STATE OF GEORGIA	SI
Campaell County.	
Personally came J. W. Rivers, J. J. Buffing time	
and g. L. leaves	da
	do
who, being duly sworn, say that they are acquainted with RR Horlore	app
	in l
disease) in the military service, as stated by him in the foregoing affidavit; that said wounds	and
(or disease) permanently disables applicant, as stated by him; that said applicant is a bona	of 1
" Edward State Come . 1 . 1 . 1 . 1 . 1 . 1 . 1	
country, and we	who
are well satisfied that all the statements in his affidavit are true.	-
. Sworn to and subscribed before me, this 25 day of February 1889 7 Rivers	ture
R. G. Bourn ordinary Africa ton	
orderanj Alm C. Casel	
Note.—Above affidavit must be made by three citizens of the county of applicant's residence.	,
STATE OF GEORGIA.	
County.	
PERSONALLY comes before me R. G. I Slavers Ordinary of said county,	ST
17 Annealast	
, both known to	
me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined RR. Horton and after such	
	coun
over Lest or point of the Derpulus the bour flows	of
then near the spring Colinia outher sight Site	
ledying, wear the Mithray from I har sement the	me a
is his head (1816 & State)	to fro
to little like & Such Cripples, and the part where	vice o
a dein took then It times a year up to the present	autho
	the G
This Condition of the ings, Dende withour Whatter Scholadory	I,
· Sworn to and subscribed before me, this)	day o
20th day of February 1889 Mobley us	E
Rl Beavers.	· y

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

ORDINARY.

and

STATE OF GEORGIA,
County.
I, R. G. Beavert Ordinary of said county,
o certify that I am well acquainted with R. R. Storton the
pplicant in the foregoing affidavit, and am well satisfied that the statements made by him
his said affidavit are true, and I know he is the individual he represents himself to be,
nd that he resides in this county. I also certify that the foregoing witnesses, are persons
respectability, and that their statements are worthy of full credit and belief.
I further certify that R.C. Beauty before
hom the foregoing affidavits were made and power of attorney was signed, is a
Ordinary of said county, and the said affidavits and signa-
res thereto are genuine.
Given under my official signature and seal, this 26 " day of February 188 ?
R. G. Seavers.
Ordinary Campbell County.
County.
Power of Attorney.
TATE OF GEORGIA,
Lamphell County.
Know all Men by these Presents, That I, R. K. Neplece
of Campbell
inty, in said State, do hereby appoint A. J. McBriele
M. C. A.
The state of the s
and in my name, to receive and receipt for whatever amount of money I may be entitled
rom the State of Georgia by reason of the injury received as aforesaid in the military ser-
of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
horizing my said attorney to receipt in my name for any Warrant that may be issued by
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
of February 1889 RRHorlo (L.S.)
Executed in the presence of us: (L.S.)
George Lachaye)
R. C. Beavest wary

STATE OF GEORGIA, Campbelle County.

1, R. G. Bewer Ordinary of said county, do certify that I am well acquainted with R.R. Horton the applicant in the foregoing affidavit, and am well saifsed that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

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

Given under my official signature and seal, this 1814 day of February 1890 R. le Bewern County.

STATE OF GEORGIA,	CHRIS CHICAR	
Campbell comey		LUCK.
D O Conney		
1. R. C. Beavers		County,
do certify that I am well acquainted with	Robert R. Horton	the
	am well satisfied that the statements made h	w him
	is disabled, to the extent he claims, and I know	he is
the individual he represents himself to be		
I further certify that R. C. O	leavers	
before whom the foregoing affidavits	were made and power of attorney was signe	d. is a
Ordinam	of said County, and the said affiday	de and
alamatura shawar an analis	of said County, and the said affiday	nts and
signatures thereto are genuine.	The same of the sa	
Given under my official signature ar	nd seal, this Jan day of March	1895
	R. C. Biavers	
- The ment of the state of the set of the se	Ordinary Compbell	County.

Application for Allowance

Application for the followance

County, Court follow

County, Court follow

County, Court follow

Amount

Batered on yearned

Warener Harmer for the follow

Warener Harmer for the follow

Conf. Ferrence, super Frience, alphane, to

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Campbell County.	
County.	rton of Campbell county.
State of Georgia, who, being duly swor	n, says on oath that he is a bona fide citizen and
resident of said State, and has been such	continually since the 8th day of
	at he enlisted in the military service of the Con-
	regice -) during the war between the
States, and served as a Private	during the war between the
States, and served as a	in Company of 10 th Regiment
of georgia Volunteers	Bryant 's Brigade; that whilst engaged beder creek in the State
in such military service, at the battle of	Geder Creek in the State
of Virginia on the 191	day of November 1863, he was
wounded as follows: Shot wil	day of November 1863, he was
might Sholdier ma	uging down back bone
Portaine un 18 to	idney where it was
the contract of the se	winings where is warf
laning out also a	t the battle of Settenburg
on the 2rday of fully	1863 was shot trough the
Midale fingers cu	thing off below the the sand
Ol Saint 31 1	16 Th
	he benefits of the Act approved October 24 1882
and the acts amendatory thereof, and m	he benefits of the Act, approved October 24, 1887, akes application for the allowance to which he is
entitled for the year ending October 26	, 1890. I have heretofore been allowed a pension dollars.
Sworn to and subscribed before me t	his the RR Harlon
	ms the filling
14 H	1 / Ch William
10th day of February	1894
10th day of February	1890) dinay
R. G. Beaver 1 07	1894) Control of the course the disability, and explain particularly the extent of
R. G. Beaver 1 07	dina y
Aday of St. G. Beaver 1 (); Norn.—State fully nature of wound or character of distability.	1892) Clinicary nase which causes the disability, and explain particularly the extent of
Aday of R. G. Braver 1 University of the disability. POWER O	dina y
Aday of St. G. Beaver 1 (); Norn.—State fully nature of wound or character of distability.	1892) Clinicary nase which causes the disability, and explain particularly the extent of
Aday of R. G. Braver 1 University of the disability. POWER O	1892) Clinicary nase which causes the disability, and explain particularly the extent of
Aday of Manager 1 (1) Norz.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County.	189 Chicary case which causes the disability, and esplain perticularly the extent of FATTORNEY.
Aday of Manager 1 (1) And 1 (1) Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA	189 Chicary case which causes the disability, and esplain perticularly the extent of FATTORNEY.
Aday of Managery of Managery 1 (1) Nove State fully nature of wound or character of die the disability POWER OSTATE OF GEORGIA COUNTY. KNOW ALL MEN BY THESE PRESENTS, Th	189 Chicary case which causes the disability, and esplain perticularly the extent of FATTORNEY.
Aday of Manager 1 (1) Norz.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County.	189 Chicary case which causes the disability, and esplain perticularly the extent of FATTORNEY.
Aday of M. G. I G	at I, of my true and lawful attorney in fact, for
Aday of Manuer 1 107 More. State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, The county, in said State, do hereby appoint of the county in said State, do hereby appoint of the cou	at I, of my true and lawful attorney in fact, for what a wer amount of money I was be estiblished.
Aday of Manuer 1 107 More. State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, The county, in said State, do hereby appoint of the county in said State, do hereby appoint of the cou	at I, of my true and lawful attorney in fact, for what a wer amount of money I was be estiblished.
Aday of M. G. I Braver 1 177 Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, The county, in said State, do hereby appoint of the county of the state of Georgia by reason of service of the Confederate States (or of feereby, authorizing imy said attorney to receive and receipt the state of the confederate States (or of feereby, authorizing imy said attorney to receive and receipt the state of the confederate States (or of feereby, authorizing imy said attorney to receive and receipt the state of t	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit; everything the my name for any warrant that may be everything that my have for any warrant that may be everything the my name for any warrant that may be
Aday of M. G. I Braver 1 177 Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, The county, in said State, do hereby appoint of the county of the state of Georgia by reason of service of the Confederate States (or of feereby, authorizing imy said attorney to receive and receipt the state of the confederate States (or of feereby, authorizing imy said attorney to receive and receipt the state of the confederate States (or of feereby, authorizing imy said attorney to receive and receipt the state of t	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit; everything the my name for any warrant that may be everything that my have for any warrant that may be everything the my name for any warrant that may be
Aday of M. G. I Braver 1 177. Nora—State fully nature of wound or character of distance that disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, The county, in said State, do hereby appoint of the county of the c	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit etectpf in my name for any Warrant that may be money which may be coming to me for the reason
Aday of M. G. I Graver 1 (1). Norz.—State fully nature of wound or character of distance the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, The county, in said State, do hereby appoint of the county, in said state of Georgia by reason of service of the Confederate States (or of hereby authorizing my said attorney to rissued by the Governor, or for any sum of aforesaid. IN WITNESS WHEREOF, I	asse which causes the disability, and explain particularly the extent of FATTORNEY. The state of the state o
Aday of M. G. I Braver 1 17. Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the state of Georgia by reason of service of the Confederate States (or of the Ereby, authorizing my said attorney to rissued by the Governor, or for any sum of aforesaid. IN WITNESS WHEREOF, I day of	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit every from my name for any Warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this
Aday of M. G. I Braver 1 17. Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the county of the state of Georgia by reason of service of the Confederate States (or of the Ereby, authorizing my said attorney to rissued by the Governor, or for any sum of aforesaid. IN WITNESS WHEREOF, I day of	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit election in my name for any warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this 189
Aday of M. G. I Braver 1 17. Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the state of Georgia by reason of service of the Confederate States (or of the Ereby, authorizing my said attorney to rissued by the Governor, or for any sum of aforesaid. IN WITNESS WHEREOF, I day of	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit election in my name for any warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this 189
Aday of M. G. I Braver 1 17. Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the county of the state of Georgia by reason of service of the Confederate States (or of the Ereby, authorizing my said attorney to rissued by the Governor, or for any sum of aforesaid. IN WITNESS WHEREOF, I day of	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit election in my name for any warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this 189
Aday of M. G. I Braver 1 17. Nova.—State fully nature of wound or character of die the disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the county of the state of Georgia by reason of service of the Confederate States (or of the Ereby, authorizing my said attorney to rissued by the Governor, or for any sum of aforesaid. IN WITNESS WHEREOF, I day of	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as aforesaid in the military this State), as stated in the foregoing affidavit election in my name for any warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this 189
Aday of M. G. I Braver 1 17. Norz.—State fully nature of wound or character of distance that disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the county of the c	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as a foresaid in the military this State), as stated in the foregoing affidavit electiff in my name for any Warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this 189
Aday of M. G. I Braver 1 17. Norz.—State fully nature of wound or character of distance that disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the county of the said in my name, to receive and receipt to from the State of Georgia by reason of service of the Confederate States (or of hereby, authorizing my said attorney to rissued by the Governor, or for any sum of aforesaid. IN WITNESS WHEREOF, I day of	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as a foresaid in the military this State), as stated in the foregoing affidavit electiff in my name for any Warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this 189
Aday of M. G. I Braver 1 17. Norz.—State fully nature of wound or character of distance that disability. POWER OSTATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS. The county, in said State, do hereby appoint of the county of the c	at I, of my true and lawful attorney in fact, for for what ever amount of money I may be entitled the injury received as a foresaid in the military this State), as stated in the foregoing affidavit electiff in my name for any Warrant that may be money which may be coming to me for the reason have hereunto set my hand and seal, this 189

For Applicants Heretofore Allowed Pensions.

Camp		mty.
PERSONALL	appears Robert	t & Trorton of Campbell
		duly sworn, says on oath that he is a bona fide citizen an
resident of said	State, and has resided	therein continuously ever since the 8 12
day of Ma	18	42; that he enlisted in the military service of the Con
federate States	(or of the State of	georgia during the war between the
States, and serv	ed as a Sriv	ate in Company of 10 th Regimen
of Geory	ia Voluntee	rs Brigaut 's Brigade; that whilst engage
in such military	service at the battle	of Leader Creek in the State
of Va:	, on the	19th day of November 186 t he w
wounded as foll	ows: - flet in	the viewe ball over the right
Sholder	- ball rains	ine down the Lack to
and we	is cut out	instatore right hip bone,
1 Brust	my of four	Ribs and from the affects
of said	wound or	renders my night arm
hand d		s also midle finger on left
Deponent	desires to participate	in the benefits of the Act, approved October 24, 188
for the year end	ing October 20, 1891.	. I have heretofore been allowed a pension of
itly five	A	dollars, for 1889, 1890 Cach .
Sworn to an	d subscribed before m	a lateral like in
3	day of March	
	Scavers, Cra	
Nove State full the disability, resulting	y nature of wound or charact	ter of disease which causes the disability, and enplain particularly the extent of
	DOWER	
		OF ATTORNEY.
		R OF ATTORNEY.
STATE OF	GEORGIA,	R OF ATTORNEY.
STATE OF Know all	GEORGIA,	R OF ATTORNEY. nty. resents, That I.
STATE OF Know all	GEORGIA,	R OF ATTORNEY.
STATE OF Know all	GEORGIA, Coun Men by these Pr	R OF ATTORNEY. No. 1919 County, State of Georgia, do hereby appoint the appoint the state of Georgia.
STATE OF Know all of	GEORGIA, County Men by these Pr	R OF ATTORNEY. resents, That I, County, State of Georgia, do hereby appoin my true and lawful attorney in fact, for
STATE OF Know all of me and in my na of the Confedera	GEORGIA, County Men by these Property The conference of Georgia by reason at States (or of this States)	R OF ATTORNEY. """ """ """ """ """ """ """
STATE OF Know all of me and in my nate of the Confeders	GEORGIA, County Men by these Property The conference of Georgia by reason at States (or of this States)	R OF ATTORNEY. """ """ """ """ """ """ """
Know all of	GEORGIA, Country Men by these Pr The country of the country and the country of the country and the coun	my true and lawful attorney in fact, for the injury received as aforesaid in the military service that as a stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid.
STATE OF Know all of me and in my na to from the State of the Confedera ing my said attor nor, or for any si	GEORGIA, Country Men by these Pr The country of the country and the country of the country and the coun	my true and lawful attorney in fact, for ceipt for whatever amount of money I may be entitled in of the injury received as aforesaid in the military service state), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid.
Know all of	Men by these Pr	my true and lawful attorney in fact, for ceipt for whatever amount of money I may be entired in the injury received as aforesaid in the military service state), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid. I have hereunto set my hand and seal, this
STATE OF Know all of me and in my nato from the State of the Confeders ing my said attuct nor, or for any su IN WITH	Men by these Pr	my true and lawful attorney in fact, for cecipt for whatever amount of money I may be entitled in of the injury received as aforesaid in the military service state), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid. I have hereunto set my hand and seal, this 1891.
STATE OF Know all of me and in my nato from the State of the Confeders ing my said attuct nor, or for any su IN WITH	Men by these Proceedings of Georgia by reason the States (or of this Symptom to receipt in my rum of money which my MESS WHEREOF, day of	my true and lawful attorney in fact, for cecipt for whatever amount of money I may be entitled in of the injury received as aforesaid in the military service state), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid. I have hereunto set my hand and seal, this 1891.
STATE OF Know all of me and in my nato from the State of the Confeders ing my said attuct nor, or for any su IN WITH	Men by these Proceedings of Georgia by reason the States (or of this Symptom to receipt in my rum of money which my MESS WHEREOF, day of	my true and lawful attorney in fact, for cecipt for whatever amount of money I may be entitled in of the injury received as aforesaid in the military service state), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid. I have hereunto set my hand and seal, this 1891.
STATE OF Know all of me and in my nato from the State of the Confeders ing my said attuct nor, or for any su IN WITH	Men by these Proceedings of Georgia by reason at States (or of this Street or feecipt in my rum of money which in VESS WHEREOF, day of the presence of us:	my true and lawful attorney in fact, for cecipt for whatever amount of money I may be entitled in of the injury received as aforesaid in the military service state), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid. I have hereunto set my hand and seal, this 1891.
STATE OF Know all of me and in my nat to from the State of the Confeders ing my said altro nor, or for any su IN WITH	Men by these Proceedings of Georgia by reason at States (or of this Street or feecipt in my rum of money which in VESS WHEREOF, day of the presence of us:	my true and lawful attorney in fact, for cocipt for whatever amount of money I may be entitled in of the injury received as aforesaid in the military service hate), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid. I have hereunto set my hand and seal, this 1891.
STATE OF Know all of me and in my nato to from the State of the Confeders ing my said altro nor, or for any su IN WITH	GEORGIA, Country Men by these Printer of Georgia by reason the States (or of this Street to receipt in my rum of money which in NESS WHEREOF, day of the presence of us:	my true and lawful attorney in fact, for cocipt for whatever amount of money I may be entitled in of the injury received as aforesaid in the military service hate), as stated in the foregoing affidavit; hereby authorize name for any Warrant that may be issued by the Governay be coming to me for the reason aforesaid. I have hereunto set my hand and seal, this 1891.

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Give	en under n	ny official			al, this			more	18
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1	N.						92.	7. · · · · · · · · · · · · · · · · · · ·	
	NSIO	EYEAR EXDING OCTORER 26, 180	lin	Relle	Ti.		. 81	N. H. HARRISON, Scending of Principle Departm	3
				10				0 17	4

SO

POWER OF ATTORNEY. STATE OF GEORGIA! Know all Men by these Presents, That I R. R. Trolow A. Flive County, State of Georgia, do hereby appoint my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of more 1893. RAKARINO [LS] Brecuted in the presence of us: R& Biavers Ordy Send money to me as follows, by P. O. County, Georgia.

For Applicants Herototone Allowed - fee and

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,
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· · · · · · · · · · · · · · · · · · ·
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously
since the day of May . 1842 that he enlisted
in the military service of the Confederate States (or of the State of the right
during the war between the States, and served as a Privale in Company
of 10 th Regiment of Jerry in Volunteers Branch
Brigade : that whilst engaged in such military service at the battle of lockor leres
in the State of 1/12 Chinish
nover where 1863 he was wounded as follows . About in the
no verentere 1863, he was wounded as follows: what in the right of outday, the book rangeines for more the opinion of puly 3/862 the second frieger on his left hourd wood on the which which which would frieger on his left hourd wood on the which would wood on the which would be of our the ordinary of the ordinary or
· a blum & breaking four sile tat and or Hellent
on July 31862 the war and frieger on his last hour word
that of which wound per timoneully & procheally render
off coul works to for form the ordinan mound avocaline
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and
the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of
Sworn to and subscribed before me this the \ PR Hoston
200 day of 120 all 1892.
R. C. Beavers Ordinary.
Note.—State fully nature of wound or character of disease which causes the disability; and explain particularly the
POWER OF ATTORNEY
STATE OF GEORGIA,
County,
Know all Men by these Presents, That I,
of .
County, in said State, do hereby appoint
of my true and lawful attorney in fact, for
from the State of Georgia by reason of the injury received as a forestid in the military receive
the Confederate States for of this States, as stated in the torrogoing affidavit, baseling and
or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal this.
day of1892.
Executed in the presence of us:
Executed in the presence of us.
and the state of t
DIRECTION.
Send money to me as follows, by
The second secon
P. O.
- County, Georgia.

For Applicants Heretofore Allowed Pension

and applicants heretolole allowed relisions.
STATE OF GEORGIA,)
Compbill County.
PERSONALLY appears N. R. Horton of laughbull
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 My 1842; that he enlisted in the military service of the Con-
federate States (or of the State of Story) during the war between the
of States, and served as a in Company of 10 th Regiment of States, and served as a volunteers of States, and served as a in Company of 10 th Regiment
and allies and the state of the
of Rem on the 2 day of Cale of 3
of Rem on the 2 day of ale 1863, he was wounded as follows: the middle finger of the left hour
was what of to at leidor letter ou 9 non
1863 he was short right over the right shoulder he
boll songing bown the spinol column of
preoring four rebs
m
X The First State of the Control of
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for
the year enting October 20, 1003. I have heretolore been allowed a pension of
Fifty Five dollars, for 1892
Sworn to and subscribed before me; this, the
1093.)
R. G. Braves , byly
NOTE—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA,)
Completel County
Rio B. A. Wh
R. R. No. Tan
The state of the s
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.
I further certify that Rb. Beovers
before whom the foregoing affidavits were made and power of attorney was signed, is a
Ordinory of said County, and the said affidavits and
signatures thereto are genuine.
Given under my official signature and seal, this 15 day of moreh 189;
R. G. Biewers Compbell County
Venon all Hear of these Ordinary ; Compatell County.
A Cast Cast
STATE OF GEORGIAN

Co	ounty.			
I,		hereby auth	orize	and the second second
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o receive and receipt for th	e pension paid	hereon and	request that	he remit same to
	b	у		
IN WITNESS WHERE	OF, I have her	eunto set my	hand and sea	al, this
ay of	1899.			
				[L. s.]
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Executed in blessence O. 2474 VALID P'S PENSION.	7	of Jungs	RICHARD JOHNSON, Commissioner of Pensions.	HANDED TO

County Oblim Disability Bud

SOLDIER'S

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receive and receipt for t	ne pension p	bv.	and request t	hat he remit
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JOHN W. LINDS

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No.750

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
Hampbell county.
personally appears R & Horton 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 &
day of May 1842; that he enlisted in the military service of the Confederate States of) during the war between the
States, and served as a Private in Company of of the Regiment
of offership Volunteers, dunb 's Brigade; that whilst engaged
in such military service in the State of Penelismany, on the 2 day
of July 1863, he was wounded, injured or diseased as follows:
out the battle of outtorsburg . Da. I had my
middle finger of my left hand and on the
19 day at october in the cedar crub Buttlein
and ranging down threating it ribs and
making me unable to do very little work atomy sort
Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Fifty fur \$ 65.00 Dollars, for the year 1808 from Hayett County
Sworn to and subscribed before me, this, the
25 day of January 1899. POST OFFICE Harrhum ofa
1 4 attachent alal'
Norz-State July the nature of wound or character of disease which course the diskutter
Nors-State rully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Teamphell County.
1 4 Atthews
do certify that the said County,
do certify that Vam well acquainted with the Aprilon 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
day of Lanuary 1899.
(AMX)
(here)
Ordinary O Gampbell County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County.
personally appears B. R. Horton 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 County, and has resided therein continuously ever since the
8 day of May 1842 that he enlisted in the military service of
the Confederate States (or of the State of) during the war be-
tween the States, and served as a Private, in Company J, of 10 th
Regiment of Surgice Volunteers, Simo, 's Brigade; that whilst
engaged in such military service in the State of Maginmited, of the 2
day of 1863, he was wounded, injured or diseased as follows:
At the battle of sullisburg I'm on July 2 -1843
was shot in the left hand shooting off my
middle finger of lest hand In the battle at
Cedar crub was shot with a minnie ball
over the right shoulder be boy and the ball
ranging down and breaking thry of my
rikes on the right side
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1900. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Thirty fine \$ 65.00 Dollars, for the year 1894 - DO
Sworn to and subscribed before me, this, the
2 4 day of February 1900. POST OFFICE Fairburn sha
1 4 2 OFT TILL
Juphens = ardinary
Norz.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
1. 11.10
Journal County.
I, J. Mephens Ordinary of said County,
do certify that Vam well acquainted with B. M. Horton 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 26
day of February 1900.
THE STATE OF THE S
J. J. Syappins
Ordinary Teamforcely County.

