale?
- 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 the \_\_\_\_\_ day of \_\_\_\_\_ 1913.

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

### ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Petersburg County.

I, G. W. Anderson Ordinary of said County, certify that I know the applicant, J. V. Pitt 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 Returns of \_\_\_\_\_ shows that \_\_\_\_\_ and wife value for tax is in 1908 \$ 100 for 1909 \$ 100 for 1910 \$ 100

Sworn under my hand and official seal of office this 25<sup>th</sup> day of Feb. 1913

G. W. Anderson Ordinary.

Petersburg 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 space 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.

### Department of the State Auditor, Raleigh, N. C.

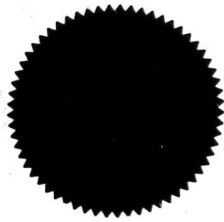
July 11th 1911.

This is to certify that Julius V. Pitt was a member of Company F, 32<sup>nd</sup> Regiment of North Carolina Volunteer Infantry, Daniels Brigade, Rhodes Division, C. S. A. That he enlisted April 27th 1861. He was a good soldier.

This is taken from the Roster of North Carolina Troops.

J. V. Pitt

State Auditor.



Department of the State Auditor.  
Raleigh, N.C.

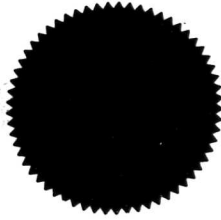
July 11th 1911.

This is to certify that Julius W. Pitt was a member of Company F, 32nd  
Regiment of North Carolina Volunteer Infantry, Daniels Brigade, Rhodes Division,  
C. S. A. That he enlisted April 27th 1901. He was a good soldier.

This is taken from the roster of North Carolina Troops.



State Auditor.



# CERTIFICATE OF ORDINARY

STATE OF GEORGIA.

I, John W. Clark

Barlow County

Ordinary of said County, do certify

that I personally know

Mr. James M. Pittman

the applicant, and that she

is the lawful widow of

Mr. Pittman

who was on

the Pension Roll of said

Barlow

County, and was paid

a Pension from

Barlow

County for 1920 and at the time

of his death on the 18 day of

May

1920, there was due to

him and unpaid his Pension of

34 1/2

Dollars from the State

of Georgia and I know

Mr. Pittman

the within

witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this

of

1920

192

(Seal of Ordinary)

Ordinary

County

Pittman, R. M.  
Barlow Co.  
SECOND QUARTER "A" 1930  
"B" 1930  
Barlow County

1920

## Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. Delia M. Pittman

Widow of R. M. Pittman

Date of Marriage Feb 12, 1879

Date of Death May 18, 1920

Approved and ordered paid.

R. deT. Lawrence JOHN W. CLARK  
Commissioner of Pensions.

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

ORDINARY

Widow of W. H. Tullman  
Date of Marriage Feb 12, 1879  
Date of Death May 18, 1922

Approved and ordered paid.

R. deT. Lawrence JOHN W. CLARK  
Commissioner of Pensions.

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

Ordinary of said County, do certify that John W. Clark, the applicant, and that she who was on County, and was paid County for 1920, and at the time 1920, there was due to County Dollars from the State County, the within County and entitled to full credit.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Barlow County.  
I, R. M. Gairnes Ordinary of said County, do certify that I personally know Mrs. Leila M. Pittman the applicant, and that she is the lawful widow of R. M. Pittman, who was on the Pension Roll of said Barlow County, and was paid a Pension from Barlow County for 1920, and at the time of his death on the 18 day of May 1920, there was due to him and unpaid his Pension of Twenty Dollars from the State of Georgia, and I know J. G. Senter, 1920 C. E. Pittman, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.  
Given under my hand and seal this 1922 of Ordinary County.

Pittman R. M.  
SECOND WITNESS "1" 1930  
" " " " 1930  
Barlow County  
1922

Application for Pension  
Due Deceased Soldier  
(SENDER ACT 1891)  
(To be paid to his Widow)

BY  
Leila M. Pittman  
Widow of R. M. Pittman  
Date of Marriage Feb 12, 1879  
Date of Death May 18, 1922  
Approved and ordered paid.

R. deT. Lawrence JOHN W. CLARK  
Commissioner of Pensions.  
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.



*Pittman R. M.*  
SECOND QUARTER "1st" 1930  
" " " " 1930  
" " " " 1930  
County  
1930  
Application for Pension  
Due Deceased Soldier  
(UNDER ACT 1891)  
(To be paid to his Widow)  
BY  
Maddie M. Pittman  
Widow of R. M. Pittman  
Date of Marriage Feb 12 1879  
Date of Death May 18 1930  
Approved and ordered paid.  
R. det. Lawrence 10000 W. 32288.  
Commissioner of Pensions.  
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.

### Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, *Barlow* County.

Personally before me, the Ordinary of said County, comes *Mrs. Lelia M. Pittman* of said County, who after being duly sworn, on oath says that she is the widow of

*R. M. Pittman*

and that said Pensioner was on the Pension Roll of *Barlow* County and was paid a Pension of *Fifty* (\$50.00) Dollars

from said County for *1st* Quarter, 1930, and that the said Pensioner died in *Walker* County on the *18* day of *May*, 1930.

Applicant further swears that she married the said *R. M. Pittman* on the *12* day of *Feb*, 1879, in *Cherokee* County and State of *Georgia*, 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 *2nd* of Pension 1930 due and unpaid be paid to her.

Sworn to and subscribed before me this *2* day of *January*, 1930  
*F. M. Jones* Ordinary  
*Mrs. Lelia M. Pittman* (L. S.)  
(Seal of Ordinary) County

### AFFIDAVIT OF WITNESS

STATE OF GEORGIA, *Barlow* County.

Personally before me comes *G. C. Pittman*, who on oath says that he knew *R. M. Pittman* while in life and that he knows *Mrs. Lelia M. Pittman*, the above applicant, and knows that the said *R. M. Pittman*

and *Lelia M. Pittman* were in due form of law married in the County of *Cherokee* in the State of *Georgia* on the *12* day of *February*, 1879, and that they were residing together as husband and wife at the time of his death on the *18* day of *May*, 1930, and that she is his dependent widow.

Sworn to and subscribed before me this *2* day of *January*, 1930  
*F. M. Jones* Ordinary  
*G. C. Pittman*  
(Seal of Ordinary) County

### INSTRUCTIONS.

- 1st. Proof of marriage must be made.
- 2nd. Do not use the extremely large form of marriage certificate in common vogue throughout the State, suitable only for framing; use in the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when filled in, is filled in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding for proper power-of-attorney receipt for this pension by signing name, as widow, opposite the name of husband on the white pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to roll in her own right.

from said County for 1st Quarter, 1920 and that the said Pensioner died in  
Walker County on the 18 day of May, 1920.  
Applicant further swears that she married the said Rm Pittman  
on the 12 day of Feb, 1879, in Cherokee County and  
State of Georgia, 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 2nd Pension 1920  
due and unpaid be paid to her.

Sworn to and subscribed before me this 2 day of June, 1920  
R. M. James Ordinary Mrs. Lela M. Pittman (L. S.)  
(Seal of Ordinary) County

### AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Bartow County.

Personally before me comes L. M. Pittman, who  
on oath says that he knew Rm Pittman while in life  
and that he knows Mrs. Lela M. Pittman, the  
above applicant; and knows that the said Rm Pittman  
and Lela M. Pittman were in due form of law married in the County  
of Cherokee in the State of Georgia on  
the 12 day of February, 1879, and that they were residing  
together as husband and wife at the time of his death on the 18 day of  
May, 1920, and that she is his dependent widow.

Sworn to and subscribed before me this 2 day of June, 1920  
R. M. James Ordinary L. M. Pittman  
(Seal of Ordinary) County

#### INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal attached, and that each of application, when filled, is filed in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding her proper power of attorney receipts for this pension by signing name, as widow, opposite the name of husband on the widow pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

### Ordinary's Certificate

ALNTY

the applicant for pension. She

is the person the papers were turned to; the said sale is a bona fide containing resident citizen of said County and was on the 11th November 1906 that I also know *Robert A. Ward*

the witness who swears to the service of husband, that both of them are now residents of said Co.

were doing so, they may have surprised the foregoing athletes and they have both won worldly and their statements are entitled to full faith and credit.

SEAL.

22<sup>nd</sup> Dec  
1844  
London

County

[illegible]

Pittard, M. J. (Mrs)  
H. 1928.

No. Partin Co  
down's B/G: 20

Widow's Pension

### Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Barlow

Name Mr. M. J. Pittard

Widow of *S. F. Pittman*

Company *✓*  
*4000 Teq.*

Regiment *4th* *and*  
*Also in the 1st to the 14*

Approved \_\_\_\_\_

50 50

100

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

10

10-29-1919

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

Ordinary's Certificate  
I, Wm. J. Pittard, Ordinary of said County, do certify  
that Wm. J. Pittard is the applicant for pension. She  
is the continuing resident citizen of said County  
and was on the 4th November 1908, that I also know Culver E. Ward  
the witness who swears to the service of husband, that both of them are now residents of said County and  
were duly sworn by me before signing the foregoing affidavit and that they both are truthful, trust-  
worthy, and their statements are entitled to full faith and credit.

### Ordinary's Certificate

STATE OF GEORGIA,

Bartow COUNTY.  
I, Wm. J. Pittard, Ordinary of said County, do certify  
that I know Wm. J. Pittard the applicant for pension. She  
is the person she represents herself to be and she is a bona fide continuing resident citizen of said County  
and was on the 4th November 1908, that I also know Culver E. Ward  
the witness who swears to the service of husband, that both of them are now residents of said County and  
were duly sworn by me before signing the foregoing affidavit and that they both are truthful, trust-  
worthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 22 day of Oct 1919  
(SEAL) Wm. J. Pittard Ordinary,  
Bartow 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 space are insufficient.  
3. Only widows who married prior to January 1st, 1881, are entitled.  
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by  
such Ordinary.  
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general  
reputation.

### Application for Pension by a Widow Under Act of 1910 As Amended by Act of 1919

#### Questions for Applicant

STATE OF GEORGIA,

Bartow COUNTY.  
Personally before me comes Wm. J. Pittard of said State and County,  
and, after being duly sworn, says that she desires to apply for a pension allowed under the Act  
of 1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to  
the following questions to-wit:  
1. What is your name, and where do you reside? Wm. J. Pittard, Bartow, Ga.  
2. How long and since when have you been a continuing resident of the State of Georgia? Have lived in Ga. 25 years  
3. When, where and to whom were you married? 1881, near  
Bartow, Ga. to Saml. Pittard  
a. Have you married since the death of first and soldier husband? No  
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Con-  
federate Army or Georgia Militia? (State the arms and class of Service.) 1862, 1863  
Bartow, Ga. Co. "D" 40th Ga. Reg.  
5. When and where did the commands of your husband surrender or discharge from the army?  
Apr. 1864, 1865, Bartow, Ga.  
Was your husband personally present at the time of the surrender or discharge of this command?  
No  
7. If he was not present state clearly where he was? Do not know  
8. Where was his command when he left?  
a. For what cause did he leave his command?  
b. By whose authority did he leave his command?  
c. For how long was he granted leave of absence?  
d. What was his physical condition when he left his command?  
e. What effort did he make to return to his command?  
f. In what way was he prevented from going back to Command?  
g. Was he captured by the enemy at any time?  
h. If so, when and where captured and where held as a prisoner, and when and for what cause released?  
i. When and where did your first husband die? May 1, 1901, Bartow, Ga.  
k. Were you residing together when he died? Yes  
l. If not, how long had you resided apart? Yes  
m. Are you now a widow? Yes  
9. Have you or your husband heretofore been paid a pension by the State? No  
If so, when and for what cause were you or your husband placed on the roll? No

Sworn to and subscribed before me this the 22 day of Oct 1919  
Wm. J. Pittard Ordinary of Bartow County.  
(SEAL)

Widow's Pension

Under Act 1910 - as Amended by Act of 1919.

County Bartow  
Name Wm. J. Pittard  
Widow of Saml. Pittard  
Company 40th Ga. and  
Regiment Bartholomew's  
Approved

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

10-29-1919

*William J. Pittard*  
*10-29-1919*  
 No. *20*  
**Widow's Pension**  
 Under Act 1910—as Amended by Act of 1918.

County *Barlow*  
 Name *Wm. J. Pittard*  
 Widow of *S. D. Pittard*  
 Company *Co. B, 1st Regt. Ala. Inf.*  
 Regiment *1st Regt. Ala. Inf.*  
 Approved *[Signature]*

*10-29-1919*

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

1. If he was not present state clearly where he was? *He was not present.*  
 2. Where was his command when he left? *At Fort. Ransom*  
 3. For what cause did he leave his command? *None*  
 4. By whose authority did he leave his command? *None*  
 5. For how long was he granted leave of absence? *None*  
 6. What was his physical condition when he left his command? *None*  
 7. What effort did he make to return to his command? *None*  
 8. In what way was he prevented from going back to Command? *None*  
 9. Was he captured by the enemy at any time? *None*  
 10. If so, when and where captured and where held as a prisoner, and when and for what cause released?  
 11. When and where did your first husband die? *May 1900 - Barlow, Va.*  
 12. Were you residing together when he died? *Yes*  
 13. If not, how long had you resided apart? *Yes*  
 14. Are you now a widow? *Yes*  
 15. Have you or your husband heretofore been paid a pension by the State? *None*  
 16. If so, when and for what cause were you or your husband placed on the roll? *None*

Sworn to and subscribed before me this the *7* day of *Oct* 19*19*  
*Wm. J. Pittard* Ordinary  
 of *Barlow* County.  
 (SEAL)

**Questions for Witnesses as to Service of Husband and Marriage**

STATE OF GEORGIA,  
*Barlow* COUNTY.

Personally before me comes *C. M. Ruggins* who, after being duly sworn, true answers to make to the following questions, answers as follows:

1. What is your name and where do you reside? *C. M. Ruggins, 1000 White Barlow, Camden, Va.*  
 2. How long and since when have you known *Wm. J. Pittard* applicant? *50 years*  
 3. How long and since when has she continuously resided in this State? (Give date.) *Ever since I have known her.*  
 4. When and to whom was she married? *Sam. D. Pittard* How do you know? *From*  
 5. How long and since when did you know *Sam. D. Pittard* her husband? *Since 1862*  
 6. When and where did *Sam. D. Pittard* the husband of applicant, die? *1900 - Barlow, Va.*  
 7. Were the applicant and her husband living together as husband and wife at the date of his death? *Yes*  
 8. If not, how long did they live apart before his death? *None*  
 9. When, where and in what Company and Regiment did *Sam. D. Pittard* enlist? *March 14, 1862, Co. D, 1st Regt. Va. Inf.*  
 10. Were you a member of the same Company? *Yes, in Co. B, 1st Regt. Va. Inf.*  
 11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? *He died about 10 months*  
 12. When and where did his Command surrender, and was discharged? *April 26, 1865, Freedman, Va.*  
 13. Were you personally present when it was surrendered? *Yes* If not, where were you *In prison* and how came you there? *Co. B*  
 14. Was the husband of applicant personally present at surrender? *Yes* If not where was he? *Not known* When, where and for what cause did he leave Command? (Give date.) *None* By whose authority did he leave his Command? *None* And how long was he granted leave? *None* How do you know all this? *He was in Co. B*  
 15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?  
 16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the *7* day of *Oct* 19*19*  
*Wm. J. Pittard* Ordinary  
 of *Barlow* County.  
 (SEAL)

the husband of applicant, died 1700 *was married 40*  
 7. Were the applicant and her husband living together as husband and wife at the date of his death? *yes*  
 8. If not, how long did they live apart before his death? *never*  
 Were they divorced? *no*  
 9. When, where and in what Company and Regiment did *Samuel L. Pittard* enlist? *March 4 1862, Co. I. 4th Ga. Regt.*  
 10. Were you a member of the same Company? *yes in Co. B. 4th Ga.*  
 11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? *I think about 10 months*  
 12. When and where did his Command surrender, and was discharged? *April 9. 1865, Greensboro N.C.*  
 13. Were you personally present when it was surrendered? *no* If not, where were you *In prison* and how came you there? *Captivity*  
 14. Was the husband of applicant personally present at surrender? *no* If not where was he? *Don't know* When, where and for what cause did he leave Command? (Give date.) *7* By whose authority did he leave his Command? *7* And how long was he granted leave? *7* How do you know all this? *I was in Co. B.*  
 15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?  
 16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the

*7* day of *Oct* 19*9*  
*James W. Watts* Ordinary  
 of *Bartow* County.  
 (SEAL)

State of Georgia, to any ordained minister of the Gospel, Judge of the Peace, Justice of the Peace, or Justice of the Peace. You are hereby authorized to join Samuel L. Pittard and Miss M. L. Pittard, in lawful Bonds of Matrimony, agreeable to the laws and Constitution of this State. Given under my hand and seal of office this the 8th day of November 1868.

James W. Watts, Ordinary.

Georgia, Cass County. I hereby certify that the marriage of the persons named in the above license actually took place and was duly solemnized before me the 10th day of November, 1868.

A. W. Buford, M.D.

Recorded November 10th, 1868.

James W. Watts, Ordinary.

*I Certify that the above and foregoing is a true and correct copy of marriage Record Book "E" page 148 now of file in this office. This Oct. 9<sup>th</sup> 1919  
 G. W. Hendricks Ordinary  
 Bartow County Ga*

Georgia, Bartow County.

Personally came W. R. Ward of said County, who after being sworn, on oath says that, after Samuel L. Pittard was relieved of further service in Co. I, 40th Ga. Regiment, he joined Smith's Artillery in the same Artillery the said Ward had been serving in and served in Smith's Artillery about ten months. He was taken sick at Columbus Miss. in 1864. He was sent home to Bartow County, Georgia on sick furlough. He was sick for a long time and was never able for service any more, which condition was shown by a physician's certificate.

Sworn to and subscribed before me, this Oct. 7th, 1819. W. R. Ward.  
 G. W. Hendricks, Ordinary Bartow County, Ga. x his mark.

to the Laws and Constitution of this State. Given under my hand and seal of office this the 8th day of November 1858.

James W. Watts, Ordinary.

Georgia, Cass County. I hereby certify that the marriage of the persons named in the above license actually took place and was duly solemnized before me the 10th day of November, 1858.

A. W. Buford, M.D.

Recorded November 12th, 1858.

James W. Watts, Ordinary.

*I certify that the above and foregoing  
is a true and correct copy of marriage  
Record Book "E" page 148 now of file  
in this Office. This Oct. 9<sup>th</sup> 1919.  
G. W. Hendricks Ordinary  
Bartow County Ga.*

Georgia, Bartow County.

Personally came W. R. Ward of said County, who after being sworn, on oath says that, after Samuel L. Pittard was relieved of further service in Co. I, 40th Ga. Regiment, he joined Smith's Artillery in the same Artillery the said Ward had been serving in and served in Smith's Artillery about ten months. He was taken sick at Columbus Miss. in 1864. He was sent home to Bartow County, Georgia on sick furlough. He was sick for a long time and was never able for service any more, which condition was shown by a physician's certificate.

Sworn to and subscribed before me, this 24th, 1919. W. R. Ward.

G. W. Hendricks, Ordinary Bartow County, Ga. x his mark.

*Popham, J. H.*  
*Barlow Co.*

No. One year 1908  
**INDIGENT PENSION.**  
1908

Name J. H. Popham  
County Barlow  
Co. Grand Rapids 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.  
4/18/07

POWER OF ATTORNEY.

STATE OF GEORGIA,  
County of Barlow  
I, J. H. Popham hereby authorize  
Edmund S. Hicks of Barlow  
to receive and receipt for the pension allowed and request that he remit same to  
at Barlow by me  
Witness my hand and seal, this 28 day of April 1908  
J. H. Popham [L. S.]  
Executed in presence of  
Edmund S. Hicks  
Ordinary



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.

9/18/07

ATTORNEY.

Particulars  
of said State and County, desiring  
to avail himself of the Pension Act (Section 1204, Code), hereby submit his proofs, 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? *Barlow, Georgia*

2. How long and since when have you been a resident of this State? *Since three months old*

3. When and where were you born? *1840, in Iowa*

4. When and where and in what company and regiment did you enlist or serve? *Aug. 1862, Company G, 2nd Ga. Reg. And from Dec. 1864 to May 12, 1865, 1st Co. 1st Regt. 1st Div. 1st Army.*

5. How long did you remain in such company and regiment? *18 months*

## POWER OF ATTORNEY.

STATE OF GEORGIA.

*Barlow* COUNTY, *Barlow* hereby authorize  
*J. N. Popham* of *Barlow*  
*G. W. Lindsey* to receive and receipt for the pension allowed and request that he remit same to *me*  
at *Barlow* day of *Aug* 1907  
Witness my hand and seal, this *23* day of *Aug* 1907  
*J. N. Popham* [L. S.]  
*G. W. Lindsey*  
*Ordinary*

## QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

*Barlow* COUNTY, *Barlow* of said State and County, desiring  
to avail himself of the Pension Act (Section 1204, Code), hereby submit his proofs, 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? *Barlow, Georgia*

2. How long and since when have you been a resident of this State? *Since three months old*

3. When and where were you born? *1840, in Iowa*

4. When and where and in what company and regiment did you enlist or serve? *Aug. 1862, Company G, 2nd Ga. Reg. And from Dec. 1864 to May 12, 1865, 1st Co. 1st Regt. 1st Div. 1st Army.*

5. How long did you remain in such company and regiment? *18 months*

6. When and where was your company and regiment surrendered and discharged? *April 9, 1865, at Appomattox*

7. Were you present with your company and regiment when it was surrendered? *NO*

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 in Georgia in William B. Rose's command - I had been discharged from Co. G, 2nd Ga. Reg. And from Dec. 1864 to May 12, 1865, 1st Co. 1st Regt. 1st Div. 1st Army.*

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"? *Old 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 been unable to earn a support for nearly three years*

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, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? *None*

15. In what County did you reside during those years, and what property did you then return for taxation? *Barlow, nothing*

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *By my children and Grandson & daughter*

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? *Don't know*

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? *Nothing*

19. Have you a family? If so, who compose such family? Give their means of support. Have they a home, stand, or other property? Their ages and how employed? *Have a wife, become wife, have no kids to support me. I keep my mantle children, they are poor & old*

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?

Sworn to and subscribed before me this the *20* day of *Aug* 1907  
*G. W. Lindsey* Ordinary.  
of *Barlow* County.

Every question must be answered.

INDIGENT PENSION.

1907

*J. N. Popham*  
*G. W. Lindsey*  
Co. *2nd Ga. Reg.*  
Approved 1907

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.

9/18/07

*J. N. Popham*  
*G. W. Lindsey*  
Co. *2nd Ga. Reg.*

# INDIGENT PENSION.

1906

*John W. Lindsey*  
Commissioner of Pensions.

Approved \_\_\_\_\_

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. Lindsey, State Printer, Atlanta, Ga.

9/15/07

*Popham & H. H. Barton Co.*

Every Question Must

12. In what County did you reside during those years, and what property did you then return to taxation?  
*Barlow nothing*
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, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same?  
*None*
15. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?  
*By my children and from & me*
16. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?  
*Don't know*
17. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year?  
*Nothing*
18. Have you a family? If so, who composes such family? Give their means of support. Have they a home, stand, or other property? Their ages and how employed?  
*Have a wife, second wife, have no father to support me, except my maids children, they are poor & ve*
19. Are you receiving any pension? If so, what amount and for what disability?  
*NO*
20. Have you ever made an application for pension before?  
*NO*
21. How many applications have you ever made and under what class?  
*NO*

Sworn to and subscribed before me this the *28* day of *Aug*, 1907, *J. H. Popham* Applicant  
*Geo W. Lindsey* Ordinary of *Barlow* County.

## QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

*Barlow* COUNTY.

*B. F. Johnson* of said State and County, having been presented as a witness in support of the application of *J. H. Popham* 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. F. Johnson Rockingit, Ga. R. F. D.*
2. Are you acquainted with *J. H. Popham*, the applicant; if so, how long have you known him?  
*Twenty years*
3. Where does he reside, and how long has he been a resident of this State?  
*Rockingit, Ga. Since I have known him*
4. Where, where and in what company and regiment did he enlist, and how do you know?  
*1862. 2. Inf. Co. B 22. Co. 12. 1st Regt*
5. Were you a member of the same company and regiment?  
*Yes*
6. How long did he perform regular military duty?  
*near 4 yrs*
7. Where and where was he captured and surrendered?  
*April 9th 1865. at Chancellorsville*
8. Were you present when he surrendered?  
*No. I was captured April 6th 1865*
9. Was applicant present?  
*No. I suppose not*
10. If he was not present, where was he?  
*Do not know*
11. When did he leave his company and regiment? For what cause?  
*Do not know*
12. How do you know all of this?  
*Do not know*
13. What property, real or income has the applicant? (Give your means of knowledge.)  
*J. H. Popham was discharge from the army Dec-1862*

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?

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?  
*He is not able to successfully carry on occupation on account of his physical weakness*

15. Is the applicant unable to support himself by labor of any sort; if so, why?  
*Yes, because of age and infirmities. He is old, feeble and not able to work.*

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?

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?

Sworn to and subscribed before me, this the *28* day of *Aug*, 1907, *B. F. Johnson* Witness  
*Geo W. Lindsey* Ordinary.

## AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

*Barlow* COUNTY.

Personally came before me, *A. B. Greene M.D.* and *W. C. Griffin M.D.*, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully *J. H. Popham* applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

*Physical condition is as follows: aged, used, muscular, poor and feeble. Blind in left eye. Can see well in other*

and that we have no interest in said pension being allowed. *A. B. Greene M.D.*

Sworn to and subscribed before me, this the *28* day of *Aug*, 1907, *W. C. Griffin M.D.* Ordinary.

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

*Barlow* COUNTY.

I, *Geo W. Lindsey* Ordinary, in and for said County, hereby certify that the applicant, *J. H. Popham* resides in said County, and has been a bona fide resident of this State since the day of *Aug*, 1890, and that the witnesses, viz. *B. F. Johnson, A. B. Greene M.D., W. C. Griffin M.D.* 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 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 1906 \_\_\_\_\_ Dollars of property; in 1907 \_\_\_\_\_ Dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office this *28* day of *Aug*, 1907, *Geo W. Lindsey* 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.

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow COUNTY.

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

that the applicant, J.H. Poplar resides in said County, and has been a bona fide resident of this State since the day of Aug 1907

and that the witnesses, viz. B.F. Johnson, H.J. Waddy, A.B. Green MD - W.S. Griffin MD 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

property, and in 1902 Dollars of property, in 1903 Dollars of property, in 1904 Dollars of property, in 1905 Dollars of property, in 1906 Dollars of property, in 1907 Dollars of property

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

Witness my hand and seal of office this 28 day of Aug 1907 G.W. Hendricks 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 paper and as above set out.

El Dorado. Bartow County.  
 In person came before me, N. J. Wade,  
 of said County, who on oath says that  
 he and J. N. Popham were both members  
 of South Company, Baker's Regiment from  
 October 1861 till May 1862, at which  
 time they were surrendered and sent by Gen.  
 W. J. Wofford. They were ordered to join  
 Wofford's Company, as they were cut off  
 from our original Company. And he did  
 join and serve under Wofford as above stated.  
 And the Surrender in May 1862. ~~He~~  
 Affiant further swears that John J. Popham  
 is not able to earn a support,  
 has no property or income from which he  
 could derive a support, and he is phys-  
 ically unable to work and maintain  
 himself. Affiant has no interest in  
 a negro of a person by applicant  
 sworn to and subscribed  
 before me Aug. 28<sup>th</sup> 1907 J. H. Wade  
 J. H. Wade  
 County Clerk

*Pepham, J. H.  
Barlow Co.*

---

For *Barlow* County

---

**1924**

---

**Application for Pension  
Due Deceased Pensioner**  
(UNDER ACT 1904)

(To pay expenses of last illness and funeral)

*W. W. Morris* Ordinary

For *J. H. Popham*

Date of Death *Feb. 2nd* 1924

Amount \$ *111 20 12*

---

Approved and ordered paid

*W. W. Morris* 1924  
Commissioner

*Paid to funeral  
expenses and Dr.  
Billings*

Ordinary: Fill out above in full and send this blank Application Deceased Pensioner to the Commissioner of the Pension Office, after the authority to do so has been given you by the Pension Department. This is for accepted payrolls to be immediately mailed with them. Do not keep this application in your office.

1924

8.1. AMPLIFIED  
COMMISSIONER

*John Edgar Hoover*

*Paid to Thomas  
Epineas and Dr.  
Bill Page, Reform*

Summary: Fill out above in full and send this to the National Development Council, 410 Madison Avenue, New York 17, N.Y. with the appropriate amount of money. This will give you authority to do so. Send back to the Department of the Interior, Washington, D.C. for printed payrolls. Do not mention this in your office. Do not keep this application in your office.

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

[illegible]

unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$111.<sup>00</sup> per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this 29<sup>th</sup> day of April 1924  
*Guthrie*  
 Ordinary  
 (Seal of Ordinary)  
 County

*H. H. Popham*

### CERTIFICATE OF ORDINARY

GEORGIA *Barlow* County.

I, *Guthrie*, Ordinary of said County, do certify that I personally know *H. H. Popham*, 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. H. Popham* while in life and that this was the same person whose name appears on the *Indigent* Pension Roll of *Barlow* County, and was paid a Pension of *One hundred and ten* (\$100) Dollars in said County for 1923, 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 29<sup>th</sup> day of April, 1924

(Seal of Ordinary) *Guthrie*, Ordinary  
*Barlow*, County

#### INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, but not less than twelve months, and died without leaving sufficient property to pay such expenses. THE WIDOW OF A SOLDIER, IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MAKE APPLICATION ON YELLOW BLANK.
- 2nd. Require these 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.
- 3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
- 4th. Each account must be sworn to before the Ordinary, and in the following form: "Do not use the terms: 'Just, true, due, unpaid,' etc."
- 5th. 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 leaving sufficient property to pay this bill*.
- 6th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached hereto to this blank, after the blank has been properly completed as indicated.
- 7th. 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.
- 8th. The Ordinary signs per roll, as Ordinary, for the pensioner, and then disburses the money himself and takes receipt.
- 9th. Accept no bills for nursing until you write the Pension Department, stating the circumstances in very great detail. Pensioner's children, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.
- 10th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 11th. Ordinary should see that the back of this blank, when folded, is filled out.

Taylorville, Ga. 4/28 1924  
*Est. of J. H. Popham*

IN ACCOUNT WITH  
**FARMERS SUPPLY COMPANY**  
 GENERAL MERCHANDISE

1924  
 Feb 24  
 1 Casket 5700  
 1 horse service 1800  
 shirt & collar 220  
 \$7720  
 purchased by H. H. Popham.

Farmers Supply Co.,

By *E. Q. Davis*

Georgia—Barlow County.  
 Personally appeared E. Q. Davis, one  
 of the firm of Farmers Supply Co.  
 and in oath before me saying a/c is  
 correct, and the company and was  
 furnished by said company for the  
 purpose therein stated.  
 I am now subscribed  
 before me April 29<sup>th</sup>  
 1924  
*Guthrie* Ordinary

*E. Q. Davis* sup.

Taylorville, Ga. April 29 1924  
*Jesse Popham Est.*  
 Taylorville, Ga.

IN ACCOUNT WITH  
**DR. A. L. HORTON**

June 15-1923	To Med.	50
July 2 "	To Cash Ventr.	1 50
" 5 "	To Med.	1 75
Aug 20 "	To Med.	1 75
" 23 "	To Med.	25
Bel. 1923 acct.		\$ 575
Jan 3-1924	To Catheter	25
Feb 11 "	To Ventr. med.	3 50
" 13 "	To Ventr.	3 50
" 17 "	To Ventr.	3 50
" 19 "	To Ventr.	3 50
" 20 "	To Ventr.	3 50
" 21 "	To Ventr.	3 50
" 22 "	To Ventr.	3 50
" 23 "	To Ventr.	3 50
Total Due		\$ 34.00

Personally appeared Dr. A. L. Horton and  
 in oath before me saying a/c is true and the name is  
 therein stated.  
 I am now subscribed before me  
 April 29<sup>th</sup> 1924  
*Guthrie* Ordinary

M. Est. Of Jesse H. Popham

IN ACCOUNT WITH  
FARMERS SUPPLY COMPANY  
GENERAL MERCHANDISE

1924  
Feb 24  
1 Cassket 5700  
1 piece service 1800  
shirt + collar 220  
\$7720  
purchased by H.H. Popham.

Farmers Supply Co.  
By E. O. Davis

Georgia - Barton Camp.  
Personally appeared, E. O. Davis, one  
of the firm of Farmers Supply Co.  
and on oath dep. by foregoing a/c is  
true, that all amounts and items  
furnished by said company for the  
Barners theme state  
J. O. M. and Dickson's  
before me April 29th  
1924  
G. W. H. in duce only

E. O. Davis sup.

Taylorville, Ga. April 29 1924

M. Jesse. Popham Est.  
Taylorville, Ga.

IN ACCOUNT WITH  
DR. A. L. HORTON

June 15-1923	To med.	50
July 2 "	To Cash Vests	1 50
" 5 "	To med.	1 75
Aug 20 "	To med.	1 75
" 23 "	To med.	25
	Bel. 1923 acct.	\$ 575
Jan 3-1924	To Catheter	25
Feb 11 "	To Vest med.	3 50
" 13 "	To Vest	3 50
" 17 "	To Vest	3 50
" 19 "	To Vest	3 50
" 20 "	To Vest	3 50
" 21 "	To Vest	3 50
" 22 "	To Vest	3 50
" 23 "	To Vest	3 50
	Total Due	\$ 94.00

Personally appeared Dr. A. L. Horton and  
in oath dep. by above a/c is true as the name is  
shown stated  
Brown & Dickson's by me  
April 29th 1924  
G. W. H. in duce only

A. L. Horton MD

POWER OF ATTORNEY.

STATE OF GEORGIA.

*Barlow*

COUNTY.

*D. L. Polk*

herely authorize

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

at *Atlanta Ga*

by *me*

Witness my hand and seal, this *5* day of *Jan* 1906.

Executed in the presence of *D. L. Polk* [L. S.]

*C. W. Lindsey*

*Barlow*  
*Barlow*  
*1103 108*

Code Section 1214.  
(FOR THOSE ALREADY ENROLLED.)

*In G. No. 2266 1905*

**INDIGENT  
SOLDIER'S PENSION  
1906.**

Name *D. L. Polk*  
County *Barlow*  
Co. *D* Regiment *60*  
*Go 1103*

WARRANT ISSUED

JAN 29 1906.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Cor. D. L. Wells Regiment 60  
 WARRANT ISSUED  
 JAN 29 1906.  
 JOHN W. LINDSEY,  
 Commissioner of Pensions.  
 WARRANT HANDED TO  
 The Franklin Printing and Publishing Co., 100 W. Madison, St. Louis, Mo.

ATTORNEY.  
 I, John W. Lindsey, hereby authorize John W. Lindsey of Adairsville Ga to receive and request that he remit same to Adairsville Ga  
 day of Jan 1906.  
D. L. Wells [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,  
Barlow COUNTY.  
I. L. Wells hereby authorize John W. Lindsey of Adairsville Ga to receive and receipt for the pension allowed, and request that he remit same to Adairsville Ga  
 by me  
 Witness my hand and seal, this 29 day of Jan 1906.  
D. L. Wells [L. S.]  
 Executed in the presence of John W. Lindsey

POWER OF ATTORNEY.

STATE OF GEORGIA,  
Barlow COUNTY.  
I. L. Wells hereby authorize John W. Lindsey of Adairsville Ga to receive and receipt for the pension allowed, and request that he remit same to Adairsville Ga  
 by me  
 Witness my hand and seal, this 29 day of Jan 1907.  
D. L. Wells [L. S.]  
 Executed in presence of John W. Lindsey

(FOR THOSE ALREADY ENROLLED.)  
Indigent  
**SOLDIER'S PENSION**  
**1906.**  
 Name I. L. Wells  
 County Barlow  
 Co. D Regiment 60  
 WARRANT ISSUED  
 JAN 29 1906.  
 JOHN W. LINDSEY,  
 Commissioner of Pensions.  
 WARRANT HANDED TO

(FOR THOSE ALREADY ENROLLED.)  
**INDIGENT**  
**SOLDIER'S PENSION**  
**1907.**  
 Name I. L. Wells  
 County Barlow  
 Co. D Regiment 60  
 WARRANT ISSUED  
 JAN 29 1907.  
 JOHN W. LINDSEY,  
 Commissioner of Pensions.  
 WARRANT HANDED TO



## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Barlow County.

Personally appears J. L. Polk of Barlow

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1842; that he is 66 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 nearly 4 years in Company D, of 60th Regiment of Co. Vol; that his physical condition is as follows: Has Inflammatory Rheumatism

that his property consists of the following items:

of the value of 100 Dollars. I am now earning by my labor, 10 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 6th day of Jan, 1906, J. L. Polk Ordinary.

State of Georgia,

Barlow County.

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

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

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

G. W. Nundrick Ordinary Barlow 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,

Barlow County.

Personally appears J. L. Polk of Barlow

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1842; that he is 66 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 1/2 years in Company D, of 60th Regiment of Co. Vol; that his physical condition is as follows: He is disabled from Inflammatory Rheumatism

that his property consists of the following items:

of the value of 100 Dollars. I am now earning by my labor, 10 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 6th day of Jan, 1907, J. L. Polk Ordinary.

State of Georgia,

Barlow County.

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

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

Given under my official signature and seal, this 6th day of Jan, 1907.

G. W. Nundrick Ordinary Barlow County.

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

FOR THOSE ALREADY ENROLLED.

INDIGENT  
SOLDIER'S PENSION  
1906.

Name J. L. Polk  
County Barlow  
Co. 60th Regiment  
WARRANT ISSUED  
JAN 24 1906  
JOHN W. LINDSEY  
Commissioner of Pensions  
WARRANT HANDED TO

FOR THOSE ALREADY ENROLLED.

INDIGENT  
SOLDIER'S PENSION  
1907.

Name J. L. Polk  
County Barlow  
Co. 60th Regiment  
WARRANT ISSUED  
JAN 24 1907  
JOHN W. LINDSEY  
Commissioner of Pensions  
WARRANT HANDED TO

of 60.00 per year that his physical condition is as follows: Has Inflammatory Rheumatism

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 6th day of Jan, 1906. W. H. Andrews Ordinary.

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this 6th

day of Jan, 1906.

W. H. Andrews  
Ordinary Barlow County.

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

of 60.00 per year; that his physical condition is as follows: He is disabled from Inflammatory Rheumatism

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 6th day of Jan, 1907. W. H. Andrews Ordinary.

State of Georgia,

Barlow County.

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

Given under my official signature and seal this 6th

day of Jan, 1907.

W. H. Andrews  
Ordinary Barlow County.

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

Pursuer officer  
10/16/15

Applicant fails  
to report this appli  
cation by testimony

W. S. ...  
Came by ...

Potts, E. A. Barlow Co.

Dec 1915  
No. 10/16-1915

**Confederate  
Soldier's Application.**

UNDER ACT 1910.

County Barton  
Name E. F. Potts  
Company I  
Regiment 1st Va.  
Approved \_\_\_\_\_

J. W. LINDSEY,  
Commissioner of Pensions

CHAR. P. BYRD, State Printer, Atlanta.

10/16-1915

Name: *L. H. Harris*  
 Company: *I*  
 Regiment: *1st Va.*  
 Approved: \_\_\_\_\_  
 J. W. LINDSEY,  
 Commissioner of Pensions  
 CHAR. F. BYRD, State Printer, Atlanta.

*10/8-1915*

# APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

## Questions for Applicants to Answer.

STATE OF GEORGIA,

*Bartow* County.

*E. F. Potts* 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). *E. F. Potts, Bartow County Ga. Dist. No. 2.*
2. How long and since when have you been a continuous resident citizen of this State? *have lived in Georgia about 61 years all my life*
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). *1864, Kingston Co. Va. 402d Regt. Inf.*
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). *about June 1865*
6. When and where was your Company and Regiment surrendered or discharged from the Service? *May 12th 1865, at Kingston Va.*
7. Were you actually present with your Command when it was surrendered or discharged? *yes*
8. If you were not actually present, state specifically and clearly where you were.

- a. Where was your Command when you left it? *4*
- b. When did you leave the Command? *11*
- c. For what cause did you leave? *11*
- d. By whose authority did you leave? *11*
- e. For how long was your leave granted? In what way?
- f. Why did you not return to your Command after leave expired? *11*
- g. In what way were you prevented? *11*
- h. What effort did you make to return? *11*
- 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? *11*

9. What property of every description was owned, in the use, possession and control of yourself and the cash value on the 4 Nov. 1908? (Make list by items and value, and where situated.)  
*Had none at all of any kind*

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

11. What property of any description of any kind and of any value now owned and in the use, possession and control of yourself and its cash value? (Make itemized list).  
*Have no property of any kind*

12. What annual or monthly income or earnings of yourself and the source derived have you? *nothing*

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 *23* day of *Apr* 1915  
*E. F. Potts* Ordinary  
 of *Bartow* County.

*Bureau Office*  
*10/8-1915*  
*Approved for*  
*Confederate Soldiers*  
*Commissioner of Pensions*

*Confederate*  
*Approved*  
*10/8-1915*

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

County: *Bartow*  
 Name: *E. F. Potts*  
 Company: *I*  
 Regiment: *1st Va.*  
 Approved: \_\_\_\_\_

J. W. LINDSEY,  
 Commissioner of Pensions  
 CHAR. F. BYRD, State Printer, Atlanta.

*10/8-1915*

d. By whose authority did you leave? *11*  
e. For how long was your leave granted? In what way? *11*  
f. Why did you not return to your Command after leave expired? *11*  
g. In what way were you prevented? *11*  
h. What effort did you make to return? *11*  
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? *11*  
9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value, and where situated)  
*Had none at all of any kind*

10. What property of any kind have you disposed of and for what purpose since 4 Nov 1908. To whom and for what price? *None at all*  
11. What property of any kind, and of any value now owned and in the use, possession and control of yourself and its cash value? (Make itemized list)  
*Have no property of any kind*  
12. What annual or monthly income or earnings of yourself and the source derived have you? *nothing*  
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 *23* day of *Sept* 1915  
*W. R. Anderson* Ordinary  
of *Bartow* County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

*Gordon* County.

*A. J. Bell* of said State and County is hereby presented as a witness in support of the application of *E. F. Potts* 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? *A. J. Bell Rydals, R.H.D. #2 Gordon County*
2. How long and since when have you known *E. F. Potts* the applicant? *Have known him for fifty years*
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? *Bartow County, all his life*
4. When, where and in what Company and Regiment did *E. F. Potts* enlist during war from 1861 to 1865? (Give date and place). *Do not know*
5. How did you obtain your information of this Service?
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *Do not know*
7. When and where was his Command surrendered or discharged (give date and place). *Do not know*
8. Were you personally present at the Surrender? *Yes*
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender?
11. If not where was he and how came him there? *Do not know whether he was with his own Company but do know that he surrendered at Kingston 14*
12. When did he leave his Command? *Do not know* Where was his Command when he left? *Do not know* for what cause did he leave? *Do not know*  
By whose authority did he leave \_\_\_\_\_ and how long was he granted leave? \_\_\_\_\_ How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
13. In what way was he prevented from returning to his Command?
- How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner *no* If so, when and where? \_\_\_\_\_ In what prison was he held? \_\_\_\_\_ and when released

Sworn to and subscribed before me, this the *25* day of *Oct* 1915  
*W. R. Anderson* Ordinary  
of *Gordon* County

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

Sworn to and subscribed before me, this the \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_  
\_\_\_\_\_  
Ordinary,  
County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

*Bartow* County.

I, *W. R. Anderson* Ordinary of said County, certify that I know the applicant *E. F. Potts* for Pension is the person he represents himself to be and resides in said County. That I also know *A. J. Bell* the witness swearing to the service and \_\_\_\_\_ who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of *E. F. Potts* shows that his *gross* value for tax is in 1908 \$ *72* for 1909 \$ *71* for 1910 \$ *99* for 1911 \$ *108* for 1912 \$ *51* for 1913 \$ *85* for 1914 \$ *45* for 1915 \$ *00*  
Sworn under my hand and official seal of office this *8<sup>th</sup>* day of *Oct* 1915  
*W. R. Anderson* Ordinary,  
of *Bartow* County.

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

4. When, where and in what Company and Regiment did E. F. Potts enlist during war from 1861 to 1865? (Give date and place) Do not know

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

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Do not know

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

Do not know

8. Were you personally present at the Surrender? Yes

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

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

11. If not where was he and how came him there? Do not know where he was with his own Company but do know that he surrendered at Kingston

12. When did he leave his Command? Do not know Where was his Command when he left it? Do not know for what cause did he leave? Do not know

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

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

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

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

In what prison was he held? \_\_\_\_\_ and when released

Sworn to and subscribed before me, this the

7th day of Oct 1915 W. R. Rankin Jr. Ordinary.

of Gordon County

3. What disposition was made of the proceeds of the sale?  
8. Was the disposition of this property made in good faith and full values?  
or was it made to obtain a pension?

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

Ordinary,

of \_\_\_\_\_ County.

### ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Gordon County.

I, W. R. Rankin Jr. Ordinary of said County, certify that I know the applicant E. F. Potts for Pension is the person he represents himself to be and resides in said County. That I also know H. J. Bell the witness swearing to the service and W. R. Rankin Jr. who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of E. F. Potts shows that his property value for tax is in 1908 \$ 75m for 1909 \$ 71 for 1910 \$ 99 for 1911 \$ 108 for 1912 \$ 81 for 1913 \$ 85 for 1914 \$ 45 for 1915 \$ 60

Sworn under my hand and official seal of office this 8th day of Oct 1915

W. R. Rankin Jr. Ordinary,  
of Gordon 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 affidavits of freeholders unnecessary.

**DISAPPROVED:**

Potts, E. F.

YEAR 1915 W. R. Rankin Jr.

W. R. Rankin Jr. a resident of Georgia all my life, 69 years.

W. R. Rankin Jr. 1864, Kingston, Ga.

Rankin

Company I, 40th Georgia Regiment

NAME OF THE MAN WHO SURRENDERED

W. R. Rankin Jr.

W. R. Rankin Jr.

W. R. Rankin Jr.

W. R. Rankin Jr. May 12, 1865 at Kingston, Georgia

W. R. Rankin Jr. IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

W. R. Rankin Jr. DIED, WHEN AND WHERE?

W. R. Rankin Jr. BURNED?

W. R. Rankin Jr. WITNESSES: A. J. Bell - present with applicant at surrender.

No date.

OFFICE OF  
W. R. RANKIN, ORDINARY  
GORDON COUNTY  
CALHOUN, GA.

GEORGIA, GORDON COUNTY.

I, W. R. Rankin Jr. Ordinary in and for said County, hereby certify that A. J. Bell, sworn by me in support of the application of E. F. Potts of Bartow County, Georgia, for pension, is of trustworthy character and that his statements are entitled to full faith and credit.

