

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County. }

I, S. B. Yancy hereby authorize George W. Nudrick of Bartowville Ga to receive and receipt for the pension allowed and request that he remit same to me at Bartowville Ga by OK

Witness my hand and seal, this 15 day of July 1903. S. B. Yancy [L. S.]

Executed in presence of
G. W. Cobb
N. P. J. H.

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 5698

INDIGENT

**SOLDIER'S PENSION
1903.**

Name S. B. Yancy

County Bartow

Co. Ba 1st Regiment 36

WARRANT ISSUED

20 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

C
Gen. Harrison, State Printer, Alabama.

no data

Yancy, S. B.
Bartow Ga

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 2323

INDIGENT

**SOLDIER'S PENSION
1904.**

Name S. B. Yancy

County Bartow

Co. Ba 1st Regiment 36

WARRANT ISSUED

2/9 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

OK
Gen. W. Harrison, State Printer, Alabama.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County. }

I, S. B. Yancy hereby authorize George W. Nudrick of Bartowville Ga to receive and receipt for the pension allowed and request that he remit same to me at Bartowville Ga by OK

Witness my hand and seal, this 13 day of Jan 1904. S. B. Yancy [L. S.]

Executed in presence of
J. R. Anderson
Bartowville Ga

CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 2323

INDIGENT

**SOLDIER'S PENSION
1904.**

Name S. B. Yancy

County Bartow

Co. Ba 1st Regiment 36

WARRANT ISSUED

2/9 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

OK
Gen. W. Harrison, State Printer, Alabama.

no data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County.)

Personally appears S. B. Yancy 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 30 day of Nov 1884; that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 yrs in Company d, of 36th Regiment of Ca. Vols Inf.; that his physical condition is as follows: Has catarrh of head, throat and lungs. Condition bad

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 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 15 day of Jan 1903. 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 S. B. Yancy the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15th day of Jan 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 S. B. Yancy 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 30 day of Nov 1884; that he is 69 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 d, of 36th Regiment of Ca. Vols Infantry; that his physical condition is as follows: Has Catarrh of head and throat in a very bad condition

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this 15 day of Jan 1904. 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 S. B. Yancy the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 15th day of Jan 1904. G. W. Hendricks

Ordinary Bartow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

I, S. B. Yancy hereby authorize
Effie Hendricks of Lebanonville Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Lebanonville Ga
by EH

WITNESS my hand and seal, this 24 day of Jan 1905.

Executed in the presence of

S. B. Yancy [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

I, S. B. Yancy hereby authorize
Effie Hendricks of Lebanonville Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Lebanonville Ga
by EH

WITNESS my hand and seal, this 24 day of Jan 1906.

Executed in the presence of

Effie Hendricks

S. B. Yancy [L. S.]

Yancy, S. B.
Barlow County

CODE SECTION 1524.
(FOR THOSE ALREADY ENROLLED.)

No. 3580

INDIGENT SOLDIER'S PENSION 1905.

Name S. B. Yancy
County Barlow
Co. D. 36 Regiment Ga

1905

WARRANT ISSUED

FEB 7 1905.

JOHN W. LINDSEY,
Commissioner of Prisons.

WARRANT HANDED TO

Geo. W. HARRISON, MANAGER, FOR STATE PRISON, ATLANTA.

no date

Yancy, S. B.
Barlow Co.

CODE SECTION 1524.
(FOR THOSE ALREADY ENROLLED.)

No. 2116

INDIGENT SOLDIER'S PENSION 1906.

Name S. B. Yancy
County Barlow
Co. D. 36 Regiment Ga

WARRANT ISSUED

JAN 29 1906.

JOHN W. LINDSEY,
Commissioner of Prisons.

WARRANT HANDED TO

Geo. W. HARRISON, MANAGER, FOR STATE PRISON, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County.

Personally appears S. B. Yancy 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 20 day of Nov 1884; that he is 70 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 yrs in Company D, of 36th Regiment of Ga. Vol. Inf.; that his physical condition is as follows: His physical condition is bad from Chronic Catarrh &c

that his property consists of the following items:

of the value of nothing Dollars. I am now earning, by my labor, nothing Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 24 day of Jan 1905. G. W. Andriess Ordinary.

STATE OF GEORGIA,

Bartow County.

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

Given under my official signature and seal, this 24 day of Jan 1905. G. W. Andriess Ordinary Bartow County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Bartow County.

Personally appears S. B. Yancy 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 _____ 1884; that he is 70 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 yrs in Company D, of 36th Regiment of Ga. Vol. Inf.; that his physical condition is as follows: Has Catarrh of the head and disease of the throat and lungs

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this 24 day of Jan 1905. S. B. Yancy G. W. Andriess Ordinary.

State of Georgia,

Bartow County.

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

Given under my official signature and seal, this 24 day of Jan 1905. G. W. Andriess Ordinary Bartow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

I, Barlow COUNTY, 1, hereby authorize
S. B. Yancy 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 18 day of Jan 1807.

Executed in presence of

[L. S.]

Yancy, S. B.
Cartersville Ga

(FOR THOSE ALREADY ENROLLED)

Camp Record 1864.

No. 382

INDIGENT
 SOLDIER'S PENSION
 1907.

Name S. B. Yancy
 County Barlow
 Co. 1 Regiment 36

WARRANT ISSUED

18 JAN 1807.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Barlow County,

Personally appears S. B. Yancy 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 _____ 1874; that he is 72 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 yrs in Company D, of 86th Regiment of U. S. Col Inf; that his physical condition is as follows: He is in bad health from
Catarh of head and lungs

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 18 day of Jan 1907, S. B. Yancy
G. W. Hendricks Ordinary.

State of Georgia,

Barlow County,

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

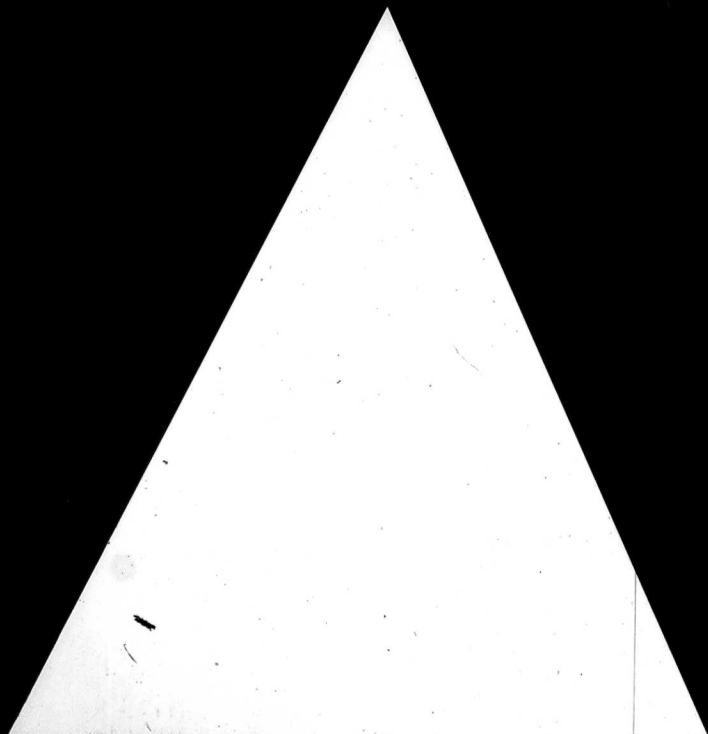
do certify that I am well acquainted with S. B. Yancy the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this 18th day of Jan 1907.

G. W. Hendricks
Ordinary Barlow County.



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



POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County, }

James W. Garbrough hereby authorizes
Edmund of Waverlyville Ga

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

at

by

Witness my hand and seal this 13th day of May 1896.

Accepted & Assented of

Edmund Garbrough
J. D. Murphy

Garbrough James W.
100 N. Barton
No. 123

INDIGENT PENSION

1895.

Name James W. Garbrough

County Barton

Ground Age, Infir., poor
June 1st
May 1st 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Atty

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

James W. Garbrough hereby authorize
G. W. Henderson of *Cartersville Geo*

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

at

by

Witness my hand and seal this *13th* day of *May* 1895.

Executed in presence of

R. S. Anderson
J. J. Murphy } *James W. Garbrough*

INDIGENT PENSION

1895.

James W. Garbrough
Barlow
County

G. W. Henderson
June 12th
1895

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDSD TO

at

Geo. W. Harrison, State Printer, Atlanta.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow County.

Personally came before me *J. H. Clalhoum* and

A. G. Clalhoum, both known to me as reputable physicians

of said county, who being severally sworn, say on oath that they have examined carefully *James W. Garbrough*, applicant for pension under the Act of 1894, and after

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

He is very deaf and physical strength much impaired. On the right side he has had for the last seven or eight years Inguinial Abscesses which at times give him much trouble. About six years ago he received a fall from a barn loft from which he sustained an injury to the hip joint, which necessitated the use of crutches for about one year, but he has suffered more or less pain ever since.

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 *2nd* day of *May* 1895. *J. H. Clalhoum* M. D.

G. W. Henderson M. D. *A. G. Clalhoum* M. D.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Barlow County.

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

the applicant, James W. Garbrough, 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:

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

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

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

Witness my hand and seal of office, this 24 day of May, 1895.

E. W. Hendricks
Ordinary
of Barlow County.

NOTE.

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

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

Farmer
He is old and infirm - is very
hard of hearing - and Physically
worn out.

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

We think ~~that~~ he is unable to support
himself on account of his age
infirmity, deafness and physical
condition generally.

