

CONTRACTOR 1903.
(FOR THOSE ALREADY ENROLLED.)

No. 1936

DISABLED

SOLDIER'S PENSION

1903.

Name Wm Smith
County Bartow
Co. A Regiment 38th
Disability Wounded in breast
Amount, \$ 50.00

2/10 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HASTENED TO
Only

Gov. W. Harrison, State Prison, Atlanta.

No data

Smith, William
Bartow Co.

CONTRACTOR 1904.
(FOR THOSE ALREADY ENROLLED.)

No. 1520

DISABLED

SOLDIER'S PENSION

1904.

Name Wm Smith
County Bartow
Co. A Regiment 38th
Disability Wounded in breast
Amount, \$ 50.00

FEB 9 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HASTENED TO
Only

Gov. W. Harrison, State Prison, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County.

Personally appears Wm Smith 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 small boy - 6 yrs old; 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 38th Regiment of GA Volunteers, Colquhoun's Brigade; that whilst engaged in such military service in the State of GA, on the March day of March 1864, he was wounded, injured or diseased as follows: Shot in breast by piece of shell in the siege of Charleston S.C. - the effect of which wound is injurious to his health so that he can not perform the usual vocations of life

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

Sworn to and subscribed before me, this 15th day of Jan 1904, at Post-office mark Wm Smith 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,

Bartow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with Wm Smith 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 26th day of Jan 1904, at Post-office mark 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, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County.

Personally appears Wm Smith of Bartow County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of March 1864; 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 38th Regiment of GA Volunteers, Colquhoun's Brigade; that whilst engaged in such military service in the State of GA, on the March day of March 1864, he was wounded, injured or diseased as follows: wounded in the breast by a shell at the siege of Charleston S.C. - seriously affecting his lungs and renders him unable to perform manual labor for a lengthy

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 Bartow County, been allowed an invalid pension of fifty Dollars, for the year 1903.

Sworn to and subscribed before me, this 15th day of Jan 1904, at Post-office mark Wm Smith 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,

Bartow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with Wm Smith 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 1904, at Post-office mark 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.

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 50 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 86 day of Jan, 1903. Wm Smith Post-office work

G W Nundrick 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 Nundrick Ordinary of said County, do certify that I am well acquainted with Wm Smith 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 26 day of Jan, 1903.

G W Nundrick Ordinary. Barlow County.

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

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 50 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 15 day of Jan, 1904. Wm Smith Post-office work

G W Nundrick 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 Nundrick Ordinary of said County, do certify that I am well acquainted with Wm Smith 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 15 day of Jan, 1904.

G W Nundrick Ordinary. Barlow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County.

I, William Smith hereby authorize G W Nundrick of Barlowville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me by Barlowville Ga at by OK

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18 day of Jan, 1905.

Executed in the presence of William Smith [L. S.] mark

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County.

I, Wm Smith hereby authorize G W Nundrick 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 18 day of Jan, 1905.

Executed in the presence of Wm Smith [L. S.] mark

CASE SECTION 1290.
(FOR THOSE ALREADY ENROLLED.)

No. 1408

DISABLED
SOLDIER'S PENSION
1905.

Name William Smith
County Barlow
Co. A Regiment 23 Ga
Disability wounded in heart
Amount, \$ 50

FEB 7 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

no date

CASE SECTION 1290.
(FOR THOSE ALREADY ENROLLED.)

No. 857

DISABLED
SOLDIER'S PENSION
1906.

Name Wm Smith
County Barlow
Co. A Regiment 23 Ga
Disability wounded in heart
Amount, \$ 50

JAN 29 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

no date

1884
Dollars, for the year 1904.
Sworn to and subscribed before me, this the
19 day of Jan 1905.
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 William Smith
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 Jan 1905.

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, 1906.

ending October 26th, 1906. I have heretofore, under said law, as a resident of
Barlow County, been allowed an invalid pension of
\$14.00 Dollars, for the year 1905.

Sworn to and subscribed before me, this the
18 day of Jan 1906.
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 Wm. Smith
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 1906.

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 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow COUNTY.
I, Wm. Smith, hereby authorize
G.W. Hendricks of G.W. Hendricks
to receive and receipt for the pension paid hereon, and request that he remit same to
me by
at Cartersville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 14
day of Jan 1907.

Executed in presence of

Wm. Smith
mark [L. S.]

Smith William
Barlow County

Cons. Section 1250.
(FOR THOSE ALREADY ENROLLED)
No. 1 600

DISABLED
SOLDIER'S PENSION
1907.

Name Wm Smith
County Barlow
Co. A. Regiment 3rd
Disability Wounding breast
Amount \$ 50.

1907.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO

Wm. Smith
7-14 date

Smith, William
Bartow County

One Section 1907.
(FOR THOSE ALREADY ENROLLED)

No. *7* 400

DISABLED
SOLDIER'S PENSION
1907.

Name *Wm. Smith*
County *Bartow*
Co. *A* Regiment *3rd*
Disability *Wounding head*
Amount, \$ *50.*

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

ONE W. H. BROWN, STATE PRINTER, ATLANTA.

25 date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Bartow County.

Personally appears *Wm. Smith* of *Bartow*

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

day of *1839*; that he enlisted in the military service of the Confederate States (or of the State of *SC*) during the war between the

States, and served as a *Private* in Company *A*, of *3rd* Regiment

of *3rd* *Volunteer's* *Regiment*'s Brigade; that whilst engaged

in such military service in the State of *SC*, on the *day*

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

Shot in breast by fire of shell at the Siege of Charleston S.C.

Deponent makes application for the pension to which he is entitled for the year ending October 31st, 1907. I have heretofore, under said law, as a resident of *Bartow* County, been allowed an invalid pension of *50* Dollars, for the year 1906.

Sworn to and subscribed before me, this the *7* day of *Jan*, 1907. *Wm. H. Smith*

G. W. Hendricks Ordinary Postoffice

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

State of Georgia,

Bartow County.

G. W. Hendricks Ordinary of said County,

do certify that I am well acquainted with *Wm. Smith*

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 *7* day of *Jan*, 1907.

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 1st, 1907.

in such military service in the State of AL, on the _____ day
of March 1884, he was wounded, injured or diseased as follows:
Shot in breast by fire of shell at
the siege of Charleston S.C.

Deponent makes application for the pension to which he is entitled for the year
ending October 31st, 1907. I have heretofore, under said law, as a resident of
Barlow County, been allowed an invalid pension of
\$8.25 Dollars, for the year 1906.

Sworn to and subscribed before me, this the _____ day of Jan 1907. Wm. H. Smith
G. W. Hendricks Postoffice Barlow

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.

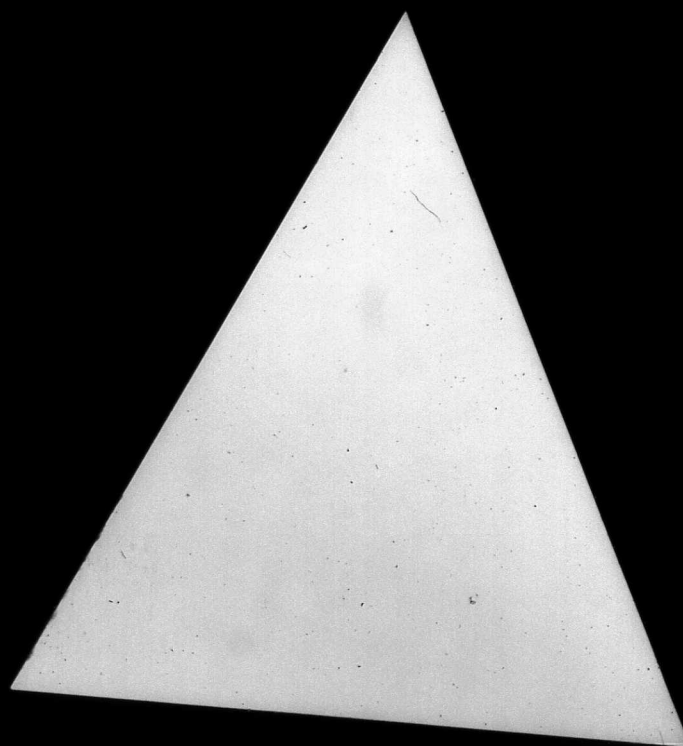
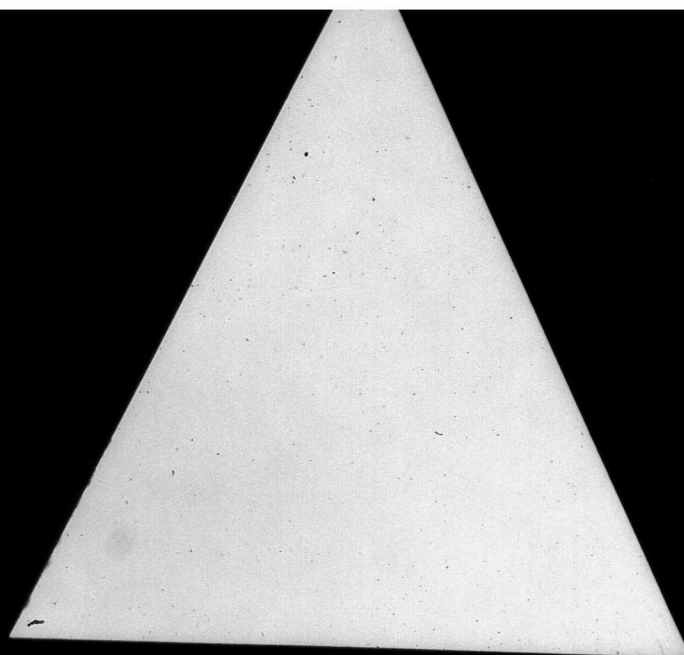
I, G. W. Hendricks Ordinary of said County,
do certify that I am well acquainted with Wm. H. Smith
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides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

Given under my official signature and seal this 7th
day of Jan 1907.



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 1st, 1907.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow

County,

J. M. Sosebee

of *Barlowville Ga*

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

at *Barlowville Ga*

Witness my hand and seal this

6th

day of *April*

1895.

Executed in presence of

W. H. Sosebee

A. M. Sosebee

J. M. Sosebee

Sosebee, D. M.
Barlow Co

O.K. No. 110

INDIGENT PENSION
1895.

Name *D. M. Sosebee*

County *Barlow*

Ground *Indigence & poverty*
Barlowville Ga
April 6th 1895

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

att

Geo. W. Harrison, State Printer, Atlanta.

Ground *July 11th*
April 6th 1886
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDLED TO:
att
Geo. W. Garrison, State Printer, Atlanta.

ATTORNEY
of *Barlow*
that he remit same to *me*
of *April* 1886
D. M. Loebe

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County,
J. M. Loebe hereby authorize
G. M. Hendricks of *Barlowville Ga*
to receive and receipt for the pension allowed and request that he remit same to *me*
at *Barlowville Ga*
Witness my hand and seal this *6th* day of *April* 1886.
Executed in presence of
Miles H. Cleveland } *D. M. Loebe*
B. M. Report

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Barlow County,
D. M. Loebe of said State and County, desiring
to avail himself of the Pension Act approved December 16th, 1884, hereby submits his proofs, and after
being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? (give State, County and post office) *D. M. Loebe, Barlowville, Barlow County Ga*
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State? *Barlowville, Barlow County Ga, lived my life*
3. When and where were you born? *Oct. 6th 1842 at Glynnes Co. Ga*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Confederate*
5. When and where did you enlist? *Aug. 31st 1861 at Camp McDonald*
6. In what company and regiment did you enlist? *Co. "E" 88th Regt. Ga. Vol*
7. How long did you remain in that company and regiment? *5 1/2 years*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
9. For how long a period did you discharge regular military duty? *5 1/2 years*
10. When, where and under what circumstances were you discharged from service? *I came home in June 26th day of May 1868, surrendered at Kingston Ga. 12 days of May 1868.*
11. What is your present occupation? *farming*
12. How much can you earn per annum by your own exertions or labor? *1400 a hand*
13. What has been your occupation since 1865? *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? *8000* *50,000 dollars*
15. What is your present physical condition and how long have you been in such condition? *Have chronic diarrhea, have been very badly, have been thus afflicted for 18 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 infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *Have been suffering with chronic diarrhea for about 18 years and I cannot labor without pain in account of said disease.*
18. What property, effects or income do you possess? *None*
19. What property, effects or income did you possess in 1883 and in 1884 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? *In Barlow County*
21. How were you supported during the years 1883 and 1884? *I lived with Mr. Dupree who principally supported me.*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I do not* *very little indeed*
23. What was your employment during 1883 and 1884? What pay did you receive in each year? *did a little light work in Mr. Dupree's farm*
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *Have no family. I long live with my sons. Have but one child. He has a family, he lives by his labor*

INDIGENT PENSION
1885.

Name *D. M. Loebe*
County *Barlow*
Ground *Infirmary and poverty*
July 11th
April 6th 1886

RICHARD JOHNSON,
Secretary Executive Department.
WARRANT HANDLED TO:
att
Geo. W. Garrison, State Printer, Atlanta.

Seabury D. M. Loebe
Barlow Co
U.M. No. 110

Sandberg D. M.
Barlow Co
 No. 110
INDIGENT PENSION
1895.
 Name *D. M. Sandberg*
 County *Barlow*
 Ground *Indigent & family*
April 1st 1895
 1896
 RICHARD JOHNSON,
 Secretary Executive Department.
 WARRANT ISSUED TO
Atty
 (See Warrant, Page Fifteen, A. 1895.)

Have been afflicted for 18 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 been afflicted with Chronic Diarrhoea & Piles for about 13 years and I cannot labor without pain in account of said disease.*
 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? *In Barlow County*
 21. How were you supported during the years 1893 and 1894? *I lived with Mr. Dupree who principally supported me*
 22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I do not*
 23. What was your employment during 1893 and 1894? What pay did you receive in each year? *Did a little light work in Mr. Dupree barn*
 24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *I have no family. I now live with my own. I have but one child. He has a family. He lives by his labor*

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

Sworn to and subscribed before me this the *6th* day of *April*, 1895, by *D. M. Sandberg* Ordinary of *Barlow* County, Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Barlow County.
Miles A. Collins of said State and County, having been presented as a witness in support of the application of *D. M. Sandberg* 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? *Miles A. Collins, At Bartonsville Barlow County Ga*
2. Are you acquainted with *D. M. Sandberg* the applicant, if so how long have you known him? *Thirty five or forty years*
3. Where does he reside, and how long has he been a resident of this State? *Bartonsville Barlow Co. Ga. Ever since I have known him*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *I do. I was a member of the same Regiment.*
5. When, where and in what company and regiment did he enlist? *August 1861, at Camp McDonald Barlow Co. in Co. "B", 13th Cal. Caval*
6. Were you a member of the same company and regiment? *Same Regiment*
7. How long did he perform regular military duty, and what do you know of the service as a Confederate soldier, and the time and circumstances of his discharge from the service? *About 3 1/2 years. He was a good soldier. I was not present at his discharge*
8. What property, effects or income has the applicant? (Give your means of knowledge.) *He has nothing*
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *Nothing*
10. What is the applicant's occupation and physical condition? *Does some little work on farm*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *I am not a physician and hence cannot give exact condition of applicant. He has Chronic Diarrhoea and Piles and I think these render him unable to do labor.*
12. How was he supported during the years 1893 and 1894? *By his friends and his own*
13. What portion of his support for these two years was derived from his own labor or income? *Very little indeed*
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 complains of suffering with Diarrhoea and Piles. Has a feeble appearance and is in frail & feeble health*
15. What interest have you in the recovery of a pension by this applicant? *None*

Sworn to and subscribed before me, this the *6* day of *April*, 1895, by *Miles A. Collins* Ordinary of *Barlow Co. Ga.*

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Barlow County.
 Personally came before me, *J. R. Bathoun* and *W. K. Kufpatrick*, both known to me as reputable physicians of said county; who being severally sworn, say on oath that they have examined carefully *D. M. Sandberg* applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:
Chronic Diarrhoea & Hemorrhoids with Eczema & looks premature, old

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.
 Sworn to and subscribed before me, this the *8th* day of *April*, 1895, by *J. R. Bathoun* and *W. K. Kufpatrick*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Barlow County.
 I, *G. H. Hendricks*, Ordinary in and for said County, hereby certify that the applicant *D. M. Sandberg* 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: *Miles A. Collins* are of trustworthy character and that their statements are entitled to full faith and credit.
 I further certify that before answering the foregoing questions, the applicant and each witness took the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed.
 I further certify that the tax 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, by *G. H. Hendricks* Ordinary of *Barlow* County.
I certify as to the trustworthy character of D. M. Sandberg and Miles A. Collins.
 Before any questions are answered, the Ordinary shall swear applicant and witnesses that they will make to each of the questions asked of you, and the evidence for and against the applicant, and shall not be sworn to by mistake.
By mistake

1. Name of applicant Samuel McDaniel both colors in Co. B. 1st Regt. Cavalry
 2. Where you a member of the same company and regiment? Same Regiment
 3. How long did he perform regular military duty, and what do you know of the service as a Confederate soldier, and the time and circumstances of his discharge from the service? About 3 1/2 years. He was a good soldier. I was not present at his discharge
 4. What property, effects or income has the applicant? (Give your means of knowledge). He has nothing
 5. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? Nothing
 6. What is the applicant's occupation and physical condition? Does some little work in farm
 7. Is the applicant unable to support himself by labor of any sort, if so, why? I am not a physician, and hence cannot give exact conditions of applicant. He has Chronic Gonorrhea and Piles, and I think these render him unable to do
 8. How was he supported during the years 1893 and 1894? By his friends and his own
 9. What portion of his support for those two years was derived from his own labor or income? Very little indeed
 10. 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 complains of suffering with Gonorrhea and Piles. Has at the last appearance and is in frail & feeble health
 11. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this 6 day of April, 1895, by G.W. Hendricks Ordinary of Barlow County, Ga. Miles H. Collins Applicant

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Barlow County. }
 I, G.W. Hendricks, Ordinary in and for said County, hereby certify that the applicant O.M. Sorebe 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: Miles A. Collins 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.
G.W. Hendricks Ordinary of Barlow County.

Before any questions are answered, the Ordinary shall read applicant's affidavit, and if he shall find that the answers make to each of the questions asked of you, and the evidence is sufficient to entitle him to a pension, he shall
By mistake Barlow County, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County. }
 I, O.M. Sorebe, hereby authorize G.W. Hendricks of Barlowville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Barlowville Ga.
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 19th day of January, 1897.
O.M. Sorebe [L. S.]

Executed in presence of

J. H. Leach
R. H. Wilson

POWER OF ATTORNEY.

State of Georgia, Barlow County. }
 I, O.M. Sorebe, hereby authorize G.W. Hendricks of Barlowville Ga to receive and receipt for the pension paid hereon and request that he remit same to me by check at Barlowville Ga.
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th day of May, 1898.
O.M. Sorebe [L. S.]

Executed in presence of

A. C. Means
J. H. Leach

Sorebe, O.M.
Barlowville Ga
 (For Those Already Enrolled.)
 No. 1721
 INDIGENT
 Soldier's Pension.
1897.
 Name O.M. Sorebe
 County Barlow
 1897.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
G.W. Hendricks
 SEC. W. HARRISON, STATE PRINTER, ATLANTA.
No date

Sorebe, O.M.
Barlowville Ga
 (For Those Already Enrolled.)
 No. 2304
 INDIGENT
 SOLDIER'S PENSION,
1898.
 Name O.M. Sorebe
 County Barlow
 WARRANT ISSUED
1/21
 1898.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
G.W. Hendricks
 SEC. W. HARRISON, STATE PRINTER, ATLANTA.

Slocum, D. M.
 Barton Co
 ACT OF 14 DEC., 1864.
 (For Those Already Enrolled.)
 No. 2304
 INDIGENT
 SOLDIER'S PENSION,
 1898.
 Name D. M. Slocum
 County Barton
 WARRANT ISSUED
 1/21 - 1898.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
 GUTH
 REC'D. W. HARRISON, STATE PRINTER, 407-408.

and served for the term of nearly 4 yrs in Company E, of 33rd Regiment of Co 1st Infantry; that his physical condition is as follows: Suffering from piles and Chronic diarrhea

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 19th day of January, 1897. D. W. Soble
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 D. W. Soble 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 January, 1897.



G. W. Hendricks
Ordinary Barlow County.

Note.—The blank spaces must be filled.

and served for the term of 4 yrs in Company E, of 33rd Regiment of Co 1st Infantry; that his physical condition is as follows: He is totally worn out, with Hemorrhoids and Dysentery

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 5th day of January, 1898. D. M. Soble
G. W. Hendricks Ordinary. mark

State of Georgia,

Barlow County,

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with D. M. Soble 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 5th day of January, 1898.



G. W. Hendricks
Ordinary Barlow County.

Note.—The blank spaces must be filled.

Abigail M. W. Spruell
Carters County
for months pay
No. *OK for 1911*

Widow's Pension

UNDER ACT 1910.

County *Carters*
Name *Mrs. M. W. Spruell*
Widow of *Thos. K. Spruell*
J. Phillips Secy.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/30/10-

Widow of Thos R. Spruill
J. Phillips Leg.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/30/10

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

STATE OF GEORGIA,
Barlow County.

