POWER OF ATTORNEY

| to receive and receipt for the pension a | hereby authorize 1. Me Lorie of To it to real of January of Januar |
|---|--|
| Witness my hand and seal, this Executed in presence of | day of 7 1902. |
| SOLDIER'S PENSION 1902. | COUNTY, Regiment WARRANT ISSUED JOHN W. LINDSEY, COMMENCE OF THE OFFICE OFFI |

POWER OF ATTORNEY.

| STATE OF GEORGIA, |
|---|
| Camp bell COUNTY. |
| Moster of or franchischer hereby authorize |
| Will form of than ourself a |
| to receive and receipt for the pension allowed, and request that he remit same to |
| tun at_ house |
| by Laws |
| WITNESS my hand and seal, this day of day of [1807. |
| A. C. Levenine [L.S.] |
| Executed in presence of |

Name L. E. Coe hor our

Gam & Lee

County

Co. Regiment

WARRANT ISSUED

SOLDIER'S PENSION CODE SECTION 126. anyther S. INDIGENT 1907. No. 35 4 8

JOHN W. LINDSEY, Commissioner of Prasi WARRANT HANDED TO

1907

OLS. W HARRISON, STATE PRINTER, ATLANTA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

| TOR ATTERONITO REMEDIOLOGIC ADDOCAD TEROLOGIC | |
|--|---|
| STATE OF GEORGIA, County.) Personally appears as a Complexion of Complete County, State of Geoogia, who being duly sworn, says on oath that he is a bona fide citizen | A |
| and resident of said County and State, and has resided in said State continuously ever since the day of 1847; that he is years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of) during the war between the | |
| States, and served for the term of the State of the States, and served for the term of the states, and the states are the states and the states are the states and the states are th | |
| that his property consists of the following items 200 8,000 | |
| | |
| of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he | |
| is entitled for the year 1902. I have heretofore as a resident of county been allowed a pension for the year 1 | |
| Sworn to and subscribed before me, this the day of 1002. | |
| STATE OF GEORGIA, County. 1. Ordinary of said County, do certify that I am well acquainted with for E continuous 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 1009. Affiliary Ordinary County | |
| | |

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

| State of Georgia, |
|--|
| Campbell County. |
| Personally appears & 6, 6 as an are of Cam o bus |
| County, State of Georgia, who, leing duly sworn, says on oath that he is a bona pide critice |
| and resident of said County and State and her said the is a bona fide cutize |
| and resident of said County and State, and has resided in said State continuously eve since the f day of farry 18.1. ; that he is 7.4. years of |
| and by occupation a correct that he enlisted in the military service of the Con |
| |
| states, and served for the term of 49 m in Company 2", of N th Regimen |
| of - Ga - Wal - |
| follows I work Rheuma home, woo wounds |
| Coming in Com feet, service and an |
| on blind |
| that his property consists of the following items: We mo part by |
| that his property consists of the following items: |
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| of the value of 200 Italians I am your anim |
| Totals: Tall now earning |
| y my man per month that by reason of his |
| physical condition and poverty he is unable to support himself by his own exertion of labor, and that he receives no pension but the one herein applied for. |
| Deponent desires to participate in the benefits of the Act approved Deponder 15th |
| 1894, and the Acts amendatory thereon, and makes application for the pension to which he |
| is entitled for the year 1907. I have heretotore, as a resident of Jane & well |
| Annual Control of the |
| Sworn to and subscribed before me, this the 15. Coalcase |
| |
| Mille Comer, Ordy Ordinary. |
| 674-4 |
| State of Georgia, |
| Campe bell county. |
| 1. M. L. We Love Ordinary of said County. |
| to certify that I am well acquainted with S. E. Core Linau |
| the applicant in the foregoing affidavit, and an well satisfied that the statements make |
| 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. |
| Criven diner by one in again to and the |
| day of Jany Mr. i. le come |
| Ordinary Came, well County |
| Norw — The blank spanse must be Albert |

Nors Affidavit should not be attested before January 1st, 19

POWER OF ATTORNEY.

| ST | ATE OF GEORGIA, Complete County. 1. J. Cooleren hereby authorize At. Sine Jensey authorize At. Sine of Jensey authorize At. | Ton |
|----------|--|-----------|
| to by | receive and receipt for the pension allowed and request that he remit | same to |
| oy. | | 1903. |
| | Executed in presence of | [L. S.] |

JOHN W. LINDSEN,

WARRANT ISSUED

FOR THOSE ALREADY ENROLLED.

DIER'S PENSION

Name

INDIGENT

POWER OF ATTORNEY.

STATE OF GEORGIA, 1, S. Cochoon hereby authorize It Suctor to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this , day of

Executed in presence of

SOLDIER'S PENSI INDIGENT

FOR THOSE ALREADY ENROLLED.)

JOHN W LINDSEY

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

| , |
|--|
| STATE OF GEORGIA, |
| Personally appears & Cockrow of Compbee |
| Personally appears to Cockrow of Compbee |
| 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 9 day of 18 34; that he is 6 8 years old and |
| The state of the Coll. |
| federate States (or of the State of) during the war between the |
| States, and served for the term of July 20 in Company e, of th Regiment |
| follows: It as would be that his physical condition is as where we would be the standard of th |
| follows: It or wound and in Jours |
| where in our fed. Low en |
| |
| that his property consists of the following items: 20 frof - |
| 7 |
| |
| of the value of the |
| 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 Complete. |
| county been allowed a pension for the year 1 90 7 |
| Sworn to and subscribed before me, this the |
| 1803. Continues |
| Ordinary. |
| STATE OF GEORGIA, |
| north County) |
| Wir Jone |
| do certify that I am well acquainted with . E. C. Ordinary of said County, |
| the applicant in the foregoing affidavit, and am well satisfied that the statements made by |
| him in his said affidavit are true, and I know he is the individual he represents himself to |
| be and that he resides in this County. |
| Given under my official signature and seal, this |
| dent to the same of |
| The Jones of the Jones |
| Con-1/1 |
| Ordinary County. |
| Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, 1903. |

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA, |
|--|
| Complete County. |
| Personally appears & & Cockerough Comple |
| 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 |
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| by occupation a format that he collected in the military years old and |
| by occupation a hard state of the State of t |
| States and served for the term of the state of the served for the term of the served for the served for the term of the served for the served fo |
| Tar 2 ve - |
| States, and served for the term of y in Con.pany 6, of I th Regiment of the transfer of the theoretical that his physical condition is a follows: |
| our me flux of our cross of 111 |
| would he't in your in wort |
| 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 |
| County been allowed a pension for the year 1 |
| Sworn to and subscribed before me, this the |
| 1) day of 7 ~ 1904. |
| 12. See Le Love Ordinary. |
| STATE OF GEORGIA, |
| Car precounty |
| County |
| I, It I de to organism Ordinary of said County, |
| do certify that I am well acquainted with G. Cortain and the applicant in the foregoing affidavit, and am well satisfied that the statements made |
| 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 1904 |
| and the state of t |

Nors.—The blank spaces must be filled Nors.—Affidavit should not be attested before Janua

POWER OF ATTORNEY.

STATE OF GEORGIA. to receive and receipt for the pension allowed, and request that he remit same to Trance WITNESS my hand and seal, this [L. S.] Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA, to receive and receipt for the pension allowed, and request that he remit same to WITNESS my hand and seal, this Executed in the presence of

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

JIER'S PEN

WARRANT ISSUED

WARRANT HANDED TO JOHN W. LINDSEY.

JOHN W. LINDSEY.

DIER'S PENSI INDIGENT

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

| County. | |
|--|----|
| Personally appears of 6 box last on of bour phere | |
| County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen | 11 |
| and resident of said County and State, and has resided in said State continuously eve | r |
| since the day of facer 1803; that he is 7 years old an | d |
| by occupation a color a color a that he collisted in the military service of the Con | - |
| and resident of said County and State, and has resided in said State continuously eve since the day of that he is 7 years old an by occupation a federate States (or of the State of the County and State and has resided in the military service of the County of the State of the St | c |
| States, and served for the term of 7 - 070 in Company 6 , of 3 - th Regimen | t |
| that his physical condition is a | 4 |
| follows: I acce me planed on account of | |
| States and served for the term of ty orro in Company 6, of the Regimen of 1/4 - 700l - that his physical condition is a follows: | - |
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| that his property consists of the following mem. dee (Dz r be 115 | |
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| of the value of 12. 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 | r |
| 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 Comme for beet. | |
| County been allowed a pension for the year 1901. | |
| Sworn to and subscribed before me, this the flow to a love to the subscribed before me, this the flow to a love to the subscribed before me, this the flow to a love to the subscribed before me, this the flow to a love to a lov | |
| 1905. Conserved | |
| The delication ordinary. | |
| STATE OF GROBALL | |
| STATE OF GEORGIA, | |
| STATE OF GEORGIA, County 1, // County Ordinary of said County, do certify that I am well acquainted with \(\overline{6} \) Come (except of the county) | |
| 1, 11 Ordinary of said County | |
| do certify that I am well acquainted with 6 6000 les our | |
| 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 | |
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| | |
| day of facily 17 21906. | |
| | |

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

| LOW WILDIOWNID GEWELDLOVE WPPOMED SEUZIONS |
|--|
| State of Georgia, |
| Campbell County |
| Personally appears & E. Cockeron of Compbeed |
| County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citize |
| and resident of said County and Care and L |
| since the My day of John 1803 that have TV |
| by occupation a Louis that he enlisted in the military service of the Co |
| since the day of day of last continuously every since the day of last continuously every last continuo |
| States and served for the term of 1/27 - in Company of the Regimen of that his physical condition is a follows: |
| of that his physical condition is a |
| follows: I have the term a have of me fline |
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| that his property consists of the following items: 100 for offer 4 |
| that his property consists of the following flems: |
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| of the value of |
| by my labor, Dollars per month. That by reason of his |
| physical condition and poverty he is unable to support himself by his own exertion or |
| labor, and that he receives no pension but the one herein applied for. |
| Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he |
| is entitled for the year 1906. I have heretofore, as a resident of |
| County, been allowed a pension for the year 1905. |
| Sworn to and subscribed before me, this the |
| - 11 Aday of 1906, |
| It I le Torres Ordinary. |
| |
| State of Georgia, County. |
| County.) |
| Ordinary of said County |
| do certify that I am well acquainted with 6. Coe Ly 1 ou |
| 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 Janey 72 1908. |
| 10. |
| Ordinary County. |

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

,

NAME Cochran, James E County Campbell WHEN AND WHERE BORN? Jamuary 9, 1835 - Covington, Georgia ENLISTED WHEN AND WHERE? May 5, 1862 - Fairburn, Georgia RANK.

COMPANY AND REGIMENT? Oo 0 55th Georgie

NAME OF CAPTAIN AND OCLOREL?

"UNDED?

F

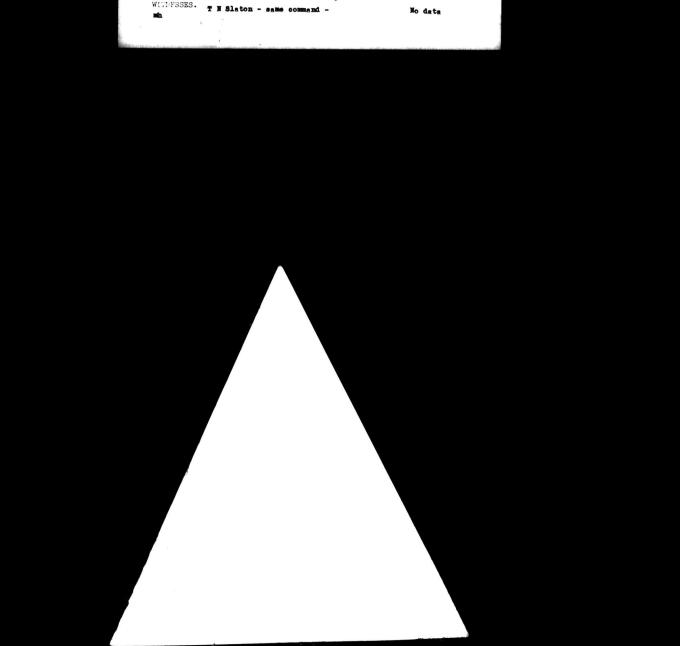
In front of Petersburg, Va., April 8, 1865 (7) From Point Lookout, Md. 1865

Line of Charles IT . THE LIBERT MAKE WERE YOU?

.. ND WHERE?

WUTFFSSES. T N Slaton - same command -

No data



POWER OF ATTORNEY.""

County. STATE OF GEORGIA.

Gurun Cachia

ail Men by these Presents. That I.

bum

my true and lawful attorney in fact, for me and in any name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason J. M. J. Cochra County, in said State, do bereby appoint my form of bauefuld county for Jo

WITNESS WHEREOF, I have hereunto set my hand and X 600km Luzan

1.7

Executed in the presence of us

seal, this

10

Widows' Pension

Mushum Cahran Cacapbell Cons.

BLOO.DD.

AND HANDED TO

1891.

66

Mo.

Warrant Issued

1891

POWER OF ATTORNEY.

STATE OF GEORGIA.

Know all Men by these Presents, That i. Susun Cachian

County, in said State, do hereby appoint my son J. M. P. lovehrack of bamphell county sa. my true and lawful attorney in lact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4 x day of April Susan tur 1891

Executed in the presence of us:

t. 1. 1 / 1. 2 7 Blavits

If allowed, send amount by

, and oblige,



Affidavit to be Made by the Widow.

STATE OF GEORGIA.

Mrs. Susan levehran

In person came before me, the undersigned Ordinary County of Campbell in and for the County of Compbell

, who being sworn according to law, says under

oath that she is the widow of & I. love hran the service of the Confederate States, and served as a member of Company 30 The Regiment & Georgia Volunteers; that he enlisted in said

service on or about the 28 day of September 1861, and was in the Confederate Army up to May 1862. That while in the Army, he was on the Last day of March 1862, (See Note No. 1) harvas taken diele noth Tippekoyed fiver

& was for lough home about 15th day of April 1862 and died on the 2nd day of May 1862 from the effects of said fevior ,

Deponent further awears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 10 th day of Juneary 1827, and that she has resided in Georgia continuously since the day of Juneary 1822; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality, Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February

15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act. Sworn to and subscribed before me, this, the Let day of Africa 1891. Suran Laborator R.G. Beaver

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

STATE OF GEORGIA,

R. C. Beaux

County of Campbell in and for said County of Campbell

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the

4 to day of April

R. C. Browns.

The pension is only payable to certain classes of widows

Those whose husbands were killed in service

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

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

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

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

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

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

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

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

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

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

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

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

By order of the Governor.

W. H. HARRISON,

Sec. Ex. Department.

Affidavit for Three Witnesses.

STATE OF GEORGIA.

In person came before me, the undersigned Ordinary

Form No. 2

County of Campbell in and for said County, witnesses I. M. Jalmer, Clias Adours

and John G. Mann (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Susan bockran , of the County of bamphell State of Georgia, is the widow of S. f. Cochran Company of the 30 Regiment of Berry

Regiment of Berryia That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 28 th day of September 1861 That while in said service, or by reason of said service in the Army, he lost his life as follows: Lee Ila, taliene

Sich while in bourps near Savannah for with Typhoyed fevier about last of March 1862 and furlinghed home on the 13th of April 1802 and Died bouthe 2 miller, if May 1862 from the The feets of said fevier so contracted in said Camps.

We further swear that Mrs. Susun look hour soldier during the service, and that she has not intermirried since his death, and that she resides in Campbell County of the State of Georgia.

Sworn to and subscribed before me, this, the)

R. l. Beaver

1891. Y. M. Julinia

Complee STATE OF GEORGIA, County of In R Q Demons . Otdingry in and for said County of Committee State of Georgia, hereby certify that I am acquainted with Mrs. the applicant for a pension in this case, and know, from my swn knowledge (or from positive proof presented to me by reputable witnesses), that she resides in the County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the S. J. Cockran deceased, and as such has heretoere been allowed a pension for the year ending February 15th, 1893. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, Lucy this, the R. C. Bravers BRAL Ordinary. POWER OF ATTORNEY. Form No. 5 STATE OF GEORGIA. Complier County. KNOW ALL MEN BY THESE PRESENTS, That I, Sugar Continuant of Comptete Co & a nty in said State, do hereby appoint & Me O Continuant County in said State, do hereby appoint Cam pace to fu my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. In Witness Whereof, I have hereunto set my hand and seal, this 22 day of lang Suson Cachana [L. S.] Executed in the presence of us: 12 5 7 R. C. Brauer , Ord, DIRECTIONS Send amount by me at , and oblige WS' PENSI

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA.

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

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

continuously ever since Leby 11 22

18 2 2 That she is the Widow of S. & Quehnan who was a Soldier in Company

Dersonally comes Mrs

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

186 and served in the Army up to 186 2 That he lost his

life on the (State here

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

at Soramok ga com him on forlong & + duca Hear 1st 1862 from the effect

of Lythouse From or his Physician

soud. Some deverse was embrely while in said arran

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 . that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894

Susan Cochron Sworn to and subscribed before me, this 2 2 day of lawy 1894. R. to Braves : Ordinary. Post-office

| 1 |
|--|
| STATE OF GEORGIA, County of Campbell |
| STATE OF GEORGIA, County of lampbeal 1. The Devers Ordinary in and for said County of Compbell State of Georgia, hereby certify that I am acquainted with Mrs. Susan Cookson the applicant for a pension in this case, and know, from my own knowledge, (or from positive proof presented to me by reputable witnesses), |
| that she resides in this County, and that she resided in the State of Georgia on December 23, |
| 1890, and has not lived out of the State since that date. That she is the widow of S , deceased, and as such has heretofore been allowed a pension for the year ending February 15th 1892. |
| In Witness Where C.I. have been seen as a seen |
| In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the |

30, day of to won

-

R. G. Brauery

POWER OF ATTORNEY.

| STATE OF GEORGIA, Courpbell County. KNOW ALL MEN BY THESE PRESENTS, That I, Suron bookson |
|---|
| KNOW ALL MEN BY THESE PRESENTS, That I, Just book soul |
| County, in said State, do hereby appoint J. M. P. Looch sou |
| County, in said State, do hereby appoint . M. O. Loochim |
| of Campbell loo Ja my true and lawful attorney in fact, for |
| me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason doresaid. |
| IN WITNESS WHEREOF, I have hereunto set my hand and seal, this |

Suson Ler larahmu George Executed in the presence of us; George Parton 715.

Send amount by

and oblige

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

STATE OF GEORGIA, County of Campbell Beauty of Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. Susan Cochean the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of S & Cookson deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1854.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the

POWER OF ATTORNEY.

STATE OF GEORGIA, Complete County.

KNOW ALL MEN BY THESE PRESENTS, That I, Sudan Cachien

County in said State, do hereby appoint of the Cochumn

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

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

Executed in the presence of us:

E Ester Craby DIRECTIONS

Send amount by

me at

, and oblige

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA.

Dersonally comes Mrs.

Suran Cochran County of Gampbell

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

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

continuously ever since - Coursey // That she is the Widow of VA loochin ...who was a Soldier in Company

2 of the 30 Regiment of Georgia

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

186/ and served in the Army up to Africa 1862. That he lost his life on the 301 day of April 1862 (State here

full particulars of the husband's death, when, where and from what cause) (Tother siest in army wet intentlent fever & Come home on a purlough obout 15; Opril

1862, wit soid descore & while of home in

Fayelle County To from the effects ogooid disease to contraled in soil pervice he

aid) about 30 46 is 1862

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1850; that Georgia is her home and she resided in this State 23d day of December. 1890, and his not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

Sworn to and subscribed before me, this 30, day of romon 893.

R. & Braver Ordinary. Post-office Ono Lo

For Widows' Heretofore Allowed Pensions

STATE OF GEORGIA. County of Campbell

Dersonally Comes Mrs. Susua Corchian

who being sworn, says on oath, that she is a bona fide resident of said county of Carrefibell State of Georgia, and that she has resided in said State continuously ever since Hit 18 2 2 That she is the Widow of

9 Cocheman

who was a Soldier in Company Regiment of frongia

Volunteers, that he enlisted in said Regiment on or about the month of Achlember 186/ and served in the Army up to 1.50 1862 That he lost his life on the / 2 day of May 18 42 (State here

full particulars of the husband's death, when where and from what cause.) (It a Taken Lick and Come homis

on a furlough in afuil 1862 from Savanah Gu

and died on the / w day of may 1842, from the expect.

of said fever so contracted while in service,

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1850, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

H day of Jerre 1895.

R & Beauxy Ordinary.

Post-office One San

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

Ordinary in and for said County of

State of Georgia, hereby certify that I am acquainted with Mrs.

The applicant for a person in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnessed) that she resides in this County, and that she resides in this County, and that she resides in the State of Georgia on Dayomber 23, 1890, and has not lived out of the State since that date. That she is the widow of \$\frac{1}{2}\$, \$\frac{1}{2}\$ (\$\frac{1}{2}\$ (\$\fra

In Witness Whereof, I have becomes set my liquid and affixed the sent of my office, this

(L. Co. Burry

POWER OF ATTORNEY.

STATE OF GEORGIA. County.

1. Successful to the period of the period pand hereon and request that he remit same to

IN WITNESS WILLIAM I have becomes set my hard and seal, the

Executed in the presence of

A. Lo. Bravers

RICHARD JOH

FAID TO CAP

1897

1897.

who being sworn, says on oath, that she is a bona fide resident of said county of Court for C. State of Georgia, and that she has RESIDED in said State

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

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

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

18.7.2. That she is the Widow of who was a Soldier in Company

"Gt of the 30 Regiment of HESTORD IN SAID IN SAID

Volunteers, that he enlisted in said regiment on or about the month of 186 and served in the Army up to Carry Af Africa 186 2 That he lost his life on the 1st day of 160 y 1862 (State here

full particulars of the husband's death, where and from what cause (Hos wood Testiere with if werent gener while in Service at Loverench La , com hour on se o K

sirlough obout recided le of April 1862 soil fever served into Typlinel out me account of soid front her deed or whove stoled on May 1st /862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1806

Sworn to and subscribed before me, this devant & Control of the day of Jany 1896.

A. C. Dervers Ordinary. Post-office One of the

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, STATE OF GEORGIA, Personally Comes Mrs. Ge of the 30 Regiment of Volunteers, that culisted in said regiment on or about the mouth of 186 and served in the Army up to Illoy 1 186 2 That he lost his life on the day of May be 1862 (State here tull particulars at the husband's death, when, where and from what came ; 100 c. or a. . b The foor while in parice at former work In , course house one on yourdough

selo fred and in consequence of

soid divious he died to obove

stated on 11/04 1,1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 50 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this day of 1897.

A. C. Angeler of Ordinary Post office Francisco

POWER OF ATTORNEY

| ol C. | mit same to | Dergia, | Da . " | to receive | uthorize and receipt f | eot. | inty. | and request |
|----------------------------|-------------|--|----------------------|-----------------|-----------------------------|----------------|---------------|---------------|
| , , | | the presence of | |) | | E. | | |
| 7 | <i>i</i> | | | ı. | | | | |
| For Those Heretofore Paid. | Na. 35c3 | CLIDOW'S PENSION For year emine February 15th, 1898. | Men Suson Cost, rown | 6 , 6.16 County | Widowof C. RICHARD JOHNSON, | WARRANT ISSUED | AND HANDED TO | M. J. Colland |

POWER OF ATTORNEY.

State of Georgia, .. Gampbell County. 1. Ludan both ran hereby authorize for 111. 9. 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 / 4 day of \$411111 714 Executed in presence of 4. 2. Vleh king RICHARD JOHNSON,

NO. 3527

WIDOW'S PENSIO

WARRANT ISSUED

For Widows Heretofore Allowed Pensions.

| STATE OF GEORGIA, Personally Comes Mrs. County of Camplace Second Carlage |
|---|
| who, being sworp, says on oath, that she is a bona fide resident of said county of A State of Georgia, and that she has nearmen in said State continuously ever since S. J. Core 1, server |
| S |
| full particulars of the husband's death, when, where and from what cause; Here love 16 |
| Liverse he read on May 1, 1862 as |
| Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 d o |

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

Noorn to and subscribed before me, this day of 1898.
Ordinary.

Ordinary.

Post-Office For a first fir

State of Georgia, 1 R.C. Beauto County. Ordinary of said County, certify that I am well acquainted with Mrs. diesan Caelaran

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

Given under my official signature and seal this the 14 " day of Joury

A. C. Biavers

Ordinary of Care phoce

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA. County of Journ b held

Personally Comes Mrs. Susan Goch ran

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

Mate of Georgia, and that she has usertice in said State

continuously ever since // (aya) file 1/10 10 18 2 2. That she is the Widow of 186. __and served in the Army up to / lay of may 1862 That he lost his tite on the delet layed any of May 1862 State here guilt particulars of the hours death, when, where and soom what cause, He laken the winter the witten begin while is strong at sovering he by cand hery land the sound hery land the sound hery land the sound hery land the sound hery land hery lan

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that a're has never married since his death aforesaid, and that she became his wife in the year 18 52.

I have been allowed a pension as a resident of 4 1111 fold (

February 15th, 1808, and now apply for the pension provided by law for the year ending February 15th, 1800 Sworn to and subscribed before me, this

Hower to and subscribed before me, this

A day of function by 1800.

J. A. Topherso Ordinary.

Post Office Hair feet in Ja

State of Georgia,

1 1 & J. If top heres

County. Ordinary of said County, certify that I am well acquainted 6 ump hell

fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she day of February 1x23 has continuously resided in this State since the

Given under my official signature and seal this the day of Land 41/ 1899.

L. y. A teleheres

Seal.