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

Witness my hand and seal of office, this 8th day of October 1915.

W. R. Rankin Jr.  
Ordinary Gordon County, Ga.

RANK:

COMPANY AND REGIMENT: Company I, 40th Georgia Regiment

NAME OF CAPTAIN AND COLORIST:

WITNESS:

DATE OF DEATH:

PLACE:

WHEN AND WHERE BORN: May 12, 1865 at Kingston, Georgia

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: A. J. Bell - present with applicant at  
surrender.  
No date.

OFFICE OF  
W. R. RANKIN, ORDINARY  
GORDON COUNTY  
CALHOUN, GA.

GEORGIA, GORDON COUNTY.

I, W. R. Rankin Jr. Ordinary in and for said County, hereby certify that A. J. Bell, sworn by me in support of the application of E. F. Potts of Bartow County, Georgia, for pension, is of trustworthy character and that his statements are entitled to full faith and credit.

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

Witness my hand and seal of office, this 5th day of October 1915.

W. R. Rankin Jr.  
Ordinary Gordon County, Ga.

*Parrell, James L.*  
*Rantawick*

No. 107

# INDIGENT PENSION

1895.

(To *Barlow*)

Name *J. C. Parrell*

County *Barlow*

Ground *Indigent Parrell*

*Oct 10 1895*

RICHARD JOHNSON,

Secretary, Executive Department

WARRANT FURNISHED TO

*city*

Geo. W. Harrison State Printer, Atlanta.

## POWER OF ATTORNEY.

STATE OF GEORGIA.

*Barlow*

County

*James L. Parrell*

*James L. Parrell*

to receive and accept for the person above named and request that he send same to me

Witness my hand and seal this 10th day of

*James L. Parrell*

*James L. Parrell*



---

Parvelli & Co. Bartow  
C.K. No. 107  
INDIGENT PENSION  
1895.  
(to Bartow Co. 10/11)  
Name J. C. Powell  
County Bartow  
Ground Indigent Poorly  
Date Jan 1st 1896  
RICHARD JOHNSON,  
Secretary Executive Department  
WARRANT ISSUED TO  
City  
Geo. W. Harrison State Printer, Atlanta.

14. What is your present physical condition and how long have you been in such condition? I am suffering from wounds in left arm, right hip and right leg, and from fractured spine and lumber of my shoulder. And from rheumatism and other ailments.  
15. 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"? I am indigent and poor.  
16. 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? It upon the third state whether you are totally blind and when and where you lost your sight? I am relieved in the body, as above described, and I have no property, effects for income do you possess and its value? I have no property.  
17. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? I owned no property in 1893 or 1894 and no income. In 1893 I claimed for \$4.50, and in 1894 \$1.00, which has been consumed in support of myself.  
18. In what County did you reside during those years and what property did you then return for taxation? Bartow County, Fla.  
19. How were you supported during the years 1893 and 1894? By piddling and the aid of my daughter.  
20. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Do not know. Had no income.  
21. What was your employment during 1893 and 1894? What pay did you receive in each year? Piddling in a small way or trading.  
22. Are you married and have you family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support. No wife, having children aged respectively 20-18 & 16, all girls.

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

Sworn to and subscribed before me this 1st day of Feb. 1895, James C. Powell, Applicant.  
G. W. Anderson, Ordinary, County Bartow.

### QUESTIONS FOR WITNESS

STATE OF GEORGIA.

John P. Davis, Ordinary, County Bartow, do hereby certify that the following questions, depose and answers are follows:

1. What is your name and where does it reside?  
2. Are you acquainted with the applicant, if so how long have you known him?  
3. Where does he reside and how long has he been a resident of this State?  
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this?  
5. Where, when and in what company and regiment did he enlist?  
6. Were you a member of the same company and regiment?  
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?  
8. What property, effects or income has the applicant? (Give your means of knowledge.)

9. How was he supported during the years 1893 and 1894 and what disposition, if any, did he make of same?  
10. What is the applicant's occupation and physical condition?  
11. Is the applicant unable to support himself by labor of any sort, if so, why?

12. How was he supported during the years 1893 and 1894?  
13. What portion of his support for these two years was derived from his own labor or income?

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

Sworn to and subscribed before me, this 1st day of Feb. 1895, John P. Davis, Ordinary, County Bartow.

### AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Bartow County.  
Personally came before me, J. C. Powell, and J. C. Powell, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully James C. Powell, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

Three wounds remain on the right arm on the right hip and right leg, and from fractured spine and lumber of my shoulder. And from rheumatism and other ailments.

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 1st day of Feb. 1895, J. C. Powell, J. C. Powell, J. C. Powell, J. C. Powell.

### ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Bartow County.  
I, John P. Davis, Ordinary in and for said County, hereby certify that the applicant James C. Powell resides in said County, and was a bona fide resident of this State of the first day of January 1894, and that the following are the names 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 herein 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 Bartow County show that applicant returned for taxation in his name in 1893, \$126. dollars of property, and in 1894, \$220. dollars of property.

In my opinion the foregoing claim is made in good faith.  
Witness my hand and seal of office, this 1st day of Feb. 1895, John P. Davis, Ordinary of Bartow 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."

5. When, where and in what company and regiment did he enlist? *Co. B. 1st Regt. Georgia Col. 4th 1861*

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

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? *Served with the 1st Regt. Georgia Col. 4th 1861 until the 1st of June 1862 when he was discharged, and since that time he has been engaged in the same occupation as before, and he was married first time.*

8. What property, effects or income has the applicant? (Give your means of knowledge.) *None at present.*

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

10. What is the applicant's occupation and physical condition? *He is a peddler, and is unable to do any kind of labor to support himself.*

11. Is the applicant unable to support himself by labor of any sort, if so, why? *Yes, on account of wounds and other infirmities.*

12. How was he supported during the years 1893 and 1894? *By the help of his family.*

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

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

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

Sworn to and subscribed before me, this *8th* day of *Oct.* 1895, *J. H. Strange* Witness.

*John P. Davis, Ordinary of Bartow County, Ga.*

*Let M. Francis Jr.*  
*Bartow Co.*

### ORDINARY'S CERTIFICATE

STATE OF GEORGIA.  
*Bartow* County.

I, *W. W. Hendricks*, Ordinary in and for said County, hereby certify that the applicant *James C. Powell* resides in said County, and was a long resident of this State on the 1st day of January 1894, and that the same is true.

I further certify that before answering the foregoing questions, the applicant and each witness took the oath herein 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 *Bartow* County show that applicant returned for taxation in his name in 1893, *\$126.* dollars of property, and in 1894, *\$220.* dollars of property.

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

Witness my hand and seal of office, this *8th* day of *Oct.* 1895.

*W. W. Hendricks* Ordinary  
of *Bartow* 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."

*Rome, Ga. Oct. 16, 1895*

*George, Bartow County.*

*I, John P. Davis, Ordinary in and for said County do hereby certify that John P. Davis, Ordinary in and for said County, is a resident of Bartow County, and is entitled to full faith and credit.*

*John P. Davis, Ordinary of Bartow County, Ga.*

*Georgia*

*In person came before me James C. Powell, who after being sworn says in oath that the property returned for tax 1893 and 1894, was the property of his wife, and that nearly all of said property has been sold to pay purchase money due for it, and the balance has been consumed in the support of his family, and that he now owns no amount of property of any kind whatever, that he has for the last six or seven years been doing a small peddling trade, that he has a license from the Ordinary of Bartow County, Ga. to peddle under the law known as the law allowing disabled Confederate soldiers to peddle without license, that his daughter has taught school some and done other light work to aid him in making a support, that in fact to do justice to himself he is not able to do what little peddling he has done, that he suffers constantly from his wounds received while in the service of the Confederacy.*

*Sworn to and subscribed before me this October 9th 1895*

*W. W. Hendricks Ordinary of Bartow County, Ga.*

*above ankle joint a large fatty tumor on left shoulder joint which has been slowly developing for many years. Extremities numbness comes from time to time. Patient suffers from chronic dyspepsia which has reduced his weight 20 lbs in the last twelve months. Applicant received severe blow upon the head in 1878, following skull surgery, rendering him unable for several years since leaving around*

more on the right a large  
lately formed on left  
shoulder joint which has  
been slowly developing for  
many years. Last autumn  
the shoulder joint came from  
time to time. Affected  
luffer from chronic  
disposition which has caused  
his right arm to be  
lost in the winter. Affected  
seems to be from after  
the head on 1878. In writing  
I will send him  
some clearing around

ing a small peddling traffic; that he has  
a license from the Ordinance of Barlow  
County Ga to peddle under the law known  
as the law allowing disabled Confederate  
soldiers to peddle without license; that his  
daughter has taught school some and done  
other light work to aid him in making  
a support; that in fact to do justice  
to himself he is not able to do what little  
trading he has done that he suffers  
constantly from his wounds received  
while in the service of the Confederacy.

Sworn to and subscribed before me  
this October 9<sup>th</sup> 1878  
G. W. Hendricks, Ordinance of  
Barlow County Ga.

### Georgia Barlow County

In person came James Hollarsen and in  
 oath says that he is personal, acquainted  
with William H. Parr of said County;  
that he has known him personally  
well for nine years; that said William  
H. Parr is physically unable to do  
manual labor of any kind; that  
he has for the last four years been  
suffering very fast; that he has no  
property or income to support him;  
that his wife work a small crop and  
pick cotton in the fall, myself and  
others either in order to get them some  
clothing and other necessities and  
for the support of William H. Parr,  
their father and also for their invalid  
and paralyzed mother; that said  
Parr has no property or income, whatever;  
that this affidavit has no interest in  
the recovery of a person by this applicant.

Sworn to and subscribed  
before me, April 16<sup>th</sup> 1878  
G. W. Hendricks  
Ordinance Barlow County

We the undersigned Citizens are well  
acquainted with James C. Powell he  
having lived among us in our town of  
Adairsville Barlow Co. Ga. We know his  
physical and financial conditions, and  
we hereby certify that the facts stated  
in the foregoing affidavit are true.

H. H. Williams, Petitioner & Respondent

J. C. Powell

J. C. Powell

J. C. Powell  
J. C. Powell  
J. C. Powell  
J. C. Powell  
J. C. Powell

J. C. Powell

N. Parr is physically unable to do  
 manual labor of any kind, that  
 he has for the last two years been  
 & riding very fast; that he has no  
 property or income to support him;  
 that his girls work a small crop and  
 pick cotton in the fall, <sup>for</sup> myself and  
 others & then in order to get them some  
 clothing and other necessities and  
 for the support of William N. Parr,  
 their father and also for their invalid  
 and paralyzed mother, that said  
 Parr has no property or income, whereas  
 that this affiant has no interest in  
 the recovery of a person by this applicant.

Sworn to and Subscribed

Dec 12 (1) no. April 16<sup>th</sup> 1893 James H. Collins

G. W. Newnack

Ordinary Danville Va

in the foregoing affidavit are true

by  
 H. H. Williams, Notary & Minister of  
 the Gospel

James H. Collins  
 J. W. Newnack

J. J. Bennett

J. B. Green  
 J. B. Green  
 A. P. Green  
 Frank B. Green  
 Etc. &c.

Notary  
 J. B. Green  
 907 Dayton

POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow* County,

*Israel Prather* of *Barlow* County,

hereby authorizes

to receive and accept for the person allowed and request that he read same to

Witness my hand and seal this *14* day of *April* 1895.

Executed in presence of

*Wm. D. Dismick* )  
*Wm. D. Dismick* )  
*Ordinary Barlow* )  
*County Ga* )

*Prather, Israel*  
*Barlow Co*  
No. 108

INDIGENT PENSION  
1895.

Name *Israel Prather*

County *Barlow*

Ground *Age, Infirmed & Poor*  
*July 1st*  
*April 1st* 1895

RICHARD JOHNSON,

Secretary, Executive Department.

WARRANT HANDED TO

*1 City*  
Geo. W. Johnson, State Printer, Atlanta.

OF ATTORNEY.

of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

County of *Barlow*  
Ground *Ag. Inf. & Co. Party*  
*Samuel*  
*April 11* - 1895  
RICHARD JOHNSON,  
Secretary Executive Department  
WARRANT DATED TO  
*Atty*  
Geo. W. Johnson, State Printer, Atlanta

POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow* County,

*Amzel Prather* hereby authorize  
*J. J. Prather* of *Acworth* Go

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

at *Acworth* by *April* 1895.  
Witness my hand and seal this *11* day of *April* 1895.

Executed in presence of

*St. James* *Amzel Prather*  
*Wm. J. Prather*  
*Ordinary Barlow*  
*County Ga*

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

*Barlow* County.

*Amzel Prather* of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) *Amzel Prather, 1st Mo. Acworth, though in Barlow Co. Ga. Near Acworth Co. Ga.*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *All my life, since 8 years old.*
3. When and where were you born? *May 6, 1866. Barlow Co. Ga.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Confederate*
5. When and where did you enlist? *Spring 1862, James' Black, S.C.*
6. In what company and regiment did you enlist? *Co. B, 8th Ga. Bat. Vol.*
7. How long did you remain in that company and regiment? *About 8 years.*
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? *About 2 years*
10. When, where, and under what circumstances were you discharged from service? *I was sent home as sick & feeble Spring 1864. I was never able to return to my command of troops.*
11. What is your present occupation? *Farming*
12. How much can you earn per annum by your own exertions or labor? *Can't earn anything*
13. What has been your occupation since 1865? *Farming*
14. What sum would be necessary for your support for the pension year, and how much are you able to contribute thereto either in labor or income? *About \$100. Can't earn any*
15. What is your present physical condition and how long have you been in such condition? *I am crippled, Rheumatism in my back. Pains lots of eye & ear. I have been in this condition about five or six years.*
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"? *Partly of each ground*
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 have been in such condition that I could not support myself for five or six years. I have been supported since the missing of my bottle. My eyes have been bad more than 18.*
18. What property, effects or income do you possess? *Have no property*
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. To what County did you reside during these years and what property did you then return for taxation?

*Barlow County Ga.* *None*

21. How were you supported during the years 1893 and 1894 - By my *sister*

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* *2nd Nothing*

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

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

*Give age and sex of children and their means of support. Have a wife. Have two daughters living with me. One 15 & 2. Two of my sons live near me. They have families. They live by their labor.*

INDIGENT PENSION

1895.

Name *Amzel Prather*  
County *Barlow*

Ground *Ag. Inf. & Co. Party*  
*Samuel*  
*April 11* - 1895

RICHARD JOHNSON,

Secretary Executive Department

WARRANT DATED TO

*Atty*

Geo. W. Johnson, State Printer, Atlanta

No. 108



*Prather, Ansel*  
*Barlow, C.*  
 No. 108  
**INDIGENT PENSION**  
**1895.**  
 Name *Ansel Prather*  
 County *Barlow*  
 Ground *Age, Infirmary, Blind*  
*April 19th*  
 1895  
 RICHARD JOHNSON,  
 Secretary Executive Department  
 WARRANT ISSUED TO:  
*Atty*  
 Geo. W. Thomas, Notary Public, Atlanta

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"? *Porty of each ground*  
 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 have been in such condition that I could not support myself for five or six years. I have been subjected to the loss of the missing the eye bottle. My eyes have been too much injured*  
 18. What property, effects or income do you possess? *Have no property*  
 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. At what County did you reside during those years and what property did you then return for taxation? *Barlow County Ga.*  
 21. How were you supported during the years 1893 and 1894? *By my sons*  
 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*  
 23. What was your employment during 1893 and 1894? What duty 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. *Have a wife. Have two daughters living with me. One 18 & 2. Two of my sons live near me. They have families. They live by their labor.*

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

Sworn to and subscribed before me this *19th* day of *April*, 1895, by *G. W. Hendricks* Ordinary of *Barlow* County, *Ansel Prather* Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, *Barlow* County.  
*James Chadwick* of said State and County, having been presented as a witness in support of the application of *Ansel Prather* 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? *James Chadwick, Greenville Barlow County Ga.*  
 2. Are you acquainted with *Ansel Prather* the applicant, if so how long have you known him? *I have known him about forty years*  
 3. Where does he reside and how long has he been a resident of this State? *In Barlow County Ga. near Newth. Since I have known him*  
 4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *I do. I served in the same Battalion with him*  
 5. When, where and in what company and regiment did he enlist? *1861 Spring James Island S.C. in Co. D. 8th Battalion of 2nd Vol*  
 6. Were you a member of the same company and in what service? *Yes same Battalion*  
 7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *About two years. He was a good soldier. He was sent home as sick & maimed just before we left Barlow Ga in Spring 1864.*  
 8. What property, effects or income has the applicant? (Give your means of knowledge.)

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same?  
 10. What is the applicant's occupation and physical condition?  
 11. Is the applicant unable to support himself by labor of any sort, if so, why?  
 12. How was he supported during the years 1893 and 1894?  
 13. What portion of his support for these two years was derived from his own labor or income?  
 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?

15. What interest have you in the recovery of a pension by this applicant? *None*  
 Sworn to and subscribed before me, this *19th* day of *April*, 1895, by *James Chadwick* *more* Applicant.  
*G. W. Hendricks* Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, *Barlow* County.  
 Personally came before me *F. R. Colthoun* and *O. H. Buford*, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully *Ansel Prather* applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

*Inguinal Hernia, very defective eye sight almost blind. Very little use of lower limbs caused from sickness*

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 *19th* day of *April*, 1895, by *G. W. Hendricks* Ordinary of *Barlow* County, *F. R. Colthoun* and *O. H. Buford*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, *Barlow* County.  
 I, *G. W. Hendricks* Ordinary in and for said County, hereby certify that the applicant *Ansel Prather* resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, *James Chadwick* and *John Dacuter* 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 herein 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 digest 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 *19th* day of *April*, 1895, by *G. W. Hendricks* Ordinary of *Barlow* County.

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



# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

*Bartow* County.

I, *G.W. Hendricks* Ordinary in and for said County, hereby certify that the applicant *Ansel Prather* 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: *James Bhadwick and John Rauter* 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 *Bartow* 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 *18th* day of *April* 1894.  
*G.W. Hendricks* Ordinary  
of *Bartow* 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."

6. Were you a member of the same company and for how long?
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?
8. What property, effects or income has the applicant? (Give your means of knowledge.)
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same?
10. What is the applicant's occupation and physical condition?
11. Is the applicant unable to support himself by labor of any sort, if so, why?
12. How was he supported during the years 1893 and 1894?
13. What portion of his support for these two years was derived from his own labor or income?
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?

15. What interest have you in the recovery of a pension by this applicant? *None*  
Sworn to and subscribed before me, this *18th* day of *April* 1894, by *Ansel Prather* and *James Bhadwick* and *John Rauter* Applicants.

## POWER OF ATTORNEY.

STATE OF GEORGIA.

*Bartow* County. I, *Ansel Prather* hereby authorize *G.W. Hendricks* of *Bartow* County, Ga.

to receive and receipt for the pension paid hereon and request that he remit same to me by *check* at *Bartow* Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *15th* day of *January* 1897.

Executed in presence of *James Bhadwick* and *John Rauter* [L.S.]

## POWER OF ATTORNEY.

State of Georgia.

*Bartow* County. I, *Ansel Prather* hereby authorize *G.W. Hendricks* of *Bartow* County, Ga.

to receive and receipt for the pension paid hereon and request that he remit same to me by *check* at *Bartow* Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *24th* day of *January* 1898.

Executed in presence of *James Bhadwick* and *John Rauter* [L.S.]

INDIGENT  
Soldier's Pension.  
1897.

Name *Ansel Prather*  
County *Bartow*

RICHARD JOHNSON,  
Commissioner of Pensions

WARRANT HANDLED TO  
*G.W. Hendricks*

NO. 2301  
JAN 18 1897

(For Those Already Enrolled.)

INDIGENT  
SOLDIER'S PENSION,  
1898.

Name *Ansel Prather*  
County *Bartow*

RICHARD JOHNSON,  
Commissioner of Pensions

WARRANT HANDLED TO  
*G.W. Hendricks*

NO. 2301  
JAN 18 1898

*Prather, Ansel*  
*Barlow G.*  
 ACT OF 18 DEC. 1894.  
 (For Those Already Enrolled.)  
 No. *147*  
 INDIGENT  
 Soldier's Pension.  
**1897.**  
 Name *Ansel Prather*  
 County *Barlow*  
 1897.  
*2/2*  
 RICHARD JOHNSON,  
 Commissioner of Pensions.  
 WARRANT HANDLED TO  
*G. W. H.*  
 REG. W. HARRISON, STATE PRINTER, ATLANTA.

*Prather, Ansel*  
*Barlow G.*  
 ACT OF 18 DEC. 1894.  
 (For Those Already Enrolled.)  
 No. *341/1894*  
 INDIGENT  
 SOLDIER'S PENSION,  
**1898.**  
 Name *Ansel Prather*  
 County *Barlow*  
 1898.  
 WARRANT ISSUED  
 RICHARD JOHNSON,  
 Commissioner of Pensions.  
 WARRANT HANDLED TO  
*G. W. H.*  
 REG. W. HARRISON, STATE PRINTER, ATLANTA.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Barlow* County.

Personally appears *Ansel Prather* 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 war of 1861-1865* 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 *one year* in Company *8*, of *8th* *Regt* of *Volunteers*; that his physical condition is as follows: *Suffering from Spinal Affection, Rheumatism and Deafness and from old 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, *13th* day of *January* 1897, by *G. W. Hendricks* Ordinary.

STATE OF GEORGIA,

*Barlow* County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *Ansel Prather* 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 *15th* day of *January* 1897, by *G. W. Hendricks* Ordinary *Barlow* County.

NOTE.—The blank space must be filled.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

*Barlow* County.

Personally appears *Ansel Prather* 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 birth of 3 years*; 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 *nearly 3 yrs* in Company *6*, of *8th* *Regt* of *Volunteers*; that his physical condition is as follows: *Paralysis of left side and hip*

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

of the value of *220000* 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, *13th* day of *January* 1898, by *G. W. Hendricks* Ordinary.

State of Georgia,

*Barlow* County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *Ansel Prather* 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 *15th* day of *January* 1898, by *G. W. Hendricks* Ordinary *Barlow* County.

NOTE.—The blank space must be filled.

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, the

13th day of *January* 1897. *Amel Prather*  
*G.W. Hendricks* Ordinary.

STATE OF GEORGIA,

*Barlow* County.

I, *G.W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *Amel Prather* 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 15th day of *January* 1897.

*G.W. Hendricks*  
Ordinary *Barlow* County.

Note - The blank space must be filled.

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

21st day of *January* 1898. *Amel Prather*  
*G.W. Hendricks* Ordinary.

State of Georgia,

*Barlow* County.

I, *G.W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *Amel Prather* 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, 21st day of *January* 1898.

*G.W. Hendricks*  
Ordinary *Barlow* County.

Note - The blank space must be filled.

### POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow* County.

*Amel Prather* hereby authorize *George W. Hendricks* of *Cartersville Ga* to receive and receipt for the pension allowed and request that he remit same to me at *Cartersville Ga* by *check*

Witness my hand and seal, this 11th day of *January* 1902.  
*Amel Prather* [L.S.]  
*mark*

Executed in presence of

( FOR THOSE ALREADY ENROLLED )

No. 39

INDIGENT

SOLDIER'S PENSION

1902.