Personally before me comes Mrs M. W. Spruill 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? M. W. Spruill, Okefenokee
2. How long and since when have you been a continuing resident in the State of Georgia? I have lived in Georgia since 1848
3. When, where and to whom were you married? 1861, J. H. Spruill, Ga. 1861
4. When, where and in what Company and Regiment did your husband enlist as a soldier of the Confederate Army or Georgia Militia? (State the arms and time of service.) Apr 6-1862, A. Smith Co. Co. D. Phillips Regt. Va. April 9-1862, Appomattox Va.
5. When and where did the Command of your husband surrender or discharge from the army? He was not present
6. Was your husband personally present at the time of the surrender or discharge of this Command? He was not present
7. If he was not present state clearly where he was? At Appomattox
8. Where was his Command when he left? Henry Bluff Va.
9. For what cause did he leave his Command? Discharged on account of his physical disability for military service
10. By whose authority did he leave his Command? By his physical disability for military service
11. For how long was he granted leave of absence? None at all
12. What was his physical condition when he left his Command? None at all
13. What effort did he make to return to his command? None at all
14. In what way was he prevented from going back to Command? None at all
15. Was he captured by the enemy at any time? None at all
16. If so, when and where captured and where held as a prisoner, and when and for what cause released? None at all
17. When and where did your husband die? Sept 11-1865, in Florida
18. Were you residing together when he died? Yes
19. If not, how long had you resided apart? None at all
20. 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.) None at all
21. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None at all
22. What property of any description of any value have you now? None at all
23. Give list and cash value? all
24. What is your annual earnings or income and their value? None at all
25. Have you heretofore been paid a pension by the State? No
26. If so, when and for what cause were you struck from the Roll? No

Sworn to and subscribed before me this the 13th day of Dec. 1910.
J. W. Lindsey Ordinary.
of Barlow County.

Widow's Pension
UNDER ACT 1910.
Barlow County
Mrs M. W. Spruill
Name
Thos R. Spruill
Widow of
J. Phillips Leg.
J. W. LINDSEY,
Commissioner of Pensions.
Chas. F. Byrd, State Printer.
11/30/10

g. In what way was he prevented from going back to Command?

h. Was he captured by the enemy at any time?

i. If so, when and where captured and where held as a prisoner, and when and for what cause released?

j. When and where did your husband die? Sept 11th 1863 in Fla

k. Were you residing together when he died?

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

m. 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.) None at all

n. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None at all

o. What property of any description of any value have you now? None at all

p. Give list and cash value?

q. What was your annual earnings or income and their value? None at all

r. Have you heretofore been paid a pension by the State? No

s. If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 18th day of Oct, 1910. Miss M. W. Spruill
Lawrence Ordinary.
 of Barlow County.

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

STATE OF GEORGIA.

Barlow County.

Personally before me comes H. J. McCormick 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. J. McCormick, Atlanta
2. How long and since when have you known Mrs. M. W. Spruill applicant?
3. How long and since when has she continuously resided in this State? (Give date.) Know her 57 years. Spruill & I have known her since her was married in 1863. I. H. Spruill
4. When and to whom was she married? I. H. Spruill How do you know? Was on roll of her husband.
5. How long and since when did you know I. H. Spruill her husband? 57 years. I was an attendant at his marriage.
6. When and where did I. H. Spruill the husband of Applicant die? Sept. 11th 1863 in Florida for the winter at the time
7. Where the Applicant and her husband living together as husband and wife at the date of his death? They were
8. If not, how long did they live apart before his death?
9. When, where and in what Company and Regiment did I. H. Spruill enlist? May 6th 1862. 1st North Cobb County Ga. in Company D Phillips Regiment of Infantry
10. Were you a member of the same Company? Yes
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From May 6th 1862 to April 1863. Eleven months
12. When, and where did his Command surrender, and was discharged? April 9th 1865 - Appomattox Va.
13. Were you personally present when it was surrendered? No If not where was you? In Augusta Ga. and how came you there? I was on detached service for the Confederacy
14. Was the husband of applicant personally present at surrender? No If not where was he? He was at Home when, where and for what cause did he leave Command? (Give date.) Discharged April 1863 By whose authority did he leave his Command? Officers in Command and how long was he granted leave? Discharged How do you know all this? I was promoted to his place in his line discharged. I was Capt. I was 1st Lieut. He was discharged. I was promoted to 1st Captaincy of Co. B.
15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? He was discharged from the service
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 18th day of Oct, 1910. H. J. McCormick
Lawrence Ordinary,
 of Barlow County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Barlow County.

Personally before me comes Edgar W. Hendricks on oath says that they are freeholders of said County and that they know Mrs. M. W. Spruill 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 property of any kind

Personal property \$
 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:

Personal property \$
 Money, Notes and accounts \$

Schedule (C).
 We also know what property she has now in her possession, use and control to wit:

Acres of land worth \$
 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 18th day of Oct, 1910. H. J. McCormick
Edgar W. Hendricks Ordinary Jas. B. Spruill
 of Barlow County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Barlow County.

I Edgar W. Hendricks Ordinary of said County do certify that I know Mrs. M. W. Spruill 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 in the 4th Nov. 1908.

That I also know H. J. McCormick the witness who swears to the service of husband, and Jas. B. Spruill 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 Mrs. M. W. Spruill Returned for Tax is for 1908 \$ nothing for 1910 \$ nothing

Sworn under my hand and official seal of office this 14 day of Nov, 1910.
Edgar W. Hendricks Ordinary,
 of Barlow County.

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

the husband of applicant at the date of her death? *They were*

8. If not, how long did they live apart before his death? *11*

Were they divorced? *Yes*

9. When, where and in what Company and Regiment did *J. W. Spruill* enlist?
May 6th 1862, New York 60th Cavalry Regt, Co. C,
Company D Phillips Regiment of Infantry.

10. Were you a member of the same Company? *Yes*

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? *From May 6th 1862 to April 1863, eleven months*

12. When, and where did his Command surrender, and was discharged? *April 9th 1865*
Appomattox Va.

13. Were you personally present when it was surrendered? *No* If not where
in Augusta Ga and how came you there? *He was*
in detached service for the Confederacy

14. Was the husband of applicant personally present at surrender? *No* If not
 where was he? *He was at home* when, where and for what
 cause did he leave Command? (Give date) *Discharged April 1863* By whose
 authority did he leave his Command? *Officers in Command* and how
 long was he granted leave? *Discharged* How do you know all this? *I*
was promoted to his place in his being discharged
He was Capt. I was 1st Lieut. He being discharged
I was promoted to 1st Captaincy of Co. B.

15. For what cause, if you know of your own knowledge was he prevented from returning to his
 Command? *He was discharged from the service*

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 *19th* day of *Oct* 191*0*, *H. J. M. McCormick*
Sw. Andrews Ordinary,
 of *Barlow* County.

Money, Notes and accounts \$ *1*

Schedule (C).

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

Acres of land worth \$ *1*

Horses and Mules \$ *1*

Cows and Hogs \$ *1*

Other property \$ *1*

Income and earnings \$ *1*

Total Value of all property and effects \$ *1*

Sworn and subscribed before me this the *19th* day of *Oct* 191*0*, *H. J. M. McCormick*
Sw. Andrews Ordinary, *J. W. Spruill*
 of *Barlow* County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Barlow County.

I *Sw. Andrews* Ordinary of said County do certify
 that, I know *Mrs. M. W. Spruill* 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 in the 4th Nov., 1908.

That I also know *H. J. M. McCormick* the witness who swears
 to the service of husband, and *J. W. Spruill* 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 *Mrs. M. W. Spruill* Returned for Tax is for
 1908 \$ *nothing* for 1910 \$ *nothing*

Sworn under my hand and official seal of office this *14th* day of *Nov*
 191*0*

SEAL *Sw. Andrews* Ordinary, *Barlow* County

(SEAL)

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 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 gen-
 eral reputation.

Stansell John W.
Barlow County

OK No _____

INDIGENT PENSION,
1900.

Name *J. W. Stansell*
County *Barlow*

Approved *July 5* 1900.
for 1901

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

6/13-20

STATE OF GEORGIA,

Power of Attorney.

Barlow County,

John W. Stansell hereby authorizes
to receive and receipt for the pension allowed, and request that he remit same to *me*
at *Lawrenceville* *Georgia*

Witness my hand and seal, this *8* day of *July* 1900.

Executed in presence of

J. A. Green

[L. S.]

Approved July 5 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

6/13-90

Power of Attorney.

STATE OF GEORGIA,

Barlow County.

J. W. Stansell hereby authorizes
Geo. W. Harrison of Barlow County to receive and receipt for the pension allowed, and request that he remit same to me

Witness my hand and seal, this 5 day of April 1900.

Executed in presence of

L. A. Green

[L. S.]

Questions for Applicant.

STATE OF GEORGIA,

Barlow County.

J. W. Stansell of said State and County, desiring to avail himself of the Pension Act (Section 1264, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)
J. W. Stansell, Barlowville, Ga.
2. How long and since when have you been a resident of this State?
Since birth
3. When and where were you born?
July 12, 1849, Barlowville, Ga.
4. When and where and in what company and regiment did you enlist or serve?
July 12, 1861, at Poplarville, Ga. in Co. C. of Phillips' Regiment
5. How long did you remain in such company and regiment?
From July 12, 1861, till April 12, 1865, when I was discharged with General Order No. 100
6. For how long a period did you discharge regular military duty?
Nearly four years
7. When, where and under what circumstances were you discharged from service? Were you with your command at the time?
April 12, 1865, at Appomattox Court House, at surrender of General Lee
8. What is your present occupation?
Farming
9. How much can you earn (gross) per annum by your own exertions or labor?
\$400
10. What has been your occupation since 1865?
Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"?
Exhaustion & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I have had rheumatism for two years, such an extent as to render me unable to earn my support by manual labor
13. What property, effects or income do you possess, and its gross value?
None
14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899; and what disposition, if any, did you make of same?
I have had no property for the last few years, had a personal property for two years ago, which was taken by the State
15. In what County did you reside during those years, and what property did you then return for taxation?
Barlow
16. How were you supported during the years 1898 and 1899?
By my own labor together with the assistance of my wife
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
I do not know
18. What was your employment during 1898 and 1899? What pay did you receive in each year?
Farming
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
Yes, wife and two children. Have no homestead, have by this date
20. Are you receiving any pension? If so, what amount, and for what disability?
No

Every Question MUST be Answered.

Sworn to and subscribed before me this 5 day of April 1900.
J. W. Stansell Applicant.
Geo. W. Harrison Ordinary,
of Barlow County.

INDIGENT PENSION,

1900.

Name J. W. Stansell

County Barlow

Approved July 5 1900.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

6/13-90

NOTE.

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

2. In addition affidavits may be attached if blank spaces are insufficient.

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

Stancil, J. W.
Barlow County

COPIES SECTION 118.
(For Those Already Enrolled.)

No. *1186*

INDIGENT

SOLDIER'S PENSION.

1901.

Name *J. W. Stancil*
County *Barlow*
Enrolled in *1900*
WARRANT ISSUED
1/29 1901.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO
J. W. Stancil
John W. Harrison, State Printer, Albany.

Stancil, J. W.
Barlow County

COPIES SECTION 118.
(For Those Already Enrolled.)

No. *3208*

INDIGENT

SOLDIER'S PENSION

1902.

Name *J. W. Stancil*
County *Barlow*
Co. *E. Phillips*
WARRANT ISSUED
1/31 1902.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO
Edy
John W. Harrison, State Printer, Albany.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *John W. Stancil* 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 *14* day of *Feb* 18*99*; that he is *62* 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 *E*, of *Phillips* *Regiment of Infantry*; that his physical condition is as follows: *Has Rheumatism to such an extent that he cannot work for a support*

that his property consists of the following items:

of the value of *17* 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 *Barlow* county been allowed a pension for the year *1* enrolled in *1900*

Sworn to and subscribed before me, this *1st* day of *Jan* 1901.

G. W. Hendricks Ordinary *J. W. Stancil* mark

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *J. W. Stancil* 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 *2nd* day of *Jan* 1901.

G. W. Hendricks Ordinary *Barlow* 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,

Barlow County.

Personally appears *J. W. Stancil* 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 *14* day of *February* 18*99*; 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 *3 yrs* in Company *E*, of *Phillips* *Regiment of Infantry*; that his physical condition is as follows: *Physical Condition very poor from rheumatism*

that his property consists of the following items:

of the value of *20* 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 *Barlow* county been allowed a pension for the year *1901*

Sworn to and subscribed before me, this *8th* day of *Jan* 1902.

G. W. Hendricks Ordinary *J. W. Stancil* mark

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *J. W. Stancil* 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* 1902.

G. W. Hendricks Ordinary *Barlow* 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 Barlow county been allowed a pension for the year 1 enrolled in 1900

Sworn to and subscribed before me, this the

day of Jan 1901.

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 J. W. Stansell the

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

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

and that he resides in this County.

Given under my official signature and seal, this

day of Jan 1901.

G. W. Hendricks Ordinary

Barlow County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1901.

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 Barlow county been allowed a pension for the year 1 901

Sworn to and subscribed before me, this the

day of Jan 1902.

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 J. W. Stansell the

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

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

and that he resides in this County.

Given under my official signature and seal, this

day of Jan 1902.

G. W. Hendricks Ordinary

Barlow County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, J. W. Stansell hereby authorize George W. Hendricks of Barlow County

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

me at Barlowville Ga

by me

Witness my hand and seal, this

day of Jan 1903.

J. W. Stansell [L. S.]

Executed in presence of

Geo. W. Hendricks

W. D. Johnson

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, J. W. Stansell hereby authorize George W. Hendricks of Barlow County

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

me at Barlowville Ga

by me

Witness my hand and seal, this

day of Jan 1904.

J. W. Stansell [L. S.]

Executed in presence of

J. R. Anderson

Barlow Co. Ga

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 3706

INDIGENT
SOLDIER'S PENSION
1903.

Name J. W. Stansell
County Barlow
Co. 5 Regiment Infantry

WARRANT ISSUED

7/6 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

me

Geo. W. Hendricks, State Printer, Atlanta.

no entry

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 3301

INDIGENT
SOLDIER'S PENSION
1904.

Name J. W. Stansell
County Barlow
Co. 5 Regiment Infantry

WARRANT ISSUED

7/9 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

me

Geo. W. Hendricks, State Printer, Atlanta.

no entry

Stanley, W.
 (FOR THOSE ALREADY ENROLLED)
 CODE SECTION 124.
 No. *3706*
 INDIGENT
 SOLDIER'S PENSION
 1903.
 Name *J. W. Stansell*
 County *Barlow*
 Co. *5* Regiment *Phillips Legion*
 WARRANT ISSUED
 3/10 1903.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
0
 Gen. W. H. Harrison, State Printer, Atlanta.

no data
 (FOR THOSE ALREADY ENROLLED)
 CODE SECTION 124.
 No. *3801*
 INDIGENT
 SOLDIER'S PENSION
 1904.
 Name *J. W. Stansell*
 County *Barlow*
 Co. *5* Regiment *Phillips Legion*
 WARRANT ISSUED
 2/19 1904.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
W. H. Harrison
 Gen. W. H. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *J. W. Stansell* 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 *14* day of *Feb* 18*99*; that he is *64* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 1/2* years in Company *8*, of *Phillips Legion*; that his physical condition is as follows: *Has Rheumatism in the breast or muscular of the breast*

that his property consists of the following items:

of the value of *3* 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 *13* day of *Jan* 1903. *J. W. Stansell* Ordinary. *mark*

STATE OF GEORGIA,

Barlow County.

I, *G. W. Stansell* Ordinary of said County, do certify that I am well acquainted with *J. W. Stansell* 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 *13* day of *Jan* 1903. *G. W. Stansell*

Ordinary *Barlow* County.

Note.—The blank spaces must be filled.
 Note.—Affidavits should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears *J. W. Stansell* 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 *14* day of *Feb* 18*99*; that he is *65* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 1/2* years in Company *8*, of *Phillips Legion*; that his physical condition is as follows: *Physically disabled from age and body disease*

that his property consists of the following items:

of the value of *3* 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 *13* day of *Jan* 1904. *J. W. Stansell* Ordinary. *mark*

STATE OF GEORGIA,

Barlow County.

I, *G. W. Stansell* Ordinary of said County, do certify that I am well acquainted with *J. W. Stansell* 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 *13* day of *Jan* 1904. *G. W. Stansell*

Ordinary *Barlow* County.

Note.—The blank spaces must be filled.
 Note.—Affidavits 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 Bartow county been allowed a pension for the year 1902.

Sworn to and subscribed before me, this the 13 day of Jan 1903. } J. W. Stansell Ordinary.

STATE OF GEORGIA,

Bartow County. }
I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with J. W. Stansell 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 13 day of Jan 1903.



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 Bartow County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 13 day of Jan 1904. } J. W. Stansell Ordinary.

STATE OF GEORGIA,

Bartow County. }
I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with J. W. Stansell 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 13 day of Jan 1904.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County. }
I, J. W. Stansell hereby authorize G. W. Hendricks of Bartow to receive and receipt for the pension allowed, and request that he remit same to me at Bartow by check.

WITNESS my hand and seal, this 17 day of January 1905. } J. W. Stansell [L. S.]

Executed in the presence of Gabe Hendricks.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County. }
I, J. W. Stansell hereby authorize G. W. Hendricks of Bartow to receive and receipt for the pension allowed, and request that he remit same to me at Bartow by check.

WITNESS my hand and seal, this 9 day of Jan 1905. } J. W. Stansell [L. S.]

Executed in the presence of S. J. Burns.

INDIGENT SOLDIER'S PENSION 1905.

Name J. W. Stansell
County Bartow
Co. E Regiment Phillips
WARRANT ISSUED
FEB 7 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[Signature]
GEO. W. HARRISON, JUDGE, FOR STATE PRISON, ATLANTA.

no date

Stansell, J. W.
Bartow

Count Section 124.
(FOR THOSE ALREADY ENROLLED.)

No. 2137

INDIGENT SOLDIER'S PENSION 1906.

Name J. W. Stansell
County Bartow
Co. E Regiment Phillips
WARRANT ISSUED
JAN 29 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[Signature]
GEO. W. HARRISON, JUDGE, FOR STATE PRISON, ATLANTA.

no date

Stansell, J. W.
Barrow County

(FOR THOSE ALREADY ENROLLED.)

No. *328*

INDIGENT
SOLDIER'S PENSION
1905.

Name *J. W. Stansell*
County *Barrow*
Co. *E* Regiment *Philip's Legion*

WARRANT ISSUED
FEB 7 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
G

Geo. W. Harrison, Manager, for State Printing, Atlanta.

no date

Stansell, J. W.
Barrow Co

(FOR THOSE ALREADY ENROLLED.)

No. *2137*

INDIGENT
SOLDIER'S PENSION
1906.

Name *J. W. Stansell*
County *Barrow*
Co. *E* Regiment *Philip's Legion*

WARRANT ISSUED
JAN 29 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
G

Geo. W. Harrison, Manager, for State Printing, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barrow County.

Personally appears *J. W. Stansell* of *Barrow* 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 *1840* day of *Feb*; that he is *64* 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 *E*, of *Philip's Legion*; that his physical condition is as follows: *Has Rheumatism and is broken down by old age*.

that his property consists of the following items:

none.

of the value of *three* Dollars. I am now earning, by my labor, *three* 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 *Barrow* County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this *17* day of *January* 1905, *J. W. Stansell* his mark
Guthrie Ordinary.

STATE OF GEORGIA,

Barrow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *J. W. Stansell* 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 *January* 1905.

Ordinary *Barrow* 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,

Barrow County.

Personally appears *J. W. Stansell* of *Barrow* 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 *Feb* day of *1840*; 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 *2 3/4 yrs* in Company *E*, of *Philip's Legion*; that his physical condition is as follows: *He has rheumatism and is not able to work but little*.

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this *9* day of *Jan* 1906, *J. W. Stansell* his mark
Guthrie Ordinary.

State of Georgia,

Barrow County.

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

Given under my official signature and seal, this *9* day of *Jan* 1906.

Ordinary *Barrow* County.

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

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 1905. I have heretofore as a resident of Bartow County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 17th day of January, 1905. J. W. Stansell his mark Ordinary.

STATE OF GEORGIA,

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

Given under my official signature and seal, this 17th day of January, 1905.

Ordinary Bartow 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.

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

Sworn to and subscribed before me, this the 9th day of Jan, 1905. J. W. Stansell his mark Ordinary.

State of Georgia,

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

Given under my official signature and seal, this 9th day of Jan, 1905. G. W. Hendricks Ordinary Bartow County.

NOTE.—The blank spaces must be filled.
NOTE.—A Affidavit should not be attested before January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County, I, J. W. Stansell hereby authorize G. W. Hendricks of Bartow County to

to receive and receipt for the pension allowed, and request that he remit same to you at Bartow by you.

Witness my hand and seal, this 9th day of Jan, 1905. J. W. Stansell [L. S.]

Executed in presence of

Stansell & Co.
Bartow

Once Enrolled 1904.
(FOR THOSE ALREADY ENROLLED)
No. 3859

INDIGENT
SOLDIER'S PENSION
1907.

Name J. W. Stansell
County Bartow
Co. Phil. Leg
Regiment 15

WARRANT ISSUED
FEB 1 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Once & Enrolled, South Western, Atlanta.

no other

Stewart & W. Barton

Over Sixteen 1864.
(FOR THOSE ALREADY ENROLLED)

No. *3 539*

INDIGENT
SOLDIER'S PENSION
1907.

