

day of March 1892.
G. W. Hendricks Ordinary.
Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

Know all Men by these Presents, That I,
of

County, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereto set my hand, and seal this
day of _____ 1892.

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

16th day of March 1893.
G. W. Hendricks Ordinary.
Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

County, }

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

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

I further certify that

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

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

Ordinary

County.

STATE OF GEORGIA

POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

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

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

[L. S.]

Executed in the presence of us

P. B. Mayfield
J. K. Silman

DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

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

IN WITNESS WHEREOF, I have hereto set my hand and seal, this 19th
day of March 1895.

[L. S.]

Executed in presence of us

R. L. Anderson
W. F. Stephens

DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

(For These Already Enrolled.)

Soldier's Pension.

1894.

Name R. L. Sellers

County Barlow

Disability Left arm

Amount, \$ 100.00

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDED TO

G. W. Hendricks

Don. W. Harrison, State Printer, Atlanta.

(For These Already Enrolled.)

SOLDIER'S PENSION.

1895.

Name R. L. Sellers

County Barlow

Disability Left arm

Amount, \$ 100.00

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

alt

Don. W. Harrison, State Printer, Atlanta.

Sellers, R. L.
Bartow Co.
(For Those Already Enrolled.)
No. *109*
Soldier's Pension.
1894.
Name *R. L. Sellers*
County *Bartow*
Disability *Loss of arm*
Amount, \$ *100.00*
3/15
1894.
W. H. HARRISON,
Secretary Executive Department.
WARRANT HANDLED TO
G. W. Hendricks
He has

Sellers, R. L.
Bartow Co.
(For Those Already Enrolled.)
No. *979*
SOLDIER'S PENSION.
1895.
Name *R. L. Sellers*
County *Bartow*
Disability *Loss of arm*
Amount, \$ *100.00*
7/1
1895.
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDLED TO
ally
Mr. R. L. Sellers
Geo. W. Hendricks, Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.
PERSONALLY appears *R. L. Sellers* 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 *6* day of *March* 18*44*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *private* in Company *A*, of *68*th Regiment of *Georgia* Volunteers, *Jackson*'s Brigade; that whilst engaged in such military service at the battle of *Kennesaw Mountain* in the State of *Georgia* on the *15* day of *June* 18*64* he was wounded as follows: *that through the right arm near the shoulder joint, arm amputated above the elbow joint*

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, 1894. I have heretofore been allowed a pension of *One hundred* dollars, for the year 18*93*.

Sworn to and subscribed before me, this, the *6* day of *March* 1894. *R. L. Sellers*
G. W. Hendricks Ordinary

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

STATE OF GEORGIA,

Bartow County.
I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *R. L. Sellers* 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 *6* day of *March* 1894.
G. W. Hendricks
Ordinary *Bartow* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.
PERSONALLY appears *R. L. Sellers* 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 *6* day of *March* 18*44*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *private* in Company *A*, of *68*th Regiment of *Georgia* Volunteers, *Jackson*'s Brigade; that whilst engaged in such military service at the battle of *Kennesaw Mountain* in the State of *Georgia* on the *15* day of *June* 18*64*, he was wounded as follows: *that through the right arm near the shoulder joint, arm amputated near the elbow joint*

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 *One hundred* dollars, for the year 18*94*.

Sworn to and subscribed before me, this, the *9* day of *February* 1895. *R. L. Sellers*
G. W. Hendricks Ordinary

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

STATE OF GEORGIA,

Bartow County.
I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *R. L. Sellers* 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 *19* day of *February* 1895.
G. W. Hendricks
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, 1894. I have heretofore been allowed a pension of One hundred dollars, for the year 1893.

Sworn to and subscribed before me, this, the 7th day of March 1894.

G.W. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County,

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

Given under my official signature and seal, this 6th day of March 1894.



G.W. Hendricks
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 allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of One hundred dollars, for the year 1894.

Sworn to and subscribed before me, this, the 19th day of February 1895.

G.W. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County,

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

Given under my official signature and seal, this 19th day of February 1895.



G.W. Hendricks
Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County,

I, R. L. Sellers hereby authorize George W. Hendricks of Cartersville Ga

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

at Cartersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of February 1896.

R. L. Sellers [L. S.]

Executed in presence of
R. S. Anderson

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County,

I, R. L. Sellers hereby authorize G.W. Hendricks of Cartersville Ga

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

at Cartersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th day of February 1896.

R. L. Sellers [L. S.]

Executed in presence of
R. S. Anderson

ACT OF OCT. 1887.
(For Those Already Enrolled.)

No. 2701

SOLDIER'S PENSION.

1896.

Name R. L. Sellers
County Barlow
Disability loss of arm
Amount, \$ 160.00 1896.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT FORWARDED TO
G.H.H.

W. W. HARRISON, State Printer, Atlanta.

No data

ACT OF OCT. 1887.
(For Those Already Enrolled.)

No. 2414

**INVALID
SOLDIER'S PENSION.**

1898.

Name R. L. Sellers
County Barlow
Disability loss of arm
Amount, \$ 100.00 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT FORWARDED TO
G.H.H.

W. W. HARRISON, State Printer, Atlanta.

Sellers, R. L.
Barlow Co

ACT OF MARCH, 1887.
(For Those Already Enrolled.)

No. *2701*

SOLDIER'S PENSION.
1896.

Name *R. L. Sellers*
County *Barlow*
Disability *Loss of arm*
Amount, \$ *160.00*
3/4 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDLED TO
W.H.H.

No date

W. W. HARRISON, STATE PRINTER, ATLANTA.

Sellers, R. L.
Barlow Co

ACT OF MARCH, 1887.
(For Those Already Enrolled.)

No. *2414*

INVALID
SOLDIER'S PENSION.
1898.

Name *R. L. Sellers*
County *Barlow*
Disability *Loss of arm*
Amount, \$ *100.00*
2/7 1898

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
W.H.H.

W. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *R. L. Sellers* 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 *46 years* 18; that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States and served as a *Private* in Company *A*, of *6th* Regiment of *Ga* Volunteers, *Jackson's* Brigade; that whilst engaged in such military service in the State of *Ga*, on the *18* day of *June* 1864, he was wounded, injured or diseased as follows:

in Battle Kennesaw Mountain, and necessitated amputation of right arm between elbow and shoulder joint

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of *Barlow* county been allowed a pension of *One Hundred* dollars, for the year 1895.

Sworn to and subscribed before me, this, the

day of *Feb* 1896.

R. L. Sellers

Notarially attested and signed by me, the undersigned, a Notary Public in and for the State of Georgia, on this day of *Feb* 1896.

STATE OF GEORGIA,

Barlow County.

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

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

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

Ordinary *Barlow* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *R. L. Sellers* 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 *Dec* 1862; that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served as a *Private* in Company *H*, of *6th* Regiment of *Ga* Volunteers, *Jackson's* Brigade; that whilst engaged in such military service in the State of *Ga*, on the *18* day of *June* 1864, he was wounded, injured or diseased as follows:

Shot through right arm in battle of Kennesaw Mountain June 18th 1864. Arm amputated to its root of arm wound

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 *One Hundred* Dollars, for the year 1897.

Sworn to and subscribed before me, this, the

day of *Feb* 1898.

R. L. Sellers

Notarially attested and signed by me, the undersigned, a Notary Public in and for the State of Georgia, on this day of *Feb* 1898.

STATE OF GEORGIA,

Barlow County.

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

do certify that I am well acquainted with *R. L. Sellers* 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 *Feb* 1898.

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, 1896. I have heretofore as a resident of Barlow county been allowed a pension of One Hundred dollars, for the year 1895.

Sworn to and subscribed before me, this, 10th day of Feb, 1896. R L Sellers
G W Hendricks my

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

STATE OF GEORGIA,
Barlow County.

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

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



Ordinary Barlow County.

reponent 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 One Hundred Dollars, for the year 1897.

Sworn to and subscribed before me, this, 11th day of Feb, 1898. R L Sellers
G W Hendricks my

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

STATE OF GEORGIA,
Barlow County.

I, G W Hendricks Ordinary of said County, do certify that I am well acquainted with R L Sellers 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 Feb, 1898.



Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, R L Sellers hereby authorize George W Hendricks of Cartersville, Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Cartersville, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 29th day of January, 1900.

R L Sellers [L. S.]

Executed in presence of
John A Gladwin

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, R L Sellers hereby authorize George W Hendricks of Barlow to receive and receipt for the pension paid hereon and request that he remit same to me by check at Cartersville, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of Jan, 1901.

R L Sellers [L. S.]

Executed in presence of
J. H. Brandon

Barlow Co.
Sellers, R. L.

COPIES SECTION 188.	COPIES SECTION 188.
(For Those Already Enrolled.)	(For Those Already Enrolled.)
No. <u>895</u>	No. <u>1195</u>
INVALID	DISABLED
SOLDIER'S PENSION.	SOLDIER'S PENSION.
1900.	1901.
Name <u>R L Sellers</u>	Name <u>R L Sellers</u>
County <u>Barlow</u>	County <u>Barlow</u>
Disability <u>loss of arm</u>	Disability <u>loss of arm</u>
Amount, \$ <u>100</u>	Amount, \$ <u>100</u>
Warrant issued <u>Jan. 19</u> , 1900.	Warrant issued <u>Jan. 19</u> , 1901.
JOHN W. LINDSEY,	JOHN W. LINDSEY,
Commissioner of Pensions.	Commissioner of Pensions.
WARRANT HANDLED TO	WARRANT HANDLED TO
<u>Hendricks</u>	<u>Hendricks</u>
Geo. W. Harrison, State Printer, Atlanta.	Geo. W. Harrison, State Printer, Atlanta.
<u>No data</u>	<u>No data</u>

Sellers, R. L.
Barlow County

COPIES SECTION 188.	COPIES SECTION 188.
(For Those Already Enrolled.)	(For Those Already Enrolled.)
No. <u>1195</u>	No. <u>1195</u>
DISABLED	DISABLED
SOLDIER'S PENSION.	SOLDIER'S PENSION.
1901.	1901.
Name <u>R L Sellers</u>	Name <u>R L Sellers</u>
County <u>Barlow</u>	County <u>Barlow</u>
Disability <u>loss of arm</u>	Disability <u>loss of arm</u>
Amount, \$ <u>100</u>	Amount, \$ <u>100</u>
Warrant issued <u>Jan. 19</u> , 1901.	Warrant issued <u>Jan. 19</u> , 1901.
JOHN W. LINDSEY,	JOHN W. LINDSEY,
Commissioner of Pensions.	Commissioner of Pensions.
WARRANT HANDLED TO	WARRANT HANDLED TO
<u>Hendricks</u>	<u>Hendricks</u>
Geo. W. Harrison, State Printer, Atlanta.	Geo. W. Harrison, State Printer, Atlanta.
<u>No data</u>	<u>No data</u>

Barton Co.
Sellers, R. L.

COUNTY SECTOR 1890
(For Those Already Enrolled.)
No. *895*

INVALID
SOLDIER'S PENSION.
1900.

Name *R. L. Sellers*
County *Barton*
Disability *loss of arm*
Amount, \$ *100*
Warrant issued *Jan. 19, 1900.*

JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Handwritten
Gen. W. Harrison, State Printer, Atlanta.
No data

Sellers, R. L.
Barton County

COUNTY SECTOR 1901
(For Those Already Enrolled.)
No. *1195*

DISABLED
SOLDIER'S PENSION.
1901.

Name *R. L. Sellers*
County *Barton*
Disability *loss of arm*
Amount, \$ *100*
439 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Handwritten
Gen. W. Harrison, State Printer, Atlanta.
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barton County.

Personally appears *R. L. Sellers* 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 County, and has resided therein continuously ever since the day of *July* 18*60*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *H*, of *66*th Regiment of *Georgia* Volunteers, *Jackson's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *18* day of *June* 18*64*, he was wounded, injured or diseased as follows:

Received a wound in right arm in battle of Kenesaw Mountain. Arm amputated above elbow

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 *Barton* County been allowed an invalid pension of *One hundred* Dollars, for the year 189*9*.

Sworn to and subscribed before me, this, *29* day of *January* 1900, *R. L. Sellers* POST OFFICE *Handwritten*

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,

Barton County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *R. L. Sellers* 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 *29* day of *January* 1900, *G. W. Hendricks* Ordinary *Barton* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barton County.

Personally appears *R. L. Sellers* 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 *July* 18*60*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *H*, of *66*th Regiment of *Georgia* Volunteers, *Jackson's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *18* day of *June* 18*64*, he was wounded, injured or diseased as follows:

Wound shot wound through right arm resulting in the amputation of arm

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 *Barton* County been allowed an invalid pension of *One hundred* Dollars, for the year 1900.

Sworn to and subscribed before me, this, *29* day of *January* 1901, *G. W. Hendricks* POST OFFICE *Handwritten*

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,

Barton County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *R. L. Sellers* 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 *10-3* day of *January* 1901, *G. W. Hendricks* Ordinary *Barton* County.



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

Sworn to and subscribed before me, this, the 29 day of January 1900. } POST OFFICE
G.W. Lindricks Ordinary

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

STATE OF GEORGIA,

Barlow County. }
I, G.W. Lindricks Ordinary of said County, do certify that I am well acquainted with R. L. Sellers 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 29 day of January 1900.
G.W. Lindricks Ordinary 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 Barlow County been allowed an invalid pension of One hundred Dollars, for the year 1900.

Sworn to and subscribed before me, this the 29 day of Jan 1901. } Postoffice
G.W. Lindricks Ordinary

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

STATE OF GEORGIA,

Barlow County. }
I, G.W. Lindricks Ordinary of said County, do certify that I am well acquainted with R. L. Sellers 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 10 day of January 1901.
G.W. Lindricks Ordinary Barlow County.



POWER OF ATTORNEY.

STATE OF GEORGIA, }
Barlow County. }
I, R. L. Sellers hereby authorize G.W. Lindricks of Barlowville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by OK at Barlowville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 9 day of Feb 1903. R. L. Sellers [L. S.]

Executed in presence of John H. Cobb

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Barlow County. }
I, R. L. Sellers hereby authorize G.W. Lindricks of Barlowville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me by OK at Barlowville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13 day of Jan 1904. R. L. Sellers [L. S.]

Executed in presence of J. R. Anderson MP
Barlowville Ga

Sellers, R. L.
Barlowville Ga

COPIES SECTION 1280.
(FOR THOSE ALREADY ENROLLED.)

No. 1984

DISABLED
SOLDIER'S PENSION
1903.

Name R. L. Sellers
County Barlow
Co. 74 Regiment 65th
Disability loss of arm
Amount, \$ 100.00 2/10 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Gray
Geo. W. Harrison State Printer, Atlanta.

No date

Sellers, R. L.
Barlowville Ga

COPIES SECTION 1280.
(FOR THOSE ALREADY ENROLLED.)

No. 1579

DISABLED
SOLDIER'S PENSION
1904.

Name R. L. Sellers
County Barlow
Co. 74 Regiment 65th
Disability loss of arm
Amount, \$ 100.00 FEB-93 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Gray
Geo. W. Harrison, State Printer, Atlanta.

Sellers R. L.
Barlow County
(FOR THOSE ALREADY ENROLLED.)
No. *1934*
DISABLED
SOLDIER'S PENSION
1903.
Name *R. L. Sellers*
County *Barlow*
Co. *H* Regiment *65th*
Disability *loss of arm*
Amount, \$ *100.00*
2/10 1903.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Ordry
GEO. W. HARTMAN, STATE PRINTER, ATLANTA.

No data

Sellers R. L.
Barlow County
(FOR THOSE ALREADY ENROLLED.)
No. *1579*
DISABLED
SOLDIER'S PENSION
1904.
Name *R. L. Sellers*
County *Barlow*
Co. *H* Regiment *65th*
Disability *loss of arm*
Amount, \$ *100.00*
Feb 8 1904.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Ordry
GEO. W. HARTMAN, STATE PRINTER, ATLANTA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *R. L. Sellers* 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 *he* *was 14 yrs of age*; that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served as a *private* in Company *H*, of *65th* Regiment of *Ga* Volunteers *Jackson's* Brigade; that whilst engaged in such military service in the State of *Ga*, on the *18th* day of *June* 1864, he was wounded, injured or diseased as follows:

He was wounded in the right arm of battle of Kennesaw mountain. Arm amputated near the shoulder.

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 *one hundred* Dollars, for the year 1903.

Sworn to and subscribed before me, this the *R. L. Sellers* day of *Feb* 1903. Post-office *Emerson* *G. W. Hendricks Ordinary*

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

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *R. L. Sellers* 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 *Feb* 1903.

G. W. Hendricks Ordinary *Barlow* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *R. L. Sellers* 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 *6* day of *Dec* 1844, that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served as a *private* in Company *H*, of *65th* Regiment of *Ga* Volunteers *Jackson's* Brigade; that whilst engaged in such military service in the State of *Ga*, on the *18th* day of *June* 1864, he was wounded, injured or diseased as follows:

Shot in right arm, Arm amputated near the shoulder, battle of Kennesaw

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

Sworn to and subscribed before me, this the *R. L. Sellers* day of *Jan* 1904. *G. W. Hendricks Ordinary* Post-office *Emerson*

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

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this *13th* day of *Jan* 1904.

G. W. Hendricks Ordinary *Barlow* County.

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

in such military service in the State of Ga, on the 18th day of June 1894, he was wounded, injured or diseased as follows:
He was wounded in the right arm
of battle of Kennesaw mountain
Arm amputated near the shoulder

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 Bartow County, been allowed an invalid pension of One hundred Dollars, for the year 1902.

Sworn to and subscribed before me, this the 13th day of Jan 1904. } R. L. Sellers
G. W. Hendricks } Post-office Emerson

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

STATE OF GEORGIA, }
Bartow County. }

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with R. L. Sellers 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 Feb 1904.

G. W. Hendricks
Ordinary Bartow County.

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

of June 1894, he was wounded, injured or diseased as follows:
Shot in right arm, Arm amputated
near the shoulder, Cost of Kennesaw

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1904. I have heretofore, under said law, as a resident of Bartow County, been allowed an invalid pension of One hundred Dollars, for the year 1903.

Sworn to and subscribed before me, this the 13th day of Jan 1904. } R. L. Sellers
G. W. Hendricks } Post-office Emerson

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

STATE OF GEORGIA, }
Bartow County. }

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

Given under my official signature and seal, this 13th day of Jan 1904.

G. W. Hendricks
Ordinary Bartow County.

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

Bartow
Maimed Soldiers.
Voucher No. 1104
Amount \$ 100
Paid to R. L. Sellers
For Loss of arm
July 13 1890
Included in warrant No. _____
issued to Treasurer.
WARRANT CLERK.
A. M. Monte

Sellers, R. L.
Bartow
1891.
Maimed Soldiers.
Voucher No. 182
Amount \$ 100
Paid to R. L. Sellers
For Loss of arm
July 7 1891.
Included in warrant No. _____
issued to Treasurer.
WARRANT CLERK.
Applicant

Sellers, R. L.
BARTOW Co.
See 65th Regt, 1st Inf.
Company H
8 applications, dated
1879, 1889, 1897, 1899, 1902,
1905, 1906, 1907—

For *Loss of Arm*
July 13 1890
 Included in warrant No.
 issued to Treasurer.
 18
 WARRANT CLERK.
 W. J. Campbell, State Printer, Constitution Job Office
AM Monte

For *Loss of Arm*
July 7 1891.
 Included in warrant No.
 issued to Treasurer.
 1891.
 WARRANT CLERK.
 Geo. W. Harrison, State Printer, Atlanta.
Applicant

1879, 1889, 1897, 1899, 1902,
 1905, 1906, 1907-

No. 1104
 STATE OF GEORGIA, } *Atlanta, Ga., July 13, 1890*
 EXECUTIVE DEPARTMENT.
 Mr. *R. L. Sellers* of the County
 of *Bartow* having filed his application in the Executive
 Department for an allowance under the Act approved October 24, 1887, as amended by Act,
 approved, Dec. 24, 1888, and the same having been examined and allowed for
Loss of Arm
 He is entitled to receive the sum of *One Hundred & 00/100* Dollars
 for such disability, the same being the allowance due for the year ending October 24, 1890
 The Treasurer will pay the same and hold his receipt on this voucher, and return same
 to Executive Department for warrant.
 By the Governor,
W. H. Harrison
 CLERK EXECUTIVE DEPARTMENT.

100 00
 RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
One Hundred & 00/100 Dollars,
 per above voucher, this *13.* of *July* 1890
R. L. Sellers, by his atty.
in fact, A. Monte.

1891.
 No. 182
 STATE OF GEORGIA, } *Atlanta, Ga., July 7, 1891.*
 EXECUTIVE DEPARTMENT.
 Mr. *R. L. Sellers* 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
Loss of Arm
 He is entitled to receive the sum of *One Hundred & 00/100* Dollars
 for such disability, the same being the allowance due for the year ending October 24, 1891.
 The Treasurer will pay the same and hold his receipt on this voucher and return same to
 Executive Department for warrant.
 By the Governor,
W. H. Harrison
 SEC'Y EXECUTIVE DEPARTMENT.

100
 RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.
One Hundred & 00/100 Dollars,
 per above voucher, this *7* of *July* 1891.
R. L. Sellers

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

Loss of Arm
He is entitled to receive the sum of One Hundred & 00/100 Dollars for such disability, the same being the allowance due for the year ending October 24, 1890

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

By the Governor,

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,
per above voucher, this 13 of July 1890

R. L. Sellers, by his atty.
in fact, A. McFate.

Mr. R. L. Sellers 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

Loss of Arm
He is entitled to receive the sum of One Hundred & 00/100 Dollars for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor,

W. H. Harrison
SECY EXECUTIVE DEPARTMENT.

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

One Hundred & 00/100 Dollars,
per above voucher, this 7 of July 1891.

R. L. Sellers

Ordinary's Certificate

STATE OF GEORGIA

County of Barrow

I, Wm. W. Lindsey

Ordinary of said County, do certify

that I know Ma. Sallie E. Sellers 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 A. W. Willis

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 affidavits 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 21 day of Oct, 1919

(SEAL) Wm. W. Lindsey Ordinary, Barrow County.

NOTES: 1. Before any questions are answered the Ordinary shall read applicant and the questions in the following words:

2. Additional affidavits may be attached if such persons are insufficient.

3. All affidavits must be sworn to before the Ordinary of the County in which the pension is to be sworn and certified by

4. and Ordinary. 5. To make known the Ordinary of the County in which the pension is to be sworn and certified by

6. registration. 7. If not, prove marriage by some person, or by general

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Barrow
Name Sallie E. Sellers
Widow of R. L. Sellers
Company A
Regiment United Legion
Approved _____

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

10-29-1919

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-29-1919

Certificate

Ordinary of said County, do certify
that the applicant for pension, She

a bona fide continuing resident citizen of said County

both of them are now residents of said County and

and credit

24 day of Oct, 1919
Ordinary,
Barrow County.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!"
Notes are insufficient.
of the residence of the person to be sworn and certified by
himself. If not, prove marriage by some person, or by general

Ordinary's Certificate

STATE OF GEORGIA,

Barrow COUNTY.

I, Quinn Anderson Ordinary of said County, do certify
that I know Mrs. Sallie E. Sellers 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 J. M. Willis
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 affidavits 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 24 day of Oct, 1919

(SEAL)

Quinn Anderson Ordinary,
Barrow County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God!"
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to 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.

Widow's Pension

Under Act 1910—as Amended by Act of 1913

County BarrowName Sallie E. SellersWidow of J. M. WillisCompany Co. D, 1st Regt.Regiment Infantry

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

1919-6-2-01

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

Questions for Applicant

STATE OF GEORGIA,

Barrow COUNTY.