Ordinary of Carry Still

POWER OF ATTORNEY.

| Ι, | 1. J. Mey | | Tam fole | County uest that he remit same thy hand | to |
|------------|--------------|-----------------------|---|---|----|
| IN WI | TNESS WHER | | reunto set my ha | nd and seal, this I | |
| 1 | | | | | |
| ofore Paid | W'S PENSION, | 7 16th, | County, Co Chlass INDSEY, Commissions of Pression. | SUED 1900, TO 170 | |
| Heretofore | W'S P | PAID TO PAID TO OF OF | INO. W. LINDSEY, | WARRANT ISSUED | |

For Widows Heretofore Allowed Pensions.

| STATE OF GEORGIA, | Personally Comes Mrs. | |
|--|--|---|
| County of Lampbell | Susan dochran | |
| who, being aworn, says on oal | th, that she is a bona fide resident of said county of | |
| Thampfull & State | of Georgia, and that she has RESIDED in said State | |
| continuously ever since 11 day of Februar | 1822. That she is the Widow of | |
| I Lochran | who was a soldier in Company | 4 |
| of the 30 | Regiment of Georgia | |
| Volunteers, that he enlisted in said regiment on or about the | month of September | |
| 186 and served in the Army up to May | _1862 That he lost his | |
| | nuy 1862 (State here | |
| particulars of the husband's death, when, where and from u | that cause) He lakes the | |
| particulars of the husband's death, when, where and from w fiver while in service at home on sich furlough | savannah oga. hy cum | þ |
| hum multiled | and and with my | |
| -fewer may 1-1862 | | |
| | | |
| | | |
| A | - | |
| Deponent swears that she was the wife of said deceased soldier, d | during his service in the army as a soldier, and that | |
| she has never married since his death aforesaid, and that she bec | | |
| I have been allowed a pension as a resident of Sea. | | |
| February 15th, 1899, and now apply for the pension provid | | |
| Sworn to and subscribed before me, this | of Sulanvilachran | |
| 9 day of Junuary 1900. | N Susanxylgehran Poet Office Harohum = ya | |
| & Trestlyberry Ordinary | Post Office Have will Egu | |
| , | 1 4 St. Din | |
| State of Georgia, L. | - Julianis | |
| 1/100 / 00/100 | ary of said County, certify that I am well acquainted | |
| with Mrs. Susum Joech Lan | , who made the above affidavit and am eatis- | |
| fied that the facts therein stated are true, and I know she is the | day of Helman 1822 | |
| has continuously resided in this State since the | 9 day of Jansury 18 1 2 | |
| Given under my official signature and seal, this the | 614 | |
| Official | I Stephens | |
| Ordinary of | County. | |
| | | |

has continuously resided in this State since the... day of Revoluting 1872

I, this the 9 day of January 1960.

J. Stephens

Ordinary of Thempbell County. Given under my official signature and seal, this the Official Beal.

POWER OF ATTORNEY.

| Camp Le 10 c | |
|--|--|
| No | Wines Wines |
| WIDOW'S Indigent Pension. 1901. | E OF GEORGIA Les out of Control |
| Name Suson A. Cocky County Come & back Widow of Freig F. Cooky | County. County. to recommendate of Longity to recommendate of Longity to recommendate of Longity |
| Approved 4/8—1801. JOHN W. LINDSEY, Commissioner of Pensions. | receive and receipt for the pension by his check or registers Level L 180 Level C Level C |
| WARRANT HANDED TO | the penion allowed and or registered mail. |
| Geo. W. Harrison, Baile Printer, Allaga, Ga. | that be |

POWER OF ATTORNEY STATE OF GEORGIA, Com please Larour A. Coolina hereby authorize doct A, wast fr Come of die County, to receive and receipt for the pension allowed and that he remit the same to me at. by his check or registered mail. 190 / Witness my hand this M. S. M. Form Ordinary. Survey A X Coak row L. 8. MEAL

Questions for Applicant.

STATE OF GEORGIA, Compben

Suson of Cochron _of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, 1900, herby 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 game and where do you reside? (Give Style, Oranty gad by Office) Illes and 2. How long and since when have you been a resident of this State?

3. When and where were you boun?

4. When and where was your highband born—state his full name, and when were you and he married?

5. When and where was your highband born—state his full name, and when were you and he married?

5. When and where, and in what Company and Regiment did your husband enjist or serve during the 3. When and where were you boin?

war between the Blates of the 18, 18 to V of Jeruster See - Jeruster See - Jeruster See - Jeruster See

6. How long did your husband serve in said Company and Regiment? Tyellow the my C

7. When and where did your husband's Company and Rogiment surronder and was discharged? 8. Was your husband present at the time and place when his Company and Regiment surrondered?

9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?

10. When and where did your husband die? for Com force to Lee -11. Which of the following grounds do you base your application for Pension, viz: First-Age and

Poverty; Second-Infirmity and Poverty, or Third-Blindness and Poverty; At L. Information of the Control of the your support. It 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! then I do you

13. What has been your occupation since your husband's death? I God wow w

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? I be called

17. In what counties did you reside in 1899 and 1900, and what property did you require for taxation?

Complete Control of the second of the s

By chie open frie ai failig

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? "Good 75" - Meeting 20. What was your employment during 1899 and 1900—how much did you receive for each year? voicenny

21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? 22. Have you ever made an application for pension before?

23. How many applications have you made for a Pension, and under what class? 2 of bei a

Eworn to and subscribed before me this day of Zueren 190 /__ y. She for Ordinary,

of Com four County

28. Is applicant able to carn a support at labor of any sort, if not why? WO Sit; 27. How was she supported for 1899 and 1900? Morely by her cherdren STATE OF GEORGIA, County. 28. How much did applicant contribute to her support for last two years? of week week I's S Calou 29. Give a full and complete statement of applicant's physical condition? Stea is old of exceedingly fauble for a Pension under the Act of 30. What interest have you in the recovery of this pension by the applicant? Acres following questions, deposes and answers as follows: In Compbeel co ya Sworn to and subscribed before me this J.AXS Coton day of Luca. Mr. S. Me Lonin Ordinary. Cours beel County. Affidavits of Physicians. STATE OF GEORGIA. Campbell N Danuganh both known to me to be reputable Suicke a Cocks and county who, hope freezely sworth, say on oath that they have examined carefully Mr.

Suicke a Cocks and after applicant for Alension major Act of 1900, and after Sucher a Cocho an applicant by Pendon soler Act of 1000, and after such personal examination explicit by physical condition in this She has believed by the such that the and we have no interest in said pension if all wed. Sworn to and subscribed before me this To D. windsp Mes day of luck M. She Login Ordinary. lettaurupert 1212 16. If not present, where was he? Com stance. 17. When and where did he leave his Command? For what cause? ORDINARY'S CERTIFICATE. By whose authority he left? ---STATE OF GBORGIA, How do you know all this? (State fully and clearly.) Come place County. 1. Fr. S. Ju C Some . Ordinary in and for said county, hereby certify that the applicant, Mrs. Su one of Coalism county and has been a bona field resident of this State since day of 18 73 and that the witnesser, Mr. J. S. S. Locon, J. J. J. S. Locon, J. J. Locon, J. J. Locon, J. J. Locon, J. J. Locon, J. 41 C.16. Dever port are entitled to full faith and cree I do further certify that before answering the foregoing questions, the applicant and said witnesses took the outh herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same I further certify that the tax digest of County be the returned for taxation in her own name in 1899. # 800 county shows that applicant of property, and in 1900 kortiery _____dollars worth of property. Witness my band and official real, this /2 W.S. Ill C. Lopin Comptees County. Notes - I. Refore any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words. You do selemily swear that you will true answers make to each of the questions acked of you.

2. Additional afficiarity may be attached, if banks spaces are insufficient.

3. All afficiaris must be made before Ordinary.

4. Only widous who were the wires of the deed upshands while they were soldiers need apply—and are now widows. It was nearly all these fish April, 1805, not entitled.

5. Witnesses and two Tapichans are necessary to make out claims.

Questions for Witnesses. ____of said State and County, having been presented as a witness in support of the Application of Mrs. Susan A. Corky 1900, and after having been duly sworn true answers to make to the 1. What is your name and where do you reside? J. A. S-laton -2. Are you acquainted with the applicant, Mrs. Levou A Coeleron If so, how long have you known her? The your 3. Where does are reside, and wow long and since when has abe been a resident of this State?

Le Complete co Sa = 40 years to may the overeste 4. When and where was she born? In Hever the 20 See in 1806 I finge 5. Were you ever acquainted with her husband? Yes S. r 6. Where did he reside in 1861? Le Complete Co La 7. When and to whom was he married In 1869 to Some out of Cookingthe.
8. When and where was he born to somet Kenny; but he lime in the the States, and in what Company and Regiment did be collet and how do you know this? In Spring \$1.862 = Co'C' Js Ja North 11. Were you a member of the same Company and Regiment? 12. How long did he perform regular military duty? About 3 4-000 13. When and where was his Company and Regiment surrendered and discharged from service? 14. Were you with the command when it surrendered? Two 15. Was I chir F. Cocheron the husband of applicant present? Ju Composer Colyn Ju 1888 19. Where did he reside at his death and how long had he been a resident of Georgia at his death? Leter he care bore Co Lee - HOT Not o worse or

20. Do you of your own knowledge know that applicant is the lawful widow of Feery 7. Cochron = I am per firey rotto find the was

21. Has she remained unmarried since her soldier husband's death, and is now his widow?

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? Icente Sive in touch with aborton and would my proto bly there if the hot property 23. What property, effects or income did applicant possess in 1899 and 1900 and what disp sition did she

make of it? Wary Civer = for any her any percont

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? Hour do for oo & believe

 What is applicant's physical condition and her chances and ability to earn a support? Very farth of court was a support

POWER OF ATTORNEY.

STATE OF GEORGIA.

, hereby authorize

In W coses W here, γ_{i} I have leaceunte set my hand and seal, this

Executed in several con-

POWER OF ATTORNEY.

STATE OF GEORGIA, Le grace A Control of Landham hereby authorize

to receive and receipt for the pension paid hereon, and request, that he result same to ne continued -

In Witness Whereof, I have hereunto set my hand and seel, this 1903 - At. Co. L. (L.S.)

Executed in the presence of 1.4 342

OHN W. LINDSEY,

INDIGENT

OHN W. LINDSEY.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA PERSONALLY COMES MIS |
|--|
| State of Georgia and the treshelm of state Countries of State of Georgia and the reshelm of State of Georgia and the State of Georgia and the State of Georgia and the State of The She is the Widow of the Order of the State of Georgia and Georgia |
| Determine some som en er er er en de et samt de consert solden during has servar et to. A mix associates and er en er |
| State of Georgia, |
| Equation of the County County County of said County or say to a Long so a granted to May County to the County of t |
| here self to be and that she has continuously resided in this. State since the |
| to the of the according a signature and seal this the following day of four following to Seal . Outhware of Company of C |

NOTE. All blanks must be filled. Youchers and affidaylis must bear date after January int, 1905.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| Name and the second sec | The state of the s |
|--|--|
| STATE OF GEORGIA. | PERSONALLY COMES MISS |
| Country of Construction | |
| County of | PERSONALLY COMES MRS. |
| who, being sworn, says on or | ath, that she is a hone tile resident of mile |
| Come phece | ath, that she is a bona fide resident of said County of |
| , suite | of Georgia, and that she has RESIDED in said State |
| continuously ever since | That she is the Widow of |
| J. J. Coe Zinoin | wh |
| * 6" of the 195- CC. | who was a soldier in Company |
| V. I. | That she is the Widow of who was a soldier in Company Regiment of |
| Volunteers, that he collisted in said regiment on | or about the month of |
| 18th / , and sorved in the Army up to | That he died to be a second to the second to |
| on the 2 | Le the go |
| Hu tous Kidney | 18 // |
| Detection of | The second |
| Tit free free ! | dinales hid disting |
| the Hori ou ore | and yout they well |
| diviose conficet. | I willing in Court of |
| Je rouse ha de d | Fu to 2 |
| | 7 2. 199 |
| | • |
| | |
| | , |
| Deponent swears that she was the wife of said d | eccused soldier, during his service in the Army as a |
| soldier, and that she has never married since h | is death aforesaid, and that she became his wife in |
| the year is 6 0 | is death aroresaid, and that she became his wife in |
| | - (2) |
| | a resident of Comment for the |
| County, under Act 1900, for the year 1904, and me | w apply for the pension provided by law for the |
| year ending December 31, 1908 | a apply on the pension provided by law for the |
| | 4.4 |
| Nworn to and subscribed before me, | house of the leaves |
| | |
| | Post Office |
| Crimary | Total Office |
| State of Georgia, | 1/2 1/10 (2 |
| () | with it lee |
| County County | Outliness |
| eounty. | Ordinary of said County, certify that Lam well |
| to formation with says | , 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 reside | - mary many represents |
| S'A | d in this State since the |
| day of | |
| Given under my official signature and seal, thi | s the day of 7 1908. |
| may | 1. 1108. |
| Official } | |
| transl. | Ordinary of County |
| NOTEAll blanks must be filled. | |
| Variations and and | |

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

POWER OF ATTORNEY. STATE OF GEORGIA, Complete County. In the form of form the pension paid hereon, and request that he remit same to receive and receipt for the pension paid hereon, and request that he remit same to at form of the pension paid hereon. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1904. Executed in presence of

INDIGENT

THOSE HERETOFORE PAI

STATE OF GEORGIA, 1. Land A Cockage hereby aut 1. Land of Land hereby aut to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereof, Lhave hereunto set my hand and seal, this Executed in presence of A Meiling 100 1905.

POWER OF ATTORNEY.

FORM No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA. | PERSONALLY COMES MRS. |
|--|---|
| who, being aworn, says on oath that she is a Comming of the State of Georgia, a continuously ever since. State of Georgia, a continuously ever since. Of the grand of the Army up to the sound on the continuously ever since. Volunteers, that he enlisted in said regiment on or about the note of the end of the day of the transport of the end of the en | That she is the Widow of who was a soldier in Company. Regiment of the Midow of That he died to the Midow of That he died to the Midow of The Midow |
| Deponent swears that she was the wife of said deceased soldier | , during his service in the Army as a |
| soldier, and that she has never married since his death afore the year 18 $~6~\theta$ | |
| I have been allowed an Indigent pension as a resident of | Com pheu |
| County under Act 1900, for the year 1903, and now apply for | the pension provided by law for the |

year ending Decomber 31, 1904

Sworn to and subscribed before me,
this Linday of the 19 1904 Lucion At Core his on
The file Loren Ordinary Post Office, Face to See

17. Suchorin State of Georgia, 1. 17. Such orcu

County | Ordinary of said County, certify that I am well

acquainted with Mrs occore. I Cock or 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

Given under my official signature and seal, this the day of Journey 1904

Ordinary of County bear County

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA. PERSONALLY COMES MRS |
|--|
| STATE OF GEORGIA, County of Comp been been former of Continue |
| |
| who, being aworn says on eath, that she is a bona fide resident of said County of Course & beer State of Georgia and that she has a resumment. |
| State of Georgia, and that she has mounted in said State |
| That who is the Widow of |
| continuously over since from 17, 1838 That she is the Widow of who was a soldier in Company "G" of the 15 to Regiment of |
| Volunteers, that he collisted in said regiment on or about the month of |
| 186 / and served in the Army up to African 186 / That he died on |
| the troops the dany disease are as and if re- |
| loka how theory had a a a a a with the |
| On one out your Hedrey destore and |
| On ore out of foid thinking distore how - books in Cole for service be died for by 2 |
| 1899 co stove states |
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| Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a |
| oldier, and that she has never married since his death aforesaid, and that she became his wife in |
| he year 18 6 0 |
| I have been allowed an Indigent pension as a resident of Caring to be an |
| county, under Act 1900, for the year 1904, and now apply for the pension provided by law for the |
| ear ending December 31, 1905 |
| Sworm to and subscribed before me, day of 1905. A Grilliary. Post Office, |
| ds / 2 day of / 7 1905. |
| 7 Stee Low Ordinary. Post Office. |
| |
| State of Georgia.) 1 7 8 lu Lorin |
| itate of Georgia, (County, County, County, Cortify that Lam well |
| equainted with Mrs. Lusau A Coeliscon, who made the above affidavit and |
| |
| n satisfied that the facts therein stated are true, and I know she is the individual she represents |
| resulf to be, and that she has continuously resided in this State since the g of |
| y of IN Y O |
| Given under my official signature and seal, this the // day of farming 1905. |
| Official () Ill of or |
| Seal County of Campbell County |
| NOTE.—All blanks must be filled. |

Youchers and Affidavits must bear date after January 1st, 1905.

Official Seal

POWER OF ATTORNEY

Ucro Lusan a. Cacheran to receive and receipt for the pension paid hereon, and request that he remit same In Witness Whereof, I have hereunto set my hand and seal, Executed in presence of

A Micelelano lost

INDIGENT

IDOW'S PERSI(For year ending Dec. 34, 1906, JOHN W. LINDSE WARRANT ISSUE

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 / 0 Se south to Cockerne [L. S.] Executed in presence of A. melelune lest

INDIGENT

No. OF

JOHN W. LINDSEY,

WARRANT ISSUE

POWER OF ATTORNEY.

| the state of the s |
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| STATE OF GEORGIA, |
| Court bell County. |
| 1. Con sus an a. Cocinan hereby authorise |
| 1. Hiro Lucan a Cacheran hereby authorise |
| to receive and receipt for the pension paid hereon, and request that he remit same to |
| at have |
| In Witness Whereof, I have hereunto set my hand and seal, this |
| day of 1000, |
| Executed in presence of |
| Executed in presence of |
| - 3/ 1:10 (class 6) |
| |
| / |
| / |

Widow of the County, Widow of the San County, Co. "C. " S. Regiment. Le

Commissioner of Pensions.

WARRANT ISSUED

JOHN W. LINDSEY,

May Lucau A, Cochy on

For year ending Dec. 31, 1906.

WIDOW'S PENSION,

INDIGENT

To Those Heretofore Paid

1906.

No.colt

POWER OF ATTORNEY.

| STATE OF GEORGIA, | , |
|-----------------------|--|
| Cample | COUNTY. |
| I sur pan | - a, Coe has are hereby authorise |
| meuran | a, Coe has an hereby authorize |
| | pension paid hereon, and request that he remit same to |
| In Witness Whereof, I | have hereunto set my hand and seal, this |
| day of | 1907, |
| Executed in preser | nce of |
| - J. H. 11146 Cu | e ist |

To Those Heretofore Paid ano

1907. No. 647 INDIGENT

Mrs Luca . V. Je ley au WIDOW'S PENSION, Barro Lell county, For year ending Dec. 31, 1907.

"- 3 .- La Regiment. Commissioner of Pensions JOHN W. LINDSEY,

AND HANDED TO WARRANI ISSUED

AND HANDED TO

Widow of to F. Bot Low of the

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| The state of the s |
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| STATE OF GEORGIA) PERSONALLY COMES Mrs. |
| STATE OF GEORGIA, County of Councy but Sus on U. Coe by our |
| County of the day and party of the day and |
| who, being sworn says on oath, that she is a bona fide resident of said County of |
| Course of beet State of Georgia, and that she has RESIDED in said State |
| The state of the s |
| continuously over since. That she is she Widow of |
| who was a soldier in Company |
| of the 15-22 Regiment of 4 |
| Volunteers, that he enlisted in said regiment on or about the month of |
| |
| That he died on |
| the day of Fa by 18 99 |
| The look the ducy discose from a relopar from the vales had during |
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| A company of the comp |
| Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a |
| soldier, and that she has never married since his death aforesaid, and that she became his wife in |
| the year 18 6 |
| |
| I have been allowed an Indigent pension as a resident of Cauca of hell |
| County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the |
| year ending December 81, 1906. |
| a lux |
| Sworn to and subspribed before me wood och au |
| this day of dairy 1900. |
| Mille Lopine Ordinary Dia Dailburge 40 |
| Post Office 7 acr out of |
| 2 / 10 |
| State of Georgia, |
| County. Ordinary of said County, certify that I am well |
| acquainted with Mrs. tresou A. Cochrou, who made the above affidavit, and |
| , who made the above amazvit, 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 |
| Given under my official signature and seal, this the / P day of Jacry 1906. |
| Given under my official signature and seal, this the day of 1906. |
| 10 molal) M. S. Un Lorin |
| Seal Com blue |
| Ordinary of County |

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

POR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA, County of Care part Lusan a, Carely an |
|--|
| who, being sworn says on oath, that she is a bona fide resident of said County of Court for the State of Georgia, and that she has RESIDED in said State |
| continuously ever alone who was a soldier in Company |
| Volounteers, that he callated in said regiment on or about the month of |
| |
| week on the control of the control o |
| FIRMS IN THE RESERVE OF THE RESERVE |
| Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a |
| soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18.5 2. |
| I have been allowed an Indigent pension as a resident of Janu o Luc |
| County, under Act 1900, for the year 1908, and now apply for the pension provided by law for the |
| year ending December 31, 1907. |
| this / day of Jany 1907. There for the Continue of the Continu |
| Mr. S. M. Corin Ordinary Post Office Fair Lune 1/4 |
| State of Georgia, County. Ordinary of said County, certify that I am well acquainted with Mrs. Secretary County, and are who made the above affidavit, and |
| acquainted with Mrs. Occasion County. Ordinary of said County, certify that I am well |
| |
| 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 |
| 10 Michael 1 |
| Seal Ordinary of James delle County |
| NOTE.—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1907. |

| Given under m | y official signature and | seal, this the day of Jacy 1906. | | under my official sig | gnature and | seal, this the | | 190 |
|---|--|---|--|-----------------------|---|----------------------------|-------------------------------|-------|
| | | M. S. W. Lonin | Official Seal | | | 75. | ille on | |
| Official } | • | Ordinary of Courf bill County. | | All blanks mus | | Ordinary of | "am o be | Count |
| NOTEAll bi | anks must be filled | | | | | | after January Ist, 1907. | |
| Vouci | hers and Amdavits s | must bear date after January zet, 2906. | | | | | | |
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| and the deposit of the second of the second | ر الديالة المسلمة المس | | The fact of the filter is a case, and of the file face | | i i madalla | ALC: MILES | ` | |
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| A Contract on the | | | | | | | | |
| 41 | | Coch ran Susan Hims Campbell Co. | A STATE OF THE PARTY OF THE PAR | minima Bling hand and | lath transcore | Accountable to the Account | a reconstitution (in the said | |
| / | | Con lace Sosan Amin | | | | | | |
| 1 | | campula 6 | | | | | | |
| | | 1918 | | | Ç. | of of for me | G. | |
| | | Amplication Co. D D. | | Note 1.—Use | mty at h | I hereby | GEORGIA. | |
| | | Application for Pension Due | | 7 | t his | n may | I.A. | |
| | | Deceased Pensioner | | | County at his death. Witness my hand and | name, | | |
| | | Under Act 1904 | | ATTEST this blank | E. 3 | oriz | 1 | |
| | | mallies. | | | | | | |
| | | M. Selle Loren Ordinary. | | BY only | <u> </u> | | | |
| | | Fortets busan & Cockyon | | ₩hen | this | | | |
| | | of the County, con | dow | th | | 0 | | |
| | | of Co. 16 1 - 11 - a free Regiment | | Pension | | 1 | County | |
| | | Approved and ordered paid | | Si. | • | 1 1 | ą. | |
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| | | 1918. | | wanted | | County | | |
| | | J. W. LINDSEY, Commissioner of Pensions. | | 8 | | ्म ह | | |
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Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904.

To Be Paid to the Ordinary for Funeral Expenses and Expenses of Last Illness

| GEORGIA, County County. Personally before me, the Ordinary of said County, comes J. of Care land |
|--|
| of said County, who, after being sworn, on oath says that he knew for said County, and that he was off the firm of his death, which occurred in the state, on the firm of his death, which occurred in the state, on the firm of his death. That he left no widow or dependent children surviving when, and no cotate of any value sufficient to pay his funcral expenses, which amounted to the surviving of the firm of the surviving that the survivinity that the survivinity tha |
| Dollars, as per sworn statement, itemized, hereto attached. |
| Boorn to and subscribed before me this 2 to day of the by 1918. He file form Ordinary County GEORGIA County Learn County. |
| 1. M. S./le vorice Ordinary of said County. do certify that I personally know 1/1 Coelestare , who is a resident |
| citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and |
| redit. I also knew Lusau & Collossau while in life; that She was the same person whose name appears on the Ludigau X Pension |

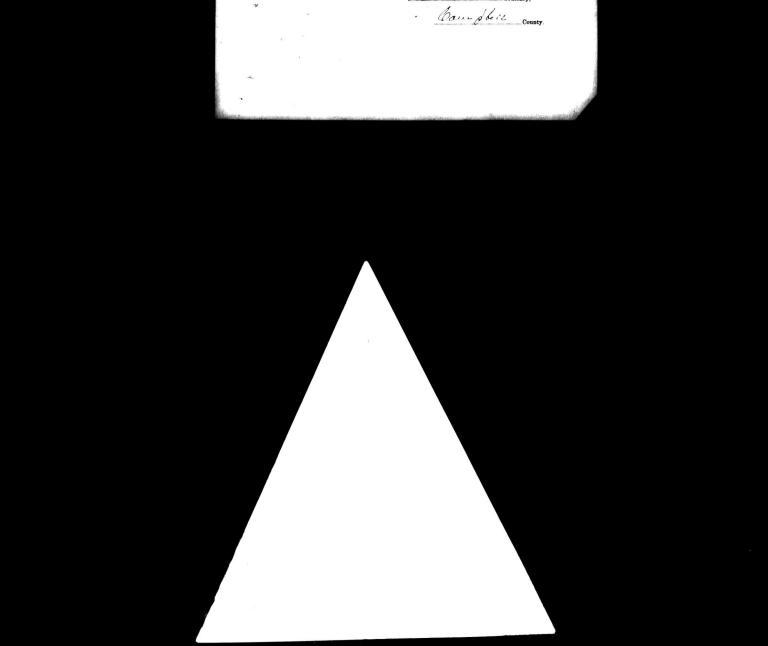
ow hellers him to be dead.

