Willis, J.M. 1891 ST TOOL ONLY Given under my official es thereto are genuine TE OF GEORGIA om the foregoing No. 2 Application for Allowance affidavits FOR THE TEAR ENDING OCTOBER 26, 1891. made and pow Date of Warrant. Entered on record SECRETARY EXECUTIVE DEPARTMENT. said affidavits and WARRANT HANDED TO signed, Geo. W. Harrison, State Printer, Atlanta, Ga. IS a

County, Cou	STATE OF GEORGIA. I. Congella George Ordinary of said county, do certify that I am well acquainted with It, Ill. Willis the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual hear.
I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said County, and the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this T day of Heby 1891. Ordinary Banton County.	Given under my official signature and seal, this will day of March 1892. Ordinary Daylor County.
Application for Allowance in it is in the triangular and secure in in. (County, Mandau, Manda	Willing 4: M. Barten Co. SOLDIER'S PENSION. 1892. FOR THE VEAR EXDING OCTODIES 26, 1822. Name. A. M. M. M. M. M. Deability of M. M. M. M. Deability of M. M. M. M. Branch on record Amount. \$189. W. H. HARRISON. W. H. HARRISON. Sompling of president inspectment. ACCENT. RECORD CO. One W. Berning Agreening Linguistics.
Martine Comment of the Comment of th	County, State of the white is a saw director or and resident of state are the best but of the many of the same is a saw director or and resident of state are in the best but of the many of the same of the same of the confederate states (when the same of the same of the confederate states (when the same of the same

For Applicants Herodolore Allowed Pensions.

For Applicants Pleretolore Allowed Pensions. state or acordin.

For Applicants Heretofore Allowed Pensions.

Tot Application itel	esolote Attowed relisions.
STATE OF GEORGIA, County.	
Personally appears A. M. W	
	sworn, says on oath that he is a bona fide citizen and
resident of said State, and has resided there	sworn, says on oath that he is a bona fide citizen and
day of June 1845;	that he eplicated in the military is 6.1. 3
federate States (or of the State of	that he enlisted in the military service of the Con-
States, and served as a frivale	in Company 9, of 65 th Regiment
of Ga Volunteers	ackson 's Brigade; that whilst engaged
in such military service at the battle of	
of ta , on the 2	S day of 2 1864, he was
wounded as follows : Shal nie	the left times with a
hope that which	Cayed ampulation
of the lift beg the	e la Rnee
and a second control of the second control of the second control of the second control of the second control of	
-	
Deponent desires to participate in the	benefits of the Act, approved October 24, 1887,
or the year ending October 26, 1891. I ha	llars, for 1869 & 1690
Sworn to and subscribed before me, this	llars, for
V 700	J. M. M. C.
day of orday	891.)
Mosenducks a	winon
NOTE State fully nature of wound or character of di- he disability, resulting from the wound or disease.	sease which causes the disability, and explain particularly the extent of
5011155 6	E ATTORNIEW
Printing of Printing of the Law of the Law of the Control of the C	F ATTORNEY.
STATE OF GEORGIA,	
County.	
Know all Men by these Presen	ts, That I,
f	County, State of Georgia, do hereby appoint
(a.	
e and in my name to receive and receipt	my true and lawful attorney in fact, for for whatever amount of money I may be entitled
from the State of Georgia by reason of t	the injury received as aforesaid in the military service as stated in the foregoing affidavit; hereby authoriz-
g my said attorney to receipt in my name	for any Warrant that may be issued by the Gover-
or, or for any sum of money which may be	coming to me for the reason aforesaid.
IN WITNESS WHEREOF, 1	have hereunto set my hand and seal, this
day of	1891.
President in the presence of uni-	[r. s.]
Executed in the presence of us:	ni veg energy spip set interneting over all har.
the same franchischer with	the state of the s
	BOTION.
Send money to me as follows, by	to P.O.
THE DEIGEORGIC	
	County, Georgia.

For Applicants	Heretofore	Allowed	Pensions.
STATE OF GEORG	3IA.)		

STATE OF GEORGIA,
Benton County.
PERSONALLY appears H. M. Willis
of Barlow County, State of Georgia, who, being duly sworn, say
on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously
since the day of June 18/2; that he enlister
in the military service of the Confederate States (or of the State of
during the war between the States, and served as a Private in Company
of 65 th Regiment of Usa Volunteers Jacks on
Brigade; that whilst engaged in such military service at the battle of Mery Hope Ch.
in the State of U.S. A.
Mile Sale of , on the day of day of the was wounded as follows: That
This igh the left kepte with Grape that
which nicestilated by auphilation of onix
left leg which was fine pulated above the
Mence bland principles.
management of the second secon
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and acts amendatory thereof, and makes application for the allowance to which he is entitled to
the year ending October 26, 1892. I have heretofore been allowed a pension of
Dollars for there years
Sworn to and subscribed before me this the
Of day of March 1800
Juducks Ordinary
Norz.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
extent of the disability.
POWER OF ATTORNEY
STATE OF GEORGIA,
1094.7
(n, n)
Know all Men by these Presents, That I, 7 M. Inlus
por Bartow
County, in said State, do hereby appoint (1, 2 (1) Cloton
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
my said attorney to receipt in my name for any Warrant the foregoing affidavit; hereby authorizing
IN WITNESS WHEREOF, I have hereunto set my hand and seal this
day of Murch 1892.
Fullis [L. s.]
Tox of ext in the presence of us:
Mahan
M Durham Colork Superior Court
DIRECTION.
Send money to me as follows, by
P. O.
County Georgia

SIAIEC	OF GEORGIA, County,
Know all	Men by these Presents, That I
ř	County, State of Georgia, do hereby appoint
e and in my room the State e Confederate by said attorned any sum of	my true and lawful attorney in fact, for name, to receive and receipt for whatever amount of money I may be entitled to of Georgia by reason of the injury received as aforesaid in the military services of States (or of this State), as stated in the foregoing affidavit, hereby authorizing yo to receipt in my name for any Warrant that may be issued by the Governor, or money which may be coming to me for the reason aforesaid. **NESS WHEREOF**, I have hereunto set my hand and seal, this
ragnaj, po sub	quality of the second that he resides in this County.
	in the bissence of its: standard to as all deal that the statements made by blint in be-
The second	Last well and almost with
	DIRECTION. A Ordinary of said Courte
Sond mon	ey to me as follows, by
	to
TAYE	County, Georgia.
North Sagain	to say, it of 2020 by the mile of the angle of the same time which, and eights proceedings the extent of the
omided as to	in Dogseges states when the states should be supplied that which should be supplied that the supplied
TATE C Trascoatt many State of which of sale eyel	Applicants Heretofore Allowed Pensions, of Canap 1 of Allowed Pensions, of Canap 1 of Ca

POWER OF ATTORNEY.

		of		
of	Georgia, do nereby a	ppoint	my true and lawful	attorney in fact
me and in my n State of Georgic States (or of the ney to receipt in which may be c IN WITN	ame, to receive and recapture	ceipt for whatever amounty received as aforesaid in in the foregoing affidavarrant that may be issued leason aforesaid. have hereunto set my han	nt of money I may be n the military service rit; hereby authorizin by the Governor, or for	entitled to from of the Confede g my said At any sum of mo
day of			,,	
Execu	ted in the presence of			[L
	C	,		- Ti
•	and the second s	DIRECTION	C	
Send mone	y to me as follows, by	DIRECTION	S	
		to		P
		County, Georgia.		
		er out the second of the second	The state of the s	The Story
en e	May were desirable parties to the result			W
in the state of th	6	1 1 1	894.	100
(*)	6		1894.	
Enrolled.)	6	1. 6	NY, tive Department.	the same
For Those Already Enrolled.) No. //6	Ρ ę ηςίοη. • 4.	ullio try	7 1894. HARRISON, continuid.	Miller

- Por Anidlends deretative (Fig.

for Applicants Heretofore Allowed Pensions.
STATE OFIGEORGIA,)
County.) 111'00
PERSONALLY appears H. M. Wills of Wantow
County, State of Georgia, who, being duly sworn, says on oath that he is a bone fide citizen and resident of said State, and has resided therein continuously ever since the
day of 1845; that he enlisted in the military service of the Con-
lederate States (or of the State of) during the war between the
States and served as a fluate in Company , of 60 th Regiment
of Volunteers factory is Brigade; that whilst engaged in such multary service at the battle of Ann North Comments in the Comments of the Comme
of USA
wounded as follows: Gran Shat Warrend in left lage
said leg is unpulated in conserve
of said warms
Deponent desires to practicipate in the benefits of the Act, approved October 24th, 1887, and
the year ending October 26, 1802. They heretofore been allowed a service is entitled for
the niqueled dollars, for 1887,90-91-92
Sworn to and subscribed before me, this, the
day of MINCh 1893
Mudiek Doy
Norz.—State fully nature of wound or character of disease which causes the disability, and enflain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA,
Jantow County
· Carroll Inches
do certify that I am well acquainted with F1 M Wellis the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this Comey.
I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
of said County, and the said affidavits and signatures thereto are genuine.
the sample of addition in recolution and street in the last the formation of street of street of street of street of
Given under my official signature and seal, this day of Miles 1893.
The state of the period of the period of point
Ordinary Odstow County.
County
SYATE OF CHORGIA.
POWER OF ATTORNEY,

	re Allowed Pensions.
STATE OF GEORGIA,	
Dantor County	
	1 8301
PERSONALLY appears A.M. Will	5 of Danlow
County, State of Georgia, who, being duly swor	n, says on oath that he is a bona flde citizen
and resident of said State, and has resided there	
	nlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States and served as a fricult	in Company 9, of 60 th Regiment
of Ga Volunteers factor	's Brigade; that whilst engaged in
such military service at the battle of New	
of Sa on the 08	day of hear 1864, he was
wounded as follows: Shat throng amputated obvine the	The street leg
ampulated organ ings	the .
D	
Deponent desires to participate in the benefi and the acts amendatory thereof, and makes ap	ts of the Act, approved October 24th, 1887,
Sworn to and subscribed before me, this, the day of March 1894	4.101111111
Sworth to and subscribed before me, this, the day of March 1894	for the year 1898
Sworn to and subscribed before me, this, the Mayor Mayor 1894	for the year 1899
Sworth to and subscribed before me, this, the day of Mayon 1894 Norze-State fully the nature of wound or character of disease where the disability, resulting from the wound or disease.	for the year 1899
Sworth to and subscribed before me, this, the day of Mayon 1894 Norze-State fully the nature of wound or character of disease will of the disability, resulting from the wound or disease. STATE OF GEORGIA,	for the year 1899
Sworn to and subscribed before me, this, the day of Mayor 1894 Mora-State fully the nature of wound or character of disease where the disability, resulting from the wound or disease. STATE OF GEORGIA, County, County,	for the year 1899
Sworn to and subscribed before me, this, the day of Mayor 1894 Mora-State fully the nature of wound or character of disease where the disability, resulting from the wound or disease. STATE OF GEORGIA, County, County,	for the year 1899
Sworn to and subscribed before me, this, the day of March 1894 More-State fully the nature of wound or character of disease will of the disability, resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, Output I, Jun Mudducks	for the year 1899
Sworn to and subscribed before me, this, the day of Mayor 1894 More—State fully the nature of wound or character of disease with the disability, resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, County, I, Washington, County, I, May State Mayor disease.	or the year 1893 Condinary of said County. M. W. W. W. S.
Sworn to and subscribed before me, this, the day of March 1894 More-State fully the nature of wound or character of disease with the disability, resulting from the wound or disease. STATE OF GEORGIA, County, I, Washington, County, I, January County, Additional to the foregoing affidavit, and am well applicant in the foregoing affidavit, and am well	ordinary of said County. Ordinary of said County. M Willis
Sworn to and subscribed before me, this, the day of March 1894 More—State fully the nature of wound or character of disease with the disability, resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, County, I, Audious March Mar	ordinary of said County. Ordinary of said County. M Willis
Sworn to and subscribed before me, this, the day of March 1894 Norse—State fully the nature of wound or character of disease wind the disability, resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, County, I, Was wound or disease. County, I, Was and a well acquainted with Happlicant in the foregoing affidavit, and am well in his said affidavit are true, and I know he is the and that he resides in this County.	ordinary of said County, the satisfied that the statements made by him he individual he represents himself to be
Sworn to and subscribed before me, this, the word of March 1894 Nore-State fully the nature of wound or character of disease will of the disability, resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, County, I, Was and would acquainted with Applicant in the foregoing affidavit, and am well in his said affidavit are true, and I know he is t and that he resides in this County. Given under my official	ordinary of said County. Ordinary of said County. Muller the statements made by him he individual he represents himself to be signature and seal, this
Sworn to and subscribed before me, this, the day of March 1894 Nore—State fully the nature of wound or character of disease wind of the disability, resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, County, I, Washington, County, I, Washington, County, I, Washington, County, I, Washington, County, In the foregoing affidavit, and am well in his said affidavit are true, and I know he is the and that he resides in this County. Given under my official day of March	Ordinary of said County. Ordinary of said County. the satisfied that the statements made by him he individual he represents himself to be signature and seal, this
Sworn to and subscribed before me, this, the day of March 1894 Nore—State fully the nature of wound or character of disease wind of the disability, resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, County, I, Washington, County, I, Washington, County, I, Washington, County, I, Washington, County, In the foregoing affidavit, and am well in his said affidavit are true, and I know he is the and that he resides in this County. Given under my official day of March	Ordinary of said County. Ordinary of said County. the satisfied that the statements made by him he individual he represents himself to be signature and seal, this
Sworn to and subscribed before me, this, the day of May of 1894 More—State fully the nature of wound or character of disease with of the disability, resulting from the wound or disease. STATE OF GEORGIA, County, I, County, do certify that I am well acquainted with Happlicant in the foregoing affidavit, and am well in his said affidavit are true, and I know he is the and that he resides in this County. Given under my official day of Marries Americant	ordinary of said County. Ordinary of said County. Muller the statements made by him he individual he represents himself to be signature and seal, this

				}					
			County						
K	NOW ALL	MEN BY T	HESE P	Section 1				1/10/(14/8) [*] 11/1/41/80-40/40/00	COLUMN TO SERVE
t.	State of	Georgia, do l	hanahu an		of				THE RESERVE OF THE PARTY OF THE
,	, brate of	cieorgia, do i	iereoy ap	point		_my true an	d lawful a	Honney In	Cont Con
ate of ates my com	of Georgia b (or of this S name for ar ning to me f	oy reason of a State) as state by Warrrant or the reason	n injury ed in the that may aforesaid	received as foregoing a be issued	aforesaid i ffidavit; her by the Gove	t of money In the military by authorizing rnor, or for	y service o g my said any sum of	of the Con Attorney to	federate receipt
y of		SS WILLIAM	Юг, т п	1895		nd and sear, t	nis	on to some manufacturers	
JE.		d in presence		1000	. /				[L. S.]
	Execute	u in presence	or us.)				
	e o granifer co acia de								
					ï				
	**********			/	amrossa				
1	and manage	to me as follo		DIRE	CTIONS.				
100	end money	o me as follo	ws, by		to				P. O.
				County,		Control of Control		or an extragalist to diffe	
0.00	and the second		proteomers						
			-			1 16			
		W	1		1 2	1895.	rtment.		
led.)		SION.	argramme.		29	1895.	Department.		
nrolled.)		NSION.		hid	Log	1895.	ON, ire Department.	-To	Atlanta
ly Enrolled.)		PENSION.	i	Ulia	- Deg	1895.	ANSON, recutive Department.		fater, Atlanta.
ready Enrolled.)	.5-	PENSION.	95.	Willis	July 1	1895.	JOHNSON, "y Executive Department.		ato Printer, Atlanta.
Already Enrolled.)	785-	'S PENSION.	392·	Wellis	now	1895.	RD JOHNSON, relary Executive Department.	HANDED	oon, State Printer, Atlanta.
10se Aiready Enrolled.)	-58b°	ER'S PENSION.	895.	m Wellis	Westown	3/4 1895.	HARD JOHNSON, Secretary Executive Department.	HANDED	Hariton, State Printer, Atlanta
· Inose Aiready Enrolled.)	-586°×	IER'S PENSION.	1895.	m Wellis	Lopost Deg	3/4 1895.	RPCHARD JOHNSON, Secretary Executive Department.		A. W. Harrison, State Printer, Adusta.
(For Inose Aiready Enrolled.)	-586°×	LDIER'S PENSION.	1895.	Fm Wellis	County Collections Disability Lop of Log	Amount, 8 ft U	RICHARD JOHNSON, Secretary Executive Department.	HANDED	Go. W. Harinon, State Printer, Adusts.

POWER OF ATTORNEY.

I,hereby authorizeof to receive and receipt for the pension paid hereon and request that he renby atIN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of1896. Executed in presence of us	***		that he					destruction parties of market	1,
to receive and receipt for the pension paid hereon and request that he remembyat	***		that he			01			
at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of	***************************************		that he	request					
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of		. this				ision par	cerpt for the pe	e and re	receiv
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of1896.		. this				,		disamente estate con	
day of1896.		. this	132						
			d seal,	hand and			SS WHEREOF,	WITNE	
Executed in presence of us	1927			4 4		18			ay of
Executed in presence of us	[t.								
						S	d in presence of t	Execute	
	4						-		
	3						(·		
			·		- 1		`	ANTONIO POR CONTRACTOR DE	
	1 .	. 1		4	, , ,		2 * = -		
		74.6							
		43							
	and the same		all selections	-		i mere e		-	- deposite
\$ #	500	# 1	ŧ	1 8	1 1	1 1	-		1
	1	partm	, partin	Ĩ,	0		0		⊋.
(For Those Aircady Enrolled. No. 2,357 DIER'S PENSI 1896. 1, M. William Soft Constant Streets Department of Secretary Str	0 3	ve De	SON Te De		2016	1,7	∞ .		alle
	SD 1	xecut	HN		3 7	31	E (1)	1	En
Sement Economics Servers Second Servers Economics Servers Serv		ary E	JO JO	1 0	175	17		35	ady
Scene RD C C C C C C C C C C C C C C C C C C	1	cret	RD Secret	1	200	2		2	Alre
Those No.	WARRANT HANDED TO	16	A	m	5 7 7	1			9 9

For Applicants Heretofore Allowed Pensions.

STATE OF CEOPOLE			
STATE OF GEORGIA			
	unty.	of Ban	
personally appears H.M.			The state of the s
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 re-	sided therein con	tinuously ever since	the June
day of lune 184	; that he enlist	ed in the military s	ervice of the Con-
federate States (or of the State of	7	during the	war between the
States and served as a find	in in	Company 9, of	
	Minary	's Brigade; that v	whilst engaged in
such military service at the battle of		pe blund	in the State
wounded as follows: Gun on the		may	1864, he was
# 1111	raf was	and three	92
the left since	Leg au	fulaled	obone
The some	75.		,
	,		wenner mennen and
Management of the second secon		(2-11) (140-1) (141-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
Deponent desires to participate in	the benefits of th	. A-1 10	
and the acts amendatory thereof, and	makes application	e Ace, approved Oc	tober 24th, 1887,
entitled for the year ending October 20	ith 1805 I have	a heretofore been -1	to which he is
of One hundred	dollars for	the year 180 4	lowed a pension
Sworn to and subscribed before m	e, this, the	Of Michan	
22 day of 48 by	}	of ma IVe	llis
W New mich Old.	1095.		
Norie-State fully the nature of wound or character of the disability, resulting from the wound or disease	of distase which causes	the disability and sent-i-	
of the disability, resulting from the wound or disease.		the disability, and explain	particularly the extent
DT4TE OF 00000			
STATE OF GEORGIA	١, ١		
Danier Cou	nty.	-	
1. y.W. Venor	ietze	1 01	
do certify that I am well acquainted w	ith Och for	lieaul	of said County,
applicant in the foregoing affidavit, and			the
in his said affidavit are true, and I kno	ow he is the indi	vidual he represent	ts made by him
and that he resides in this County.	are in the And	vidual ne represen	ts nimself to be
	ny official signat	ure and seal, this	Deg ne
day of HOG	1895.	c and seat, this_	Tribute Management of Francisco
~~	0		
Affix your year	SIL	Mendo	chi
here		13 7	Activities in the second secon
	Ordinary 6	Varlow	County.
			County.

For Applicants Heretofore Allowed Pensions.

STATE	OF GEORGIA,
Dev.	Slow County.
Dersons	ally appears 1. M. Willis of Barting
	e 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 Lu	1845; that he enlisted in the military service of the Con-
federate State	
	erved as a fund of the state of the company of of the Regiment
of Sa	() a c K
in such milita	ory service in the Chate of Melocali
of may	1864, he was wonnded, injured or diseased as follows:
Shall	in left three with grobe that
Jeal	and the total about the
Pelino	
conse	prience of said wound
28 % 1. V. X	and subscribed before me, this, the day of HEBY 1896.
the disability, resul	y the nature of wound or character of disease which causes the disability, and explain particularly the extent
TATE	OF GEORGIA,)
Darli	County.
	Mark Since
1,//	Ordinary of said County,
certify that	I am well acquainted with A M (1)
plicant in the	e foregoing affidavit, and am well satisfied that the statements and to the
ms said amd	avit are true, and I know he is the individual he represents himself to be
d that he resi	ides in this County.
	Given under my official signature and seal, this
	day of 74 Vay 1896.
Affix your seal here.	yw Hemincher
	The state of the s
	Bo T.
	Ordinary Bartow County.

	County.			
Ι,		_hereby auth	orize	
1 '		of		
to receive and	d receipt for the pension	paid hereon and	request that l	he remit same to
		by		
it	_			
IN WIT	NESS WHEREOF, I ha	ave hereunto set m	y hand and sea	1, this
lay of		1898.		
2				[L. S.]
Exec	uted in presence of	1 -		
		(
/				
		1111	, 1898.	1 11
G .	9		18	
olle olle	DS .	015 3	ON,	C TEST
=	古田の	9.29	OHNSON,	SD TO
. H	H & 2	377	OH	AND
3ady E				H 2 11E
Aiready E	4 % &	3 9000	N A	F 7
08e Aiready E.	NA SE	28 82	1/ARD	AAK
(For Those Aiready Enrolled,	NVA DIER'S	Name T. 111. 11. County A. C. Disability Lay C. Amount, \$ [U].	PIC RICHARD JOHNSON	WARRANT HANDED TO Apply ". AMERICAL STATE PROFER, ATL

		POWER	OF ATTOR	NEY.	
	Barle I,	F M Willi	hereby auth		
	of Court	receipt for the pensi Bayer M WESS WHEREOF, I By 1900	Theby Fires y are dist have hereunto set my	Mollouse,	e Bank
	(1	ed in presence of		Willis	[I. S.]
\		l s		1900,	andres
Willie, & M.	(For Thisse Already Enrolled.)	SOLDIER'S PENSIC	Name HOM MYHLLY County County Lefe of Lefe	Warrant issued The 12 JOHN W. LINDSRY, Generations of Pea	WARRANT BANGED TO THE STREET, ALBERTA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGI	
	(A,)
Bartow	County.
	1 h. 11200: 13 15
personally appears	
	ho 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 June	1840; that he enlisted in the military service of the Con-
federate States (or of the St	
States, and served as a 11	
THE RESERVE OF THE PARTY OF THE	unteers falkson 's Brigade; that whilst engaged
in such military service in the	
of may	864, he was wounded, injured or diseased as follows:
That Imais	the lift day in botter of
New Hope B.	hurch hand 28, 1864
Lu adisput	alex above the knie
7	
/	
entitled for the year ending resident of and	October 26th, 1898. I have heretofore under said law as a county been allowed an invalid pension of Dollars, for the year 1897.
resident of Barlo Conc Hunor co Sworn to and subscribe May of Fa	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Byll Allowed Control of the Cont
Sworn to and subscribe When to and subscribe When to and subscribe When to and subscribe Norz-State fully the nature of we	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the A Host-office County, 1898. POST-OFFICE Drumary und or character of disease which was the disability, and explain particularly the extent
Sworn to and subscribe Sworn to and subscribe day of I	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Allowed Law 1898. Post-office John Dollars, for the year 1897. d or character of disease which was the disability, and exploin particularly the extent of disease.
Sworn to and subscribe day of I	county been allowed an invalid pension of Dollars, for the year 1892. d before me, this, the Annual Prost-office. 1898. FOST-OFFICE. 1898. FOST-OFFICE. 1998. Prost-office.
Sworn to and subscribe day of I Norx-State fully the nature of we the disability, resulting from the wound	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Allowed State of the year 1897. d before me, this, the Allowed State of the year 1898. Fost-office Downwary und or character of disease which was the disability, and exploin particularly the extended or disease.
Sworn to and subscribe day of I	county been allowed an invalid pension of Dollars, for the year 1892. d before me, this, the Annual Post-office Delta D
Sworn to and subscribe Sworn to and subscribe day of Norz-State fully the nature of we the disability, resulting from the wou STATE OF GEORGI Daylow I, Jun M do certify that I am well ac	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Allowed State of the year 1897. d before me, this, the Allowed State of the year 1898. POST-OFFICE My Drumany and or character of disease which the same the disability, and explain particularly the extend of or disease. A, County. Ordinary of said County, the
Sworn to and subscribe Sworn to and subscribe day of I When hatter of work of the diability, resulting from the STATE OF GEORGI I, When hatter of work io certify that I am well ac applicant in the foregoing af	county been allowed an invalid pension of Dollars, for the year 1897 d before me, this, the Frost-office 1898. FOST-OFFICE 1898. FOST-OFFICE 1998. FOST-OFFICE 1
Sworn to and subscribe Sworn to and subscribe day of Fa When the nature of we of the diability, resulting from the STATE OF GEORGI L L L L L L L L L L L L L	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Annual State of the James of Dollars, for the year 1898. 1898. POST-OFFICE Manual State of disease which was the disability, and explain particularly the extent of disease. A, County. Ordinary of said County, quainted with M. Miller of the said the statements made by him and I know he is the individual he represents himself to be
Sworn to and subscribe Sworn to and subscribe day of Fa When the nature of we of the diability, resulting from the STATE OF GEORGI L L L L L L L L L L L L L	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Annual State of the James of Dollars, for the year 1898. 1898. POST-OFFICE Manual State of disease which was the disability, and explain particularly the extent of disease. A, County. Ordinary of said County, quainted with M. Miller of the said the statements made by him and I know he is the individual he represents himself to be
Sworn to and subscribe Sworn to and subscribe day of 7 W Y W W W W W W W W W W W W W W W W W	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Analysis of the January 1898. POST-OFFICE Manuary 1898. POST-OFFICE Ordinary of said County, quainted with Manuary 1898. Post-Office the statements made by him and I know he is the individual he represents himself to be
Sworn to and subscribe Sworn to and subscribe day of 7 W Y W W W W W W W W W W W W W W W W W	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Annual State of the January of the extent of disease which were the disability, and explain particularly the extent of disease. A, County. Ordinary of said County, quainted with Annual satisfied that the statements made by him and I know he is the individual he represents himself to be county.
Sworn to and subscribe Sworn to and subscribe day of Norr-State fully the nature of we of the disability, resulting from the wond of the disability, resulting from the wond ocertify that I am well acapplicant in the foregoing after the said affidavit are true, and that he resides in this C Given	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Annual State of the January of the extent of disease which were the disability, and explain particularly the extent of disease. A, County. Ordinary of said County, quainted with Annual satisfied that the statements made by him and I know he is the individual he represents himself to be county.
Sworn to and subscribe Sworn to and subscribe day of. A. A	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Annual Post-office Management of the State of the Stat
Sworn to and subscribe Sworn to and subscribe day of 12 Aux State fully the nature of we of the diability, resulting from the scribe of the diability. The scribe of the diability is said affidavit are true, and that he resides in this C Given day of 1	county been allowed an invalid pension of Dollars, for the year 1897. d before me, this, the Annual Post-office Management of the State of the Stat

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Barling County.
The Living Bart
personally appears J. M. Willis of Conton
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State and County, and has resided therein continuously ever since the
day of June , 1845; that he enlisted in the military service of
the Confederate States (or of the State of) during the war be-
tween the States, and served as a privale in Company, 9, of OU th
Regiment of You Volunteers for Extens's Brigade; that whilst
engaged in such military service in the State of 92, on the 28
day of hay 1864, he was wounded, injured or diseased as follows:
The circled a gime ohot wound in left
leg on bottle of New Hope Church.
which required augustation of life
lea .
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1900. I have heretofore under said law as a resident of
County been allowed an invalid pension of
One Sun red Dollars, for the year 1892.
Sworp to and subscribed before me, this, the
1211
60 = day of fluy 1900.) POST OFFICE
4100 Cal. Out
Elvamon on many
NOTE.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the ment of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Barkon County.
County.)
1 Malenoviche Ordinary of mid County
A Digital of Said County,
the do certify that I am well acquainted with H. III. Willis the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
and that he resides in this County.
Given under my official signature and seal, this
and that he resides in this County.
Given under my official signature and seal, this
Given under my official signature and seal, this

Send to receive and	GEORGIA, County N. Willis T. C. St. S. receipt for the pensi	hereby of O	authorize	THE RESERVE THE PARTY OF THE PA	ye W.
hart	sville Ga		heek	n new rich wa	
	NESS WHEREOF, I	have because e	et my hand an	d and this	199
day of less	Marie Company of the	1901.			0 //
4	1	Je F.	U Wil	lis.	[L. S.]
Execu	ated in presence of	The second second			
Soll	alduch	29			
1	and the	7			
1)	and the state of	
	100 100 C 1 4 W	i je bout			
				Market Commission	
od.)	5		1901.	alone.	V
Enrolled	ISN.	3 2	S X	er of Pen	Allanta.
dy E	E E	13.2	S 6	Commissioner WARRANT HANDED TO	7 Printer.
SSE Already Solution 1250 Solution	ISABLE ER'S PE 1901	337	1 3	Co Co	J. State
Those No.	SIS EE	738	S/60	RRAN	W. Harrison,
		Name H. County (Disability		W.	, a
	5	Name County Disabili	Amount,		1000
(For	20	100 0			
(For	S	I Z S Ä	W I	i no s. A servicio es	the Con-

for Applicants Heretofore Allowed Pensions.