Personally before me comes Sallie E. Sellers 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? Sallie E. Sellers
2. How long and since when have you been a continuing resident of the State of Georgia? I have lived here for all of my life
3. When, where and to whom were you married? Jan 4, 1881, Barrow Co. Georgia
- 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? 1861, in
Barrow Co. Ga., Co. D, 1st Regt. Infantry
5. When and where did the command of your husband surrender or discharge from the army? Jan 26, 1865, Greensboro, N.C.
6. 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? He was discharged
8. Where was his command when he left? in account of loss of
- a. For what cause did he leave his command? arm in the battle
- b. By whose authority did he leave his command? of his superior
- c. For how long was he granted leave of absence? in June 18-1864
- d. What was his physical condition when he left his command? 1
- e. What effort did he make to return to his command? 1
- f. In what way was he prevented from going back to Command? 1
- h. Was he captured by the enemy at any time? 1
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released?

- j. When and where did your first husband die? Jan 26, 1865, Greensboro, N.C.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? 1
- m. Are you now a widow? Yes

9. Have you or your husband heretofore been paid a pension by the State? Yes
If so, when and for what cause were you or your husband placed on the roll? in account of loss of arm in the battle of Antietam

Sworn to and subscribed before me this the

24 day of Oct, 1919Quinn Anderson Ordinary,of Barrow County.

(SEAL)

Selling Sallie E. Sellers
County of Bartow
13 North County
Widow's Pension
Under Act 1910—as Amended by Act of 1919.
County *Bartow*
Name *Sallie E. Sellers*
Widow of *R. D. Sellers*
Company *1st*
Regiment *10th Cavalry*
Approved _____

J. W. LINDSEY,
Commissioner of Pensions,
Byrd Building Co., State Prison, Atlanta.

10-29-1919

7. If he was not present state clearly where he was? *He was discharged.*
8. Where was his command when he left? *In account of loss of*
a. For what cause did he leave his command? *from the battle*
b. By whose authority did he leave his command? *of the command*
c. For how long was he granted leave of absence? *in June 18-1864*
e. What was his physical condition when he left his command? *1*
f. What effort did he make to return to his command? *1*
g. In what way was he prevented from going back to Command *1*
h. Was he captured by the enemy at any time? *1*
i. If so, when and where captured and where held as a prisoner, and when and for what cause released?

j. When and where did your first husband die? *Jan. 26-1894 Emerson 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? *yes*
If so, when and for what cause were you or your husband placed on the roll? *in account of loss of arm at the battle of Kennesaw Mountain*
Sworn to and subscribed before me this the *21* day of *Oct* 19*19* } *Mrs S E Sellers*
W. W. Andrews Ordinary
of *Bartow* County.
(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA.

Bartow COUNTY.

Personally before me comes *H. M. Willis* 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? *H. M. Willis, Jr. Cartersville Ga*
2. How long and since when have you known *Sallie E. Sellers* applicant? *forty or more years for fifty years*
3. How long and since when has she continuously resided in this State? (Give date.) *she has lived in Ga since 8 years from her*
4. When and to whom was she married? *Feb. 1862* How do you know? *married him and she has been from then since*
5. How long and since when did you know *R. D. Sellers* her husband? *about 1862*
6. When and where did *R. D. Sellers* the husband of applicant, die? *Emerson Ga*
7. Were the applicant and her husband living together as husband and wife at the date of his death? *yes*
8. If not, how long did they live apart before his death? *no*
Were they divorced? *no*

- When, where and in what Company and Regiment did *R. D. Sellers* enlist? *1861. Pickens Co. Ga. Co. A. 1st Cavalry Regt.*
10. Were you a member of the same Company? *yes in Co. H. same Regt.*
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? *till battle of Kennesaw when he was killed*
12. When and where did his Command surrender, and was discharged? *April 1864. At Kennesaw N. C.*
13. Were you personally present when it was surrendered? *no* If not, where were you *at home* and how came you there? *no one told me*
14. Was the husband of applicant personally present at surrender? *no* If not, where was he? *he had been discharged on account of being wounded*
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? *he was wounded*
16. What effort did he make to return to his Command and how do you know of this? *he was wounded and lost his right arm*
17. How do you know of this? *he was wounded and lost his right arm*

Sworn to and subscribed before me this the *21* day of *Oct* 19*19* } *H. M. Willis*
W. W. Andrews Ordinary
of *Bartow* County.
(SEAL)

[illegible]

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

R.L.Sellers State of Georgia, Bartow County.
To Sallie E. Puckett To any Minister of the Gospel, Judge of the
Superior Court, Justice of the Peace, To Celebrate you are hereby auth-
orized and permitted to join in the Holy State of Matrimony R.L.Sellers
and Sallie E. Puckett according to the Rites of your church, provided
there be no lawful cause to obstruct the same, according to the Constitu-
tion and laws of this state and for so doing this shall be your suffi-
cient license.

Given under my hand and seal this 9th. day of December 1889.

J.A.Howard, Ordinary.

Georgia, Bartow County.

I, hereby certify that R.L.Sellers and Sallie E. Puckett were
joined together in the Holy Bonds of Matrimony on the 9th. day of
December 1889. by me.

Theo E. Smith M.G.

Recorded 9th. day of Feb. 1890.

J.A.Howard, Ordinary.

I certify that the above and foregoing is a
true and correct copy of marriage record
H page now of file in this office
This Oct. 21st 1919. Geo. Henderson
Ordinary Bartow
County Ga

Sellers, Sallie E. (Mrs.)

For Bartow County

1920

Application for Pension
Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

R. M. Gairne Ordinary

For Mrs. Sallie E. Sellers

Date of Death April 21 1920

Amount \$ 100.00

Approved and ordered paid

May 23 1920 R. deT. Lawrence
JOHN W. CLARK,
Commissioner of Pensions.

Paid 7/1/21 1920
R. M. Gairne Only

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

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

Cartersville, Ga., May 20 1920

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

Dear Sir:

Referring to the enclosed claim for burial
expenses, will state that in my report of the deaths
mailed you a few days after Mrs. Sellers death, I
stated that she was not insolvent, at the time of her
death. This however, was an error, and I hope you will
correct that report, as it is clearly shown that she
did not have a dollars worth of property of any kind,
at the time of her death.

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

71 page now of file in this office
 This Oct. 21st 1919. Geo. W. Hinden
 Highway Barren
 Carroll Ga

Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

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

Cartersville, Ga., May 20 1930

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

Dear Sir:

Referring to the enclosed claim for burial expenses, will state that in my report of the death mailed you a few days after Mrs. Sellers death, I stated that she was not insolvent, at the time of her death. This however, was an error, and I hope you will correct that report, as it is clearly shown that she did not have a dollar's worth of property of any kind, at the time of her death.

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

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 Miss Maude Sellers of said County, who, after being sworn, on oath says that she knew Mr. Sallie E. Sellers 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 21st day of April, 1930, 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 \$167.50, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
 R. M. Gaines, Ordinary
 Bartow County
 (Seal of Ordinary)

Miss Maude Sellers

CERTIFICATE OF ORDINARY

GEORGIA, Bartow County.

I, R. M. Gaines, Ordinary of said County, do certify that I personally know Miss Maude Sellers, 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 Mr. Sallie E. Sellers 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 (\$200.00) Dollars in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 20th day of May, 1930
 (Seal of Ordinary) R. M. Gaines
 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.

Cartersville, Ga. April 21 1930.

M. Estate of Mrs. Sallie Sellers
 Emerson Co.

IN ACCOUNT WITH
 JOHNSON'S FUNERAL DIRECTORS
 104 W. MAIN STREET

Quick Ambulance Service Prompt Attention Given All Calls
 PHONE 255

4-21-30	Cashed	135.00
	Embalming	15.00
	Funeral Cal	17.50
		<u>167.50</u>

The Above and foregoing Account is rendered for Funeral Expenses of Mrs. Sallie E. Sellers, who died with out owning sufficient property to pay this bill.

Johnson's Funeral Directors
 By R. M. Gaines
 Sworn to and subscribed before me, this 20th day of May, 1930
 R. M. Gaines
 Ordinary

The Above and foregoing Account
is rendered for Funeral Expenses
of Mrs. Sallie E. Sellers, who
died without owning sufficient
property to pay this bill.

Johnson's Funeral Directors
by R. M. Johnson
Sworn to and subscribed before me, this 20th
day of May, 1930
R. M. Johnson
Ordinary

GEORGIA, Bartow County.
I, R. M. Gamie, Ordinary of said County, do certify
that I personally know Mrs. Maude Sellars, who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full
faith and credit; that I also knew Mrs. Sallie E. Sellers 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 (\$200.00) Dollars
in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the
foot of this voucher have been carefully observed in making up this voucher and the bills which are at-
tached hereto.
(Given under my hand and official seal, this 20th day of May, 1930)
(Seal of Ordinary) R. M. Gamie, 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.

Received of R. M. Gamie Ordinary
check for \$100.00, payment on
claim as shown on opposite
side of this bill.
This July 12, 1930.

Johnson's Funeral Directors
by S. P. Weems

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 Mrs. Maude
Sellars of said County, who, after being sworn, on oath
says that she knew Mrs. Sallie E. Sellers 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 21st day of April, 1930,
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 \$162.50, per sworn statements fully and completely
ITEMIZED hereto attached.
Sworn to and subscribed before me,
R. M. Gamie, Ordinary
Bartow County
(Seal of Ordinary) Miss Maude Sellars

CERTIFICATE OF ORDINARY

GEORGIA, Bartow County.
I, R. M. Gamie, Ordinary of said County, do certify
that I personally know Mrs. Maude Sellars, who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full
faith and credit; that I also knew Mrs. Sallie E. Sellers 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 (\$200.00) Dollars
in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the
foot of this voucher have been carefully observed in making up this voucher and the bills which are at-
tached hereto.
(Given under my hand and official seal, this 20th day of May, 1930)
(Seal of Ordinary) R. M. Gamie, 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.

This July 17, 1930.

Ordinary General Receiver
by J. P. Neemo

expenses, which amounted to the sum of \$46.75, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
R. M. Gamme, Ordinary
Bartow County
(Seal of Ordinary)

Miss Maude Sellers

CERTIFICATE OF ORDINARY

GEORGIA, *Bartow* County.

I, *R. M. Gamme*, Ordinary of said County, do certify that I personally know *Miss Maude Sellers*, 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 *Mr. Sallie E. Sellers* 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* (\$200.00) Dollars in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this *20th* day of *May*, 1930.
(Seal of Ordinary) *R. M. Gamme*, 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.

Form No. 5.
POWER OF ATTORNEY.

STATE OF GEORGIA.
Bartow County.

Know all Men by these Presents, That I, *Martha A. Serey*
of *Bartow* County,

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
13th day of *April*, 189*1*.

Executed in the presence of us:
Martha A. Serey [L. S.]
John D. Goff
Wm. D. Goff

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



Serey, Martha A.
Bartow Co.
1891.

No. 1051

Widows' Pension

PAID TO
Mrs. Martha A. Serey
OF
Bartow COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF

STATE OF GEORGIA.

Barlow County.

Know all Men by these Presents, That

County, in said State, do hereby appoint

of *Saia County*

me and in my name, to receive and receipt

to from the State of Georgia as a widow of

affidavit; hereby authorizing my said attorney

be issued by the Governor, or for any sum o

aforsaid.

IN WITNESS WHEREOF, I

13th day of *Apr*

Executed in the presence of us:

J. H. Dobb

Wm. H. Dobb

If allowed, send amount by

me at

Barlow COUNTY.
\$100.00.

Warrant Issued

1891

AND HANDED TO

Gen. W. Harrison, State Prisoner, Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Barlow County.

Know all Men by these Presents, That I, *Martha A. Serey*

of *Barlow*

County, in said State, do hereby appoint *A. M. Foutte*

of *Saia County*

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *13th* day of *Apr*, 1891

Martha A. Serey [L.S.]

Executed in the presence of us:

J. H. Dobb
Wm. H. Dobb

DIRECTIONS.

If allowed, send amount by

me at

to _____, and oblige,

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Barlow*

In person came before me, the undersigned Ordinary

in and for the County of *Barlow*

Mrs. *Martha A. Serey*, who being sworn according to law, says under

oath that she is the widow of *Thomas B. Serey*, who was a soldier in

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

40 Regiment of *Ga.* Volunteers; that he enlisted in said

service on or about the *4th* day of *March*, 1862, and was in the

Confederate Army up to *May*, 1862. That while in the

Army, he was on the _____ day of _____, 1862, (See Note No. 1)

Died of disease, measles, at Knoxville,

Tenn. in May 1862 - was well

when he went into the service in March

but during his service he was taken

sick with measles and died on or

about the time stated and his re-

maines were sent home to me from

Knoxville, Tenn. in May 1862.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the _____th day of *about* 1851, and that she has resided in Georgia continuously since the *about* day of 1855; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the *13* day of *Apr*, 1891.

Wm. H. Dobb
Ordinary.

Martha A. Serey
mark

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



Widow's Pension

PAID TO

Martha A. Serey

Barlow COUNTY.

\$100.00.

Warrant Issued

AND HANDED TO

1891

210.1051

By

Barlow G.

Barlow G.

1891.



Widows' Pension
— PAID TO —
Mrs. Martha A. Serey
— or —
Bartow
COUNTY.
\$100.00.
Warrant Issued
AND HANDED TO
1891

20. 1051
Bartow
1891.
Bartow
1891.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the _____ day of _____ 1851, and that she has resided in Georgia continuously since the _____ day of _____ 1851; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the 13 day of April 1891. Martha A. Serey
Edw. Deudricks
Ordinary.

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

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

In person came before me, the undersigned Ordinary in and for said County, witnesses John N. Davis, Robt. G. Maps and C. G. Barger (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Martha A. Serey, of the County of Bartow State of Georgia, is the widow of Thomas B. Serey, who was a soldier in Company B of the 40 Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 4th day of March 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows:
Died of disease, measles, in Knoxville, Tenn. on or about day of May 1862. never contracted while in service & while in line of duty as a soldier - witnesses saw the body of said Serey after he was dead & assisted in sending his corpse home to his family. Said Serey was a member of our Company.

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

Sworn to and subscribed before me, this, the 13th day of April 1891. J. N. Davis
Edw. Deudricks
Ordinary.
R. G. Maps
C. G. Barger

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

Form No. 3.

STATE OF GEORGIA,

County of Bartow

I, Edw. Deudricks Ordinary

in and for said County of Bartow

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 13 day of April 1891.

SEAL

Edw. Deudricks

Ordinary.

Form No. 4.

NOTES.

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

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

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 4th day of March 1862 That while in said service, or by reason of said service in the Army, he lost his life as follows:

died of disease, measles, in Knoxville, Tenn. on or about day of May 1862. disease contracted while in service & while in line of duty as a soldier - witnesses saw the body of said soldier after he was dead & assisted in sending his corpse home to his family. Said soldier was a member of our Company -

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

Sworn to and subscribed before me, this, the 13th day of April 1891.

Chas. W. Hudson's
Ordinary.

J. N. Dabb
R. G. Mayo
L. G. Barger

truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 13 day of April 1891.

SEAL

Chas. W. Hudson's

Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died in the army of wounds or disease contracted in the service.

Those whose husbands went to the army and have never been heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.

No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.

The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.

The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.

Widows who have married since the service of their husbands in the army are not entitled.

There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary and testify. The attestation of a Justice of the Peace or Notary will not answer.

Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.

Fill out the "directions" below Power of Attorney, so that your Agent will know where and how to send the money.

By order of the Governor.

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

Ordinary's Certificate

STATE OF GEORGIA

Ordinary COUNTY

I, *Wm. Lindsey*, Ordinary of said County, do certify that I know *Mrs. Mary Sewell* the applicant for pension. She

is the person she represents herself to be and she is a long file continuing resident citizen of said County and was on the 4th November 1908; that I also know *Wm. Lindsey*

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 affidavits 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 *16th* day of *March* 1920
(SEAL) *Wm. Lindsey* Ordinary, County.

NOTES: 1. Before any application is returned the Ordinary shall receive application and the following facts: You shall give will be the truth. No help you can.
2. Only widows who married prior to January 1st, 1911, are entitled.
3. Only widows who made before the Ordinary of the residence of the person to be sworn and certified by said Ordinary.
4. Attach certified copies of marriage license if obtainable. If not, give marriage, by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County *Bartow*
Name *Mary Sewell*
Widow of *C. P. Sewell*
Company *1st Regt. Legion*
Regiment
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

6/4-1920

6/4-1920

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

Ordinary of said County, do certify
the applicant for pension. She
is a continuing resident citizen of said County
and is now a resident of said County and
that they both are truthful, trust-
worthy, and their statements are entitled to full faith and credit.

1920
County.

Ordinary's Certificate

STATE OF GEORGIA,
Barrow COUNTY.
I, W. M. Rippel Ordinary of said County, do certify
that I know Mrs. Mary Sewell 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 W. M. Rippel
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 affidavits 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 16 day of March 1920
(SEAL) W. M. Rippel Ordinary,
Barrow County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to 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.

OK 1920

No. Mary Sewell
Barrow County
Widow's Pension
Under Act 1910-as Amended by Act of 1919.

County Barrow
Name Mrs. Mary Sewell
Widow of W. M. Rippel
Company Co. B. P. Sewell
Regiment Regt. 1st Regt.
Approved _____

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

6/4-1920

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

Questions for Applicant

STATE OF GEORGIA,
Barrow COUNTY.

Personally before me comes Mrs. Mary Sewell 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? Mrs. Mary Sewell, Baylorsburg, Pa.
2. How long and since when have you been a continuing resident of the State of Georgia? I have lived in Ga. all my life.
3. When, where and to whom were you married? Dec. 28, 1865, to W. M. Rippel, Barrow County, Ga.
4. Have you married since the death of first and soldier husband? I have not.
5. When, where and in what Company and Regiment did your husband enlist as a soldier in Con-
federate Army or Georgia Militia? (State the army and class of Service.) Nov. 2, 1862, Co. B, 1st Regt. P. Sewell, Barrow County, Ga.
6. When and where did the commands of your husband surrender or discharge from the army? April 26, 1865, Uniontown, Pa.
7. Was your husband personally present at the time of the surrender or discharge of this command? Yes.
8. If he was not present state clearly where he was? He was present.
9. 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? No.
 - g. Was he captured by the enemy at any time? No.
 - h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
10. When and where did your first husband die? Oct. 1, 1912, Baylorsburg, Pa.
11. Were you residing together when he died? Yes.
12. If not, how long had you resided apart? Lived with him till death.
13. Are you now a widow? Yes.
14. Have you or your husband heretofore been paid a pension by the State? No.
15. If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me this the 16 day of March 1920 Mrs. Mary Sewell
W. M. Rippel Ordinary
of Barrow County.
(SEAL)

OK 1920
Sewell No. Mary (Mrs)
Barton County
Widow's Pension
Under Act 1910--as Amended by Act of 1919.

County: Barton
Name: Mary Sewell
Widow of: C. P. Sewell
Company: 1st Regt. 1st La. Inf.
Regiment: 1st La. Inf.
Approved: [Signature]

new

J. W. LINDSEY,
Commissioner of Pensions,
Byrd Building Co., State Prison, Atlanta.

6/4-1920

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? Yes
i. If so, when and where captured and where held as a prisoner, and when and for what cause released? _____
j. When and where did your first husband die? Oct. 1913, Saylorsville, Ga.
k. Were you residing together when he died? Yes
l. If not, how long had you resided apart? Lived with him till death
m. Are you now a widow? Yes
n. Have you or your husband heretofore been paid a pension by the State? No
If so, when and for what cause were you or your husband placed on the roll? _____

Sworn to and subscribed before me this the
10 day of March, 1920 } Mrs Mary Sewell
Guthrie Ordinary
of Barton County.
(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,
Barton COUNTY.

Personally before me comes W. M. Trappe 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? W. M. Trappe, in Saylorsville, Barton County, Ga.
2. How long and since when have you known Mary Sewell applicant? I have known about fifty years
3. How long and since when has she continuously resided in this State? (Give date). Has lived in this State all of her life
4. When and to whom was she married? 1862, to C. P. Sewell. How do you know? Personal knowledge
5. How long and since when did you know C. P. Sewell her husband? Since just before he was married 1862
6. When and where did C. P. Sewell the husband of applicant, die? 1913, near Saylorsville, Ga.
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? _____
Were they divorced? No
9. When, where and in what Company and Regiment, did C. P. Sewell enlist? 1862, 1st La. Inf., Co. D, 1st La. Inf.
10. Were you a member of the same Company? Yes, 1st La. Inf., Co. D
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From 1862 to April 1865
12. When and where did his Command surrender, and was discharged? April 26, 1865, Greensboro, N.C.
13. Were you personally present when it was surrendered? Yes. If not, where were you I was there and how came you there? _____
14. Was the husband of applicant personally present at surrender? Yes. If not where was he? _____ When, where and for what cause did he leave Command? (Give date). _____ By whose authority did he leave his Command? _____ And how long was he granted leave? _____ How do you know all this? I was his same fighting with him till he was killed together with him
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
16 day of March, 1920 } W. M. Trappe
Guthrie Ordinary
of Barton County.
(SEAL)

7. Were the applicant and her husband living together as husband and wife at the date of his death? *yes*

8. If not, how long did they live apart before his death? *no*

Were they divorced? *no*

9. When, where and in what Company and Regiment did *Capt. P. Duwell* enlist? *1862, Union Ga. Co. D, 1st Reg. Cal.*

10. Were you a member of the same Company? *no, was Co. "B"*

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? *from 1862 till April 1865*

12. When and where did his Command surrender, and was discharged? *April 26, 1865, Quinsboro N.Y.*

13. Were you personally present when it was surrendered? *yes* If not, where were you *I was there* and how came you there?

14. Was the husband of applicant personally present at surrender? *yes* If not where was he? *no* When, where and for what cause did he leave Command? (Give date.) *no* By whose authority did he leave his Command? *no* And how long was he granted leave? *no* How do you know all this? *I was in same Reg. with him when he was in Co. D together from the time*

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? *no*

Sworn to and subscribed before me this the

16 day of *March* 192*8*
G. W. Hendricks Ordinary
 of *Bartow* County.
 (SEAL)

W. Mc Tripp



OFFICE OF
 COURT OF ORDINARY
 BARTOW COUNTY

G. W. HENDRICKS, ORDINARY

Cartersville, Ga. *June 4th* 192*8*

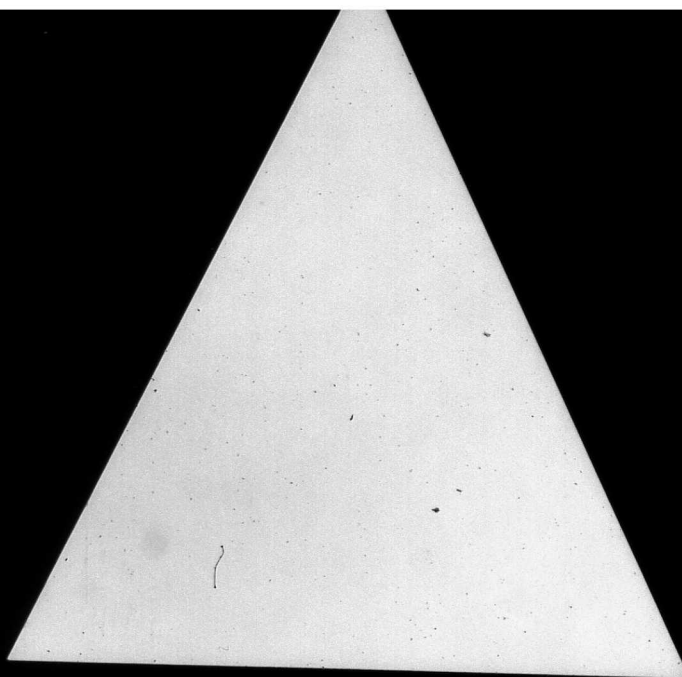
Col. Hendricks,
Atlanta, Ga.