(Ilven under my hand and official seal, this 26 in day of More h 1.

MSIM for in Ordinary,

County.

County, and was paid a Pension Dollars in said County for 191 7, and



CAMPBELL -----.. County 1 9/2/_30 Application for Pension **Due Deceased Pensioner** (UNDER ACT 1919) (To pay expenses of last illness and funeral) .. S. McLarin, Ordinary For Margaret L. Cole. (1930) Date of Death Feb. 22, 1930 Amount \$. 10 Approved and ordered paid faich 12, 1930 R. det. Lawrence Commissioner of Pensions. Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payrolls to be permanently filed with them. Do not keep this application in your office.

Application for Pension Due to a Deceased Pensioner

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

| GEORGIA, Campbell | County. |
|--|--|
| Personally before me, the Ordinary | of said County, comes Lrs. Anna Cole Clark |
| | |
| mays that he knew Irs. Margaret | of said County, who, after being sworn, on oath |
| | or said county, and that said Pensioner |
| | at the time of death, which occurred in Campbell |
| County, in this State, on the 2 nd | day of Feb. 1930, poex |
| and that pensioner left no widow survivi | ing, and no estate of any value sufficient to pay these funeral |
| expenses, which amounted to the sum o | f \$ 139.50, per sworn statements fully and completely |
| ITEMIZED hereto attached. | |
| Sworn to and subscribed before me, target 6, 1990 Collins to 11 Collins to 11 Collins (Seal of Ordinary) | 0 11 0 10 |
| CERTIFI GEORGIA. Carte bell | CATE OF ORDINARY |
| | County. |
| I FcLuri: , | , Ordinary of said County, do certify |
| | na Cole Clark, , who is a resident |
| citizen of said County, and that said pers | on is of truthful and trustworthy character, entitled to full |
| faith and credit; that I also knew hrs | . Largaret . Cole, while in life and that this was |
| the same person whose name appears on t | the Pension Roll of Campbell County, and |
| was paid a Pension of Tw-o liquid: | |
| in said County for 192 3 , and I now be | lieve said pensioner to be dead; and that the instructions at the |
| foot of this voucher have been carefully | observed in making up this voucher and the bills which are at- |
| tached hereto. | in making up this voucher and the bills which are at- |
| Given under my hand and official seal | March, 1930. |
| (Seal of Ordinary) | Mr. 5 111 7. |
| (Sear of Ordinary) | Ordinary, Ordinary |
| | Campbell County |
| let Permine there delete | INSTRUCTIONS: |
| giving each item and the value of it, and each dai | illness and funeral, to make out their accounts in fully itemized form, ie. |
| true, due, unpaid," etc.) | the Ordinary, and in the following form. (Do not use the terms: "just, |
| "The above and foregoing account is rendere be) of | d for services in the last illness (or for funeral expenses, as the case may |
| | he died without owning sufficient property to pay this bill. ill is perfectly legitimate in every respect, and properly sworn to, and all been properly completed as indicated. |
| 4th. The completed voucher—this blank an | been properly completed as indicated. d the bills—must be sent to the Pension Department for approval and no user years and the property of the pension of the pension became the pensi |
| money must be paid out until it is returned to your state. Return this application, and attached by | uss your authority to make the payment. Ils, with your final settlement, to the Pension Department. |
| 6th. Ordinary should see that the back of t | his blank, when folded, is filled out. |

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be Used by the Widow of a Disabled Soldier Pensioner.)

| STATE OF GEORGIA, |
|---|
| Campbell 1 COUNTY. |
| Personally before me comes Marganet R. Cole, of said County, |
| who, after having been duly sworn, says that she is the widow of |
| to whom, in the County of Campbell State of Georgia, she was married on |
| the 19th day of September, 18-69 and that she remained his wife, and resided with him to the |
| date of his death iapr. 17, 1925 and that she has not since his death remarried; at the time of |
| his death he was a resident of Ca mpbell County, in said State of |
| Georgia, and he was on the "Savice" Pension Roll of the State and paid a pension of |
| 125-00 in Campbell County for 10 24 (see |
| in Company "F" |
| That she is now a bona fide medent citizen of said State of Georgia, and she has, continuously, re- |
| sided there since 27th day of November, 19 46/ |
| Sworn to and subscribed before me, this the 23rd day of April, 192 5. Woryon LR. Lord Calc. My Me Form, Ordinary Applicant: |
| of Campbell County |
| (SEAL OF ORDINARY.) |
| Affidavit of Witness to Prove Marriage and Date of Death of U. 1. |
| Affidavit of Witness to Prove Marriage and Date of Death of Husband. STATE OF GEORGIA, Compbell COUNTY. |
| STATE OF GEORGIA, Compbell COUNTY. |
| STATE OF GEORGIA, Campbell COUNTY, Personally before me comes M. A. Wooddall, known to be a |
| STATE OF GEORGIA, Campbell COUNTY. Personally before me comes K. A. Wooddell, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that |
| STATE OF GEORGIA, County. Personally before me comes. K. A. Wooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret, Ra. Cole., who made the foregoing |
| STATE OF GEORGIA, County. Personally before me comes K. A. Wooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Cole., who made the foregoing affidavit, is the lawful widow of R. A. P. Cola, who died in Campbell Georgia. |
| STATE OF GEORGIA, Compbell COUNTY. Personally before me comes. K. A. Wooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Cole, who made the foregoing affidavit, is the lawful widow of. The P. Cola, who died in Campbell Goorgia, on the 17th day of April, 1925, and |
| STATE OF GEORGIA, Compbell COUNTY. Personally before me comes. K. A. Wooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Cole, who made the foregoing affidavit, is the lawful widow of. The P. Cola, who died in Campbell Goorgia, on the 17th day of April, 1925, and that she has not since married; that she became the wife of W. P. Cole, on |
| STATE OF GEORGIA, Compbell COUNTY. Personally before me comes. K. A. Wooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Cole, who made the foregoing affidavit, is the lawful widow of. The P. Cola, who died in Campbell Goorgia, on the 17th day of April, 1925, and |
| STATE OF GEORGIA, Compbell COUNTY. Personally before me comes. No. Nooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Gole., who made the foregoing affidavit, is the lawful widow of Noorgia, who died in Campbell Georgia, County in said State of Assaura, on the 17th day of April, 1925, and that she has not since married; that she became the wife of N. P. Cole, on the 19th day of Sapkember, 1869; that she and he had resided fogether as husband |
| STATE OF GEORGIA, Compbell COUNTY. Personally before me comes. No. Nooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Cole, who made the foregoing affidavit, is the lawful widow of. No. P. Cola, who died in Campbell Georgia, County in said State of Assaura, on the 17th day of April, 1925, and that she has not since married; that she became the wife of N. P. Cole, on the 19th day of Saptamber, 1869; that she and he had resided fogether as husband and wife, continuously, since 19th day of Septembers, 1869, and that N. P. Cole was the same man who was on the pension roll of said State of Georgia from Compbell |
| STATE OF GEORGIA, Compbell |
| STATE OF GEORGIA, Compbell COUNTY. Personally before me comes **. A. Wooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Gole., who made the foregoing affidavit, is the lawful widow of **. A. P. Cole, who died in Campbell Georgia, County in said State of **Callagers**, on the 17th day of **. April,, 19.25, and that she has not since married; that she became the wife of **. P. Cole, on the 19th **. day of **Saptamber**, 1863; that she and he had resided together as husband and wife, continuously, since **. 19th **. April **. April **. Sole **. April |
| STATE OF GEORGIA, Campbell COUNTY. Personally before me comes K. A. Wooddall, known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. Margaret R. Gole, who made the foregoing affidavit, is the lawful widow of T. P. Gola, who died in Campbell Georgia, County in said State of Assaura, on the 17th day of April, 1925, and that she has not since married; has beeame the wife of T. P. Cole, on the 19th day of Saphamber, 1863; that she and he had resided fogether as husband and wife, continuously, since 19th day of Septembers, 1864, and that W. P. Cole was the same man who was on the pension roll of said State of Georgia from Campbell County Georgia when he died. |

(SHAL OF ORDINARY.)

WIDOW'S APPLICATION

The Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia

County Campbell

Name Engaged .. Jole,

Company

Regiment 3. C. Ca. rtillegy.

Date of Husband's Death apr. 17, 19 05
Date of Marriage copt. 13, 18.69.
Approved blu W. Class

AUG 22 1925

Commissioner of Pensions.

4/28/195

Mrs Morgaret R. Cale

Consade Bood.

In Account With

(SHALL OF ORDINARY)

in the subject

Howard L. Carmichael

Funeral Home — Private Ambulance
Office Phones Fairfax | | 38 & | | 39

1930

July 24 could the

ty to pay this bill.

- " and

Clean

2.00

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15:00

10.00

Georgia, Campbell County -- - Before me, the understand Ordinary, this day

personally came Howard L. Carmichael, who, on oath, says "the above account is rendered for assixians Funeral expense" of hrs. Margaret F. Cole, who died without owning sufficient proper-

Sworn to & subscribed before me, this march 4, 1930. My Mil January

Ordinary.

Georgia, Campbell County.

Received of W. S. McLarin, Ordinar-y of said county, the sum of One Hundred (100) Dellars, in part payment of the funeral expenses of Mrs. Margarett R. Gola. , deceased, and in full of the

amount allowed and furnished by the State of Georgia, for the payment of such expenses. This July 9, 1950.

Hound's Combrael, Undertaker.

APPLICATION FOR PENSION IS A WILLOW

Where Det and Highard W. on the Pens or Osc of the Million of a Dead de

Ordinary's Certificate

STATE OF GEORGIA. Campbell COUNTY. I. . . . McLarin, Ordinary of said County, certify that I know Margaret 3. Cole, the applicant for pension; that he is the person he represents Aimeelf to be, and that be has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know M. A. Wooddall, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits. and that they are truthful and trustworthy and their statements are entitled to full faith and credit. Sworn under my hand and official seal of office this 23rd day of April. 19 25. (SEAL OF ORDINARY.)

WIDOW'S

tate of Georgia.) To a my ainister of the Gispel, Judge of the in phell ounty.) unerior Court, Justice of Inferior Court.) or Justice of the Peace, -- to 'eleurate:

You are hereby sutherized and permitted to joi 1 the h norable state of matripony illian 1. 1 le, and iss argaret ./ CORE, according to the lites of your Church, provided there be no lawful cause to obstruct the same; and, for so dot ag, this shall be cour sufficient license.

if en under my hand and smal, this the lost day of onto ber, 1 ad.

I he eay certify that illiam !. Tole and iss arguret . formell sere joined together in the oly Hens of matricony on the 1.t. day of epterbor, 1.09, by me.

. . ilson, J. P.

tate of learnie. Years all on tw.

" levely sertify that the move is n c py of the tar ingo iitimes, and vertificate of anti-se of illim 1. Tole and iss areret . 'oryell, as appears of record is this o fice in book i", this 1.5, of larringe see rus.

Itness my hand and seal of o: ice, this september in, 1-25.

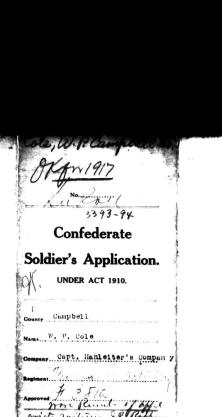
my Mi Lotin, malinny,

"supposell county, "eorgin.

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Instruction:

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| Confederate Soldier's Application. UNDER ACT 1910. Continuation of the company Continuation of the company Continuation of the company Continuation of the company ANTELL I WALKONSEY. ANTELL I WALKONSEY. | propounded, answers as follows, to wit: 1. What is your name and where do you reside? (Give County and Post-office). 2. How long and since when have you been a continuous resident citizen of this State? 7- 4 112, or from nate of my hirth, to wit: Jot. 2, 1942. 3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1801 to 1805. 4. When and where, and in what Company and Regiment did you enlist. (Give the arm and class of Service). Annual Lagrage. Annual Lagrage. Annual Lagrage. Annual Lagrage. Annual Company and Regiment did you enlist. (Give the arm and class of Service). Annual Lagrage. Annual |
|---|--|
| | Were you captured during the war? |
| | |
| | 9. What property of every description was owned, in the use, possession and control of yourself |
| | and its cash value on the 4 Nov. 1908? (Make list by items and value, and where situated.) 110 necess of land, worth about 1100,00- whitle personalty, worth about 53,00-(composed of 1 none 2 1 cow.) |
| | 10. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? I SUL AP L/C scree of lunu to Hoberts |

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was

.. of said State and County, hereby applies

Sworn to and subscribed before me, this the W. P. Lole Ordinary Campbel (

12. What annual or monthly income or earnings of yourself and the source derived have you. None, except what little I cap dirout of round.

worth whout 3000.00; 1 force & 2 Jown, worth about 150.00.

not allowed? Uir.

... up 400,000 said same to pay delta- never say any of the money. Yow A 11. What property of any description of any kind, and of any value now owned and in the use possession and control of yourself and its cash value? (Make itemized list). Secress of Lend,

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910. Questions for Applicants to Answer.

for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn-statement, with

STATE OF GEORGIA. Campbell

County. W. P. Cole

QUESTIONS FOR WITNESS AS TO SERVICE.

| STATE OF GEORGIA, |
|--|
| |
| of said State and County is hereby presented as a witness in support of the application of (1/1). Calc for the pension provided |
| by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded |
| answers as follows: |
| 1. What is your name and where do you resided for the lower and the first the series and the series of the series |
| 2. How long and since when have you known. |
| diety gent more pland in some Commenty |
| 3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? I completed Caming her all him lafe. |
| one brought up on his neighbor |
| 4. When, where and in what Company and Regiment did |
| war from 1861 to 1865? (Give date and place) about aft will 3, ft. Mant 4, 38% Conf. |
| 5. How did you obtain your information of this Service? I belonged to this |
| 6. How long within your own personal knowledge did he perform actual military service with |
| this Company and Regiment? (give date) 10 am 6.4. |
| 7. When and where was his Command surrendered or discharged (give date and place) |
| 8. Were you personally present at the Surrender? Use |
| 9. If not, where were you and how came you there? |
| . The state of the state of the same of th |
| 10. Was the applicant personally present with his Command at surrender? |
| 11. If not where was he and how came him there? At Counder Sle. in horfulae |
| mille Measle. |
| 12. When did he leave his Command? (be a laft at la see the Sommand when he left it? (blaze |
| |
| By whose authority did he leave the property by the state of and how long was he granted leave? At I feet to the Committee of the How do you know |
| ong was he granted leave? How do you know |
| all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) |
| 13. In what way was he prevented from returning to his Command? |
| 13. In what way was he prevented from returning to his Command? Lie hard |
| 14. What effort did he make to return to his Command and how do you know? |
| |
| 15. Was applicant captured as a prisoner |
| In what prison was he held? |
| |
| Sworn to and subscribed before me, this the |
| 1 say of afrond 1916 |
| The Applied Ordinary. |

AFFIDAVIT OF TWO FREEHOLDERS.

| STA | TE | OF | CE | OD. | CIA |
|-----|------|----|------|-----|-----|
| JIM | LIE. | Or | CIF. | - | 11/ |

Campbell County.

| Personally before me comes. J. L. Campbell & L. S. Peacock who on oath |
|--|
| says that they are freeholders residing in said County and we know V. P. C.1e |
| the applicant for pension and we know the property that is now in the use, possession and control of himself |
| and of its cash value to wit: (Make List by items and value.) 89 acres of land, wo th abo |
| \$900.20. A lit the personalty, worth about \$100.00. |
| , |
| |
| 1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? |
| (State it fully by items.) About 20 acres of land sold to Mr. Roberts |
| 2. When and to whom was it self or given to? in 1914 to Mr. Ruberts |
| 3. What was the price paid or stated to be paid? Rout \$400.00. |
| 4. What relation is the party to applicant? None. |
| 5. What disposition was made of the proceeds of the sale? Paid debts |
| 8. Was the disposition of this property made in good faith and full values? |
| or was it made to obtain a pension? In good fuith |
| Sworn to and subscribed before me, this the 12th day of Apr. 101 |
| day of 191 |
| Ordinary, A Can hoce |
| of Comment of the decree |
| 2147. |
| ORDINARY'S CERTIFICATE. |
| |
| STATE OF GEORGIA, |
| Cambell County. |
| • |
| I Y. a MGLIBACATA |
| the applicant APACOLE, for Pension is the person he represents himself to be and resides in |
| no de la companya de |
| Comphall to the |
| ervice and Centhell Peacock, who are freeholders, that |
| they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and |
| they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the |
| ax Returns of Ch bell Co. Ga., shows that emplicant's |
| alue for tax is in 1908 \$ 1279. for 1909 \$ 127. for 1910 \$ 1257. |
| or 1911 \$ 1.52 for 1912 \$47 for 1913 \$.1177. for 1914 \$195, for 1915 \$.125. |
| |
| Sworn under my hand and efficial seal of office this AZLIA day of ALF. 191 |
| It Ill worker Ordinary, |
| of County. |
| ofCounty. |
| OTES B. Before any quastions are satered the Ordinary shall swear applicant and all witnesses in the following words: "You do seleming wear that you will not consider the to each question asked you and the evidence you shall give shall be the whole truth; so help you fold in the to each question asked you and the evidence you. A delitional afflavit may be attached if blank spaces re insufficient. 3. All afflicts must be made before the Ordinary and certified by him. 4. If applicant has no property at all in this possession, use or control of self-afflicts its of freeholders unnecessary. |
| 3. All affidavits must be made before the Ordinary and certified by him. |
| and the most reporty at all in his possession, use or control of self affidavits of freeholders unnecessary. |

reallo CERTIFICATE OF ORDINARY ilag A (while the fact of the world and the fact)

Attested before me :

| and unpaid his Pension of One Hundred (100) Dollars from the State ac leorgia, and I know M. A. Wooddall, , the within | , the applicant, and that she | | | e lawful widow |
|--|-------------------------------|----------|---------------------|------------------|
| is death on the 17th day of APril. and unpaid his Pension of One Hundred (100) Dollars from the State of Committee and entitled to full credit. Given under my hand and seal this 23rd of April. (Seal of Ordinary) April County April County | | | | |
| Grand unpaid his Pension of One Hundred (100) Dollars from the State of County of Management of | | | | |
| Georgia, and I know. M. A. Wooddall,, the within mess, and he is of a truthful and trustworthy character and entitled to full credit. Given under my hand and seal this 23rd of Aprill,, 1925. (Seal of Ordinary) (Seal of Ordinary) Comptend if the Mess of the month of | | | | |
| December 1 1925. County The state of Action of December 1 1925. County 1 19 | | | | |
| (Seel of Ordinary) Ordinary Ordinary Ordinary Ordinary County Ordinary Ordinary County Ordinary County Ordinary County Ordinary Ordinary Ordinary County Ordinary Ordina | , the within | dell, | tnow M. A. Wood | leorgia, and I l |
| Heart and the Boundary of Marriers and Teles. Commit Commit and the Boundary of Marriers and Teles. Commit and the Boundary of Marriers and Committee of Mar | full credit. | | | |
| Here is the first of the first | | | hand and seal this2 | Given under my |
| The Beller for Period Decomposition of Period Decomposition of Period Decomposition of Period Decomposition of Marings and Salter (1988) Marings and Marings and College of Marings and Little 1985. Approved and marined paid. Approved to the paid of the | 11 4 | m. | nary) | (Seal of Ordi |
| 1925 December for Person Due December Salker (INSURE art 1891) be paid to his Wakes or Dependent Delbins) St. Sale and Sale an | | | | |
| 1925 1925 Comment of Person December 1 (1925) December 1 (1926) December 1 (1926) Navgaret 2 (1926) Navgaret 2 (1926) Navgaret 3 (1926) Navgaret 3 (1926) Navgaret 4 (1926) Approved at entered paid. Approved at entered paid. Approved at entere at Person (1926) Approved at entered paid. Approved at entere at paid (1926) Approved at entered (1926) App | County | Campbell | | |
| | | | dent | County |

lawful attorney to collect, and receipt for me in my name, for the Pension due me for 192, through my deceased husband,, who was on the Pension Roll and paid from _____County for 19____ Witness my hand this _____day of _______

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)
(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, CampbellCounty. Personally before me, the Ordinary of said County, comes Mrs. Margare-t. Kebecca Colle. of said County, who after being duly sworn, on oath says that she is the widow of No. Po. Coles. late of said county, /deceased, Pensioner, and that said Pensioner was on the Pension Roll of . Campbell and was paid a Pension of One Hundred and Twenty-1ve (\$ 125.00) Dolars from said County for 19.24, and that the said Pensioner died in Campbell County on the 17th day of April, 1925, and at the time of his death a Pension of \$ 100.00 was due him from Campbell and unpaid for 1925. Applicant further swears that she married the said . P. Cole on the 19th day of September, , 1869, in Campbell State of Georgia, , and resided with him from the date of marriage to his death as he 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 23rd day of April, . Ordinary Herry out Rober at Cole (L. S.) Campbell (Scal of Ordinary) AFFIDAVIT OF WITNESS STATE OF GEORGIA, Campbell County. Personally before me comes M. A. Wooddall, on oath says that he knew . P. Cole and that he knows Mrs. Margare-t Rebecca Cole, above applicant; and knows that the said . . P. Cole and Margaret .. Cole ... were in due form of law married in the County in the State of Georgia, of Campbell the 19th day of September, , 18 GP, and that they were residing together as husband and wife at the time of his death on the 17th ---Sworn to and subscribed before me this 23rdday of April, Campbell (Seal of Ordinary)