Name *Amel Prather*

County *Barlow*

Co. *E. 1st Regt S.C.*

WARRANT ISSUED

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

*Amel Prather*

*mark*

### POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow* County.

*Amel Prather* hereby authorize *George W. Hendricks* of *Cartersville Ga* to receive and receipt for the pension allowed and request that he remit same to me at *Cartersville Ga* by *check*

Witness my hand and seal, this 11th day of *January* 1902.  
*Amel Prather* [L.S.]  
*mark*

Executed in presence of

*George W. Hendricks*  
*Barlow Ga*

( FOR THOSE ALREADY ENROLLED )

No. 3715

INDIGENT

SOLDIER'S PENSION

1903.

Name *Amel Prather*

County *Barlow*

Co. *E. 1st Regt S.C.*

WARRANT ISSUED

1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

*Amel Prather*

*mark*

CODE SECTION 1501  
(FOR THOSE ALREADY ENROLLED.)

No. 39

INDIGENT

SOLDIER'S PENSION

1902.

Name *Ansel Proctor*  
County *Bartow*  
Co. *C*  
1834

WARRANT ISSUED

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO

JOHN W. LINDSEY, Commissioner of Pensions.

No. 39

CODE SECTION 1501  
(FOR THOSE ALREADY ENROLLED.)

No. 3715

INDIGENT

SOLDIER'S PENSION

1903.

Name *Ansel Proctor*  
County *Bartow*  
Co. *C*  
1834

WARRANT ISSUED

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO

JOHN W. LINDSEY, Commissioner of Pensions.

No. 39

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

*Bartow* County.)

Personally appears *Ansel Proctor* of *Bartow* County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of *fall* 1834; that he is 76 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 *2 yrs* in Company *C*, of *8th Regt* of *Ca Vol Infantry*; that his physical condition is as follows: *Nearly blind, lile and feet to be ble can scarcely walk*

that his property consists of the following items:

of the value of *1* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this *1st* day of *Jan* 1902, *Ansel Proctor* Ordinary *mark*

STATE OF GEORGIA,

*Bartow* County.)

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

Given under my official signature and seal, this *9th* day of *Jan* 1902, *G. W. Hendricks* Ordinary *Bartow* County.

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

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

*Bartow* County.)

Personally appears *Ansel Proctor* of *Bartow* County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of *fall* 1834; that he is 77 years old and by occupation a *nothing now* 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 *2 yrs* in Company *C*, of *8th Regt* of *Ca Vol Infantry*; that his physical condition is as follows: *very frail - nearly blind - feet to be ble*

that his property consists of the following items:

of the value of *1* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of *Bartow* county been allowed a pension for the year 1912.

Sworn to and subscribed before me, this *1st* day of *Jan* 1903, *Ansel Proctor* Ordinary *mark*

STATE OF GEORGIA,

*Bartow* County.)

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

Given under my official signature and seal, this *9th* day of *Jan* 1903, *G. W. Hendricks* Ordinary *Bartow* County.

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

condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of *Barlett* county been allowed a pension for the year 1902 *6.00*

Sworn to and subscribed before me this the 10th day of May 1903 } *Abdel X Prother*  
*G. W. Whiricks* Ordinary *mark*

STATE OF GEORGIA.

County of Butte  
I, Arthur W. Hines, Ordinary of said County,  
do hereby certify that I am well acquainted with Amos C. Prother  
the applicant in the foregoing affidavit, and am well satisfied that the statements made by  
him in his said affidavit are true, and I know he is the individual he represents himself to  
be and that he resides in this County.

Given under my official Signature and seal, this 9th  
day of July, 1904  
Jay C. Williams  
Ordinary Prothonotary County Franklin

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

Note: The blank spaces must be filled with the correct answer. The blank spaces must be filled with the correct answer.

## POWER OF ATTORNEY.

STATE OF GEORGIA,  
Darlow COUNTY. }  
 I, Amos Brother hereby authorize  
Geo. H. Hicks of Cartersville Ga  
 to receive and receipt for the pension allowed, and request that he remit same to  
me at Decatur Ga  
 by OK  
 WITNESS my hand and seal, this 5 day of Jan 1905,  
Amos Brother [L. S.]  
 Executed in the presence of  
Geo. H. Hicks man

Name *Amos (Dexter)*  
County *Barren*  
No. *2*  
Regiment *Bot. 1st Cav. B.*  
WARRANT ISSUED  
FEB 7 1905.  
JOHN W. LINDSEY,  
Commissioner of Prisons.  
WARRANT FILED TO

no late

*Prather, Ansel*  
 CODE SECTION 1284.  
 (FOR THOSE ALREADY ENROLLED.)  
 No. 3282  
 INDIGENT  
**SOLDIER'S PENSION**  
**1904.**  
 Name *Ansel Prather*  
 County *Bartow*  
 Co. *E* Regiment *8th*  
*Co. B. 8th Regt.*  
 WARRANT ISSUED  
 1/19 1904.  
 JOHN W. LINDSEY,  
 Commissioner of Pensions.  
 WARRANT FORWARDED TO  
*City*  
 JOHN W. HARTSON, State Printer, ALBANY.

*Prather, Ansel*  
 CODE SECTION 1284.  
 (FOR THOSE ALREADY ENROLLED.)  
 No. 3286  
 INDIGENT  
**SOLDIER'S PENSION**  
**1905.**  
 Name *Ansel Prather*  
 County *Bartow*  
 Co. *E* Regiment *8th*  
*Co. E. 8th Regt.*  
 WARRANT ISSUED  
 FEB 7 1905.  
 JOHN W. LINDSEY,  
 Commissioner of Pensions.  
 WARRANT FORWARDED TO  
*City*  
 JOHN W. HARTSON, State Printer, ALBANY.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,  
*Bartow* County.

Personally appears *Ansel Prather* 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 *6* day of *Feb* 18*26*, that he is *78* years old and by occupation a *none*, that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served for the term of *2 yrs* in Company *E* of *8th* Regiment of *Vol. Bat* *Infantry*, that his physical condition is as follows: *Old and blind and very feeble*

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the *8th* day of *Jan* 1904. *Ans. x Prather*  
*Geo. H. Hendricks* Ordinary.

STATE OF GEORGIA, *Bartow* County.

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

Given under my official signature and seal, this day of *Jan* 1904. *Geo. H. Hendricks*  
 Ordinary *Bartow* County.

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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,  
*Bartow* County.

Personally appears *Ansel Prather* 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 *6* day of *Feb* 18*26*, that he is *78* years old and by occupation a *none*, that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served for the term of *2 yrs* in Company *E* of *8th* Regiment of *Vol. Bat* *Infantry*, that his physical condition is as follows: *Old and blind and very feeble*

that his property consists of the following items:

of the value of *4444* Dollars, I am now earning, by my labor, *4444* Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the *8th* day of *Jan* 1905. *Ans. x Prather*  
*Geo. H. Hendricks* Ordinary.

STATE OF GEORGIA, *Bartow* County.

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

Given under my official signature and seal, this day of *Jan* 1905. *Geo. H. Hendricks*  
 Ordinary *Bartow* County.

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

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

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

Sworn to and subscribed before me, this 1st day of Jan, 1904. Amel X Prather Ordinary.

### STATE OF GEORGIA,

Bartow County, I, Geo H. Andrews Ordinary of said County,

do certify that I am well acquainted with Amel Prather 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 1st day of Jan, 1904.

Geo H. Andrews Ordinary Bartow County.

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

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

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

Sworn to and subscribed before me, this 1st day of Jan, 1905. Amel X Prather Ordinary.

### STATE OF GEORGIA,

Bartow County, I, Geo H. Andrews Ordinary of said County,

do certify that I am well acquainted with Amel Prather 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 1st day of Jan, 1905.

Geo H. Andrews Ordinary Bartow County.

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

### POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County, I, Amel Prather hereby authorize Geo H. Andrews of Cartersville Ga to receive and receipt for the pension allowed, and request that he remit same to me at Alworth Ga by me.

Witness my hand and seal, this 1st day of Jan, 1904. Amel Prather [L.S.]

Executed in the presence of

### POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County, I, Amel Prather hereby authorize Geo H. Andrews of Cartersville Ga to receive and receipt for the pension allowed, and request that he remit same to me at Cartersville Ga by me.

Witness my hand and seal, this 1st day of Jan, 1907. Amel Prather [L.S.]

Executed in presence of

FOR THOSE ALREADY ENROLLED

### INDIGENT SOLDIER'S PENSION 1906.

Name Amel Prather  
County Bartow  
Co. C  
Regiment 1st

WARRANT ISSUED

Jan 29 1906.

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDLED TO

FOR THOSE ALREADY ENROLLED

### INDIGENT SOLDIER'S PENSION 1907.

Name Amel Prather  
County Bartow  
Co. C  
Regiment 1st

WARRANT ISSUED

Jan 29 1907.

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDLED TO

FOR THOSE ALREADY ENROLLED.

INDIGENT  
SOLDIER'S PENSION  
1906.

Name *Amos Prather*  
County *Barlow*  
Co. *E* Regiment *5th*

WARRANT ISSUED

29

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDED TO

FOR THOSE ALREADY ENROLLED.

INDIGENT  
SOLDIER'S PENSION  
1907.

Name *Amos Prather*  
County *Barlow*  
Co. *E* Regiment *5th*

WARRANT ISSUED

29

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDED TO

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

*Barlow* County.

Personally appears *Amos Prather* of *Barlow* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18... that he is ... 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 ... in Company ... of ... Regiment of ... that his physical condition is as follows: *So that he is unable to do any labor at all from old age*

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this ... day of ... 1906, *Amos Prather* Ordinary.

State of Georgia,

*Barlow* County.

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

Given under my official signature and seal, this ... day of ... 1906, *Wm. H. Lindsey* Ordinary *Barlow* 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,

*Barlow* County.

Personally appears *Amos Prather* of *Barlow* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18... that he is ... 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 ... in Company ... of ... Regiment of ... that his physical condition is as follows: *He is very feeble and is unable to do any work at all*

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this ... day of ... 1907, *Amos Prather* Ordinary.

State of Georgia,

*Barlow* County.

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

Given under my official signature and seal, this ... day of ... 1907, *Wm. H. Lindsey* Ordinary *Barlow* County.

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



that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 1st day of July, 1906. Amel Prother  
Ordinary.

### State of Georgia,

Barlow County.

I, W. H. Hudnicks Ordinary of said County, do certify that I am well acquainted with Amel Prother 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 1st day of July, 1906.

W. H. Hudnicks  
Ordinary Barlow County.

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

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 1st day of July, 1907. Amel Prother  
Ordinary.

### State of Georgia,

Barlow County.

I, W. H. Hudnicks Ordinary of said County, do certify that I am well acquainted with Amel Prother 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 1st day of July, 1907.

W. H. Hudnicks  
Ordinary Barlow County.

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

NAME, Prother, Amel

1876

BORN AND DIED, BORN Feb 6, 1876 - Alabama

RESIDENT, BORN Feb 6, 1876 - James Island, S. C.

RELIGION, BORN Feb 6, 1876 - 4th Meth. S. Vols

DATE OF DEATH, BORN Feb 6, 1876

REMARKS, BORN Feb 6, 1876 - never able to return to S. C.

CAUSE OF DEATH, BORN Feb 6, 1876

RELEASED,

DECEASED, BORN Feb 6, 1876

IF NOT RELEASED AT DEATH, BORN Feb 6, 1876

DIED, BORN AND DIED, BORN Feb 6, 1876

BURIED,

WITNESSES, James Chadwick

No data

P.O.

1896 COUNTY. Barlow

Georgia Personally Came before  
Barlow County, me John Painter of said  
County and after being sworn  
says on oath that he has known personally  
Amel Prother of said County for many years  
and that this said Amel Prother has no property or  
income whatever and has not had any for  
for the last two years that he has been kept  
up and supported by his sons that said  
Amel Prother is quite old and frail  
and is very feeble and his eyes bad, ne-  
flamed and at times he is nearly blind.  
That he is entirely unable to support him-  
self by labor of any sort.  
John Painter

Sworn to and subscribed before me  
this April 18<sup>th</sup> 1895  
W. H. Hudnicks  
Ordinary

NAME OF CAPTIVE AND OF VENDOR.

WOUNDED. became ill in the spring of 1864 - never able to return to my command.

CAPTURED. WHEN AND WHERE.

RELEASED.

WHEN AND WHERE CAPTURED.

IF NOT PRESENT AT CAPTURE, WHEN AND WHERE.

DIED, WHEN AND WHERE.

BURIED.

WITNESSES. James Chadwick

No data

P.O.

1 96 COUNTY. Section

scarcely and after being sworn  
says on oath that he has known personally  
Amel Prather of said Cavalry <sup>for many years</sup> and that  
the said Amel Prather has no property or  
income whatever and has not had any for  
for the last two years that he has been kept  
up and supported by his sons that said  
Amel Prather is quite old and frail  
and is very feeble and his eyes badly, he  
flamed and at times he is nearly blind.  
that he is entirely unable to support him-  
self by labor of any sort.  
John Prather

Sworn to and Subscribed before me  
this April 18<sup>th</sup> 1895  
G. W. L. J. J. J.  
Cromarty

*Presley, John S.*

For *Berlin* County

1926

**Application for Pension  
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

*George H. Presley* Ordinary

For *John S. Presley*

Date of Death *Aug 5* 192*7*

Amount \$ *97.00 (Bal.) \$115.00* *full*

Approved and ordered paid *OK*

*John W. Clark*

29 Nov 27 JOHN W. CLARK

Commissioner of Pensions

*Paid*

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.

Approved and ordered paid *97*  
*John W. Clark*  
 39 Nov 27  
 JOHN W. CLARK  
 Commissioner of Pensions  
*Paid*

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

OFFICE PHONE 85  
 RESIDENCE PHONE 12

A. L. ISBELL, M. D.  
 SHELLOVE BLDG  
 ALBERTVILLE, ALA  
 1-1927

*8115*  
~~*8115*~~ *8115* *my bill*  
~~*8115*~~ *8115* *my bill*  
*A. L. Isbell M.D.*  
 Sworn to and subscribed before me,  
 this 31st day of August, 1927.

*Mrs. D. F. Ginnells -*  
*Notary Public.*

The above and foregoing account is rendered for services in the last illness of John T. Presley, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me, this 16 day of Sept. 1927.

*Mrs. D. F. Ginnells -*  
*Notary Public.*

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

GEORGIA, *Bartow* County. *S. J. Dover*  
 Personally before me, the Ordinary of said County, comes *S. J. Dover* of said County, who after being sworn, on oath says that he knew *John T. Presley* of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred *on or about* County, in this State, on the *5* day of *August* 1927, and that a Pension of *Fifty* \$50.00 Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ *97.50* Bal *116.00* sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me  
*[Signature]* Ordinary *S. J. Dover*  
*[Signature]* County

(Seal of Ordinary)

## CERTIFICATE OF ORDINARY

GEORGIA, *Bartow* County. *S. J. Dover*  
 I, *S. J. Dover* Ordinary of said County, do certify that I personally know *John T. Presley* who is a resident citizen of said County, and that said person of truthful and trustworthy character, entitled to full faith and credit, that I also knew *John T. Presley* while in life and that this was the same person whose name appears on the Pension Roll of *Bartow* County, and was paid a Pension of *50.00* \$200 Dollars in said County for 1926, 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 *5* day of *Sept* 1927  
 (Seal of Ordinary) *[Signature]* Ordinary  
*[Signature]* County

- INSTRUCTIONS
- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
  - 2nd. Each account must be sworn to before the Ordinary, and in the following form: "Do not use the terms 'just true, due, unpaid,' etc. 'The above and foregoing account is rendered for services in the last illness, or for funeral expenses, as the case may be, of who died without owning sufficient property to pay this bill."
  - 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
  - 4th. The completed voucher, this blank and the bills must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
  - 5th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
  - 6th. Return this application, and attached bills, with your final settlement, to the Pension Department.
  - 7th. Ordinary should see that the back of this blank, when folded, is filled out.

<sup>\$113</sup>  
= \$97.50 <sup>\$113</sup> in full  
I sworn to, and subscribed before me,  
this 31st day of August, 1927.

Mrs. D. F. Gummels.  
Notary Public.

The above and foregoing account is rendered for services in the last illness of John T. Presley, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me, this 16 day of Sept. 1927.

Mrs. D. F. Gummels.  
Notary Public.

a Pension of Fifty Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$97.50 Bal  
sworn statements fully and completely ITEMIZED hereto attached \$113 in full

Sworn to and subscribed before me  
W. W. Henderson Ordinary  
Barlow County

S. J. Dancer

(Seal of Ordinary)

### CERTIFICATE OF ORDINARY

GEORGIA, Barlow County

I, W. W. Henderson Ordinary of said County, do certify that I personally know John T. Presley who is a resident citizen of said County, and that said person of truthful and trustworthy character, entitled to full faith and credit that I also knew John T. Presley 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 \$200 Dollars in said County for 1926 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 5 day of Sept 1927  
(Seal of Ordinary) W. W. Henderson Ordinary  
Barlow County

#### INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funeral to make out their accounts in fully itemized form, attaching 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 words 'paid' (true due unpaid) etc." The above and foregoing account is rendered for services in the last illness of John T. Presley 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 thereto, 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. The Ordinary signs pay roll, as Ordinary for the pension and then disburses the money himself and takes receipts.
- 6th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 7th. Ordinary should see that the back of this blank, when folded, is filed out.

*Price, Wm*  
*Barlow Co.*

*Wm Price*  
*06/1911*

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

**Confederate  
Soldier's Application.**

UNDER ACT 1910.

County *Barlow*  
Name *Wm Price*  
Company *A*  
Regiment *4th Regt*

Approved \_\_\_\_\_

*E.P.C.*

J. W. LINDSEY,  
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

*Wm Price*

County W. M. O. W.  
 Name W. M. Price  
 Company Co. Youngs  
 Regiment Youngs Bat  
 Approved \_\_\_\_\_  
 J. W. LINDSEY,  
 Commissioner of Pensions  
 CHAS. F. HYDE, State Printer, Atlanta.  
 11/30/10

# APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

## Questions for Applicants to Answer.

STATE OF GEORGIA.

W. M. Price County Barlow 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? Price, Adamsville Barlow County
2. How long and since when have you been a continuous resident citizen of this State? I have lived in Ga. 60 years
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. April 1863. 6th Co. Va. 60th Va. Heavy Artillery
5. How long did you remain in the actual Military Service with said Company and Regiment? Give date of discharge. I was in this Co. & Bat. till Barlow Ga. 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? My wife sent to home about 20 days before the surrender of Richmond we must stop and live somewhere
7. Were you actually present with the Command when it was surrendered or discharged? I was present at the battle and capture of Petersburg
8. If you were not actually present, state specifically and clearly where you were. Where was your Command when you left it? We were paroled here for twenty days - we were paroled at Appomattox
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.) 70 acres of land worth 800. One mule 60. Two cows 10. Farming tools worth 10
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list.) I have the same property as above
12. What annual or monthly income or earnings of yourself and wife and the source derived from you? None. Income with wife
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 10th day of Dec 1910 at Adamsville Ordinary, Barlow County.

Confederate  
 Soldier's Application.  
 UNDER ACT 1910.

County Barlow  
 Name W. M. Price  
 Company Co. Youngs  
 Regiment Youngs Bat  
 Approved \_\_\_\_\_

J. W. LINDSEY  
 Commissioner of Pensions

c. For how long was your leave granted? In what way?  
f. Why did you not return to your Command after leave expired?  
g. In what way were you prevented?  
h. What effort did you make to return?  
i. Were you captured during the war?  
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.)  
Land worth 800 - One Mule 65 - Two Cows 6  
worth 45 - Farming tools worth 10  
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None  
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list)  
I have the same property as above  
12. What annual or monthly income or earnings of yourself and wife and the source derived from you? None makes little as for  
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 10 day of Oct. 1910  
J. W. Hendricks Ordinary,  
of Bartow County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Pickens County.

L. J. Jones of said State and County is hereby presented as a witness in support of the application of W. W. Price for the pension provided by the Act of 1910, in said State, and after being sworn true answers to the questions propounded, answers as follows:

1. What is your name and where do you reside? L. J. Jones  
m. Pickens  
2. How long and since when have you known W. W. Price the applicant? Since 1865

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? m. Bartow Co. have known him since 1856. Seen him frequently

4. When, where and in what Company and Regiment did W. W. Price enlist during war from 1861 to 1865? (Give date and place) April 1863 Co. K, Youngs Regt - 1st

5. How did you obtain your information of this Service? I was a member of same Co. Company and with him.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) from April 1863 to April 1865

7. When and where was his Command surrendered or discharged (give date and place) at Kingston La May 1865

8. Were you personally present at the Surrender? was present

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

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

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

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

By whose authority did he leave \_\_\_\_\_ and how long was he granted leave? \_\_\_\_\_ How do you know

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

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

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

15. Was applicant captured as a prisoner? no If so, when and where? \_\_\_\_\_ In what prison was he held? none and when released?

Sworn to and subscribed before me, this the 15 day of Oct. 1910

L. J. Jones Ordinary,  
of Pickens County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Bartow County.

Personally before me comes J. A. Price & W. C. Walton who on oath says that they are freeholders residing in said County and we know W. W. Price 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.)

60 Acres of Land. One Mule Two Cows. Farming tools. Land worth \$1500. Mule \$25.00 Cows \$50.00

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

2. When and to whom was it sold or given to? no sales

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

4. What relation is the party to applicant? \_\_\_\_\_

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

6. Was the disposition of this property made in good faith and full values? no or was it made to obtain a pension? disposition made

Sworn to and subscribed before me, this the 10 day of Oct. 1910

J. W. Hendricks Ordinary, J. A. Price

of Bartow County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Bartow County.

I, J. W. Hendricks Ordinary of said County, certify that I know the applicant, Price for Pension is the person he represents himself to be and residing in said County. That I also know \_\_\_\_\_ the witness swearing to the service and W. C. Walton & J. A. Price who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Bartow Co. shows that his and wife value for tax is in 1908 \$ 350. for 1909 \$ 350. for 1910 \$ 400.

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

J. W. Hendricks Ordinary Bartow County.

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



State and how do you know? *in Bartow Co have known him since 1856. Seen him frequently*

4. When, where and in what Company and Regiment did *W. W. Price* enlist during war from 1861 to 1865? (Give date and place) *April 1863 Co. K. young Bato - cad-*

How did you obtain your information of this Service? *I was a member of same Company and with him.*

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) *from April 1863 to April 1865.*

When and where was his Command surrendered or discharged (give date and place) *at Kingslow Ga May 1865.*

8. Were you personally present at the Surrender? *was present*

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

10. Was the applicant personally present with his Command at surrender? *he was*

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

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

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

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

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

15. Was applicant captured as a prisoner? *no* If so, when and where? \_\_\_\_\_ In what prison was he held? *no* and when released? \_\_\_\_\_

Sworn to and subscribed before me, this the *15* day of *Oct* 1910 *L. J. Jones* Ordinary, *Bartow* County.

*I certify that L. J. Jones was duly sworn before me and is worthy of American Order.*

1908? (State fully by items.) *None at all*

2. When and to whom was it sold or given to? *no sales*

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? *no* or was it made to obtain a pension? *Disposition made*

Sworn to and subscribed before me, this the *10* day of *Oct* 1910 *W. W. Price* Ordinary, *Bartow* County.

### ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, *Bartow* County.

I, *G. W. Hendricks* Ordinary of said County, certify that I know the applicant *Price* 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 *W. W. Price* who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of *Bartow Co.* shows that *his* and wife value for tax is in 1908 \$ *350.* for 1909 \$ *350.* for 1910 \$ *400.* Sworn under my hand and official seal of office this *14* day of *Nov* 1910 *G. W. Hendricks* Ordinary *Bartow* County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. All affidavits must be made before the Ordinary and certified by him.