	POWER	OF AT	TORN	EY.		
STATE OF		}	ereby autho	rize_(Zen	ge j
Hund	ricks	4 0	borte	_		Ga
to receive and	receipt for the pen	sion paid her	eon and re	quest th	at he res	mit sam
at Ban	Einsville			>	100	
	vess whereof, i	-	to set my h	and and	seal this	26
day of fa	190	3.	7 011 0	100		,
			G MI	opee	15	[r
	in presence of					
0.07	Gim			74		T)
				.5		
			TI	1 89		1 11
E R			9	1 1	of Penals	, Ar
WRO T	a 2 .:	213	000		SEY	2
2 2	DISABLE IER'S PE	13.03	Regiment	K	LINDSEY Commissioner	HANDED
CODE SECTION 1150 E ALREADY	A So	36	Regi-	N	W. L	T HA
SE A	Si SE O	20	8	100	The Street Control of the	ARRANT
CORRESPONDED TO THOSE ALREADY ENROLLED.		13	7	nount, S.	JOHN	1 MA
91 8		It e	Sabilit	onn	no lound	0

FOR PPINIONES HERETOTORE ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

Darton	County.)	
Personally appear	rs F. m. Willis of Barto	w
	who being duly sworn, says on oath that he is a bona fide o	
	and has resided therein continuously ever since the	1
lay of frine	1845; that he culisted in the military service of the	Con-
ederate States (or of the	State of) during the war between	
States, and served as a	worte in Company 9, of 65 th Reg	
of ya- v	olunteers fae kton 's Brigade; that whilst en	gaged
n such military service in		day
i may	1864, he was wounded, injured or diseased as follows	d F
Vin Shot	wound in left leg, re.	
Sultingine	The amputation of the	-
left-leg		
1		
		*
Darford One hundre	2000	nt of
Service 26th, 1900 One hundred Sworp to and subscrib	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. And Milley 1901. Postoffice Corressors	nt of
Sworp to and subscrib The described as the subscribed as the subs	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. Hed before me, this the first pens of the year 1901. Postoffice Corners or 1901. Postoffice Corners or the year of the wound or character of the wo	nt of
October 26th, 190 One hunders Sworp to and subscrib 3 of day of Je Work.—State fully the nature of the disability n	County been allowed an invalid pens Dollars, for the year 1900. Led before me, this the figure 1901. Led before me, th	nt of
October 26th, 190	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. Postoffice Corners or 1901. Postoffice Corners or of the wound or character of seems which causes the disability, and explain tent the wound or disease.	nt of
Swort to and subscrib One distribution Swort to and subscrib One day of Je When the state fully the nature toody the extent of the disability re	County been allowed an invalid pens Dollars, for the year 1900. Dollars, for the year 1900. Postoffice Connection 1901. Postoffic	nt of
October 26th, 190	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. Postoffice Drivers 1901. Postoffice Drivers Fig. 1901. Postoffice Drivers of the wound or character of sheense which causes the disability, and explain the wound or disease.	nt of ion of
Norwestern Of GEORG	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. Postoffice Corners or 1901. Postoffice Corners or of the wound or character of seems which causes the disability, and explain senting from the wound or disease. HA, County. Ordinary of said Co	nt of ion of
Sworp to and subscrib Sorp to and subscrib Sworp to and subscrib Sorp to and subscrib Sorp to and subscrib Sorp to and subscrib Sorp to an subscri	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. Postoffice Corners or 1901. Postoffice Corners or richs Diving to the wound or character of the wound or character of the wound or disease. HIA, County. Ordinary of said Corners of the wound or disease. Ordinary of said Corners of the wound or the	ounty,
Sworp to and subscribed by the Authority of the Manager of Sworp to and subscribed by the Authority the extent of the disability of STATE OF GEORG	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. He before me, this the first penson of the wound or character of decase which causes the disability, and captain resulting from the wound or disease. HA, County. Ordinary of said County. Acquinted with Ft, M. Williss affidavit, and am well satisfied that the statements made be	nt of ion of particular particular, the y him
Sworp to and subscribed by the humbles of the humbl	County been allowed an invalid pens Dollars, for the year 1900. Dollars, for the year 1900. Postoffice Corressore 1901. Postoffice Corressore richts of the wound or character of deease which causes the disability, and captain essuling from the wound or disease. AIA, County. Ordinary of said Co acquinted with Ft. M. William acqui	nt of ion of ion of particular pa
Sworp to and subscriber of the disability of the state fully the nature barly the extent of the disability of the certify that I am well policant in the foregoing in his said affidavit are trund that he resides in this	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. Postoffice Connection 1901. Postoffice Connection of the wound or character of decase which causes the disability, and explain that, County. Ordinary of said Co acquinted with H. M. Willis affidavit, and am well satisfied that the statements made b lee, and I know he is the individual he represents himself County.	nt of ion of ion of particular pa
Sworp to and subscribed by the Manager of Sworp to and subscribed by the state of the disability of the state of the s	County been allowed an invalid pens Dollars, for the year 1900. Dollars, for the year 1900. Dollars, for the year 1900. Postoffice Connection of the wound or character of the wound or disease. HIA, County. Ordinary of said Connection of the wound or disease. When the wound or disease. County. Ordinary of said Connection of the wound or disease. County. Ordinary of said Connection of the wound or disease.	nt of ion of ion of particular pa
Sworp to and subscrib	County been allowed an invalid pens County been allowed an invalid pens Dollars, for the year 1900. Postoffice Connection 1901. Postoffice Connection of the wound or character of decase which causes the disability, and explain that, County. Ordinary of said Co acquinted with H. M. Willis affidavit, and am well satisfied that the statements made b lee, and I know he is the individual he represents himself County.	nt of ion

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF	EORGIA,)		
Bartin		{		
and the literature of the later	ars F.M. W	J - W -	B	1
				low
County, State of Geor and resident of said S	tate and has resided	therein continue	h that he is a bon	a fide citizen
day of	18 40 ; tha	t he enlisted in t	hamilitam assi-	ne_C
federate States (or of	the State of	to no christed in t) during the wa	
States, and served as	2	in Company	\$, of 60	
of Ha	Volunteers Jac	ekton's	Brigade; that w	hilst engaged
in such military servi	ce in the State of	ya	on the	
of may	1864, he was	s wounded, injure	d or diseased as	follows:
Shall m	1 / /_ //	ree	boitt	1
New Hoy	he Church	may 27	£1864.	Lea
ampula	ad obove 12	rel		. /
* 10/1	the play of the play			
3,1				
· -				
			4.1	117
day of the Morticularly the extent of the	scribed before me, the	1903. Post-office	Willis Emers	
Barlow	County.	I m. u)		said County,
the applicant in the fo				anto mada ba
im in his said affidav				
e and that he resides		te.	tuliar ne represen	is it insert to
	ven under my official	signature and se	al, this	6.2
h,	of Jan	1903.	0	
Affix }	0	GWA	mori.	css.
seal here	0	rdinary Bo	lino 1	County.
	-Fill all blanks and of Com	pany and Regiment.	January 1, 1903.	

Get to recent day of E	January Street in Witness Ya	m. I sw.	Hudr Hudr for the penal sor, I have be	sion paid Gu nereunto se	by	chie.	that he re	reby authoriz	- 1 0
(FOR THOSE ALREADY ENROLLED.)	No. 1573	DISABLED	SULDIEK S PENSION 1904.	Name di M. Willias	County of without 60 Co. Disability Colo of Lea	Amount, \$100.	JOHN W. LINDSEY, Commissioner of Pensions.	Geo. W. Harton, Star Printer falses.	yes sale

Tuillis, 9 M.

1926

Application for Pension
Due Deceased Pensioner
(UNDER ACT 1919)
(To pay expenses of last illness and funeral)

Twillen aricks. Ordinary
For M. William
Date of Death. Part. 1925.

Amount \$ 1900 or M.

Approved and ordered paid

John W. Clark,
Commissioner of Pensions
Commissioner of Pensions

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

Parid Jan 4, 1927. S. W. Hendricks by EH clark CO Ordinary

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Personally appears I, M. Willia of Barlow ounty, 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 Soft as of June 18 Hi, that he enlisted in the military service of the Con- derate States (or of the State of Juring the war between the tates, and served as a harrole in Company II, of Dth Regiment Younteers Jackson's 's Brigade; that whilst engaged such military service in the State of II on the I day 1864, he was wounded, injured or diseased as follows: That left leg, beg auryniolist Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1804. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of	STATE OF GEORGIA,
Personally appears H. M. Williams of Barlow county, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the of the conderate States (or of the State of the Conderate States, and served as a fun woll in Company H. of State that whilst engaged such millitary service in the State of the Conderate States (or of the State of the Conderate States, and served as a fun woll to the such that whilst engaged such millitary service in the State of the was wounded, injured or diseased as follows: The conderate States (or of the State of the was wounded, injured or diseased as follows: County, been allowed an invalid pension of County, post-office Emperous Sworn to and subscribed before me, this the day of Tary 1904. Note that fully the nature of the wound or character of disease which causes the disability, and explain trivicularly the extent of the disability resulting from the wound or disease. TATE OF GEORGIA, County. The County of Said County, County that I am well acquainted with H. M. Williams of the presents himself to be, and that he resides in this County. Given under my official signature and seal, this	Bartow County.
Deponent makes application for the pension to which he is entitled for the year side of the State of the Stat	7
Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1904. I have heretofore, under said law, as a resident of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Javy Dollars, for the year 1904. Sworn to and subscribed before me, this the day of Javy Dollars, for the year 1904. Sworn to and subscribed before me, this the day of Javy Dollars, for the year 1904. Sworn to a destruct of Dollars, for the year 1904. Sworn to a destruct of Dollars, for the year 1904. Sworn to a destruct of Dollars, for the year 1904. Sworn to a destruct of Dollars, for the year 1904. Sworn to a destruct of Dollars, for the year 1904. Sworn to a destruct of Dollars, for the year 1904. Sworn to a destruct of Dollars, for the year 1904. Sworn to a destruct of the wound or character of disease which causes the disability, and caplain reticularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. County. County. Gright that I am well acquainted with Java Dollars, for the year 1904. County. Gright that I am well acquainted with Java Dollars, for the year 1904. Given under my official signature and seal, this	
Deponent makes application for the pension to which he is entitled for the year siding October 28th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of County, post-office County, post-office County, post-office County, post-office County, County, been allowed an invalid pension of County, and County, County, County, County, County, County, and additional and addition and an well satisfied that the statements made of him in his said affidavit are true, and I know he is the individual he represents himself the, and that he resides in this County. Given under my official signature and seal, this	
derate States (or of the State of derate States (or of the State of lin Company of six the Regiment Volunteers (De Chiff or 's 's Brigade; that while the graged such military service in the State of (Deray or 's 's Brigade; that while the graged such military service in the State of (Deray or	ay of June 1845; that he enlisted in the military service of the Con-
Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of July 1904. John Tary 1904. John Tary 1904. Sworn to and subscribed before me, this the day of July 1904. White adding October 26th 1904. I have heretofore. Under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of July 1904. Post-office Emparous Note-State fully the nature of the wound or character of disease which causes the disability, and explain of the disability resulting from the wound or disease. STATE OF GEORGIA, County. Ordinary of said County, of certify that I am well acquainted with July 1904. Ordinary of said County, of this is 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	derate States (or of the State of) during the war between the
Deponent makes application for the pension to which he is entitled for the year adding October 26th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of July 1904. July 1904. When the mature of the wound or character of disease which causes the disability, and explain the statements of the wound or disease. STATE OF GEORGIA, County. Ordinary of said County. July 1904. Ordinary of said County. Ordinary of said County, been applicant in the foregoing affidavit, and am well satisfied that the statements made to be, and that he resides in this County. Given under my official signature and seal, this	tates, and served as a harvole in Company & of both Regiment
Deponent makes application for the pension to which he is entitled for the year iding October 28th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Delic humber of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Javy 1904. Low Home of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Javy 1904. Post-office Emphorial Protection of Dollars, for the year 1903. STATE OF GEORGIA, County. County, been allowed an invalid pension of Dollars, for the year 1903. STATE OF GEORGIA, County, Cou	Ya Volunteers da off on's 's Brigade: that whilst engaged
Deponent makes application for the pension to which he is entitled for the year adding October 28th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Tary 1904. Norre-State fully the nature of the wound or character of disease which causes the disability, and explain relievilarity the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. J. W. County. J. J. W. County. J. J. W. County. J. J	such military service in the State of 40 on the 27 day
Deponent makes application for the pension to which he is entitled for the year adding October 28th, 1804. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Javy 1804. Norr.—State folly the nature of the wound or character of disease which causes the disability, and explain residently the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. J. J	may 1864 he was wounded, injured or diseased as follows:
Deponent makes application for the pension to which he is entitled for the year iding October 28th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Tary 1904. Nover-state folly the nature of the wound or character of disease which causes the disability, and explain reticularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. I, Washington County. I, Washington County. Gertify that I am well acquainted with A Machine the foregoing affidavit, and am well satisfied that the statements made the infinity in its said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	that in lest les bra autilatil
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Jawy 1904. Note-State fully the nature of the wound or character of disease which causes the disability, and explain of the wound or disease. TATE OF GEORGIA, County. County. County. Law Market County. Ordinary of said County, or explain and the foregoing affidavit, and am well satisfied that the statements made to be, and that he resides in this County. Given under my official signature and seal, this	of the state of th
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Jawy 1904. Note-State fully the nature of the wound or character of disease which causes the disability, and explain of the wound or disease. TATE OF GEORGIA, County. County. County. Law Market County. Ordinary of said County, or explain and the foregoing affidavit, and am well satisfied that the statements made to be, and that he resides in this County. Given under my official signature and seal, this	
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Jawy 1904. Note-State fully the nature of the wound or character of disease which causes the disability, and explain of the wound or disease. TATE OF GEORGIA, County. County. County. Law Market County. Ordinary of said County, or explain and the foregoing affidavit, and am well satisfied that the statements made to be, and that he resides in this County. Given under my official signature and seal, this	
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Jawy 1904. Note-State fully the nature of the wound or character of disease which causes the disability, and explain of the wound or disease. TATE OF GEORGIA, County. County. County. Law Market County. Ordinary of said County, or explain and the foregoing affidavit, and am well satisfied that the statements made to be, and that he resides in this County. Given under my official signature and seal, this	
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of Jawy 1904. Note-State fully the nature of the wound or character of disease which causes the disability, and explain of the wound or disease. TATE OF GEORGIA, County. County. County. Law Market County. Ordinary of said County, or explain and the foregoing affidavit, and am well satisfied that the statements made to be, and that he resides in this County. Given under my official signature and seal, this	The second secon
County, been allowed an invalid pension of County, been allowed by the year 1903. Sworn to and subscribed before me, this the day of Jawy 1904. Nore.—State fully the nature of the wound or character of disease which causes the disability, and explain of the disability resulting from the wound or disease. STATE OF GEORGIA, County. The certify that I am well acquainted with AMADAMA Ordinary of said County, be applicant in the foregoing affidavit, and am well satisfied that the statements made of the infinity 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	
Norz.—State fully the nature of the wound or character of disease which causes the disability, and explain reticularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. I, Ordinary of said County, ordinary ordi	Due hums red Dollars, for the year 1903. Sworn to and subscribed before me, this the 7 MW.10:
NorzState fully the nature of the wound or charafter of disease which causes the disability, and explain reticularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County, J. Ordinary of said County, or certify that I am well acquainted with J. M. Works, or explained in the foregoing affidavit, and am well satisfied that the statements made the imm in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	day of Jaly 1904. (Post-office Engage)
County. Cou	
County. County. County. County. Cortify that I am well acquainted with A M. Works. The applicant in the foregoing affidavit, and am well satisfied that the statements made thim in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	Note.—State fully the nature of the wound or character of disease which causes the disability, and explain
County. I. Ordinary of said County, Describing that I am well acquainted with J. M. Works The applicant in the foregoing affidavit, and am well satisfied that the statements made I him in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	
I, Ordinary of said County, or certify that I am well acquainted with I M. Works. The applicant in the foregoing affidavit, and am well satisfied that the statements made thim in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	
the applicant in the foregoing affidavit, and am well satisfied that the statements made thin in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	County.
the applicant in the foregoing affidavit, and am well satisfied that the statements made thin in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	auch dricks
the applicant in the foregoing affidavit, and am well satisfied that the statements made thin in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	Oddinary of said County,
him in his said affidavit are true, and I know he is the individual he represents himself be, and that he resides in this County. Given under my official signature and seal, this	
be, and that he resides in this County. Given under my official signature and seal, this	
Given under my official signature and seal, this	
and day of July Gw Hendricks	
AMIX YOUT TUNION TESS	day of January Political 1904.
here.	All The

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

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

Application for Pension Due to a Deceased Pensioner

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

GEORGIA.	Bartow Count	v.		
Personally before	ore me, the Ordinary of said Co		Payne	
	7. m. Willis	of said County, v	who, after being sworn, on o	oath
says that he knew	toll of said County at the time of	of said	County, and that said Pensic	oner
County, in this State	on theday o	f June	192.5 and	that
a Pension of	f pensioner's death, and that pe		Dollars was due pensioner	
	sufficient to pay these funeral			
h .	ly and completely ITEMIZED	hereto attached.		
Switten!	subscribed before me	A	Pagne	
by ms. Tank (Seal of Ordinary	Ew County L. Franklin		Jugar	
Andrew property of the control of th		And the second section of the second	The state of the s	-

CERTIFICATE OF ORDINARY

GEORGIA, Battow County. I, SWHEndicks Ordinary of said County, do certify
I, SWHEndricks Ordinary of said County, do certify
that I personally know a Payne , who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit;
that I also knew F. M. Willis while in life and that this was
the same person whose name appears on the Pension Roll of Batton County, and
was paid a Pension of 165°2 995 (5.1.) Dollars
in said County for 192, and I now believe said pensioner to be dead; and that the instructions at the foot of
this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.
Given under my hand and official seal, this Gw of November 192 6 (Seal or Ordinary) Gw Hartow County County
(Seal or Ordinary) White Control ordinary
· Bartow County

NSTRUCTIONS:

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

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

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

5th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipt 6th. Return this application, and attached bills, with your final settlement, to the Pension Department

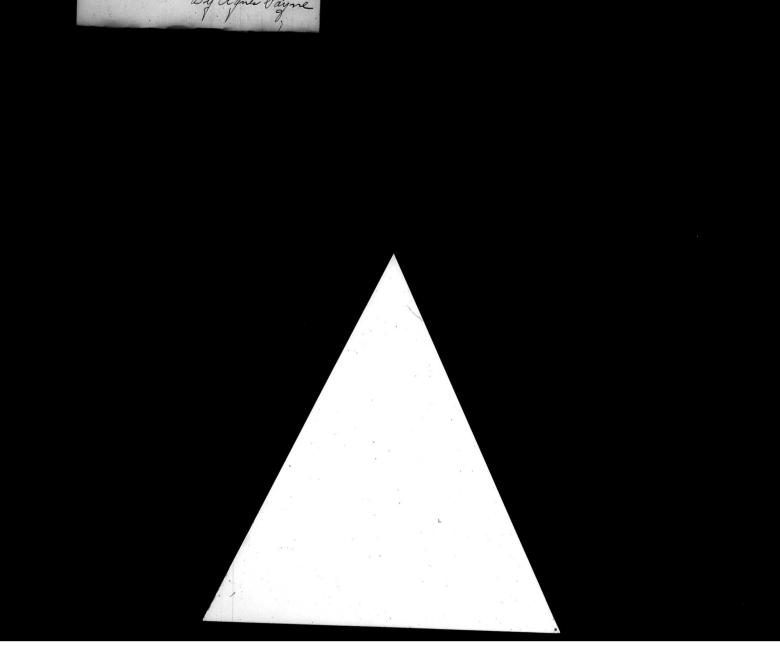
Willis, Fransist, Wartow Co. RESIDENCE PHONES 85-299-248 Cartersville, Ga., Oct /9 192 6 Coleman Sa Sa 1891. IN ACCOUNT WITH Maimed Soldiers. G. M. JACKSON & SONS FURNITURE AND UNDERTAKING Youcher No. 294 22 WEST MAIN STREET Interest 7 per cent Charged After 60 Days Amount \$ 100 70 Boshet 90.00 Paid to DI M. Welle 15-00 12 50 For Town ofley 1950 4 4 malerial for rout 26 36 \$ 174, 00 Included in warrant No. 8170.36 issued to Treasurer. Georgia, Bartow Co. The above and foregoing acet the rendered for funeral expenses of F.M. Willis, who died 1801 without owning sufficient property to pay this bill. Sworn to and subscribed before me, this Oct. 19, 1926. WARRANT CLERO

ME. Willie, Francis M. 188 Jou	
Dar	1891.
HEN AND WHERE BORN?	No. 791
ILISTED WHEN AND WHERE?	STATE OF GEORGIA, EXECUTIVE DEPARTMENT. \ Allanta, Ba. Schy 9 1891.
MPANY AND REGULERT? Private, Co. C. 65th Regiment Ca. Volc., Sak & Jackson's Briende.	
ME OF CAPTAIN AND COLONEL?	Mr. France's M. Weller of the Courty
NUNDED? At New Hope Church Ga., May 27, 1864 in left knee above knee.	of
CPTURED, WHEN AND THERES	approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
LEAGED,	He is entitled to receive the sum of
IEN AND WHICH SURRENDERED?	for such disability, the same being the hit proceeding of the year ending October 24, 1891. The Treasurer will pay the same and hold his recent on this voucher and return same to
NOT PRESENT AT SURRENDER, WHERE WELL YOU?	Executive Department for warrant are of orong the warrant are of orong
	By the Governor.
CED; WHEN AND VIERKS	M. H. Humsin Sec'v Executive Department
RLD,	
ITNESSES, None,	1009
A COLOR	RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.
COUNTY. Bartow.	Questunaceo tog Dollars,
	RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia. One of Company Dollars, per above voucher, this Good Market Markets Harden Markets Harden Markets Dollars, 1891.
A Part of the Control	V agenetics
Received of G. W. Hendricke	

penses of 7.m. Willie.

Mus alfred Payne

By Agnes Payne



POWER OF ATTORNEY.	QUESTIONS FOR APPLICANT.
STATE OF GEORGIA, .)	STATE OF GEORGIA,
COUNTY.	COUNTY.
1. J. F. Willis	to avail Money of the Pension Act (Seatler 1984 Cod) and the State and County, desiring
Judinories of Continorillo	to avail Johnelf of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true and seem to make to the following questions, deposes and answers as follows: 1. **Mark 2. **Appendix 2. **Ap
	J. J. Willis, On Barlow County and post-office)
to receive and receipt for the pension allowed and request that he remit same to	12. Hay long and since when have you been a resident of this State? I have diver in
0.2	3. When and where were you born of 184 5; In Flankling County Ito;
Witness my hand and seal, this day of 1903.	4. When and where and in what company and regiment did you called any called a series (1869)
[L. 8.]	4. When and where and in what company and regiment did you enlist or serve; his world (669).
Executed in the presence of Man	
Jahn C Hiller	5. How long did you remain in such company and regiment? from moren 1869, William of Warner of Ottached myself
	10 penna wayyord amment
	6 Whep, and where was your company and regiment surrendered and discharged office 36 1865,
	Collinson I Ca. Wolfend Command was sumendered
	7. Were you present with your company and regiment when it was surrendered? Word
	and by whose authority & was trutist from 191 Commons and of my first ffortunely I get a the by grant to Working & Common allower
	9. How much can you earn (grown per annum by omr averton as a vertical and on the control of the
	0 10. What has been your occupation since 1865? Harman 1. Upon which of the following grounds do you base your application for pension, viz. first, "age and ground,"
	second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity Towerty
And the second s	second, "infirmity and powerty," or third, "blindness and poverty"? In the problem of the property of the prop
3.0	I state whether you are totally blind and when and where you lost your sight? The lyes have been in a
Figure 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a being bod for five years I can't ac well, but can su my vay
10 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	my with and shown that severy light
3 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13. What property, real and personal, or income, do you possess, and its gross value? / Morie
MINISTER NO. 1872	14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1991 and
	1993, and what disposition, if any, by sale or gift, have you made of same? Whate mot
	& had any property
	16. In what County did you reside during those years, and what property did you then return for taxation?
2177320 MINA E ES	10. How were you supported during the years 1899, 1900, 1901 and 1902? By any Children
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	manly
5011 11 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1	17. How much distrour support cost for each of those years, and what portion did you contribute thereto by your own labor or moome? I do not know Fastion a your
1 - 1 8 1 1 1 1	19. Have you a family? If so, who composes such family? Givey their means of support have they
	homogread, or other property! Their ages and how employed it have a wife and
3/8/	These on mighty little slaw not oak lothe buy try how &
- 3 4 CO B B B	20. Are you receiving any pension? If so, what amount and for what disability?
TAND AND AND AND AND AND AND AND AND AND	21. Here you gree made an application for project for a
	21. Have you ever made an application for pension before? 22. How many applications have you ever made and yndge what class? and unider
GENT 1.00	My andrywy classes
16 IGE	Sworn to and subscribed before me this the day of (1903.) Applicant.
118 118 118 118 118 118 118 118 118 118	gwarten, Ordinary, Mark
Book am	of County.
> 0 6 6	

OHESTIONS FOR WITHING

QUESTIONS FOR WITNESS.
STATE OF GEORGIA, .)
Barling GOUNTY.
4 XI (Dahkan)
and County, having been presented
as a witness in support of the application of the special of the s
answers as follows:
1. What is your name and where do you reside?
done on the County you
2. Are you acquainted with fifth will the applicant; if so, how
long have you known him? 3. Where does he reside, and how long and since when has be been a resident of this State?
Barlow County All his like
4. When, where and in what company and regiment did he enlist, and how do you know?
1862, Cedartism Go in Co A. 1st Wa Con colm
5. Were you a member of the same company and regiment? Q was not
6. How long did he perform regular military duty?
7. When and where was his command surrendered within 26-1865
Mienston MC.
8. Were you present when it surrendered? Was not
9. Was applicant present? Agwas not 1
10. If he was not present, where was he? Ale was in North you
Washington boys manning of the Dring Form Form of daugh 1 1 Ga gav
When the war was much be to get to I, he carlot of the contract berings
to Junal Wolferdo Command ne NoMA
11. What property, effects or income has the applicant? (Give your means of knowledge)
il de la serie de la constante
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1893, 1900, 1801 and 1902,
and what disposition, if any, did he make of same?
13. Has be conveyed awar any of his property to the problems
the last four years, it so, what was it, and to whom?
14. What is the applicant's comparing and about 1
14. What is the applicant's occupation and physical condition?
HUNDY KO
15. Is the applicant unable to empose himself by late.
15. Is the applicant unable to support himself by labor of any sort, if so, why?
16° Hamman Landson and Control of the Control of th
16: How was he supported during the years 1898, 1899, 1900, 1901 and 1902.
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code?
19. Who composes family? What property have thee? Chilled
19. Who composes family? What property have they? Children's age and their earning capacity?
Secretaria de la constantina del constantina de la constantina de la constantina de la constantina del constantina de la constantina de la constantina de la constantina del constantina del constantina de la constantina del constantina
you in the recovery of a pension by the applicant
Sworn to and subscribed before me, this the
20. What interest have you in the recovery of a pension by this applicant? Sworth to and subscribed before me, this the day of 1903. 1903. Witness.

AFFIDAVIT OF PHYSICIANS

In The state of th	
STATE OF GEORGIA,	
Country.	
Personally came before me f. P. Calhan	an an
a. I Calhoun, both known to me a	s reputable physician
of said County, who, being severally sworn, say on oath that they have examined carefully— —————————————————————————————————	1254, Code, and after
such personal examination say that his precise physical condition is as follows:	
To old and infiner Duffer	a tran
Thronic Ofothalmisant	Die
ium gruing an left ege	eet on
which render vision in	her
feet.	1
and that we have no interest in said pension being allowed. FREAR	2
Sworn to and subscribed before me, this the	
29 day/of 1903.	
Ordinary.	
ORDINARY'S CERTIFICATE.	
STATE OF GEORGIA,	100
Baylow, County.	

STATE OF GEORGIA,	
Bastin, COUNT	y.)
1. Hw Hendre	Ordinary, in and for said County, hereby certify
that the applicant & H. Willia	resides in said County, and ha
been a bona fide resident of this State since the	day of 189
and that the witnesses viz.	phan Mid Steppe
Dr. F. R. Welhaum	and A.J. bothom
are of trustworthy character, and that their states	nents are entitled to full faith and credit.
I further certify that before answering the	s foregoing questions the applicant and each witness took the oath
	lavits was read to the applicant and witness before same was signed.
I further certify that the tax digest of	
returned for taxation in his name in 1899-	Dollars of
~	Dollars of
property, and in 1900	Dollars of property, in 1901
	Dollars of property, in 1902
	Dollars of property.
In my opinion the foregoing claim is.	
an my opinion the foregoing claim is	made in good faith.
Witness my hand and seal of office, this	9" day of Deh
4	1111.
<u>-4</u>	of Barton County,

NOTE. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "Evolution the witnesses in the following words: "Such that I row abswers make to each of the questions saked of you, and the evidence you shall give will be the whole with the words of the witness, and the evidence you shall give will be 2. Additional safflaying may be attached it blank spaces are insufficient.

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.

_County.

Sarlier	COUNTY			
1. J. J. 1	villis		hereb	y authoriz
10 Hunor	ests	of 100	rlinstra	the 4
ceive and receipt for the pension			ex	
Witness my hand and seal, t	Bartin		ek	190
	Bartin		ek ly ltis	- 190 [

WARRANT HANDED TO

JOHN W. LINDSEY,

NDIGENT PENSION.