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POWER OF ATTORNEY

ALE OF	GEORGIA,				1	County
	Coun					
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For Applicants Herstofore Allowed Pensions.

STATE OF GEORGIA County

POWER OF ATTORNEY.

		County.		•		
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OODE ALREADY ENROLLER.)	DISABLED	ISOS.	Regiment 10 cm	1/27 198	W. J	M.
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THOSE ALREADY ENROLLER.) No. 609	DISABLED	DIER'S PENSION 1902.	Court be ce	1,5 % 5 1100	JOHN W. LINDSEY, Commission of Protein. WARRANT HANDED TO	M
DR THOSE ALREADY ENROLLER.) No. 609	DISABLED	1902.	County Court by a County County Regiment 10 tts	int, 5 % //2 // 1902	W. J	All

STATE OF GEORGIA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEO	RGIA,		
Com flee	County.	140	
	R.A. Horton	of Com 6	ben
County, State of Georgia, wh			
and resident of said State, an			
day of May	1842; that he enlisted i	n the military service of	of the Con-
federate States (or of the Sta	ate of Ja) during the war b	etween the
States, and served as a	in Co	mpany Z, of 10 th	Regiment
		_'s Brigade; that whil	st engaged
in such military service in th		, on the 2	
of frey	186 3, he was wounded, ju	njured or diseased as fo	llows:
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	ation for the pension to wi		vear end-
ing October 26th, 1901.	I have heretofore under	said law as a re	sident of
Comphe	County be	en allowed an invalid	
Fift Five	Dollars, for the	vear 1900.	. ,-
Sworn to and subscribed	before me, this the	RICH	ordon
2 3 day of J	2 67 1901, Posto	fice Lair an	
W. S. M - L	min any		7
NornState fully the nature of	the wound or character of disease wh	ich causes the disability, and	explain partic-
ularly the extent of the disability resul			
STATE OF GEORGIA			
Com & bus			
1. M. S. M		Ordinary of sai	d County
do certify that I am well ac	nainted with OR 12.	26 4	the
applicant in the foregoing affi	davit, and am well satisfied	hat the statements wa	
in his said affidavit are true,			
and that he resides in this Co			
	nder my official signature ar	dead this 2 9	
	4	u scal, IIIIs	
day of	1901.	sure	·-
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acal here	Ordinary Ca	- force	_County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Campbell County.
Personally appears R. R. Horton of Com phee
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 Moy 1842; that he enlisted in the military service of the Con-
federate States (or of the State of Ja) during the war between the
States and served as a by water in Company of the Regiment
of
in such military service in the State of the day , on the day
of 186, he was wounded, injured or diseased as follows:
I had the widdle ginger of left bound short off by
a Minuis bors while in service at forthe y tilly
ferry; and 19th day of Oct 1864, I was shal in very.
right thousand by a Uliming toll while in series
of foculary Cadel Court, soil boll roughed down
by other y of si bo of ling removed forme book the rieva Hid ways
se occornet fitere wounds I coul some support of loter
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 1 RR Hollow
M. Sue day of love 1902. Post-office
Nove.—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.
Campbee County.
I. M. S. lice for in Ordinary of said County,
do certify that I am well acquainted with R. N. Not Tour
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this day of 1902.
day of faring 1002.
and here
Ordinary County.
Norz.—Fill all blanks and of Company and Regiment. Norz.—All vouchers and affidavits must bear date after January 1, 1902.

FOWER OF ATTORNEY

POWER OF ATTORNEY.

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o receive and receipt for the	pension p	aid hereon	and requ	est tha	t he ren	it same
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ay of	_1903.					
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POWER OF ATTORNEY.

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o receive and receipt for th	e pension paid l	ereon, and rec	uest that he r	emit same t
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	Z. 19 1	2 1/2	4	F M B
DIER'S PE	0 7 6	1 7 4	7 4	E 30

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Complete County.
Personally appears R. R. It or tou of Compbee
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 . May 1842; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Private in Company I, of 10 th Regiment
of You Volunteers, Survey 's Brigade; that whilst engaged
in such military service in the State of Parson
of 186 3, he was wounded, injured or diseased as follows:
I led my widdle frigger shot if it buff
hond, and in the , at force I cutox
Gun Il on Och 19, 1864 I was to hat
girst rout right & decenter, sois & hort
mend song it downword, brooking four
sito to inquiring my ofice. One or count your
would do of a wot oble to so order on through tobox
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 RR Hoslon
day of Je 1903. Post-office Land burne Ta
Mr. S. Me Lorie, Ordy
Norz.—State fully the nature of the wound or character of disease which causes the disability and emigin
particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Care pleer County
I M. S. We Lone Ordinary of said Country
m n n 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
day of facily 1908.
In I the Suc Lore
Some Some Some Some Some Some Some Some
Ordinary County.
Note.—Fill all blanks and of Company and Regiment.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

The same of t
STATE OF GEORGIA,
County.
County
Personally appears I. P. It or love of Com plece
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 200 ay 18 ; that be enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a fine ty in Company I', of 10 th Regiment
of Volunteers 's Brigade; that whilst engaged
in such military service in the State of day of he was wounded injured or despread as follows.
I was wounded, injured or diseased as follows:
hand at boute of Lugadury come in com
good left finger - and in va ach
119,186 x of house enfor hour & I was
That by a minimi have just ofor mile!
thouser, mining down words brog inc
4 rubs - Soul wound muchage we we fet for
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1904. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1903.
Sworn to and subscribed before me, this the
18 day of Jony 1904. 1 - Charlon
M. Sie Land Ordy Post-office I am
Norz.—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,
I, M. Su Zarus Ordinary of said County,
do certify that I am well acquainted with Or. Or. Of or
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
(All your Jane
Ordinary County County.
Note.—Fill all blanks and of Company and Regiment.

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

Note.—All vouchers and affidavits must bear date after January 1, 19

POWER OF ATTORNEY.

at.	WITNE	I, receipt for		·)	_byito set n			that he		e to
	Execut	ted in the j	presence	of						s.]
CODE SECTION 1200. (FOR THOSE ALREADY ENFOLLED.)	No. 4/62	DISABLED DISABLED	1905.	R. R. Herlow	county Gam posent	sisability 12 count of the mount, s. of J. 2.0	1/25 1995.	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO	The Passacial Pleating and Publishers Co., Arturra date. W. Maningor, Manager, 10th State Princes

POWER OF ATTORNEY

of	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	Count					
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this					nere	by autho
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this of1906.	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this						
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this of1906,	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this						mit same
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this of1906,	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this		by				
of1906.	of						
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of1906.	of	In WITNESS WHEREOF, I have I	ereunto set	my hand	and seal, t	his	
	[L		a .				
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	생활하다 그 내가 되는 것이 되었다. 이번 경기를 하는 것이 없는 아니라 하나 있다면 하나 없어 하는 것이 없는 것이 없다.						· · ·
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Campbell G.
Cons Section 1200.

CON THOSE ALREADY ENFOLLED.

No. 470.

DISABLED

SOLDIER'S PENSIO

1906.

WARRANT HANDED TO

JOHN W. LINDSEY.

no Sate

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Campbell COUNTY.
Personally appears R. R. Horton 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
day of 1842; that he enlisted in the military service of the Con-
federate States (or of the State of 94) during the war between the
States, and served as a frick of the in Company "I", of 10 th Regiment
of Ya Volunteers Luce 's Brigade; that whilst engaged
in such military service in the State of Queen Ky Ket, on the 2 day
of July 1867, he was wounded, injured or diseased as follows:
foeth of feety about coursing doss of widdle
finger of soil left hand; out at bout of
ander fraill Va une Och 14, 1864 Juros
that a my right shoulder by a wine
boll which roughed down word to brothe
four redis this medicing we unfit for amount boton
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1905. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
July From Dollars, for the year 1904.
Sworn to and subscribed before me, this the RR Horland
MSul Form Ordy Post-office For by
Norz.—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.
The state of the s
STATE OF GEORGIA,
Compact county.
I, Mru Love Ordinary of said County.
do certify that I am well acquainted with RR A Ar Low
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of 1905.
(AME)
Ordinary Complete County.
Norm.—Fill all blanks and of Company and Regiment.
Nors.—All vouchers and affidavits must bear date after January 1, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Campbell
County.
Personally appears R. R. Hor tow of Comp bell
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 18/2; that he enlisted in the military service of the Con-
federate States, (or of the State of) during the war between the
States, and served as a front, in Company, of 10 th Regiment
of Volunteers 's Brigade; that whilst engaged
in such military service in the State of Pak Va on the 2 day
of 186 , he was wounded, injured or diseased as follows
I had the wind the fringer seent off of buff hours
of fouls of kereys bury, and of bourse of andor
Crue / ta ou det 19,186 & Iwas shat
in my let thousand by a wine toll
are one and of soid wounds it am
mund we oble to for form ordi-
may marine arms
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1906. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1905.
Sworn to and subscribed before me, this the
19 th day of Jarry 1906.
Moderation Ordy Post-Office Town our fa
Norg.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
State of Georgia,
County.
1 M. S. cu Conce Ordinary of said County
do certify that I am well acquainted with 16, R. A of tou
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
Given under my official signature and seal, this
day of lang 1906.
Mr. S. We dance
Affin County Come of bell County.
here County.

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

Nors.—All vouchers and affidavits must bear date after January 1st, 1900

POWER OF ATTORNEY.

ATE OF GEO	KGIA,		1				
**************************************	and the second s	COUNTY	.]-				
ì,		*			. her	reby authori	**
			- 5				
		01		***************************************			-
receive and rec	eipt for the	pension pai	d hereon, as	nd request	that he	remit same	to
	· · · · · · · · · · · · · · ·	by		1. 1		, · · ·	
In Witness W	HEREOF I h	ave hereunt					
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(E0)	NOR	11/2	organ Hillinger	7.18007.	Pensiona		
irollen	NSION		of the flee	1800.	r of Pensions.	Mark.	
EMBL(ED)	ENSION	touch	and or way follower	3.5 1007.	SEY, sioner of Pensions. IED TO	The Atlanta	
ADV EMPOLLED)	PENSION	of the	ment 10 th flee	13,000.	MUSELY, missioner of Pensions. ANDED TO	Phy Printer, Atlant.	
LIRADY EMPLED)	S PENSION	Norton	Pround & core of Caryes	/	Commissioner of Pensions. HANDED TO	CA MANTEL ALLAND.	
SARIED	R'S PENSION	1. Non tou	Regiment 10 mm flee		W. LINDSEY, Commissioner of Pensions. ANT HANDED TO	CH Manner Allana	, ·
- 11	ER'S PENSION	1. Noston	Regiment 10 mm flee		Ommissioner of Pensions. RRANT HANDED TO	CAP MANNER ATLANTA	*
No. Suf	DIER'S PENSION	a. R. Norton	Regiment 10 mm flee		. 0	CH . Liamon, strat burres, Atlana.	<i>+'</i>

Audited March 9 1889

Maimed Soldiers.

Voucher No. 100 H

Amount & 55.

Paid to R. R. Horter

For Right, arm desablat

I for so gove Funger

Heby 28 1889.

Included in Warrant No.

. 00.

VARHANT CT PH

W. J. Campbell State Printer Constitution 1 1 1 2

AfmerBrite

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

The state of the s
State of Georgia,
Campbell county,
Personally appears R. R. Forton of Complete
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 leay 1847; that he enlisted in the military service of the Con-
federate States (or of the State of - 1/4) during the war between the
States, and served as a free to in Company" ", of 10 th Regiment
of - Ya Volunteers Sur 's Brigade; that whilst engaged
in such military service in the State of Aun 14 Ta , on the 2 day
of Suly 186: 4 Oct 19 186 4, he was wounded, injured or diseased as follows:
I had win delle fing at shot of in Com fet, swowe
at toute y freezo bury, and at touch y ledor
ence Il I was shot by a wine bake . said
took should we over right show der yours
downwood & lodged wear my ofine -
An ore out your wounds down with
for Ordinary mound lotor
Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Fifty I was Dollars, for the year 1906.
Sworn to and subscribed before we ship shall D D //
14 day of Jany 1907. 1. Hallord
W. L. W. Lorice, Ordy Postoffice Land burne Ja
Nove State full- the nature of the angle of the state 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.
loan blet
County.)
I, Ordinary of said County,
do certify that I am well acquainted with 1. 1. It of tock
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 1907.
Tr. s. W Janu
Att your Cours bell a

No. 475

STATE OF GEORGIA, EXECUTIVE DEPARTMENT. & Allanta, Ga. Hebry 2.8 1884 Mr. R. Horlon of the County Cucie bell having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act Dec. 24, 1888, and the same having been allowed for Right Um Disable & Sous of One Frieger for such disability, the same being the former the for the year ending October 24, 1889. The Treasurer will pay the same to hold his receipt on this voucker, and return same to Executive Department for warrant. By the Governor Humson CLERK EXECUTIVE DEPARTMENT Received of State Treasurer, R. U. Ha...

Fifty fine 40 at
per above voucher, this 98 of Hebry 1889.

R. R. Hortone
by a Michael ally

your seal here. Confederate

Confederate

Confederate

Soldier's Application.

UNDER ACT 1910.

Company "I"

Com

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

County.
R. R. Horton of said State and County, hereby applies
for the pension provided by Act of 1910, to Confederate Soldiers and submits his successful to
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:
propounded, answers as follows, to wit: 1. What is your name and where do you reside? (Give County and Post-office). R. R. Horton.—
In Union City, Campbell Co. Ga. P. O. address Union City, Ga.
2. How long and since when have you been a continuous resident citizen of this State? 70 Years, or
from May 8, 1842, the date of my birth.
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State
from 1861 to 1865? In the Army of Confed. States.
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class
of Service) June 1861 at Fairburn, Ga., Co. "I"-10th Ga.Reg't. Infan'y.
5. How long did you remain in the actual Military Service with said Company and Regiment?
(Cive date of discharge)about 41 months, or from June 1861 to Dat. 19, 1864.
0. When and where was your Company and Regiment surrendered or discharged from the Service?
Can't may positively, as I was at home on wouned furlough when gen'l Lee surrenderd
Were you actually present with your Command when it was surrendered or discharged? No Sir.
8. If you were not actually present, state specifically and clearly where you were. I was at home on
wounded furlough- was wounded Oct. 19, 1864, furloughed and was never
Where was your command when you let it? O days furlough was expended extended.
At Ceder Creek, Va., where I was wounded Oct. 19, 1864.
b. When did you leave the Command? Oct. 19, 1864- wounded.
c. For what cause did you leave? Wounded
d. By whose authority did you leave? Brigade Seargent (Dr. Knott)
e. For how long was your leave granted? In what way? Was given a written furlough for
for 60 days from Hounttel
f. Why did you not return to your Command after leave expired? Purlough extended
In what way were you prevented?
h. What effort did you make to return? Surrender came before expiration of my ex-
i. Were you captured during the war? No Sir.
and the state of t
j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself
and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) None at all, except
some H. & K. furniture, worth about \$100.00
A STATE OF THE STA
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov.
1908. To whom and for what price? None.
11. What property of any description of any kind, and of any value now owned and in the user
possession and control of yourself and wife and its cash value? (Make itemized list).
H. & K. furniture, worth about \$100.00
12: What annual or monthly income or earnings of yourself and wife and the source derived have
out Nothing except my Pension of \$55.00.
13. Are you drawing a pension of any amount from this State or the United States? Yes Sir. From Ga.
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
ot allowed? No Sir.
ot allowed?
Sworn to and subscribed before me, this the
dayof, 191
Mr J. M. Zoren Ordinary
of Campbell County.

QUESTIONS FOR WITNESS AS TO SERVICE

STATI	E OF GEO		County			5 50		
P	1		County.				计对称 型	
4	u . 1	C	~ ·	DE	of said State	and Count	y is hereby pre	ented
as a with	ess in support	of the appli	cation of	ocal,	tore.	for t	he pension pro	ovided.
	s follows:			H. Pri			uestions propo	unded
1.	What is you	name and	where do yo	u reside?	Ra	Re	1	
70	ayett	i Cu	一天	Po	Jane	ance	· 2.	
							the appl	icant?
	· · ·							
	how do you						uing resident i	n this
Non	· Acan	Rei	- ofe				4576	y.
							enlist o	luring
	1861 to 1865?							
5.	How did you	obtain your	information	of this Ser	rice? ?	20 %	veren	
6.	How long wi	thin your or	vn personal	knowledge	did he perfor	m actual r	nilitary service	with
this Comp	any and Regin	nent? (give	date) Liu	Tie he	mac	row	est in 1	86x
						(give date	and place)	
app	mid	To C		74	~			
8.	Were you per	sonally prese	nt at the Su	rrender? 2	an	ut y	your	_
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	- m						2	
	Was the appl							
ila	If not where	ras he and he	w came hin	there?	land months		4-5-4	opuno
	When did he				× / 184	apinaguni.	re was his Com	· L
12.	When did he	eave his Con	Amand 7		and the same of th	SAT. Whe	re was his Com	mand
when he le	16 167	W	T. See 1. 150.	lor what	suse did he le	ave?	and and	und new
	By wh	ose authority	did he leav	0 000	7	-~-	How do you	l how
	u have stated							know
I m	u nave stated t	o be truer.	or your ow	n knowledge	A - G	and specific	Z Zuld 7	-0
	In what way							K. No.
How do ve	w.know? #	- K-)	2	rearrang to a	- 1 Z	-	しるか	The state of the s
14	What effort d	d he make to	return to h	de Command	and how do	on know?	Market Milaton	CONTRACTOR OF THE PARTY OF THE
7	one -	me	4 em	iare	2 7	4	2-4 5	6
	Was applican							
	In what					9月5日東京	and when rel	eased
Swo	orn to and sub	scribed before	n me, this	the) P	11		9.0	
14	day of	00	191 2			w		
and with the co	113	Lin	· .	Ordina	9,			经 外的公
	CHANGE OF	1925年7月	1 7	fitte	100	County		

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Gamphell County.

says	hat they are freeholders residing in said County and we know R. R. Harton,
the a	pilicant for pension and we know the property that is now in the use, possession and control of hims ife and of its each value to wit: (Make List by items and value).
H. 6	. K. furniture, worth shout \$100,00 (not over that much)
19081	What property, if any, has been sold or given away by the applicant or his wife since 4 No (State is fully by items.). None.
	2. When and to whom was it sold or given to?
	3. What was the price paid or stated to be paid?
	4. What relation is the party to applicant?
	5. What disposition was made of the proceeds of the sale?
or wa	6. Westhe disposition of this property made in good faith and full values?
	Sworn to and subscribed before me, this the
	It & the Lopus 1012 Ordinary & Wishelberry
	of Campbell County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,	inty.
1. If Sue Lor	Ordinary of said County, certify that I know
said County. That I also know	ension is the person he represents himself to be and recides in
	who are freeholders, that
The state of the s	their statements are entitled to full faith and credit. That the
value for tax is in 1908 \$/0/	for 1900 \$ /0.3 00 for 1910 \$ // 6
Sworn under sy hand and official	
	of County.

NOTISE 1. Refere any questions are answered the Ordinary shall swear applicant and all witnesses in the following word:

"Out for lookingly west that you will true asserver make to sask question asked you and the avidance you shall give shall be the whole truth; so hip you doe."

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

8. All affidavite must be made before the Ordinary and certified by him.

4. If applicant has no property at all in his passession, use or control of self and wife, affidavite of freshelders unnecessary.

NAME, Horton R. R.

YEAR 1890 COUNTY Campbell

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

RANK. Private -

COMPANY AND REGIMENT? Co I, Regt. Ga. Vols. Bryant's Brigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Cedar Creek Va. Novmeber 19th. 1863. Shot over the right shoulder ranging down the back bone, lodging near the kidney.

CAPTURED, WILEY AND WHERE AT

RELEASED .

WHEN AND WHIEL SUPEL NICEED?

IF NOT PRESENT AT SURREIDER, WHERE WERE YOU?

DIED, WHEN AND WALKE?

BURIED.

WITNESSES. None.

Audited 1891.

COMPTROLLER-GENERAL.

Campbell

1891.

Maimed Soldiers.

Voncher No. 2105

Amount & 196.

Paid to RR Horton

For Di'am &

Wet If guige

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

apple and ;

Atlanta, Backleh H 1891. STATE OF GEORGIA. EXECUTIVE DEPARTMENT. Mr. Robert R. Horten of the County of Campbell having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for De'd arm of for of one friger He is entitled to receive the sum of Frifty Decree Dollars for such disability, the same being the allowance do for the year ending October 24, 1891. The Treasurer will pay the same and hold his esceipt on this voucher and return same to . Executive Department for warrant Al nonhing MANumser EXECUTIVE DEPARTMENT. RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia. Hifly die per above voucher, this # of eller of 1891.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WEERE?

RANK:

COMPANY AND REGIMETT? Private Co. I, 10th. Regt. Ga. Vols. Bryant's Brigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Cedar Creek, Va. November 19th. 1863. Shot in top of right shoulder, the ball ranging down the spinal colum on the side lodging near the kisney breaking four ribs. CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SUT KENDERED?

IF NOT FRESENT AT SURREIDER, WHIRE WERD YOU?

DIED, WHEN AND WHIRE?

BURIED.

WITNESSES. J.W. Rivers, J.J. Buffington and John L. Camp. No data.

Campbell Maimed Soldiers. Voucher No. 889

COMPTROLLER-GENERAL.

Audited

Amount & 53

Paid io R R Horton

Stas / finger Stais by body mound Stelly // 1891

Included in warrant No.

issued to Treasurer.

WARRANT CLERK

applicant

NAME - Horton, R. R.

YEAR 1913 COUNTY Campbell

May 8,1868, Georgia, a resident for 70 yrs. WHEN AND WHERE BORN?

June 1861 at Fairburn, Ga. ENLISTED WHEN AND WHERE?

RANK:

COMPANY AND REGIMENT?

Company I. 10th Georgia Regiment Inf.

NAME OF CAPTAIN AND COLONEL?

Wounded Oct.19,1864 and given a 60 day furlough. Left my command at Cedar Creek because of wounds. WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? Witness states: Appomettox C.H., Va. (does not state when).

IF NOT PRESENT AT SURRENDER, WHERE YERE YOU? At home on wounded furlough -surrender came before expiration of furlough.

DIED. WHEN AND WHERE?

BURIED:

WITNESSES: R. A. Rivers - same command

No data.

STATE OF GEORGIA. EXECUTIVE DEPARTMENT.