12. How was he supported during the years 1893 and 1894?

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

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

He is old and worn
out - ~~hard of hearing~~ - infirm and is phys-
ically unable to make living for
himself, and is compelled to have
assistance from some source for
he has no property nor income.

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

None

Sworn to and subscribed before me, this

the 10th day of May, 1895.

J. H. Colby
Notary Public.

J. H. Hendricks Witness
W. B. Mitchell Witness
W. B. Mitchell Witness
W. B. Mitchell Witness

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Cobb County.

J. V. Alexander, N. H. Mitchell of said State and County, having been presented as a witness in support of the application of James W. Garbrough 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. V. Alexander, N. H. Mitchell
Marietta Cobb Co. Ga. J. W. Hardy
2. Are you acquainted with James W. Garbrough, the applicant, if so how long have you known him? Yes for 44 years
3. Where does he reside, and how long has he been a resident of this State? In Bartow County Ga. for 44 years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? He served in Ga Militia
I was 2nd Lieut in the same company
1st 1861 - In Cobb Co. - Co "E" 7th Ga Militia
5. When, where and in what company and regiment did he enlist? Enlisted Oct.
1st 1861 - In Cobb Co. - Co "E" 7th Ga Militia
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? Six months
was good soldier - was discharged
about 1st April 1862 our term of
enlistment having expired
8. What property, effects or income has the applicant? (Give your means of knowledge.) None to the best of our knowledge
by being acquainted with him for
years and seeing and being with him frequently
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

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Bartow County.

James W. Garbrough 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) James
W. Garbrough, Bartowville Bartow Co. Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Bartowville Ga. for more than 40 years
3. When and where were you born? Sept. 1st 1824, Henry Co. Ga.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Militia
5. When and where did you enlist? Oct 1861, Cobb Co. Ga.
6. In what company and regiment did you enlist? Co. "E" 7th Regt.
7. How long did you remain in that company and regiment? Six months
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
9. For how long a period did you discharge regular military duty? Six months
10. When, where and under what circumstances were you discharged from service? I was
discharged about April 1st 1862, having
served out my enlistment of six months. near
11. What is your present occupation? Farming
12. How much can you earn per annum by your own exertions or labor? I might earn
in twelve months at light work, \$30 or
thirty dollars.
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 there, either in labor or income? One Hundred dollars.
I might earn 30 dollars, I have no income.

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

Barlow County

None

21. How were you supported during the years 1893 and 1894?

By what little I could earn and by the aid of my son.

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? ~~Kept no account, Cannot therefore~~
Cannot tell how economical. I suppose
what I did would have been worth thirty
dollars per annum

23. What was your employment during 1893 and 1894? What pay did you receive in each year?

Helped my son on the farm

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

Give age and sex of children and their means of support? ~~My wife died a few~~
days ago. I have a single daughter who with
my lives with my son. She is an afflicted
daughter, not able to do any work. My son
has three little girls. His wife is dead also

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
G. W. Hendricks
of Barlow

1895. } Jas. W. Carlbrough
Applicant.

Ordinary

County.

15. What is your present physical condition and how long have you been in such condition? ~~I am~~

suffering from Catarrh. My hearing is very
much impaired. I have been suffering
with Hernia for eight years. I fell
from a barn loft 1889. And injured my
left hip and knee. My hip hurts me yet
and prevents ease of walking. I am
feeble from age, being now in my seventy-
first year. And while I do work some it is with
constant pain. I acknowledge that I am
wearing out from age.

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 and~~
poverty and infirmity also

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? ~~See~~

answer to 15th question

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~~

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County. }
J. W. Garbrough hereby authorize G. W.
Hendricks of Cartersville Ga
 to receive and receipt for the pension paid hereon and request that he remit same to
me by check
 at Cartersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15
 day of July 1897. J. W. Garbrough [L. S.]

Executed in presence of

J. W. Garbrough
chancelor

POWER OF ATTORNEY.

State of Georgia,

Barlow County. }
 I J. W. Garbrough hereby authorize H. W. Hendricks
Ordinary of Barlow County
 to receive and receipt for the pension paid hereon and request that he remit same to
me by mail
 at Cartersville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 11th
 day of January 1898. J. W. Garbrough [L. S.]

Executed in presence of

J. H. Stanford
H. W. Hendricks

Garbrough, J. W.
Barlow G.
ACT OF 13 DEC., 1894.
 (For Those Already Enrolled.)
 No. 1732
 INDIGENT
 Soldier's Pension.
1897.
 Name J. W. Garbrough
 County Barlow
2/3 1897.
 RICHARD JOHNSON,
Commissioner of Pensions.
 WARRANT HANDLED TO
G. W. H.
REG. W. HARRISON, STATE PRINTER, ATLANTA.
No data

Garbrough, J. W.
Barlow Co.
ACT OF 13 DEC., 1894.
 (For Those Already Enrolled.)
 No. 2320
 INDIGENT
 SOLDIER'S PENSION,
1898.
 Name J. W. Garbrough
 County Barlow
 WARRANT ISSUED
4/21 1898.
 RICHARD JOHNSON,
Commissioner of Pensions.
 WARRANT HANDLED TO
G. W. H.
REG. W. HARRISON, STATE PRINTER, ATLANTA.
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears J. W. Yarbrough 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 birth except five yrs; that he is 73 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of six months in Company E, of 4th Regiment of Georgia Volunteers; that his physical condition is as follows: suffering with rheumatism, now has cancer worn out and frail from age, almost deaf that his property consists of the following items Nothing

of the value of Nothing Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this, the 5th day of January 1897. J. W. Yarbrough Ordinary.

STATE OF GEORGIA,

Bartow County.

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

Given under my official signature and seal, this 15th day of January 1897.



G. W. Shudricks Ordinary Bartow County.

NOTE—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears J. W. Yarbrough 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 fourth day of September 1824; 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 six months in Company E, of 4th Regiment of Georgia Volunteers; that his physical condition is as follows: Entirely deaf, blind in one eye and is perfectly helpless that his property consists of the following items Has 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 1898. I have heretofore as a resident of Bartow county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the 11th day of January 1898. J. W. Yarbrough Ordinary.

State of Georgia,

Bartow County.

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

Given under my official signature and seal, this 11th day of January 1898.



G. W. Shudricks Ordinary Bartow County.

NOTE—The blank spaces must be filled.

PROBATE COURT.

OFFICE OF

J. M. STONE, Judge.

ORDINARY COBB COUNTY.

Marietta, Ga.

189

I J. M. Stone Ordinary of
Cobb County do hereby certify
that J. F. Alexander, Rison G.
Mitchell and Sandy K. Hamby
are residents of Cobb County
and as witnesses are worthy
of full faith and credit
as such witnesses to wit-
nesses to this application for pension
as attached.

Witness my official sig-
nature and seal of Office
This 10th day of May 1895.

J. M. Stone
Ordinary.



Yeowood, T. L.

Barton Co.

No. 426

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING, OCT. 25, 1889.

FOR

Loss of Right Leg

Applicant T. L. Yeowood

County Barton

Amount 160

Date of Warrant Feb 12/89

Entered on Record,

Feb 12 1889

M. H. H.
SECRETARY EXECUTIVE DEPARTMENT.

W. M. Monte

Yeeewood, T. D.

Barton Co.

No. 426

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING, OCT. 25, 1889.

FOR
Sawyer & Co.
Applicant T. D. Yeeewood

County Barton

Amount \$100.

Date of Warrant Feb 12/89.

Entered on Record

Feb 12/89

SECRETARY EXCISES DEPARTMENT.

W. M. Glute

STATE OF GEORGIA,

Barton County.

PERSONALLY appears T. D. Yeeewood of Barton county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continuously since the 19th day of September 1862, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company H, of 17th Regiment of Georgia Volunteers, Acchle's Brigade; that whilst engaged in such military service, at the battle of Cedar Run in the State of Virginia, on the 9th day of August 1862, he was wounded as follows: Shot through right knee which wound necessitated the amputation of the right leg in the middle third of the thigh.

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

Sworn to and subscribed before me, this 8th day of Feb., 1889, J. S. Yeeewood

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

STATE OF GEORGIA,

Barton County.

PERSONALLY comes before me Ordinary of said county, and both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined and after such examination say that the applicant has been injured as follows:

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

ORDINARY.

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

STATE OF GEORGIA,

STATE OF GEORGIA

Bartow County, }
G. S. Yearwood
 Ordinary of said county,
 do certify that I am well acquainted with *G. S. Yearwood*, the
 applicant in the foregoing affidavit, and am well satisfied that the statements made by him
 in his said affidavit are true, and that he is disabled to the extent he claims; and I know he is
 the individual he represents himself to be, and that he resides in this county. I also certify
 that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief.

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

Given under my official signature and seal, this 8 day of Feb 1889

G. S. Yearwood
 Ordinary *Bartow* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County, }

KNOW ALL MEN BY THESE PRESENTS, That I, *G. S. Yearwood*

of *Bartow*

county in said State, do hereby appoint *A. M. Foute*
 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 entitled
 to from the State of Georgia by reason of the injury received as aforesaid in the military service
 of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
 authorizing my said attorney to receipt in my name for any Warrant that may be issued by
 the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
 In witness whereof I have hereunto set my hand and seal, this 8th day of February 1889.