4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

STORE PHONE 164 RESIDENCE PHONES 299-245

Cartersville, Ga. *6/14* 192*8*  
M. *Robert R. E. Price*  
*For W. W. Price*

### JACKSON FURNITURE CO.

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

12/13/27 To Casket	15.00
" Embalming	1.50
" Surt	17.50
" Flowers	12.50
" Plank	2.50
" Box	75
" Jones	1.50
" Funeral bn	17.50
	<u>217.25</u>

The above and foregoing account is rendered for the funeral expenses of W. W. Price, Cartersville, Ga. who died without owning sufficient property to pay this bill

Witness *L. B. Johnson* Signed *Jackson Furniture Co*  
*H. B. Johnson, Jr.* By *H. B. Johnson, Jr.*

TERMS:

*Price, W. W.*  
For *Bartow* County

192*8*

### Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)  
(To pay expenses of last illness and funeral)

Office *W. Hendricks* Ordinary

For *W. W. Price*

Date of Death *Dec. 12, 1927*

Amount \$ *217.25* \$ *100.00*

Approved and ordered paid *W*

*John W. Clark*  
29 June 28 JOHN W. CLARK,  
Commissioner of Pensions.

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.

*Paid.*  
*Office W. Hendricks,*  
7/17/28 *Ordinary, Bartow Co.*

Funeral on 1750  
217 25

The above and foregoing account is rendered for the funeral expenses of W. W. Price, Carteraville, Ga., who died without owning sufficient property to pay this bill

Witness *W. W. Price*  
*W. W. Price, Jr.*

Signed *W. W. Price*  
By *W. W. Price, Jr.*

TERMS:

*John W. Clark*  
29 June 28 JOHN W. CLARK,  
Commissioner of Pensions.

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.

*Paid.*  
*Offie O. Hendricks,*  
7/17/28 *Ordinary, Bartow Co.*

### Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, *Bartow* County.

Personally before me, the Ordinary of said County, comes *C. W. Price*

of said County, who, after being sworn, on oath says that he knew *W. W. Price* of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in *Bartow* County, in this State, on the *12* day of *December* 192 *7*, 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 \$ *217.25* per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,  
*Offie O. Hendricks*, Ordinary  
*Bartow* County  
(Seal of Ordinary)

*C. W. Price*

### CERTIFICATE OF ORDINARY

GEORGIA, *Bartow* County.

I, *Offie O. Hendricks*, Ordinary of said County, do certify that I personally know *C. W. Price*, 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 *W. W. Price* while in life and that this was the same person whose name appears on the Pension Roll of *Bartow* County, and was paid a Pension of *Two Hundred* (\$200) Dollars in said County for 192 *7*, 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 *19* day of *June*, 192 *8*.  
(Seal of Ordinary) *Offie O. Hendricks*, Ordinary  
*Bartow* County

#### INSTRUCTIONS:

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

expenses, which amounted to the sum of \$ 217.25 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,  
Offie O. Hendricks, Ordinary  
Bartow County  
(Seal of Ordinary)

C W Price

### CERTIFICATE OF ORDINARY

GEORGIA, Bartow County.

I, Offie O. Hendricks, Ordinary of said County, do certify that I personally know C. W. Price, 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 W. W. Price while in life and that this was the same person whose name appears on the Pension Roll of Bartow County, and was paid a Pension of Five Hundred (\$200) Dollars in said County for 1927, 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 19 day of June, 1928.  
(Seal of Ordinary) Offie O. Hendricks, Ordinary  
Bartow County

#### INSTRUCTIONS:

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

Richard, S. C.,  
Bartow Co.,

No. 1744

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 31, 1887

For

Lacking payable  
Applicant S. C. Richard  
County Bartow  
Amount \$1

Date of Warrant March 27

Entered on record

March 27 1888

1888

SECRETARY EXECUTIVE DEPARTMENT

W. A. A.

County *Barlow*  
 Amount *500*  
 Date of Warrant *March 29*  
 Entered on record  
*March 30 1889*  
*500*  
 STATE AND EXECUTIVE DEPARTMENT

*W. A.*

STATE OF GEORGIA,

*Barlow* County

PERSONALLY appears *S. C. Prichard* of *Barlow* county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the *16<sup>th</sup>* day of *July*.

*1871*, 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 *B*, of *4<sup>th</sup>* Regiment of *S. C.* Volunteers *Jones*'s Brigade, that whilst engaged in such military service, at the battle of *Masadoes* in the State of *Virginia*, on the *21<sup>st</sup>* day of *July*, *1861*, he was wounded as follows: *Gunshot wound in the left leg entering the front of said leg about four inches above the ankle joint, and a gunshot wound in the thigh which occasionally discolours and lumps and three inches of the small bone was taken out of the leg just above the ankle joint.*

*Since he is rendered permanently incompeted to perform*

Dependent 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 ending October 25, 1889.

Sworn to and subscribed before me, this *11<sup>th</sup>* day of *March*, *1889*.

*W. A. Prichard*  
*W. A. Prichard*

Not a State fully nature of wound or character of disease which causes the disability, and a system prescribing the extent of the disability.

STATE OF GEORGIA,

*Barlow* County

PERSONALLY comes before me *James H. Young* and *Geo. H. Baker*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *S. C. Prichard* and after such examination say that the applicant has been injured as follows: *a gunshot wound in the left leg, about four inches long, and a gunshot wound in the thigh which occasionally discolours and lumps and three inches of the small bone was taken out of the leg just above the ankle joint.*

*Since he is rendered permanently incompeted to perform*

Dependent 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 ending October 25, 1889.

Sworn to and subscribed before me, this *11<sup>th</sup>* day of *March*, *1889*.

*W. A. Prichard*  
*W. A. Prichard*

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.

APPLICATION FOR ALLOWANCE

No. *1411*

FOR TAKING UP OF DEBT N. 1889

*S. C. Prichard*

*Applicant*

County *Barlow*

Amount *500*

Date of Warrant *March 29*

Entered on record

*March 30 1889*

*500*

STATE AND EXECUTIVE DEPARTMENT

*W. A.*

*Richard, D. C.*  
*Barlow Co.*

Richard, D.C.  
Bartow Co.

APPROVED FOR ALLOWANCE  
FOR YEAR ENDING OCTOBER 1, 1900  
1/11/11  
S. G. Prichard  
Ordinary of Bartow Co.  
Amount \$100  
Date of Warrant 1/11/11  
Amount of money \$100  
Date of payment 1/11/11  
S. G. Prichard  
Ordinary of Bartow Co.

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

STATE OF GEORGIA,  
Bartow County

PERSONALLY comes before me *G. H. Hendricks* Ordinary of said county,  
*James M. Young* and *John H. Baker* both known to  
me as reputable physicians of said county, who being severally sworn, say on oath that  
they have carefully examined *A. C. Prichard* and after such  
examination say that the applicant has been injured as follows: *By a fall from  
the left leg, about four inches below  
the knee, striking and destroying the bone and the  
tendon, the ball bone, about the middle of  
the thigh, it is still in a bad shape, and  
is still unable to perform ordinary labor, and  
suffer from pain and other defects, and  
has been caused by a fall from a horse, and  
the injury is such as to require the constant use of crutch or stick,  
and is not substantially and essentially useful.*  
day of *March* 1889 *James M. Young*  
*G. H. Hendricks* Ordinary

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

STATE OF GEORGIA,  
Bartow County

I, *G. H. Hendricks* Ordinary of said county,  
do certify that I am well acquainted with *A. C. Prichard*  
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 also certify  
that the foregoing witnesses, to-wit

are persons of respectability, and that their statements are worthy of full credit and belief.  
I further certify that *A. C. Prichard* before whom the foregoing  
affidavits were made and power of attorney was signed, is a

of said county, and the said affidavits and signatures thereto are genuine.  
Given under my official signature and seal, this *11* day of *March* 1889  
*G. H. Hendricks* Ordinary  
Bartow County

POWER OF ATTORNEY

STATE OF GEORGIA,  
Bartow County

I, *A. C. Prichard* of *Adamsville, Bartow Co.*  
county, in said State, do hereby appoint *Mr. A. Wright*  
of *Adamsville, Ga.* my true and lawful attorney in fact, for  
me and in my name, to receive and accept for whatever amount of money I may be entitled  
to from the State of Georgia by reason of the injury received as aforesaid in the military ser-  
vice of the Confederate States of this State, as stated in the foregoing affidavit, hereby  
authorizing my said attorney to accept 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 hereto set my hand and seal, this *11*th  
day of *March* 1889 *A. C. Prichard*

Executed in the presence of us:  
*W. E. Starnes*  
*G. H. Hendricks* Ordinary  
Send money to me as follows, by *Post Office money*  
*Order* to *Adamsville* P.O.  
*Bartow* County, Georgia.  
*S. G. Prichard*

NOTES.

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 application is for loss of fingers or toes, the proofs must be such as to show the number, and points where amputated.
6. 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.
7. 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.

County of Barlow State of Georgia  
Know all Men by these Presents, That I, S. C. Prichard  
of Adamsville, Barlow  
County, in said State, do hereby, appoint W. A. Wright  
of Adamsville Ga my true and lawful attorney in fact, for  
me and in my name, to receive and accept for whatever amount of money I may be entitled  
to from the State of Georgia, for or on account of the injury received as aforesaid in the military ser-  
vice of the Confederate States, or of this State, as stated in the foregoing affidavit, hereby  
authorizing my said attorney to accept 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 11th  
day of March 1889

Executed in the presence of us  
W. A. Wright  
W. A. Wright  
Ordinary

Send money to me as follows, by  
Post office money  
to Adamsville  
Barlow  
County, Georgia.

S. C. Prichard

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 aforesaid 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 application is for loss of fingers or toes the proofs must be such as to show the number, and points where amputated.
6. 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.
7. 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.

STATE OF GEORGIA,  
Barlow County.

PERSONALLY appears Seaborn C. Pritchard of Barlow County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such since the 10th day of February - 1871; 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 E, of 4th Regiment of South Carolina Volunteers - Brigade; that whilst engaged in such military service, at the battle of Manassas in the State of Virginia, on the 21 day of July 1861, he was wounded as follows (which whilst in said service in the year 1861, he contracted disease as follows) (State fully nature of wound or character of disease which causes disability) Shot in left leg and three inches of bone taken out. By section. - at the same time wounded badly in left thigh - ball passing through fleshy part of thigh - Heel of leg is practically useless - Which wound (or disease) permanently disables deponent and renders him practically incompetent to perform manual labor, and his arm, or leg, or ear - substantially useless.  
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder.

Sworn to and subscribed before me, this the 17th day of March 1889

Seaborn C. Pritchard

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,  
Barlow County.

PERSONALLY before me  
of the County of Barlow, State of Georgia, who, being duly sworn, says that he is a commissioned officer in Company E, of the 4th Regiment of South Carolina Volunteers, and that deponent was (or contracted the disease) in the military service as stated in his foregoing affidavit, and that wounds on (or disease permanently disabled) the said deponent. Deponent further states that said citizen of this State, and resides in Barlow County.  
Sworn to and subscribed before me, this 17th day of March 1889

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

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,

Personally come before me  
of the County of *Barrow*,  
a commissioned Officer in Company *of the Company*  
Volunteers, and that deponent *knows*  
(or contracted the disease) in the military service as stated in his foregoing affidavit, and that wounds  
or disease permanently disabled the said *applicant*, as stated by him in said  
affidavit. Deponent further states that said *applicant* is a citizen of this State, and resides in *Barrow* County.

Sworn to and subscribed before me this *11th* day of *April*, 1888.

The foregoing affidavit, changed to suit the facts, should be made by a commissioned officer of the Company. If no commissioned officer is available, the following affidavit of a Justice of the Peace, or a Notary Public, may be substituted.

STATE OF GEORGIA,

*Barrow* County.

Personally come *Thomas G. Goble, Samuel Burns*  
and *Ray T. Bibb*. - Comrades same Co & Regt  
and citizens of *Adairsville and Barrow* -  
who, being duly sworn, say that they are acquainted with *Seaborn C. Hitchcock*  
The deponent - 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 disabled applicant, as stated by him, that said applicant is a citizen of  
this State, and resides in *Barrow* County, and we are well satisfied that all the state-  
ments in the affidavit are true.

Sworn to and subscribed before me, this

*23* day of *March*, 1888.  
*L. J. Marking*  
*L. J. Marking*

*Samuel Burns*  
*Ray T. Bibb*

STATE OF GEORGIA,

*Barrow* County.

Personally comes before me *J. F. Howard* Ordinary of said County,  
*Seaborn C. Hitchcock* born *Seaborn C. Hitchcock*  
me, a reputable physician of said County, who, being severally sworn, say on oath that they have  
carefully examined *Seaborn C. Hitchcock* and after such examination say that the  
that said *Seaborn C. Hitchcock* is permanently and substantially disabled, and  
applicant has been injured to the extent claimed by him, and that he has been rendered permanently  
and practically incompetent for the performance of ordinary manual labor by reason of said wounds  
(or disease), and that, in our opinion, applicant is entitled to the benefits allowed under the Act approved  
October 24, 1887, for the relief of the disabled.

Sworn to and subscribed before me, this

*11th* day of *April*, 1888.  
*L. J. Marking*

*L. J. Marking*  
*Seaborn C. Hitchcock*

ORDINARY

STATE OF GEORGIA,

*Barrow* County.

I, *Seaborn C. Hitchcock* Ordinary of said County,  
do hereby certify that I am well acquainted with *Seaborn C. Hitchcock* 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 further certify that *J. F. Howard* before whom the foregoing  
affidavits were made, and power of attorney was signed, is a Justice of the Peace  
of said County, and that the signatures therein are genuine.

Given under my official signature and seal, this *11th* day of *April*, 1888.  
*Seaborn C. Hitchcock*  
Ordinary *Barrow* County.

POWER OF ATTORNEY

STATE OF GEORGIA,

*Barrow* County.

Know all men by these presents, that I, *Seaborn C. Hitchcock*  
at *Adairsville Barrow*  
County, in said State, do hereby appoint *J. F. Howard*  
of *Adairsville* 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 stated in the foregoing affidavit. Hereby authorizing my said  
attorney to accept in my name for and without that may be issued by the Government, or for any sum of  
money which may be coming to me for the reasons aforesaid.

In witness whereof I have hereunto set my hand and seal, this *11th*  
day of *April*, 1888.  
*Seaborn C. Hitchcock*

Executed in the presence of us:

*J. W. Ham*  
*James V. Milner*  
*Master Klee*  
*Notary Public*  
*Barrow County*



STATE OF GEORGIA,

Bartow County.

Personally comes before me *L. G. Richard* Ordinary of said county, *L. G. Richard* and *S. M. Young*, both known to me as reputable physicians of said county, who being separately sworn on oath that they have carefully examined *L. G. Richard* and also such examination say that the *that said L. G. Richard is permanently and substantially disabled from* applicant has been injured to the extent claimed by him, and that he has been rendered permanently and practically incompetent for the performance of ordinary manual labor by reason of said wounds (or disease), and that, in my opinion, applicant is entitled to the benefits allowed under the Act, approved October 24, 1887, for the relief of the disabled.

Sworn to and subscribed before me, this *11th* day of *April*, 1888.

(Ordinary Seal)

*L. G. Richard*  
*L. G. Richard*

STATE OF GEORGIA,

Bartow County.

I, *L. G. Richard* at *Bartow* do hereby appoint *L. G. Richard* my true and lawful attorney in fact for me and in my name to receive and accept for whatever amount of money I may be entitled to on the State of Georgia by reason of the injury received as stated in the foregoing affidavit. Hereto authorizing my said attorney to accept in my name for any Warrant that may be issued by the Government of the any sum of money which may be coming to me for the reasons aforesaid.

In witness whereof I have hereunto set my hand and so, this *11th* day of *April*, 1888.

*L. G. Richard*

Executed in the presence of us:

*J. W. W. W. W.*  
*James B. W. W.*  
*W. W. W. W.*  
*W. W. W. W.*

STATE OF GEORGIA,

Bartow County.

I, *L. G. Richard* Ordinary of said county, do certify that I am well acquainted with *L. G. Richard* 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 *L. G. Richard* before whom the foregoing affidavits were made and power of attorney was signed, is *the Ordinary* of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *11th* day of *April*, 1888.

Ordinary *L. G. Richard* County

STATE OF GEORGIA,

Bartow County.

I, *L. G. Richard* Ordinary of said County, do certify that I am well acquainted with *L. G. Richard* 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 *W. W. W. W.* of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *11th* day of *April*, 1888.

Ordinary *L. G. Richard* County

1890.

APPLICATION FOR ALLOWANCE.  
FOR THE YEAR BEGINS OCTOBER 1st, 1889.

*L. G. Richard*  
Applicant, *L. G. Richard*  
County, *Bartow*  
Amount, *500.00*  
Date of warrant, *April 6*  
Entered on record, *April 6*  
WARRANT HANDLED TO  
*L. G. Richard*  
WARRANT HANDLED TO  
*L. G. Richard*

1891.

Application for Allowance  
FOR THE YEAR BEGINS OCTOBER 1st, 1890.

*L. G. Richard*  
Applicant, *L. G. Richard*  
County, *Bartow*  
Amount, *500.00*  
Date of Warrant, *April 6*  
Entered on record, *April 6*  
WARRANT HANDLED TO  
*L. G. Richard*  
WARRANT HANDLED TO  
*L. G. Richard*



14th day of February, 1891.  
Notary Public in and for the State of Georgia.  
Know all men by these presents, that I, *S. C. Prichard*, of *Bartow* County, State of Georgia, do hereby appoint *W. H. Harrison* 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.

### POWER OF ATTORNEY.

STATE OF GEORGIA.

*Bartow* County.  
Know all men by these presents, That I, *S. C. Prichard*, of *Bartow* County, State of Georgia, do hereby appoint *W. H. Harrison* 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 *fourth* day of *February*, 1891.

Executed in the presence of us:

*J. H. Ward*  
*W. H. Harrison*  
DIRECTION.  
Send money to me as follows, by *check* to *Atlanta*, P. O. *Bartow* County, Georgia.

14th day of February, 1891.  
Notary Public in and for the State of Georgia.  
Know all men by these presents, that I, *S. C. Prichard*, of *Bartow* County, State of Georgia, do hereby appoint *W. H. Harrison* 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.

### POWER OF ATTORNEY.

STATE OF GEORGIA.

*Bartow* County.  
Know all men by these presents, That I, *S. C. Prichard*, of *Bartow* County, State of Georgia, do hereby appoint *W. H. Harrison* 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.

Executed in the presence of us:

*J. H. Ward*  
*W. H. Harrison*  
DIRECTION.  
Send money to me as follows, by *check* to *Atlanta*, P. O. *Bartow* County, Georgia.

STATE OF GEORGIA.

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

Given under my official signature and seal, this *5* day of *March*, 1891.

Ordinary *Bartow* County.

### POWER OF ATTORNEY.

STATE OF GEORGIA.  
*Bartow* County.

Know all men by these presents, That I, *S. C. Prichard*, of *Bartow* County, State of Georgia, do hereby appoint *W. H. Harrison* 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 *14th* day of *March*, 1891.

Executed in the presence of us:

*J. H. Ward*  
*W. H. Harrison*  
DIRECTION.  
Send money to me as follows, by *check* to *Atlanta*, P. O. *Bartow* County, Georgia.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING IN POWER OF 1891.

Name *S. C. Prichard*  
County *Bartow*  
Disability *W. H. Harrison*  
Amount \$ *50*  
Entered on record *March 11*  
W. H. HARRISON  
Secretary of Pension Department  
AGENT.  
*W. H. Harrison*

*Prichard, S. C.*  
*Bartow*  
1893.

Application for Allowance

No. *110*  
FOR THE YEAR ENDING OCTOBER 1891.  
Applicant *S. C. Prichard*  
County *Bartow*  
Amount *50*  
Date of Warrant *3/18*  
Entered on record *March 11*  
W. H. HARRISON  
Secretary of Pension Department.  
*W. H. Harrison*

STATE OF GEORGIA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

John W. Harris Co. State Printer, Atlanta, Ga.

Geo. W. Harrison, State Printer, Athens.

P. O.

БОНЕВ СЕМЕНОВИЧ

day of *March* 1892.)  
*Wm. 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, *S. B. Prichard*

County, in said State, do hereby appoint *Wm. Hendricks* 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 *3* day of *March* 1892.

Executed in the presence of us

*A. O. Francis*  
*Wm. Hendricks*

Send money to me as follows, by

*Express*

to

*Harrisburg*

P. O.

County, Georgia.

*S. B. Prichard*

day of *March* 1893.)  
*Wm. 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, *Wm. Hendricks* Ordinary of said County, do certify that I am well acquainted with *S. B. Prichard* 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 *14* day of *March* 1893.

*Wm. Hendricks*  
Ordinary *Barlow* County.

### POWER OF ATTORNEY.

STATE OF GEORGIA.

*Barlow* County.

Know all Men by these Presents, That I, *S. B. Prichard*

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *20* day of *March* 1894.

Executed in the presence of us

*A. O. Francis*  
*J. A. Prince*

DIRECTIONS.

Send money to me as follows, by

to

County, Georgia.

P. O.

### POWER OF ATTORNEY.

STATE OF GEORGIA.

*Barlow* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *S. B. Prichard* of *Barlow* County, State of Georgia, do hereby appoint *Wm. Hendricks* of *Barlow* County, my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit, hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *20* day of *March* 1895.

*S. B. Prichard* [L.S.]

Executed in presence of us

*A. O. Francis*  
*Wm. Hendricks*

DIRECTIONS.

Send money to me as follows, by

to

County, Georgia.

P. O.

(For These Already Enrolled.)

Soldier's Pension.  
1894.

Name *S. B. Prichard*  
County *Barlow*  
Disability *Discharged*  
Amount *\$34.15*

W. H. HARRISON,  
Secretary Executive Department.

WARRANT HANDLED TO  
*J. A. Prince*

(For These Already Enrolled.)

SOLDIER'S PENSION.  
1895.

Name *S. B. Prichard*  
County *Barlow*  
Disability *Discharged*  
Amount *\$51.00*

REHARD JOHNSON,  
Secretary Executive Department.

WARRANT HANDLED TO  
*Wm. Hendricks*

Richard, S. C.  
1847-1861  
106

(For Those Already Enrolled.)

**Soldier's Pension.**  
**1894.**

Name *S. C. Richard*  
County *S. C.*  
Disability *100% disabled*  
Amount *\$31.11*

1894.  
W. H. HARRISON,  
Secretary Executive Department.

WARRANT HANDLED TO  
*S. C. Richard*  
W. H. HARRISON, Secretary Executive Department.

Richard, S. C.  
1847-1861  
97

(For Those Already Enrolled.)

**SOLDIER'S PENSION.**  
**1895.**

Name *S. C. Richard*  
County *S. C.*  
Disability *100% disabled*  
Amount *\$31.11*

1895.  
RICHARD JOHNSON,  
Secretary Executive Department.

WARRANT HANDLED TO  
*S. C. Richard*  
RICHARD JOHNSON, Secretary Executive Department.

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

PERSONALLY appears *S. C. Richard* of *S. C.* 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 *10th* day of *July* 1871; that he enlisted in the military service of the Confederate States (or of the State of *S. C.*) during the war between the States, and served as a *Private* in Company *C* of *4th* Regiment of *S. C.* Volunteers, *1st* Brigade; that whilst engaged in such military service at the battle of *Gettysburg* in the State of *Penn.* on the *30th* day of *July* 1863, he was wounded as follows: *Shot through right leg, about the middle of the thigh, and he has been unable to walk since.*

Dependent 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 *\$31.11* dollars, for the year 1893.

Sworn to and subscribed before me, this, *12th* day of *March* 1894.