the Colly the one pension is covered by this application. Take shother application, on the white blank, to admit widow to rolls in her ight. Revember 1st is the last filing date for the next year's rolls.

```
NAME
          Cole, W. P.
                                                  COUNTY
 WISL AND WHERE BORN?
                             Born October 9,1843, a resident since birth.
                                                               (72 years).
  LISTED WHEN AND WHERE? September 12,1863, Atlanta, Georgia.
 Company F, 38th Georgia Regiment
 C "PANY AND REGIMENT?
                              Captain Hammeiter's Company of Jos.
                                                     Thompson's Artillery,
 ... OF CAPTAIN AND COLONEL?
 VOLNDED?
                            Had measles while in service and was sent to
hospital at Camden, S. C. My command left me at Cherau, S.C. on ac-
count of my having messles and I was given a sixty(60) day furlough
by J. 190serd, Surgeon Board of Examiners. Furlough dated April 24,
227 JH.D., Wadd. AND WHERE? 1865.
  LASED:
                                  Witness states:
 at At.L Winser, S. T. BENDIRLD?
                                  Command surrendered at
                                  Greensboro, April 25,183.
1. NOT PERSONS AT SURREMDER, WHILE WERE YOU?
                                                       In hospital at Camden,
 South Carolina, sick with measles.
D. WHEN AND WHIRE?
3 A.IED:
                   J. P. Robbins
TINESSES:
                                          - same company and regiment
                                                              ..... No data.
SB.
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Tampbell lounty. ) superior ours, dustice of Inferior Court,

"S) or dustice of the Perce: to Selecter,.

"On are hereby suffered and result of the in the Longor be state of retrieony little 1, tele and insurance to increase in regular to the rites of pure super, provided there he no located abuse to content the more: it, for an inter, this shall be our sufficient propher to the state of the little super and the formation of the little super and the formation of the little super and and a state of the little super and and super and and a state of the little super and and super and and super an
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tate of Georgia,) to any Limister of the Gospel, Judge of the

apoli see Joines boughter to the 1, should stelled a to 1st opief a most, **lesses** let, time. ... then, is in

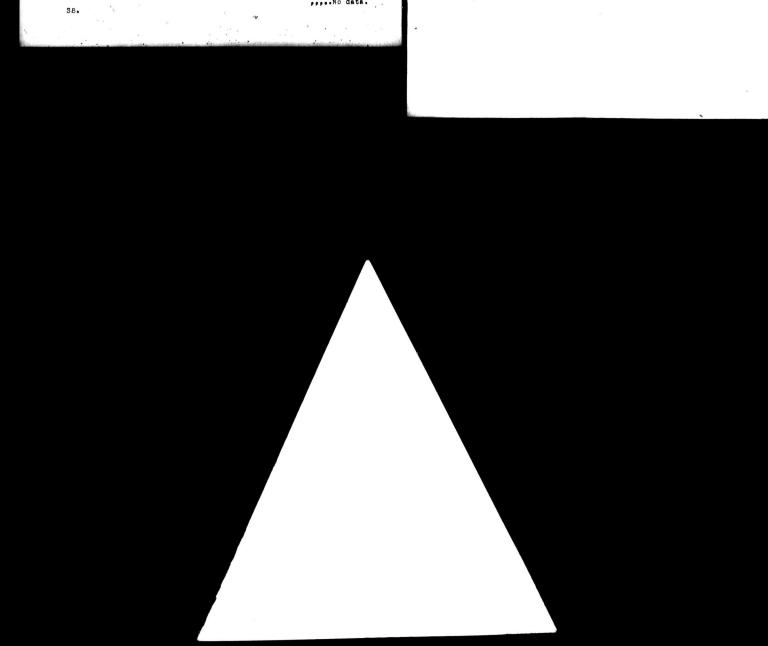
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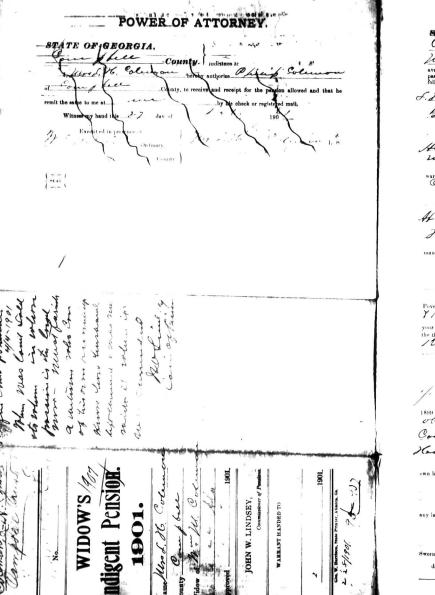
conditions of the lage of Miller to the ned in a supposed out of the new transfer of the out of the transfer of the new transf

Medical control of office, till poll of, ...

 $-\frac{1}{2} \frac{1}{2} \frac{1$



a witism volo Con WIDOW'S /goy of his orm running Krow Year Kurdaul Indigent Pension. tipo comme x como mos mile it rolum if 1901. was currendul Name Mero L. 26 Colemons County Compbeel Widow of My Mr. Coleman Approved _ JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDED TO



Questions for Applicant.

STATE OF GEORGIA,

Стрви County. Mero f. 26

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 submins her profoliows following questions, deposes and answers as follows: 1900, hereby submits her proofs, and after being duly sworn true answers to make to the

2. How long and since when have you been a resident of this State.

3. When and where were you harn's Truly 17, 187 2 4. When and where was your hashand born-state his tall pance, and when were you and he married?

Some of the first transfer of the first transfer hashand enlist or serve during the war between the States. Great the first transfer of the first

6 How long did your lusband serve in said Company and Regiment . 24

7. When and where did your hookand's Congany and liegans at surprising and was discharged.

8. Was your husband present at the time and place when his Congany and Regiment agreeders?

9. It not with his congany of the confidence of the congany and the confidence of the congany and the confidence of the congany of the congany and the

mand, for what cause, and by what authority Cove the way

10. When and where did your husband die Rea 21, 1889 in

11. Which of the following grounds do you have your application for Peroien, viz, Fine - Age and Poverty Second Infirmity and Poverty or Third Blindness and Poverty Age, Lee form . 9

12. If upon the first ground, state how long you have been in such a condition that you cannot carry your support. If upon the second give a rull and complete history of the infirmity and its extent. If upon the third, state whether younger totally blind, and when and where you lost your sight.

13. What has been your occupation since your husband's death? Jord were t

14. How much can you carn gross, by your own exertion or labor? Leveling

What property, real or personal, or neeme do you have or posses, and its gree value?

16. What property, real or personal, did you pessess at death of hubband 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 of the same

18 How have you been supported yince death of husband, and especially for 1809 and 1000.

10. How much did your outplot cod for such of those your, and how much did you contribute by your own labor or income?

20. What was your employment during 1800 and 1900—how much did you receive for each year?

Herd Zum -Locume

21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property? The Sent & of wie of wie By winh we ?

22. Have you ever made an application for pension before ? Lee

23. How many applications have you made for a Pension, and under what class?

Mero f. J. V. Column

| 7. 6' | • |
|--|--|
| 26. Is applicant able to earn a support at labor of any sort, if not why? Lee | Questions for Witnesses. |
| 27. How was she supported for 1899 and 1900? My her chie agen | STATE OF GEORGIA, |
| | Complete County. |
| 28. How much did applicant contribute to her support for last two years? Hence I working | County.) |
| 29 Give a full and complete statement of applicant's physical condition? de complete statement of applicant's | It Colinger of said State and County, having |
| y / aday, trother oranged orge of | been precented as a witness in support of the Application of Mrs. S. 86. Culture one |
| | for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the |
| .10. What interest have you in the recovery of this pension by the applicant? | following questions, deposes and answers as follows: 1. What is your name and where do you reside? The College are for the following the foll |
| Sworn to and subscribed before me this | River in Com Some as Ju |
| Sworn to and subscribed before me this day of 190 17 W. Y. Columon | 2 Are you acquainted with the applicant, Mrs & & & C. |
| 1/2 1/2 | If so, how long have you known her' I Les = deave |
| County Witnesses. | 3. Where does she reside, and how long and since when has she been a resident of this State. Come of becc to Je To yours A |
| County Witnesses. | La Complete cofee = Joyners & my hours for y |
| The second secon | 4 When and where was she born " Worth / 84 1 |
| Affidavits of Physicians. | 5. Were you ever acquainted with her hysband' 7-2- |
| | 11. Where did be reside in 1811 - he of the Mean of the 196 from 17. When and to whom was to married . 156 Mean of the 196 from 18. |
| STATE OF GEORGIA, | 8. When and where was he harn' , \$ 0/ in Com flows & for |
| Propagate by one one, comes The propagate by one of the propagate of sail could who, being everalls so on, say on oath that they have examined carefully Mrs. | 8. When and where was he born |
| Personally before me, comes Col Lieux chack MCD and | 10. When and where did to the Coleman on enlish in the war between |
| both known to me to be reputable | the States, and in what Company and Regiment did he ends; and how do you know they de |
| physociatic of said count, who, being severally sworn, say on oath that they have examined carefully Mrs. Mrs. L. H. Go leve an applicant for a Pepsion under Act of 1900, and after | Ala = 0 1 44 Ala |
| applicant for a repsion under Act of 1900, and after | 11. Were you a member of the same Company and Regiment |
| to hypanin any labor to amount to austhing | 12 How long did be perform regular military day of the + the years |
| She has been suffering With thickness termible | |
| The second examination as that her physical conditions to the so not able to fly form and a surface of amounts a conflicting to the standard to a surface of the standard to t | 13. When and where was his Company and Regiment surrendered and discharged from service. |
| | Apr 9, 86 5 of It something the his |
| Sworn to and subscrived before me this day of LEHRauser to 190 | 14. Were you with the command when it cirrendered? I was he Sources to I can I |
| day of the 190 Lest America Control (200) | I wo in provide of the courte : I am was tout I being he was prom |
| Ordinary | 16. If not present, where was he? |
| Ordinary J. D. Longins M.O. | 17 When and where did be leave his Command? |
| County./ | For what cause " |
| ORDINARY'S CERTIFICATE. | By whose authority he left" |
| STATE OF GEORGIA,) | How do you know all the State fully and clerity. I were in Source to be L |
| Come & beec County. | |
| 1. N. Mc Lovice Ordinary in and for said county, hereby | 1x When and where did H = he, Coleman die |
| Ordinary in and for said county, hereby | In 1899 in Complete to Fa |
| certify that the applicant, Mrs. I, It Coleman resides in said | 19. Where did he reside at his death and how long had he been a resident of Georgia at his death." |
| county, and has been a bona fide resident of this State since day of 18 99, and that the witnesses, Mr. J. M. Column on and C. 26. Novemborn Med | 18. When and where did It are the Configuration die ' for the Configuration of Georgia at his death ' Complete Configuration of Georgia at his death ' Complete Configuration of |
| 91 J. Journal M. A. are of trustworthy character, and that their statements | 20 Do you of your own knowledge know that applicant is the lawful widow of Ir in the . |
| are entitled to full faith and credit. | 21. Has she remained unmarried since her soldier hosband's death, and is now his widow |
| I do further certify that before answering the foregoing questions, the applicant and said withesees took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesees before the same | y 20 Sair |
| was signed and subscribed | What properly effects or income has the applicant, it any and how do you know this of your own knowledge. |
| I turther certify that the tax digest of Coure to bell county shows that applicant returned for taxation in her own name in 1800. | own knowledge! /10 in wrest in your to y pour level |
| returned for taxation in her own name in 1809. dollars worth of property, and in 1900. Learning dollars worth of property. | Am sourceior win her of foirs |
| Witness my hand and official seal, this 27 day of 7-67 190 | 23. What property, effects or income did applicant powers in 1800 and what doposits in did she make of it? // 3 are consecutive of the UTO of the form |
| returned for taxation in her own name in 1849 of property, and in 1900 Witness my hand and official seal, this SEAL SEAL SEAL | make of the // / |
| SEAL SEAL Country. | 24. Has applicant conveyed any property in last two years or given any away, if so what was it and to |
| County. | whom? Ico Sir |
| 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 below on God." | |
| Notes—1. Before any questions are answered, the Ordinary shall severe applicant and the witnesses in the following words: "N and an elementary shall be the 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 deed hosbands while they were soldiers need apply—and are now | for the warm of a condition and her changes and ability to carn a support? I am for the form the form of the form |
| Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled. | for our of menotion |

21. Has she remained unmarried since her soldier husband's death, and is now his widew 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 22. What properly, effects or income has the applicant, it any, and how do you know the of your own knowledge? It 3 in threath me to the applicant, it any and how do you know the of your fact of four factors. was signed and subscribed. northing county shows that applicant I turther certify that the tax digest of returned for taxation in her own name in 1899; dollars worth 23. What property, effects or income did applicant possess in 1899 and 1969 and what deposits a did she make of it? de vening dollars worth of property. of property, and in 1900. Witness my hand and official seal, this Is Slu Ton Ordinary, SEAL 24. Has applicant conveyed any property in last two years or given any away, if so what was it and to Composition whom? Ico Sir Notiss—I. 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 runk; its Beffyou God."

2. All affidavits must be made before Ordinary.

3. Only widows who were the wires of the deed housbands while they were soldiers need apply—and are now widows. Those married since 28th April, 1885, not entitled.

5. Witnesses and two Thysicians are necessary to make out claims. 28. What is applicant's physical condition and her chances and ability to earn a support? Very few ble & such black to the start of the

POWER OF ATTORNEY. STATE OF GEORGIA.

Careful County.

My Hillo Carrell hereby authorize D. M. Jane, I wing of Careful CC County, to receive and receipt for the pension allowed and that he premit the same to me at Machbary which has been been registered mail.

Witness my hand this Hilly 30th day of Macy County.

Executed in prepared of the prediction of the pension allowed and that he premit the same to me at Machbary.

My Club County.

County.

County.

County.

Ownid mends

to contribute in any manner to her own support

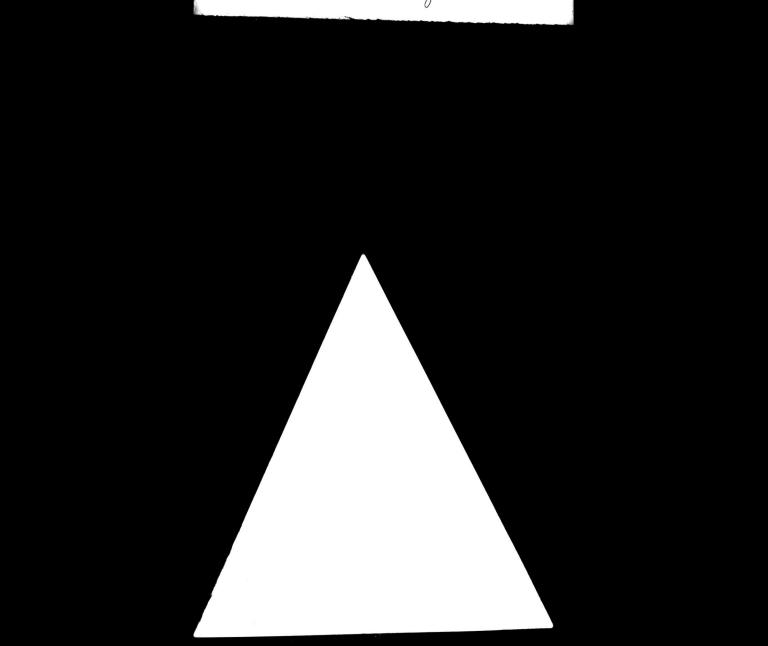
Smorn to and subscribed before me this August 3oth 1907.

State of Georgia Supplemental affidavit in the matter of the Applica-Campbell County | tion of Mrs. L. H. Coleman, widow of Wm. M. Coleman deceased. lfor Pension allowed to indigent Widows of Confederate

)by the General Assembly of Georgia. in person came before me. W. S. McLarin, Ordinary of said county, Mrs. L. H. Coleman, persomally known to me to be the widow of William M.Coleman deceased Confederate Soldier of said county, and being duly sworn . mages this her supplementary affidavit to her application for pension hereto attached dated February the 27th 1901, and says in addition to the facts stated in her said affidavit of said date that all her interesting and to said Fifty Acres of land mentionedin said affidavit has long since been consumed in the support of affiant, that affiant interest was never worth more than seventy Five Dollars and that she disposed of the same at and for that sum in cash to Elsaiah Coleman of said county with whom she has resided ever since the death of her said husband, Wm.M.Coleman; that affiant is in poorer and feebler health and has been for some time past, than she was at the time she made the affidavit hereto attached dated Feb. 27th 1901. The Affiant is absolutely de Andent upon the charity of her children and neighbors for support; that she is mithout means or property or resources of any sort or amount and is physically unable by reason of age and ill health to earn any money or

Moderate Social 1907.
Campbell &

Boldiers, under the Act of 1900 and amendments passed



| Colling, W.a. & | The second secon |
|---|--|
| Confederate Soldier's Application Under Act 1910—As Amended by Act of 1919. County Campbell Name W. A. Cellins Company "I" Regiment 2nd Ga. Rest't— Cav'y. Approved J. W. LINDSEY, Commissioner of Pensions. Byn Printing Co., State Printers, Albata. | Ordinary's Certificate STATE OF GEORGIA. COUNTY Ordinary of said County certify that I know the applicant of said County certify that I know the applicant The Action of said county and the person he represents himself to be and resides in said county. That I sho know to the county and were duly seem by me before sugning the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. Swern under my hand and official seal of office his Action and the entire of the following weeks are swerned the Ordinary Ordinary sail over explicate and eventure in the following weeks on the statement and you and the evidence of the statement of the special or witness reads of the statement of the s |

| Ordinary's Certificate |
|---|
| the applicant N. A Course for pension is the person he represents himself to be and resides in said county. That I also know & Nataroly the witness savearing to the |
| service, that they are both residents of said county and were duly sworn by me before signing the forego- |
| ing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and |
| Myorn under my band and official soul of office this 25 th day of Acy as & 10/19 |
| ISEAL County) |
| |
| you goe shall be the whole truth. So help you that the considerable of the country of the country of the country of the applicant or witness resides and most be restricted by such Ordinary. |
| Confederate Soldier's Application Order Ast 1910—As Americal by Act of 1919. Company 17 Company 17 Regiment 2nd 64. Rev't- Cav'y. Regiment 2nd 64. Rev't- Cav'y. Approved 1. W. LENDSEY. Communicate of Persions. Prof Printing C. Res Printing April 200. |

Application for Soldier's Pension Under Act 1910 Amended by Act 1919

Questions For Applicants to A

| Questions For Applicants to Answer |
|--|
| STATE OF GROUDGIA, |
| County COUNTY |
| Mr. A. Callino of said State and County, hereby applies |
| for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits |
| his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to |
| make to the questions propounded, answers as follows, to-wit: |
| 1 What is your name and where do you reside! (file County and Post office) to A Calling - |
| 2. How long and since when have me been a continuous resident dissense of this Mate 172 1 1010 of the transfer of the 10, 1747, the oak of they bear the |
| 3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from |
| 4 When and where, and in what Company and Regiment did you enlist! (Give the arm and class of Service) - the Fall of 1863, in 86th Jewes, in 6 I 2 1/2 key! looky |
| 5. How long did you remain in the actual mulitary service, with said Common at D. |
| date of discharge / he self Mountage of from More / 1463 & Jace 1765 - he self-organical of the March of the |
| 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 in Meson left cur lie the auror wills |
| b When did you leave the command? We and laft wit |
| e For what cause did you leave! Ry winter to are west |
| d. By whose authority did you leave! |
| e For how long was your leave granted! In what way! |
| |
| f. Why did you not return to your command after leave expired? Rey are by ano are |
| g. In what way were you prevented! |
| h What effort did you make to return! |
| i Were you emptured during the wart Lo Lis |
| i If so, when, and where! In what prison were you held and when were you released? Buy with |
| 77. 2.7. |
| 9. Are you drawing a pension of any amount from this State or the United States 1 Up 2 1 |
| 10. Have you over applied for the Georgia Pension and had it refused and for what cause it was not allowed to the Control of t |
| |
| Sworn to and subscribed before me, this the |
| Sworn to and subscribed before me, this the 25 th Angle of May us k 1918 Ordinary |
| lague Hell |
| (SEAL) |
| 1 Command / |

Questions for Witness as to Service

| | ORGIA. |
|--|--|
| N 27-4 | bul county. |
| | of said State and County is hereby presented |
| as a witness in s | support of the application of M. A. Coalling for the pension provided |
| | 10, as amended by the Act of 1919 in said State, and, after being sworn trule answers to |
| make to the quest | tions propounded answers as follows: |
| What is you | ur name and where do you reside! 6. Notoway in Count. |
| 2. How long as | nd since when have you known ?? A Collins thy applicant! |
| and how do you | he now reside, and since when has he been a bona fide, continuing resident in this State, know to the the court of the cut the analysis - all of |
| ins ale | in ford - Hope the ander line for anally all his life |
| 4. When, wher | e and in what Company and Regiment did 27. A Callus enlist during |
| 5. How did you | 1 Hand y (Hive flater and plage) in the (form I there in ha) / Yh V - in Sale |
| | y & served with of fle count |
| 6. How long v | within your own personal knowledge did he perform actual military service with this |
| | egiment ((live date) 16 m 17 Mouche, or fram Jan", 863 to 04, 2 |
| 7 When and 26, 1865 | where was his command surrendered or discharged (give date and place) This |
| 8. Were you pe | ersonally present at the surrender! I to ha |
| 9 If not, where | were you and how came you there J. Present & |
| | |
| 10. Was the ap | pplicant personally present with his command at surrender! Les des |
| 11 If not when | re was he and how came him there! |
| 12 When did h | he leave his command there was his command |
| when he left it? | |
| | For what cuttee did he leave! |
| | Be when sub-size size to the |
| | By whose authority did he leave |
| ong was he grant | By whose authority did he leave |
| long was he grant | By whose authority did he leave |
| long was he grant all that you have a rough failed 13. In what way | By whose authority did he leave |
| iong was he grant all that you have a comply facility of the latest and the lates | By whose authority did he lease |
| iong was he grant that you have a sound family a local 13. In what way How do you know | By whose authority did he leave |
| ong was he grant all that you have a found found 13. In what way How do you know 14. What effort Au. Out | By whose authority did he leave |
| ong was he grant all that you have a control of the | By whose authority did he leave |
| long was he grant all that you have a count found. 13. In what way How do you know 14. What effort ALL (Vot 15 to ALL of Uk 1 | By whose authority did he leave |
| long was he grant all that you have a come to formed a farmed. The was the way that was a come of the | By whose authority did he leave A. A. How do you know stated to be true! If of your own knowledge, tell clearly and speciffently. The Allering So, in Fall / Flo Haunaniah large true to be accounted from returning to his command! Require the discountered from returning to his command! Require the discountered from returning to his command to the true to be accounted from returning to his command and how do you know! Require the time captured as a prisoner. If so, when and where! In what prison was he held beginning to due out and and sheerihed before me, this the fall of the true to the counterpart of the fall of the true true that the fall of the true true the true true to the counterpart of the true true true true true true true tru |
| long was he grant all that you have a county for the form of the f | By whose authority did he leave A. A. How do you know ted leave! A. A. How do you know did not be true! If of your own knowledge, tell clearly and specifically. The tild the true to the form that the true to the form that the true to the form was he prevented from returning to his command! The true to the form that the true to the form that the true to the form that the true to the did he make to return to his command and how do you know! Rey carry the time captured as a prisoner to the form that the true to the form that the form the form that the form the form that the form the form that the form the form the form that the form the for |
| long was he grant all that you have a come to formed a farmed. The was the way that was a come of the | By whose authority did he leave A. A. How do you know ted leave! A. A. How do you know did not be true! If of your own knowledge, tell clearly and specifically. The tild the true to the form that the true to the form that the true to the form was he prevented from returning to his command! The true to the form that the true to the form that the true to the form that the true to the did he make to return to his command and how do you know! Rey carry the time captured as a prisoner to the form that the true to the form that the form the form that the form the form that the form the form that the form the form the form that the form the for |

I' L'E Collins, W. A. YEAR 1920 COUNTY Campbell.

WHEN AND WEERE BORN? December 10th, 1847,- Georgia.

ENLISTED WHEN AND WHERE? Fall of 1865, Tenn.

RANK:

COMPANY AND REGINERY? Company I, 2nd Georgia Regt, Cavelry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

'AITURED, MEN AND MERE?

RELEASEL:

WHEN AND WHERE SUBHENDERED? April 26th, 1865, Greensboro, N. C.

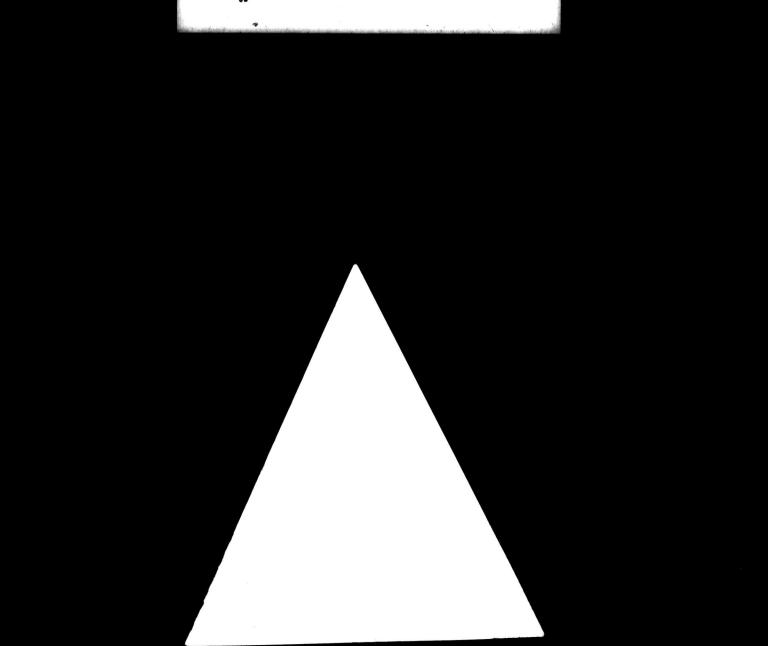
IF NOT PRESENT AT SURRENDER, WE ERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: E. Hataway, -- Same company, -- ob

o data.



Act 24th October, 1887. STATE OF IN WITNESS WHEREOF, I have bereunte No. 3300 Cany Ale To SOLDIER'S PENSION. 200 GEORGIA. POWER OF 1897. COUNTY. Name G. H Colquitt ATTORNEY. Disability Leg Amount, 8 5000 , 1897. RICHARD JOHNSON, Warrant Handed to 3/25.97

POWER OF ATTORNEY.

STATE OF GEORGIA,

(Collegificate COUNTY)

I. See It (constant berely authorize throw of the cochean)

of the constant for the pension allowed and request that he remit same to the constant of the constant

Executed in the presence of P. G. P. L. oles,

For Use of Applicants Who have Not Heretofore Drawn.

STATE OF GEORGIA,

Campbell COUNTY. S. PERRONALLY Appears George M. Leolgint of Campbell

County, State of Georgia, who being duly sworn says on oath that he was born on the 16 A day of Aryust 18/11, that he is a boun fide citizen and resident of Georgia, and has been continuously since the 13/10 day of Argust 18/5 &

that he enlisted in the military service of the Confederate States (or the State of

Howard Volunteers Accelerates Brigade: that whilst engaged in

Such military service, and in line of duty in the State of Virginia on the State of Virginia on the State of Linguistic of the Linguistic of the State of Linguistic of the State of Linguistic of the Li

By Sun ohot wounds. A munice ball entered the left thigh, just above the Knee. Sanging upword behind the bone through the entere

ranging represent behind the bone through the ente length of the musele passing out below the groin. producing atrophy of the lund,

July 1863. at Gettysburg, State of Remegloania_ a numer ball cultical left hip, fracturing the bone

On account a sur so is the change of the line

appriend made to perform physical takes,

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 thereunder,

ending October 28th, 1897.

Sworn to and subscribed before me, this the

to bell of 1.

Ordinar

Note.—State fully nature of wound or character of disease which causes the disability, and orphins particularly the extent of holiability. It claim is based on disease, tries full and connected Autory of disease, tracing it directly to the service, Note.—Do not trouble to mention wounds which did not disable.

Note.—The Ordinary will see that all blank specars are filled when the affidavity are signed.

SOLDIER'S PENSION.

1897.

Mane S. W. Calquill

County Camp Let C.

Disobility & e. g.

Amount, s. S. S. G. G.

Amount, s. S. S. G. G.

Commissioner of Property

Commissioner of Property

Marrael Happel to

Out. And Frances

Affidavit for Three Witnesses.

| STATE | OF | GEORGIA, | |
|-------|----|----------|--|
| Cor | 20 | to | |

County.

A. And and the W. Carrama all County. and J. & Peurlu grast personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with 1200 W Colymitt

whose application is herewith presented for a pension, that he has resided in this State continuously sincia day of August 18 5 8, that he served in Company

Regiment of Anderson's Brigade, and from our personal-knowledge he was injured by the service as follows: (give full statement, and tell in your own language when and how the injury happened, and how badly applicant is disabled from work. If he does any labor, or can do any, state what.