RR Horton

of the County

Campbell having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act,

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

He is entitled to receive the sum of Jeff Hove

Dollars

for such disability, the same being the allowance due for the year ending October 24, 189

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

GOVERNOR.

By the Governor,

CLERK EXECUTIVE DEPARTMENT:

\$ 5500

RECEIVED OF STATE TREASURER, R. U. HARDEMAN

per above voucher, this

Dollars,

JULI Hoston

Ordinary's Certificate

Okudgens, In County		1 2 8 1 10	
Confederate Soldier's Application Under Act 1910—As Amended by Act of 1919.	97ES: 1. Erfers my quat "You do selemal yes give shall be the , 2. Additional affair A. All additional must be certified	Seem might my hand The Mary Hand of Commboll (SEAL)	i, No. So. Colorato he applicant, No. Wo. Etc enides in said county. Tha errice; that they are both re g affidavit and they are a
County Campball Name J. W. Hidgons Company "P" (st Conf dorate) Regiment 1st Conference Approved Colin W. Clark Approved Colin W. Clark	tion are asserted the Ordinary shall event applicant and witnesses in resure that you will true asserts make to each of the questions asket the truth. So help your God, "its may be attached if that spaces are issurfacion; the mode before the Ordinary of the county in which the applicant y such Ordinary.	and official seal of office hisOtth_day of	Ordinary of said Condigons, for pension is the person he reprist I also know P. Dodgon the said county and were duly sworn by me litruthful and trustworthy and their statements are
J. W. LINDSEY, Commissioner of Pensions. Byra Printing Co., State Printers, Atlanta.	the following weeds: d you and the evidence or witness resides and	1922. (unty, certify that I know resents himself to be and the witness swearing to the before signing the forego- e entitled to full faith and

Ordinary's Certificate

STATE OF GEORGIA,
Campbell COUNTY.
I, W. S. McLarin, Ordinary of said County, certify that I know
the applicant, .I W. Hudgens,for pension is the person he represents himself to be and
resides in said county. That I also know W. P. Dodgon the witness swearing 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
eredit.
Sworn under my hand and official seal of office this 20th day of Juke, 1922. (1922. No Later Lot
ofCounty. }

Confederate
Idier's Application
- As 1810—As Annoted by Ast of 1810.

Is Compball

Is Confederate

Ist Confederate)

Int. Lat. Confederate)

Int. Lat. Confederate)

Int. Lat. Confederate)

Int. Lat. Confederate

Ist. Confederate

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

Questions For Applicants to Answer

STATE OF GEORGIA,
C.a. w. p.b.a.l.l
J. W. Hudgono
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! (Give County and Post-office)J.W.Hudgens,
Reside in Campbell Co. Ga(P.O). Stonewall, Ga. R. F. D.
2. How long and since when have you been a continuous resident citizen of this State? 72 years,
or since Mov. 20, 1:42, except the year 1953 (one year)
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from
1861 to 1865; In Confederate Army
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of
Service) Sapt. 1. 1861 in Gamphol Go. Go. in Co. "D", (lat) lat Go. attallon; later Capt Rhodos CoCol will land Company and Regiment (Giv. 5. How long did you remain in the actual military service with said Company and Regiment (Giv.
late of discharge 5 months & 11 days from Sopt 29, 1831 to Mar. 4, 1802. Discharged Mar. 12, 1862. 6. When and where was your Company and Regiment surrendered or discharged from the Service?
farch_161862.at-MebileAle, we were all turned Lose
7. Were you actually present with your command when it was surrendered or discharged! Non Sir.
8. If you were not actually present, state specifically and clearly where you werePresent
a. Where was your command when you left itt . Lavar loft matil I was Alachargod.
b. When did you leave the command ! Rountposting answare
c. For what cause did you leave?Ranuiros no anavora
d. By whose authority did you leavetRaquiras no answer
e. For how long was your leave granted! In what way! Bequires no ensure.
f. Why did you not return to your command after leave expired! Bequipes no onswer.
g. In what way were you prevented t Requires no enswer.
h. What effort did you make to return ! . Baquiras no onswer:
i Were you captured during the wart Yes Sir
j If so, when, and where? In what prison were you held and when were you released?
ptured Aug. 1864 in Compbell Co. Co. Was commised to Represent the Atlanta Go. then Worth of Mile River the Office of the United States? HO SIR
10. Have you ever applied for the Georgia Pension and had it refused and for what cause it was
ot allowed 1 Kas Sir. Dan't know causa. Records in office of Com'r of Pensions
111 show more clarity that I can tall.
Sworn to and subscribed before me, this the In X Her dy en
9th day of July, 19 20 1 world
nothe form Ordinary)
County)

Questions for Witness as to Service

CERTIFICATE OF ORDINARY

	GIA, Campbell County.	, Ordinary of said County, do certify
	now Mrs. Margaret A. Hudgens	am antincial
	w of Joseph W. Hudgens,	
the Pension Roll	of said Campbell	County, and was paid'
a Pension from	Sampbell "	County for 1929 , and at the time
of his death on the		there was due to
for & Of 1 of Georgia, and I i	st qr., 1930	Dollars from the State
CONTROL OF THE PARTY OF THE PAR	of a truthful and trustworthy character and y hand and seal this 14th of March,	
	al of Ordinary)	We Fories Ordinary
	Campb	County
CAMPBELL County	Application for Pension Due Deceased Soldier (UNDER ACT 1891) (To be paid to his Widow) BY Mrt. Mrs. Margaret A. Hudgens. Widow of Joseph W. Hudgens. Dry of Marines July 8, 1866	Approved and ordered paid Asserting the del'. Lawre nee Markettatt. R. del'. Lawre nee Markettatt. Commissioner of Persions. Ordinary: Rill out above in full and send this blaim to Pension Department for approval before you pay out the mosey, and then return it with your pay-rolls for permanent filling in the Pension Department.

Application for Pension Due Deceased Soldier (To Be Pald to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Cam	pbell County.
Personally before me, the	Ordinary of said County, comes Mrs. Margaret A. Hudgens,
of said County, who after being	g duly sworn, on oath says that she is the widow of Joseph W.
and that said Pensioner was	on the Pension Roll of Campbell County
and was paid a Pension of	Fifty (\$ 50.00) Dollars
	Quarter, 150, and that the said Pensioner died in Campbell inty on the 6th day of March, 1950.
Applicant further swears that	she married the said Joseph W. Hudgens,
	July , 18 66, in Campbell County and
State of Georgia	and resided with him from the date of marriage to his death as his
	ependent widow, and she asks that the 2nd Qr. Pension, 1950
Sworn togand subscribed by	before me this 14th day of March, 1930.
Campbell .	County mangarel A & ddudgases.
(Seal of Ordin	ary) made
STATE OF GEORGIA, Personally before me com	County. County. County. County of marriage license was), who filed with application for this pensions in life
on oath says that he knew	in office of Pension Commissioner.)
and that he knows Mrs.	, the
above applicant; and knows tha	
and	were in due form of law married in the County
of	in the State ofon
theday of	, 18 , and that they were residing
together as husband and wife a	at the time of his death on the day of
<u> </u>	, 19 and that she is his dependent widow.
Sworn to and subscribed b	pefore me thisday of, 192
	, Ordinary
(Seal of Ordin	ary)
	INSTRUCTIONS

2nd. Do not use the enormously large form of marriage certificate in common voque throughout the State, suitable only for framing the certificate is entirely too bully for use in any pension application. A plain certificate written on the back of the copy of marriage common voque throughout the state of the copy of marriage the large transmission of the copy of th

INSTI

ies. Proof of marriage must be made.

In the common vegue throughout the State, saisable only for framing the common vegue throughout the State, saisable only for framing the state of the copy of the state of the copy of marriage certificate in common vegue throughout the State, saisable only for framing the state of the copy of marriage common the state of the copy of marriage common to the state of the copy of the common vegue that the common vegue throughout the state of the copy of the common vegue throughout the state of the common vegue throughout the common vegue through the common vegue throughout the common vegue throughout the c

This is certify the & him Examined.

Mr. M. H. Lymn of gind he has a
Batille Luguines Herrica (Profiture).

I believe from states during the

Was according to his Statement.

In Thomason M.S.

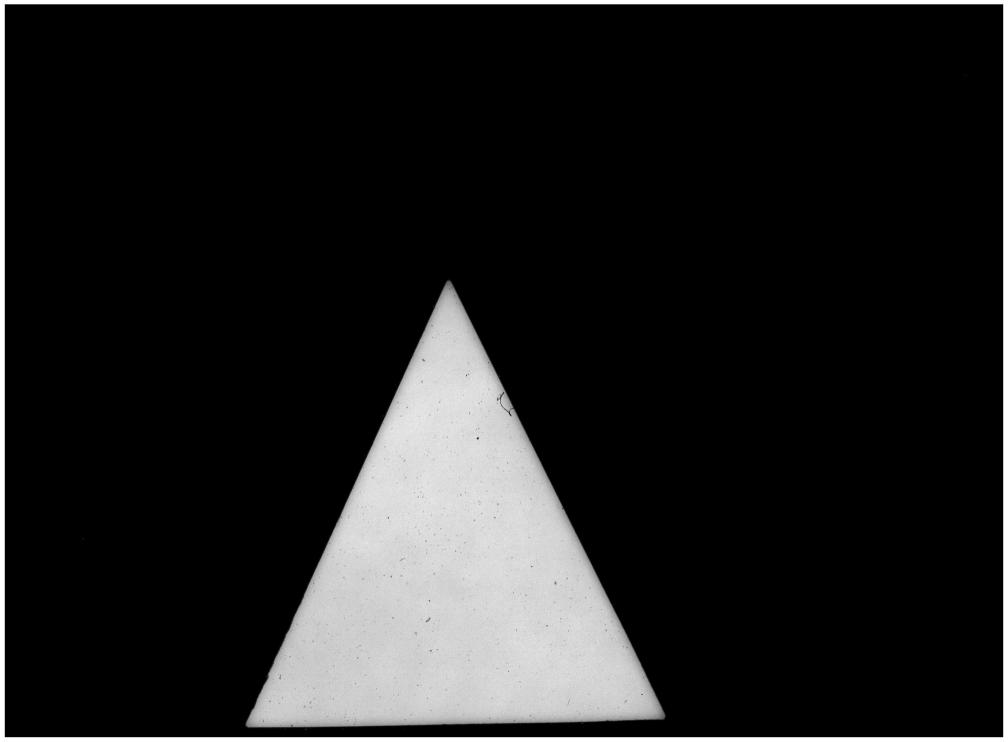
Georgia, Campbell County.

Before me, the undersigned Ordinary, this day personally came Dr. J. W. Thomason, of said county, who is personally known to me to be entirely trustworthy, and whose statements are entitled to full faith and credit, and who has been duly sworn, who, after having been duly sworn, says that the statements made in the above and foregoing certificate are true and correct.

Sworn to and subscribed before me, this July 5, 1922.

malle for in , ordinary of

Campbell county, Georgia



		LICATI
To Be Pui	on Roll in Her and Was on the of Georgi	Pension Ro
County	Campbell	
	argeret A.	Hudgens.
idow of	Joseph W.	
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mpany	1st Conf.	1. 4
	sband's Death	
	arriage July	CONTRACTOR OF THE PARTY OF THE
	Ride J. Sa	
Jensio	n Commis	stoner
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irg.		W. CLARK

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Campbell ----

W. S. McLarin, - - - -COUNTY.

and credit. averiage, and that beek the foresping ware duly sworn by me before signing the accretize affi-she is the interest of the state of the January 1st, 1920; that I also know. January 1st, 1920; that she , the water know Mrs Margaret A. Hudgens, she represents herself to be, and that she is continuously a bona fide resident of said County since , the applicant for pension; that she is the person Ordinary of said County, do certify that I

Given under my hand and official seal of office this 11th day of March, (SEAL OF ORDINARY)

Campbell

3-12-30 6

1831	N I		9	9 3 1	4	1 No
Sylf 2 Complete.	WIDOW'S APPLICATION To Be Pet on Roll in Rev Own Right Wass Husbard Was on the Pension Roll of Georgia.	County Campbell Name Margaret A. Budgens	Widow of Cought and Company Regiment of Conference Conf	Date of Marriage July 8, 18 66 Approved Of the Leavence	org. notified	JOHN W. CLARK, Commissioner of Punion 3 - / 2 - 30
عاديات	S API	County Gamphell Name Margaret A.	t Con	KALL Commi	Os g. net fied	Ourminatorer of P
36	DOW.	ty Cam	w of work from the first from the fi	of Marris	4	00
38	B 8	Coun	Wido Comp Regil	App App	1 6	

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STATE OF GEORGIA,	
Campbell	COUNTY.
1, W. S. McLarin,	Ordinary of said County, do certify that I
	ons, , the applicant for pension; that she is the person
she represents herself to be, and that	she is continuously a bona fide resident of said County since
January 1st, 1920; that I also know	SEEE PLANT THE SHE , the witness work
magrians and that both the forespin	g worke duly sworn by me before signing the manushine affi-
davits, and that there ere truthful and	trustworthy and their statements are entitled to full faith
	i trustworthy and their statements are entitled to full faith
and credit.	seal of office this 11th day of March, 1920.
and credit.	seal of office this 11th day of March, 1980. While Force Ordinary,

- INSTITUCTIONS.

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

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

 3. All affidavits must be made before the Ordinary of the county of residence.

 4. Only widows who are married prior to first January, 1881, are entitled.

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

-4064

State of Georgia,) To any Minister of the Gospel, Judge, Justice Campbell County. of the Inferior Court, or Justice of the Peace. or any other person authorized to celebrate;

These are to authorise and permit you to join in the honorable state of matrimony, Joseph H. Hudgens and Mars Margarett A. Dodson. according to the Constitution and Laws of this State, and this shall be your aurhority for so doing. Given under my hand as Ordinary for the county aforesaid, this 6th

day of July, 1866.

R. C. Beavers.

I hereby certify that Joseph H. Hudgens and Margarett A. Dodson were joined together in the Holy Bans of matrimony, by me, on the 8th day of July, 1866.

James E. Lee. J. P.

Georgia, Campbell County.

I, W. S. McLarin, Ordinary of said county, certify that the above is a copy of the record in this office.

Witnessmy hand and seal of office, this March 8th , 1930.

no un Lovie, ordinary,

Campbell county, Georgia.

Georgia, Campbell County.

Defore me, this day personally came Mrs. Margaret A. (Dodson) Hudgens, personally known to me to be a credible lady, who, on cath, says that, in the above License, and Certificate, the names of her decassed husband should be "Joseph W. Hudgens", instead of "Joseph H.

Sworn to and subscribed before me, this March 1, 1939 work

ms lle Lorie . Ordinary.

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia.

STATE OF GEORGIA,	
Campbell COUNTY.	
Personally before me comes Mrs . Margaret A. Hud	gens of said County,
who, after having been duly sworn, says that she is the widow	of Joseph W. Hudgens,
to whom, in the County of Campbell State of Ge	orgia, she was married on
the 8th day of July, 1866, and that she remained	그 그는 이 이 아이를 하는 것들은 사람들이 되었다면 하는데 하는데 하는데 하는데 이렇게 하는데 없다면 하다.
the date of his death in Mar. 6, 1930, 28 and that she	has not since his death remarried; at
the time of his death he was a resident of Campbell	County, in said State
of Georgia, and he was on the Pension	Roll of the State and paid a pension
of \$ 200.00 in Campbell County for 1929, (per any	num), on account of being a soldier in
Company	(Volunteers or State Militia),
That she is now a bona fide resident citizen of said State of	
has, continuously, resided there since day of	1866. 19/266
Sworn to and subscribed before me, this the	
11th day of March, , 19 30.	his
of Campbell County.	a and A. x Id. doe
, Ordinary	(Applicant)
of Campbell County.	write
(SEAL OF THE ORDINARY.)	
Affidavit of Witness to Prove Triage, and D STATE OF GEORGIA,	Ate of Death of Husband.
Personally before me comes	known to be
a responsible and truthful person, residing in said County, wh	
that of deponent's own personal knowledge, Mrs.	, who made the foregoing
affidavit, is the lawful widow of	who died in
County in said State of on the day (
and that she has not since remarried; that she became the wi	
the day of ,18 ; that she and	
and wife, continuously, since day of	
was the same man who was on the pension roll of said State	
County when he died.	
Sworn to and subscribed before me, this the	
day of 19 19	
, Ordinary	The second secon
ofCounty.	

(SEAL OF ORDINARY)

(SEAL OF ORDINARY)

No. 1022 Application for Allowance Seftley aciabled
Applican D. M. Huggins
county Gampbell Amount DS Date of Warrant Clay 31

NOTES.

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

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

2. The law makes no allowance for a crippled hand, nor for a crippled foot, nor for an arm or leg, unless the arm or leg has been rendered substantially and essentially nucless.

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

all purposes be "substantiany and essentially isseres."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch

or stick, that the leg is not "substantially and essentially useless."

5. It is more difficult to say when an arm is "substantially and essentially useless." The words are strong ones, however, and the injury must be very severe, and the arm in a badly damaged condition to entitle one to the allowance mentioned in the Act. The Legislature intended to limit these payments to such as were most seriously wounded and disabled. In the future they will doubtless provide for all who were badly injured, but the present law does not reach many worthy, needy cases. It was inaugurated as an experiment; if abused, it will naturally become unpopular and be repealed. If properly administered, will do great good.

6. If papers are returned for correction, and amendments are added to any of the affidavits, the

amendments must be made under outh before an officer, and the proofs must show that the amendments

have been duly sworn to.

7. The Ordinaries know the condition of applicants better than the Governor or his Secretaries. and they are earnestly requested to discourage any man from making application unless he is entitled under the law. Hundreds of applications have been received and disallowed because they were not disabled so as to entitle them under the law. This entails much unnecessary work upon this office ; it causes delays in making payments to those who are entitled; it puts parties to expense and trouble, and in the end causes better disappointment and mortification.

8. Every application must be certified by the Ordinary of the county of the residence of the appli-

The certificate of any other will not be received in any case.

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



T STATE OF GEORGIA,
With County.
PEHADNALTY CAME D. S. Staggin, J. M. Browner
and John Bugh
citizens of Campbell and intere country in said State.
who, being duly sworn, say that they are acquainted with . Will Hugging
and know that he received the wounds (or contracted the
discusse) in the military service, as stated by him in the foregoing affidavit; that said wounds (or
disase) permanently disables applicant, as stated by him; that said applicant is a bona fide citizen of this
State, and resides in Cong county, and we are well satisfied that all the state-
ments in his affidavit are true.
Sworn to and subscribed before me, this
1 day 16 100 1888/
Will asure of gon laroungand
with add it is a force that
NOTE Above affidavit mist be made by three citizens of the country of polician's residence.
STATE OF GEORGIA,
County.
RERSONALLY comes before me
and (Davenjest) , both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that they have
carefully examined and after such examination say that the
applicant has been injured as follows: The liver Short they a Mirinice
Isull, Levice, In the teft hip, to test thigh
the Bone treing Broken wear the faint.
Which rendered said the Substantially & gamilially
welf, Having to dere a stick all the hims
in wacking turking, Both Ball, are Still
Sworn to and subscribed before me, this of A Mathey de 2 2 and day of May 1889 & Sawillpointiled
2nd day of May 1889
Blog and a second per trick
. Oi. C. Stavers

NOTE.—The physicians will state fully

STATE OF GEORGIA, County.	
I. R. G. Geavers	Ordinary of said county,
do certify that I am well acquainted with J. M.	Huggins the
applicant in the foregoing affidavit, and am well satisfied that t	the statements made by him in his said
affidavit are true, and I know he is the individual he represent	ents himself to be, and that he resides in
this county. I also certify that the foregoing witnesses are p	
statements are worthy of full credit and belief.	
I further certify that Red. Reacers officent of they seemed affidavits were made and power of attorney was signed, is a	before whom the foregoing
of said county, and that the said affidavits and signatures there	200 (190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190 - 190
Given under my official signature and seal, this	day of July 1885
	n le Bravers
	y Carry bell County
Ordinar	ry County.
POWER OF ATTORA	NEY.
STATE OF GEORGIA,	
County.)	
Know all men by these presents, That I	
of	
county, in said State, do hereby appoint	
	my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amoun	
State of Georgia by reason of the injury received as aforesaid	
erate States (or of this State), as stated in the foregoing	
attorney to receipt in my name for any Warrant that may be is	ssued 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

[L. S.]

STATE OF GEORGIA, bampbell County. PERSONALLY appears O. M. Bluggins of Carrisbell county State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such since the Ast day of Securities 1863 1 that he enlisted in the military service of the Confederate States (or of the State of Seorgia during the war between the States, and served as a Diceate in Company 6 of 45 th Regiment of Georgia Volunteers Reynold & Brigade : that whilst engaged in such military service, at the battle of Wakers Oreck the State of Missiffer , on the 16 day of Mary 1863, he was wounded as follows: Dhot in the left kep, through the Joint, the boll is still in my hits toport by a mining bale in the left though the ball going in on the front port of left thing a + breaking the bone, + I bayeing, in b, mean the moin a long & course, That Depoints by is out lawielly & secutially uses a stiage all the time introcking connect places, Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder. 2 Syorn to and subscribed before me, this the day of May 188 81 Rle. Beavers Ordinan Note. State fully nature of wound or character of disease which causes the disability, and explain particularly the extent COMMISSIONED OFFICER'S AFFIDAVIT. STATE OF GEORGIA, County. Personally came before me State of Georgia, who, being duly sworn, says that he was

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

No. 1437

APPLICATION FOR ALLOWANGE

FOR YEAR CHOMA.

Applicant. On the County

Amount. OT.

Date of Warrant. March.

Butered on Record.

Entered on Record.

Entered on Record.

County Entered on March.

Entered On Ma

STATE OF GEORGIA,

County County

STATE OF GEORGIA

PERSONALLY appears & M. Auggins 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 been such continuously since the 15 # 1831; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a in Company 6 , of, 45 th Regiment of Lecroqua Volunteers Reynold 's Brigade; that whilst engaged Boster levest in such military service, at the battle of on the 16 day of may State of Miss wounded as follows: Shot in left hig & which those suleying at facilor hip + fractioning the bought the bale is still This flets, also at around them please, Shot in last things about 3 or y wells below the grows the ball is still vis his charge, a long meine bole, from the effects good wound This leg hos been rendered publicationly of executionly welling and requires constant use of a stick in walking about

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

Sworn to and subscribed before me, this the 16 day of more h 1884

S. M. F. Hug pins

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

STATE OF GEORGIA,

Campbell County.

Ol. le : Beavens PERSONALLY comes before me county, g. J. Daverepert and Low Mabley , both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Will. Huggins and after such examination say that the applicant has been injured as follows: I hat there is left things Work the luck is the point to proup breaking the denich for to is like there sieve is out the book how liver hours fle as do in them. Short in high think there is from einche below The row the bur Stor Housing air con he destrott gett Theyw are friguest o willing and constitutions "grown the ? Reals of South too we has ley lead hem servedent. Sould lunder addrecting weels and freminenty wynes Sworn to and subscribed before me, this 16th day of March 1889 R. C. Brains

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

MOTES

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

2. The law makes no allowance for an arm or leg, unless the arm or leg has been ren-

dered substantially and essentially useless.

dered substantially and essentially useless.