190

QUESTIONS FOR APPLICANT.

Was	F GEORGIA,	OUNTY.		1	
1	· H. Will	CI .	of sa	id State and County, de	airing
true answers to	f of the Pension Act (Section make to the following question name and there do pu	on 1254, Code), here ions, deposes and an geside? Give Stat	by submits his proof wers as follows: County and Postoff	ice.)	wora
10000000000000000000000000000000000000	and since when have you be	TRECTOR CONCINED AND AND A SECUL	CANADA AND SECURE	re liver	4— 640
year	gia all my	slikes	A COLOR	County	a
	where and in what compan			north 1862	-
ya.k	ravalry	, 0	, , ,	1000 7000	4
5 Chow long	did you remain in such com	pany and regiment?	High 180	552, <i>Left</i> 4	
6. When and	where was your company at			I have it	uno .
	STANDARD STA	and regiment when i	was surrendered? I who you left your	Was mi	and
	can you earn (gross) per ar	- U make	The aug	of a comme	Paul
10. What has l	been your occupation since 18	865? Ham	and		
second tilefami	th of the following grounds dity and poverty," or third, "	AND REAL PROPERTY OF THE PARTY	Charles To		1
12. If upon th port. If upon	he first ground, state how lo the second, give a full and	ng you have been in complete history of	such condition that the infirmity and its	you could not earn your extent. If upon the t	sup- hird,
down_	u are totally blind and when	and where you los	Des net	rous a	em
great fe	SECRETARIA SPECIALISM AND ADMINISTRATION OF THE PARTY OF	b Gad k	repells fr	y Obou	<i>E</i> -
St. Charles and Table 11 and 1887	perty, real and personal, or	income, do you posse	es, and its gross value	None	
14. What prop	erty, real or personal, did yo	ou possess in 1901, 1	802, 1903, 1904, 190	5, 1906 and 1907, and a	what
disposition, if an	y, by sale or gift, have you	made of same?	none c	it all	<u> </u>
15. Bank	ounty did you reside during t	those years, and wha		en return for taxation?	T.
	you supported during the you	ears 1901, 1902, 190	3, 1904, 1905, 1906	and 19072 084	
17! How much	did your support post for ea	ch of those years on	d what portion did ye	ou contribute thereto by	your &
18. What was	your employment during 18	J & live	Washer v	an shocial	andle -
receive in each ye	family! If so who compo	man anch family 9 C	ine their manner of the	pport. Have they a h	ome-
19 Have you a		4 44 14 -	Man I a	- hopen	
19. Have you a stepl, or other pr					- Control of the Cont
stept, or other programmer of the stept of t		unig_		M	
19. Have you a steph, or other partial and a steph, or other partial and a steph and a ste	peiving any pension? If so,	what amount and for	or what disability?	No.	
stepl, or other your action of the your control of the your contro	seiving any pension? If so, wer made an application for a applications have you ever n	what amount and for pension before?nade and under what	or what disability?	Note Hole	
steph, or other particles of the particle partic	ver made an application for applications have you ever made an application for applications have you ever mand subscribed before me the	what amount and for pension before?nade and under what	or what disability?	NV Hole Calles Applicant.	

QUESTIONS FOR WITNESS.	
STATE OF GEORGIA,	
COUNTY.	
John Mynn Q Jajaid State and County, having been presented	W. T.
as a witness in support of the application of A Mullius for pension under section 1254, Core, and after being July sworn true answers to make to the following questions, deposes and	
answers as follows:	
1/ What is your pame and where do you paside?	
Clear fown Park Pack Gunty for	2
2. Are you acquainted with the first first the applicant if so, how	
long have you known him? I servet to moustine with him in the ser	י
3. Where does he reside, and how long and since when has he been a resident of this State?	H
4. When, where and in what company and recipient did be enlist, and how do you know?	
I gound a Member of to A 18h Ga Cavalry in July 1864	
5. Were you a member of the same company and regiment?	
6. How long did he perform regular military duty who the Surrender apr 1805	1
7. When and where was his command surrendered? Some When in Ale in	
Capri 1866	
8/ Were you present when it surrendered? My What I day a layer	
9. Was applicant present? Aleanh day	
10. If he was not present, where was he? Rosaf Kuvul	
who When did he leave his command town day For what cause?	
How do you know all of this?	_
nom July 7 ch 1908 asstyge Colorany J. A. Wynn with	6
11. What property, effects or income has the applicant? (Give your means of knowledge.)	
A tax me property or income from any course	
12, What property, effects or income did the applicant possess in 1901, 1902, 1908, 1904, 1905, 1906 and 1907,	
None Have Knun lim &5 years. Had some these from	
and what disposition, if any, did he make of same? Mune. God moting he despose	
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?	
As not had more to comey	
2 14. What is the applicant's occupation and physical condition?	
Heris physically feeble and weak.	
The second secon	
Lecause of Physics each, Week Convition	
because of physically weak continon	
cud infilmilies	
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? Thereisal-	
Ly by his tor Clud alenghler	
17. What portion of his support for the four years was derived from the own labor or income?	
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under	
Section 1254, Code as getting old, and as not	
19, Who composes family? What property have they children's ages and their carning capacity?	
19 Who composes family? What property have they Gildren's ages and their earning capacity?	
All our II and more fear wold for themselves	
20. What interest have you in the recovery of a pension by this applicant?	
A Sworn to and superibed before me, this the . M. F. Johnson	
day of the 190 (a) Witness.	
" GW Handrie Ordinary.	

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,	A to the way to the second of the
Bastaw County.	には 時間 できる できる できません できる できません できません できません できま できま できま できま しゅう こうしゅう しゅうしゅう しゅう
Personally came before me	P. Callows
A. J. Calliones	, both known to me as reputable physician
of said County, who, being severally sworn, say on oa	th that they have examined carefully
9. F. Willis	, applicant for pension under Section 1254, Code, and after
such personal examination say that his precise physics	al condition is as follows:
He is old and	il: arl
To be a great de	infirm appear
Clacent to be an	is wholy unable
to care a Deffer	400 00
Sworn to and subscribed before me, this the	wed. Freballin
day of hely 1908	A Machonie
SWHANNOWS	_iOrdinary.
	A STATE OF THE STA

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, COUNTY.	
, gantendrick	Ordinary, in and for said County, hereby certify
that the applicant	resides in said County, and has
been a bona fide resident of the State since the	day of a long lines
and that the witnesses, viz.: H. Ollier	in, A. J. Collivere.
mt- potenton te	
are of trustworthy character, and that their statements are en	ntitled 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	(2017) (BC 1997) : : : (2017) (BC 2017)
I further certify that the tax digest of	County shows that applicant
returned for taxation in his name in 1901	Dollars of
property, and in 1902	Dollars of property; in 1903
	Dollars of property; in 1904
	Dollars of property; in 1905
	Dollars of property; in 1906
	Dollars of property; in 1907
	Dollars of property.
In my opinion the foregoing claim is	
Witness my hand and seal of office, this	made in good faith.
- JWNin	of Barlow County.
NOT	

Glorgia 3 In Resson Came before Barton County me Sid Stegall who ofter being duly swom says that he is acquainted with J. F. Willis of said County, that said willis is not stout and able to work but little that he has no property or meuno from which & derino a support that he has not had any property since he had known him: That his fainly are loborers in the farm for a support; and have my property or income from any source; that they help to support of plicant by their loom Afficient has no interest in a seconory a pension by said willis. Swom a and published before me of me og 1905 Sil Stegall T. N. Dudnies Orlinary Deslow County Georgia

YEAR 1908 COUNTY

Bertow

YEAR 1909 COUNTY Bartow

WHEN AND WHERE BORN? 1845, Franklin County, Georgia

ENLISTED WHEN AND MERE? Merch 1968, Cedertown, Cerrgia

RAHK

CO. A, lat/Georgia Cavalry

Nov. 1864 Wofford's command

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHISE AND SHERE?

REDEASED.

Wefford's command surrendered at WHEN AND WHENE SURRENDIKED? /Kingston, Georgia May 12, 1868. (Applicant was out off from his command and attached himself to Wofford's command.)

IF NOT PRESENT AT JURNELDER, WHERE MIKE YOU?

- DIED. WHEN AND WHERE?

BURTED.

WHINESSES. J. H. Popham - personal knowledge -

WHEN AND WHERE BORN? 1845 - Franklin County, Georgia

ENLISTED MUEN AND WHERE? March 1862 - Codertown, Georgia

RANK.

COMPANY AND RECIMENT? Company A, let Regiment Ca. Cavalry

NAME OF CAPTAIN AND COLONEL?

NAME W11118, J. P.

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

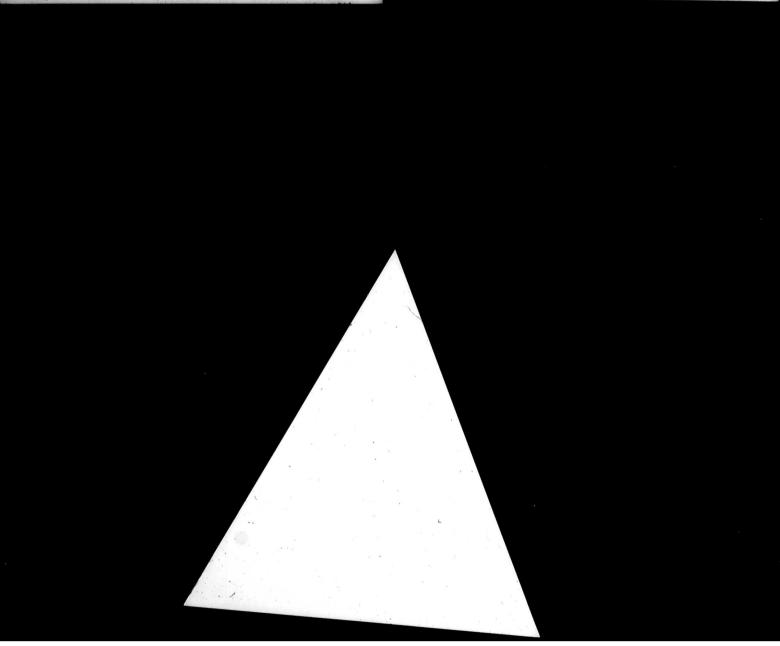
WHEN AND WHERE SURRENDERED? Command: About April 26, 1865 - Greensbore,

IF NOT PRESENT AT SUBREMORR, WHERE WERE YOU? Was cut off from about two months before the surrender.

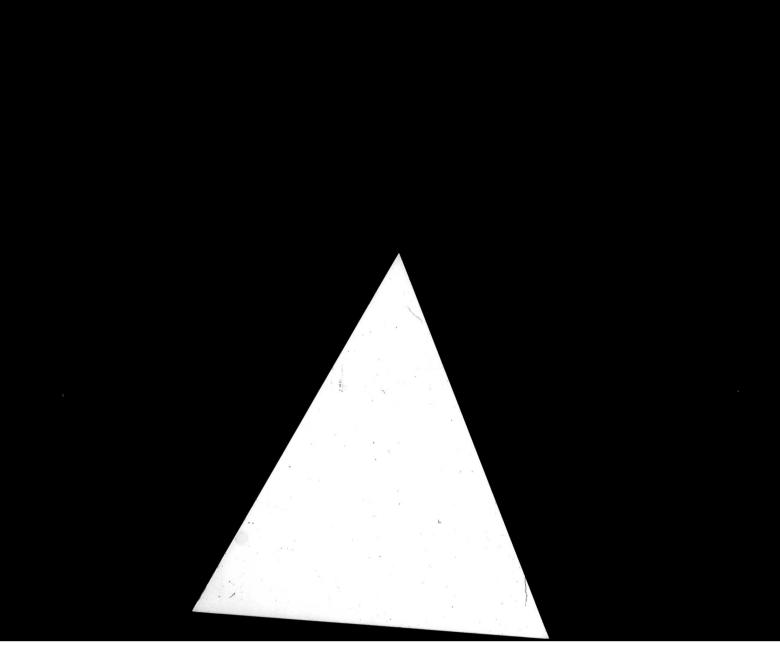
DIED, WHEN AND WHERE?

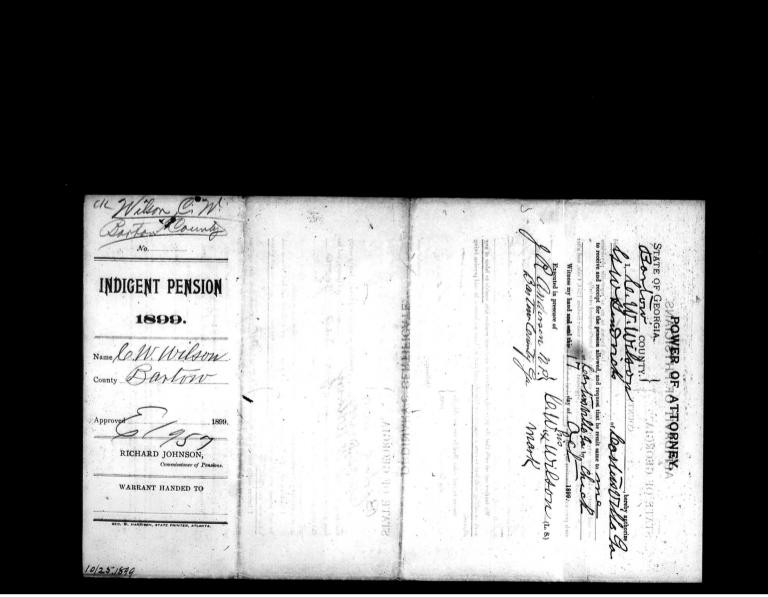
BURTED.

WITNESSES. J. A. Wynn - same command -- No data-



Wilson CATHERINE Widow BARTOW CO. See 6528 Peyt, Guidaf. Company F 1 application, dated 1904





Questions for Applicant. POWER OF ATTORNEY QUESTIONS FOR WIT AIDROED TO STATE STATE OF GEORGIA. county. STATE OF GEORGIA Barlow COUNTY. of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows: hat is your name and where do you reaide? (give State, County and post office.) Wow, in Contessville a to receive and receipt for the pension allowed, and request that he remit same to a Lear top ville ga by Che Witness my hand and seal this 6. For how long a period did you discharge regular military duty? Howe He When, where and under what circumstances were you discharged from service thing How much can you earn (gross) per annum by your own exertions or labor thirty five dollars What has been your occupation since 1865? Loboring on farm 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, "blinddiess and poverty": Use and boverty before a second, "infirmity and poverty," or third, "blinddiess 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 relinque were must be a man a sufficient for languages. on account of old age and 13. What property, effects or income do you possess, and its gross value? I have property or more whatian 4. What property, effects or income did you passess in 1894, 1895, 1896, 1897 and 1898, a position, if any did you make of same ? I had none sether of those 15. In what County did you reside during those years, and what property did you then return for taxation? None of 169 How were you supported during the years 1897 and 1898? from the pauper fund of the camby I do a little by your own labor or income? I do not those years, and what portion did you contribute thereto
by your own labor or income? I do not trow, I can obout 13 of a say port did little light Jobs obout win DIGENT PENSIO 1. myself, with a and or and daughter host No ha HANDED Are you receiving any pension ? If so, what amount, and for what disability ?.. RICHARD County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
m. H. Goode COUNTY)
as a witness in support of the application of W. W. W. W. for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions,
deposes and answers as follows: 1. What is your name and where do you maile? M. S., Goode Live
near Carty Ville Barling Carrely Ga
how long have you known him? Amce 1862 = 37 years
3. Where does he reside, and how long and since when has he been a resident of this State? In Carles Ville Ja, Ever Since I have townshim
of When, where and ju what company and regiment did he enlist, and how do you know? I from
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? I was wormed 456-1864.
in the service when I stooled home in Joky 1864.
I was never with the commend oftenwant
T. What property, effects or income has the applicant. (Give your means of knowledge.) I say for property, when you came, I have hand
8. What property, effects or income did the applicant possess in 1808, 1897 and 1898, and what dispo-
sition, if any, did he make of same? Lod none out
never has allumilated any property
9. Has be conveyed away any of his property in the last three years, if so, who was it, and to whom the has not. He had you to Con wey
light from anylicant's occupation and physical condition of the drug liftle
Condition is athingh back, being old and books
In account of old age and physical
mfirmths 12. How was he supported during the years 1897 and 1898? He get and still gets
and from My county. De came a little of light work
13. What portion of his support for these two years was derived from his own labor or income? Our not knew a poetly; Though allessonily very list
14. Give a full and complete statement of the applicant's physical condition that entitles han to a recision
eyes are officeled, and generally as brook
down and very feeble and weak
15. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this the Ha day of Auly 1899
Witness.

AFFIDAVII OF PHY	SICIANS.
STATE OF GEORGIA,)	
Bartino COUNTY.	
Personally came before me	Sachow and
a. I toolhow, bol	th known to me as reputable physicians
of said County, who, being severally sworn, say on oath that the	v have examined carefully
such personal examination say that his precise physical condition	is as follows:
he cheaning inflames	
Suffer gram come has	le w passing
inster, probably from ans	anged pro treo gla
Left wich pinh a lice	e anougher
To Her and acces in	2:
We further say on oath that the physical condition of appl	icant renders him unable to labor at any
work or calling sufficient to carn a support for himself, and that w	e have no interest in said pension being
allowed.	000
Sworn to and subscribed before me this the	n S
day of July 1899.	1. Calhoun
Menoriedo Ordinary.	· Commen
ORDINARY'S CERTI	FICATE.
Barlow COUNTY.	
that the applicant Low Willson	y in and for said County, hereby certify
been a bona fide resident of this State since the	resides in said County, and has
1 110.0	amany geons
and that the witnesses, viz: M. H. Groote	cow Johns
are of trustworthy character, and that their statements are entitled	
I further certify that before appropriate the Garage	to full faith and credit.
I further certify that before answering the foregoing question the oath hereon prescribed, and that the full text of the affidavidavidavidavidavidavidavidavidavidav	ons the applicant and each witness took
before same was signed.	s was read to the applicant and witness
I further certify that the tax digests of Bark	County show that applicant
returned for taxation in his name in 1897.	
of property, and in 1898	Dollars
	Dollars of property.
Witness my hand and seal of office, this 172	ade in good faith.
I I I I I	day of 0 1899.
- The New	Ordinary.
of Ode	WINT Com

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You you God,"

2. Additional afflatwits may be attached if blank pages are insufficient.

3. In every case the Ordinary must certify to the change of the state of the s

Additional affidavits may be attached if blank apaces are insufficient.

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

	POWER	OF ATT	ORNE	Y.		
STATE OF	GEORGIA,	1				
Way	low Coun	tv.				
10	W. Wilson					
Girl	L. Duis Ho	The state of the s	action	11:00	ereby auth	orize
- 00 5	41117-1000				THE R. P. LEWIS CO., LANSING	2
to receive and	receipt for the pens	ion allowed, an		-	01	e to
- one	TO THE PROPERTY OF THE PROPERT	at /O	anu	1014	w	tu
by the	1					
Witness	my hand and seal, thi	s day c	f fu	war	1900).
2		16.1	Vil	Vils	m [I	. 81
Execut	ed in presence of		min	1		
burt	64).	ring	3		
7 7 8 1	den (Till Control	montal and a second				
/					٠,	
1					,	
		i. Housen a series de la companya de l				
	-		1 16	1		11
	No	2 0	1900	none.	140	1
CODE SEC.1284. (For Those Aready Enrolled, NO. 21/5-6	SI	1 8	0.1	l,		
Ent.	GENT PEN	19.20	WARRANT ISSUED	W. LINDSEY	22	Atlant
cobe sec. 1284. 38e. Already El. 0. 2/17	ER'S PEN	33.5	SSI	UND	W MC	# 7J
sec.	5 0	1 3 4	5 2	1 8	A 3	Geo. W. Harrison, State Printer.
Se A	9 20	124	WW	7 🗟	1	Heon, B
Those No.		1303	AR	JOHN.	Z ABB	N. Har
. P	9	0.93	3 3	2	1.7	8
	10	Name A	1	/.	the	
	S	S S	0	5	12	

POWER OF ATTO

-		CK OF A	TIORNEY.		
STATE	OF GEORGIA,).			
121	whome on	unty.			
9	112 0	unty.)) ' ' '	
10	W. Wres	100 .	eby authorize		
K	0- 1	her	eby authorize	corge	w
Her	work	of A	Cartinol	r DPO	Con
			A CONTRACTOR OF THE PERSON AS A CONT	and the second second	70
to receive a	and receipt for the	pension allowed	and request the	at he remit	same to
		1	bertes	1.00	0
PI	5	at/	surup/	unce	ya
by Cu	1011				
		~ ~	Q		
Witn	ess my hand and seal	, this //	day of Jace	*	1901.
		2	11/00/11	0.	
		1011	NX WE	eden	[L. S.]
			men. 1	,	
1 Ex	ecuted in presence of	£*	masse		
Mhele	1 00	•		71 Tr. 175	e
MAKA	acc			to the stage.	
YATA	all				

Marie		The second secon
For Those Already Enrolled.)	SOLDIER'S PENSION. 1901. Name C. W. D. Courty Courty Courty Courty Courty	WARRANT ISSUED JOHN W. LINDSEY, Fromedoner of residue. WARRANT HANDED TO JELL MELCHALL OTHER STREET, AND THE STREET, AND

For Applicants Heretofore Allowed Pensions.

Wartow Coun	ty.)
Dersonally appears 6.11	Wilson of Barlow
	duly sworn, says on oath that he is a bona fide citizen
	ate, and has resided in said State continuously ever
since the 19 day of Dec	1832; that he is 69 years old and
	hat he enlisted in the military service of the Confed-
erate States (or of the State of	during the war between the States,
	in Company , of 34 th Regiment of
To volunturs	that his physical condition is as
follows: Has Hidney	Escase and thermalion
which renders him	y surble to earn a support
by lobor of any	
hat his property consists of the follo	owing items No property or
indame	
	territorio de la companya del companya de la companya del companya de la companya del la companya de la company
fals who of	положения в выполнения по предоставления в предоставления
of the value of	Dollars, that by reason of his physical
	support himself by his own exertion or labor, and
hat he receives no pension but the on	
Deponent desires to participate	in the benefits of the Act, approved December 15th,
	f, and makes application for the pension to which he
s entitled for the year 1900. I have	heretofore as a resident of Barlow
county been allowed a pension for the	
Sworn to and subscribed before n	ne, this, the 10 Welson
day of January	1900.
Tw Hendricks	Ordinary.
State of Georgia,	,
//20	} ``
Count	y.)
I, Ilosteno	Ordinary of said County,
o certify that I am well acquainted w	
	d am well satisfied that the statements made by him
his said affidavit are true, and I kno	ow he is the individual he represents himself to be
nd that he resides in this County.	in the individual the represents nimself to be
	my official signature and seal, this
~~ · · · (/A)	
Amx your day of Muse	1900.
Amx your level.	Gw Henricks

For Applicants Heretofore Allowed Pensions.

	STATE OF GEORGIA, County
	61010:1
	personally appears Million, was on Janew
	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 \$ 000 1837; that he is 70 years old and
	by occupation a that he enlisted in the military service of the Con-
	the minimity derived of the Con-
	States, and served for the term of Office in Company 7, of Office Regiment
	that his physical condition is as
	follows: Thysically Mulle to lam a eng
	port from Sheumation and old age
,	
	that his manual annias of the City is
	that his property consists of the following items
	of the value of Dollars, that by reason of his physical
	condition and poverty he is unable to support himself by his own exertion or labor, and
	that he receives no pension but the one herein applied for,
	Deponent desires to participate in the benefits of the Act, approved December 15th,
	1894, and the Acts amendatory thereof, and makes application for the pension to which he
	is entitled for the year 1901. I have heretofore as a resident of
	county been allowed a pension for the year 1900- Cal
	Sworn to and subscribed before me, this the
	77
	day of states 1901
	When riches Ordinary. Man
	OF ATT OF GEODOLA
/	STATE OF GEORGIA,
_	County.
	I gwy ferrones Ordinary of said County,
	do certify that I am well acquinted with O, W. Wilson 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.
	and that he resides in this county.
	Given under my official signature and seal, this
	day of Levy 1 1901. Al
	(AMX) I MINIMENS
	gent seal to the s
	Ordinary Othiow County.
	N. στε —The blank spaces must be filled.

to receive and by Ch	receipt for the pension all		Service San 1902 Vilor	*Ya
	n presence of	ma	K.	
			and the properties of the state	
OB THOSE ALREADY ENROLLED.) No. 3 2 2 4	INDIGENT 1DO2.	Regiment 34 Lev. Regiment Buffy warrant issued //3 / 1902.	JOHN W. LINDSEY, Commission of President. WARRANT HANDED TO	Geo W. Harring, State Princh, Alderin, Mr. Marker, Mr.

POWER OF ATTORNEY.

STATE OF	GEORGIA,	1	1	
Wan	w	_County.	12.19	0
1,02	Villon		eby authorize	lenge W.
Nemo	roses	- of 6	artison	HI Ga
to receive and	l receipt for the	pension allowed	and request t	hat he remit same to
	na,	at /C	arters	welle ga
by	hear	A constant of the	^	
Witness m	y hand and seal,	this 713	of Jan	1903.
		Po	21/has 111	1.0.
Executed i	n presence of	, —	X	[L. s.]
NRR	rawish	is In	mark	
		1,5		
	-			

3	I		1 1	1-1	g:
DANTON CALLELY CODE SECTION 159. THOSE ALREADY ENROLLED.	16	INDIGENT DIER'S PENSION 1903.	Kleyn	200	1903.
CODE SECTION 1264.	3	INDIGENT IER'S PER 1903	M.Wriby Sartoro	Bregiment Cr. Cr. ARRANT ISSUE	176
THOSE	No.	INDIAN TO THE PARTY OF THE PART	1.0	Reg M. Chr.	TOTAL

nogati

CANDARA DAMONI, BUDARADIA BENZADAR

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Garlin County.
Personally appears 6, W. Wilson of Darton
County, State of Geoogia, 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 Willy 1838; that he is 70 years old and
by occupation a that he enlisted in the military service of the Con-
federate States for of the State of
States and served for the term of 8 1/2 frs in Company B, of 4th Regiment
of Ju Voll Inform ; that his physical condition is as
follows: bay bad from Kidney disease
and Ald age riginates inested thereto
and the farmer was the first
that his property consists of the following items
that his property consists of the following items
of the value of Dollars, that by reason of his physical
of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1902. I have heretofore as a resident of Jantin
county been allowed a pension for the year 1901
Sworn to and subscribed before me, this the
20 day of Lawy 1902 Circle Will
July Ordinary, Mark
STATE OF GEORGIA,
County.)
1, Ordinary of said County,
do certify that I am well acquainted with 10, 10, 10, 10, 10
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 any p, 1902.
(#)
Ordinary Dartow County

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Barton County.
Personally appears C. W. Wilson 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 theday of 18 28; that he is \(72 \) years old and
by occupation a fourner , 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 in Company B, of 3/4h Regiment
of Ha, vols Inf. ; that his physical condition is as
follows: His physical Condition is bod. He is very
frail and diseased and old and wom
out.
that his property consists of the following items:
that his property consists of the following items:
of the value of Dollars, that by reason of his physical
· · · · · · · · · · · · · · · · · · ·
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
894, and the Acts amendatory thereof, and makes application for the pension to which he
s entitled for the year 1903. I have heretofore as a resident of Carly
county been allowed a pension for the year 1902
Sworm to and subscribed before me, this the CMX Wilson
day of Jany 1903.
H. W. Windrick Ordinary.
STATE OF GEORGIA,
County.
I, GM Hendricks Ordinary of said County,
o certify that I am well acquainted with O. W. Wildow
he applicant in the foregoing affidavit, and am well satisfied that the statements made by
im in his said affidavit are true, and I know he is the individual he represents himself to
e and that he resides in this County.
Given under my official signature and seal, this
day of fluy p 1909
AMILE GOVERNMENT OF STREET
Ordinary Barlow County.
Norge.—The hight spices must be filled. Norge.—Afficiant should not be attended before January 1st, 1903.
Nora.—Affidavit should not be attested before January 1st, 1903.

STAT	E OF	GEORGIA,	1			The state of
	Ra	whow !	COUNTY.	1001 - 4	2	
I,	12	vivily	, ,	authorize &		Le W
N	cri	pross	of Car	liste	the	Fa.
to rec	eive an	d receipt for the p				
by	17	OK THE	at C	less	un	40
MODERN SAME ARY	itness i	ny hand and seal, this	13 day of	Jan	ノ *.	1904.
		OF GEORE	1 6 W	XIvil	m	[L. S.]
	Execut	ed in presence of	n	nort		[17 51]
2	OP	ande	ison ni	5		
7	,	Bent	cno 60 8	ice.		
	1					
		Till and the		1 .		
	10	de la			lı .	
ED.)			2	1961	usions.	
CODE SECTION 1254. FOR THOSE ALREADY ENROLLED.		- S	300	1	LINDSEY.	
EN EN	7	IN EN	2 2 =	SUED	SEY issioner	WARRANT HANDED TO
CODE SECTION 1254.	5	E C	Wil	WARRANT ISSUED	JOHN W. LINDSEY	WARRANT HANDED
ALR	cu	in all of	R B	PRAN	Ä.	Thos. 9
, ose	No	E E	70.	WA	JOHO	WAR!
R T	V		Da &	2		8
E		2	Name County Co.	00		
			-			in the second second
			, ,	"	31	
	day.	Light Tribut			\	
)	es un	1.12	17/6/18	M.	1	
17	1 3 Ju	A MAN COR				

POWER OF ATTORNEY.