At Garnelle Jane Va, on June 25th 1862. by gun shot would; the last entering it a left thigh just alrew the Hure joint, poering oning just below the left grieve, and guly 2001/363. The last cultaring at upper part of left hit, bone wir passing out near the last bone. As a result of these would there is loss of muscular tissue and strength; loss of bone aler. and these cetally digually him for manual taber

WE personally know above stated facts. We were with him in the army, and have known him ever since. He was honorably discharged or retired from the service on. 26 % 186 4 . Applicant is permanently disabled as stated, and has been so to our certain knowledge ever since 18 . We have no interest in the recovery of a pension by him.

1807. His H Caronical, Excel 44.

Note I.—The Ordinary will see that the full text of the affidavit is understood by the witnesses and that they are Note 1.—The Ordinary will ree that the full text of the Amdavit hilly qualified to the same.

2.—Witnesses are asked to make their statements full and explicit.

3.—All blank spaces must be filled when signed.

4.—Three witnesses are required.

PHYSICIANS' AFFIDAVIT

STATE OF GEORGIA.

| County of 11 delice Con | |
|--|---------------|
| PERSONALLY comes before me The Country of said | nty, |
| C. C. A. Carata and Salar and both known | n to |
| me as reputable physicians of said County, who being severally sworn, say on oath, that they have carefu | |
| examined Go . 11. Construction and after such personal examination, | say |
| that the present condition of applicant is as follows: Ye was a second of the condition of applicant is as follows: Ye was a second of the condition of the con | eren (eert |
| the contraction of the contracti | |

and that the condition is permanent. We further say that said condition arises from the following facts:

while to record a described with the horse in

We have treated applicant professionally for Section years, and his condition, as above - 110arise from hereditary or congenital causes, or from victors or intemperate habits. I E to Warmith M D Sworn to and subscribed before me this the

day of Celando M Elendon

Note 1.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting thereform.

Note 2.—If claim is for disability resulting from disease, state Acc the disease is Assess to result from the service as a

lier Also, state how long physicians have known and treated applicant.

Note 3 —The physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA, County. 16. C. Beavers

, Ordinary of said County,

Vistal Contraction

do certify that I am well acquainted with Learge Mr. Goly with 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, to-wit: Sur ich und.

are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal this 3rd day of with

Ordinary Cour & bell

POWER OF ATTORNEY. Cump of County. to receive and receipt for the pension paid hereon and request that he remit same to Hattie Colonita at Jeculier Gor IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of March Gev. M. Colquite mch 10 1848 This mill author 32 strong. In Terrel to coulet a rimich this pusing by to oran of it dicatar Ga Thomas He. Meacha in atty SOLDIER'S PENSI RICHARD JOHNSON. INVALIE

No. 3300

POWER OF ATTORNEY.

STATE OF GEORGIA. Jampheli

I. Glorge M. Golgseitt hereby authorize That A. Men fan-

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

Palmette ofa

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3.11 Leonge H. lo Court [L.S.]

L. J. Stiphers Executed in presence of

> SOLDIER'S PENSION INVALID

RICHARD JOHNSON

of Decatus 50

For Applicants Heretofore Allowed Pensions.

1 County. Dersonally appears 2001. Colquet of Cempbell County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of August 185 %; that he enlisted in the military service of the Confederate States (or of the State of,) during the war between the Crivate in Company 7, of th Regiment State, and served as a of Gurgie Volunteers, Inderson's Brigade; that whilst engaged in such military service in the State of Verginia, on the 28 day 186 2, he was wounded, injured or diseased as follows: or , mue was ball entered just above the left Knee ranging reproved passing out Just below left grown, through The humale of the thigh clarking the link in weath on-Seen wound at Getty bury Pa, guly 82 863. Ball entering not below out : the love present out at upper park 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 20th, 1898. I have heretofore under said law as a resident of Campbell county been allowed an invalid pension of Dollars, for the year 189 7 Sword to and subscribed before me, this, the 1808. POST-OFFICE Dallutto ga 4 day of Hunch Associate fully the nature of a mend or character of disease which cause the disability, and explore protecularly the extent of the disability, resulting from the wound or disease. STATE OF GEORGIA, Compber County. I. R. C. Pole and the Control of Continuery 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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

County

Dersonally appears of long of balgneth of Comp fell
County, State of Georgia, who being duly sworn, says on oath that he is a bona tide citizen and resident of said State, and has resided therein continuously ever since the 13day of 1858; that he enlisted in the military service of the Confederate States (mod the States of) during the war between the States, and served as a in Company of of the Regiment of of open of the States of 1851 and 1861 a

possing out fust below left grown through the musely of the things, weakening and reducing in sign musely cales on the 8th day of July 1868 to detty hora Danisyle minni ball when the little the object of the things have a superior to the the state of t

minnig hall entired first below the exect as left his bone, hanging to passe lout a trapper point of his bone near the spine The character at the weight is such that the bart affected a sentential and issurance, use

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1869. I have heretofore under said law as a resident of

Jiffy 56021 Dollars, for the year 1898

Sworn to and subscribed before me, this, the Lie way to the year to

2 1 day of January 1800. POST OFFICE Parmille The

L.J. Stephens, Ordinary
State State and the nature of sounder here per of divide which cancer the deathirty and a stan good or the state of the deathirty and a stan good of the state of the state of the standard of the deathirty and a standard or the standard of the sta

STATE OF GEORGIA,

1. J. J. Lefs hims Ordinary of said County, do certify that I am well acquainted with Squary In Salgnus II 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, 4

day of fan no 11/ J. Itels hens ordinary been to let

Count

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|----------------|-----------------------------|----------|-----------------------|---------------|-----------------|---------------------------|---------------------|----------|
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| IN WITH | ress where | EOF, I | | set my hand | | | | |
| | ed in presence | | | | , | | | |
| - K.J. C | Stephen | 1-01 | Minary. | | | | | |
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| 3/6 | 12 图 | Ŏ | 3.50 | | SONI | XDED | Phone, a | 3 |
| JE 8 1,19 1 | 11 | | 13 7/ | , ž. | 7 9 | A 2 | 4 | 3 |
| 3 1 2 | 3 23 | | 5: 3 3 | 0 04 | 3 | 2 3 | 8 | 9 |
| Those Air | E S | 119 | of M. | bansa M | OHN W. | SANCE TO THE TO SANDED TO | N. Harrison, | ti, |
| (For Those Air | INVAI LDIER'S 1 | 19 | nty Man | ount, \$ 00 | JOHN W. LINDSEN | WARRANT | Geo. W. Harrison, | quitt, |
| For Those Alt | SOLDIER'S | 19 | Name of M. County Man | Amount, \$ 00 | јони w. | WARRANT | Geo. W. Harrhoon, I | Bolgutt, |

| FOWER OF ATTOR | NEY. |
|---|-------------------------|
| STATE OF GEORGIA. | |
| Carpitobell County | _ |
| I, George W. Certainty hereby author | ize Ithe Tour |
| STATE OF GEORGIA, County & Colquet hereby author M. Ferrell of Alla | and the |
| To receive and kinds () | uua, |
| to receive and receipt for the pension paid hereon and re- | |
| me by Che | ek |
| at Pulmotto | |
| IN WITNESS WHEREOF, I have hereunto set my | hand and seal this / 6 |
| day of Fr by | mand and scar this |
| 1901. O | 1 |
| day of Fe Gy 1901. | /, (' /tii / _ [L. s.] |
| | |
| Executed in presence of | |
| If I Somi | |
| 1,0,100 | |

campbed 6

SOLDIER'S PENSION. 1901 Name Lang 1. Cely will (For Those Already Eurolled 1901 JOHN W. LINDSEY. DISABLED No. 2731 Disability Hounds on S

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

| STATE OF GEORGIA, |
|--|
| Hamp bell County. |
| |
| personally appears y. M. Lolquill of . Campbell |
| County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citize |
| and resident of said State and County, and has resided therein continuously ever since th |
| day of change 1838; that he enlisted in the military service of |
| the Confederate States (or of the State of) during the war be |
| the Confederate States (or of the State of) during the war between the States, and served as a () in Company of the Regiment of Volunteers, Voluntee |
| Regiment of Columbers, Your end is Brigade; that whils |
| engaged in such military service in the State of 20 junior, on the 28th |
| day of 1. 1862, he was wounded, injured or diseased as follows: |
| City and the first of sasting out just be toll- |
| Ceft ground, through the or wol of the Thigh, |
| Also we 300 day of Mely 1563 of Cittyobiery, Sale of December on Bott interes just better over I they bone, rough |
| Sould be the the the field put believe oreth of they bour, Jongs |
| Deponent maker application for the pension to which he is entitled for the year |
| ending October 20th, 1900. I have heretofore under said law as a resident a |
| History of the County been allowed an invalid pension of Dollars, for the year 1894. |
| Sworn to and subscribed before me, this, the Leave It Course |
| 2 day of Hikmin 11/ 1900. POST OFFICE |
| L.J. Stephens- Chimary |
| construction the winds of disease, |
| STATE OF GEORGIA, |
| Hum /s hell County. |
| 1. A. Stip herris Ordinary of said County |
| do certify that I am well acquainted with & Mr. Jeolquitt 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 Helinary 1800. |
| Ordinary Campbell County |
| Ordinary Of MM County. |

For Applicants Heretofore Allowed Pensions.

| , ((|
|--|
| STATE OF GEORGIA, |
| County, |
| Personally appears George H. Colquitt of Campball |
| |
| 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 |
| the district of the con- |
| States, and served as a served as a in Company. |
| ofVolunteers, J. And Macre's Brigade; that whilst engaged |
| in such military service in the State of Lirguna, on the 25 day |
| of 1862, he was wounded, injured or diseased as follows: |
| rounded By Mune ball: entering just above the Knee |
| in the fine |
| ranging reproved bassing out just below left p |
| Through The nurele of the Thigh : weakening livel |
| west noticing in age. |
| Agan, at Lettyoburg, Penn. on and day in |
| July 1863. The ball entered nech below |
| Creek of the bone passed out at upper bound of the near faire |
| Park office an infestion of the person which is the rear there of the Depotent makes application for the person to which he is entitled for year end |
| ing October, 26th, 1901. I have heretofore under said law as a resident of |
| County been allowed an invalid pension of |
| Dollars, for the year 1900. |
| Sworn to and subscribed before me, this the Leonge W. Wolquelt |
| day of the by 1901. Postoffice Palwelly |
| Mr. S. M. Larin Ords |
| NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain partic- |
| ularly the extent of the disability resulting from the wound or disease. |
| STATE OF GEORGIA, |
| Complete County. |
| Mall Jones |
| do certify that I am well acquinted with George T. Ordinary of said County, |
| the |

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be

| lay of TE 6 | 7 | nswj. | |
|-------------|----------|--------|------|
| - | Ordinary | Compte | Coun |

POWER OF ATTORNEY. STATE OF GEORGIA,

to receive and receipt for the pension paid hereon and request that he remit same to 1.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this /5 Derry H. Colgary [L. S.]

Executed in presence of in I feet in

Latine de Ti

JOHN W. LINDSEY,

POWER OF ATTORNEY.

STATE OF GEORGIA. Campbell County. I, George It Colquill hereby authorize Hil & aniel to receive and receipt for the pension paid hereon and request that he remit same to

at Palnullo ya IN WITNESS WHEREOF, I have hereunto set my hand and seal this. day of____

Singe It to profices. Executed in presence of

> SOLDIER'S PENS 1903.

DISABLED

(FOR THOSE ALREADY ENROLLED.

600

FOR THOSE ALREADY EMBOLLED DIER'S PEN DISABLED No. 907

1902

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA, |
|---|
| County |
| Personally appears Serge It Colymid of Counthell |
| County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen |
| and resident of said State, and has resided therein continuously ever since the |
| day of Jugace 1858; that he enlisted in the military service of the Con- |
| federate States for of the State of |
| States, and served as a |
| of Georgia Volunteers J. J. Chedera 's Brigade; that whilst engaged |
| in such military service in the State of Linguister, on the 28 % day |
| of // 1802, he was wounded, injured or diseased as follows: |
| The ball entered just above The left Knee |
| ranging whered, passing but just below left groing Through |
| The misele of the thing Law a howing and reducing size of limit. Again on 3rd day of play 1963, at Gilly burg, Pa Minima ball |
| Again on 3rday of poly 1863, at Setty burg, Pa. Minina ball |
| entered just below the court of left this down, ranging around |
| pared out at repen print of his lone, man the opine. The character |
| face out of respect of his bone, near the office . The character of the bounds much the parts affected enfected any parts a rection. |
| Deponent makes application for the pension to which he is entitled for the year |
| ending October 26th, 1902. I have heretofore, under said law, as a resident of |
| County, been allowed an invalid pension of |
| Dollars, for the year 1901. |
| Sworn to and subscribed before me, this the longe M. Colgred |
| day of 1902. Post-Office & steerestle |
| by delicion condy |
| Nora.—State fully the nature of the would or character of disease which causes the disability, and exploin particularly the extent of the disability resulting from the would or disease. |
| STATE OF GEORGIA. |
| County. |
| |
| do certify that I am well acquainted with the County, |

Affia your hore

be and that he resides in this County.

Ordinary Complete Comment Note.—Fill all blanks and of Company and Regiment Note.—All vouchers and affidavite must bear date after January 1, 1902.

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

Given under my official signature and seal, this

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

| THE TOTAL MEDICAL |
|--|
| STATE OF GEORGIA, |
| County, |
| Personally appears always H Conquellor Campbell |
| County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen |
| and resident of said State, and has resided therein continuously ever since the |
| day of August 1898; that he enlisted in the military service of the Con |
| rederate Stayes (composite Stayes) |
| States, and served as a State of the Community of the Com |
| Volunteer Vi Villet del C'a Brigada: that while a |
| in which military service in the State of Perfect on the 25 1 |
| of |
| VI Multiple account to 11 . 1 . 1 . 1 . 1 |
| Mariace repured a passis out on the line of the |
| Crawing lumb in what consilione with a triply of must |
| face of July 1363 at Attentition I Po |
| Wall cultical just below cresh of teeth his home |
| Canquig round passes out at with their will |
| one charaller of the arounds it auch that he hat a strate C |
| Deponent makes application for the pension to which he is entitled for the year |
| ending October 26th, 1903. I have heretofore, under said law, as a resident of |
| County, been allowed an invalid pension of |
| Dollars, for the year 1902. |
| Sworn to and subscribed before me, this the |
| day of 1903. Post-office Post-office |
| addice Logica Const |
| Norm. State fully the nature of the wound of character of disease which causes the disability, and explain |
| roin the would or disease. |
| STATE OF GEORGIA, |
| County |
| I. It, dille - Loyer , 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 1903. |
| |

Ordinary_ Norm.-Fill all blanks and of Company and Regiment.

County.

Nors. - All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

| receive an | Levry | bell mil mil mor 11 | | wy | ot_ | | | | nat he | remit | y auth | | |
|------------------------|-----------|------------------------------|-------|----------|--------|------------------|---------|------------|------------------|-------------------|-------------------|--------------------------------------|--|
| y of_Da- | d in pres | ence of | _1904 | | | hand a | | | | | 7. ₁ 1 | L s j | |
| | / | | | ×. | | | | | | | | | |
| ENROLLEÓ.) | ΞD | ENSION | | 1. Cycle | 11/2 | h d | | 3 \$ 1904. | LINDSEY. | 10.73 | Auna | er Atlanta. | |
| FOR THOSE ALREADY ENRO | DISABLEI | DIER'S PENS | 1907 | Largel | 100 | ity y | | | JOHN W. LINDSEY. | WARRANT HANDED TO | 8 | Gr. W. Harrison, State Pr nier. Atla | |
| FOR | | 70S | | NameN | County | Co Disability | Amount. | | Marketon ob | ļ. | teri liden e e | | |

| POWER OF ATTORNEY, |
|--|
| STATE OF GEORGIA, Campbell Country In Larry M. Caquill hereby authorize H. J. Daniel of Palmette Ja |
| at. Palitic At: Ju, IN WYPHERS WHEREOF, I have tereunto set my hand and seal, this day of Julitary 1 1905. |
| Executed in the presence of |
| COR THOSE ALKLOY EMPOLLED. 1. ELECTRON EMPOLLED. SOLDIER'S PENSION 1905. Same Long It. Colyneth County Carry below. Co. E. Regiment II. (ra., Disability Worder, S. Cry, It., Amount, S. J.C. E. JOHN W. LINDER. Commissioner of Promons WARRANT HANDED TO WARRANT HANDED T |

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

| STATE OF GEORGIA, | |
|---|--|
| Campbell county. | |
| Personally appears George M Colquist of Campbell | |
| County, State of Georgia, who being duly sworn, says on onth that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the | |
| day of Hugueh 1858; that he enlisted in the military service of the Con- | |
| States and served as a Private in Company of the State of | |
| of dengin Volunteers J. Moderson 's Brigade that while any | |
| in such utilitary service in the State of Virginia on the 28 day of June 1862 howgs wounded, injured or diseased as follows: | |
| Al mining ball entered let this | |
| time , ranging refund basing the muste of the thirt | |
| 1863. Mindent ball entered just below creat if left hip possed out at apper point of hip bone, breaking the bone | |
| passed out at apper point of hip bone, breaking the bosse | |
| a use afor more so as age advenced, part affected, pariful | |
| Deponent makes application for the pension to which he is serial to | |

Dollars, for the year 1903. Sworn to and subscribed before me, this the Strong of Congruent 2 day of Lane Lorue, Ordy Post-office Palmetto Ga.

A be ce County, been allowed an invalid pension of

ending Actober 26th, 1904. I have heretofore, under said law, as a resident of

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. 1. M. Sur Janu

. Ordinary of said County, do certify that I am well acquainted with Hory & Mr. Coexce f 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 25 we day of_ holm L

> Norg -Fill all blanks and of Company and Regiment. Norm.-All vouchers and affidavits must bear date after January 1, 1904

FOR APPLICANTS HERETOFORE ALLOWED PRISIONS

STATE OF GEORGIA.

Personally appears. George H. (Squill of Campbell 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 18 3 %; that he enlisted in the military service of the Conday of August federate States (or of the State of_) during the war between the States, and served as a Privale in Company &, of / th Regiment Volunteers J. Andrew 's Brigade; that whilst engaged in such military service in the state of 212 quite , on the 25 7 day 186 2 , he was wounded, injured or diseased as follows of filler 1802 he was wounded, injured or diseased as follows:

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The character of the week is such that the pasts offelled are

one to the minimum or week that the pasts offelled are

one to the thing the week to be the first offelled are

one to the thing the truncation of the pension to which he is entitled for the year

and in October 20th 1905. I have heretofore under said law as a resident of ending October 26th, 1905. I have heretofore, under said law, as a resident of Camplinge County, been allowed an invalid pension of Dollars, for the year 1904 Sworn of and subscribed before me, this the George 11 Colquette for day of 1905.

Post-office Pastonatte for

Nork -State fully the nature of the wound or character of disease which causes the disability, and explanateularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA.

do certify that I am well acquainted with 900 / Colymany of said County.

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

Given under my official signature and seal, this

1 1905 111 Lar. Ordinary County

Norz -- Fili all blanks and of Company and Regiment Note - All youthers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

| STATE OF GEORGIA. Lampbell Country Levrge H. Colquill of Talmetto Ga to receive and receipt for the pension paid hereon, and request that he remit same to by at Parmetry Gu In WITNESS WHEREOF, I have hereunto set my hand and seal, this 25-H. day of Jamesry 1904 Executed in presence of | | | | | | | | | |
|--|----------|-------------------|--------------------------|---------------------|----------------------------------|-------------|------------------|-------------------|--------------------------------------|
| (FOR THOSE ALREADY ENROLLED.) | DISABLED | SOLDIER'S PENSION | Name Le ory & 17 Concert | County Co. Regiment | Disability Journal of Amount, \$ | /3 \$ 190t. | JOHN W. LINDSEY. | WARRANT HAVIEL TO | Ge. 9. Harrian, since re ner Athata. |

POWER OF ATTORNEY.

STATE OF GEORGIA, Campbell COUNTY. S. Congrill hereby authorize A. J. Daniel of Palmith Ja to receive and receipt for the pension paid hereon, and request that he remit same to at. Palinett, Ju, IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1905. George H. Colp. & Lus. Executed in the presence of SOLDIER'S PENSI DISABLED

Colquitt, George W. YEAR 1897 County Campbell

WFT AND JUNE PORTY AU ust 16th. 1841, hesident of Ga. since 8-15-58.

PART OF STREET AND STREET

ini... Private

1 1 37 A 3 FAST 1277 Co. G. 7th. He t. Georgie Vols. Anderson's brigade.

land the hide and a lift reorge st. Cormical Colonel

A. W. C. Tirginia, June 25th. 1-62 shot entered left thigh just above knee, runding upward to ind the tone through muscles passing out under groin. July 1863 lettysburg, rd. shit in left hip, fracturing bone passing out near NITES, AREA LEE OF A

hit with

WILL AT MICH PURSUES OF

TE NOT IROSTAT AC STRACTORAL, WORLS ACTOR YOUR

2. 10, 10 N 27 1. Ec.?

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Assistant Burgion

WINNESS C. A.C. North J.E. Pendergrast, same command -- No data.

A. C. NORTH, M. D., PHYSICIAN + AND + SURGEON

application

Kervnan, Sa., March 2 1897

This is to certify that Gurge It Calquit Invate in Company of 7th la Right Andersons Brigade and That he was

remended at Garnette Gianna June 20" 1864 also at Gettyslung July 2 1863 and The Said would incapacitate him from

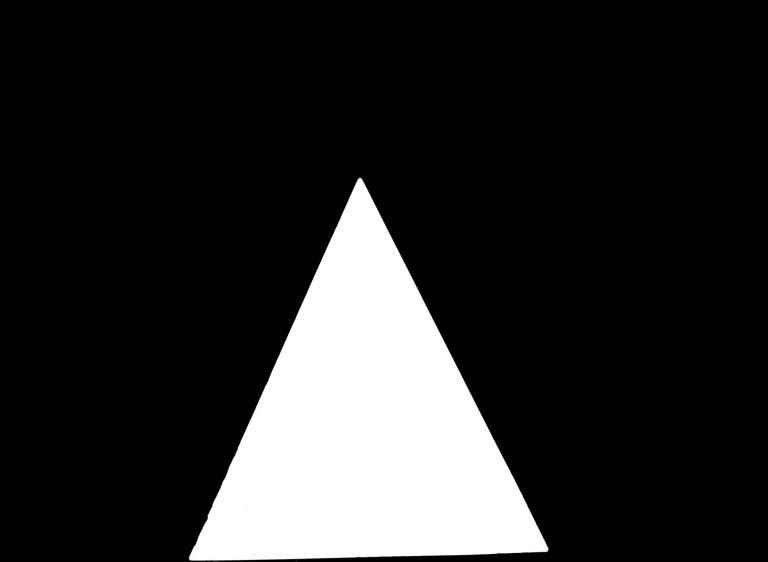
herfaring any Manual laker wherly he is capable of making a learning for timbelf or family, The secunds home him fully described in sai

Alechuit mid Tirmely (ish Dery 74 (11) High Scome to and sobsenbed

before we mak 2, 1897 Celando Maestra

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Anolace & 1. Cert Rad Johnson . Lund Renein allain 6 leve Janes shery. Jano ;



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| Çode Section 1250, | 1 | | • | F 3 | e. | , vi | |
| No. | F. | ĺ | Į Į | To the | F | STATE | |
| INVALID | cata. | | WITNESS | R R | | | |
| SOLDIER'S PENSION, | E- | | | 1 | | OF GEORGIA | |
| 190.7 | weare of | | WHEREOF, | 5 | 1 | RGIA, | |
| Name in Cook | | | - | 1 | | | PO |
| County & are place of the co. a - In Thomas our Rost. | | j | have hereun | | | County. | POWER OF ATTORNEY |
| Disability | | ' | 11 12 15 | | berr | | 윷 |
| Amount, \$ | | | Ì | | 1 | | 3 |
| 190 | | | Ē | | thorize to recei | L | |
| JOHN W. LINDSEY, Commissioner of Pensions. | | | end, this | ьу | we and reo | | BY. |
| WARRANT HANDED TO | | | | | eipt for the | | |
| | | | | | pension | | |
| Ordinary will write Name of Applicant, Company and Regiment on back as indicated above. | | | i | | allo | | 7 |

Oto W. HARRISON, STATE PRINCER, ATLANTA

POWER OF ATTORNEY

| IN WIT | remit same to | | | 4 | - | |
|---|--------------------|-------|---|-------------------|-----------------|-----------------------|
| IN WIT | | | | | receipt for the | e pension allowed and |
| day of | | | | by | receipt for the | e penison allowed and |
| day of | March Is Side (in | - 14 | | | * | |
| • 0000000000000000000000000000000000000 | NESS WHEREOF | | | nd and seal, this | | |
| Executed | | 190 | | | | |
| | in the presence of | | | | | [L 8.] |
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| | ontinuously since the | Confederate States (or t | 1 | 4/ 1 | he enli |
|--------|----------------------------|--|---|--|---------|
| sei | rved in Company "a" | · Son 2do | h Regiment of | ly ga- | Volunt |
| a) | clocked derve | Brigade, and was | honorably discharged on the | 26 | da |
| - | april | 186 🚾 ; that while | st engaged in such military | service, and in line | of daty |
| th | e State of | on the | day of | 4 | 186 |
| he | was disabled or wounded as | follows: | Cont. 1 - Administration 1 - 12 A 15 Access | | |
| *** | | (1. (2.74)) (Mr. (4.0.00) (4.00) (4.00) | | | |
| ***** | 1 | AND THE RESERVE OF THE PROPERTY OF THE PARTY | 1200 | | |
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| Wh | ere was command surrender | ed, lar of | us bora | u,c, | - |
| Wa | a applicant present? | es had | | If 1 | ot, whe |
| WRA | he? Quesu | <u>-</u> но | w come there ! Rey un | to us an | س س |
| And | by whose authority? State | e fully: Ry win | in an amor | und | |
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Nors.—State fully nature of wound or character of disease, which causes the disability, and explain perticularly the attent of the disability. If claim is based on disease, give half and connected history of disease, trading is directly to the cayyies.—Bo no trouble to mention wounds which do not disable.

Rors.—The Ordinary will see that of blank spaces are slied when the affidarite are signed.

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

No

WARRANT HANDED TO

SOLDIER'S PENSION, INKALID

AFFIDAVIT FOR THREE WITNESSES.

| STATE OF GEORGIA, | |
|--|--|
| Caux plus County. | - 0 |
| REHMALLY appears before me, the undersig | ned Ordinary in and for said County Red When we |
| 4 L. F. Cony | 6 Cornell |
| personally known to me to be trust worthy citizens | , each of whom, being duly sworn according to law, severally say |
| under onth that they are purposelly and well according | what will be a look |
| | ension, that he has resided in this State continuously since the |
| day of ax lileas | of the Brigade, and from our personal knowledge he |
| owell our prove Regiment of dela | Brigade, and from our personal knowledge he |
| white in the of duty, was injured by the service a | a follows: (a)ve full statement, and tell in your own language |
| ched from nork as a direct result thereof. If I | the disease was contracted, and to what extent applicant is dis- ne does any lator or can do any, state what.) |
| | And the second s |
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| | 2 International District |
| March 1 | THE RESERVE OF THE PARTY OF THE |
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| | |
| | hor Low Lord U. C. |