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

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."

5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where ampetated.

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

show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA. deamphell

R. l. Beavers Ordinary of said county. do certify that I am well acquainted with & M. Avinggins applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief. I further certify that It le Beavers before whom the foregoing affidavits were made and power of attorney was signed, is a Ordinary of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 16th day of March 1889

R. C. Beavers.

Ordinary Campbell County

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

KNOW ALL MEN BY THESE PRESENTS, That I.

county, in said State, do hereby appoint

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

In witness whereof I have hereunto set my hand and seal, this

day of

(L. S.)

Executed in the presence of us:

DIRECTION :

Send money to me as follows, by

County, Georgia.

STATE OF GEORGIA,	
· waruphell county.	
I. R.k. Biarres	Ordinary of said county.
o certify that I am well acquainted with	M. M. Huggins the
pplicant in the foregoing affidavit, and am v	well satisfied that the statements made by him
his said affidavit are true, and that he is a	disabled, to the extent he claims, and I know
I further certify that R.C.	be, and that he resides in this county.

esides in this county. whom the foregoing affidavits were made and power of attorney was signed, is a

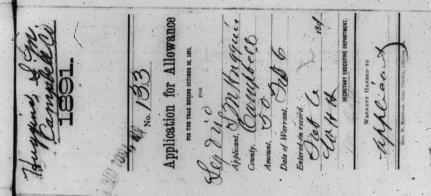
Crelician of said county, and the said affidavits and of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 328 day of Arthury 1890.

Ordinary learnifelell

County.

STATE OF GEORGIA,
Campbell Conney.
I N. lo. Beover mer Ordinary of said County
do certify that I am well acquainted with & m. Houggins the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is
he individual he represents himself to be, and that he resides in this County. I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a Ordinary of said County, and the said affidavits and
ignatures thereto are genuine.
Given under my official signature and seal, this 5 day of Debuory 1891.
In toque tile 03/



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County,
PERSONALLY appears S. M. Houge in of lowers beef county,
State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
resident of said State, and has been such continually since the day of
1833; that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served as a in Company 6, of 43 th Regiment of Volunteers Regiment 's Beigade; that whilst engaged
in such military service at the battle of Body to be at the standing
of thirt on the 16 th day of mory 1864, he was
wounded as follows: Shot in the left thigh t hip, he minu
Ball is now in his hip, and from the effect
of ooils wound he is removed prostered
incompulant to preformate ordinary oppositions
7 198
the state of the s
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
and the acts amendatory thereof, and makes application for the allowance to which he is
entitled for the year ending October 26, 1899. I have heretofore been allowed a pension of dollars.
Sworn to and subscribed before me, this the & m & drugg wis
day of therey 1800 most
R. C. Bravers, William,
the disability.
POWER OF ATTORNEY.
STATE OF GEORGIA
County,
KNOW ALL MEN BY THESE PRESENTS, That I,
of
county, in said State, do hereby appoint
of my true and lawful attorney in fact, for
me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military
service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be
issued by the Governor, or for any sum of money which may be coming to me for the reason
aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 189
[L. S.]
Executed in the presence of us:
The second secon
Send money to me as follows; by
to P.O.
County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County.
PERSONALLY appears S. Mr. Houggies 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
day of
day of the States (or of the State of the States, and served as a States, and
of Georgio Volunteers Tember ton 's Brigade; that whilst engaged
in such military cornice at the bettle of . V. Collins
of Missessippi, on the 16th, day of may 1864, he was
of misseusephi, on the 16th day of may 1864, he was wounded as follows: A hope in the left hip or thigh by a minim Base, which is died in it which arms.
mum Ball which is blift in it which women
promountly disable official transition him.
or linou auties of life.
0 0
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of
Fifty 1890 dollars, for soil would 1890
Sworn to and subscribed before me, this, the & M. X Miggins
R. C. Bravers Ordinary.
Nors.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.
POWER OF ATTORNEY.
STATE OF GEORGIA.
County.
Know all Men by these Presents, That I,
ofCounty, State of Georgia, do hereby appoint
County, State of Georgia, do nereby appoint
of my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 1801.
[La]
Executed in the presence of us:
DIRECTION.
Send money to me as follows, by
County, Georgia.

STATE OF GEORGIA. Campbell Count Ordinary of said county, do certify that I am well acquainted with - , Me, Huggiero applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the said affidavit are true, and that he is disabled, to the extent he staims, and I and individual he repesents himself to be, and that he resides in this county. Given under my official signature and seal, this for day of More a R. C. Bravers Ordinary Carred becch SOLDIER'S PENSION

of		County,	State of Georg	ia, do hereby ap
of me and in my no from the State of the Confederate my said attorner for any sum of r	ame, to receive and rec of Georgia by reason of States (or of this State y to receipt in my name noney which may be co NESS" WHEREOF,	eipt for whatever the injury receive), a stated in the for any Warrant ming to me for the	amount of mon- d as aforesaid in foregoing affide that may be issue reason afores	the military servivit; hereby author ued by the Govern aid.
	trae, and the horse and			1.
Executed in	the presence of us:	am wed sal dast t	at the graterite	ats made by heart
in confly that I	un will meponimal un			
***************************************		DIRECTION	·. 0	simury of said Co
	y to me as follows) by		<u></u>	
	CONTROL PROPERTY AND ADDRESS OF ADMINISTRA	County, Georgia.		Section 28 the control



of the basis of the space of the state of the space of the state of the space of th

County, State of Georgia, who, being daly sword, says on oath that he is a baser has called resident of and State and his resident of the called and the state of the called and the state of the called and the called

STATE OF GEORGIA,

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.
Campbell County
PERSONALLY appears of M. Huggins
of Campbell County, State of Georgia, who, being duly sworn, says
on oath that he is a bong fide citizen and resident of Georgia and has been such anationand
since the day of Secreties 1835; that he enlisted
in the military service of the Confederate States (or of the State of Georgia
during the war between the States, and served as a in Company E,
of At th Regiment of Leny the Volunteers Publishers 's Brigade; that whilst engaged in such military service at the battle of Atlant Crank.
in the State of Meine on the lost the day of
1864 he was wounded as follows: Shat twice
men ide light hip 7 once in light they to; and
this a it am you for some acty in and by oborn
defined winds
Deponent desires to participate in the benefits of the Act, approved October 24, 1887; and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of
Dollars for 1891
Sworn to and subscribed before me this the & Me x Hungine
1 st day of Merch 1892.)
M. C. Beavers Ordinary.
Norz.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
POWER OF ATTORNEY.
STATE OF GEORGIA,
County.)
Know all Men by these Presents, That I,
of
County, in said State, do hereby appoint
my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby-authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
IN WITNESS WHEREOF, I have hereupto set my hand and seal this
day of
Provided to the amount of the second of the
Executed in the presence of us:
the control of the co
Send money to me se follows by
Send money to me as follows, by
County, Georgia.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,)
Compbell comy
PERSONALLY Appears S. M. Huggus bauk he of
County, State of Georgia, who, being duly sworn save on oath that he is a
resident of said State, and has resided therein continuously ever since the
day of Australia 1833; that he enlisted in the military service of the C
during the was between the
States, and served as a served
Volunteers 's Brigade : that whilst engaged in
in the State
186, he was
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the body tolog ball entering the to out put
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blick hallo one slight with body
The second secon
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory; thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1833. I have heretofore been allowed a pension of
dollars, for
15 h
193.3 mont 1/1
R. G. Beavers On mon
Mora-State fully nature of wound or character of disease which causes the disability, and englain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA,)
loouphell come
1 Rb. Boxoel
do certify that I am well acquainted with B. M. Huggues
To the same of the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents hissaelf to be, and that he resides in this County.
I further certify that R.b. Beauty
before whom the foregoing affidavits were made and power of attorney was signed, is a
of said County, and the said affidavits and
signatures thereto are genuine.
Given under my official signature and seal, this day of moreh 1893.
convided Beavers
A noit of Men by these transmits, that
Ordinary Composed County.
STATE OF GEORGIA, 1
POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE O	F GEORGIA	A:))
		DUNTY.				
Know all Mer	n by these Presents,					
	and an arrangement of the second		of			
ounty, State of	Georgia, do hereby a	ppoint				.,
f		•		my true	and lawful a	attorney in fact, fo
tate of Georgia tates (or of this ey to receipt in a bich may be con	ne, to receive and receive and receive some of an injury. State), as stated my name for any Wanning to me for the received.	ry received as in the foreg rrant that ma ason aforesaid	aforesaid in oing affidation of the second o	n the milit cit; hereby by the Gove	ary service of authorisin ernor, or for	of the Confederat
y of	S WILLEADY, 1	nave nercunto		ig and sem	, tills.	
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		DIREC	CTION	9		
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		County,	Georgia.			
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e Aiready Enrolled.	394.	18	100	24	H. HARRIS	Men Him
hose Aiready Earolled.	Rr's Pen	In Bu	to de	200	N. H. HARRIN	phies men

STATE OF	POWER OF ATTORNEY.
Frel	low country (
	MEN BY THESE PRESENTS, That I, My My Ting Times
	of Campbyer
County, State of of Allauta Ga	Georgia, do herety appoint Barge Simile Campbe
me and in my nar	me, to receive and receipt for whatever amount of money I may be entitled to from the
State of Georgia I	by reason of an injury received as aforesaid in the military service of the Confederate State) as stated in the foregoing affidavit; hereby authorizing my said Atternet to receive
in my name for a	my Warrrant that may be issued by the Goveanor, or for any sum of money which may for the reason aforesaid.
	SS WHEREOF, I have hercunto set my hand and seal, this 18th
day of 7	eomos 1 1895. In his 1
	ed in presence of us
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J. asta	
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not Que	Fully Cold DIRECTIONS
	DIRECTIONS.
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	County, Georgia.
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Errilet.)	
ady Enrolled.)	
Virady Enrolled.)	
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ir Those Aiready Enrolled.) No. 434	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
Care & bell county.
PERSONALLY appears 8. Mr. Huggins of Coungline
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 Dec = 181; that he enlisted in the military service of the Con-
federate States (or of the State of
States, and served as a Prince to ju Company E, of the Regiment
of . Volunteers Leyn att 's Brigade; that whilst engaged in
such military service at the battle of
wounded as follows: I wood of the was
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and dale of leave, in your 1864 by two
munic stollo or follows, our bole with
the fractioning hip joint, the other to
the to free war lift thigh ofout weall
of between these to hipforink in commence
and wounds I am prosticully unfil for
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and makes application for the allowance to which he is
entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of
Sworn to and subscribed before me, this, the
· · · · · · · · · · · · · · · · · · ·
10 day of More a 1894. S wearle
R. C. Bears. Ordy
Note. State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent
of the disability, resulting from the wound or disease.
STATE OF GEORGIA.
Campbell County.
1. R. C. Decorte
grainary of said County.
do certify that I am well acquainted with S. M. Hory 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 Meane h 1804.
And had had had had had had had had had ha
(here)
A Ordinary Complete County.
County.

For Applicants Heretofore Allowed Pensions.

Tot ubbutoring motoroide utioned templone.
STATE OF GEORGIA.
Cane place County.
personally appears S. Ul. Herygins of Compbell
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 1830; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a private in Company & of 40th Regiment
of Volunteers, Villatellow's Brigade; that whilst engaged in
such military dervice at the battle of Batters Crell in the State
of Miss on the 16 day of May 1863, he was
wounded as follows: I was shot while in service
in State of Miss- by a minume ball in left
int fount of also by a face whout hold we
between his joint & Know joint & from
effect of and would a, I have on friend
our since to un consequence of which
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and makes application for the allowance to which he is
entitled for the year ending October 26th, 1895. I have heretofore been gllowed a pension
of dollars, for the year 189
Sworn to and subscribed before me, this, the 15 M. The Houngues
7 day of 30 by 1805.
R. C. Deavers andy
Nore—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.
or the desauting, resulting from the wound or disease.
STATE OF GEORGIA.
Campbear County.
B C B
I, Ordinary of said County,
do certify that I am well acquainted with a M. Hong in 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 1895.
(1095)
R. C. Beavers

POWER OF ATTORNEY

	}	
County.		
I,	hereby authorize	
	_of	-
receive and receipt for the per	nsion paid hereon and request that he remit same	e to
	by	
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	I have hereunto set my hand and seal, this	•
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ENSION.	feete. 1886 HNSON, kecutre Department.	ber, Athana.
72PENSION.	Le beele Constitution of The Book of The Book of The ANDER TO CONSTITUTION OF THE BOOK OF	e Printer, Atlanta.
ST2 SPENSION. SPENSION.	Congression of the Congression o	State Printer, Atlanta.
	Mouggeine 22 Lange AARD JOHNSON, Secretz Executive Department. BANT HANDED TO	rrison, State Printer, Atlanta.
	W. Weigygiew. Campbelle. 20.2 Lay. 320 22. 5 1886 UCHARD JOHNSON, Secretz Executive Department. ARRANT HANDED TO	W. Harrison, State Printer, Atlanta.
For Those Arresdy Enrolled.) No. 372 DIER'S PENSION. 1896.	Name S. W. Wenyyeese Sounty Care for the con- Disability Dear for the con- NARBANT HANDED TO WARBANT HANDED TO WARBANT HANDED TO WARBANT HANDED TO	Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GE	ORGIA,	1		•	
	County	.}			`
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t	A DESCRIPTION OF THE PARTY OF T		1.1		• • •
IN WITNESS	WHEREOF, I	nave hereunt	o set my har	d and seal, thi	Saidreen terreniale
day of		1897.			
			-		[L. S.]
Executed i	n presence of		•		

Solubier's Pension

1897.

1897.

1897.

RICHARD JOHNSON,
Amministrated Pertican
WARRANT HANDED TO

e Allowed Pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Composed County.
Dersonally appears S. M. Huggin of Compabell
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 Nec 2 1875; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a free of the Company E, of 43 th Regiment
of Va Volunteers, Oice ale tour's Brigade; that whilst engaged
in such military service in the State of Miss. , on the 16 day
of 160 he was wounded, injured or diseased as follows:
I was shak in they and hip joint by two
Mounis folls while in service of boul
of Bokers Crank" in state of Miss in your
1863, and on occount of these hos wou
hove on for I over since, getting wo
or it y good older, and me coursey we
for ordinary manual looks
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
nd the acts amendatory thereof, and makes application for the pension to which he is
ntitled for the year ending October 26th, 1896. I have heretofore as a resident of
Carefo beet county been allowed a pension of 245
lollars, for the year 189
Sworn to and subscribed before me, this, the) Ill his House
7 day of Fr by 1896 June 14
Al Gravers Only
The state of the s
Norz-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent fithe disability, resulting from the wound or disease.
STATE OF GEORGIA,
Complete County
I, le C. Be our P Ordinary of said County,
o certify that I am well acquainted with S. W. He can green the
pplicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know he is the individual he represents himself to be
nd that he resides in this County.
Given under my official signature and seal, this
day of Jee by 1898.
Time die
(Ale Gravers
10 p
Ordinary Campbell County.

For Applicants Heretofore Allowed Pensions.

TATE OF GEORGIA,	
County.	
Dersonally appears S. M. Heggins of Complete	
ounty, State of Georgia, who being duly sworn, says on oath that he is a bona fide ci	tizen
d resident of said State, and has resided therein continuously ever since the	
of Oce 2 1835; that he enlisted in the military service of the	Con-
erate States (or of the State of) during the war between	n the
ates, and served as a Sicola in Company E, of 43th Regi	ment
Volunteers, Our de l'ou 's Brigade; that whilst eng	gaged
such military service in the State of Miss , on the 6	day
186 4, he was wounded, injured or diseased of follows:	
were shot by a running born while in	- 0.
+ boule of Boston Grank song bore maken	-
rowing in light thingh I also who some to	ui
or olat by another meninice base in portet	Li
so ourous in soid hip; and on oscon	u.L
id wounds I am mudered prote way &	1
osly mobble to purform ording mound over	/
Deponent desires to participate in the benefits of the Act, approved October 24th,	1887,
d the acts amendatory thereof, and makes application for the pension to which	he is
titled for the year ending October 26th, 1807. I have heretofore under said law	as a
sident of Complete county been allowed an invalid pension	on of
Dollars, for the year 180 6. Year	
Sworn to and subscribed before me, this, the S. Within 19	7
22 day of Jacey 1897. POST OFFICE Mond	
6 Graves Ordinory	4
1 1 -0	
Nore—State fully the nature of wound or character of disease which causes the disability, and explain particularly the disability, resulting from the wound or disease.	extent
TATE OF GEORGIA.	
Cam She County.	
County	
I, Ordinary of said Con	inty,
certify that I am well acquainted with S. M. Henge	the
olicant in the foregoing affidavit, and am well satisfied that the statements made by	him
nis said affidavit are true, and I know he is the individual he represents himself t	
that he resides in this County.	
Given under my official signature and seal, this 22	
day of Lowey 1897.	
(de bourns	
(Adix)	
(The state of the	
(Poul here)	inty.

Ordinary Campbell Huggins, S. M. Campbell 1891. Maimed Soldiers. Audited Feb. 6 Voucher No. 133 WM Amakh Amount \$ 050 Paid to S. M. Huggins Included in warrant No. issued to Treasurer. 1891. WARRANT-CLERK. applicant

County.

Ordinary Composed

1891. No. 133

STATE OF GEORGIA,

Chryphold.

Maimed Soldiers.

Voucher No. 1437

Amount & 50.

Paid to & M Huggins

For Left by disabled

Mell 1889.

1889.

COMPTROLLER-GENERAL.

Audited

Maimed Soldiers.

Voucher No. 2005

Amount & 50

Paid io S. Mo Huggins

For Left leg

disabled

Olebry 3 1890

related Feb J-th 1890

Included in warrant No.

.

WARRANT CLERK.

The state of the s

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

applicant

appleaut.

Included in Warrant No.

issued to Treasurer.

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

1889.

WARRANT CLERK

No. 1487 STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Allanta, Ga. Mol 18 Mr. S. Me. Henggins of lambbell having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, Dec. 24, 1888, and the same having been allowed for Left leg disabled He is entitled to receive the sum of The Treasurer will pay the time and hold his country. for such disability, the same being a sale un this oucher, and return same to Executive Department for warrand STATE OF By the Governor WOKHanisa CLERK EXECUTIVE DEPARTMENT. 100 RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

per above voucher, this duly Hugaines

Dollars.

Allanta, Ja Hebry EXECUTIVE DEPARTMENT. of Campbell having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same, having been examined and allowed for Jest leg desables He is entitled to receive the sum of Hefty , + 00 for such disability, the same being the allowance due for the year ending October 24, 18 90 The Treasurer will pay the same and hold his receipt on this voiceer, and return same to Executive Department for warrant. GOVERNOR. By the Governor, Wex Hamesin RECEIVED OF STATE TREASURER, R. U. HARDEMAN, per above voucher, this Mr. D. Meaver

STATE OF GEORGIA.

NAME, Huggins, S M

YEAR 1888 COUNTY Campbell

YEAR ADDED TO ROLL: 1888

WHEN AND WHERE BORNY Resident of Ga. since 15th day of Dec. 1833

ENLISTED WHEN AID WIRE?

RAMK. Private

COMPANY AND REGIMENT? Co E 43rd Regt. Vols Reynold's Brigade

NAME OF CAPTAIN AND COLONELS

WOUNDED Shot in left hip joint, ball still in hip; also in left thigh. Baker's Creek, Miss. - May 16, 1863.

CALTURED, MICH AND MARKET

RELEASED.

WHEN AND WHERE SURRENDSHED?

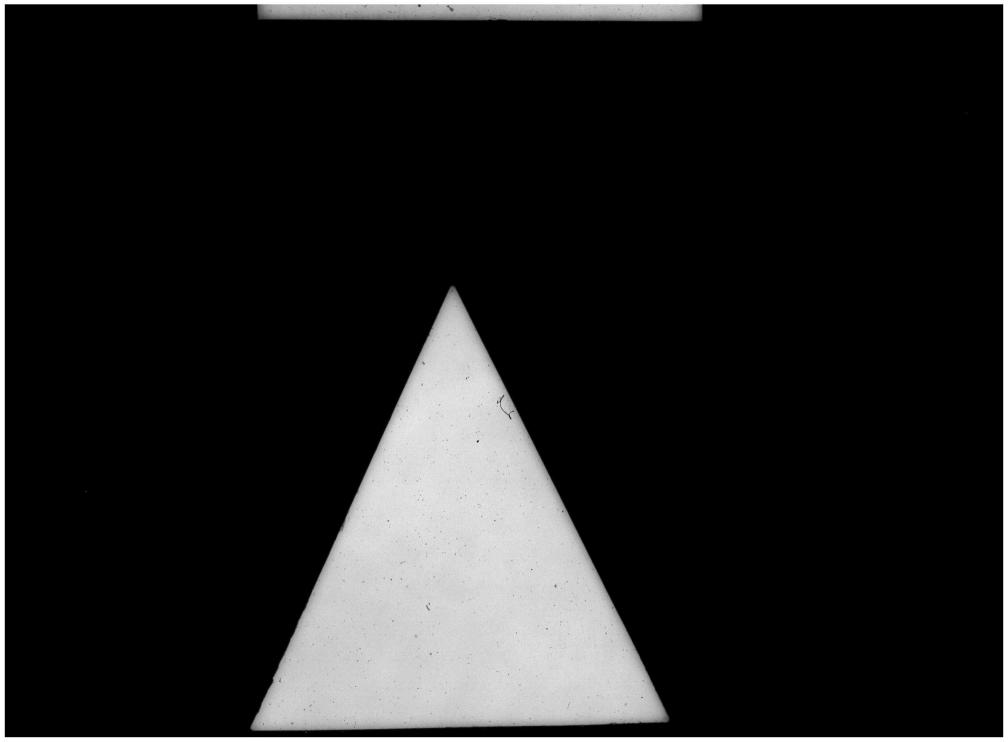
IF NOT PRESENT AT BURR LIDER, WELLE WERE YOU?

DIED, WHEN AND WALFE?

BURIED.

WITNESSES.