*J. A. Price, Jr.*  
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.

I, *W. H. Harrison*, Ordinary of said County, do certify that I am well acquainted with *S. C. Richard* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *12* day of *March* 1894.



Ordinary *Bartow* County.

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

*Bartow* County.

PERSONALLY appears *S. C. Richard* 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 *10th* day of *July* 1871; that he enlisted in the military service of the Confederate States (or of the State of *S. C.*) during the war between the States, and served as a *Private* in Company *C* of *4th* Regiment of *S. C.* Volunteers, *1st* Brigade; that whilst engaged in such military service at the battle of *Gettysburg* in the State of *Penn.* on the *30th* day of *July* 1863, he was wounded as follows: *Shot through right leg, about the middle of the thigh, and he has been unable to walk since.*

Dependent 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 *\$31.11* dollars, for the year 1894.

Sworn to and subscribed before me, this, *12th* day of *March* 1895.

*J. A. Price, Jr.*  
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, *W. H. Harrison*, Ordinary of said County, do certify that I am well acquainted with *S. C. Richard* 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 *22* day of *March* 1895.



Ordinary *Bartow* County.

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 \$4.00 dollars, for the year 1893.

Sworn to and subscribed before me, this 1st day of July, 1894.

day of July, 1894.

J. H. Pritchard

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.

I, J. H. Pritchard, Ordinary of said County, do certify that I am well acquainted with S. C. Pritchard 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 1st day of March, 1894.

day of March, 1894.



J. H. Pritchard  
Ordinary Bartow County.

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 \$4.00 dollars, for the year 1894.

Sworn to and subscribed before me, this 1st day of July, 1895.

1st day of July, 1895.

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.

I, J. H. Pritchard, Ordinary of said County, do certify that I am well acquainted with S. C. Pritchard 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 22 day of July, 1895.

day of July, 1895.



J. H. Pritchard  
Ordinary Bartow County.

## POWER OF ATTORNEY.

STATE OF GEORGIA.

I, S. C. Pritchard, hereby authorize J. H. Pritchard of Bartow County, Georgia, 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 26th day of July, 1894.

Executed in presence of us  
J. M. Durham  
H. Storer

## POWER OF ATTORNEY.

STATE OF GEORGIA.

I, S. C. Pritchard, hereby authorize J. H. Pritchard of Bartow County, Georgia, 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 20th day of January, 1897.

Executed in presence of  
J. M. Durham  
H. Storer

### SOLDIER'S PENSION.

1896.

Name S. C. Pritchard  
County Bartow  
Disability Wounded leg  
Amount \$50.00  
3/4

1896

RICHARD JOHNSON,

Secretary Pension Department

WARRANT HANDLED TO

5/1/97

See W. Bureau, State Printer, 1896

### INVALID

### SOLDIER'S PENSION.

1897.

Name S. C. Pritchard  
County Bartow  
Disability Wounded leg  
Amount \$50.00  
2/1/97

1897

RICHARD JOHNSON,

Secretary Pension Department

WARRANT HANDLED TO

5/1/97

See W. Bureau, State Printer, 1897



*Richard S. C. Barton*

STATE OF GEORGIA,  
(For Those Already Enrolled.)

No. 1695

**SOLDIER'S PENSION.**

**1896.**

Name *S. C. Prichard*  
County *Barlow*  
Disability *Wounded leg*  
Amount *\$11.00*  
*34*

1896

RICHARD JOHNSON,  
Secretary Executive Department.

WARRANT HANDLED TO  
*5/1/87*

See W. H. HARRIS, State Printer, Atlanta.

*Richard S. C. Barton*

STATE OF GEORGIA,  
(For Those Already Enrolled.)

No. 585

**INVALID**

**SOLDIER'S PENSION.**

**1897.**

Name *S. C. Prichard*  
County *Barlow*  
Disability *Wounded leg*  
Amount *\$*  
*2/17*

1897

RICHARD JOHNSON,  
Secretary Executive Department.

WARRANT HANDLED TO  
*5/1/87*

See W. H. HARRIS, State Printer, Atlanta.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  
*Barlow* County.

Personally appears *S. C. Prichard* 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 *18th* day of *March*, 1871, that he enlisted in the military service of the Confederate States for of the State of *Georgia* during the war between the States and served as a *private* in Company *C*, of *1st* Regiment of *S. C.* Volunteers, *James*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *21st* day of *July*, 1864, he was wounded, injured or diseased as follows: *Shot through the left leg below the knee, drawing four inches of the bone of the leg, the remaining is substantially and essentially well.*

Dependent 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 24th, 1896. I have heretofore as a resident of *Barlow* county been allowed a pension of *7.87* dollars, for the year 1895.

Sworn to and subscribed before me, this, *1st* day of *January*, 1896, at *Barlow*, Georgia.

STATE OF GEORGIA,  
*Barlow* County.

I, *G. W. Hendricks*, Ordinary of said County, do certify that I am well acquainted with *S. C. Prichard* 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 *1st* day of *January*, 1896.

*G. W. Hendricks*  
Ordinary *Barlow* County.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  
*Barlow* County.

Personally appears *S. C. Prichard* 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 *18th* day of *April*, 1871, that he enlisted in the military service of the Confederate States for of the State of *Georgia* during the war between the States and served as a *private* in Company *C*, of *1st* Regiment of *S. C.* Volunteers, *James*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *21st* day of *July*, 1864, he was wounded, injured or diseased as follows: *Shot through the left leg below the knee, drawing four inches of the bone of the leg, the remaining is substantially and essentially well.*

Dependent 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 24th, 1897. I have heretofore under said law as a resident of *Barlow* county been allowed an invalid pension of *10* dollars, for the year 1896.

Sworn to and subscribed before me, this, *1st* day of *January*, 1897, at *Barlow*, Georgia.

STATE OF GEORGIA,  
*Barlow* County.

I, *G. W. Hendricks*, Ordinary of said County, do certify that I am well acquainted with *S. C. Prichard* 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 *1st* day of *January*, 1897.

*G. W. Hendricks*  
Ordinary *Barlow* County.



and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1893. I have heretofore as a resident of Barlow County been allowed a pension of Yixty dollars, for the year 1893.

Sworn to and subscribed before me, this, 21st day of January, 1893.

Notary State fully the nature of said law and character of issues and issues the disability and right to the extent of the disability resulting from the wound or disease.

### STATE OF GEORGIA.

Barlow County.

I, G.W. Hendricks, Ordinary of said County, do certify that I am well acquainted with S. C. Prichard 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 21st day of January, 1893.

G.W. Hendricks  
Ordinary Barlow County.

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 Yixty Dollars, for the year 1897.

Sworn to and subscribed before me, this, 21st day of January, 1897. POST OFFICE

Notary State fully the nature of said law and character of issues and issues the disability and right to the extent of the disability resulting from the wound or disease.

### STATE OF GEORGIA.

Barlow County.

I, G.W. Hendricks, Ordinary of said County, do certify that I am well acquainted with S. C. Prichard 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 21st day of January, 1897.

G.W. Hendricks  
Ordinary Barlow County.

### POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

S. C. Prichard herby authorize G.W. Hendricks of Barlowville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Adrianville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 21st day of January, 1898.

Executed in presence of

S. C. Prichard

### POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

S. C. Prichard herby authorize G.W. Hendricks of Barlowville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Adrianville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 21st day of January, 1898.

Executed in presence of

S. C. Prichard

(For Those Already Enrolled.)

No. 2440

INVALID  
SOLDIER'S PENSION.  
1898.

Name S. C. Prichard  
County Barlow  
Disability Invalid  
Amount, \$ 50.00

No. 2440

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED TO

4114

RECEIVED BY THE COMMISSIONER OF PENSIONS, ATLANTA.

(For Those Already Enrolled.)

No. 2439

INVALID  
SOLDIER'S PENSION.  
1899.

Name S. C. Prichard  
County Barlow  
Disability Invalid  
Amount, \$ 50.00

No. 2439

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED TO

4114

RECEIVED BY THE COMMISSIONER OF PENSIONS, ATLANTA.

(For Those Already Enrolled.)  
 (COMP. SECTION 26)  
 No. *2237*  
 INVALID  
 SOLDIER'S PENSION.  
 1899.  
 Name *S. C. Durham*  
 County *Barlow*  
 Disability *Wounds &c*  
 Amount, \$ *51.<sup>00</sup>*  
*7/16* 1899.  
 RICHARD JOHNSON,  
 Commissioner of Pensions.  
 WARRANT UNDER  
 OF *A. H. Lee*

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Barton County.  
Personally appears S. C. Brinkard of Barton 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 April 1871; 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 C of 7th Regiment of Georgia Volunteers, General's Brigade; that whilst engaged in such military service in the State of Georgia, on the 21st day of July 1864, he was wounded, injured or diseased as follows:  
1st bullet hit upper left leg  
in between bones and the  
in between and between bones

Dependent makes application for the pension to which he is entitled for the year ending October 26th, 1890. I have heretofore under said law as a resident of \_\_\_\_\_ County been allowed an invalid pension of \_\_\_\_\_ Dollars, for the year 1888.

Witness my hand and subscribed before me, this, the \_\_\_\_\_ day of \_\_\_\_\_, 1890.

day of *July* 1861 POST OFFICE *Adamsville*  
*Wm. S. Frederick Co.*

NOTE. State fully the nature of wound or character of disease, which causes the disability, and if a contagious one, the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA:

STATE OF GEORGIA,

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

Given under my official signature and seal, this 7th  
day of Jan. 1860.  
Ordinary Barlow County.

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 28.75 Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 17th day of January, 1898. POST-OFFICE Adamsville Ga  
John W. Lindsey  
Notary Public for the State of Georgia

# STATE OF GEORGIA,

Barlow County.  
I, John W. Lindsey Ordinary of said County, do certify that I am well acquainted with S. C. Prichard 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 17th day of January, 1898.



Ordinary Barlow County.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Barlow County been allowed an invalid pension of 28.75 Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 17th day of January, 1899. POST-OFFICE Adamsville Ga  
John W. Lindsey  
Notary Public for the State of Georgia

# STATE OF GEORGIA,

Barlow County.  
I, John W. Lindsey Ordinary of said County, do certify that I am well acquainted with S. C. Prichard 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 17th day of January, 1899.



Ordinary Barlow County.

## POWER OF ATTORNEY.

STATE OF GEORGIA,  
Barlow County.  
I, S. C. Prichard hereby authorize John W. Lindsey of Adamsville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Adamsville Ga.  
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9 day of January, 1900.

Executed in presence of John W. Lindsey

[L. S.]

## POWER OF ATTORNEY.

STATE OF GEORGIA,  
Barlow County.  
I, S. C. Prichard hereby authorize George W. Woodall of Adamsville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Adamsville Ga.  
IN WITNESS WHEREOF, I have hereunto set my hand and seal this 12 day of January, 1901.

Executed in presence of John W. Lindsey

George W. Woodall

[L. S.]

COPIES SECTION 126

(For Those Already Enrolled.)

No. 890

INVALID

SOLDIER'S PENSION.

1900.

Name S. C. Prichard

County Barlow

Disability Wounded leg

Amount, \$ 50

Warrant issued Jan. 19, 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

John W. Lindsey

Geo. W. Harrison, State Printer, Atlanta

No date

(For Those Already Enrolled.)

No. 1190

DISABLED

SOLDIER'S PENSION.

1901.

Name S. C. Prichard

County Barlow

Disability Wounded leg

Amount, \$ 50

Warrant issued Jan. 19, 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

John W. Lindsey

Geo. W. Harrison, State Printer, Atlanta

No date

*Prichard S. G.*  
*Barlow County*

COOR. SECTION 120  
(For Those Already Enrolled.)

No. *890*

**INVALID**

**SOLDIER'S PENSION.**

**1900.**

Name *S. C. Prichard*  
County *Barlow*  
Disability *wounded by*  
Amount, \$ *50*  
Warrant issued *Feb. 18, 1900.*

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO  
*Prichard*

Geo. W. Harrison, State Printer, Atlanta.

*No date*

*Prichard S. G.*  
*Barlow County*

COOR. SECTION 120  
(For Those Already Enrolled.)

No. *1190*

**DISABLED**

**SOLDIER'S PENSION.**

**1901.**

Name *S. C. Prichard*  
County *Barlow*  
Disability *wounded by*  
Amount, \$ *50*

**1901.**

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDLED TO  
*Prichard*

Geo. W. Harrison, State Printer, Atlanta.

*No date*

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  
*Barlow* County.

Personally appears *S. C. Prichard* of *Barlow* County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the day of *July* 18*77*; 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 *E*, of *4*th Regiment of *S. C.* Volunteers, *Butters*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *21*st day of *July* 18*67*, he was wounded, injured or diseased as follows:  
*He was shot in the left leg rendering him 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 *Barlow* County been allowed an invalid pension of *50* Dollars, for the year 18*99*.

Sworn to and subscribed before me, this *11*th day of *July* 1900, POST OFFICE *Barlow*.

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

STATE OF GEORGIA,  
*Barlow* County.

I, *Geo. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *S. C. Prichard* 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 *9*th day of *July* 1900.  
*Geo. W. Hendricks*  
Ordinary *Barlow* County.



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  
*Barlow* County.

Personally appears *S. C. Prichard* 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 *July* 18*77*; 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 *E*, of *4*th Regiment of *S. C.* Volunteers, *Butters*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *21*st day of *July* 18*67*, he was wounded, injured or diseased as follows:  
*He was shot in the left leg rendering him substantially and permanently disabled.*

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of *Barlow* County been allowed an invalid pension of *50* Dollars, for the year 1900.

Sworn to and subscribed before me, this *11*th day of *July* 1901, Postoffice *Barlow*.

STATE OF GEORGIA,  
*Barlow* County.

I, *Geo. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *S. C. Prichard* 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 *11*th day of *July* 1901.  
*Geo. W. Hendricks*  
Ordinary *Barlow* County.



ending, October 26th, 1900. I have heretofore under said law as a resident of  
County been allowed an invalid pension of  
Dollars, for the year 1899

Sworn to and subscribed before me, this, the 11th day of January, 1901, POST OFFICE

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

Given under my official signature and seal, this 9th

day of January, 1901, POST OFFICE  
Ordinary Geo. Hendricks Barlow County.

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of  
County been allowed an invalid pension of  
Dollars, for the year 1900.

Sworn to and subscribed before me, this, the 11th day of January, 1901, POST OFFICE

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

# STATE OF GEORGIA,

Barlow County.

I, Geo. Hendricks, Ordinary of said County, do certify that I am well acquainted with S. C. Prichard 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 January, 1901, POST OFFICE  
Ordinary Geo. Hendricks Barlow County.

## POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, S. C. Prichard, hereby authorize, J. L. Hendricks of Barlow Co.

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

at Barlow Co.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11th day of January, 1902.

Executed in presence of

[L. S.]

## POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, S. C. Prichard, hereby authorize, J. L. Hendricks of Barlow Co.

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

at Barlow Co.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11th day of January, 1902.

Executed in presence of

[L. S.]

( FOR THOSE ALREADY ENROLLED )

No. 1876

DISABLED

SOLDIER'S PENSION

1902.

Name S. C. Prichard  
County Barlow  
Co. 4th  
Disability 100%  
Amount, \$ 3.75  
1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Barlow

Geo. W. Harrison, State Printer, Atlanta.

( FOR THOSE ALREADY ENROLLED )

No. 1930

DISABLED

SOLDIER'S PENSION

1903.

Name S. C. Prichard  
County Barlow  
Co. 4th  
Disability 100%  
Amount, \$ 3.75  
1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Barlow

Geo. W. Harrison, State Printer, Atlanta.

*Richard D. C.*  
 (FOR THOSE ALREADY ENROLLED.)  
 No. 1876  
**DISABLED**  
**SOLDIER'S PENSION**  
**1902.**  
 Named *S. C. Richard*  
 County *Barlow*  
 Co. *E* Regiment *4th*  
 Disability *Wounded*  
 Amount, \$ *11.31*  
 1902.  
 JOHN W. LINDSEY,  
 Commissioner of Pensions.  
 WARRANT HANDLED TO  
*Only*  
 Geo. W. Harrison, State Printer, Atlanta.

*Richard D. C.*  
 (FOR THOSE ALREADY ENROLLED.)  
 No. 1930  
**DISABLED**  
**SOLDIER'S PENSION**  
**1903.**  
 Name *S. C. Richard*  
 County *Barlow*  
 Co. *E* Regiment *4th*  
 Disability *Wounded*  
 Amount, \$ *11.31*  
 1903.  
 JOHN W. LINDSEY,  
 Commissioner of Pensions.  
 WARRANT HANDLED TO  
*Only*  
 Geo. W. Harrison, State Printer, Atlanta.

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,  
*Barlow* County.)

Personally appears *S. C. Richard* 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 *May* 1877; that he enlisted in the military service of the Confederate States (or of the State of *Virginia*) during the war between the States, and served as a *Private* in Company *C*, of *11th* Regiment of *Volunteers*, *John S.*'s Brigade; that whilst engaged in such military service in the State of *Virginia*, on the *21* day of *July* 1861, he was wounded, injured or diseased as follows:  
*Shot through the leg by 1st Cavalry*  
*of Massachusetts, thereby rendering him*  
*incapable of further service.*

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902, I have heretofore, under said law, as a resident of *Barlow* County, been allowed an invalid pension of *11.31* Dollars, for the year 1901.

Sworn to and subscribed before me, this the *10th* day of *January* 1902, at Post-office *Barlow*, *Barlow* County, Georgia.

STATE OF GEORGIA,  
*Barlow* County.)  
*J. W. Lindsey* Ordinary of said County,  
 do certify that I am well acquainted with *S. C. Richard* 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 *January* 1902, at *Barlow* County.

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

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,  
*Barlow* County.)

Personally appears *S. C. Richard* 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 *May* 1877; that he enlisted in the military service of the Confederate States (or of the State of *South Carolina*) during the war between the States, and served as a *Private* in Company *E*, of *4th* Regiment of *Volunteers*, *John S.*'s Brigade; that whilst engaged in such military service in the State of *South Carolina*, on the *1st* day of *August* 1861, he was wounded, injured or diseased as follows:  
*Shot through the leg by 1st Cavalry*  
*of Massachusetts, thereby rendering him*  
*incapable of further service.*

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903, I have heretofore, under said law, as a resident of *Barlow* County, been allowed an invalid pension of *11.31* Dollars, for the year 1902.

Sworn to and subscribed before me, this the *10th* day of *January* 1903, at Post-office *Barlow*, *Barlow* County, Georgia.

STATE OF GEORGIA,  
*Barlow* County.)  
*J. W. Lindsey* Ordinary of said County,  
 do certify that I am well acquainted with *S. C. Richard* 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 *January* 1903, at *Barlow* County.

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

ending October 29th, 1902. I have heretofore, under said law, as a resident of  
County, been allowed an invalid pension of  
Dollars, for the year 1901.

Sworn to and subscribed before me, this the  
day of Jan 1902. Post-office  
G.W. Nunnery Co.

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

### STATE OF GEORGIA,

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

Given under my official signature and seal, this  
day of Jan 1902.  
Ordinary J.C. Prichard County.

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

Deponent makes application for the pension to which he is entitled for the year  
ending October 29th, 1903. I have heretofore, under said law, as a resident of  
County, been allowed an invalid pension of  
Dollars, for the year 1902.  
Sworn to and subscribed before me, this the  
day of Jan 1903. Post-office  
J.C. Prichard  
G.W. Nunnery Co.

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

### STATE OF GEORGIA,

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

Given under my official signature and seal, this  
day of Jan 1903.  
Ordinary J.C. Prichard County.

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

### POWER OF ATTORNEY.

STATE OF GEORGIA.

County.  
I, J.C. Prichard, hereby authorize  
G.W. Nunnery of G.W. Nunnery Co.  
to receive and receipt for the pension paid hereon, and request that he remit same to  
at  
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this  
day of Jan 1904.

Executed in presence of

J.C. Prichard

[U.S.]

### POWER OF ATTORNEY.

STATE OF GEORGIA.

County.  
I, J.C. Prichard, hereby authorize  
G.W. Nunnery of G.W. Nunnery Co.  
to receive and receipt for the pension paid hereon, and request that he remit same to  
at  
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this  
day of Jan 1905.

Executed in the presence of

J.C. Prichard

[U.S.]

(FOR THOSE ALREADY ENROLLED.)

No. 1522

DISABLED

SOLDIER'S PENSION

1904.

Name J.C. Prichard  
County Bartow  
Co 4th  
Regiment  
Disability Wounded by  
Amount \$50

FEB 9 1904

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDED TO

WARRANT HANDED TO

Prichard, J.C.

Bartow County

(FOR THOSE ALREADY ENROLLED.)

No. 1414

DISABLED

SOLDIER'S PENSION

1905.

Name J.C. Prichard  
County Bartow  
Co 4th  
Regiment  
Disability Wounded by  
Amount \$50

FEB 7 1905

JOHN W. LINDSEY

Commissioner of Pensions

WARRANT HANDED TO

WARRANT HANDED TO

no date

*Prichard, S.C.*  
 (FOR THOSE ALREADY ENROLLED.)  
 No. 1522  
 DISABLED  
 SOLDIER'S PENSION  
 1904.  
 Name *S.C. Prichard*  
 County *Darlington*  
 Co. *C* Regiment *4th*  
 Disability *Wounded by*  
 Amount \$ *50*  
 FEB 9 1904  
 JOHN W. LINDSEY  
 Commissioner of Pensions  
 WARRANT HANDLED TO  
*Prichard*  
*Prichard, S.C.*  
*Darlington County*

*Prichard, S.C.*  
 (FOR THOSE ALREADY ENROLLED.)  
 No. 1414  
 DISABLED  
 SOLDIER'S PENSION  
 1905.  
 Name *S.C. Prichard*  
 County *Darlington*  
 Co. *C* Regiment *4th*  
 Disability *Wounded by*  
 Amount \$ *50*  
 FEB 7 1905  
 JOHN W. LINDSEY  
 Commissioner of Pensions  
 WARRANT HANDLED TO  
*Prichard, S.C.*  
*Darlington County*

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

*Darlington* County.

Personally appears *S.C. Prichard* of  
 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 *July* 1877; that he enlisted in the military service of the Con-  
 federate States (or of the State of *Georgia*) during the war between the  
 States, and served as a *private* in Company *C*, of *11th* Regiment  
 of *Georgia* Volunteers, *James*'s Brigade, that whilst engaged  
 in such military service in the State of *Georgia*, on the *21st* day  
 of *July* 1864, he was wounded, injured or diseased as follows:  
*that shot wound in leg in battle, and*  
*fractured leg, rendering him permanently disabled*  
*and substantially unable to*

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

Sworn to and subscribed before me, this *11th*  
 day of *Jan* 1904, *McNimmicks* Post-office

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

STATE OF GEORGIA,

*Darlington* County.

I, *McNimmicks*, Ordinary of said County,  
 do certify that I am well acquainted with *S.C. Prichard*  
 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 *Jan* 1904.

*McNimmicks*  
 Ordinary—*Darlington* County.

Note.—Fill all blanks and of Company and Regiment.

Note.—All vouchers and affidavits must bear date after January 1, 1904.

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

*Darlington* COUNTY.

Personally appears *S.C. Prichard* of *Darlington*  
 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 *July* 1877; that he enlisted in the military service of the Con-  
 federate States (or of the State of *Georgia*) during the war between the  
 States, and served as a *private* in Company *C*, of *11th* Regiment  
 of *Georgia* Volunteers, *James*'s Brigade, that whilst engaged  
 in such military service in the State of *Georgia*, on the *21st* day  
 of *July* 1864, he was wounded, injured or diseased as follows:  
*that shot wound in leg in battle, and*  
*fractured leg, rendering him permanently disabled*  
*and substantially unable to*

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

Sworn to and subscribed before me, this *11th*  
 day of *Jan* 1905, *McNimmicks* Post-office

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

STATE OF GEORGIA,

*Darlington* COUNTY.