STATE OF GEOR	GIA,)		
Dark	COUNT	v.}	/	
1	, 10.WI	Wilson	// .	
y WH	priests	Ben	19 mill	ereby authorize
0.	0,	.,	worm	vya
to receive and receipt	for the pension	allowed, and r	equest that he	remit same to
	7	at Can	usou	4 41
by.				
WITNESS my har	nd and seal, this	18" day	() and	1005
. \	/	- ushes	90	1000.
3		J.W.XV	Vilom	[L. s.]
Executed in the	presence of	mor	K	
			(. (2)

(FOR THOSE AREADY ENLINE) (FOR THOSE AREADY ENFOLLED.) No. 32 94 INDIGENT SOLDIER'S PENSION 1905.	Name Child Miles of the County County County Co. Co. Regiment 34 WARENT ISSUED FEB 7 JOHN W. LINDSEN, Commissioner of Pensions, WARENTERN NDED TO
--	--

OR APPLICANTS HERETOFORE ALLOWED PENSIONS.

the to the late.

notata

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
Bartin County.	
Personally appears ble Wilson of Barbon	_
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citize	n
and resident of said County and State, and has resided in said State continuously even	
since the day of 18 40; that he is 70 years old an	d
by occupation a farm, that he enlisted in the military service of the Con	1-
federate States (or of the State of) during the war between the	e
States, and served for the term of 3/22 in Company and of 3/4th Regimer	
of Ga Vol Suf. ; that his physical condition is a	S
follows Has gravel, Mumolism and is	
Anite instirm	
that his property consists of the following items:	
that his property consists of the following items.	***
	100
the state of the s	-
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, an	d
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 h	e
is entitled for the year 1904. I have heretofore as a resident of Warlow	
County been allowed a pension for the year 1903	
Sworn to and subscribed before me, this the	
13 day of Jan 1904. \ WXWWW	1
gw Nenovicky Ordinary, mone	
O'Milmy.	
STATE OF GEORGIA,	
Barlys County.	
quest souls	
I, Ordinary of said County	,
do certify that I am well acquainted with low William	7
the applicant in the foregoing affidavit, and am well satisfied that the statements mad	
by him in his said affidavit are true, and I know he is the individual he represents himse	t
to be, and that he resides in this County.	
Given under my official signature and seal, this	110
day of 1904.	
AME JOHN MINTENSO	
bere. Ordinary Barton Count	у.

Nors.—The blank spaces must be filled.

Nors.—Affidavit should not be attested before January 1st. 1900

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Barlow County.
Personally appears & Wilson 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 word Tycan olds; that he is 71 years old and
by occupation a farmer, 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 Off to in Company of of Ch Regiment
of Ha, Vol. In arroy : that his physical condition is as
follows: He is very weak and feeble indust.
that his property consists of the following items:
of the value of Dollars. I am now earning, by my labor. Dollars per mouth. That by reason of his
by my labor, Dollars per mouth. 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 Warlow
County been allowed a pension for the year 1904.
Sworn to and subscribed before me, this the
day of Jan 1905. mon
gw. Minoricks Ordinary.
STATE OF GEORGIA.)
Bo T.
Parl Marie Company
do certify that I am well acquainted with C. W. Wells on
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of 1905.
July Junories
And Ordinary County.

Note.—The blank spaces must be filled.

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

9	w	GEORGIA,		lowed, and 1		le	
20.	executed by the second	s my hand and see	of	da H + Mark	will.	son	.1906. [L. s.]
Coom Section 125. (FOR THOSE ALREADY ENROLLED.)	.No. 2 / 2 Z	SOLDIER'S PENSION 1906.	Name O. W. Willem	Co. Regiment 21	JAN 29 1908.	Commissioner of Pensions. WARRANT GANDED TO	The Property and Property Co. Co. V. Language, Man.

wis	LEORGIA,	COUNTY.	monte		he remit same
0	receipt for the	at 🖊	Boyl	quest that	he remit same
7	my hand and sea	. 6	W	vilo	200 [1.
Exec	uted in presence o	of .	me	DC	
			•		
6	8		7/	1907.	
FOR THOSE ALREADY EMPOLLED No. 38F7	PENSI	Moun	at 34	LINDSEY,	HANDED TO
Goos Sacros 1254 iE ALREADY E	IR'S PE	W.W.	Regiment	TOHN W. LINDSEY Commissioner	REANT HAN
THOSE No.		33	7 5	THO!	WARE

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

St	ate of C	deorgia,).		
6	arlow	Cou	nty.		
	Personally app	Poli	1.11	con of	Barton
Count	y, State of Geor	gia, who, being o	luly sworn, sa	ys on oath that	ne is a bona fide citizen
					tate continuously ever
since		day of		44; that he is	
by occ	cupation a	Dores:	that he enlis	ted in the milita	ry service of the Con-
federa	te States (or of	the State of) durin	g the war between the
States	and served for	the term of 3	Ayrs in	Company D	of J4th Regiment
follow	: X/.	is box	Wani	dinn	hysical condition is as
a	a and	Imfer	militas		1100
			on man-		
that h	is property cons	ists of the follow	ving items:		
	· · · · · · · · · · · · · · · · · · ·	/			
	/				
of the	value of	/		Dollar	s. I am now earning
DOMESTICAL PROPERTY.	labor,				That by reason of his
					y his own exertion or
. labor,				nerein applied fo	
1904					roved December 15th, e pension to which he
				a resident of	
		a pension for the		a resident of	Le 1
-	Sworn to and su	bscribed before r	ne, this the	low	Wilson
-	day of_	The same	1906.	X	• • • •
1	wife	2012019)Oı	dinary. ///	S
St	ate of G	oormia	٠,	*	
1	Parlinu	-	inty.		
	CI	11/0		161	
100	1, 200	Henry	Va 1	Ord	inary of said County,
		well acquainted		V, Will	40 W
					the statements made
				is the individual	he represents himself
to be,		les in this Count		Back A	1-16
		under my officia	signature at	id seal, this	0/1
	day of	yan	Cin	1906.	
Z AME	1	/ -	Tu	Mind	rucio
your seal here			Ordinar		County.
		Nors.—The blank space Nors.—Affidavit shoul	es must be filled. d not be attested	pefore January 1st, 190	6.

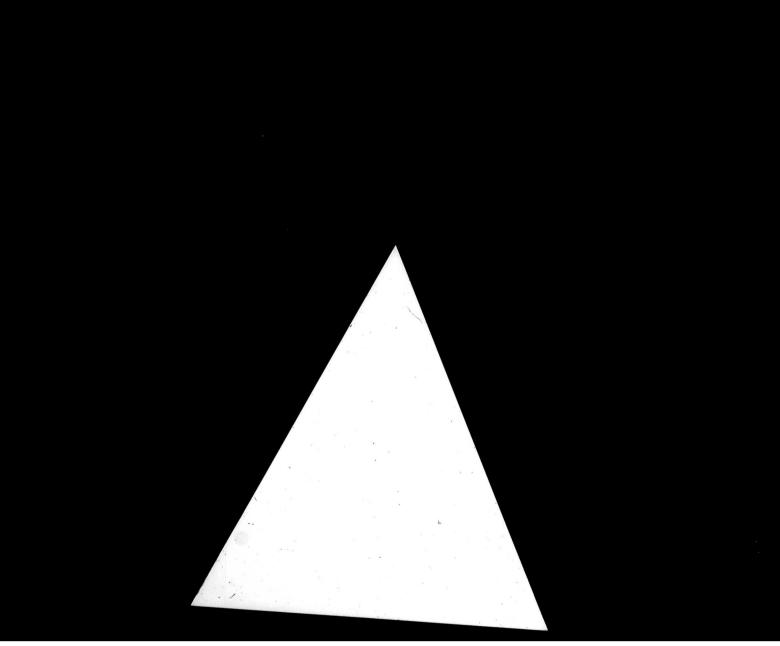
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georg		
State of George	rgia,	
Barlow	County.	
	Lange la	of Borlow
Personally appears		
		on oath that he is a bona fide citizen
		ed in said State continuously ever
ince the a-		; that he is years old
and by occupation a	, that he enlis	ted in the military service of the Con-
ederate States (or of the St		during the war between the
states, and served for the te	rm of him Co	ompany of 34th Regiment
of ya vo	70 /	_; that his physical condition is, as_
ollows: The No	phyisteally	grut feeble when
, ,		
hat his property consists of	the following items	
f the value of		Dollars. I am now earning
y my labor,	Dollars	per month. That by reason of his
		t himself by his own exertion or
abor, and that he receives n		
		of the Act approved December 15th,
		plication for the pension to which he
		resident of Darlow
s entitled for the year 1907	. I have heretofore, as a	
s entitled for the year 1907 County, been allowed a pen	. I have heretofore, as a sion for the year 1906.	
s entitled for the year 1907 County, been allowed a pen	. I have heretofore, as a	
s entitled for the year 1907 County, been allowed a pen Sworn to and subscri	I have heretofore, as a sion for the year 1906. bed before me, this the	B. Un Wilson
s entitled for the year 1907 County, been allowed a pen Sworn to and subschill day of	I have heretofore, as a sion for the year 1906. bed before me, this the	B. Un Wilson
s entitled for the year 1907 County, been allowed a pen Sworn to and subschill day of	I have heretofore, as a sion for the year 1906, bed before me, this the man 1907.	B. Un Wilson
s entitled for the year 1907 County, been allowed a pen Syorn to and subscrip day of	I have heretofore, as a sion for the year 1906. bed before me, this the 1907.	B. Un Wilson
sentitled for the year 1907 County, been allowed a pen Sworn to and subscrip day of	I have heretofore, as a sion for the year 1906, bed before me, this the man 1907.	B. Un Wilson
sentitled for the year 1907 County, been allowed a pen Sworn to and subscrip day of	I have heretofore, as a sion for the year 1906. bed before me, this the 1907.	resident of Parto wood B. W. Wellson inary.
Sentitled for the year 1907 founty, been allowed a pen Syorn to and subset of Late of Geo. Daylow I, W	I have heretofore, as a sion for the year 1906. bed before me, this the mean 1907. Ord	he wills or inary. Ordinary of said County,
Sentitled for the year 1907 County, been allowed a pen Syorn to and subset day of tale of Geo Daylow I, o certify that I am well a	I have heretofore, as a sion for the year 1906. bed before me, this the 1907. Ord	resident of Parlow B. W. Wellson inary. Ordinary of said County, V. Wellson
Syorn to and subset Syorn to and subset Authorities Authorities Control of Geo Authorities Control of Geo Authorities Control of Geo Authorities Control of Geo Control of Ge	I have heretofore, as a sion for the year 1906. bed before me, this the 1907. Ord	he will or inary. Ordinary of said County, Willows satisfied that the statements made
Sentitled for the year 1907 County, been allowed a pen Syorn to and subset day of tale of Geo I, to certify that I am well a the applicant in the foregoin y him in his said affidavit	I have heretofore, as a sion for the year 1906. bed before me, this the 1907. Ord	he will or inary. Ordinary of said County, Willows satisfied that the statements made
sentitled for the year 1907 County, been allowed a pen Syorn to and subset day of the County Aday of The County	I have heretofore, as a sion for the year 1906. bed before me, this the 1907. Ord	B. W. W. Sorrinary of said County, W. Wellows satisfied that the statements made the individual he represents himself

Nozz.—The blank spaces must be filled.

Nozz.—Affidavit should not be attested before January 1st, 1907

Germally appeared before Bostow County 3 mi Joshua Kinnett who on wath says that he was a member of Co. B of the 34 ya Regnit. Of Confederale vol If Infantry that low wilson was a hunder of the same Company & 34" Go, light of Confederals ook of Enfantry, that he and the said beweilson were lighter frequently in the service from Half of. 1863 to the Spring of 1865 where they Dunwood of reenstor N.b. al the end of the war, that he the said Kinnett was centinuously in the service as obove ololed from the stall of 1868 titl the Sping of 1865, Of the Senends of Greens ton and E.W. Wilson was olso Continuousey in Dervice for the Dame line and Duminon at the same line and place of Greenson No. That said wilson made a good and faithful Avedier Leven to and dubscribed before me, Och 14, GALDerwrich Circuing Barlow Causy Ga



POWER OF ATTORNEY,

STATE OF GEORGIA,

State of Georgia,

Know all Men by these Presents, That I, Elizabeth Miller

Know all Men by these Presents, That 1, & Ling about Myllan.

County, in said State, do hereby appoint. A Mount of form of the county in said State, do hereby appoint. A Mount of money I may be entitled to from the sine and in my name, to receipt for whatever amount of money I may be entitled to from the iming my said Attorney to receipt in my mane for any Warrant that may be entitled to from the iming my said Attorney to receipt in my mapse for any Warrant that may be issued which may be coming to fine for the reason aforesaid.

For Mylland Saw WHEREOF, I have herefunto set my hand and seal, this A Mary 188.

Executed in the presence of us:

llowed, send amount by

and oblige

246,1893.00 A 343

Widows' Pension.

Mus Elizabeth Wilson

Barlow COUNTY.
Warrant Issued

AND HANDED TO

IM Foute

P	OWE	ROF	ATTO	DRNE	EY.	orm No. 5.	
STATE OF Barton Know all M	GEORGI Cor len by these	A, UNTY. Presents, The	i, Eliz	abith		on	
me and in my name State of Georgia as izing my said Attor for any sum of mon	e, to receive and a widow of a Corney to receipt in	receipt for whatenfederate Soldier my name for are e coming to me	my ever amount of as stated in the y Warrant that for the reason set my hand a	true and lawf money I may be foregoing af at may be issue aforesaid. and seal, this	ul attorney- be entitled t fidavit; here d by the Go	in fact, for o from the by author- overnor, or	
018	in the presence of Anderson directly		Eiza	Rett	71	i Gen	
If allowed, send	I amount by	•	TIONS.			to	
	101	la ne di	ed tides ed o little engl				
	ا کا ال	Muss	fory			12/20 J	7
AND H	Varra	Sec of	rear ending	lows	701E	451E	1

Affidavit to be Made by the Widow.

STATE OF	GEORGIA,	In person co	mu hafara ma the	undersigned Ordinar	
COUNTY OF	Bartow		County of 13		y
Mrs. Elizab	the milson	, who be	ing sworn accordi	ng to law, says unde	er
	widow of		oon,	B. Spalding, orth	in Y ro
	lion Regiment of y		Volunteers;	hat he enlisted in sai	id
service on or about	the 73.	day of Jeb	y 186	3 , and was in th	ie .
	(2/a.) Army u			3 That while in th	
1	he 2.			Che Note No. 1	
	and whi			-dute,	ic
	3, proge the			which.	
wound	in he di	id in		weeks afe	w
auni	or reacu	ra,			-
*				A section of	_
######################################					
				<u>b</u> ,	
water a consideration of the particular and				1 41 ·	-
	The state of the s				

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 3-7 th 1858, and that she has resided in Georgia continuously since the 1828; 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 Elizable Mpilson

155/h day of Febry 1893

For omes Carterwille, ya

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 had 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.

County of Fullou A Boundle, In English, Ja Landors, Abel Millig and J B Harrington (each known to said Attesting Officer as truthful,

reliable and reputable citizens), who severally say under oath, that, FROM THEIR OWN PERSONAL KNOWL-EDGE, Mrs. Elizabeth Wilson of the County of Bartow State of Georgia, is the widow of William R Wilson , who was a soldier in Company B. of the 2 Bal. Regiment of Georgia Volunteers.
That slift soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or day of February 1863 That while in said service, or by

reason of said service in the Army, he lost his life as follows:

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

We further swear that Mrs. Elizabeth Wilson soldier during the service, and that she has not intermarried since his death, and that she resides in Bartow County of the State of Georgia,

Sworn to and subscribed before me, this; the

Ordinary.

Nore. Witnesses must not testify about things they may believe, but confine their statements to such facts as they per-

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

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

State of Georgia.

1, ym Hendricks Ordinary

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

Ordinary

Form No. 4

The pension is only payable to certain classes of widows

Those whose husbands were killed in service.

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

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

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

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

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

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

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

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

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

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

If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under Seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.

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

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

By order of the Governor.

W. H. HARRISON.

Sec. Ex. Department.

	Certificate of Ordinary of the County of Applicant's Residence.
	STATE OF GEORGIA, County of Borlow Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. State of Georgia, hereby certify that I am acquainted with Mrs. 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, 1850, and has not lived out of the State since that date. That she is the widow of William R. Wilson. deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1803.
į	In Witness Whereof, I have hereunto sat my hand and affixed the seal of my office, this, the day of faming 1894. Ordinary.
	POWER OF ATTORNEY.
	STATE OF GEORGIA, Barling County, County
	KNOW ALL MEN BY THESE PRESENTS, That I, Obsobeth Welson
\$	County in said State, do percoy appoint of Rendricks of Allen Willy Sh 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
Action of the second	foregoing amagnit; 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
	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
	day of flury 1894. Elizabeth Wilson [L. S.]
	Executed in the presence of us:
4.	Jes Stanford J.P.
	DIRECTIONS.
	Send amount by
	me at, and oblige
	to the second se
	Ton THOSE FOR THOSE FOR THOSE FOR THOSE FOR THOSE FOR THOSE AND NO. / C NO.
	William, Elizabe Reactaw FOR THOSE HERETOFORE PAID. 1894. NO. / 42 NO.
	SE HERETOFORE PAID OF OF OF OF OF OF OF OF OF O
	PEN PEN 15 TO TO THE PEN TO THE PEN TO TO THE PEN TO TO THE PEN TO
	ION 1894
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Marith maritims from the	

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA.

Dersonally comes Mrs. Elizabeth Wilson

County of Barton who being sworn, says on oath, that she is a bona fide resident of said County of State of Georgia, and that she has resided in said State continuously ever since William R Wilson who was a Soldier in Company of the 2nd General Bot Volunteers, that he enlisted in said Regiment on or about the month of Hoby 1863 and served in the Army up to Leily

day of July 1863 (State here full particulars of the husband's death, when, where and from what cause.) (26

was Killed in the battle of Gethys: burg in Renne July 2nd 1863

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

A 32 day of Jacy 1894. Chizoleth Wilson her NW Wellands Ordinary. Post-office Carlowill Ganor

TE OF GEORGIA, County of Danling Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. 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 W.O. Wilson deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1854. In Witness Whereoff, I have hereunto set my hand and affixed the seal of my office, morry POWER OF ATTORNEY. STATE OF GEORGIA Banking my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this Executed in the presence of us:

and offige

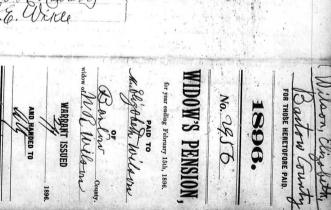
DIRECTIONS

Send amount by

STATE OF GEORGIA, County of Dan Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. obeth Willow 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 W. C. Wells bu deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895. In Witness Whereof, I have hereuno et my hand and affixed the seal of my office, this

POWER OF ATTORNEY.

STATE OF GEORGIA, BANGO GOUNTY. IN WITNESS WHEREOF, I have hereunto set my hand and seal,



For Widows' Heretofore Allowed Pensions.

STATE	OF GEORGIA
County	of Barlin

Elizabeth Wilson

continuously ever since Chaut I Jean old 18. That she is the Widow Who Was a Soldier in Compan who was a Soldier in Compan of the Jal Balkegiment of Longia Wolunteers, that he enlisted in said Regiment on or about the month of Holy 1863 and served in the Army up to July 2 1803. That he lost hilife on the day of July 1868 (Stay her full particulars of the husband's death, when, where and from what cause.) (New July 2 1863. Deponent swears that she was the wife of said deceased soldier, during his service in the trmy as a soldier, and that she has never married since his death aforesaid, that she became this wife in the year 1887, that Georgia is her home and she resided in this State 23d day	Ban.	low	State of	Georgia, and t	dent of said cour hat she has <i>resid</i>	ed in said State
Volunteers, that he enlisted in said Regiment on or about the month of 1864 1863 and served in the Army up to Acely 2911 1865. That he lost he life on the 2911 1865 (State her full particulars of the husband's death, when, where and from what cause.) (New York) Rilled in the Cottle of Settysbury July 2 18 1863.	W.O.	Wilso	eaux /	teas oll	8 That she	is the Widow of
1863 and served in the Army up to July 3 at 1885. That he lost he life on the 3 and day of July 1888. (Stay her full particulars of the husband's death, when, where and from what cause.) (New Why Killed in the Coeffe of GetTyrbury July 9 at 1863.) Deponent swears that she was the wife of said deceased soldier, during his service in the truty as a soldier, and that she has never married since his death aforesaid, that she became	2	of the	rad &	Regiment	of To	orgia
life on the day of July 1868 (Staty her full particulars of the husband's death, when, where and from what cause.) (Ne) Who killed in the bottle of Settly bury July 2 at 1863 Deponent swears that she was the wife of said deceased soldier, during his service in the truty as a soldier, and that she has never married since his death aforesaid, that she became						/
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became	4	g with		Buly	1863	That he lost his
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became	full particular	rs of the husband	r's death, whe			
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became						
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became	0.00	9 al 1640	, , ,	Tuiogra	1 000	rough
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became						
Deponent swears that she was the wife of said deceased soldier, during his service in the	gun,	1000	COUNTY OF THE	mere gare have to compar to adequate the same of the s		
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became	yunj o	7-2 7000				
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became	yunj o	7-2 7000		en var triser		more to pate
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became	yunj i	7_2 /000		Anna Anna Anna		
Deponent swears that she was the wife of said deceased soldier, during his service in the rmy as a soldier, and that she has never married since his death aforesaid, that she became	yunj o	7-2 7000		Anna Anna Anna		
rmy as a soldier, and that she has never married since his death aforesaid, that she became	yunj i	7-2-7000		Anna Anna Anna		10 (6)
army as a soldier, and that she has never married since his death aforesaid, that she became	yunj i	7-2-7000		Anna Anna Anna		10 765
army as a soldier, and that she has never married since his death aforesaid, that she became	gunj i	7-27000		Anna Anna Anna		10 765
	Denginat suc	7 2 7000		a collection of all a collections of a collections of all a collections of a collections of a collection of a collections of a collections of a collections of a collection of a collect		10 76
is wife in the year 18 , that Georgia is her home and she resided in this State 23d day			s the wife of	said deceased so	ldier, during his	bane of service in the
	rmy as a sold	lier, and that she	s the wife of has never ma	said deceased so	ldier, during his	service in the

been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this
121 day of Lane 1805
any of Jany 1895.
Ordinary.

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	personally Comes Mrs.
County of Barton	Blisabeth Wilson
Country of Control) 9 00000000000000000000000000000000000
who being sworn, says on	oath, that she is a bona fide resident of said county of
1000	of Georgia, and that she has RESIDED in said State
continuously eyer since Deven yes	
continuously ever since	
Wal was	who was a Soldier in Company
of the Lina	Goding of GR
Volunteers, that he enlisted in said regiment on or ab	out the month of H & brusry
1866 and served in the Army up to	ly Ind 1869 That he lost his
a mil	\cap \circ
life on theday of	July 1868 (State here
full particulars of the husband's death, when, where and	from what cause.) (Wing Stilled
in the battle of	ettyburg
4	
	V SAND SO STATE
Ampunit and the second	
*	and the province of the contract of the contra
· lines to the little and the little	
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 afore	said, that she became his wife in the year 1803
that Georgia is her home and she resided in this	
lived in any other State or locality since that dat	e. I have been allowed a pension as a resident of
County for the y	ear ending February 15th, 1895, and now apply for
the pension provided by law for the year ending February	nary 15th, 1896.
	2 her
Sworn to and subscribed before me, this	lizabith wilson
day of Jegy 1896.	The state of the s
Walnut (15 Ordinary.)	Post-office Man
Well and property	· · · · · · · · · · · · · · · · · · ·

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

, i,.	yoh,	Len	dricks		Ordina	ry in and fo	r anid Cou	anty of	
mus E	astow Wie	lon.	State o	f Georgia, her	by certify that he applicant for	I am acqua	inted wit	h Mrs.	
know from my	own knowledge	(or from p	sitive proof pre	sented to me	by reputable wi	nesses,) the	t she res	r ides in	
			dow of Ocorgia of		23, 1890, and	has not liv	ed out	of the	
deceased, and	as such has herèt	ofore been a	llowed a pension	for the year e					
	Witness Where	,	hereunto set m	hand and		al of my	office, th	nis the	
SEAL.	1	1 1		(ks on				
1		,				imary.	- Tarabana	and charge	
1	F	OWE	ROF	ATTOI	RNEY.		Form	No. 3.	
TATE O	F GEORG	τ.	Bank	7					
· 1 mis	EW	lson	hereb	v authorize	9. Or	Level	ini	10	
Cara	Essall 2	astow	Co. La to recei	ve and receip	t for the pension	paid here	on and re	equest	
			·				~	ga	_
	Heby.	ave hereunt	set my hand an	d seal, this	des	ia		Telephone Indiana.	
			i i	E yri	elson		[L. s.]	
	ecuted in the pro				. 1				
13	Stan Har	myto	n						
Sall	V. H.as	ing	ou)		•				•
No. of Street, Square,		and the last of th	mental and the second second second	-		nin-buyah man	roame action	in the second	Pro-12 house
2			widow	1	E	_		K	2/5
Ø ₹	_	RI	2 2		DO DE VENE	√o.		_	اع اع
AND	WARR	RICHARD JOHNSON	1000	()D	endin	30	7	OR THOSE HERETOFORE PAI	418
AND HANDED	ARRANT ISSUEI	υ Jo	1000	ON OF	S Febr	2	3	100	E 3
ED TO	ISSU	OHNSC	1.3	2.	PE		7	TOFORE	e levi
R. ATLA	B	SON,	3011	3.	DOW'S PENSION OF YEAR CHAING FEBRUARY 15th, 1897		•	PAID.	2
ATA		Pension	Com	1.1	897.			0	1 3

State of C	porgia,	24/5	TORNE		
blish	Neth wil	Line hereby author	JUV	Ve Orie	R
old	opyre.	to receive and	eccipt for the per	sion paid hereon and	l request
that he remit same to	7	to set my hand and seal	Mont	ssville,	40
day of Luc	worg			er .	
0		· oli	Bobeth	Wilson	[I. 8.]
	in the presence of		m	011	
202	Coches nurchison	***************************************	* * *	* * * **	
	-				
			. L		
		- () ()			
			o marine processor and state of the state of		
19.	ION,	true.	Pension,	888	1 2
e Paid.	WSION, 15th, 1898.	Orderno Comar,	SON, One of Persona.		, ATLANTA
Sol & 99	PENSION,	R. Wilton. County,	OHNSON, Commissions of Penson. INSTITED	1898 西 TO	PRINTER, ATLANTA
Those Heretofore Paid. See See 999	OW'S PENSION, year ending February 15th, 1898.	or Court, Wilden	RICHARD JOHNSON, Commissions of Prassica. WAPPANT -INCUIEN	My 1898.	. STATE PRINTER, ATLANTA

E. Wilson

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

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

ontiniously ever since June

1879 That she is the Widow

who was a Soldier in Company

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

reby,

1863 and served in the Army up to July 2 red fife on the Guly 2 red day of July

18 6 3 (State lier

Skilley in battle the kettysbury.

Deponent swears that she was the wife of said deceared soldier, during his service in the army as a soldier, and that she has never married since his death atoresaid, that she became his wife in the year 125 S, that Georgia is her home and she resided in this State 23rd day of December, 1890, and has not lived in any other State or locality lines that date. I have been allowed a pension as a resident of Bartow County for the year ending. February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this
Standard Reby 1897.

4 M Hendricks Ordinary.

& Thieron

ury. Post-of

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes M
County of Barlow	Elizobeth Wilson
who, being sworn, says on or	ath, that she is a bona fide resident of said count
12.1-	of Georgia, and that she has RESIDED in said S
01 1	t
W. R. Wilson	Time size is the Wildow
To gue Ba	Tho was a Soldier in Comp
	ment of
Volunteers, that he enlisted in said regiment on or about the m	month of Hobrisony
186 and served in the Army up to Sully 9	186 3 That he lost
life on the gan day of Ju	ly 1863 (State h
full particulars of the husband's death, when, where and fro	om what causes the was
Killed in The battle	A G. Thuck
9. In 2nd 1863	Designous
guil o = 10 a)	
	and the state of t

· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

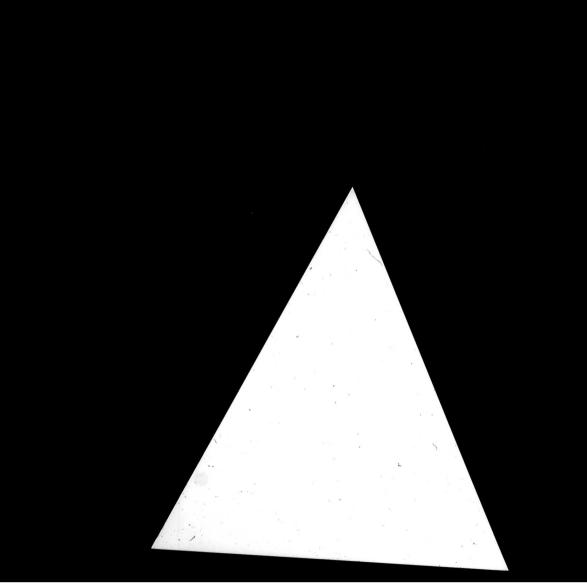
Deponent swears that she was the wife of said deceased soldier, de	uring his service in the army as a soldier, and the
she has never married since his death aforesaid, and that she because	me his wife in the year 18.0.
I have been allowed a pension as a resident of	Wow County for the year endin
February 15th, 1897, and now apply for the pension provided by	law for the year ending bebruary 15th, 1898.
Sworn to and subscribed before me, this	Pred there
day of fluy 1898.	Govern XW Hori
P Ordinary.	ost-Office / Mork
State of Georgia.	Primer D.
A7.	9. W. Judriess
with Mrs. Elizoleth Wilson	of said County, certify that I am well acquainter
//	who made the above amdavit and am satis
ed that the facts therein stated are true, and I know she is the inc	dividual she represents herself to be, and that she
as continuously resided in this State since the	day of 1889
Given under my official signature and seal this the	day of Lacy 1898.
Li	UN woricks
Official Seal. Ordinary of C	Radion
Seal. Ordinary of L	County.