Dear Friend:- I am enclosing you pension application of Mrs. Mary Duwell, the widow of Capt. C. P. Duwell, Decora. Its a little late to send in applications, but its not her fault. It should have been sent last year, but from some misunderstanding she never signed it till March 192*8*. I should have sent it to you as soon as she filed it with me, but being crowded and not very well I filed it late. I want you to do her the very best favor you can. If you can approve it for this year, if you cant. Tell Mrs. Duwell to approve it and it will be all right.

G. W. Hendricks

Mr. Andrews.
Atlanta, Ga.

Dear Friend:- I am enclosing your pension
application of Mrs. Mary Duwell, the widow of Capt
C. P. Duwell, Decatur. Its a little late to send
in applications, but its not her fault. It should
have been sent last year, but from some
misunderstanding she never signed it till March
1901. I should have sent it to you as soon
as she filed it with me, but being crowded
and not very well I forgot to do so. I want
you to do her the very best favor you can. If you
can approve it for this year, if you cant tell Mrs
Duwell to approve it and it will be all right.
Yours Truly
W. H. Andrews



Cal 1912

Edgewell, Susan
Barton
Cal 1912

Widow's Pension
UNDER ACT 1910.

County *Barton*

Name *Susan B. Sewell*

Widow of *W. N. Sewell*

2-42

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

7/20/11

ENTERED ROSTER OFFICE

Widow of J. W. Lindsey

242

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

7/20/11

ENTERED ROSTER OFFICE

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

I, G. W. Henderson Ordinary of said County do certify that I know Mrs Susan C. Sewell the applicant for pension. She is the person she represents herself to be and she is a bonafide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know B. W. McCauley the witness who swears to the service of husband, and Mrs. M. M. Maxwell who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Barlow Co. Returned for Tax for 1908 \$ Nothing for 1910 \$ 10.00 Sworn under my hand and official seal of office this 30th day of Nov

391 G. W. Henderson Ordinary.
Barlow County.

(SEAL)

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

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

STATE OF GEORGIA,

Barlow County.

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

1. What is your name, and where do you reside? Susan C. Sewell, Farm
2. How long and since when have you been a continuing resident in the State of Georgia? I have lived in Georgia all my life
3. When, where and to whom were you married? 1866, near East Point Ga
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) March 1862, Atlanta N. Decatur Co. 8th L.I. 4a
5. When and where did the Commands of your husband surrender or discharge from the army? April 26th 1865, Greensboro N.C.
6. Was your husband personally present at the time of the surrender or discharge of this Command? He was not. He was in Prison in Ohio
7. If he was not present state clearly where he was? Camp Chase Ohio
8. Where was his Command when he left? Richville Tenn
- a. For what cause did he leave his command? On 22nd Dec 1864
- b. By whose authority did he leave his Command? was captured in
- c. For how long was he granted leave of absence? the hands of Northern
- e. What was his physical condition when he left his Command? Good
- f. What effort did he make to return to his command? Could not make a
- g. In what way was he prevented from going back to Command? was a prisoner
- h. Was he captured by the enemy at any time? Yes
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? He was captured in battle of Nashville Tenn Dec 22nd 1864. Imprisoned at Camp Chase Ohio
- j. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? July 11th 1866. We were
- k. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) 110 acres of mountain land in Barlow County worth \$500. 2 1/2 acres of land near East Point Ga. Valued at \$250. no improvements
10. What property of any kind have you sold or given away since Nov. 4, 1908? Who has received for it and what did you do with the proceeds thereof? (Give items and cash value.) I have not sold any property of any kind

11. What property of any description of any value have you now? Give list and cash value? The same as above described.

12. What are your annual earnings or income and their value? I have none as dependent upon my son

13. Have you heretofore been paid a pension by the State? If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 30th day of Nov 1910. Susan C. Sewell
G. W. Henderson Ordinary.
of Barlow County.

Questions for the Witnesses as to Service of Husband and Marriage. STATE OF GEORGIA,

County.

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

You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God?

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

3. All affidavits must be made before the Ordinary.

4. Only widows who married prior to first January 1870, are entitled.

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

n. Was he captured by the enemy at any time? *Yes*
i. If so, when and where captured and where held as a prisoner, and when and for what cause released? *He was captured in battle of Nashville Dec. 31/64. Imprisoned at Camp Chase, Ohio.*
j. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? *July 11th 1906. At Greenboro, N.C.*
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) *110 Acres of mountain land in Bartow County worth \$500. 2 1/2 Acres of land near East Point Ga. Valued at \$300. no improvement.*
10. What property of any kind have you sold or given away since Nov. 4, 1908? What has received for it and what did you do with the proceeds thereof? (Give items and cash value.) *I have not sold any property of any kind.*

11. What property of any description of any value have you now?
Give list and cash value. *The same as above described.*
12. What are your annual earnings or income and their value?
I have more our dependent upon my son.
13. Have you heretofore been paid a pension by the State?
If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the *25th* day of *June* 19*10*. *Seppin T. Sewell*
Two Witnesses Ordinary.
of *Bartow* County.

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,

County,

Personally before me comes _____ who after being duly sworn true answers to make, to the following questions, answers as follows:

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

STATE OF GEORGIA,

Cherokee

County,

Personally before me comes *B.W.G. McCannless* 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? *B.W.G. McCannless, Reside, Waleska, Ga.*
2. How long and since when have you known *Susan C. Sewell* applicant? *25 yrs.*
3. How long and since when has she continuously resided in this State? (Give date.)
Been in this State for 25 years to my knowledge.

4. When and to whom was she married? *Can't ans.* How do you know?
5. How long and since when did you know *William N. Sewell* her husband?
Known him since March 1862.

6. When and where did *William N. Sewell* the husband of Applicant die?
Died July 11th 1906, in Bartow Co. Ga.,

7. Where 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? *were living together.*
Were they divorced? *No.*

9. When, where and in what Company and Regiment did *William N. Sewell* enlist?
In March March 1862, Company "I" 42nd Ga. Reg. C.S.A., Infantry, at Big Shanty Cobb, Co., Ga.

10. Were you a member of the same Company? *No, I was Mem. Co., D, 42nd Ga. Reg.*

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? *From March 1862 until Dec. 16th 1864, when he was captured.*

12. When, and where did his Command surrender, and was discharged? *April 26th 1865, at Greenboro, N.C.*

13. Were you personally present when it was surrendered? *I was* If not where were you *I was present.* and how came you there?

14. Was the husband of applicant personally present at surrender? *No.* If not where was he? *in prison at Camp Chase, Ohio.* when, where and for what cause did he leave Command? (Give date.) *Captured.* By whose authority did he leave his Command? *Prisoner* and how long was he granted leave? _____ How do you know all this?
Personal knowledge, by being in same service with him, and know of his capture, and being carried to prison.

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? *Never released from Prison.*

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? *Could not return because he was held in prison.*

Sworn to and subscribed before me this the *17th* day of *July* 19*11*. *B.W.G. McCannless*

Ordinary,

County,

1. What is your name and where do you reside? _____ applicant?
2. How long and since when have you known _____
3. How long and since when has she continuously resided in this State? (Give date.) _____
4. When and to whom was she married? How do you know? _____
5. How long and since when did you know _____ her husband?
6. When, where and in what Company and Regiment did _____ enlist?
7. Were you a member of the same Company?
8. How long within your personal knowledge did he perform actual military service with his Company and Regiment?
9. When, and where did his Command surrender, and was discharged?

10. Were you personally present when it was surrendered? _____ If not where were you _____ and how came you there?

11. Was the husband of applicant personally present at surrender? _____ If not where was he? _____ when, where and for what cause did he leave Command? (Give date.) _____ By whose authority did he leave his Command? _____ and how long was he granted leave? _____ How do you know all this?

12. For what cause, if you know of your own knowledge was he prevented from returning to his Command?
13. 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 _____ day of _____ 19*11*

Ordinary,

County,

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Bartow County,

Personally before me come *M. L. Upshaw* who on oath says that they are freeholders of said County and that they know *Mrs. Susan Sewell* of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows *110 Acres mountain land*

no Personal property \$
no Notes and accounts due \$
Total \$

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

no Personal property \$
no Money, Notes and accounts \$

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

110 Acres of land, worth \$ *500*
Horses and Mules \$
Cows and Hogs \$
Other property \$
income and earnings \$

Total Value of all property and effects
Sworn to and subscribed before me this the *30th* day of *Nov* 19*10*. *M. L. Upshaw*

Two Witnesses Ordinary, *R. K. Maxwell*
of *Bartow* County,

8. If not, how long did they live apart before his death? were living together.
Were they divorced? No.
9. When, where and in what Company and Regiment did William N. Sewell enlist?
In March March 1862, Company "E" 42nd Ga. Reg. C.S.A., Infantry,
at Big Shanty Cobb, Co., Ga.
10. Were you a member of the same Company? No., I was Mem. Com. D, 42nd Ga. Reg.
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From March 1862 until Dec. 16th 1864, when he was captured.
12. When, and where did his Command surrender, and was discharged? April 26th 1865,
at Greenboro, N.C.
13. Were you personally present when it was surrendered? I was If not where were you I was present. and how came you there?
14. Was the husband of applicant personally present at surrender? No. If not where was he? in prison at Camp Chase, Ohio. when, where and for what cause did he leave Command? (Give date.) Captured. By whose authority did he leave his Command? Prisoner and how long was he granted leave? How do you know all this?
Personal knowledge, by being in same service with him, and know of his capture, and being carried to prison.
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? Never released from Prison.
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Could not return because he was held in prison.
Sworn to and subscribed before me this the 17th day of July 1911. B. W. G. McCalness
of Cherokee County.

where was he? when, where and for what cause did he leave Command? (Give date.)
authority did he leave his Command? By whose long was he granted leave? How do you know all this?
Do you state if of your own personal knowledge? (State all you know fully, and how you know it.)
12. For what cause, if you know of your own knowledge was he prevented from returning to his Command?
13. 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 _____ day of _____ 1911. _____ Ordinary. _____ County.

AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA,
Bartow County.
Personally before me comes Mrs. Susan Sewell who on oath says that they are freeholders of said County and that they know 110 Acres, mountain land of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows:
no Personal property \$
no Notes and accounts due \$
Total \$
Schedule (B).
We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:
no Personal property no \$
no Money, Notes and accounts no \$
Total \$
Schedule (C).
We also know what property she has now in her possession, use and control to wit:
110 Acres of land, worth \$ 5.00
Horses and Mules \$
Cows and Hogs \$
Other property \$
income and earnings \$
Total Value of all property and effects.
Sworn and subscribed before me this the 30th day of Nov 1910. M. L. Upshaw
of Bartow County.

Georgia--Cherokee County.
I, W. J. Webb, Ordinary in and for said county hereby certify that B. W. G. McCalness the witness hereto was sworn by me before ans. any of the questions, and that he is a citizen of this county, he is an honorable and upright citizen, and his statements are entitled to full faith and credit.
17th day of July 1911. B. W. G. McCalness
of Cherokee County.

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,
County.
Personally before me comes B. W. G. McCalness 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? B. W. G. McCalness, Reside, Bartow, Fla.
2. How long and since when have you known Susan G. Sewell applicant? 25 yrs.
3. How long and since when has she continuously resided in this State? (Give date.) Been in this State for 25 years to my knowledge.
4. When and to whom was she married? Can't ans. How do you know? William N. Sewell
5. How long and since when did you know William N. Sewell her husband? Known him since March 1862.
6. What and where did William N. Sewell die? at Bartow Co. Fla.
7. Where 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? were living together.
9. When, where and in what Company and Regiment did William N. Sewell enlist? In March March 1862, Company "E" 42nd Ga. Reg. C.S.A., Infantry,
at Big Shanty Cobb, Co., Ga.
10. Were you a member of the same Company? No., I was Mem. Com. D, 42nd Ga. Reg.
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From March 1862 until Dec. 16th 1864, when he was captured.
12. When, and where did his Command surrender, and was discharged? April 26th 1865,
at Greenboro, N.C.
13. Were you personally present when it was surrendered? I was If not where were you I was present. and how came you there?
14. Was the husband of applicant personally present at surrender? No. If not where was he? in prison at Camp Chase, Ohio. when, where and for what cause did he leave Command? (Give date.) Captured. By whose authority did he leave his Command? Prisoner and how long was he granted leave? How do you know all this?
Personal knowledge, by being in same service with him, and know of his capture, and being carried to prison.
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? Never released from Prison.
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Could not return because he was held in prison.
Sworn to and subscribed before me this the 17th day of July 1911. B. W. G. McCalness
of Cherokee County.

as to Service of Husband and Marriage.

By B. W. McCants who after

the following questions, answers as follows:

do you think? B. W. McCants, Reside, Macon,

you know B. W. McCants applicant?

is he known by you? Yes

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

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How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

How do you know? He is known by me

Marriage License

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize:

You are hereby authorized and permitted to join in the honorable state of Matrimony Mr. William N. Sewell, and Miss Susan C. Riggs

According to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD.

Given under my Hand and Seal this 27th day of Sept. 1866

Daniel Pittman L. S.
Ordinary.

I hereby certify that William N. Sewell and Miss Susan C. Riggs

were joined together in the HOLY BANS of MATRIMONY on the 7 day of Sept. 1866, by me, Joseph Willis Jr.

State of Georgia,

Fulton County.

S.S.

ORDINARY'S OFFICE

December 16th 1866

Marcellus Anderson C.C. Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

William N. Sewell and Susan C. Riggs

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Marcellus Anderson
Clerk Court Ordinary

RELEASE.

Head Quarters, U. S. Forces,

Camp Chase, O., May 15 1865.

By virtue of an Order received from Commissary General Prisoners, dated at Washington, City, D. C., May 8th 1865, W. S. Sewell, of Fulton county, and State of Georgia, Prisoner at this Post, after having complied with the requirements of, and subscribed the following Oath and Declaration, is hereby released from confinement.

DESCRIPTION.

Complexion.	Hair.	Height, Feet-Inches.	Eyes.	Age.
<u>Dark</u>	<u>Black</u>	<u>5-6</u>	<u>Dark</u>	<u>27</u>

UNITED STATES OF AMERICA.

I, W. S. Sewell, Resident of the County of Fulton State of Georgia do solemnly swear that I will support, protect and defend the Constitution and Government of the United States against all enemies, whether domestic or foreign; that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution, or laws of any State, Convention, or Legislature, to the contrary, notwithstanding; and, further, that I will faithfully perform all the duties which may be required of me by the laws of the United States; and I take this oath freely and voluntarily, without any mental reservation or evasion whatever.

Subscribed to and subscribed before me, this 15 day of May A. D. 1865.
W. S. Sewell
W. S. Sewell
Brig. Genl., Commanding Post.

Lieut. Col. 88th U. S. I., and Asst. Comdt of Prisoners.

According to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD.

Given under my Hand and Seal this

5th day of Sept. 1866

Daniel Pittman L. S.
Ordinary.

I hereby certify that William N. Sewell
and Miss Susan C. Briggs

were joined together in the HOLY BANS of MATRIMONY.

on the 7 day of Sept. 1866 by me.

Joseph Willis Jr.

State of Georgia,

Fulton County,

ORDINARY'S OFFICE

S.S. December 16th 1866

Marcellus M. Anderson C.C. Ordinary of said County, hereby certify that the

foregoing is a true copy of the Marriage License and Certificate of Marriage of

William N. Sewell

and Susan C. Briggs

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Marcellus M. Anderson
Clerk Court Ordinary

WIL. LESTER & CO. PRESS

and State of Georgia, Resident of Fulton County,
Prisoner at this Post, after
having complied with the requirements of, and subscribed the following Oath
and Declaration: is hereby released from confinement:

DESCRIPTION.
Complexion. Hair. Height. Feet-Inches. Eyes. Age.
Brn. Blk. 5-6 Blk. 27

UNITED STATES OF AMERICA.

I, J. L. Smith, Resident of the County of Fulton State of Georgia

do solemnly swear that I will support, protect and defend the Constitution and Government of the United States against all enemies, whether domestic or foreign; that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution, or laws of any State, Convention, or Legislature, to the contrary, notwithstanding; and, further, that I will faithfully perform all the duties which may be required of me by the laws of the United States; and I take this oath freely and voluntarily, without any mental reservation or evasion whatever.

Sworn to and subscribed before me, this 10 day of May A. D. 1865.

William N. Sewell
W. R. Shepherdson
Brig. Gen'l, Commanding Post.

Lieut. Col. 48th O. V. I., and Asst. Comdt. of Prisoners.

Received of G. W. Jones
Twenty Dollars in payment of
his unpaid account. May 20-1865
John W. Jones

Sewell, S. C. (Mrs.)

For Benton County

1925

Application for Pension
Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

For Mrs. S. C. Sewell Ordinary

Date of Death April 14th 1925

Amount \$90.00

Approved and ordered paid

5/19 N. E. Harris

N. E. HARRIS
Commissioner of Pensions.

Refund \$10.00

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 payroll to be permanently filed with them. Do not keep this application in your office.

Amount \$ 70.⁰⁰
 Approved and ordered paid
 5/9 N. E. Harris
 N. E. HARRIS
 Commissioner of Pensions
 Refused \$10.⁰⁰
 Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

Application for Pension Due to a Deceased Pensioner

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

GEORGIA, Barlow County.
 Personally before me, the Ordinary of said County, comes J. W. Sewell of said County, who, after being sworn, on oath says that he knew Mrs. S. C. Sewell of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Barlow County, in this State, on the 14 day of April, 1925, and that a Pension of One hundred dollars (\$100.00) 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 \$90.00 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me this 10th day of May, 1925
J. W. Sewell Ordinary
Barlow County
 (Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Barlow County.
 I, J. W. Sewell, Ordinary of said County, do certify that I personally know J. W. Sewell, 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 know Mrs. S. C. Sewell 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 One hundred dollars (\$100.00) Dollars in said County for 1924, 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 10th day of May, 1925
 (Seal of Ordinary) J. W. Sewell Ordinary
Barlow County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st and was not out of State longer than twelve months, and did not leave 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 those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving such item and the date of it, and sign date.
- 3rd. Billings accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse in mind and body.
- 4th. The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of Mrs. S. C. Sewell. The Ordinary must see to it that such bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly paid and sent it is returned to you as your authority to make the payment.
- 5th. The completed voucher—this blank and the bill—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you with the Pension Department, stating the circumstances in very great detail. Pensioner's children, or child-in-law, must not charge the State for death only what the law and common humanity demand of them.
- 6th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when filled, is filled out.

DAY TELEPHONE 20

NIGHT TELEPHONE 126

Cartersville, Ga.

April 14 1925

Mrs. S. C. Sewell

Formant for R2D

JOHN W. JONES

CARRIAGES, BUGGIES, WAGONS, PLANOS, ORGANS AND PHONOGRAPHS

Funeral Directors. Coffins and Caskets

SOUTH ERWIN STREET

1925

Apr. 14 To Casket - for funeral - 90.00

Georgia - Barlow County
 Personally appeared before me
 John W. Jones who on oath
 says, that above and foregoing
 account is rendered for funeral
 expenses of Mrs. S. C. Sewell, who
 died without means sufficient to pay
 the bill.

Sworn to and subscribed
 before me, May 14/1925
 J. W. Sewell Ordinary

John W. Jones

DAY TELEPHONE 26

NIGHT TELEPHONE 126

Cartersville, Ga.

April 14 1925

Mrs J. C. Sewell

Formant for R.D.
JOHN W. JONES

CARRIAGES, BUGGIES, WAGONS, PIANOS, ORGANS AND PHONOGRAPHS
 Funeral Directors. Coffins and Caskets
 SOUTH KIRWIN STREET

Apr. 14 To Casket - for funeral - 90.00

Georgia-Barlow County
 Personally appeared before me
 John W. Jones, who on oath
 says that above and foregoing
 account is rendered for funeral
 expenses of Mrs. J. C. Sewell, who
 died without means sufficient to pay
 this bill.

Subscribed and sworn to
 before me, May 14, 1925
 J. W. Anderson, Ordinary

John W. Jones

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Barlow County.Personally before me, the Ordinary of said County, comes J. W. Sewell

of said County, who, after being sworn, on oath

says that he knew Mrs. J. C. Sewell of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Barlow County, in this State, on the 14 day of April, 1925, and that a Pension of One hundred dollars (\$100) 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 \$90.00 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this 10th day of May, 1925
J. W. Sewell Ordinary
Barlow County
 (Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Barlow County.

I, J. W. Anderson, Ordinary of said County, do certify that I personally know J. W. Sewell, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. J. C. Sewell 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 one hundred dollars (\$100) Dollars in said County for 1924, 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 10th day of May, 1925
J. W. Anderson Ordinary
Barlow County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and did not leave 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 OF YELLOW BLANK.
- 2nd. Receive from claimant 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. Rendering 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.)
 "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."
- 5th. 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.
- 6th. 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 at your authority to make the payment.
- 7th. The Ordinary must pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipt.
- 8th. Accept no bills for entering until you write the Pension Department, stating the circumstances in very great detail. Pensioner's children, or children-in-law, shall not charge the State for doing only what the law and common humanity demand of them.
- 9th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when filled, is filed out.

Mrs J. C. Sewell

Cartersville, Ga.

April 14 1925

Forment Go R2D

JOHN W. JONES

CARRIAGES, BUGGIES, WAGONS, PIANOS, ORGANS AND PHONOGRAPHS

Funeral Directors. Coffins and Caskets
SOUTH ERWIN STREET

1925

Apr. 14. To Casket - for funeral -

90.00

Georgia - Barlow County
Personally appeared before me
John W. Jones, who on oath
says, the above and foregoing
account is rendered for funeral
expenses of Mrs. J. C. Sewell, who
died without means sufficient to pay
this bill.

He then to and subscribed
before me, May 14, 1925
J. W. Jones, Ordinary

John W. Jones

was on the Pension Roll of said County at the time of death, which occurred in Barlow County, in this State, on the 14 day of April 1925, and that a Pension of One hundred dollars (\$100) 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 \$90.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this 10th day of May 1925
J. W. Jones
Barlow County
(Seal of Ordinary)

J. C. Sewell
Ordinary

CERTIFICATE OF ORDINARY

GEORGIA, Barlow County.

I, J. W. Jones, Ordinary of said County, do certify that I personally know J. C. Sewell, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. J. C. Sewell 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 One hundred Dollars (\$100) Dollars in said County for 1924, 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 10th day of May 1925
(Seal of Ordinary) J. W. Jones, Ordinary
Barlow County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and did not leave 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. Receive 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.)
"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."
- 5th. 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.
- 6th. 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.
- 7th. The Ordinary alone pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
- 8th. Accept no bills for traveling 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.
- 9th. Return this application, and attached bills, with your final settlement, to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when folded, is filed out.

BAD COPY - LIGHT PRINT

VICKSBURG, MISSISSIPPI, 7th day of July, 1863.

TO ALL WHOM IT MAY CONCERN, KNOW YE THAT
I, John W. Jones, of Barlow County, Georgia, being a Prisoner of War, in the hands of the United States Forces, in virtue of the capitulation of the City of Vicksburg and its garrison, by Lieut. Gen. John C. Pemberton, C. S. A., Commanding, on the 4th day of July, 1863, do in pursuance of the terms of said capitulation, give this my solemn parole under oath.
That I will not take up arms against the United States, nor serve in any military, police, or constabulary force in any Fort, Garrison or field work, held by the Confederate States of America, against the United States of America, nor as guard of prisons, depots, or stores, nor discharge any duties usually performed by Confederate soldiers against the United States of America, until duly discharged by the proper authorities.

