Georgia, Campbell County:

McMillan be offered as a witness in support of the application of Mrs. Sarah E. Barnes for a pension under the

act of 1910 appears and being duly swoon says that he knows the applicant and that he knew John B. McMillan in his life time;

pension.

the same.

Sworn to and subscribed before me sept. 27, 1910.

If a live Long.

Ordinary dampbell dounty, Georgia.

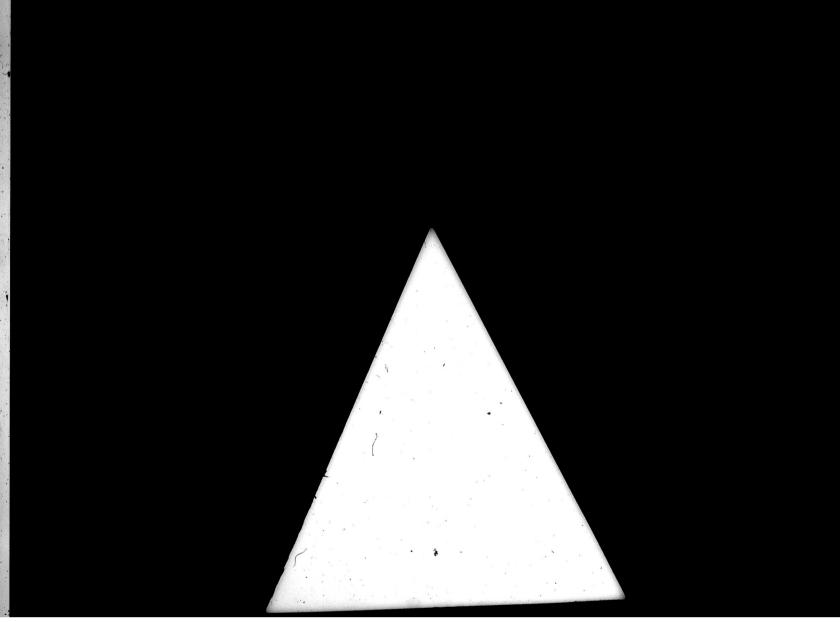
I.W.S.McLarin, Ordinary of said county, certify that I am acquainted with the witness wm. McMillan; that he is reliable and truthful, and his statements are entitled to full faith and oredit, and that he was sworn to above affidavit before signing

Witness my hand and seal this the 27" day of sept. 1910.

that said McMillan and the applicant were married in the fall of 1860; that said McMillan enlisted in the confederate army in May 1862; that said McMillan while in the service contracted measles and died from the effects thereof at Chattanooga, Tenn. on July 22nd 1862; that the aplicant married R.S.Barnes in 1867, and that said R.S.Barnes died in 1901, and the applicant is now a widow. All this he knows of his own knowledge, because he knew all the parties, and that he has no interest in this

A. Marillan

It & M. Larin.



SOLDIER'S APPLICATION Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920. County Campbell. Company -----Regiment ----Approved not to pension c. E. Megregor.

STATE OF GEORGIA,

S. McLarin,

ce January 1st, 1920; that I also know

nts himself to be, and that he has been,

the service; that both of then

and their

are entitled to full faith

(SEAL OF ORDINARY.)

	Ordinary 8 Certificate
	STATE OF GEORGIA,
	Compbell COUNTY.
	1
×	william Feall. the applicant for pension; that he is the person
•	he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said
	State since January 1st, 1920; that I also know S. W. Long, , the witness, who
	swears to the service; that both of them are now residents of said County and were duly sworn by
	me before signing the foregoing affidavits, and they are truthful and trustworthy and their
	statements, are entitled to full faith and credit.
	Sworn under my hand and official seal of office this 9th day of May. 19 24.
	Mr. Stll Lopine Ordinary
*	(SEAL OF ORDINARY.) of Chmpbell County

Refore any questions are answered the Ordinary shall awear applicant and the witness in the following words:
 You do selemnly awear that you will true answers make to each of the questions asked you and the evidence
 you give shall be the whole truth. So help you God.

 Additional affidavits may be attached if blank spaces are insufficient.
 3. All affidayits must be made before the Ordinary of the County in which the applicant or witness resides and
 must be extifted by such Ordinary.

 If Ill out the back of the application carefully.

APPLICATION FOR PENSION BY A SOLDIER

Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920.

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF G	EORGIA,
------------	---------

Campbell	COUNTY.	
Personally appears bet	fore me, William Beall,	of said State
County, and hereby app	lies for the pension allowed by the Act o onal Amendment of 1920, and submits to true answers to make to the questions p	estimony to support the same
wit:		

- 1. What is your name and where do you reside? (Give County and Post Offi I reside in Palmetto, Campbell Co. Ga.- P. O.: Palmetto, Ga.
- 2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? 67 years, or since my birth: Aug. 31, 1856.
- 3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865? No Sir.
- 4. When and where, and in what Company and Regiment did you enlist? (State the arm and class of service, and give name of Colonel and Captain.) Requires no answer.
- 5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge.) Requires no answer.
- 6. When and where was your Company and Regiment surrendered or discharged from the Service? Requires no answer.
- In Owere you personally present with your Commund when it you unrendered not helpfung provisions, propured by my mother for some "Toxas Rangers", I was not in

8. If you were not actually present, state specifically and clearly where you were right eye by a "snont" ball, fired by Yankees. Said wound so received caused the immediate complete less of said right eye; and on account of a. Where was your Command when you left it?

- 84 ide wounds 8688 Preleyage treatment the hand alleun in the state of the b. When did you leave the Command Lie guilres no answer
 - c. For what cause did you leave?
 - d. By whose authority did you leave?
- e. For how long was your leave of absence granted? In what way? Requires no answer. On account of said wound, I have been totally blind for about 40 years.
- f. Why did you not return to your Command after leave expired?
- g. In what way were you prevented?
- h. What effort did you make to return?... i. Were you captured by the enemy at any time? " o sir.
- i. If so, when, and where? In what prison were you held and when were you released? Requires no answer.
- 9. Are you drawing a pension of any amount from this State or the United States? 10 sir.

Applicant.

10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was it not allowed? o Sir. -- Until 1920, I was able to "make a living" by discing wells, and doing other work. I also owned a Home, but have recently lost the same on account of paving debts for which I was security. Sworn to and subscribed before me, this the

may of May,	, 192 4 .	
molle derce,	. Ordinary	
Campbell	County	

(SEAD OF ORDINARY.)

(SEAL OF ORDINARY)	
Of Compact County	
₹ ,	
7 th day of May , Applicant	
Sworm to and subscribed before me, this the Multi-ante & Deart	
the mirror of the state of the	
10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was	
9. Are you drawing a penaion of any amount from this State or the United States?	
1. If so, when, and where? In what prison were you held and when were you released?	
i. Were you captured by the enemy at any time? Gir.	
h. What effort did you make to return?	
g. In what way were you prevented?	
f. Why did you not return to your Command after leave expired?	
e. For how long was your leave of absence granted? In what way? Redulines no anaway. On account, of san on the sand wound, I have been totally blind for about 40 year.	
d. By whose authority did you leave?	
c. For what cause did you leave?	
atth want and you leave the Community housemen no answer	
There you personally present with your Commund when it was surrendered as discharged. In the control of the con	F
6. When and where was your Company and Regiment surrendered or discharged from the Service:	
5. How long did you remain in the actual military service with said Company and Regiment?	
"traditional bus granged bise differ	
4. Viter and where, and give name of Colonel and Captain.) Requires no answer.	
from 1861 to 1865? Mo Str.	(
3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State	1
of Georgia? 57 years, or since my birth: Aug. 51, 1956.	. 1
I resides in palmetto, Gampboll Go. Ga P. O.: Palmotto, Ga.	1
1. What is your mame and where do you reside? (Give County and Post Office). William Beall.	
Personally appears before me, William Boall, County, and bretty applies for the pension allowed by the Act of 1910, as amended by the Act of 1910, as amended by the Act of 1911, and bretty, and bretty applies for the pension and automits testimony to support the same and attended to the Colestitutional Amendment of 1920, and automits testimony to support the same and after the Colestitutional Amendment of 1920, and automits the Colestitution and the Act of 1920, and automits the Act of 1920, and 1920,	
Campbell COUNTY.	
STATE OF GEORGIA,	
QUESTIONS KOR APPLICANT TO ANSWER:	
Amendment of 1920.	
Under Act of 1910, as Amended by Act of 1919, and Constitutional	

APPLICATION FOR PENSION BY A SOLDIER

County . (SEAL OF ORDINARY.) Cumpbell Sworn under my hand and official seal of office this 9th day of May statements are entitled to full faith and credit. me before signing the foregoing affidavits, and they are truthful and trustworthy and their swears to the service; that both of them are now residents of said County and were duly sworn by State since January 1st, 1920; that I also know S. W. Long. he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said the applicant for pension; that he is the person Williem Reall Ordinary of said County, certify that I know I' .. C. Helurin, COUNTY, Compbell STATE OF GEORGIA,

Ordinary's Certificate

Commissioner of Pendons

Was next an exclisted soldier, and pensions was next anexpanse except to soldiers and their widews.