State of georgia & County of Feel ton Gomperson came before me, the meansigned, ordinary in and for said county, Milliam A Boundle, known to said attesting Officer as a truthful, reliable and reputable Citizen, who says under oath that from In own personal Knowledge, Milland in Company of Milson, was a solding. 2 2 georgia Battation volunture. That said toldier In listed in the service of the Confederate States on or about the day of tebruary 1863. That while in Daid service he look his life as follows; He was killed in the battle of Gillys. burg on the 200 day of July 1863. Mituos knows this facts by reason of having been a member of the same Company with the said Wilson and Knew him will. Swore to and subscribe a 11 A. Wallecce before me this the 19this day of may 1893. M. L. Caclions portunay C

State of georgias Country of Barton). In person come before me, the undersigned ordinary in and for said county, Abel Millis, Known to said attesting officer as a truthful, reliable and reputable citizen, of said country who days under oath, that from his own personal knowledge, Mess Elizabeth milson, of said county and state, is the widow of William R. Wilson, who was a soldier in Co. B. 200 Battalion ga. Volunturs. That said soldier enlisted in the service of the confederate states in deby. 1863. Depound with from howorth, ga, with said Wilson, his wife and John or grantham, as the said wilson wasoutis way to join the army, a the mixt word deponent had of him he was in the army of va. Depounts information and belief is that said milson was wounded at gettingsburg in July 1863, from the Affects of which his died from thereafter. Depound saw from the mines papers first, that daid mileson was dead and he afterwards bearing the same toch from his commans, and he knows that he man returned to his home after the war. Depound further surars that hurs Elizabeth Welson was the wife of said soldier during the service, and that the has not intermerried since his

death, and that she resides in Swore to Aubseriba State of grorgiaz Country of Julian. B In person Come before Abel. Willis G. W. Henerick me, the undersigned, ordinary in and for Said County, James or English, of Oninary Daid country, will known To said attracting officer, as a truthful, reliable and reputable citizen, who says under sath that from his own personal Knowleage, William R. Wilson was a soldier in Company B. 2nd Georgia Battation Poleutiers; that Said Soldier entired the Confederate Statis Service our about the 27 day of deby 1863, as a substitute for our John or Daily, discharged. That the said solair served with said Pattallion in the army of Worthern birginia, until the 2. day of July 1863, and was killed in the battle of gettyphung on the day last named. Witness and the diseased Addies werein the Same Company, he know him will and was mar him when he was killed as aforegaid. Sworn to and Duborice of Julinglish before me this 20 day of May 1863. M. L. Cuchman

State of georgia-County of Barlow. Som person came be georgia - Barlow County. fore me, the unaveigned ordinary in and Before the undersigned in person for said county, James O. Landers, Known Como Japottia B. Harrington, of Daid to said atusting officer as a truthful, County, known to said attribing officer whichle and reputable citizen of said as a truthful reliable and reputable County, who says mider oath that Citizen, who being duly swown from his own personal knowledge, Days on oath, that he has known William R Wilson was a Haldin in Elizabeth milson from his chilahood Co. B. 200 ga. Battation voluntions in and that he is forty on years the Confiderate states army, that he old; he knew her as the wife entered said sirvine in the spring of of William R Wilson, and Knew Daid 1863 and was in the virginia army William R., when he would to the That said Milson was killed in Confiderate war dervice in the battle of gully burg on the 200 1863; that he was reported as day of July 1863; and that said Milwounded and dead at gettyson and depound were members burg in 1863; that he has known of the Dawn Company and own her all the time Dinae Than, 1863, intimate as Holdens. as the widow of said William sworn to a dubaculua before. R Wilson, and that she has Commany 22. 1893 & & Danders not intermarried since his y W. Neudricks dratte, and that she resides Onling Barton boga in Bartows county State of georgia. Sworn to o Subscribed before me, This the 1 B 36 arington 5. day of May 1893. Justendyess , Ordinary



POWER OF ATTORNEY

TOWER OF ATTORNET.
STATE OF GEORGIA, Denton County. Lereby authorize L.
to receive and receipt for the pension paid hereon and request that he remit and to by Check
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15 day of fill vij 1900. James Willow [L. s.]
Executed in presence of WWIR
IND
For Those Aiready Enrolled INVALID IN
For Those IN. No. 100 County No. County Level County Leve

	1			
		OF ATTO	DRNEY.	
STATE	GEORGIA,	} **	_	
T. E.	mes Wils	hereby at	thorize Lev.	a W
1	indricks	0	resm	the Qu
to receive	and receipt for the pensi			
to receive t	Zana recorpt for the pensi		red	Temit same to
Low	liporble 4	en .		
	ITNESS WHEREOF, I		my hand and seal	this 15
day of	unary		9.	
		James	XWils	(L. S.)
		N	nors	
11 Ex	secuted in presence of	_		
1 1	Proberts			
			181	
		1 2.		1.40
-1		1 1 2	1 51	
1 E 2		3 03	19	
3		-2 4 8	EX	8 1
1 1 2 1	DISABLE IER'S PE 1901	8123	6	C The Bear
Already		2000	7 3 3	HIN I
20	₩ 2 0	3.8.5		ARRANT Barrison.
7 8 ME		WOB.	J E	W. Hs
3 5		AST S P	i i	6 50
-	S	Nam	Ашо	1 12
		7 -	Vanish and	Test to the second

A tention Pegistons

For Applicants Heretofore Allowed Pensions.

	STATE OF GEORGIA,
	Continu County.
	personally appears James Wilson of Darlow
	County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
	and resident of said State and County, and has resided therein continuously ever since the day of 18#8; that he enlisted in the military service of
	the Confederate States (or of the State of) during the war be-
	tween the States, and served as a MWM in Company T, of // the Regiment of Volunteers, American 's Brigade; that whilst
	Regiment of Volunteers, American 's Brigade; that whilst engaged in such military service in the State of on the
	day of Ot war 1864, he was wounded, injured or diseased as follows:
	Received a grushot warms in bad
	The ball still list, said too and
	render, Opplicant burnountly disobled
	then performing the owney, vicolins
	Top lefe
	Deponent makes application for the pension to which he is entitled for the year
	ending October 26th, 1900. I have heretofore under said law as a resident of
	County been allowed an invalid pension of
	Swarn to and subscribed before me, this, the Ilmen & Webscri
	go day of fluy 1900 post office It is
	Gual Culy of
	NOTE.—State fully the nature of wound or character of diesase which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
	STATE OF GEORGIA,
	County.)
	I, Whananch Ordinary of said County,
	do certify that I am well acquainted with Jews William the applicant in the foregoing affidavit, and am well satisfied that the statements made by him
3	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.
+	Giyan under my official signature and seal, this
	Amx day of Clary 1900,
	18 and in
	Ordinary Durlew County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Dartow County.
Personally appears amo wilson of Bostow
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 1848; that he enlisted in the military service of the Con-
federate States (or of the State of) droing the war between the
States, and served as a will in Company of // th Regiment
of Ma Volunteers, Anderson's Brigade; that whilst engaged
in such military service in the State of Originia, on the 13. day
of October 1864, he was wounded, injured or diseased as follows:
Time shot wound in the back ball rawling
down in right hip, where in still remoins.
And you I want a hack on the state to
ale di se selos de tras portos por
They will key to that he is rendered that
really in competent a perfore the Owney vo co.
hins if lefe.
Deponent makes application for the pension to which he is entitled for year end-
ing Setober 26th, 1901. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 1909.
Soon thand subscribed before me, this the Jumes Wilson
day of Jamyy 1901. Postoffice mark
FW, Nuchors ommany
Nork.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
County.
I, July Ordinary of said County,
do certify that I am well acquinted with James Wilsone 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 Amman 2 1901
day of June 1901.
AMIE O TO Nationess.
Ordinary Garlow County.
· · · · · · · · · · · · · · · · · · ·

			OF AT	TORNEY		
		GEORGIA, County		and Sugarannia	mer covers.	
-		mes wil	y. J	de la companya de la	0,11	17
di	lek	0	of_(arlers	ville	Hen
to rece	ive and	receipt for the pensi				
		me ,	by_	chec	K	******
		erville,	40	s - mineral shall	Described to the	true franke i versio
		ESS WHEREOF, I 1		set my hand and	seal this	13
day of_	Jan	uary. 1902	2.	his	1	
V	(a. 10)	rapogetá,	yan	neskili	lsor	[L. S.]
e.Ex	ecuted in	n presence of	V	made	ape absent	
-7a	ve	Hendre	Cles,			
	,	rejer votes jenes	me, thosa i			
/	1		Marine e			, ,
				a ungaya auto sida is	of at	North Comment
		The Stage of S	Cape Fair 1	Na which he	te and ing	Dr. Chronist
		8	2	1902.	One.	
301	do.		80/	200	J. Penal	1
CODE SECTION 1200. FOR THOSE ALREADY ENROLLED	مل	四四日	33	300	SEY seioner D TO	2
CODE SECTION 126	مل	BE C	ulo W arto Regiment	Color	OHN W. LINDSE	7-0
ALR	7	B'S	12 2 E	3.203	N. J.	O State
OSE	No.		365	G27 3	JOHN	F. Harris
H T	-	3	20	lity.	of "	Geo. T
. 3	100	92	Name County	Disabilit Amount,		6
		or of the summer	" 2 0 0	П 4 Т	a garden	
901.		A same and his	serges, process	COM 10, 2011 35 21	Hebric	
195	age de la	All and segment	yers require all	tool one that		September 1
1		00	HDIA			

TON APPLICANTS HERETOFORE ALLOWED PENSIONS.

POWER OF ATTORNEY.
STATE OF GEORGIA,
Daylow County.
I, James Wilson hereby authorize Levely
Wi Hemoricas of partirbully to
to receive and receipt for the pension paid hereon and request that he remit same to
o me by check
at Carles Ville ya
IN WITNESS WHEREOF, I have hereunto set my hand and seal this / 2
1
James XWilton [L. S.]
Executed in presence of MMM
Good Colo
no-fe)
FOR THOSE ALREADY ENFOLLED No. 1946. DISABLED DISABLED OIN, S. J.
THOSE ALREADY ENRINGENCE ALREADY ENRINGENCE ALREADY ENRINGENCE AND DISABLED DISABLED DISABLED DISABLED OF A STATE OF A ST
CORE SECTION 109 CORE ALERADY 100 IN INDICATE IN IN INDICATE IN INTICATE IN INTICATE IN INTICATE IN INTICATE IN INTICATE IN IN
THE WAY OF BY SA SA COLOR OF THE PROPERTY OF T
WARREN ON NO. COMPANY AND NO.
Soft E C S S

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

	STATE OF GEORGIA,
	Bartow County.
	Personally appears James Wilson 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 of18 48; that he enlisted in the military service of the Con-
	federate States (or of the State of) during the war between the
	States, and served as a MWWATE in Company of // th Regiment
	of Year gra Volunteers, anderson's Brigade; that whilst engaged
	in such military service in the State of Virginia, on the 13 day
	of October 1864, he was wounded, injured or diseased as follows:
	younded by a ginehot in the
	back the ball sanging down in
	right hip making now exit but re-
	mailing in his hit to present time gaid wound weat
	ening back and partially paralizing right leg
	as that he is rendered imable to perform
	ordinary work of life.
	Deponent makes application for the pension to which he is entitled for the year
	ending October 26th, 1902. I have heretofore, under said law, as a resident of
	County, been allowed an invalid pension of
	fifty (50) Dollars, for the year 1901.
	Sworn to and subscribed before me, this the James Wilson
	day of Jan. 1902 Post-office Enivery, Ga.
	aWHentricks
	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.
	partnership and seement the analysis restring from the would of thecase.
*	STATE OF GEORGIA,
	Bartow County.
	I, G.W. Hendricks Ordinary of said County.
	do certify that I am well acquainted with James Wilson
	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. And a sent any ordered again to the sent and
	Given under my official signature and seal, this 12
1	day of January 1902.
1	Jour Jending Son
1	Ordinary Barton County.
	Norge,—Fill all blanks and of Company and Regiment.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Borton County
Personally appears famus Wilson of Barlow
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of18 48 ; that he enlisted in the military service of the Con-
federate States (or of the State of Charing the war between the
States, and served as a MNOU in Company D', of // th Regiment
of Wa Volunteers, Andreway's Brigade; that whilst engaged
in such military service in the State of Orginia, on the 13 day
of the last wounded, injured or diseased as follows:
Toy a gun shot weed in the back the ball
songing down in right hip mother mo
grat link remeding no his hip to the present
fine soil warms weathern back very much and par
tially baraly ging his right lig ou that he is undered
pack cally in competent to perform the Onlivery va calin
Hele
Deparent makes application for the arrival title to the second
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
County, been allowed an invalid pension of
Dollars, for the year 1
Sworn to and subscribed before me, this the James & Welson
19
11 May of Jany 1903. Post-office Criving
Norm.—State fully the nature of the wound or character of decase which causes the disability, and explain
particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,)
Darson county
Pi
I, Ordinary of said County,
do certify that I am well acquainted with James Wilson
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 upder my official signature and seal, this
day of Alls 0 1903
my Gunden Solls
Affix your

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

POWER OF ATTORNEY.

STATE OF GEO		Į.	
Jan	COUNTY WILL	100	
Gwiling	ricses	or barliss	atte Ga
to receive and rece	ipt for the pension p	aid hereon, and request	that he remit same to
aborte	will	Ta Chec	
IN WITNESS W	HEREOF, I have hereun	to set my hand and seal, th	is of "
day of Januar		James	Wilson [L. s.]
Executed in pre	sence of		
-110.71mu	sices II	•	

FOR THOSE ALREADY ENROLLED.)

	/	
SOLDIER'S PENSION 1904.	Name Janua Willerm County Control Disability Wineurs & Bry Mount, FEB 9 3 1904.	JOHN W. LINDSEY. Commissioner of Pontions. WARRANT HANDED TO Geo. W. Harrison, State Profes, Albatta.

POWER OF ATTORNEY

STATE OF GEORGIA,	Paris Code
Barling Cou	NTY.
Sweling ich	of Carlinguille Ga
o receive and receipt for the pens	sion paid hereon, and request that he remit same
me	Ja by chief
t. Adaisvilly, &	fa
	hereunto set my hand and seal, this
	1905 Jamo his Wilson I.
0	James X Welson In
Executed in the presence of	of mark
E-min - To -	
	Tells and the same state of

SOLDIER'S PENSION

Con Series 180

SOLDIER'S PENSION

1905. 490

DISABLED

SOLDIER'S PENSION

1905. 490

Name Aunua Wulku

Con N. Regiment II

Disability Ututudu II

Disability Ututudu II

Disability Aututudu II

Onmalisioner of tensione

Warrena Handed To

STATE OF GEORGIAL

YOR APPLICANTS HEREFORORE ALLOWED PENSIONS

my date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Barbon	County
	0. 11L'0. 0 1-
Personally appears	, who being duly sworn, says on oath that he is a bona fide citizen
nd resident of said State	, and has resided therein continuously ever since the
ay of Dee	1848; that he enlisted in the military service of the Con-
ederate States (or of the	
tates, and served as a	
ya !	Volunteers Androuna 's Brigade; that whilst engaged
such military service i	n the State of Varejuna, on the 13 day
o et	1864 , he was wounded, injured or diseased as follows:
	und in night hip in battle of the
uniterate ou	_ 0/1
m offlican	to hip and renders him sylvan
leasing field iss	intially disobled in said his
aun ug	the state of the s
/	and the same of th
	The second secon
	pplication for the pension to which he is entitled for the year
	1904. I have heretofore, under said law, as a resident of
Carlor	Paulin of
Holy	Dollars, for the year 1903.
1,	ribed before me, this the
day of	any 1904.
IW Nemon	As Orbinary Post-office Promise you
NoteState fully the r	sature of the wound or character of disease which causes the disability, and explain
	ability resulting from the wound or disease.
STATE OF G	EORGIA,)
Barlow	County.
1 Gun	Son offs
o certify that I am wel	Ordinary of said County,
	going affidavit, and am well satisfied that the statements made
whim in his said affiday	it are true, and I know he is the individual he represents himself
be, and that he resides	in this County
	der my official signature and seal, this
day of	Luin 1904 /
	Culture iel
Affix your Seal (o sursummars
here.	Ordinary County.
	Note.—Fill all blanks and of Company and Regiment.
	Note.—All vouchers and affidavits must bear date after January 1, 1904.

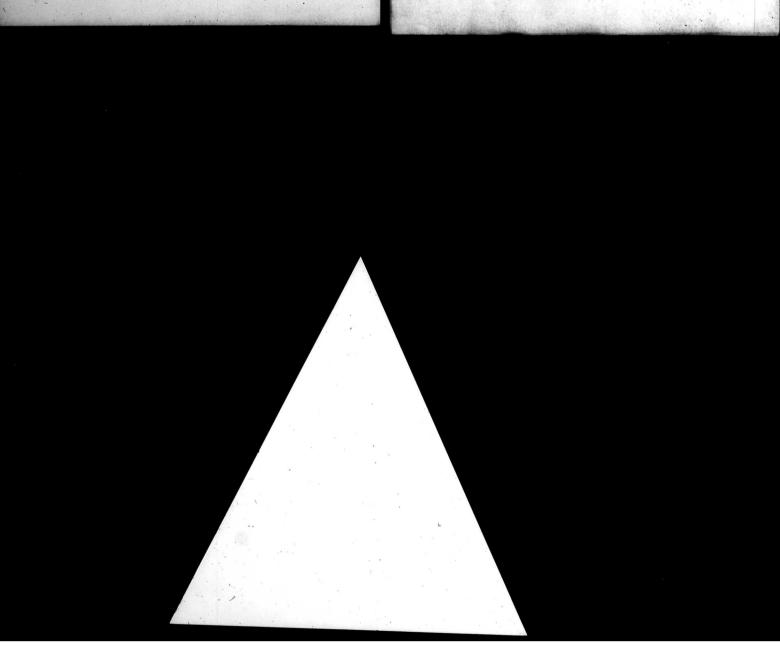
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

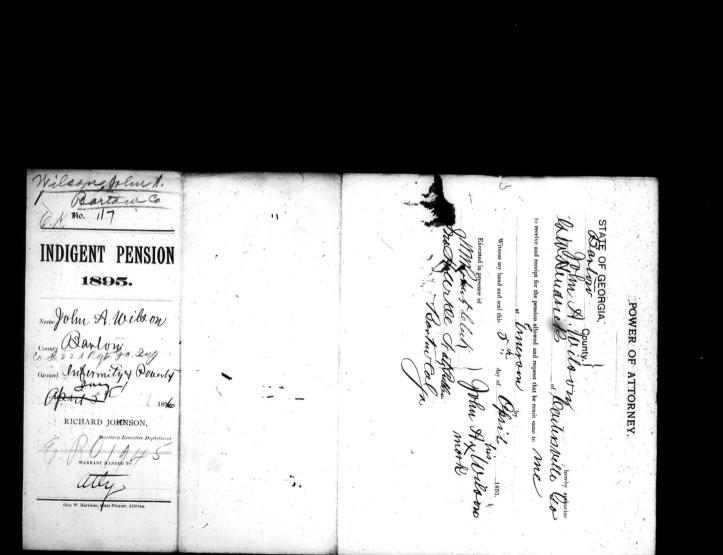
STATE OF GEODGIA

Bartow COUNTY.
Personally appears James Wilson of Barlow
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1848; that he enlisted in the military service of the Con-
federate States (or of the State of during the war between the States, and served as a word in Company of the Regiment
of Ya Volunteers Anderson 's Brigade; that whilst engaged
in such military service in the State of Orrginia , on the 13 day
Shot Through his right hip blows through the ball still remain his hip will the ball of the work through the ball of the work through the ball of White oak through the best country to be the c
made as
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1905. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Histiy Dollars, for the year 1904.
Sworn to and subscribed before me, this the
day of any 1905. Janus x warm
Gurantes Orning Post-office maril
Nora.—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, Baryw county. I, was ordinary of said County, do certify that I am well acquainted with farms willow
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 an 1905.
Charles all
And

Norz.—Fili all blanks and of Company and Regiment.

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





POWER OF ATTORNEY. STATE OF GEORGIA, to receive and receipt for the pension allowed and request that he remit same to Mu Witness my hand and seal this 5th day of Offsil 1895. Executed in presence of Market black Willows Mork mork

	QUESTIONS FOR APPLICANT.
ST	ATE OF GEORGIA.
	Bantow County.
-	()-D A 111:0"
· to a	John St. Welson of said State and County, desiring
bein	will himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after g duly sworn true answers to make to the following questions, deposes and answers as follows y
1.	What is your pame and where do you reside? (give State, County and post office)
-	M. Wilton, merom Danbow Caulty Ga
2.	Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
	merson Barlin Coga. All my life
3.	When and where were you born? 1800 Muduuf Kgi Co. Go.
4.	Did you volunteer in the Confederate Army or in the Georgia Militia & Confederate Army or in the Georgia Militia
5.	When and where did you enlist? Aurumy 1864, Sig Chauty Sa
6.	In what company and regiment did you enlist? Cou, y, 39 to Ga Not-
7.	How long did you remain in that company and regiment? Want Theore
8.	If you were discharged from same and joined another, or if you were transferred to another, give an
accor	unt of such discharge or transfer?
9.	For how long a period did you discharge regular military duty? Mor years
10.	When, where and under what circumstances were you discharged from service? I was
	auther in the batters leucheppe leunt Adure is the
a	inio, after that was never able to do duty
11.	What is your present occupation? Hama little
12.	How much can you carn per annum by your own exertions or labor? \$50 a beshops
13.	What has been your occupation since 1865? butching in a form
14.	What sum would be necessary for your support for this pension year, and how much are you able to
contr	ibute thereto either in labor or income? \$ 195 2 Over Declar 2000 50 holl
15.	What is your present physical condition and how long have you been in such condition? Duffer
N	ith severe pain in my lings. Daid to be Canal
62	on wound received in the right Compit and ranging and
li	Aging under the shoulder blader, Have been to almit
	Upon which of the following grounds do you base your application for pension, viz first, hage and
pover	rty," second "infirmity and poverty" or third "blindness and poverty" " Infirmity & powerly"
your	If upon the first ground, state how long you have been in such condition that you could not earn support? If upon the second, give a full and complete history of the infirmity and its extent? If
	the third state whether you are totally blind and when and where you lost your sight? I have
m	way been well drice driver I occeive the wound
0	1-ball of leulepper leunt House in viveine
(h	I hall is still he me wed causes me to out for al
18.	What property, effects or income do you possess? a small dry cow-

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same?

20. In what County did you reside during those years and what property did you then return for taxation?
20. In what County did you reside during those years and what property did you then return for taxation? BOLLOW CALLLY & COUNTY Hawke hold? 21. How pere you supported during the years 1893 and 1894: By the lot of my Wife Buch What Little 9 Camel do 22. How much did your support ogst for each of those years and what portion did you contribute thereto by your own labor or income? The most known slewer little.
22. How much did your support cost for each of thoso years and what portion did you contribute thereto
by your own labor or income? I do not know clent little
23. What was your employment during 1898 and/1894? What pay did you receive in each year?

24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and seyrof children and their means of support? Have a wife M. M. Children.

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?	AFFIDAVIT OF PHYSICIANS.
Swyn to and subscribed before me this the Solu A. Wilson Applicant. Signature of April 1895. Ordinary Mark	STATE OF GEORGIA, Bonlow County.
of Barling County.	Personally came before me U.M. Hightower and
QUESTIONS FOR WITNESS.	, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully from
STATE OF GEORGIA,	A wilson applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:
County. County.	De is Duffering with pain in head our
as a witness in support of the application of 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:	Apine, Caused from a fun shot wound throng the gight shoulder and now looged between
following questions, deposes and answers as follows: 1. What is vour name and where do you reside? 2. Are you acquainted with. 1. What is vour name and where do you reside? 2. Are you acquainted with. 3. What is vour name and where do you reside? 4. What is vour name and where do you reside? 5. Are you acquainted with. 6. The applicant, if so how long have you known him? 6. The applicant is so the applicant if so for the applicant is so for the applicant.	His memory not good Juit frail
2. Are you acquainted with Jym N. Willow on the applicant, if so how long have you known him? Sure 1861	We further say on oath that the physical condition of applicant renders him unable to labor at
Mere does be reside, and how long has be been a resident of this State?	any work or calling sufficient to carn a support for himself, and that we have no interest in said pension being allowed.
4. Do you know of his having perved in the Confederate army or the Georgia militia? How do you know this? I do - to was a member of Eur. I think do you may Require 99, Ga, Not.	Sworn to and subscribed before me, this the day of Chiff Buf or described before the transfer of the suffer described by the s
By When, where and in what company and regiment did by enlist the content of 186 ga the content of the same company and regiment? I was Colonel of the May 7. How long did be perform regular military duty, and what do you know of his service as a Copfed-	Ordinary Partin Pola
6. Were you a member of the same company and regiment? U was Colomic of the Rest. 7. How long did he perform regular military duty, and what do you know of his service as a Confed.	Comments of the
the stripe, and the time and circumstances of his discharge from the service? All Gallier	ORDINARY'S CERTIFICATE.
after to was your sed	STATE OF GEORGIA,
I had not property except perhops a con-	1. SW Hendrich Li , Ordinary in and for said County, hereby certify that
9. What property, effects or igeome dig the applicant possess in 1893 and 1894, and what disposition if any, did he make of same? In the same Compiler maching Described	the applicant John A. Walson resides in said County, and was a hone fidgesident of this State on the first day of January, 1894, and that the witnesses, viz:
10. What is the ambliquit's occupation and about 1 with a Market as a 1/1/0	Jones -
Can raise his right orm. Lugs officted	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
defence of the bull age, field health and	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
That his work water by the years 1893 and 1894? I am nef trans	returned for taxation in his name in 1893, Complety Leven dollars
A State of the sta	of property, and in 1894, Witness my hand and seal of office, this Del of day of Williams 1805
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Asi of Decymber 15th, 1894? He is frail. Old unoble to Work. Subject from his wound. Has a	day of the ordinary
warrang will	of Bartow County.
15. What interest have you in the recovery of a pension by this applicant? NUNC Sworn to and subscribed before me, this	
the o day of Office 1895.	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."
· De Muiries Ordinary	Property Co.

POWER OF ATTORNEY STATE OF GEORGIA, County. to receive and receipt for the pension paid hereon and request that he remit same to TINESS WHEREOF, I have hereunto set my hand and seal, this Wilson [L. S.] Executed in presence of Soldier's Pension. RICHARD JOHNSON, INDIGENT 1897.

POWER OF ATTORNEY

						11121.		
St	gte of (georgia,	1.0	1.				
0	Sanle		County	}		^		
	· MH		Vilou		1.4	00	1	
- 10	(1)	n 04.11	nian	-	authorize		refl	
	Veno	MICA	8	of	Santi	mull	i Ga.	
to r	receive and	receipt for	the pension	paid here	on and see		e remit same to	
A 44	-2		Ponoioi			quest that he	remit same to	
	60. 1°	pirel	P. D.	b	u	1010		
at_				-			Contract of the Contract of th	
	INWIT	NESS WHI	EREOF, I	nave hereun	to set my 1	and and see	7/2	
day	of MI	mary		1898.				
	0	0	Transport metaline spreamone	Ost.	d.	1110	(11. S.)	
			, -	Jum	11/1	wy	(IL S.]	
		ited in presen	nce of	1	1	M	S. N.	
1/2	I he	lfin		1	run	//(
	114	10	***************************************	}				
4.	en ou	oham	UN.)				
. 0							. 7	,
			,			1.40		
1		,		- 4 N				
						1. 1. 1.	1.4	
			. \				1000	
		Ž		7 1	1	88 38	1 11	
G 3		9		5		118	1 1	
G B		S		3 1 :	1	2. 8	18	1
3 . 5			m 3	212	8	SO	10 10	1
3 3 5	4	PEN PEN	W Z	13	SS	HN	DED	1
42 a 5	51,	ਤ . _~	0	3	F	00	TAN	6
Se Already	6	E 53	8	12	AN	9	NT TO NATE	1
Realtern ACT OF 13 DEC., 1884.	No.2	Z H	W :	202	WARRANT ISSUE	CHARD JOHNSON	WARRANT HANDED OUTH WARRISON, STATE PRINTE	
OF	>	- =	1 2	18	WA	3	WAY.	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
Wantow County.
personally appears L. A. Wilson of Carlow
County, State of Georg 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 continously ever since
the he hotos born 18 ; that he is 70 years old and
by occupation a former; that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States, and served for the term of I have in Company I, of I have Regiment of
1/ 1 0
follows; Suffering from a wounded
Shoulder releived in the annu
and weakness from old age
that his property consists of the following items Aviting
of the value of Whine Dollars, that by reason of his physical
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 1897. I have heretofore as a resident of Cartow
Sworn to and subscribed before me, this, the
18 . In The work
Of day of Jarry 1897. mark
Contract of the state of the st
The New rehs Ordinary.
Ordinary.
STATE OF GEORGIA,
STATE OF GEORGIA, County.
STATE OF GEORGIA, County. STATE OF GEORGIA, County. 1. Which rieffs Ordinary of said County,
STATE OF GEORGIA, Baylow County. 1. LWMwWields Ordinary of said County, do certify that I am well acquainted with L. A. Willow the
STATE OF GEORGIA, Baylow County. 1. LWMwwWeffs Ordinary of said County, do certify that I am well acquainted with I, I Wilson the applicant in the foregoing affidavit, and an well satisfied that the statements made by him
STATE OF GEORGIA, Baylow County. 1. July County. 1. July County. 2. Ordinary of said County, do certify that I am well acquainted with J. Wilsow the applicant in the foregoing affidavit, and and 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
STATE OF GEORGIA, County. 1. Willow the applicant in the foregoing affidavit, and an 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.
STATE OF GEORGIA, Baylow County. 1. July County. 1. July County. 2. Ordinary of said County, do certify that I am well acquainted with J. Wilsow the applicant in the foregoing affidavit, and and 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
STATE OF GEORGIA, County. 1. County of certify that I am well acquainted with A. Willow the applicant in the foregoing affidavit, and and 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
STATE OF GEORGIA, County. 1. County of certify that I am well acquainted with A. Willow the applicant in the foregoing affidavit, and and 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

For Applicants Heretofore Allowed Pensions.

