

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA

PERSONALLY COMES MRS.

County of BartowLouisa Wilson

who, being sworn, says on oath that she is a bona fide resident of said County of Bartow State of Georgia, and that she has RESIDED in said State continuously ever since birth about 20 years. That she is the Widow of J. C. Wilson who was a soldier in Company 28th of the 9th Regiment of July

Volunteers, that he enlisted in said regiment on or about the month of June 1861, and served in the Army up to June 1862. That he died on the 18 day of Decr 1891

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1840 or thereabout

I have been allowed an Indigent pension as a resident of Bartow County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 5 day of July 1904. Louisa Wilson G. W. Hendricks Ordinary. Post Office Delistown Ga

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

Given under my official signature and seal, this 5<sup>th</sup> day of Feb 1904.

G. W. Hendricks  
Ordinary of Bartow County

Official Seal

NOTE.—All blanks must be filled.  
Vouchers and Affidavits must bear date after January 1st, 1904.

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA

PERSONALLY COMES MRS.

County of BartowLouisa Wilson

who, being sworn says on oath, that she is a bona fide resident of said County of Bartow State of Georgia, and that she has RESIDED in said State continuously ever since all her life. That she is the Widow of J. C. Wilson who was a soldier in Company 28 of the 9th Regiment of Ga

Volunteers, that he enlisted in said regiment on or about the month of June 1861, and served in the Army up to last of 7<sup>th</sup> month 1863. That he died on the 11 day of 18 1891

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

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

Sworn to and subscribed before me, this 28 day of Jan 1905. Louisa Wilson G. W. Hendricks Ordinary. Post Office Delistown Ga

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

Given under my official signature and seal, this 28 day of Jan 1905.

Official Seal

G. W. Hendricks  
Ordinary of Bartow County

NOTE.—All blanks must be filled.  
Vouchers and Affidavits must bear date after January 1st, 1905.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barton COUNTY, }  
 I, Louisa Wilson, hereby authorize  
G. W. Hendricks of Cartersville Ga  
 to receive and receipt for the pension paid hereon, and request that he remit same to  
me at Cartersville Ga  
 In Witness Whereof, I have hereunto set my hand and seal, this 17th  
 day of Jan, 1906.  
Louisa Wilson [L. S.]

Executed in presence of  
J. D. Johnson 20  
881st Dist G.M.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barton COUNTY, }  
 I, Louisa Wilson, hereby authorize  
G. W. Hendricks of Cartersville Ga  
 to receive and receipt for the pension paid hereon, and request that he remit same to  
me at Cartersville Ga  
 In Witness Whereof, I have hereunto set my hand and seal, this 17th  
 day of Jan, 1907.  
Louisa Wilson [L. S.]

Executed in presence of  
M. C. Wilson  
G. R.

1906.

No. 646

INDIGENT  
 WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO

Mrs. Louisa Wilson

OF

Barton

County,

Widow of

Co. H. 28th Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

JAN 20 1906.

AND HANDLED TO

C

THE FARMERS' PRINTING AND PUBLISHING CO., ATLANTA, GA.

1907.

No. 1077

INDIGENT  
 WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mrs. Louisa Wilson

OF

Barton

County,

Widow of

Co. H. 28th Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

FEB 4 1907.

AND HANDLED TO

C

THE FARMERS' PRINTING AND PUBLISHING CO., ATLANTA, GA.



## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Bartow

PERSONALLY COMES Mrs.

Louisa Wilson

who, being sworn says on oath, that she is a bona fide resident of said County of Bartow State of Georgia, and that she has resided in said State continuously ever since birth That she is the Widow of

J. C. Wilson who was a soldier in Company

H of the 28<sup>th</sup> Regiment of 4<sup>th</sup>

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

1861, and served in the Army up to begin of Winter That he died on

the Dec day of 1897

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

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

Sworn to and subscribed before me

this 17 day of Jan 1906.J. D. Johnson J.P.Post Office Mark

State of Georgia,

County of BartowI, G. W. Hendricks

Ordinary of said County, certify that I am well acquainted with Mrs. Louisa Wilson who made the above affidavit, and

am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the

day of 18

Given under my official signature and seal, this the 17 day of Jan 1906.

Official Seal

Ordinary of Bartow County.

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

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Bartow

PERSONALLY COMES Mrs.

Louisa Wilson

who, being sworn says on oath, that she is a bona fide resident of said County of Bartow State of Georgia, and that she has resided in said State

continuously ever since birth That she is the Widow of

John C. Wilson who was a soldier in Company

H of the 28 Regiment of 4<sup>th</sup>

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

1861, and served in the Army up to 1893 That he died on

the 18 day of Dec 1897

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

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

Sworn to and subscribed before me

this 17 day of Jan 1907.W. C. Wilson J.P.Post Office Mark

State of Georgia,

County of BartowI, G. W. Hendricks

Ordinary of said County, certify that I am well acquainted with Mrs. Louisa Wilson who made the above affidavit, and

am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the

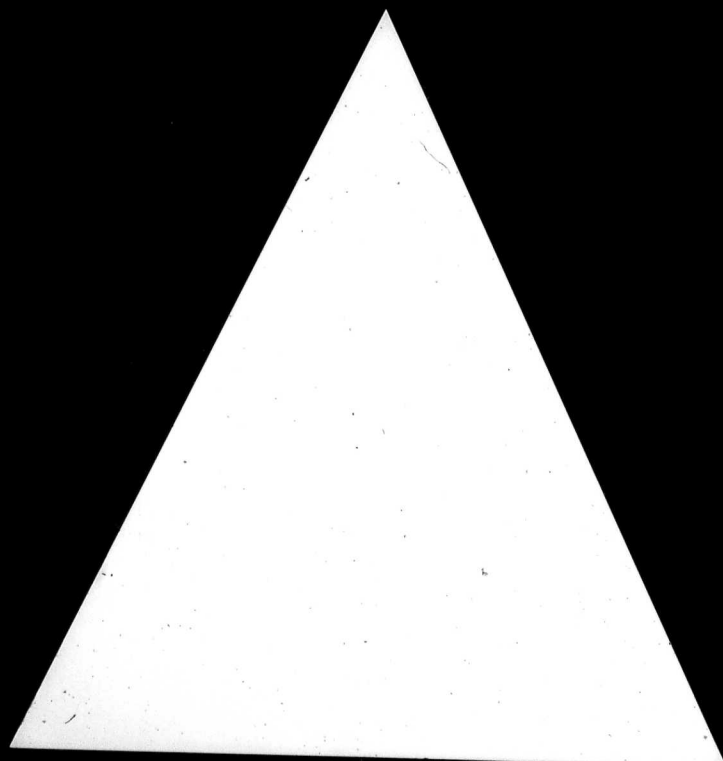
day of 18

Given under my official signature and seal, this the 17 day of Jan 1907.

Official Seal

Ordinary of Bartow County.

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



## POWER OF ATTORNEY.

STATE OF GEORGIA, }

Barlow } COUNTY.

Know all Men by These Presents, That I,

County, in said State, do hereby appoint

of

my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia 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 17<sup>th</sup> day of April, 1895.

Executed in the presence of us

[u.s.]

A. P. R. n. e.

G. R. C. C. C. C.

## DIRECTIONS.

If allowed, send amount by \_\_\_\_\_, and oblige.

to me

## Widow's Pension.

For year ending February 15, 1895.

PAID TO

Mrs. M. H. Wilson

OF  
Barlow County.  
Widow of N. H. Wilson

Warrant Issued,

5<sup>th</sup> Nov 1895.

AND HANDED TO

att

ATLANTA, GA.  
Geo. W. Harrison, State Printer  
(Franklin Publishing House,  
25-27 Ivy Street.)

No. 4033

1895.

Approved by the  
Rich. Johnson  
Sec

# POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA, )  
Barlow ) COUNTY }

Know all Men by These Presents, That I,

Count, in said State, do hereby appoint

of Barlow my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia 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 17<sup>th</sup> day of April, 1895.

Executed in the presence of us

E. P. Price  
Geo. B. Elbad

## DIRECTIONS.

I allowed, send amount by \_\_\_\_\_ to me at \_\_\_\_\_, and oblige.

# Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,

County of Barlow In person came before me the undersigned Ordinary

Mrs. M. F. Wilson who being sworn according to law, says under oath that she is the widow of N. H. Wilson, who was a soldier in

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

1<sup>st</sup> Regiment of Georgia Volunteers; that he enlisted in said

service on or about the day of Nov, 186B, and was in the

Confederate Army up to day of Dec, 186H. That while in the

Army, he was on the day of Dec, 186H. (See Note No. 1)

He was thrown from his horse

while in line of service in Louisiana

1864 from which wound he died

in 1866 from said wound

that she the said M. F. Wilson was

born and raised in Oglethorpe County Ga

was married to N. H. Wilson of same

County Ga Sept 1<sup>st</sup> 1842, moved from Ga

to Louisiana in fall of 1859; that in

1868 she came back to Barlow County

Georgia and has lived near Adamsville in

said Barlow County ever since

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 1<sup>st</sup> day of Sept, 1842, and that she has resided in Georgia continuously since the

day of December, 1868; 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, 1895, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this the 17<sup>th</sup> day of Sept, 1895,

M. F. Wilson Ordinary.

POST OFFICE, Adamsville, Ga

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

Widow's Pension.

For year ending February 15, 1895.

PAID TO

M. F. Wilson

OF

Barlow County.

Warrant Issued,

5<sup>th</sup> Mar 1895.

AND HANDED TO

at

Geo. W. Ketchum, Clerk of Court, Barlow County, Georgia.

No. 4033

1895.

Witnessed by M. F. Wilson  
Barlow County  
Rich Brown



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

STATE OF GEORGIA, )

County of Barlow )I, G. W. Hendricks, Ordinaryin and for said County of Barlow

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 20th day of Sept, 1890.

[SEAL]

## NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

No pension can be paid for previous years.

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.

If the husband died since the war testimony by physicians must be produced.

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.

Widows whose husbands enlisted from another State or served in other Commands than Georgia Commands are not entitled to pensions unless they were born in Georgia and can make proof of that fact.

By order of the Governor.

RICH'D JOHNSON,

Sec. Ex. Department.

## Affidavit for Three Witnesses.

STATE OF GEORGIA, )

County of Poole )

In person came before me, the undersigned Ordinary in and

for said County, witnesses

J. A. Wilson

and

(each known to said Attesting Officer as truthful,

reliable and reputable citizens), who severally say under oath, that, FROM THEIR OWN PERSONAL KNOW-

EDGE, Mrs. Mortis B. Wilson, of the County of BarlowState of Georgia, is the widow of Nicholas H. Wilson who was a soldier inCompany A of the 3rd Regiment of Emancipated Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or

about the day of November, 1863.

That while in said service or by

reason of said service in the Army, he lost his life as follows: That some time in the Springor early Summer of 1864 while on a forced march for the purposeof cutting off & capturing the Union forces before they reached theirgun boats on the Mississippi River near Water proof in theState of Louisiana. Said Soldier was first and thenborn in such a manner as to receive & rupture him insuch a manner as to render him perfectly disabled evenafterwards to perform military or other service, that hecontinued to suffer and died some time in October1865 or 1866. When he died from said wound

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

That I J. A. Wilson being a son of said Soldier was with him  
in the same Company when he was wounded until he was  
discharged which occurred about two months after receiving  
the injury & that he was with him from the day of the war until his death

We further swear that Mrs. Mortis B. Wilson was the wife of said

soldier during the service, and that she has not intermarried since his death, and that she resides in

Barlow County of the State of Georgia.

We further swear that we have no personal interest in the pension asked for.

Sworn to and subscribed before me, this, the

20 day of July, 1895.J. A. Wilson

Ordinary.

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

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

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

Form No. 9.

STATE OF GEORGIA, County of Bartow  
G.W. Hendricks Ordinary in and for said County of  
Bartow State of Georgia, hereby certify that I am acquainted with Mrs.  
M. F. Wilson 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 \_\_\_\_\_  
deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this  
5<sup>th</sup> day of April 1896.  
G.W. Hendricks Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Bartow County.  
I, M. F. Wilson hereby authorize G.W. Hendricks  
of Adairsville to receive and receipt for the pension paid hereon and request  
that he remit same to me at Adairsville Ga.  
In Witness Whereof, I have hereunto set my hand and seal, this  
18<sup>th</sup> day of Jan 1896.

M. F. Wilson [L.S.]  
Executed in the presence of  
G. H. Bitts  
L. J. Wilson

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

Form No. 9.

STATE OF GEORGIA, County of Bartow  
G.W. Hendricks Ordinary in and for said County of  
Bartow State of Georgia, hereby certify that I am acquainted with Mrs.  
M. F. Wilson 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 M. F. Wilson  
deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this  
13<sup>th</sup> day of Jan 1897.  
G.W. Hendricks Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Bartow County.  
I, M. F. Wilson hereby authorize G.W. Hendricks  
of Adairsville Ga to receive and receipt for the pension paid hereon and request  
that he remit same to me at Adairsville Ga  
In Witness Whereof, I have hereunto set my hand and seal, this 23<sup>rd</sup>  
day of Jan 1897.

M. F. Wilson [L.S.]  
Executed in the presence of  
G. H. Bitts  
L. J. Wilson

No. 2937  
1896.

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

M. F. Wilson

OF

Bartow County.

Widow of M. F. Wilson

WARRANT ISSUED

1896.

AND HAND TO

G. H. Bitts

Done at Bartow, this 18<sup>th</sup> day of Jan, 1896.

No. 2238  
1897.

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

M. F. Wilson

OF

Bartow County.

Widow of M. F. Wilson

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1897.

AND HAND TO

G. H. Bitts

Done at Bartow, this 18<sup>th</sup> day of Jan, 1897.

Wilson M. F.  
Bartow Ga.

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Barlow

Personally Comes Mrs.

M. F. Wilson

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

Barlow State of Georgia, and that she has resided in said State  
 continuously ever since all my life except from 1857 to 1868  
 18 68 That she is the Widow of

N. H. Wilson who was a Soldier in Company  
 of the Louisiana Regiment of October

Volunteers, that he enlisted in said regiment on or about the month of October  
 1863 and served in the Army up to fall 1864 That he lost his  
 life on the fall day of fall 1864 (State here

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

He was  
thrown from his horse in a force march  
to put off the Yankee forces in the  
State of Louisiana from which wound  
he died Oct. 3rd 1866

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 1862,  
 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not  
 lived in any other State or locality since that date. I have been allowed a pension as a resident of  
Barlow County for the year ending February 15th, 1895, and now apply for  
 the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

day of Jan 1896.

Ordinary.

Post-office

M. F. Wilson

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Barlow

Personally Comes Mrs.

M. F. Wilson

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

Barlow State of Georgia, and that she has resided in said State  
 continuously ever since fall 1869 That she is the Widow of

N. H. Wilson who was a Soldier in Company  
F of the 3rd Regiment of Louisiana

Volunteers, that enlisted in said regiment on or about the month of October  
 1863 and served in the Army up to Aug 1865 That he lost his  
 life on the 3rd day of Sept 1866 (State here

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

He died  
in Louisiana in Sept 1866 from  
wounds received in the army

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,  
 and that she has never married since his death aforesaid, that she became his wife in the year 1862,  
 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not  
 lived in any other State or locality since that date. I have been allowed a pension as a resident of  
Barlow County for the year ending February 15th, 1896, and now apply for  
 the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

day of Jan 1897.

Ordinary.

Post-office

M. F. Wilson

# POWER OF ATTORNEY.

State of Georgia, Barlow County.  
 I, M. F. Wilson hereby authorize G. W. Hendricks  
 of Adairsville Ga to receive and receipt for the pension paid hereon and request  
 that he remit same to me at Adairsville Ga  
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 7<sup>th</sup>  
 day of January 1898.  
M. F. Wilson [L. S.]

Executed in the presence of

Jas R Ward  
R. G. Woodall

# POWER OF ATTORNEY.

State of Georgia, Barlow County.  
 I, Mestis J. Wilson hereby authorize  
M. F. Hendricks of Barlow county Ga  
 to receive and receipt for the pension paid hereon and request that he remit same to  
me at Adairsville Ga  
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12  
 day of Jan 1899. 12 7 1899 [L. S.]

Executed in presence of

J. A. Price J. A.

Wilson, Mrs. M. F.  
Barlow County  
 For Those Heretofore Paid.  
**1898.**  
 NO. 1115  
**WIDOW'S PENSION,**  
 For year ending February 15th, 1898.  
Mrs. M. F. Wilson  
Barlow County,  
 Widow of M. F. Wilson  
 RICHARD JOHNSON,  
 Commissioner of Pensions.  
**WARRANT ISSUED**  
1898  
 AND HANDLED TO  
Jan  
 GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Wilson, Mrs. M. F.  
Barlow County  
 For Those Heretofore Paid.  
**1899.**  
 NO. 2275-  
**WIDOW'S PENSION,**  
 For year ending February 15th, 1899.  
Mrs. M. F. Wilson  
Barlow County,  
 Widow of M. F. Wilson  
 RICHARD JOHNSON,  
 Commissioner of Pensions.  
**WARRANT ISSUED**  
2/1 1899.  
 AND HANDLED TO  
E. W. Hendricks  
 GEO. W. HARRISON, STATE PRINTER, ATLANTA.



# For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,  
County of Barlow

Personally Comes Mrs.

M. F. Wilson

who, being sworn, says on oath, that she is a bona fide resident of said county of Barlow State of Georgia, and that she has resided in said State continuously ever since birth except 9 yrs 1842 That she is the Widow of N. H. Wilson who was a Soldier in Company F of the 3rd Regiment of Louisiana Cavalry Volunteers, that he enlisted in said regiment on or about the month of fall

1863 and served in the Army up to the winter 1864 That he lost his life on the 3rd day of October 1866 (State here

full particulars of the husband's death, when, where and from what cause.) he died of an injury received in the army. He died at Louisiana 3rd day of October 1866

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1842.

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

Sworn to and subscribed before me, this 13 day of January 1898.

M. F. Wilson  
Post-Office work

State of Georgia,

Barlow County.

G. W. Hendricks  
Ordinary of said County, certify that I am well acquainted

with Mrs. M. F. Wilson who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 18 day of January 1898.

Given under my official signature and seal this the 18 day of January 1898.

G. W. Hendricks  
Ordinary of Barlow County.

Official Seal.

# For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,  
County of Barlow

Personally Comes Mrs.

M. F. Wilson

who, being sworn, says on oath, that she is a bona fide resident of said county of Barlow State of Georgia, and that she has resided in said State continuously ever since year 1865 That she is the Widow of N. H. Wilson who was a soldier in Company F of the 4th Regiment of Mississippi Cavalry

Volunteers, that he enlisted in said regiment on or about the month of September 1862 and served in the Army up to 1 1/2 years 1866 That he lost his life on the 3rd day of October 1866 (State here

full particulars of the husband's death, when, where and from what cause.) He was killed by enemy's fire while in service

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1865.

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

Sworn to and subscribed before me, this 12 day of January 1899.

G. W. Hendricks  
Post-Office Adonville Ga

State of Georgia,

Barlow County.

G. W. Hendricks  
Ordinary of said County, certify that I am well acquainted

with Mrs. M. F. Wilson who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 18 day of January 1899.

Given under my official signature and seal this the 24 day of January 1899.

G. W. Hendricks  
Ordinary of Barlow County.

Official Seal.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County,

I, M. F. Wilson hereby authorize  
M. F. Wilson of Barlow County Ga  
 to receive and receipt for the pension paid hereon and request that he remit same to  
M. F. Wilson at Adrianville

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9  
 day of Nov 1900.