Executed in the presence of us:

G. S. Anderson
G. S. Yearwood
Ordinary Bartow Co

DIRECTION:

Send money to me as follows, by

A. M. Foute
 to *Cortsville* P.O.

Bartow

County, Georgia

G. S. Yearwood

Mark

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of fact showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

Audited

Feb. 12 1889.

Wm. Amodeo
COMPTROLLER-GENERAL.

Barton

Maimed Soldiers.

Voucher No. 426.

Amount. \$ 100.

Paid to J. L. Yearwood

For Loss of Right

Leg

Feb. 12 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK.

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

A. M. Monte

Audited

18

COMPTROLLER-GENERAL.

Barton

Maimed Soldiers.

Voucher No. 396.

Amount \$ 100

Paid to J. L. Yearwood

For Loss of

Leg

Feb. 6 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK.

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

A. M. Monte

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 426,

Atlanta, Ga. Feby 12 1889

Mr. J. L. Yearwood of the County
of Barton, having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,

Dec. 24, 1888, and the same having been allowed for

Right Leg amputated
He is entitled to receive the sum of One Hundred & 00/100 Dollars

for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor,

J. M. Gordon
GOVERNOR.

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,

per above voucher, this 12 of Feby, 1889.

A. M. Fouts atty in fact
for J. L. Yearwood.

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

No. 396

Atlanta, Ga., Feby 6 1890

Mr. J. L. Yearwood of the County
of Barton, having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,

approved, Dec. 24, 1888, and the same having been examined and allowed for

Loss of leg
He is entitled to receive the sum of One Hundred Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor,

J. M. Gordon
GOVERNOR.

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/100 Dollars,
per above voucher, this 6 of Feby, 1890

J. L. Yearwood, by his
att'y in fact, A. M. Fouts.

Georgia - Benton County.

To His Excellency, the Hon. Allen D. Boudle,
Governor of Ga.

The undersigned would respectfully submit
to Your Excellency the following facts:

To-wit: One Thomas D. Yearwood a former
Citizen of said County, departed this life on
the 1st day of November 1901 in said county;
that said Yearwood was a one-legged con-
federate soldier drawing a pension of
one hundred dollars; that at the time of
his death there was due him from said state
the said sum of one hundred dollars; that the
said Yearwood left a dependent minor
child aged 5 years; that the undersigned
presents this petition to your Excellency as
prescribed by law in section 1267 of the
first volume of the Code of Georgia, affir-
ming hitherto the sworn facts of the above
stated facts and respectfully pray Your
Excellency to pay to the undersigned the
above stated amount for the benefit of
said minor child &c.

Respectfully Submitted
Geo W. Hendricks Ordinary Benton
County Georgia.

Audited Feb. 10 1891.

Wm A. Smith
COMPTROLLER-GENERAL.

Yearwood, T. D.

1891.

Maimed Soldiers.

Voucher No. 430

Amount \$ 100

Paid to T. D. Yearwood
For Loss of leg

July 10 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

John W. Harrison, State Printer, Atlanta.

Apparent

Georgia Personally appeared before
Barlow County, me. F. M. Willis and E. H.
Rendley, both known to me to be reputable
Citizens of said County, and after being
sworn on oath say that they were both per-
sonally acquainted with Thomas S. Year-
wood, late of said County, now deceased;
that the said Thomas S. Yearwood was at
the time of his death a Confederate pension-
er in the invalid roll of pensioners; that the
said Yearwood had been drawing a
pension of one hundred dollars for loss of
leg in the Confederate Service; that said
Yearwood died November 11th 1901, in
said County leaving a poor dependent
child aged 5 years now residing in
said County

F. M. Willis
E. H. Rendley

Sworn to and subscribed before me
this January 20th 1902.

G. W. Hendricks Clerk
Barlow County Ga.

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

1891.
No. 430

Atlanta, Ga. Feb 10 1891.

Mr. T. S. Yearwood of the County
of Barlow having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Loss of leg
He is entitled to receive the sum of One hundred Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor,

W. J. Nathan
GOVERNOR.

Sec'y EXECUTIVE DEPARTMENT.

\$ 100

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

One Hundred and no/100 Dollars,
per above voucher, this 10 of Feby 1891.

R. C. Irwin

T. S. Yearwood
Clerk

STATE OF GEORGIA,

Barlow County.
I, *Adm. Hudnicks* Ordinary of said county,
do certify that I am well acquainted with *J. L. Yearwood* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and that he is disabled, to the extent he claims, and I know
he is the individual he represents himself to be, and that he resides in this county.

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

Given under my official signature and seal, this *5th* day of *Feb* 189*0*
Adm. Hudnicks
Ordinary *Barlow* County.

STATE OF GEORGIA,

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

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

Given under my official signature and seal, this *9* day of *Feb* 189*1*.
Adm. Hudnicks
Ordinary *Barlow* County.

1890.

No. *396*

APPLICATION FOR ALLOWANCE.

FOR THIS DEPARTMENT ISSUED IN 1901.

Law of leg
Applicant, *J. L. Yearwood*
County, *Barlow*
Amount, *100*
Date of warrant, *July 6 1890*

Entered on record

July 6 189*0*

W. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

A. H. H.

No additional data

1891.

Application for Allowance

FOR THIS DEPARTMENT ISSUED IN 1901.

Law of leg
Applicant, *J. L. Yearwood*
County, *Barlow*
Amount, *100*
Date of warrant, *July 10*

Entered on record

July 10 1891

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

W. H. H.
GEO. W. HARRISON, State Printer, Atlanta, Ga.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears T. L. Jeannard of Bartow county,

State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the 19th day of

Sept 1842; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served as a private in Company 16, of 19th Regiment of Georgia Volunteers Archies's Brigade; that whilst engaged in

such military service, at the battle of Cedar Run in the State of Virginia, on the ninth day of August 1862, he was

wounded as follows: shot through right knee and right arm at middle portion of the thigh

and ligatured at middle portion of the thigh

W
R

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

Sworn to and subscribed before me, this 1st day of Feb, 1890 T. L. Jeannard Mark X
Edw. H. H. Ordway

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

POWER OF ATTORNEY.

STATE OF GEORGIA

Bartow County.

KNOW ALL MEN BY THESE PRESENTS, That I, T. L. Jeannard

county, in said State, do hereby appoint Hen. H. H. Ordway A. M. Houte

of Atlanta Ga my true and lawful attorney in fact, for

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of Feb, 1890

Executed in the presence of us: T. L. Jeannard Mark X [L. S.]

J. H. Walker
Edw. H. H. Ordway

DIRECTION

Send money to me as follows, by

to Bartow County, Georgia.

P. O.

T. L. Jeannard Mark X

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears T. L. Jeannard of Bartow County,

State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 19th day of Sept 1842; that he enlisted in the military service of the Con-

federate States (or of the State of) during the war between the States, and served as a private in Company 16, of 19th Regiment of Ga Volunteers Archies's Brigade; that whilst engaged

in such military service at the battle of Cedar Run in the State of Virginia, on the 9 day of Aug, 1862, he was

wounded as follows: shot through the right knee with a minnie ball the result of which wound was the amputation of the right leg above the knee

and ligatured at middle portion of the thigh

W
R

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of \$100 dollars, for 1889-1890

Sworn to and subscribed before me, this 1st day of Feb, 1891 T. L. Jeannard
Edw. H. H. Ordway

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

Know all Men by these Presents, That I, T. L. Jeannard

of Bartow County, State of Georgia, do hereby appoint

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 by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of Feb, 1891

Executed in the presence of us: T. L. Jeannard [L. S.]

J. H. Walker
Edw. H. H. Ordway

DIRECTION

Send money to me as follows, by

to Bartow County, Georgia.

P. O.

STATE OF GEORGIA,

Bartow County.

I, J. H. Neudick Ordinary of said county, do certify that I am well acquainted with Thos. L. Yearwood the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this 4 day of March 1892.

J. H. Neudick

Ordinary. Bartow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

Know all Men by these Presents, That I J. L. Yearwood of Bartow County, State of Georgia, do hereby appoint 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 by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4 day of March 1892.

Executed in the presence of us:

J. H. Neudick Ordinary.

Send money to me as follows, by Express to Bartow County, Georgia.

J. L. Yearwood his mark

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name J. L. Yearwood
County Bartow
Disability Loss of leg
Amount \$ 10.00
Entered on record March 5 1892.
W. H. HARRISON,
Scriber of Disability Department.
AGENT.
affiliated
Geo. W. Harrison, State Printer, Atlanta, Ga.

Yearwood, J. L.

Bartow Co

1893.

Application for Allowance

No. 122
For the Year Ending October 31, 1892.
Applicant J. L. Yearwood
County Bartow
Amount 10.00
Date of Warrant 3/22
Entered on record 3/22
W. H. HARRISON,
Scriber of Disability Department.
AGENT.
J. L. Yearwood
Geo. W. Harrison, State Printer, Atlanta, Ga.

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears Hos L. Yearwood of Bartow County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the 19 day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company H of 19 th Regiment of Volunteers Archers's Brigade; that whilst engaged in such military service at the battle of Cedar Run in the State of Virginia, on the 9 day of Aug 1862, he was wounded as follows: Shot through right knee and leg amputated above the knee

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of

One Hundred Dollars for Sept yrs
Sworn to and subscribed before me this 19 day of March 1892, J. W. Rudnick Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

Know all Men by these Presents, That I,

County, in said State, do hereby appoint

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

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

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

PERSONALLY appears J. L. Yearwood of Bartow County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19 day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company H, of 19 th Regiment of Volunteers Archers's Brigade; that whilst engaged in such military service at the battle of Cedar Run in the State of Virginia, on the 9 day of Aug 1862, he was wounded as follows: Shot through right knee and leg amputated above the knee

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of

One Hundred dollars, for Sept yrs
Sworn to and subscribed before me, this, the 20 day of March 1893, J. W. Rudnick Ordinary.