Name *J. W. Standell*
County *Barton*
Co. *Phil. Leg.*
Regiment *76*
WARRENT ISSUED
FEB 3 1907

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

One W. H. HARRIS, Postmaster, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Barton County, Personally appears *J. W. Standell* 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 1867; that he is 66 years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 1/2 yrs in Company B, of the Regiment of *Philips Leg.* in that his physical condition is as follows: *He is broken down from rheumatism*

that his property consists of the following items:

of the value of *3* Dollars. I am now earning by my labor, *3* 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 16th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of *Barton* County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the *9th* day of *Jan*, 1907. *J. W. Standell* *man*
G. W. Standell Ordinary.

State of Georgia,

Barton County, I, *G. W. Standell* Ordinary of said County,

do certify that I am well acquainted with *J. W. Standell* 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*, 1907.



G. W. Standell Ordinary *Barton* County.

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

that his property consists of the following items:

of the value of 3 Dollars. I am now earning by my labor, 3 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the 9th day of Jan, 1907. J. W. Standish Ordinary. man

State of Georgia,

Bartow County

I, J. W. Standish Ordinary of said County, do certify that I am well acquainted with J. W. Standish 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, 1907. J. W. Standish Ordinary. Bartow County.

Notary Public

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

Steele, William
Barlow

Code Section 1286

12th Jan 1910

INVALID

**SOLDIER'S PENSION,
1909**

Name *William Steele*

County *Barlow*

Co. *H 1st S.C.*

Regt. *6*

Co. *B. Palmer's Sharpshooters*

Disability *wounded leg*

Amount, \$ *20*

190

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta

1-22-09

POWER OF ATTORNEY

STATE OF GEORGIA,

Barlow County,

William Steele hereby authorizes *W. F. Hudson*
Barlow to receive and accept for the pension allowed and
payable to *me* by *EL*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *25th*
day of *April*, 190*9*

Executed in the presence of

William Steele [L.S.]

Amount, \$50
190
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Ordinary will write Name of Applicant, Company
and Regiment on back as indicated above.
Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.
I, William Steele, hereby authorize Geo. Henderson
of Barlowville Ga to receive and receipt for the pension allowed 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 25th
day of Sept., 1909
Executed in the presence of William Steele [L. S.]

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA,
Barlow County.
PERSONALLY appears William Steele of said Barlow
County, State of Georgia, who being duly sworn, says on oath that he was born on the 13 day of
October, 1860, that he is a bona fide citizen and resident of Georgia, and has been
continuously since the day of 1860, that he enlisted
in the military service of the Confederate States (or the State of Georgia) on the
14 day of April, 1861, during the war between the States, and
served in Company 12 South Georgia Volunteers,
Brigade, and was honorably discharged on the 2 day of
April, 1865; that whilst engaged in such military service, and in line of duty in
the State of Georgia, on the day of April, 1862,
he was disabled or wounded as follows: Shot through left leg, Battle of
Barlowville Ga. He was shot through
the right leg, both of which wounds
have been constantly and he suffering from said leg
wounds worse as he gets older, and the head of
the left leg being injured by the shot, have
never been thoroughly cured, and the effect of said
wounds in said left leg is such as to render
the leg substantially and essentially useless in so
far as performing manual labor is concerned,
and that said injury is permanent and growing
worse in its effect.
Where was command surrendered? Appomattox Virginia
Was applicant present? Yes If not, where
was he? Present How come there?
And by whose authority? State fully:

The Instructions as Set Out in the Notes Must be Observed.
Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof,
and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 1909.
Sworn to and subscribed before me, this the
25th day of Sept., 1909 } William Steele
Geo. Henderson Post Office
Ordinary.

NOTE—State fully nature of wound or character of disease which causes the disability, and explain particularly the
extent of the disability. If claim is based on disease, give full and connected history of disease, tracing it directly to the
service.
NOTE—Do not trouble to mention wounds which do not disable.
NOTE—This Ordinary will see that all blank spaces are filled when the affidavits are signed.

INVALID

SOLDIER'S PENSION,
1909

Name William Steele
County Barlow
Co. H. S. C. Regt. 12
Co. 12 South Georgia Volunteers
Disability from wounds of leg
Amount, \$50

190
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write Name of Applicant, Company
and Regiment on back as indicated above.
Geo. W. Harrison, State Printer, Atlanta.

All amending proofs must be executed with the same formality as original proofs, and the ordinary must so certify.

which is similar to abscess of the wound. Then wounds, with the weakness and problems of advancing age, and the infirmity resulting from removal of the stomach, render him incapable and unfit for labor, unable to sustain living at any season or season.

Where was applicant's command surrendered? At Appomattox Va
Was he with it? Yes Were all of you present?
If not, where was he?
Where were you all?
How do you know the facts you state to be true?

We personally know above stated facts. We were with him in the army and have known him ever since. He was honorably discharged or retired from the service on 24 day of April 1865. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1865. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 23 day of Sept 1909 }
W. R. Ransom }
Ordinary.

NOTE 1.—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to the same.
NOTE 2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.
NOTE 3.—All blank spaces must be filled when signed.
NOTE 4.—Three witnesses are required.

is and will always be almost useless.

We have treated applicant professionally for _____ years, and his condition, as above stated, does arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this 25 day of Sept 1909 }
W. R. Ransom }
Ordinary.

NOTE 1.—State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and extent. If from disease, give its nature and character, and its cause or origin, as understood by affiants.
NOTE 2.—The physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA, Bartow County.

I, W. R. Ransom Ordinary of said County, do certify that I am well acquainted with William Steele the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be.

resides in this County and has been a bona fide resident since the 11 day of May 1865.

I also certify that the witnesses, to-wit: W. R. Ransom J. F. Jolly and L. S. Steele are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal, this 25 day of Sept 1909 }
W. R. Ransom }
Ordinary Bartow County.

All amending proofs must be executed with the same formality as original proofs, and the ordinary must so certify.

COURT OF ORDINARY
BARTOW COUNTY
G. W. HENDRICKS, ORDINARY



CARTERSVILLE, GA., Sept. 25 1909.

Personally came before me L. S. Steele and on oath says that he endorses the affidavit of J. F. Jolly in its application of William Steele for pension. He also avers that he served in the same Company with applicant up to the surrender of Gen R. E. Lee at Appomattox, April 9, 1865, that the facts set forth in the affidavit of applicant are true as stated, that he personally knows them to be true, and knows of the bad condition of his leg, and that it is with difficulty that he can get around and is attended with pain from said wound. Sworn to and subscribed before me, Sept. 25 1909 }
L. S. Steele }
G. W. Hendricks }
Ordinary Bartow Co Ga

Case

William Steele,

Application for Pension

State of Georgia } In person appeared
Bartow County } before the undersigned,
W. R. Ransom, who, being duly sworn, deposes and says: That he has known Wm Steele, the applicant for Pension, more than fifty years. Defendant knew him as a Soldier in the Confederate Army. he was a Lieutenant in Co. B, of the Palmetto Sharpshooters, D. C. Volunteer. Defendant was an officer - Lieutenant - in Co. D, of 2ndum Command, and in 2ndum Battle fought side by side with the Applicant for pension.

He says, that the said Wm Steele was a brave, fearless, faithful Soldier, true and loyal to the end. He cannot say to what extent he is incapacitated for labor because of his wounds, but knows that he is not physically able to do much, if any, work of any kind.

Sworn to and subscribed before me, Sept 29 1909 }
W. R. Ransom }
H. J. Hoff }
Ord. Chas. C. C.

Personally came before me C. S. Steel and on oath says that he endorses the affidavit of I. F. Jolly in the application of William Steele for pension. He also avers that he served in the same Company with applicant up to the surrender of Gen R. E. Lee at Appomattox, April 9th 1865, that the facts set forth in the affidavit of applicant are true as stated; that he personally knows them to be true, and knows of the bad condition of his leg, and that its with difficulty that he can get around and is attended with pain from said wound. Sworn to and subscribed before me, Sept. 25, 1909
 G. W. Hendricks
 Primary Bartow Co Ga

C. S. Steel,

deposes and says; that he has known Wm Steele, the applicant for Pension, more than fifty years. Dependent knew him as a Soldier in the Confederate Army. he was a Lieutenant in Co. B, of the Palmetto Sharpshooters, S.C. Volunteer Depot was an officer - Lieutenant - in Co. L, of Seven Command, and in Seven battles fought side by side with the applicant for pension.

He says, that the said Wm Steele was a brave, fearless, faithful Soldier, true and loyal to the end. He cannot say to what extent he is incapacitated for labor because of his wounds, but knows that he is not physically able to do much, if any, work of any kind.

Sworn to and subscribed before me, Sept 27 1909
 W. R. Harrison
 H. J. Proff Clerk. P.C.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Wayne County.

John Stockman hereby authorizes

William B. Smith of Centerville Ga

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

at Wayne Ga check

Witness my hand and seal this 23 day of January 1897.

Executed in presence of

John Stockman

John Stockman

Stockman John
No. 1967
Wayne Co

INDIGENT PENSION
1897.

Name John Stockman
County Wayne

Approved 7/11 1897.

WARRANT HANDED TO
att
Edw. V. HARRIS, STATE PRINTER, ATLANTA.

WARRANT HANDED TO

att

ED. W. HARRISON, STATE PRINTER, ATLANTA.

ATTORNEY.

Sworn to and subscribed before me this 10th day of January 1897.
John Stockman
Barlow
County

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

John Stockman hereby authorizes *John Stockman* of *Barlow* County to receive and receipt for the pension allowed and request that he remit same to *me* at *Knightsen* by *check*

Witness my hand and seal this *23* day of *January* 1897.

Executed in presence of

John Stockman
John A. Cobb
W. B. Anderson

Questions for Applicant.

STATE OF GEORGIA,

Barlow County.

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

1. What is your name and where do you reside? (give State, County and post office) *John Stockman, Knightsen, Barlow Co., Ga.*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *In Knightsen, Ga., since Oct. 5th 1893. Off since 1870.*
3. When and where were you born? *in March 1862, Knightsen, Ala., Company B, 1st Ala. Heavy Artillery.*
4. When and where and in what company and regiment did you enlist or serve? *from March 1862, 1st Ala. Heavy Artillery.*
5. How long did you remain in such company and regiment? *from March 1862, till Nov. 1864.*
6. For how long a period did you discharge regular military duty? *2 1/2 years.*
7. When, where and under what circumstances were you discharged from service? *from Point Lookout, Md., but was near Knightsen, Ga.*
8. What is your present occupation? *None.*
9. How much can you earn (gross) per annum by your own exertions or labor? *Nothing.*
10. What has been your occupation since 1865? *None.*
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *Infirmary and poverty.*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? *When I was discharged from service I was wounded in the leg and arm and from that time I have been unable to do any work.*
13. What property, effects or income do you possess and its gross value? *None.*
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? *None.*
15. In what County did you reside during those years and what property did you then return for taxation? *Barlow.*
16. How were you supported during the years 1895 and 1896? *A little from my son, but mainly from Barlow County.*
17. How much did your support cost for each of these years, and what portion did you contribute thereto by your own labor or income? *I do not know. Nothing.*
18. What was your employment during 1895 and 1896? What pay did you receive in each year? *Nothing. Nothing.*
19. Have you a family? If so, who composes such family? Give their means of support? Have they a home? *Have a wife, son of 13, and nothing from himself.*
20. Are you receiving any pension, if so what amount and for what disability? *None.*

Sworn to and subscribed before me this

John Stockman
John A. Cobb
W. B. Anderson
Barlow County.

Every Question MUST be Answered.

Stockman John
No. 1487
INDIGENT PENSION
1897.

John Stockman
Barlow County.

Approved 7/11 1897.

WARRANT HANDED TO

att

ED. W. HARRISON, STATE PRINTER, ATLANTA.

13. What property, effects or income do you possess and its gross value? None

14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? None

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

16. How were you supported during the years 1895 and 1896? A little from my son but mainly from Barlow's family

17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? I do not know. Nothing

18. What was your employment during 1895 and 1896? What did you receive in each year? Nothing Nothing

19. Have you a family? If so, who composes such family? Give their means of support? Have they a household? Have a wife, an 8 yr. and 4 yr. old son

20. Are you receiving any pension, if so what amount and for what disability? None

Sworn to and subscribed before me this the 5th day of January 1897. Sam Stockman
W. W. Stockman Ordinary. Applicant.
of Barlow County.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA

Barton County, Thermast Jones
personally came before me, John Strickman and
and P. H. Buford both known to me as reputable physicians
of said county, who being personally sworn, say on oath that they have examined carefully
John Strickman, applicant for pension under the Act of 1894, and after

Each personal examination may that his precise physical condition is as follows:

He is seventy two years (72) old, has an inguinal hernia, left hip, and has ankylosis of the right ankle joint, the result of a cut with an ax and has been using an Crutches since Dec 2^d 1870 and is still unable to carry m

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

Sworn to and subscribed before me, this }
the 13th day of July 1897. }
Geo. W. H. G. B. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Barrow County.

I, Wm. H. Burroughs, Ordinary in and for said County, hereby certify that
(the applicant) John M. Stockman 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.: J. L.
Burroughs
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 was signed.

I further certify that the tax digests of Benton County show that applicant returned for taxation in his name in 1895, _____ dollars of property, and in 1896, _____ dollars of property.

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

Witness my hand and seal of office this 15th day of Febry 1897.

JW Hendrick 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." Additional affidavits may be attached if blank spaces are insufficient.

8. What property, effects or income has the applicant? (Give your means of knowledge.)
We do not know

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? *We do not know*

10. What is the applicant's occupation and physical condition? *Was a shoemaker by last we know of him but do not know any thing about it at present*

11. Is the applicant unable to support himself by labor of any sort, if so, why? *We do not know*

12. How was he supported during the years 1895 and 1896? *We do not know*

13. What portion of his support for these two years was derived from his own labor or income? *We do not know*

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? *We do not know*

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

Sworn to and subscribed before me, this *11th* day of *Feb* 1897. *W. B. Perry* Notary Public

the *2* day of *Jan* 1897. *W. H. Thompson* Ordinary, *Judge of Probate*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Bartow County.

I, *G. W. Hendricks* Ordinary in and for said County, hereby certify that the applicant *John Stockman* 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. Burrrough* 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 was signed.

I further certify that the tax digests of *Bartow* County show that applicant returned for taxation in his name in 1895, _____ dollars of property, and in 1896, _____ dollars of property.

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

Witness my hand and seal of office this *10th* day of *Feb* 1897.

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

NOTE.

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

POWER OF ATTORNEY.

State of Georgia,

Bartow County.

I, *John Stockman* hereby authorize *G. W. Hendricks* of *Bartowville Ga.*

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *8th* day of *January* 1898.

Executed in presence of

L. Burrrough
H. P. [illegible]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, *John Stockman* hereby authorize *G. W. Hendricks* of *Chadwellville*

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

Witness my hand and seal this *14* day of *Jan* 1898.

Executed in presence of *John Stockman* (L. S.)

John H. [illegible]

INDIGENT
SOLDIER'S PENSION,
1898.

Name *John Stockman*
County *Bartow*

WARRANT ISSUED

1898.

RICHARD JOHNSON,
Commissioner of Pensions

WARRANT HANDLED TO

REC. W. HARRISON, STATE PRINTER, ATLANTA

No date

INDIGENT
SOLDIER'S PENSION,
1899.

Name *John Stockman*
County *Bartow*

WARRANT ISSUED

1899.

RICHARD JOHNSON,
Commissioner of Pensions

WARRANT HANDLED TO

REC. W. HARRISON, STATE PRINTER, ATLANTA

No date

Stockman, John
Barlow
 ACT OF 13 DEC. 1864.
 (For Those Already Enrolled.)
 No. *2308*
 INDIGENT
 SOLDIER'S PENSION,
 1898.
 Name *John Stockman*
 County *Barlow*
 WARRANT ISSUED
1121 1898.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT FORWARDED TO
W. H. Hendricks
 900 W. HARRISON, STATE PRINTER, ATLANTA.

Stockman, John
Barlow
 CODE SEC. 1354.
 (For Those Already Enrolled.)
 No. *2308*
 INDIGENT
 SOLDIER'S PENSION,
 1899.
 Name *John Stockman*
 County *Barlow*
 WARRANT ISSUED
1130 1899
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT FORWARDED TO
W. H. Hendricks
 900 W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *John Stockman* 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 *Dec* 1870; 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 *Alabama*) during the war between the States, and served for the term of *2 1/2 yrs* in Company *B*, of *44*th Regiment of *Alabama*; that his physical condition is as follows: *Right Arm wounded leg and general prostration*

that his property consists of the following items *nothing*

of the value of *no* 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 *3rd* day of *January* 1898. *John Stockman*
W. H. Hendricks Ordinary.

State of Georgia,
Barlow County.

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

Given under my official signature and seal, this *3rd* day of *January* 1898.



W. H. Hendricks
 Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *John Stockman* 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 *any day* 1870; 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 *Alabama*) during the war between the States, and served for the term of *2 years* in Company *B*, of *44*th Regiment of *Alabama*; that his physical condition is as follows: *Not able to work from old age and suffer from rupture also from old cut on ankle.*

that his property consists of the following items

None in goods of any kind
 of the value of *no* 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 *Barlow* county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, the *14* day of *Jan* 1899. *John Stockman*
J. R. Anderson Ordinary.

State of Georgia,
Barlow County.

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

Given under my official signature and seal, this *14* day of *January* 1899.



W. H. Hendricks
 Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.
 NOTE.—An 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 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 3rd day of January 1898. } John Stockman
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 John Stockman the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 3rd day of January 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 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 14 day of January 1899. } John Stockman
J. R. Anderson Ordinary.

State of Georgia,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with John Stockman 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 14th 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.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, John Stockman 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 Chuck

Witness my hand and seal, this 6 day of January 1900.

John Stockman [L. S.]
mark

Executed in presence of

J. R. Anderson

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, John Stockman 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 Chuck

Witness my hand and seal, this 2nd day of January 1901.

John Stockman [L. S.]
mark

Executed in presence of

John Anderson

CODE SEC. 1254.
(For These Already Enrolled.)

No. 2130

INDIGENT

SOLDIER'S PENSION,
1900.

Name John Stockman
County Barlow

WARRANT ISSUED

January 25 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Hendricks
No date

John W. Lindsey, State Printer, ALBANY.

CODE SECTION 1254.
(For These Already Enrolled.)

No. 1789

INDIGENT

SOLDIER'S PENSION,
1901.

Name John Stockman
County Barlow

WARRANT ISSUED

1/29 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

G. W. Hendricks
No date

John W. Lindsey, State Printer, ALBANY.

Stockman John
Barlow County

CODE REC. 1894.
(For These Already Enrolled.)

NO. *2130*

INDIGENT
SOLDIER'S PENSION,
1900.

Name *John Stockman*
County *Barlow*

WARRANT ISSUED
January 25 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wendrick

W. W. Lindsey, State Printer, Albany.

No date

Stockman John
Barlow County

CODE SECTION 154
(For These Already Enrolled.)

No. *1789*

INDIGENT
SOLDIER'S PENSION.
1901.

Name *John Stockman*
County *Barlow*

WARRANT ISSUED
1129 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. W. Lindsey

W. W. Lindsey, State Printer, Albany.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *John Stockman* 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 *fall* day of *fall* 1870; that he is *75* years old and by occupation a *farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Alabama*) during the war between the States, and served for the term of *3 yrs* in Company *B*, of *44*th Regiment of *Alabama*; that his physical condition is as follows: *Disabled to the extent of doing any labor on account of wound in leg and from rupture above*; that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 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 *6th* day of *January* 1900, *John X Stockman* his *mark* Ordinary. *G. W. Hendricks*

State of Georgia,
Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *John Stockman* 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.—Affidavit should not be attested before January 1st, 1900.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *John Stockman* 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 *fall* day of *fall* 1870; 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 *Alabama*) during the war between the States, and served for the term of *3 yrs* in Company *B*, of *44*th Regiment of *Alabama*; that his physical condition is as follows: *Broken down from age and badly ruptured, totally unable to work*; that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of *Barlow* county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this *2nd* day of *January* 1901, *John X Stockman* his *mark* Ordinary. *G. W. Hendricks*

STATE OF GEORGIA,
Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *John Stockman* 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 *2nd* day of *January* 1901, *G. W. Hendricks* Ordinary *Barlow* County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

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. John X Stockman 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 John Stockman 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.



Note.—The blank spaces must be filled.
Note.—A Affidavit should not be attested before January 1st, 1900.

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 Barlow county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this, the 2nd day of January, 1901. John X Stockman 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 John Stockman 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 2nd day of January, 1901.



Ordinary Barlow County.

Note.—The blank spaces must be filled.
Note.—A Affidavit should not be attested before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, John Stockman 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 9th day of January, 1902.

John X Stockman [L. S.] mark

Executed in presence of

John H Howard

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, John Stockman 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 9th day of February, 1903.

Executed in presence of John X Stockman [L. S.] mark
J N McElroy

CODE SECTION 124
(FOR THOSE ALREADY ENROLLED.)

No. 3206

INDIGENT
SOLDIER'S PENSION
1902.