M. F. Wilson [L. S.]

Executed in presence of

J. A. Price

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County,

I, M. F. Wilson hereby authorize  
M. F. Wilson of Barlowville Ga  
 to receive and receipt for the pension paid hereon and request that he remit same to  
me at Barlowville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12  
 day of Jan 1901.

M. F. Wilson [L. S.]

Executed in presence of

J. F. McElreath

mak

Wilson, M. F. (nu)  
Barlow, County  
To Those Heretofore Paid

1900.

NO. 2275-

WIDOW'S PENSION,

For year ending February 15th, 1900.

M. F. Wilson  
 of Barlow County,  
 Widow of M. F. Wilson

JNO. W. LINDSEY,  
 Commissioner of Pensions.

WARRANT ISSUED

Jan 19 1900,

AND HANDED TO

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

Wilson, M. F. (nu)  
Barlow, County  
To Those Heretofore Paid.

1901.

No. 1063

WIDOW'S PENSION,

For year ending February 15th, 1901.

M. F. Wilson  
 of Barlow County,  
 Widow of M. F. Wilson

JOHN W. LINDSEY,  
 Commissioner of Pensions.

WARRANT ISSUED

11 29 1901,

AND HANDED TO

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

STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Bartow

Personally Comes Mrs.

M. F. Wilson

Bartow 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 December 1868. That she is the Widow of

M. F. Wilson who was a soldier in Company  
F of the 3rd Regiment of Georgia

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

1863 and served in the Army up to 1864. That he lost his  
life on the 3rd day of Sept 1865. (State here

particulars of the husband's death, when, where and from what cause) from an  
injury from a horse while on  
a mule track

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that  
she has never married since his death aforesaid, and that she became his wife in the year 1842.

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

Sworn to and subscribed before me, this  
9 day of Nov 1900.  
G. W. Hendricks Ordinary.

M. F. Wilson  
Post Office

State of Georgia,

County of BartowG. W. Hendricks

Ordinary of said County, certify that I am well acquainted

with Mrs. M. F. Wilson, who made the above affidavit and am satis-  
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she  
has continuously resided in this State since the 18 day of 18.

Given under my official signature and seal, this 9 day of Jan 1900.

Official  
Seal.

G. W. Hendricks  
Ordinary of Bartow County.

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Bartow

Personally Comes Mrs.

M. F. Wilson

Bartow 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 1868. That she is the Widow of

M. F. Wilson who was a soldier in Company  
F of the 3rd Regiment of La

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

1863 and served in the Army up to 1864. That he lost his

life on the 3rd day of Sept 1866. (State here

particulars of the husband's death, when, where and from what cause) He died  
of a wound he received in  
the army, by being thrown from  
a horse

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that  
she has never married since his death aforesaid, and that she became his wife in the year 1842.

I have been allowed a pension as a resident of Bartow County for the year ending  
February 15th, 190, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this  
12 day of Jan 1901.  
G. W. Hendricks Ordinary.

M. F. Wilson  
Post Office mask

State of Georgia,

County of BartowG. W. Hendricks

Ordinary of said County, certify that I am well acquainted

with Mrs. M. F. Wilson, who made the above affidavit and am satisfied  
that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she  
has continuously resided in this State since the 18 day of 18.

Given under my official signature and seal, this 12 day of Jan 1901.

Official  
Seal.

G. W. Hendricks  
Ordinary of Bartow County.

BOME OF VILLOMEX

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, M. F. Wilson, hereby authorize  
G. W. Hendricks of Cartersville Ga  
 to receive and receipt for the pension paid hereon, and request that he remit same to  
me at Adairsville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 4

day of Jan 1902.

M. F. Wilson [L. S.]

Executed in presence of

J. A. Price

To Those Heretofore Paid.

1902.

No. 1851

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO  
Mrs. M. F. Wilson

OF  
Barlow County.

Widow of M. F. Wilson

Co. 4th Regiment Inf

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

19 1902

AND HANDLED TO

only

DEPT. OF WAR, BUREAU OF PENSIONS, WASHINGTON, D. C.

Wilson M. F. Mrs.  
Barlow County

To Those Heretofore Paid.

1903.

No. 1745

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. M. F. Wilson

OF  
Barlow County.

Widow of M. F. Wilson

Co. 4 Regiment Inf

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

30 1903

AND HANDLED TO

only

DEPT. OF WAR, BUREAU OF PENSIONS, WASHINGTON, D. C.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, M. F. Wilson, hereby authorize  
G. W. Hendricks of Cartersville Ga  
 to receive and receipt for the pension paid hereon, and request that he remit same to  
me at Cartersville Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 10

day of Jan 1903.

M. F. Wilson [L. S.]

Executed in presence of

J. J. Bray

STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS



## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Bartow

PERSONALLY COMES MRS.

M. F. Wilson

Bartow 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 the 1868. That she is the Widow of

N. H. Wilson

who was a soldier in Company

7 of the McNielRegiment of Hopewell Brigade

Volunteers, that he enlisted in said regiment on or about the month of fall  
1863, and served in the Army up to Sept 1864. That he lost his  
life on the 3 day of October 1864. (State here

particulars of the husband's death, when, where and from what cause.) From a wound  
received from the heavy falling of  
him while on duty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a  
soldier, and that she has never married since his death aforesaid, and that she became his wife in  
the year 1842.

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

Sworn to and subscribed before me,

this 4 day of Nov 1902.G. W. Hendricks, Ordinary.

Post-Office

Adamsville Ga

State of Georgia,

County of Bartow

Ordinary of said County, certify that I am well

acquainted with Mrs. M. F. Wilson, who made the above affidavit and  
am satisfied that the facts therein stated are true, and I know she is the individual she represents  
herself to be, and that she has continuously resided in this State since the Dec 23  
day of December 1868.

Given under my official signature and seal, this the 4 day of Jan 1902.Official  
Seal.

G. W. Hendricks  
Ordinary of Bartow County.

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

## For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Bartow

PERSONALLY COMES MRS.

M. F. Wilson

Bartow 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 1868. That she is the Widow of

N. H. Wilson

who was a soldier in Company

7 of the 3rdRegiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of Oct  
1863, and served in the Army up to Sept 1864. That he lost his  
life on the 3rd day of Oct 1866. (State here

particulars of the husband's death, when, where and from what cause.) He died of  
injuries received in its army from the  
fall of a horse in a charge

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a  
soldier, and that she has never married since his death aforesaid, and that she became his wife in  
the year 1842.

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

Sworn to and subscribed before me,

this 10 day of Jan 1903.J. J. Briggs, Ordinary.

Post-Office

M. F. Wilson

State of Georgia,

County of Bartow

Ordinary of said County, certify that I am well

acquainted with Mrs. M. F. Wilson, who made the above affidavit and  
am satisfied that the facts therein stated are true, and I know she is the individual she represents  
herself to be, and that she has continuously resided in this State since the  
day of 18.

Given under my official signature and seal, this the 10th day of Jan 1903.Official  
Seal.

G. W. Hendricks  
Ordinary of Bartow County.

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

State of Louisiana } Before me Allen Parkdale  
 Parish of Claiborne } Judge of the 3d Dist. Court  
 of La. holding sessions in and for Clai-  
 borne Parish La this day appeared O. H. P.  
 Dawson who being by me duly sworn  
 says that he knew Nicholas H. Wilson  
 who was a soldier in Co F 3d La Regt  
 Cavalry that he enlisted in the service  
 of Confederate States in Nov 1863. Affiant  
 further swears that some time in the  
 spring or early summer of 1864 while in  
 said service and on a forced march  
 the driver of said Nicholas H. Wilson  
 fell & threw him thru causing an in-  
 jury and rupture of said soldier  
 of such character as to render him unfit  
 for further service & on account of said  
 injury he was discharged from service.  
 Affiant swears that he was with said  
 Nicholas H. Wilson when he received  
 the fall said with him until after  
 the doctor examined and dressed his  
 wounds. Since said Wilson was dis-  
 charged from service affiant has never  
 seen him but is satisfied from  
 general rumor that he is dead

Sworn to and subscribed (O. H. P. Dawson)  
 before me by O. H. P. Dawson to me well known  
 as a respectable citizen of Claiborne Parish La  
 on this 1st day of August 1864. Nelson Parkdale  
 Judge 3d Dist of La

State of Louisiana } Before me Allen Parkdale  
 Parish of Claiborne } Judge of the 3d Dist Court  
 La. holding sessions in and for Claiborne Parish  
 La. this day appeared Wm. M. Alexander, who  
 being by me duly sworn says, that he knew Nicholas  
 H. Wilson who was a soldier in Co. F  
 3d La Regt. Cavalry, that he enlisted in the service  
 of Confederate States in Nov. 1863. Affiant  
 further swears that some time in the spring or  
 early summer of 1864 while on said service on  
 a forced march, the horse of said Nicholas H.  
 Wilson fell & threw him, thereby causing an  
 injury and rupture of said soldier of such  
 character as to render him unfit for  
 further service & on account of said injury  
 he was discharged from service. Since  
 which time Affiant has never seen  
 him but is satisfied from general rumor  
 that he is dead.

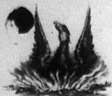
Sworn to & subscribed

before me on Aug 26 1864

Wm. M. Alexander

I certify That the  
 affiant is a reputable  
 citizen of Claiborne  
 Parish La and worthy  
 of belief

Allen Parkdale  
 Judge 3d Dist of La



CLARK M. FRANKS,  
RESIDENT AGENT.

# PHOENIX INSURANCE COMPANY,

OF HARTFORD, CONN.

Adairsville, Ga., 1895.

Georgia Barlow County.

I, J. J. Barclay, personally appeared before me, a Notary Public in and for this County, L. I. Wilson, J. A. E. Wilson and L. A. Alexander, who upon oath says that N. H. Wilson was the husband of M. R. Wilson, and that the said N. H. Wilson went into the Confederate Army in 1863, and was wounded in said War while on duty. He was wounded in said war by a horse falling with him. He was never able to serve after said fall. He was discharged and came home in September 1864, and was never well again, and died on the 3<sup>rd</sup> day of October 1866, and to the best of our knowledge and belief he died of said wound. Our knowledge of knowing of the above stated facts is being with him from his return home from the war in 1864, until his death in 1866. Given to before me, L. V. Wilson  
This 29<sup>th</sup> day of Oct. 1895.  
J. M. F. M. A. P.

L. V. Alexander,  
A. E. Wilson

Georgia  
Oglethorpe County } Personally appears, C. J. Sandrum,  
J. J. Barclay, and Thos. B. Mays,  
who on oath say that they are acquainted with Mrs. Merton F. Wilson, the widow of Nicholas H. Wilson, and that she is the widow of said Wilson, and has never married since his death, and that she was born in Oglethorpe County Ga. on or about the 14<sup>th</sup> day July 1822, that she married in Georgia before this war between the States, that she and her husband removed to the State of Louisiana also before the war, that she is now a citizen of Barlow County Ga.

we know the above facts by reason of living well acquainted with her family, and with her during her childhood, and have known of her movements ever since -  
Given to and subscribed before me, Oct. 23<sup>rd</sup> 1895.  
J. J. Barclay  
Ordinary O.C.

C. J. Sandrum  
J. J. Barclay  
Thos. B. Mays

Georgia  
Oglethorpe County } I hereby certify that the above named witnesses, C. J. Sandrum, J. J. Barclay and Thos. B. Mays, are citizens of said County, well known to me, and that they are credible gentlemen, whose statements are worthy of full faith and credit.  
Given under my official signature and seal of office - this 23<sup>rd</sup> day October 1895 -

J. J. Barclay  
Ordinary -

Georgia Barton Co.

Personally appeared before me  
a Notary Public in & for said Co.  
the undersigned who upon oath  
says that A. H. Wilson was a soldier  
in the Confederate war, and belonged  
to Co. F. La. Cavt. present in the  
army in Nov 1863 and was  
wounded and discharged and came  
1864 and never received any more  
and died the 24 of Oct 1866. The  
said sister of Wilson was the wife of  
A. H. Wilson and has never married  
since his death. - Mary Wilson  
sworn to before me. A. E. Wilson  
this Sept 18th 1875. L. V. Wilson  
G. M. Franks AP

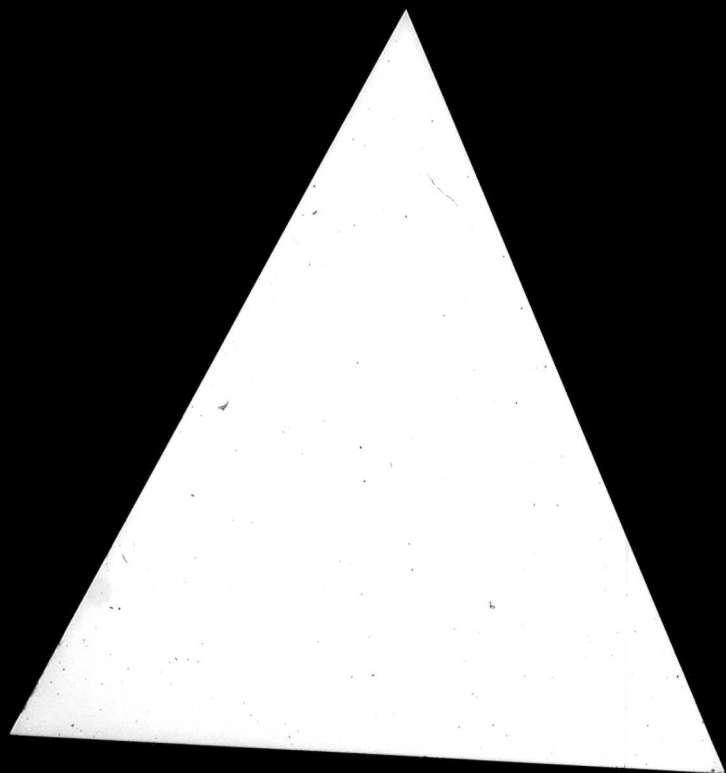
Georgia Barton County,  
I, George W. Hendricks, Ordinary  
of said County, hereby certify that  
I am personally acquainted with  
L. V. Wilson, S. V. Alexander and  
A. E. Wilson, the witnesses in the pending  
application of Mrs. M. F. Wilson of said  
County; and that said witnesses are  
trustworthy in character and worthy  
of belief.

I further certify, that G. M. Franks  
is a duly qualified and acting  
Notary Public of said County and  
is thereby duly authorized to attest  
papers &c.

Given under my hand and seal of Office  
this October 31<sup>st</sup>, 1875.

G. W. Hendricks Ordinary  
Barton County Ga.





BAD COPY - LIGHT PRINT

STATE OF GEORGIA.

Ordinary's Certificate

COUNTY

I, James M. Smith Ordinary of said County, do certify that I know Mr. Ruth Wilson the applicant for pension. She is the person she represents herself to be and she is now the continuing resident citizen of said County and was on the 4th November 1909 1 year 1 day years of age. Ed. Smith the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 4 day of Oct 1919 (SEAL) James M. Smith Ordinary, Barlow County.

NOTES:

1. Before any questions are answered the Ordinary shall enter applicant and the witness in the following which:
2. When do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give is true.
3. Additional affidavits may be attached to the foregoing.
4. Any witness who married prior to January 1st, 1881, are entitled to a pension.
5. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.

certified copies of marriage licenses if obtainable. If not, prove marriage by some papers, or by general reputation.

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

10-29-1919

Wilson Ruth  
Barlow County  
No. Disappearing 3/17/1920  
**Widow's Pension**  
Under Act 1910—as Amended by Act of 1919.

County Barlow  
Name Mrs. Ruth Wilson  
Widow of Robt. Wilson  
Company 1  
Regiment 5th Ga. Reg.  
Approved [Signature]

Not on list 2nd  
5th Ga. Inf.  
Pension office  
3/17-1920  
Disappeared  
Proven Reason  
that in absence  
of her husband  
she found  
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to maintain  
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# Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA

Barlow COUNTY

COUNTY

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

1. What is your name and where do you reside? L. D. Woody, 1115 E. 1st St., Barlow, Ga.
2. How long and since when have you known Robert Wilson applicant? Thirty years
3. How long and since when has she continuously resided in this State? (Give date.) ever
4. When and to whom was she married? 1877, Robert Wilson How do you know? present
5. How long and since when did you know Robert Wilson her husband? Thirty or more years
6. When and where did Robert Wilson the husband of applicant, die? 1895, Near Hammond, Ga.
7. Were the applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? no

Were they divorced? no

9. When, where and in what Company and Regiment did Robert Wilson enlist?

10. Were you a member of the same Company?

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment?

12. When and where did his Command surrender, and was discharged?

13. Were you personally present when it was surrendered? no If not, where were you no and how came you there?

14. Was the husband of applicant personally present at surrender? no If not where was he? no When, where and for what cause did he leave Command? (Give date.) no By whose authority did he leave his Command? no And how long was he granted leave? no How do you know all this?

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

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the

11th day of Oct, 1914

L. D. Woody Ordinary

of Barlow County.

(SEAL)



State of Georgia, Murray County.  
 J. M. Campbell, Clerk of said County.  
 do certify that the within & foregoing is a  
 True Copy of the marriage of the within  
 named Parties, as it appears of Record  
 in my office. Witness my hand & Official  
 Seal, this Oct 6. th 1918

Copy

MARRIAGE LICENSE.

Robert Wilson

Ruth Moody

Issued April 18 1918

I solemnized the Rites of Matrimony between the within named parties on the \_\_\_\_\_ day of \_\_\_\_\_ 1918.

Marshall A. Brown, Clerk of said County.

J. M. Campbell  
 Murray County

Georgia, Bartow County.

Personally came before me Mrs. Ruth Wilson, the within and foregoing applicant for Pension, and after being by me sworn, on oath says, that she and her friends have made diligent inquiry to locate some one who she knows was in the same Company and Regiment with her husband, Robert Wilson, in Co. "I" 5th Ca. Regiment, and she can not find one of them now living.

her  
 Ruth x Wilson.  
 mark

Sworn to and subscribed before me,

No.

**MARRIAGE LICENSE.**

State of Georgia, Murray County.

To any Minister of the Gospel Judge, or Justice of the Peace to Celebrate:

You are hereby authorized to join in the Honorable State of Matrimony  
*Robert Wilson* and *Ruth Moody*  
according to the Rites of your Church, provided there be no lawful cause  
to obstruct the same, according to the Constitution and Laws of this State;  
and for so doing this shall be your sufficient license.

Given under my hand and seal, this *18* day of *April* ~~1870~~ *1870*

*Anderson Farnsworth* Ordinary.

I Herely Certify, That *Robert Wilson* and  
*Ruth Moody* were joined together by the

**HOLY BANS OF MATRIMONY,**

on the *18* day of *April* *1870* by me.

*B. Springfield*

Georgia, Bartow County.

Personally came before me Mrs. Ruth Wilson, the within and  
foregoing applicant for Pension, and after being by me sworn, on oath  
says, that she and her friends have made diligent inquiry to locate some  
one who she knows was in the same Company and Regiment with her husband,  
Robert Wilson, in Co. "I" 5th Ca. Regiment, and she can not find one of  
them now living.