Sworn to and subscribed before me at Vicksburg, Miss. this 7th day of July, 1863.

John W. Jones
Regt. _____ Vols.
AND PAROLLING OFFICER.

2nd. Regular 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.

3rd. Blanketing 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, God, un- paid," etc.)

The above and foregoing account is rendered for services in the last illness for for funeral expenses, as the case may be) of _____

5th. 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.

6th. The completed voucher—this blank and the bill—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you or your authority to make the payment.

7th. The Ordinary does not pay out, as Ordinary, for the pension and then disburses the money himself and takes receipts.

8th. Accept no bills for money 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 what the law and common humanity demand of them.

9th. Return this application, and attached bill, with your final statement to the Pension Department.

10th. Ordinary should see that the back of this blank, when filled, is filed out.

BAD COPY - LIGHT PRINT

VICKSBURG, MISSISSIPPI, July 11, 1863.

TO ALL WHOM IT MAY CONCERN, KNOW YE THAT _____ of Regt _____

Vols. U. S. A., being a Prisoner of War, in the hands of the United States Forces, in virtue of the capitulation of the City of Vicksburg and its garrison, by Lieut. Gen John C. Pemberton, C. S. A., Commanding, on the 11th day of July, 1863, do in pursuance of the terms of said capitulation, give this my solemn parole under oath—

That I will not take up arms again against the United States, nor serve in any military, police or constabulary force in any Fort, Garrison or field work, held by the Confederate States of America, against the United States of America, nor as guard of prisons, depots, or stores, nor discharge any duties usually performed by Prisoners of War, nor as soldiers against the United States of America, until duly exchanged by the proper authorities.

Sworn to and subscribed before me at Vicksburg, Miss. this _____ day of July, 1863.

John C. Pemberton Regt _____ Vols.

AND PAROLLING OFFICER.

BAD COPY - LIGHT PRINT

VICKSBURG, MISSISSIPPI,

A. D. 1863.

TO ALL WHOM IT MAY CONCERN, KNOW YE THAT

I, *John C. A.*, being a Prisoner of War, in the hands of the United States Forces, in virtue of the capitulation of the City of Vicksburg and its garrison, by Lieut. Gen. John C. Pemberton, C. S. A., Commanding, on the 4th day of July, 1863, do in pursuance of the terms of said capitulation, give this my solemn parole under oath—
That I will not take up arms against the United States, nor serve in any military, police, or constabulary force in any Fort, Garrison or field work, held by the Confederate States of America, against the United States of America, nor as guard of prisons, depots or stores, nor discharge any duties usually performed by Confederate soldiers, against the United States of America, until duly exchanged by the proper authorities.

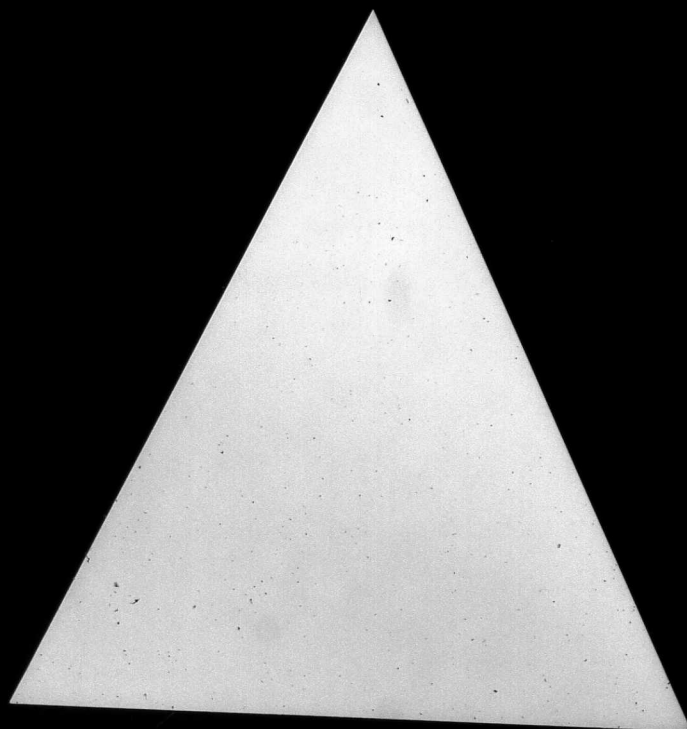
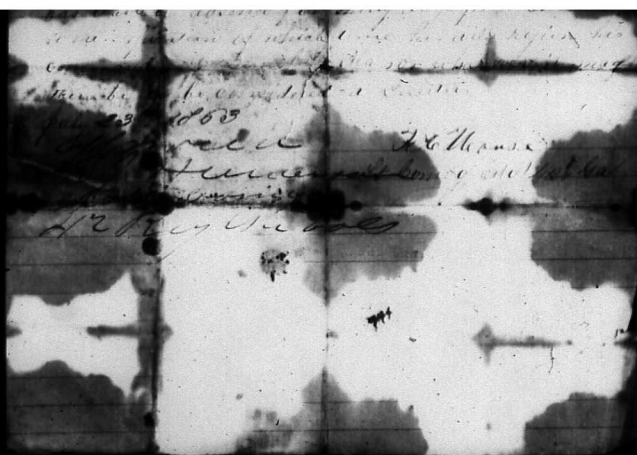
Sworn to and subscribed before me at Vicksburg, Miss. this *7* day of July, 1863.

John C. A.

Regt *1* Vols.

AND PAROLLING OFFICER.

This parole was given to John C. A. by the undersigned, who is a member of the United States Army, and who is authorized to give paroles to prisoners of war. The undersigned is a member of the United States Army, and who is authorized to give paroles to prisoners of war. The undersigned is a member of the United States Army, and who is authorized to give paroles to prisoners of war.



POWER OF ATTORNEY.

STATE OF GEORGIA.

Bartow County.

Know all Men by these Presents, That I,

Lucy Peyton
Bartow
 of *Bartow* County, Georgia, do hereby appoint *John F. Pickett*
 of *Bartow* County, Georgia, my true and lawful attorney in fact, for

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal this
 9th day of *June*, 1891.

Executed in the presence of us:

John F. Pickett
John F. Pickett

John F. Pickett
John F. Pickett

WITNESSES.

If allowed, send amount by

me at

and oblige,

The statement signed by
Pickett & Pickett is not
 for record because it has
 not been recorded.
 No proof by any witness
 that the applicant is the
 widow of the deceased soldier.
 She must show that
 she has never married
 since her husband's death.



W. H. Harrison
Secy. of State

June 23/91

Defton, Lucy
Bartow Co
 1891.
Alabama
 No. 3459

Widows' Pension

PAID TO

Lucy Peyton
Bartow

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF

STATE OF GEORGIA.

Know all Men by these Presents, That I

County of Bartow State, do hereby appointing John E. Ruckell of Barterville, Ga. my true and lawful attorney in fact, for me and in my name, to receive and receipt for to from the State of Georgia as a widow of a Confederate Soldier; hereby authorizing my said attorney to be issued by the Governor, or for any sum of money aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of June 1891.

Executed in the presence of us:
John E. Ruckell
Chas. M. Dicks

If allowed, send amount by me at



John E. Ruckell
June 23/91

Barterville COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

County of Bartow

Know all Men by these Presents, That I

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23rd day of June 1891.

Executed in the presence of us:

John E. Ruckell
Chas. M. Dicks

DIRECTIONS.

If allowed, send amount by me at

and oblige,

to

John E. Ruckell
June 23/91
Barterville, Ga.



Widow's Pension

\$100.00.

Warrant Issued

1891

AND HANDED TO

Affidavit for Three Witnesses.

Form No. 2.

STATE OF Alabama

County of Marshall

In person came before me, the undersigned

In and for said County, witness W. H. Water

and Lucy Sexton (known to said Attesting Officer as truthful, reliable and reputable citizen), who solemnly say under oath, that, from their own personal knowledge, Mrs. Lucy Sexton of the County of Bartow State of Georgia, is the widow of James Sexton who was a soldier in Company E or K of the 13 Regiment of ala Volunteers. That said soldier enlisted in the service of the Confederate States (on the Georgia Side) on or about the 13 day of Sept 1861. That while in said service, or by reason of said service in the Army, he lost his life as follows: Died from pneumonia at the Confederate Hospital at Yorktown Virginia on or about the latter part of January, 1862. I know the above because I served in the same regiment and was with him before his enlistment and was his nurse during his last sick leave and that before he died I was transferred back to my command in which I left that Hospital the day James Sexton was away, how and the report soon reached the regimental camp to which I belonged that he was killed, and I am as well satisfied that he did die there and there as I am of any other fact that I did not see or hear or know.

I further swear that Mrs. Lucy Sexton was the wife of said soldier during the service, and that she resides in Bartow County of the State of Georgia.

Sworn to and subscribed before me, this, the

27 day of April 1891.

W. H. Water

John E. Ruckell
Marshall Co Ala

He who makes a great deal of money by his pen is not a great deal better than a man who makes a great deal of money by his sword.

He who makes a great deal of money by his pen is not a great deal better than a man who makes a great deal of money by his sword.

He who makes a great deal of money by his pen is not a great deal better than a man who makes a great deal of money by his sword.

And that before the time I was transferred back to my command I had taken I left the Hospital the day James Sexton was very low and I report soon reachable the region of Camp to which I belonged that he was alive, and I am as well satisfied that he died there and there as I am of any other fact that I did not see occur.

I further swear that Mrs. Duey Sexton was the wife of said soldier during the service, and she was his widow, and that she resides in Bartow County of the State of Georgia.

Sworn to and subscribed before me, this, the 27 day of April 1891.

J. A. Stewart *Off. N. Watson*
Ordinary
James Sexton
Marshall Co Ala

Widow's Pension

PAID TO

Duey Sexton

Bartow Georgia

1891.

270.3459

\$100.00.

Warrant Issued

1891

AND HANDLED TO

Form No. 3.

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

STATE OF GEORGIA,

County of Bartow

In and for said County of Bartow

I, C. W. Hendricks Ordinary

do hereby certify that I am acquainted with Mrs. Duey Sexton

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 3rd day of June 1891.

C. W. Hendricks
Ordinary.

Form No. 1.

Affidavit to be Made by the Widow.

STATE OF GEORGIA.

County of Bartow

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

Mrs. Duey Sexton, who being sworn according to law, says under oath that she is the widow of James Sexton, who was a soldier in the service of the Confederate States, and served as a member of Company 13, of the 20th Regiment of Alabama Volunteers; that he enlisted in said service on or about the 20th day of Sept 1861, and was in the Confederate Army up to January 1862. That while in the Army, he was on the 20th day of January 1862. (See Note No. 1)

He died of Pneumonia in the Confederate Hospital at York Town Virginia about the latter part of January 1862

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died in the army of wounds or disease contracted in the service.

Those whose husbands went to the army and have never been heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.

No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.

The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.

The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.

Widows who have married since the service of their husbands in the army are not entitled.

There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary and testify. The attestation of a Justice of the Peace or Notary will not answer.

Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.

Fill out the "directions" below Power of Attorney, so that your Agent will know where and how to send the money.

By order of the Governor.

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

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 28th day of Feb 1859, and that she has resided in Georgia continuously since the day of January 1887; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality.

Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the 27 day of April 1891.

C. W. Hendricks Duey Sexton
Ordinary. *Mark*

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

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died in the army of wounds or disease contracted in the service.

Those whose husbands went to the army and have never been heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.

No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.

The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.

The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.

Widows who have married since the service of their husbands in the army are not entitled.

There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary and testify. The attestation of a Justice of the Peace or Notary will not answer.

Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.

Fill out the "direction" below Power of Attorney, so that your Agent will know where and how to send the money.

By order of the Governor,

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

exam in collection of January 1862

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 28th day of July 1859, and that she has resided in Georgia continuously since the day of January 1887; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the

day of April 1891.

Luey Sexton
mark

Ordinary.

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

Georgia In person came
Barlow County before me, Mrs. Luey
Sexton and revokes her power of
Attorney made by her to J. E. Duckett
to receipt for and receive her pension
for the year 1891. And now hereby
authorizes Hon. A. W. Harts of said
County to receive and receipt for
her pension for the year 1891 and
to perform any, all acts that may
be necessary in the premises, that
she might or could do if present.
This 17th Feb 1893

her Sexton
mark

Witness
J. G. Jones
W. H. HARRISON
Ordinary

State of Alabama In person
Randolph County before me, the
designated Judge of Probate in and for
County, witnesses James C. Holman
John M. Saxon known to said a
ting officer as truthfull and
and reputable citizens who sever
say under oath that from their
best knowledge Mrs. Luey Sexton
of the County of Barlow State of
Georgia is the widow of James
who was a Soldier in Company H. of
13 Regiment of Ala. Volunteers
that said Soldier enlisted in the
vice of the Confederate State on
about day of September 1861. That
while in said Service in the Army
lost his life as follows. he was tak
sick in Camp with pneumonia at
Yamoube Town Ga. the latter part
January 1862. & sent to the Hospital
where he died in two days. We were his
neighbor & he fine the volunteer. & Jan
C. Holman. saw him while sick in Cam
& member of his Company. we further say
that Mrs. Luey Sexton was the wife of
said Soldier during the Service & that
she resides in State of Georgia
over

Authorizes Hon. A. W. Harris of said
County to receive and receipt for
his pension for the year 1891 and
to perform any all acts that may
be necessary in the premises, that
he might or could do if present
this July 17th 1893

Wm. Harris
J. G. Harris
C. W. Hendricks
Ordinary

Res
Lucy Sexton
mark

Georgia is the widow of James S.
who was a Soldier in Company H.
13 Regiment of Ala. Volunteers
that said Soldier enlisted in the
service of the Confederate State on
about day of September 1861. The
while in said Service in the Army.
lost his life as follows. he was tak-
sick in Camp. with pneumonia at
Yamouss. Town Va. the latter part
January 1862. & sent to the Hospital
where he died in few days. We were his
neighbor & before he volunteered. & Jas
C. Johnson. saw him while sick in Cam-
& member of his Company. We further
that Mrs Lucy Sexton was the wife of
said Soldier during the Service & that
she resided in State of Georgia
Over

C. W. HENDRICKS, ORDINARY.

Barrow County

Cartersville, Ga.

18

State of Georgia

Barrow County

Personally appeared before
me J. W. Packett, R. R. Packett
J. C. Packett, who on oath say that James
Sexton was a member of Company H. of the
13th Alabama Regiment in the Confederate
Service that the said Sexton has never returned
home or been heard from since the war, that
the said Sexton was reported to have died in
the Hospital at Fort Sumner Virginia in
January 1862. They further swear that Mrs
Lucy Sexton was the wife of James Sexton
during the time he was in the Confederate service
that she has not intermarried since his death
& that she resides in Barrow County of the State
of Georgia.

J. W. Packett
R. R. Packett
J. C. Packett

Sworn to & subscribed before
me this 17th day of July 1891
C. W. Hendricks
Ordinary

Sworn to & subscribed before James C. Johnson
on this 14th day of May 1891 John M. Gane
J. C. Johnson
Just of Probate
J. R. Hendricks County Clerk

Warton County Personally appeared before
me J. W. Pickett, C. B. Pickett
J. E. Pickett, who on oath say that James
Lester was a member of Company "N" of the
13th Alabama Regiment in the Confederate
Service that the said Lester has never returned,
James or been heard from since the war, that
the said Lester was reported to have died in
the Hospital at Yorktown Virginia in
January 1862. They further swear that Mrs
Lucy Lester was the wife of James Lester
during the time he was in the Confederate Service
that she has not intermarried since his death
that she resides in Warton County of the State
of Georgia.
Witness my hand and seal this 12th day of July 1891.
Geo. Lindrick
Ordinary

J. W. Pickett
C. B. Pickett
J. E. Pickett

Georgia - Harris County

Before me J. F. C. Williams, Ordinary in and
for said County, personally appeared J. J.
Craigford who on oath says that he was
well acquainted with Morgan Sexton, who
was a member of Co "I" 46 Ga Regt. that
while the army was in action during the
Summer of 1864 somewhere between Dalton
and Atlanta Morgan Sexton and deponent
were on the skirmish line in front of
the main line and the said Morgan Sex-
ton was captured by the enemy and
deponent made his escape.

Deponent further states that he and Sex-
ton were members of the same company
and regiment.

Sworn to & subscribed)

before me May 19th 1894 J. J. Crawford
J. F. C. Williams
Ordinary Harris Co

Emory was on duty say that he was
well acquainted with Morgan Sexton who
was a member of Co I 46 Ga Regt that
while the army was in action during the
Summer of 1864 somewhere between Dalton
and Atlanta Morgan Sexton and deponent
were on the skirmish line in front of
the main line and the said Morgan Sex-
ton was captured by the enemy and
deponent made his escape.

Deponent further states that he and Sex-
ton were members of the same company
and regiment.

Sworn to & subscribed)
before me May 19th 1901 J J Crawford
J F C Williams
Ordinary Harris Co

Sexton, Sarah
Barlow Co

(9th Jan 1904)
No. *1000*

**WIDOW'S
INDIGENT PENSION.
1903.**

Name *Sarah B. Sexton*
County *Barlow*
Widow of *Mr. J. Sexton*

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

8/9/04.

Pension Office, 9/22/04.

Must submit some testimony of
service and discharge in Co. "I"
6th. Ga. All testimony is to
service in 8th. Battalion.
J. W. Lindsey,
Com. of Pensions.

ORIGINAL CERTIFICATE

SEAL

STATE OF GEORGIA

Dep. Secy, Barlow County

Wm. H. Sexton
Barlow Co.

Exacted in presence of

Witness my hand this _____ day of _____ 1904

from the sum to me at _____ by his check or registered mail.

County, to receive and receipt for the pension allowed and that he

of _____

STATE OF GEORGIA, _____ County, _____

POWER OF ATTORNEY.

County Barlow
Widow of M. J. Sartor
Approved _____ 1903.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO _____
1903.
Gen. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.
I, Sarah C. Sartor hereby authorize C. W. Hendricks
of Barlow County, to receive and receipt for the pension allowed and that he
remit the same to me at Adairsville Ga. by his check or registered mail.
Witness my hand this 1st day of April 1904.
Executed in presence of
W. C. Walton Clerk S. C. Sartor L. R.
Superior Court, Barlow County.

REAL

Pension Office, 9/25/04.

Not submit some testimony of
service and discharge in Co. "A"
St. Co. All testimony is to
be submitted in original
form in St. Co. of Pensions.

WIDOW'S
INDIGENT PENSION.
1903.

Name Sarah C. Sartor
County Barlow
Widow of M. J. Sartor
Approved _____ 1903.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO _____
1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Barlow County.
I, Sarah C. Sartor of said State and County, desiring to
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
passed 1900, hereby submit her proof, and after being duly sworn true answers to make to the
following questions, depose and answers as follows:
1. What is your name and where do you reside? (Give State, County and Post-office)
Sarah C. Sartor, Adairsville, Barlow County, Ga.
2. How long and since when have you been a resident of this State? Have lived in
Georgia since February 1861
3. When and where were you born? 1843, Charleston, S. C.
4. When and where was your husband born—state his full name, and when were you and he married?
(Attach copy marriage license in every case.) 1858, Charleston, S. C.
Morgan J. Sartor, married date 17th Feb 58
5. When and where did you and your husband enlist or serve during the
war between the States? Oct 1861, Co. B. 84 Ga Battalion
6. How long did your husband serve in said Company and Regiment? Till January
1865. He was then transferred to Co. D. 46 Bat
7. When and where did your husband's Company and Regiment surrender and was discharged?
His Command surrendered to U. S. Co. D. 26 Feb 1865
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was not present. He was in prison
9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
mand for what cause, and by what authority? He was captured in the battle
of Look Mountain, not far from Iron Horse Church
in the summer of 1864. Capt a prisoner in Rockwell
10. When and where did your husband die? Jan. 1865, in Gordon
County, Georgia
11. Which of the following grounds do you base your application for Pension, viz.: First—Age and
Poverty; Second—Infirmary and Poverty; or Third—Blindness and Poverty? Age, Infirmary
and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn
your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the
third, state whether you are totally blind, and when and where you lost your sight? I have been
afflicted since 1878. Have not been able to
attend to even domestic house work since
13. What has been your occupation since your husband's death? I have not
had any occupation. Not been able to pursue any
14. How much can you earn gross, by your own exertion or labor? Nothing at all
15. What property, real or personal, or income do you have or possess, and its gross value?
I have no property or income whatever
16. What property, real or personal, did you possess at death of husband or he left you, and of the
years 1869, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same?
He had a small little home. All of which went to pay his debts.
17. In what counties did you reside in 1869, 1900, 1901 and 1902, and what property did you return for
taxation? Barlow County. Had nothing to pay taxes on
18. How have you been supported since death of husband, and especially for 1869, 1900, 1901 and 1902?
By my children, who are married and with whom I live
19. How much did you support cost for each of those years, and how much did you contribute by your
own labor or income? I do not know. None whatever
20. What was your employment during 1869, 1900, 1901 and 1902—how much did you receive for each
year? I have had no employment. Have not
been able to do even light domestic duties
21. Have you a family? If so, who composes such family? Give their means of support? Have they
any lands or other property? Have no family. I live with my son
22. Have you ever made application for pension before? (one time)
23. How many applications have you made for a Pension, and under what class? Under the
Original Woman's Pension Act
Signed and subscribed before me this _____ day of _____ 1904.
day of April 1904.
of Barlow County.

Pension Office, 9/22/04.
Not submit same testimony of
applicant and witnesses in Court.
State of Georgia, to
service in 8th. Battalion.
J. V. Lindsay,
Col. of Pensions.

Sexton Sarah C.
Barlow
Barlow
Barlow

**WIDOW'S
INDIGENT PENSION.
1903.**

Name *Sarah C. Barlow*
County *Barlow*
Widow of *Wm. J. Barlow*

Approved _____ 1903.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____ 1903.
GEO. W. BARNES, State Printer, Atlanta.

8/9/04.

And finally
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight. *I have been afflicted since 1878. Have not been able to attend to even domestic house work since*
13. What has been your occupation since your husband's death? *I have not had any occupation, not been able to pursue any*
14. How much can you earn now, by your own exertion or labor? *Nothing at all*
15. What property, real or personal, or income do you have or possess, and its gross value? *I have no property or income whatever*
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same? *He had a small little home. He left which went to my widow*
17. In what counties did you reside in 1899, 1900, 1901 and 1902, and what property did you return for taxation? *Barlow County. Had nothing to pay taxes on*
18. How have you been supported since death of husband, and especially for 1899, 1900, 1901 and 1902? *By my children who live with me and take care of me*
19. How much did you support out for each of those years, and how much did you contribute by your own labor or income? *I do not know*
20. What was your employment during 1899, 1900, 1901 and 1902—how much did you receive for each year? *I have had no employment. Have not been able to do even light domestic duties*
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? *Have no family. I live with my son*
22. Have you ever made application for pension before? *One time*
23. How many applications have you made for a Pension, and under what class? *Under the Original Widows Pension Act*
Sworn to and subscribed before me this *1st* day of *April* 1904. *S. C. Sexton.*
of *Barlow* County.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,
County. }

_____ of said State and County, having been presented as a witness in support of the Application of Mrs. _____ 1900, 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?
2. Are you acquainted with the applicant, Mrs. _____?
3. Where does she reside, and how long and since when has she been a resident of this State?
4. When and where was she born?
5. Were you ever acquainted with her husband?
6. Where did she reside in 1881?
7. When and to whom was he married?
8. When and where was he born?
9. How long have you known him?
10. When and where did _____ enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this?
11. Were you a member of the same Company and Regiment?
12. How long did he perform regular military duty?
13. When and where was his Company and Regiment surrendered and discharged from service?
14. Were you with the Command when it surrendered?
15. Was _____ the husband of applicant present?
16. If not present, where was he?
17. When and where did he leave his command?
- For what cause?
- By whose authority he left?
- How do you know all this? (State fully and clearly.)
18. When and where did _____ die?
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
20. Do you of your own knowledge know that applicant is the lawful widow of _____?
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
23. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it?
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom?
25. What is applicant's physical condition and her chances and ability to earn a support?