Name John Stockman
County Barlow
Co. B Regiment 44
Ala vls

WARRANT ISSUED
1131 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Book

Geo. W. Harrison, State Printer, Atlanta.

No data

CODE SECTION 124
(FOR THOSE ALREADY ENROLLED.)

No. 3705

INDIGENT
SOLDIER'S PENSION
1903.

Name John Stockman
County Barlow
Co. B Regiment 44
Ala vls

WARRANT ISSUED
248 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

COURT ACTIVE 12A
(FOR THOSE ALREADY ENROLLED.)

No. 3206

INDIGENT

**SOLDIER'S PENSION
1902.**

Name John Stockman
County Barlow
Co. B Regiment 44
Ala val

WARRANT ISSUED

11/31 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Gray

John W. Harrison, State Printer, Atlanta.

No date

COURT SECTION 12A
(FOR THOSE ALREADY ENROLLED.)

No. 3705

INDIGENT

**SOLDIER'S PENSION
1903.**

Name John Stockman
County Barlow
Co. B Regiment 44
Ala val

WARRANT ISSUED

1/1 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears John Stockman 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 December 1870; that he is 76 years old and by occupation a nothing that he enlisted in the military service of the Confederate States (or of the State of Ala val) during the war between the States, and served for the term of 24 yrs in Company B, of 44th Regiment of Ala val; that his physical condition is as follows: Very bad. Can scarcely walk. Crippled in legs

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 9th day of July 1902, John Stockman his Ordinary. mark

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 9th day of July 1902, G. W. Nindrick Ordinary. Barlow County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears John Stockman 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 1870; that he is 78 years old and by occupation a farm, that he enlisted in the military service of the Confederate States (or of the State of Ala val) during the war between the States, and served for the term of 24 yrs in Company B, of 44th Regiment of Ala val; that his physical condition is as follows: Physical condition extremely bad. Can walk only by aid of a crutch or stick

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 9th day of July 1903, John Stockman his Ordinary. mark

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 9th day of July 1903, G. W. Nindrick Ordinary. Barlow County.

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

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 Barlow county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 9th day of Jan 1902, John X Stockman his mark Ordinary.

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 9th day of Jan 1902.

G W Hendricks Ordinary Barlow County.

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

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 9th day of Feb 1903, John X Stockman his mark Ordinary.

STATE OF GEORGIA,

Barlow County.

I, G W Hendricks Ordinary of said County, do certify that I am well acquainted with John Stockman 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.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County.

I, John Stockman hereby authorize John W. Lindsey 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 3rd day of Jan 1904.

Executed in presence of

John X Stockman [L. S.]
John W. Lindsey [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County.

I, John Stockman 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 21st day of Jan 1905.

Executed in the presence of

John X Stockman [L. S.]
John W. Lindsey [L. S.]

(FOR THOSE ALREADY ENROLLED.)

No. 5329

INDIGENT

SOLDIER'S PENSION
1904.

Name John Stockman

County Barlow

Co. B Regiment 44

WARRANT ISSUED

29 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDSD TO

Ordly

Geo. W. Harrison, State Printer, Atlanta.

no date

(FOR THOSE ALREADY ENROLLED.)

No. 3787

INDIGENT

SOLDIER'S PENSION
1905.

Name John Stockman

County Barlow

Co. B Regiment 44

WARRANT ISSUED

FEB 7 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDSD TO

Ordly

Geo. W. Harrison, State Printer, Atlanta.

Stockman, John
Bartow
COUS SETTING 1254.
(FOR THOSE ALREADY ENROLLED.)
No. *5329*
INDIGENT
SOLDIER'S PENSION
1904.
Name *John Stockman*
County *Bartow*
Co. *B* Regiment *44*
WARRANT ISSUED
2/9 1904.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
Only
Geo. W. Harrison, State Printer, ALBANY.

no date

Stockman, John
Bartow
COUS SETTING 1254.
(FOR THOSE ALREADY ENROLLED.)
No. *5782*
INDIGENT
SOLDIER'S PENSION
1905.
Name *John Stockman*
County *Bartow*
Co. *B* Regiment *44*
WARRANT ISSUED
FEB 7 1905.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
P
Geo. W. Harrison, State Printer, ALBANY.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Bartow County.
Personally appears *John Stockman* 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 *Jan* 18*71*; that he is *79* years old and
by occupation a *farmer*, that he enlisted in the military service of the Con-
federate States (or of the State of *Fla*) during the war between the
States, and served for the term of *3 yrs* in Company *B*, of *44*th Regiment
of *Fla Vols*; that his physical condition is as
follows: *He is extremely feeble from*
old age and infirmities
that his property consists of the following items:

of the value of *25* Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this *30*
day of *Jan* 1904. *John Stockman*
G. W. Hendricks Ordinary. *mark*

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

Given under my official signature and seal, this *30*
day of *Jan* 1904. *G. W. Hendricks*
Ordinary *Bartow* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Bartow County.
Personally appears *John Stockman* 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 *Jan* 1870; that he is *80* years old and
by occupation a *blum maker*, that he enlisted in the military service of the Con-
federate States (or of the State of *Fla*) during the war between the
States, and served for the term of *3 yrs* in Company *B*, of *44*th Regiment
of *Fla Vols*; that his physical condition is as
follows: *He is in very bad health and very*
feeble
that his property consists of the following items:

of the value of *25* Dollars. I am now earning,
by my labor, *25* Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this *27th*
day of *Jan* 1905. *John Stockman*
G. W. Hendricks Ordinary. *mark*

STATE OF GEORGIA,
Bartow County.
I, *G. W. Hendricks* Ordinary of said County,
do certify that I am well acquainted with *John Stockman*
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 *27th*
day of *January* 1905. *G. W. Hendricks*
Ordinary *Bartow* County.

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

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

30 day of Jan 1904.

Ordinary.

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this

30 day of Jan 1904.

Ordinary.

Barlow County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1904.

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

27 day of Jan 1905.

Ordinary.

STATE OF GEORGIA,

Barlow County.

I, G. W. Lindrick Ordinary of said County, do certify that I am well acquainted with John Stockman 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

27 day of Jan 1905.

Ordinary.

Barlow County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, John Stockman hereby authorize G. W. Lindrick of Barlow County, Ga. to receive and receipt for the pension allowed, and request that he remit same to me at Barlow Ga. by me

WITNESS my hand and seal, this 28 day of Jan 1906.

Executed in the presence of

J. M. McElroy

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, John Stockman hereby authorize G. W. Lindrick of Barlow County, Ga. to receive and receipt for the pension allowed, and request that he remit same to me at Barlow Ga. by me

WITNESS my hand and seal, this 28 day of Jan 1907.

Executed in presence of

J. M. McElroy

Form 134.

(FOR THESE ALREADY ENROLLED.)

No. 2136.

INDIGENT
SOLDIER'S PENSION
1906.

Name John Stockman
County Barlow
Co. B Regiment 44 Reg.

WARRANT ISSUED

JAN 23 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

See Pension Bureau and Pension Co. for instructions.

no data

Form 134.

(FOR THESE ALREADY ENROLLED.)

No. 385

INDIGENT
SOLDIER'S PENSION
1907.

Name John Stockman
County Barlow
Co. B Regiment 44 Reg.

WARRANT ISSUED

FEB 4 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

See Pension Bureau and Pension Co. for instructions.

Stockman, John
Barlow Co
Cons Section 1234.
(FOR THOSE ALREADY ENROLLED.)
No. *2130*
**INDIGENT
SOLDIER'S PENSION
1906.**
Name *John Stockman*
County *Barlow*
Co. *B* Regiment *44 Reg*
WARRANT ISSUED
JAN 29 1906
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO

Stockman John
Barlow Co
Cons Section 1234.
(FOR THOSE ALREADY ENROLLED.)
No. *3858*
**INDIGENT
SOLDIER'S PENSION
1907.**
Name *John Stockman*
County *Barlow*
Co. *B* Regiment *44 Reg*
WARRANT ISSUED
FEB 4 1907
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Barlow County.

Personally appears *John Stockman* 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 *August* day of *1870*; that he is *80* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 yrs* in Company *B*, of *44th* Regiment of *Ala* *Vol*; that his physical condition is as follows: *Old and infirm unable to do any labor whatever for a support*

that his property consists of the following items:

of the value of *3* Dollars. I am now earning by my labor, *3* 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 *29* day of *Jan* 1906. *John his*
J. N. Anderson Ordinary. *mark*

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this *29th* day of *Jan* 1906.
J. N. Anderson
Ordinary *Barlow* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Barlow County.

Personally appears *John Stockman* 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 *—* 1870; that he is *82* years old and by occupation a *none*, that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *3 yrs* in Company *B*, of *44th* Regiment of *Ala* *Vol*; that his physical condition is as follows: *Prostrated, Bad condition*

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the *31* day of *Jan* 1907. *John his*
J. N. Anderson Ordinary. *mark*

State of Georgia,

Barlow County.

I, *J. N. Anderson* Ordinary of said County, do certify that I am well acquainted with *John Stockman* 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 *26th* day of *January* 1907.
J. N. Anderson
Ordinary *Barlow* County.

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

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

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

Sworn to and subscribed before me, this the 23 day of Jan, 1906. John H. Stockman
J. N. Hendricks Ordinary. mark

State of Georgia,
Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with John Stockman 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 23rd 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.

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 21 day of Jan, 1907. John H. Stockman
J. N. Hendricks Ordinary. mark

State of Georgia,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with John Stockman 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 26th day of January, 1907.

G. W. Hendricks
Ordinary Barlow County.

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

NAME Stockman, John YEAR 1897 COUNTY Barlow

WHEN AND WHERE BORN? October 3rd, 1825 Tuscaloosa, Ala.
Resident of Ga. since 1870.

ENLISTED WHEN AND WHERE? March 1862 Scottsville, Ala.

RANK.

COMPANY AND REGIMENT? Co. B, 44th, Ala. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Rheumatism, leg wound received in war.

CAPTURED, WHEN AND WHERE? was captured and carried to Point Lookout, Md.

RELEASED. November 1864.

WHEN AND WHERE SURRENDERED?

IF NOT INSTANTLY SURRENDERED, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. J. J. Little, W. B. Perry and J. C. Beach. Same command. No data.

Georgia
Barlow County, Barlow County, personally appeared before me, S. J. Burroughs said county to whom in oath says that he has known intimately the within named John Stockman that for the last three or four years, the said Stockman has been totally unable to support himself by labor of any sort; that he has no property or income; that said Stockman has been supported partly from the Pauper Fund of Barlow County; that his son John helps him a little, but very little, as he is dependent on his own labor for a support. The county has been furnishing him from the Pauper Fund for about seven years. That said Stockman is totally dependent and physically unable to work without his crutches or sticks. Applicant has no interest in the recovery of a pension by this applicant.

Sworn to and
Subscribed before
me. Feb 15th 1897
G. W. Hendricks
Ordinary

S. J. Burroughs

NAME Stockman, John YEAR 1897 COUNTY Bartow

WHEN AND WHERE BORN? October 3rd. 1825 Tuscaloosa, Ala.
Resident of Ga. since 1870.

ENLISTED WHEN AND WHERE? March 1862 Scottsville, Ala.

RANK.

COMPANY AND REGIMENT? Co. B, 44th. Ala. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Rheumatism, leg wound received in war.

CAPTURED, WHEN AND WHERE? Was captured and carried to Point Lookout, Md.

RELEASED. November 1864.

WHEN AND WHERE SURRENDERED?

IF NOT IN FRONT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. J.J. Little, W.B. Perry and J.C. Reach. Same command. No data.

Singer personally appeared before me
Barlow County, Ga. Remond of said county who
in oath says that he has known intimately, the
within named John Stockman, that for the
last three or four years, the said Stockman
has been totally unable to support himself by
labor of any sort; that he has no property or
income. That said Stockman has been supported
partly from the Pauper Fund of Barlow County,
that his son John helps him a little, but very
little, as he is dependent on his own labor for
support. The county has been furnishing him
from the Pauper Fund for about seven years.
That said Stockman is totally dependent and
physically unable to work without his
Crutches or sticks. Applicant has no
interest in the recovery of a pension by this
applicant

Swoon to and
Subscribed before
me. Feb 15th 1897
G.W. Kendrick
Clerk

S. Burroughs

The State Of Alabama,
Bibb County,

I N. H. Thompson, Judge of Probate in and for said State and County
do hereby certify that the witnesses whose names are signed to the fore-
going application are men of good standing and untarnished character
Given under my hand and seal this the 3rd day of February 1897.

N. H. Thompson
Judge of Probate

The State Of Alabama,

Bibb County,

I N. H. Thompson, Judge of Probate in and for said State and County
do hereby certify that the witnesses whose names are signed to the foregoing
application are men of good standing and untarnished character
Given under my hand and seal this the 3rd day of February 1897.

N. H. Thompson

Judge of Probate

for Recd
Stockman, L. J. (M)

5/27/1912

Barrow Co.

No. *1*

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.

County *Barrow*

Name *L. J. Stockman*

Widow of *John Stockman*

Company *B. L. H. Regd*

Approved

(Signature)

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, Atlanta.

11/9/11 *11/9-1911*

Widow of John Stockman
Company B-H Ala Regt
Approved (initials)
J. W. LINDSEY,
Commissioner of Pensions
CHAR. F. BYRD, State Printer, Atlanta.

11/9/11 11/9-1911

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Barlow County.

Personally before me comes Mrs L. J. Stockman of said County, who, after being duly sworn, on oath says, that she is the widow of John Stockman to whom in the County of Barlow State of Ala she was married on the 5th day of Oct 1862 and that she remained his wife, and resided with him to the date of his death in Nov 62 1911 and that she has not since his death remarried. At the time of his death he was a resident of Barlow County, in Ala said State of Georgia, and he was on the Impigment Pension Roll of the State and paid a pension of \$60.48 in Barlow County for 1910 per annum on account of being a soldier in Company 4th Ala Regiment Volunteers of State Militia.

At the death of John Stockman he was in the use and possession of the following property. No property of any kind

of the cash value of \$.

What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.) none of any kind

Acres land.

Horses and Mules.

Hogs, Cows, etc.

Total Cash value of all property.

That she is now a bona fide resident citizen of said County of Barlow and she has so continuously resided since 42 day of Oct 1862.

Sworn to and subscribed before me, this 12th day of Oct 1911.
Wm Anderson Ordinary,
of Barlow County.

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

STATE OF GEORGIA,

Barlow County.

Personally before me come J. M. Danison known to be responsible and truthful persons, residing in Barlow County, who after having duly sworn on oath, say: that of their own personal knowledge L. J. Stockman who made the foregoing affidavit, is the lawful widow of John Stockman who died in Barlow County in said State of Ala on 62 day of Nov 1911 and that she has not since remarried. That she and John Stockman lived together as man and wife and that she and he had resided together as man and wife continuously since the 5th day of Oct 1862 and that the John Stockman was the same man who was on the pension roll of said State from Barlow County when he died.

Sworn to and subscribed before me, this 12th day of Oct 1911.
Wm Anderson Ordinary,
of Barlow County.

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.

County Barlow

Name L. J. Stockman

Widow of John Stockman

Company B-H Ala Regt

Approved (initials)

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, ATLANTA.

11/9/11 11/9-1911

has so continuously resided since _____ day of _____ 1911. Sworn to and subscribed before me, this the _____ day of _____ 1911. _____ Ordinary, of _____ County.

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

STATE OF GEORGIA,

Barlow County.

Personally before me come J. M. Davidson known to be responsible and truthful persons, residing in _____ County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. J. M. Davidson who made the foregoing affidavit, is the lawful widow of John Blackman who died in _____ County in said State of _____ on 62 day of _____ 1911 and that she has not since remarried. That she has not and that she and he had resided together as man and wife continuously since _____ day of _____ 1911 and that the same was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the _____ day of _____ 1911. _____ Ordinary, of _____ County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes _____ who after being sworn on oath says, that they are freeholders of said County, and that they know _____ of said County and knew her said husband _____ at his death on the _____ day of _____ 1911 that she and he were in the use, possession and control of the following property at his death to wit: _____

of the value of \$ _____ That she is now in the use, possession and control of the following property to wit: _____

of the value of \$ _____

Sworn to and subscribed before me, this the _____ day of _____ 1911. _____ Ordinary, of _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, J. M. Davidson Ordinary of said County, do certify, that I know Mrs. J. M. Davidson 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 _____ day of _____ 1911 and for many years before.

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

That the tax Books of _____ County shows that _____ returned property to the amount of _____ for 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____

Sworn under my hand and official seal of office this _____ day of _____ 1911. (SEAL.) _____ Ordinary, of _____ County.

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

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Bartow County.

I, Geo. B. Bartow Ordinary of said County, do certify, that, I know Mrs. L. J. Stockman 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 10th Nov 1911 and for many years before That I also know J. M. Davidson witness as to marriage and I also know J. M. Davidson who I know to be a resident free holder of said County and that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Bartow County shows that she returned property to the amount of 2 for 1908 \$ 2 for 1909 \$ 2 for 1910 \$ 2

Sworn under my hand and official seal of office this 8th day of Nov 1911
(SEAL) Geo. B. Bartow Ordinary.

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

Georgia Bartow County -
Personally Came before me Geo. B. Bartow J. C. Butts of said County, who-oath says that she knows of her own personal knowledge that John Stockman and Mrs. L. J. Stockman were man and wife and lived together as such from 1875 to 1910, at which time John Stockman died in Kingston Bartow County Georgia Nov-6th 1910, and she the said L. J. Stockman, his lawful widow, has not re-married since the death of her husband. She further says that the said Mrs. L. J. Stockman has no means of support or property of any kind. Davidson and subscribed before me Oct. 23rd 1911 J. C. Butts Geo. B. Bartow Ordinary

Georgia Bartow County -
Personally Came before me John M. Davidson and on oath says he knew John Stockman, who at the time of his death, was drawing a pension of the time of his death, that he has known his widow Mrs. L. J. Stockman since 1875; that they lived together as man and wife from that date 1875 till the death of John Stockman which occurred in Nov-6th 1910; that they were living together up to the death of the said John Stockman; and that she has not re-married since the death of the said husband. John Stockman. She has no property or means of support, whatever. Davidson and subscribed before me Oct. 23rd 1911 John M. Davidson Geo. B. Bartow Ordinary

that she knows of her own personal
knowledge that John Stockman and
Mrs. L. J. Stockman were man and wife
and lived together as such from ^{Decr.} 1869
to 1910, at which time John Stockman
died in Kingston Parish, La. on
Nov-6th 1910, and she the said L. J.
Stockman, his lawful widow, has
not remarried since the death of her
husband, she further says that the
said Mrs. L. J. Stockman has no means
of support or property of any kind
known to and subscribed
before me Oct. 23rd 1911 J. C. Butler
Guthrie
Ordinary

Davidson and on oath says he knew
John Stockman, who at the time of
his death, was drawing a pension, at
the time of his death, that he has
known his widow Mrs. L. J. Stockman
since 1875; that they lived together
as man and wife from that date
1875 till the death of John Stockman
which occurred in Nov-6th 1910;
that they were living together up
to the death of the said John Stockman;
and that she has not remarried
since the death of the said husband,
John Stockman. She has no property
or means of support whatever.
Known to and subscribed John M. Davidson
before me, Dec. 23rd 1911
Guthrie
Ordinary

Stroud, M. E. (Mrs. Bettie)
Barlow County

No. *OK for 1911*

Widow's Pension

UNDER ACT 1910.

✓
County *Barlow*

Name *M. E. Stroud*

Widow of *Peter H. Stroud*

2d pt 44 Aug.

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

11/30/16

Widow of *John H. Stroud*
28 Jan 49 Reg.
 J. W. LINDSEY,
 Commissioner of Pensions.
 Chas. F. Byrd, State Printer.
1/30/46 -

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

STATE OF GEORGIA,
Bartow County.
 Personally before me comes *M. E. Stroud* 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? *M. E. Stroud, Bartow, Fla.*
2. How long and since when have you been a continuing resident in the State of Georgia? *I have lived in Georgia since birth (1844)*
3. When, where and to whom were you married? *Wm. Stroud, Co. 42, 1st Reg. U.S. Inf.*
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.) *Company 42, 1st Reg. U.S. Inf.*
5. When and where did the Commands of your husband surrender or discharge from the army? *gas*
6. Was your husband personally present at the time of the surrender or discharge of this Command?
7. If he was not present state clearly where he was? *gas*
8. Where was his Command when he left?
 a. For what cause did he leave his command?
 b. By whose authority did he leave his Command?
 c. For how long was he granted leave of absence?
 d. What was his physical condition when he left his Command?
 e. What effort did he make to return to his command?
 f. In what way was he prevented from going back to Command?
 g. Was he captured by the enemy at any time?
 h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
9. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? *July 1905, Bartow, Fla. - we were*
10. 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.) *None*
11. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) *None*
12. What property of any description of any value have you now? *None*
13. What are your annual earnings or income and their value? *Nothing*
14. Have you heretofore been paid a pension by the State? If so, when and for what cause were you struck from the Roll? *No*

Sworn to and subscribed before me this the *10th* day of *Feb*, 1910, at *Bartow* County, Georgia.
M. E. Stroud
John H. Stroud
 Ordinary

Questions for the Witnesses as to Service of Husband and Marriage.
 STATE OF GEORGIA,
Union County.
 Personally before me comes *Wm. S. Gooden* who after being duly sworn true answers to make, to the following questions, answers as follows:

Widow of *John H. Stroud*
28 Jan 49 Reg.
 J. W. LINDSEY,
 Commissioner of Pensions.
 Chas. F. Byrd, State Printer.
1/30/46 -

1. If so, when and where captured and where held as a prisoner, and when and for what cause released?

2. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? July 1905, Baston Ga. - me cause

3. 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.) None

4. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None

5. What property of any description of any value have you now? None

6. What are your annual earnings or income and their value? Nothing

7. Have you heretofore been paid a pension by the State? If so, when and for what cause were you struck from the Roll? No

Sworn to and subscribed before me this the 10th day of Sept 1910 M. E. Shroud Ordinary, Barton County.