| Where was applicant's command surrendered , | 1. |
| Was he with it? 9-10 for | Were all of you present? 930 2 |
| If not, where was he? O Tesur | and the second of the second o |
| Where were you all? Presunt | The second secon |
| | |
| How do you know the facts you state to be true? | To served un some to a ded |
| appercount, S. S. Coull, for | ou dry no 1 / 867 to yor 26, 1865- |
| We personally know above stated facts. We | were with him in the army and have known him ever since. |
| He was honorably discharged or retired from the se | |
| 86 v . Applicant is permanently disabled as etc. We have no interest in the recovery of a pension by | him. |
| Sworn to and subscribed before me, this | RI W |
| | PGIP al |
| m. Juc form | Ho' Conglet |
| Ordinary. | |

Note 1.—The Ordinary will see that the full text of the affidarit is understood by the witnesses, and that they are legally qualified to the same.

2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.

3.—Witnesses are required.

4.—Three witnesses are required.

PHYSICIAN'S APPIDAVIT.

| PRESCRIPTION COUNTY | 0.11 |
|--|--|
| | Ordinary of said County |
| me as reputable physicians of said County, v | nd, both known to who, being severally sworn, say on oath, that they have carefully |
| examined | and after such personal examination, say that the presen |
| condition of applicant is as follows: | |
| ent a some | - |
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| | W-11 |
| | Control of the Contro |
| | |
| and that such condition is permanent. Said con | edition arises from the following facts: |
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| and the second s | The state of the second st |
| Sworn to and subscribed before me, this day of | or oo ngenital causes, or from vicious or intemperate habits." |
| day of 190 Ordinary. Nova 1.—Nate fails the physical condition and the physical position of the physical position of the physical position condition of the physical position is understood by affants. | especialls the extent of strability. If disability results from nounced or toom. If from disease, give its nature and character, and its causes or |
| day of 190 Ordinary. Nota 1.—Nate fully the physical condition and uses that its location, charges and person conduction. | especialls the extent of Massbility. If disability results from wound or too. If from disease, give its nature and character, and its causes or |
| day of | especialls the extent of strability. If disability results from nounced or toom. If from disease, give its nature and character, and its causes or |
| day of 190 Ordinary. Note 1.—Note fulls the physical condition and present conduction of the conduct | especialls the extent of strability. If disability results from nounced or toom. If from disease, give its nature and character, and its causes or |
| day of | especialls the extent of Massbility. If disability results from wound or too. If from disease, give its nature and character, and its causes or |
| day of | especialls the extent of strability. If disability results from nounced or toom. If from disease, give its nature and character, and its causes or |
| Note 1.— Nate fully the physical full fully the physical full fully the physical full fully the physical full fully the physical full full full full full full full fu | capecialis the extent of disability. If disability results from mount or from. If from disease, give its nature and character, and its causes or a very blank space in oath. Form No. 4. |
| day of | expecially the extent of strability. If disability results from anound or from. If from disease, give its nature and character, and its causes or every blank space in oath. Form 80. 4. Ordinary of said County, A. Good that the statements made by him in his said affiliation. |
| day of | expecially the extent of straibility. If disability results from award or time. If from disease, give its nature and therefore, and its causes or every blank space in oath. Form 50.4. Ordinary of said County, Ordinary of said County, the satisfied that the statements made by him in his said affidavit are now he is the individual be represents himself to be, and that he |
| day of | coperates the extent of strability. If disability results from mound or tion. If from disease, give its nature and character, and its causes or every blank space in oath. Form No. 4. Ordinary of said County, Ordinary of said County, Ordinary of said County, the satisfied that the statements made by him in his said affidavit are now he is the individual he represents himself to be, and that he sideng since the day of the satisfied of the said affidavit are now he is the individual he represents himself to be, and that he sideng since the day of the said affidavit are now he is the sa |
| Nors 1—Sale fulls the physical ordinary. We have the desired by a function and protection and sent as and credition and sent as and credition of the sent as a | capecially the extent of straibility. If disability results from award or tion. If from disease, give its nature and character, and its causes or a very blank space in oath. Form No. 6. Ordinary of said County, A. C. Ordinary of said County, the saidsed that the statements made by him in his said affidavit are on he is the individual he represents himself to be, and that he side of the said said that the statements made by him in his said affidavit are on he is the individual he represents himself to be, and that he side of the said that the statements are worthy of full throws our respectability, that their statements are worthy of full throws to a read to and understood by them; before they signed |
| day of 190 Ordinary, Norm 1.—Nate fulls the physical condition and pure, that et is location, thanker and prevent conditions, and the state of the physicians will be careful to fill that the physicians will be carefully that I am well acquainted with plicant in the foregoing affidavit, and am tell in careful that the physicians will be carefully that I am well acquainted with physicians with the county and has been abone file retails certify that the witnesses to wit: | capecially the extent of straibility. If disability results from award or tion. If from disease, give its nature and character, and its causes or a very blank space in oath. Form No. 6. Ordinary of said County, A. C. Ordinary of said County, the saidsed that the statements made by him in his said affidavit are on he is the individual he represents himself to be, and that he side of the said said that the statements made by him in his said affidavit are on he is the individual he represents himself to be, and that he side of the said that the statements are worthy of full throws our respectability, that their statements are worthy of full throws to a read to and understood by them; before they signed |
| day of | capecially the extent of stability. If disability results from around of them. If from disease, give its nature and character, and its causes of every blank space in oath. Form No. 4. Ordinary of said County, Ordinary of said County, A. C. Ordinary of said County, the satisfied that the statements made by him in his said affidavit are one he is the individual he represents himself to be, and that he side of the said said that the statements are worthy of full throws our way of the said are worthy of full throws or respectability, that their statements are worthy of full throws to are read to and understood by them; before they signed |

QUESTIONS FOR WITNESS AS TO SERVICE.

| | STATE OF GEORGIA, County. | |
|--|--|----|
| | of said State and County is hereby presented | |
| | as a witness in support of the application of 10 Cook for the pension provided | |
| | by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, | |
| Death Campbone | 1. What is your name and where do you reside: It & Eurery - us Carry - | |
| A STATE OF THE STA | 2. How long and since when have you known of S. Cook the applicant of S. Cook the applicant. 3. Where does he now reside and since when has be been a long if the applicant. | |
| amphell thinty carrier | out 60 years - search to for 1850 | |
| out O'D | 3. Where does he now reside, and since when has he been a bona fide, continuing resident in this Blate and how do you know? we Consuffeld Offa times before 1770 | |
| | State and how do you know? we Conseffell Ofa have before 1 750 | |
| | manufacture and a second control of the seco | |
| Confederate | 4. When, where and in what Company and Regiment did . Cooll enlist during | |
| 11/ 1 1 1 1 1 1 | war from 1861 to 1865? (Give date and place) South Revow | |
| oldier's Application. | 5. How did you obtain your information of this forvice? Heart Resource to blessent out | 4 |
| UNDER ACT 1010. | 5. How did you obtain your information of this gervice? How Recover to please of the first the f | 2 |
| construction of the bod-telescope | this Ognpany and Regiment: (give date) the way of the control of t | _ |
| unity Campbell | Superal - at four live of lar ile Light at Sentonicille. | 10 |
| 74 2 M | 8. Were you personally present at the Surrender? The East but in an other Co. | |
| me, J. D. Cook | 9. If not, where were you and how came you there? Answer & | |
| mpany "A" of | gr-planting and a second a second and a second a second and a second a second and a | |
| er Thompson Arthlery, | 10. Was the applicant personally present with his Command at surrender? | |
| plant de la companya | 11. If not where was he and how came him there? | |
| Charles and the second | A to design comment | |
| The same of the sa | 12. When did he leave his Command? Where was his Command | |
| M. Leller | when he left it? for what cause did he leave? | |
| Confirmation of French | By whose authority did he leave | |
| CALL LAND | long was he granted leave? | |
| | all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) From they | |
| 10/19-1914 | own feroual hus who byte. | |
| A TOUR WAS A COLUMN THE COLUMN TH | 13. In what way was he prevented from returning to his Command? | |
| | How do you know? | |
| The second secon | 14. What effort did he make to return to his Command and how do you know? | |
| | 15. Was applicant captured as a prisoner | |
| | In what prison was he held? | |
| | L was prison was ne neid:and when released? | |
| | 2 Leve 5 | |
| | Sworn to and subscribed before me, this the | |
| 77 | 1/1 X/11 Faren | |
| R | Ordinary | |

This Och 4, 1914

AFFIDAVIT OF TWO FREED

| | APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910. |
|--|--|
| STATE OF GEORGIA. | Questions for Applicants to Answer. |
| County, | STATE OF GEORGIA. |
| Personally before me comes A. N. Cooth + Class. Johnson. Wife on said | Came State County |
| says that they are fresholders residing in said County and we know the same transfer the same transfer to the same | of said State and County, hereby applies |
| the applicant for pendon and we know the property that is now in the use, possession and convect of himself and wife and of its agent value to wit. (Make Jet by Items and white). | for the pension profided by Act of 1910, to Confederate Soldiers, and submits his sworm statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to with the propounded, answers as follows, to with the propounded of the propoun |
| 1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov | 2. How long and since when have you been a continuous resident citizen of this State 1 14 years |
| 1908? (State it fully by items. Louis | |
| The state of the s | 3. Did you entist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 18657 Mar Company or 1865. |
| 2. When and to whom was it sold or given to? | When and where, and in what Company and Regiment did you entite? (live the arm and classes of Service). The word of the company and Regiment? The word of the company and Regiment? |
| 3. What was the price paid or stated to be paid? 4. What relation is the party to applicant? | Sorvice Control of the Control of th |
| The state of the s | (Give date of discharge) 2 100 of the little or Aft 1763 to Aft 26, 1865 |
| The same of the procedure of the same same same same same same same sam | 6. When and where was your Company and Regiment surrendered or discharged from the Service? |
| 6. Was the disposition of this property made in good faith and full values? | 6. When and where was your Company and Regiment surrendered or discharged from the Service? |
| Sworn to and subscribed before me, this the | 7. Were you actually present with your Command when it was surrendered or discharged? |
| 101 day of 1 1914 | 8. If you were not actually present, state specifically and clearly where you were from t. |
| 1 for some source of the test to the source of the source | a. Where was your Command when you left it? Mout left |
| the state of the s | • |
| ORDINARY'S CERTIFICATE. | b. When did you leave the Command? Lo Lax all |
| ORDINARI S CERTIFICATE. | c. For what cause did you leave? Rey were no fusues |
| STATE OF GEORGIA. | d. By whose authority did you leave? |
| Come fall - County. | e. For how long was your leave granted? In what way? |
| In Sue Loren Ordinary of sale County weeks the state | f. Why did you not return to your Command after leave expired? |
| Turney of said County, certify that I know. | g. In what way were you prevented? |
| the applicant of Cooll for Pension is the person be represents himself to be and resides in | |
| 25 S S | h. What effort did you make to return? i. Were you captured during the war? Lo Card |
| said County. That I also know It. S. Carry the witness awaking to the service and It. M. Cooth + Clor Johnson who are fresholders, that | j. If so, whan, and where? In what prison were you held and when were you released? |
| | Tuyung no answer |
| they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and | 9. What property of every description was owned, in the use, possession and control of yourself |
| they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the | and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value. Elly we the + I have |
| Tax Returns ofshows that | The state of the s |
| value for tax is in 1908 8. 106 500 for 1900 8. 14 34 for 1910 8. 1 4 0 0 000 | and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) |
| A Committee of the Comm | 10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. |
| dwgru under my hand sad official seal of office this day of day of day | 1908. To whom and for what price! |
| M. O. Ule Joseph Ordinary | |
| or County Soul County | 11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). |
| | possession and control of yourself and wife and its cash value? (Make itemized list) they come of the form of the |
| NOTEd 1. Hefter any questions are surveyed the Ordinary shall owen applicant and all witnesses in the following words "You do coloningly erser that you will true assure used to seek question asked you and the avidance you shall be the whole truth; so kep you God," had so seek question asked you and the avidance you and the avidance you and the avidance will be a seek of the avidance and a sufficient asked you and the avidance will apply the avidance and avidance are found to the avidance and av | oud and we know what are some are nearly a per- |
| 2. Additional affidavits may be attached if blank spaces are insufficient. 3. All affidavits must be made before the Ordinary and certified by him. | bou at the person we had in 100 % others statul |
| 4 If applicant has no property at all in his possession, use of control of sail and wils, affidavits of treshelders | 12. What annual or mosthly income or sarnings of yourself and wife and the source derived have |
| | your thrething except what I can some and obout 100 - or you for |
| | 12. What annual or mosthly income or parnings of yourself and wife and the source derived have your and the source derived have the source of |
| | 14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was |

of Case fores

Sirorn to and subscribed before me, this the

certificate of ordinary

| That I personally know MES. MARY M. COOK the applicant, and believe her to be the that I personally know MES. MARY M. COOK the applicant, and believe her to be the that I personally know of J. D. COOK, who the applicant and the personal country, and was passed to the "Sorvice" Pension Roll of said. Campbell County for 1923., and at the tim of his death on the latth day of Fabruary. BY The death on the latth day of Fabruary. Dollars from the State of Georgia, and I know Mrs. Susan M. Baker, the with said witness, and he is of a truthful and trustworthy character and entitled to full credit. Given under my hand and seal this 15th of May. (Seal of Ordinary) Campbell County for 1923. Campbell County for 1923. Campbell County for 1923. Campbell County for 1924. There was due him and unpaid his personal parameter that the with county of the mosov, may county for the mosov, may be under my hand and seal this 15th of May. Campbell County for being mosov, may be undersonable to the mosov may be undersonable to the them. | | | ORGIA, Campbe | | | | Ordinary of said | County do certi |
|--|---|------------------|---|-----------------|--|--------|---|--|
| The lawful widow of J. D. Cook, who may be said. Campbell County, and was per a Pension from Campbell County for 1963, and at the tit of his death on the lath day of Pobruary. Inc. 1960 of Jack Hondered Cook, T. Cook, | | that I personall | y knowMrs | Mary M. | Cook | | believe h | er to be the |
| the "Sorvice" Pension Roll of said. County for 1963., and at the the of his death on the latth day of February. Approved and ordered per late. 1954 1954 1954 1955 1 | | | | | | | | |
| a Pension from Campbell County for 1863, and at the tit of his death on the Tath day of Eabruary. In County for 1863, and at the tit of his death on the Tath day of Eabruary. In County for 1863, and at the tit of his witness, and he is of a truthful and trustworthy character and entitled to full credit. Given under my hand and seal this 15th of May. (Seal of Ordinary) Campbell County for 1863, and at the tit of his Widness, and he is of a truthful and trustworthy character and entitled to full credit. Given under my hand and seal this 15th of May. (Seal of Ordinary) Campbell County for 1863, and at the tit of his Widness and he is of a truthful and trustworthy to be in full mode and and seal this 15th of May. Campbell County for 1863, and at the tit of his Widness in full mode and entitled to full credit. Campbell County for 1863, and at the tit of his Widness in full mode and entitled to full credit. Campbell County for the forest of the money and the money and the forest on partners for the forest on partners for the forest on partners. | • | | | | | | | |
| of his death on the 1924 being the money of the money and | | | | | | | | |
| plication for Person of County Warthare 1 1924 I 192 | | | | | | | | |
| of Georgia' and I know Mary M. Sover and the his Weaver and ordered for the money, and the money are the money and the money, and the money are the money, and the money are the money are the money and the money are the | | | | | | | | |
| Dication for Penaion Ductions of the money, and pelote you per fedura it with your pay-cells from the money, and return it with your pay-cells from the money, and return it with your pay-cells for per fedura it will be fedurated and per fedurated and p | | | | | | | | |
| Dication for Pension Due Decased Soldier (Natz M. Cock Max. M. Cock Wax. M. Cock | | | | | | | | oradit |
| Plication for Pension Due Deceased Soldier (UNDER ACT 1891) BY MATY M. COOK Approved and ordered pit OO Approved and ordered pit | | | | | | | | _ |
| 1924 I 924 I 9224 Deceased Soldier (UNDER ACT 1831) be paid to his Widow or Dependent Children) BY Mary M. Cook of Marringe. 1860 or 1861. of Death Peb. 14, 1924. Approved and ordered part (OO) Approved and ordered part (OO) Approved and widow or personal part (OO) Approved and widow or personal part (OO) Approved and widow or part (Annual inst); and send about to Pension Department for apple to personal partment for apple before you app out the money, and return it with your pay-rolls for personal partment for apple of the money, and return it with your pay-rolls for personal partment. | | | | M CHIB | | | | |
| Plication for Pension Due Deceased Soldier (UNDER ACT 1891) be paid to his Walow or Dependent (UNDER ACT 1891) BY MARY M. Gold MARY M. Gold MARY M. Gold Approved and ordered pit/OO Approved pi | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | , Oruma |
| Plication for Pension Deceased Soldier (UNDER ACT 1891) BY MATZ M. GOAK W of J. D. GOAK of Marriage, 1860 or 1863 of Marriage, 1860 or 1863 Approved and ordered pipel Innay: Fill out thore in full in the Window or payed the force you pay out the mone return it with your other home operation it ging in the Pension Department? | | | | | Ca | mpbell | | |
| | | 1924 | | Children) BY | Mrs. Mary M. Cook Widow of J. D. Cook | | Approved and ordered put/QQC. MN 17 1924 | bove in all Department out the mo our pay-rolls ension Depar |
| | | GEORGIA Co | mphel 1 | | Cours | | | |
| GEORGIA. Campbell County | | | | | | LV | | |
| GEORGIA,Campbell | | | | | | - | | |

lawful attorney to collect, and receipt for me in my name, for the Pension due me for 192.4..., through my deceased husband, J. D. Cook, , who was on "Service"

Witness my hand this 21st day of MAX. 1924.

Attested before may Accord Man Mary Mccook

Application for Pension Due Deceased Soldier (To Be Paid to His Widow or Dependent Children)

10 he raid to his widow of Dependent Children)

(UNDER ACT APPROVED OCTOBER 9, 1891 STATE OF GEORGIA. Campbell. County. Personally before me, the Ordinary of said County, comes Mrs. Mary. M. Cook of said County, who after being duly sworn, on oath says that she is the widow of J. D. Cook and that said Pensioner was on the Pension Roll of Campbell and was paid a Pension of One Hundred (\$100.00...) Dollars from Campbell County for 19, 23, and that the said Pensioner died in Campbell County on the 14th day of February. 19.24, and at the time of his death a Pension of \$ 100.00 the --- day of ---- , 186Q , in Fayette County and State of Georgia , 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. M. S. U. Form., Ordinary Mary M. & look (L. S.)

Campbell County Worth (Seal of Ordinary) AFFIDAVIT OF WITNESS STATE OF GHERGIA, Campbell County.

Personal Afore see comes Mrs. Susan M. Baker who on oath says that he new J. D. Cook while in life and that he new Mrs. Mary N. Cook the above applicant; and knows that the said J. D. Cook and Mrs. Mary J. Cook were in due form of law married in the County of Fayetts in the State of the new Mrs. Mary N. Cook were in due form of law married in the County of Fayetts in the State of the new Mrs. Mary N. Cook were in due form of law married in the County of Fayetts in the State of the new Mrs. Mary N. Cook were in due form of law married in the County of Fayetts in the State of the new Mrs. Mary N. Cook were in due form of law married in the County of Fayetts in the State of the new Mrs. Mary N. Cook were in due form of law married in the County of Fayetts in the State of the new Mrs. Mary N. Cook while in life and Mrs. Mary N. Cook while in life and Mrs. Mary N. Cook were in due form of law married in the County of Payetts in the State of the new Mrs. Mary N. Cook while in life and Mrs. Mary N. Cook while in life and that the law of the new Mrs. Mary N. Cook while in life and that the law married in the County of Payetts in the State of the new Mrs. Mary N. Cook were in due form of law married in the County of Payetts in the State of the new Mrs. Mary N. Cook were in due form of law married in the County of Payetts in the State of the new Mrs. Mary N. Cook while in life and Mrs.

Sworn to and subscribed before me this 6th day of May. 1924.

M. J. L. Loren Ordinary Mr. Leusan M. Bater

Campboll County

(Seal of Ordinary)

INSTRUCTIONS:

INSTRUCTIONS:

Instructions in few videws of Service and Disabled Soldier peaceners, who died after November let. If pensioner died after any just the few soldiers and the soldier peaceners, who died after November let. If pensioner died after any just the few soldiers and the soldier and the soldier and the soldier and the soldier and pension in the soldier and pensions to prove that soldier and the soldiers are soldiers.

Do not use the entergonable large from of marriage certificate in common verges throughout the State, switches only for fromting profits of the state of the every of
the common verges of the state of the every of
the common verges of the state of the every of
the Chyslangy should demains the blank ofter it is filled by, and see that everything is fully and correctly completed, and
the common verges of the state of the common verges o

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MAME Cook, J. D.
                                YEAR
                                        1915 COUNTY
                                                       Campbell.
WHEN AND WHERE BORN? May 3, 1840 in Georgia.
ENGLISHED WHEN AND WHERE? March or April 1863, near Savannah, Ca.
RANE?
THE ANY AND RESIMENT? JO. A. Joe Thompson's Artillery.
Data of 'drain and 'element
WANTED REPORT
NATERIO, AND ALL ANDROY
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which will diffich Sideon Delego? april 26, 1865, near Greensboro, N. C.

IF NOT TREDERY AT SURREIDER, WHERE WERE YOU?

DIED, WHEN AND WEERE?

W. : NNGHNO.: R. L. Johnson, C. Coryell, & J. F. Cony-Jame Command-No data. (or canny)

JV. B. MeLARIN. and Judge of Court of Ordinary CAMPBELL COUNTY.

wear ir:

Mon. C. E. McGregor. Atlanta, in.,

mnclosel is ap. of "rs. "ary W. Cook for deceased burand's pension, would have wiled same sooner, but hoped to be able to set cer. sony of her car. License. You will notice that these foll lidies do n t exactly sures as to the of marriage;

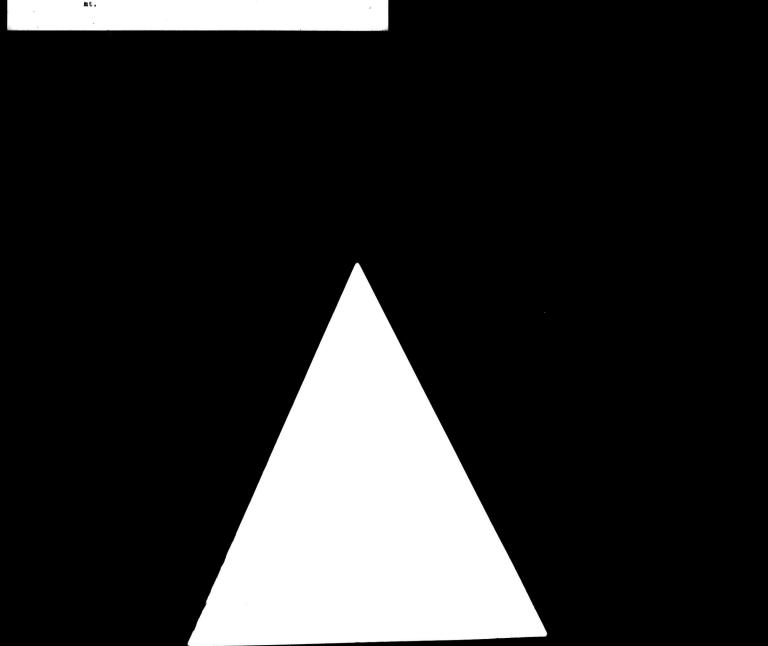
nd, while I that It made no difference to you. I had some curiosity to learn which one was correct- 1860 or 1871. But, for nome reason, the said license was not recorded.

Yours very truly, m. I Me Jour Ord'y.

mt.

BUR I MILE

This was the



Ordinary's Certificate

Ordinary of

November 1908; that I also know to the service of husband; that both of them herself to be signing the foregoing affidavits and that titled to full faith and credi k spaces are insufficient. lst, 1881, are entitled. nary of the residence of 0 ident cituzen ş 2,

Widow's Pension Under Act 1910—as Amended by Act of 1919.

County Campbell Name Mrs. Lizzie Cook

Coun

Widow of Luther N. B. Cook

Company "B" • Regiment 4th Ga. Reserves-Inf 'y Approved

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

9/29/1919

Ordinary's Certificate

| oau. | 1/4 | Lo | <i>,</i> | . COUNT | Y. } | V | 51.4 | | | > |
|---|--|--|---|--|--|---|----------------------------|---------------|---------------------------|--|
| 1 Know | Mes L | 130 | e Co | ook | | | ary of said e applicant | | | |
| | die represen c 4th Noven | | | | 00 | Jos. | | en of mai | d Cou | inty |
| with me wh | o swears to t | he servic | e of hu | sband, the | nt both of t | hem are now | residents of | mid Co | unty | and |
| re duly swo | rn by me be | fore sign | ing the | foregoing | affidavits | and that th | ey both are | truthf | ıl, tr | unt- |
| thy, and th | eir slatemen | ts are en | titled to | o full fait | h and credit | | 1-1 | | | |
| worn under | my hand a | nd offici | al seal o | of office t | his 2 374 | day of the | plus | | .,197 | 1 al |
| SEAL) | | | | 2 | Zr 3 | al dio | ,16 | B rdii | ary. | |
| | | | | | 1.02 | | , , , | | Cour | ity |
| | | | | | | | | | | |
| A.I.D. | hall give will ! | be the truth | M. hel | p you that | trees are the | applicant and t | be witness in ! | he fullow | ng war | da . |
| 4 All a | hall give will ! though affidaxi widows who i ffidaxis most Ordinary h certified cop | be the trull to may be married probe made | Market attached i-r to Ji before t | p you flod ' if blank a amounty lat, the Ordinar | paces are insu last, are ent y of the resid | each of the que | ations saked y | on and th | e stide | liy |