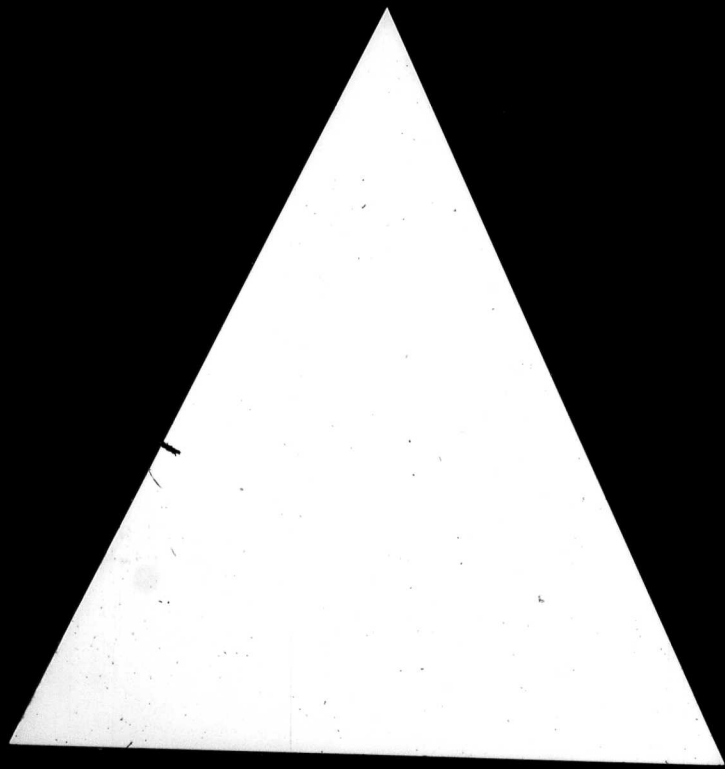
her  
Ruth *x* Wilson.  
mark

Sworn to and subscribed before me,

Oct. 4th, 1919.

G. W. Hendricks, Ordinary,

Bartow County, Ga.



*For Mrs. Wilcox, Sarah*  
*Barlow*  
*Oct 1913*

No. ....

### Widow's Application

To Be Put on Roll in Her Own Right When  
Husband Was on the Indigent Roll or  
Put on Under Act of July 11, 1910.

County *Barlow*

Name *Sarah A. Wilcox*

Widow of *C. W. Wilcox*

Company *B-34 Ga Reg*

Approved .....

J. W. LINDSEY,  
Commissioner of Pensions

CHAR. F. BYRD, State Printer, Atlanta.

*10/30/13*



# WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Barlow County.

Personally before me comes Sarah A. Wilson of said County, who, after being duly sworn, on oath says, that she is the widow of B. W. Wilson to whom in the County of Barlow State of Ga she was married on the day of 1856 and that she remained his wife, and resided with him to the date of his death in Dec 1911 and that she has not since his death remarried. At the time of his death he was a resident of Barlow County, in Georgia said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$ 5.00 in Barlow County for 1911 per annum, on account of being a soldier in Company 34 Regiment 34 (Volunteers of State Militia)

At the death of B. W. Wilson he was in the use and possession of the following property.

of the cash value of \$ Without in the corner

What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.)

Acres land	\$
Horses and Mules	\$
Hogs, Cows, etc.	\$
Total Cash value of all property	\$

That she is now a bona fide resident citizen of said County of Barlow and she has so continuously resided since a long time ago many years

Sworn to and subscribed before me, this the 23 day of Aug 1912 Sarah A. Wilson mark  
G. W. H. H. H. H. Ordinary,  
of Barlow County.

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

STATE OF GEORGIA,

Barlow County.

Personally before me come F. M. Daniel known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. Sarah A. Wilson who made the foregoing affidavit, is the lawful widow of B. W. Wilson who died in Barlow County in said State of Ga on 23 day of Dec 1911 and that she has not since remarried. That she became the wife of B. W. Wilson on the 18 day of 1856 and that she and he had resided together as man and wife continuously since 1856 and that the B. W. Wilson was the same man who was on the pension roll of said State from Barlow County 90s when he died.

Sworn to and subscribed before me, this the 27 day of Aug 1912 F. M. Daniel mark  
G. W. H. H. H. H. Ordinary,  
of Barlow County.

## Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Pension Under Act of July 11, 1910.

County Barlow  
Name Sarah A. Wilson  
Widow of B. W. Wilson  
Company B-34 Ga Reg  
Approved \_\_\_\_\_

J. W. LINDSEY,  
Commissioner of Pensions

CLARK F. STEIN, STATE PRINTER, ATLANTA.

1913/30/1912

# AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes.....who after being sworn on oath says, that they are freeholders of said County, and that they know.....of said County and knew her said husband.....at his death on the.....day of.....191.....that she and he were in the use, possession and control of the following property at his death to wit:.....

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

of the value of \$.....

Sworn to and subscribed before me, this the

day of.....191.....

Ordinary,

of.....County.

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, Wm. H. Daniel Ordinary of said County, do certify, that, I know Mrs. Barbara A. Wilson the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the.....

That I also know J. M. Daniel witness as to marriage and I also know.....

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

That the tax Books of Barton County shows that she returned property to the amount of — for 1908 \$..... for 1909 \$..... for 1910 \$.....

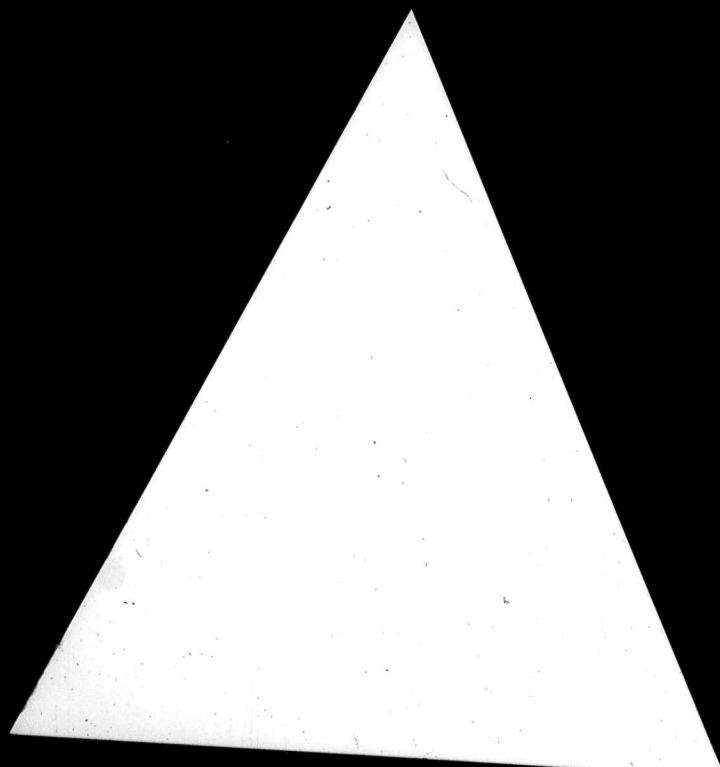
Sworn under my hand and official seal of office this 13<sup>th</sup> day of Aug 1912

(SEAL.)

Wm. H. Daniel Ordinary.

County.

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



## POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

Barlowe } Mary A. Wingo &amp;

Know all Men by these Presents, That I, Bartow G. WingoCounty in said State, do hereby appoint Bartow G. Wingo of Barlowe Co.

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 21<sup>st</sup> day of April, 1891.Executed in the presence of us: Mary A. Wingo [L. s.]Sam'l M. Whitaker  
And Andrews & Wingo  
CO. CLERKS.If allowed, send amount by Express to me at Barloweville Ga. and oblige Mary A. WingoWingo, Mary A.  
Bartow G.  
21<sup>st</sup> 1891.

No. 1515

## Widows' Pension

— PAID TO —

Mrs. Mary A. Wingo

— OF —

Barlowe

COUNTY:

\$100.00.

Warrant Issued

1891

AND HANDED TO



## POWER OF ATTORNEY.

STATE OF GEORGIA,

*Bartow* County.

Know all Men by these Presents, That I,

*Mary A. Wing*of *Bartow**Nov. 11. 1891*

County, in said State, do hereby appoint *Nov. 11. 1891*  
 of *Atlanta Ga* my true and lawful attorney in fact, for  
 me and in my name, to receive and receipt for whatever amount of money I may be entitled  
 to from the State of Georgia 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  
*21st* day of *April*, 1891.

Executed in the presence of us:

*Samuel Whitaker*  
*Samuel Whitaker*  
*Ordinary*

DIRECTIONS.

If allowed, send amount by *Express* to  
 me at *Bartowville Ga*, and oblige

*Mary A. Wing*

Widow's Pension

—PAID TO—

*Mary A. Wing**Bartow* COUNTY.

\$100.00.

Warrant Issued

AND HANDED TO

1891

## Affidavit to be Made by the Widow.

STATE OF GEORGIA,

County of *Bartow*

In person came before me, the undersigned Ordinary

in and for the County of *Bartow*

Mrs. *Mary A. Wing*, who being sworn according to law, says under  
 oath that she is the widow of *William S. Wing*, who was a soldier in

the service of the Confederate States, and served as a member of Company *H*, of the  
*18* Regiment of *Ga* Volunteers; that he enlisted in said  
 service on or about the *18* day of *March*, 1862, and was in the

*Confederate* Army, up to *June*, 1863. That while in the  
 Army, he was on the *3rd* day of *May*, 1863, (See Note No. 1)

fatally wounded in the battle of Chan-  
 cellorsville in the State of Virginia. He  
 was placed in the hospital at Richmond  
 Virginia, that he died of said wound  
 in Richmond June 1<sup>st</sup> 1863.

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 *27*th  
 day of *Sept*, 1859, and that she has resided in Georgia continuously since the  
*20* day of *Oct*, 1844; that Georgia is her home, and was such  
 on the 23d day of December, 1890, and since said date she has not lived in any other State or locality.  
 Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of  
 the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February  
 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the  
*21st* day of *April*, 1891.  
*Samuel Whitaker* Ordinary.

Post-Office.

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

*Wing, Mary A.**Bartow Ga.**21st 1891.**210. 15 / 5*

# Affidavit for Three Witnesses.

Form No. 2.

State of Georgia,

County of Barlow } In person came before me, the undersigned Ordinary  
Brandon Hamilton Whitaker and for said County witnesses J. R. Brandon  
and Thos. Dawson (each known to said Attesting Officer as truthful,  
 reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,  
 Mrs. Mary A. Wingo, of the County of Barlow  
 State of Georgia, is the widow of William S. Wingo, who was a soldier in  
 Company 4 of the 18 Regiment of Go Volunteers.  
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or  
 about the 18 day of March 1862. That while in said service, or by  
 reason of said service in the Army, he lost his life as follows: He was mortally

lately wounded in the battle of Chancellorsville in Virginia on the 2nd day  
of May 1863. He was sent to hospital  
in Richmond Virginia. He died from  
the second amputation of the leg.  
The above statement of the death of the  
said William S. Wingo was officially  
reported from the Surgeon of  
the hospital to Captain Raper who  
was Captain of Company 4, of the  
18 Regiment Go Volunteers at the  
time

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

We were all members of the same Company  
in the same battle. Saw him shot.

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

Sworn to and subscribed before me, this, the  
21 day of April 1891.  
Chas. Hudnick } J. R. Brandon  
Ordinary. } Hamilton Whitaker  
Thos. Dawson  
mark

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

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

Form No. 3.

State of Georgia,

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

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

{ SEAL }

Chas. Hudnick

Ordinary.

Form No. 4.

# NOTES.

The pension is only payable to certain classes of widows.  
 Those whose husbands were killed in service.  
 Those whose husbands died in the army of wounds or disease contracted in the service.  
 Those whose husbands went to the army and have never been heard from since the war.  
 Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

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

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

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

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

Widows who have married since the service of their husbands in the army are not entitled.  
 There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

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

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

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

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

By order of the Governor.

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

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

Form No. 2.

STATE OF GEORGIA, County of Bartow  
G. W. Hendricks Ordinary in and for said County of  
Bartow State of Georgia, hereby certify that I am acquainted with Mrs.  
Mary A. Wingo 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,  
1860, and has not lived out of the State since that date. That she is the widow of  
William S. Wingo deceased, and as such has heretofore been allowed a  
pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, 25  
day of July 1893.  
G. W. Hendricks Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Bartow County  
KNOW ALL MEN BY THESE PRESENTS, That I, Mary A. Wingo  
of Bartow County, in said State, do hereby appoint Wm. W. Harrison  
of Albany Ga my true and lawful attorney in fact, for  
me and in my name, to receive and receipt for whatever amount of money I may be entitled to  
from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi-  
davit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be  
issued by the Governor, or for any sum of money which may be coming to me for the reason  
aforesaid.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 25  
day of July 1893. Mary A. Wingo [L.S.]

Executed in the presence of us:

G. W. Hendricks  
G. W. Hendricks

DIRECTIONS.

Send amount by Chief Clerk G. W. Hendricks to  
me at Bartow, Fla. and oblige  
Mary A. Wingo

GEO. W. HARRISON, State Printer, ATLANTA.

AND HANDLED TO

Warrant Issued

1893

G. W. Hendricks  
COUNTY.

Mary A. Wingo

PAID TO

for year ending February 15th 1893.

Widow's Pension,

210.199.

1893.

FOR THOSE HERETOFORE PAID.

Mary A. Wingo  
Bartow Ga

AND HANDLED TO

WARRANT ISSUED

1894.

G. W. Hendricks  
COUNTY.

PAID TO

for year ending February 15th 1894.

WIDOWS' PENSION,

No. 140

1894.

FOR THOSE HERETOFORE PAID.

Mary A. Wingo  
Bartow Ga

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

Form No. 2.

STATE OF GEORGIA, County of Bartow  
G. W. Hendricks Ordinary in and for said County of  
Bartow State of Georgia, hereby certify that I am acquainted with Mrs.  
Mary A. Wingo the applicant for a pension in this case, and  
know, from my own knowledge (or from positive proof presented to me by reputable wit-  
nesses), that she resides in this County, and that she resided in the State of Georgia on  
December 23, 1860, and has not lived out of the State since that date. That she is the  
widow of William S. Wingo deceased, and as such has heretofore  
been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,  
this, 20 day of July 1894.  
G. W. Hendricks Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, Bartow County  
KNOW ALL MEN BY THESE PRESENTS, That I, M. A. Wingo  
of Bartow County, in said State, do hereby appoint G. W. Hendricks  
of Bartow County my true and lawful attorney in fact, for  
me, and in my name, to receive and receipt for whatever amount of money I may be en-  
titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the  
foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any  
Warrant that may be issued by the Governor, or for any sum of money which may be  
coming to me for the reason aforesaid.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 20th  
day of July 1894. M. A. Wingo [L.S.]

Executed in the presence of us:

W. S. Stephens  
J. S. Stephens

DIRECTIONS.

Send amount by \_\_\_\_\_ to  
me at \_\_\_\_\_, and oblige

## For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Bartow

Personally comes Mrs.

Mary A. Wingo

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

Bartow

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

continuously ever since Nov 20<sup>th</sup> 1843 That she is the Widow ofWilliam S. Wingo

who was a Soldier in Company

A

of the

18<sup>th</sup>

Regiment of

Co Infy

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

March1862 and served in the Army up toJune 1<sup>st</sup>1863 That he lost his

life on the

day of June1863 (State herefull particulars of the husband's death, when, where and from what cause.) ( He

was wounded in the battle of Chancellors  
vill Virginia from which wound in about  
the month when thereafter he died in  
the hospital in Richmond Virginia

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 1839; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

day of

Jan

1893.

Ordinary.

Post-office

Mary A. Wingo

## For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Bartow

Personally comes Mrs.

M. A. Wingo

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

Bartow

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

continuously ever since November 1843 That she is the Widow ofWilliam Wingo

who was a Soldier in Company

A

of the

18<sup>th</sup>

Regiment of

U. S. A.

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

March1862 and served in the Army up toJune1863 That he lost his

life on the

1<sup>st</sup>day of June1863 (State herefull particulars of the husband's death, when, where and from what cause.) ( He

died on the 1<sup>st</sup> day of June 1863 from a  
gunshot wound received in the  
battle of Chancellorsville Virginia

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 1839; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

day of

Jan

1894.

Ordinary.

Post-office

M. A. Wingo



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

Form No. 2.

STATE OF GEORGIA, County of Barlow  
C. W. Henderson Ordinary in and for said County of  
Barlow State of Georgia, hereby certify that I am acquainted with Mrs.  
Mary A. Wingo the applicant for a pension in this case, and  
know from my own knowledge (or from positive proof presented to me by reputable wit-  
nesses), that she resides in this County, and that she resided in the State of Georgia on  
December 20, 1860, and has not lived out of the State since that date. That she is the  
widow of William S. Wingo deceased, and as such has heretofore  
been allowed a pension for the year ending February 15th, 1864.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,  
this, the 26<sup>th</sup> day of January, 1895.  
C. W. Henderson Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, Barlow County  
KNOW ALL MEN BY THESE PRESENTS, That I, Mary A. Wingo  
of Barlow  
County in said State, do hereby appoint C. W. Henderson  
of Barlow my true and lawful attorney in fact, for  
me, and in my name, to receive and receipt for whatever amount of money I may be en-  
titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the  
foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any  
Warrant that may be issued by the Governor, or for any sum of money which may be  
coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26<sup>th</sup>  
day of January, 1895. Mary A. Wingo [L. S.]

Executed in the presence of us:

J. H. Stephens  
J. H. Stanford J. P.

DIRECTIONS.

Said amount by \_\_\_\_\_ to  
me at \_\_\_\_\_, and oblige

Geo. W. H. Jones, State Printer.

WARRANT ISSUED  
30 day  
1895

Widow of Wm. S. Wingo  
Barlow County.

Mary A. Wingo

for year ending February 15th, 1895.

WIDOW'S PENSION.

No. 1621  
1895  
To the 1st of 1896

FOR THOSE HERETOFORE PAID.  
Wingo, Mary A.  
Barlow County

# For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,  
County of Bartow

Personally Comes Mrs.

Mary A. Wingo

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

Bartow

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

continuously ever since

birth

1843

That she is the Widow of

William S Wingo

who was a Soldier in Company

A

of the

18

Regiment of

GA

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

March

1862 and served in the Army up to

June

1863

That he lost his

life on the

7<sup>th</sup>

day of

June

1863

(State here

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

He

was wounded in the battle of Chancellor-  
vill in May 1863 or perhaps lost of Apr  
1863. He died in the hospital from  
said wound

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 1877, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

96<sup>th</sup>

day of

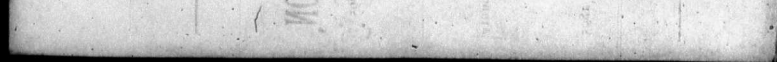
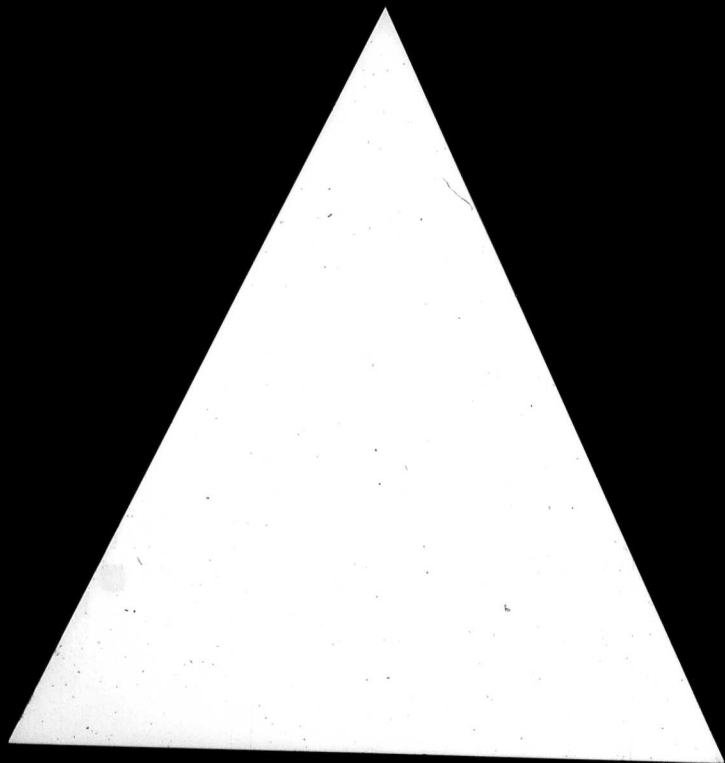
Jan

1895.