200 년 1일
STATE OF GEORGIA,
Bantow County.
Personally appears John A. Willy of Darlow
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 theris Usay of a 18; that he is by years old and
by occupation a ; that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of 4 700 in Company 1, of 23% Regiment of
Georgia but Infairy; that his physical condition is as
ollows: Le is in an almost helpless Con-
distion Differs freatly from walnud in night
that his property consists of the following items north
of the value of Dollars, that by reason of his physical
ondition and poverty he is unable to support himself by his own exertion or labor, and
hat he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
894, and the acts amendatory thereof, and makes application for the pension to which he
s entitled for the year 1898. I have heretofore as a resident of Derliver
ounty been allowed a pension for the year 1897
Sworn to and subscribed before me, this, the
J'h day of Jellingry 1898 JUM A. XWUXIN
1 LI LAND POR CLASSICAL MARKET
LW Neudycky Ordinary. MOTH
State of Georgia,
Daylow County.
I, Ordinary of said County,
certify that I am well acquainted with Dun a William the
oplicant in the foregoing affidavit, and an well satisfied that the statements made by him
his said affidavit are true, and I know he is the individual he represents himself to be
d that he resides in this County.
Offen under my official signature and seal, this
day of Junuary 1898.
Affix VI
here.
Ordinary Suntow County.
Note.—The blank spaces must be filled.

LLOSMEN!

POWER OF ATTORNEY. STATE OF GEORGIA, County. to receive and receipt for the pension allowed, and request that he remit same to at Castinsville Witness my hand and seal this... Executed in presence of SOLDIER'S PENSION For Those Already Enrolled WARRANT ISSUED //30RICHARD JOHNSON No. 2556 INDIGENT 1899.

POWER OF ATTORNEY. STATE OF GEORGIA, County. hereby authorize to receive and receipt for the pension allowed, and request that he remit same to Witness my hand and seal, this Executed in presence of most toobs SOLDIER'S PENSION (For Those Aiready Enrolled.) WARRANT ISSUED JOHN. W. LINDSEY, 1900. INDIGENT

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Barton County
(h \sim 1 h)
Personally appears J. M. Wilson of Barlow
County, State of Georgia, tho being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of fall 1837; that he is 6/ years old and
by occupation afoscor; that he culisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of form m in Company A dof 21th Regiment of
follows: Draffer from wurne received in the
16 10 10 10 10 10 10 10 16 16 16 16 16 16 16 16 16 16 16 16 16
was all broke down from oge
Management of the second secon
that his property consists of the following items
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1899. I have heretofore as a resident of Barlow
county been allowed a pension for the year 189
Sworn to and subscribed before me, this, the
7-0.000
pl day of January 1899.) mask
Twomonics Ordinary.
State of Georgia,
Darfow County
Print o Ve
Ordinary of said County,
do certify that I am well acquainted with _ Ullow the
applicant in the foregoing affidavit, and an 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 1899.
CAME OF PLANTED OF W
here.
Ordinary Definit County
Norr.—The blank spaces must be filled.

Note.—The blank spaces must be filled.

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

For Applicants Heretofore Allowed Pensions.

STATE	OF GEORG	IA.)		
Bo	nlew	County.	},		
•		0 - 4 :	il.	R	
	nally appears		elson	of week	mou
County, iSt	te of Georgia,	vno being duly	sworn, says o	n oath that he i	s a <i>bona fide</i> citizen
since the	day of_	y and State,			e continuously ever
		2	1825;	that he is Z	years old and
erate States	(or of the State	tnat ;			
	for the term of				between the States,
La	271	4/10	in Comp		2th Regiment of
follows:	2		0 0		sical condition is as
10110WS:/	Ve is	me we	of bod	centil	cere garage
un o	Son Office	very of	much	pron	The comme
ma	ight of	rued	~		
that his pro	perty consists	of the followin	g items		110 110
*					
Heronia de Caración de Caració			/	4	
of the value	of	/	Dolla	rs, that by reas	on of his physical
condition an	d poverty he is	unable to supr	ort himself h	his own sees	tion or labor, and
that he recei	ves no pension l	but the one he	main annii-i C	mis own exer	tion or labor, and
Depone	nt desires to pe	rticinate in th	tein applied to	r.	
1894, and th	e Acts amendate	ery thereof on	d malana and	he Act, approv	ed December 15th,
is entitled for	r the veer 1900	T have 1	d makes applie	ation for the po	ension to which he
county been	or the year 1900. allowed a pension	I have here	tofore as a re	sident of	nov
Sworn t	o and subscribed	hefore me 41	1897 0	fres,	
014	· · · ·	t before me, tr	1	Ungl	Vilson
Gu	day of	many,	_1900.	mas	K
pu	Hum	rolles	Ordinary.		
C.	_				
State of	Georgia,	1			
OB	nevou,	County.		- 14,3	
1, 9	wx	mor	w/61		
do certify the	it I am well acq	nainted with	401	11:00 dinar	y of said County,
applicant in t	he foregoing affi	davit and am	Anii aniine d	und	ents made by him
in his said aff	idavit are true.	and I know he	is the individ	and the statem	ents made by him nts himself to be
and that he re	esides in this Co	untv.	is the individ	un de represe	nts himself to be
			official signatur	re and seal, this	SiE
Cm2	day of	tama	1000	c and seal, this	-
your \			7 / 1900	014	
		#	Tu	Heno	rokes
* 1 4		O	rdinary 6	arline	County.
Nomm m	blank susses must be 40				- County.

Norn,-Affidavit should not be attested before January 1st, 10

INDIGENT County. INDIGENT County. INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT Witness my hand and seal, this Indigent of former	POWER OF ATTORNEY	
INDIGENT Country of Cartins Wills in to receive and receipt for the pension allowed and request that he remit same to an		
INDIGENT WILL STATE THE POLICY OF COUNTY OF STATE OF STAT	1122	
INDIGENT TO SELECT THE PORT OF	It H. Wilson hereby authorize George In	
INDIGENT INDIGE		5-0,
INDIGENT No. 11998 Already Enrolled. INDIGENT INDIGEN	Source 1 the pension anower and request that he remit same to	
Margan may be directly for the forest may be directly forest may be	by Phin Is	
Those Already Enrolled. No. 1199 INDIGENT DIER'S PENSION. 1901. Solid W. Lindsen of Profess Considerate of Profess Cons		
Those Already Enrolled. No. 1199 INDIGENT DIER'S PENSION. 1901. Solid W. Lindsen of Profess Considerate of Profess Cons	witness my hand and seal, this day of 1901.	
Those Already Enrolled. No. 1199 INDIGENT DIER'S PENSION. 1901. Solid W. Lindsen of Profess Considerate of Profess Cons	J. Mix will sm[L. s.]	
Those Already Enrolled.) No. 1799 INDIGENT DIER'S PENSION. 1901. 1901. JOHN W. LINDSEY, Committeers of Parists. C	Executed in presence of	
INDIGENT IDIER'S PENSION IDIER'S PENSION IBOOL WARRANT ISSUED 2 9 1801. JOHN W. LINDSEN, Committeer of Partner. Commit	proturis	
INDIGENT IDIER'S PENSION. 1DOIN W. LINDSEY, Committeer of Parison Committeer of Parison		
INDIGENT IDIER'S PENSION. 1DIER'S PENSION. 1BOOL WARRANT ISSUED 2 9 1901. JOHN W. LINDSEY, Committeers of Paristal Committeers of Paristal		
INDIGENT IDIER'S PENSION. 1DOIN WARRANT ISSUED WARRANT ISSUED 2 9 1901. JOHN W. LINDSEX, Commissions of Position C		
INDIGENT IDIER'S PENSION. 1DOIN W. LINDSEY, Commissions of Parista Commiss		
INDIGENT IDIER'S PENSION. 1DOIN W. LINDSEY, Committeers of position. Committeers of position		
INDIGENT IDIER'S PENSION. 1DIER'S PENSION. 1DOIN W. LINDSEY, Committeen of Printer. Committeen of		
INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT IDOIN IDOIN WARRANT ISSUED SKRANT HANDER TO SKRA		*
INDIGENT INDIGENT INDIGENT INDIGENT INDIGENT IDOIN W. LINDSEN, Committeen of Paris SKRANT HANDER TO Committeen of Paris Commit	Z Z Z	,
INDIGENT No. 1/9/9 INDIGENT INDIGENT TOOL. WARRANT ISSUED VARRANT ISSUED	9 7 7 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
INDIGEN No. // 9, INDIGEN IDDIGEN TOOL WARRANT ISSUE Committee Statust HANDER TOOL Committee Committ	S - 2 - 3	
INDIGE AIR	N. W. S.	
INDICER'S INDICER'S IDOHN W. I	S S S S S S S S S S S S S S S S S S S	Š
INI INI INI INI IOHN VARR	AN THE SECOND SE	1
I I I I	SE OF THE SE	
	F N I G N N N N N N N N N N N N N N N N N	3
9 %		0
SOLL County		1

		POWE	R OF	ATTOR	NEY	•			
STATI	or or	GEORGIA,	1			6	100	•	
W	in	richs	2.	hereby au		Ne	4	a	
to recei	ve and	receipt for the p	ension allo	wed and re	quest th	at he	remit sa	me to	
ъу(he	de	а	wai	us	on	Le	10	
	Vitness	my hand and seal,	this 614	day of	Jan	y.	1902	2.	
			Joh	u XX	We	lov	u_	[L. s.]	
Ex	ecuted i	n presence of	/	m	one				
4	6,0	tyn	old						
		<i>O</i> -							
									1
				4					
rikeriyyê Girên		enterior de la company	Di cimpiral accio a	··· · · · · · · · · · · · · · · · · ·					
ED.)	ali	8	1	3 1	1902.	ions.		1	
ENROLLED.	2	L SI	· B	水器		Y,	100	. rota.	. 1
	2	E E	3/1		3	JOHN W. LINDSEY	WARRANT HANDED TO	interofti	4
CODE SECTION 1254. FOR THOSE ALREADY I	00	₽ ×	3	Regiment	1	7. LII	T HAN	Seo. W. Harrison, State Printer	1
CODI JSE A	No.		1	Reg		HN V	ARRAN	. Harrison	
Ŧ	Z		3	800		ος	M	Geo. W	11
E	- 1	8	Name	Sold Sold Sold Sold Sold Sold Sold Sold				1	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County
personally appears of A. Wilson of Banton.
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 MAYON 1829; that he is 72 years old and
by occupation athat 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 4 % in Company of 22th Regiment
of La, Vol.; that his physical condition is as
follows: Physically disabled from lobor
himaballe bun a waying in his
Thoulder land also from old age
that his property consists of the following items
1 2 2
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 1901. I have heretofore as a resident of Warton
county been allowed a pension for the year 1900 - his
Sworn to and subscribed before me, this the AX Wilson
Of day of Jany 1901.
Tw Hindrick Ordinary mark
STATE OF GEORGIA,
Derline County.
1, I Whendright Ordinary of said County,
de anotic stand and the standard standa
applicant in the foregoing affidavit, and an 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.
~ 3
Given under my official signature and seal, this
day of July 1 1901. 0 (
1 July Charriells
Con Tien
Ordinary County County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.
Bartow County.
0. 0 -11.10
Personally appears John A. Welson of Derlow
County, State of Geoogia, 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 gay of January 1829; that he is 73 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 of 22 in Company , of 22 % Regiment
of Ga Mols. Juffy; that his physical condition is as
follows: Te is totally disabled from his wound
bringh the shoulder in a boots near
bulket for Court house in majoria
that his property consists of the following items
that his property consists of the following frems
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1902. I have heretofore as a resident of Sarly
county been allowed a pension for the year 1901 his
Sworn to and subscribed before me, this the John Ay Wildow
Twowish ordinary, mark
STATE OF GEORGIA.
Dantow, County.
Carry County
I, Ordinary of said County,
do certify that I am well acquainted with John H Wilbon
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 Minany 1902.
Amix July July Delivered
Ordinan (DRiland)

POWER OF ATTORNE

STATE OF	In A. Wi	ounty.} Lyon he	arter	sville	que la	
by C Witness m	receipt for the p	at A	arlinday of Al	est that he swill	y 1908	
14	n presence of Colb Poff		ζ ,	mare		
				e;		
THOSE ALREADY ENROLLED.) No. 3 6 8 5	DIER'S PENSION	Com A. Wilson	L' Regiment 227 Cl, UTV-LS WARRANT ISSUED	JOHN W. LINDSEY,	WARRANT HANDED TO	Geo. Harrison, State Printer, Atlanta.

(FOR THOSE ALREADY ENROLLED.

SOLDIER'S PENSIO

Name

	POWER	OF ATTO	RNEY.	
Gw	F GEORGIA, ATLAN Con I, Landrich de receipt for the pens		instull	
	my the pens	at 6 as	how wil	
	ss my hand and seal, thi	s 13 1/4 day	Wilow Wilow	1905. [L. s.
(FOR THOSE ALREADY ENROLLED.) No.S 7 40	SOLDIER'S PENSION FOOS.	Comps; Carland Of Co. O Regiment Of The Walker ISSUED	JOHN W. LINDSEY, Commissioner of Persons.	WARRANT HANDED TO

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Bartin County.
Personally appears John A. Wilson of Borton
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the he Laylord born 18; that he is / white his of
by occupation a farmer, 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 meanly 4 / in Company , of 22th Regiment
of La vols Inf that his physical condition is as follows: Physic of Pendiform as way bod andul.
follows: Physic of Penvilian as very bod indul.
Dutters from his would in his
Maulder'
that his property consists of the following items:
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
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 Borting
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 Borting county been allowed a pension for the year 1902
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 Borton county been allowed a pension for the year 1902 Sworn to and subspribed before me, this the
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 Borton county been allowed a pension for the year 1902 his Sworn to and subsoribed before me, this the day of your 1903.
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 Borting county been allowed a pension for the year 1902 Sworm to and subsoribed before me, this the John axwilson and subsoribed before me, this the John axwilson for the year 1903. Sworm to and subsoribed before me, this the John axwilson and the wildow with the John axwilson and the wildow with the John axwilson and the wildow wildow with the John axwilson and the wildow wildow wildow with the wildow
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 Borton county been allowed a pension for the year 1902 Sworn to and subsoribed before me, this the John axwilson for the year 1903. While will some this the John axwilson ordinary. STATE OF, GEORGIA,
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 Borting county been allowed a pension for the year 1902 Sworm to and subsoribed before me, this the John axwilson and subsoribed before me, this the John axwilson for the year 1903. Sworm to and subsoribed before me, this the John axwilson and the wildow with the John axwilson and the wildow with the John axwilson and the wildow wildow with the John axwilson and the wildow wildow wildow with the wildow
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 Borton county been allowed a pension for the year 1902 Sworn to and subsoribed before me, this the John axwilson for the year 1903. While will some this the John axwilson ordinary. STATE OF, GEORGIA,
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 Borton county been allowed a pension for the year 1902 Sworn to and subsoribed before me, this the John axwilson flay of the 1903. Ordinary. STATE OF GEORGIA, County. I, County of the pension to which he is entitled to the pension
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 Borton county been allowed a pension for the year 1902 his Sworn to and subsoribed before me, this the day of 1903. Will some and subsoribed before me, this the day of 1903. Ordinary. STATE OF GEORGIA, County. I Count
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 Borling county been allowed a pension for the year 1902 his Sworn to and subsoribed before me, this the day of the pension for the year 1903. Sworn to and subsoribed before me, this the day of the pension for the pension for the pension to which he is the form a will study of the pension to which he is entitled for the year 1902. Sworn to and subsoribed before me, this the place of the pension to which he is the pension to which he is entitled for the year 1902. Sworn to and subsoribed before me, this the pension to which he is entitled for the year 1902. Sworn to and subsoribed before me, this the pension to which he is entitled for the year 1902. Sworn to and subsoribed before me, this the pension to which he is entitled for the year 1902. Sworn to and subsoribed before me, this the pension to which he is entitled for the year 1902. Sworn to and subsoribed before me, this the pension to which he is entitled for the year 1902. Sworn to and subsoribed before me, this the pension to which he is the pension to which he is entitled to the year 1902. Sworn to and subsoribed before me, this the year 1903. Which will be year 1903. Sworn to an action to the year 1902. Sworn to an action to the year 1902. Sworn to an action to the year 1903. Which has a pension to the year 1903. Sworn to an action to the year 1902. Sworn to action to
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 Bartina county been allowed a pension for the year 1902 his will for a will form and subspribed before me, this the day of 1903. While will form a will
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 Cortival county been allowed a pension for the year 1902 his Sworn to and subsoribed before me, this the day of 1903. Sworn to and subsoribed before me, this the day of 1903. Ordinary. STATE OF GEORGIA, Ordinary. STATE OF GEORGIA, Ordinary. County. In the foregoing affidavit, and m 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
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 Bartina county been allowed a pension for the year 1902 his will for a will form and subspribed before me, this the day of 1903. While will form a will
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 Darking county been allowed a pension for the year 1902. Sworn to and subsoribed before me, this the day of the pension to which he is the large to the pension for the year 1902. Sworn to and subsoribed before me, this the day of the pension to which he will be the pension to which he will be the pension to which he is the pension to which he will be the pension to which 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 features pension to which 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 features pension to which 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 features pension to which he is the individual he represents himself to be and that he resides in this County.
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 Cortival county been allowed a pension for the year 1902 his Sworn to and subsoribed before me, this the day of 1903. Sworn to and subsoribed before me, this the day of 1903. Ordinary. STATE OF GEORGIA, Ordinary. STATE OF GEORGIA, Ordinary. County. In the foregoing affidavit, and m 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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Borling County.
Personally appears & a Wilson of OR Dantin
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 his day of wirth day; that he is He years old and by occupation a farmer, 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 Mesky Lygrain Company , of 22 th Regiment
of July Strom a warm on this physical condition is as follows: He Duthers from a warm on his Shailele
He is also quite old and infine.
that his property consists of the following items:
of the value of Dollars. I am now earning,
by my labor, / Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1905. I have heretofore as a resident of Darlow
County been allowed a pension for the year 1904.
Sworn to and subscribed before me, this the Sworn to an account to the Sworn to account to th
gw Ninones Ordinary. mont
STATE OF GEORGIA,
County.
I, Grdinary of said County,
do certify that I am well acquainted with J. Wilson
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of 1905.
July () Hwymonds
Affix your feel Ordinary County.

Note.—The blank spaces must be filled.

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

POWER OF ATTORNEY

6	VX ve and	EORGIA, I. John Les Tre receipt for the	ens		request	-	ull e remit	-	
by	- (7)	ex		at/O	uin	300		ya	,
W	TITNESS	my hand and sea	d, this	11	day of	Jan	L _	1906.	
<			fil	in,	XXV	Vi	ton	[L. S.]	
E	xecuted	in the presence	of		mos	10			
the		1, stuo	1.8.						
	Hor	so g wot	ya.						
1									
Coor Section 1234. (FOR THOSE ALREADY ENROLLED.)	No. 2/27	SOLDIER'S PENSION 1906.	Name John, G. Willem	Co. W. Regiment 23 n.4	WARRANT ISSUED	JOHN W. LINDSEY. Commissioner of Pensions.	WARRANT HANDED TO	Tof Falsekian Printing And Deficient Co., Clin. W. Horsebox, Man.	#

POWER OF ATTORNEY.

WITNESS my hand and seal, this day of and 18 Beacuted in presence of many the land of the	WITNESS my hand and seal, this day of and 18	Grand Grand to receive an	ow ofm mone, d receipt for the	COUNTY. A, UV Of L ne pension alle	room	popul	hereby auti
	nothing by	by		at.,	Oar	usi	ell
	NSION STORY TO TO			of	an c	Smary	C
	NSION NSION 19901		C	_	1	4.	

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Personally appears film A. Wilson 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	State of Georgia,
Personally appears AMM A Wilsow 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	n 42
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 1857; that he is years old and by occupation a federate States (or of the State of during the war between the States and served for the term of the company of the State Regiment of the company of the state of that his physical condition is as follows: The property consists of the following items: Of the vale of Dollars. I am now earning by my labor. 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 County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of face of Georgia, Ordinary. Ordinary. Ordinary of said County, do certify that I am well acquainted with following 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.	90 00 11 10 000
and resident of said County and State, and has resided in said State continuously ever since the	
since the day of 1857; that he is years old and by occupation a federate States (or of the State of) during the war between the States and served for the term of the company of other Regiment of the company of the States of the term of the company of the Regiment of the company of the Regiment of the company of the company of the Regiment	
of the valle of	
during the war between the States and served for the term of the States and served the States and serv	y cars ou and
States and served for the term of Afronachin Company of Shith Regiment ; that his physical condition is as follows: Inform from the condition is as follows: Inform from the condition is as follows: Inform from the condition is as follows: Information from the 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 Dartow County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the flag day of Jane 1906. Ordinary. State of Georgia, Ordinary. Ordinary of said County, do certify that I am well acquainted with flag and the county of 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.	by occupation a form, that he enlisted in the military service of the Con-
of the vale of	during the war between the
that his property consists of the following items: of the valle of Dollars. I am now earning by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. Swarn to and subscribed before me, this the A Wilson Ordinary. State of Georgia, County. Ordinary. Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.	
that his property consists of the following items: of the valle of Dollars. I am now earning by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. I have heretofore, as a resident of the pension to which he is entitled for the year 1906. Sworn to and subscribed before me, this the Have the pension for the pension to which he is entitled for the year 1906. Sworn to and subscribed before me, this the Have the year 1906. Ordinary. Ordinary of said County, do certify that I am well acquainted with form 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.	
that his property consists of the following items: of the vale of	
of the vale of	I'm as a would relived ding the
of the vale of	1. Classical distribution of the control of the con
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 County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of Jan 1906. Sworn to and subscribed before me, this the Mark Wilson Mark Ordinary. State of Georgia, County. Ordinary. Ordinary of said County, do certify that I am well acquainted with Mark Ordinary 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.	that his property consists of the following items:
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 County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of Jan 1906. Sworn to and subscribed before me, this the Mark Wilson Mark Ordinary. State of Georgia, County. Ordinary. Ordinary of said County, do certify that I am well acquainted with Mark Ordinary 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.	
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 County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of Jan 1906. Sworn to and subscribed before me, this the Mark Wilson Mark Ordinary. State of Georgia, County. Ordinary. Ordinary of said County, do certify that I am well acquainted with Mark Ordinary 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.	of the miles
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 Dartour County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the Act Wilson Mark Wilson Mark County. Ordinary. State of Georgia, County. Ordinary of said County, do certify that I am well acquainted with Mark County, 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.	- mining
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 Darkow County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of Jan 1906. Sworn to and subscribed before me, this the day of Jan 1906. Ordinary. Ordinary. Ordinary of said County, do certify that I am well acquainted with Man a Willow Willow 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.	
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 Dartow County, been allowed a pension for the year 1905. Swern to and subscribed before me, this the day of Jane 1906. Swern to and subscribed before me, this the Market Allowson Market County. Ordinary. State of Georgia, County. Ordinary of said County, do certify that I am well acquainted with Market County 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.	labor, and that he receives no pension but the one herein applied for
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 the year 1906. County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of fam. 1906. State of Georgia, County. Ordinary. Ordinary of said County, do certify that I am well acquainted with Man a 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.	
is entitled for the year 1906. I have heretofore, as a resident of Bartour County, been allowed a pension for the year 1905. Sworn to and subscribed before me, this the day of Jan. 1906. Ordinary. State of Georgia, County. County. Ordinary of said County, do certify that I am well acquainted with Man a 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.	1894, and the Acts amendatory thereof, and makes application for the pension to which he
Sworn to and subscribed before me, this the John A Wilson Sworn to and subscribed before me, this the John A Wilson Jan 1906, Grdinary. State of Georgia, County. Jan Ordinary of said County, do certify that I am well acquainted with John A Wilson 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.	is entitled for the year 1906. I have heretofore, as a resident of Dartow
day of fan 1906, ordinary. State of Georgia, County. I, Mend victor ordinary of said County, do certify that I am well acquainted with Min a Willy or 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.	County, been allowed a pension for the year 1905.
State of Georgia, County. I, Menovice of County, do certify that I am well acquainted with Men a will 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.	Sworn to and subscribed before me, this the
State of Georgia, County. I, County Ordinary of said County, do certify that I am well acquainted with Man a Willow 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.	day of fan- 1906.
do certify that I am well acquainted with Men a Will Will 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.	G. W. Menovicky Ordinary.
do certify that I am well acquainted with Men a Will Will 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.	
do certify that I am well acquainted with Min a will 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.	State of Georgia,
do certify that I am well acquainted with Mus as will state of 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.	County.
do certify that I am well acquainted with Mus as will state of 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.	1 4.WHendrickal Ordinary of soil Court
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.	In Said County,
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.	
to be, and that he resides in this County.	by him in his said affidavit are true, and I know he is the individual he represents himself
Given under my official signature and seal, this	Given under my official signature and seal, this
day of fan p 1906, p	
Jew. Her Dricks	Ju Hendrick
Amer Sour South Ordinary Warlow County	Adix your Dank De Condingry Dank De Condingry
Norm.—The blank spaces must be filled.	mind.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

			Y MINDIOIN
State of Georg	gia,	T la	
Dortin 0	County.		
Personally appears	The NW	elong of	Darling
County, State of Georgia who,			a hone fide cities
and resident of said County and	d State, and has res	sided in said State	continuously ever
since the was view	m 1	8; that he is_	So years old
and by occupation a	that he en	listed in the military	service of the Con-
federate States (or of the State	of) during th	e war between the
federate States (or of the State States, and served for the term of Ja Vol	of 3 14 90 in	Company , of	22 th Regiment
11			
follows:		noble to	wish
from ms com	no our f	rom o	ca agu
that his property consists of the	following items:		
(-)			
of the value of		D-11	
by my labor,	Dollar	rs per month. Tha	I am now earning
physical condition and poverty h	a is unable to supp	as per month. The	it by reason of his
labor, and that he receives no pe Deponent desires to parti 1894, and the Acts amendatory t is entitled for the year 1907. I County, been allowed a pension Sworn to and subscribed t Beautiful day of Jane Taribut Ludin e	cipate in the benefits hereof, and makes a have heretofore, as a for the year 1906, before me, this the 1907.	s of the Act approve pplication for the per resident of Do	nsion to which he
		dinary.	
State of Georg	ia,		
Darlin ,	County.		
quele	east ve	b a	
1, 2007	and		y of said County,
do certify that I am well acquai			
the applicant in the foregoing aff by him in his said affidavit are tr			
to be, and that he resides in this		, the fadividual he i	epresents minsen
	official signature and	seal this	
day of	on	1907.	
	eju	Hand	ness
Affix	Ordinary	Boston	County.
Note.—The bi	ank spaces must be filled.	potoro Jenobere let. 1907	

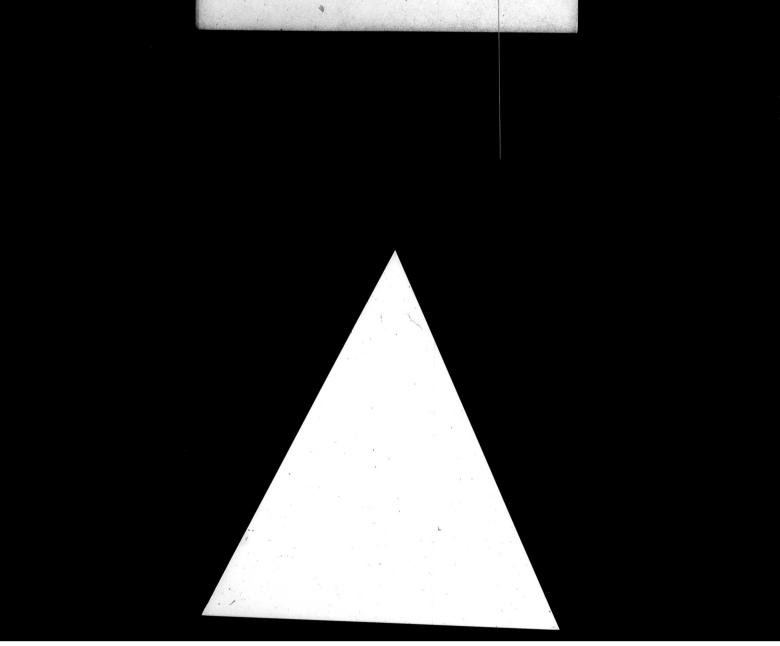
by	Che	A. Wilsy ricks ceipt for the p	pension allow	wed and resolution	request, the	at he ren	- 19	ante	
O Contents 134. E ALREADY ENROLLED.)	They ment their shire that As is a report in the s	Business of the property of th	the in the better of and thanks the besterology to a start.	Party of the state	arosi (se rpi e y e nidir	LINDSEY,	HANDED TO		later
FOR THOS		gonnak ang sa	Namefoling H	anlisted in	n and Sta	dra kontin	WARRANT	oute)	na

STATE OF GEORGIA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Barlow County,
Personally appears John A. Wilson 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 was offor 18; that he is 14 years old and
by occupation a farm, 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 meanly 4 gra in Company & of 22 th Regiment
of 4 a rol conf
follows: He as broken down from age and also
Daffers from his wounds are his thoughter
M. O O O
that his property consists of the following items:
of the value of Dollars, that by reason of his physical
of the value of
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 Barbou
County been allowed a pension for the year 1200
Smoon to and subscribed before and it is a spirit
The day of fary 1904. John Ax Wilson
Period of the mant
Ordinary.
STATE OF GEORGIA,
Darlow County.
I, G. W. New Corners of said County
do certify that I am well acquainted with John A. Wilson
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 Jany 1904
(adi)
Best bere. Ordinary Barlow County.
Nors.—Affidavis should not be at casted before January 1st, 1904.