26. Is applicant able to earn a support at labor of any sort, if not, why?
 27. How was he supported for 1899, 1900, 1901 and 1902?
 28. How much did applicant contribute to her support for last two years?
 29. Give a full and complete statement of applicant's physical condition?
 30. What interest have you in the recovery of this pension by the applicant?
- Sworn to and subscribed before me this _____ day of _____ 1904. _____ Ordinary, _____ County. _____ Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,
County. }

Personally before me comes *Dr. H. B. Quinn* and *Dr. R. B. Quinn*, both known to me to be reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully Mrs. *Sarah C. Barlow*, applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is *that of a woman of 40 years of age*. *Her condition is such as to prevent her from doing any labor but necessitates her on her feet and is that and has been for many years a invalid* and we have no interest in said pension if allowed.

Sworn to and subscribed before me this _____ day of _____ 1904. _____ Ordinary, _____ County. *A. H. Greene M.D.* *O. H. Byford M.D.*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
County. }

I, *G. W. Hendricks*, Ordinary, in and for said County, hereby certify that the applicant, Mrs. *Sarah C. Barlow*, resides in said County, and has been a bona fide resident of this State since the *1st* day of *April* 1884 in my *Personal* knowledge and that the witnesses, Mr. _____ are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of *Barlow* County shows that applicant returned for taxation in her own name in 1899 _____ dollars worth of property, and in 1900 _____ dollars worth of property, and in 1901 _____ dollars worth of property, and in 1902 _____ dollars worth of property.

Witness my hand and official seal this _____ day of _____ 1904. _____ Ordinary.

SEAL *G. W. Hendricks* *Barlow* County.

NOTES.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April, 1863, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

14. Were you with the Command when it surrendered?
15. Was _____ the husband of applicant present?
16. If not present, where was he?
17. When and where did he leave his command?
For what cause?
By whose authority he left?
How do you know all this? (State fully and clearly.)
18. When and where did _____ die?
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
20. Do you of your own knowledge know that applicant is the lawful widow of
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
23. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it?
24. Has applicant conveyed any property in last two years or given away, if so, what was it, and to whom?
25. What is applicant's physical condition and her chances and ability to earn a support?

is now and has been for many years married
and we have no interest in said pension if allowed.
Sworn to and subscribed before me this 27
day of April 1904
G. W. Nundrick Ordinary,
Barlow County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

I, G. W. Nundrick Ordinary, in and for said County, hereby certify that the applicant, Mrs. Sarah C. Sexton resides in said County, and has been a bona fide resident of this State since the 1864 by personal and that the witnesses, Mr. _____

are entitled to full faith and credit.
I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of Barlow County shows that applicant returned for taxation in her own name in 1899 nothing dollars worth of property, and in 1900 nothing dollars worth of property, in 1901 nothing dollars worth of property, and in 1902 nothing dollars worth of property.

Witness my hand and official seal this 27 day of April 1904
G. W. Nundrick Ordinary,
Barlow County.

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

Questions for Witnesses.

STATE OF GEORGIA,

London County.

Dr. Littlefield of said State and County, having been presented as a witness in support of the Application of Mrs. Sarah C. Sexton for a Pension under the Act of 1900, and after having been 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? Dr. Littlefield
2. Are you acquainted with the applicant, Mrs. Sarah C. Sexton? yes, known her all her life
If so, how long have you known her? yes, known her all her life
3. Where does she reside, and how long and since when has she been a resident of this State? Barlow Co. Ga., Resident in Georgia, 1864
4. When and where was she born? 1842, Georgetown, Ga.
5. Were you ever acquainted with her husband? yes
6. Where did he reside in 1861? London Co. Ga.
7. When and to whom was he married? Morgan of Sexton married Sarah
8. When and where was he born?
9. How long have you known him? known him all his life
10. When and where did Morgan of Sexton enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? enlisted in the 11th Regt. of Black and Tan, 1861, 1862, 1863, 1864, 1865, 1866, 1867, 1868, 1869, 1870, 1871, 1872, 1873, 1874, 1875, 1876, 1877, 1878, 1879, 1880, 1881, 1882, 1883, 1884, 1885, 1886, 1887, 1888, 1889, 1890, 1891, 1892, 1893, 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906, 1907, 1908, 1909, 1910, 1911, 1912, 1913, 1914, 1915, 1916, 1917, 1918, 1919, 1920, 1921, 1922, 1923, 1924, 1925, 1926, 1927, 1928, 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, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 2681, 2682, 2683, 2684, 2685, 2686, 2687, 2688, 2689, 2690, 2691, 2692, 2693, 2694, 2695, 2696, 2697, 2698, 2699, 2700, 2701, 2702, 2703, 2704, 2705, 2706, 2707, 2708, 2709, 2710, 2711, 2712, 2713, 2714, 2715, 2716, 2717, 2718, 2719, 2720, 2721, 2722, 2723, 2724, 2725, 2726, 2727, 2728, 2729, 2730, 2731, 2732, 2733, 2734, 2735, 2736, 2737, 2738, 2739, 2740, 2741, 2742, 2743, 2744, 2745, 2746, 2747, 2748, 2749, 2750, 2751, 2752, 2753, 2754, 2755, 2756, 2757, 2758, 2759, 2760, 2761, 2762, 2763, 2764, 2765, 2766, 2767, 2768, 2769, 2770, 2771, 2772, 2773, 2774, 2775, 2776, 2777, 2778, 2779, 2780, 2781, 2782, 2783, 2784, 2785, 2786, 2787, 2788, 2789, 2790, 2791, 2792, 2793, 2794, 2795, 2796, 2797, 2798, 2799, 2800, 2801, 2802, 2803, 2804, 2805, 2806, 2807, 2808, 2809, 2810, 2811, 2812, 2813, 2814, 2815, 2816, 2817, 2818, 2819, 2820, 2821, 2822, 2823, 2824, 2825, 2826, 2827, 2828, 2829, 2830, 2831, 2832, 2833, 2834, 2835, 2836, 2837, 2838, 2839, 2840, 2841, 2842, 2843, 2844, 2845, 2846, 2847, 2848, 2849, 2850, 2851, 2852, 2853, 2854, 2855, 2856, 2857, 2858, 2859, 2860, 2861, 2862, 2863, 2864, 2865, 2866, 2867, 2868, 2869, 2870, 2871, 2872, 2873, 2874, 2875, 2876, 2877, 2878, 2879, 2880, 2881, 2882, 2883, 2884, 2885, 2886, 2887, 2888, 2889, 2890, 2891, 2892, 2893, 2894, 2895, 2896, 2897, 2898, 2899, 2900, 2901, 2902, 2903, 2904, 2905, 2906, 2907, 2908, 2909, 2910, 2911, 2912, 2913, 2914, 2915, 2916, 2917, 2918, 2919, 2920, 2921, 2922, 2923, 2924, 2925, 2926, 2927, 2928, 2929, 2930, 2931, 2932, 2933, 2934, 2935, 2936, 2937, 2938, 2939, 2940, 2941, 2942, 2943, 2944, 2945, 2946, 2947, 2948, 2949, 2950, 2951, 2952, 2953, 2954, 2955, 2956, 2957, 2958, 2959, 2960, 2961, 2962, 2963, 2964, 2965, 2966, 2967, 2968, 2969, 2970, 2971, 2972, 2973, 2974, 2975, 2976, 2977, 2978, 2979, 2980, 2981, 2982, 2983, 2984, 2985, 2986, 2987, 2988, 2989, 2990, 2991, 2992, 2993, 2994, 2995, 2996, 2997, 2998, 2999, 3000, 3001, 3002, 3003, 3004, 3005, 3006, 3007, 3008, 3009, 3010, 3011, 3012, 3013, 3014, 3015, 3016, 3017, 3018, 3019, 3020, 3021, 3022, 3023, 3024, 3025, 3026, 3027, 3028, 3029, 3030, 3031, 3032, 3033, 3034, 3035, 3036, 3037, 3038, 3039, 3040, 3041, 3042, 3043, 3044, 3045, 3046, 3047, 3048, 3049, 3050, 3051, 3052, 3053, 3054, 3055, 3056, 3057, 3058, 3059, 3060, 3061, 3062, 3063, 3064, 3065, 3066, 3067, 3068, 3069, 3070, 3071, 3072, 3073, 3074, 3075, 3076, 3077, 3078, 3079, 3080, 3081, 3082, 3083, 3084, 3085, 3086, 3087, 3088, 3089, 3090, 3091, 3092, 3093, 3094, 3095, 3096, 3097, 3098, 3099, 3100, 3101, 3102, 3103, 3104, 3105, 3106, 3107, 3108, 3109, 3110, 3111, 3112, 3113, 3114, 3115, 3116, 3117, 3118, 3119, 3120, 3121, 3122, 3123, 3124, 3125, 3126, 3127, 3128, 3129, 3130, 3131, 3132, 3133, 3134, 3135, 3136, 3137, 3138, 3139, 3140, 3141, 3142, 3143, 3144, 3145, 3146, 3147, 3148, 3149, 3150, 3151, 3152, 3153, 3154, 3155, 3156, 3157, 3158, 3159, 3160, 3161, 3162, 3163, 3164, 3165, 3166, 3167, 3168, 3169, 3170, 3171, 3172, 3173, 3174, 3175, 3176, 3177, 3178, 3179, 3180, 3181, 3182, 3183, 3184, 3185, 3186, 3187, 3188, 3189, 3190, 3191, 3192, 3193, 3194, 3195, 3196, 3197, 3198, 3199, 3200, 3201, 3202, 3203, 3204, 3205, 3206, 3207, 3208, 3209, 3210, 3211, 3212, 3213, 3214, 3215, 3216, 3217, 3218, 3219, 3220, 3221, 3222, 3223, 3224, 3225, 3226, 3227, 3228, 3229, 3230, 3231, 3232, 3233, 3234, 3235, 3236, 3237, 3238, 3239, 3240, 3241, 3242, 3243, 3244, 3245, 3246, 3247, 3248, 3249, 3250, 3251, 3252, 3253, 3254, 3255, 3256, 3257, 3258, 3259, 3260, 3261, 3262, 3263, 3264, 3265, 3266, 3267, 3268, 3269, 3270, 3271, 3272, 3273, 3274, 3275, 3276, 3277, 3278, 3279, 3280, 3281, 3282, 3283, 3284, 3285, 3286, 3287, 3288, 3289, 3290, 3291, 3292, 3293, 3294, 3295, 3296, 3297, 3298, 3299, 3300, 3301, 3302, 3303, 3304, 3305, 3306, 3307, 3308, 3309, 3310, 3311, 3312, 3313, 3314, 3315, 3316, 3317, 3318, 3319, 3320, 3321, 3322, 3323, 3324, 3325, 3326, 3327, 3328, 3329, 3330, 3331, 3332, 3333, 3334, 3335, 3336, 3337, 3338, 3339, 3340, 3341, 3342, 3343, 3344, 3345, 3346, 3347, 3348, 3349, 3350, 3351, 3352, 3353, 3354, 3355, 3356, 3357, 3358, 3359, 3360, 3361, 3362, 3363, 3364, 3365, 3366, 3367, 3368, 3369, 3370, 3371, 3372, 3373, 3374, 3375, 3376, 3377, 3378, 3379, 3380, 3381, 3382, 3383, 3384, 3385, 3386, 3387, 3388, 3389, 3390, 3391, 3392, 3393, 3394, 3395, 3396, 3397, 3398, 3399, 3400, 3401, 3402, 3403, 3404, 3405, 3406, 3407, 3408, 3409, 3410, 3411, 3412, 3413, 3414, 3415, 3416, 3417, 3418, 3419, 3420, 3421, 3422, 3423, 3424, 3425, 3426, 3427, 3428, 3429, 3430, 3431, 3432, 3433, 3434, 3435, 3436, 3437, 3438, 3439, 3440, 3441, 3442, 3443, 3444, 3445, 3446, 3447, 3448, 3449, 3450, 3451, 3452, 3453, 3454, 3455, 3456, 3457, 3458, 3459, 3460, 3461, 3462, 3463, 3464, 3465, 3466, 3467, 3468, 3469, 3470, 3471, 3472, 3473, 3474, 3475, 3476, 3477, 3478, 3479, 3480, 3481, 3482, 3483, 3484, 3485, 3486, 3487, 3488, 3489, 3490, 3491, 3492, 3493, 3494, 3495, 3496, 3497, 3498, 3499, 3500, 3501, 3502, 3503, 3504, 3505, 3506, 3507, 3508, 3509, 3510, 3511, 3512, 3513, 3514, 3515, 3516, 3517, 3518, 3519, 3520, 3521, 3522, 3523, 3524, 3525, 3526, 3527, 3528, 3529, 3530, 3531, 3532, 3533, 3534, 3535, 3536, 3537, 3538, 3539, 3540, 3541, 3542, 3543, 3544, 3545, 3546, 3547, 3548, 3549, 3550, 3551, 3552, 3553, 3554, 3555, 3556, 3557, 3558, 3559, 3560, 3561, 3562, 3563, 3564, 3565, 3566, 3567, 3568, 3569, 3570, 3571, 3572, 3573, 3574, 3575, 3576, 3577, 3578, 3579, 3580, 3581, 3582, 3583, 3584, 3585, 3586, 3587, 3588, 3589, 3590, 3591, 3592, 3593, 3594, 3595, 3596, 3597, 3598, 3599, 3600, 3601, 3602, 3603, 3604, 3605, 3606, 3607, 3608, 3609, 3610, 3611, 3612, 3613, 3614, 3615, 3616, 3617, 3618, 3619, 3620

13. When and where was he Company and Regiment surrendered and discharged from service?
 1865 no

14. Were you with the command when it surrendered? no

15. Was Morgan & Sexton the husband of applicant present?
no

16. If not present, where was he? Don't know

17. When and where did he leave his Command? Captured near New Hope
 For what cause? Charged 1864

By whose authority he left?
 How do you know all this? (State fully and clearly.)

18. When and where did Morgan & Sexton die?
Gordon Co. Ga. died about 1870 or 1872

19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
Gordon Co. and lived in Gordon Co. Ga.

20. Do you of your own knowledge know that applicant is the lawful widow of yes
I was present at marriage

21. Has she remained unmarried since her soldier husband's death, and is now his widow?
not married since

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
nothing - I am well acquainted with her condition

23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it?
nothing

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?
no

25. What is applicant's physical condition and her chances and ability to earn a support?
Health bad - some female disease

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this

day of _____ 1900

Ordinary,
 County,

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Gordon County.

I, John Harrison, Ordinary in and for said county, hereby certify that the applicant, Mrs. J. C. Sexton, resident in said county, and has been a bona fide resident of this State since _____ day of _____, and that the witnesses, Mr. J. C. Sexton and _____ are of trustworthy character, and that their statements

are entitled to full faith and credit. I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of _____ County shows that applicant returned for taxation in her own name in 1899 _____ dollars worth of property, and in 1900 _____ dollars worth of property.

Witness my hand and official seal, this 25 day of May, 1900

{SEAL}

John Harrison Ordinary,
Gordon County.

Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
 2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
 5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Gordon County.

I, J. C. Sexton, hereby authorize Wm. H. Hendricks of Cartersville, Ga. to receive and receipt for the pension paid hereon, and request that he remit same to me at Cartersville, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 14 day of Jan, 1905.

J. C. Sexton [L. S.]

Executed in presence of

W. H. Hendricks

POWER OF ATTORNEY.

STATE OF GEORGIA,

Gordon County.

I, J. C. Sexton, hereby authorize Wm. H. Hendricks of Cartersville, Ga. to receive and receipt for the pension paid hereon, and request that he remit same to me at Cartersville, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 6 day of Jan, 1906.

J. C. Sexton [L. S.]

Executed in presence of

W. H. Hendricks

To Those Herebefore Paid.
1905.
 No. 145
INDIGENT
WIDOW'S PENSION,
 For year ending Dec. 31, 1905.
 PAID TO
Mrs. J. C. Sexton
 OF
Gordon County,
 Widow of J. C. Sexton
 Co. _____ Regiment.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
WARRANT ISSUED
FEB 7
AND HANDLED TO
1
 1905.

THE PENSION OFFICE OF THE DEPARTMENT OF WAR, WASHINGTON, D. C.

To Those Herebefore Paid.
1906.
 No. 621
INDIGENT
WIDOW'S PENSION,
 For year ending Dec. 31, 1906.
 PAID TO
Mrs. J. C. Sexton
 OF
Gordon County,
 Widow of J. C. Sexton
 Co. _____ Regiment.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
WARRANT ISSUED
JAN 29
AND HANDLED TO
1
 1906.

THE FARMER'S PAPER AND PUBLISHING CO., ATLANTA, GA.

Sentry Sarah C. Barton
To Those Heretofore Paid.

1905.
No. 445

INDIGENT WIDOW'S PENSION,
For year ending Dec. 31, 1905.

Mrs. S. C. Barton
PAID TO
OF
Bartow County,
Widow of *M. G. Barton*
Co. _____ Regiment _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 7 1905
AND HANDLED TO

The Pension Bureau will reimburse Co. Agents, City or Station, and Post Office, for their services.

Barton Sarah C. Barton County
To Those Heretofore Paid.

1906.
No. 631

INDIGENT WIDOW'S PENSION,
For year ending Dec. 31, 1906.

Mrs. S. C. Barton
PAID TO
OF
Bartow County,
Widow of *M. G. Barton*
Co. *B. J. Barton* Regiment _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 29 1906
AND HANDLED TO

THE PENSION BUREAU AND PENSIONERS CO., ATLANTA, GA.

Form No. 2
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of *Bartow* } PERSONALLY COMES MRS. *S. C. Barton*

who, being sworn says on oath, that she is a bona fide resident of said County of *Bartow* State of Georgia, and that she has resided in said State continuously ever since *1860*. That she is the Widow of *M. G. Barton* who was a soldier in Company _____ of the _____ Regiment of _____ Volunteers, that he enlisted in said regiment on or about the month of *October* 1861, and served in the Army up to *1864*. That he died on the *Jan* day of *31* 18*80*.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18*57* *married*.

I have been allowed an Indigent pension as a resident of *Bartow* County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this *14* day of *Jan* 1905. *S. C. Barton* Ordinary. Post-Office *Chassville, Ga*

State of Georgia, *Bartow* County. } I, *G. W. Nudrick* Ordinary of said County, certify that I am well acquainted with Mrs. *S. C. Barton* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *1860*.

Given under my official signature and seal, this the *14* day of *Jan* 1905.

Official Seal.

G. W. Nudrick Ordinary of *Bartow* County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1903.

Form No. 2
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of *Bartow* } PERSONALLY COMES MRS. *S. C. Barton*

who, being sworn says on oath, that she is a bona fide resident of said County of *Bartow* State of Georgia, and that she has resided in said State continuously ever since *1860*. That she is the Widow of *M. G. Barton* who was a soldier in Company _____ of the *84 Ga. Vol. Ia* Regiment of _____ Volunteers, that he enlisted in said regiment on or about the month of *Oct* 1861, and served in the Army up to *Spring* 1864. That he died on the *Jan* day of *31* 18*80*.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18*57*.

I have been allowed an Indigent pension as a resident of *Bartow* County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this *6* day of *Jan* 1906. *G. W. Nudrick* Ordinary. Post-Office *Chassville, Ga*

State of Georgia, *Bartow* County. } I, *G. W. Nudrick* Ordinary of said County, certify that I am well acquainted with Mrs. *S. C. Barton* who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *1860*.

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

Official Seal.

G. W. Nudrick Ordinary of *Bartow* County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

<p><i>Dextery Sarah C.</i> <i>Barlow C.</i></p> <p>To Those Heretofore Paid.</p> <p>1907.</p> <p>No. <i>1063</i></p>	<p>INDIGENT</p> <p>WIDOW'S PENSION,</p> <p>For year ending Dec. 31, 1907.</p> <p>PAID TO <i>Mrs. S. C. Barlow</i> <i>Barlow</i> of <i>Co. B. 5th Cal. Inf.</i> <i>Regiment.</i> County,</p>	<p>JOHN W. LINDSEY, Commissioner of Pensions.</p> <p>WARRANT ISSUED <i>2/14</i></p> <p>AMOUNT PAID TO <i>10</i></p> <p>1907. FEB 21</p>
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Sexton Sarah C.
Bartow Co
 To Those Heretofore Paid.
1907.
 No. *1263*
INDIGENT
WIDOW'S PENSION,
 For year ending Dec. 31, 1907.
 PAID TO *Mrs. S. C. Sexton*
 of *Bartow* County,
 Widow of *Mr. J. G. Sexton*
Co. B. 84 Bat. Regt.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT ISSUED
2/4
 AND HANDLED TO
2/4
 1907.
FEB 4
 One W. Hannon, West Point, Atlanta.

Form No. 1
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of *Bartow*

PERSONALLY COMES Mrs.

S. C. Sexton

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

Bartow

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

continuously ever since *1860*

That she is the Widow of

Mr. J. G. Sexton

who was a soldier in Company

B

of the *84 Bat* Regiment of *99*

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

Oct

1861, and served in the Army up to

Jan

1863

That he died on

the *31*

day of *Jan*

1860

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year *1857*

I have been allowed an Indigent pension as a resident of *Bartow* County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me
 this *5* day of *Jan* 1907.
G. W. Anderson, Ordinary.

S. C. Sexton
 Post Office *Adamsville Ga*

State of Georgia,

Bartow County.

G. W. Anderson

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

day of *18*

Given under my official signature and seal, this the *5* day of *Jan* 1907.

Official Seal

G. W. Anderson
 Ordinary of *Bartow* County.

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

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1857.

I have been allowed an Indigent pension as a resident of Barlow County, under Act 1900, for the year 1900, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 5th day of Jan 1907. G.W. Hendricks, Ordinary. Post Office Adairville Ga

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

Given under my official signature and seal this the 5th day of Jan 1907. G.W. Hendricks, Ordinary of Barlow County.

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

George B. Sexton came before me W. M. Ramsey and C. C. Sexton of said County, who on both say they have known Mrs. Sarah C. Sexton for many years; that they know her husband, Morgan J. Sexton, in his lifetime; that he died in January 1884; that Sarah C. Sexton, his widow, has never remarried since the death of her said husband and that she is his now his lawful widow; that she has no property or means of any sort from any source; that she is entirely dependent upon her son for a support; that she is entirely unable to do any kind of work, and that she is, and has been supported by her son for many years. Sworn to and subscribed before me, April 1st 1907, W. M. Ramsey, G. W. Hendricks, Ordinary Barlow County Ga.