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| A.1.11 3 Cluby 4 All a such 5 Attac | ball give wilf i band of flows without with a flower most Ordinary h certified cop ation. | er the trull to may be married po be made | We held the state of the state | pyon their if blank a amory lat, the Ordinar tense if obt | paces are insu- last, are ent y of the resis sinable. If n | each of the que Officient. Otted descript the pe | ations saked y | on and the | e evide | Ly crail |
| Solida A child I childy I shirth I shir | ball give wilf i band of flows without with a flower most Ordinary h certified cop ation. | er the trull to may be married po be made | We held the state of the state | p you flod ' if blank a amounty lat, the Ordinar | paces are insu- last, are ent y of the resis sinable. If n | each of the que Officient. Otted descript the pe | ations saked y | on and th | e evide | Ly crail |
| South State of State | hell give will. hell give will from a fifther; which is should fifther; which is should fifther; the certified cop atom. 6161 Jo 124 V. 620 J. 621 J. 622 J. 623 J. 624 J. 625 J. 626 J. 627 J. 628 J. 629 J. 620 J. | er the trull to may be married po be made | We held the state of the state | p you that if blank a snowy lat, the Ordinar cense if obt | per make to prove the transfer of the transfer | each of the que Officient. Otted descript the pe | ations saked y | on and the | ommissioner of Pensions. | To garage constant organization of the constant organization of the constant organization of the constant organization org |
| Solida A child I childy I shirth I shir | to the state of th | er the trull to may be married po be made | We held the state of the state | p you that if blank a mounty let, he bridings ense if obt | pres make to present a second of the second | each of the que Officient. Otted descript the pe | ations saked y | on and the | Commissioner of Pensions. | State Trainer, Athain. |
| South State of State | hold give will be to be | TIZZIL COOX | We held the state of the state | Il for rane and the control of the c | pres make to present a second of the second | each of the que Officient. Otted descript the pe | ations saked y | on and the | ommissioner of Pensions. | State Trainer, Athain. |

Application for Pension by a Widow Under Act of 1910 As Amended by Act of 1919

Questions for Applicant

| Personally before me comessally of 13.2. Good Ind., after being duly sworn, says that the desires to apply for a pension allowed under it following questions to-wit: 1. What is your name, and where do you reside the following questions to-wit: 2. How long and since when have you been a continuing resident of the State of Georgia to 2. 3. When, where and to whom we see you married! May 6/1877 in Carry Mill. 4. When, where and in what Company and Regiment did your husband, enlist as a solider in derate Army or thoughts Milliant (Matter the grows and olessays Mervice, 1845). 5. When and where did the commands of your husband surrender or discharge from the army to 1840 and 184 | | TATE OF GEORGIA, |
|--|--------------------------------------|--|
| not, after being duly sworn, says that the desires to apply for a pension allowed under it fillo, as amended by Act of 1919, and submit testimony to make out the same, true answers make following questions to-wit: 1. What is your name, and where do you reside that it will be the continuing resident of the State of Georgia 16.2. 2. How long and since when have you been a continuing resident of the State of Georgia 16.2. 3. When, where and in what Company and Regiment did your husband enlist as a soldier in olderate Army or though Milliant. (Mital the arms and class of Mervice, place of this command.) 5. When and where did the commands of your husband surrender or discharge from the army! 6. Was your husband personally present at the time of the surrender or discharge of this command. 7. If he was not present state clearly where he was! 8. Where was his command when he left! 8. Where was his command when he left! 9. How was not present state clearly where he was! 9. What was his physical condition when he left has a prisoner, and when and for what cause of the was the prevented from going back to Command. 9. What was was he prevented from going back to Command. 1. If so, when and where captured and where held as a prisoner, and when and for what cause release the surrender of this command? 1. If not, how long had your graided apart? 1. When and where did your first husband diet. 1. If not, how long had your graided apart? 1. When and where did your first husband diet. 1. If not, how long had your graided apart? 1. When and for what cause were you or your husband placed on the roll? 1. Survey or wou now a widow? 1. If not, how long had your graided apart? 1. When and for what cause were you or your husband placed on the roll? 1. Survey or your husband heretofore been paid a pension by the State? 1. Survey or your husband heretofore been paid a pension by the State? 1. Survey or your husband heretofore been | | Personally before Mers Li |
| fillio, as amended by Act of 1919, and submit testimony to make out the same, true answers make following questions to-wit: 1. What is your name, and where do you reside for the Caure for the Caure for the State of Georgia to 2. 2. How long and since when have you been a continuing resident of the State of Georgia to 2. 3. When where and lo whom we servour married! ** ** ** ** ** ** ** ** ** ** ** ** ** | | |
| 1. What is your name, and where do you reside 18 1 is cooked to Campbell (2) 2. How long and since when have you been a continuing resident of the State of Georgia 12. 3. When, where and is when we were you married 182 for 1877 in Coampbell (2) 4. When, where and in what Company and Regiment did your husband enlist as a soldier in olderate Army or though Millian (Male the grows and class of Mervice, please of this command). 5. When and where did the commands of your husband surrender or discharge from the army? 6. Was your husband personally present at the time of the surrender or discharge of this command. 7. If he was not present state clearly where he was? 8. Where was his command when he left! Move of the surrender or discharge of this command. 9. By whose authority did he leave his command? 1. What effort did he make to return to his command? 1. If was his physical condition when he left his command? 1. If so, when and where explured and where held as a prisoner, and when and for what cause release to the command of the command of the way was he prevented from going back to Command. 1. If so, when and where did your first husband diet. 1. When the did your first husband diet. 1. When when and where did your first husband diet. 2. When who wong had your resided apart? 3. When who wong had your resided apart? 4. When who wong had your paided apart? 4. When and subscribed before me this the source and subscribed before me this the subscribed before me this the subscrib | for a pension allowed under the A | s lote being duty sworn, says that s |
| 1. What is your name, and where do you reside! 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| 3. When, where and to whom we serou parried to the State of Georgia to 3. 3. When, where and to whom we serou parried to 42 6/87 f us Commended to 4 When, where and in what Company and Regiment did your husband enlist as a soldier in oldersty Army or Georgia Milliat. (Nata the arms and aleas of Mervice, bell of the army) of the state of the command and the surrender or discharge from the army). 5. When and where did the commands of your bushand surrender or discharge from the army). 6. Was your husband personally present at the time of the surrender or discharge of this command. 7. If he was not present state clearly where he was 1. 8. Where was his command when he left! 9. What cause did he leave his command? 10. What was his physical condition when he left his command? 11. What effort did he make to return to his command? 12. What was his physical condition when he left his command? 13. When was and where captured and where held as a prisoner, and when and for what cause role for the command of the surrender did your first husband diet. 12. What ends do your first husband diet. 13. When and where did your first husband diet. 14. When the did your first husband diet. 15. When and where did your paided apart? 16. What was his physical gether when he died? 16. Who whong had your paided apart? 17. When and where did your first husband diet. 18. Where you residing together when he died? 19. Have you now a widow? 19. Have you now a widow? 19. Have you now a widow? 19. Have you now has cause were you or your husband placed on the roll: Any was now your husband before me this the | 0 : 0 . 1/11 C. 110 | he following questions to-wit: |
| 3. When, where and to whom we serou parried to the State of Georgia to 3. 3. When, where and to whom we serou parried to 42 6/87 f us Commended to 4 When, where and in what Company and Regiment did your husband enlist as a soldier in oldersty Army or Georgia Milliat. (Nata the arms and aleas of Mervice, bell of the army) of the state of the command and the surrender or discharge from the army). 5. When and where did the commands of your bushand surrender or discharge from the army). 6. Was your husband personally present at the time of the surrender or discharge of this command. 7. If he was not present state clearly where he was 1. 8. Where was his command when he left! 9. What cause did he leave his command? 10. What was his physical condition when he left his command? 11. What effort did he make to return to his command? 12. What was his physical condition when he left his command? 13. When was and where captured and where held as a prisoner, and when and for what cause role for the command of the surrender did your first husband diet. 12. What ends do your first husband diet. 13. When and where did your first husband diet. 14. When the did your first husband diet. 15. When and where did your paided apart? 16. What was his physical gether when he died? 16. Who whong had your paided apart? 17. When and where did your first husband diet. 18. Where you residing together when he died? 19. Have you now a widow? 19. Have you now a widow? 19. Have you now a widow? 19. Have you now has cause were you or your husband placed on the roll: Any was now your husband before me this the | - ac cantifarit 4 /c | 1. What is your name, and where do you re- |
| a Have you married since the death of first and widder husband! 4 When, where and in what Company and Regiment did your husband enlist as a soldier in ordered. Among or theoretic Army of the surrender or discharge from the army! 5. When and where did the commands of your husband surrender or discharge from the army! 6. Was your husband personally present at the time of the surrender or discharge of this command? 7. If he was not present state clearly where he was! 8. Where was his command when he left! 8. Where was his command when he left! 9. For how long was he granted leave his command! 9. What effort did he make to return to his command! 9. Was he captured by the enemy at any time! 10. Survey of the command of the way was he prevented from going back to Command. 11. When the did your first husband diet. 12. When and where did your first husband diet. 13. Are you residing together when he died! 14. When who wong had your psided apart! 15. When and where did your first husband diet. 16. When when and subscribed before been paid a pension by the State! 16. Was he captured and where held as a prisoner, and when and for what cause were you or your husband heretofore been paid a pension by the State! 16. When and where did your first husband placed on the roll! 17. Are you now a widow! | of the State of Georgia 16 # 6 | 2 How long and since when have you been a |
| 4 When, where and in what Company and Regiment did your husband enlist as a soldier in olderate Army or thought Milliant. (Rate the grows and clear of the company of the c | | 72 6 2 mlus 1/2, 12 600 |
| 4 When, where and in what Company and Regiment did your husband enlist as a soldier in olderate Army or thought Milliant. (Rate the grows and clear of the company of the c | , No Sur | a. Have you married since the death of first |
| 5. When and where did the commands of your bushind surrender or discharge from the army! 6. Was your husband personally present at the time of the surrender or discharge of this command. 7. If he was not present state clearly where he was! 8. Where was his command when he left! 8. Where was his command when he left has command! 8. Where was his physical condition when he left his command! 9. For how long was he granted leave of absence: 9. What was his physical condition when he left his command! 10. Was he captured did he make to return to his command! 11. What was was he prevented from going back to Command. 12. Was he captured by the enemy at any time! 13. When and where captured and where held as a prisoner, and when and for what cause role when and where did your first hisband die! 14. When when and where did your first hisband die! 15. When and where did your first hisband die! 16. If not, how ong had you resided apart! 17. Mare you now a widow! 18. Have you or your husband heretofore been paid a pension by the State! 18. When and where when he died! 19. Have you or your husband heretofore been paid a pension by the State! 18. When and where were you or your husband placed on the roll! | r husband culist as a soldier in Co. | 4 When, where and in what Company and |
| 6 Was your husband personally present at the time of the surrender or discharge of this command. 7 If he was not present state clearly where he was! 8 Where was his command when he left! 8 Where was his command when he left! 9 For what cause did he leave his command! 9 Whose authority did he leave his command! 9 What effort did he make to return to his command! 9 It what was his physical condition when he left his command! 10 Was he captured he he make to return to his command! 11 If so, when and where captured and where held as a prisoner, and when and for what cause released where did your first husband die! 12 When when where did your first husband die! 13 When song had your resided apart! 14 If not, how long had your resided apart! 15 May you now a widow! 16 Have you now a widow! 17 Have you now a widow! 18 Have you or your husband heretofore been paid a pension by the State! 18 Mean and subscribed before me this the | orvino, daly or hay 1860 | Carrie Army or Georgia Militiat (Mate the |
| 7. If he was not present state clearly where he was! The state of the was his command when he left! The state of the was his command when he left! The state of the was his command! The was his command! The was his command! The was his physical condition when he left his command! The was his physical condition when he left his command! The was his physical condition when he left his command! The was he prevented from going back to Command! The was he appeared from going back to Command! The was he appeared from going back to Command! The was he appeared he he enemy at any time! The was he appeared he he enemy at any time! The was he appeared he he enemy at any time! The was he appeared he where captured and where held as a prisoner, and when and for what cause role was when and where did your first hisband die! The way of the | | office / 865 and alook |
| 8. Where was his command when he left! Mount to a For what cause did he leave his command! Required to a work of the bay whose authority did he leave his command! b. By whose authority did he leave his command! c. For how long was he granted leave of absonce: c. What was his physical condition when he left his command! g. In what way was he prevented from going back to Command. h. Was he captured by the enemy at any time! When and where captured and where held as a prisoner, and when and for what cause releases when and where did your first husband diet. When and where did your first husband diet. If not, how long had you residue apart! If not, how long had you residued apart! M. Are you now a widow! Have you or your husband heretofore been paid a pension by the State! M. State of the sta | der or discharge of this command ! | 6. Was your husband personally present at t |
| 8. Where was his command when he left! Mount to a For what cause did he leave his command! Required to a work of the bay whose authority did he leave his command! b. By whose authority did he leave his command! c. For how long was he granted leave of absonce: c. What was his physical condition when he left his command! g. In what way was he prevented from going back to Command. h. Was he captured by the enemy at any time! When and where captured and where held as a prisoner, and when and for what cause releases when and where did your first husband diet. When and where did your first husband diet. If not, how long had you residue apart! If not, how long had you residued apart! M. Are you now a widow! Have you or your husband heretofore been paid a pension by the State! M. State of the sta | . 7 | 7 If he was not some at the last of the |
| a For what cause did he leave his command? b. By whose authority did he leave his command? c. For how long was he granted leave of absence: c. What was his physical condition when he left his command? f. What effort did he make to return to his command? g. In what way was he prevented from going back to Command. h. Was he captured by the enemy at any time? When and where captured and where held as a prisoner, and when and for what cause rele When when and where captured and where held as a prisoner, and when and for what cause rele When you residing together when he died! If not, how long had your rigided apart? Are you now a widow! Have you now a widow! Have you now a widow! Have you or your husband heretofore been paid a pension by the State! Mowern to and subscribed before me this the | 77 | where he was not present state clearly where h |
| b. By whose authority did he leave his command? c. For how long was he granted leave of absonce? c. What was his physical condition when he left his command? f. What effort did he make to return to his command? f. What effort did he make to return to his command? f. What was was he prevented from going back to Command. h. Was he captured by the enemy at any time? f. What and where captured and where held as a prisoner, and when and for what cause release to the command of th | F. F | |
| e. For how long was he granted leave of absence: (a) What was his physical condition when he left his command! 2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/ | 1, 00 0100 0000 | |
| What was his physical condition when he left his command! f. What effort did he make to return to his command! g. In what way was he prevented from going back to Command. h. Was he captured by the enemy at any time! If so, when and where captured and where held as a prisoner, and when and for what cause relative to the command. When and where did your first husband die; When and where did your first husband die; Were you residing together when he died! If not, how song had you resided apart! Mare you now a widow! Have you row a widow! Have you row husband heretofore been paid a pension by the State! Mown to and subscribed before me this the | | |
| f. What effort did he make to return to his command! g. In what way was he prevented from going back to Command. h. Was he captured by the enemy at any time! If we, when and where captured and where held as a prisoner, and when and for what cause relative to the command of the captured and where held as a prisoner, and when and for what cause relative to the captured and where held as a prisoner, and when and for what cause relative to the captured and where held as a prisoner, and when and for what cause relative to the captured and where held as a prisoner, and when and for what cause when he died! If not, how song had you resided apart? May you now a widow! He was a prisoner, and when and for what cause were you or your husband placed on the roll! May you now a widow! When and for what cause were you or your husband placed on the roll! May you have you are this the | | e. For how long was he granted leave of abser- |
| In what way was he prevented from going back to Command Was the captured by the enemy at any time! Was to when and where captured and where held as a prisoner, and when and for what cause rele When and where did your first husband diet When and where did your first husband diet If not, how hong had you residued apart? Are you now a widow! Have you or your husband heretofore been paid a pension by the State! When and for what cause were you or your husband placed on the roll! When and for what cause were you or your husband placed on the roll! | u " " | e What was his physical condition when he |
| In what way was he prevented from going back to Command Was the captured by the enemy at any time! Was to when and where captured and where held as a prisoner, and when and for what cause rele When and where did your first husband diet When and where did your first husband diet If not, how hong had you residued apart? Are you now a widow! Have you or your husband heretofore been paid a pension by the State! When and for what cause were you or your husband placed on the roll! When and for what cause were you or your husband placed on the roll! | " " | f. What effort did he make to return to his e |
| h Was be captured by the enemy at any time? Mo | | |
| When and where captured and where held as a prisoner, and when and for what cause relative to the control of th | * | |
| k. Were you residing together when he died! If not, how song had you resided apart! M. Are you now a widow! Have you or your husband heretofore been paid a pension by the State! M. Are you have you or your husband heretofore been paid a pension by the State! M. You have you or your husband placed on the roll! M. You have you or your husband placed on the roll! | ad when and for what cause releases | If so, when and where captured and where |
| k. Were you residing together when he died! If not, how song had you resided apart! M. Are you now a widow! Have you or your husband heretofore been paid a pension by the State! M. Are you have you or your husband heretofore been paid a pension by the State! M. You have you or your husband placed on the roll! M. You have you or your husband placed on the roll! | & un Carn dhey Col | When and where did your first bushout is |
| If not, how song had you resided apart? Mare you now a widow! Have you or your husband heretofore been paid a pension by the State! My See, when and for what cause were you or your husband placed on the roll! My Owner to and subscribed before me this the | a | |
| m. Are you now a widow! The State of the Sta | | |
| 9. Have you or your husband heretofore been paid a pension by the State! Masso, when and for what cause were you or your husband placed on the roll! Reputation U.g. date. | and way | |
| so, when and for what cause were you or your husband placed on the roll; Ryunan ug and | <i>PL</i> 6 | |
| Sworn to and anisorthyd before me this the | the State! | Have you or your husband heretofore been |
| | the roll? Ryunger up and w | so, when and for what cause were you or you |
| Ordinary) | mir Cook. | 77 1/11 Ord |
| County County | | trans phere |
| | | EAL) |

Questions for Witnesses as to Service of Husband and Marriage

What is your name and where do you reside to be following questions, snawers as follows:

What is your name and where do you reside to be forefore - in Oblinities

2. How home 2 How long and since when have you known Mys Light Gooth 3. How long and since when has she continuously resided in this State! (Give date.) 20 / 1000

4. When and to whom was she married to the state of the s How do you know & Juneal Rundledge husbandt 1 - Dy rote, of from 1 76 4 6 1914 when he died 6 When and where did further My O Bootl 6 When and where did A Comments of the husband of applicant, dief. co. 1814 a Comment of applicant, dief. co.

7. Were the applicant and her husband living together as husband and wife at the date of his death? " If not, how long did they live apart before his death! Rey wester to a no west Were they divorced, Un S. 1 10 When, where and in what Company and Regiment distriction 11. O book entiated for the first terration of a least that of 9. To the Reserve or district the year of the same Company 1. The West you a member of the same Company 1. The West you a member of the same Company 1.

11 How long within your personal knowledge did he perform getind military service with his Company and Regiment 1819 (Monthly, or from hegy 1844 6 Ofact, 1863 12 When and where did his Command surrender, and was discharged! destroy here fort of

14 Were you personally present when it was surrendered? And how same you then and how came you there! July

14 Was the husband of applicant personally present at surrender: Yes Rer If not where was he Riginals vo and our ... When, where and for what cause did be base Command? (Give date the and lift of athornty did be leave his Command , Ry wines 140 aus west And how

. How do you know all this?

and arrand ween live or such for for gurneites 15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com

mand! Reguero to auscour

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

Lower a weember of sour Company or was so of Lutters M. O. " IK

Sworn to and subscribed before me this the 66 Jackson 23 mg day of Ged X 1942

milli las ...

... Ordinary

SEAL)

long was he granted leavet

STATE OF GEORGIA,) To any Minister of the Gespel, Judge of Superior

CAMPBELL COUNTY.)) Court, or Justice of the Peace--to celebrate:))) You are hereby matherized and permitted to jein in the Henerable state of matrimory Lather N. B. Cook, and Miss

Lizzie Dailey, according to the Rites of your Church, provided there be no lawful cause to ebstruct the same, according to the Censtitution and Laws of this State; and, for so doing, this shall be your sufficient

I hereby certify that Luther N. L. Cook and Miss Lizzie Dailey were joined together in the Holy Hans of matrimony on the 6th day of May, 1878, by me.

(L. S.) R. C. Beavers, Ordinary.

L. P. Neese, M. G.

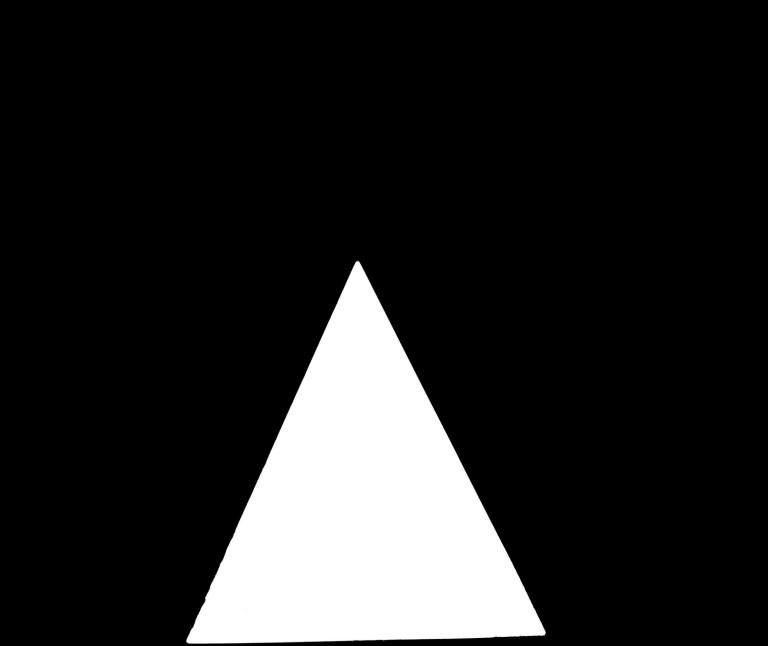
license.

Georgia, Campbell County. I, W. S. McLarin, Ordinary of said county, do hereby certify that the above and foregoing is a copy of the Marriage License, and Certif-

icate of Marriage of Luther N. L. Cook, and Miss Lizzie Dailey, as mppears of record in this office, in book "D", page 239, of Marriage Records. Witness my hand and seal of Office, this September 2374. 1919.

mille Forin

Campbell county, Georgia.



| Cook M.Q. V. Mes. Campbell County | | |
|--|-----|---|
| WIDOW'S | | STATE of 1. of Tennit the same to Witness Witness Ex. Ex. |
| Indigent Pension. | | POWE OF GEORGIA. One at. we my hand this Chrime Ordina |
| Name Wan Bork County Samplel | . * | Control Country of Country Country of Country |
| Approved 11-1-1901. | 4 | POWER OF ATTORNEY ORGIA. County. bereby authorize County, to receive and receipt for the 1 by his check or reg Ordinary. County. |
| JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDED TO | | ORNEY. |
| | • | on allowed and that ed mail: |
| Geo. W. Harrison, State Printer, Atlanta, Ga. | 4 | r E |

| I | | by authorize | | A |
|------------------------|--|--|--------------------------------|----------------|
| remit be same to me at | | ceive and receipt for | | ed and that he |
| Witness my hand this | | by his check o | or registered mail. | |
| Execut ed in presence | of) | | | |
| A second | Ordinary, | | and the second | L. 8. |
| REAL) | County. | | | . , |
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| | 1 / 3 | 1901. | Nationa. | . 1001 |
| Sic | 1 K Bland | 7.1. | | 18 |
| A 5 | 1/201 | JOHN W. LINDSEY | Constitution WARRANT HANDED TO | 1 |
| | 30 30 | II II | THAN | 18 |
| | A L STE | 8 1 V | NA NA | 16 |

Questions for Witnesses

| Constitution of Attriesses. |
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| TATE OF GEORGIA, |
| Stulton County. |
| (R I Con I |
| en presented as a witness in support of the Application of Mrs. May Gooth |
| r a Pension under the Act of 1900, and after having been duly sworn true answers to make to the |
| |
| 1. What is your name and where do you reside? A Soybone |