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

STATE OF GEORGIA,

Bartow County.

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

I further certify that before whom the foregoing affidavit was made, and power of attorney was signed, is a _____ of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 20 day of March 1893, J. W. Rudnick Ordinary Bartow County.

STATE OF GEORGIA

POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

Know all Men by these Presents, That I,

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *17*
day of *March* 1894.

Executed in the presence of us

K. S. Anderson
W. W. H. Harrison

DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

(For These Already Enrolled.)

Soldier's Pension.

1894.

Name *J. L. Yearwood*
County *Barlow*
Disability *loss of leg*
Amount, \$ *100.00*
3/12
1894.
W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDLED TO

H. M. Willis

Geo. W. Harrison, State Printer, Atlanta.

(For These Already Enrolled.)

SOLDIER'S PENSION.

1895.

Name *J. L. Yearwood*
County *Barlow*
Disability *loss of leg*
Amount, \$ *100.00*
3/12
1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDLED TO

H. M. Willis

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

KNOW ALL MEN BY THESE PRESENTS, That I,

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *27*
day of *Feb* 1895.

Executed in presence of us

J. A. Stephenson
W. W. H. Harrison

DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Bartow County. }

PERSONALLY appears J. L. Yearwood of Bartow County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19 day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of GA) during the war between the States, and served as a private in Company H, of 19th Regiment of GA Volunteers, Archies's Brigade; that whilst engaged in such military service at the battle of Cedar Run in the State of Virginia, on the 9 day of Aug 1862, he was wounded as follows: shot through the right knee and leg amputated above the knee

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of One Hundred dollars, for the year 1893

Sworn to and subscribed before me, this, the 1st day of Mar 1894, by J. L. Yearwood make

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

STATE OF GEORGIA, }

Bartow County. }

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

Given under my official signature and seal, this 7 day of Mar 1894.



Ordinary Bartow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Bartow County. }

PERSONALLY appears J. L. Yearwood of Bartow County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19 day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of GA) during the war between the States, and served as a private in Company H, of 19th Regiment of GA Volunteers, Archies's Brigade; that whilst engaged in such military service at the battle of Cedar Run in the State of Virginia, on the 9 day of Aug 1862, he was wounded as follows: shot through right knee - leg amputated above the knee

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of 100 00 dollars, for the year 1894

Sworn to and subscribed before me, this, the 27 day of Aug 1895, by J. L. Yearwood make

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

STATE OF GEORGIA, }

Bartow County. }

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

Given under my official signature and seal, this 27 day of Aug 1895.



Ordinary Bartow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, D. L. Yearwood hereby authorize F. M. Wheeler
of Bartonsville Ga.

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

by

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 19th

day of Feb 1896.

D. L. Yearwood [L. S.]

Executed in presence of

W. S. Anderson
G. W. Hendricks

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, D. L. Yearwood hereby authorize F. M. Willis
of Bartonsville Ga.

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

by

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th

day of Feb 1897.

D. L. Yearwood [L. S.]

Executed in presence of

G. W. Hendricks
Ordinary B. C. Ga.

SOLDIER'S PENSION.

1896.

Name D. L. Yearwood
County Bartow
Disability loss of leg
Amount, \$ 100.00

3/3 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

Atty
Geo. W. Harrison State Printer, Atlanta.

No data

SOLDIER'S PENSION.

1897.

Name D. L. Yearwood
County Bartow
Disability loss of leg
Amount, \$ 100.00

2/23 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

Atty
Geo. W. Harrison State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Barlow County.

Personally appears T. L. Yearwood of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19th day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 19th Regiment of Borgin Volunteers, Archie's Brigade; that whilst engaged in such military service in the State of Va, on the 9th day of Aug, 1862, he was wounded, injured or diseased as follows:

Was wounded in the right knee by a mine at the battle of Cedar Run, which caused the right leg to be amputated above the knee.

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

Sworn to and subscribed before me, this, the 19th day of July 1896. T. L. Yearwood meat

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

STATE OF GEORGIA,
Barlow County.

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

Given under my official signature and seal, this 19th day of July 1896.



S. W. Hendricks
Ordinary Barlow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Barlow County.

Personally appears T. L. Yearwood of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19th day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company H, of 19th Regiment of Ga Volunteers, Archie's Brigade; that whilst engaged in such military service in the State of Ver, on the 9th day of Aug, 1862, he was wounded, injured or diseased of follows:

He was shot in the knee of the right leg, leg amputated above the knee.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Barlow county been allowed an invalid pension of One hundred Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 3rd day of July 1897. T. L. Yearwood
S. W. Hendricks POST OFFICE meat

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

STATE OF GEORGIA,
Barlow County.

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

Given under my official signature and seal, this 3rd day of July 1897.



S. W. Hendricks
Ordinary Barlow County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, *T. L. Yearwood*

hereby authorize

F. M. Willis,
W. H. Hendricks
of *Kartusville Ga*

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

me by *check*

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *7*

day of *January* 1898.

T. L. Yearwood [L. S.]
mark

Executed in presence of

G. W. Hendricks
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

I, *T. L. Yearwood*

hereby authorize

G. W. Hendricks
of *Kartusville Ga*

to receive and receipt for the pension paid hereon and request that he remit same to
me, after paying 1st Nat. Bank of Kartusville
\$88.50 and Yarns \$8.50 I am due from

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *23rd*

day of *January* 1899.

T. L. Yearwood [L. S.]
mark

Executed in presence of

Jno N. Co. Co

Yearwood, T. L.
Barlow Co

NO. 14 OCT. 1898.
(For Those Already Enrolled.)

No. *2117*

INVALID

SOLDIER'S PENSION.

1898.

Name *T. L. Yearwood*

County *Barlow*

Disability *lost leg*

Amount, \$ *116.00*

216 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

F. M. Willis

NO. 14 OCT. 1898. (For Those Already Enrolled.)

No data

Yearwood, T. L.
Barlow County

NO. 14 OCT. 1898. (For Those Already Enrolled.)

No. *221*

INVALID

SOLDIER'S PENSION.

1899.

Name *T. L. Yearwood*

County *Barlow*

Disability *lost leg*

Amount, \$ *116.00*

216 1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

G. W. Hendricks

NO. 14 OCT. 1898. (For Those Already Enrolled.)

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears T. L. Yearwood of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19 day of Sept 1842; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 44, of 12th Regiment of Ga Volunteers, Archie's Brigade; that whilst engaged in such military service in the State of Vir, on the 9 day of Aug 1862, he was wounded, injured or diseased as follows:

Shot through right knee, battle of Cedar Run
Leg amputated above the knee

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Barlow County been allowed an invalid pension of One hundred Dollars, for the year 1897.

Sworn to and subscribed before me, this, 7 day of Jan 1898, T. L. Yearwood POST-OFFICE Atlatona Ga

G. W. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 7 day of Jan 1898.

G. W. Hendricks
Ordinary Barlow County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Barlow County.

Personally appears T. L. Yearwood of Barlow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 19 day of Sept 1842; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 44, of 12th Regiment of Ga Volunteers, Archie's Brigade; that whilst engaged in such military service in the State of Virginia, on the 9 day of Aug 1862, he was wounded, injured or diseased as follows:

Gum shot wound through right knee,
Leg amputated above the knee as the result

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

Sworn to and subscribed before me, this, 7 day of January 1898, T. L. Yearwood POST-OFFICE Atlatona Ga

G. W. Hendricks Ordinary

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

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary of said County, do certify that I am well acquainted with T. L. Yearwood 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 23 day of Jan 1898.

G. W. Hendricks
Ordinary Barlow County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
Barlow

I, Willis Emerson hereby authorize J. M.
of Emerson Ga
to receive and receipt for the pension paid hereon and request that he remit same to
me by check
at Emerson Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th
day of January 1900.

J. L. Yearwood [L. S.]
mark

Executed in presence of
G. W. Lindsey
Barlow

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }
Barlow

I, J. L. Yearwood hereby authorize George W. Lindsey
of Centerville Ga
to receive and receipt for the pension paid hereon and request that he remit same to
me by check
at Centerville Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 8th
day of January 1901.

J. L. Yearwood [L. S.]
mark

Executed in presence of
John W. Lindsey

CODE SECTION 126.
(For Those Already Enrolled.)

No. 402

INVALID

SOLDIER'S PENSION.

1900.

Name J. L. Yearwood
County Barlow
Disability Loss of leg
Amount, \$ 100.00
Warrant issued Jan 19, 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

John W. Lindsey
Gov. W. Harrison, State Printer, Atlanta.

No data

CODE SECTION 126.
(For Those Already Enrolled.)

No. 1302

DISABLED

SOLDIER'S PENSION.

1901.

Name J. L. Yearwood
County Barlow
Disability Loss of leg
Amount, \$ 100.00

1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

John W. Lindsey
Gov. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears T. L. Yearwood of Bartow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 17 day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 4, of 19th Regiment of Volunteers, Archers's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9 day of Aug 1862, he was wounded, injured or diseased as follows:

Received a gunshot wound in right leg in the battle of Cedar Run, resulting in the amputation of the leg

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Bartow County been allowed an invalid pension of One hundred Dollars, for the year 1899.