Questions for the Witnesses as to Service of Husband and Marriage.
 STATE OF GEORGIA,
Union County,
 Personally before me comes Mc. S. Goodwell 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? Mc. S. Goodwell, Union Co Ga

2. How long and since when have you known M. E. Shroud applicant? 10 years

3. How long and since when has she continuously resided in this State? (Give date.) All the time I have known her

4. When and to whom was she married? How do you know? 1861, till about Sept 1862, 14 months

5. How long and since when did M. E. Shroud her husband? March 1861, till about Sept 1862, 14 months

6. When, where and in what Company and Regiment did M. E. Shroud enlist? March 1861, Hiram Co, Ga, Co. 4, 1st Regt. Inf.

7. Were you a member of the same Company? No

8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? 14 months, till Sept 1862

9. When, and where did his Command surrender, and was discharged? Don't know

10. Were you personally present when it was surrendered? No If not where were you Hamlet, Ala and how came you there? Transferred from firm co 6, 1st Regt. Inf.

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

12. Do you state if of your own personal knowledge? (State all you know fully, and how you know it.) Don't know

13. For what cause, if you know of your own knowledge was he prevented from returning to his Command? Don't know

14. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Don't know

Sworn to and subscribed before me this the 3 day of Oct 1910 M. S. Goodwell Ordinary, Union County.

AFFIDAVIT OF TWO FREEHOLDERS.
 STATE OF GEORGIA,
Union County.
 Personally before me comes _____ who on oath says that they are freeholders of said County and that they know of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows:

Personal property	\$
Notes and accounts due	\$
Total	\$

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

Personal property	\$
Money, Notes and accounts	\$

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

Acres of land, worth	\$
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 _____ day of _____ 19____ M. S. Goodwell Ordinary, _____ County.

ORDINARY'S CERTIFICATE.
 STATE OF GEORGIA,
Barton County,
 I G. W. Nims Ordinary of said County do certify that, I know M. E. Shroud 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 in the 4th Nov. 1908.

That I also know _____ the witness who swears to the service of husband, and _____ 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 _____ Returned for Tax is for 1908 \$ nothing for 1910 \$ nothing

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

SEAL G. W. Nims Ordinary, Barton County.

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

10. Were you personally present when it was surrendered? *Yes* If not where were you? *Jamesville, Ala* and how came you there? *1st to Regular transfer from Co G, 1st to Regular*

11. Was the husband of applicant personally present at surrender? *Not known* 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? *Personal knowledge*

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 3 day of Oct 1918 *Wm. H. Caldwell*
of Bartow County, Fla. Ordinary.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County, _____

Personally before me comes _____ who on oath says that they are freeholders of said County and that they know of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows:

Personal property	\$
Notes and accounts due	\$
Total	\$

Schedule (B).

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

Personal property	\$
Money, Notes and accounts	\$

Schedule (C).

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

Acres of land worth	\$
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 _____ day of _____ 19 _____

Ordinary.

of _____ County.

Georgia, Towns County.

In person appeared before the undersigned Marshall Burch who after being by me duly sworn says: That he was personally acquainted with P. G. Stroud and that he was present on the 17th. day of September 1865, in Towns County Ga. and saw said P. G. Stroud and Mrs. Bettie Swanson married, that they remained in Towns County some ten or fifteen years and resided together as husband and wife during said time.

Sworn to and subscribed before me this the 24th. day of September 1910.

Marshall Burch

John M. Johnson
Ordinary Towns County Ga.

Sworn under my hand and official seal of office this _____ day of _____ 1918
SEAL. *Wm. H. Caldwell*
Ordinary, County Bartow

(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.

No 2153
Before the Ordinary of Towns County Jas C Baird & Wm Myers who upon oath say they know Peter G. Stroud as he served and came Regiment with him he was a good Soldier & the hosts say he remained with our Reg on April 1865
Sworn to & subscribed J. C. Baird before me this Wm Myers
7 Nov 1910
Marshall Burch
Wm

Georgia, Towns County.

In person appeared before the undersigned Marshall Burch who after being by me duly sworn says: That he was personally acquainted with P. G. Stroud and that he was present on the 17th. day of September 1865, in Towns County Ga. and saw said P. G. Stroud and Mrs. Bettie Swanson married, that they remained in Towns County some ten or fifteen years and resided together as husband and wife during said time.

Sworn to and subscribed
before me this the 24th. day
of September 1910.

John M. Johnson
Ordinary Towns County Ga.

Marshall Burch

No 21531
Before the Ordinary of Towns
County Jas C. Baird & M.
Myers who upon oath
say they know Peter G.
Stroud as he served in
Rams Regiment with
him he was a good Soldier
& the latter say he remained
with our Reg in April
1865

Sworn to & Subscribed J. C. Baird
before me this 24th day of
September 1910

Marshall M. Anderson
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow COUNTY.

Know all Men by these Presents, That I, Margaret Stroup

County of Barlow, State of Georgia, do hereby appoint
of Samuel Harrison

my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the
State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit, to duly autho-
rize 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 Sept 1893.

Margaret Stroup
M.M.S.

Executed in the presence of us:
Chas. E. Gyscomb

Charles E. Gyscomb
Charles E. Gyscomb

Witnesses:
Charles E. Gyscomb
Charles E. Gyscomb
Margaret Stroup
M.M.S.

GROUP, MARGARET
Chas. E. Gyscomb
Barlow Co
1893.

No. 4223

Widows' Pension.

for year ending February 15th, 1893.

PAID TO —

Mrs. Margaret Stroup

OF
Barlow County.

Warrant Issued

2/11

1893

AND HANDED TO

J. M. Hendricks

POWER

STATE OF GEORGIA

Barlow County

Know all Men by these

County of Atlanta

me and in my name to receive and State of Georgia as a widow of a Co- izing my said Attorney for receipt for any sum of money which may be IN WITNESS WHEREOF, day of 409

Executed in the presence of

Chas. G. Givens

Barlow County

allowed, send amount by

Barlow County

Warrant Issued

1893

AND HANDED TO

J. M. Hendricks

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Barlow County.

Know all Men by these Presents, That I,

Margaret Stroup

County of Atlanta

my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby author- izing 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 409 1893

Executed in the presence of us:

Chas. G. Givens

Barlow County

DIRECTIONS.

allowed, send amount by Chas. G. Givens, and oblige

Margaret Stroup

mmR

Affidavit to be Made by the Widow.

STATE OF GEORGIA.

In person came before me, the undersigned Ordinary

COUNTY OF Barlow

in and for the County of Barlow

Mrs. Margaret Stroup

, who being sworn according to law, says under

oath that she is the widow of Joseph Stroup, who was a soldier in the service of the Confederate States, and served as a member of Company B, of the

48 Regiment of 40 Volunteers; that he enlisted in said

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

Western Army up to May 1863 That while in the

Army, he was on the day of Spring 1863, (See Note No. 1)

wounded and placed in the hospital in Chatter nigger, and while there took mumps and mea

les and died of relapse of measles in the said hospital and was buried in Atlanta Ga

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 May 1863, and that she has resided in Georgia continuously since the day of 1863; 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, 1893, 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 May 1893, 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.

Widows' Pension.
for year ending February 15th, 1893.
PAID TO —
Mrs. Margaret Stroup
Barlow County.
Warrant Issued
J. M. Hendricks
AND HANDED TO
1893

1893.

Sheep Margaret

2. If the husband died after the war of wounds or disease, state fully and particularly how you, as witnesses, know the service as a soldier was the immediate cause of his death.

FOR THOSE HERETOFORE PAID.

Boston Caring

1896.

From order 1895

No. 2859

WIDOW'S PENSION,

for year ending February 10th, 1896.

PAID TO

*A. Martineau & Co
in Green County N.Y.
OF the 1895*

Boston

Widow Joseph Church

County

WARRENT ISSUED

7/1

1896.

ADD HANDED TO

W.C.

Gen. W. Harrison, State Treasurer.

given to from the State of Georgia as a Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

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

Executed in the presence of us:

J. S. Anderson
J. S. Stanford [L. S.]
DIRECTIONS.

Send amount by _____ to _____
me at _____, and oblige

Widow's Pension
1894
No. 136
To Margaret C. Stroup
Barlow
WIDOW'S PENSION,
for year ending February 15th, 1894.
PAID TO
Margaret C. Stroup
Barlow County.
WARRANT ISSUED
1894
AND HANDED TO
J. S. Anderson
1894.

of Barlow Co. Ga. to receive and receipt for the pension paid hereon and request that he remit same to S. W. Beckman Stamp Book Co.

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

Executed in the presence of
J. S. Anderson
P. C. Egner [L. S.]
Margaret C. Stroup
mark

Widow's Pension
1896
No. 2934
To Margaret C. Stroup
Barlow
WIDOW'S PENSION,
for year ending February 15th, 1896.
PAID TO
Margaret C. Stroup
Barlow County.
WARRANT ISSUED
1896
AND HANDED TO
W. Beckman
1896.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Barlow Margaret C. Stroup

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

Barlow State of Georgia, and that she has resided in said State continuously ever since birth 18 That she is the Widow of Joseph Stroup who was a Soldier in Company of the Forty third Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of March 1862 and served in the Army up to April or May 1864 That he lost his life on the day of May 1864 (State here

full particulars of the husband's death, when, where and from what cause.) (he had the mumps and measles and was wounded after he had gotten up which caused him to relapse, and he died some time about the month of May 1864. at or near Tunnel Hill Georgia.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1830; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this 20th day of Jan. 1894. *Margaret C. Stroup* Ordinary. Post-office Pickens Co.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Barlow Margaret C. Stroup

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

Barlow State of Georgia, and that she has resided in said State continuously ever since Birth 18 That she is the Widow of Joseph Stroup who was a Soldier in Company of the 43d Regiment of Ga

Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to May 1864 That he lost his life on the day of May 1864 (State here

full particulars of the husband's death, when, where and from what cause.) (He died of measles in hospital in Chatta Mingo Tenn.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1830, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Barlow County for the year ending February 15th, 1893, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this 10th day of Jan. 1896. *Margaret C. Stroup* Ordinary. Post-office Pickens Co.

the month of May 1864. at or near Sumner
Hill Georgia.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1830; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this
20th day of Jan^y 1894. *Margaret E. Shoup*
J. W. Hendricks Ordinary. Post-office *Felton Ga.*

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1830, and that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of *Bartow* County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this
10th day of Jan^y 1896. *Margaret E. Shoup*
J. W. Hendricks Ordinary. Post-office *mark*

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,

In person came before me, the undersigned Ordinary
County of *Bartow* in and for the County of *Bartow*
Mrs. *Margaret Shoup*, who being sworn according to law, says under
oath that she is the widow of *Joseph Shoup*, who was a soldier in
the service of the Confederate States, and served as a member of Company *B*, of the
48 Regiment of *90* Volunteers; that he enlisted in said
service on or about the day of *March* 1862, and was in the
Western Army up to *May* 1863. That while in the
Army, he was on the day of *Spring* 1863. (See Note No. 1)
was put in hospital in Chattahoochee and
while there took mumps and measles
and died in the hospital of the above
diseases before his wound got well

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 *May* 1830, and that she has resided in Georgia continuously since the day of *May* 1805; 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
29th day of Dec^r 1891. *Margaret E. Shoup*
J. W. Hendricks Ordinary. Post-office *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.

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

Form No. 2.

STATE OF GEORGIA, County of *Bartow*
J. W. Hendricks Ordinary in and for said County of
Bartow State of Georgia, hereby certify that I am acquainted with Mrs.
Margaret E. Shoup the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she
resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not
lived out of the State since that date. That she is the widow of *Joseph Shoup*
deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
the *22* day of *Jan^y* 1897.
J. W. Hendricks Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, *Bartow* County.
M. E. Shoup hereby authorize *J. W. Hendricks*
of *Leaksville Ga.* to receive and receipt for the pension paid hereto and request
that he remit same to *me* at *Leaksville Ga.*
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *22*
day of *Jan^y* 1897. *Margaret E. Shoup* [L. S.]
Executed in the presence of
J. S. Hill
Walker Hendricks

FOR THOSE HERETOFORE PAID.
1897.
No. 2208
WIDOW'S PENSION.
for year ending February 15th, 1897.
M. E. Shoup
widow of *Joseph Shoup*
Richard Johnson,
Commissioner of Pensions.
WARRANT ISSUED
2/2
AND HANDED TO
GNT
1897.

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 May 1825, and that she has resided in Georgia continuously since the _____ day of _____ 1800; 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 12th day of Dec 1891,
Wm. H. Edwards Ordinary.
Margaret E. Throup 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.

hereby authorize Wm. H. Edwards to receive and receipt for the pension paid hereto and request that he remit same to Margaret E. Throup at Leatonsville Ga
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22 day of July 1897.
Margaret E. Throup mark
 Executed in the presence of
J. S. Neal
Wm. H. Edwards

FOR THOSE HERETOFORE PAID
1897.
 No. 2288
WIDOW'S PENSION,
 for year ending February 15th, 1892.
M. E. Throup
 OF
Barlow
 widow of Joseph Throup
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED
2/2
 AND HANDED TO
W. H. Edwards
 1897.

Affidavit for Three Witnesses.

Form No. 2.

State of Georgia,
 County of Cherokee
John P. Abernethy
 and _____
 In person came before me, the undersigned Ordinary in and for said County, witnesses William H. Edwards

(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Margaret E. Throup of the County of Barlow State of Georgia, is the widow of Joseph Throup, who was a soldier in Company B of the 45 Regiment of Am. Vols. Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 10th day of March 1862. That while in said service, or by reason of said service in the Army, he lost his life as follows: he died Joseph Throup
at the battle of Battle Creek, his command being near
Chattanooga in the State of Tennessee, was a night or late
March from which he died on or about the first day
of May 1862

Our opportunity for knowing the facts stated in reference to death of applicant's husband were
by being with him the first Joseph Throup in command
of the 45th Am. Vols.

We further swear that Mrs. Margaret E. Throup 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 _____ day of _____ 1891,
Wm. H. Edwards Ordinary.
J. P. Abernethy
Wm. H. Edwards
W. H. Edwards

NOTE. Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,
 County of Barlow
 Personally Comes Mrs. Margaret E. Throup

who being sworn, says on oath, that she is a bona fide resident of said county of Barlow State of Georgia, and that she has resided in said State continuously ever since she was born 18____ That she is the Widow of Joseph Throup who was a Soldier in Company B of the 45 Regiment of Am. Vols. Volunteers, that enlisted in said regiment on or about the month of March 1862 and served in the Army up to May 1862 That he lost his life on the _____ day of May 1862 (State here full particulars of the husband's death, when, where and from what cause.) He died
of relapse of measles in hospital
at Chattanooga

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1846. that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Barlow County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1892:

Sworn to and subscribed before me, this 22 day of July 1897.
Wm. H. Edwards Ordinary.
Margaret E. Throup mark
 Post-office _____

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

*by being with him the fine people through no means
of the same command*

We further swear that Mrs. *Margaret Shoup* 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

5 day of *January* 1897.

Ordinary, W. Edwards
Ordinary.

NOTE. Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1846, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of *Barlow* County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this
22 day of *January* 1897.
G. W. Hendricks Ordinary.

for
Margaret E. Shoup
Post-office *mark*

POWER OF ATTORNEY.

State of Georgia, *Barlow* County.

I, *M. E. Shoup* hereby authorize *G. W. Hendricks*
of *Calhounville Ga* to receive and receipt for the pension paid hereon and request

that he remit same to *me* at *Calhounville Ga*

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

Executed in the presence of

John E. Scarborough
J. C. Owen

POWER OF ATTORNEY.

State of Georgia,

Barlow County.

I, *M. E. Shoup* hereby authorize *G. W. Hendricks*
of *Calhounville*

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

me at *Calhoun Ga*

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

day of *January* 1898.

Executed in presence of

G. W. Hendricks

WIDOW'S PENSION,
For year ending February 15th, 1898.

1898.

NO. *1111*

M. E. Shoup
of *Barlow* County,
Widow of *Joseph Shoup*

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO

G. W. Hendricks

Geo. W. HARRISON, STATE PRINTER, ATLANTA.

WIDOW'S PENSION,
For year ending February 15th, 1899.

1899.

NO. *2272*

M. E. Shoup
of *Barlow* County,
Widow of *Joseph Shoup*

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO

G. W. Hendricks

Geo. W. HARRISON, STATE PRINTER, ATLANTA.

Stroup, M. E.
Barlow
For Those Heretofore Paid.
1898.
NO. 1111
WIDOW'S PENSION,
For year ending February 15th, 1898.
PAID TO
Mrs. M. E. Stroup
of
Barlow
County,
Widow of
Joseph Stroup
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
AND HANDLED TO
Geo. W. Harrison, State Printer, Atlanta.

Stroup, M. E. Mrs.
Barlow County
For Those Heretofore Paid.
1899.
NO. 2272
WIDOW'S PENSION,
For year ending February 15th, 1899.
PAID TO
Mrs. M. E. Stroup
of
Barlow County
Widow of
Joseph Stroup
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
AND HANDLED TO
Geo. W. Harrison, State Printer, Atlanta.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Barlow M. E. Stroup

who, being sworn, says on oath, that she is a bona fide resident of said county of
Barlow State of Georgia, and that she has resided in said State
continuously ever since birth 18 That she is the Widow of
Joseph Stroup who was a Soldier in Company
of the 43 Regiment of Co
Volunteers, that he enlisted in said regiment on or about the month of May
1862 and served in the Army up to May 1863 That he lost his
life on the day of May 1863 (State here
full particulars of the husband's death, when, where and from what cause.) He died
of Malaria in hospital in Chattahoochee

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

Sworn to and subscribed before me, this
day of Jan'y 1898.
J. W. Hendricks Ordinary.
M. E. Stroup
Post-Office

State of Georgia,
Barlow County,
I G. W. Hendricks
Ordinary of said County, certify that I am well acquainted
with Mrs. M. E. Stroup who made the above affidavit and am satis-
fied 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 10th day of Jan'y 1898.
Given under my official signature and seal this 10 day of Jan'y 1898.
G. W. Hendricks
Ordinary of Barlow County.

Official
Seal.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Barlow M. E. Stroup

who, being sworn, says on oath, that she is a bona fide resident of said county of
Barlow State of Georgia, and that she has resided in said State
continuously ever since Since Birth 18 That she is the Widow of
Joseph Stroup who was a soldier in Company
of the 43 Regiment of 90
Volunteers, that he enlisted in said regiment on or about the month of March
1862 and served in the Army up to until his death 1862 That he lost his
life on the day of 1862 (State here
full particulars of the husband's death, when, where and from what cause.) He died in hospital in
Chattahoochee in 1862
from Pneumonia. Contracted
in army.

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.

I have been allowed a pension as a resident of Barlow County for the year ending
February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this
day of Jan'y 1899.
J. W. Hendricks Ordinary.
M. E. Stroup
Post-Office

State of Georgia,
Barlow County,
I G. W. Hendricks
Ordinary of said County, certify that I am well acquainted
with Mrs. M. E. Stroup who made the above affidavit and am satis-
fied 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 long time 18
Given under my official signature and seal this the 23 day of Jan'y 1899.
G. W. Hendricks
Ordinary of Barlow County.

Official
Seal.

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

I have been allowed a pension as a resident of Bartow County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this 10 day of January 1898. M. E. Stroup Post-Office mark

State of Georgia, Bartow County. } GW Hendricks Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Stroup 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 10th day of January 1898

Given under my official signature and seal this 10 day of January 1898. GW Hendricks Ordinary of Bartow County.



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

I have been allowed a pension as a resident of Bartow County for the year ending February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this 10 day of January 1899. Mrs. M. E. Stroup Post-Office mark

State of Georgia, Bartow County. } GW Hendricks Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Stroup 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 10th day of January 1898

Given under my official signature and seal this 10 day of January 1899. GW Hendricks Ordinary of Bartow County.



POWER OF ATTORNEY.

STATE OF GEORGIA, Bartow County. } M. E. Stroup hereby authorize GW Hendricks of Bartowville Ga to receive and receipt for the pension paid hereon and request that he remit same to me at Bartowville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th day of January 1900. M. E. Stroup [L. S.] mark

Executed in presence of J. W. N. Johnston

POWER OF ATTORNEY.

STATE OF GEORGIA, Bartow County. } M. E. Stroup hereby authorize GW Hendricks of Bartowville Ga to receive and receipt for the pension paid hereon and request that he remit same to me at Bartowville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 28 day of January 1901. M. E. Stroup [L. S.] mark

Executed in presence of J. W. N. Johnston

Stroup, M. E. (Mrs.)
Bartow County
To Those Hereofore Paid.
1900.
NO. 2271
WIDOW'S PENSION,
For year ending February 15th, 1900.
Mrs. M. E. Stroup
Bartow County,
Widow of Joseph Stroup
JNO. W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
JAN 19 1900,
AND HANDLED TO
Hendricks
OW. W. HARRISON, State Printer, Atlanta, Ga.