Commissioner of husions

Questions of Witness as to Service

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Witness.
5.0

Feb. 20, 1924.

Hon. C. E. McGregor.

Atlanta, Ga.,

Dear Sir:

Replying to yours of the 18th inst., in reference to pension claim of Mr. Wm. Beall, a blind man of my county The records in my office shw that he made his original application for pension on Aug. 6, 1923, and that same was given to him by me for deliverey to your office.

Before making has said application, I had him go to your office for suitable blank, which I then "filled out" for him. I did this because I hadly knew just what form should be used in this case. Mr. B. has never been enrolled as a pensioner; and, so, he made no application for an increase.

But, I judge from your said letter, that his original application has been lost.

Am writing him to come to see shout the matter, in order that I may learn from him as to date of filing said application etc.

As I recall his claim, it seems that he was injured in eye by a "stray" ball during the "late unpleastantness", but no as an active participant. So, for this reason, I did not know how he could draw a pension, or what form of application to use.

Yours very truly,

n. S. M. Forin,

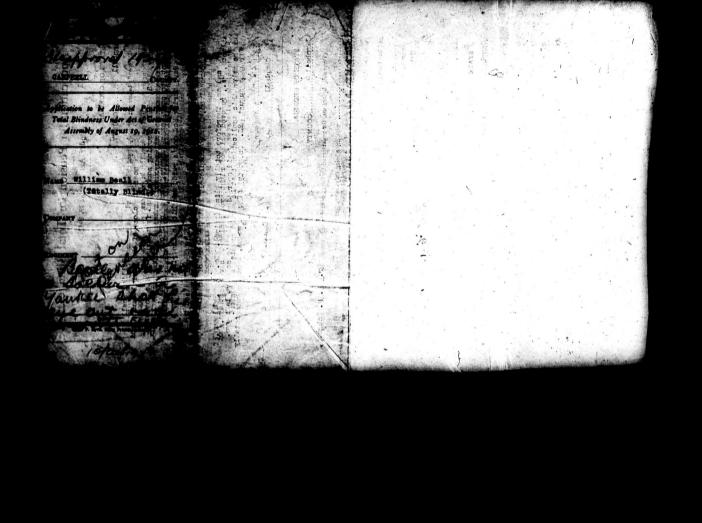
estion for Pension for Total Blindness

Under Act August 19, 1912

STATE OF GEORGIA,		3 + 1 fb,
daughallcounty.	Personally before me, the undersigned Ordinary of said County, comes William Beall near the close of the Citicil War, about after being duly sworn on cath say, That he included from house of the mother of the county, IBCS, while carrying some bread from house of the mother of the county, IBCS, while carrying some bread from house of the mother of the county, IBCS, while carrying some bread from house of the mother of the county, IBCS, while carrying some bread from house of the mother of the county, IBCS, while county is an included the county of the county and the county of the coun	
Personally before me, the undersigned Or	rdinary of said County, comes William Beall	
who after being duly sworn on oath says, That I	ear the close of the Civisi War,	abou
Jamuary, 1868, while carrying so	ome bread from house of the mother	P of
	THE RESERVE OF THE PROPERTY OF THE PARTY OF	24
mette, Ca., during NC ook's raid That he has become totally bill modiate loos of sight of aid ri wound we received. I have complet And that he makes this application that he biliness. and am therefore totally X soon to and subscribe before me said of And he makes this application to and a soon to a soon to a soon to a soon And the makes this application to a soon to	id, was hit in the right: eye by	1
mettes, Ca., during McC cot's raid That he has become totally blin modiate loos of sight of anid rig modiate loos of sight of anid rig modiate loos of sight of anid rig And that he makes this application that he blindness. and am therefore totally X sand to and subscribe before me and he and he makes this application that he this chi day of August 100%. Ordinary. Campbell	deral Army. Suite Would result dire	id in
wound to reversed; I have comple	etely lost the sight of my other	676
blindese, and am, therefore totall strains, when to and subscribed before me said. The said he makes this appliestion of this Oth. day of August, 1983. On ago of the Country of the Count	le bland (brind) to Dray ; let call ight eye, hoping to Dray ; let call on the hoping to Bray ; let call on the hoping to be a self wound, I have been for 30 said wound, I have been	eye.
	Million X B. II	P
	most (••••
		_
CampbellCOUNTY.		
Personally before me, the undersigned Or	rdinary of said County, comes P	obgo
O. P. C. State Control of the Contro	- [2.1
	마이 전 이 경기를 하는 것이 되었다. 이번 경기를 가득하는 이 경험을 했다면 하는 것이 되었다.	
Sworn to and subscribed before me		
this 6th day of August, 19123.		
2 M For Ordinary.	IMHobsood M	204
	Vitin Printer of Landing	-
CampbellCounty.		
STATE OF GEORGIA,		
CampbellCOUNTY.		1.3
	ORDINARY'S OFFICE,	. \.
NOTES AND ADDRESS OF THE PARTY	-yhimminiainiaini191	
	being the Ordinary of said Con	
	IF SK SHOKER XXX. XXXX POR SHORE SE	
Or said County, stables sheet pa	the excession of \$2,575 Texas succession of \$2,575 Texas and \$2,575 Texas	sheet
	that he has become totally blind. That he know	
who is	s a resident practicing physician of said County,	and
	ng, and what he says is worthy of belief and co	redit.

seal, and signed this the day and year

offication to be Allowed Pension & Total Blindness Under des at Count desembly of August 29, 2628. (Tatally Blinds



****LIGHT PRINT AND. OR BAD COPY ****

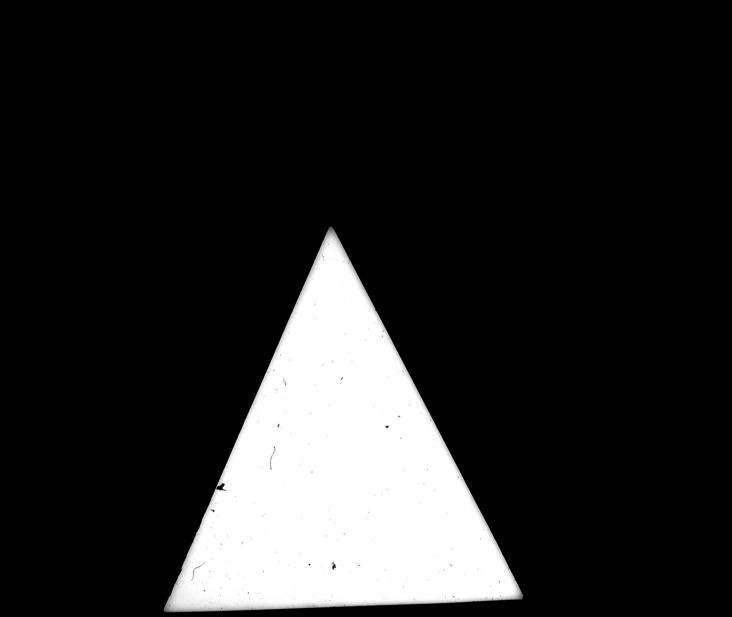
Doroh 4th, 1925.

Compbell County, William Beall.

DISA: ROWEL, for the reason that ap, licent was not an enlisted soldher and pensions are not payable except to soldiers and their widows.

organismont or Promions.

No No Barrio,



musem office 10/39-1913 the Costs balan excuse Noof allowed by law the comment gan any the property or climents on the the character to the character to the character than the character the character than the char Widow's Application To-Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910. giving Bropuly Addy Serm Campbell aus of Run Georgia A. Beaters widow of John P. Beavers "g"- let de. Reg't. Vol. J. W. LINDSBY.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF CEOPCIA		
STATE OF GEORGIA,		
Campbell		
COMPOSA	Count	v

ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Court tell County.Ordinary of said County, do certify, that, I know Mrs. Leaves the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 2. Com p .. who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit. That the tax Books of Arthur County shows that Alexandric it of for 1908 \$ 2.2/0 20 for 1900 \$ 2.2/70 20 ...returned property to the Sworn under my band and official seal of (SEAL.) .Ordinary. NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words
"You do sciennly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So bely you Gost." insufficient.

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

4. Only wildows who married prior to first January 1870, are satisfied.

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

WIDOW'S AFFIDAVIT.

AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	
STATE OF GEORGIA,	
Campbell County.	
Personally before me comes. Mrs. Georgia A	Beavers of said County,
who, after being duly sworn, on oath says, that she is the wi	idow of John P. Beavers to whom
in the County of Campbell State of	Ga. she was married on the 4th
day of Devember 18 56nd that she remained his wife, a	and resided with him to the date of his death
	is death remarried. At the time of his death
	(Ga.) said State of Georgia, and he
WAS ON the Share the state of the sta	of the State and paids pension of \$60.00
inCounty for 19per annu	um, on account of being a soldier in Company
Regiment	Vol. (Volunteers of State Militia.)
	M I Ware
At the death of John F. Beavers he	
property shout 540 seres of poor land (
We had property of any kind and of any value have yo	d. We rea'd 2 beles cotton ren
What property of any kind and of any value have yo	in your use, control and possession now, and
the cash value, (State fully.) None. It was so into on the land that I divided my interest	en trouble to get the little re
on the 120 that 1 divided by interest	In serie smould affourtoner
Horses and Mules	
Hogs, Cows, etc	ş •
Total Cash value of all property	s.*
That she is now a bona fide resident citizen of said C	
has so continuously resided sinceday of	
Sworn to and subscribed before me, this the	0 : 5 · 50 pm
	Lew years
My S. Ul Larce, Ordin	0. 0
of Campbell	County.
	and the second s
Affidavit of Witnesses to Prove Marr	riage and to Whom-Date of
Death of Hust	hand.
STATE OF GEORGIA,	
County.	
2 600	up f
Personally before me come and truthful persons residing in said County, who after his	known to be responsible
own personal knowledge Mrs.	맛이 살아가 그 이 집에 이렇게 되었다. 그리고 아이들은 그리고 있다면 하는 것이 없게 하는 것이 없었다.
own personal knowledge Mrs.	who did in County in
000	
said State ofonday	of and that she
	day W
of 18 6	
	lue 3. Deough was the
same man who was on the pension roll of said State.	(from Cour fell County
when he died.	1.
	12
Sworn to and subscribed before me, this the	ad Canil
8 11 day of 0 2 191 0	

of Complier

...County.

State of Georgia,) To any Minister of the Gospel, Judge, Justice of Campbell County.) the Remem Inferior Court, of Justice of the Peace:

You are hereby authorized to join John F.

Beavers and Miss Georgia A. Camp in the Holy state of matrimony, according to the Constitution and Laws of this State, and for so doing this
shall be your sufficient License.

Given under my hand and seal, this 4th day of December 1856.

I do certify that John F. Beavers and Miss Georgia A. Camp were duly

Joined in matrimony by me this 4th day of December, 1856.

R. C. Beavers, Ord'y, (Smal.)

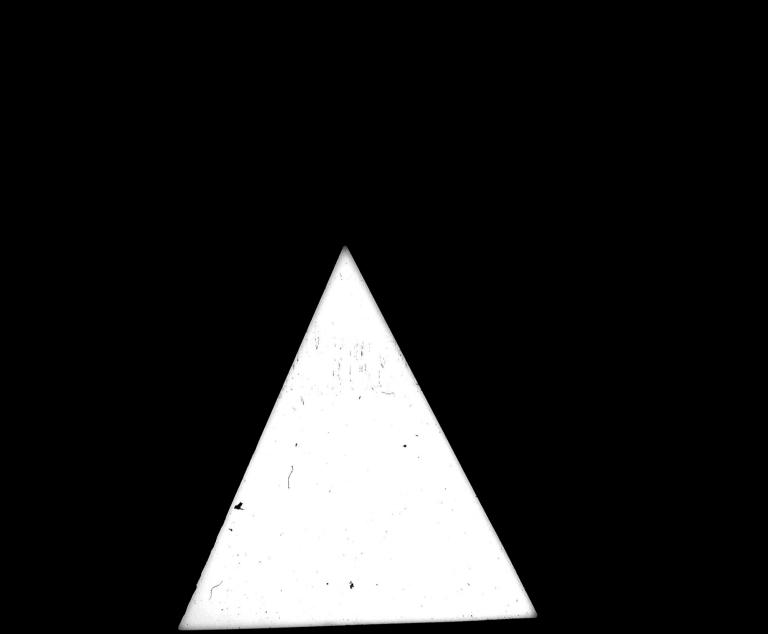
Georgia, Campbell County.

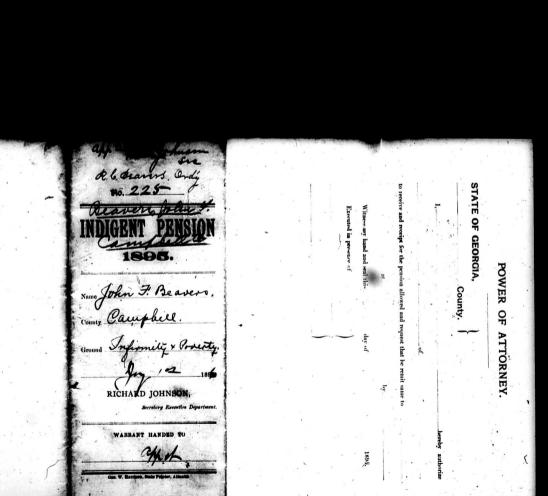
Georgia, Campbell County.

I, W. S. MoJarin, Ordinary of said county, do hereby certify that the above and foregoing is a copy of the marriage license and certificate of marriage of John F. Beavers and Miss Georgia A. Camp, as appears of record in my office an Marriage Records, Book "B", page 315.

Witness my hand and seal of office, this are seal of office, the seal of office, this are seal o

Campbell County, Ga.





ATE O	F GEOR	GIA.)				
		Cou	ntv.				
	-		4.1				
			Ordi	nary in and for	said County, h	ereby certify	that
pplicant	John i	7. Bear	uero	resides	in said County	and was a	bona
resident of	this State on	the first day of	January, 1894	, and that the w	ritnesses, viz:	R.S.	Poore
				, Oam		}	
	,		· · · · · · · · · · · · · · · · · · ·				************
				entitled to full fi questions, the s			took
	HIEROTAL C.			idavits was read			
re same we	re signed.	· .	0.	0:00		7.	
I further	ertify that th	e tax digests of	· Carry	auce 1	County sh	ow that app	licant
med for ta	xation in his	name in 1893,	\$ 33	3		d	ollars
		# 280	5-00				
	l in 1894,			0		property.	
Witness m	y hand and	schl of office, th	1. 30 A	C day of a	pril	1895.	
			R. G. B.				
		-				iry	Α.
	-			Pacific			unty.
			of C				unty.
efore any qu	estions are ans		of C	Pampl	lell.	Co	•
efore any qu shall true a so help you	estions are ans nawers make to God."		of C		lell.	Co	•
efore any qu shall true a so help you	estions are ans nawers make to God."		of C	Pampl	lell.	Co	•
efore any qu shall true a so help you	estions are ans nawers make to God."		of C	Pampl	lell.	Co	•
efore any qu shail true a so help you	estions are ans nawers make to God.''		of C	Pampl	lell.	Co	•
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efore any qu shall true a so help you	estions are ansassers make to		of C	Pampl	lell.	Co	•
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efore any quantum and true a so help you	estions are answers make to God."		of C	Pampl	lell.	Co	•
efore any quantal true as so help you	estions are answers nawers make to God."		of C	Pampl	lell.	Co	

and is thenica	agradion and physical condition? Has no regul Dries to oversee a little fam of unable to do ordinary	w=
nanual tal	iot.	
. Is the applicant unable to su	pport himself by labor of any sort, if so, why? Thing	٠
Lo. = Princip	pport himself by labor of any sort, if so, why? I think hally on account of dire	are
		V.
2. How was he supported durin	ng the years 1883 and 1894. By the assistances as I think. ort for these two years was derived from his own labor or incompared to the second of the second	nce
his relation	es as things.	_
3. What portion of his suppo	Don't renow ever ever amount	ne?
Ke has no -	income.	ni.
,	N.	
den the 'Ant of December 18th	tement of the applicant's physical condition that entitles him to a pen h, 1894 ?.	
I know he s	affered very severely with	2
Eiles during	The war and now has	
Lone kind	of heart trouble and wh	at
	Lonounce catarrh also aumatism in his legs an	
uners There	by rendering him unable	4
enform orde	by rendering him unable in any manual takor,	
U		
		· .
i. What interest have you in the	he recovery of a pension by this applicant? Hone pecu	mia
Sworn to and subscribed be	efore me, this	

ordy.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,	
Campbell County	
10 6 -	
John J. Beavers of said State and County, desiring	
to avail benself of the Pension Act Approved December 15th, 1894, hereby submits his proofs, and after	
being duly sworn true answers to make to the following questions, deposes and answers as follows:	
1. What is your name and where do you reside? (give State, County and post office) John	1
1. What is your name and where do you reside? (give State, County and post office)	
J. Beaver = Campbell Oo. Ja. = P. O. Chupbells	NY
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?	
Campbell Co. Fg = about 37 years.	1
3. When and where were you born ? March 4, 1835 = Campbell Co.	40.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confed. Arm	
	7.
5. When and where did you enlist? april 1862 = Carrollton ya.	Ĭ.
6. In what company and regiment did you enlist ? Company & = 1 St. Ja. Re.	st.
7. How long did you remain in that company and regiment? About 3 ye aro.	
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 not.	
9. For how long a period did you discharge regular military duty? About 3 years	
	151
10. When, where and under what circumstances were you discharged from service?	06
I was it home wounded, but doing detack	ed
luty at the time of Lee's Surrender.	_
11. What is your present occupation? I try to works on a farm when s	100
11. What is your present occupation? Vous Control of Co	~
2. How much can you earn per annum by your own exertions or labor? Very title.	
I am not physically able to dot any works	
of any consequence.	
S. Po O	
13. What has been your occupation since 1865? Sold goods about 4	~
systems and tried to farm the remainder	
of the time.	
What sum would be necessary for your support for this pension year, and how much are you able to	
21	
	* 1
little = No income.	
	*