D S Scoggins, J M Brownslow, John Pugh



POWER OF ATTORNEY. STATE OF GEORGIA.

to receive and receipt for the pension allowed, and rep

Witness my hand and seal this

mphree, M. C.		1000		
Campbella			1.1	4
O.N. No	44			机作
IDIGENT PENSION,				Executed in presence of
me U. & Humphris	 .			
me M. E. Humphris				
proved July 3 1900;				
JOHN W. LINDSEY,				
. Commissioner of Pensions,				
WARRANT HANDED TO				
Goo, W. Harrison, State Printer, Atlanta.				(F 8)

AFFIDAVIT OF PHYSICIANS.	Questions for Applicant.
STATE OF GEORGIA,	ocumphill County.
	to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly
Campbell COUNTY.	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)
Personally came before me lest & Wirihost Miss. and	- Humphris obamblell county try, Hairburn dia
for Longinio met., both known to me as reputable physicians	2. How long and since when have you been a resident of this State ! I day at De Cemple.
of said Jounty, who, being severally sworn, say on oath that they have examined carefully. C. Humphrus, applicant for pension under Section 1254, Code, and after	3. When and where were you born? 18 day of June 1830 relate County of
such personal examination say that his precise physical condition is as follows:	4. When and where and in what company and regment did you enlist or serve muy
His eyes are badly affected Historice	1862 = Lulydiger ala Co. og 30 ala Nolimbers
injured & now he is breakle to do any	5. How long did you remain in such company and regiment? 2 years 11 months
thing that requires him to Walk as thank	4
miles feet His right foot ruflands badling	9 Men's 11 months
wing year generally rullinter.	6. For how long a period did you discharge regular military duty? 2 Years 11 months 7. When, where and under what circumstances were you discharged from service? I was with
They further say on oath that the physical condition of applicant renders him unable to labor at	I my army in Novis caseiner when ly surendent
any work or calling sufficient to earn a support for himself, and that we have no interest in said pension	at the surrender of the confiderate army
being allowed.	8. What is your present occupation? Thurning or truling to harm 9. How much can you earn (gross) per annum by your own exertions or labor? Multing
Sworn to and subscribed before me this the 13 day of Jubrully 1900.	n 10. What has been your occupation since 1865? Humming
1 the state of the	11. Upon which of the following grounds do you base your application for pension, viz: first, "age and
ordinary.	poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infurming the two the first ground, state how long you have been in such condition that you could not earn I my
ORDINARY'S CERTIFICATE.	your support? If upon the second, give a full and complete history of the infirmity and its extent?
	upon the third, state whether you are totally blind and when and where you lost your sight in got
STATE OF GEORGIA,	I just-life nothe surengles by a bund car runin in this
stamphelf county.	de sent to the further but you with only feet I have the indismation of 18. What property clients or for the angle of the formation of the property clients or formed do you proseen and the grown which I have the indistrict our set of the property clients or formed do you proseen and the grown which I have the indistrict of the property of the property clients or formed do you proseen and the grown which is the property clients or formed do you proseen and the grown which is the property clients or formed to the property of the property
I, J. Mephens , Ordinary in and for said County, hereby certify	1 on horse & Buffy worth about \$6000 W
that the applicant M. C. Humphrip resides in said County, and has	14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and
been a bona fide resident of this State since the day of Jame 1830	what disposition, if any, did you make of same? I died own some land and sta
and that the witnesses, viz: B. H. Sittly = Soft Deavemport m. 2	Sinches to Mas been dold to hay what I owed and this
are of trustworthy character, and that their statements are entitled to full faith and credit.	15. In what County did you reside during those years, and what property did you then return for taxation? In Main bell County - this County - Well Sold for class
I further certify that before answering the foregoing questions the applicant and each witness took	16. How were, you supported during the years 1898 and 1899 ?- Ly my Jon giorge
the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.	1 1 hilling for me but now ht is his own man
	17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? 50 dallars. I done no work was not a
returned for taxation in his name in 1898 Him II this Brother 11-40 ferring	18. What was your employment during 1898 and 1899? What pay did you receive in each year? To we
of property, and in 1899 muthing it had went sold to hay his dibb	I Farm when I was able to but now not able to clowing the
In my opinion the foregoing claim is made in good faith.	19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? 2 doughters, 3 grand children by their
Witness my hand and seal of office, this day of July 1900.	in I later what little work they do they have no
Lastephens Ordinary,	he will stead to what amount and to what distilling month
of deamphell County.	20. Are you receiving any pension? If so, what amount, and for what disability?
1. Before any questions are answered, the Ordinary shall swear spileant and the witnesses in the following words: "You shall true answer make to such of the questions asked of you, and the evidence you shall give will be the whole truth, so help you find."	Sworn to and subscribed before me this the
you God."	9 day of Hebruary 1900.

of the witness, and as to the execution of the proof as above

id you discharge regular military duty? 2 years 11 months nat circumstances were you discharged from service? I was with North Carliner when by surendings runder of the confident army pation? Huring or trying to training or reserving or labor? Nutting pation since 1865? Huring ng grounds do you base your application for pension, viz: first, "age and poverty," or third, "blindness and poverty"? Infirmity Househy state how long you have been in such condition that you could not earn I may nd, give a full and complete history of the infirmity and its extent? . IA are totally blind and when and where you lost your sight 2 90 whele huit new toulumber of the form the standard of the form of t nome did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and a make of same? I did own some land and stake been dold to pay what I owed and it is you ide during those years, and what property did you then return for taxation?

Lell Commy Mrs Commy all sold for death,

during the years 1898 and 1899 and my Son george

me but now he is his own man, of for each of those years, and what portion did you contribute thereto 50 dallars. I done no work was notable during 1898 and 1899? What pay did you receive in each year ? It work I was able to but now not able to cloung thing , who composes such family? Give their means of support? Have they their dunghlim 3 grand chifferen by their at little work they do they have no on? If so, what amount, and for what disability? More efore me this the wery 1900. his stephens obampher

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eceive and receipt for the pension	on allowed, and req	uest that he remit sa	ne to	• • • • •
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Executed in presence of				
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PENSION,	Humpstries	1900.	Commissions of Peasing, T HANDED TO	, State Printer gramme
NT PENSION, BOO.	& Humpshins	924 8 1900.	Commissioner of President. WARRANT HANDED TO	teliben, date Frinte, gramm

complisies, W. E.

QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
R. A. Little of gald State and County, having been presented
as a witness in support of the application of . E. Humphilis for pension
under Section 1254, Code, and after being duly sworn true answers to make to the following questions,
deposes and answers as follows: 1. What from name and where do you reside? A. S.
2. Are you acquainted with. A. C. Humphris , the applicant; if so
13. Where does he reside, and how long and since when has he been a resident of this state? An ofumphill county ofue Ever Scine 1578
4. When, where and in what company and regiment did he enlist, and how do you know? Mail 1862 at 20 180 180 19 30 ale regiment
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? 2 years 1/1 months the was captured in North Julian He was captured in North Julian At the Switzender of the Confederate
army army
7. What property, effects or income has the applicant? (Give your means of knowledge.) Only one horse ynd old Buggy-worth 5t dollars = the rest to have some but he has been sould not
8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what
disposition, if any, did he make of same? He half some land 4 stock white 1:54's that year they sald him out to pay his debt
9. Has be conveyed away any of his property in the last four years, if so, what was it, and to whom? It had some lund but it was sald to his brother than
uny in all to walk to work any and his eys lyds is sore he count
1. Is the applicant unable to support himself by labor of any sort, if so, why? He Cant Sugary
arrough to support his self on account of furt treus
2. How was he supported during the years 1898 and 1899? by his son working
for him but now his son is his own mian
3. What portion of his support for these two years was derived from his own labor or income? 11014 has 2 sons in attanta that hope him some
4. Give a full and complete statement of the applicant's physical condition that entities him to a pension
under Section 1264, Code? The is 70 years ald and his future anhles
and muit Be oud that by contwalk why little & his eys is
5. What interest have you in the recovery of a pension by this applicant? 20019 Serie 40
Sworn to and subscribed before me, this 2 Hart Witness, Cant be
Jat Stephens Ordinary.

POWER OF ATTORNEY

	County.			
I,		hereby auth	orize	
		of		
receive and rece	ipt for the pension	allowed and r	equest that I	ne remit same to
		at		
	and the second second second			
Witness my h	and and seal, this	day of		1901.
				[L. S.]
	hard a			
Executed i	n presence of			
	·			
			fo be	
a		u Fil	/ 106	
3			⟨ <u>ā</u>]	
	r Sion.		1901.	2 1
W Emble)	PERSION.	C. C.	1901. NDSEY,	OSD TO
ready Emulae.)	S PEKSION. O1.	1 ISSUED	LINDSEY,	HANDED TO
Those Already Errole.) No 4314	R'S PEKSION. DOIL	Sound be a supposed to the sup	JOHN W. LINDSEY,	WARRANT HANDED TO

STATE OF GEORGIA

For Applicants Rejectofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
The state of the s	
Dersonally appears U. E. Hounghries of Coinflie	
County, State of Georgia, who being duly sworn, says on eath that he is a hour fide siting	
and resident of said County and State, and has resided in said State continuously	
since the day of Ne 2 18/8; that he is 70 years old and	
by occupation a very that he enlisted in the military	
federate States (or of the State of State of Our) during the war between the	
States, and served for the term of Marrie 3 77 in Commany 4 32 1 2	
States, and served for the term of heavy 370 in Company 4, of 30 th Regiment of that his physical condition is as	
follows I have Rhammaline in and	
follows: of her round of the stay of thousand	
god my tay's moster while in bronce	
but the trong goweror debele ly = Egesi	ya
And may lays mosted while are derices one of author that from yourse debice by - Eyesighthat his property consists of the following items horting	
The same of the sa	
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.	1
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	
s entitled for the year 1901. I have heretofore as a resident of Cour four	
ounty been allowed a pension for the year 1	
Swarm to and subscribed before at 12 1 2 - 0	
(Wall)	
Mont device Ordinary.	
STATE OF GEORGIA.	
Complete County.	
May La	
	. ,
certify that I am well acquinted with U. E. How phois the	
oplicant in the foregoing affidavit, and am well satisfied that the statements made by him	
his said affidavit are true, and I know he is the individual he represents himself to be	
nd that he resides in this County.	
Given under my official signature and seal, this	
day of tely 1901	
mile Form	
Ordinary Coningfeet County.	

Note —The blank spaces must be filled.

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

NAME Humphries, U.E.

YEAR LOOP COUNTY Campbell

WHEN AND WHERE BORN? June 18th. 1830 Clark Co. Ga.
Resident of Georgia since December 1st. 1878.

ENLISTED WHEN AND MERE? May 1862 Talladege, Ala.

RAIK

COMPANY AND REGIMENT? Co. G, Soth. Alabama Vols. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Columbia, S.C. just before surrender - hit by hand car wounding both ankles.

CAPTURED, WHEN AND WHERE? Witness states applicant was captured at surrender.

RELEASED.

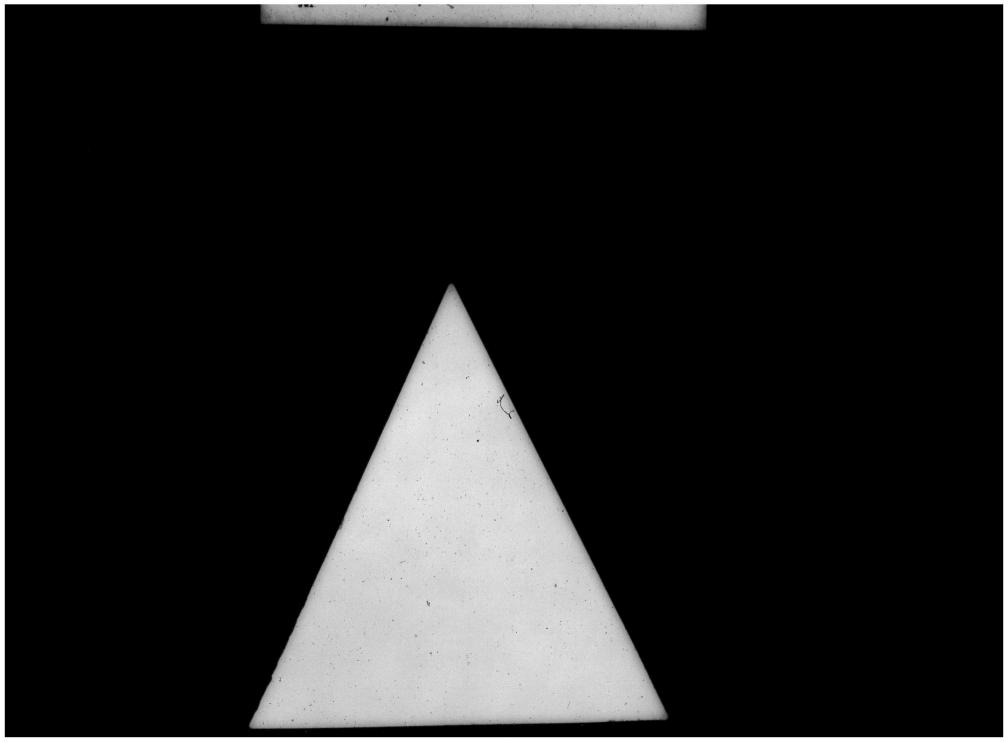
WHEN AND WHERE SURRENDERED? North Carolina at surrender.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. R.H. Little, same command - No data.



POWER OF ATTORNEY. STATE OF GEORGIA. County.

Rla broof of order					
Ho. 233		Witne	to receive an		1
DIGENT PENSION &		es my hand and ited in presence	l receipt for the		•
Ransom Hutchino		4	pension allow		
Pacifiell Infirmity + Proceeding		day	ed and request	•	
Ay 1 1896 -			that be remit s	òf	
HOHARD JOHNSON,			anne to		
affliant Handed 20		18		1	hereby a

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, County County.
I, P. E. Bearer, Ordinary in and for said County, hereby certify that the applicant Panson 7 Kutshins resides in said County, and was a bona
fide resident of this State on the first day of January, 1894, and that the witnesses, viz : Robert
Campbell, J. V. Davensonh M. N. Y C. H. Dasensonh M. N. are of trustworthy character and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions, the applicant and each witness took
the eath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed. I further certify that the tax digests of Campbul County show that applicant
returned for taxation in his name in 1893, Nathing dollars of property, and in 1894, — Jen — dollars of property.
Witness my hand and seal of office, this & the day of May 1895.
of Campbell County.
NOTE: Before any questions are answered, the Ordinary shall awar applicant and the witnesses in the following words:

AFFIDAVIT OF PHYSICIANS.

Personally rame before me J. J. Dance for and Colly Dance of part both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully. Race for Metherical population is as follows: Mrs. Neutricial suffers! Continually with secure physical condition is as follows: Mrs. Neutricial suffers! Continually with secure parties of leaders of secure and for me as reputable physical condition is as follows: When he was chromic influence in the second secure of secure of secure of secure of secure of secure of second secure of security of secure of secure			- 6		
Personally came before me. J. J. Dours & S. S.				()	1
Personally came before me. J. J. Dours & S. S.	Campb	ll_County.		>	
We further say on oath that the physical condition of applicant renders him unable to labor at the same support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Whey 1895. Children and subscribed before me, this day of Whey 1895. Children for pension to me as reputable physicians of said country to a control of the said pension in th			0	1 1	
We further say on oath that the physical condition of applicant renders him unable to labor at only work or calling sufficient to care a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Whey 1895. Children for pension under the Act of 1894, and after much personal examination, say that his precise physical condition is as follows: We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to care a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Whey 1895. Children for the Act of 1894, and after we have no and subscribed before me, this day of Whey 1895. Children for the Act of 1894, and that we have no interest in Said pension eing allowed.					and
We further say on oath that the physical condition of applicant renders him unable to labor at only work or calling sufficient to care a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Whey 1895. Children for pension under the Act of 1894, and after much personal examination, say that his precise physical condition is as follows: We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to care a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Whey 1895. Children for the Act of 1894, and after we have no and subscribed before me, this day of Whey 1895. Children for the Act of 1894, and that we have no interest in Said pension eing allowed.	CNDa	wedsport	both known to	me as reputable phys	sicians
Members of the them is precise physical condition is as follows: Mr. Neutchine suffered Continually with severe pours in head back caused with severe captures in the court with the severe and caused by head dealets also. His head was been a wind a severe a feele of a wind a severe a feele of a wind a severe by piece a feele of a with a court his derivants by files at times and person for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this a day of May 1895. Children part May. May of May 1895. Children part May.					
We further say on oath that the physical condition of applicant renders him unable to labor at the sheet of debillated. We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Mey 1895. Children of Mey 1895.		. /			
We further say on oath that the physical condition of applicant renders him unable to labor at the survey of debilitation of survey to survey the course survey to survey the course survey the course survey the course survey to survey the course survey the course survey of survey survey and survey and survey and survey su			` .)		a anter
We further say on oath that the physical condition of applicant renders him unable to labor at now or calling sufficient to carn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of March 1885. Children of March 1885.	- v .	7			
We further say on oath that the physical condition of applicant renders him unable to labor at now or calling sufficient to carn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of March 1885. Children of March 1885.	mr. Nutch	in suffe	rd con	troughly	
We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. Children the country that the success to the country that we have no interest in said pension eing allowed.					mend
We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. Children to the court of the c	al al	inter	iti.	1 1/2	
We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Mey 1895. Compared to the condition of applicant renders him unable to labor at ny work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Mey 1895. Compared to the condition of applicant renders him unable to labor at ny work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Mey 1895. Condition of applicant renders him unable to labor at ny work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this	10. P. (al	2	4	0 - 0	P
We further say on oath that the physical condition of applicant renders him unable to labor at ny work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP accention May.					
We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP accented Med.					ile
We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP accented Med.	lor time	to sleep	at un	yll.	•
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We further say on oath that the physical condition of applicant renders him unable to labor at my work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of Mey 1895. CAP acceptant Mesself.	HE how!	files at	terned)	and .	٠٠٠٠٠٠٠
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ny work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP acceptant May		4			
swork or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP acceptant May					
sy work or calling sufficient to earn a support for himself, and that we have no interest in said pension bing allowed. Sworn to and subscribed before me, this day of May 1895. CAP acceptant May					
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by work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP acceptant Mass.					
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swork or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP acceptant May		1. 1			
ny work or calling sufficient to earn a support for himself, and that we have no interest in said pension eing allowed. Sworn to and subscribed before me, this day of May 1895. CAP acceptant May	We further say on oat	h that the physical condit	ion of applicant rend	ers him unable to lab	por at
Sworn to and subscribed before me, this day of May 1895. CAPaucifork Mills		1			
ie 8 day of May 1895. CADaucepark MAS.	eing allowed.				0
ie 8 day of May 1895. CADaucepark MAS.	Sworn to and subsorthad	before me, this	A 7 Doc	uful de	N
		Mark 1905			
R. lo. Ac-	uny or	1 -1008.)	CHN auch	yand	in)
	D 0 1	0		-	

1895. Name Planson Hutchino County Pacificel

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hypically	7		/
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			1
. Is the applicant unable	to support himself by labor of	any sort, if so, why? Yes	_
en accour	it of his d	inaies.	
	0		•
			1. "
How was he supported	during the years 1893 and 189	o do not	Know.
de publica	1. the fell of h	is will and far	a Pand
3. What portion of his s	support for these two sears w	is wife and Lan as derived from his own labor	or income?
Vin Pitto.	to my Idna	where - 21	or income.
any will	, romy rem	wledge = Mo.	income
	·	1.7	
Clima All and annual			Section in an annual con-
der the Act of December	15th: 1894 > 7 Ke	hysical condition that entitles from	to a pension
und on Kid	me and Bla	ader diceare.	7/4
		d'il	1 2
L'ilia	e good way	about his bac	M. Tros
weffects.	To there acres	ues he is no	h able
aturn a	hving for	himself by h	alion
ony our	. 70		
T			
			* * * * *
		-	and the same of the same of
		· · · · · · · · · · · · · · · · · · ·	
What interest have you	in the more years of a name of the	this applicant? None	,
	ed before me, this	this applicant.	and the second second

R. C. Bearing Ordy.

QUESTIONS FOR APPLICANT

STATE OF GEORGIA,
Campbell County.
Rainson Fitteries of said State and County, desiring
to avail himself of the Pension Act Approved December 15th, 1894, hereby submits his proofs, and after
being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? (give State, County and post office) Raissen
Hutchins, Campbell County Sa. P.O. Mand Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
Comphell County Sa Been a resident about 55 years
3. When and where were you born? August 20- 1848 in Fullow to La
4. Did you volunteer in the Confederate Army or in the Georgia Militie? Confederate army
. 5. When and where did you enlist? October 25H 1861 at atlante ge
6. In what company and regiment did you enlist? Company" O" Hit be Reg 190
7. How long did you remain in that company and regiment? Bix Mouthe State
8. If you were discharged from same and joined another, or if you were transferred to another, give an
4 1) 1. 1. 1
account of sach discharge or grapsfers. Mad harvorably dis charged frame
Co- C. an account of expiration of time and joined Co. C" latte kg
9. For how long a period did you discharge regular military duty? Byrd acco 6 cere-
10. When, where and under what circumstances were you discharged from service? Afr. 97 1865
near Ratugh n.C. Lee: Surrender -
11. What is your present occupation? Farming
12. How much can you earn per annum by your own exertions or labor?
augthing
13. What has been your occupation since 1865? Tarring.
14. What sum would be necessary for your support for this pension year, and how much are you able to
contribute thereto either in labor or income? Ocal Residuel dellard.
Youry little if anything, Have no
income.
A

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, County.
0000
as a witness in support of the application of Sanson Hutchens for pension
under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the
following questions, deposes and answers as follows:
1. What is your name and where do you reside? At his Campbell - Campbell -
2. Are you acquainted with Ranson Hutchins , the applicant, if so
how long have you known him? The = about 38 years.
3. Where does he reside, and how long has he been a resident of this State? Carufael O. 59.
33 years to my Knowledge.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you
know this? Rended in Confederale Army = I sended
with him.
5. When, where and in what company and regiment did he enlist? April 1862 =
Attact & 4 Company "C" 1 Sh Confederate Regt.
6. Were you a member of the same company and regiment?
7. How long did he perform regular military duty, and what do you know of his service as a Confed-
erate soldier, and the time and circumstances of his discharge from the service? Acarly 3 years
o my Knowledge - No made a good volaier =
I left king in service in July 1864. Ids
not know the furticulars of his disharge.
8. What property, effects or income has the applicant? (Give your means of knowledge.)
Nothing to my Knowledge = I live near him
and would be likely to know his circumstances.
the state of the s
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition,
fany, did he make of same? Home to my knowle age =

10. What is your present physical condition and how long have you been in such condition?	
Suffer with Kidney and Bladder	
to Al S. 11 6	20. In what County did you reside during those years and what property did you then return for taxation?
trouble, Suffer pain constantly and	Campbell County be nothing in 1493.
air not able to cleep at night	Den Solland 1 15011
Hour been in some consteam for	dere dollars in 1894.
To geard, but it gets were and ground	21. How were you supported during the years 1893 and 1894? Sartly by The
ceder. Hear been getting work rapidly	labor of myself and wife and partly
1 -P 1 1 2 ming worth reguly	by my landlood-
for the last & years!	
	22. How much did your support cost for each of those years, and what portion did you contribute thereto
	by your own labor or income? About \$10000 each year.
	of contilt of about 1
16 / Thom which of the fill the state of the	Santo deliberted about Twenty fine deller
16. Upon 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?	(\$300) each year
J. L. S. F. Constant of the Co	
17. If upon the first ground, state how long yet have been in such condition that you could not earn	
your support? If upon the second, give a full and complete history of the infirmity and its extent? If	23. What was your employment during 1893 and 1894? What pay did you receive in each year?
upon the third state whether you are totally blind and when and where you lost your eight?	Dering Trothing
How suffered with Hidrey and bladder	the same of the sa
trouble for 20 years. For the lost 3yron	
A Red been growing weare until	
cow & an west able to lo cay	24. Are you married and have you a family? If so, is your wife living and how many children have you?
work of an in I a Offin	Give age and sex of children and their means of support? Marriel & have family
work of consequence and can hardly	Ged. 2 hildren Girl 10 grand ald.
walk Suffer greatly with fine in my	
book we the line and at times and	Bul 3 years ald - Have no means of suffort
unable to get up when down.	except by myself trufe
	25. Are you receiving a pension under any law of this State, if so what amount and for what disability?
	20. Are you receiving a pension under any law of this State, it so what amount and for what disability?
	26. Are you receiving any aid from your County, and if so, how much? Did you ever apply for such aid?
	none niver applied.
18. What property, effects or income do you possess? None at all	- Agreet
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any	
lid you make of same? Had wothing in 1698 41894.	
	Sworn to and subscribed before me this the Shanson Hostelins Applicant.
	8 H day of May 1895. Applicant.
	A & Ocavers Ordinary
	Camb hell country

POWER OF ATTORNEY.