The State of Texas }
County of Comanche }
Before the undersigned authority on this day personally appeared a man Ray late of Gordon County Georgia who after being duly sworn stated on his oath that he was well acquainted with me of Sexton of Gordon County Georgia and that affiant knew of his own knowledge that he the said Sexton did serve in the Confederate war as a Confederate soldier that he enlisted at Blackwood Springs Gordon County Georgia on the 5 day of Oct 1861 and served until Jan 1st 1863 in Company B 8th Georgia Battalion he the said M. J. Sexton was Captain of Co B during this time that he the said a man Ray served as a soldier in said Co B with the said M. J. Sexton A. M. Kay

Sworn to and subscribed before me this the 7th day of March 1904 J. H. Lambart a Notary Public Comanche Co Tex

B. C. Sexton of said County
 who on oath say they have known Mrs.
 Sarah C. Sexton for many years;
 that they knew her husband, Morgan
 J. Sexton, in his lifetime; that he
 died in January 1880; that Sarah C.
 Sexton, his wife, has never remarried
 since the death of her said husband
 and that she is, his now his lawful
 widow; that she has no property or
 means of any sort from any source;
 that she is entirely dependent upon her
 son for a support; that she is
 entirely unable to do any kind of
 work, and that she is, and has been
 supported by her son for many years.
 Sworn to and subscribed
 before me, this 1st of 1904 }
 J. C. Hendricks } M. C. Sexton
 Ordinary of said }
 County, Ga }

who after being duly sworn states on
 his oath that he was well acquainted
 with M. J. Sexton of Gordon County
 Georgia and that affiant is aware
 of his own knowledge that he the said
 Sexton did serve in the Confederate
 war as a Confederate soldier
 that he enlisted at Blackwood
 Springs Gordon County Georgia
 on the 5 day of Oct 1861 and
 served until Jan 1st 1863 in
 Company B. Eight (8) Georgia
 Battalion he the said M. J. Sexton
 was Captain of Co B during this
 time that he the said M. J. served
 as a soldier in said Co B with
 the said M. J. Sexton
 A. M. Kay

Sworn to and subscribed before
 me this the 7th day of March 1904
 J. H. Lambert a
 Notary Public
 Cherokee Co Ky

I, W. O. Littlefield a resident of Hamilton County, ~~State~~, Chattanooga, Tennessee
 do hereby make oath that Sarah Littlefield was married to M. J. Sexton
 Dec 27, 1858, said Sexton died about the year of 1880, and said Sarah
 Littlefield is now a widow, and has no means of support.

W. O. Littlefield

STATE OF TENNESSEE } Before me, C. Lee Head a Notary Public duly appointed
 HAMILTON COUNTY } commissioned and qualified in and for the county and
 the within bargainer, with whom I am personally acquainted and who makes
 oath the above statements are true to the best of his knowledge and belief

This 28th of March 1904.

C. Lee Head
 Notary Public

I, W. O. Littlefield a resident of Hamilton County, ~~State~~, Chattanooga, Tennessee do hereby make oath that Sarah Littlefield was married to M. Y. Sexton Dec 27, 1858, said Sexton died about the year of 1880, and said Sarah Littlefield is now a widow, and has no means of support.

W. O. Littlefield

STATE OF TENNESSEE } Before me, C. Lee Head a Notary Public duly appointed
HAMILTON COUNTY } commissioned and qualified in and for the county and
State aforesaid personally appeared W. O. Littlefield
the within bargainer, with whom I am personally acquainted and who makes
oath the above statements are true to the best of his knowledge and belief

This 28th of March 1904.

C. Lee Head
Notary Public

NOTES.

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

1. An applicant has been wounded, the description of the wound should be carefully and fully set forth by the physician and surgeon, and accompanied by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease, the certificate of the physician should be given, showing the 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 permanently disabled.
3. It will not answer to say that an arm is "substantially useless, for ordinary purposes of the eye," purposes be "substantially and essentially useless."
4. There is no qualification to the clause of the Act in reference to the arm or leg, but the title made for all words, the applicant must show that the arm or leg is "substantially and essentially useless," as to require the constant use of crutch or stick.
5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been made.
6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

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

Sharpton, Simm

Bartow Co

No. 1948

APPLICATION FOR ALLOWANCE

Left term, Dec 1st

Applicant *Levin Sharpton*

County *Bartow*

Amount *50*

Date of Warrant *Apr 12*

Entered on record

Apr 12 1889

M. H.
SECRETARY EXECUTIVE DEPARTMENT.

Wm. G. Gault

Date of Warrant Apr 12
 Entered on record Apr 12 1889
MSH
 SECRETARY EXECUTIVE DEPARTMENT.

Wm Gowte

able all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted.
 1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
 2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
 3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the "Act" in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
 4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
 5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
 6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the payments provided, the following suggestions are submitted.
 1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
 2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
 3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the "Act" in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
 4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
 5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
 6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Bartow County.

PERSONALLY appears Linn Shorten of Bartow county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such since the first day of December 1885; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 88 th Regiment of Tennessee Volunteers Quadrone's Brigade; that whilst engaged in such military service, at the battle of Chancellorsville in the State of Tennessee, on the 29 day of December 1863, he was wounded as follows: A musket ball entered the left hip, in front, passing straight through, fracturing the bone so as to cause the bone to be removed and also a musket ball entered the left knee in front cutting the big tendon almost away. The result of the above wounds renders the leg substantially and essentially useless.

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

Sworn to and subscribed before me, this the 18th day of Feb 1889, Linn Shorten
Woodruff Ordinary

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
Quitman County.

PERSONALLY came before me Richard Pintcoat of the county of Quitman State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company H, of 28 Regiment of Tennessee Volunteers, and that deponent knows Linn Shorten and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said Linn Shorten as stated by him in said affidavit. Deponent further states that said Linn Shorten is a bona fide citizen of this State and resides in Bartow county, Georgia.

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

APPLICATION FOR ALLOWANCE

No. 1448

William Shorten
 Applicant Linn Shorten
 County Bartow
 Amount 50

Date of Warrant Apr 12
 Entered on record Apr 12 1889
MSH
 SECRETARY EXECUTIVE DEPARTMENT.

Wm Gowte

that the leg is not "substantially and essentially useless."

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

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

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

recreate States (or of the State of _____) during the war between the States, and served as a Private in Company H, of 88-th Regiment of Tennessee Volunteers Donelson's Brigade; that whilst engaged in such military service, at the battle of Murfreesboro in the State of Tennessee, on the 31 day of December 1863, he was wounded as follows: A minnie Ball entered the left hip report passing straight through fracturing the bone so as to cause the bone to be removed and also a minnie Ball entered the left knee up front cutting the big blood almost away. The result of the above wounds renders the leg substantially and essentially useless

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

Sworn to and subscribed before me, this the 15th day of Feb 1889 Lincoln Sharpton
Wm. H. G. Ordway
 Notary Public

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
Gwinnetta County.

PERSONALLY came before me Richard Pontecost of the county of Gwinnetta State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company H, of 88 Regiment of Tennessee Volunteers, and that deponent knows Lincoln Sharpton and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said Lincoln Sharpton as stated by him in said affidavit. Deponent further states that said Lincoln Sharpton is a bona fide citizen of this State and resides in Bartow Co county, Georgia.

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

Sharpton, Lincoln
Bartow Co
No. 1948
 APPLICATION FOR ALLOWANCE
Applicant, Lincoln Sharpton
 County Bartow
 Amount 50
 Date of Warrant Apr 12
 Entered on record Apr 12 1889
W. H. G.
 SECRETARY EXECUTIVE DEPARTMENT.

Sharpton, Lincoln
Bartow Co

No. 1948
 APPLICATION FOR ALLOWANCE
Applicant, Lincoln Sharpton
 County Bartow
 Amount 50
 Date of Warrant Apr 12
 Entered on record Apr 12 1889
W. H. G.
 SECRETARY EXECUTIVE DEPARTMENT.

W. H. G.

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

1. The applicant has been wounded, the description of the wound should be carefully and fully set forth by a medical officer, and the point of entrance of the ball should be shown, and the extent of the disability. If applicant claims disability from disease, the 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" unless the ordinary pursuits of life, etc. There is no qualification to the clause of the Act in reference to the arm or leg, but that they must for all purposes be "substantially and essentially useless."

4. There is no qualification to the clause of the Act, and the words above should be taken in their plain and literal sense, as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

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

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

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

NOTES.

Date of Warrant Apr 12
Entered on record Apr 12 1889
M.H.H.
SECRETARY EXECUTIVE DEPARTMENT.

Wm Young

able all parties interested to understand
rules adopted by the Governor touching the
he should be carefully and fully ex-
d in the service, a full and carefully stated
positive proof to the service.
arm or leg has been rendered substantially
necess for ordinary pursuits of life, etc.,
the arm or leg, but the limb must for all
be a fair construction of the Act, and the
state the constant use of crutch or stick,
added to any of the aforesaid, the amend-
is must show that the amendments have
e county of the residence of the applicant
d to call the attention of the physicians

BAD COPY - LIGHT PRINT

STATE OF GEORGIA,

County.

PERSONALLY came

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

Sworn to and subscribed before me, this _____
day of _____ 1889

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

STATE OF GEORGIA,

Bartow County.

PERSONALLY comes before me Groblewicks Ordinary of said county,

J. H. Mayfield and J. M. Young, both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that
they have carefully examined Simon Sharpton and after such
examination say that the applicant has been injured as follows:

*Medicine ball
which passed through upper third of
right forearm making a complete fracture
of same. Besides of same came out
of shoulder joint and was the result
of a shot from a 2 1/2 inch
shell passing through the
upper part of shoulder joint, rendering the
arm substantially useless.*

Sworn to and subscribed before me, this _____

day of April 1889

Groblewicks
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, Groblewicks Ordinary of said county,
do certify that I am well acquainted with Simon Sharpton the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be,
and that he resides in this county. I also certify that the foregoing witnesses, are persons
of respectability, and that their statements are worthy of full credit and belief.

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

Given under my official signature and seal, this _____ day of April 1889

Groblewicks
Ordinary Bartow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

Know all Men by these Presents, That I, Simon Sharpton
of Charlesville Bartow
county, in said State, do hereby appoint Don A. M. Harte
of Charlesville Ga my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled
to from the State of Georgia by reason of the injury received as aforesaid in the military ser-
vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
authorizing my said attorney to receipt in my name for any Warrant that may be issued by
the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this _____
day of April 1889

Executed in the presence of us:
Frank O. D. Harte April 6th 1889, I hereby
Groblewicks Charge Prothonotary duty to
Ordinary Groblewicks Don A. M. Harte
Ordinary Groblewicks Simon Sharpton

STATE OF GEORGIA,
Barlow County.

PERSONALLY comes before me W. H. Hendricks Ordinary of said county,
J. H. Mayfield and J. M. Young, both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that
they have carefully examined Linn Sharpton and after such
examination say that the applicant has been injured as follows:

*Minors ball
which passed through upper third of
left lower making a complete fracture
of same. Besides of some pain out-
wardly in the shoulder the wound
on continuing of it to the left of the body
the person has been considerably disabled rendering the
his work entirely impossible.
Sworn to and subscribed before me, this
11 day of April 1889
W. 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.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

Know all Men by these Presents, That I, Linn Sharpton
of Cartersville Barlow
county, in said State, do hereby appoint Leon A. W. State
of Cartersville Ga my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled
to from the State of Georgia by reason of the injury received as aforesaid in the military ser-
vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
authorizing my said attorney to receipt in my name for any Warrant that may be issued by
the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this
day of April 1889

Executed in the presence of us:
Frank O. D. Lane April 6th 1889, I hereby
W. H. Hendricks George H. D. Lane of Barlow
Ordinary Barlow County Linn Sharpton

STATE OF GEORGIA,
Barlow County.

I, W. H. Hendricks Ordinary of said county,
do certify that I am well acquainted with Linn Sharpton 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
signature thereto are genuine.

Given under my official signature and seal, this 10 day of July 1891

W. H. Hendricks
Ordinary Barlow County.

STATE OF GEORGIA,
Barlow County.

I, W. H. Hendricks Ordinary of said County,
do certify that I am well acquainted with Linn Sharpton 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
signature thereto are genuine.

Given under my official signature and seal, this 7 day of July 1891

W. H. Hendricks
Ordinary Barlow County.

1890.
H 38
No. 1109
APPLICATION FOR ALLOWANCE.
FOR THE YEAR ENDING OCTOBER 31, 1891.

Leg disab
Applicant, Linn Sharpton
County, Barlow
Amount, \$50.
Date of warrant, Aug 13
Entered on record
Oct 13 1891
WARRANT ISSUED TO
W. H. Hendricks
Additional data

1891.
No. 1188
APPLICATION FOR ALLOWANCE
FOR THE YEAR ENDING OCTOBER 31, 1891.

Leg dis
Applicant, Linn Sharpton
County, Barlow
Amount, \$50.
Date of Warrant, July 13, 1891
Entered on record
July 13 1891
WARRANT ISSUED TO
A. M. Joute

Sharpton, Linn
Bartow Co.
1890.

H 38

No. 1109
APPLICATION FOR ALLOWANCE.
FOR THE YEAR ENDING OCTOBER 26, 1891.

Applicant, Linn Sharpton
County, Bartow
Amount, \$50.
Date of Warrant, July 13, 1891
Entered on record
JUL 13 1891

WARRANT ISSUED TO
RECEIVED
JUL 13 1891

WARRANT ISSUED TO
RECEIVED
JUL 13 1891

No additional data

Sharpton, Linn
Bartow Co.
1891

No. 788
APPLICATION FOR ALLOWANCE
FOR THE YEAR ENDING OCTOBER 26, 1891.

Applicant, Linn Sharpton
County, Bartow
Amount, \$50.
Date of Warrant, July 13, 1891
Entered on record
JUL 13 1891

WARRANT ISSUED TO
RECEIVED
JUL 13 1891

WARRANT ISSUED TO
RECEIVED
JUL 13 1891

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears Linn Sharpton of Bartow county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the 9th day of November 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 38th Regiment of Linn Volunteers Donelson's Brigade; that whilst engaged in such military service, at the battle of Murfreesboro in the State of Tennessee, on the 31st day of December 1862, he was wounded as follows: Shot with a Minnie Ball in the left hip just below the point and also through the left knee. The bone of the thigh was broken but just below the point, rendering his left leg substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of \$50.00 dollars.

Sworn to and subscribed before me, this 10th day of July, 1891, Linn Sharpton
J. W. Anderson, Ordway

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

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of July, 1891.
Linn Sharpton [L. S.]

Executed in the presence of us:

J. W. Anderson, Ordway

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears Linn Sharpton 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 9th day of November 1865; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company H, of 38th Regiment of Linn Volunteers Donelson's Brigade; that whilst engaged in such military service at the battle of Murfreesboro in the State of Tennessee, on the 31st day of December 1862, he was wounded as follows: Shot through the left thigh with a Minnie ball breaking the thigh bone thus rendering the leg substantially and essentially useless.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of \$50.00 dollars, for 1889-1890.

Sworn to and subscribed before me, this 10th day of July, 1891, Linn Sharpton
J. W. Anderson, Ordway

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That I, Linn Sharpton of Bartow County, State of Georgia, do hereby appoint A. M. Houte 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 10th day of July, 1891.
Linn Sharpton [L. S.]

Executed in the presence of us:

J. W. Anderson, Ordway

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

One first below the point, rendering said leg
instantly and extensively useless

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of \$80.00 dollars.

Sworn to and subscribed before me, this the 10th day of Feb, 1890, Linn Sharpton
J. W. Hendricks Ordinary

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

POWER OF ATTORNEY.

STATE OF GEORGIA

Bartow

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

Linn Sharpton
of Bartow

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of Feb, 1890.

Executed in the presence of us:

J. W. Hendricks Ordinary

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of \$84.98 dollars, for 1888-1890.

Sworn to and subscribed before me, this, the 7th day of Feb, 1891, Linn Sharpton
J. W. Hendricks Ordinary

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow

County.

Know all Men by these Presents, That I, Linn Sharpton of Bartow County, State of Georgia, do hereby appoint

of Bartow 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 7th day of Feb, 1891.

Executed in the presence of us:

R. S. Anderson
J. W. Hendricks Ordinary

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

Audited April 12 1889.

Wm. A. Wright
COUNTY CLERK

Bartow

Maimed Soldiers.

Voucher No. 1948

Amount, \$ 50.

Paid to Linn Sharpton

For Left leg

Disabled

April 12 1889.

Included in Warrant No.

issued to Treasurer.

1889.

WARRANT CLERK.

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

A. M. Haute

Bartow

Maimed Soldiers.

Voucher No. 1109

Amount \$ 50.

Paid Linn Sharpton

For Leg disabled

Feb 13 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

A. M. Haute

Sharpton, Linn
Bartow

1891.

Maimed Soldiers.

Voucher No. 788

Amount \$ 50.00

Paid to Linn Sharpton

For Leg disabled

May 12 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, ALBANY.

A. M. Haute

Wm. A. Wright
COUNTY CLERK, GEORGIA

Amount, \$ 50.
Paid to *Levin Sharpton*
For *Left leg*
Disabled
April 12 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK.

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

A M Foote

Amount \$ 50.
Paid to *Levin Sharpton*
For *Leg disabled*
July 13 1890

Included in warrant No.
issued to Treasurer.

1890.

WARRANT CLERK.

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

A M Foote

Voucher No. 788
Amount \$ 50.00
Paid to *Levin Sharpton*
For *Leg disabled*
July 13 1891.

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

A M Foote

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 1948
Atlanta, Ga., April 12 1889.

Mr. *Levin Sharpton* of the County
of *Bartow* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Dec. 24, 1883, and the same having been allowed for
Left leg disabled
He is entitled to receive the sum of *Fifty + 00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor.

W. N. Harrison

CLERK EXECUTIVE DEPARTMENT.

50.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00 Dollars,
per above voucher, this *12* of *April* 1889.

*Levin Sharpton, by his atty. in
fact, A M Foote.*

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 1109
Atlanta, Ga., July 13 1890

Mr. *Levin Sharpton* of the County
of *Bartow* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for
Leg disabled

He is entitled to receive the sum of *Fifty + 00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.

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

By the Governor,

W. N. Harrison

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00 Dollars,
per above voucher, this *13* of *July* 1890

*Levin Sharpton, by his atty.
in fact, A M Foote.*

Dec. 24, 1883, and the same having been allowed for

Left leg disabled
He is entitled to receive the sum of *Fifty + 00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor,

W N Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00 Dollars,
per above voucher, this *12* of *April* 1889.

*Linn Sharpton, by his atty. in
fact, A M Foute.*

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* 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 N Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00 Dollars,
per above voucher, this *13* of *Feb* 1890.

*Linn Sharpton, by his atty.
in fact, A M Foute.*

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

1891.
No. *788*

Atlanta, Ga. Feby 13, 1891.

Mr. *Linn Sharpton* of the County
Sartorn having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Leg disabled
He is entitled to receive the sum of *Fifty + 00* 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 N Harrison
Sec'y EXECUTIVE DEPARTMENT.

\$ 50

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

Fifty Dollars,
per above voucher, this *13* of *Feby* 1891.

*Linn Sharpton
By A M Foute.*

Mr. Linu Sharpton of the County
of Bartow having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Leg disability
He is entitled to receive the sum of 50 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

The Treasurer will pay the same and note is received for this voucher and return same to
Executive Department for warrant.

By the Governor,

W. H. Harrison
SEC'Y EXECUTIVE DEPARTMENT.

H. J. VanDine
GOVERNOR.

\$ 50

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

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

Linu Sharpton
By A. M. Foute

Thed. Nancy (Mrs.)
Barton
1900

Application for Pension Due
Deceased Pensioner Un-
der Act 1904.

W. J. Lindsey Ordinary
For *Nancy Thed*
of *Barton* County,
of Co. _____ Regiment.

Approved and ordered paid

190

J. W. LINDSEY,
Commissioner of Pensions.

Note 1.—Use this blank only when the Pension is wanted to pay funeral expenses.

ATTEST BY

County _____
I hereby authorize and constitute _____
of _____ County my lawful attorney, to collect and receive
for me in my name, the pension due to _____
for _____ now deceased, who was on the _____ Pension Roll from said
County at his death.
Witness my hand and seal, this _____ day of _____ 1900.

County my lawful attorney, to collect and receipt
for
Pension Roll from said
day of
190

G. M. JACKSON
CARTERSVILLE, GA. Jan 21, 1910
Z. M. JACKSON

Mr Wm Shedd
Cartersville, Ga.
IN ACCOUNT WITH
G. M. JACKSON & SONS
DEALERS IN
FURNITURE, COFFINS, MATTINGS, RUGS
COMFORTS, BLANKETS, PILLOWS, ETC.
AGENTS FOR VICTOR PORCH SHADES. AGENTS FOR GLOBE-WERNICKE BOOK CASES.

Jan 18 Coffin \$15.00
Paid by G. M. Jackson & Sons
Ordinary Barton county
Jan 31st 1910
L. H. Jackson & Sons
To Burial Suit 5.00
" Medicine furnished 10.00
" Nursing for 5 months 35.00
by Wm A. Shedd \$60.00
The above account is
correct and true.
Wm Shedd
G. M. Jackson & Sons
Ordinary
 sworn to and subscribed before me Jan-31-1910
G. M. Jackson & Sons
Ordinary

Application for Pension Due to a Deceased Pensioner

UNDER THE ACT OF AUG. 15, 1904, TO BE PAID TO THE ORDINARY FOR
FUNERAL EXPENSES AND EXPENSES OF LAST ILLNESS.

Georgia, Bartow County.

Personally before me, the Ordinary of said County, comes Wm Shedd
of said County, who, after being sworn, on oath says that
he knew Maney Shedd of said County, and that he was on
the Indigent Widows Pension Roll Bartow County at the
time of her death, which occurred in Bartow County, in this
State, on the 17th day of Jan 1910, and that
a Pension of Eighty Dollars was due her and
unpaid at the time of her death. That she left no widow or dependent children surviving him, and no estate
of any value sufficient to pay the funeral expenses, which amounted to the sum of \$65 Dollars.
as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me
this 31st day of Jan 1910
G. M. Jackson & Sons Ordinary
Bartow County

Georgia, Bartow County.

I, G. M. Jackson & Sons Ordinary of said County, do certify
that I personally know Wm Shedd who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and credit.
I also knew Maney Shedd while in life; that she
was the same person whose name appears on the Indigent Widows Pension
Roll of Bartow County, and was paid a pension
of Eighty Dollars in said county for 1910 and
I now believe her to be dead.

Given under my hand and official seal, this 31 day of Jan 1910
G. M. Jackson & Sons Ordinary,
Bartow County.

DEALERS IN . . .
FURNITURE, COFFINS, MATTINGS, RUGS
COMFORTS, BLANKETS, PILLOWS, ETC.

AGENTS FOR YCDOE PORCH SHADES.

AGENTS FOR GLOBE-VERNICKE BOOK CASES.

Jan 18 Coffin

\$15.00

Paid by Geo. Hendricks
Ordinary Barton County
Jan 31st 1910
L. M. Jackson - Bond!

20 Burial Suit 5.00
" Medicines furnished 10.00
" Nurses for 5 months 35.00
by M. A. Shed \$50.00

The above account is
correct and true.

W. M. Shed
 sworn to and subscribed before me Jan - 31 - 1910
 Geo. Hendricks
 Ordinary

Ready Geo. Hendricks for Jan 31 1910 L. M. Jackson - Bond!

State, on the 17th day of Jan 1910, and that
a Pension of \$100.00 Dollars was due her
unpaid at the time of her death. That she left no widow or dependent children surviving her, and no estate
of any value sufficient to pay the funeral expenses, which amounted to the sum of \$65.00 Dollars.

as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me
this 31st day of Jan 1910
Geo. Hendricks Ordinary
Bartow County

W. M. Shed

Georgia, Bartow County.

I, Geo. Hendricks, Ordinary of said County, do certify
that I personally know W. M. Shed, who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Mrs. Mary Shed while in life; that she
was the same person whose name appears on the Indigent Widows Pension
Roll of Bartow County, and was paid a pension
of \$10.00 Dollars in said county for 1910 and
I now believe her to be dead.