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,		
-Campbell o	ounty.	
	6 46 D	
Personally came before me	6 H Daverportino.	und
WH Camp	billio, both known to me as reputable physicis	ans
of said county, who being severally swor	rn, say on oath that they have examined carefully.	
	, applicant for pension under the Act of 1894, and a	fter
such personal examination, say that his p		
the Teavers Si	offers with Mervous	1
Prostration C	aring palpipatio	20
of his heart	when he gets too was	n
le has fainting	spells also has trouble	
in Priathing	when in that Condilis	·u
he has al	ic Masal Catarrh	
de mas convi	ine masar caracter	
ansing a pe	insistent headache	
he also suy	fers with bleeding	
piles Contra	cled during the was	h. /
his feet and	le lies also swells were	he
he stands or	when too wuch	. Annual cons
he also sufe	less with general delik	ile
. 10		/
()		
		-
		•
	The second secon	
We further say on oath that the	physical condition of applicant renders him unable to labor	r at
	upport for himself, and that we have no interest in said pens	ion
being allowed.	It Beaup, min	_
Sworn to and subscribed before me,	this Condanuifor Mas	
the 30 day of April		

I sold much of

OUESTIONS FOR WITNESS.

	The Market Control of the Control of
	STATE OF GEORGIA.
	Campbell County
	R. J. Owolk , of said State and County, having been presented
	na a witness in support of the application of John F. Beasers for pension
	under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the
	following questions, deposes and answers as follows:
	1. What is your name and where do you reside? A. J. Coast = Campbel
	Co. La.
	2. Are you acquainted with John F. Beauers, the applicant, if so
-	how long have you known bim? 45 years or more.
	how long have you known Mm? To year of make a company of the compa
	3. Where does he reside, and how long has he been a resident of this State? Campbell Co.
•	Eg. = Whouh 37 yie aro.
	4. Do you know of his having served in the Confederate army or the Georgia militia? How do you
	know this? I know of his having served in
	the Confe devale formy = Lerved in same company
	5. When, where and in what company and regiment did he enlist? April 1762 - Carrier
•	G. = Company E." IRL Gg Calvary Regt.
	6. Were you a member of the same company and regiment?
	7. How long did he perform regular military duty, and what do you know of his service as a Confed-
	erate soldier, and the time and circumstances of his discharge from the service? about 3 ye
	He was a good sol dier and did his duly
	such = The was detached from my company for
	other serving a short while before the surrender and
	Not know the particulars of this discharge, 8. What property, effects or income has the applicant? (Give your means of knowledge.)
1	almost nothing so for as I know on believe.
	9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition,
	if any, did he make of same? I don't think he had any
	If any, did he make of same?
	H. In The burn really to amoreined by Anni

GEORGIA, CAMPBELL COUNTY;

I do certify that John F. Beavers and Miss. Georgia A. Camp were duly Joined in matrimony by me, this 4th day of December, 1856.

Augustus B. Pears, M. G.

Georgia, Campbell County.

I, W. S. McLarin, Ordinary of said county, hereby certify that the above and foregoing is a true copy of the marriage license and certificate of marriage of John F. HEavers and Miss. Georgia A. Canp, as appears of record in my office in record of marriages licenses, Book "B", page 315.

Witness my hand and seal of office, this Feb. 17, 1913.

It Stll Faxine, ordinary of

You are herby authorized to join John F. Beavers

Campbell County, Ga.

STATE OF GEORGIA,) To any Minister of the Gospel, Judge, Justice of CAMPBELL COUNTY.) the Inferior Court, of Justice of the Peace:

and Miss. Georgia A. Camp in the Holy State of matrimony according to the Constitution and laws of this State, and for so doing this shall be your sufficient license.

Given under my hand and seal, this 4th day of Dec. 1856.

R. C. Beavers, Ord, (Seal.)

How much did your support cost for each of those years, and what portion did rour own labor or income? Whouh #100 = V. What was your employment during 1893 and 1894? What pay did you had no income. What was your employment during 1893 and 1894? What pay did you had no regular recupation: overloose the farm of my use thing. Are you married and have you a family? If so, is your wife living and how me ago and sox of children and their means of support? Live children to with: Sind 27. Zirl 25. Jirl 22. = wor labor and by the assistants. Are you receiving a pension under any law of this State, if so what amount as Mone. — More. Are you receiving any slid from your County, and if so, how much? Did you now here.	all h.
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Um not = No. =	ever apply for such aid
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11 -16	
Swam to and subscribed before me this the	Daven
Sworn to and subscribed before me this the	Applicant.

WHEN AND WHERE BORN? March 4th.1855 Campbell County, Ca.

ENLISTED WHEN AND WHERE? April 1862 Carrollton, Ga.

COMPANY AND REGIMENT? Co. E, 1st. Ca. Cavalry Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Was at home wounded , but doing detached duty at the time of Lee's surrender.

CAPTURED, WHEN AND WHERE?

RELEASED, 1865

WHEN AND WHERE GURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

IF NOT PRESENT AT SOMRENDER, WHERE TERE 1007

DIED, WHEN AND WHERE?

WITNESSES. R.I. Cook. No data.

WITNESSES, R.I. Cook. No data.

P.O. 1896 COUNTY. Campbell County.

12. A.

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BURIED,

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STATE OF	SELL CO	untv.			CO	1
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POWER OF ATTORNEY.

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Can	applee of	ounty.		otel	40
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IN V	VITNESS WHE	REOF, I have he	ereunto set m	y hand and see	al, this 6
day of	la. A	1898,		, , , ,	
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E	xecuted in preser	ice of			
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<u> </u>			timo .	1 11	1 11

Dersonally a	uppears John & Brown of Complete
County, State of C	Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of sai	d County and State, and has resided in said State continously ever since
the d	ay of Oze 22 1858; that he is 6 years old and
by occupation a	; that he enlisted in the military service of the Confed-
erate States (or of	in Company E. of / th Regiment of
Sa Co	that his physical condition is as seriously bounded with Piles, ch.
follows: How	a seriously positive will better
Munio	lieur, Reducy of feelion 4 Calour
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that his property	consists of the following items Hero us property wh
	pha licela old loves hory furent
	voretiles
of the value of	Dollars, that by reason of his physical
	erty 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 des	pension but the one herein applied for. ires to participate in the benefits of the Act, approved December 15th
Deponent des	pension but the one herein applied for. ires to participate in the benefits of the Act, approved December 15th, amendatory thereof, and makes application for the pension to which he
Deponent des	pension but the one herein applied for. ires to participate in the benefits of the Act, approved December 15th, amendatory thereof, and makes application for the pension to which he
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Deponent des 1894, and the acts is entitled for the county been allow Sworn to and the county been allow Sworn to and the county been allow Sworn to and the county been allowed to the county been allowed to the county that I a applicant in the fe in his said affidavi	pension but the one herein applied for. ires to participate in the benefits of the Act, approved December 15th amendatory thereof, and makes application for the pension to which he year 1897. I have heretofore as a resident of da pension for the year 189 de subscribed before me, this, the yof 1897. Ordinary. F GEORGIA, County. Ordinary of said County m well acquainted with before if the statements made by him t are true, and I know he is the individual he represents himself to be in this County. Given under my official signature and seal, this
Deponent des 1894, and the acts is entitled for the county been allow Sworn to and defect the county bear to and defect the county bear to and defect the county bear to an advantage of the county of	pension but the one herein applied for. ires to participate in the benefits of the Act, approved December 15th amendatory thereof, and makes application for the pension to which he year 1897. I have heretofore as a resident of day pension for the year 189 consistency subscribed before me, this, the any of 1897. Ordinary. F GEORGIA, County. Ordinary of said County m well acquainted with place of the statements made by hin t are true, and I know he is the individual he represents himself to be in this County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.	. 1.6
Complete Cou	nty.}
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Personally appears	Meners of Compfell
County, State of Georgia, who being duly	sworn, says on oath that he is a bona fide citizen
	nd has resided in said State continuously ever
since theday of	1857; that he is 62 years old and
by occupation a faricul; that I	ne enlisted in the military service of the Confed-
erate States (or of the State of 90,	during the war between the States,
and served for the term of Their year	in Company E, of / the Regiment of
ya Carali,	; that his physical condition is as
follows: defelected with hear	Y 4 Butues bouter Ofonie
with the said of t	alltitles that streetly in
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that his property consists of the following i	tems I de not cure
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that he receives no pension but the one here	in applied for
Deponent desires to participate in th	e 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 hereto	fore as a resident of (a constant)
county been allowed a pension for the year	
6th day of Jacry	(1898.) Jno. F. Beaver
R. C. Geavers	1898.)
or. o. oscaren	Ordinary.
State of Georgia,	그 얼마를 하고 있다. 그는 그리고 있다.
Course bill County.	
I. R. C. Beau	-y-v
do certify that I am well acquainted with	Clumary of said County.
applicant in the foregoing efficient and am	well satisfied that the statements made by him
in his said affidavit are true, and I know he	is the individual he represents himself to be
and that he resides in this County.	is the individual he represents himself to be
	cial signature and seal, this 6
day of Jacey	1898.
Table 7	a. C. Geavers
	a. C. Graver