	ORGIA,	1	,	
emperation of the partners of the second or the parent	Count	y. ſ		
I,		hereby aut	horize	
		of	•	
			der an traduction of the contract of the contr	Commence, susception Commence
receive and rece	ipt for the pe	nsion paid hereon and	l request that he	e remit same to
		by		
t				
IN WITNESS	WHEDEOR	T1		
	WHEREOF,	I have hereunto set m	y hand and seal,	this
ay of		1897.		
,				[L. S.]
Executed in	presence of			
		-)		
		13		
	n.	Zetu.	1897.	
(pa)	ion.	tellin.		
(1898)	ısion.	· latellin		D. C.
Enrolled.)	ension.	Hateline French		D TO
S (1898)	Pension.	La fatellia		N DED TO
liready Enrolled.)	Pension.	une fatellin	JOHNSON,	HANDED TO
Already Enrolled.)	's Pension.	some fatellin	JOHNSON,	Office morne, strate.
Nose Aiready Enrolled.)	er's Pension.	asour Hatelieu	JOHNSON,	Office meres, anserts
No. 668 (1898)	lier's Pension.	Lawsour Hatelieu		WARRANT HANDED TO Office Property abouts.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County.
Dersonally appears Rais some Harring Care p. bece
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 continously ever since
the 20 day of Acy 1841; that he is J years old and
by occupation at the first that he enlisted in the military service of the Confed-
erate States (or of the State of co. C. 4 h Regist) during the war between the States, and served for the term of obout 3/2 / in Company C, of 1 th Regiment of
follows: I am earrolancely and former from the norme. Rhemostian, yiping in brook with every
Phenontine, ypins in brook with come
Lecurio kerdocke
that his property consists of the following items Hoove ecent
except a lette House hard & Hetcher
of the value of oforce 1 110 00 Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Caca free county been allowed a pension for the year 1895.
Sworn to and subscribed before me, this, the Karryan , Hutehing
day of lawy. 1897.
bl. Bin and
(A. CO. COLUNDY 5 Ordinary.
STATE OF GEORGIA,
Comblete County.
I, A. G. Bravers Ordinary of said County.
do certify that I am well acquainted with Ran source Hee tolice 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 Lacy 1897.
(la bravers
food here.
Ordinary Comphere County.
Ordinary County.

Nors-The blanks spaces must be filled.

NAME, Hutchins, Ransom

WHEN AND WHERE BORN? August 20th. 1840 Fulton County Ga.

ENLISTED WHEN AND WHERE? October 25th. 1861 Atlanta, Ga.

COMPANY AND REGIMENT? Co. C, 4th. Ca. Regt. (6 months) Joined Co. C, 1st. Ga. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED, April 9th. 1865.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, .. HERE /ERE YOU?

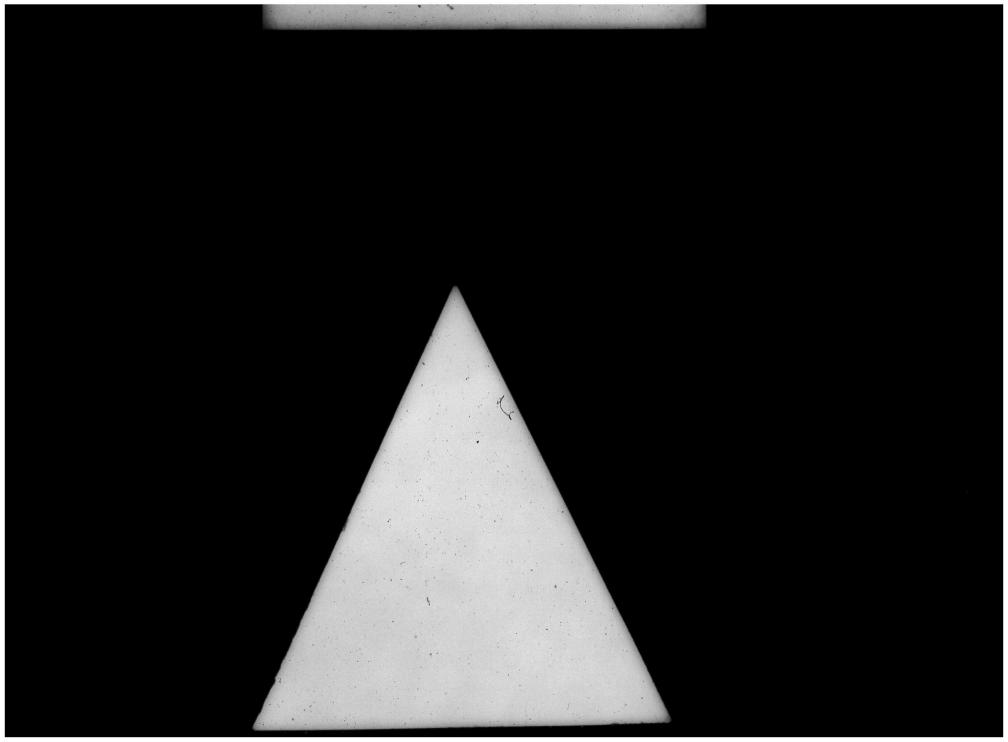
DIED, WHEN AND WHERE?

BURIED.

WITNESSES, Robert . Campbell. No data.

P.0. COUNTY. 1896 Campbell County.

JWT



POWER OF ATTORNEY

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WHEREOF, WITNESS

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campbell County

200.2039

mu Alia Marks

3100.00.

Warrant Issued

AND HANDED TO

1891

Know all Men by these Pres

STATE OF GEORGIA,

Camblell

Know all Men by these Presents. That I. Alice Mb Guckson

County, in said State, do hereby appoint Joth the Lantson

of Campbell County Seager 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 day of Afril

Atlice sile deckerons

Executed in the presence of us:

the Moan R. C. Beavers Ordinary

DIR SCTIONS.

If allowed, send amount by

and oblige,



Affidavit for Three Witnesses.

STATE OF GEORGIA

	In	person	came	before	me, the	undersigned	Ordinary
in	94	d for a	aid C				

County of Campbell William Boxer, J. C. Dovemport and William Killy (each known to said Attesting Officer as truthful. reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Alice M. Joakson , of the County of Composer State of Georgia, is the widow of Motthew . E. Jackson, who was a soldier in Regiment of Georgia That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the day of fiel 186 2 That while in said service, or by reason of said service in the Army, he lost his life as follows: wounded at the boilte of Gellysbury Reun on July 2 nd 1863 by a newwin. hale dironing him about one was below the left nipple and going through his body, scorning out one wish to the left of his book bone in soid coudilion he was coptined by the federal anny comis to prison witire Kept as a prisoner of war unter about the 1st day of Dept 1863. Soid would coused or so effected his lungs, that Journiphon of the lungs resulted from poid wounds and he was an unwell mon from the time he received soid wounds, its immediate result good wounds, wit consumption, I getting worse and worke from good to zear, until he died, from the unitiate couse of soil wounds anothe soil discore it produced, on the 19th day of may 1886,

We further swear that Mrs. Alice M. Jackson soldier during the service, and that she has not intermarried since his death, and that she resides in Composel County of the State of Georgia.

Sworn to and subscribed before me, this, the) day of April

R. G. Beavery

William is Killiam Killiam

William Baken

OT	-	0	OF	00	-
	Δ I In	OF		\cap	

1. R. G. Beavers

County of Campbell

in and for said County of Campbell

State of Georgia, hereby certify that I am acquainted with Mrs. Alice M. fockson 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 . 14th day of April

R. le Bravers

I could that the fraging enthance to for a form to relate The man my hum OTES and the steam

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

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

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

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

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

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

If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary 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 on money, to receipt for same.

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

By order of the Governor.

W. H. HARRISON.

Sec. Ex. Department.

Affidavit to be Made by the Widow.

STATE OF GEORGIA.

In person came before me, the undersigned Ordinary

County of Wand lett in and for the County of Complete Mrs. Alice 16 Jackson , who being sworn according to law, says under oath that she is the widow of Matthew & Jack very , who was a soldier in the service of the Confederate States, and served as a member of Company Regiment of Lorgea Volunteers; that he enlisted in said service on or about the serst day of Affici 186.2 , and was in the Confederal Army up to 11 day of feels 1865 That while in the Army, he was on the securit day of feet, 1863 (See Note No. 1) Wounded at the tallle of the thisture Plinger mia by a munice tall the thing hum about one work helm the left niebble and rouging though hem Comment out about Que ench to the left of his lock home, is said lindeting he was Capture lithe per de al Uring and Conve to presen aus thin Kept as a fresening his wille about the first day of September 1863 said tound \$20 offeeled his lungs that Consemple of the langer resulted from said hound und he was an unwill man from the time he received said bound the commediate result of said wound with Consumption, et getting werse and wirse from you to You will be died from the connection laws of said would & the said descou it preduces for the 19 th clay of May 1886

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 16 th day of willarch 1806, and that she has resided in Georgia continuously since the day of June 1839; 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 A. W. Beavers

Hier Mle Car

Ordinary.

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

Sitto Cartificate of Ordinary of the County of Applicant's Residence.

STATE OF GEORGIA, County of Completies
I, R. C. Ordinary in and for said County of
Come & teel State of Georgia, hereby certify that I am acquainted with Mrs.
Alien the Joseph son the applicant for a pension in this case, and
know, from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1850, and has not lived out of the State since that date. That she is the
widow of Markew 6. Joes sou deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1893.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 19 day of Laving 180s.
(B. B. Beavers Ordinary
Ordinary.
POWER OF ATTORNEY.
STATE OF GEORGIA, Complete County
STATE OF GEORGIA, Complete County. KNOW ALL MEN BY THESE PRESENTS, That I, Alice De Jackson
County in said State, do hereby appoint for the first orn of Complete to Fu my true and lawful attorney in fact, for
of Complete co Ju my true and lawful attorney in fact, for
me, and in my name, to receive and receipt for whatever amount of money I may be en-
titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any
Warrant that may be issued by the Governor, or for any sum of money which may be
coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of forcy 1804
Alica Minuch.
Executed in the presence of us:
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· · · · · · · · · · · · · · · · · · ·
R. C. Bravers Ordy
DIRECTIONS.
Send amount by to
me at , and oblige
Control of the Contro
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WS' PENSION,

ing February 15th, 1894.

894.

ARRANT ISSUED

STATE OF GEORGIA, Dersonally comes Mrs.
County of Complier Alice Me Jackson
who being sworn, says on oath, that she is a bona fide resident of said County of Counfiele State of Georgia, and that she has resided in said State
continuously ever since fure 3 1839 That she is the Widow of Whather & Jack and who was a Soldier in Company
of the S-3 Regiment of Su
Volunteers, that he enlisted in said Regiment on or about the month of
186 2 and served in the Army up to duly 2 186 2 That he lost his
life on the day of 18. (State here
full particulars of the husband's death, when, where and from what cause.) (He was shall
ball It intend the light break wer
The unpplie & come out new his
in sovier and from the effect of
his would be died on May 1 que
1886. He received his wounde at
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 1857; that Georgia is her home and she resided in this State 23d day
of December, 1890, and has not lived in any other State or locality since that date. I have
been allowed a pension for the year ending February 15th, 1893, and now apply for the
allowance provided by law for the year ending February 15th, 1894.
Sworn to and subscribed before me, this Blice. Me. Cackson

Certificate of Ordinary of the County of Applicant's Residence STATE OF GEORGIA, County of Campbell Rb. Beovers TATE OF GEORGIA, County of Ordinary in and for said County of Campbull State of Georgia, hereby certify that I am acquainted with Mrs. Ordinary in and for said County of Alice m. Jackson State of Georgia, hereby certify that I am acquainted with Mrs. the applicant for a pension in this case, and Alice He postave know, from my own knowledge, (or from positive proof presented to me by reputable witnesses), the applicant for a pension in this case, and that she resides in this County, and that she resided in the State of Georgia on December 23, know from my own knowledge (or from positive proof presented to me by reputable wit-1800, and has not lived out of the State since that date. That she is the widow of Motnesses), that she resides in this County, and that she resided in the State of Georgia on thew 6. Jackson December 23, 1890, and has not lived out of the State since that date. That she is the deceased, and as such has heretofore been allowed a widow of Martine & forther deceased, and as such has heretofore pension for the year ending February 15th 1892. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the been allowed a pension for the year ending February 15th, 1854. 3/ day of & amony 1893. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, SEAL! R. C. Bravers Ordinary. Form No. 2. POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, Composel STATE OF GEORGIA. Com & beek alice m. Jackson KNOW ALL MEN BY THESE PRESENTS, That I, Allie & Ill. Joekson KNOW ALL MEN BY THESE PRESENTS, That I. County, in said State, do hereby appoint leacuptuel les Gal County in said State, do hereby appoint 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 of Timothy Lu 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 In WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Jamon, Alice Me gas Rion plice. Magaeteson [1.8.] Executed in the presence of us Executed in the presence of us: Sweeze Lathour n.P. WS Willowing R 6 Bravers Ords R. C. Beavery Ordi DIRECTIONS. Send amount by and oblige Send amount by me at , and oblige

STATE OF GEORGIA, County of Campbul. Alies m. Josephon
who being sworn, says on oath, that she is a bona fide resident of said County of
Couphul State of Georgia, and that she has resided in said State
continuously ever since Jule 1839 That she is the Widow of
moutino & Josephson who was a Soldier in Company
10. of the 53, Regiment of Georgia
Volunteers, that he enlisted in said Regiment on or about the month of
1867 and served in the Army up to 1-5 July 1863 That he lost his
life on the 19 day of May 1886 (State here
full particulars of the husband's death, when, where and from what cause.) (Hi woo
shot through the left lung of the bottle of
Gettisbury Bruse & how the effect of soit
wounds he did on 19 mon 1856,

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 1856; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

31 day of January 1893.

R. C. Beaury Ordinary.

Post-office Dimorty yo

For Widows' Heretofore Allowed Pensions.

10 11.	a Alien M. Joekoon
County of Compbee	
we will be suit private and we have to	article of the second second of the
who being sworn, says on oath, that she is	s a bona fide resident of said county of
Campbell States	f Georgia, and that she has resided in said State
/	Georgia, and that she has restaed in said State
continuously ever since	1 1839 That she is the Widow of
Machiero Co. Jack to	who was a Soldier in Company
" O" of the 5-3	Regiment of
Volunteers, that he enlisted in said Regim	nent on or about the month of Affrice,
186 2 and served in the Army up to	fully 1863 That he lost his of May 1876 (State here
life on the 19 day	of May 1886 (State here
6.11 x	and a good season
full particulars of the husband's death, who	
How was shot that	right the budy by a
eminic base evic	e entry busy obout
our un ch belens le	It wipple to coming
	distante from boest.
over, while in 26	who of Parat Butter
	or 1863, July 2 = 4
	June June
from a 6 feet of soi	of he died as obove
stoud, May 19,	
manife annual contraction and a second and a	ninen Kommuni dan di dan mangan menganan di mangan dan dan dan dan dan dan dan dan dan d

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 16, 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	
do day of Josey 1805.	Alice de gackson
26. Beavery Ordinary	Alice de gackson

he 27 day of Jarry 1896.

Form No. 2

POWER OF ATTORNEY.

STATE OF GEORGIA, Carre poell County.

I, Alex M. forkson hereby authorize R. S. Joell son of Fayette Co. La to receive and receipt for the pension paid hereon and request that he remit same to at Frecotty for Markey Whereof, I have hereunto set my hand and seal, this Z?

day of Jarry 1836.

Alice Ale Jackson [L.8.]

M. 3. Ul Loring

A. C. Gravers Ordy

POR THOSE HERETOFORE PAID.

NO. 1714

NO. 1714

WIDOW'S PENSION,
for year coding February 15th, 1896.

Market Market Issued

WARRANT ISSUED

WARRANT ISSUED

1896.

AND MARKET ISSUED

1896.

STATE OF GEORGIA, County of Complete County of Ordinary in and for said County of Ordinary in and for said County of County of State of Georgia, hereby certify that I am acquainted with Mrs.

know from my own knowledge (or from positive proof presented to me by reputable witnesse.) that she resides in this County, and that she resided in the State of Georgia on December 23, 1880, and has not lived out of the State since that date. That she is the widow of the state of State since that date.

deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

the day of Fuby 1897.

{SEAL} Rb Ozavis Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA. County bereby authorise hur. Jackbour hereby authorise hur. Jackbour of Sea Sea 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 sead, this day of Juby 1897.

F. G. Mc Lorins
R. C. Bravers

Cordinary

MILDOUI'S PENSION.

for year ending February 18th, 1897.

M. Am Jackson

widow of

RICHARD JOHNSON,
Commissions

WARRANT ISSUED

28

1897.

AND HANDEL TO

AND HANDEL TO

STATE OF GEORGIA, County of

STATE OF GEORGIA,	personally Comes Mrs.
County of Cam phell	Alier W. Joellan
to program to the content of the program of the content of the	
	nat she is a bona fide resident of said county of
. Campbell State of Geo	orgia, and that she has RESIDED in said State
continuously ever since Lune 324	18 39 That she is the Widow of
Mathew E. Jack son	
"0"	He
of the 33 = Re	Riment Of the second se
Volunteers, that he enlisted in said regiment on or about the	e month of May
186 2 and served in the Army up to July 2	186 J That he lost his
life on the 19 day of	ll oy 18 86 (State here
full particulars of the husband's death, when, where and from u	that cause) (262 was shot
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ligh nepple, by a 'n	
while in services of	the double of
Leegsburg in state	Verm on July 200
1863. On account of so	is wound, hoving .
bane coftens & in fris.	
Island in N. Y. 4. later ex	
in siell furlough, He was in	he dies or class thoy 19.1
Depopent swears that she was the wife of said deceased soldier	r, during his service in the army as a soldier,
and that she has never married since his death aforesaid, the	· /-/
that Georgia is her home and she resided in this State	
lived in any other State or locality since that date. I h	
County for the year endi	ng February 15th, 1895, and now apply for
the pension provided by law for the year ending February 15	th, 1896.
Sworn to and subscribed before me, this	
27 day of Josep 1896. Alie	in Me Jackson

For Widows Heretofore Allowed Pensions.

TATE OF GEORGIA,	F. M. Jack somes Mrs.
ounty of Campbian	V. M. Janison
	·
who being sworn save on oath that	she is a bona fide resident of said county of
O. II	site is a sould not resident of said county of
Care place State of Georg	ria, and that she has RESIDED in said State
luce 3 m	10 39 The best of William
ntinuously ever since June 32 Voillew & Jackson C' of the Regime	That she is the widow of
Tochew 6, gal 16 to	who was a Soldier in Company
C' 5 5379	. Ha
of the Regin	ient of
olunteers, that enlisted in said regiment on or about the mo	nth of April
36 Z and served in the Army up to July 2	186 J That he lost his
e on the 19 day of 2	18.86 (State here
ll particulars of the husband's death, when, where and from wh	
les was that this very h	the light side
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is book stated	7.
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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 Comp beel 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	A Alle good boon
Sworn to and subscribed before me, this day of Table 1897. R. le, Bacours Ordinary.	Post-office Tien only
Ordinary.	CH

POWER OF ATTORNEY

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day of	3223	7			1898.	A su	que	kso	i.i		_[1. 8.]
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		JON,	1898.	3	County,	action	of Pennisma.		1898.		
		ENSION,	February 15th, 1898.	efron!	C County,	E. gackow	RICHARD JOHNSON, Commissioner of Pentitut.	SUED	1898.	2.0	WIER, ATLANTA

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For Those He

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deur		n. Jack	son				
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J.			ordin	ary			
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35		9	8	four .	RIC	M	S. HARRE
		13	2	N. 19			E.O.

STATE OF GEORGIA,	Personally Comes Mrs.
County of 6 mm please	A.M. Viction
	oath, that she is a bona fide resident of said county of
1 / /	te of Georgia, and that she has RESIDED in said State
continuously ever since	
Maillien & Jacks and	1839 That she is the Widow of
The state of the s	the second
	legiment of
Volunteers, that he callsted in said regiment on or about the	o month of
186 2 and served in the Army up to July 2.	186 That he lost his
life on the 19 th day of	180 D (State here
full particulars of the husband's death, when, where and	from what cause.) He was a hox
through the light side	with a mu bace, The
will cliving the light	exerch just below the
supplied came and el.	
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Listed in the 2nd July	
loce - g:	
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 b	became his wife in the year 18 56.
I have been allowed a pension as a resident of	County for the year ending
February 15th, 1897, and now apply for the pension provided	by law for the year ending February 15th, 1898.
Sworn to and subscribed before me, this	A All andriver
Sworn to and subscribed before me, this day of 1898.	1 9
R & Biarro Ordinary.	Post-Office worth, Fa
State of Georgia,	1 1. C. Bearing
County. Ordi	nary of said County, certify that I am well acquainted
with Mrs. + 116 Jackson	
fied that the facts therein stated are true, and I know she is the	e individual she represents herself to be, and that she
has continuously resided in this State since the	day of 18
Given under my official signature and seal this the	9 day of Janey 1898.
	el di avisi
	County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of Jamphelf	04 m Jackson
1 , 1 1,	th, that she is a bona fide resident of said county of
. / /	of Georgia, and that she has RESIDED in said State
continuously ever since. 3 day of funt	1839 That she is the Widow of
m. 6. Jackson	who was a soldier in Company
04 of the 5-3	Regiment of Sylvingia
Volunteers, that he enlisted in said regiment on or about the	nonth of April
1862 and served in the Army up to fully	186 3 That he lost his
life on the 2 day of 14	ily 1843 (State here
full particulars of the husband's death, when, where and fr	T 41 . 11 1
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19 day of may 1886	
Deponent swears that she was the wife of said deceased soldier,	
she has never married since his death aforesaid, and that she bec)
I have been allowed a pension as a resident of 64	1 1 110
February 15th, 1898, and now apply for the pension provided by	
Sworn to and subscribed before me, this.)	y law for the year ending February 15th, 1899.
2-3 day of January 1899.	It Me Jackson
1 9 Alex here Ordinary.	Post-Office omnathy ohl
State of Georgia.	L. J. of lephens
olumistell County. Ordin	ary of said County, certify that I am well acquainted
with Mrs. A. M. Jackson	who made the above uffidavit and am satis-
fied that the facts therein stated are true, and I know she is the	
has continuously resided in this State since the	day of June 1839
	23 day of January 1800.
Given under my official signature and seal this the	11 4 1 + 1 1 1800.
·	Listephens
(Official)	· Makerell Lall.