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

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

*McNimmicks*  
 Ordinary—*Darlington* County.

Note.—Fill all blanks and of Company and Regiment.

Note.—All vouchers and affidavits must bear date after January 1, 1905.



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

Sworn to and subscribed before me, this the \_\_\_\_\_ day of \_\_\_\_\_, 1904. \_\_\_\_\_ Post-office

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

# STATE OF GEORGIA,

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

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

Given under my official signature and seal, this \_\_\_\_\_ day of \_\_\_\_\_, 1904.



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

Note.—Fill all blanks and of Company and Regiment.

Note.—All vouchers and affidavits must bear date after January 1, 1904.

ending October 26th, 1905. I have heretofore, under said law, as a resident of \_\_\_\_\_ County, been allowed an invalid pension of \_\_\_\_\_ Dollars, for the year 1904.

Sworn to and subscribed before me, this the \_\_\_\_\_ day of \_\_\_\_\_, 1905. \_\_\_\_\_ Post-office

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

# STATE OF GEORGIA,

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

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

Given under my official signature and seal, this \_\_\_\_\_ day of \_\_\_\_\_, 1905.



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

Note.—Fill all blanks and of Company and Regiment.

Note.—All vouchers and affidavits must bear date after January 1, 1905.

## POWER OF ATTORNEY.

STATE OF GEORGIA,

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

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_ to receive and receipt for the pension paid hereon, and request that he remit same to \_\_\_\_\_ by \_\_\_\_\_ at \_\_\_\_\_.

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

\_\_\_\_\_ [L. S.]

Executed in the presence of \_\_\_\_\_

## POWER OF ATTORNEY.

STATE OF GEORGIA,

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

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_ to receive and receipt for the pension paid hereon, and request that he remit same to \_\_\_\_\_ by \_\_\_\_\_ at \_\_\_\_\_.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this \_\_\_\_\_ day of \_\_\_\_\_, 1907.

\_\_\_\_\_ [L. S.]

Executed in presence of \_\_\_\_\_

COUPON SECTION 1206

FOR THOSE ALREADY ENROLLED

## DISABLED SOLDIER'S PENSION 1906.

Name \_\_\_\_\_  
County \_\_\_\_\_  
Co. \_\_\_\_\_ Regiment \_\_\_\_\_  
Disability \_\_\_\_\_  
Amount, \$ \_\_\_\_\_  
JAN 29 1906

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO \_\_\_\_\_

THE ACTING COMMISSIONER OF LAND AND SURVEY, GEORGIA.

COUPON SECTION 1207

FOR THOSE ALREADY ENROLLED

## DISABLED SOLDIER'S PENSION 1907.

Name \_\_\_\_\_  
County \_\_\_\_\_  
Co. \_\_\_\_\_ Regiment \_\_\_\_\_  
Disability \_\_\_\_\_  
Amount, \$ \_\_\_\_\_  
JAN 29 1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO \_\_\_\_\_

THE ACTING COMMISSIONER OF LAND AND SURVEY, GEORGIA.

For Those Already Enrolled

No. 5555

# DISABLED SOLDIER'S PENSION 1906.

Name J. C. Prichard  
County Barlow  
Co. 4 Regiment  
Disability 100%  
Amount \$ 1.00  
JAN 29 1906

JOHN W. LINDSEY  
Commissioner of Pensions  
WARRANT HANDLED TO

THE FARMERS' FIDELITY AND GUARANTEE CO. CHAS. W. LINDSEY, PRES.

new date

For Those Already Enrolled

No. 5555

# DISABLED SOLDIER'S PENSION 1907.

Name J. C. Prichard  
County Barlow  
Co. 4 Regiment  
Disability 100%  
Amount \$ 1.00

JOHN W. LINDSEY  
Commissioner of Pensions  
WARRANT HANDLED TO

THE FARMERS' FIDELITY AND GUARANTEE CO. CHAS. W. LINDSEY, PRES.

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Barlow County.

Personally appears J. C. Prichard 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 10th day of April 1871; 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 C of 4th Regiment of Georgia Volunteers 6th Brigade; that whilst engaged in such military service in the State of Georgia, on the 21 day of July 1861, he was wounded, injured or diseased as follows:  
He was shot wounded in the left leg while fighting at the battle of Mansfield, Mississippi, and the wound has never healed.

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

Sworn to and subscribed before me, this 29th day of January 1906.  
J. W. Lindsey Post Office Adairsville Ga

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

State of Georgia,  
Barlow County.

I, J. W. Lindsey, Ordinary of said County, do certify that I am well acquainted with J. C. Prichard 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 29th day of January 1906.  
J. W. Lindsey  
Ordinary Barlow County.

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

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Barlow County.

Personally appears J. C. Prichard 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 10th day of April 1871; 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 C of 4th Regiment of Georgia Volunteers 6th Brigade; that whilst engaged in such military service in the State of Georgia, on the 21st day of July 1861, he was wounded, injured or diseased as follows:  
He was shot wounded in the left leg while fighting at the battle of Mansfield, Mississippi, and the wound has never healed.

Dependent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Barlow County, been allowed an invalid pension of one Dollars, for the year 1906.

Sworn to and subscribed before me, this 29th day of January 1907.  
J. W. Lindsey Post Office Adairsville Ga

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

State of Georgia,  
Barlow County.

I, J. W. Lindsey, Ordinary of said County, do certify that I am well acquainted with J. C. Prichard 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 29th day of January 1907.  
J. W. Lindsey  
Ordinary Barlow County.

NOTE.—Fill all blanks and of Company and Regiment.  
NOTE.—All vouchers and affidavits must bear date after January 1st, 1907.

of \_\_\_\_\_ volunteers \_\_\_\_\_ Brigade; that whilst engaged in such military service in the State of \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 1861, he was wounded, injured or diseased as follows: \_\_\_\_\_  
\_\_\_\_\_ that \_\_\_\_\_ on the left \_\_\_\_\_  
\_\_\_\_\_ the \_\_\_\_\_  
\_\_\_\_\_

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

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_ 1906.  
\_\_\_\_\_ Post-Office \_\_\_\_\_ Ga

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

State of Georgia,  
\_\_\_\_\_ County.

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

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

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

Note.—Fill all blanks and of Company and Regiment.  
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

of \_\_\_\_\_ 1861, he was wounded, injured or diseased as follows: \_\_\_\_\_  
\_\_\_\_\_ that \_\_\_\_\_ in leg in \_\_\_\_\_  
\_\_\_\_\_ substantially be \_\_\_\_\_

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of \_\_\_\_\_ County, been allowed an invalid pension of \_\_\_\_\_ Dollars, for the year 1906.

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_ 1907.  
\_\_\_\_\_ Postoffice \_\_\_\_\_

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

State of Georgia,

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

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

Given under my official signature and seal this \_\_\_\_\_ day of \_\_\_\_\_ 1907.

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

Note.—Fill all blanks and of Company and Regiment.  
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

Audited April 1st 1889

Wm Wright

Dartow  
Maimed Soldiers.

Voucher No 1744  
Amount \$ 50.  
Paid to S. B. Prichard  
for Left leg  
disables  
March 30, 1889

Included in Warrant No \_\_\_\_\_  
Issued to Treasurer \_\_\_\_\_

WARRANT CLERK  
W. H. Wright, W. H. Wright, W. H. Wright, W. H. Wright

Wm Wright

Dartow

Maimed Soldiers.

Audited \_\_\_\_\_ 1889  
Wm Wright

Voucher No 349  
Amount \$ 50  
Paid to S. B. Prichard  
for Leg disabled

July 7 90

Included in Warrant No \_\_\_\_\_

Issued to Treasurer \_\_\_\_\_

W. H. Wright, W. H. Wright, W. H. Wright, W. H. Wright

Wm Wright

Left leg  
disabled  
March 30, 1888

Included in Warrant No.  
dated at Treasurers

W. A. W.

and S. C. Pritchard  
Leg disabled

July 7 90

Included in Warrant No.

dated at Treasurers

W. A. W.

Warrant No.

W. A. W.

STATE OF GEORGIA,  
EXECUTIVE DEPARTMENT

No. 17114

Atlanta, Ga. March 30, 1889

Mr. S. C. Pritchard  
of Bartow  
having filed his application in the Executive  
Department for an allowance under the Act approved October 24, 1887, as amended by Act,  
Dec. 24, 1888, and the same having been allowed for  
Left leg disabled  
He is entitled to receive the sum of Fifty 00/10 Dollars  
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor.

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.



J. J. Gordon  
GOVERNOR.

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

Fifty 00/10 Dollars,  
per above voucher, this 30 of March 1889.

S. C. Pritchard

W. A. W.

STATE OF GEORGIA,  
EXECUTIVE DEPARTMENT

No. 549

Atlanta, Ga. July 7 1890

Mr. S. C. Pritchard  
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  
Leg disabled  
He is entitled to receive the sum of Fifty 00/10 Dollars  
for such disability, the same being the allowance due for the year ending October 24, 1890.  
The Treasurer will pay the same and hold his receipt on this voucher, and return same  
to Executive Department for warrant.

By the Governor.

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

J. J. Gordon  
GOVERNOR.

\$ 50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/10 Dollars,  
per above voucher, this 7 of July 1890.

S. C. Pritchard

W. A. W.

Mr *S. C. Prichard* of the County  
of *Barlow* having filed his application in the Executive  
Department for an allowance under the Act approved October 24, 1887, as amended by Act,  
Dec. 24, 1888, and the same having been allowed for  
*Left leg disabled*  
He is entitled to receive the sum of *Fifty 00/100* Dollars  
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor.

*W H Harrison*

CLERK EXECUTIVE DEPARTMENT.



GOVERNOR.

Dollars,

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

*Fifty 00/100*

per above voucher, this

*30*

of *March*  
*S C Prichard*  
*W H Wright*

1889.

of *Barlow* 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  
*Leg disabled*  
He is entitled to receive the sum of *Fifty 00/100* Dollars  
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor.

*W H Harrison*

CLERK EXECUTIVE DEPARTMENT.

*J P Gordon*  
GOVERNOR.

\$ 50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

*Fifty 00/100*

per above voucher, this

*7*

of *Feb*

*1890*  
*S C Prichard*  
*W H Wright*

Dollars.

Audited *Feb. 12* 1891.  
*W H Wright*  
COMPTROLLER GENERAL.

*Prichard S. C.*  
*50*

1891.

Maimed Soldiers.

Voucher No. *637*

Amount \$ *50*

Paid to *S. C. Prichard*

for *leg dis*

*Feb 11* 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK

Geo. W. Harrison State Printer, Atlanta.

*W H Wright*

For *dog des*  
*July 11* 1891.

Included in warrant No.  
issued to Treasurer.

1891.

WARRANT-TEER

Geo. W. Harrison, State Printer, 1746346.

*Wm. Wright*

STATE OF GEORGIA,  
EXECUTIVE DEPARTMENT.

No.

1891  
*637*

*Atlanta Ga July 11 1891.*

Mr. *J. C. Prichard* of the County  
of *Wartow* 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  
*dog des*  
He is entitled to receive the sum of *July 1000* Dollars  
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor



*H. H. Harrison*

SECRETARY EXECUTIVE DEPARTMENT.

*W. J. Hardman*  
GOVERNOR

*50*

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

*July 1000* Dollars.  
per above voucher, this *11* of *July* 1891.  
*J. C. Prichard*  
*W. J. H.*

Mr. *G. C. Prichard*  
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  
*July 1891*  
He is entitled to receive the sum of *Twenty 1000* Dollars

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

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

By the Governor, *W. J. Warden* GOVERNOR

*H. H. Harrison* SECRETARY OF THE EXECUTIVE DEPARTMENT

*\$50*  
RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia  
*July 1891* Dollars,  
per above voucher, this *11* of *July* 1891.  
*G. C. Prichard*  
*W. J. Warden*

No. 6.A. 10. 200

INDIGENT PENSION.  
180

Name *W W Prickett*  
County *Darling*  
Co. *B* pt Galat 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.

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

9/30/69 9/20/69

Pension of \$750 9/30/05  
Applicant must state when he escaped from prison, and where he was from  
then until the day of the warrant that prove his statements to be true  
and accounting for his escape to the end of the war Just as he states it.  
J. J. Bailey

... Por. 8.

George's Barber's Cavity.  
The person came W.M. Blackett and in past days that  
his ancestor got question of water application is on the way  
is that, that the owner of house at number, for in reflecting  
it remember, that it was parallel of Cavity method, and in  
of 15 line M. D. W. Griggs was parallel and came home with  
him. After my father's passing to form  
July 16-1906, George's Barber's Cavity.

Penitentiary office 10/1/06

The prison record of the U.S. does not show that a plaintiff was ever held as a prisoner of war. He has been making conflicting statements and different from his witnesses. Until he can be identified as a definite "stranger" his prison record is doubtful, must make definite and complete identification as to the place of capture and imprisonment and when released then prove it as the states it, then he can be identified.

J. W. LINDENBERG, Com. Of Penna.

STATE OF GEORGIA

# POWER OF ATTORNEY

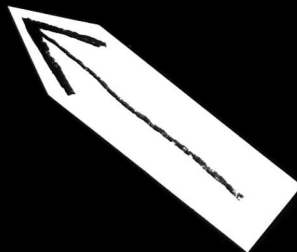
*Baron & Entel*  
*Mrs. Brecht*  
*Guthrie*  
*Karl Wittl*

William Henry Harrison  
GAY OF  
Buckingham Palace  
1903



**TORNEY.**

POWER OF ATTORNEY.



J.W.Lindsey, Com. Of Pens.

## POWER OF ATTORNEY.

## POWER OF ATTORNEY.

STATE OF GEORGIA.

Carlton <sup>CHAS. F.</sup>  
 Wm. Brock &  
 J. W. Hendricks  
 hereby authorize  
 Carlton Brock, Pa.  
 to receive and act up for the person allowed and request that he return same to me

Witness developed an early life

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

Barbara W. W. Price, et al. COUNTY of said State and County, desiring to avail himself of the Pension Act, Section 1204, Code, hereby submits his sworn and true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you track? *Wm. Porckett, Allalona, Ga*  
 2. How long and since when have you been a resident in the State? *I have lived in Georgia since 1847*  
 3. When and where were you born? *1842 In Cedar Bluff, Ala*  
 4. When and where, and in what occupation and regiment, did you serve? *1864-1869*  
*Kingston Tenn. In Co. D 1st Reg. in 60th*

1. How long did you remain in your company and regiment? I was captured in June 1864, while in a scout for Gen. Wheeler through North Ga. carried to Louisville, Ky.

2. Where and when was your capture and how soon thereafter did you escape? (Nov 20, 1864)  
At Greenville, NC,

10  
If the present state of affairs is really what you say it is, when you get your statement for what cause and by what authority? I was of home, signing just arrived. I got away from the Guard in rain. 26. 27. 28. 29. 30. 31. 1st Feb

10. What has been your occupation since 1960? *Farmer*

11. In what way, if at all, have you been a victim of persecution, viz. first, race and poverty, second, disability and nature, or third, disability and poverty? *I have been a victim of*

[illegible]

and can gorge myself up with textiles and otherwise affected for a number years

14. What properties, real or potential, did you possess in 1940, 1950, 1960, 1970, 1980, 1990, 2000 and 2010? and what disposition, terms of sale or gift, have you made of each?

10. Have been staying at different place with the children.

17. How much did your support cost for each of the years, and what portion of your contribution thereby  
 your own labor or income. I don't know  
 18. What was total number of days, 1929, 1930, 1931, 1932, 1933, 1934, 1935, 1936, 1937, 1938, 1939, 1940, 1941, 1942, 1943, 1944, 1945, 1946, 1947, 1948, 1949, 1950, 1951, 1952, 1953, 1954, 1955, 1956, 1957, 1958, 1959, 1960, 1961, 1962, 1963, 1964, 1965, 1966, 1967, 1968, 1969, 1970, 1971, 1972, 1973, 1974, 1975, 1976, 1977, 1978, 1979, 1980, 1981, 1982, 1983, 1984, 1985, 1986, 1987, 1988, 1989, 1990, 1991, 1992, 1993, 1994, 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602

I have been during little high (lots when off)  
Have you a family? If so, who supports such family? You and means support? Have they a  
homestead, or other property? The 123 and how supports? Harry a wife?

only. He had not property. She is my  
second wife. NO

1. Have you ever made an application for pension before? *No*

2. How many applications have you ever made, and under what class? *0*

Sworn to and subscribed before me this 1<sup>st</sup> day of Aug 1905. J. H. H. Packer Applicant  
G. W. Andrews Ordinary.

of Ordinary County.

\_\_\_\_\_

[REDACTED]

\_\_\_\_\_

5-25181

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12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907?  
*Don't know*
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?  
*Don't know*
14. What is the applicant's occupation and physical condition?  
*Don't know*
15. Is the applicant unable to support himself by labor of any sort; if so, why?  
*Don't know*
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?  
*Don't know*
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 compose 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?

Subscribed before me, this the

20th day of February, 1909

Ordinary.

*John H. Griggs*

Notary

### CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Bartow County.

I, R. M. Gaines, Ordinary of said County, do certify that I personally know Mrs. Mary D. Prickett, the applicant, and that she is the lawful widow of W. W. Prickett, who was on the Pension Roll of said Bartow County, and was paid a Pension from Bartow County for 1928, and at the time of his death on the 7 day of January, 1929, there was due to him and unpaid his Pension of Fifty (\$50.00) Dollars from the State of Georgia, and I know S. M. Breweth, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 20 of February, 1929.

(Seal of Ordinary)

*R. M. Gaines*, Ordinary  
Bartow County

### CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Bartow County.

I, R. M. Gaines, Ordinary of said County, do certify that I personally know Mrs. Mary D. Prickett, the applicant, and that she is the lawful widow of Mr. W. W. Prickett, who was on the Pension Roll of said Bartow County, and was paid a Pension from Bartow County for 1928, and at the time of his death on the 7th day of January, 1929, there was due to him and unpaid his Pension of Fifty (\$50.00) Dollars from the State of Georgia, and I know H. P. Pruitt, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 14th of January, 1929.

(Seal of Ordinary)

*R. M. Gaines*, Ordinary  
Bartow County

FIRST QUARTER 1929

Bartow County

192

Application for Pension Due  
Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. Mary D. Prickett

Widow of W. W. Prickett

Date of Marriage March 30, 1905

Date of Death January 7th 1929

Approved and ordered paid.

*John W. Clark*

JOHN W. CLARK,

Commissioner of Pensions.

Ordinary. Fill out above in full and send this to the Pension Department for approval before you pay out the money. Then return it with your pay-rolls for permanent filing in the Pension Department.

Application for Pension Due  
Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. Mary D. Prickett

Widow of W. W. Prickett

Date of Marriage March 30, 1905

Date of Death January 7, 1929

Approved and ordered paid.

JOHN W. CLARK,

Commissioner of Pensions.

Ordinary. Fill out above in full and send this to the Pension Department for approval before you pay out the money. Then return it with your pay-rolls for permanent filing in the Pension Department.

*Prickett, W. W.*  
*Duplicate*

Bartow County

192

Prickett, W. W.  
Duplicate  
Bartow County  
192  
Application for Pension Due Deceased Soldier  
(UNDER ACT 1891)  
(To be paid to his Widow)  
BY  
Mrs. Mary D. Prickett  
Widow of W. W. Prickett  
Date of Marriage March 30, 1905  
Date of Death January 7, 1929  
Approved and ordered paid.  
192  
JOHN W. CLARK,  
Commissioner of Pensions.  
Ordinary: Fill out above in full and send this blank to Pension Department and then return it with your pay-rolls for permanent filing in the Pension Department.

FIRST QUARTER 1929  
Bartow County  
192  
Application for Pension Due Deceased Soldier  
(UNDER ACT 1891)  
(To be paid to his Widow)  
BY  
Mrs. Mary D. Prickett  
Widow of W. W. Prickett  
Date of Marriage March 30, 1905  
Date of Death January 7th 1929  
Approved and ordered paid.  
192  
JOHN W. CLARK,  
Commissioner of Pensions.  
Ordinary: Fill out above in full and send this blank to Pension Department and then return it with your pay-rolls for permanent filing in the Pension Department.

### Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Bartow County.

Personally before me, the Ordinary of said County, comes Mrs. Mary D. Prickett of said County, who after being duly sworn, on oath says that she is the widow of W. W. Prickett

and that said Pensioner was on the Pension Roll of Bartow County and was paid a Pension of fifty (\$ 50.00 ) Dollars

from said County for 4th Quarter, 1928, and that the said Pensioner died in Bartow County on the 7 day of January, 1929.

Applicant further swears that she married the said W. W. Prickett on the 30 day of March 1905, in Bartow County and State of Georgia, 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 1st Qr. Pension, 1929, due and unpaid be paid to her.

Sworn to and subscribed before me this 20 day of February, 1929.  
A. M. Gaines, Ordinary  
Bartow County  
(Seal of Ordinary)  
Mary D. Prickett (L. S.)

### AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Bartow County.

Personally before me comes D. M. Pruitt, who on oath says that he knew W. W. Prickett while in life and that he knows Mrs. Mary D. Prickett, the

above applicant; and knows that the said W. W. Prickett and Mary D. Prickett were in due form of law married in the County of Bartow in the State of Georgia on the 30 day of March, 1905, and that they were residing together as husband and wife at the time of his death on the 7 day of January, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 20 day of February, 1929.  
A. M. Gaines, Ordinary  
Bartow County  
(Seal of Ordinary)  
D. M. Pruitt

#### INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the enormous large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the same attested, and that back of application, when folded, is filed in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

### Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Bartow County.

Personally before me, the Ordinary of said County, comes Mrs. Mary D. Prickett of said County, who after being duly sworn, on oath says that she is the widow of W. W. Prickett

and that said Pensioner was on the Pension Roll of Bartow County and was paid a Pension of fifty Dollars (\$ 50.00 ) Dollars

from said County for 4th Quarter, 1928, and that the said Pensioner died in Bartow County on the 7th day of January, 1929.

Applicant further swears that she married the said W. W. Prickett on the 30th day of March 1905, 18, in Bartow County and State of Georgia, 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 1st Qr. Pension, 1929, due and unpaid be paid to her.

Sworn to and subscribed before me this 14th day of January, 1929.  
A. M. Gaines, Ordinary  
Bartow County  
(Seal of Ordinary)  
Mary D. Prickett (L. S.)

### AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Bartow County.

Personally before me comes H. P. Pruitt, who on oath says that he knew W. W. Prickett while in life and that he knows Mrs. Mary D. Prickett, the

above applicant; and knows that the said W. W. Prickett and Mary D. Prickett were in due form of law married in the County of Bartow in the State of Georgia on the 30th day of March, 1905, 18, and that they were residing together as husband and wife at the time of his death on the 7th day of January, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 14th day of January, 1929.  
A. M. Gaines, Ordinary  
Bartow County  
(Seal of Ordinary)  
H. P. Pruitt

#### INSTRUCTIONS:

- 1st. Proof of marriage must be made.
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- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the same attested, and that back of application, when folded, is filed in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.



# AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Bartow County.  
 Personally before me comes D. M. Pruitt, who  
 on oath says that he knew W. W. Prickett while in life  
 and that he knows Mrs. Mary D. Prickett, the  
 above applicant; and knows that the said W. W. Prickett  
 and Mary D. Prickett were in due form of law married in the County  
 of Bartow in the State of Georgia on  
 the 30 day of March, 1905, and that they were residing  
 together as husband and wife at the time of his death on the 7 day of  
January, 1929, and that she is his dependent widow.  
 Signed and subscribed before me this 20 day of February, 1929.  
R. M. James, Ordinary | D. M. Pruitt  
Bartow, County | (Seal of Ordinary)

## INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filed in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

# AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Bartow County.  
 Personally before me comes H. P. Pruitt, who  
 on oath says that he knew W. W. Prickett while in life  
 and that he knows Mrs. Mary D. Prickett, the  
 above applicant; and knows that the said W. W. Prickett  
 and Mary D. Prickett were in due form of law married in the County  
 of Bartow in the State of Georgia on  
 the 30th day of March, 1905, and that they were residing  
 together as husband and wife at the time of his death on the 7th day of  
January, 1929, and that she is his dependent widow.  
 Signed and subscribed before me this 14th day of January, 1929.  
R. M. James, Ordinary | H. P. Pruitt  
Bartow, County | (Seal of Ordinary)

## INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seals affixed, and that back of application, when folded, is filed in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

## CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Bartow County.  
 I, R. M. James, Ordinary of said County, do certify  
 that I personally know Mrs. Mary D. Prickett, the applicant, and that she  
 is the lawful widow of W. W. Prickett, who was on  
 the Pension Roll of said Bartow County, and was paid  
 a Pension from Bartow County for 1928, and at the time  
 of his death on the 7th day of January, 1929, there was due to  
 him and unpaid his Pension of Two Hundred Dollars from the State  
 of Georgia, and I know D. M. Pruitt, the within  
 witness, and he is of a truthful and trustworthy character and entitled to full credit.  
 Given under my hand and seal this 21 day of May, 1929.  
 (Seal of Ordinary) R. M. James, Ordinary  
Bartow, County

## CERTIFICATE OF ORDINARY-GEORGIA

STATE OF GEORGIA, Bartow County.  
 I, R. M. James, Ordinary of said County, do certify  
 that I personally know Mrs. Mary D. Prickett, the applicant, and that she  
 is the lawful widow of W. W. Prickett, who was on  
 the Pension Roll of said Bartow County, and was paid  
 a Pension from Bartow County for 1928, and at the time  
 of his death on the 7th day of January, 1929, there was due to  
 him and unpaid his Pension of Two Hundred Dollars from the State  
 of Georgia, and I know D. M. Pruitt, the within  
 witness, and he is of a truthful and trustworthy character and entitled to full credit.  
 Given under my hand and seal this 31 day of August, 1929.  
 (Seal of Ordinary) R. M. James, Ordinary  
Bartow, County

SECOND QUARTER 1929

County	<u>Bartow</u>
1929	
Application for Pension Due Deceased Soldier (UNDER ACT 1891) (To be paid to his Widow)	
BY	<u>Mrs. Mary D. Prickett</u> Widow of <u>W. W. Prickett</u> Date of Marriage, <u>Mar 30-1905</u> Date of Death, <u>Jan 7 1929</u> Approved and ordered paid. <u>May 25 1929</u> <u>JOHN W. CLARK</u> Commissioner of Pensions.
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.	

County	<u>Bartow</u>
1929	
Application for Pension Due Deceased Soldier (UNDER ACT 1891) (To be paid to his Widow)	
BY	<u>Mrs. Mary D. Prickett</u> Widow of <u>W. W. Prickett</u> Date of Marriage, <u>Mar 30-1905</u> Date of Death, <u>Jan 7 1929</u> Approved and ordered paid. <u>Sept 7 1929</u> <u>JOHN W. CLARK</u> Commissioner of Pensions.
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Department.	

Barlow County  
1929

# Application for Pension Due Deceased Soldier

(UNDER ACT 1891)  
(To be paid to his Widow)

BY  
Mrs. Mary D. Prickett  
Widow of W. W. Prickett  
Date of Marriage, Mar 30-1905  
Date of Death Jan 7 1929

Approved and ordered paid.

May 28 1929  
JOHN W. CLARK  
Commissioner of Pensions.

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

Prickett, W. W.  
3rd Quarter, 1929  
Barlow County  
1929

# Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY  
Mrs. Mary D. Prickett  
Widow of W. W. Prickett  
Date of Marriage, Mar 30-1905  
Date of Death Jan 7 1929

Approved and ordered paid.

Sept 4 1929  
JOHN W. CLARK  
Commissioner of Pensions.

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

## Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Barlow County.

Personally before me, the Ordinary of said County, comes Mrs. Mary D. Prickett of said County, who after being duly sworn, on oath says that she is the widow of W. W. Prickett

and that said Pensioner was on the Pension Roll of Barlow County and was paid a Pension of Two Hundred (\$200.00) Dollars from said County for four quarters 1928, and that the said Pensioner died in Barlow County on the 7th day of January, 1929.

Applicant further swears that she married the said W. W. Prickett on the 30th day of March, 1905, in Barlow County and State of Georgia, 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 2nd Qr. Pension, 1929, due and unpaid be paid to her.

Sworn to and subscribed before me this 27 day of May, 1929  
A. M. Gammon, Ordinary  
Barlow County  
(Seal of Ordinary)

## AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Barlow County.

Personally before me comes D. M. Prickett, who on oath says that he knew W. W. Prickett while in life and that he knows Mrs. Mary D. Prickett, the above applicant; and knows that the said W. W. Prickett and Mary D. Prickett were in due form of law married in the County of Barlow in the State of Georgia on the 30th day of March, 1905, and that they were residing together as husband and wife at the time of his death on the 7th day of January, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 27 day of May, 1929  
A. M. Gammon, Ordinary  
Barlow County  
(Seal of Ordinary)

## INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage record is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal affixed, and that back of application, when folded, is filled in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow of person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

## Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Barlow County.

Personally before me, the Ordinary of said County, comes Mrs. Mary D. Prickett of said County, who after being duly sworn, on oath says that she is the widow of W. W. Prickett

and that said Pensioner was on the Pension Roll of Barlow County and was paid a Pension of Two Hundred (\$200.00) Dollars from said County for four quarters, 1929, and that the said Pensioner died in Barlow County on the 7th day of January, 1929.

Applicant further swears that she married the said W. W. Prickett on the 30th day of March, 1905, in Barlow County and State of Georgia, 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 3rd Qr. Pension, 1929, due and unpaid be paid to her.

Sworn to and subscribed before me this 31 day of August, 1929  
A. M. Gammon, Ordinary  
Barlow County  
(Seal of Ordinary)

## AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Barlow County.

Personally before me comes D. M. Prickett, who on oath says that he knew W. W. Prickett while in life and that he knows Mrs. Mary D. Prickett, the above applicant; and knows that the said W. W. Prickett and Mary D. Prickett were in due form of law married in the County of Barlow in the State of Georgia on the 30th day of March, 1905, and that they were residing together as husband and wife at the time of his death on the 7th day of January, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 27 day of August, 1929  
A. M. Gammon, Ordinary  
Barlow County  
(Seal of Ordinary)

## INSTRUCTIONS:

- 1st. Proof of marriage must be made.
- 2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage record is the proper thing.
- 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal affixed, and that back of application, when folded, is filled in.
- 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.
- 5th. Return this application with your final settlement to the Pension Department.
- 6th. The widow of person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.
- 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.



## AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Barlow County.

Personally before me comes D. M. Prickett, who  
 on oath says that he knew W. W. Prickett while in life  
 and that he knows Mrs. Mary D. Prickett, the  
 above applicant; and knows that the said W. W. Prickett  
 and Mary D. Prickett were in due form of law married in the County  
 of Barlow in the State of Georgia on  
 the 30th day of March, 1920, and that they were residing  
 together as husband and wife at the time of his death on the 7th day of  
January, 1924, and that she is his dependent widow.

Sworn to and subscribed before me this 22 day of May, 1929  
R. M. Gamis Ordinary  
Barlow County D. M. Prickett  
 (Seal of Ordinary)

## INSTRUCTIONS:

1st. Proof of marriage must be made.  
 2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing.  
 Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.  
 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal affixed, and that back of application, when filled, is filled in.  
 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.  
 5th. Return this application with your final settlement to the Pension Department.  
 6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.  
 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

## AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Barlow County.

Personally before me comes D. M. Prickett, who  
 on oath says that he knew W. W. Prickett while in life  
 and that he knows Mrs. Mary D. Prickett, the  
 above applicant; and knows that the said W. W. Prickett  
 and Mary D. Prickett were in due form of law married in the County  
 of Barlow in the State of Georgia on  
 the 30th day of March, 1920, and that they were residing  
 together as husband and wife at the time of his death on the 7th day of  
January, 1924, and that she is his dependent widow.

Sworn to and subscribed before me this 21 day of August, 1929  
R. M. Gamis Ordinary  
Barlow County D. M. Prickett  
 (Seal of Ordinary)

## INSTRUCTIONS:

1st. Proof of marriage must be made.  
 2nd. Do not use the enormously large form of marriage certificate in common vogue throughout the State, suitable only for framing.  
 Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.  
 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal affixed, and that back of application, when filled, is filled in.  
 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the payment.  
 5th. Return this application with your final settlement to the Pension Department.  
 6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the soldier pay roll.  
 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

## CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Barlow County.

I, R. M. Gamis Ordinary of said County, do certify  
 that I personally know Mrs. Mary D. Prickett, the applicant, and that she  
 is the lawful widow of W. W. Prickett, who was on  
 the Pension Roll of said Barlow County, and was paid  
 a Pension from Barlow County for 1928, and at the time  
 of his death on the 7th day of January, 1924, there was due to  
 him and unpaid his Pension of Five Hundred Dollars from the State  
 of Georgia, and I know D. M. Prickett, the within  
 witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 26th of December, 1929  
 (Seal of Ordinary)

R. M. Gamis Ordinary  
Barlow County

William W. P. Prickett, private,  
 Co. C, 1st Ga. Cavalry, U.S.A.,  
 enlisted Aug. 12, 1862, for three  
 years or the war. On company roll  
 for Nov.-Dec. 1862, last on which  
 his name appears, he is reported  
 present. No later record found.

Nothing has been found of his  
 capture, confinement or release.

(Signed) F. C. Ainsworth,  
 The Adjutant General

Prickett, W. W.  
 FOURTH QUARTER 1929

Barlow County  
 1924

Application for Pension Due  
 Deceased Soldier

(UNDER ACT 1891)  
 (To be paid to his Widow)

BY

Mrs. Mary D. Prickett  
 Widow of W. W. Prickett  
 Date of Marriage Mar. 30, 1920  
 Date of Death Jan. 7, 1924  
 Approved and ordered paid.

Five 500 1929

R. deT. Lawrence  
 Commissioner of Pensions.  
 Ordinary: Fill out above in full and send  
 this application to the Pension Department for ap-  
 proval before you pay any money. If approved  
 then return it with your pay-rolls for per-  
 manent filing in the Pension Department.

William W. P. Prickett, private,  
Co. C, 1st Ga. Cavalry, C.S.A.,  
enlisted Aug. 12, 1864, for three  
years or the war. On company roll  
for Nov.-Dec. 1862, last on which  
his name appears, he is reported  
present. No later record found.

Nothing has been found of his  
capture, confinement or release.

(Signed) F. C. Ainsworth,  
The Adjutant General

*Prickett, W. W.*  
FOURTH QUARTER 1929

*Barlow* County  
1929

Application for Pension Due  
Deceased Soldier  
(UNDER ACT 1891)  
(To be paid to his Widow)

BY  
*Mrs. Mary D. Prickett*  
Widow of *W. W. Prickett*  
Date of Marriage *Mar. 30, 1903*  
Date of Death *Jan. 7, 1929*  
Approved and ordered paid.  
*15 Dec 5th 1929*  
R. de T. Lawrence  
Commissioner of Pensions.

Ordinary. Fill out above in full and send  
this blank to Pension Department for ap-  
proval before you pay out the money. Then  
return it with your pay-roll for per-  
manent filing in the Pension Department.

# Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)  
(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, *Barlow* County.

Personally before me, the Ordinary of said County, comes Mrs. *Mary D. Prickett*  
of said County, who after being duly sworn, on oath says that she is the widow of *W. W. Prickett*

and that said Pensioner was on the Pension Roll of *Barlow* County  
and was paid a Pension of *Two Hundred* (\$ *200.00* ) Dollars  
from said County for *four* Quarter, 1929, and that the said Pensioner died in  
*Barlow* County on the *7th* day of *January*, 1929.  
Applicant further swears that she married the said *W. W. Prickett*  
on the *30th* day of *March*, 1903, in *Barlow* County and  
State of *Georgia*, 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 *4th* Qr. Pension, 1929  
due and unpaid be paid to her.

Sworn to and subscribed before me this *3rd* day of *December*, 1929.  
*W. M. Gamm* Ordinary  
*Barlow* County  
(Seal of Ordinary) *Mary D. Prickett* (L. S.)

## AFFIDAVIT OF WITNESS

STATE OF GEORGIA, *Barlow* County.

Personally before me comes *D. M. Brewster*, who  
on oath says that he knew *W. W. Prickett* while in life  
and that he knows Mrs. *Mary D. Prickett*, the  
above applicant; and knows that the said *W. W. Prickett*  
and *Mary D. Prickett* were in due form of law married in the County  
of *Barlow* in the State of *Georgia* on  
the *30th* day of *March*, 1903, and that they were residing  
together as husband and wife at the time of his death on the *7th* day of  
*January*, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this *3rd* day of *December*, 1929.  
*W. M. Gamm* Ordinary  
*Barlow* County  
(Seal of Ordinary) *D. M. Brewster*

### INSTRUCTIONS:

1st. Proof of marriage must be made.  
2nd. Do not use the commonly large form of marriage certificate in common vogue throughout the State, suitable only for framing.  
Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage  
license is the proper thing.  
3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the  
seal affixed, and that back of application, when filled, is filed in.  
4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make  
the payment.  
5th. Return this application with your final settlement to the Pension Department.  
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the  
name of husband on the soldier pay roll.  
7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to roll in  
her own right.

# AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Bartow County.

Personally before me comes D. M. Prescott, who  
on oath says that he knew W. W. Prickett while in life  
and that he knows Mrs. Mary D. Prickett, the  
above applicant; and knows that the said W. W. Prickett  
and Mary D. Prickett were in due form of law married in the County  
of Bartow in the State of Georgia on  
the 30th day of March, 1903, and that they were residing  
together as husband and wife at the time of his death on the 7th day of  
January, 1904, and that she is his dependent widow.

Subscribed and sworn to before me this 3rd day of December, 1907  
H. M. Ginn Ordinary | D. M. Prescott  
Bartow County  
(Seal of Ordinary)

## INSTRUCTIONS:

1st. Proof of marriage must be made.  
2nd. Do not use the enormous large form of marriage certificate in common vogue throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.  
3rd. The Ordinary should examine the blank after it is filed in, and see that everything is fully and correctly completed, and the same signed, and that back of application, when folded, is filed in.  
4th. Pay out no money on this application until approved by the Pension Department.  
5th. Return this application with your final settlement to the Pension Department.  
6th. The widow or person holding her proper power-of-attorney receipts for this pension by signing name, as widow, opposite the name of husband on the under per roll.  
7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to rolls in her own right.

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



CALEDONIA, GA. July 22<sup>nd</sup>, 1907.

Col. J. W. Linkey  
Atlanta, Ga.  
Dear Col. I enclose you another affidavit  
relating to W. W. Prickett's pension application.  
His wife sent me from Judge Fann both co-  
-signed to be the consensus opinion of those  
who know Mr. Prickett that he served in the  
Army as stated in his application and that  
he was wounded from Camp Morton as he  
states. I am expecting to hear from you.  
I am having some weather now. Hot and  
dry.  
Your friend  
G. W. Hendricks

By the way you have not told me everything the  
legislation has done. are doing and what the  
hundred they are likely to do in the future.  
J. W. D.

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett  
and Mary D. Prickett were in due form of law mar-  
ried in the County of Bartow in the State of Geor-  
-gia on the 30th day of March, 1903, as appears of record in my office, in  
Married record J, page 230, recorded 27 day of May, 1903

This 3rd day of December, 1907

H. M. Ginn  
Ordinary

State of Georgia  
Bartow County

Personally comes  
B. H. Griggs, a resident of Said County,  
who being duly sworn deposes and  
says that he served in Co. B, 41<sup>st</sup>  
Regt. Vols. during the Civil war.  
He was captured on July 1864 and  
confined at Camp Morton, Indiana,  
and was there at the close of the  
war. Defendant knows the Plaintiff,  
W. W. Prickett, and knew him at said  
Camp. The said Prickett, having  
been captured, was confined at said  
Camp Morton till the close of the  
war - After the surrender we were  
furnishing transportation by the Govern-  
ment and went home together.  
He came home to Georgia after the  
close of the war coming direct  
home from Camp Morton.  
B. H. Griggs.

Sworn to and subscribed before  
me this July 9<sup>th</sup> 1906. (and I  
certify that B. H. Griggs is a resident  
of said County, whose statements are  
worthy of full faith and credit.  
John H. Heston,  
Ordinary

We are having some weather now. Hot and dry.  
Your friend  
Geo. Hendricks

By the way, you have not told me everything the legislature has done, are doing and what the chances they are likely to do in the future.  
J.W.D.

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett and Miss D. Griggs were united in the Holy Bonds of Matrimony by Rev. W. E. Lee, O. M. G. on the 30 day of March, 1905, as appears of record in my office, in Marriage Record J, page 330, recorded 27 day of May, 1905.

This 31 day of December, 1929

*R. M. Griggs*  
Ordinary

STATE OF GEORGIA  
MARRIAGE CERTIFICATE  
BARTOW COUNTY.

This CERTIFICATE that W. W. Prickett and Miss Mary Griggs were united in the Holy Bonds of Matrimony by W. E. Lee, O. M. G. on the 30 day of March, in the year of our Lord 1905, as appears of record in my office in Marriage Records, book J, page 330. This 14 day of February, 1909.

*R. M. Griggs*  
Ordinary Bartow County, Ga.

State of Georgia, Bartow county,

This is to certify that W. W. Prickett and Mary D. Griggs were united in the Holy Bonds of Matrimony by Rev. W. E. Lee O. M. G. on the 30 day of March 1905, as of record in this office in Marriage Records, Book J, Page 330. Recorded 27 day of May 1905.  
This January 14, 1929.

*R. M. Griggs*  
Ordinary.

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett and Mary D. Griggs were united in the Holy Bonds of Matrimony by Rev. W. E. Lee, O. M. G. on the 30 day of March, 1905, as appears of record in my office, in Marriage Record J, page 330, Recorded 27 day of May, 1905.

This 31 day of August, 1929

*R. M. Griggs*  
Ordinary

Camp Morton till the close of the war - After the surrender we were furnished transportation by the Government and sent home together. We came home together after the close of the war. Coming direct home from Camp Morton.  
S. H. Griggs

Known to and subscribed before me this July 9th 1906, (and I certify that S. H. Griggs is a resident of said County, whose statements are worthy of full faith and credit.)  
John H. Griggs

NAME Prickett, W.W.

YEAR 1910 COUNTY Bartow

BORN AND BIRTH PLACE 1848, - Cedar Bluff, Alabama.  
Resident of Georgia since 1867.

ENLISTED YEAR AND PLACE 1862, - Kingston, Tenn.,

RANK.

COMPANY AND REGIMENT Co. C. 1st. Regt. Ca. Cavalry,

NAME OF CAPTAIN AND REGIMENT

REMARKS

NATURAL, BORN June 1864, while on a scout for Gen. Wheeler, Witness states: In through North Carolina. Carried to Louisville, Prison, Camp Morton, Ind. Ky.

RELEASED. From Prison, after the close of the war - Witness states.

NAME AND RANK OF COMMANDER Command surrendered: April 26, 1865, Greensboro, North Carolina.

IF NOT PRESENT AT SURRENDER, WHERE AND WHEN ARRIVED. At home, having just arrived. Got away from the Guard at Louisville and skipped.

WHERE,

WITNESSES. J. H. Dunn, - Same Command - No data.

S. H. Griggs, - In Prison with applicant - John H. Griggs, - Returned to Ga. with applicant when he was released from Prison, Camp Morton, Ind.

State of Georgia, Bartow county,

This is to certify that W.W. Prickett and Mary D. Griggs  
Were united in the holy bonds of matrimony by Rev. W.W. Lee O.M.G.  
on the 30 day of March 1905.  
as of record in this office in Marriage Record Book J, Page 330  
Recorded 27 day of May 1905.  
This January 14, 1929.

*R. M. Griggs*  
Ordinary.

WITNESSES

CAPTURED, JOHN H. GRIGGS June 1864, while on a scout for Gen. Wheeler,  
Witness states: In through North Carolina. Carried to Louisville,  
Prison, Camp Morton, Ind., Ky.

RELEASED. From Prison, after the close of the war- Witness states.

ARMY AND NAVAL SERVICE: Command surrendered: April 26, 1865,  
Greensboro, North Carolina.

IF NOT PRESENT AT SIGNATURE, JAMES H. GRIGGS At home, having just ar-  
rived. Got away from the  
Guard at Louisville and  
skipped.

DEED, WHEN ANY WITNESS

HUNTER,

WITNESSES. J.H. Dunn, - Same Command- No data.

B.W. Griggs, - In Prison with applicant-  
John H. Griggs, - Returned to Ga. with applicant when he  
was released from Prison, Camp Morton, Ind.

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett and  
Mary D. Griggs were united in the Holy Bonds of Matrimony by  
Rev. W. W. Lee, O. M. G. on the 30 day of March, 1905, as appears  
of record in my office, in Marriage Record J, page 330, Recorded  
27 day of May, 1905.

This 31 day of August, 1929

*R. M. Griggs*  
Ordinary

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett  
and Mary D. Griggs were united in the Holy Bonds of Mat-  
rimony by Rev. W. W. Lee, O. M. G. on the 30 day of  
March, 1905, as appears of record in my office, in  
Marriage Record J, page 330, Recorded 27 day of May, 1905

This 31 day of December, 1929

*R. M. Griggs*  
Ordinary

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett and Mary D. Griggs  
Were united in the Holy Bonds of Matrimony by Rev. W. W. Lee, O. M. G.  
on the 30 day of March, 1905, as appears of record in my office, in  
Marriage Record Book "J", page 330, Recorded 27 day of May, 1905.

This 24 day of May, 1929

*R. M. Griggs*  
Ordinary.

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett and Mary D. Griggs were united in the Holy Bonds of Matrimony by Rev. W. W. Lee, O. M. G. on the 30 day of March, 1905, as appears of record in my office, in Marriage Record J, page 330, recorded 27 day of May, 1905.

This 30th day of December, 1929

*R. M. Ginn*  
Ordinary

STATE OF GEORGIA, BARTOW COUNTY.

This is to certify that W. W. Prickett and Mary D. Griggs were united in the Holy Bonds of Matrimony by Rev. W. W. Lee, O. M. G. on the 30 day of March, 1905, as appears of record in my office, in Marriage Record Book "J", page 330, recorded 27 day of May, 1905.

This 24 day of May 1929

*R. M. Ginn*  
Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA.

*Copy 1*

*William Prince* of *Barlow* County, Georgia, do hereby authorize

to receive and receipt for the pension allowed, and request that he be paid same at *Fort Smith* by check

Witness my hand and seal, this *15th* day of *Sept* 1902

*William Prince* [L.S.]

*Wm Prince*

Executed in presence of

No.

INDIGENT PENSION,  
1901.

Name *William Prince*  
County *Barlow*  
Co. *6th Reg't*

Approved \_\_\_\_\_ 1901.

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.

*29/7-1902*