Given under my hand and official seal, this 31 day of Jan 1910
Geo. Hendricks Ordinary,
Bartow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow

County,

Benjamin O. Shelley
Lincoln
Rocky Hill

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

Witness my hand and seal this *10th* day of *April* 1885.

Executed in presence of

B. F. Paul
W. F. Andrews
Benjamin O. Shelley
Mark

Shelley, Benjamin O.
Bartow Co

C.K. No. 109

INDIGENT PENSION
1895.

Name *Benjamin O. Shelley*

County *Bartow*

Ground *Indigent Person*
April 10th 1895

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Atty

Geo. W. Harrison, State Printer, Atlanta.

Ground *Benjamin O. Shelley*
April 10th 1895
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDED TO
Atty
(Geo. W. Garrison, State Printer, Atlanta.)

ATTORNEY.
Shelley
Benjamin O. Shelley
April 10th 1895
Benjamin O. Shelley
mark

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.
Benjamin O. Shelley hereby authorize
G. H. Hendricks of *Coatesville Ga*
to receive any receipt for the pension allowed and request that he remit same to, *me*
at *Kingston Ga* by
Witness my hand and seal this *10th* day of *April* 1895.

Executed in presence of
B. F. Posey
W. H. Matthews

Benjamin O. Shelley
mark

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 the *10* day of *April* 1895. *Benjamin O. Shelley* Applicant.
G. H. Hendricks Ordinary
of *Barlow* County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Barlow County.
L. M. Mountain of said State and County, having been presented
as a witness in support of the application of *Benjamin O. Shelley* 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? *L. M. Mountain*
Mar Kingston Barlow County Ga.
2. Are you acquainted with *Benjamin O. Shelley*, the applicant, if so
how long have you known him? *Since July 1861*
3. Where does he reside, and how long has he been a resident of this State? *Mar Kingston*
Barlow Co. Ga. Ever since I have known him 34 yrs.
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 with him. Saw*
him in several battles
5. When, where and in what company and regiment did he enlist? *July 1861, Co. D*
Acworth Cobb Co. Ga. in Cobb's 1st Ga Reg. Vol.
6. Were you a member of the same company and regiment? *I was*
7. How long did he perform regular military duty, and what do you know of his service as a Confed-
erate soldier, and the time and circumstances of his discharge from the service? *He served till*
May 1864. I know personally. I was captured May 12th 1864.
in Battle of Kennesaw. He was in that
battle. He was a brave good soldier fairly well.
8. What property, effects or income has the applicant? (Give your means of knowledge.)
He has none. I have lived near him for the
last twelve years and am acquainted with his
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*

10. What is the applicant's occupation and physical condition? *He does a little work*
on the farm and does his little boy how to work.
His physical condition is bad indeed.
11. Is the applicant unable to support himself by labor of any sort, if so, why? *He is, he*
cannot support himself by labor of any sort, he is
disabled by his head being injured by a
shell in the army and old age & rheumatism.
12. How was he supported during the years 1893 and 1894? *By the labor of*
his little children and what little he could
do.
13. What portion of his support for these two years was derived from his own labor or income?
I am satisfied he could not earn more than \$30
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension
under the Act of December 15th, 1894. *He is disabled from labor on of a*
shell in the army. He also has rheumatism. He
has had badly hurt at times his nose and mouth bleed and
the doctors say it is the effects of the shock of his brain being
15. What interest have you in the recovery of a pension by this applicant? *None*

Sworn to and subscribed before me, this
the *10* day of *April* 1895. *L. M. Mountain*
G. H. Hendricks Ordinary
mark

INDIGENT PENSION

1895.

Name *Benjamin O. Shelley*

County *Barlow*

Ground *Benjamin O. Shelley*
April 10th 1895

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Atty
(Geo. W. Garrison, State Printer, Atlanta.)

Shelley, Benjamin O.
Barlow Co.

File 109

Shelley, Benjamin O. No. 109
INDIGENT PENSION 1895.
Name Ben O. Shelley
County Barlow
Ground Infirmary
April 11th 1895
RICHARD JOHNSON,
Sitting Executive Department
WARRANT ISSUED TO
Atty
Chas W. Hendricks, State Printer, Atlanta.

6. Were you a member of the same company and regiment? Yes
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? He served till May 1864, I know personally, I was captured May 12, 1864, in Battle of Spotsylvania Court House. He was in that battle. He was a brave good soldier fought well.
8. What property, effects or income has the applicant? (Give your means of knowledge.) He has none. I have lived in a home for the last twelve years and am acquainted with his condition.
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? None
10. What is the applicant's occupation and physical condition? He does a little work in the home and direct his little boy how to work. His physical condition is bad, indeed.
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is, because of his trouble in the head from explosion of a shell in the army and old age & Rheumatism.
12. How was he supported during the years 1893 and 1894? By the labor of his little children and what little he could do.
13. What portion of his support for these two years was derived from his own labor or income? I am satisfied he could not earn more than \$30 per annum.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 16th, 1894? He suffers from Rheumatism of a shell in the army. He also has Rheumatism. He has had shells and at times has more and more the head on the necks and it is the effect of the shell in his brain. He has.
15. What interest have you in the recovery of pension to this applicant? None

Sworn to and subscribed before me, this 11th day of April 1895.
L. M. McIntire
Chas W. Hendricks Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow County.

Personally came before me J. D. Bradley and

, both known to me as reputable physicians

of said county, who being severally sworn, say on oath that they have examined carefully Benjamin O. Shelley

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

Weak and feeble caused mainly from old age. His mental condition is not good.

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 12 day of April 1895.

J. D. Bradley J. M. Hightower
Chas W. Hendricks Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

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

the applicant Benjamin O. Shelley 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: L. M. McIntire

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

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

I further certify that the tax digests of Barlow County show that applicant

returned for taxation in his name in 1893, None dollars

of property, and in 1894, 20 dollars of property.

Witness my hand and seal of office this 20 day of May 1895.

Chas 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."

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Barlow County.

Benjamin O. Shelley of said State and County, desiring to avail himself of the Pension Act approved December 16th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

- What is your name and where do you reside? (give State, County and post office) Benjamin O. Shelley, Near Kingston, Barlow County, Ga.
- Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Near Kingston, Barlow County, Ga. About 38 years.
- When and where were you born? July 2nd 1839, at Rutherford, N.C.
- Did you volunteer in the Confederate Army, or in the Georgia Militia? Volunteered.
- When and where did you enlist? July 1864, at New Market, Va.
- In what company and regiment did you enlist? Co. D, 11th Regt. Ga. Vol.
- How long did you remain in that company and regiment? Until close of the war.
- 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? Nearly four years.

10. When, where and under what circumstances were you discharged from service? I was discharged from service at Point Lookout, Md. in June 1865. (the 23rd day of June). I was captured.

11. What is your present occupation? Farming.

12. How much can you earn per annum by your own exertions or labor? About \$300

13. What has been your occupation since 1865? Had farms & farming.

14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? About \$135, or I can contribute \$30

15. What is your present physical condition and how long have you been in such condition? Rheumatism in my legs, and I suffer from pains in my head caused by the explosion of a shell in the Battle of the Wilderness in Virginia. Have been bad for five 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"? Infirmary & poverty.

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? I have suffered from effects of the shell in my head since I was down. Have had Rheumatism bad in my legs for about five years. My age 65 yrs 8 m.

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

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

20. In what County did you reside during those years and what property did you then return for taxation? Barlow County, Ga. None.

21. How were you supported during the years 1893 and 1894? By my own means. I did a little light work.

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 think about \$175

23. What was your employment during 1893 and 1894? What pay did you receive in each year? I did what I could in the farm & suppose I made about 140 of a hand.

24. Are you married and have you a family? If so, your wife living and how many children have you? Give age and sex of children and their means of support. Have a wife, and one daughter and two sons. Aged respectively 11, 7 and 5 years. By their labor.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

I, W. H. Hendricks, Ordinary in and for said County, hereby certify that the applicant Benjamin O. Shelly resides in said County, and was a bona fide resident of this State on the first day of January, 1884, and that the witnesses, viz: L. M. Faudan

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

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

I further certify that the tax digests of Barlow County show that applicant returned for taxation in his name in 1893, _____ dollars of property, and in 1894, _____ dollars of property.

Witness my hand and seal of office this 20 day of May 1895.

W. H. Hendricks Ordinary
of Barlow County.

NOTE.

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

males in my legs, and I suffer from pains in my head caused by the explosion of a shell in Battle of the Wilderness in Virginia. Have been blind for five 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"? Infirmary and poverty

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmary and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? I have suffered from effects of the effect of an explosion of a shell ever since it was done. Have had Rheumatism bad in my legs for about five years. My age 65 years

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

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

20. In what County did you reside during those years and what property did you then return for taxation? Barlow County, Ga None

21. How were you supported during the years 1893 and 1894? By my own means

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 think about \$175

23. What was your employment during 1893 and 1894? What pay did you receive in each year? I did what I could on the farm. I suppose I made about \$100 a year.

24. Are you married and have you a family? If so, your wife living and how many children have you? Give age and sex of children and their means of support. Have a wife and one daughter and two sons. Aged respectively 14, 7 and 5 years. By their labor

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, B. O. Shelly, hereby authorize G. W. Hendricks of Cartersville Ga

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

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

B. O. Shelly [L. S.]

Executed in presence of G. W. Hendricks
Gabe Hendricks

POWER OF ATTORNEY.

State of Georgia,

Barlow County.

I, B. O. Shelly, hereby authorize G. W. Hendricks of Cartersville Ga

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14th day of January 1897.

B. O. Shelly [L. S.]

Executed in presence of G. W. Hendricks
Gabe Hendricks

Shelly, B. O.
Barlow Co.
(For Those Already Enrolled)

No. 1718

INDIGENT
Soldier's Pension.

1897.

Name B. O. Shelly
County Barlow

1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
G. W. Hendricks

W. H. Hendricks, State Printer, Atlanta

No data

Shelly, B. O.
Barlow Co.
(For Those Already Enrolled)

No. 2303

INDIGENT
SOLDIER'S PENSION.

1898.

Name B. O. Shelly
County Barlow

1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
G. W. Hendricks

W. H. Hendricks, State Printer, Atlanta

No data

Shelly, B.O.
Barlow Co.
(For Those Already Enrolled)
No. 1718
INDIGENT
Soldier's Pension.
1897.
Name B.O. Shelly
County Barlow
1897.
2/2
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDLED TO
By J.H.
No data

Shelly, B.O.
Barlow Co.
(For Those Already Enrolled)
No. 2303
INDIGENT
SOLDIER'S PENSION,
1898.
Name B.O. Shelly
County Barlow
WARRANT ISSUED
1/21
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDLED TO
By J.H.
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears B.O. Shelly 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 time he was 10 years old; that he is 67 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company D, of 14th Regiment of Georgia Infantry; that his physical condition is as follows: Has rheumatism and also suffers from effects of an explosion in the battle of the Wilderness; 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, the 15th day of Jan'y, 1897, by B.O. Shelly, his mark
G.W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, G.W. Hendricks, Ordinary of said County, do certify that I am well acquainted with B.O. Shelly, 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 Jan'y, 1897.
G.W. Hendricks
Ordinary Barlow County.

Note.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears B.O. Shelly 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 time he was eight years old; that he is 68 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company D, of 14th Regiment of Georgia Infantry; that his physical condition is as follows: Suffers from wound in head and from rheumatism in both legs; that his property consists of the following items none

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

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

Sworn to and subscribed before me, this, the 6th day of Jan'y, 1898, by B.O. Shelly, his mark
G.W. Hendricks Ordinary.

State of Georgia,

Barlow County.

I, G.W. Hendricks, Ordinary of said County, do certify that I am well acquainted with B.O. Shelly, 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'y, 1898.
G.W. Hendricks
Ordinary Barlow County.

Note.—The blank spaces 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 6th day of January, 1897. } B. O. Shelley his mark
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. O. Shelley 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 spaces 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 6th day of January, 1898. } B. O. Shelley his mark
G. W. Hendricks Ordinary.

State of Georgia,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. O. Shelley 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 January, 1898. G. W. Hendricks
Ordinary Barlow County.



NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, B. O. Shelley hereby authorize G. W. Hendricks of Barlowville Ga to receive and receipt for the pension allowed, and request that he remit same to me at Barlowville Ga by check.

Witness my hand and seal this 6th day of January, 1899.

Executed in presence of } B. O. Shelley (L. S.)
W. T. Baykin his mark

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, B. O. Shelley hereby authorize G. W. Hendricks of Barlowville Ga to receive and receipt for the pension allowed, and request that he remit same to me at Barlowville Ga by check.

Witness my hand and seal, this 6th day of January, 1900.

Executed in presence of } B. O. Shelley (L. S.)
J. A. Anderson his mark

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 3548

INDIGENT

SOLDIER'S PENSION,
1899.

Name B. O. Shelley
County Barlow

WARRANT ISSUED

1/30 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO

J. W. Hendrix

Geo. W. Harrison, State Printer, Atlanta.

No date

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 2152

INDIGENT

SOLDIER'S PENSION,
1900.

Name B. O. Shelley
County Barlow

WARRANT ISSUED

January 25 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

J. W. Hendrix

Geo. W. Harrison, State Printer, Atlanta.

No date

CODE REG. 1284.
 (For Those Already Enrolled.)
 No. 3548
INDIGENT
SOLDIER'S PENSION,
1899.
 Name B. O. Shelly
 County Bartow
 WARRANT ISSUED
1/30 1899
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDED TO
W. H. Hendrix
 Gen. W. Harrison, State Printer, Atlanta.
No date

CODE REG. 1284.
 (For Those Already Enrolled.)
 No. 2152
INDIGENT
SOLDIER'S PENSION,
1900.
 Name B. O. Shelly
 County Bartow
 WARRANT ISSUED
January 25 1900.
 JOHN. W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
W. H. Hendrix
 Gen. W. Harrison, State Printer, Atlanta.
No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Bartow County,
 Personally appears B. O. Shelly 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 1837; that he is 69 years old and
 by occupation a farmer; that he enlisted in the military service of the Confed-
 erate States (or of the State of) during the war between the States,
 and served for the term of 4 yrs in Company 8, of 14 th Regiment of
Go army; that his physical condition is as
 follows: Bad. Has rheumatism. cannot
in head hurting him badly
 that his property consists of the following items:

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

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

Sworn to and subscribed before me, this, the 6 day of Jan 1899.
W. H. Hendrix Ordinary. B. O. Shelly mark

State of Georgia,
Bartow County,
 I, W. H. Hendrix Ordinary of said County,
 do certify that I am well acquainted with B. O. Shelly 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 January 1899.
W. H. Hendrix
 Ordinary Bartow County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Bartow County,
 Personally appears B. O. Shelly 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 October 1837; that he is 70 years old and
 by occupation a farmer; that he enlisted in the military service of the Confed-
 erate States (or of the State of) during the war between the States,
 and served for the term of 4 yrs in Company 8, of 14 th Regiment of
Go vol; that his physical condition is as
 follows: Unable to do any labor whatever on
account of two wounds on
arm and from rheu-
matism
 that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th,
 1894, and the Acts amendatory thereof, and makes application for the pension to which he
 is entitled for the year 1900. I have heretofore as a resident of Bartow
 county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the 6 day of Jan 1900.
W. H. Hendrix Ordinary. B. O. Shelly mark

State of Georgia,
Bartow County,
 I, W. H. Hendrix Ordinary of said County,
 do certify that I am well acquainted with B. O. Shelly 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 January 1900.
W. H. Hendrix
 Ordinary Bartow County.

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

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

Sworn to and subscribed before me, this, the 6th day of January, 1899, } B. O. Shelly his mark
G. W. Hendricks Ordinary.

State of Georgia,
Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. O. Shelly 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 January, 1899.
G. W. Hendricks
Ordinary Barlow County.

NOTE.—The blank spaces must be filled.
NOTE.—A affidavit should not be attested before January 1st, 1899.

that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Barlow county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the 6th day of January, 1900, } B. O. Shelly his mark
G. W. Hendricks Ordinary.

State of Georgia,
Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. O. Shelly 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 January, 1900.
G. W. Hendricks
Ordinary Barlow County.

NOTE.—The blank spaces must be filled.
NOTE.—A affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, B. O. Shelly hereby authorize George W. Hendricks of Barlowville Ga to receive and receipt for the pension allowed and request that he remit same to me at Barlowville Ga by check

Witness my hand and seal, this 5th day of January, 1901.
B. O. Shelly [L. S.]
mark

Executed in presence of
L. B. Smith
deft

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, B. O. Shelly hereby authorize G. W. Hendricks of Barlowville Ga to receive and receipt for the pension allowed and request that he remit same to me at Barlowville Ga by check

Witness my hand and seal, this 8th day of January, 1902.
B. O. Shelly [L. S.]
mark

Executed in presence of
L. B. Smith

(For Those Already Enrolled.)

INDIGENT

SOLDIER'S PENSION.

1901.

Name B. O. Shelly
County Barlow

WARRANT ISSUED

1/29 1901

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Hendricks
JOHN W. HARRISON, State Printer, ALBANY.

no date

(FOR THOSE ALREADY ENROLLED.)

INDIGENT

SOLDIER'S PENSION

1902.

Name B. O. Shelly
County Barlow
Co. 14 Regiment 14
Ga Vol

WARRANT ISSUED

1/31 1902

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

Ordg.
JOHN W. HARRISON, State Printer, ALBANY.

no date

Shelly, B.O.
Barton County

COUS SECTION THE
(For Those Already Enrolled.)

No. 1285

**INDIGENT
SOLDIER'S PENSION.
1901.**

Name B.O. Shelly
County Barton

WARRANT ISSUED
129.

1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Shelly

JOHN W. LINDSEY,
Commissioner of Pensions.

W. W. Harrison, State Printer, Atlanta

No date

Shelly, B.O.
Barton County

COUS SECTION THE
(For Those Already Enrolled.)

No. 3205

**INDIGENT
SOLDIER'S PENSION
1902.**

Name B.O. Shelly
County Barton
Co. 14 Regiment 14
4th Inf

WARRANT ISSUED
131.

1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ord

JOHN W. LINDSEY,
Commissioner of Pensions.

W. W. Harrison, State Printer, Atlanta

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Barton County.

Personally appears B.O. Shelly of Barton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Fall 1887; that he is 72 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States and served for the term of 4 yrs. in Company D, of 14th Regiment of Georgia Vol. Inf.; that his physical condition is as follows: Rheumatism heart disease and
trouble from his wound in the
head

that his property consists of the following items

23

of the value of 23 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Barton county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this 24 day of Jan 1901. B.O. Shelly
G.W. Hendricks Ordinary.

STATE OF GEORGIA,
Barton County.

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

Given under my official signature and seal, this 24 day of Jan 1901. G.W. Hendricks
G.W. Hendricks Ordinary Barton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Barton County.

Personally appears B.O. Shelly of Barton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Fall 1887; that he is 72 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs. in Company D, of 14th Regiment of Georgia Vol. Inf.; that his physical condition is as follows: Totally broken down in health.
Has Rheumatism very bad

that his property consists of the following items

✓

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

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

Sworn to and subscribed before me, this 8 day of Jan 1902. B.O. Shelly
G.W. Hendricks Ordinary. mark

STATE OF GEORGIA,
Barton County.

I, G.W. Hendricks Ordinary of said County, do certify that I am well acquainted with B.O. Shelly 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 8 day of Jan 1902. G.W. Hendricks
G.W. Hendricks Ordinary Barton County.

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Bartow county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 24 day of Jan'y 1901. B. O. Shelly his mark
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Bartow County.

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

Given under my official signature and seal, this 24 day of Jan'y 1901. G. W. Hendricks Ordinary Bartow County.

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

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 the 8 day of Jan'y 1902. B. O. Shelly his mark
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Bartow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. O. Shelly 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 8 day of Jan'y 1902. G. W. Hendricks Ordinary Bartow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.

I, B. O. Shelly hereby authorize George W. Hendricks of Bartowville Ga to receive and receipt for the pension allowed and request that he remit same to 1 Mr at Bartowville Ga by Chick

Witness my hand and seal, this 7 day of January 1903. B. O. Shelly [L. S.]
mark

Executed in presence of

Geo S Cobb
NP & JP

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County.

I, B. O. Shelly hereby authorize George W. Hendricks of Bartowville Ga to receive and receipt for the pension allowed and request that he remit same to CH at Bartowville Ga by CH

Witness my hand and seal, this 18 day of Jan 1904. B. O. Shelly [L. S.]
mark

Executed in presence of

J. W. Hendricks
Bartowville Ga

Shelly, B. O.
Bartow, Ga.
CODE SECTION 1284.
(FOR THOSE ALREADY ENROLLED.)

No. 8709

INDIGENT
SOLDIER'S PENSION
1903.

Name B. O. Shelly
County Bartow
Co. D Regiment 14
G. W. Hendricks
WARRANT ISSUED

24 1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Hendricks, State Prison, Atlanta.

we both

Shelly, B. O.
Bartow, Ga.
CODE SECTION 1284.
(FOR THOSE ALREADY ENROLLED.)

No. 8709

INDIGENT
SOLDIER'S PENSION
1904.

Name B. O. Shelly
County Bartow
Co. D Regiment 14
G. W. Hendricks
WARRANT ISSUED

24 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Hendricks, State Prison, Atlanta.

Shelly, B. O.
Barlow County
 CODE SECTION 124.
 (FOR THOSE ALREADY ENROLLED.)
 No. *8309*
 INDIGENT
SOLDIER'S PENSION
1903.
 Name *B. O. Shelly*
 County *Barlow*
 Co. *D* Regiment *14*
Ga. Vols. Inf.
 WARRANT ISSUED
 1903.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
O
 Gen. Hartman, State Prison, Atlanta.

no cash

Shelly, B. O.
Barlow County
 CODE SECTION 124.
 (FOR THOSE ALREADY ENROLLED.)
 No. *8309*
 INDIGENT
SOLDIER'S PENSION
1904.
 Name *B. O. Shelly*
 County *Barlow*
 Co. *D* Regiment *14*
Ga. Vols.
 WARRANT ISSUED
 1904.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
W. H. H.
 Gen. W. Hartman, State Prison, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *B. O. Shelly* 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 *fall* 18*37*; that he is *73* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of *4 yrs* in Company *D*, of *14*th Regiment of *Ga. Vols. Inf.*; that his physical condition is as follows: *broken down and disabled from old age and rheumatism*

that his property consists of the following items:

of the value of *5* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the *19* day of *Jan* 1903. *B. O. x Shelly* mark
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *B. O. Shelly* 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* 1903. *G. W. Hendricks*
 Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.
 NOTE.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *B. O. Shelly* 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 *fall* 18*38*; that he is *74* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of *4 yrs* in Company *D*, of *14*th Regiment of *Ga. Vols. Inf.*; that his physical condition is as follows: *broken down and disabled from old age and rheumatism*

that his property consists of the following items:

of the value of *5* Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the *18* day of *Jan* 1904. *B. O. x Shelly* mark
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *B. O. Shelly* 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 *18th* day of *Jan* 1904. *G. W. Hendricks*
 Ordinary *Barlow* County.

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

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

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

Sworn to and subscribed before me, this the 17 day of Jan 1903. G. W. Hendricks Ordinary.

B. O. Shelly his mark

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with B. O. Shelly 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 17 day of Jan 1903.

G. W. Hendricks Ordinary Barlow County.

Note.—The blank spaces 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 1904. I have heretofore as a resident of Barlow County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 18 day of Jan 1904. G. W. Hendricks Ordinary.

B. O. Shelly his mark

STATE OF GEORGIA,

Barlow County.

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

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

G. W. Hendricks Ordinary Barlow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

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

WITNESS my hand and seal, this 17 day of Jan 1905.