INDIGENT PENSI 1903. Nam Jalundson County County Barlow County Barlow County Barlow County Barlow Consider Barlow Approved JOHN W. LINDSEY, Commissioner of Pensions WARRANT HANDED TO Ordinary will write Name of Applicant, Compand. Regiment on back as indicated above. Geo, W. Harrison, State Printer, Alasia. 11/2 5/0°3	Pension errice b/80/05 Not an aged man, intremity and its errect not shown to be such that to errect not shown to be such that ordinary error he cannot earn his support. Now is a his disport. Now is a his disport of its before jointing the army and was not sunject to military duty at ally and papy. His service in the army was only having his name on the roll. Prove all racte to be true by a wit ness that of his own knowledge knows them to be true. J. W. Lindsey on. Or Pensions Pension Office, 7/15/04. Applicant must recoond to all of the note of application made by the domnissioner 9/30/06. Otherwise that note disposes of this application. Prove all size ement at the better. J. W. Lindsey, on. or Pensions.		Witness my hand and seal, this State of the	STATE OF GEORGIA. STATE OF GEORGIA. COUNTY. LOT GOVERNOR TO THE COUNTY of CONTROL OF COUNTY. LOT GOVERNOR TO THE COUNTY OF
--	--	--	---	--

POWER OF ATTORNEY. **OUESTIONS FOR WITNESS** STATE OF GEORGIA. Franklin of Carton ofh E. C. Vanding J.D. Pullian of said State and County, having been presented as a witness in support of the application ofto receive and receipt for the pension allowed and request that he remit same to under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and sortispilly ches 1. What is your name and where do you reside? I. le Muchin Franchis Quich to 5 Witness my hand and seal, this 5/-G.G. Wilson yes Are you acquainted withthe applicant; if so, how long have you known him? Where does be reside, and how long and since when has he been a resident of this State? W.C. Walton, C. S.C. When where and in what company and regiment did he enlist, and how do you know? In thring 1863 at Cumertice to Compay B. 10t to State Line Were you a member of the same company and regiment? Merras How long did he perform regular military duty? 11 months When and where was his command surrendered ? Diane kneemsborn St. 6. 18651 Were you present when it surrendered ?____ 9. Was applicant present? ... 10. If he was not present, where was he?_ Jany 1 st 1804 For what cause? Capellette file When did he leave his command ?by who in Charge & officers How do you know all of this? By what authority he left ?____ We were present and timber the above Stated facts What property, effects or income has the applicant? (Give your means of knowledge.) The property, effects or income did the applicant poses in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? That must have any further than a further than Has not Nat not had any to convey What is the applicant's occupation and physical condition? Harrier, Nis Bleges'cof endition is not good be be. from age as well as bring distased 15/ Is the applicany washe to support inness by labor of any sort, it so, why? The is, become on the stay of flores Will Mumo lipso te 6. How was he supported during the years, 1898, 1899, 1900, 1901 and 1902? By his Milder of his portion of his support for these from years and desired from his own labor or income? but me holf, or nearly so 18. Give a full-and complete statement of the applicants physical condition that entitles him to a pension under secution 1254. Codin Has no means. NOT Oble w world Held bellving beebler in allust of vid oge 19, Who composed family? What prophysical by? Children's ago and their earning superior. Hermony, and wife, building alf of oge aw trumblas. They are oll poor Sworn to and subscribed before me, this the)

STATE OF GOORGIA. STATE OF GOOR	AFFIDAVIT OF PHYSICIANS	QUESTIONS FOR APPLICANT.
Pregnify supplied 26, Och, handy almost to prove a design of proving a second part of the Paula and County, handy annually and other the proving and county, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy annually and part of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and County, handy and the second and the water of the Paula and the P	STATE OF GEORGIA.	STATE OF GEORGIA,
Promptly emphatically and and the house in an an expension physical of and County, who, him, we workly seem, any on oth has they have emphatically administration of the country, who, him, we workly seem, any on oth has they have emphatically administration of the country, who, him, we workly seem, any on oth has they have emphatically administration of the country	Bactoria Courty	4 6 ML (100m)
STATE OF GEORGIA. COUNTY: 1. Full of the animal and the substant of the product of the substant of the subst		to avail Amelf of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly aways
STATE OF GEORGIA. COUNTY: 1. Full of the animal and the substant of the product of the substant of the subst	14 4 201	1. What is your name and where do you resid? (give State, Copers, and post-office)
STATE OF GEORGIA. COUNTY: 1. Full of the animal and the substant of the product of the substant of the subst		How for and times with home and the contract of the
The land of the second of the	A. Cotela com, applicant for pension under Section 1254, Code, and after	Chave lived in Levana all my like
STATE OF GEORGIA. STATE OF GEOR	such personal examination say that his precise physical condition is as follows:	3. When and where were you born? /844, an frankling Golden
STATE OF GEORGIA. STATE OF GEOR	Duffers from fundage	At Campany and regiment did you enlist or server and the land of t
Miles for the control of the state of the st	and who servally hiping	Jurged State line.
o, When and when we your company and regiment superacted and discharged? These 1850. When and when we have no identical and particle being allowed. When and subscripted before me, this the supplies of the superaction of	gestion ales Datisho leate	
Men and that we have no inferent in and pendon being allowed. We were not understand the property of the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and the company and regiment span it was necessary and regiment span in the condition that yet and regiment span in the span in the condition that yet and regiment span in the condition that yet and regiment span in the condition that yet and regiment span in the regiment spa	Tele ham tangraica. Has a be hand sweene	T .
and that we have no inferent in said personne being allered. Severus to an discontribute of the contribute of the contr	- 3 - 3	6. When and whose was your company and regiment surrendered and discharged?
8 Weary no present with your company and regiment by the sea surrectaint 1. The present, state and present of the part of sea sea, when you like your company for white name and to plant the part of		B
ORDINARY'S CERTIFICATE. STATE OF GEORGIA. STATE OF GEORGIA Ordinary, in and for said County, hereby certify that the applicant of the following the state of the following the following the following grounds do you have been in such condition that you could not state the following that the applicant of the following the foll	The sailte	7. Were you present with your company and regiment uses it was surrendered?
ORDINARY'S CERTIFICATE. STATE OF GEORGIA. STATE OF GEORGIA Ordinary, in and for said County, hereby certify that the applicant of the following the state of the following the following the following grounds do you have been in such condition that you could not state the following that the applicant of the following the foll	3 to day of thing- 1903.) "Oldelhoun	and by whose authority? Solution of him. I was discharged
ORDINARY'S CERTIFICATE. STATE OF GEORGIA. STATE OF GEORGIA. COUNTY. Ordinary, in and for said County, hereby certify replant to the firm of the firm of the firm of the county of th	G. W. Venoviene Ordinary.	from segne for facture of welly cities first before
STATE OF GEORGIA. COUNTY COU	ORDINARY'S CERTIFICATE	10. What has been your occupation since 1865? Haming . Perhals Conditions
Ordinary, in and for add County, hereby certify that the applicant been a home fide reddent of this Stage since the and that the witnesses, vir. I have been a home fide reddent of this Stage since the and that the witnesses, vir. I have been a home fide reddent of this Stage since the ALCOLIS Carely July 10 property, and the witnesses, vir. I have some an advantage of treatment are entitled to full faith find credit a series of treatments are entitled to full faith find credit a series of the se		11. Upon which of the following grounds do you base your application for pension, vis.: first, "age and poverty." 4. second, "infirmity and poverty," or third, "blindness and poverty."
Ordinary, in and for add County, hereby certify that the applicant been a home fide reddent of this Stage since the and that the witnesses, vir. I have been a home fide reddent of this Stage since the and that the witnesses, vir. I have been a home fide reddent of this Stage since the ALCOLIS Carely July 10 property, and the witnesses, vir. I have some an advantage of treatment are entitled to full faith find credit a series of treatments are entitled to full faith find credit a series of the se	As as Torred	12. If upon the first ground, state how long you have been in such condition that you could not earn you support? If upon the second, give a full and complete history of the infirmity and its ground? If upon the second,
that the applicant	COUNTY SOUNTY	whether you are totally found and wheneand where you lost your night? I shall the total
and that the witnesses, viz. I would be a supposed for the state of this State state when the state of the st	Ordinary, in and for maid County, hereby certify	A for mony Heart . Olin really Invalled
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 gath displays took the cath percent prescribed, and that the full text of the affidavitie was read to the applicant and with property, in 1902 I further certify that before answering the foregoing questions the applicant and with property and in 1900 Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before the vitures. Caunty show that the full text of the affidavitie was read to the applicant and vitures before you shall give the viture of the vitures. In my opinion the foregoing claim is I have you a family? If so, who comploses such family? Glysytheir mean of supports! Have before the your shall give up the viture of the property. I have you a family? If so, what amount and for what disability? On Are you receiving any pension? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you ever made an application for pension before? I have you ever made and under what c		av manuallabor, trongh & de de little
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 gath displays took the cath percent prescribed, and that the full text of the affidavitie was read to the applicant and with property, in 1902 I further certify that before answering the foregoing questions the applicant and with property and in 1900 Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before some was signed. Caunty show that the full text of the affidavitie was read to the applicant and vitures before the vitures. Caunty show that the full text of the affidavitie was read to the applicant and vitures before you shall give the viture of the vitures. In my opinion the foregoing claim is I have you a family? If so, who comploses such family? Glysytheir mean of supports! Have before the your shall give up the viture of the property. I have you a family? If so, what amount and for what disability? On Are you receiving any pension? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you a family? If so, what amount and for what disability? I have you ever made an application for pension before? I have you ever made and under what c	and that the witnesses, viz. F. M. Coffee A. J. Collection . A. A.	What property real and personal, or name do you possess, and its good value?
Let further certify that before answering the foregoing questions the applicant and witness store he code hereon prescribed, and that the full text of the affidavite was read to the applicant and witness stores are supported, and that the full text of the affidavite was read to the applicant and witness stores are supported, and that the full text of the affidavite was read to the applicant and witness stores are supported, and that the full text of the affidavite was read to the applicant and witness stores are supported, and that the full text of the affidavite was read to the special stores. The full text of the affidavite was read to the special stores to the question of the affidavite was read to the special stores. The full text of the affidavite was read to the special stores to the question of the affidavite was read to the special stores. The full text of the affidavite was read to the special stores. The full text of the affidavite was read to the affidavite was read t	Hacolt and f. D yarmer and volingo ?	to 14. What property, real or personal, did you lossess in 1894, 1895, 1896, 1897, 1898, 1899, 1809, 7001
hereon prescribed, and that the full text of the affidavite was read to the applicant and witnessessions same was signed. I further certify that the tax digest of County show shaff applicant of property, and in 1900 County show shaff applicant of property, in 1901 Dollars of property, in 1902 Dollars of property, in 1902 Dollars of property, in 1902 Witness my hand and seal of office, this Andrew of the control of the property of the was a policant and the witnesses in the following words: "You shall true answered, the Ordinary shall awar applicant and the witnesses in the following the winds to the proof of the application for pension before? In my opinion the foregoing claim is the was a policant and the witnesses in the following words: "You shall true answered, the Ordinary shall awar applicant and the witnesses in the following the whole truth, so help you God." 1. Before any questions are answered, the Ordinary shall awar applicant and the witnesses in the following the whole truth, so help you God." 1. Before any questions are answered, the Ordinary shall awar applicant and the witnesses in the following the whole truth, so help you God." 2. Have you ever made an application for pension before 7. 2. How many applications have you ever made and under what class? Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this the 1. Sworn to and subscribed before me this t	3 h 4 0 H 3 2 2 2 2 2	5 any other morely except the latte keromal
I further certify that the tax digest of Darion County show that applicant returned for taxation in his name in 1899. Dollars of property, in 1901 Dollars of property, in 1802 In my opinion the foregoing claim is made in good faith Witness my hand and seal of office, this day of Left County of County County. 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answered make to each of the questions asked of you, and the evidence you asked life witness. In the following time of and subscribed before me this the? Sworn to and subscribed before me this the? Sworn to and subscribed before me this the? Sworn to and subscribed before me this the? Wilson. Wilson. Sworn to and subscribed before me this the? Wilson.		15. What County did you reside during those years, and what properly did you then severe to travel.
returned for taxation in his name in 1899 Dollars of property, and in 1900 Dollars of property, in 1901 Dollars of property, in 1902 Dollars of property. In my opinion the foregoing claim is made in good faith, Witness my hand and seal of office, this Additional afflavite may be stached if blank spaces are insufficient. TODES. 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: To shall true answered make to each of the questions asked of you, and the evidence you shall give will be Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient. Sworn to and sulfavite may be stached if blank spaces are insufficient.		Deanis West Lilles
property, and in 1900 Dollars of property, in 1901 Dollars of property, in 1902 Dollars of property. In my opinion the foregoing claim is made in good faithy Witness my hand and seal of office, this Aday of 1903. The property of t	# 9C	10. How were you supported during the years 1899, 1900 1901 and 1902? I have high
Dollars of property, in 1802 Dollars of property. In my opinion the foregoing claim is	8 100 × 122	
In my opinion the foregoing claim is made in good faith Witness my hand and seal of office, this 9 day of Selfa 1903. Witness my hand and seal of office, this 9 day of Selfa 1903. Are you receiving any pension? If so, what amount and for what disability? Land for the control of Selfa 1903. Are you ever made an application for pension before? 1. Before any questions are answered, the Ordinary shall awear applicant and the witnessee in the following words: "You shall true answeres make to each of the questions asked of you, and the evidence you shall give will be the control of the control of the questions asked of you, and the evidence you shall give will be the control of the control of the question of		18. What was your employment during 1898 1899 1901 and 1902 2 William 114
In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 9 day of 1903. Witness my hand and seal of office, this 9 day of 1903. Are you receiving any pension? If so, what amount and for what disability? County. 20. Are you ever made an application for pension before? NOTOTE: 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answered make to each of the questions asked of you, and the evidence you shall give will be the company of the property? Thypogase and how employed IN LABOL (UNITY COUNTY OF THE COUNTY	O/ /-	19. Have you a family? If so, who composes such family? Given their means of support? Have drey
Witness my hand and seal of office, this day of the form 1903. Are you receiving any pension? If so, what amount and for what disability? Are you ever made an application for pension before? 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true snavered make to each of the questions asked of you, and the evidence you shall give will be the control of the control of the precision saked of you, and the evidence you shall give will be a form of the destions asked of you, and the evidence you shall give will be the control of the control of the precision saked of you, and the evidence you shall give will be the control of the greetion of the precision o	In my opinion the foregoing claim is made in good faith.	Inglessed, of other property? The gages and how employed? I have inky a work
Of Ordinary County. 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answere, make to each of the questions asked of you, and the evidence you shall give will be the county of the count	(D) V	they controlled to my Sup port they are for
1. Before any questions are answered, the Ordinary shall aware applicant and the witnesses in the following words: "You shall true answered make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." So to every case the Ordinary must certify to the character of the witness, and as to the average of the witness.		20. Are you receiving any pension? If so, what amount and for what disability?
1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following to whole truth, so help you find. 2. Additional affavite may be stached if blank spaces are insufficient. 3. In every case the Ordinary must certify to the character of the witness, and as to the averaging of the average of the control of the specific of the witness.		21. Have you ever made an application for pension before?
Sworn to and sufferible before me this the } Sworn to and sufferible before me this the } Sworn to and sufferible before me this the } Sworn to and sufferible before me this the } Sworn to and sufferible before me this the } Applies Applies Applies		22. How many applications have you ever made and under what class?
as above set one Ordinary most certify to the character of the witness, and as to the execution of the proof	words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be 2. Additional sfidayits may be attached if blank spaces are insufficient.	Sworn to and subscribed before me this the
	8. 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.	day of class 1903. Applies
of Openion County		

...County.

9	w	GEORGIA,	J.	ension al		d reques	t that h	e remit	ya
byW		my hand an	d seal		at lea				e
E	xecuted	in the preser	ice of	***************************************		lay of	væs	1512	[L, S
(FOR THOSE ALREADY ENROLLED.)	No. 330 2	SOLDIER'S PENSION	1905.	Name 1. W. 14 1771	On the Line	WARRANT ISSUED FEB 7 1903.	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO	GEO. W. MARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

-	ve and	receipt for the	pension a	of Box	request	that he	e remit.
		ss my hand and se		J'6"	lay of	Ja.	е. И,
		·	`	-			
				1 - 1 - 1	9	11	
COOR SECTION 1234. FOR THOSE ALREADY ENROLLED.)	23.	PENSIO G.	Moun	and Ma	SUED	W. LINDSEY.	NDED TO
CODE SECTION 1234.	No. 2/	NDICE See See See See See See See See See See	200	-Regime	AN 29	JOHN W. LINDSEY Commissioner of	ARRANT HAN

€ 11 (a) ESV. 0 -

etter or peners

LOR HEPLICANTS BURETO HER ALLO WELL PARE, PARSONIS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Barlow County.
Personally appears J. C. Wilson of Bonton
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 very day of very later, that he is over years old and by occupation a county, that he enlisted in the military service of the Confederate States for of the State of very day of very house of the confederate States for of the State of very day of very house of the confederate States for of the State of very day of very house of the confederate States for of the State of very day of very house of the confederate States for of the State of very day of very house of the confederate States for of the State of very day of very house of the confederate States for of the State of very day of very house of the confederate States for of the State of very later of very
States, and served for the term of Int Hear in Company B, of / th Regiment
of Ta Stot line; that his physical condition is as follows: var cose wins. Sumbage and Munation
•
that his property consists of the following items: hule and acom
of the vale of 2100 Dollars. I am now earning.
by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Danton
County been about a person for the year 1904.
Sworn to and subscribed before me, this the day of Jan 1905.
Is W Hindricks Ordinary.
STATE OF GEORGIA,
County.
i, Gudundricks Ordinary of said County,
do certify that I am well acquainted with J, C. Wilown
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.
Given under my official signature and seal, this.
day of 1905.
Jan Gw Ambricks
Seat Seat Ordinary Carloto County.

Nore.—The blank spaces must be filled.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Bartow County.
100,000
Personally appears J. Wilson 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 20 day of 20 1844; that he is 6/ 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 Oct.
of the graf Atale line; that his physical condition is as follows: Las Neuma listes, lumbager Variable
follows: Has they madistry land in physical condition is as
and other informities
A CONTRACTOR OF THE PARTY OF TH
that his property consists of the following items:
mule and core
Control of the contro
of the value of Dollars. I am now earning
by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1906. I have heretofore, as a resident of Barbow
County, been allowed a pension for the year 1905
Sworn to and subscribed before me, this the
16, 41 day of Jan 1906.
Gurlinories Ordinary.
Oldmary.
State of Georgia,
Borlow County.
· Gual halm
// Didmary of Said County,
lo certify that I am well acquainted with J. Wilson
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 163
day of 1906,
AME Sur Ninvicks
Ordinary Baston County.
Note.—The blank spaces must be filled

TATE OF GEORGIA, COUNTY The person allowed	n slip vill	hereby authorize	
mye at 10	arterste	ille Ga	<i>!</i> :
WITNESS my hand and seal, this fohr	day of Jan		
		(<i>)</i> -	
SOLDIER'S PENSION 1907 1907 1907 1907 1807 1807 1807 1807 1807 1807 1807 1807 1807 1807 1807 1807 1807 1807	FEB 4 1807. JOHN W. LINDSEY. Commissions of Pensions.	WARRANT BANDED TO	no deto

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS State of Georgia. Garling County. Personally appears when b wilson of Sorlow County, State of Georgie, 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 W day of hov 1844; that he is 68 years old and by occupation a the that he enlisted in the military service of the Conduring the war between the States, and served to the term of 11 mv in Company B, of 1 th Regiment advotate line ; that his physical condition is as Le has thermolosm vorico cale money him full that his property consists of the following items; brule & lind corns On Hendrel 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, is entitled for the year 1907. I have heretofore, as a resident of Barlow County, been allowed a pension for the year 1906.

+ 1894, and the Acts amendatory thereof, and makes application for the pension to which he

Sworn to and subscribed before me, this the The day of faw 1907.

State of Georgia,

Qounty. Ordinary of said County, do certify that I am well acquainted with

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

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

Georgia & Personally Came before me Borlow County M. B. Brookshar and J. J. Larothon who in ooth Day they have known Georgia Personally Came L. Franks, Im. J. b. Wilson for fifteen your and more and (Barlow Canuly who ofter being swoon on from their over personal knowledge, sois the said oath says that he has known of b. Wilson Welson has no property or income from which to Ever since he was a small boy: That when dinas a dipont and that he is unoble to some a deplost by manual later and has been for a the said Wilson enlisted in the linfedurate ling lime, That he had been growing weather armphe was a stout young many That and is of present entirely mobile to perform Minediately ofter of orm often the was menual lobor for a living and has become he and Wilson did not dive in the same finted for the necessaris of leso and is no locality; but for the last fifteen years amors for Dame and not oble to mothe he has been living close by and frequently a Support in account of his fuble em with hor Wilson, that he Knins how wilson's dition Sworn by Dubsenber 3 9.3. Cauthors before my, mv. 10, 1908 Plyore of Condition and financial Manding. that Im Wilson is not oble to earn a support of lobor on account of his Lev. Nunnels Weak and Afficof ailmusts; and that Ordinary he has no property, income or miney or any means from which to derin a Alphort. Afficient has no dutinot in a Movery of a Bension by of flicant Sword to and Subsenber Georgia Frankling V J. V. Olow Ording un und before my Deft- 121/9045 Carry I for Said County do hereby certify In Hindriess } & b Frenke that O & Vacadion & J. D. Perecion are bustoorthy Ordenory Chariceles and they Statering Should have luce Bartin Co Ga faite and budit for applicant for Pension Thise will my hand and Song of J. J. Coroca V Ordinay

Gorgia 3 Kersonally came before Bartan Candy Enu & C- Wilson and on Sooth says that incodition to his finner officeasit, that he was shoul and well when he entired in the confederali Leromally came before me, anny and he had served Thing months in Bantow County Dr. Ot. S. Bradley, a procticing the termy when he was collacted with brain physician of said County and few which and exileption fits; caused after being by me swom touching the condition of or the In our from exposure, that he be-J. C. Wilson, On ooth says that he has Known Came leder and Served Suren more ments, Said Wilson Dince 1888, has been his family during those seven mouth & wireld have physician the most of the time since 1888; that a fill-a doell Danctines one a moulto Said wilson is a fuble man; has varievele, and simetimes of Ever; that of the end Tumbogo and Jeneral muscular Sheumatismo: of said sum mintes & got worse and that he had had second, renal colie, which The Drs. discharged me or so divincommed is the passage of gravels from the Midney to the my discharge and dwashinwoody discharged bladders that he has no property from which from the Services that about how ye or often to dinve a sup port nor any succome of any The war cloved Council to have the spell. Kinds that his diseased tempetion render him that of the time I was discharge I had unable to work for a support and his age become doof in both fears, finally menosing increases his disobilities; that Simething bursted in my land and my the effect of his diseases upon his physical oyoline hearing was portione restrict but I am is permanent and fixed and liane been in quito fieble heach for Afficient has me interest wholiver in a recovery of ate these years and com not oblived? perisin by opple cant? Swom wand subscribed 3 R. S. Bordeeyming Serform ty Ordinay auxotimes lege in account of my weak and diorased lefue mi. M. 24-1903 Condition, At to my discharge I have not Lwhudnell got it now and can't frimish it move, Ordinary Swom lot diebsentul lefor me aug 19-1904 / f C Mitson HU Hundrick Ord way

E Wilson Joo. YEAR 1905 COUNTY Barton

ENLISTED WHEN AND WHERE? In spring of :1868, at Capeville Ga.

COMPANY AND REGIMENT? Co. B. 1st Georgia State Line

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Was discharged from service for failure of health/either just before or after Christmes in winter of 1865.

WHEN AND WHERE BORN? 1844, Franklin County Ca.

ELEASED.

CAPTURED, WHEN AND WHERE?

WHEN AND WHERE SURRENDERED?

1863

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? / At home sick,

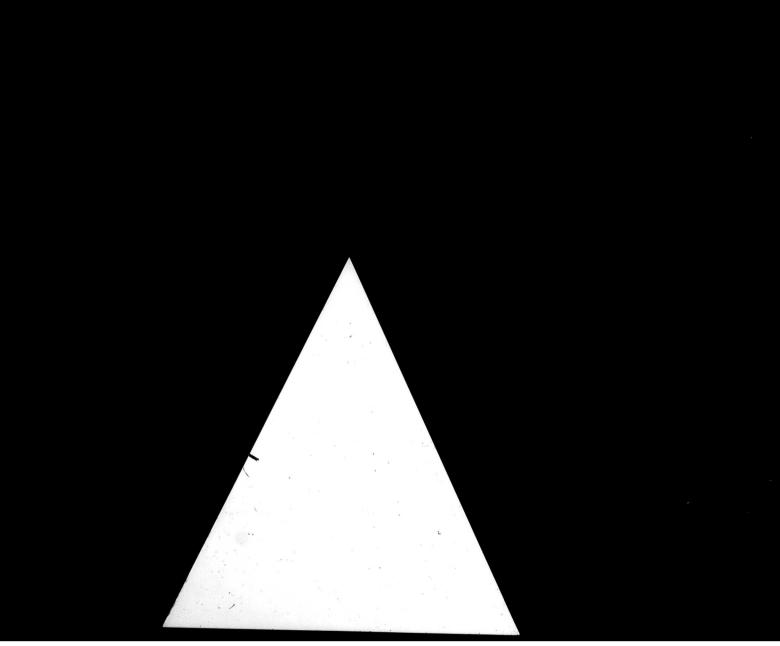
DIED, WHEN AND WHERE?

BURIED,

RANK.

DIED, WHEN AND WHERE!

WITNESSES. E. C. Vandevier - Same command



Wilson, John E.				- /			
CH HO. 116.				7	1	0	
V.N.				ng.	to recei	STATE	
INDIGENT PENSION				200	we and receipt for the pension at d		
1895.				in pres	eccipt fo	OF GEORGIA	
		Life		ence of	r the pe	EORGI	2
Name J. C. Wilson				2	nsion all at this	4.10	WO
County Darlogo		50	4. 1		sion allowed and at Willadop.	County	ER (
Ground In findy & Dorg					d reque	8	OF A
(John)				of the	to receive and receipt for the pennion allowed and request that he remit as at the state of the	9	POWER OF ATTORNEY.
RICHARD JOHNSON,	4		1	in la	by remit s	Boul	ORNI
9 Of Secretary Executive Department.			·	XXXX 8	ame to	line	Y .
WARRANT HANDING 45			, " b	The	in the	D. T.	1
ally !	30 5		in a	1 895		hereby	
Geo. W. Harrison, State Printer, Atlanta.			*	2		hereby authoriz	
				200		4	100

POWER OF ATTORNEY. STATE OF GEORGIA, shu b. Wilson to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal this GD day of Africa

QUESTIONS FOR APPLICANT.
STATE OF GEORGIA,
Barlow County. County. John G. Wilson of said State and County destring to agail himself of the Pension Act approved December 15th, 1894, hereby abounts his proofs and after being duly sworm true answers to make to the following questions, deposes and answers as follows;
What is your name and where do you reside? (give State, County and post office) John le, Will and Millestone Bastone County Bernie. 2. Where did you reside on January 1st, 1894, and how long have you, been a resident of this State? William to Sa. Bastone County, What Saxla Mean. 3. When and where were you born? Stand him in 1024. And When the stands of the
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate Army 5. When and where did you enlist? May 18 9. Canton Churchen Contact. 6. In what company and regiment did you enlist? Company # 28 San Madement
7. How long did you remain in that company and regiment? Obout Eleven Months 8. If you were discharged from same and joined another, or if you were transferred to another, give an
account of such discharge or transfer? I thousand from 28 to Redgement.
9. For how long a period did you discharge regular military duty? about blesch Merille.
10. When, where and under what circumstances were you discharged from service of In april 1862. I was wounded at the Seven Price battle in Virginia and
was sent home I was never able to perform military duty afterwords
11. What is your present occupation? Mrud
12. How much can you earn per annum by your own exertions or labor? Nathing
13. What has been your occupation since 1865? Farming mutit lately
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? Swerty five dollars _ about \$ 1500
16. What is your present physical condition and how long have you been in such condition? I suffers from Abound accinced on the barriers. But he perform any words and may be the graphen any words. and very old and public and mobile to furform any words. O have been in this Pondition for these years from the fact of the person, viz. first, fage and
poverty," second "infirmity and poverty" or third "blindness and poverty"? infirmity + Percity
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? Auffering
from would received in army which disable me from work and
also. Almoraids, and age which relieber me mable to perform
any kind of work,
18. What property, effects or income do you possess? Wend
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? Arthury
20. In what County did you reside during those years and what property did you then return for taxation?
21. How were you supported during the years 1893 and 1894? My Children Supported one
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? about \$ 7500 Nand

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

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, & have a family, my Nife is living I have no numer children, I have I children all entired I consent remember their oges. Labor

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?	AFFIDAVIT OF PHYSICIANS.
Sworn to and subscribed before me this the day of Anal 1895. Ordinary Ordinary Ordinary Ordinary Ordinary County. County. A Mulann Ordinary Ordinary Ordinary Ordinary Ordinary County. A Mulann Ordinary Ordinary County. A Mulann Ordinary Ordinary County. A Mulann Ordinary A Mulann Ordinary Ordinary County. A Mulann Ordinary A Mulann Ordinary A Mulann Ordinary A Mulann A Mulann Sulling the Market of your reside? A Mulann A Mula	STATE OF GEORGIA, Starbor County. Personally came before me. Which falue M., both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully. It m. Applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows: Suffere mun Thum from an old wound about the two form Carliage becoming unflamed for Mynefencial of the brooks to comming they intally annable to make a living. Has also Chronice them.
2. Are you acquainted with Jb, Walson, the applicant, if so how long have you known him? Two Jeans of this State? Mear Allies Own Long, 3.9 Where does he reside, and how long has he been a resident of this State? Mear Allies Own Long, 4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know, this?. 5. When, where and in what company and regiment did he culist?	We further say on each 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 Other day of after 1895. Other was a support for himself, and that we have no interest in said pension being allowed. Sworn to and subscribed before me, this Other day of after 1895. Other day of after 1895. Other day of after 1895.
The soldier, and the time and circumstances of his discharge from the service? 8. What property, effects or income has the applicant? (Give your means of knowledge.)	ORDINARY'S CERTIFICATE, STATE OF GEORGIA, Borlow County.
8. What property, effects or income has the applicant? (Give your preans of knowledge.) Sol no property blace on the dame from What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? 10. What is the applicant's occupation and physical cogdition? The lives light work Masono oly groaf or a mane of two officers. 11. Is the applicant mable to support himself by Jabor of any sort, if yo, why?	Ordinary in and for said County, hereby certify that the upplicant. To have been been as a bona field resident of this State on the first day of January, 1894, and that the witnesses, viz: The 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.
11. Is the applicant mable to support himself by Jabor of any sort, if so, why? Miness he Cambalan Dalist on oblight 15 or 20 dol. 12. How was he supported during the years 1883 and 1894? I do not known as to 1873, In 1874. He this wife & Grand daughter common 228 the 13. What portion of his support for these two years was derived from his own labor or income? 14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? The solution of the support for the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? The solution of the support for the support for these two years was derived from his own labor or income?	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, Witness my hand and seal of office, this 200 day of Way 1895.
Swan to and subscribed before me, this the ff day of April 1895. When will define the subscribed before me, this the ff day of April 1895. When will do not apply the first the first day of April 1895.	Of County. County. SOTE. Before any questions are answered, the Ordinary shall awar applicant and the witnesses in the following words: "You shall true answers make to each of the questions saked of you, and the wridence you shall give will be the whole truth, so help you God."