Stroup, Maryant
Bartow County
To Those Hereofore Paid.
1901.
No. 1066
WIDOW'S PENSION,
For year ending February 15th, 1901.
Mrs. M. E. Stroup
Bartow County,
Widow of Joseph Stroup
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
JAN 29 1901,
AND HANDLED TO
Hendricks
OW. W. HARRISON, State Printer, Atlanta, Ga.

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STATE OF GEORGIA
FOR WIDOWS HEREOFORE ALLOWED PENSIONS

Stroup, M.E. (Mrs)
Bartow County
To Those Heretofore Paid
1900.
NO. 2271
WIDOW'S PENSION,
For year ending February 15th, 1900.
PAID TO
Mrs. M. E. Stroup
Bartow County,
Widow of Joseph Stroup
JNO. W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
Jan 19, 1900,
AND HANDED TO
J. W. Lindsey
Geo. W. Harrison, State Printer, Atlanta, Ga.

Stroup, Margaret
Bartow County
To Those Heretofore Paid
1901.
No. 1066
WIDOW'S PENSION,
For year ending February 15th, 1901.
PAID TO
Mrs. M. E. Stroup
Bartow County,
Widow of Joseph Stroup
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
1/29 1901,
AND HANDED TO
J. W. Lindsey
Geo. W. Harrison, State Printer, Atlanta, Ga.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Bartow } M. E. Stroup

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 Dec 9 1869. That she is the Widow of Joseph Stroup who was a soldier in Company 43 of the 4th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of Feb'y 1862 and served in the Army up to May 1863. That he lost his life on the day of May 1863. (State here particulars of the husband's death, when, where and from what cause) He died in the hospital in Chattanooga with measles in 1863

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1863.

I have been allowed a pension as a resident of Bartow County for the year ending February 15th, 1899, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 6th day of Jan'y 1900. M. E. Stroup
G. W. Hendricks Ordinary. Post Office mark

State of Georgia, }
Bartow County. } Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Stroup, 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 1863.

Given under my official signature and seal, this 6th day of Jan'y 1900.
G. W. Hendricks
Ordinary of Bartow County.



Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Bartow } M. E. Stroup

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 all her life. That she is the Widow of Joseph Stroup who was a soldier in Company 43 of the 4th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to May 1863. That he lost his life on the day of May 1863. (State here particulars of the husband's death, when, where and from what cause) Had measles & mumps died in hospital in Chattanooga

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 1863 before 1869.

I have been allowed a pension as a resident of Bartow County for the year ending February 15th, 1900, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 28th day of Jan'y 1901. M. E. Stroup
G. W. Hendricks Ordinary. Post Office mark

State of Georgia, }
Bartow County. } Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Stroup, 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 1863.

Given under my official signature and seal, this 28th day of Jan'y 1901.
G. W. Hendricks
Ordinary of Bartow County.



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 43

I have been allowed a pension as a resident of Bartow County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 6th day of Jan'y 1900.
G. W. Hendricks Ordinary.

M. E. Stroup
Post Office mark

State of Georgia,

Bartow County.

Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Stroup, 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 1885.

Given under my official signature and seal, this 6th day of Jan'y 1900.

Official Seal.

G. W. Hendricks
Ordinary of Bartow County.

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 43

I have been allowed a pension as a resident of Bartow County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 28th day of Jan'y 1901.
G. W. Hendricks Ordinary.

M. E. Stroup
Post Office mark

State of Georgia,

Bartow County.

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

Given under my official signature and seal, this 28th day of Jan'y 1901.

Official Seal.

G. W. Hendricks
Ordinary of Bartow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

M. E. Stroup hereby authorize G. W. Hendricks of Bartowville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me at Bartowville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 13th day of Jan'y 1902.

M. E. Stroup [L. S.]
mark

Executed in presence of
Gabe Hendricks.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

M. E. Stroup hereby authorize G. W. Hendricks of Bartowville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me at Bartowville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 12th day of Jan'y 1903.

M. E. Stroup [L. S.]
mark

Executed in presence of
G. W. Hendricks
mark

To Those Heretofore Paid.

1902

No. 1645

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

M. E. Stroup

Bartow County,

Widow of Joseph Stroup

Co. Regiment 43rd

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

1121

AND HANDLED TO

022

DATA W. LINDSEY, 1902

To Those Heretofore Paid.

1903

No. 1741

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

M. E. Stroup

Bartow County,

Widow of Joseph Stroup

Co. Regiment 43rd

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903

1741

AND HANDLED TO

022

DATA W. LINDSEY, 1903

Stroup, Margaret
Barlow Co.
To Those Heretofore Paid.
1902.
No. *1645-*
WIDOW'S PENSION,
For year ending Dec. 31, 1902.
PAID TO
Mrs. M. E. Stroup
OF
Barlow County,
Widow of *Joseph Stroup*
Co. *13th* Regiment
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
11/21
AND HANDLED TO
Ord
CRO. W. HARRISON, 1015 MARKET STREET, PHILA.

Stroup, Margaret
Barlow County
To Those Heretofore Paid.
1903.
No. *1741*
WIDOW'S PENSION,
For year ending Dec. 31, 1903.
PAID TO
Mrs. M. E. Stroup
OF
Barlow County,
Widow of *Joseph Stroup*
Co. *13th* Regiment
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
7/6 1903
AND HANDLED TO
Ordly
CRO. W. HARRISON, 1015 MARKET STREET, PHILA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Barlow* } *M. E. Stroup*
who, being sworn, says on oath, that she is a bona fide resident of said County of *Barlow* State of Georgia, and that she has RESIDED in said State continuously ever since *a single child, Sam 9090, Oct* That she is the Widow of *Joseph Stroup* who was a soldier in Company of the *13th* Regiment of *Ca* Volunteers, that he enlisted in said regiment on or about the month of *March* 1862, and served in the Army up to *in May* 1863. That he lost his life on the day of *May* 1863. (State here particulars of the husband's death, when, where and from what cause.) *He died of wound and measles and mumps, together in hospital in Charleston in May 1863*

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1830.

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

Sworn to and subscribed before me, this *13* day of *July* 1902. *M. E. Stroup* Ordinary. Post-Office *mark* *G.W. Hudricks*

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

Given under my official signature and seal, this *13* day of *July* 1902. *G.W. Hudricks* Ordinary of *Barlow* County.

Official Seal.

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Barlow* } *M. E. Stroup*
who, being sworn says on oath, that she is a bona fide resident of said County of *Barlow* State of Georgia, and that she has RESIDED in said State continuously ever since *1862* That she is the Widow of *Joseph Stroup* who was a soldier in Company of the *13th* Regiment of *Ca* Volunteers, that he enlisted in said regiment on or about the month of *March* 1862, and served in the Army up to *in May* 1863. That he lost his life on the day of *May* 1863. (State here particulars of the husband's death, when, where and from what cause.) *He died of measles and mumps in hospital in Charleston in May 1863*

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1835-*1841*

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

Sworn to and subscribed before me, this *12* day of *July* 1903. *M. E. Stroup* Ordinary. Post-Office *mark* *G.W. Hudricks*

State of Georgia, *Barlow* County, Ordinary of said County, certify that I am well acquainted with Mrs. *M. E. Stroup* 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 *1892*.

Given under my official signature and seal, this *12* day of *July* 1903. *G.W. Hudricks* Ordinary of *Barlow* County.

Official Seal.

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

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 1830.

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

Sworn to and subscribed before me, this 13 day of Jan 1902. G. W. Hudnicks Ordinary. M. E. X. Shoup Post-Office mark

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

Given under my official signature and seal, this the 13 day of Jan 1902.

(Official Seal)

Ordinary of Barlow County.

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

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 1835-91.

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

Sworn to and subscribed before me, this 18 day of Jan 1903. G. W. Hudnicks Ordinary. M. E. X. Shoup Post-Office mark

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

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

(Official Seal)

Ordinary of Barlow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County, I, M. E. Shoup hereby authorize G. W. Hudnicks 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 12 day of Jan 1904.

Executed in presence of

J. R. Anderson JP
Barlow Ga

M. E. X. Shoup [L. S.]
mark

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County, I, M. E. Shoup hereby authorize G. W. Hudnicks of Cartersville 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 18 day of Jan 1905.

Executed in presence of

W. W. Stokes

M. E. X. Shoup [L. S.]
mark

WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

M. E. Shoup

Barlow County,

Widow of Joseph Shoup

Co. B Regiment 43 Ga

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED FEB 9 1904.

AND HANDLED TO

mark

Geo. W. Harrison, State Printer, Atlanta.

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

M. E. Shoup

Barlow County,

Widow of Joseph Shoup

Co. B Regiment 40 Ga

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED FEB 7 1905.

AND HANDLED TO

mark

Geo. W. Harrison, State Printer, Atlanta.

Stamp, Margaret E.
Bartow County
TO THOSE HERETOFORE PAID.
1904.
No. 1301
WIDOW'S PENSION
FOR
YEAR ENDING DECEMBER 31, 1904.
PAID TO
Mrs. M. E. Shoup
County,
Bartow
Widow of Joseph Shoup
Co. B. Regiment 43 Ga
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 9 1904
AND HANDED TO
Ory
Geo. W. Harrison, State Printer, ALBANY.

Stamp, Margaret E.
Bartow Co
TO THOSE HERETOFORE PAID.
1905.
No. 1182
WIDOW'S PENSION,
For year ending Dec. 31, 1905.
PAID TO
Mrs. M. E. Shoup
County,
Bartow
Widow of Joseph Shoup
Co. B. Regiment 43 Ga
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 7 1905
AND HANDED TO
10
Geo. W. Harrison, State Printer, ALBANY.

Form No. 1.
FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Bartow } Margaret E. Shoup
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 All my life That she is the Widow of
Joseph Shoup who was a soldier in Company
B of the 43 Regiment of Ga
Volunteers, that he enlisted in said regiment on or about the month of March
1862, and served in the Army up to May 1863. That he lost his
life on the day of May 1863. (State here
particulars of the husband's death, when, where and from what cause.) He died in
Chattanooga in a Confederate hospital in
May 1863

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1866

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

Sworn to and subscribed before me,
this 12 day of Jan 1904. M. E. Shoup
G. W. Hendricks Ordinary. Post Office. Mark

State of Georgia, } G. W. Hendricks
County of Bartow } Ordinary of said County, certify that I am well
acquainted with Mrs. M. E. Shoup 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 12th
day of January 1890

Given under my official signature and seal, this the 12 day of Jan 1904.

Official Seal. G. W. Hendricks
Ordinary of Bartow County

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

Form No. 1.
For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Bartow } Margaret E. Shoup
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 All my life That she is the Widow of
Joseph Shoup who was a soldier in Company
B of the 43 Regiment of Ga
Volunteers, that he enlisted in said regiment on or about the month of March
1862, and served in the Army up to May 1863. That he lost his
life on the day of May 1863. (State here
particulars of the husband's death, when, where and from what cause.) In Chattanooga
in May in hospital, he died of measles
May 1863

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1866

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

Sworn to and subscribed before me,
this 12 day of Jan 1905. M. E. Shoup
G. W. Hendricks Ordinary. Post Office. Mark

State of Georgia, } G. W. Hendricks
County of Bartow } Ordinary of said County, certify that I am well
acquainted with Mrs. M. E. Shoup 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 12th
day of Jan 1890

Given under my official signature and seal, this the 12 day of Jan 1905.

Official Seal. G. W. Hendricks
Ordinary of Bartow County

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

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 1886.

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

Sworn to and subscribed before me, this 12 day of Jan 1904. G.W. Nudrick Ordinary. M. E. X. Shoup Post Office.

State of Georgia, Barlow County. I, G.W. Nudrick Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Shoup 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 12 day of January 1890.

Given under my official signature and seal, this the 12 day of Jan 1904. G.W. Nudrick Ordinary of Barlow County.

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

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 1891.

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

Sworn to and subscribed before me, this 13 day of Jan 1905. G.W. Nudrick Ordinary. M. E. X. Shoup Post Office.

State of Georgia, Barlow County. I, G.W. Nudrick Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Shoup 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 for a day of Aug 1891.

Given under my official signature and seal, this the 13 day of Jan 1905. G.W. Nudrick Ordinary of Barlow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow COUNTY. I, M. E. Shoup hereby authorize G.W. Nudrick of Barlow County to receive and receipt for the pension paid hereon, and request that he remit same to me at Barlow Ga. In Witness Whereof, I have hereunto set my hand and seal, this 15 day of January 1906.

M. E. X. Shoup [L. S.] Executed in presence of D. Hawks for mark

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow COUNTY. I, M. E. Shoup hereby authorize G.W. Nudrick of Barlow County to receive and receipt for the pension paid hereon, and request that he remit same to me at Barlow Ga. In Witness Whereof, I have hereunto set my hand and seal, this 9 day of Jan 1907.

M. E. X. Shoup [L. S.] Executed in presence of mark

To Those Heretofore Paid. 1906. No. 741 WIDOW'S PENSION For year ending Dec. 31, 1906. PAID TO Mrs. M. E. Shoup of Barlow County, Widow of Joseph Shoup Co. B Regiment 13 Ga. JOHN W. LINDSEY, Commissioner of Pensions. WARRANT ISSUED JAN 29 1906, AND HANDED TO

To Those Heretofore Paid. 1907. No. 1041 WIDOW'S PENSION For Year ending Dec. 31, 1907. PAID TO Mrs. M. E. Shoup of Barlow County, Widow of Jacob Shoup Co. B Regiment 13 Ga. JOHN W. LINDSEY, Commissioner of Pensions. WARRANT ISSUED FEB 4 1907, AND HANDED TO

Stroup, Margaret E.
Barlow County

To Those Heretofore Paid.

1906.

No. *744*

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO
Mrs. M. E. Stroup
Barlow County,
 Widow of *Joseph Stroup*
 Co. *B* Regiment *43rd*

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED
 AND HANDLED TO
JAN 30 1906

Post Office at Savannah, Ga. No. 10,000,000.

Stroup, Margaret E.
Barlow County

To Those Heretofore Paid.

1907.

No. *1041*

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO
Mrs. M. E. Stroup
Barlow County,
 Widow of *Jacob Stroup*
 Co. *B* Regiment *43rd*

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED
 AND HANDLED TO
FEB 4 1907

(See W. Harrison, State Printer, Atlanta.)

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
 County of *Barlow* } *M. E. Stroup*

who, being sworn, says on oath that she is a bona fide resident of said County of *Barlow* State of Georgia, and that she has RESIDED in said State continuously ever since *Birth*. That she is the Widow of *Joseph Stroup* who was a Soldier in Company *B* of the *43rd* Regiment of *G.A.* Volunteers, that he enlisted in said regiment on or about the month of *March* 186*3*, and served in the Army up to *Spring* 186*5*. That he lost his life on the *day of Spring* 186*5*. (State here particulars of the husband's death, when, where and from what cause.) *He died in 1865 of disease in the Army.*

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*45* *Way before the war*.

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

Sworn to and subscribed before me this *15* day of *Jan* 1906.
J. P. Hawks, Jr. Ordinary.

M. E. Stroup
 Post Office *Carrollville, Ga.*

State of Georgia,
Barlow County. Ordinary of said County, certify that I am well acquainted with Mrs. *M. E. Stroup*, 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 *1870*.

Given under my official signature and seal, this *15th* day of *Jan* 1906.
G. W. Hendricks
 Ordinary of *Barlow* County.

Official Seal

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
 County of *Barlow* } *M. E. Stroup*

who, being sworn says on oath, that she is a bona fide resident of said County of *Barlow* State of Georgia, and that she has RESIDED in said State continuously ever since *Birth*. That she is the Widow of *Jacob Stroup* who was a soldier in Company *B* of the *43rd* Regiment of *G.A.* Volunteers, that he enlisted in said regiment on or about the month of *March* 186*3*, and served in the Army up to *May* 186*5*. That he lost his life on the *day of May* 186*5*. (State here particulars of the husband's death, when, where and from what cause.) *He died of Malaria in May 1865*

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 1845 *before*.

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

Sworn to and subscribed before me this *15* day of *Jan* 1907.
G. W. Hendricks Ordinary.

M. E. Stroup
 Post Office *Carrollville*

State of Georgia,
Barlow County. Ordinary of said County, certify that I am well acquainted with Mrs. *M. E. Stroup*, 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 *1870*.

Given under my official signature and seal, this *9* day of *Jan* 1907.
G. W. Hendricks
 Ordinary of *Barlow* County.

Official Seal

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

186 V and served in the Army up to May 1863. That he lost his life on the day of May 1863. (State here particulars of the husband's death, when, where and from what cause.) He died in 1863 of disease in the Army

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 way before the war

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

Sworn to and subscribed before me this 15 day of Jan 1906. L. J. Hankins Ordinary.

Mr. E. H. Shoup her Post Office Carrollville Ga

State of Georgia,

Barlow County.

I, G. W. Hendricks

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

day of 1890

Given under my official signature and seal, this the 15th day of Jan 1906.

Official Seal

G. W. Hendricks
Ordinary of Barlow County.

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

186 U. That he lost his life on the day of May 1863. (State here particulars of the husband's death, when, where and from what cause.) He died of Malaria May 1863

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

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

Sworn to and subscribed before me this 11 day of Jan 1907. G. W. Hendricks Ordinary.

Mr. E. H. Shoup her Post Office Carrollville Ga

State of Georgia,

Barlow County.

I, G. W. Hendricks

Ordinary of said County, certify that I am well acquainted with Mrs. M. E. Shoup, 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 9 day of Jan 1907.

Official Seal

G. W. Hendricks
Ordinary of Barlow County.

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

Stubbsfield, Henry
Barlow County

CODE SECTION 124
(For Those Already Enrolled.)

No. *1788*
(from Paulding 1400)
to Gordon 1702
INDIGENT

SOLDIER'S PENSION.
1901.

Name *Henry Stubbsfield*
County *Barlow*

Paulding Co. in 1900.
WARRANT ISSUED

1/29 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Fredricks

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA.

Barlow County.

Henry Stubbsfield hereby authorize *George Fredricks* of *Barlow* Co.

to receive and receipt for the pension allowed and request that he remit same to *me* at *Barlow* Co.

Witness my hand and seal, this *29* day of *January* 1901.

Executed in presence of *Henry Stubbsfield*

W. J. Snell mark

WARRANT ISSUED
 1/29 1901.
 JOHN W. LINDSEY,
 Commissioner of Prisons.
 WARRANT HANDED TO
 Friedrichs
 Geo. W. Harrison, State Printer, Atlanta.
 No data

TORNEY.
 I authorize George W. Friedrichs to
 and request that he remit same to
 available in
 1901.
 [L. S.]
 X double field
 mark

POWER OF ATTORNEY.

STATE OF GEORGIA,
 Bartow County.
 I, Nemy Stubblefield hereby authorize George W. Friedrichs of Bartowville Ga
 to receive and receipt for the pension allowed and request that he remit same to
me at Bartowville Ga
 by check
 Witness my hand and seal, this 4th day of January 1901.
 [L. S.]
 Executed in presence of
W. J. Swelling Nemy Stubblefield
mark

Stubblefield Nemy
Bartow County

CODE SECTION 124
 (For Those Already Enrolled.)
Green No 1782
Lo Paulding 1900
Lo Bartow 1901
 INDIGENT

SOLDIER'S PENSION.
 1901.

Name Nemy Stubblefield
 County Bartow
Paulding Co. 1900

WARRANT ISSUED
 1/29 1901.

JOHN W. LINDSEY,
 Commissioner of Prisons.

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

No data

Charles Henry Shubblefield
Barlow County

CODE SECTION 100
(For Those Already Enrolled.)

No. *1782*
Henry Shubblefield 1900
Lo. Barlow 1900

INDIGENT

SOLDIER'S PENSION.
1901.

Name *Henry Shubblefield*
County *Barlow*
Paulding Co. in 1900

WARRANT ISSUED
1/29 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
Frederick
Geo. W. Harrison, State Printer, Kansas.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *Henry Shubblefield* *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* 1867; that he is *81* years old and
by occupation a _____ that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of *3 1/2 yrs* in Company *4*, of *12*th Regiment
of *S. C. Artillery*; that his physical condition is as
follows: *100m out and broken down*
from old age

that his property consists of the following items

of the value of *35* 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 *Paulding*
county been allowed a pension for the year *1900*

Sworn to and subscribed before me, this *16* day of *January*, 1901.
Geo W. Hendricks Ordinary. *His mark*

STATE OF GEORGIA,

Barlow County.

I, *Geo W. Hendricks* Ordinary of said County,
do certify that I am well acquainted with *Henry Shubblefield* 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 *16*
day of *Jan*, 1901.
Geo W. Hendricks
Ordinary *Barlow* County.



NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1901.

Sullins, Sarah Ann
Bartow County
On Recd. on
Indgt

ACT DEC. 16, 1901

No. _____

WIDOW'S PENSION,

1903

Mrs. *Sarah A. Sullins*

County of *Bartow*

Widow of *W. M. Sullins*

Warrant issued _____ 190

and handed to _____

J. W. LINDSEY,
Commissioner of Pensions.

Geo. W. Harrison, State Printer, Atlanta.