Sworn to and subscribed before me, this, 8th day of July 1900, POST OFFICE Bartow.

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

STATE OF GEORGIA,

Bartow County.

I, G. W. Hudrick Ordinary of said County, do certify that I am well acquainted with T. L. Yearwood 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 5 day of January 1900.



Ordinary Bartow County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bartow County.

Personally appears T. L. Yearwood of Bartow County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 17 day of Sept 1862; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company 4, of 19th Regiment of Volunteers, Archers's Brigade; that whilst engaged in such military service in the State of Georgia, on the 9 day of Aug 1862, he was wounded, injured or diseased as follows:

Received a gunshot wound in right leg in the battle of Cedar Run, resulting in the amputation of the leg

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

Sworn to and subscribed before me, this, 8th day of July 1901, Postoffice Bartow.

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

STATE OF GEORGIA,

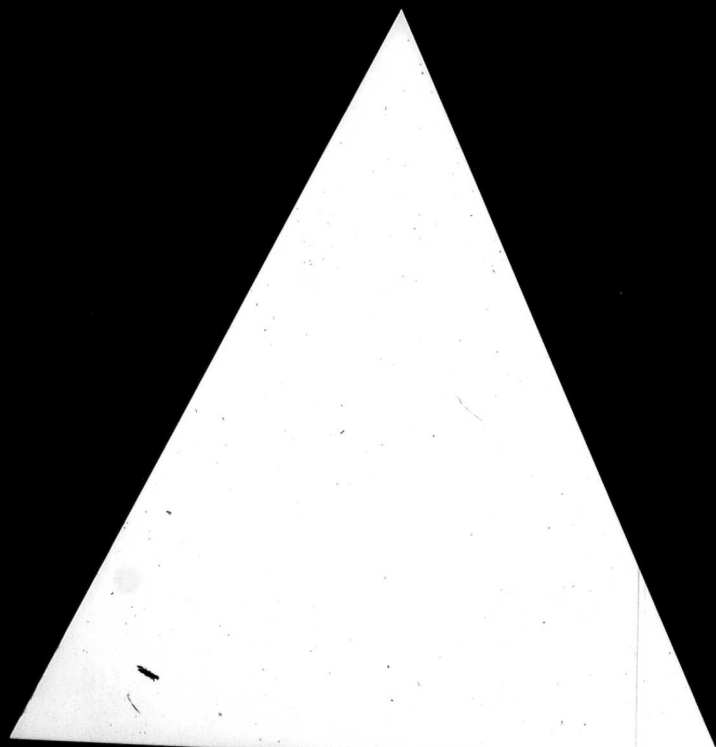
Bartow County.

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

Given under my official signature and seal, this 8th day of July 1901.



Ordinary Bartow County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

County.

Emeline Young hereby authorizes

Emeline Young

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

remits the same to me at Bartow by the check or registered mail.

Witness my hand this 13 day of Sept 1901

Received in presence of

Emeline Young Ordinary,

Bartow County

Emeline Young

{ SEAL }

Young, Emeline
Bartow, County

No _____

**WIDOW'S
Indigent Pension.
1901.**

Name Emeline Young
County Bartow

Widow of James M. Young - vs Pa

Approved _____ 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

Emeline Young hereby authorizes Geo. Hendricks of Barlow County, to receive and receipt for the pension allowed and that he remit the same to me at Barlow Mills by his check or registered mail.

Witness my hand this 13 day of Sept 1901

Executed in presence of

Geo. Hendricks Ordinary,

Barlow County.

Emeline Young

SEAL

Questions for Applicant.

STATE OF GEORGIA,

Barlow County.

Emeline Young of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers; under Act of General Assembly, passed 1900, hereby submits her 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 City or Office.)
Emeline Young, Barlow Mills, Ga.
2. How long and since when have you been a resident of this State?
I have lived in Georgia since 1833
3. When and where were you born?
1833 - Elbert County, Ga.
4. When and where was your husband born—state his full name, and when were you and he married?
1849 - James M. Young, married to me in 1849 - Barlow Mills, Ga.
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States?
1863 - Barlow Co. Capt. Young's Company of the 1st Regiment of Ga. Inf.
6. How long did your husband serve in said Company and Regiment?
He was dead in 1863 - about two years.
7. When and where did your husband's Company and Regiment surrender and was discharged?
April 26 - 1865 - at Anderson, N.C.
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was not.
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, or what cause, and by what authority?
Was at home in Barlow Co. He was delayed to come to Barlow Co. to practice medicine for some time.
10. When and where did your husband die?
1892 - in Barlow Mills, Ga.
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty; or Third—Blindness and Poverty?
Age and Poverty and Infirmary.
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight?
I have been unable to earn a support for twenty years.
13. What has been your occupation since your husband's death?
Nothing.
14. How much can you earn gross, by your own exertion or labor?
Nothing.
15. What property, real or personal, or income do you have or possess, and its gross value?
None.
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same?
None.
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Barlow County.
18. How have you been supported since death of husband, and especially for 1899 and 1900?
By my two daughters, teaching.
19. How much did your support cost for each of these years, and how much did you contribute by your own labor or income?
I do not know.
20. What was your employment during 1899 and 1900—how much did you receive for each year?
Nothing.
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property?
Yes, I live with my daughters.
22. Have you ever made an application for pension before?
No.
23. How many applications have you made for a Pension, and under what class?
None.

Sworn to and subscribed before me this 13th day of Sept 1901

Geo. Hendricks Ordinary,
of Barlow County.

Emeline Young

WIDOW'S

Indigent Pension.

1901.

Name Emeline Young
County Barlow

Widow of James M. Young - 43 yrs

Approved _____ 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

9/14-1901

Young, Emeline
Barlow, County

Questions for Witnesses.

STATE OF GEORGIA,

Barlow County.

F. M. Daniel of said State and County, having been presented as a witness in support of the Application of Mrs. Emeline Gering for a Pension under the Act of 1900, and after having been duly sworn, testifies answers to make to the following questions, deposes and answers as follows:

- What is your name and where do you reside? Barlow Ga. F. M. Daniel
- Are you acquainted with the applicant, Mrs. Emeline Gering? Yes
- If so, how long have you known her? For 17 years
- Where does she reside, and how long and since when has she been a resident of this State? Barlow Ga. Ever since I have known her
- When and where was she born? 1882 - Barlow Co. Ga
- Were you ever acquainted with her husband? No
- Where did he reside in 1861? Barlow Co. Ga.
- When and to whom was he married? 1869 - Emeline Gering
- When and where was he born? Barlow Co. Ga. 1828 - in 1869
- How long have you known him? 17 years
- When and where did he enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? Barlow Co. 1863. Captain Mullins Co. 113 Regt.

- Were you a member of the same Company and Regiment? Yes
- How long did he perform regular military duty? He performed military duty as Regimental Surgeon till Spring of 1864 when he was detailed to go back to Kentucky Co. Ga.
- When and where was his Company and Regiment surrounded and discharged from service? Barlow Co. Ga.
- Was he the only surgeon in the Company? Yes
- Was he a faithful surgeon in the army? Yes
- If he was present at the battle of Gettysburg, was he as above stated? Yes
- When and where did he leave the Command? Barlow Co. Ga.

For what reason was he discharged from the service, and how do you know this? He was discharged from the service for the loss of his arm and leg.

- What and where did he reside at his death, and how long has he been a resident of Georgia at his death? Barlow Co. Ga. All his life since he was 6 years old
- Do you of your own knowledge know that applicant is the lawful widow of Yes
- Has she remained unmarried since her soldier husband's death, and is now his widow? Yes
- What property, effects or income has the applicant at any time, and do you know this of your own knowledge? None whatever
- What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? None at all
- Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? No. She had none to sell

25. What is applicant's physical condition and her chances and ability to earn a support? She is totally unable to earn a support of any calling

26. Is applicant able to earn a support at labor of any sort, if not why?

She is not. By her two daughters who have school sometimes.

27. How was she supported for 1899 and 1900? Nothing

28. How much did applicant contribute to her support for last two years? Nothing

29. Give a full and complete statement of applicant's physical condition? She is very old and quite feeble and very infirm.

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

Sworn to and subscribed before me this 13th

day of September 1901

G. W. Hendricks Ordinary,

Barlow County.

F. M. Daniel

Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Barlow County.

Personally before me comes A. H. Calhoun and Emeline Gering both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Emeline Gering applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this: She is very old and infirm, and is unable to support herself. She is feeble, and is quite deaf and is granting quite deaf and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 13th

day of September 1901

G. W. Hendricks Ordinary,

Barlow County.

A. H. Calhoun

A. H. Calhoun

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow County.

I, G. W. Hendricks Ordinary in and for said county, hereby certify that the applicant, Mrs. Emeline Gering resides in said county, and has been a bona fide resident of this State since a long time 18____, and that the witnesses, Mr. F. M. Daniel and are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Barlow county shows that applicant returned for taxation in her own name in 1899 no dollars worth of property, and in 1900 no dollars worth of property.

Witness my hand and official seal, this 13th day of Sept 1901

G. W. Hendricks Ordinary,

Barlow County.

NOTES—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 28th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, Emeline Young, hereby authorize
G. W. Hendricks of Bartonsville Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Bartonsville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 31
day of July 1902.
Emeline Young

Executed in presence of
N. M. Glean

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, Emeline Young, hereby authorize
G. W. Hendricks of Bartonsville Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Bartonsville Ga

In Witness Whereof, I have hereunto set my hand and seal, this 6
day of January 1903.
Emeline Young [S.]