Ordinary.

Post-office

M. A. Wingo



POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow*

County,

*I, D. M. Winkler*

*Quinn*

*of Louisville Ky.*

hereby authorize

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

*me*

at *Daytonville* by *Cliff*

Witness my hand and seal this

day of

1893.

Executed in presence of

*W. L. Burroughs*  
*W. L. Burroughs*

*D. M. Winkler*  
*Winkler*

*Winkler, D. M.*  
*Barlow Co*  
*C. H.* No. 118

INDIGENT PENSION  
1895.

Name *D. M. Winkler*

County *Barlow*

Ground *Age & Poor & Wounded*  
*April 1896*

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

*atly*

Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA,

Barlow County,

I, D. H. Winkler

G. W. Hendricks

of Barlow County Ga.

hereby authorize

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

at Taylorsville

by Chas K

Witness my hand and seal this day of 1895.

Executed in presence of

J. L. Burroughs  
W. M. Robert Clark Sec.his  
D. H. Winkler  
mark

## QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Barlow County,

D. H. Winkler

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

1. What is your name and where do you reside? (give State, County and post office) *D. H. Winkler, Barlow County, Ga.*
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State? *Taylorsville, Barlow Co. Ga. Fifty five years*
3. When and where were you born? *April 11<sup>th</sup> 1833, N.C.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Confederate*
5. When and where did you enlist? *1861, Taylorsville, Ga.*
6. In what company and regiment did you enlist? *Co. C. 68<sup>th</sup> Reg. Ga. Vol.*
7. How long did you remain in that company and regiment? *something over 3 years*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
9. For how long a period did you discharge regular military duty? *Will Close of war 1863*
10. When, where and under what circumstances were you discharged from service? *May 5<sup>th</sup> 1865, near Charlotte N.C. at the close of the war I am sorry I had to give it up*
11. What is your present occupation? *farming*
12. How much can you earn per annum by your own exertions or labor? *1/3 of a hands work*
13. What has been your occupation since 1865? *farming*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *\$100<sup>00</sup>, about 1/3 thereof*
15. What is your present physical condition and how long have you been in such condition? *Weak from age, and from seven wounds received in the army two of which hurt me a great deal all the time.*
16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *Age & poverty & wounds*
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *I have been suffering with my wounds ever since the war, but was stouter several years ago than now. I am now 66 years old and my wounds hurt me worse yearly*
18. What property, effects or income do you possess? *None*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *None None*

20. In what County did you reside during those years and what property did you then retain for taxation? *Barlow County None*21. How were you supported during the years 1893 and 1894? *My son helped to support me and I did some work on the years*22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I do not know. About \$150<sup>00</sup> I suppose*23. What was your employment during 1893 and 1894? What pay did you receive in each year? *farming*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? *Yes, wife. I don't living with me. they mean to support is by farming. They are renters.*

INDIGENT PENSION

1895.

Name D. H. Winkler

County Barlow

Ground Age &amp; poverty &amp; wounds

Appt dated April 21<sup>st</sup> 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

atly

GEO. W. HARRISON, State Printer, Atlanta.

Winkler D. H.  
Barlow Co.  
Oct. 11<sup>th</sup>



## AFFIDAVIT OF PHYSICIANS.

Sworn to and subscribed before me this

5<sup>th</sup> day of April 1895.

G.W. Hudnicks Ordinary

of Bartow County.

D. H. Winkler  
mark Applicant.

## QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Bartow County.

James A. Allison

of said State and County, having been presented as a witness in support of the application of D. H. Winkler for pension under the Act approved December 15th, 1894, and after being duly sworn, true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? James A. Allison, Allatom Bartow County Ga.
2. Are you acquainted with D. H. Winkler, the applicant, if so how long have you known him? For more than thirty years.
3. Where does he reside, and how long has he been a resident of said State? Bartow Co. Ga. Ever since I know him.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I know he served in the Confederate army. I was with him in the army.
5. When, where and in what company and regiment did he enlist? 1861, Springfield Co. Va. - in Co. "C" 63<sup>rd</sup> Regt. Ga. Vols.
6. Were you a member of the same company and regiment? I was.
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About three years. He was a brave soldier, always ready and willing to fight. He was wounded at the close of the war in N.C.
8. What property, effects or income has the applicant? (Give your means of knowledge.) None.
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? None.

10. What is the applicant's occupation and physical condition? Farming. He is suffering from his wounds he received in the army and from old age.
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is not, because of old age and of the effects of the wounds he received in the war.
12. How was he supported during the years 1893 and 1894? By aid of his son and buying on time at a shop.
13. What portion of this support for those two years was derived from his own labor or income? I do not know, perhaps 1/3.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is suffering from old age and effects of his wounds.
15. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this

5<sup>th</sup> day of April 1895.

G.W. Hudnicks Ordinary

James A. Allison  
mark Applicant.

STATE OF GEORGIA,

Bartow County.

Personally came before me A. T. Calhoun and O. H. Buford, both known to me as reputable physicians

of said county, who being severally sworn, say on oath that they have examined carefully Mr. D. H. Winkler, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

Has direct inguinal Hernia on right side. Suffers from Chronic Rheumatism in back & right thigh the result of Gun Shot wounds in back & legs. Slight impairment of eyesight due to old age.

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

Sworn to and subscribed before me, this

the 6<sup>th</sup> day of June 1895.

G.W. Hudnicks Ordinary

A. T. Calhoun M.D.  
O. H. Buford M.D.

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Bartow County.

I, G.W. Hudnicks, Ordinary in and for said County, hereby certify that the applicant D. H. Winkler resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: James A. Allison

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

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

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

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

G.W. Hudnicks Ordinary  
of Bartow County.

## NOTE.

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

# POWER OF ATTORNEY.

State of Georgia.

Barlow County.

I, D. H. Winkler hereby authorize G. W. Hendricks of Cartersville Ga

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

at Taylorville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16<sup>th</sup> day of Feb 1898.

D. H. Winkler [L. S.]

Executed in presence of

Wm. Garrison  
M. J. Anderson  
M. J. Anderson

mark

Winkler, D. H.

Cartersville

(For Those Already Enrolled.)

NO. 2911

INDIGENT

SOLDIER'S PENSION,  
1898.

Name D. H. Winkler  
County Barlow

WARRANT ISSUED

27.8 1898.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO  
G. W. H.

SEC. W. HARRISON, STATE PRINTER, ATLANTA.

no date

Winkler, D. H.

# POWER OF ATTORNEY.

STATE OF GEORGIA.

Barlow County.

I, D. H. Winkler hereby authorize G. W. Hendricks of Cartersville Ga

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

by check

Witness my hand and seal, this 15<sup>th</sup> day of January 1900.

D. H. Winkler [L. S.]

Executed in presence of

J. R. Anderson

mark

CODE SEC. 1284.

(For Those Already Enrolled.)

NO. 2157

INDIGENT

SOLDIER'S PENSION,  
1900.

Name D. H. Winkler  
County Barlow

WARRANT ISSUED

January 21<sup>st</sup> 1900.

JOHN. W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO  
Hendricks

GEN. W. HARRISON, STATE PRINTER, ATLANTA.

no date

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears D. H. Winkler of Barlow

County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the \_\_\_\_\_ day of \_\_\_\_\_ 1840; that he is 66 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 8 yrs in Company B Co, of 40 62 th Regiment of Geo. Volunteers; that his physical condition is as follows: very poor, hardly able to get about at all.

that his property consists of the following items nothing

of the value of 100 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this, 16<sup>th</sup> day of July, 1898, } D. H. Winkler Ordinary N.P. & J.P. mark

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this 16<sup>th</sup> day of July, 1898.

G. W. Hudricks  
Ordinary Barlow County.

NOTE.—The blank spaces must be filled.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears D. H. Winkler of Barlow

County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the \_\_\_\_\_ day of March 1860; that he is 69 in and years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served for the term of 3 yrs in Company B Co, of 62 th Regiment of Geo. Vol.; that his physical condition is as follows: Disabled from old age and from his wound received in the army.

that his property consists of the following items \_\_\_\_\_

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Barlow county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, 16<sup>th</sup> day of July, 1900, } D. H. Winkler Ordinary mark

State of Georgia,

Barlow County.

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

Given under my official signature and seal, this 15<sup>th</sup> day of January, 1900.

G. W. Hudricks  
Ordinary Barlow County.

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

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barton County.

I, D. H. Winkler hereby authorize George W. Hendricks of Catoosa Co.

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

me at Catoosa Co.

by Chas. H.

Witness my hand and seal, this 7<sup>th</sup> day of Jan 1901.  
D. H. Winkler [S.]  
mark

Executed in presence of

R. L. Giffin

Winkler, D. H.  
Barton County

CODE SECTION 154

(For Those Already Enrolled.)

No. 1500.

INDIGENT

SOLDIER'S PENSION.  
1901.

Name D. H. Winkler  
County Barton

WARRANT ISSUED

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

G. C. Hughes

Geo. W. Harrison, State Printer, ALBANY

No data

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears D. H. Winkler 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 fall day of 1840; that he is 68 years old and by occupation a farming that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States and served for the term of 3 yrs in Company A of the 65th Regiment of Georgia; that his physical condition is as follows: Physically broken down and unable to work from age and from his wound received in the army that his property consists of the following items.

\_\_\_\_\_ of the value of 3 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the 7th day of July 1901. D. H. Winkler mark  
G. W. Hendricks Ordinary.

STATE OF GEORGIA,

Bartow County.

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

Given under my official signature and seal, this 7th day of July 1901.  
G. W. Hendricks  
Ordinary Bartow County.



NOTE.—The blank spaces must be filled.

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



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County. }  
I, D. H. Winkler hereby authorize George  
W. Hendricks of Cartersville Ga  
to receive and receipt for the pension allowed and request that he remit same to  
me at Cartersville Ga  
by OK

Witness my hand and seal, this 2nd day of Feb 1903.  
D. H. Winkler [L. S.]  
mark

Executed in presence of

Geo S. Cobb  
N. D. G. S.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County. }  
I, D. H. Winkler hereby authorize George  
Hendricks of Cartersville Ga  
to receive and receipt for the pension allowed and request that he remit same to  
me at Cartersville Ga  
by OK

Witness my hand and seal, this 8th day of Feb 1904.  
D. H. Winkler [L. S.]  
mark

Executed in presence of

Geo S. Cobb

CODE SECTION 128.  
(FOR THOSE ALREADY ENROLLED.)

No. 3688

INDIGENT

SOLDIER'S PENSION  
1903.

Name D. H. Winkler  
County Barlow  
Co. B Regiment 65 Ga  
and if duly  
WARRANT ISSUED.

740 1903.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

0

Gen. Harrison, State Printer, Atlanta.

no data

CODE SECTION 128.  
(FOR THOSE ALREADY ENROLLED.)

No. 2313

INDIGENT

SOLDIER'S PENSION  
1904.

Name D. H. Winkler  
County Barlow  
Co. B Regiment 65  
Ga  
WARRANT ISSUED

749 1904.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

OK

Gen. W. Harrison, State Printer, Atlanta.

no data

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County.

Personally appears D. N. Winkler of Bartow County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1840; that he is 78 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of more or less in Company 5th of 65th Regiment of Vol. Inf.; that his physical condition is as follows: Physical condition very bad, caused from wounds received in the Army and increased from age and infirmities that his property consists of the following items:

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

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

Sworn to and subscribed before me, this 2nd day of Feb, 1903. D. N. Winkler Ordinary. mark

STATE OF GEORGIA,

Bartow County.

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

Given under my official signature and seal, this 2nd day of Feb, 1903.

G. W. Hendricks Ordinary Bartow County.

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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County.

Personally appears D. N. Winkler of Bartow County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1845; that he is 74 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 1/2 yrs in Company 8th of 65th Regiment of Vol. Inf.; that his physical condition is as follows: He is completely broken down

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this 2nd day of Feb, 1904. D. N. Winkler Ordinary. mark

STATE OF GEORGIA,

Bartow County.

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

Given under my official signature and seal, this 8 day of Feb, 1904.

G. W. Hendricks Ordinary Bartow County.

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

Winkler, D. H.  
Bartow County

See 65<sup>th</sup> Regt. Ga. Inf.  
Co. B.  
4 applications  
1897, 1899, 1906, 1907

Winkler, D. H.  
Bartow County

See 65<sup>th</sup> Regt. Ga. Inf.  
Co. B.  
2 applications, 1902, 1905

NAME, Winkler, D H

WHEN AND WHERE BORN? April 11, 1855 - North Carolina

ENLISTED WHEN AND WHERE? 1861 - Lumpkin Co., Georgia

COMPANY AND REGIMENT? Co C 65th Reg. Ga Vols

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Seven times two of wounds hurt me all the time.

CAPTURED, WHEN AND WHERE?

RELEASED,

WHEN AND WHERE SURRENDERED? May 5, 1865 - Near Charlotte, N C

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, James A Allison

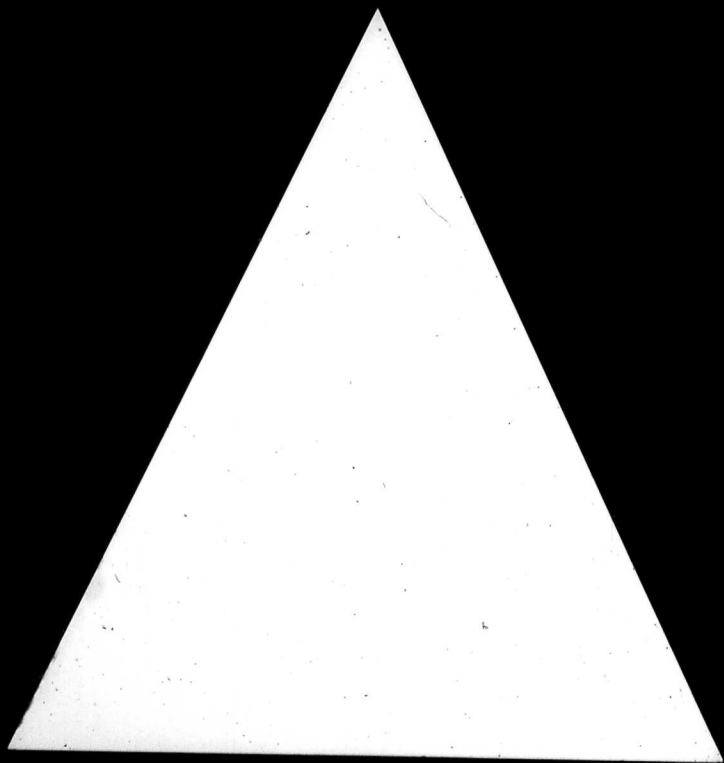
No data

P.O.

1896 COUNTY.

Reuben Bartow

mh



# ORDINARY'S CERTIFICATE

STATE OF GEORGIA

Barlow COUNTY

I, Wm. M. Lindsey

Ordinary of said County, do certify that I

know Mrs. M. M. Lindsey, the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 24 day of Oct 1919

That I also know John D. Smith witness as to marriage, and I also know

Mrs. M. M. Lindsey; that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 24 day of Oct 1919  
(SEAL.) Wm. M. Lindsey Ordinary, Barlow County.

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

- You do solemnly swear that you will true answers make to each of the questions asked you and the evidence produced before you.
- Additional affidavits may be attached if blank spaces are insufficient.
- Only persons who are married prior to the 10th day of January, 1919, are eligible for pension.
- Attest certified copies of marriage licenses if obtainable. If not, prove marriage, by some person, or by general service—because he make no proof of service and was not required to do so.

J. W. LINDSEY,  
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

W. M. Lindsey  
10-29-1919  
No. Barlow County

## Widow's Application

To Be Put on Roll in Her Own Right When  
Husband Was on the Indigent Roll or  
Put on Under Act of July 11, 1910—  
As Amended by Act of 1919.

County Barlow  
Name Mrs. M. M. Lindsey  
Widow of J. C. Lindsey 1914  
Company "D"  
Regiment 10th Ga. Reg.  
Approved 60

10-29-1919



# ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Bartow COUNTY }

I, W. M. Lindsey Ordinary of said County, do certify that I know Mrs. Henrietta Wofford the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 24th day of Sept 1919

That I also know J. W. W. W. W. witness as to marriage, and I also know Mrs. Henrietta Wofford; that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 24th day of Sept 1919  
(SEAL) W. M. Lindsey Ordinary.  
Bartow County.

- NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. All affidavits must be made before the Ordinary of the county of residence.  
4. Only widows who married prior to first January, 1881, are entitled.  
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.  
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

## Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

County Bartow  
Name Mrs. Henrietta Wofford  
Widow of J. C. Wofford 1914  
Company "A"  
Regiment 1st Ga. Regt.  
Approved 60

J. W. LINDSEY,  
Commissioner of Pensions.

Bird Printing Co. State Printers, Atlanta.

10-29-1919

FILED  
VETERAN SERVICE OFFICE  
JAN 3 1920  
J. W. LINDSEY, Director

TO PAY-  
1930. \$127  
Sig. & C. Tax.\$  
TOTAL

For Bartow County

## Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)  
R. M. Gaines Ordinary

For: Mrs. Henrietta Wofford  
(Name of Pensioner)

Date of Death: Aug 25, 1919

Amount: \$ 290.00 60.00  
137

PAID TO ORDINARY ON THIS CLAIM:	
DATE	FUND FROM WHICH PAID
1932	60.00
12-28	137.00
2-28-35	137.00
8-31-36	137.00
X	120
TOTAL	137.00

# WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Barton COUNTY.

Personally before me comes Mrs. Henrietta L. Wofford of said County, who, after being duly sworn, says that she is the widow of J. C. Wofford to whom, in the County of Barton State of Ga she was married on the 21<sup>st</sup> day of Oct 1868, and that she remained his wife, and resided with him to the date of his death in Dec 24 1913 and that she has not since his death remarried. At the time of his death he was a resident of Barton County, in said State of Georgia, and he was on the Service Pension Roll of the State and paid a pension of \$60 in Barton County for 1914 per annum, on account of being a soldier in Company C Regiment 10 (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Barton and she has so continuously resided since 16 day of Dec 1880

Sworn to and subscribed before me, this the

24 day of Apr 1919

W. H. Anderson Ordinary

of Barton County.

(SEAL)

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

STATE OF GEORGIA,

Barton COUNTY.

Personally before me comes Mr. H. Wille known to be reasonable and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Henrietta L. Wofford who made the foregoing affidavit, is the lawful widow of J. C. Wofford who died in Barton County in said State of Ga on 30 day of Dec 1913 and that she has not since remarried. That she became the wife of J. C. Wofford on the 21 day of Oct 1868, and that she and he had resided together as man and wife continuously since 21 day of Oct 1868 and that the J. C. Wofford was the same man who was on the pension roll of said State Ga from Chattahoochee County Barton when he died.

Sworn to and subscribed before me, this the

24 day of Apr 1919

W. H. Anderson Ordinary

of Barton County.

(SEAL)

## Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, Barton County:

Before me, the Ordinary of said County, comes Bruce Wofford

of said County, who, after being duly sworn, on oath says that he knew Mrs. Henrietta Wofford late of said County, a Confederate pensioner, and that said person is the identical person named and described in the attached certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted to the sum of \$                    , as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.

Sworn to and subscribed before me,

this the 24 day of Apr 1919

B. M. Garris Ordinary.

## CERTIFICATE OF THE ORDINARY

GEORGIA, Barton County.