POWER OF ATTORNEY

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Jackson			ampbell		ity
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IN WITNESS W			o set my han	d and seal,	this 26
ay of Lamuary	1900,		111	1	
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Heretofore Put 000.	S PENSIC g February 18th, 19	hell c	V. LINDSEY,		HANDED TO
900.	N'S PENSIC nding February 1844, 19	m Jackson	W. LINDSEY,		AND HANDED TO
1900. Put No. 2676	OW'S PENSIC ar ending February 15th, 19 PAID TO	9 m Jackson mphell c	INO. W. LINDSEY,		AND HANDED TO
1900. No. 2676	TDOW'S PENSIC	Campbell of	JNO. W. LINDSEY,	WARRANT ISSUED	AND HANDED TO

POWER OF ATTORNEY.

	restor	M. J	_of_ C.	in ou		y author
	d receipt for	the pension	paid hereon	and reques	t that he re	mit sam
IN U	TTNESS W	HEREOF, I	at	a got my ha	nd and seal	this //
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tofore Pald.	7.2%	E de si	P 3 3	UNI,	ISSU ISSU	Frinte

STATE OF GEORGIA.) Personally Comes Mrs.
County of Campbell A. M. Jackson
who, being sworn, says on oath, that she is a bona fide resident of said county of Gampbell State of Georgia, and that she has RESIDED in said State continuously ever since full 3 1839. That she is the Widow of Mashew, E. Jachson who was a soldier in Company
of of the 60 Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of Africa 1862 and served in the Army up to Lucy 1868. That he lost his life on the day of Muy 1854 (State here particulars of the husband's death, when, where and from what cause) He was short through
entring the left Brust Just below the lest night dimeout cloud to the back bone on the same side und said injund causing his death in may
7
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 18.54. I have been allowed a pension as a resident of Julian full. County for the year ending
February 15th, 189 4 , and now apply for the pension provided by law for the year ending February 15th, 1900.
Swori to and subscribed before me, this 2 & day of Junuary 1900. J. J. Stephens Ordinary. Post Office Broglion Tya State of Georgia.
State of Georgia, Lumphell County. Ordinary of said County, certify that I am well acquainted with Mrs. A. M. Jackson, who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 3 day of \$\frac{1121}{2000}\$ 18.0.9 Given under my official signature and seal, this the 2.4 day of \$\frac{1211}{2000}\$ 1000.
Official J. Stephens - Ordinary of Teamphell County.

For Widows Heretofore Allowed Pensions.

TATE OF CEORGIA	Damana II	0
County of Complete	Alice M.	Comes Mrs.
County of	steer M.	fort so

Carre Abell	on oath, that she is a bona fide resident of said County of
continuously ever since. June 3	State of Georgia, and that she has RESIDED in said State
continuously ever since.	That she is the Widow of
Morkey & Joseph 20 100	who was a soldier in Company
Volunteers, that he enlisted in said regiment on or a	A Commence of the Commence of
186 2 and served in the Army up to.	
ife on the 19 day of	
particulars of the husband's death, when, where	and from what cause) Her was that
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in since of force	er of Julysbury on July
2,1863, soid boll en	the left trook just below
sipple oud cause	out mor toest tout; o
one account of so	is mount do sect de
acy or throng per	IS on Keny 19, 1886
Deponent swears that she was the wife of said decease	d soldier, during his service in the army as a soldier, and that
he has never married since his death aforesaid, and t	
I have been allowed a pension as a resident	of Cour fittel County for the year ending
	sion provided by law for the year ending February 15th, 1901.
Sworn to and subscribed before me, this	Y The second
11 day of Feby 1901.	Alice Me Gackson
Ordinary.	
State of Georgia	In flu for
State of Georgia, County.	Ordinary of said County, certify that I am well acquainted
ith Mrs. Alica U. Jock.	, who made the above affidavit and am satisfied
at the facts therein stated are true, and I know sh	e is the individual she represents herself to be, and that she
as continuously resided in this State since the	day of
Given under my official signature and seal, the	his the Way of Faty 1001.
{Official } Beal. }	Ordinary of Comptell County

POWER OF ATTORNEY.

	Jack nd receipt for	son	of Co	in ple		Xu.
In Wii	ness Whereof.		at o set my hand	and seal this	140	<u>. </u>
of of	Tarry	1902.	.7			
			Alice. A	u. gaet	sor [L. S.]
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ai	77.72	ending Dec.	0 4 3	LINDSE Commissioner	\$ 1/2	6 5

POWER OF ATTORNEY.

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In Witne	was Whereof,		1,	hand and	seal, this 17
day of	viny	190	3.		
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B.	PENSION,	en fort son	County,	NDSEY,	SSUED 42 1908. 19 10 10 10 10 10 10 10 10 10 10 10 10 10
GSO	PENSION,	ing Dec. 31, 1908. The foot of the foot	Level County,	LINDSEY, Commission of Parison	NT ISSUED // 42 1908. Astronomy To the second of the sec
908.	"S PENSION,	ending Dec. 31, 1908. PAID TO THE SOUTH DOWN	Beck County,	Regiment OHN W. LINDSEY, Commissions of Penture	ARRANT ISSUED AND HANDED TO AND COMMENTED TO

For Widows Heretolore Allowed Pension

SIAIL	OF GEORGIA, PRIBONALLY COMES MIRK	
County	of the M. Journa	-
	who, being sworn, says on oath, that she is a bona fide resident of said County	of
	State of Georgia, and that she has RESIDED in said Sta	ite
continuously e	ever since June 3 of 1839. That she is the Widow	of
Mack	who was a soldier in Compa	nv
· c'	of the Regiment of Su	
Volunteers th	at he enlisted in said regiment on or about the month of	
	erved in the Army up to Lucy 2 186 3. That he lost !	
ife on the		
rarticulars of t	he husband's death, when, where and from what cause) or that the original left Dis by a Ulimin	
have we	will in servin of boule of Keen ohn	_
acid be	lite in arrown of bould of therey observed in the beauting laft broad girst below with,	ble
comin	good eliste to the bout bout consin	7
Lis d	with on 19th day of May 1866 or other	
ototes		
Deponent swee	ers that she was the wife of said deceased soldier, during his service in the Army a	s a
	nat she has never married since his death aforesaid, and that she became his wife	
he year 18		
	0. 660	
	County for a	
	ecember 31, 1901, and now apply for the pension provided by law for the year endi	ng ·
December 31,	1902.	
	to and subscribed before me.	
his 14 %	day of Jony 1002 thee Me. gacksone	othodik "
Mr.S.H	Coforin Ordinary.) Post Office Brog for the	
State of	Corrier M. S. M. Lorin	
	county. Ordinary of said County, certify that I am w	
	County, yournary of said County, certify that I am w	
equainted wit	th Mrs. Alee & Mr. Joseph who made the above affidavit a	nd ·
un satisfied th	nat the facts therein stated are true, and I know she is the individual she represen	nts
acreself to be	, and that she has continuously resided in this State since the	
lay of	IN 90	
Given und	er my official signature and seal, this the 14 th day of faring 19	02.
	W. S. We Lorin	
Official / Seal.	0 16.2	
	Ordinary of Coun	ty.

For Widows Heretofore Allowed Pensions

Historic Michigan I published,
STATE OF GEORGIA.) PERSONALLY COMES MIRSY
County of Compliant Alies le. Lacks
who, being sworn says on eath, that she is a bona fide resident of said County of State of Georgia, and that she has RESIDED in said State
170 1830
Wouhen 6 Vac 16 since
" 6" of the " Regiment of See
Volunteers, that he enlisted in said regiment on or about the month of
180 2, and served in the Army up to leg 2, 180 63. That he lost his
life on the 19 day of Merry 18 76 (State here
particulars of the husband's death, when where and from what cause.) He was black deployed the layth bidy by a
Meniney Bose while in Con fit direct
at toute of Guery bury - and base
ealing bleff brook such below with
4 Comes out was the book bour -
Du one rank y said would to but
he dies keoy 14, 1886 or obvor a Lotes
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 56
Chin She
year ending December 31, 1902, and now apply for the pension provided by law for the year ending
December 81, 1908,
Sworn to and subscribed before me,
this 17 day of Joe y 1903 Hice Ale gook son
It & Me Foris Ordinary.) Post Office Dimocky Ja
Contoured to the contou
State of Georgia, 1 M. S. Me Lorin
acquainted with Mrs. Aliew Ml. Joellove, who made the above affidavit and
am satisfied that the facts therein stated are, true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18 80
Given under my official signature and seal, this the 2 day of 1903.
M. Sue Force
Ordinary of County beill County
Ordinary of Courty built County.

POWER OF ATTORNEY.

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FOR	175E.	EMBE	103	000	OHN W. LINDSEY Commissioner VARRANT ISSUED	7 010	rater, Al
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1904.	NE		1 0				

POWER OF ATTORNEY

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STATE O	F GEORGI	Α,	1				
ba	und 6	in ,	COUNTY			(
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to receive	and receipt	for the pensi	on paid he	reon, and 1	request th	nat he ren	nit same to
and retries requirements	Carrie Charles and Carries and	anamanan an andar andara	at	Mark to control congression	har	inde	
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day of	"		1905.	1			
and the C				1: 11	Aug	Asses	ال (L. s.)
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For Widows Heretofore Allowed Jordany.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

who, being sworn says on oath, that she is a bona fide resident of said County of State of Georgia, and that she has resumen in said State continuously over since the State of Georgia, and that she has resumen in said State continuously over since the State of Georgia, and that she has resumen in said State continuously over since the State of Georgia, and that she has resumen in said State continuously over since the State of Georgia, and that she has resumen in said State continuously over since the State of Georgia, and that she has resumen in said State continuously over since the State of Georgia, that has one state of the Wilson of State of County for the pension provided by law for the Arriby as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year ending December 31, 1904. Sworn to and subscribed before me, this I day of I by 1904. State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs. Always I said thought of the who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereelf to be, and that she has continuously resided in this State since the day of 18 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	STATE OF GEORGIA.	PERSONALLY COMPS Mrs.
who, being sworn says on oath, that she is a bona fide resident of said County of State of Georgia, and that she has resident of said State continuously sver since for the State of Georgia, and that she has resident in said State continuously sver since for the State of Georgia, and that she has resident in said State continuously sver since for the State of Georgia, and that she has necessary that he will on the State of the State of Georgia, and that she has necessary that he will on the Regiment of State of the State of the State of County of the State of County of the State of State of County of the State of Georgia, County of the State of Georgia, County of the pension provided by law for the year ending December 31, 1904. Sworn to and subscribed before me, this of Georgia, County of the pension provided by law for the year ending December 31, 1904. State of Georgia, County of State of Georgia, County of said County, certify that I am well acquainted with Mrs. Alice Well of State of Georgia, County of said County, certify that I am well acquainted with Mrs. Alice Well of State of Georgia, County of State of Georg	County of la acce place	flice le Joekson
State of Georgia, and that she has RESIDED in said State continuously ever since for the fact of Georgia, and that she has RESIDED in said State continuously ever since for the facts therein stated are true, and I know she is the Widow of My of the foreign and on the month of the facts there is the state of Georgia, this 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 the state of Georgia Given under my official signature and seal, this the 1 9 day of Just of Just I who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of Just o		
continuously aver since for the first and form the first and that she has never married since his death aforesaid, and that she has never married since his death aforesaid, and that she became his wife in the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904 State of Georgia, Country Ordinary State of Georgia, Given under my official signature and seal, this the 19 day of Fu by Given under my official signature and seal, this the 19 day of Fu by 1904 Mr. S. Will Lawn That she is the Widow of who was a soldier in Company who was a soldier in Company who was a soldier in Company Regiment of Wat Lee who was a soldier in Company Regiment of Cauch Cauch 1886 That she is the Widow of Audit the month of Arth 1886 Regiment of Cauch Cauch 1886 That she is the Widow of Audit the form the sold course. Is a Cauch Cauch Cauch 1886 That she is the Widow of Audit 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 19 day of Fu by 1904 The Same Cauch Cauch 1886 Given under my official signature and seal, this the 19 day of Fu by 1904 The Same Cauch Cauch 1886 Given under my official signature and seal, this the 19 day of Fu by 1904 The Same Cauch Cauch Cauch 1904 The Same Cauch C		
who was a soldier in Company "C" of the S J J Regiment of Sa C Volunteers, that he entisted in said regiment on or about the month of S L 188 Z and served in the Army up to Levely 2 188 D That he lost his life on the S C day of Levely of the headona's death, when where wat from what cause. We work the headona's death, when where wat from what cause. The works that he entitled the total the fact of the headona's death, when we wat from the clark that the fact of the headona's death, when we wat from the clark that the fact of the headona's death, when what cause. The works that the fact of the way for the pension provided by law for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904. Sworn to and subscribed before me, this 19 day of Fre by 1904 M. M. Sworn to and subscribed before me, this 19 day of Fre by 1904 Country ordinary. State of Georgia. Country Ordinary of said County, certify that I am well acquainted with Mrs. Alway or John 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 19 day of Fre by 1904. The S. Which Corner Ordinary of State of Ter by 1904. The S. Which Corner	continuously ever since frie 3	1839. That she is the Widow of
Volunteers, that he emisted in said regiment on or about the month of the control	Morched & fac 16	who was a soldier in Company
186 2 and served in the Army up to fully 2 186 3. That he lost his life on the 19 th day of 18 8 6 (State here particulars of the husband's death, when, where and from what cause.) We woos blook the rough the life has 5 to could be for the following the life has 5 to could be for the following the life has 5 to could be for the following the life has 5 to could be for the following the life has 5 to could be for the following the life has never married since his death aforesaid, and that she became his, wife in the year 18 5 6 I have been paid a pension as a resident of the pension provided by law for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904. Sworn to and subscribed before me, this 19 day of Fe by 1904. Post Office 2 and be subscribed before me, this 19 day of Fe by 1904. State of Georgia. County Ordinary. Post Office 2 and be a law well acquainted with Mrs. Here we have and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 8 0. Given under my official signature and seal, this the 19 day of Fe by 1904. No seal!		regiment of
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State of Georgia State of Georgia State of Georgia State of Georgia County of December 31, 1904 State of Georgia County of County of Ordinary of said County, certify that I am well acquainted with Mrs. After 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 19 day of Fu by 1904. W. S. Will Lorine Ordinary 1904. Ordinary of State since the Given under my official signature and seal, this the 19 day of Fu by 1904. N. S. Will Lorine Ordinary 1904. Ordinary of State since the Given under my official signature and seal, this the 19 day of Fu by 1904. N. S. Will Lorine Ordinary 1904. Ordinary of State since the Jone of State since the since	life on the 19 " day of U	Loy 18 86 (State here
State of Georgia. State of Georgia. County Ordinary of said County, certify that I am well acquainted with Mrs. Here is 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 Ordinary of Lower and that she has continuously resided in this State since the Ordinary of Lower and I have be above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents of the sure		
State of Georgia. State of Georgia. County of County of State of Georgia. County of County of State State since the 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 sound out of the sound out of the state signature and seal, this the 19 day of Fe by 1904. Given under my official signature and seal, this the 19 day of Fe by 1904. W. S. W. L.	the was that chis	the the tiff side
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 6 I have been paid a pension as a resident of the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904 Sworn to and subscribed before me, this 19 day of Fe by 1904 State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs. Alice We 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 19 day of Fe by 1904. The state of Georgia is given by the pension provided by law for the year ending December 31, 1904 The state of Georgia is given by 1904. The state of Georgia is given by		
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 6 I have been paid a pension as a resident of the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904 Sworn to and subscribed before me, this 19 day of Fe by 1904 Post Office I and but I am well acquainted with Mrs. Alice We County Ordinary of said County, certify that I am well acquainted with Mrs. Alice We county of said County, certify that I am well acquainted with Mrs. Alice We county of said County, certify that I am well acquainted with Mrs. Alice We county of said County, certify that I am well acquainted with Mrs. Alice We county of said County, certify that I am well acquainted with Mrs. Alice We county of said County, certify that I am well acquainted with Mrs. Alice We county who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of Fr by 1904. Given under my official signature and seal, this the 19 day of Fr by 1904.	Three entires le de	break just below
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 6 I have been paid a pension as a resident of Court of Georgia County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904 Sworn to and subscribed before me, this 19 day of Fe by 1904 Post Office I am Surve Lorung Ordinary. State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs Alice Unit of Said County, certify that I am well acquainted with 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 Is 80 Given under my official signature and seal, this the 19 day of Fe by 1904.	left wife folk, con	ing but close
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 6 I have been paid a pension as a resident of Court of County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904 Sworn to and subscribed before me, this 19 day of Fe by 1904 Post Office I am Surve Lorent Surve County Ordinary Ordinary of said County, certify that I am well acquainted with Mrs Alice Unit of State of Georgia, I am 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 19 day of Fe by 1904. No Belail		
I have been paid a pension as a resident of Counce for the year 18 5 6 I have been paid a pension as a resident of Counce for the County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904. Sworn to and subscribed before me, this 19 day of Fe by 1904. Post Office I are for the following for the year ending Post Office I are for the year ending Post Office I are for the year ending December 31, 1904. State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs Alice We for who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 8 0 Given under my official signature and seal, this the 19 day of Fe by 1904.		
I have been paid a pension as a resident of Court of been County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904 Sworn to and subscribed before me, this 19 day of Fe by 1904 Post Office I am Sur Lower Grand Ordinary. State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs Alice We Somewhat and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 8 0 Given under my official signature and seal, this the 19 day of Fe by 1904.		
I have been paid a pension as a resident of General County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904 Sworn to and subscribed before me, this 19 day of Fe by 1904 Post Office Day December 31, 1905 State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs. Alice UL Down who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of Fe by 1904. Given under my official signature and seal, this the 19 day of Fe by 1904.		s death aforesaid, and that she became his wife in
December 31, 1904. Sworn to and subscribed before me, this 19 day of Fre by 1904. M. State of Georgia. Country Ordinary of said County, certify that I am well acquainted with Mrs. Alice 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 19 day of Fre by 1904. The sum of the year ending the pension provided by law for the year ending December 31, 1904. W. S. W. Larra 18 8 0 1904.		land bloom
State of Georgia. State of Georgia. Country: Country:		
State of Georgia. State of Georgia. County Ordinary of said County, certify that I am well acquainted with Mrs. Alice Unit of the Sound 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 19 day of Fr by 1904.		r the pension provided by law for the year ending
State of Georgia, County) Ordinary of said County, certify that I am well acquainted with Mrs. Alice We for who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 80 Given under my official signature and seal, this the 19 day of Fr by 1904.	December 31, 1904.	
State of Georgia, County) Ordinary of said County, certify that I am well acquainted with Mrs. Alice We for who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 80 Given under my official signature and seal, this the 19 day of Fr by 1904.	- 1	Attion Ma . Andrews
State of Georgia, County) Ordinary of said County, certify that I am well acquainted with Mrs. Alice We for who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 80 Given under my official signature and seal, this the 19 day of Fr by 1904.	this 19 day of Fee by 1904	a de la grante
County Ordinary of said County, certify that I am well acquainted with Mrs. Alice the fock 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 day of. 18 8 0 Given under my official signature and seal, this the 19 day of Fr by 1904.	M. S. W. Form Ordinary.	Post Office.
County Ordinary of said County, certify that I am well acquainted with Mrs. Alice the fock 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 day of. 18 8 0 Given under my official signature and seal, this the 19 day of Fr by 1904.		02 1
acquainted with Mrs. After the fock 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 day of	1	
am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 8 0. Given under my official signature and seal, this the 19 day of Fu by 1904. No. 8. W. S. W. Loria		Ordinary of said County, certify that I am well
herself to be, and that she has continuously resided in this State since the day of 18 8 0 Given under my official signature and seal, this the 19 day of Fr by 1904. NV. 8. W. Larrie 1904.	acquainted with Mrs. Alice UL for	Who made the above affidavit and
Given under my official signature and seal, this the 19 day of Fr by 1904. Tomoral 1904.	am satisfied that the facts therein stated are true	, and I know she is the individual she represents
Given under my official signature and seal, this the 19 day of Fu by 1904. The Same Large Large 1904.	herself to be, and that she has continuously reside	ed in this State since the
Tomal M. S. Ul. Lanu		
Tomal M. S. Ul. Lanu	Given under my official signature and seal, t	his the 19 day of Fer by 1904.
Umerat Beat	-in-	W. S. W. Larin
A Ordinary of Care party County	(Beal)	Ordinary of Cour & beer County.

NOTE.—All blank spaces must be filled. Voucher and Affidavit must bear date after January 1st, 1904.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MIS.
1	a cath, that she is a bona fide resident of said County of ate of Georgia, and that she has RESIDED in said State
continuously ever since Line & Joe,	7. / 7.3 9 That she is the Widow of who was a soldier in Company
"-6" of the " 5"	Regiment of Ya
Volunteers, that he enlisted in said regiment	on or about the month of
186 Z, and served in the Army up to	y of way 186. That he lost his
particulars @ the husband's death, when, where	Villa III
	the bury - and have un -
timed brook just h	to bout bour, and
may 14, 1806	
Deponent swears that she was the wife of sai	d deceased soldier, during his service in the Army as a
the year 18 <u>1 6</u> I have been paid a pension as a residen	to to Complete County for the pension provided by law for the year ending
December 31, 1905.	
Sworn to and subscribed before me,	Touce ou gastes on
n. Sue Form, Ordinary	Post Office tour huma you
State of Georgia,	ordinary of said County, certify that I am well
	acklow, Who made the above affidavit and
am satisfied that the facts therein stated are	true, and I know she is the individual she represents
herself to be, and that she has continuously	resided in this State since the
day of 18_ \(\bar{\mathcal{F}} \text{\text{0}} \)	17 0 -
Given under my official signature and	seal, this the 17 day of Joury \$ 1905.
Official Seal.	Ordinary of Comp here County.