Executed in the presence of
W. C. Waeton
Clerk Superior Court.
Bartow County, Georgia.

To Those Heretofore Paid.

1902.

No. 689.

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1902.

Emeline Young
OF
Bartow County,
Widow of G. W. Young
3rd Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
31 1902

AND HANDED TO
On any

SEE W. LINDSEY, FIRST FLOOR, BUREAU, D.C.

1903.

No. 1014

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1903.

Emeline Young
OF
Bartow County,
Widow of G. W. Young
3rd Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
31 1903

AND HANDED TO
31

SEE W. LINDSEY, FIRST FLOOR, BUREAU, D.C.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
 County of Barlow } Emeline Young
 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 1882. That she is the Widow of
James M. Young who was a soldier in Company
 of the 43^d Regiment of Ma.
 Volunteers, that he enlisted in said regiment on or about the month of March
1862, and served in the Army up to April 1864. That he died
 on the 11th day of May 1872.
He died in Barlowville Ga. Barlow
County

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
 soldier, and that she has never married since his death aforesaid, and that she became his wife in
 the year 1849.

I have been allowed an Indigent pension as a resident of Barlow
 County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the
 year ending December 31, 1902.

Sworn to and subscribed before me,
 this 8th day of Jan 1902, Emeline Young
G. W. Hendricks, Ordinary. Post-Office

State of Georgia,
Barlow County. } G. W. Hendricks
 Ordinary of said County, certify that I am well
 acquainted with Mrs. Emeline Young, 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 Jan 1889.
 Given under my official signature and seal, this the 8th day of Jan 1902.
G. W. Hendricks
 Ordinary of Barlow County.

Official
 Seal.

NOTE.—All blanks must be filled.

Vouchers and affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
 County of Barlow } Emeline Young
 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 March 9th 1882. That she is the Widow of
James M. Young who was a soldier in Company
 of the 43^d Regiment of Ga
 Volunteers, that he enlisted in said regiment on or about the month of April
1862, and served in the Army up to Spring 1864. That he died
 on the 14th day of May 1872.
Deponent has no property whatever

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 1849.

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

Sworn to and subscribed before me,
 this 6 day of Jan 1903, Emeline Young
G. W. Hendricks, Ordinary. Post-Office Barlowville Ga

State of Georgia,
Barlow County. } G. W. Hendricks
 Ordinary of said County, certify that I am well
 acquainted with Mrs. Emeline Young, 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 Jan 1874.

Given under my official signature and seal, this the 6 day of Jan 1903.
G. W. Hendricks
 Ordinary of Barlow County.

Official
 Seal.

NOTE.—All blanks must be filled.

Vouchers and affidavits must bear date after January 1st, 1903.

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

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Vouchers and affidavits must bear date after January 1st, 1903.

NOTES.

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

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.
3. It is not an answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." The law requires that the arm be "substantially and essentially useless."
4. If papers are returned for disqualification to the clause of the Act in reference to the arm or leg, but the limb must for disqualification be "substantially and essentially useless."
5. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.
6. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.
7. No payments can be made for any past year.

W. H. HARRISON,

Clerk Ex. Dep't.

Young, Berwin Co.
Barlow Co.
1890.

No 2892
APPLICATION FOR ALLOWANCE.

Dis'd by Disease
Applicant Louis L. Young
County, Barlow
Amount, 50
Date of warrant June 1890
Entered on record June 1890
WARRANT HANDLED TO
J. H. Fite

Ex. Dept. Atlanta Ga
April 24, 1890

The applicant is not
actual on this proof.
What is his family
history, have any members
of his family had lung
disease? When & where
was the disease contracted?
Capt Dodd, is asked if
he knows what caused
the applicant to have
Consumption. If so please
when it was & how the
knowledge was obtained.
Was he discharged on account
of the disease? If not,
why not?
What was his condition
in 1864, & 1865, & 1866,
in such cases, the fullest
& most explicit proofs
are required - because
it is hard to say what
causes any disease.
W. H. Harrison
Clk. 11

NOTES.

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

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

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

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

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

7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Dept.

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,

Bartow County,

PERSONALLY appears *L. S. Young* of *Bartow* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been continuously since the *for* day of *thirty five years past*; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *private* in Company *B*, of *40*th Regiment of *Volunteers*, *Stovalls* Brigade; that whilst engaged in such military service, *at the battle of* in the State of *on the* day of *186*, he was

wounded as follows: *he contracted pulmonary disease from exposure during the war while in line of service. He had been obliged to work for a living since the war and is now totally incompetent to do manual labor that he dare not expose himself to the danger of a relapse that he now has consumption in the third stage*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder ending October 26, 1890.

Sworn to and subscribed before me, this the

5th day of *Feb*, 189*0* *L. S. Young & Mary*
Woodruff & Company

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease give full and correct history of disease, tracing it directly to the service.

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

Bartow County,

PERSONALLY came before me *John M. Dobbs* of the county of *Bartow* State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company *B*, of *40*th Regiment of *Volunteers*, and that deponent knows *Applicant*, and that he received the *wounds* (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that *wounds* (or disease) permanently disables the said *L. S. Young* as stated by him in said affidavit. Deponent further states that said

L. S. Young is a *bona fide* citizen of this State and resides in *Bartow* county.

Sworn to and subscribed before me this

17 day of *Feb*, 189*0* *J. M. Dobbs Capt. Co. B-40 Reg*

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

Woodruff & Company

APPLICATION FOR ALLOWANCE.

No *2892*

Dis. by disease
Applicant's L. Young
Bartow
County,

Amount, *50*

Date of warrant, *June*

Entered on record *June* 189*0*

CO. B

W. H. Harrison

W. H. Harrison

W. H. Harrison

W. H. Harrison

W. H. Harrison

W. H. Harrison

W. H. Harrison

W. H. Harrison

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W. H. Harrison

W. H. Harrison

W. H. Harrison

W. H. Harrison

STATE OF GEORGIA,

County.

PERSONALLY came

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

Sworn to and subscribed before me, this

day of _____ 189

NOTE.—Above affidavit must be made by three citizens who personally know of the service of applicant and can state of their own knowledge precisely how he is disabled, and what disables him.
NOTE 2.—The attesting officer must see that each witness reads, or has read to him the affidavit he signs.

STATE OF GEORGIA,

County.

PERSONALLY comes before me _____ Ordinary of said county, _____ and _____, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined _____ and after such examination say that the applicant has been injured as follows:

He has Chronic Bronchitis of a very malignant type and is unable to perform manual labor except it be very light work under the most favorable circumstances. He cannot support himself when the weather is any ways inclement, for he suffers daily from his afflictions. Dr. Battle has known him about fifteen years and Dr. Griffin about six years and are both concerned in the statement above. They cannot live long for his condition is gradually giving away.

Sworn to and subscribed before me, this

day of _____ 189

ORDINARY.

NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.
NOTE 2.—It is for disability resulting from disease, state how the disease is known to result from the service as a soldier. Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,

County.

I, _____ Ordinary of said county,

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

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

Given under my official signature and seal, this _____ day of _____ 189

Ordinary _____ County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I, _____

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 189

Executed in the presence of us:

_____ Ordinary

DIRECTION.

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

Georgia 3 In person appeared R. L. Rogers
 Bartow County 3 and after being duly sworn on
 both oaths; that he has known Lewis L.
 Young since 1854; that said young
 worked for him just before he enlisted
 in the service; that Young was a
 stout, healthy man; that when he
 returned home from the war, he
 was in bad health from a suppur-
 ating lung affection; that he has been in
 bad health and gradually declining
 in health and strength ever since
 the war; that he is now unable to
 work.

R. L. Rogers,
 Sworn to and Subscribed
 before me this 19th of April 1890
 C. W. Hudicko
 Ordinary

Audited

189

COMPTROLLER-GENERAL.

Bartow

Maimed Soldiers.

Voucher No. 2892

Amount \$ 50

Paid to Louis L. Young
 For Disability from
 Disease

June 3 1890

Included in Warrant No.

Issued to Treasurer.

189

WARRANT-CLERK.

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

A. M. Horne

Georgia } Name in person Chas.
 Bartow County } Lockridge of said county and
 after being duly sworn says on oath
 that he is well acquainted with Louis L.
 Young; that he has known him intimately
 since the year 1868; that said young
 man, before and at the time he enlisted
 in the war between the States, a very
 stout, healthy and robust man;
 that he lost his health while in the
 service in said war; that since the
 war he has been unable to make
 a living by manual labor; that he
 has no other means of earning a living;
 that he is unable to do or perform
 manual labor; that he is getting
 worse gradually and is now very feeble
 and permanently incompetent to per-
 form manual labor for a living
 G. M. Lockridge

Sworn to and subscribed before me
 this April the 18th 1890.
 J. W. Hurdick
 Ord. Bartow Co. Ga.

STATE OF GEORGIA,
 EXECUTIVE DEPARTMENT.

No. 2892
 Atlanta, Ga., June 3 1890.

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

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

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

By the Governor,

W. N. Hardean
 CLERK EXECUTIVE DEPARTMENT.



\$ 50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00 Dollars,
 per above voucher, this 3 of June 1890

by Louis L. Young
 By A. M. Fouts, atty. ve.

Georgia Bartow County.