POWER OF ATTORNEY. STATE OF GEORGIA, County. County. Sereby authorize. County. to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this_ Executed in presence of Gideon M. Hundrick Soldier's Pension RICHARD JOHNSON,

INDIGENT

1897.

POWED OF ATTORNE

			3 7					
St	ate of C	eorgia)				
	Sarler	-		. }				
	.21	5.612	lova		6	111		
d	10 =		e) in	7.	authorize &			
1	tom	nes	HS.	of /	artes	well	e go	
to re	eceive and	receipt fo	r the pension	on paid here	on and request	that he	remit same	to
-	n	-		b		18		
at/	earl	isace	le Ga		The second secon			
100		Section of the second		-			~	
, 4	O WIT	NESS W	HEREOF, I	have hereun	to set my hand	and seal,	this /	_
day o	fai	way		_1898. ()	Pars.	10		
		1		_ J.	Oxu	ilser	(L.	
	Exect	ted in pre	sence of		1 0 1	, ,	[14. 1	3.]
1)	more		The second	
	50	Ween	w_			100	d	
				(*		
1	tial.	Dai	170					
_/3	Lie,	Bai	te)			Ta .	
	Lie,	Bai	te					
	Tid.	Bai.	ce)				
	Ti L.	Bai	te					
	T. L.	Bai	(te					
		Bai.	i I		86	, •		ı
a		Bai	ioti,		1898.	Presiona,		
olled.)		Bai	de d	n l	1898.	N, of Presions,		TLANTA
Enrolled.)		KION	de de la contraction de la con	in in	JED	SON, sioner of Pensions,	7.00	PR. ATLANTA
dy Enrolled.)		KION	Ø.	ton	SSURD 1898.	HNSON, mmissioner of Pensions,	DED TO	ginter, atlanta
iready Enrolled.)		KION	D&.	Mone	T ISSURD	JOHNSON, Ommissioner of Presions,	HANDED TO ST	te printer, atlanta
3 Already Enrolled.)		KION	898.	Wellow.	ANT ISSUED	3D JOHNSON, Ommissions of Position,	NT HANDED TO	. OTATE PRINTER, ATLANTA
Acr of 15 DEC., 184. hose Already Enrolled.)		KION	808.	Inter	1 SSUED 1898.	JARD JOHNSON, Ommissions of Position,	янали падрво то	1180n, State printer, Atlanta
(For Those Already Enrolled.)		INDIGENT JIED'S DENGION	1898.	Collubra.	WARRANT ISSUED (2) 1898.	RICHARD JOHNSON, Commissions of Projects	WARRANT HAYDED TO	Harrison, State Printer, Atlanta

For Applicants Heretofore Allowed Pensions.

STATE OF GEO	PRGIA,
Wantow	County.
9	P111.0. /120.1.
personally appears	
and resident of said County a	o being duly sworn, says on oath that he is a <i>bona fide</i> citizen nd State, and has resided in said State continuously ever since
and resident of said County a	that he is Years old and
by occupation a feemon	
erate States (or of the State of	
and served for the term of	1 min 1/2 in Company For 28th Regiment of
La volume	that his physical condition is as
follows: Parcial p	Parolysis and old age
	1 ()
that his property consists of th	ne following items / Othing
	8
•	and anti-organization and anti-organization of the state
. I. Avel	and the second s
of the value of // 07477	Dollars, that by reason of his physical
condition and poverty he is un	able to support himself by his own exertion or labor, and
that he receives no pension bu	
Deponent desires to partic	cipate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory	thereof, and makes application for the pension to which he
	have heretofore as a resident of Barlow
county been allowed a pension	10
Sworn to and subscribed b	efore me, this, the
018 day of Ja	1897.
July mi	est mark
40000000	Ordinary.
STATE OF GEO!	RGIA
1190	· · · · · · · · · · · · · · · · · · ·
a ofine	ounty.
I, SW Ne	Ordinary of said County,
do certify that I am well acquai	
applicant in the foregoing off-d	the
in his said affidavit are true ar	avit, and am well satisfied that the statements made by him
and that he resides in this Cour	d I know he is the individual he represents himself to be
	nder my official signature and seal, this /8
1	1897.
Affix your	1 Level .
here.	To Hend Her
	and Darley
NOTE The blanks spaces must be sund	Ordinary County.

Note. The blanks spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County	}
County	
Personally appears L. O. M.	lown of Danlery
County, State of Georgia, who being duly swor	
and resident of said County and State, and h	as resided in said State continuously aver
since the bightay spean old	18 About 1 7/1
erate States (or of the State of	listed in the military service of the Confed-
and served for the term of min much in	during the war between the States,
La bal 1. of the term of Chim homes in	
Ho Vol Industry	; that his physical condition is as
follows: Paralysis of system	in
	- Landing and the state of the
that his property consists of the following items	more
of the value of nune	
condition and poverty he is unable to support	Dollars, that by reason of his physical
1894, and the acts amendatory thereof, and mak is entitled for the year 1898. I have heretofore county been allowed a pension for the year 189. Sworn to and subscribed before me, this, the day of Jany 1896.	as a resident of Warlow . Ris C. Xllvilani Missk
	Ordinary.
State of Georgia,	
Darfor County	
· Chill Danies	4
1, 00, 00, 100, 100	Ordinary of said County,
do certify that I am well acquainted with	6. Willow 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	he individual he represents himself to be
and that he resides in this County,	The second secon
Given under my official	signature and seal, this
day of fary	_1898
Affix your seal seed seed seed	Hunriels
Ordina	by Daylow County.
Norg.—The blank spaces must be filled.	County.

Wilson, John C. WHEN AND WHERE BORN? 1824 - Anderson Dist., Sguth Carolina ENLISTED WHEN AND WHERE? May 1861 - Canton, Ga. (Cherokee County) COMPANY AND REGIMENT? Co F 28th Ga.Regiment NAME OF CAPTAIN AND COLOUEL? WOUNDED? Seven Pines, Va. - April 1862 - Never able to do military service again. Still troubled from the affects of the wounds. Cannot perform any manual labor. CAPTURED, THEN AND THERE?

WHEN AND WHERE SURREDPERED? IF NOT PRESENT AT SURRENDER, WHERE MANE YOU? Previously discharged.

COUNTY.

DIED, WHEN AND WHERE?

F A Milom

1896

Bartow

P.O.

RELEASED.

BURIED,

WITNESSES.

D. b. born onding of Chorehod bonny

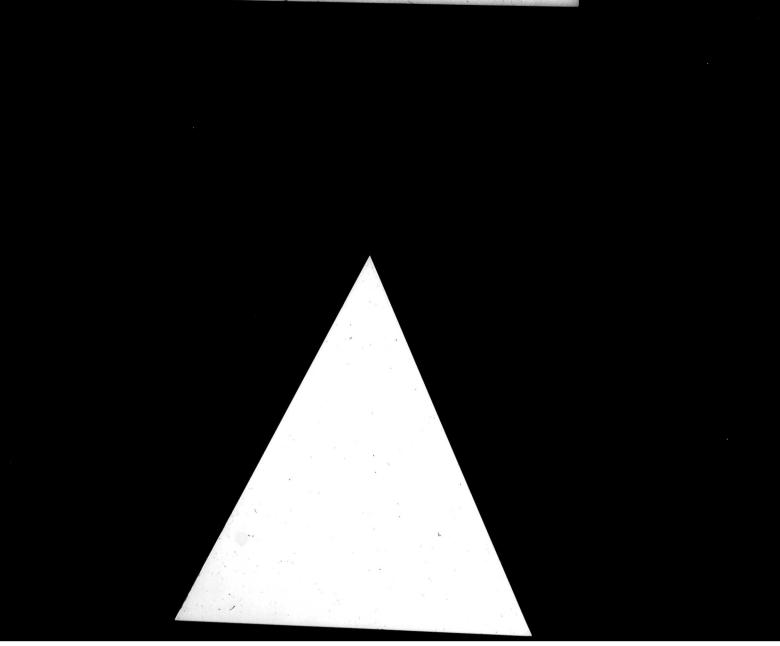
entalled to full faith and endat witness my hand and seal of office april 16 1855

Bundy is a notingen of this burnt and is of lowest everty connoler and that has statement is

Cheroked burnt & said burnt centife that f.M.

State of hoogin & J. D. l. borr and imany in y for

State of Georgia County of Chamters Before me Alben to Ordinary in and ofthe Said Hate and County personally Come 1. M. Bunta who on Doth Hays Steat John to, millow was a Tuesday of Company I 28th high of the Georgia Voluntury in the late was between the States, that intested in Said Company at the organization, of the Vancin June 1861, Went to Virginia with the Company, and Vetree with it with wounded and discharge in 1862 about tin or eleven months after his entertiment, and that afficient was a member Q Haid Company, and the Captuin of the Vaine that he has Thrown Sain John Constaying will for forty excess on more Sworn to before me this that day of Wiril 1894 as witness my hand and Teal of Cation De governonding J. M. Burty Cust Copy F 28 Kegt Gara of borokod, borne



Bartow, Country		1001 1001	
WIDOW'S			STATE OF CONTROL OF CO
Indigent Pension. 1901. Name Louis a Wilson		Sicisina	POWEI GEORGIA. A POLITICAL A POLITICAL A POLITICAL LITTE LITTE A POLITICAL A COLUMN A POLITICAL A COLUMN A POLITICAL A POLI
County Barton Widow of July Calham Alalom for			Ocunty. County. County. County. oppies. To has
JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDED TO	C C C C C C C C C C C C C C C C C C C		TORNEY.
1901.			Mustrick pusion allowed and that he pitationed mall 1901 Ulderra 1. 8.
Geo. W. Harrison, State Printer, Atlanta, Ga.	1		I. S.

of remit the	e same to me at Su	County to see Conty, to see County of County of County, County of County, County of County,	by his check or real to the same has the sam	pension allowed registered mail.	and that he
(SEAL)			ζ		
		7 m 3	174 m (fil.) (fi	a de la companya de l	
No	widows idigent Pension.	1901. me Gouisa Wilston may Barlow Colland	JOHN W. LINDSEY, Commissions of Persons	Warran Handed to	1901, the V. Martinos, state Printer, Albana, Ca.

Questions for Applicant.	
STATE OF GEORGIA,	
Barton County.	
of said State and County, destring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly	B
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General, 1900, hersely submits her proofs, and after being duly sworn true answers to make to the billowing questions, depose and answers as follows:	
Jo What is your name and where do you reside! (Give State, Countypand Post Office.)	
2 How long and since when have not the state of the state	
2. How Jong and since when have you have a resident of this State?	2
o. When and where were you born? Of Com. In the R. X I HI X	
When and where was your husband born—state his full name, and when were you and he married?	
The city of the city of the said of the sa	
fibilition of have hen mand over 60 fees	
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? 861-9 Big Shauty CoVI Covin Con	
war between the States 1861-9 Big Shauty Cott Colo On	
6. How long did your husband serve in said Company and Regiment?	
7. When and where did your husband's Company and Regiment surrender and was discharged?	
8. Was your husband present at the time and place when his Company and Regiment surrendered?	
9. If not with his command at surrender, state clearly and specifically where he was, when he left com-	
mand, for what cause, and by what asthority? He (USA Seriously Good Algert Botally Courses of its botter of the	
Dinos Ne 11000 sent hume of the herenson	
10. When and where did your husband die? OC 1816 1898 OF	
11. 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?	
Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty; If upon the first ground, safe how long you have been in such a condition that you cannot earn your aupport. If upon the ercond, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and phen and where you lost your girl.	
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 eight.	
hat has been your occupation since your husband's death?	
the design of the de duy hing	
14. How much can you earn gross, by your own exertion or labor? You have or possess, and its gross value	
Mane malle da at all	
1899-1900, and what dispositiop, if any, by sale or gift, have you made of the same? And nume, 17. In what counties did you regide in 1899 and 1900, and what property did you return for taxation?	
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?	
18. How have you been supported since death of humband, and especially for 1899 and 1900?	
- symmeting from wellow	
19. How much did you support cost for each of those years, and how much did you contribute by your own labor or income?	
20. What was your employment during 1899 and 1900—how much did you receive for each year?	
nutring hothing	
21. Have you a family? If so, who composes such family? Give their means of support. Have they	
any lands or other property? Have no foundy hing with some	
22. Have you ever made an application for pension before?	
23. How many applications have you made for a Pension, and under what class?	
Sworn to and subscribed before me this 204 P. her	
pay of march 190/ derising Wildon	
Two Hendricks Ordinary, mark	
of Barling County.	

Questions for Witnesses.	26. Is applicant able to earn a support at labor of any sort, if not why? The is letalisty
STATE OF GEORGIA,	more we am any thing of any calling
Barton County.	27 How was all supported for 1899 and 1900 1 Ar not many Description
	27. How was all supported for 1899 and 1909? I do not min beroom as The had to be an polent by serve backers h 28. How bluck did applicant contribute to the support for last (no years? Applicant
Fig has KokeShaw of said State and County, having	28. How much did applicant contribute to her support for last two years?
been pregented as a witness in support of the Application of Mrs. Linux Will vi	29. Give a full and complete statement of applicant's physical condition? The is old
for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the	and very infirm, very weak and buble
following questions, deposes and answers as follows:	30. What interest have you in the second of
following questions, deposes and answers as follows: 1. What is your name and where do you reside? The Many Collections of the shaw, 2. Are you acquainted with the applicant, Mrs. Lunion Wilson.	30. What interest have you in the recovery of this pension by the applicant?
2 Are you acquisited with the applicant Mrs Therein World Wilder	Sworn to and subscribed before me this 8.3 " his
If so, how long have you known her? L Knew her in 1861	go of hard 1901 Libhus & Cloke straw
3. Where does she reside, and how long and since when has she been a resident of this State?	
In Barton Cauncy by, And I have Inwe for	WHYSOTIONS Ordinary, might
4. When and where was she born? Was sever Truck	Baston County. Witnessee.
5. Were you ever acquainted with her hysband? I was _ in any	
6. Where did he reside in 1861? Cherofice County Ga . W Big Shouly	Affidavita of Dharit
7. When and to whom was he married? I have then were many die with a	Affidavits of Physicians.
8. When and where was he born? I plu not know	STATE OF GEORGIA,
9. How long have you known him Inger from fint in Any 1861	Darlow country.
10. When and where did the control of the war between the control of the control	Personally before me comes J. H. M. Gowan and
1861 A Company and regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and now do you know this the Regiment and ne enist and ne	
the States, and in what Company and Regiment did he enlist and how do you know this? I he head to the States, and in what Company and Regiment did he enlist and how do you know this? I he head to the head of th	physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs.
	applicant for a Pension under Act of 1900 and after
12. How long did he perform regular military duty? I do not Know exactly	such personal ofamination say that per thysical condition is this office is to fold the practices, and as totally unable to any and or amount of later of any sort.
I du Salistud he was a the annual 1 r 12 months	and not paralyons, and is tatally unable to
13. When and where was his Copspany and Regiment surrendered and discharged from service?	and any and or amount of labor of any sort
In NG-1865-	reduces returned and the second and
14. Were you with the command when it surrendered? I was not of feel the	and we have no interest in said pension if allowed.
the husband of applicant present?	2 /
I do not know. I do not	got of march 1901 If Mc Gaw an He
16. If was on following the le was: 00 I was an friom	
17. Where the office before this command for 16 mil mustbe	
By who authority he letter was reported among the	Baylow County.
By whole you have to be fired was coptoned and How do you know all the ? (State fully and openly.)	ORDINARY'S CERTIFICATE.
Sent hime dwas in the sorne and	
	STATE OF GEORGIA,
18. When and therey did for twelly on the?	Darlow, County
In When and there did to the will be the will the state of the state o	I, Guryan Te et al. Ordinary in and for said county, hereby
Where did he reside at his death and how long had he fleen a resident of Georgia at his death?	certify that the applicant, Mrs. Louiso Wilson resides in said
at Description culture, own as to ourse morning	
20 Do you of your own knowledge know that applicant in the lawful widow of NOTO frag true	county, and has been a bona fide resident of this State since Ratio day of day of any of the witnesses, Mr. Letter Ratio Ratio Share . Dro
Brimbledge, Only Brush of from aclieble Columbianes	A. M. Survey + J. A. Arroce are of trustworthy character, and that their statements
and the sound in sound in sound in the sound	
22. What property, effects or income has the applicant, if any, and how do you know this of your	I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same
own knowledge? None	was signed and subscribed.
	was signed and subscribed. I further certify that the tax digest of Barbor county shows that applicant
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she	returned for taxation in her own name in 1899 dollars worth
make of it? None	of property, and in 1900
The state of the s	Witness my hand and official seal, the 3 5 day of harek 190/
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?	(SEAL) Ordinary,
whom:	Darlow County
25 Whate to Want about a balance with the second se	
25. What pris applicant's physical condition and her changes and ability to earn a support? The	Norse—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You to solemnly swear that you will true answers make to seach of the questions asked of you, and the evidence you shall give will be the whole truth: So bely you God." 2. All idness are a function asked of thank spaces are insufficient.
- yangur	2. Additional silidayiis may be attached, if blank spaces are insufficient. 3. All silidayits must be made before Ordinary.

		-				
THE RESERVE OF THE PARTY OF THE	Javln	-	} .			
	1.					
11.	Lyus	a W	ud VI	v .	, 1	hereby authorize
'sw	Hind	neno	of	cortes	sull	Ju.
to receive		for the pension				remit same to
	Ally			hand and se	eal, this0	20
day of	any	1902		ner	1/0/11	/1 [L. S.]
· (/			. Worr.	Lax 10	1.00	/[L.S.]
1 . 17	ecuted in pres			mar	/C.	
20	Wil.	ron				
1					10	
1		e . · ·				
			Committee was a magnitude in which			***************************************
		Z	3	nty,	dons.	208
aid.			3	County + VM Regiment	JINDSEY, Commissioner of Pension ISSUED	7
Those Heretofore Paid 1902.	8 8 9 ON .	7'S PENS ending Dec. 31, 19	3	27	JOHN W. LINDSEY, Commissioner of	1 6
ogo N	الله الله] E	Was In	227	LINDSEY, Commissioner of	0 TO
F 0	10 0) — G	MINO WA	2 3	LI Com	AND HANDED TO
, D		South	1 1	Fro C	Z ≥	HOM
hos	No.	ear e	n y	34.13	HN A	2,1
To T	- 4	DOW'S PENSIC For year ending Dec. 31, 1902	3.0	100	2 3	2
30			43	idow of	2	9

POWER OF ATTORNEY.

9	I, S	August and reco	woll Oruc eipt for the	at	hereon, a	lis.	t that he	ereby auth	_
day	01	ac	Whereof, I h	1903.	o set my ha	and and see	this_	17 10 0 [1	. S.]
Paid.			NOIS	1908.	County, .	Regiment	of Pensions.	1908	
To Those Heretofore Paid	1903.	No. /0/3	WIDOW'S PEN	For year ending Dec. 31, 1903 Pain To Pain To Mea.	Confine.	Co C	WARRANT ISSUE	AND HANDEIN TO	GEO. W. HARRESON, STATE PRINTER ATLANTA.

STORE INDICATE AND ONE RESIDENCE OF CHARACTERS OF

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF CEORGE	A PERSONALLY COMES MRS.
STATE OF GEORGI	
County of Dartin	Joursa Wilson
who, being sworn, s	ays on oath, that she is a bona fide resident of said County of
Barton	
	State of Georgia, and that she has RESIDED in said State
continuously ever since the	
J. E. Wilso	who was a soldier in Company
commended by lost	Busto Regiment of 28 Ga
	iment on or about the month of Summer
	1011
186 / , and served in the Army up	That he died
in the = 18	day of 201 e 1899
He died in Bo	Now Caculy Ne was
drawing a pi	user
/	
he year 1838 or 1840-	Do not remark rocky 1/4
I have been allowed an Indigent	(170)
lounty, under Act 1900, for the year	1902, and now apply for the pension provided by law for the
ear ending December 31, 1902.	the penaltin provided by tak for the
	1
Sworn to and subscribed befor	1902 drusa x Wilson
hip 20 may or farry	1902 Sullsax Warson
Morting ck. Ord	inary. Post-Office mant
	4 WHenricks
State of Georgia,	
Barlyn co	unty. Ordinary of said County, certify that I am well
equainted with Mrs. Funda V	Wilton , who made the above affidavit and
m satisfied that the facts therein state	ed are true, and I know she is the individual she represents
ereself to be, and that she has continu	
ay of 18 9 G	A state since the
	9 - 0-
Given under my official signature a	nd seal, this the did juny of Jany 1902.
Official /	yw Hundrick
Seal.	Ordinary of Parting County

Vouchers and affidavits must bear date after January 1st, 1902.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

County of	ann	_5 _6	and william
who,	being sworn, says or	oath, that she is a l	oona fide resident of said Cou
000			that she has RESIDED in said
continuously ever since_	a small	- Chilel 4	com now here here
Lotin	C. W	lano	That she is the Wie
mo co of the	120	area management in all the first	who was a seldier in Con
Volunteers, that he enlist	tod in self-	Regimen	t of
186 , and served in t	he A	on or about the mor	
on the D	ne Army up to	The same	186 That h
0. II-	day of	Deenne	_18
The new	fre per	to cond	Old pours
Cetael Tu	6/11/00	/	1/1/1/
	7.000		
1 0 0 WW	- 1		
43	· C		
	The second of		
	Sunsain .	5.69.77	
	No.	100	
ordier, and that she has	never married since	deceased soldier, d	uring his service in the Army
I have been allowed	never married since I Krebby an Indigent pension	as a resident of	and that she became his wi
I have been allowed sounty, under Act 1900, for	an Indigent pension r the year 1903, and	as a resident of	and that she became his wi
I have been allowed ounty, under Act 1900, for par ending December 31,	an Indigent pension r the year 1903, and	as a resident of	uring his service in the Army, and that she became his wi
I have been allowed sounty, under Act 1900, for	an Indigent pension r the year 1903, and	as a resident of	and that she became his wi
I have been allowed ounty, under Act 1900, for par ending December 31,	an Indigent pension r the year 1903, and	his death aforesaid	and that she became his wi
I have been allowed county, under Act 1900, for ear ending December 31,	an Indigent pension r the year 1903, and 1903.	his death aforesaid	and that she became his wi
I have been allowed to punty, under Act 1900, for har ending December 31, Sworn to and subscription of the state of the s	an Indigent pension r the year 1903, and 1903. cibed before me,	as a resident of Conow apply for the	and that she became his wi
I have been allowed to punty, under Act 1900, for har ending December 31, Sworn to and subscription of the state of the s	an Indigent pension r the year 1903, and 1903. cibed before me,	as a resident of Conow apply for the	and that she became his wi
I have been allowed to punty, under Act 1900, for har ending December 31, Sworn to and subscription of the state of the s	an Indigent pension r the year 1903, and 1903. ribed before me, May 1903. d Ordinary.	his death aforesaid as a resident of least of le	pension provided by law for
I have been allowed to punty, under Act 1900, for our ending December 31, Sworn to and subscripts and the state of Georgia,	an Indigent pension r the year 1903, and 1903. ribed before me, 1903. ribed before me, 1903. County.	his death aforesaid as a resident of least of le	and that she became his wi
I have been allowed to unity, under Act 1900, for oar ending December 31, Sworn to and subscripts day of the Company of Georgia, and the Company of Georgia, the Company of Ge	an Indigent pension or the year 1903, and 1903. ribed before me, 1904.	as a resident of consultation of the consultat	pension provided by law for
I have been allowed to unity, under Act 1900, for ear ending December 31, Sworn to and subscripts day of the Georgia, the Georgia, the Georgia and	an Indigent pension r the year 1903, and 1903. ribed before me, 1903. ribed before me, 1903. County. County.	as a resident of common apply for the common apply	pension provided by law for A County, certify that I am we made the above affidavit as the individual she represent
I have been allowed to unity, under Act 1900, for ear ending December 31, Sworn to and subscripts day of the Georgia, the Georgia, the Georgia and	an Indigent pension r the year 1903, and 1903. ribed before me, 1903. ribed before me, 1903. County. County.	as a resident of common apply for the common apply	pension provided by law for A County, certify that I am we made the above affidavit as the individual she represent
I have been allowed to punty, under Act 1900, for our ending December 31, Sworn to and subscripts and the facts of Georgia, Carlotte of Georgia, Satisfied that the facts the self to be, and that she has	an Indigent pension r the year 1903, and 1903. ribed before me, 1903. ribed before me, 1903. County. County.	as a resident of common apply for the common apply	pension provided by law for A County, certify that I am we made the above affidavit as the individual she represent
I have been allowed to bunty, under Act 1900, for our ending December 31, Sworn to and subscripts and the facts of Georgia, the control of the facts the self to be, and that she have of the facts the self to be, and that she have of the facts the self to be, and that she have of the facts the self to be, and that she have of the facts the self to be, and that she have the facts the self to be, and that she have the facts the self to be, and that she have the facts the self to be, and that she have the facts the self to be, and that she have the facts the self to be, and that she have the facts the facts the self to be, and that she have the facts t	an Indigent pension or the year 1903, and 1903. Sibed before me, 1903. County. County. County.	as a resident of as a resident of as a resident of a resid	pension provided by law for A the land that a became his wi pension provided by law for A the land the above and avit a the individual she represented the
I have been allowed to the year 18 474 Mer I have been allowed to the year 18 474 Mer I have been allowed to the year ending December 31, Sworn to and subscripts and year of the year of	an Indigent pension or the year 1903, and 1903. Sibed before me, 1903. County. County. County.	as a resident of as a resident of as a resident of a resid	pension provided by law for A County, certify that I am we made the above affidavit as the individual she represent

STATE O		RGIA,	a Th	ilso	~_	-	y authorize
to receive	and recei	pt for the	pension paid	of hereon, and	*,	/	
In W	ITNESS WE	IEREOF, I ha	ve hereunto	at	d seal, this_	3	*
day of	Edg		1904.	euisa	horse.	lar	2_[L. S.]
Execu	ted in pre	sence of		2	nose		L. S.
for	NE	2000		· \ .	10		
1							
1							
		NO	F061	mty.	nent.	1061	
E PAID.		NOISI	ER 31. 1904	County,	Regiment.	1904,	
огоне раіо.	9	PENSION	CEMBER 31, 1904.	County,	. F	SUED 1	Figure Allafa.
ERETOFORE PAID.	818	S PENSION	NG DECEMBER 31, 1904	or County,	. F	ISSUED 1	So Sure Preser, Andre
TO THOSE HERETOFORE PAID. 1904.	No. 813	DIGERATION'S PENSION	FOR YEAR ENDING DECEMBER 31, 1904 PAID THE PAID THE	aston County,	. F	SUED 1	C. Harrison, State Printer, Adulta.

	ARTES TO		POV	VER	OF A	ATTC	RNE	(.		
si	PATE O	re	w		COUNTY.	. ,	,			•
to	w	Yes	Dro	e pensi	of paid	Юол heregn, a	des A	t that he	emit sa	2
da	In y of	Vitness Un	Whereof,	I have	hereunto	set my		seal, this	28	IA
6	Exe	cuted i	n presence	of	L	nusu	ho X lor	lon	- [L. s.]
	en den een saan	4			111					
				1		. 3				
3)	1 1		<u> </u>	, ,	21	. ·		s. II		.11
fact.			NOISN	31, 1905.	Mon	County	Regiment SEY,	OE 1905		0. Attacts, c Penytes,
To Those Heretofore Paid	905	170	S PEN	For year ending Dec. 31, 1905	John M	Silve	w. Lindsey	WARRANT ISSUED	HANDED TO	of, Makagis, roe Stati
To Those	15	No.		For year en	" Sen	S OM OF S	JOHN	WAR	AND (THE PRANCIN PRO GEO. W. HAN US
			3		R,	Wid.	8		10	1

Muster