I certify that Bruce Wofford who subscribed to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and credit. I further certify that I knew Mrs. Henrietta Wofford the deceased pensioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly enrolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner is the identical person named and described in the attached certified copy of burial certificate, was not married by a widow and left no estate of any kind sufficient to pay the expenses of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 23 day of April 1919

(Seal of Ordinary) B. M. Garris Ordinary.

### INSTRUCTIONS:

- 1st. Certified copy of Burial Certificate must accompany this application.
- 2nd. 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.
- 3rd. Each account must be sworn to before the Ordinary, and in the following form:  
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of                      who died without owning sufficient property to pay this bill.
- 4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.
- 5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out:
- 8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.
- 9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

Sworn to and subscribed before me, this the

26 day of Sep 1919

Ordinary

of Bartow County

(SEAL)

John A. Mike

5th. The completed voucher—this blank, with bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.  
6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.  
7th. Ordinary should see that the back of this blank, when folded, is filled out.  
8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.  
9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

Cartersville, Ga., February 5, 1935

Mrs. J. C. Wofford

IN ACCOUNT WITH

SAM M. HOWELL, M. D.

1934	Services rendered in last illness of Mrs. J. C. Wofford, deceased	
July 24	Res. Visit	3.00
27	"	3.00
30	"	3.00
Aug. 1	"	3.00
3	"	3.00
6	"	3.00
7	"	3.00
8	"	3.00
9	"	3.00
10	"	3.00
11	"	3.00
12	"	3.00
13	"	3.00
14	"	3.00
15	"	3.00
16	"	3.00
17	"	3.00
18	"	3.00
19	"	3.00
20	"	3.00
21	"	3.00
22	"	3.00
23	"	3.00
24	"	3.00
25	"	3.00
		\$75.00

Georgia, Bartow County  
The above foregoing account is rendered for services in the last illness of Mrs. J. C. Wofford, who died without coming sufficient property to pay the bill.  
Witness my hand and seal this 5th day of February, 1935.  
Sam M. Howell  
M. D.

I hereby certify that this is a true copy of said Death certificate as filed in my office  
THIS AUG. 31st, 1934. A. C. SHAWLIN, M. D.  
WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Error from misreading should be carefully supplied. Cause of death should be stated in plain terms, so that it may be understood. Exact statement of occupation is very important. Was disease or injury caused by dangerous or unusual conditions or occupation? Where was disease contracted if not at place of death?

**CERTIFICATE OF DEATH**  
GEORGIA STATE BOARD OF HEALTH  
Bureau of Vital Statistics

1. PLACE OF DEATH  
County Bartow Militia District (Number and Name) \_\_\_\_\_ State of Georgia  
City or Town Cartersville Length of residence in this city or town: Yrs. Mo. Da. 1914 RESIDENT (Yes or No) \_\_\_\_\_  
Street and Number (No.) \_\_\_\_\_ (Street) Douglas, St. Ward \_\_\_\_\_  
(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME Mrs. J. C. Wofford (Henrietta Louis.)  
Residence (City or Town) Cartersville (Street and Number) Douglas (State) Ga.

PERSONAL AND STATISTICAL PARTICULARS

3. SEX Female 4. COLOR or RACE White 5. Single, Married, Widowed, Divorced (write the word) Widow

6. DATE OF BIRTH (month, day, year) Dec. 16th, 1850

7. AGE Years 83 Months 8 Days 9 If less than one day Hours \_\_\_\_\_ Minutes \_\_\_\_\_

8. OCCUPATION (a) Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc. \_\_\_\_\_ (b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc. \_\_\_\_\_ (c) Date deceased last worked at this occupation (month and year) \_\_\_\_\_ (d) Total years spent in this occupation \_\_\_\_\_

9. BIRTHPLACE (P. O. Address) Cherokee County

10. NAME John H. Satterfield

11. BIRTHPLACE (P. O. Address) Cherokee County

12. MAIDEN NAME Mary Eliza Jackson

13. BIRTHPLACE (P. O. Address) Chambers County

14. INFORMANT (Signed) Bruce Wofford (Address) Cartersville, Ga.

15. BURIAL PLACE (Cemetery) Oak Hill (Postoffice) Cartersville, Ga. Date \_\_\_\_\_

16. UNDERTAKER Cummins-Long-Owens (Signed) \_\_\_\_\_ (Address) Cartersville, Ga.

17. I HEREBY CERTIFY, That I attended the deceased from Aug. 25th, 1934 to Aug. 25th, 1934. I last saw her at alive on Aug. 25th, 1934. death is said to have occurred on the date and hour stated above. The principal cause of death and related causes of importance in the order of onset and duration of each:  
Chronic Interstitial Nephritis

Other contributory causes of importance: None

What test confirmed diagnosis? \_\_\_\_\_ (Specify whether autopsy, necropsy, laboratory, or clinical)

If death was due to external causes (violence) fill in also the following:  
Was injury an accident, suicide, or homicide? \_\_\_\_\_  
Where did injury occur \_\_\_\_\_ (Specify city or town, if outside of limits, the county, and also the state)  
Did injury occur in a home, public place or industry? \_\_\_\_\_  
Manner of injury \_\_\_\_\_  
Nature of injury \_\_\_\_\_  
(Signed) Sam M. Howell M. D.  
(Address) Cartersville, Ga.

18. FILLED 8-27-34  
(Signed) Thos. A. Upshaw (Seal, Registrar)

Henrietta  
Cartersville, Ga. February 5, 1935.  
M. R. J. C. Wofford

IN ACCOUNT WITH  
SAM M. HOWELL, M. D.

1934	Services rendered in last illness of Mrs. J. C. Wofford, deceased as follows:	
July 24	Res. Visit	3.00
27	"	3.00
30	"	3.00
Aug. 1	"	3.00
3	"	3.00
6	"	3.00
7	"	3.00
8	"	3.00
9	"	3.00
10	"	3.00
11	"	3.00
12	"	3.00
13	"	3.00
14	"	3.00
15	"	3.00
16	"	3.00
17	"	3.00
18	"	3.00
19	"	3.00
20	"	3.00
21	"	3.00
22	"	3.00
23	"	3.00
24	"	3.00
25	"	3.00
		<b>\$75.00</b>

Georgia, Bartow County  
The above foregoing account is rendered for services in the last illness of Mrs. Henrietta Wofford who died without leaving sufficient property to pay the bill.  
Witness my hand and seal this 2nd day of March, 1935.  
R. M. Gaines, M. D.  
Ordinary

Cartersville, Ga.

Received of R. M. Gaines, Ordinary Bartow County, Georgia, Thirty-Eight & 40/100 (\$38.40) Dollars, to apply on services rendered in last illness of Mrs. Henrietta Wofford. From Pension Dept.

This March 2, 1935.

*R. M. Gaines* M. D.  
*Howell*

CERTIFICATE OF DEATH GEORGIA STATE BOARD OF HEALTH Bureau of Vital Statistics			
1. PLACE OF DEATH County <u>Bartow</u> Militia District (Number and Name) _____ City or Town <u>Cartersville</u> Length of residence in this city or town: Yrs. <u>Mo.</u> <u>Da.</u> <u>1934</u> RESIDENT (Yes or No) _____ Street and Number (No.) _____ (Street) <u>Douglas St.</u> Ward _____ (If death occurred in a hospital, give its name instead of street and number)			Registered No. _____
2. FULL NAME <u>Mrs. K. J. C. Wofford (Henrietta Louis.)</u> Residence (City or Town) <u>Cartersville</u> (Street and Number) <u>Douglas</u> (State) <u>Ga.</u>			
PERSONAL AND STATISTICAL PARTICULARS			
3. SEX <u>Female</u>	4. COLOR or RACE <u>White</u>	5. Single, Married, Widowed, Divorced (write the word) <u>Widow</u>	16. DATE OF DEATH <u>Aug. 25th, 1934</u> <u>11:10 P</u> DEATH (Month, Day, Year) _____ At _____ (Hour) _____ M
6. DATE OF BIRTH (month, day, year) <u>Dec. 16th, 1850</u>			17. I HEREBY CERTIFY, That I attended the deceased from <u>1925</u> to <u>Aug. 25th, 1934</u> 19 _____ 19 _____ I last saw the <u>DR</u> alive on <u>Aug. 25th, 1934</u> death is said to have occurred on the day and hour stated above. The principal cause of death and related causes of importance in the order of onset and duration of each: <u>Chronic Interstitial Nephritis</u>
7. AGE <u>83</u> Years <u>9</u> Months <u>9</u> Days If less than one day _____ Hours _____ Minutes _____			Other contributory causes of importance: _____
8. DATE OF DEATH <u>Aug. 25th, 1934</u>			What test confirmed diagnosis? _____ (Specify whether culture, necropsy, laboratory, or clinical)
9. BIRTHPLACE <u>Cherokee County</u> (P. O. Address) _____			If death was due to external causes (violence) fill in also the following: Was injury an accident, suicide, or homicide? _____ Where did injury occur _____ (Specify city or town, if outside of limits, the county, and also the state)
10. NAME <u>John H. Satterfield</u> FATHER (P. O. Address) <u>Cherokee County</u>			Did injury occur in a home, public place or industry? _____
11. BIRTHPLACE _____			Manner of injury _____
12. MAIDEN NAME <u>Mary Eliza Jackson</u> MOTHER (P. O. Address) <u>Chambers County</u>			Nature of injury _____
13. BIRTHPLACE _____			(Signed) <u>Sam M. Howell</u> M. D. (Address) <u>Cartersville, Ga.</u>
14. INFORMANT (Signed) <u>Bruce Wofford</u> (Address) <u>Cartersville, Ga.</u>			15. FILED <u>8-27-34</u> (Signed) <u>Thos. A. Upshaw</u> (Local Registrar)
15. BUNIAL PLACE (Cemetery) <u>Oak Hill</u> (Postoffice) <u>Cartersville, Ga.</u> Date _____			
16. UNDERTAKER <u>Cummings-Long-Owens</u> (Address) <u>Cartersville, Ga.</u>			

I hereby certify that this is a true copy of said Death certificate as filed in my office.

THIS AUG. 31st, 1934. A. C. SHAWBUN, M. D. P. C. Registrar  
WRITE PLAINLY WITH UNFADING INK—THIS IS AN OFFICIAL RECORD of information should be carefully supplied. Cause of death should be stated in plain terms, so that it may be properly classified. Exact statement of occupation is very important. Was disease or condition of any unusual or extraordinary conditions or occupation? Where was disease contracted? If not at place of death?

V-2

Cartersville, Ga.

Received of R. M. Gaines, Ordinary Bartow County, Georgia, Eighty-Eight & 60/100 (\$88.60) Dollars, to apply on funeral expenses Mrs. Henrietta Wofford. From Pension Department.

This March 28, 1935.

CUMMINGS LONG OWEN INC.

BY *J. P. Owen* Mgr.

Cartersville, Ga. Sept. 4, 1936.

Received of R.M. Gaines, ordinary, Bartow county, (\$24-68, to apply on bill rendered with said ordinary, for services in last illness of Mrs. Henrietta Wofford, this money from Pension department.

*SWain*

Cartersville, Ga. Sept. 4, 1936.

Received from R.M. Gaines, Ordinary, Bartow county, (\$95-32) to apply on funeral expenses of Mrs. Henrietta Wofford, this money from Pension department.

*Cummings-Long-Owen*  
By *J.P. Owen*

CUMMINGS-LONG-OWEN  
FUNERAL DIRECTORS  
CARTERSVILLE, GA.

To \_\_\_\_\_

*For the funeral expenses of*

*Mrs. Henrietta Wofford*

*Received payment*

19 \_\_\_\_\_

*Cash expenditures*

*Total \$ 290.00*

ITEMIZED ACCOUNT ON INSIDE PAGE

TO	CARRIAGE AND SERVICE	195 00
OUTSIDE CASE	Metal Vault	95 00
DRIVE		

CASH EXPENDITURES	Opening Grave	5 00
CEMETERY CHARGES		
FLOWERS ON COFFIN		

The above and foregoing account is rendered for funeral expenses of Mrs. Henrietta Wofford, who died without owning sufficient property to pay this bill.

*Cummings-Long-Owen*  
By *J.P. Owen*

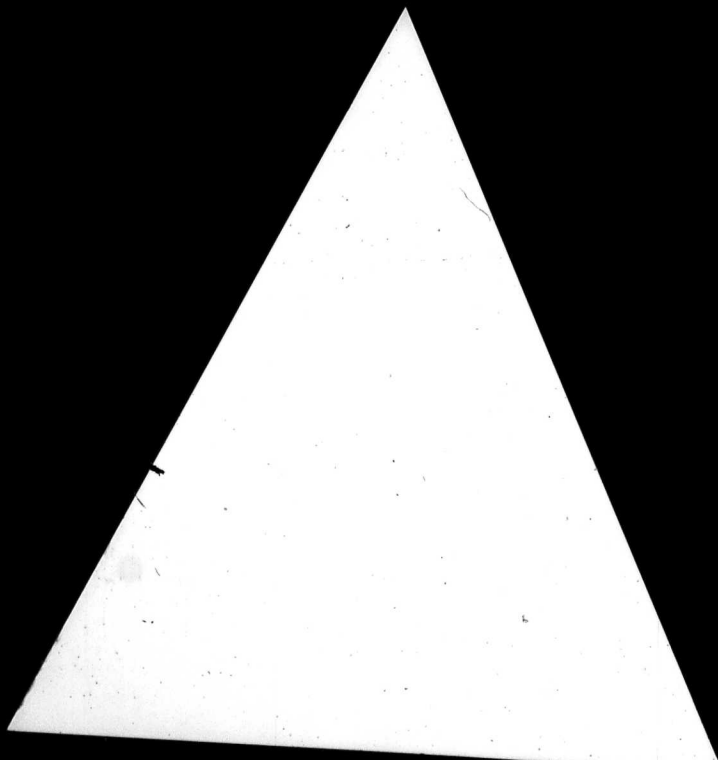
Sworn to and subscribed before me, this September 1936

*R.M. Gaines*  
Ordinary Bartow County, Ga.

TOTAL 290 00



*W. H. Jones*  
Ordinary Beaufort County, Ga.



Wofford, James C.  
Bartow Co  
Oct 1912

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

**Confederate  
Soldier's Application.**

✓ UNDER ACT 1910.

County Bartow  
Name James C. Wofford  
Company "G"  
Regiment 110. Ga. Reg  
Approved \_\_\_\_\_

J. W. LINDSEY,  
Commissioner of Pensions

CHAR. D. BYRD, State Printer, Atlanta.

11/9/12 11/9-1912  
ENTERED ROSTER OFFICE

# APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

## Questions for Applicants to Answer.

STATE OF GEORGIA.

Barlow County.

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

1. What is your name and where do you reside? (Give County and Post-office) James B. Wofford in Barlowville Ga

2. How long and since when have you been a continuous resident citizen of this State? Have live in Georgia since 1862

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? In Army of Confederate States

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) March 1862 near Columbus Ga. Co. 1st Co. 8th Reg

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) From 1862 till Dec. 1862

6. When and where was your Company and Regiment surrendered or discharged from the Service? Surrendered to Union at N. C.

7. Were you actually present with your Command when it was surrendered or discharged? No

8. If you were not actually present, state specifically and clearly where you were. I was in North Ga.

9. Where was your Command when you left it? Near Barlow Ha.

a. When did you leave the Command? Dec. 1862

c. For what cause did you leave? I was left sick

d. By whose authority did you leave? By Col. Johnson

e. For how long was your leave granted? In what way? I was left sick by Col. Johnson

f. Why did you not return to your Command after leave expired? I got well

g. In what way were you prevented? I was prevented by illness

h. What effort did you make to return? I collected but returned

i. Were you captured during the war? Yes

j. If so, when, and where? In what prison were you held and when were you released? I was captured at Newburg Ga. and released

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4 Nov. 1908? (Make list by items and value) I had nothing of my own except about \$100 all told

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list) The same as above stated the house and lot in Barlowville Ga. and some furniture

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? I get \$15.00

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 12th day of July 1911 James C. Hootch

James C. Hootch Ordinary, of Barlow County.

Confederate

Soldier's Application.

UNDER ACT 1910.

County

Barlow

Name

James B. Wofford

Company

1st Co.

Regiment

8th Reg

Approved

J. W. LINDSEY.

Commissioner of Pensions.

CHAS. F. STEIN, STATE PRISON, ATLANTA.

ENTERED ROSTER OFFICE

11/9/11 11/9-1912

# QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Bartow County.

E. B. Ford of said State and County is hereby presented as a witness in support of the application of Jas. B. Wofford for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? E. B. Ford Bartonsville Ga
2. How long and since when have you known Jas. B. Wofford the applicant? I have known him since 1862
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? In Bartonsville Ga. He has lived in Georgia since 1862
4. When, where and in what Company and Regiment did Jas. B. Wofford enlist during war from 1861 to 1865? (Give date and place.) March 1862, 1st Mass. State Ca. Co. Co. 1st
5. How did you obtain your information of this service? I was a member of Co. B. Same Reg. know personally
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From 1862 till winter of 1865
7. When and where was his Command surrendered or discharged (give date and place) April 26th 1865, Greensboro N.C.
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? I was in North Ga. in Command of Co. D. of 1st Mass. Regiment
10. Was the applicant personally present with his Command at surrender? No
11. If not, where was he and how came him there? He was Commander in the latter part of the war
12. When did he leave his Command? Winter 1865 Where was his Command when he left it? Greensboro N.C. for what cause did he leave? He was sick By whose authority did he leave? Col. Abner Johnson and how long was he granted leave? Indefinitely until he got well How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically.) I was in the war with Mr. Wofford and know of his service
13. In what way was he prevented from returning to his Command? He was sick How do you know? I had the same experience in the war
14. What effort did he make to return to his Command and how do you know? He started out at Athens Ga. in W. T. Wofford put him in his staff
15. Was applicant captured as a prisoner? No If so, when and where? July 1863 In what prison was he held? Was paroled and when released? Mr. Wofford was an honorable and brave soldier

Sworn to and subscribed before me, this

1st day of July 1911

Ordinary,

Bartow

County.

## AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Bartow County.

Personally before me comes Martin Bellum & C. Smith who on oath says that they are freeholders residing in said County and we know Jas. B. Wofford the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make list by items and value.) One house and lot in Bartonsville, Bartow County Ga. per value of \$1500 belonging to his wife. He has none

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) None
2. When and to whom was it sold or given to? —
3. What was the price paid or stated to be paid? —
4. What relation is the party to applicant? —
5. What disposition was made of the proceeds of the sale? —
6. Was the disposition of this property made in good faith and full value? Yes or was it made to obtain a pension? Yes

Sworn to and subscribed before me, this the

1st day of July 1911

G. W. H. Smith

Ordinary,

Bartow

County.

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Bartow County.

I, G. W. H. Smith Ordinary of said County, certify that I know the applicant J. B. Wofford for Pension is the person he represents himself to be, and resides in said County. That I also know E. B. Ford the witness swearing to the service and Martin Bellum & C. Smith who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Bartow County shows that J. B. Wofford and his wife value for tax is in 1908 \$2800- for 1909 \$3200- for 1910 \$3240- for 1911 \$3240- Sworn under my hand and official seal of office this 1st day of July 1911

G. W. H. Smith Ordinary,

Bartow

County.

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

GEORGIA, Barlow County.

I, Guthrie Jones, Ordinary of said county, do certify that I personally know Jennie H. Wofford, the applicant, and that she is the lawful widow of J. B. Wofford, and was on the Service Pension Roll of said Barlow county, and was paid a Pension from Barlow county for 1913, and at the time of his death on the 30<sup>th</sup> day of December, 1913, there was due to him and unpaid his Pension of eight Dollars from the State of Georgia, and I know John H. Stevens, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 25<sup>th</sup> day of March, 1914.