Came in person
Richard Worthington and Sampson B.
Worthington both of whom are country
of credit, and on oath say they were
well acquainted with Louis L. Young's
parents, that they lived near neighbors
about twenty years; that they lived
near them when they died; that said
parents of Louis L. Young were healthy,
stout and robust people; that they had
no disease of the lungs whatever; that
said parents of record never had a doctor
in this family while they knew them;
that the father of Louis L. Young was
about seventy five years old when he
died, and his mother about sixty five
when she died. The father died while
plowing in the field - very suddenly and
the mother died of a congestive chill,
and none of the family, except Louis L.
Young has ever had any lung disease
and he contracted lung disease in the war;
that he has ~~been~~ been in very bad health
ever since 1864; that he is daily growing
worse and is unable to work for a living;
that his girls are plowing in the field
now trying to make a living; that the

Georgia Bartow County.

Came in person
Capt. John W. Dobbs and after being
duly sworn says on oath, that he
has known Louis L. Young since
March 1862. He enlisted in the service,
joining my company, he was a stout
healthy man, until he marched through
Tennessee which was during very rainy
weather and he marched through water
and mud. I think he contracted his
disease on that march, as he has
never been well since. He was not
discharged simply because he did not
ask, and in fact he was anxious to stay
in the service. While he was not discharged
he was most of the time either in the hos-
pital or furloughed and disabled.
He has been in bad health ever since
the above mentioned march, and now he is
very bad - unable, personally unable to
perform any of the manual occupations
of life for a living.

J. W. Dobbs Capt. B. Co. 31st Regt.

Sworn to and subscribed before me
this May 7 - 1890

J. W. Blundick Ordway

Georgia-Barlow County.

I, Lewis L. Young, of said County,
do hereby appoint A. M. Fouts
of said County, my true and
lawful attorney in fact to rep-
resent me before the Executive
Department of said State, in
the matter of my application
for allowance from State under
Soldiers' Bill, for 1890.

Hereby revoking all other pow-
ers and authority heretofore given
in said matter.

This June 4. 1890.

signed, sealed and delivered in
presence of

Frank Durham

J. M. Durham
CLK & C.

Lewis L. Young
mark



POWER OF ATTORNEY.

STATE OF GEORGIA,
Bartow County,

Wm. Zack Young, of Bartow County, Ga., hereby authorize

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

at Bartow

Witness my hand and seal this

day of

April

1895.

Executed in presence of

Wm. Zack Young
more

24 Sept 10 July 1895
Not entitled
Rich. Johnson
Sec

Young, Zack
Bartow Co.
No.

INDIGENT PENSION
1895.

Name Zack Young
County Bartow

Ground Infirmary & Deceitful
April 5th 1895.

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDED TO

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow County.

Jack Young hereby authorize
W. H. Andrews of *Cartersville Ga*

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

at *Corbu* by

Witness my hand and seal this *6th* day of *April* 1895.

Executed in presence of

his
Jack Young
mark

Not into title
Rich Johnson
Sec

INDIGENT PENSION

1895.

Name *Jack Young*
County *Barlow*

Ground *Indigently Poverty*
April 6th 1895.

RICHARD JOHNSON,

Secretary Executive Department

WARRANT RENDEZ TO

Geo. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Barlow County.

Jack Young 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) *Jack Young, Corbu Barlow County Ga*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *Corbu Barlow Co. Ga. My wife & self & Jrs. A. M. Young*
3. When and where were you born? *in 1827 Barlow Co. Ga.*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Confederate*
5. When and where did you enlist? *July 1861 Big Shanty Cobb Co. Ga.*
6. In what company and regiment did you enlist? *Co. A 48th Ga. Regt. Inf.*
7. How long did you remain in that company and regiment? *4 mo not know*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? *I was discharged from 1862 to Co. C came home and was detailed to work at Rolling Mills*
9. For how long a period did you discharge regular military duty? *I do not know in this Co.*
10. When, where and under what circumstances were you discharged from service? *I was sent at the Rolling Mills under detail to the Federal Army Camp and captured them*
11. What is your present occupation? *Farming*
12. How much can you earn per annum by your own exertions at labor? *75 to 100 Dollars*
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? *Nearly five Dollars 2.00*
15. What is your present physical condition and how long have you been in such condition? *I am weak and feeble and subject to spells of blindness. Have been so for about two years. I am 66 years old have worn 6 eyes*
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"?
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? *Yes, is hurting me; at times cannot see my way for a short time. I have been very feeble for two years*
18. What property, effects or income do you possess? *Yoke of cattle & wagon*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Yoke of cattle and wagon and about 15 dollar income per annum.*
20. In what County did you reside during those years and what property did you then return for taxation? *Barlow Yoke of cattle & wagon*
21. How were you supported during the years 1893 and 1894? *I made out on what little I could manage to get up hard work*
22. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? *I do not know*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *Farming and hauling wood to town*
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? *Have a wife, she has to work with me, I have no children with me.*

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

Sworn to and subscribed before me this the

6th day of April 1895.

Ordinary

of Bartow County.

Jack his young mark

Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Bartow County.

J. J. Woodall of said State and County, having been presented as a witness to support of the application of Jack Young 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. J. Woodall, Antioch, Ga.
2. Are you acquainted with Jack Young, the applicant, if so how long have you known him? About fifty years.
3. Where does he reside, and how long has he been a resident of this State? Bartow Co. Ga. Since I have known him except 2 yrs.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I do. I was in the same Co. and Regiment.
5. When, where and in what company and regiment did he enlist? July 1861, Big Shanty, Cobb Co. in Co. A. 18th Regt.
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? I do not know how long he served. He did duty till he was taken sick and discharged. I can not remember just where he was sent home.
8. What property, effects or income has the applicant? (Give your means of knowledge.) About 15 dollars income and a yoked cattle and a wagon.
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? Same as above stated, 15 dollars means and a yoked cattle and wagon.
10. What is the applicant's occupation and physical condition? Farm a little and haul wood etc. He is not healthy. Has spells of blindness and has tics in his head.
11. Is the applicant unable to support himself by labor of any sort, if so, why? I do not think he is able to support himself by any labor that he can do. Because his fingers are gone.
12. How was he supported during the years 1893 and 1894? He lived on what he could manage to get, which was very little.
13. What portion of his support for these two years was derived from his own labor or income? He made out to live on the 15 dollar income and his little job.
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 weak from old age. Tics in his head and spells of blindness. He is quite feeble in health.
15. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this

the 6th day of April 1895.

Ordinary

J. J. Woodall

mark

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Bartow County.

County.

Personally came before me

J. M. Hightower

and

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

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

Vertigo and infirmities of 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 6th day of April 1895.

J. M. Hightower

Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Bartow County.

County.

I, J. M. Hightower, Ordinary in and for said County, hereby certify that the applicant Jack Young resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: J. J. Woodall

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, Seventy dollars of property, and in 1894, Seventy two dollars of property.

Witness my hand and seal of office, this 7th day of May 1895.

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.

Jack Young hereby authorize Charles L. Young of Barlow County,

to receive and receipt for the pension allowed, and request that he remit same to Charles L. Young at Barlow by check

Witness my hand and seal, this 12 day of Aug 1902.

Executed in presence of Jack & Young [L. S.]

Lev. R. Young Jr mark

Questions for Applicant.

STATE OF GEORGIA,

Barlow County.

Jack Young of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)
Jack Young, Barlow, Barlow Co Ga

2. How long and since when have you been a resident of this State?
I have lived in Barlow since 1863

3. When and where were you born?
1827 at Barlow Ga

4. When and where and in what company and regiment did you enlist or serve?
at Big Shanty Ga in Co H 18th Ga Inf Aug 1861

5. How long did you remain in such company and regiment?
I served in this company till late in the winter of 1862. Capt in April of 1863. I was discharged on account of disability

6. When and where was your company and regiment surrendered and discharged?
at Barlow Ga April 12, 1865 of 1st Co 18th Ga Inf. Dr. King discharged in 1863. I was not present.

7. Were you present with your company and regiment when it was surrendered?
I was not

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 discharged from my command on account of disability as above stated

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

10. What has been your occupation since 1865?
nothing

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 and poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
I have been for several years unable to work for a support. I am almost blind, not able to work as much as I can have the whole day

13. What property, real or personal, or income, do you possess, and its gross value?
I have a small little piece of land worth \$500

14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1890 and 1901, and what disposition, if any, by sale or gift, have you made of same?
All I have had is the above named yearlings

15. In what County did you reside during those years, and what property did you then return for taxation?
Barlow Co Ga. Have not lived in Barlow many years

16. How were you supported during the years 1869, 1900 and 1901?
by the County

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. I am pretty much helpless

18. What was your employment during 1868, 1869 and 1901? What pay did you receive in each year?
I have a little with my hands. very little indeed

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
Yes. Have a wife. She is an invalid and has been for many years. we have no means of support. County helps us

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?

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

Sworn to and subscribed before me this the 12 day of Aug 1902.

John W. Lindsey Ordinary, Barlow County.

Jack Young Applicant.

Every Question MUST be Answered.

INDIGENT PENSION,
1902.

Name Jack Young
County Barlow
Co. Al 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901, 1902

Approved _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
1456

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

Geo. W. Harrison, State Printer, Atlanta.