NOTE.—The blank spaces must be fille

POWER OF ATTORNEY.

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	7.	Garten	of oba	mpbell com
receive and r	receipt for the	pension allowed	i, and request	that he remit same to
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INDIGENT

JOHN. W. LINDSEY.

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210,03201, 310,010

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For Applicants Heretofore Allowed Pensions.

STATE OF GE	
- olamplu	County.
	cars L. H. Beauers of Jamphell
	ia, who being duly sworn, says on oath that he is a bona fide citizen
	ounty and State, and has resided in said State continuously ever
	ay of museh 1835; that he is 63 years old and
	muz; that he enlisted in the military service of the Confed-
	State of) during the war between the States,
of sosyia yte	of B years in Company 6, of th Regiment of
- systemija vie	alory ; that his physical condition is as y a hart truble and Ridney Truble exity which renders me unable to
tollows: I have	a nay muce and kinny may
and aspe	thing which renains my sinally to
	post any way
that his property cons	ists of the following items none
	The state of the s
or the value of	hore Dollars, that by reason of his physical
condition and poverty h	e is unable to support himself by his own exertion or labor, and
that he receives no pens	sion but the one herein applied for.
	to participate in the benefits of the Act, approved December 15th,
	datory thereof, and makes application for the pension to which he
11 .	1899. I have heretofore as a resident of Mamphell
county been allowed a p	ension for the year 189 8
Sworn to and sub	scribed before me, this, the
13 day of	January 1899.
1.4. Acti	phens Ordinary.
1	O'lunary.
State of Georg	io \
State of Georg)
·	County.
I,	J. Attphens Ordinary of said County,
do certify that I am we	Il acquainted with & Beauers the
applicant in the foregoi	ng affidavit, and am well satisfied that the statements made by him
n bis said affidavit are	true, and I know he is the individual he represents himself to be
and that he resides in th	nis County.
(Given under my official signature and seal, this 13
dayo	f Lanusty 1899.
Ame	1. y. of teppens
here. }	J. J. apheno
	Ordinary Jeampo bell County.
Nors.—The blank spaces t	nais be filed,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.	
Mampbell Cou	.}
gampace Cou	
personally appears	Beavers of olamphell
County, State of Georgia, who being	duly sworn, says on oath that he is a bona fide citizen
and resident of said County and S	tate, and has resided in said State continuously ever
since the H day of Muy	that he isyears old and
by occupation a Justiney	that he enlisted in the military service of the Confed-
	during the war between the States,
and served for the term of The	Myears in Company & , of / th Regiment of
observan dealer	that his physical condition is as
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	am phisically mable to
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that his property consists of the fo	illowing items 77074
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condition and poverty he is unable	to support himself by his own exertion or labor, and
that he receives no pension but the	
	te in the benefits of the Act, approved December 15th,
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	ve heretofore as a resident of Jeamphelf
county been allowed a pension for t	he year 1804
Sworn to and subscribed before	
g day of Lanua	1900.)
1) Sultiphing	Ordinary.
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State of Georgia,	
deamphiell co	
I, Jose	Whens Ordinary of said County,
do certify that I am well acquainte	ed with L. H. Beaulos the
	and am well satisfied that the statements made by him
	know he is the individual he represents himself to be
and that he resides in this County.	
	der my official signature and seal, this 9
day of June	
Amx your day of	
hore.	& Tottephens
	Ordinary Teamfilell County.
Norm The blank mades must be filled	County.
Nors,-The blank spaces must be filled,	

NOTE,-Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY. STATE OF GEORGIA, J. F. Beriero hereby authorize e. 3 to receive and receipt for the pension allowed and request that he remit same to hon of Witness my hand and seal, this 2 day of Fee by Executed in presence of

JOHN W. LINDSEY,

WARRANT ISSUED

WARRANT HANDED TO

SOLDIER'S PENSI

1901

INDIGENT

POW	VER OF	ATTORI	NEY.	· ·	
STATE OF GEORGIA,	County.	hereby aut	norize -	lohu	R
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by			21 1 2		•
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DIER'S PEN INDIGENT 1902.

92.

WARRANT ISSUED

OHN W. LINDSEY,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Decreonally appears of Acousto of Complete
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 18 7; that he is 65 years old and
by occupation a description that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of agree in Company 6, of th Regiment
of ta colley (coalry) that his physical and then be
follows: Levis livery of free time, of to-
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that his property consists of the following items 200 chairs
of the value of Dollars, that by reason of his physical
condition and poverty he is mable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Depouent desires to participate in the benefits of the Act, approved December 15th,
1814, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of
county been allowed a pension for the year 1 900
Sworn to and subscribed before me, this the
12/ day of 72 64 1901
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,
STATE OF GEORGIA,
STATE OF GEORGIA, County. Ordinary of said County,
1, 22. 5. Me - Lorie Ordinary of said County,
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of . 2 - 4 1901.
my of Jety Mis we form
Norr - The blank spaces must be filled.
Nore - Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

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POWER OF ATTORNEY. POWER OF ATTORNEY. Compbeel County STATE OF GEORGIA. Come of beecounty. to receive and receipt for the pension allowed and request that he remit same to to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this Witness my hand and seal, this Executed in presence of Executed in presence of Mille Clune age INDIGENT JOHN W. LINDSEY INDIGENT

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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
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Personally appears J. J. Be	or Come ple
County, State of Georgia, who, being duly swo	rn, says on oath that he is a bona fide citisen
nd resident of said County and State, and h	as resided in said State continuously ever
since theday of	18 17; that he is 67 years old and
by occupation a Jones, that !	he enlisted in the military service of the Con-
federate States (or of the State of	
States, and served for the term of	in Company "E", of _th Regiment
	; that his physical condition is as
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that his property consists of the following ite	ms: 40 proper g
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	mimself by his own exertion of labor, and
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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

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county, State of Georgia, who, being duly a	sworn, says on oath that he is a bona fide citizen
	nd has resided in said State continuously ever
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	nat he enlisted in the military service of the Con-
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nat his property consists of the following	items.
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f the value of	Dollars, that by reason of his physical port himself by his own exertion or labor, and
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Nors.—Affidavis should not be attested tofere January 1st, 1904

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POWER OF ATTORNEY.

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COPE SECTION 1554.	10		63 3	Regiment Vol C WARRANT ISSUED	JAN ZE,	Commissioner of	
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COR THOSE ALREADY ENROL)		Name Z	9			0
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POWER OF ATTORNEY.