Guthrie Jones, Ordinary,  
Barlow County.

Received of Guthrie Jones, Eight Dollars  
Pension due J. B. Wofford for 1914.

Jennie H. L. Wofford,  
Widow of J. B. Wofford

Wofford, J. C.  
Barlow Co.  
Paul M. Kincaid  
J. Wofford

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

1914

Application for Pension Due  
Deceased Soldier

UNDER ACT 1891

To be paid the Widow or Dependent Children

BY

Jennie H. L. Wofford  
Widow of J. B. Wofford  
of Barlow County  
Co. 8<sup>th</sup> Regt. 40<sup>th</sup> Inf. Vol.

Approved and paid

1914.

J. W. LINDSEY,  
Commissioner of Pensions.

GEORGIA, Barlow County.

I hereby authorize and constitute Guthrie Jones of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 1914, through my deceased husband, J. B. Wofford, who was on the Service Pension Roll and paid from said County for 1912.

Witness my hand this 25<sup>th</sup> day of March, 1914.

Attested before me:

J. Wofford } Jennie H. L. Wofford



# Application for Pension Due Deceased Soldier

To be paid to his widow or dependent children.

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA Barlow County.

Personally before me comes Mrs. Annita L. Wifford, of said county, after being duly sworn, on oath says that she is the widow of J. C. Wifford who was duly enrolled as a Servic Pensioner from the county of Barlow and was paid a Pension of daily Dollars from Barlow county for 19/2, and that the said J. C. Wifford died in Barlow county on the 30<sup>th</sup> day of Dec, 1913, and at the time of his death a Pension of 60.00 was due him from Barlow county and unpaid for 1914. Applicant further swears that she married the said J. C. Wifford on the 21<sup>st</sup> day of Oct, 1868, in Barlow county and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 25<sup>th</sup> day of March, 1914.  
G. W. H. Dicks Ordinary. Annita L. Wifford (L. S.)  
Barlow County.

## AFFIDAVIT OF WITNESS.

GEORGIA, Barlow County.

Personally before me comes John B. Howard, who on oath says that he knew J. C. Wifford while in life and that he knows his widow Annita L. Wifford the above applicant; that he knows that the said J. C. Wifford and Annita L. Wifford were in due form of law married in the county of Barlow in the State of Georgia on the 21<sup>st</sup> day of Oct, 1868, and that they resided together as husband and wife from date of marriage to the day of his death on the 30<sup>th</sup> day of Dec, 1913, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 25<sup>th</sup> day of March, 1914.  
G. W. H. Dicks Ordinary. John B. Howard  
Barlow County.

NAME **Wofford, James G.**

YEAR

**1868**

COUNTY

*File*  
**Hartow**

WHEN AND WHERE BORN? **Resident of Georgia, since 1868.**

ENLISTED WHEN AND WHERE? **March 1862, - Cass Station, Georgia.**

RANK

COMPANY AND REGIMENT? **Co. I. 40th. Ga. Regt.**

NAME OF CAPTAIN AND COLONEL?

WOUNDED? **Left Command Feb. 1868, sick. Left sick by Col., Johnson to remain until he got well.**

CAPTURED, WHEN AND WHERE? **Vicksburg, Miss., and paroled. (Does not state when.) Witness states: Applicant, captured, July 1868.**

RELEASED. **Paroled. Does not state when.**

WHEN AND WHERE SURRENDERED? **Command surrendered: April 28, 1868, Greensboro, North Carolina.**

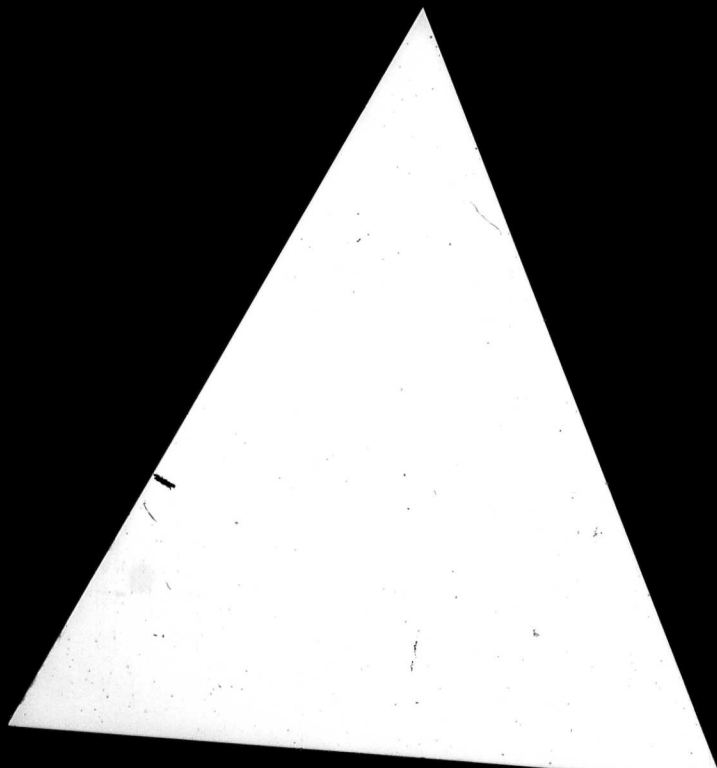
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **In North Georgia. Left Command near Gadsden, Ala., Feb. 1868, was left sick by Col., Johnson to remain until he got well. Prevented from re-turning to his Command by the enemy.**

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. **E. E. Ford, --- Co. B. Same Regiment ---**

**No data.**



POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barton* County, }

herby authorize

*H. C. Wolfe*  
*E. W. McDonald* at *Leatsville* Geo.

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

at *Leatsville* by *me*

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

Before my presence of

*R. S. Johnson*

*H. C. Wolfe*

*Wolfe, H. C.*  
*Barton Co.*

No. *19*

INDIGENT PENSION  
1895.

Name *H. C. Wolfe*

County *Barton*

Ground *Indigent & Poorly*  
*July 1*  
*May 1st* 1895

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

*att*

Geo. W. Harrison, State Printer, Atlanta.

# POWER OF ATTORNEY.

STATE OF GEORGIA.

Bartow County.

I, H. E. Wolfe hereby authorize  
G. W. Denonick of Bartowville, Ga.

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

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

Executed in presence of

H. S. Johnson  
R. S. Johnson

H. E. Wolfe

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Bartow County.

Personally came before me C. H. Buford & J. G. Greene and

both known to me as reputable physicians

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

H. E. Wolfe, applicant for pension under the Act of 1894, and after

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

Rheumatism of right hip & right leg  
and we personally know that it has been  
with great difficulty that he has been able  
to walk with a cane for several years, &  
he is debilitated from having suffered long.

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

Sworn to and subscribed before me, this

the 21 day of May 1895.

C. H. Buford M.D.  
J. G. Greene M.D.  
G. W. Denonick only

INDIGENT PENSION

1895.

Name H. E. Wolfe

County Bartow

Ground Infirm & Paraly

W. J. D. D. 1895

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

att

Geo. W. Hartman, State Printer, Atlanta.



# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Bartow County.

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

the applicant N. E. Wolfe resides in said County, and was a bona

fide resident of this State on the first day of January, 1894, and that the witnesses, viz: Phon

A. Owens and N. W. Hite

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

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

I further certify that the tax digests of Bartow County show that applicant returned for taxation in his name in 1893, One hundred and fifty five dollars of property, and in 1894, Nothing dollars of property.

Witness my hand and seal of office this 22 day of May 1895.

G. W. Hendricks  
Ordinary  
of Bartow County.

## NOTE.

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

while the above property referred to as being given in by N. E. Wolfe it was and is the property of his wife, being a poor place in the country and the small lot on which they live in Bartowville.

This I know to be so  
G. W. Hendricks Ordinary

10. What is the applicant's occupation and physical condition? He has no occupation. His physical condition is quite feeble

11. Is the applicant unable to support himself by labor of any sort, if so, why? I think so, because of his feeble condition and general debility. He walks with a stick

12. How was he supported during the years 1893 and 1894? I do not know

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

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? Same as above set forth in answer to questions 10 & 11

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

Sworn to and subscribed before me, this 22 day of May 1895.  
G. W. Hendricks Ordinary  
Thos. A. Owens Secy. Regt.  
Let for \$6.60

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

Barlow County. }

H. E. Wolfe

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

1. What is your name and where do you reside? (give State, County and post office) H. E. Wolfe. In Cartersville Barlow Co. Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Cartersville Ga. In Ga. 62 years
3. When and where were you born? Feb 6<sup>th</sup> 1832. Born in S.C.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate
5. When and where did you enlist? Oct. 1861, at Macon Ga
6. In what company and regiment did you enlist? Co. D 61 Ga Regt
7. How long did you remain in that company and regiment? Till close of war
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?

9. For how long a period did you discharge regular military duty? 2 yrs & 8 mo.
10. When, where and under what circumstances were you discharged from service? I was Captured on the Retreat from Washington in July 1864. Brought to Elmira N.Y. and kept
11. What is your present occupation? Nothing
12. How much can you earn per annum by your own exertions or labor? I have not been able to earn as much as ten dollars per annum for the last six years.
13. What has been your occupation since 1865? Carpenetry

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? I can live and buy my clothing for a poor or security filler dollars. I am not able to earn any thing scarcely at all. I have no income.

in prison July May 17-1865 - then Barlow

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Barlow County. }

Thomas A Owens, of said State and County, having been presented as a witness in support of the application of H. E. Wolfe for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Thomas A Owens near Taylorsville Barlow Co. Ga
2. Are you acquainted with H. E. Wolfe, the applicant, if so how long have you known him? I first got acquainted with him
3. Where does he reside, and how long has he been a resident of this State? In Cartersville Barlow County Ga. Ever since I have known him
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I do. Know that he served in the Confederate Army. I served in same Army
5. When, where and in what company and regiment did he enlist? In April 1862 as near as I now remember. 61 Reg. of Ga. Inf. I do not
6. Were you a member of the same company and regiment? I belonged to 60 Reg
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? I was captured Oct. 25<sup>th</sup> 1864. said Wolfe. from the time of Wolfe's capture I saw nothing more of him, till after the surrender
8. What property, effects or income has the applicant? (Give your means of knowledge.) I do not know

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? I do not know

in the Army 1862

15. What is your present physical condition and how long have you been in such condition? *I have Rheumatism and have had it badly for five years. I suffer from a bruise in my left hip, immediately said bruise was caused by a piece of shell in a battle Fredericksburg or Chancellorsville. From the hurt on my hip and from Rheumatism together, I am entirely unable to walk without a stick.*

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

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *The same as answer to Question 15. and also my left leg continues to get weaker, and the Rheumatism is very severe in my right leg, all of which renders it impossible for me to work for and make my support of any kind of labor.*

18. What property, effects or income do you possess? *None except a few old carpenter's tools*

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same? *None except the above named few old carpenter's tools*

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

21. How were you supported during the years 1893 and 1894? *In 1893 I received from the Masonic Lodge of Barlowville \$24.00 and made a little money by doing some. My wife and sister-in-law have been helping to support me by sewing for people.*

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I do not know. I did a little light job work in each of 1893 & 1894, for which I received not more than ten dollars for the two years.*

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

24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support. *Yes. Have a wife living. No children.*

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

26. Are you receiving any aid from your County, and if so, how much? Did you ever apply for such aid? *No No*

Sworn to and subscribed before me this the *2nd* day of *May* 1895. *W E Wolfe*  
*G W Symonds* Ordinary  
of *Barlow* County.

Applicant.

State of Georgia, Bartow County -  
A. W. Hill of said County,  
having been presented as a  
witness in support of the applica-  
tion of H. E. Wolf for pension under  
The Act approved December 16<sup>th</sup>  
1894, and after being duly sworn  
him answers to make to the fol-  
lowing questions, I poses and  
answers as follows:

I am and have been  
acquainted with the applicant  
H. E. Wolf for about thirty years  
said Wolf has been during this  
time a resident of Bartow  
County Georgia and has been  
living in Bartow since fifteen  
years or more. He is old and  
very infirm and has <sup>no</sup> ~~no~~ <sup>property</sup> in  
Cash. He had no property, effects  
or income in 1893 or 1894. He  
was formerly a Corporal, but is  
now physically unable to do man-

NAME, Wolfe, H E

WHEN AND WHERE BORN? Feb. 6, 1852 - South Carolina

ENLISTED WHEN AND WHERE? Oct. 1861 - Macon, Ga.

COMPANY AND REGIMENT? Co I 61st Ga. Regt.

NAME OF CAPTAIN AND COLONEL? Thos. A. Owens, 1st Lt. Co H 60th  
Ga. Regt.

WOUNDED?

CAPTURED, WHEN AND WHERE? July 1864 - at retreat from  
Washington, carried to Elmira, N Y where incarcerated.

RELEASED, May 17, 1865

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, Only as above

P.O.

1896 COUNTY. Bartow

mh

- at labor of any kind. He is  
totally unable to support him-  
self by labor of any sort. This  
is so because of his 47 year  
physical weakness, he being  
unable to walk at all without  
a stick. In 1893 the Masonic  
Lodge paid him \$24<sup>00</sup> dollars  
as Tyler. He also received a few  
dollars for jury service. The  
balance of his support comes  
from his wife and his widowed  
sister-in-law from  
their savings. His wife owns  
the little house and lot in town  
in which they live, and also  
a small poor place in the  
country from which he re-  
ceives less than twenty five  
dollars for year rent, which  
hardly pays State, County and  
city taxes.

A. W. Felt

Subscribed  
by me  
May 22-1895  
G. W. Lindbeck



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County. }  
I, A. E. Wolfe hereby authorize Geo  
Hindricks of Cartersville Ga

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 29<sup>th</sup>  
day of January 1897. A. E. Wolfe [L. S.]

Executed in presence of

Mr. A. E. Wolfe  
J. H. Stanford

# POWER OF ATTORNEY.

State of Georgia,

Barlow County. }  
I, A. E. Wolfe hereby authorize Geo  
Hindricks of Cartersville Ga

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12<sup>th</sup>  
day of January 1898. A. E. Wolfe [L. S.]

Executed in presence of

John H. Nulmer  
J. G. Farley A.P. & J.P.

Wolfe, A. E.  
Barlow Ga  
ACT OF 23 DEC. 1894.  
(For Those Already Enrolled.)  
No. 1 No. 1750

INDIGENT

Soldier's Pension.

1897.

Name A. E. Wolfe  
County Barlow

2/4 1897.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO  
G. H. H.  
SEC. W. HARRISON, STATE PRINTER, ATLANTA.

No data

Wolfe, H. E.  
Barlow Ga  
ACT OF 23 DEC. 1894.  
(For Those Already Enrolled.)  
No. 2315

INDIGENT

SOLDIER'S PENSION,

1898.

Name A. E. Wolfe  
County Barlow

WARRANT ISSUED  
1/2 1898.

RICHARD JOHNSON,  
Commissioner of Pensions.

WARRANT HANDED TO  
G. H. H.  
SEC. W. HARRISON, STATE PRINTER, ATLANTA.

No data

# For Applicants Heretofore Allowed Pensions.

## STATE OF GEORGIA,

Barlow County.

Personally appears

H. E. Wolfe 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 <sup>1880</sup> day of Feb 1888; that he is 65 years old and by occupation a Mechanic; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served for the term of four 4 yrs in Company C, of 61st Regiment of

Co. Inf.; that his physical condition is as follows: Rheumatism rendering him unable to walk without a stick or crutch

that his property consists of the following items small lot of tools

of the value of 15 or 20 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this, the 29th day of Jan 1897. H. E. Wolfe  
G. W. Hendricks Ordinary.

## STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 29th day of Jan 1897.

G. W. Hendricks  
Ordinary Barlow County.



NOTE.—The blank spaces must be filled.

# For Applicants Heretofore Allowed Pensions.

## STATE OF GEORGIA,

Barlow County.

Personally appears

H. E. Wolfe of Barlow

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the \_\_\_\_\_ day of Feb 1882; that he is 66 years old and by occupation a \_\_\_\_\_; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served for the term of 4 yrs. more in Company C, of 61st Regiment of

Co. Vol. Infantry; that his physical condition is as follows: totally disabled from Rheumatism to do any labor at all.

that his property consists of the following items none

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

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

Sworn to and subscribed before me, this, the 1st day of January 1898. H. E. Wolfe  
G. W. Hendricks Ordinary.

## State of Georgia,

Barlow County.

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

Given under my official signature and seal, this 1st day of January 1898.

G. W. Hendricks  
Ordinary Barlow County.



NOTE.—The blank spaces must be filled.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County,

I, A. E. Wolfe, hereby authorize  
G. W. Hendricks of Bartonsville Ga  
 to receive and receipt for the pension allowed, and request that he remit same to  
me at Bartonsville Ga  
 by check

Witness my hand and seal this 24<sup>th</sup> day of January 1899.

Executed in presence of

myself & Wolfe } A. E. Wolfe (L. S.)  
mark

INDIGENT

SOLDIER'S PENSION,

1899.

Name A. E. Wolfe  
 County Bartow

WARRANT ISSUED

1/30 1899

RICHARD JOHNSON,  
 Commissioner of Pensions.

WARRANT HANDLED TO  
G. W. Hendricks

Chas. W. Hendricks, State Printer, Atlanta.

no date

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County,

I, A. E. Wolfe, hereby authorize  
G. W. Hendricks of Bartonsville Ga  
 to receive and receipt for the pension allowed, and request that he remit same to  
me at Bartonsville Ga  
 by check

Witness my hand and seal, this 24<sup>th</sup> day of January 1900.

Executed in presence of

myself & Wolfe

[L. S.]

INDIGENT

SOLDIER'S PENSION,

1900.

Name A. E. Wolfe  
 County Bartow

WARRANT ISSUED

January 28 1900.

JOHN. W. LINDSEY,  
 Commissioner of Pensions.

WARRANT HANDLED TO  
G. W. Hendricks

Chas. W. Hendricks, State Printer, Atlanta.

no date

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears A. E. Wolfe 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 Spring day of 1883; that he is 67 years old and by occupation a mechanic; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States,

and served for the term of 3 1/2 yrs in Company B, of 61st Regiment, of the Vol. of Inf.; that his physical condition is as follows: has rheumatism, fatigue, unable to support himself by labor of any kind

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 1890. I have heretofore as a resident of Barlow county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, 24 day of Jan, 1890. H. E. Wolfe Ordinary. mark

State of Georgia,

Barlow County.

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

do certify that I am well acquainted with A. E. Wolfe 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 24th day of January, 1890.

G. W. Hendricks Ordinary Barlow County.



NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1899.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears A. E. Wolfe 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 6 day of July, 1892; that he is 68 years old and by occupation a carpenter; that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States,

and served for the term of 8 1/2 yrs in Company B, of 61st Regiment of the Vol. of Inf.; that his physical condition is as follows: has rheumatism and is unable to support himself by labor of any kind

that his property consists of the following items \_\_\_\_\_

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Barlow county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, \_\_\_\_\_ day of \_\_\_\_\_, 1900. \_\_\_\_\_ Ordinary.

State of Georgia,

Barlow County.

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

do certify that I am well acquainted with A. E. Wolfe 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 \_\_\_\_\_, 1900.

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



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



# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, H. E. Wolfe hereby authorize George H. Hendricks of Cartersville Ga

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

Witness my hand and seal, this 10 day of January 1901. H. E. Wolfe [L. S.]

Executed in presence of

4 witnesses

Wolfe H.E.  
Cartersville Ga

(For Those Already Enrolled.)

No. 1801

INDIGENT

SOLDIER'S PENSION.  
1901.

Name H. E. Wolfe  
County Barlow

WARRANT ISSUED  
1/29 1901.