8/27-1902

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Barlow COUNTY.
Thos. J. Woodall, of said State and County, having been presented as a witness in support of the application of Jack Young 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? Thos. J. Woodall, Marietta Ga. 12 miles from Marietta Ga
2. Are you acquainted with Jack Young, the applicant; if so, how long have you known him? Ever since he was a little boy
3. Where does he reside, and how long and since when has he been a resident of this State? Marietta Ga. for all his life but one year
4. When, where and in what company and regiment did he enlist, and how do you know? Aug. 1862 Big Shanty Ga. in Co. N. 18. Co. Reg. 1st
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Eight months
7. When and where was his command surrendered? April 9th 1862 Appomattox.
8. Were you present when it surrendered? Not on any account of
9. Was applicant present? He is not present in the
10. If he was not present, where was he? He was discharged in the month of Feb. 1863 for wounds.
11. What property, effects or income has the applicant? (Give your means of knowledge?) Two little bulls, no income.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900 and 1901, and what disposition, if any, did he make of same? Has not had any, except the little bull yearling
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No he has not
14. What is the applicant's occupation and physical condition? Has none now. His physical condition is extremely bad. Can hardly move about
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes. Because he is so old and feeble he can hardly get about. He is very feeble and infirm
16. How was he supported during the years 1898, 1899, 1900 and 1901? He has been supported by the county and his neighbors
17. What portion of the support for these four years was derived from his own labor or income? None.
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, broken down, completely and physically worn out.
19. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 12th day of Aug. 1902. Thos. J. Woodall
G. W. Hindricks Ordinary. Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Barlow COUNTY.
 Personally came before me, Dr. H. C. Giffen and Dr. A. H. Bachman, both known to me as reputable physicians of said County, and being severally sworn, say on oath that they have examined carefully Jack Young, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Is nearly blind, has Rheumatism, & has 27th ribs frequently, is very old and has weak heart. Unable to do any kind of labor

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

Sworn to and subscribed before me, this the 12th day of Aug. 1902. Dr. H. C. Giffen
G. W. Hindricks Ordinary. A. H. Bachman

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Barlow COUNTY.
 I, G. W. Hindricks, Ordinary in and for said County, hereby certify that the applicant Jack Young resides in said County, and has been a bona fide resident of this State since the 1st day of Aug. 1862, and that the witnesses, viz., Thos. J. Woodall, J. M. S. Cobb, J. L. Matthews, A. H. Barron and all the others are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Barlow County show that applicant returned for taxation in his name in 1899 - 1900 - 1901 Dollars of property, and in 1900 - 1901 Dollars of property.

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

Witness my hand and seal of office, this 12th day of Aug. 1902. G. W. Hindricks Ordinary.
Barlow County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County. }
 I, Jack Young hereby authorize George W. Hendricks of Bartowville Ga
 to receive and receipt for the pension allowed and request that he remit same to
me at Bartowville Ga
 by ek
 Witness my hand and seal, this 12 day of Jan 1903.

Jack W. Young [L. S.]
 Executed in presence of
Good Cobb
no sig

Young, Jack
Bartowville
 CODE SECTION 1284.
 (FOR THOSE ALREADY ENROLLED.)
 No. 3699

INDIGENT
 SOLDIER'S PENSION
 1903.

Name Jack Young
 County Bartow
 Co. A Regiment 18th
Wks

WARRANT ISSUED
3/6 1903.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO C

Geo. Harrison, State Printer, Atlanta.

no data

Young, Jack
Bartowville

CODE SECTION 1284.
 (FOR THOSE ALREADY ENROLLED.)
 No. 3824

INDIGENT
 SOLDIER'S PENSION
 1904.

Name J. Young
 County Bartow
 Co. A Regiment 18
Wks

WARRANT ISSUED
2/9 1904.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO C

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County. }
 I, J. Young hereby authorize George W. Hendricks of Bartowville Ga
 to receive and receipt for the pension allowed and request that he remit same to
me at Bartowville Ga
 by chuck
 Witness my hand and seal, this 9 day of Jan 1904.

J. Young [L. S.]
 Executed in presence of
W. C. Walton
C. C.

CODE SECTION 1284.
 (FOR THOSE ALREADY ENROLLED.)
 No. 3824

INDIGENT
 SOLDIER'S PENSION
 1904.

Name J. Young
 County Bartow
 Co. A Regiment 18
Wks

WARRANT ISSUED
2/9 1904.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO C

Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA
 FOR APPLICANTS HERETOFORE ATTORNEY PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears Jack Young 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 June 1827; that he is 75 years old and by occupation a nothing now, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 8 months in Company H, of 18th Regiment of Ga vols.; that his physical condition is as follows: He is totally unable from paralysis, rheumatism and general worn out

that his property consists of the following items:

Two little pearls

of the value of 35 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 12 day of July 1903, G. W. Nundrick Ordinary.

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 12 day of July 1903.

G. W. Nundrick Ordinary Barlow County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Barlow County.

Personally appears J. Young 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 1827; that he is 77 years old and by occupation a nothing now, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of about 1 yr in Company H, of 18th Regiment of Ga vols.; that his physical condition is as follows: He is completely broken down from rheumatism and old age

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this 9 day of July 1904, G. W. Nundrick Ordinary.

STATE OF GEORGIA,

Barlow County.

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

Given under my official signature and seal, this 9 day of July 1904.

G. W. Nundrick Ordinary Barlow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, Jack Young hereby authorize
Guadalupe of Bartowville Ga
 to receive and receipt for the pension allowed, and request that he remit same to
me at Bartowville Ga
 by CK

Witness my hand and seal, this 20 day of Jan 1906.

Jack Young [L. S.]
mark

Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Bartow County.

I, Jack Young hereby authorize
Guadalupe of Bartowville Ga
 to receive and receipt for the pension allowed, and request that he remit same to
me at Bartowville Ga
 by CK

Witness my hand and seal, this 20 day of Jan 1906.

Jack Young [L. S.]
mark

Executed in the presence of

J M Willis

Young, Jack
Bartow County

CODE SECTION 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. 3301

INDIGENT
 SOLDIER'S PENSION
 1905.

Name Jack Young
 County Bartow
 Co. A Regiment 18 Ga

WARRANT ISSUED
 FEB 7 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no data

Young, Jack
Bartow Co.

CODE SECTION 1254.
 (FOR THOSE ALREADY ENROLLED.)

No. 2117

INDIGENT
 SOLDIER'S PENSION
 1906.

Name Jack Young
 County Bartow
 Co. A Regiment 18 Ga

WARRANT ISSUED
 JAN 29 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Bartow County.

Personally appears Jack Young 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 July day of 1828; that he is 78 years old and by occupation a laborer; 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 months in Company 4, of 18th Regiment of 49 Vol; that his physical condition is as follows: He is physically completely disabled from diseases and age and infirmities

that his property consists of the following items:

of the value of 1 Dollars. I am now earning, by my labor, 11 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 20 day of Jan 1905. Jack Young mark
G. W. Nindrick Ordinary.

STATE OF GEORGIA,

Bartow County.

I, G. W. Nindrick Ordinary of said County, do certify that I am well acquainted with Jack Young 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 20 day of Jan 1905.

G. W. Nindrick Ordinary Bartow County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Bartow County.

Personally appears Jack Young 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 July day of 1828; that he is 79 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of One year in Company 4, of 18th Regiment of 49 Vol; that his physical condition is as follows: Old and badly diseased

that his property consists of the following items:

of the value of 10000 Dollars. I am now earning by my labor, 10000 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this 21 day of Jan 1906. Jack Young mark
G. W. Nindrick Ordinary.

State of Georgia,

Bartow County.

I, G. W. Nindrick Ordinary of said County, do certify that I am well acquainted with Jack Young 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 21 day of Jan 1906.

G. W. Nindrick Ordinary Bartow County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Barlow COUNTY.

I, J. Young, hereby authorize
Quinn Smith of Leontusville
to receive and receipt for the pension allowed, and request that he remit same to
me at Leontusville Ga
by me

WITNESS my hand and seal, this 7th day of Jan 1907.

Executed in presence of

J. Young
James [L. S.]

Young, Jack
Barlow County

Cons. Section 1264.
(FOR THOSE ALREADY ENROLLED)

No. 3887

INDIGENT
SOLDIER'S PENSION
1907.

Name J. Young
County Barlow
Co. A Regiment 18

WARDEN ISSUED
FER 4 1907

JOHN W. LINDSEY,
Commissioner of Penitentiaries.

WARRANT HANDED TO

ONE W. H. HARRIS, STATE PRISON, ATLANTA.

no debt

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Barton County.

Personally appears

J. Young

of Barton

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1897; that he is 81 years old

and by occupation 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 thirteen in Company X, of 18th Regiment of Georgia; that his physical condition is as follows:

He is almost too weak and feeble to walk

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the _____ day of Jan, 1907.

Gustavson Ordinary.

J. Young
mon

State of Georgia,

Barton County.

I, Gustavson Ordinary of said County,

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

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

Gustavson Ordinary Barton County.



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

Georgia, Bartow County.

Personally came before me the undersigned
Officers, Citizens of said County, who on oath say
that they have known Jacob Young
of said County for many years; that said
Young is an old, feeble and worn out
man totally unable to work for a
support and has neither property or income;
that he has been partly supported by the
pauper fund of said County and partly
by his neighbors and friends for several
years and now being supported in this
way:

Sworn to and
Subscribed by
for me, this

Apr 16th 1902

G. W. Hendricks
Ordinary Bartow
County Ga.

Geo. W. Cobb

Geo. S. Cobb

L. B. Matthews (Chm Co, coin

A. L. Bare ore

Frank B. Ford

J. N. Hannigan

Frank J. Satterfield

J. R. Satterfield

H. M. Dunahoo

W. B. Barron

J. L. Bell

W. L. Gardner

W. W. Roberts

A. C. Watkins

A. M. Puckett