9/19/03

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow COUNTY,

Sarah Ann Sullins hereby authorize
Charles W. Sullins of *Bartow* Co.

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

Witness my hand and seal, this *17th* day of *April*, 1903

Sarah Ann Sullins (Said)

Executed in presence of
W. J. Sullins

Widow of W. M. Sullivan
Warrant issued _____ 190____
and handed to _____

J. W. LINDSEY,
Commissioner of Pensions.

Geo. W. Harrison, State Printer, Atlanta.
9/19/03

ATTORNEY.
Sullivan hereby authorizes
of Barlow Ga
to be paid unto me
by Barlow
day of Sept 1903
[Seal]
W. M. Sullivan
mark

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow COUNTY.
C. Sarah Ann Sullivan hereby authorize
C. W. Dindricks of Barlow Ga
to receive and receipt for the pension allowed and request that he remit same to me
at Barlow Ga by Chuck
Witness my hand and seal, this 17th day of Sept 1903
Sarah Ann Sullivan [Seal]
Executed in presence of
W. J. Sullivan

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA, Personally came Mrs. Sarah Ann Sullivan
COUNTY OF Barlow } Sullivan who says on oath she is the
widow of W. M. Sullivan to whom, in the County of
Barlow State of Georgia, she was married on the
23rd day of Dec 1855, that she remained his wife up to the 21st
day of January 1903, at which time he died, and that she has not since married.
At the time of his death he was a resident of Barlow County, in said State of
Georgia, and was on the Indigent pension roll of the State of Georgia, having been allowed
a pension of \$ 60 per annum on account of being a soldier in Company 7
101st Regiment, Ga Volunteers or State state line
What affliction have you and how does it affect you? my general health is
reasonably good, except I suffer very much
at times with rheumatism, I am feeble from age
What have you been doing to earn a support since 1st of January, 1900? I have not
been doing anything
What property or effects had you on 1st January, 1900? None of all
What have you acquired since, and what income have you now? None of all
What disposition have you made of any property since 1st January, 1900, and at what price and for what
purpose? I have not disposed of any property
I have not had any of any amount
Deponent further says that she is now a resident of Barlow County, and has contin-
uously resided in the State of Georgia since the _____ day of Dec 1874
She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.
Sworn to and subscribed before me, this 17th day of Sept 1903
Sarah Ann Sullivan
before me, Sept 17-1903
C. W. Dindricks
Didmar
All blank spaces must be filled before signing.

Sullivan, Sarah Ann
Barlow County
On file
ACT DEC. 16, 1901, Lindsey
No. _____
WIDOW'S PENSION,
1903
Mrs. Sarah A. Sullivan
County of Barlow
Widow of W. M. Sullivan
Warrant issued _____ 190____
and handed to _____

J. W. LINDSEY,
Commissioner of Pensions.

Geo. W. Harrison, State Printer, Atlanta.
9/19/03

Sullivan, Sarah Ann
Barlow County
No. 100
ACT DEC 18, 1901

WIDOW'S PENSION,

1903

Mrs. Sarah A. Sullivan

County of Barlow

Widow of W. M. Sullivan

Warrant issued 190

and handed to

J. W. LINDSEY,

Commissioner of Pensions.

W. M. Sullivan, State Prison, Atlanta.

9/1/93

What property or effects had you on 1st January, 1900? None of all
What have you acquired since, and what income have you now? None of all
What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose? I have not disposed of any property
I have not had any of any amount
Deponent further says that she is now a resident of Barlow County, and has continuously resided in the State of Georgia since the 1834 day of Dec
She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.

Sworn to and subscribed before me, this 17th day of Sept 1903

Sworn to and subscribed before me, Sept 17-1903
G. W. Hendricks
Ordinary

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came M. J. Haney
COUNTY OF Barlow } F. M. Ford and
D. A. Vaughan, known to me to be reputable and truthful persons, who says on oath that from his own personal knowledge Mrs. Sarah Ann Sullivan who made the foregoing affidavit, is the widow of W. M. Sullivan who died in Barlow County and State of Georgia on the 21st day of January 1903, and that she has not since married; that she became his wife on the 25th day of Dec 1855, and so remained up to the time of his death, and that she has resided in this State continuously since the 1834 day of Dec 1834
With what affliction does she suffer? She has rheumatism and is feeble from old age and infirmities
What property or income had she on 1st January, 1900? None

What has she in her possession and control now? Nothing

How was she supported in 1900 and 1901? By her husband's pension and her boy. They support her now

I have no personal interest in the pension asked for M. J. Haney
D. A. Vaughan
F. M. Ford

Sworn to and subscribed before me, this 18th day of September 1903

G. W. Hendricks
Ordinary Barlow County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, } Personally came before me
COUNTY OF Barlow } F. R. Callahan
and A. V. Callahan, both of whom are known to me to be reputable physicians, who say on oath that they personally know Sarah Ann Sullivan mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her earning a support) she is quite old and infirm and is wholly unable to earn a support. She suffers from rheumatism

Sworn to and subscribed before me, this 18th day of Sept 1903

G. W. Hendricks
Ordinary of Barlow County.

CERTIFICATE OF ORDINARY OF THE COUNTY OF APPLICANT'S RESIDENCE.

STATE OF GEORGIA, } I, G. W. Hendricks, Ordinary,
COUNTY OF Barlow } in and for said County of Barlow
State of Georgia, hereby certify that I am acquainted with Mrs. Sarah Ann Sullivan 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 has resided in the State of Georgia continuously since the many years I know and has not lived out of the State since that date. I also certify that the witnesses, to-wit: M. J. Haney D. A. Vaughan and F. M. Ford whose testimony she presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such, and that the full text of the affidavit was read to and understood by them before same was signed. I am fully satisfied that this claim is made in good faith, and 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 18th day of September 1903

[SEAL]

G. W. Hendricks
Ordinary.

NOTES.

The Pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband. Date of marriage is essential and must be submitted.
Proofs by one witness and two physicians will be accepted when it is shown that the same cannot be furnished, but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.
Affidavits must be made in presence of the Ordinary.

I have no personal interest in the pension asked for

Sworn to and subscribed before me, this 18th day of September 1903.

Ordinary Barton County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA,

Personally came before me

COUNTY OF Barton } F. R. Calhoun

and A. F. Calhoun, both of whom are known to me to be reputable

physicians, who say on oath that they personally know Sarah Ann Sullins

mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it pre-

vents her earning a support) She is quite old and in

firm and is wholly unable to earn

a support. She suffers from Rheumatism

and is quite old and in

firm and is wholly unable to earn

a support. She suffers from Rheumatism

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a support. She suffers from Rheumatism

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a support. She suffers from Rheumatism

NOTES.

The Pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband. Date of marriage is essential and must be submitted.

Proofs by two witnesses and two physicians will be accepted when it is shown that the same cannot be furnished, but in all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.

Affidavits must be made in presence of the Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barton County.

I, Sarah Ann Sullins hereby authorize

G. W. Andriess of Bartonsville Ga

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

me at Bartonsville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 19

day of Jan 1904.

Sarah Ann Sullins [L. S.]

Executed in presence of

J. R. Anderson M.P.

Bartonsville Ga

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barton County.

I, S. A. Sullins hereby authorize

G. W. Andriess of Bartonsville Ga

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

me at Bartonsville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 21st

day of Jan 1905.

S. A. Sullins [L. S.]

Executed in presence of

Sullins, Sarah Ann
Barton County

TO THOSE HERETOFORE PAID.

1904.

No. 884

INDIGENT
WIDOW'S PENSION
FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs Sarah Ann Sullins
of
Barton County
Widow of W. M. Sullins
Co. 4th / 1st Ca. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
2/19

AND HANDED TO
G. W. Andriess

Gen. W. HARTON, BARTON PRISON, GA.

Sullins, S. A. (Mrs.)
Barton Co

To Those Heretofore Paid.

1905.

No. 946

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

PAID TO

Mrs S. A. Sullins
OF
Barton County
Widow of W. M. Sullins
Co. 4th / 1st Ca. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
FEB 4 1905.

AND HANDED TO
G. W. Andriess

See Form for Pensions and Pensions on, Atlanta
G. W. Andriess, Bartonsville, and Bartonsville.

Sullivan, Sarah Ann
Barlow County

TO THOSE HERETOFORE PAID.

1904.

No. *884*

INDIGENT WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO *Mrs Sarah Ann Sullivan*

OF *Barlow* County,

Widow of *W. M. Sullivan*

Co. *4th* 1st *Ca* Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED *2/9*

AND HANDED TO *gwy*

1904.

Geo. W. Harrison, State Printer, Albany.

Sullivan, S. A. (Mrs.)
Barlow Co

To THOSE HERETOFORE PAID.

1905.

No. *946*

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO *Mrs. S. A. Sullivan*

OF *Barlow* County,

Widow of *W. M. Sullivan*

Co. *4th* 1st *Ca* Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED *FEB 7*

AND HANDED TO *0*

1905.

Geo. W. Harrison, State Printer, Albany.

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA. } PERSONALLY COMES MRS.
County of *Barlow* } *Sarah Ann Sullivan*

who, being sworn, says on oath that she is a bona fide resident of said County of *Barlow* State of Georgia, and that she has RESIDED in said State continuously ever since *1842*. That she is the Widow of *W. M. Sullivan* who was a soldier in Company *H* of the *1st* Regiment of *Ca* Volunteers, that he enlisted in said regiment on or about the month of *Spring* 186*5*, and served in the Army up to *Jan* 186*5*. That he died on the *21* day of *Jan* 190*3*.

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*55*.

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

Sworn to and subscribed before me, this *19* day of *Jan* 1904. *Sarah Ann Sullivan* for *mark*
G. W. Lindricks Ordinary. Post Office.

State of Georgia, } *G. W. Lindricks*
Barlow County. } Ordinary of said County, certify that I am well acquainted with Mrs. *Sarah Ann Sullivan*, 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*44*.

Given under my official signature and seal, this *19* day of *Jan* 1904. *G. W. Lindricks*
Ordinary of *Barlow* County.

NOTE. All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA. } PERSONALLY COMES MRS.
County of *Barlow* } *S. A. Sullivan*

who, being sworn says on oath, that she is a bona fide resident of said County of *Barlow* State of Georgia, and that she has RESIDED in said State continuously ever since *she was 4 years old*. That she is the Widow of *W. M. Sullivan* who was a soldier in Company *H* of the *1st* Regiment of *Ca. state line* Volunteers, that he enlisted in said regiment on or about the month of *March* 186*2*, and served in the Army up to *in May* 186*5*. That he died on the *21* day of *Jan* 190*3*.

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*55*.

I have been allowed an Indigent pension as a resident of *Barlow* 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 *21* day of *Jan* 1905. *S. A. Sullivan* for *mark*
G. W. Lindricks Ordinary. Post Office.

State of Georgia, } *G. W. Lindricks*
Barlow County. } Ordinary of said County, certify that I am well acquainted with Mrs. *S. A. Sullivan*, 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 *21* day of *Jan* 1905. *G. W. Lindricks*
Ordinary of *Barlow* County.

NOTE. All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

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 1855.

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

Sworn to and subscribed before me, this 19 day of Jan 1904. Sarah Ann Sullins her mark
G.W. Nindricks Ordinary. Post Office mark

State of Georgia, Barlow County. I, G.W. Nindricks Ordinary of said County, certify that I am well acquainted with Mrs. Sarah Ann Sullins 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 1884.

Given under my official signature and seal, this 19 day of Jan 1904.

G.W. Nindricks
Ordinary of Barlow County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

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 1855.

I have been allowed an Indigent pension as a resident of Barlow 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 21 day of Jan 1905. S.A. Sullins her mark
G.W. Nindricks Ordinary. Post Office

State of Georgia, Barlow County. I, G.W. Nindricks Ordinary of said County, certify that I am well acquainted with Mrs. S.A. Sullins 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 21 day of Jan 1905.

G.W. Nindricks
Ordinary of Barlow County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County. I, S.A. Sullins hereby authorize G.W. Nindricks of Barlowville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me at Barlowville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 13 day of Jan 1906. S.A. Sullins [L. S.] her mark

Executed in presence of G.W. Nindricks

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County. I, Sarah A. Sullins hereby authorize G.W. Nindricks of Barlowville Ga to receive and receipt for the pension paid hereon, and request that he remit same to me at Barlowville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 14 day of Jan 1907. Sarah A. Sullins [L. S.] her mark

Executed in presence of

To Those Herebefore Paid.

1906.

No. 632

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

Mrs. S.A. Sullins

Widow of Wm. Sullins

Co. H. 1st Regt. Ga

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

JAN 29 1906

AND HANDLED TO

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

To Those Herebefore Paid.

1907.

No. 1078

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

Mrs. S.A. Sullins

Widow of Wm. Sullins

Co. H. 1st Regt. Ga

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 4 1907

AND HANDLED TO

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

Sullivan, S. A. Com.
Bartow County
To Those Heretofore Paid.
1906.
No. *633*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1906.
PAID 57
Mrs. S. A. Sullivan
County, *Bartow*
Widow of *Wm. Sullivan*
Co. *H.* 1st Regiment.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
JAN 29 1907.
AND HANDED TO
THE PENSION DIVISION AND PUBLISHED BY ATLANTA, GA.

Sullivan, Sarah A
Bartow A
To Those Heretofore Paid.
1907.
No. *1078*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1907.
PAID 70
Mrs. S. A. Sullivan
County, *Bartow*
Widow of *Wm. Sullivan*
Co. *H.* 1st Regt
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
FEB 4 1907.
AND HANDED TO
THE PENSION DIVISION AND PUBLISHED BY ATLANTA, GA.

Form No. 2
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Bartow* } *S. A. Sullivan*
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 *a small child* That she is the Widow of
W. M. Sullivan who was a soldier in Company
H of the *1st* Regiment of *GA*
Volunteers, that he enlisted in said regiment on or about the month of
186*2*, and served in the Army up to *May 12* 186*5* That he died on
the *Jan* day of *1903*

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*65* or near that date

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 *15* day of *Jan* 1906.
G. W. Anderson Ordinary. *S. A. Sullivan* for *mark*
Post Office

State of Georgia,
Bartow County }
Ordinary of said County, certify that I am well acquainted with Mrs. *S. A. Sullivan*, 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 *1870*

Given under my official signature and seal, this the *15* day of *Jan* 1906.
G. W. Anderson
Ordinary of *Bartow* County.



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

Form No. 2
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of *Bartow* } *Sarah A. Sullivan*
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 *a small child* That she is the Widow of
W. M. Sullivan who was a soldier in Company
H of the *1st* Regiment of *GA*
Volunteers, that he enlisted in said regiment on or about the month of
186*2*, and served in the Army up to *May 12* 186*5* That he died on
the *21* day of *Jan* 18*93*

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*65*

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 *14* day of *Jan* 1907.
G. W. Anderson Ordinary. *Sarah A. Sullivan* for *mark*
Post Office

State of Georgia,
Bartow County }
Ordinary of said County, certify that I am well acquainted with Mrs. *Sarah A. Sullivan*, 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 *14* day of *Jan* 1907.
G. W. Anderson
Ordinary of *Bartow* County.



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

1862, and served in the Army up to May 12 1865 That he died on the day of Jan - 1903

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 1855 or near that date

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 15 day of Jan 1906. G. W. Hendricks Ordinary.

for S. A. Sullivan mark Post Office

State of Georgia, Bartow County.

Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Sullivan, 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 1870

Given under my official signature and seal, this the 15 day of Jan 1906.

Official Seal

G. W. Hendricks Ordinary of Bartow County.

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

Volunteers, that he enlisted in said regiment on or about the month of May 12 1865 That he died on the day of Jan 1903

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 1855

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 14 day of Jan 1907. G. W. Hendricks Ordinary.

for Sarah A. Sullivan mark Post Office

State of Georgia, Bartow County.

Ordinary of said County, certify that I am well acquainted with Mrs. Sarah A. Sullivan, 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 14 day of Jan 1907.

Official Seal

G. W. Hendricks Ordinary of Bartow County.

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

Geo. W. Harrison, State Printer, Atlanta.

no
of London Mills
highly authentic
and that he repeat same to me
with
of April 1880.
his
W. M. Dickinson
mark

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

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

1. What is your name and where do you reside? (give State, County and post office)
W. M. Sullivan, Sandy Creek, Bartow County, Georgia

2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State?
Do not know

3. When and where were you born? *North Carolina June 16th 1828*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Georgia Militia*
5. When and where did you enlist? *August 1862, Kirby 16th 86th*
6. In what company and regiment did you enlist? *Co. H 1st Regiment Ga*
7. How long did you remain in that company and regiment? *About two years*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?

9. For how long a period did you discharge regular military duty? *About two years*

10. When, where and under what circumstances were you discharged from service? *Discharged in Georgia Militia about two years & was then detailed to work in Rolling Mill near Cartersville Ga.*

11. What is your present occupation? *None*
12. How much can you earn per annum by your own exertions or labor? *Nothing*
13. What has been your occupation since 1865? *Gaming*

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 seventy five dollars worth*

unable to stop down on account of partial paralysis and kidney trouble and general debility.

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

your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *I have been suffering from paralysis for two years*

and from Rodney Houder about twenty years.

18. What property, effects or income do you possess? 50 acres of land not laid out

10. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Nothing but the lymph mentioned above*

and will not to get it up because unable to
pay for it.

11. How were you supported during the years 1893 and 1894? By my children

23. What was your employment during 1893 and 1894? What pay did you receive in each year?
None at all

4. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support. *I am married and have 3 children.*

1 boy & ranging in age from 8 to 14, 3 girls from 10 to 19 years. Can't state the exact age of each one

Ex Oct 10 July 1895-
Not Boring factory
See ~~Wagon~~ ~~Wagon~~
See letter above

Andrew W. M.
 Boston
 No. 112
 INDIGENT PENSION

INDIGENT PENSION

1895.

Name *W. M. Sullivan*
County *Barlow*

Informed by Secretary
 of the Board of
 Education
 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Dep. W. Macgregor, State Printer, Atlanta.

Sullivan W. M.
Bartow
Ct. No. 112

INDIGENT PENSION
1895.

Name *W. M. Sullivan*
County *Bartow*
Ground *Indigent & poor*
April 11th 1895

RICHARD JOHNSON,
Secretary Revenue Department
WARRANT RETURNED TO
atty

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"? *Indigent & poor*
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? *Have been suffering from paralysis for two years and from kidney trouble about twenty years*
18. What property, effects or income do you possess? *50 acres of land not paid for*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Nothing but the land mentioned above and will have to give it up because unable to pay for it*
20. In what County did you reside during those years and what property did you then return for taxation? *Bartow County, \$2800 worth of land 1890 & personal property*
21. How were you supported during the years 1893 and 1894? *By my children*
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I do not know. Nothing*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *None. Nothing*
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *I am married & living 5 boys ranging in age from 8 to 14. 3 girls from 10 to 19 years. Can't state the exact age of each one*

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 *11th* day of *April* 1895. *W. M. Sullivan* Applicant.
G. W. Hendricks Ordinary
of *Bartow* County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, *Bartow* County.
A. M. Puckett of said State and County, having been presented as a witness in support of the application of *W. M. Sullivan* for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? *A. M. Puckett Bartonsville Bartow County Ga*
2. Are you acquainted with *W. M. Sullivan*, the applicant, if so how long have you known him? *About 40 years*
3. Where does he reside, and how long has he been a resident of this State? *A. Bartow Bartow Co. Ga. I know that he has lived in Ga since he was in the Confederate army or the Georgia militia? How do you know this? I saw him in same company with him*
4. When, where and in what company and regiment did he enlist? *July 16th 1863 at Camp McDowell both Co. Co. H. 1st Reg. Ga. line*
5. Were you a member of the same company and regiment? *I was*
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *About 15 months. He was a good soldier. Did his duty. Got State as to the time of his discharge from the service. He was detailed in May 1864 to work for the*
7. What property, effects or income has the applicant? (Give your means of knowledge) *He has no property or income (of your means of knowledge) Company of Bartow Co. Ga*
8. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *None*
9. What is the applicant's occupation and physical condition? *Nothing. He is in bad health and quite feeble and is past working*
10. Is the applicant unable to support himself by labor of any sort, if so, why? *He is because he is in such feeble health and so afflicted*
11. How was he supported during the years 1893 and 1894? *I do not know personally*
12. What portion of his support for these two years was derived from his own labor or income? *None, because he could not work*
13. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *He has been in bad health for several years, and has been so bad that he could not work of all in the last 5 years*
14. What interest have you in the recovery of a pension by this applicant? *None*

Sworn to and subscribed before me, this *11th* day of *April* 1895. *A. M. Puckett* Applicant.
G. W. Hendricks Ordinary
Witness

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, *Bartow* County.
Personally came before me, *Thomas H. Baker* and *Robert A. Richey*, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully *W. M. Sullivan* applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:
We find him aged and infirm. He is greatly broken and run down. He is suffering from general paralysis and Paralysis of the arms and legs. He is unable to support himself. He is with difficulty. He is unable to control his legs, arms and hands. He is a great sufferer from pain.
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 *11th* day of *April* 1895. *Thomas H. Baker*
G. W. Hendricks Ordinary
Robert A. Richey

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, *Bartow* County.
G. W. Hendricks Ordinary in and for said County, hereby certify that the applicant *W. M. Sullivan* 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.: *A. M. Puckett* are of trustworthy character and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions, the applicant and each witness took the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed.
I further certify that the tax digests of *Bartow* County show that applicant returned for taxation in his name in 1893, *Five Hundred & forty six* dollars of property, and in 1894, *Three Hundred & seventy* dollars of property.
Witness my hand and seal of office this *20th* day of *May* 1895.
G. W. Hendricks Ordinary
of *Bartow* County.