JOHN W. LINDSEY,  
Commissioner of Pensions

WARRANT BLANKED TO  
G. H. Hendricks

Gov. W. Harrison, State Prison, Atlanta

No data

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, H. E. Wolfe hereby authorize G. W. Hendricks of Cartersville, Ga

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

Witness my hand and seal, this 10 day of January 1902. H. E. Wolfe [L. S.]

Executed in presence of

G. H. Hendricks.

Wolfe H.E.  
Cartersville Ga

(FOR THOSE ALREADY ENROLLED.)

I-61 No. 3220

INDIGENT

SOLDIER'S PENSION.  
1902.

Name H. E. Wolfe  
County Barlow  
Co. Q Regiment 61

WARRANT ISSUED  
9 Jan. 10 1/31 1902.

JOHN W. LINDSEY,  
Commissioner of Pensions

WARRANT BLANKED TO  
Gray

Gov. W. Harrison, State Prison, Atlanta



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County.

Personally appears H. E. Wolfe of Bartow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 6<sup>th</sup> day of April, 1832; that he is 69 years old and by occupation a Carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years and 6 mos. in Company A, of 61<sup>st</sup> Regiment of Georgia; that his physical condition is as follows: Physically broken down from then and there unable to work or at all

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 Bartow county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this 22<sup>nd</sup> day of January, 1901. G. W. Hendricks Ordinary.

STATE OF GEORGIA,

County.

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

Given under my official signature and seal, this 22<sup>nd</sup> day of January, 1901. G. W. Hendricks Ordinary Bartow County.

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

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears H. E. Wolfe of Bartow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the            day of April, 1833; that he is 69 years old and by occupation a Carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years and 6 mos. in Company A, of 61<sup>st</sup> Regiment of Georgia; that his physical condition is as follows: Rheumatism as as to render him unable to do any kind of work.

that his property consists of the following items

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

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

Sworn to and subscribed before me, this 22<sup>nd</sup> day of January, 1902. H. E. Wolfe G. W. Hendricks Ordinary.

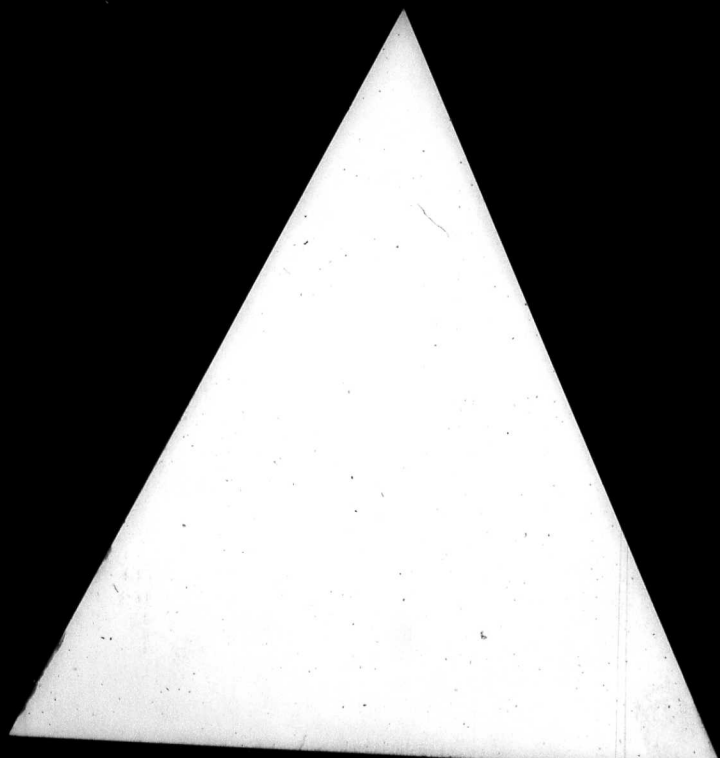
STATE OF GEORGIA,

County.

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

Given under my official signature and seal, this 22<sup>nd</sup> day of January, 1902. G. W. Hendricks Ordinary Bartow County.

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



*J. W. Womack, H.A. (Mrs.)*  
*876 Nov 1914*  
*Barlow County*

No. ....

### Widow's Application

To Be Put on Roll in Her Own Right When  
Husband Was on the Indigent Roll or  
Put on Under Act of July 11, 1910.

County *Barlow*

Name *J. A. Womack*

Widow of *W. L. Womack*

Company *O. Phil. Leggett*

Approved

J. W. LINDSEY,  
Commissioner of Pensions

CHAR. F. BYRD, State Printer, Atlanta.

*9/9-1814*

# WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Bartow County.

Personally before me comes Mrs. F. A. Womack of said County, who, after being duly sworn, on oath says, that she is the widow of MR. Womack to whom in the County of Bartow State of Ga she was married on the 18 day of Feb 1860 and that she remained his wife, and resided with him to the date of his death in Dec 31 1914 and that she has not since remarried. At the time of his death he was a resident of Bartow County, in        said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$ 60 in Bartow County for 10 per annum, on account of being a soldier in Company        Regiment. (Volunteers of State Militia.)

At the death of MR. Womack he was in the use and possession of the following property none at all of any kind of the cash value of \$       .

What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.)

Acres land	\$
Horses and Mules	\$
Hogs, Cows, etc.	\$
Total Cash value of all property	\$

That she is now a bona fide resident citizen of said County of Bartow and she has so continuously resided since one year or over 1910.

Sworn to and subscribed before me, this the 7<sup>th</sup> day of Aug 1918 Mrs. F. A. Womack Ordinary, of Bartow County.

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

STATE OF GEORGIA,

Bartow County.

Personally before me comes J. C. Goodson known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. F. A. Womack who made the foregoing affidavit, is the lawful widow of W. A. Womack who died in Bartow County in said State of Ga on 31<sup>st</sup> day of Dec 1914 and that she has not since remarried. That she became the wife of MR. Womack on the 18 day of Feb 1860 as per marriage certificate Bartow and that she and he had resided together as man and wife continuously since their marriage Feb 1860 and that the MR. Womack was the same man who was on the pension roll of said State Ga from Bartow County        when he died.

Sworn to and subscribed before me, this the 8<sup>th</sup> day of Aug 1918 J. C. Goodson Ordinary, of Bartow County.

## Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910.

County Bartow

Name F. A. Womack

Widow of MR. Womack

Company Indigent

Approved

J. W. LINDSEY,  
Commissioner of Pensions

CHAS. E. BYRD, State Printer, ATLANTA.

79-1910

# AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes \_\_\_\_\_ who after being sworn on oath says, that they are freeholders of said County, and that they know \_\_\_\_\_ of said County and knew her said husband \_\_\_\_\_ at his death on the \_\_\_\_\_ day of \_\_\_\_\_ 191 \_\_\_\_\_ that she and he were in the use, possession and control of the following property at his death to wit: \_\_\_\_\_

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

of the value of \$ \_\_\_\_\_

Sworn to and subscribed before me, this the \_\_\_\_\_

day of \_\_\_\_\_ 191 \_\_\_\_\_

Ordinary,

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

## ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, J. W. Nindorick Ordinary of said County, do certify, that, I know Mrs. F. A. Norman the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and ~~was on the~~ has lived here all her life 1914 That I also know J. O. Giverson witness as to marriage and I also know \_\_\_\_\_ who I know to be a resident free holder of said County

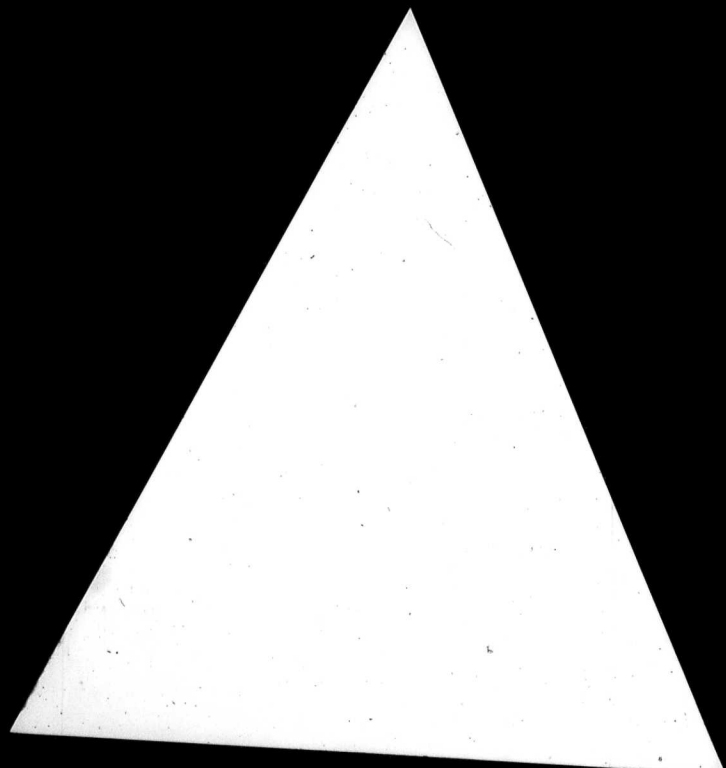
that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

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

Sworn under my hand and official seal of office this 14 day of Aug 1915 (SEAL.) J. W. Nindorick Ordinary, Bartow County.

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





POWER OF ATTORNEY.

STATE OF GEORGIA.

*Barlow* }  
Clerk

*Wm. M. Womack*  
of *Barlow* County

do hereby authorize

to receive and receipt for the pension above and request that he shall have to

Witness my hand and seal, this

24

day of

Aug

1908

at

Barlow

County

Georgia

(U. S.)

Executed in presence of

*Wm. M. Womack*  
by *Barlow*  
of *Barlow* County  
Georgia

*OK for 1909*  
*Womack, M. M.*

No. *Barlow Co*

INDIGENT PENSION.  
1908

Name *M. M. Womack*

County *Barlow*

Co. *Phil. Leg.* Regt.

Approved. 1908

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/14/08.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

*Barlow* COUNTY,  
*M. M. Womack*  
*Secy. H. Womack*

hereby authorize  
of *Cartersville Ga*

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

Witness my hand and seal, this *12th* day of *Aug* 190*8*

*M. M. Womack* [L. S.]

Executed in presence of  
*max*

# QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

*Barlow* COUNTY,  
*M. M. Womack*

of said State and County, desiring  
to avail himself of the Pension Act (Section 1284, Code), hereby submits his proofs, and after being duly sworn  
true answers to make to the following questions, depose and swear as follows:

1. What is your name and where do you reside? *(Barlow County and Porterdale)*  
*M. M. Womack, Porterdale, Barlow Co. Ga.*

2. How long have you been a resident of this State? *I have lived*  
*in Georgia since 1865.*

3. When and where were you born? *1865 in Barlow County, Ga.*

4. When and where did you enlist or serve? *May 6, 1862*  
*in Co. C. Phillips' regiment*

5. How long did you remain in said company and regiment? *From May 6, 1862*  
*to the end of the war in 1865.*

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

7. Were you present with your company and regiment when it was surrendered? *On 1st of April*

8. If not present, state specifically and clearly where you were, when you left your command for what cause and  
by whose authority? *I was in the hands of the enemy at*  
*Appomattox, Va. Captured by the enemy.*

9. How much can you earn (gross) per annum by your own exertions or labor? *nothing*

10. What has been your occupation since 1865? *Work on farm*

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty,"

second, "infirmary and poverty," or third, "blindness and poverty?" *old age & poverty*

12. If upon the first ground, state how long you have been in such condition that you could not earn your sup-  
port. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third,

state whether you are totally blind and when and where you lost your sight. *I have been*  
*unable to earn a support for the last three*  
*years*

13. What property, real and personal, or income, do you possess, and its gross value? *I have no property or income*

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what  
disposition, if any, by sale or gift, have you made of same? *I have not had*  
*any property in many years*

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

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *I*  
*have supported myself up to the present time*

17. How much did your support cost for each of those years, and what portion did you contribute toward your  
own labor or income? *I do not know. Have supported myself*

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you  
receive in each year? *I have work some on the farm*

19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-  
stead, or other property? Their ages and how employed? *I have no family now*  
*I make my home on the farm with my sons*  
*sometimes with one and sometimes the other*

20. Are you receiving any pension? If so, what amount and for what disability? *no*

21. Have you ever made an application for pension before? *no*

22. How many applications have you ever made and under what class? *One*  
*present*

Sworn to and subscribed before me this the  
day of *Aug* 190*8* *M. M. Womack*  
*John W. Lindsey* Ordinary, *max* Applicant.

of *Barlow* County.

Every Question MUST Be Answered.

INDIGENT PENSION.

1908

*M. M. Womack*  
County, *Barlow*

Co. *C Phillips*

Approved *190*

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/14/08.

*OK for 1908*  
*Womack, M. M.*

No. *Barlow Co*

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Barlow COUNTY.

N. J. McCormick of said State and County, having been presented as a witness in support of the application of M. M. Wornack for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?  
Shilesboro, Ga.
  2. Are you acquainted with M. M. Wornack, the applicant; if so, how long have you known him?  
Thirty years
  3. Where does he reside and how long and since when has he been a resident of this State?  
Near Shilesboro, Ga. ever since I have known him
  4. When, where and in what company and regiment did he enlist, and how do you know?  
May 6, 1862, Navy, U.S. Co. D. Phillips Legion
  5. Were you a member of the same company and regiment?  
Yes
  6. How long did he perform regular military duty?  
From enlistment to close of war
  7. When and where was his command surrendered?  
April 22, 1865, Okla. Territory, Ind.
  8. Were you present when it surrendered?  
I was not
  9. Was applicant present?  
He was in prison at that time
  10. If he was not present, where was he?  
He was captured.
- When did he leave his command?  
After the war For what cause?  
Disabling.
- By what authority he left?  
I was a member of the same company. How do you know all of this?  
I was a member of the same company.
11. What property, effects or income has the applicant? (Give your means of knowledge).  
Has no means of a support
  12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907.  
Has not had any in former years
- and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?  
No
  14. What is the applicant's occupation and physical condition?  
Nothing. His physical condition is such that he cannot now do manual labor of any kind
  15. Is the applicant unable to support himself by labor of any sort; if so, why?  
He is, his physical condition is such that he cannot work, not able to work for pay
  16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?  
He has managed to support himself till last year when my money ran out, if it had been he would have been able to support himself
  17. What portion of the support for these four years was derived from his own labor or income?  
None, if it had been he would have been able to support himself
  18. Give a full and complete statement of the applicant's physical condition as entitled him to a pension under Section 1254, Code.  
Old infirm, cannot stand to labor, not strong enough to work. Has no property, no one to help him
  19. Who composes family? What property have they? Children's ages and their earning capacity?  
Has no family, left homeless, poor, broken down, old and decrepit.
  20. What interest have you in the recovery of a pension by this applicant?  
None

Sworn to and subscribed before me, this 28th day of Aug, 1908.  
J. W. Anderson Ordinary.

H. J. McCormick  
Witness.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow COUNTY.

Personally came before me H. C. Ashburn and R. E. Blair, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully M. M. Wornack, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Old and infirm and is wholly unable to earn a support

and that we have no interest in said pension being allowed.  
Sworn to and subscribed before me, this 28th day of Aug, 1908.  
H. C. Ashburn Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow COUNTY.

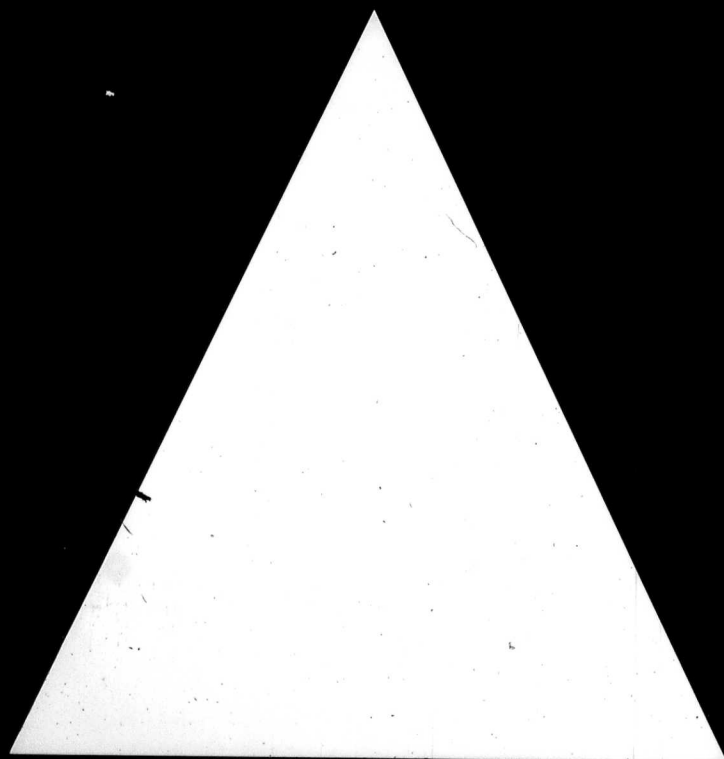
I, J. W. Anderson Ordinary, in and for said County, hereby certify that the applicant M. M. Wornack resides in said County, and has been a bona fide resident of this State since the 1st day of Aug, 1908, and that the witness, viz.: Legl. H. J. McCormick, D. C. Ashburn and H. C. Blair are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Barlow County shows that applicant returned for taxation in his name in 1901 \_\_\_\_\_ Dollars of property, and in 1902 \_\_\_\_\_ Dollars of property; in 1903 \_\_\_\_\_ Dollars of property; in 1904 \_\_\_\_\_ Dollars of property; in 1905 \_\_\_\_\_ Dollars of property; in 1906 \_\_\_\_\_ Dollars of property; in 1907 \_\_\_\_\_ Dollars of property.

In my opinion the foregoing claim is \_\_\_\_\_ made in good faith.  
Witness my hand and seal of office this 28th day of Aug, 1908.  
J. W. Anderson Ordinary.  
of Barlow County.

NOTED.  
1. Before any questions are answered, the Ordinary shall swear applicant, and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidences you shall give will be the whole truth, so help you God."  
2. Additional affidavits may be attached if blank spaces are insufficient.  
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.





Wormack, Wm R

Bartow Co

U.S. Jan 1910

# INDIGENT PENSION

1909

Name

W. R. Wormack

County

Bartow

Co.

C. Phel Signe

Approved

190

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

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

Chas. F. Eyrd, State Printer, Atlanta.

7-2809

STATE OF GEORGIA.

POWER OF ATTORNEY.

Benjamin P. Wormack

of Bartow Co

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

Witness my hand and seal, this

19

day of

Feb

1909

Benjamin P. Wormack

My M. Wormack

notarise and

(L.S.)

## STATE OF GEORGIA.

Witness my hand and seal, this 17 day of Dec 1909

Executed in presence of

# INDIGENT PENSION

1909

Name *W. R. Wornach*  
County *Barren*  
Co. *O. Phys. League*

Approved \_\_\_\_\_ 1900

JOHN W. LINDSEY,

Commissioner of Elections

WARRANT HANDED TO

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

Chas. P. Dool State Printer. Atlanta.