STATE	OF GEORGIA,	· 1	
	COUNTY.)		
m	for the same	2	_hereby authori
1/10	pur donn of	Jan au	<u> </u>
to receive	and receipt for the pension allowe	ed, and request that	he remit same
NO SHIPMEN	···· »	Lou	ui.
	hand	. 0	8.7
оу	19	Χ~.	
Wı	THESE my hand and seal, this	day of	1908.
	a second	Fr. Jean	[L.
Exe	cuted in the presence of		
1	11 miles . 18h		
XX	The veries wor		
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s, John J.	Hull G.	A DECAPY EMPOLLED.)	1160	PS PENSION	106.	Regiment S.A.	OL - CONY	WW 24 1906.	JOHN W. LINDSEY. Commissioner of Pensions.	NT HANDED TO	O Parame Co., Gro. W. Hosespor. Mer.
Seam	mal	Con THOSE	No.	SOLDIER	10	County Co	Sa-7	***************************************	H 0 5	WARRANT	The Passents Pressure as

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no deta

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Campley County.
Personally appears to Devoro of Compben
County, State of Georgia, who, being duly sworn, says on oath that he is a bonu fide citizen
and resident of said County and State, and has resided in said State continuously ever
by occupation a down , that he enlisted in the military service of the Con
federate States (or of the State of) during the war between the
States, and served for the term of " Y of in Company"E", of / th Regimen
of yee day tol ; that his physical condition is as
follows: I hove colourly, Rhumalism
41 16 comy how oh
that his property consists of the following items ! Les pro party -
that his property consists of the following items:
the state of the s
of the value of Lo Dollars. I am now earning
by my labor, " Dollars per month. That by reason of hi
physical condition and poverty he is unable to support himself by his own exertion o
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 h
is entitled for the year 1905. I have heretofore as a resident of
County been allowed a pension for the year 1904.
Sworn to and subscribed before me; this the JH Beauch
7.3 May of 201 7 1905.
m Ville Call
ordinary.
CONTROL OF CEORGIA
STATE OF GEORGIA,
1. A Sie Love Ordinary of said County
1, A Ordinary of said County
do certify that I am well acquainted with J. Jeours
the applicant in the foregoing affidavit, and am well satisfied that the statements mad
by him in his said affidavit are true, and I know he is the individual he represents himsel
Given under my official signature and seal, this 2 3
day of dairy 1905.
n lu Loren
TAME TO THE PARTY OF THE PARTY
Ordinary Gazes Bell County.
Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, 1906.

		Selection of the select		MOTOTIO.
State o	f Georgia	•	1	
· 6 am	Sheel con	inty.		
-	0 2	V /	0	110.
A 250 PM 1880 F0 PM 18	appears		of Com	Jule
County, State of	Georgia, who, being	duly sworn, says o	n oath that he is a box	a fide citizen
		ate, and has reside	d in said State conti	nuously ever
since the	day of	18.7	that he is 76	ears old and
by occupation a_	Janes Marie	-, that he enlisted	in the military service	
	or of the State of) during the war	
States, and serve	d for the term of Y		pany E, of /	
follows: IL	ava Calo	7 11:1	; that his physical co	
follows:	75		my son	<u>~~</u>
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5		·		
that his property	consists of the follo	wing items:	more	
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by my labor,	4	D-11-	Dollars. I am	
		Domais p	er month. That by	reason or his
1894, and the Actis entitled for the County, been allowed Sworn to a day	as amendatory thereo the year 1906. I have been a pension for the and subscribed before of	f, and makes appli heretofore, as a re ne year 1905.	the Act approved Deceation for the pension sident of Comments	to which he
M. S. Cl	Lonn	Ordina	ry.	
	Georgia,	}		
Carry	phin co	unty.)		
I,	Sund	ve.	Ordinary of	aid County
do certify that I	am well acquainted	with 2	Louis	and Commity,
			tisfied that the state	mente mede
by him in his sai	d affidavit are true a	nd I know he is th	e individual he repres	ente himself
to be, and that he	resides in this Coun	tv.	- Individual no repres	ence miniseri
	iven under my officis	·	al this 19	in .
	y of Lau	199	6.	
	0.	m. S.	Un Low	ن بن
A		0 0	and bliss	
		Ordinary	- Jour	_County.
	HOTE The blank spa	or most be filled.	Tinners for the	

POWER OF ATTORNEY.

L. C.	2. Bin	Lair be	mi ya	authorise
by G	hand and seal, this	at day of J. F. / Se	Carre	
	in presence of a simulation of the simulation of	6.		
2	PERSION Z.	School School	1 LINDSET, Omensioner of Pullouin P HANDED TO	Pierra, Artufa,
County LL 6	LOIRR'S LOG	Name for Court of Cou	JOHN W. LINDSEY, Omentationer of WARRANT HANDED TO	no dot
See ten		and the second second second		

FOR APPLICANTS HERETOFORE ALLOWED State of Georgia. Personally appears & L. Drowers of Care of beer County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of ______ 18 59; that he is 7/_____ years old and by occupation a Lorent, that he enlisted in the military service of the Confederate States (or of the State of 44) during the war between the of ya - Not - Coury ; that his physical condition is as follows: I have Carlow + K oney district that his property consists of the following items: Us free feet to 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 Cour & bull County, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the m. S. ce former 1907. State of Georgia. Complete County. Ordinary of said County,

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

to be, and that he resides in this County. Given under my official signature and seal this 14 th

Mr. L. un Lomi

Ordinary Can to here County

The blank spaces must be filled.

GEORGIA,	amplel county.			
i, Mi	sul Joses,	Ordinary of a	ald county, do certify	
that I personally	know also from a	the ap	oplicant, and that she	
is the lawful wid	dow of	a was	, and was on	
the the		Bare of bell		
a Pension from.	Sixt Dollar		, and at the time	
of his death on t		19	13, there was due to	
him and unpaid l	his Pension of Six 4		ollars from the State	
of Georgia, and I	know for Loa	u p	, the within	
witness, and he	is of a truthful and trustworthy chi	aracter and entitled to full	credit.	
Given und	er my hand and seal this 2. J. da	2 811 4	1918.	
	,	Compbel		
	· · · · · · · · · · · · · · · · · · ·	Courp ou	County.	
November 1	٧		· · · · · · · · · · · · · · · · · · ·	
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5	2 1	Com	161	
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7 9 E	Deceased Soldier under Acres on Pension Lora in the Pension Lora in the Pension Lora in the Pension Control Co	St. 3 beach	£ 1	
£	ceased Solomore and the second Solomore and the second Solomore and the second Solomore Solom	Right St.	LINDSEY,	
300	2 3 1 5	1 1 1 P	3.	
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	June of the second	The state of the s		-000
GEORGIA,				
	County.			
MELS	authorize and constitute			
	o collect and receipt for me in my na			
	d,			
Pension Roll and	paid from	for	19	

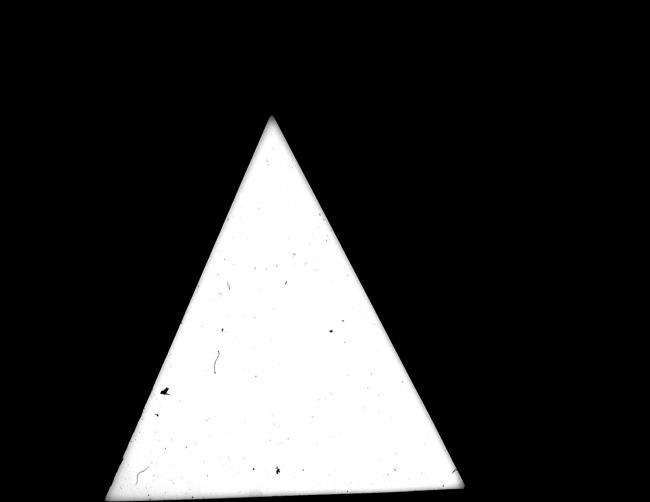
Attested before me:

Application for Pension Due Deceased Soldier

UNDER ACT APPROVED OCTOBER 9, 1891
STATE OF GEORGIA County bell County.
after being duly sworn, on oath says that she is the widow of
who was duly enrolled as a free the county
Come of bell and was paid a Pension of Sixty
land hell
Dollars from, and that the said
12 Deover died in Care feel gounty on
the 29 4 day of 1913, and at the time of his death a Pension of 66
was due him from Caire of bell
Applicant further swears that she married the said
the 4 day of 1875, in Care of accounty and
State of, and resided with him from the date of marriage to his death
as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be
paid to her.
Sworn to and subscribed before me this
Mr & Vol Lance Ordinary Mari Georgia Bearings,
Carefold County.
AFFIDAVIT OF WITNESS.
GRORGIA Caccopbell County
Personally before me comes. , who , who
on oath says that he knew
and that he knows Mrs. Heavy a Deores
the above applicant; that he knows that the said I. T. Beovers
and were in due form of law married in the county
of the fact in the State of
the day of the 188 , and that they resided together
as husband and wife from date of marriage to the day of his death on the
V
of
W. M. Truis
loan beer Ordinary
County.

Note 1st—This form can be used by guardian or minor children where there is no widow.