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

6. Were you a member of the same company and regiment? *I was*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *August 13 Months. He was a good soldier. Did his duty. Sent State as to the time of his discharge from the service. He was detailed in May 1864 to work for the*
8. What property, effects, or income has the applicant? (Give your means of knowledge) *Company of four females in Bartow Co. He has no property. No income.*
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? *Nothing. He is in bad health and quite feeble and is fast failing.*
11. Is the applicant unable to support himself by labor of any sort, if so, why? *He is because he is in such feeble health and is fast failing.*
12. How was he supported during the years 1893 and 1894? *I do not know from any one.*
13. What portion of his support for those two years was derived from his own labor or income? *None, because he could not work.*
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? *He has been in bad health for several years, and has been so bad that he could not work of all in the last 5 years.*
15. What interest have you in the recovery of a pension by this applicant? *None*

Sworn to and subscribed before me, this *11th* day of *April*, 1895, *A. M. Puckett* Applicant
G. W. Hendricks Ordinary *Witness*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, *G. W. Hendricks*, Ordinary in and for said County, hereby certify that the applicant *W. M. Sullens* 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: *A. M. Puckett*

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

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

I further certify that the tax digests of *Bartow* County show that applicant returned for taxation in his name in 1893, *Five Hundred & forty Six* dollars of property, and in 1894, *Three Hundred & Seventy* dollars of property.

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

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

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

W. M. Sullens hereby authorize *G. W. Hendricks* of *Bartow* County

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

at *Bartow* by *check*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *25th* day of *January*, 1897.

W. M. Sullens s.
Mark

Executed in presence of
Chas. Hendricks
John H. Cobb

POWER OF ATTORNEY.

State of Georgia,

Bartow County.

I, *W. M. Sullens* hereby authorize *G. W. Hendricks* of *Bartow* County

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

at *Stamp Creek* by *mail*

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *14th* day of *January*, 1898.

W. M. Sullens s.
Mark

Executed in presence of
Hudson Hendricks
John H. Cobb

Sullens, W. M.
Bartow Co.
(For Those Already Enrolled.)
No. *1722*
INDIGENT
Soldier's Pension.
1897.
Name *W. M. Sullens*
County *Bartow*
2/2 1897.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED TO
W. M. Sullens
No. *1722*

Sullens, W. M.
Bartow Co.
(For Those Already Enrolled.)
No. *2306*
INDIGENT
SOLDIER'S PENSION,
1898.
Name *W. M. Sullens*
County *Bartow*
WARRANT ISSUED
1/21 1898.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED TO
W. M. Sullens
No. *2306*

Sullins, W. M.
Barlow Co.
 (For These Already Enrolled.)
 No. *1722*
 INDIGENT
 Soldier's Pension.
 1897.
 Name *W. M. Sullins*
 County *Barlow*
 1897.
 2/2
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED TO
W. M. Sullins
 No. *2306*

Sullins, W. M.
Barlow Co.
 (For These Already Enrolled.)
 No. *2306*
 INDIGENT
 SOLDIER'S PENSION,
 1898.
 Name *W. M. Sullins*
 County *Barlow*
 1898.
 1/21
 WARRANT ISSUED
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED TO
W. M. Sullins
 No. *2306*

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *W. M. Sullins* 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 age of *12 years*; 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 *2 1/2 yrs* in Company *4*, of *10th* Regiment of *Georgia*; that his physical condition is as follows: *Paralysis, so as to disable to any kind of labor or work*

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 189

Sworn to and subscribed before me, this, the *1st* day of *January*, 1897. *W. M. Sullins* Ordinary. *mark*

STATE OF GEORGIA,

Barlow County.

I, *G. W. Hendricks* Ordinary of said County, do certify that I am well acquainted with *W. M. Sullins* 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 *20th* day of *January*, 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 *W. M. Sullins* of *Barlow* County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of *18*; that he is *70* years old and by occupation a *farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *two years* in Company *9*, of *1st* Regiment of *Georgia*; that his physical condition is as follows: *Partly paralyzed and can't do anything*

that his property consists of the following items *no property*

of the value of *no* 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 189

Sworn to and subscribed before me, this, the *1st* day of *January*, 1898. *W. M. Sullins* Ordinary. *mark*

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this *11th* day of *January*, 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 189

Sworn to and subscribed before me, this, the 11th day of January, 1897. } W. M. Sullins 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 W. M. Sullins the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 11th day of January, 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 189

Sworn to and subscribed before me, this, the 11th day of January, 1898. } W. M. Sullins 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 W. M. Sullins the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 11th day of January, 1898.



G. W. Hendricks
Ordinary Barlow County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, W. M. Sullins 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 Stamps Creek Ga by check

Witness my hand and seal this 30 day of January, 1899.

Executed in presence of W. M. Sullins (L. S.)
W. M. Sullins mark

POWER OF ATTORNEY.

STATE OF GEORGIA,
Barlow County.

I, W. M. Sullins 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 20 day of January, 1900.

Executed in presence of W. M. Sullins (L. S.)
W. M. Sullins mark

CODE SEC. 1254.
(For These Already Enrolled.)

No. 3568

INDIGENT

SOLDIER'S PENSION,

1899.

Name W. M. Sullins
County Barlow

WARRANT ISSUED

131 1899

RICHARD JOHNSON,
Commissioner of Prisons.

WARRANT HANDLED TO

G. W. Hendricks
Geo. W. Harrison, State Printer, Atlanta.

No date

CODE SEC. 1254.
(For These Already Enrolled.)

No. 2157

INDIGENT

SOLDIER'S PENSION,

1900.

Name W. M. Sullins
County Barlow

WARRANT ISSUED

January 25 1900.

JOHN W. LINDSEY,
Commissioner of Prisons.

WARRANT HANDLED TO

G. W. Hendricks
Geo. W. Harrison, State Printer, Atlanta.

No date

Wm. Sullivan
 CODE SEC. 1384.
 (For These Already Enrolled.)
 No. *3568*
INDIGENT
SOLDIER'S PENSION,
1899.
 Name *W. M. Sullivan*
 County *Barlow*
 WARRANT ISSUED
13/ 1899
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
W. M. Sullivan
 Geo. W. Harrison, State Printer, Atlanta.
No date

Barton Co. Sullivan, W. M.
 CODE SEC. 1384.
 (For These Already Enrolled.)
 NO. *2157*
INDIGENT
SOLDIER'S PENSION,
1900.
 Name *W. M. Sullivan*
 County *Barlow*
 WARRANT ISSUED
January 25 1900.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDLED TO
W. M. Sullivan
 Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *W. M. Sullivan* 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 *1st* day of *July* 18*90*; that he is *71* years old and by occupation a *farmer*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served for the term of *14* months in Company *A*, of *14*th Regiment of *Georgia* State *Infantry*; that his physical condition is as follows: *Paralysis, not able to do any thing at all, not able to wait on himself.*

that his property consists of the following items

none

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 *Barlow* county been allowed a pension for the year 189*8*.

Sworn to and subscribed before me, this, the *30* day of *January*, 1899, by *W. M. Sullivan* Ordinary. *mark*

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this *30* day of *January*, 1899.

W. M. Sullivan
 Ordinary *Barlow* County.



NOTE.—The blank spaces must be filled.
 NOTE.—A fiduciary should not be attested before January 1st, 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears *W. M. Sullivan* 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 *1st* day of *July* 18*90*; 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 *14* months in Company *A*, of *14*th Regiment of *Georgia* State *Infantry*; that his physical condition is as follows: *Paralysis, can't work or look blind in one eye.*

that his property consists of the following items *None in property of any kind*

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 *Barlow* county been allowed a pension for the year 189*9*.

Sworn to and subscribed before me, this, the *30* day of *January*, 1900, by *W. M. Sullivan* Ordinary. *mark*

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this *30* day of *January*, 1900.

W. M. Sullivan
 Ordinary *Barlow* County.



NOTE.—The blank spaces must be filled.
 NOTE.—A fiduciary should not be attested before January 1st, 1900.

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 Barlow county been allowed a pension for the year 1898 his

Sworn to and subscribed before me, this, the 30 day of January, 1899. } W. M. Sullins 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 W. M. Sullins the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 30 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.

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 Barlow county been allowed a pension for the year 1899 his

Sworn to and subscribed before me, this, the 30 day of January, 1900. } W. M. Sullins 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 W. M. Sullins the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 30 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, W. M. Sullins hereby authorize George W. Hendricks of Barlow County, Ga. to receive and receipt for the pension allowed, and request that he remit same to me at Barlow Ga. by check

Witness my hand and seal, this 11 day of January, 1901.

W. M. Sullins [L. S.] mark

Executed in presence of
A. M. Tucker

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, W. M. Sullins hereby authorize George W. Hendricks of Barlow County, Ga. to receive and receipt for the pension allowed, and request that he remit same to me at Barlow Ga. by check

Witness my hand and seal, this 13 day of January, 1902.

W. M. Sullins [L. S.] mark

Executed in presence of
J. A. Stephenson J. P.

COPIES SECTION 101.
(For Those Already Enrolled.)

No. 187

INDIGENT

SOLDIER'S PENSION.

1901.

Name W. M. Sullins
County Barlow

WARRANT ISSUED

1/29 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

G. W. Hendricks
Geo. W. Hendricks, Notary Public, Alabama.

No date

COPIES SECTION 101.
(For Those Already Enrolled.)

No. 3205

INDIGENT

SOLDIER'S PENSION

1902.

Name W. M. Sullins
County Barlow
Regiment 1st
Co. H

WARRANT ISSUED

1/31 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

G. W. Hendricks
Geo. W. Hendricks, Notary Public, Alabama.

No. 3205

Sullivan W.M.
Barlow County

COPIES SECTION 124
(For Those Already Enrolled.)
No. *1787*

**INDIGENT
SOLDIER'S PENSION.
1901.**

Name *W.M. Sullivan*
County *Barlow*

WARRANT ISSUED
1/29 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
John W. Lindsey

No date

Sullivan W.M.
Barlow County

COPIES SECTION 124
(For Those Already Enrolled.)
No. *3205*

**INDIGENT
SOLDIER'S PENSION
1902.**

Name *W.M. Sullivan*
County *Barlow*
Co. *H* Regiment *1st*
Go. H. H. H.

WARRANT ISSUED
1/31 1902

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy

John W. Lindsey, Barlow County, Ala.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.
Personally appears *W.M. Sullivan* 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 *2* day of *May* *1890*; 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 *Georgia*) during the war between the States, and served for the term of *2* years in Company *F*, of *1st* Regiment of *State Troops*; that his physical condition is as follows: *Paralyzed, totally unable to do any labor of any sort*

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 1901. I have heretofore as a resident of *Barlow* county been allowed a pension for the year *1900*

Sworn to and subscribed before me, this *13* day of *January* 1901, *W.M. Sullivan* his *mark*
W. M. Lindrick Ordinary.

STATE OF GEORGIA,

Barlow County.
I, *W. M. Lindrick* Ordinary of said County, do certify that I am well acquainted with *W.M. Sullivan* 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 *13* day of *January* 1901, *W. M. Lindrick*
Ordinary *Barlow* 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,

Barlow County.
Personally appears *W.M. Sullivan* 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 *2* day of *May* *1890*; 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 *Georgia*) during the war between the States, and served for the term of *2* years in Company *F*, of *1st* Regiment of *Go. H. H. H.*; that his physical condition is as follows: *Paralyzed from paralysis*

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 1902. I have heretofore as a resident of *Barlow* county been allowed a pension for the year *1901*

Sworn to and subscribed before me, this *13* day of *January* 1902, *W.M. Sullivan* his *mark*
J. A. Stephenson J. P. Ordinary.

STATE OF GEORGIA,

Barlow County.
I, *W. M. Lindrick* Ordinary of said County, do certify that I am well acquainted with *W.M. Sullivan* 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 *13* day of *January* 1902, *W. M. Lindrick*
Ordinary *Barlow* County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

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 Barlow county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the

13 day of January 1901.

Ordinary.

mark

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with W. M. Sullins 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

13 day of January 1901.

Ordinary.

Barlow County.

NOTE—The blank spaces must be filled.

NOTE—Affidavit should not be attested before January 1st, 1901

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 Barlow county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the

13 day of January 1902.

Ordinary.

mark

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with W. M. Sullins 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

13 day of January 1902.

Ordinary.

Barlow County.

NOTE—The blank spaces must be filled.

NOTE—Affidavit should not be attested before January 1st, 1902.

GEORGIA, Barlow County.

I, G. W. Hendricks Ordinary of said county, do certify that I personally know Mrs. Sarah A. Sullins the applicant, and that she is the lawful widow of W. M. Sullins and was on the Independent Pension Roll of said Barlow county, and was paid a Pension from Barlow county for 1902, and at the time of his death on the 21 day of January 1903, there was due to him and unpaid his Pension of eighty dollars from the State of Georgia, and I know all three of the the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 9 day of February 1903

Ordinary

Barlow County.

Application for Pension	No. 3707.
Due Deceased Soldier	190
Under Act 1891.	
Mrs. <u>S. A. Sullins</u>	BY
Widow of <u>W. M. Sullins</u>	
of County <u>Barlow</u>	
Co. <u>7th</u> Regt <u>1st</u> Vols.	
Approved and Paid	
<u>J. W. Lindsey</u>	190
Commissioner of Pensions.	

GEORGIA, Barlow County.

I hereby authorize and constitute G. W. Hendricks of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 1903, through my deceased husband W. M. Sullins who was on Independent Pension Roll and paid from Barlow co. for 1902.

Witness my hand this 9 day of February 1903

Attested before me: Geo. S. Cobb } Sarah A. Sullins mark

Georgia
Barlow County
On person came before me John M. Brown who on oath says that he sold W. M. Sullins of said County the same who is the applicant in the foregoing for a pension. Affiant further says that said W. M. Sullins has never paid affiant any part of the purchase money due on said land, and that affiant has taken back the land giving said Sullins up his notes he had for the purchase money, and received back his bond for title. Affiant further swears that the reason he gave up to said Sullins the notes and took the land back is because said Sullins has become totally unable to work and having no income could not pay for it. Said W. M. Sullins is now almost helpless and hence can never expect to be able to own any property he is very old and is so afflicted that there is no hope of his ever being able to work or do any kind of business any more. Affiant has no interest in a recovery for a pension by said Sullins.
Sworn to & subscribed before me, John M. Brown, Feb. 11th 1903
G. W. Hendricks Ord. mark

Pullins, W. M.
 Barlow County
 No. 3767.
 180
 Application for Pension
 Due Deceased Soldier
 Under Act 1891.
 Mrs. S. A. Sullins
 Widow of W. M. Sullins
 of County Barlow
 Co. 74 Regt 1st Va
 Approved and Paid
 J. W. LINDSEY,
 Commissioner of Pensions.
 180

GEORGIA, Barlow County.
 I hereby authorize and constitute G. W. Hendricks of said county, my
 lawful attorney to collect and receipt for me in my name the Pension due me for 1903, through my deceased husband
 W. M. Sullins who was an Indigent Pension
 Roll and paid from Barlow Co. for 1902.
 Witness my hand this 9th day of Feb. 1903.
 Attested before me:
 Geo. S. Cobb } Sarah A. Sullins
 Notary Public } mark

purchase money and received back
 his bond for titles. Affiant further
 swears that the reason he gave
 to said Sullins the notes and took the
 bond back is because said Sullins
 has become totally unable to work
 and having no income could not
 pay for it. Said W. M. Sullins is now
 almost helpless and hence can never
 expect to be able to earn any money
 he is very old and is afflicted
 that there is no hope of his ever being
 able to work or do any kind of business
 any more. Affiant has no interest in a recovery
 for pension by said Sullins. I did
 Sworn to and subscribed before me J. M. Brown
 April 4th 1893
 G. W. Hendricks Ord. mark

APPLICATION FOR PENSIONS DUE DECEASED SOLDIER. UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Barlow County.
 Personally before me come Mrs. Sarah A. Sullins of said county,
 after being duly sworn, on oath says that she is the widow of W. M. Sullins
 who was duly enrolled as an Indigent Pensioner from the county
 of Barlow and was paid a Pension of Sixty
 Dollars from Barlow county for 1902, and that the said
 W. M. Sullins died in Barlow county on
 the 27th day of January 1903, and at the time of his death a
 Pension of Sixty was due him from Barlow county
 and unpaid for 1903. Applicant further swears that she married the said W.
 M. Sullins on the 23rd day of Dec-
 1855, in Barlow, Barlow County of that time
 county and State of Georgia and
 resided with him from date of marriage to his death as his lawful wife, and is now his
 dependant widow, and she asks that the Pension so due and unpaid be paid to her.
 Sworn to and subscribed before me this 9th day of Feb. 1903
 G. W. Hendricks ORDINARY } Sarah A. Sullins [L.S.]
 Barlow County. mark

AFFIDAVIT OF WITNESS.

GEORGIA, Barlow County.
 Personally before me come M. J. Haney, who
 on oath says that he knew W. M. Sullins while in life
 and that he knows that Mrs. S. A. Sullins
 the above applicant; that he knows that the said W. M. Sullins
 and Sarah A. Sullins (formerly Sarah A. Gilchrist) were in due form of law married in the county
 of Barlow (then Barlow) in the State of Georgia on
 the 23rd day of December 1855, and that they resided
 together as husband and wife from date of marriage to the day of his death on the 27th
 day of Jan. 1903, and I now know that she is his dependant widow.
 Sworn to and subscribed before me this 9th day of Feb. 1903
 G. W. Hendricks ORDINARY } M. J. Haney
 Barlow County.

Personally appeared before me, W. M.
 Sullins and J. M. Sullins and after
 being by me duly sworn say on
 oath that the contents of the foregoing
 affidavit of John M. Brown are
 correct and true in every particu-
 lar.
 Sworn to and subscribed } W. M. Sullins
 before me September 14th 1893 } J. M. Sullins
 G. W. Hendricks }
 Ordinary }

Note 1st - This form can be used by guardian of minor children where there is no widow.
 2nd. Ordinary must send in all cases certified copy of marriage license attached.
 Col. J. M. Ford and W. J. Hicks both confirm the
 above affidavits of W. M. Sullins and Mrs. Haney under
 oath.
 W. J. Hicks

and unpaid for 1903. Applicant further swears that she married the said W. M. Sullins on the 23rd day of Dec - 1893 in Bartow ^{last county of that time} county and State of Georgia and resided with him from date of marriage to his death as his lawful wife, and is now his dependant widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 9th day of Feb 1903
G. W. Hendricks ORDINARY } Sarah A. Sullins [L.S.]
Bartow County. mark

AFFIDAVIT OF WITNESS.

GEORGIA, Bartow County.
 Personally before me come M. J. Haney, who on oath says that she knew W. M. Sullins while in life and that she knows that Mrs. S. A. Sullins the above applicant; that she knows that the said W. M. Sullins and Sarah A. Sullins (formerly Sarah A. Gilchrist) were in due form of law married in the county of Bartow (then base) in the State of Georgia on the 23rd day of December 1893, and that they resided together as husband and wife from date of marriage to the day of his death on the 21st day of Jan 1903, and I now know that she is his dependant widow.
 Sworn to and subscribed before me this 9th day of Feb 1903
G. W. Hendricks ORDINARY } M. J. Haney
Bartow County.

NOTE 1st. - This form can be used by guardian of minor children where there is no widow.
 2nd. Ordinary must send in all cases certified copy of marriage license attached.

Col. J. M. Ford and W. J. Hicks both confirm the above affidavits of Mrs. Sullins and Mrs. Haney under oath.
J. M. Ford
W. J. Hicks

Ordinary

W. M. Sullins

I was present at the marriage of W. M. Sullins to Mrs. S. A. Sullins



State of Georgia,
 Executive Office,
 Atlanta.

15 Sept 1895

Judge G. W. Hendricks
 Cartersville Ga

Sir - I return Sullins claim because in answer to \$ 20 he says that he returned for tax in 93 & 94 \$ 40⁰⁰ in personalty and he does not in any way account for its disposition - The infirmity & service are well established & excepting the point noted his claim appears to be O.K. - I really do not like to return claims in points like this but if I do not in one case I ought not in any and it is much better to put the claim, you self & me to a little trouble than make a bad rule - With best wishes I am very truly
Rich - Johnson

Georgia } In person came W. M. Sullins who after being duly sworn says on oath that: The Personal property returned for tax by me in 1893 & 1894, consisted of my Household and Kitchen furniture to the amount of \$ 80.00, an old Sorghum mill and a few old farming tools & valued at \$ 80.00. I let my son have my Sorghum mill. My sons have worn out the old farming tools. I have 3 wheels of my old one horse wagon and the running gear of same, which is almost totally worthless.

W. M. Sullins
 Sworn to and subscribed before me, September 14th 1895
G. W. Hendricks Ordinary