## STATE OF GEORGIA

Bayne 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:

1. What is your name and when do you reside? (Give State, County and Postoffice.)  
*Wm R. Wornall, Stillson Co  
 Stillson Co, Ga*
2. How long and since when have you been a resident of this State? *I have lived in Ga. forty years or more.*
3. When and where were you born? *1842, in Ga.*
4. Where and when did in what company and regiment did you enlist or serve? *May 63  
 102d. Newth Ga. Co. O. Bulley's  
 Legion*
5. How long did you remain in such company and regiment? *from enlistment  
 in 1862 till the close of the war in  
 May 1865*
6. Where and where was your company and regiment surrendered and discharged? *April  
 9, 1865, at Appomattox Va.*
7. Were you present with your company and regiment when it was surrendered? *NO*
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? *I was at home in Stillson Co. Ga. when I was discharged. I was granted a home in Stillson Co. Ga. for my services in the war. When I was discharged I was granted a home in Stillson Co. Ga. for my services in the war.*
9. How much can you earn (gross) per annum by your own exertions and for? *Nothing*
10. What has been your occupation since 1865? *Farmer*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *Age & Poverty*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. *I have not been able to earn a support in five years or more*
13. What property, real and personal, do you possess, and its gross value? *None*
14. What property, real or personal, did you possess in 1903, 1904, 1905, 1906, 1907 and 1908, and what disposition, if any, by sale or gift, have you made of same? *None*
15. In what County did you reside during those years, and what property did you then return for taxation? *Stillson Co. Ga. None*
16. How were you supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? *By my son, private sale.*
17. How much did you support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *Do not know*
18. What was your employment during 1903, 1904, 1905, 1906, 1907, 1908 and 1909? What pay did you receive in each year? *Nothing except little jobs around home*
19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? *I have a wife and grand son. They have no property or means of support except this letter*
20. Are you receiving any pension? If so, what amount and for what disability? *NO*
21. Have you ever made an application for pension before? *NO*
22. How many applications have you ever made and under what plans?

Sworn to and subscribed before me this the

day of Dec 1909

Ordinary,  
of Barton County.

*M. K. Wonnack*  
Applicant

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Barlow County, A. J. McCormick of said State and County, having been presented as a witness in support of the application of W. R. Thomas for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? A. J. McCormick  
Stilwell, Ga.

2. Are you acquainted with W. R. Thomas the applicant; if so, how long have you known him? Since 1883

3. Where does he reside, and how long and since when has he been a resident of this State? Stilwell, Ga. Since I have known him  
ing 62/1883. Now in Ga. Co. O. Phil's Reg.

When, where and in what company and regiment did he enlist, and how do you know?

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

6. How long did he perform regular military duty?

7. When and where was his command surrendered?

8. Were you present when it surrendered?

9. Was applicant present?

10. If he was not present, where was he?

When did he leave his command?

By what authority he left?

How do you know all of this?

I was in lunch with applicant. Applicant was

paroled in Ga. May 12/1865. Was feeble then

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

None

12. What property, effects or income did the applicant possess in 1903, 1904, 1905, 1906, 1907, 1908 and 1909?

None

and what disposition, if any, did he make of same?

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?

No

14. What is the applicant's occupation and physical condition?

Has no occupation now. He is physically unable to work. He is old and infirm.

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

He is because of his age and infirmities incurred in the war.

16. How was he supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909?

By his children, on principle.

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

He is hardly able to earn even \$2

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code.

He is old, infirm, and suffers from Angina pectoris.

19. Who composes family? What property have they? Children's ages and their earning capacity?

Wife and grand son. No property, means of support.

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

None

Sworn to and subscribed before me, this the

17 day of Sept 1907

J. G. Anderson Ordinary.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow County, A. J. McCormick and W. R. Thomas both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully

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

He is old, infirm, and suffers from Angina pectoris.

He is unable to earn a support for himself.

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

Sworn to and subscribed before me, this the

17 day of Sept 1907

J. G. Anderson Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County, A. J. McCormick Ordinary, in and for said County, hereby

certify that the applicant W. R. Thomas resides in said County, and has been a bona fide resident of this State since the day of May 189

and that the witnesses, A. J. McCormick and W. R. Thomas are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Barlow County shows that applicant returned for taxation in his name in 1901

Dollars of property; and in 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 1908

Dollars of property; in 1909

Dollars of property.

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

Witness my hand and seal of office, this 17 day of Sept 1907

J. G. Anderson Ordinary,

of Barlow County.

# NOTE.

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

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

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

GEORGIA, Bartow County.

I, Charles W. Womack Ordinary of said county, do certify that I personally know Mrs. Frances A. Womack the applicant, and that she is the lawful widow of W. R. Womack and was on the Pension Roll of said Bartow county, and was paid a Pension from Bartow county for 1914 and at the time of his death on the 31st day of December 1914 there was due to him and unpaid his Pension of \$1.15 Dollars from the State of Georgia, and I know J. Mc Cormick the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 5th day of April 1915.

Charles W. Womack Ordinary.  
Bartow County.

Womack, W. R.  
Bartow Co.

No. \_\_\_\_\_  
1915

Application for Pension Due  
Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

BY

Mrs. Frances A. Womack

Widow of W. R. Womack

of Bartow County

Co. D Phillips Legion

Approved and paid  
\_\_\_\_\_ 1915.

J. W. LINDSEY,  
Commissioner of Pensions.

Chas. P. Boyd, State Printer, Atlanta.

GEORGIA, \_\_\_\_\_ County.

I hereby authorize and constitute \_\_\_\_\_ of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 191\_\_\_\_, through my deceased husband, \_\_\_\_\_ who was on \_\_\_\_\_ Pension Roll and paid from \_\_\_\_\_ for 19\_\_\_\_.

Witness my hand this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_.

Attested before me: \_\_\_\_\_



# Application for Pension Due Deceased Soldier

To be paid to his widow or dependent children.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Bartow County.

Personally before me comes Mrs. F. A. Womack, of said county, after being duly sworn, on oath says that she is the widow of W. R. Womack who was duly enrolled as a Private Pensioner from the county of Bartow and was paid a Pension of \$1.00 Dollars from Bartow county for 10 4 and that the said W. R. Womack died in Alaya county on the 5 day of Dec, 1914 and at the time of his death a Pension of \$1.00 was due him from Bartow county and unpaid for 1915. Applicant further swears that she married the said W. R. Womack on the 15 day of Feb, 1880, in Bartow county and State of Fla, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 5 day of April, 1915.

George H. H. H. Ordinary.  
Bartow County.

Mrs. Frances A. Womack (L.S.)  
Fla

## AFFIDAVIT OF WITNESS.

GEORGIA, Bartow County.

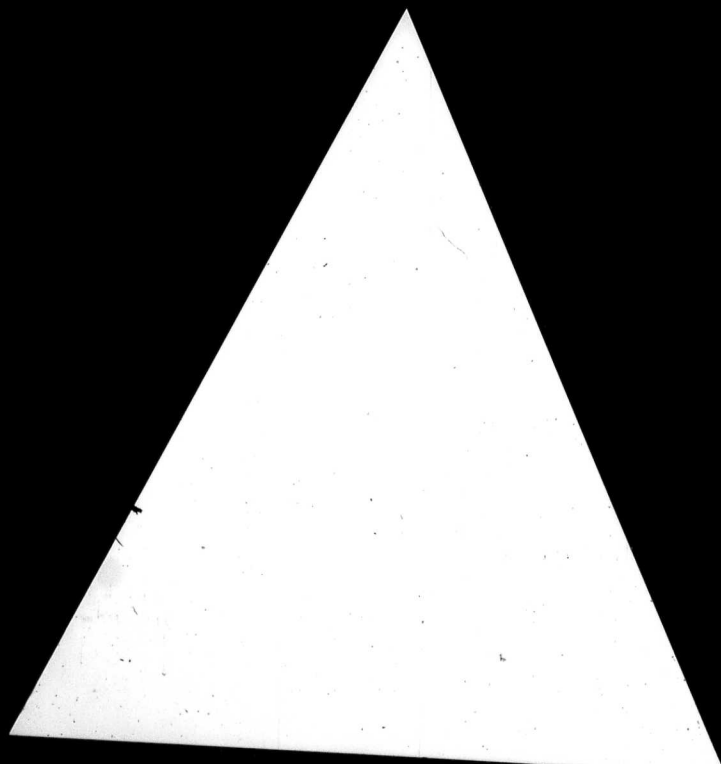
Personally before me comes H. J. McCormick who on oath says that he knew W. R. Womack while in life and that he knows his widow Mrs. Frances A. Womack the above applicant; that he knows that the said W. R. Womack and Frances A. Womack were in due form of law married in the county of Bartow in the State of Fla on the 15 day of Feb, 1880, and that they resided together as husband and wife from date of marriage to the day of his death on the 5 day of December, 1914, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 5 day of April, 1915.

George H. H. H. Ordinary.  
Bartow County.

H. J. McCormick





POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County, }

I, E. G. Wood hereby authorize  
W. M. Smith or Barlow

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

at Barlow by check

Witness my hand and seal this 11 day of August 1897.

Executed in presence of

E. G. Wood } E. G. Wood the

W. M. Smith } W. M. Smith clerk

Wood, E. G.  
 No. 1934  
Bartow

INDIGENT PENSION  
 1897.

Name E. G. Wood  
 County Bartow

Approved 7/11 1897.

WARRANT HANDED TO  
att  
 GEO. W. HARRISON, STATE PRISON, ATLANTA.

# POWER OF ATTORNEY.

# Questions for Applicant.

STATE OF GEORGIA,

Barlow County.

I, E. G. Wood hereby authorize  
G. W. Sandricks of Cartersville Ga.

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

at Cartersville Ga. by check

Witness my hand and seal this 11 day of March 1897.

Executed in presence of  
J. A. Guinn } E. G. Wood  
J. S. Goodfrey } mark

STATE OF GEORGIA.

Barlow County.

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

1. Where is your name and where do you reside? (give State, County and post office.)  
E. G. Wood, Immens Barlow county Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?  
In Floyd Co Ga, living in Georgia 1844
3. When and where were you born?  
Aug 1818, S. C.
4. When and where and in what company and regiment did you enlist or serve?  
Thurs 1862 of Barlow near Conesville Ga, in Coplane Pools company Militia
5. How long did you remain in such company and regiment?  
Till May 1864
6. For how long a period did you discharge regular military duty?  
About the year
7. When, where and under what circumstances were you discharged from service?  
Discharged May 12 1865, close of the war
8. What is your present occupation?  
Nothing
9. How much can you earn (gross) per annum by your own exertions or labor?  
Nothing
10. What has been your occupation since 1865?  
Farming
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"?  
Age & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?  
I have been for many years that I could not see to do any kind of work. I am 78 years old and, never have been blind and
13. What property, effects or income do you possess and its gross value?  
None
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?  
None

Every Question MUST be Answered.

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

16. How were you supported during the years 1895 and 1896?  
By my son in law.

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?  
I do not know

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

19. Have you a family? If so, who compose such family? Give their means of support? Have they a homestead?  
I have one family. I live with my son in law. They have no homestead

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

Sworn to and subscribed before me this the 11<sup>th</sup> day of March 1897, by E. G. Wood Applicant.  
G. W. Sandricks Ordinary  
of Barlow County.

Wood, E. G.  
No. 1934  
Barlow Ga.

INDIGENT PENSION

1897.

Name E. G. Wood  
County Barlow

Approved 7/1 1897.

WARRANT HANDLED TO  
att  
GEO. W. HARRISON, STATE TREASURER, ATLANTA.

# QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

County.

Barlow of said State and County, having been presented as a witness in support of the application of E. G. Woods for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J. A. Shinnell  
Cortus Barlow, Cortus Co
2. Are you acquainted with E. G. Woods, the applicant, if so how long have you known him? Forty years
3. Where does he reside, and how long has he been a resident of this State? Emerson Barlow Co. Ga. ever since I have known him
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Served in the Georgia militia  
I served with him
5. When, where, and in what company and regiment did he enlist? Spring of 1862  
near Charlottesville Ga. Pools Company
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He served something over a year. He was discharged at Kingston Ga. May, 1865, at close of war
8. What property, effects or income has the applicant? (Give your means of knowledge.) Has no property or income
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? none at all

10. What is the applicant's occupation and physical condition? He has none  
He is worn out from old age.  
He is very old and quite infirm
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is, because he is worn out from old age more than any thing else
12. How was he supported during the years 1895 and 1896? Do not know  
but know that he could not earn it himself
13. What portion of his support for these two years was derived from his own labor or income? I do not know
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is simply worn out from age. He is very feeble, and I think it is only from old age
15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this 7th day of Nov 1897. J. A. Shinnell  
the 7th day of Nov 1897. G. W. Shinnell Ordinary.

# AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me Dr. F. R. Calhoun and A. B. Calhoun, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully E. G. Woods, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

Nervous & with some Catarrh  
framing in both eyes. He is  
quite old and is physically  
unable to do much of any  
kind.

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

Sworn to and subscribed before me, this 11 day of Nov 1897. F. R. Calhoun  
A. B. Calhoun Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, G. W. Shinnell, Ordinary in and for said County, hereby certify that the applicant E. G. Woods resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz. John A. Shinnell are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Barlow County show that applicant returned for taxation in his name in 1895, nothing dollars of property, and in 1896, nothing dollars of property.

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

Witness my hand and seal of office, this 7th day of Nov 1897. G. W. Shinnell Ordinary  
of Barlow County.

# NOTE.

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

# POWER OF ATTORNEY.

State of Georgia.

Barlow County.

I, E. G. Wood hereby authorize

Amiricks of Cartersville Ga

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

by Chick

at Cartersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10<sup>th</sup>

day of January 1898.

E. G. Wood [L. S.]  
mark

Executed in presence of

W. H. Cunningham  
W. S. Spivey

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, E. G. Wood hereby authorize

Gold Kendrick of Barlow

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

me at Emerson

by

Witness my hand and seal this 21 day of January 1899.

Executed in presence of

John H. Cobb } E. G. Wood (L. S.)  
mark

Wood, E. G.  
Barlow Co  
ACT OF 14 DEC., 1864.  
(For Those Already Enrolled.)  
NO. 2318

INDIGENT

SOLDIER'S PENSION,  
1898.

Name E. G. Wood  
County Barlow

WARRANT ISSUED

1/21 1898

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

W. S. Spivey  
SEC. W. HARRISON, STATE PRINTER, ATLANTA.

No date

Wood, E. G.  
Barlow County  
ACT OF 14 DEC., 1864.  
(For Those Already Enrolled.)

INDIGENT

SOLDIER'S PENSION,  
1899.

Name E. G. Wood  
County Barlow

WARRANT ISSUED

1/20 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

Gold Kendrick  
Geo. W. HARRISON, STATE PRINTER, ATLANTA.

No date



# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow

County.

Personally appears

E. G. Wood

of

Barlow

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Octo 1844; that he is 78 years old and by occupation a       , that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States, and served for the term of 3 yrs in Company Commanded by B. J. Fort of the militia; that his physical condition is as follows: he is almost totally helpless from age and is body ruptured

that his property consists of the following items none

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

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

Sworn to and subscribed before me, this, the

day of Jan 1898.

Ordinary.

State of Georgia,

Barlow

County.

I,

G. W. Hendricks

Ordinary of said County,

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

Given under my official signature and seal, this

day of Jan 1898.

Ordinary

Barlow

County.



NOTE.—The blank spaces must be filled.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow

County.

Personally appears

E. G. Wood

of

Barlow

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Oct 1844; that he is 79 years old and by occupation Mason; that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States, and served for the term of 1 year in Company       , of       th Regiment of the 1st Regt. Gen. John C. Home Guards; that his physical condition is as follows: Suffers from Rupture. Has Cataract in both eyes almost blind

that his property consists of the following items.

House and goods.

of the value of 2000 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this, the

day of Jan 1898.

Ordinary.

State of Georgia,

Barlow

County.

I,

G. W. Hendricks

Ordinary of said County,

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

Given under my official signature and seal, this

day of Jan 1898.

Ordinary

Barlow

County.



NOTE.—The blank spaces must be filled.  
NOTE.—Affidavit should not be attested before January 1st, 1899.

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, E. H. Wood hereby authorize  
W. H. Hendricks of Cartersville Bartow County  
to receive and receipt for the pension allowed, and request that he remit same to  
me at Cartersville  
by \_\_\_\_\_

Witness my hand and seal, this 18<sup>th</sup> day of January 1900.

E. H. Wood [L. S.]  
mark

Executed in presence of

W. H. Hendricks

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, E. H. Wood hereby authorize W. H. Hendricks  
Ordry of Cartersville, Ga.  
to receive and receipt for the pension allowed and request that he remit same to  
L. D. Godfrey at Cartersville, Ga.  
by hand

Witness my hand and seal, this 17 day of January 1901.

E. H. Wood [L. S.]  
mark

Executed in presence of

Alma Hendricks

CODE REG. 1284.

(For Those Already Enrolled.)

NO. 2166

INDIGENT

SOLDIER'S PENSION,  
1900.

Name E. H. Wood  
County Bartow

WARRANT ISSUED

January 20 1900.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Hendricks  
Geo. W. Harrison, State Printer, ALABAMA

No date

CODE SECTION 1284

(For Those Already Enrolled.)

No. 1198

INDIGENT

SOLDIER'S PENSION.  
1901.

Name E. H. Wood  
County Bartow

WARRANT ISSUED

1129 1901.

JOHN W. LINDSEY,  
Commissioner of Pensions.

WARRANT HANDED TO

Hendricks  
Geo. W. Harrison, State Printer, ALABAMA

No date

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears E. G. Wood 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 31<sup>st</sup> day of October 1844; that he is 82 years old and by occupation a woodman; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 1 year in Company 100<sup>th</sup> of 100<sup>th</sup> Regiment of Infantry; that his physical condition is as follows: Bad - He is ruptured, has cataracts on the eyes. He is unable to get about from old age

that his property consists of the following items:

Has none

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Bartow county been allowed a pension for the year 1892-5-9

Sworn to and subscribed before me, this, 15<sup>th</sup> day of January 1900, E. G. Wood Ordinary.

State of Georgia,

Bartow County.

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

Given under my official signature and seal, this 15<sup>th</sup> day of January 1900.

Ordinary W. H. Lindricks Bartow County.

File your seal here.

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

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears E. G. Wood 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 31<sup>st</sup> day of October 1844; that he is 83 years old and by occupation a woodman; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 1 year in Company 100<sup>th</sup> of 100<sup>th</sup> Regiment of Infantry; that his physical condition is as follows: ruptured, nearly blind from cataract on eye, health gone.

that his property consists of the following items: no property

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

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

Sworn to and subscribed before me, this, 17 day of January 1901, E. G. Wood Ordinary.

STATE OF GEORGIA,

Bartow County.

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

Given under my official signature and seal, this 18<sup>th</sup> day of January 1901.

Ordinary W. H. Lindricks Bartow County.

File your seal here.

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

# POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, E. G. Wood hereby authorize George W. Lindsey  
Neville of Bartowville Ga  
 to receive and receipt for the pension allowed and request that he remit same to  
me at Bartowville Ga  
 by Chen

Witness my hand and seal, this 17 day of Jan 1902.  
E. G. Wood [L. S.]  
Mark

Executed in presence of

Wood, E. G.  
Bartow County

(FOR THOSE ALREADY ENROLLED.)

No. 3227

INDIGENT  
 SOLDIER'S PENSION  
 1902.

Name E. G. Wood  
 County Bartow  
 Co. 100 Reg Co 36  
in miles

WARRANT ISSUED  
1/31 1902.

JOHN W. LINDSEY,  
 Commissioner of Pensions.

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

No date



# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears

E. G. Wood

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 31 day of Oct 1844; that he is 84 years old and by occupation a man that he enlisted in the military service of the Confederate States (or of the State of \_\_\_\_\_) during the war between the States, and served for the term of 15 years in Company E of the 1st Regiment of Georgia Infantry that his physical condition is as follows: Satisfactory

that his property consists of the following items

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

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

Sworn to and subscribed before me, this the

17 day of Jan 1902.

Ordinary.

STATE OF GEORGIA,

Barlow County.

I,

W. G. Wood

Ordinary of said County,

do certify that I am well acquainted with E. G. Wood 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 \_\_\_\_\_ 1902.

Ordinary

Barlow

County.



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