16—Ordinary must send in all cases certified copy of marriage floones attached.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Oler Tree spaces (groups)		:		day o	†]	8
No. 766			Executed in	of UTIW NI		ective and
SOLDIER'S PENSION.			ed in pres	WITNESS WHEREOF		receipt for
1896.			cnoe of us	COLL		8
Name Juffrey E. Och Coll			_ -	have here		of .
Disability & cocc				reunto set 1	Ьу	hereon
2/27 1896			10	ny hand a		and request that he remit same
RICHARD JOHNSON, Secretary Executive Department.				and seal, t		st that he
WARRANT HANDRED TO				this		remit san
Uno. W. Harrison, State Printer, Atlanta.			ř. 8.			8

ATATE OF O

Colors of Tempers of

POWER OF ATTORNEY. STATE OF GEORGIA, County. I, hereby authorize of 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 day of [t. 8.] Executed in presence of us

	Со	untv.		7		,
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		of				
receive and a	eceipt for the	pension paid h	ereon and r	equest that	he remi	t same to
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IN WITN	ess where	OF, I have here	unto set m	y hand and	seal, this	
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y of .		1897.				
y of .		1897			-	[r. s.]
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•	5					[L. S.]
•	5					[L. 8.]

RICHARD JOHNSON

STATE OF GEORGIA,

Courretty,

I see will be seen to be

1896.

For Applicants Heretofore Allowed Pensions.

	-bb
STATE	OF GEORGIA,
Con	- p beel County.
Derson	ally appears before E. deck of Compbeel
ounty. Stat	e of Georgia, who being duly sworn, says on oath that he is a sone fide citizen
MESSONG AND MESSON IN	of said State, and has resided therein continuously ever since the
	Carel 1890; that he culisted in the military service of the Con-
	en (or of the State of) during the war between the
ates, and s	
1	Volunteers, at ales 's Brigade; that whilst engaged
such milit	ary service in the State of, on theday
, -	186 -, he was wounded, injured or diseased as follows:
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wit,	Drowthou & Chest From ble, while
in a	roce in Va; was coplished by
lerior	- forces & turned loves by their
eeou	ut of way physical condition; on
com	is of ture diseases I have suffered i
in en 4	in one graner as our un fit for
rdin	
	at desires to participate in the benefits of the Act, approved October 24th, 1887,
	amendatory thereof, and makes application for the pension to which he is
ititled for	the year ending October 26th, 1896. I have heretofore as a resident of
11am Con 41	county been allowed a pension of the year 189
	o and subscribed before me, this, the
1	
200	day of 1808.
a.le.	
Nors-State fi the disability, re	ully the nature of wound or character of disease which causes the disability, and explain perticularly the extent sulting from the wound or disease.
X	
TATE	OF GEORGIA,
Jan	fifee County.
	RPA.
. I,	Ordinary of said County
	at I am well acquainted with
	the foregoing affidavit, and am well satisfied that the statements made by him
	fidavit are true, and I know he is the individual he represents himself to be esides in this County.
u that he r	Given under my official signature and seal, this
(day of 1898.
\	uay 01
AME	Ale Byavars
	0
- La - 177	Ordinary Sould County
	FOMER OF VIJORNEA County

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
County.	
Dersonally appears Joffey E. G. e. R. of Co.	- phier
County, State of Georgia, who being duly sworn, says on oath that h	
and resident of said State, and has resided therein continuously ever	
day of Menre ! 1800; that he enlisted in the milita	
federate States (or of the State of) durin	g the war between th
States, and served as a fire of the States of the Company	, of 44 th Regimen
of Volunteers, Volunteers, 's Brigade	
in such mintary service in the bancor	n theda
of tool the Frank while we arrive	
2" toute of Manassas, woo uncon	toraces for
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ordinary me and de la box	
D	-1 O-1-b 94sb 100
Deponent desires to participate in the benefits of the Act, approvand the acts amendatory thereof, and makes application for the	
entitled for the year ending October 26th, 1897. I have heretofo	
resident of county been allowed	an invalid pension
Dollars, for the year 189 6.	di a
Sworn to and subscribed before me, this, the	6 y Decl
	· ····································
day of leave, I rost of fice.	7-5
A. Co. Beavers, Ordinary	
Note-State fully the nature of wound or character of disease which causes the disability, and of the disability, resulting from the wound or disease.	explain particularly the extern
STATE OF GEORGIA,	
Complete County.	
D C 12	inary of said County
do certify that I am well acquainted with & fry 6.	the county
applicant in the foregoing affidavit, and am well satisfied that the sta	
in his said affidavit are true, and I know he is the individual he re	
and that he resides in this County.	promotita illinacii to t
Given under my official signature and seal, th	is 80
day of	
A. C. Grav	
Ordinary Comp	beec .
Ordinary	County

		ER OF ATTO	ORNEY.	
STATE OF	GEORGIA,	tv.}		
Ι,			uthorise	et i
Printed processing and the same		of		
to receive an	d receipt for the p	ension paid hereon a	nd request that	he remit same
<u> </u>		by		
at				
IN WIT	NESS WHEREOI	F, I have hereunto set	my hand and see	1 this
lay of		1898.	y mad and sea	.,
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Eve	cuted in presence of			[L.
	inted in presence of			
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Already 27		100 2 15	1 0 E	WARRANT HANDED
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No.	15 笛	130	H H	1 C
		3/1	2/2 3 RICHARD JOHNSON	B 1
E	3	Name County Disability	Amount,	
	→ S	Name County Disabili	Am.	- -

Coun	ity.}				
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IN WITNESS WHEREOF		ereuuto set m		eal, this_	•
sy of		ereuuto set m		eal, this	•

SOLDIER'S PENSIO INVALID

. Whila

WARRANT HANDED TO

RICHARD JOHNSON,

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Gamelane County.

6 am blue County. Dersonally appears Corrente Bucker Communical 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 22 day of march 1830; that he enlisted in the military service of the Confederate States (or of the State of Community and during the war between the States, and served as a Pair te in Company D", of 44 th Regiment of Corraca Volunteers, Tales 's Brigade; that whilst engaged in such military service in the State of Very new to on the day of 186, he was wounded, injured or discussed as follows: can city are the while guinning was splicted with clusting design our of was conduced in How total is into so, the My chick owilly & min almost ex hauts Deponent desires to partitipate 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 county been allowed an invalid pension of Dollars, for the year 189____. Sworn to and subscribed before me, this, the legacing to the day of 1898. POST-OFFICE COLOR TO Note-Miste 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. 6 mighere I. K. E. Binner Ordinary of said County. do certify that I am well acquainted with fuppores & But to 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 ____ 2

For Applicants Heretofore Allowed Pensions.

for ubbusques fiereceses unoated rensions.
STATE OF GEORGIA,
oleamphelf County.
Personally appears & E. Bick of Champ helf
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 32
day of musch 1830; 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 Drivate in Company D, of 44th Regiment
of oferties Volunteers, Dales 's Brigade; that whilst engaged
in such military service in the State of Mrginia, on the day
of 186 , he was wounded, injured or diseased as follows:
At the 2 manossus Battle I was taken sick
for six weeks was down with fiver and was uncons
all the while afterwards I was afflicted with chrone
Diarrhear and was confind in the hospital for eight
menths soing that time I was furlough tome and news we
able for fering any more from that truy on I have had a strong
dead feeling all the way from my breast down I am unable to labor for a wind all from dulate contracted to the amount of the period to which he is entitled for the year end-
ing October 26th, 1899. I have heretofore under said law as a resident of
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
County been allowed an invalid pension of Dollars, for the year 1898
Sworn to and subscribed before me, this, the) . L. S. My Se Ch
day of Juliunty 1899. POST OFFICE Timethy . eya
L. y. of telephone or dinaly
Norm. Main fully the sature 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,
ceamfolely County.
4.4.0/-/
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 I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of Hubruary 1899.
and and the state of the state
) coal (
Ordinary of umphell County

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA. STATE OF GEORGIA, County. County hereby authorise to receive and receipt for the pension paid hereon and request that he remit same to to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this. IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of_ [L. 8] Executed in presence of Executed in presence of INVALID DIER'S PE

STATE OF GEORGIA,

For Applicants Heretofore Allowed Pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,			
0 , 1 11 .	ounty.		1.
1	P Role	of Lamb	Lill
personally appears	G. Will	The second of th	The state of the s
County, State of Georgia, who be	ing duly sworn, say	on oath that he is a	ona fide citizen
22 day of march		he enlisted in the mil	
the Confederate States (or of the	Chata of	\ duele	or the war ha
tween the States, and served as a	youry.	in Company,	0, of 44th .
Regiment of oglorgia	Volunteers,	ales, 's Brigad	le; that whilst
engaged in such military service			
day of Janou 186.	, he was wounded	, injured or diseased a	follows:
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and was mounted	is all Me w	hile- afterward	do I was
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Deponent makes applicatio			
ending October 26th, 1900.			
oleampbell		een allowed an inva	lid pension of
Trifty \$6000		the year 1899	
Sworn to and subscribed bef		1. 6. X 101 C/	
15 day of Februa	14 1900. F	OST OFFICE James	thy oga
1 4 Att America	Brokinghei		
Nors.—State fully the nature of wound	or character of disease while	th causes the disability, and es	olain particularly the
The second secon	d or disease,		
STATE OF GEORGIA,)		1
of ampbell o	ounty.		
1	tephens:		
-1-	/ // // //	Ordinary	of said County,
do certify that I am well acquain		G. J. J. C. S.	the
applicant in the foregoing affidav in his said affidavit are true, and			
and that he resides in this Count		dividual ne represent	a minister to be
Authorities you manager to a file of	March Strid Arrent	ne I groupe that he	15-
· Ni		mature and seal, this	
day of The	wrong	1900.	
	17.	suppens	
	Ordinary	deampbell	County.
STATING COROLL			