Executed in the presence of

B. O. Shelly [L. S.] mark

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

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

WITNESS my hand and seal, this 18 day of Jan 1905.

Executed in the presence of

W. C. Wacton

W. C. Wacton

Shelly, B. O.
Barlow County

(FOR THOSE ALREADY ENROLLED.)

CO. 3281

INDIGENT

SOLDIER'S PENSION

1905.

Name B. O. Shelly

County Barlow

Co. D Regiment 114

WARRANT ISSUED

FEB 7 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

U. S. W. HARRISON, WASHINGTON, D. C. U. S. W. HARRISON, ATLANTA.

no date

Shelly, B. O.
Barlow Co.

(FOR THOSE ALREADY ENROLLED.)

No. 21841

INDIGENT

SOLDIER'S PENSION

1906.

Name B. O. Shelly

County Barlow

Co. D Regiment 114

WARRANT ISSUED

JAN 29 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

U. S. W. HARRISON, WASHINGTON, D. C. U. S. W. HARRISON, ATLANTA.

Shelley, B. O.
Barlow County

CONS. SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. *3281*

INDIGENT
SOLDIER'S PENSION
1905.

Name *B. O. Shelley*
County *Barlow*
Co. *14* Regiment *14*

WARRANT ISSUED
FEB 7 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT FORWARDED TO

U.S. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

Shelley, B. O.
Barlow Co.

CONS. SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. *2184*

INDIGENT
SOLDIER'S PENSION
1906.

Name *B. O. Shelley*
County *Barlow*
Co. *14* Regiment *14*

WARRANT ISSUED
JAN 29 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT FORWARDED TO

U.S. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *B. O. Shelley* 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 *18th* day of *Jan* 18*82*; 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 *1 year* in Company *D*, of *14th* Regiment of *Georgia*; that his physical condition is as follows: *very feeble, general debility, and old age, nearly blind*

that his property consists of the following items:

of the value of *nothing* Dollars. I am now earning, by my labor, *nothing* 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 *Barlow* County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the *11th* day of *Jan* 1905. *B. O. Shelley* mark
Geo. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County.

I, *Geo. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *B. O. Shelley* 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* 1905.

Geo. W. Hendricks
Ordinary *Barlow* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Barlow County.

Personally appears *B. O. Shelley* 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 *18th* day of *Jan* 18*82*; 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 *1 year* in Company *D*, of *14th* Regiment of *Georgia*; that his physical condition is as follows: *Old, physically quite infirm*

that his property consists of the following items:

of the value of *nothing* Dollars. I am now earning by my labor, *nothing* 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 *11th* day of *Jan* 1906. *B. O. Shelley* mark
Geo. W. Hendricks Ordinary.

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this *10th* day of *Jan* 1906.

Geo. W. Hendricks
Ordinary *Barlow* County.

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

by my labor, \$11.00 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.

Dependent 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 Barlow County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 11th day of Jan 1905. } B. O. Shelly his mark
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Barlow County, }
I, G. W. Hendricks Ordinary of said County,
do certify that I am well acquainted with B. O. Shelly
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 1905.

G. W. Hendricks
Ordinary Barlow County.

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

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.

Dependent 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 18th day of Jan 1906. } B. O. Shelly his mark
G. W. Hendricks Ordinary.

State of Georgia,

Barlow County, }
I, G. W. Hendricks Ordinary of said County,
do certify that I am well acquainted with B. O. Shelly
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 10 day of Jan 1906.

G. W. Hendricks
Ordinary Barlow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County, }
I, B. O. Shelly, hereby authorize
G. W. Hendricks of Barlow County, Ga.
to receive and receipt for the pension allowed, and request that he remit same to
myself at Barlow Ga.
by OK

WITNESS my hand and seal, this 8th day of Jan 1907.
B. O. Shelly [L. S.]
mark

Executed in presence of

<u>Shelly, B. O.</u> <u>Barlow Ga.</u>	Check Return 124. (FOR THOSE ALREADY ENROLLED) No. <u>3857</u>	INDIGENT SOLDIER'S PENSION 1907.	Name <u>B. O. Shelly</u> County <u>Barlow</u> Co. <u>5</u> Regiment <u>114</u>	WARRANT ISSUED FEB 4 1907. JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO	CHAS. W. BLANDIN, 2109 PERMAN, ATLANTA.
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no date

Shelly, B. O.
Barton County
 Once Received 1904.
 (FOR THOSE ALREADY ENROLLED)
 No. *3857*
 INDIGENT
 SOLDIER'S PENSION
 1907.
 Name *B. O. Shelly*
 County *Barton*
 Co. *D* Regiment *14*
 WARRANT ISSUED
 FEB 4 1907.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
no date
 One W. Washington, State Prison, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Barton County.
 Personally appears *B. O. Shelly* of *Barton*
 County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
 and resident of said County and State, and has resided in said State continuously ever
 since the day of *1876*; that he is *77* years old
 and by occupation *farmer*, that he enlisted in the military service of the Con-
 federate States of the State of *Georgia* during the war between the
 States, and served for the term of *4 yrs* in Company *D*, of *14*th Regiment
 of *2nd Vol Inf*; that his physical condition is as
 follows: *He is about played out entirely*

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,
 1904, and the Acts amendatory thereof, and makes application for the pension to which he
 is entitled for the year 1907. I have heretofore, as a resident of *Barton*
 County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the *8th* day of *Jan*, 1907, by *B. O. Shelly*
G. W. Hindricks Ordinary. *mark*

State of Georgia,

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

Given under my official signature and seal this *8th*
 day of *Jan*, 1907, by *G. W. Hindricks*
 Ordinary *Barton* County.



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

follows: He is now played out entirely

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 the 8th day of Jan, 1907. } B. O. Shelley
G. W. Nindrick Ordinary. mark

State of Georgia,

Barlow County.

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

Given under my official signature and seal this 8th
day of Jan, 1907.
G. W. Nindrick
Ordinary Barlow County.



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

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Bartow COUNTY,

I, Wm. L. Lindsey Ordinary of said County, do certify that I know Mrs. A. A. Shelton the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 1st day of January 1861 and ever since.

That I also know J. A. White witness to the marriage, and I also know

before signing the respective affidavits, and that they are truthful and trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal this 10th day of Oct. 1921.

(SEAL) Wm. L. Lindsey Ordinary, Bartow County.

NOTES: 1. Before any questions are answered the Ordinary shall answer applicant and the witness in the following order:
2. You shall give will be the fact that you will answer make to each of the questions asked you and the witness.
3. Additional affidavits may be attached if such persons are insufficient.
4. Only widows who married prior to first January 1861 are eligible.
5. Reproduction of copies of marriage license if obtainable. If not, prove marriage by some person, or by general service—because to make no proof of service and when not required to do so.

No.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

County Bartow
Name Mrs. A. A. Shelton
Widow of Wm. L. Shelton
Company G
Regiment 2nd Iowa vol
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Hyatt Printing Co., State Printers, Atlanta.

10/18-1921

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10/18-1921

Ordinary of said County, do certify that I
know Mrs. Ruth A. Shelton the applicant for this pension, and that she is the
contingent resident of said County and was
born on the 18th day of January 1861 and over 60 years of age.
That I also know J. P. White witness as to marriage, and I also know
that both of the foregoing were duly sworn by me
before signing the respective affidavits, and that they are truthful and trustworthy and their statements
are entitled to full faith and credit.
Sworn under my hand and official seal of office this 10th day of Oct 1921
J. W. Lindsey Ordinary.
Bartow County.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Bartow COUNTY.

I, J. W. Lindsey Ordinary of said County, do certify that I
know Mrs. Ruth A. Shelton the applicant for this pension, and that she is the
person she represents herself to be, and that she is a bona fide contingent resident of said County and was
on the 18th day of January 1861 and over 60 years of age.
That I also know J. P. White witness as to marriage, and I also know
that both of the foregoing were duly sworn by me
before signing the respective affidavits, and that they are truthful and trustworthy and their statements
are entitled to full faith and credit.

Sworn under my hand and official seal of office this 10th day of Oct 1921

(SEAL)

J. W. Lindsey 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 spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1881, are entitled.
5. Affirm, verified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's
service because he made no proof of service and was not required to do so.

3/10/21
J. P. White
Ordinary of said County

No.

Widow's Application

To Be Put on Roll as War Orphan Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910.
As Amended by Act of 1919.

County Bartow
Name Mrs. Ruth A. Shelton
Widow of Wm. J. Shelton
Company "G"
Regiment 22d Inf. Regt.
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10/18-1921

13th Regt. Inf. Cal.
of Bartow County
Feb 20 1921

No. _____

Widow's Application
To Be Put on Roll in her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910.
As Amended by Act of 1919.

County Bartow
Name Mrs. Ruth A. Shelton
Widow of Wm. T. Shelton
Company G
Regiment 9th
Approved _____

J. W. LANDSEY,
Commissioner of Pensions,
Bryd Printing Co., Room 200, Atlanta.

10/15-1921

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Bartow COUNTY.

Personally before me comes Mrs. Ruth A. Shelton of said County, who, after being duly sworn, says that she is the widow of Wm. T. Shelton to whom, in the County of Barlow State of Ga she was married on the 7th day of Feb. 1878, and that she remained his wife, and resided with him to the date of his death in April 1891, and that she has not since his death remarried. At the time of his death he was a resident of Bartow County, in said State of Georgia, and he was on the Service Pension Roll of the State and held a pension of \$1.05 in Bartow County for 182 per annum, on account of being a soldier in Company G Regiment 9th (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Bartow and she has so continuously resided since 1st day of January 1881

Sworn to and subscribed before me, this the

10th day of Oct 1921
Gustav Morison Ordinary
of Bartow County.

(SEAL)

Mrs. Ruth A. Shelton

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

STATE OF GEORGIA,

Bartow COUNTY.

Personally before me comes J. A. White known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Ruth A. Shelton who made the foregoing affidavit, is the lawful widow of Wm. T. Shelton who died in Bartow County in said State of Ga on 16th day of April 1921, and that she has not since remarried. That she became the wife of Wm. T. Shelton on the 7th day of Feb 1878, and that she and he had resided together as man and wife continuously since 7th day of April 1881, and that the Wm. T. Shelton was the same man who was on the pension roll of said State from Bartow County Georgia when he died.

Sworn to and subscribed before me, this the

10th day of Oct 1921
Gustav Morison Ordinary
of Bartow County.

(SEAL)

J. A. White

Company 9 Regiment 2nd (Volunteers of State Militia)
That she is now a bona fide resident citizen of said County of Barlow and she
has so continuously resided since 1st day of January 1881
Sworn to and subscribed before me, this the
1st day of Oct 1921
Gustav Norrby Ordinary Mrs. Ruth A. Shelton
of Barlow County.
(SEAL)

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

STATE OF GEORGIA
Barlow COUNTY.
Personally before me comes J. A. White known to be
responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
of their own personal knowledge Ruth A. Shelton, who made the foregoing
affidavit, is the lawful widow of Wm. I. Shelton who died in Barlow
County in said State of Ga on 16th day of April 1921,
and that she has not since remarried. That she became the wife of Wm. I. Shelton on
the 7th day of Feb 1878, and that she and he had resided together as man and
wife continuously since 7th day of April 1878, and that the Wm. I. Shelton was
the same man who was on the pension roll of said State from Barlow
County Georgia when he died.
Sworn to and subscribed before me, this the
1st day of Oct 1921
Gustav Norrby Ordinary J. A. White
of Barlow County.
(SEAL)

Shelton, William J.
Bartow Co.
1861913

No. ☒

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County Bartow
Name W. J. Shelton
Company G. 2nd Tenn
Regiment 9th Tenn Regt

Approved

E. 1957 J. W. LINDSEY,
Commissioner of Prisons
CHAS. F. BYRNE, State Printer, Atlanta.

10/30/1912

ENTERED POSTER OFFICE

Name W. J. Shelton
 Company G. 2nd Tenn
 Regiment 9th Tenn Reg

Approved _____
E. J. Lindsey
 J. W. LINDSEY,
 Commissioner of Prisons
 CHAS. E. BYRNE, State Printer, Atlanta.
 10/30/1912
 ENTERED DOCKET OFFICE

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Barlow County.
Wm. J. Shelton 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).
Wm. J. Shelton, White, Barlow County, Ga.
2. How long and since when have you been a continuous resident citizen of this State?
Have lived in Ga. since March 12 1870.
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
In the Army of the Confederate States
4. When and where, and in what Company and Regiment did you enlist? (Give the grade and class of Service).
Aug 21 1864, Barlow Co. Tenn. Co. G. 2nd Tenn Reg.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
April 26 1865, Barlow Co. Tenn.
6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 26 1865, near Murfreesboro, T. C.
7. Were you actually present with your Command when it was surrendered or discharged?
Yes
8. If you were not actually present, state specifically and clearly where you were.
I was present at Murfreesboro
9. Where was your Command when you left it?
Near Murfreesboro
10. When did you leave the Command?
April 26 1865, Murfreesboro
11. For what cause did you leave?
War was closed
12. By whose authority did you leave?
Murfreesboro and paroled
13. For how long was your leave granted? In what way?
1 year
14. Why did you not return to your Command after leave expired?
War was closed
15. In what way were you prevented?
War was closed
16. What effort did you make to return?
1
17. Were you captured during the war?
No
18. If so, when, and where? In what prison were you held and when were you released?
No
19. What property of every description was owned, in the use, possession and control of yourself and wife on the 4 Nov. 1908? (Make list by items and value).
16 Acs of Land, Unimproved, Value \$200.00, Farm and Household Goods \$100.00
20. 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?
Have not disposed of any
21. 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).
16 Acs of Land, Unimproved, Value \$200.00, Farm and Household Goods \$100.00
22. What annual or monthly income or earnings of yourself and wife and the source derived have you?
Mr. Reg. a small boarding house for a living
23. Are you drawing a pension of any amount from this State or the United States?
No
24. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
Have not

Sworn to and subscribed before me, this the 29th day of Aug, 1912,
J. W. Lindsey Ordinary,
 of Barlow County.

Confederate
 Soldier's Application
 UNDER ACT 1910.
 County Barlow
 Name W. J. Shelton
 Company G. 2nd Tenn
 Regiment 9th Tenn Reg
 Approved _____
E. J. Lindsey
 J. W. LINDSEY,
 Commissioner of Prisons
 CHAS. E. BYRNE, State Printer, Atlanta.
 10/30/1912
 ENTERED DOCKET OFFICE

Sworn to and subscribed before me, this 29th day of Aug 1912 } W. J. Shelton
G. W. Anderson }
Ordinary,
of Boston County.

Samuel County, P. M. Bond of A. White who on oath
Personally before me comes W. L. Shelton
says that they are free holders residing in said County and we know W. L. Shelton
the applicant for pennance and we know the property that is now in the possession and control of himself
and the said estate cash value of one hundred and thirty dollars (Make list of items and value). One horse
and four white cows Barber County, Mo.
one vacant lot in Barber Co. Mo.
about one acre all worth forty

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

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

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

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

15. Was applicant captured as a prisoner _____ If so, when and where? _____ In what prison was he held? _____ and when released? _____

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

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 Free holders unnecessary.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

County. Barrow
Personally before me comes P. W. Blank & J. A. White who on oath says that they are free holders residing in said County and we know W. T. Shelton the applicant for pension and we know the property that is now in the use, possession and control of himself and the cash value of said property (list the items and value) One house and lot on White St. Barrow County Ga. and one vacant lot on the same street in Barrow County Ga. South side of the street.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

STATE OF TENNESSEE
MONROE COUNTY.

AFFIDAVIT.

I, J. C. Warren, am sixty-nine years old and am a citizen of Monroe County, Tennessee. I was a Confederate Soldier, a member of Company G, 2nd Tennessee Cav., Regt., Ashby's Brig, Humes Div., Wheelers Corps, Army of Tennessee, C. S. A.

I remember William Shelton, he belonged to the same regiment and was considered a good soldier. A short time before General Wheeler made his last raid into Tennessee, in July or August 1864, I was sent into Tennessee by orders of General Wheeler on a secret scout and rejoined my command at Gadsden Alabama, just after the raid in October 1864. I remember that William Shelton was with the regiment at that time, October 1864, and I was informed at the time that he had joined the regiment when it had passed through Monroe or Blount Counties in Tennessee, which would have been in August 1864 and that report or understanding that I learned at the time about his having joined the regiment when it passed through this county, Monroe, or Blount County, the adjoining county, I feel sure is correct as that would have been his only chance to have joined.

I remember seeing him with the command a short time before the surrender in April 1865. I am satisfied that he stayed with the company until the surrender of Johnson's army.

Sworn to and subscribed before me,
This October 28, 1912.

J. C. Warren
Notary Public.

STATE OF GEORGIA,
GORDON COUNTY.

TO ANY MINISTER OF THE GOSPEL, JUDGE OR
JUSTICE OF THE PEACE TO CELEBRATE:

You are hereby authorized to join in the Honorable State of Matrimony, W. T. Shelton and Miss R. A. Spencer according to the rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State, and for so doing this shall be your sufficient license.

Given under my hand and seal, this 7th, day of February, 1878.

J. N. AIKER, Clerk
(SEAL) C. Ordinary.

I hereby certify that W. T. Shelton and Miss R. A. Spencer were joined together in Holy Bands of Matrimony on the 7th, day of February, 1878, by me.

W. A. NIX, M. G.

GORDON COUNTY, GEORGIA.

I, W. R. Rankin, Ordinary and ex officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of the Marriage Record of W. T. Shelton and Miss R. A. Spencer with the original record thereof now remaining in this office and recorded in Book "A" Marriage Record, Gordon County, Ga., Page 454, and that the same is a true and correct transcript of said record and of the whole of it.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 30th, day of April, 1921.

W. R. Rankin
Ordinary Gordon County, Georgia.

regiment at that time, October 1864, and I was informed at the time that he had joined the regiment when it had passed through Monroe or Blount Counties in Tennessee, which would have been in August 1864 and that report or understanding that I learned at the time about his having joined the regiment when it passed through this county, Monroe, or Blount County, the adjoining county, I feel sure is correct as that would have been his only chance to have joined.

I remember seeing him with the command a short time before the surrender in April 1865. I am satisfied that he stayed with the company until the surrender of Johnson's army.

Sworn to and subscribed before me,

This October 28, 1912.

Sam H. Young, Jr.
Notary Public.

J. C. Warren

W. A. NIX, M. G.

GORDON COUNTY, GEORGIA.

I, W. R. Rankin, Ordinary and ex officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of the Marriage Record of W. T. Shelton and Miss R. A. Spencer with the original record thereof now remaining in this office and recorded in Book "A" Marriage Record, Gordon County, Ga., Page 454, and that the same is a true and correct transcript of said record and of the whole of it.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 30th, day of April, 1921.

W. R. Rankin
Ordinary Gordon County, Georgia.

GEORGIA, Barlow County.

I, Wm. R. Rankin, Ordinary of said county, do certify that I personally know Mrs. R. A. Shelton, the applicant, and that she is the lawful widow of W. T. Shelton, and was on the Barlow 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 16th day of April, 1921, there was due to him and unpaid his Pension of \$136.94 Dollars from the State of Georgia, and I know J. A. Ingram, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 4 day of May, 1921
Wm. R. Rankin, Ordinary,
Barlow County.

Shelton, W. T.
Barlow Co.
1921

No. 1921

Application for Pension Due
Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

BY

Mrs. R. A. Shelton
Widow of W. T. Shelton
of Barlow County
Co. Regt. 802

County

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GEORGIA, County.

I hereby authorize and constitute..... of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 191..., through my deceased husband,, who was on..... Pension Roll and paid from..... for 19.....

Witness my hand this..... day of..... 19.....

Attested before me:

.....

Shelton, W. I.
Barlow Co
1921

No. 1921

Application for Pension Due
Deceased Soldier
UNDER ACT 1891

To be paid to the Widow or Dependent Children

BY
Mrs. R. A. Shelton
Widow of W. I. Shelton
of Barlow County
Regt. 8th
Approved and paid
for 1921 Sept. 17th 1921

J. W. LINTSEY,
Commissioner of Pensions.

Barlow
per W. I. H.
April 16, 1921

GEORGIA, County.

I hereby authorize and constitute of said county, my
lawful attorney to collect and receipt for me in my name the Pension due me for 191..., through my
deceased husband, who was on
Pension Roll and paid from for 19....

Witness my hand this day of 19....

Attested before me:

Application for Pension Due Deceased Soldier

To be paid to his widow or dependent children.
UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Barlow County.

Personally before me comes Mrs. R. A. Shelton of said county,
after being duly sworn, on oath says that she is the widow of W. I. Shelton
who was duly enrolled as a Servicer Confederate Pensioner from the county
of Barlow and was paid a Pension of One hundred
Dollars from Barlow county for 1920, and that the said
W. I. Shelton died in Barlow county on
the 16 day of April, 1921, and at the time of his death a Pension of 2.15
was due him from Barlow county and unpaid for 1921
Applicant further swears that she married the said W. I. Shelton on
the 23 day of Feb., 1878, in Gordon county and
State of Ga. and resided with him from the date of marriage to his death
as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be
paid to her.

Sworn to and subscribed before me this 14 day of May, 1921
G. W. Hindman, Ordinary. | Mrs. R. A. Shelton (L. S.)
Barlow County.

AFFIDAVIT OF WITNESS.

GEORGIA, Barlow County.

Personally before me comes J. A. Ingram, who
on oath says that he knew W. I. Shelton while in life
and that he knows this widow Mrs. R. A. Shelton
from the marriage of W. I. Shelton
the above applicant; that he knows that the said W. I. Shelton
and Mrs. R. A. Shelton were in due form of law married in the county
of Gordon in the State of Ga. on
the 24 day of Feb., 1878, and that they resided together
as husband and wife from date of marriage to the day of his death on the 16 day
of April, 1921, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 14 day of May, 1921
G. W. Hindman, Ordinary. | J. A. Ingram
Barlow County.

Note 1st—This form can be used by guardian or minor children where there is no widow.
2d—Ordinary must read in all cases certified copy of marriage license attached.

Dollars from Barlow county for 1920, and that the said W. T. Shelton died in Barlow county on the 16 day of April, 1921, and at the time of his death a Pension of 2.15 was due him from Barlow county and unpaid for 1921. Applicant further swears that she married the said W. T. Shelton on the 24 day of Feb, 1878, in Gordon county and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 4th day of May, 1921
G. W. Anderson, Ordinary. Mrs. R. A. Shelton (L. S.)
Barlow County.

AFFIDAVIT OF WITNESS.

GEORGIA, Barlow County.

Personally before me comes J. A. Ingram, who on oath says that he knew W. T. Shelton while in life and that he knows this widow Mrs. R. A. Shelton from her marriage with deceased the above applicant; that he knows that the said W. T. Shelton and Mrs. R. A. Shelton were in due form of law married in the county of Gordon in the State of Ga on the 24 day of Feb, 1878, and that they resided together as husband and wife from date of marriage to the day of his death on the 16th day of April, 1921, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 4th day of May, 1921
G. W. Anderson, Ordinary. J. A. Ingram
Barlow County.

Note 1st—This form can be used by guardian or minor children where there is no widow.
2d—Ordinary must send in all cases certified copy of marriage license attached.

J. G. Sherman
Barton County
No. _____

INDIGENT PENSION,
1901.
Name *J. G. Sherman*
County *Barton*
Co. *R. 19. 1st* Reg'm't
Approved *1902* 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.

7/25/1902

STATE OF GEORGIA,
Barton County,
Subscribed and sworn to before me
at *Bartonsville* this *23rd* day of *August* 1902.

Witness my hand and seal, this *23rd* day of *August* 1902.
Executed in presence of
J. G. Sherman
mark

(L. S.)