| 2. Are you acquainted with the applicage, Mrs. Ma V booth |
| so, how long have you known her? for torty their years |
| 3. Where does she reside, and how long and since when has she been a resident of this State. |
| airlum Cumbbell Cola all his life |
| 4. When and where was she born? Oct 91x 1874 in De Stall Co ye |
| 6. Were you ever acquainted with her husband? 6. Where did he reside in 1861? Glauton Loo Ya |
| 7. When and to whom was he married? in 1861 to Mau Former |
| 8. When and where was he boar? in 1804 in Washington loo Ifa |
| 8. When and where was he bear in 1804 in Washington Low you |
| 10. When and where did Junto v Cook enlist in the very between estates, and in what Company and Regiment did be enlist and how do you know this? |
| A Columbay Low Hes Coloritors Draggers was with him this will will |
| 11. Were you a member of the same Company and Regiment? Twas not |
| |
| 12. How long did he perform regular military duty? Lix months |
| 13. When and where was his Company and Regiment surrendered and discharged from service? |
| 13. When and where was his Company and Regiment surrendered and discharged from service? |
| 14. Were you with the command when it surrendered? O was |
| 16. Was Journe & Gook the husband of applicant present? |
| 16. If not present, where was he? |
| 17. When and where did he leave his Command at Savannally 1862 |
| what cause? Mustlind out |
| whose sutherity he left! buy order of was departement with your property of was departement free commend |
| ow do you know all this? (State fully and clearly.) I was with his commend |
| it The time at Savannah ya |
| 18. When and where did Stept 7 1880 in Claylon Co you die? |
| |
| 19. Where did he reside at his death and how long had he been a resident of Georgia at his death? |
| es Colention Co you all of his life 20 Do you or your own i mowledge know that applicant is the lawful widow of James |
| Scool I do |
| 21. Has she remained unmarried since her soldier husband's death, and is now his widow? Ilve har |
| Tel |
| 22. What properly effects or income has the applicant, if any, and how do you know this of your |
| n knowledge? North by Mironing his surramisticites and being a without to there |
| 28. What property, effects or income did applicant possess in 1899 and 1900 and what dispusition did sha |
| he of 11? Hothing |
| The state of the s |
| 24. Has applicant conveyed any property in last two years or given any away, if so what was it and to om! |
| VIII I |
| 25. What is applicant's physical condition and her chances and ability to carn a support? Werry when a condition and the chances and ability or at down not |
| |

28. Is applicant able to earn a support at labor of any sort, if not shy? No is to Questions for Applicant. STATE OF GEORGIA, 27. How was she supported for 1899 and 1800? Ry ther only alued and he is a poor -Com pour County. 28. How much did applicant contribute to her support for last two years? Flothing ma. V. emil 29. Give a full and complete statement of applicant's physical condition? My tralle and musty blend one eye extinctly out and not work. of said State and County, desiring to avail hereal of the Pension allowed to Indigent Widows of Confederate Solders, under Act of General Assembly, passed
1000, 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 Post Office)
W. A. V. Corrl - Completer to La = Q, O, Lair burn Fe 30. What interest have you in the recovery of this pension by the applicant? Nous 2. How long and since when have you been a resident of this State?

16 years - free or free of free of \$, 1874

3. When and where were you born? - free fg, 1874. Sworn to and subscribed before me this 2 and day of March. John R William on Brown 9. Whose each where may roug bushand born-state his full name, and when were you and he married?

Meet 4 1804, we thoughton Co the Journe S. Court Fullow Scertify to good where elm resultor reliment Collies 5. When and where, and in what Company and Regiment did your husband enlist or serve during the Physicians, when Revelon ordering Fullow STATE OF GEORGIA 6. How long did your husband serve in said Company and Regiment? L'x moullo County 7. When and where did your husband's Company and Regiment surrender and was discharged? 8. Was your husband present at the time and place when his Company and Regiment surrendered? physicians of prid county. Mo. Seing severally sworn, say on oath that they have examined carefully Mra.

applicant for a Pension-ander Act of 1900. and after applicant for a Penison-under Act of 1900, and after anch personal examinations say that her physical conditions this Mrs. Control of the Standard Control of the Control o 9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? 10. When and where did your husband die? Laphe, 1880 in clay to 11. Which of the following grounds do you base your application for Pension, yiz: Fins - Age and and we have no interest in said pension if allowed. Sworn to and subscribed before me this 16th Poverty: Second-Infimity and Poverty, or Third-Blindness and Poverty? Age for fire will less Dourings A MIX 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 day of March IV. S. 100 fore Ordinary, the third, state whether you are totally blind, and when and where you lost your sight. However been could be to you for the yourse head one guest of the belief of security of the security of the belief of security of the Jo Longino Med 18. What has been your occupation since your husband's death? 2604 - each ORDINARY'S CERTIFICATE STATE OF GBORGIA. 14. How much can you carn gross, by your own exertion of labor? 15. What property, real or personal, or income do you have or possess, and its gross value? 16. What properly, rear or personal, did you pe mess at death of husband or he left you, and of the year 1. J. Mefaun , Ordinary in and for said county, hereby 1899-1900, and what disposition, if any, by sale or gift, have you made of the same! /2 for certify that the applicant, Mrs. M. a. N. Cork county, and has been a bona fide resident of this State since first day of all 18 2.4, and that the witnesses, Mr. John H. Belleux Th. J. 18 4, and that the witnesses, Mr. Principoley by my for are entitled to full faith and credit. I do further certify that before answering the foregoing questions, the applicant and said witnesses took the 19. How much did your support cest for each of those years, and how much did you contribute by your own labor or income? oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed. Canthelite County shows that applicant 20. What was your employment during 1899 and 1900-how much did you receive for each year? I further certify that the tax digest of dog were = returned for taxation in her own name in 1899_ Lectures of property, and in 1900_ nothing day of March 1901: 21. Have you a family? If so, who composes such family? Give their means of support. Have they Witness my hand and official sea!, this____ any lands or other property? 100 Sir Ir. 5 he Lorie Ordinary. 22. Have you ever made an application for pension before? SEAL 23. How many applications have you made for a Pension, and under what class? Notes—I. 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.

A definitional efficient of the property of the proper Sworn to and subscribed before me this..... man cools ____190__/__ of Complete County.

Questions for Witnesses.

| , | |
|---|---------|
| STATE OF GEORGIA, | |
| Cariford County | |
| County.) | |
| John St. Allell of said State and County, having | |
| been presented as a witness in support of the Application of Mrs. 2014. U. Cook | |
| | |
| for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the | |
| tollowing questions, deposes and answers as follows | |
| 1. What is your name and where do you rigide. I fell of the Collection | |
| west reside in bare fifty pounty Fa- | |
| 2 Are you acquainted with the applicant, Mrs Master V. 600 M | |
| If so, how long have you known her allact two years | |
| Where there she reside and have long and super when has she been a resident of this State? | |
| The resider to Completel country - + how lind in Gans | 1. 1 |
| 4. When and where was she born " To girl harre | wer top |
| 27.17 | |
| 6. Were you ever acquainted with her husband blagtast anity Gen | |
| | |
| When and to whom was be married to 2017 Myace | |
| 8 When and where was be been " A.O. 1.17 Kinger | |
| 11. How long have you known him Secret he first pointed range les 1861 | |
| 10. When and where dol Co. 164 for the collect in the war between | |
| 10. When and where did 27. 2. 2. 4. When and where did the spaces, and in what Company and Regiment did by earlist and low down know the 1964; Cart | , |
| x recessor In - Clayton Dragon (1 - not attached to regin | ini |
| 1) Were you a member of the same Company and Regiment 2 22 | ui l |
| | |
| 12 How long did be perform regular military duty - Siv marettes - mittel | 5 |
| the Company was distruded at Lavannah - He waspart | reel |
| 13. When and where was his Company and Regiment surrendered and discharged from revige? | 90 |
| 1 Itel assauded of Lavanciah | |
| Were you with the command when At surrendered & 27 12 1 1 hour Mis Parison | 1 |
| Were you will the command when it surrendered y 1 1 in her Mis Paint 1. We. We the humband of speciant property of authority and Samuel Cont. | 7 |
| the husband of applicant present? | |
| 21 ev- also same lot same runi | |
| 16. It is Epresent, where we have | |
| 17 When and where still be leave his Command! (It Savay 22ah | 7 |
| For what cause bacco fractif was also auged, and he was one fare | / |
| By whose authority he letter They order of the war department | |
| How do you know all the State tilly god clearly) Licarde O 11 as The TC | |
| with him wid was alabanded at sauce | |
| -timel - Willialury Samloles. | |
| 18 When and where did & Mills J. look die | |
| | |
| 15. Where did he reside at his death and how long had he been a resident of Georgia at his death? | |
| Died in Clayton - 20 vir I hrow when | |
| 20 Do you of your own knowledge know that applicant is the lawful widow of | 4 |
| Janus d. book - Uses! | 4 |
| 21 Nesshe remained unmarried since her soldier husband's death, and is now his widow? | |
| , Als- | |
| 22. What proper a offices or income has the applicant, if any, and how do you know this of your | |
| | |
| own knowledge? Mice that I have of | |
| When the state of | |
| 23. What property, effects or income did applicant possess in 1999 and 1900 and what disposition did she make of it? **DRICE That I MIACUTA** | |
| make of it's that I miace if | |
| v | |
| 24. Has applicant conveyed any property in last two years or given any away, if so what was it and to | |
| whom' The Ill that I haracelly | |
| | |

She is vet and feele

20. Is applicant able to earn a support at labor of any sort, if not why? I.A. Birance 27 How was she supported for 1899 and 1900? & t 1211 hnece 28. How much did applicant contribute to her support for last two years? Dr. 222 Thinace 29 Give a full and complete statement of applicant's physical condition?

July 1 1920 Sworn to and subscribed before me this 16 14 yohro It. Aller day of March Campbell Witnesses

POWER OF ATTORNEY.

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

WARRANT ISSUED

OHN W. LINDSEY.

POWER OF ATTORNEY.

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

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

Executed in the presence A PHILannell

OHN W. LINDSEY.

WARRANT ISSUED

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA. | PERSONALLY COMES MIKS |
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| STATE OF GEORGIA. | IN COUNT |
| to being some suscence the third she is a constant of the same and the state of Georgia and the | era fide resident of said Compto of |
| State of the agent and t | for she has RESIDED in said State |
| colific to pale a me small | . That suc is the Widow of |
| 1.10 11 11 11/1 | who was a soldier in Company |
| or the Claylon Dragion Rogers | 1.01 |
| Volumbers that be enlisted in sandagary and a second | and the same |
| and the second of the sense of the second of | 1. 8.1 |
| on dept in YXO m | shore stoles |
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| The context of some state with a poster made of souther cases soldier the soldier made that soldier soldier soldier is a soldier and soldier as destination soldier. | ring his secretary on the Army as a |
| s due partice sizes a committee about adorrange | Land Oct sta treate his wife a |
| have a land or and the same of | |
| The sea to consider thought refer to a resident of | |
| The set 2 since Λ , your house it is 1902 and now apply t since | petison provided or live to a co- |
| the entry bear to the fine | , |
| Service of the servic | y the state of |
| frame to the same | · |
| of Stut Down Course & promote | for for |
| | |
| State of Georgia, | |
| County Commy of said | County early y true I am as |
| a quantities with Mrs 200 2 12 22 | wherea, ashe trees, as we will also are |
| ion satisfied that the facts therein stated are true, and I know she | |
| hereself to be and that she has continuously resided in this. State s | since the |
| day of 18 000 | - J |
| Convenience my official signature and seal this the | day of 10 1 7 1900 |
| Officer / | luc lone. |
| Ordinary of C. | and place country |

NOTE. All blanks must be filled. Vouchers and affidavits must bear date after January 1st, 1902.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA. | PERSONALLY COMES MRS. |
|---|--|
| STATE OF GEORGIA | |
| who, being sworn, says on o | ath, that she is a bona fide resident of said County of c of Georgia, and that she has mesiden in said State |
| Stat | e of Georgia, and that she has RESIDED in said State |
| continuously ever since | 1824 m |
| 1.0, (00176 | who was a soldier in Company |
| J of the | Regiment of 2 " Lee Correly |
| | |
| Volunteers, that he enlisted in said regiment or | X da A y 1186 / That he died |
| on the day of | That he died to the state of th |
| y paid distant | he die to I |
| 12,18 80 00 00 | time state |
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| _ | 10 m, or 00 102 |
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| Dominant annual desired | |
| wolding and that the beauty the wife of said o | leceased soldier, during his service in the Army as a |
| the year 18 6 | ils douth aferosaid, and that she became his wife in |
| | s a roshitant of Care place |
| | |
| year ending December 31, 1908. | ow apply for the pension provided by law for the |
| Sworn to and subscribed before my | 14. A. 7. 20018 |
| this day of f 1903 | Post Office / A |
| this 1 day of 10 1903 | |
| State of Georgia, | 1.12. 1. 111 Herin |
| (our phase County.) | Ordinary of said County, certify that I am well |
| nequainted with Mrs 200, A. 17, Co | who made the above affidavit and |
| | e, and I know she is the individual she represents |
| herself to be, and, that she has continuously resid | led in this State since the 22 - 1 |
| day of for 1 14 80 | is the 22 day of 7 1903. Ordinary of County |
| Given under my official signature and seal, ti | is the 2 day of 10 1103. |
| Official | the such wie |
| Beal. | Ordinary of Courty & Le County |
| NOTEAll blanks must be filled. | |

POWER OF ATTORNEY.

| STATE | or GEORGIA, | ļ | | |
|------------|------------------------|----------------------|-----------------|------------------|
| n l. J | curs he A | t'ounty.) | 1 | hereby authorize |
| 128 | Lu Loni | -ot_ 1 | | - 94 |
| to receive | and receipt for the pe | nsion paid hereon, a | nd request that | he remit same to |
| | | | | |
| , | ted III DEPENDENT of | 1 cm A | V _ C | t. /1. |
| Execut | ted in presence of | | | , , |

John a Coroll

POWER OF ATTORNEY.

STATE OF GEORGIA.

Composite Country.

[Mark 116 & Y Con 16 hereb

] Con 16 Con 16 hereb to receive and receipt for the pension paid hereon, and request that he igmit same to In Witness Whereof, I have hereunto set my hand and seal, this

1905.

Executed in presence of

INDIGENT

WIDOW'S PENSIO For year ending Dec. 31, 1905

JOHN W. LINDSEY,

1. . .

FOR YEAR ENDING DECEMBER 31, 1904

POWER OF ATTORNEY

| . OWEN OF ATTORIVET. | |
|--|---|
| STATE QF GEORGIA, | |
| Com & Loucounty. | |
| · lum y 4 7 C -16 | |
| hereby authoris | е |
| to reading and social for the | - |
| to receive and receipt for the pension paid hereon, and request that he remit same t | D |
| M Town | |
| IN WITNESS WHEREOF, I have hereunto set my hand and seal, this | |
| day of Jours 1804 La AV LCOVK | |
| in est | 1 |
| Executed in presence of | , |
| John a Covic | |
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| THOSE HERETOFORE PAID. 1904. NDIGHENT NDIGHENT NDIGHENT EAR EADING DECEMBER 31, 190 PAID TO PAID TO PAID TO THE COUNTY THE COUNTY OF THE COUNTY AND MANDERTY THE COUNTY AND MANDERTY THE COUNTY TH | |
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Coop m.a. 2.0

POWER OF ATTORNEY.

| Michigan Co. | |
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| STATE OF GEORGIA | |
| Court beer COUNTY. | |
| COUNTY. | |
| Illes Ill. A. V. Cool | |
| I luss ll A. V. Cook here | y authoriz |
| to receive and receipt for the pension paid hereon, and request that he r | emit same to |
| | |
| In Witness Whereof, I have hereunto set my hand and seal, this. | 10 |
| day of lack'y soon | |
| day of 1905. Executed in presence of | [t n] |
| Executed in presence of | [L. S.] |
| | |
| - Les mechanicalisa | |

To Those Heretofore Paid. 1905. No. 330

WIDOW'S PENSION, The !!! Part Cool INDIGENT For year ending Dec. 31, 1905.

Widow of J. S. Courty, Co. J. JOHN W. LINDSEY,

WARRANT ISSUED AND HANDED TO

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA, County of Com free Lu & V. Confl |
|--|
| who, being sworn, says on oath that she is a bona fide resident of said County of |
| continuously ever since O 1 4, 82 7. That she is the Widow of who was a soldier in Company of the 2 Fa Congression Regiment of Tax |
| Volunteers, that he enlisted in said regiment on or about the month of |
| 186 / and served in the Army up to 186 / That he died on the died on the died of the died of the died of the died of the died on the died of t |

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

I have been allowed an Indigent pension as a resident of 6 our of free County under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904

his Luc Lord Ordinary Post Office Lord Control

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

Given under my official signature and seal, this the design day of the seal of

Ordinary of Come of here County

Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS

| STATE OF GEORGIA, County of Garce been been been the A. V Cowork |
|--|
| who, being sworn says on oath, that she is a bons file resident of said County of Coordia, and that she has RESIDED in said State continuously over since |
| That she is the Widow of who was a soldier in Company of the 1 "Regiment of the Coopy Volunteers, that he enlisted in said regiment on or about the month of |
| the day of fight in 80 The Carrent on account of said discort |
| or obove & Lates |

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 6 /

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

Sworn to and subsophed before me.

this grant of the gran

1. A. Sue forin State of Georgia, 1. M. Sill Lower County. County. Ordinary of said County. certify that I am well acquainted with Mrs. U. A. V. Cool. 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

Cityon under my official algorithm and soal, this the day of the d Official

Ordinary of Care of her County

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

POWER OF ATTORNEY.

| 27 (7 | receipt fo | or the pe | nalon pald | ofhereon, as | nd reques | t that | he re | mit same |
|-------------|------------|--------------|--|--------------|----------------|---|--------------------------------|---------------|
| | s Whereo | | | set my han | d and sea | | | ije. |
| y of' | | 1 | 1906 | lua | . 75 \ | 12 | 00/ | ([L |
| E | ecuted in | presenc | e of | | | ٠, | ί. | [L. |
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| | T | ON, | | County, | giment. | Pensions | .1906, | |
| | T | ON, | n, 1906. | County, | Regiment. | BY, er of Pensions | 1906, | |
| .96. | T | ON, | Dec. 31, 1906. | County, | (1) Regiment. | NDSEY, institute of Pensions | 24 _1906, | O and |
| .908. | INDIGENT | W'S PENSION, | For year ending Dec. 31, 1906. And To Conf. | County, | John Regiment. | JOHN W. LINDSEY, Commissioner of Pensions | WARRANT ISSUED - JAN 24 _1806, | AND HANDED TO |

| | POWE | R OF AT | TORNEY. | |
|--|------------------------|---|--|--|
| STATE OF GI | force of a | ., 9h, C | of bus | , hereby authorize |
| | | at | hou | the remit same to |
| day of | | | | [L.S. |
| Execu H 3 | ted in presence of | | 7,0 | |
| To Those Heretofore Paid. 1907. No. wett | DIGENT W'S PENSION, | For year ending Dec. 31, 1907. L. a., 97, L. r. L. Same of the County | OHN W. LINDSEY, Commissions of Prosing | WARRANI ISSUED AND HANDED TO A BARDES TATABLE TATABLE BARDON SARRENDE ALLERA |
| 18. L | WIDO | Mrs Ve | Widow of | A NOTE OF THE PERSON OF THE PE |

190 No. No To Those Here INDIG WIDOW'S

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEORGIA, | PERSONALLY COMES MRs. |
|--|--|
| County of Course phice | ILLA. T. lovoll |
| | oath, that she is a bona fide resident of said County of |
| Carre Kull. | |
| Sta | ate of Georgia, and that she has RESIDED in said State |
| continuously ever singe 6 . L 4 | That she is the Widow of |
| s. c. Cork | who was a soldier in Company |
| of the | who was a soldier in Company Regiment of |
| | on or about the month of |
| | 1 |
| 186, and served in the Army up to | 186 That he died on |
| the day of | re- 64 1880 |
| ta lorde Cores | Jeft 2,1780 |
| Court of fores | a her dead or |
| obview Valadad | de pt 2, 1880 |
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| peponent swears that she was the wife of said | deceased soldier, during his service in the Army as a |
| | his death aforesaid, and that she became his wife in |
| be year 18 6 | his death aforesaid, and that she became his wife in |
| | 12 . // |
| | ion as a resident of Course flere |
| ounty, under Act 1900, for the year 1905, and | now apply for the pension provided by law for the |
| ear ending December 81, 1906. | |
| Sween to and subsect to a | 1 |
| . Sworn to and subscribed before me | hear of si Carll |
| his day of 111 1906. | 11111111 |
| Mr. C. 112 Charter, Ordinary. | Post Office |
| Secretaria de la composição de la descripción de la composição de la compo | Mille forme |
| State of Georgia, | 1. 21. Victorice |
| County. | Ordinary of said County, certify that I am well |
| | or of the country certify that I am well |
| | , who made the above affidavit, and |
| n satisfied that the facts therein stated are tr | rue, and I know she is the individual she represents |
| erself to be, and that she has continuously res | sided in this State since the |
| ay of | - 0 |
| Given under my official signature and see | al, this the guaday of a . 7 1900. |
| | |
| Official } | M. Sluctoria |
| Seal | Ordinary of Com Sheer |

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

| STATE OF GEOR | GIA. | Merson | ALLY COMES MRS. | |
|--|----------------------------------|----------------------|--|---|
| continuously ever since | el State of Geo | orgia, and that she | resident of said County of has RESIDED in said Stat That she is the Widow of | e |
| J. S. C. v. A. J. J. of the Volcounteers, that he enlisted in | 2 4 | who | vas a soldier in Compan | y |
| 100 / 1 1 1 1 | (10) | → \ | | n |
| the 2 and served in the Al | day of July | an of | u o To Lid | |
| | | | w.v | |
| The second second | | | | |
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| | A CONTRACTOR | | | |
| D | | | | |
| Deponent swears that she was t | | | | |
| soldier, and that she has never | married since his deat | h aforesaid, and th | at she became his wife i | n |
| the year 18.6 | | _ | | |
| I have been allowed an Iu | | | F-4 | |
| County, under Act 1900, for the | year 1906, and now a | pply for the pension | on provided by law for th | e |
| year ending December 31, 1907. | | | | |
| Sworn to and subscribe | ed before me | he | · / | |
| Sworn to and subscribe this 2 2 day of face from | 1907. U | at Office | Cort | |
| Teachers (Entry to the Entry to Except States (States) | term of a broken recovery to the | m | Me Lonin | |
| State of Georgia, | County } | .,,, | nty, certify that I am we | |
| acquainted with Mrs. Cu. | 2, 7. Com | | de the above affidavit, and | |
| am satisfied that the facts there | | | | |
| herself to be, and that she has c | | | | |
| day of | 40 | tins State since th | 2 | |
| Given under my official sig | grature and seal this t | ha 2 2 day of | Janiy 1907 | |
| Stren ander my ometar sig | name and some this t | 2, 2. We | 5 1907 | |
| Official Seal | | | to be es | |

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January 1st, 1907.

| -M-M | campbell Co | | | |
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| CERTIFICATE | // | | | |
| GITY OF ATI | | | | |
| 22 22 1 | Registered No | | | |
| ULL NAME MAS Masy ann | Actainia Cook | | | |
| | Low IST. WARD | | | |
| If death occurred in hospital or institution, | | | | |
| (A desira occurred the hyspital of institution, | give its (value) instead of street and number: | | | |
| PERSONAL AND STATISTICAL PARTICULARS | MEDICAL CERTIFICATE OF DEATH | | | |
| COLOR OR MACE SINGLE. | DATE OF DEATH | | | |
| J. WIDOWED OR VILLAGIA | (Month) (Day) (Year) | | | |
| (Write the Word) | HERENY CERTIFY THAT ATTEMOS DECEASED FROM | | | |
| | Jely 181912 10 Jeby 29, 192 | | | |
| Munth (liny (Vent) | that I last saw he salive on " 78, 1912 | | | |
| - // | and that death occurred on the date stated above at 22m. | | | |
| \$1 to bri | The CAUSE OF DEATH × was as follows: | | | |
| Years Miss Days or min.) | D | | | |
| CUPATION | | | | |
| articular kind of work | Caraly ses | | | |
| h) General earliers of industry. | | | | |
| hich amployed (or amployer | (Duration) Via Mo 7 Ds | | | |
| RTHPLACE Ste or County) | | | | |
| o Sa | (BECONDARY) | | | |
| NAME OF PARHER ! | Dorough) Yrs. Mo De | | | |
| John Taimer | (Nigned) N. Z. Nood | | | |
| BIRTHPLACE OF BATHER | 2/2- | | | |
| (Syste or Eventy) Sa. | M State the Dispass Causing Duarm, or In deaths from Violant Caushs | | | |
| OF MOTHER | stafe [1] MEANS OF INJUNY; and (2) whether ACCIDENTAL, SUICIDAL, OF | | | |
| | LENGTH OF RESIDENCE (FOR HOSPITALS, INSTITUTIONS, TRANSIENTS, OF RECENT RESIDENTS) | | | |
| BIRTHPLACE OF MOINER (State or County) | | | | |
| (inter-si contain) | At place in the of death Yrs. Mos. De Biate Yrs. Mos. De | | | |
| he above is true to the best of my knowledge | Where was disease contracted if not at place of death? | | | |
| gnature of Mrs (Cook | Former or 157 - Vance 1 Acres | | | |
| | PLATE OF BURIAL SA REMOTEL STATE OF BURIAL, | | | |
| (Address) / 15/7 Jones aux | 11.11.11.11. 31. 3 | | | |
| 2 / 0/14/8/ | UNDERTAKER | | | |
| of Meh. 1.1012 D. Chornton | Marine G (Pala). | | | |
| Registrat | Staving S. Voole | | | |
| WRITE PLAINLY WITH UNFADING INK THIS IS A PERMANENT RECORD. | | | | |

N. B. - Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should state CAUSE OF DEATH in plain terms, so that it may be properly Classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

HARRY G. POOLE FUNERAL DIRECTOR PRIVATE AMBULANCE

CARRIASTA 40 EAST H. W.F. STOLET

| Atlante Ga | |
|-------------------|-----|
| Mar let 1912 | |
| Funeral Expenses | • |
| Mar 1 1912 Cas) | • 7 |
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ATLANTA GA

f Mrs Mary A. V. Cook Deseased

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Geer

nally appeared before me Marry G. Peole who after being

ne abeve account is just, due and unpaid.

ham, M.P. - Stany 4.

in teo. Su,

lved of W. S. McLarin, Ordinary of Campbell county, Ga., sum of sixty dollars (\$60.00) in payment of said a ount of \$60.00 on the above bill of funeral expenses of Mrs. M. A. V. Cook, a deceased pensioner of said county of Campbell, and the same being in full of the amount of pension money due the said Mrs. M. A. V. Cook from the State of Heorgia for 1912.