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	0
111 80.11 6.16	u
Personally appears of County, State of Georgia, who being duly sworn, says on oath that he is a bona fide	altien
and resident of said State, and has resided therein continuously ever since the day of Machen 18.90; that he enlisted in the military service of the	
lenature Drutes (or or one Drute or	
States, any served as a Financial state of the state of t	
The state of the s	The second second second
IN BUCK MINISTY SELVICE SE THE DIREC O.	day
of Jon 1 / Leave 188, he was wounded, injured or diseased as follow	VB:
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erent Frederich dut was wow oble to peline .	
Landen discovered over since to quick	سلب
With That I am much to be form	O
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Chiny mouse	
Sworn to and subscribed before me, this the large & X D. day of 1901. Postoffice Postof	e R
Norm,—State fully the nature of the wound or character of disease which causes the disability, and espending the extent of the disability resulting from the wound or disease.	ain partie-
STATE OF GEORGIA,	
M. S. We Loren Ordinary of said	
17 WELVES WERE THE KIND OF THE PROPERTY OF THE	Control of the Control
do certify that I am wen acquired with	the
applicant in the foregoing affidavit, and am well satisfied that the statements made	
in his said affidavit are true, and I know he is the individual he represents himsel	f to be
and that he resides in this County. The fear we can any todace the state of	ring (e. r
Given under my official signature and seal, this // 7	
To Go	
day of 1901 W. S. We Lor	سن
County	
Complete Ordinary Complete	County.
POWER OF ATTORNEY	

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POWER OF ATTORNEY.

Jeffer	County	in and a second		· G0
J. Hery	E. B K	hereby autho	1 2 Suc	Poper
	****	of de	1	9-1
eive and receipt fo	r the pension paid	hereon and req	nest that he ren	it same to
Cairbane	· · · · · · · · · · · · · · · · · · ·	by	ree 4	-
	EREOF, I have her	eunto set my har	d and seal this	
Joery OSON	(1)	11. 8	V 13 11	. \
an, on Chur	av L	A strey Co.	-111	[L. S.]
Recuted in presence	: 01			

Candhell G!

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To Fayed Hy 14 93

DISABLED

SOLDIER'S PENSION

DEDIER'S PENSIG 1902.

Machility Attended Amount, \$ 6 12.0

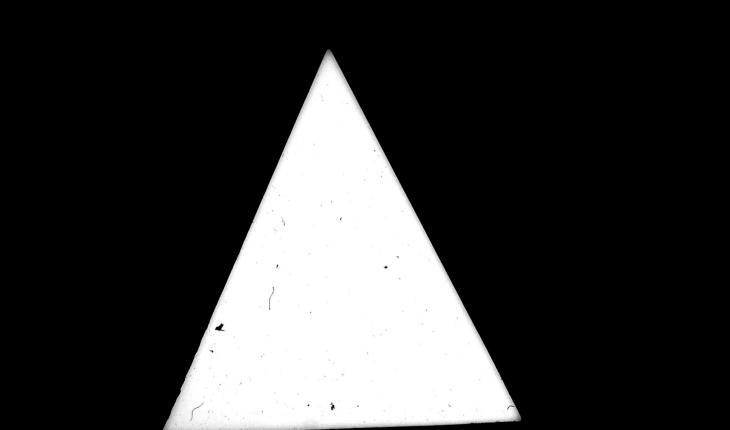
JOHN W. LINDSEY

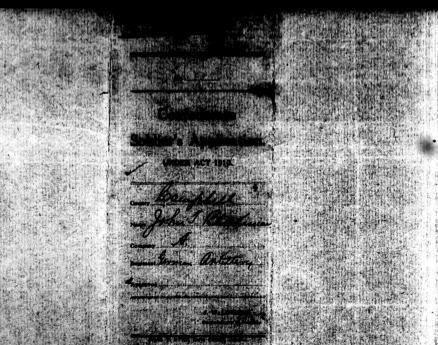
STATE OF GLOVE

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Complier County.
Personally appears for flory E. Beell of Courp best
ounty, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
nd resident of said State, and has resided therein continuously ever since the 22
ay of Meek 1800; that he enlisted in the military service of the Con-
derate States (or of the State of) during the war between the
tates, and served as a line in Company "", of "" th Regiment
such military service in the State of the north day
such military service in the State of, on the day
Micros lines 186, he was wounded, injured or diseased as follows:
cost favor while in arriver, was one ever cons for
wer 1/s - was later tothere with chronic Divorban & Muft
Ans file & sequetes, often which I was furloughed
way would othe fed derview oyour de recount
soid dividere fame une a ter to work a dupport
virigally of acty later on callery; for the carly 41 Ad
intoday in fit for ordinary in ordinal lobod
Deponent makes application for the pension to which he is entitled for the year
ding October 26th, 1902. I have heretofore, under said law, as a resident of
Courp beetCounty, been allowed an invalid pension of
Dollars, for the year 1901.
Sworn to and subscribed before me, this the Jeffer (6 x lee /1
day of Joney 1902. Post-office
M. S. Me Lories, Ordy
Nove.—State fully the nature of the wound or character of disease which causes the disability, and explain ricestority the extent of the disability resulting from the wound or disease.
The state of the s
TATE OF GEORGIA,
Complete County.
I M. S. Un Lower Ordinary of said County,
o certify that I am well acquainted with Juffrey 6. Buck
e applicant in the foregoing affidavit, and am well satisfied that the statements made by
m in his said affidavit are true, and I know he is the individual he represents himself to
and that he resides in this County. Given under my official signature and seal, this
day of Joseph 1902.
And he Lorie
Nors Fill all blanks and of Company and Regiment. Nors All vouchers and affidavits must bear date after January 1, 1902.
the second secon





THE OF GEORGIA for the proceeding by Aty of Hill, to Conscious Solders and interffic is tree as the continuous to make out the same, and wher being fully restors true assembly to make the large propounded, answers a follows, to wit: 1. What is your name and where do you reside? (Give County and har office). 2. How long and since when have you been a continuous resident citizen of this State? Dince 1867 3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this States 3. Did you culies in the Army of the Confederate States or of the Organized Militia of this State, from 1861 to 1805?

4. When and there and if what Company and Regiment did you emist; (Give the are lest class of Service)

5. How long did you remain in the actual Military Service with and Company one Regiment of Clive date of discharge). Military Service with and Company one Regiment of Clive date of discharge. Military Service with and Company one Regiment of Clive date of discharge. 7. Were you actually present with your Command when it was surrendered or discharged? 8. If you were not actually present, state specifically and clearly where you were a. Where was your Command when you left it? e. For how long was your leave granted? In what way?.... f. Why did you not return to your Command after leave expired?..... g. In what way were you prevented?.... h. What effort did you make to return?... i. Were you captured during the war?... i. If so, when, and where? In what prison were you held and when were you released?

9. What property of every discription was owned, in the use, possession and sontrol of yours and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value). White Experience At 1 Day in grant and the second The diese in 1906.

10. What properly of any kind have you or your wife disposed of and for what purpose since & Korn. 1908. To whom and for what price?.

11. What property of any discription of any kind, and of any value now owned and in the use,

possession and control of yourself and wife and its cash value? (Make itemized list). ...

Were Want when I so in cash and and dies hich # Struck of whenh 2500

13. What annual or monthly income or earnings of yourself and wife and the source derived have nous neut

14. Have you over applied for the Georgia Pention and had it refused? and for what eater it was not allowed?

John & Butter Swige to and subscribed before no, this th

NAME Bookson, John To. YEAR 1911 COUNTY Compton

Cook. Gorman Artillory.

ENLISTED IN EN AND WINERS RESISTANCE IN A SECOND RANGE

NAME OF GAPPAIN AND COLOREST

FOUND?

CAPTURED, WHEN AND WHERE?

HOPPASSES

COMPANY AND RECEIPER

MEN AND WHILE COMMISSION No. 2nd, 1885, Augusta, Georgia.

IF MOTIFICATION AT CHARGOUR, MORE THE THE

DUD, WHI AND WESTER

T. Mischett,-

Same Company with applicant-

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