NOTE.—All blank spaces must be filled. Voucher and Affidavit must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF G					in in its	Barren .
Lau	- Steel	COUNTY.	, ,		. / : : ;	
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to receive and re	reint for the new	ofof		ment that I	e remit same to	
	ue pen	at_		am		
In Witness	Whereof, I have	hereunto set n	y hand and	seal, this	16 00	
day of	uj	1906,				
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Jr. x. ac	Jones, C	- ray				
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POWER OF ATTORNEY

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STATE OF GLOEGIA

For Midows Heretofore Allowed Pensions.

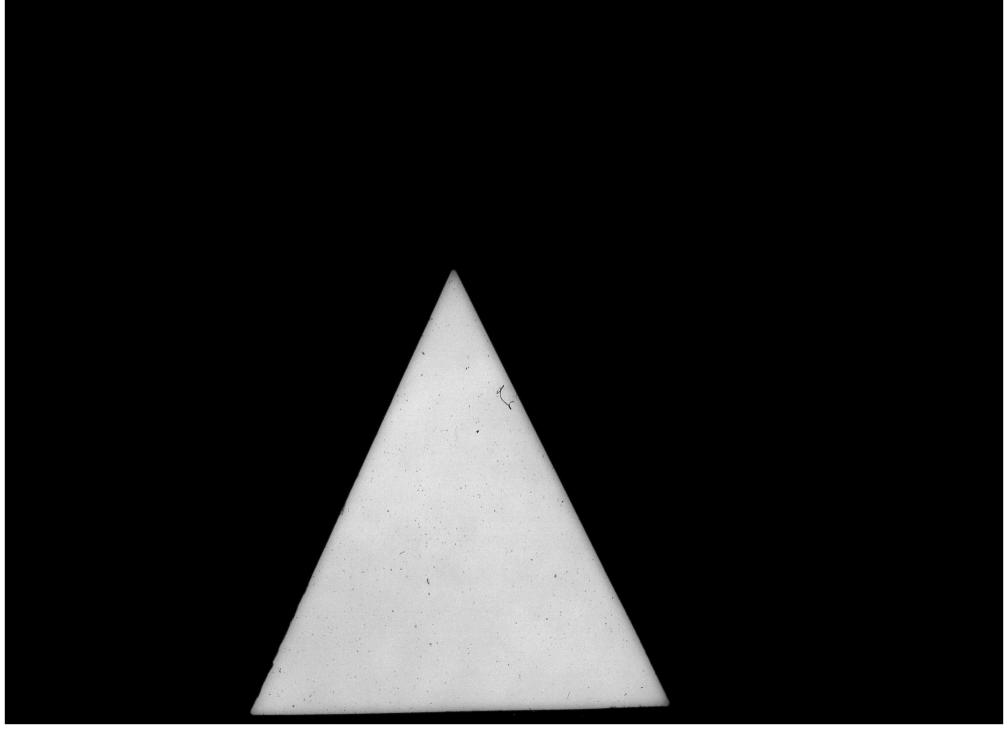
STATE OF GEORGIA	PERBONALLY COMES MES.
-111111111111	that she is a bona fide resident of said County of
continuously ever since figure 3,	Georgia, and that she has RESIDED in said State / 8 J 9 That she is the Widow of
"6" of the 5.324	who was a soldier in Company Regiment of
Volunteers, that he enlisted in said regiment on or	about the month of
	2 186 J That he lost his
이 것이 얼마나 아니는 아이는 아이를 하는 것이 없었다. 아이들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람	livy 18 76. (State here
particulars of the husband's death, when, where and	from what pause, The were that
	of July 2, 1 760, done
ucurly briost fu	of below the lift
done, and soil and	Commission and Article Commission
draw on drog 19,	1876 or ofere a Lotus
Deponent swears that she was the wife of said dece	pased soldier, during his service in the Army as a
soldier, and that she has never married since his d	eath aforesaid, and that she became his wife in
the year. 18 3 6	
	1 - County, for the
year ending December 81, 1905, and now apply for	the pension provided by law for the year ending
December 31, 1906.	
Sworn to and subscribed before me	Alie. Ale Guteson
22 Sue Losin, Ordinary.	Post Office Lair burn ya
	R7 A US 3
State of Georgia,	1. M. S. We Lovin
County County	Ordinary of said County, certify that I am well
	// Lou, who made the above affidavit, and
am satisfied that the facts therein stated are true, a	
herself to be, and that she has continuously resided	in this State since the
day of	the 16 day of Jany 1800.
Given under my official signature and seal, thi	Mr. S. luc Forin
(Omelai)	Carrie Ilees
A Ordi	nary of County.

For Widows Heretofore Allowed Pensions

101 1	I IUU II D IIUI	ntatata U	HOROU !	г опогопо.	
	GEORGIA,	1	PERSONAL UL	LY COMES MRS.	ric.
Camp	who, being sworn says	State of Georgia,		sident of said Couns	
continuously ever	Lew 6. Soe	16000	The who was	at she is the Wide	
Volounteers, that l	ne enlisted in said regime		month of	- frie	-
	red in the Army up to	July.	2/ 186	3. That he los	t his
life on the		day of U	-04	18.76. (State	here
The road	usband's death, when whe	· · · · · · · · · · · · · · · · · · ·	- 2/ sid	a by a	`.
	in bour wo		" coupe	of servi	u
wou	of county	his de	du or	Lucy	
19:178	600000	a slo	Ced.		
			}		
Deponent swears t	hat she was the wife of s	said deceased soldi	er, during his se	rvice in the Army	86 B
the year 18 V 6	ne has never married si				
year ending Decem	ber 31, 1906, and now a	pply for the pension	on provided by h	sw for the year end	ing
December 81, 1907.			<i>P</i> :		
his 2 7 day		7. Alic		Jackson	
moue	Ordinar	y. Post Offic		m ya, Ri	20,4
State of Geor		y. Ordinary	of said County,	certify that I am	well
equainted with Mi	Alier M. Je			he above affidavit,	
m satisfied that th	e facts therein stated ar	e true, and I know	v she is the indi	vidual she represe	nts
	hat she has continuously		tate since the		
	my official signature and	d seal, this the 2	2 day of	lany 1	907.
Official)		n. 8.		min	
Beal }		Ordinary of C	amp	here con	aty.
NOTEALL	lanks must be filled				

Allanda 19891 This is to cestify that I was the medical allenganh of M. E lackson of the last illeties found him Suffiring front go Lyu that ball passing through the entire Thopax he pulmonage tissue in the track of the up was very march broken distinct Covity throughout The ground caused the death of M. E. Garkson Paul Javes N. D. Swouldandensonled Deform May 400891 mills achow Course of Fullen Leo

Georgia County This is to Certify and Sween that I was the attending Physician of Matthews E facken, about oliving the Yours of 1873 18 14 and 1875, during that time I found him suffering from a Gun Shat wound going in about one ench below the light hipple and going out non the back bone the said wound officted his lungs he told me he received the said wound at the battle of Tellys being , I am outesfied that the soul wound was the commediate laces of the death of the said faction Survive to could Subscribed before me this And 21 9891 James B Molleyon R. C. Beavers Ordinary.



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

W. S. McLarin, Ordinary
For a Jackson
Date of Death July 13, 1320.

Amount \$ 100.00

Approved and ordered paid

Approved and ordered paid

Commissioner of Pensions.

Palmetto, Ga. Mr. C. C. Jackson, Sr. Palmetto 1930 July - 2. Vio. self. (3) Vio. self. (4) night no. self. (3) Vio. self. (4) night no. self. (5) on malf. (6) Two no self. 350 2 no self. 350 (7) from the no self. 350 2 no self. 350 4.50 3.50 7.00 (8) this no. self. This ris. self. 3 50 (9) Three ris. self. 10 Try to hadren 11.00 (11) Trypto numain 963, gam ris 200 9 00 (21) This other ris? 03/100 mis? 450 (12) Vis. at death 24 2.00 I cutify this account is correct Soul J. Pinter? Sum to and Rubsciled befor me this Seft 12- 1920 J. Hutton nox Jo

DR. PAUL J. PENISTON.

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	
Personally before me, the Ordinary of said C	
Na C C Taokson	of said County, who, after being aworn, on oath
50 HOS (1914) (1	of said County, and that said Pensioner
was on the Pension Roll of said County at the tir County, in this State, on the ** ** 13th *** 13th ****	ne of death, which occurred in said Campbell day of July, 1930,
and that pensioner left no widow surviving, and n and Physician's bills, expenses, which amounted to the sum of \$ 135.	o estate of any value sufficient to pay these funeral 50, per sworn statements fully and completely
ITEMIZED hereto attached.	
Sworn to and subscribed before me, this Sept. 17th, 1930. W. J. Green County	Jw Jackson
(Seal of Ordinary)	
CEDATERCAME	OH ODDAYA DAY
CERTIFICATE	OF ORDINARY
GEORGIA, Campbell	County.
	, Ordinary of said County, do certify
that I personally know J. W. Jackson,	, who is a resident
	ruthful and trustworthy character, entitled to full
	Jackson, while in life and that this was
the same person whose name annears on the Pensic	on Roll of Campbell County, and
was paid a Pension of Fifty Dollars	
2nd quarter of 1930.	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.	
Given under my hand and official seal, this	17th day of September, 105 0.
(Seal of Ordinary)	mdw forus, Ordinary
	Comphett
	County
1st. Require those claiming expenses of last illness and giving each item and the value of it, and each date.	UCTIONS: 1 funeral, to make out their accounts in fully itemized form,
	ry, and in the following form. (Do not use the terms: "just,
"The above and foregoing account is rendered for servi	ess in the last illness (or for funeral expenses, as the case may
be) of	thout owning sufficient property to pay this bill.
attached neatly to this blank, after this blank has been proper	etly legitimate in every respect, and properly sworn to, and all erly completed as indicated.
money must be paid out until it is returned to you as your so 5th. Return this application, and attached bills, with you	must be sent to the Pension Department for approval and no uthority to make the payment. our final settlement, to the Pension Department.

Georgia, Campbell County.

Before me, the undersigned Ordinary, this day personally came Dr. Paul J. Penniston, who, on oath, says "the above and feregeing account is rendered for services in last illness of C. C. Jackson, who died without owning sufficient property to pay this bill".

Sworm to and subscribed before me, this

. 1950.

Ordinary.

Georgia, Campbell County.

/ Received of W. S. McLarin, Ordinar y of said county, the sum of \$39.13 in full payment of the pro rata share of the expenses of Fu. neral and Physician s bill, due by the State of Georgia. This De c. 22, 1930. As shown on opposite side of this receipt. 12/22/30/

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid." etc.)

"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may who died without owning sufficient property to pay this bill

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

5th. Return this application, and attached bills, with your final settlement, to the Pension Department.

5th. Ordinary should see that the back of this blank, when folded, is filled out.

July 28, 1930. FAIRBURN, GA. Estate of C. G. Jackson, deceased, IN ACCOUNT WITH

BISHOP & SHAW

FUNERAL DIRECTORS AND EMBALMERS

Day Phone No. 1

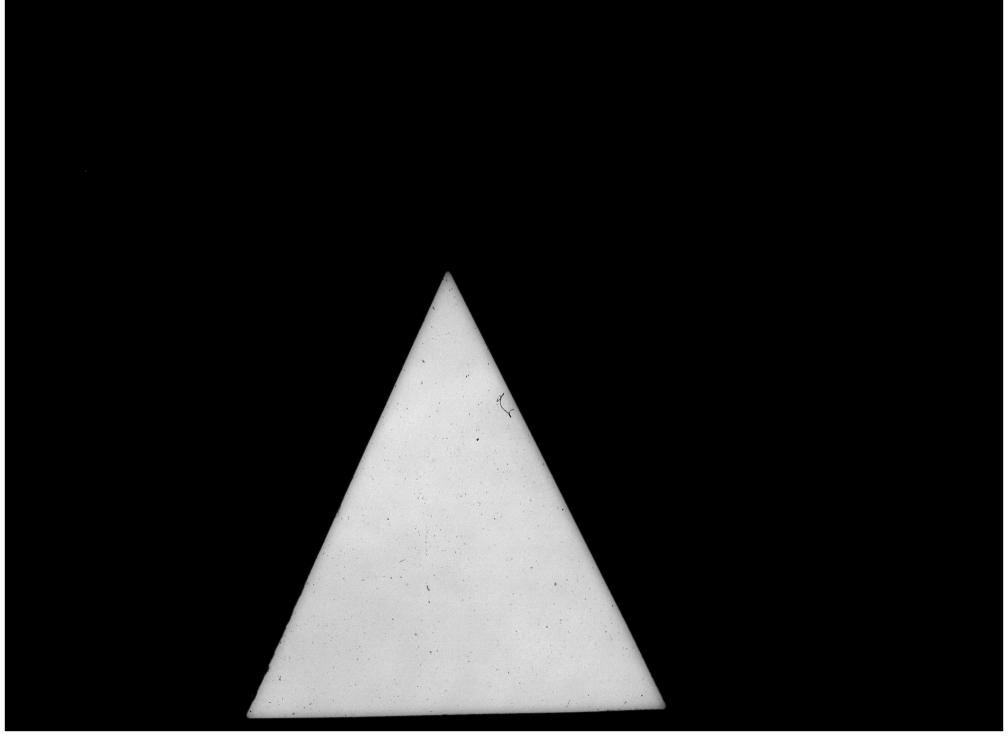
Night Phone No. 2

193 0. July 14 To 1 Casket 1 Robe Total ---882 50 Ge-orgia, Campbell County. Before me, the undersigned Ordinary, this day personally came H. B. Bishop, of the firm of Bishop & Shaw, who, on oat h, says"the above and forgoin still account is rendered for for funeral expenses of Mr. C. C. Jacks-on, who died without owning sufficient property AB Bishon to pay this bill". Sworn to and subscribed before me, this July 28, 1930. Ordinary.

Georgia, Campbell County.

Received of W. S. McLarin, Ordinary of said county, the sum of and due / \$60.87 in full of the pro rata share of the expense paid/by the State of Georgia on the funeral expenses of Mr. C. C. Jackson, an ex. Confed. soldier, late of said county, deceased. This De c. 22, 1930.

Bishop & Shaw By 1+BBishop



Jackson Emily a Complete Complete Complete Control	Charles of the Charle			* 1 A 2 4	(SEAL)		of	STATE
WIDOW'S INDIGENT PENSION.		ICVLE	4	<		uted in presence of		OF GEORGIA,
Name Cercily a fackers County Court backers Widow of William Jackson Composed Co. Fa,		A.e CEBUIE			S OF BRIAN	Country	County, to mean	County.
JOHN W. LINDSEY, Commission of Pensions.		OBDINGE			ALE DOY/ILL		by his check or registered	
WARRANT HANDED TO 1804. Oeo. W. Harrison, state Printer, Allanda.			and the second		P	190	on allowed and that mail.	de la

. 7

Count	of had here is	Lenk
	_County, to receive and receipt for the pension allowed	and that he
mit the same to me at	by his check or registered mail.	
Witness my hand this	day of	_190
Executed in presence of	Company of the second	
0.0	Oury,	L. S.
	County.	
SEAL.	APRIDAVITS OF PH	
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DW'S PENSI	LINDS	- A
DOW'S	W. LINDSE	26
WIDOW'S GENT PENSI	County A. Lander John W. LINDSEY	A A

QUESTIONS FOR APPLICANT.
STATE OF GEORGIA,
Campbell County. ALDRUSD 40 WIATE
Quily of packens of sell the and Downty Andrews
avail herself of the Pension allowed & Indigent Widows of Confederate fieldiers, under Act of General Assembly,
following questions, deposes and snewers as follows:
avail herself of the Penelon allowed indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1800, hereby submits her proofs, and after being duly sworn true answers to make to the following quenties, deposes and answers as follows: 1. What is your name and where do not reside t (Give State, County and Post Office) Equally C. Scargery
2. How long and since when have you been a resident of this State !
79 Hes, Since may 11-1827
9 W
4. When and where were you town 12 to 14 to 15 t
(Attach copy marriage license in every case.)
5. When and where and in what Company and Regiment did your husband enlist or serve during the war-between the States? Office Carrelly, State Froze-
was cheween the States? Office Cast 1863 Counties Counties of the Counties of the Cast 1863
Co. C. of 2 nd Va Cavalry State Frops.
6. He long did your husband verve in said Company and Regiment? Six months
When and where did your husband's Company and Regiment surrender and was discharged? See June 1864 Mean Norme for Co. Was discharged? Was your husband present at the time and place when his Company and Regiment surrendered?
8. Was your husband present at the time and place when his Company and Regiment surrendered?
9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
mand, for what cause, and by what authority? The was fresent
The state of the s
10. When and where did your husband die? 1897, in Palin etto Fa
11. Which of the following grounds do you base your application for Pension, viz.: First Agrahu Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty!
Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty;
12. If upon the first ground, state how long for have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the
third state whether you are trally blind and when and the service the state and here.
able to worn in over their years the country on the said when and where you lost your sight? Atter not been able to worn in over their years, Phenometrian
the when being your gentless is as to will me for some time the white the some some some time to the some some some time to the some some some some some some some som
13. What has been your occupation since your husband's death? None, There
been weather to do any thing,
14. How much can you earn gross by your own exertion or labor?
10. What property, real or personal, or income do you have or posses, and its gross value? Asked
14. How much can you earn gross, by your own exertion or labor? 15. What property, real or personal, or income do you have or possess, and its gross value? 16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1889, 1900, 1901, 1902, 1903, 1904, and what disposition, if any, by sale or gift, have you made of the same? 17. In what counties did you reside in 1892, 1900, 1901, 2902, 1900, and 1904, and what property did you return for taxation? 18. How have you been supported since death of husband, and especially for 1899, 1900, 1901, 1902, 1903, and 1904? 19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income?
It's left ne house Plat which they by the used for full for
17. In what counties did you reside in 1899, 1800, 1801, 1802, 1908 and 1904, and what property did fou
18. How have you been supported since death of husband, and smedally for 1809 The 1901 1902
and 1904? The expally by east of know the had a lister Since 1904th, relati
19. How much did your support cost for each of those years, and how much did you contribute by your
20. What was your employment during 1899, 1900, 1901, 1902 and 1903 how much did you receive
20. What yes your employment during 1990, 1900, 1901, 1902 and 1903 how much did you receive for each year?
21. Have you a family? If so, who composes such family? Give their means of support? Have they
22. Have you ever made application for pension before?
23. How many applications have you made for a pension, and under what class? None
Sworn to and subscribed before me, this the
21 day of September 190 6
It. S. he Love Ordinary,
of Carry all County.

QUESTIONS FOR WITNESSES STATE OF GEORGIA. Complue Campbell County 1 the application of are. 1900, and after seing duly sworn take answers to make to the see follows: Dere do you reside? Palcultto Cause 2. Are you acquainted with the applicant, Mrs. Small Concessions ow long have you known her? Tes - about 50 years 50 Wears to my Knowledge Were you ever acquainted with her husband & 420 Pas Dort Know long have you known him? Imn 1855 - to his clert 1899 11. Were you a member of the same Company and Regiment? 4-0. 12. How long did he perform regular military duty? Six morrilas 13. When and where was his Company and Regiment surrendered and discharged from service? 14. Were you with the Command when it surrendered? Present when it was choolinged to Was Were Jackson the husband of applicant present? resens 16. If not present where was he?_ 17. When and when did he leave his command? Hever left-By whose wthority be left ? How do you know all this? (State fully and clearly) & see listed in fame to win him and served out the leming his more 18. When and where did Die 1897 in Faluelle 49 19. Where did fit reside at his death and new long had in the resident of Wearght at his death? Paluetto ya. 50 years to my Much ofe 20. Do you of your own knowledge know that applicant is the lawful widow of well-come. 21. Has she remained unmarried since her soldier husband's Beath, and is now his widow? Policy Services 21. Has she remained operty, effects or income has the applicant, if any, and how do you know this of your own 23. What property, effects of income did applicant possess in 1899, 1900, 1901, 1902 and 1903, and what disposition did she make of it. The Real a Rouse Not Sold them and Sheet the Morey for living , 24. Has applicant conveyed any property in fast two years or given any away, if so, what was is, and to whom? Notice On for a Chinary . What is applicant's physical condition and her chances and ability to care a support? Extremely factle almost herplass

account of age and dispersion of the state of the state of the	No. on
27. How was she supported for 1899, 1900, 1901, 1997 and 1908?	mainly by
28. How much did applicant contribute to her support for last two year 39. Give a fall and complete statement of applicant's parabal condition? Alexandrian Court of land up Court of a condition of the court of th	rection with
30. What interest have you in the recovery of this pension by the appli	eans? None
day of September 190 6. Dr. S. lu Form Ordinary, Care pour County.	Camp Witnessee.
AFFIDAVITS OF PHYSIC	IANS.
STATE OF GEORGIA, Ciccipbell county SE 6. W. S. Resonally before me comes. D. S. 6. W. S.	.~
physicians of said County, who, being severally sworn, say on oath that the	oth known to me to be reputable y have examined carefully Mrs. saion under act of 1900, and after
Rheumations and this Concle	tion is such
and we have no interest in earlier pension if allowed. Swort to and subscribed before me this day of Defiteration 1906	in the out
M. Slu Farin Ordinary,	3 Durett le.
ORDINARY'S CERTIFICA	ATE.
STATE OF GEORGIA, County.	
that the applicant, Mrs. Quely N, for Koon	d for said County, hereby certify resides in said County,
and has been a bona fide resident of this State since the 1880, and that the witnesses, Mr. Lower for trustworthy ch	racter, and that their statements
I do further certify that before answering the foregoing questions, the apposith herein prescribed, and the full text of the affidavits was read to the applicant costs signed and subscribed. I turther certify that the fax direct of	
returned for taxation in her own name in 1899 15-05-20	dollars worth
h 1901 F. 92000	dollars worth of property,
in 1902 # 760 60	dollars worth of property, and dollars worth of property.
Witness my hand and official seal this 2 2 daylor of in h	190 6
(SEAL.)	Ordinary,
Norms — I. Before any questions are answered, the Ordinary shall-swear applicant world: "You do solesmly swear that you will true setwear made to a common state of the control of the con	and the witnessee in the following sold of the questions asked of you,
widows. Those married since the 9th April, 1865, not entitled. 5. Witnesses and two Physicians are necessary to make out claim. 6. Attach cartified cours married because the second of the second o	B. S.

Extremely freele. Almost Respective

STATE OF GEORGIA. COURT OF ORDINARY. Certified copy of Marriage Liceuse of Www Jackson and Emily Ann Ployal Filed in office

State of Georgia, Carre pless County.

ORDINARY'S OFFICE, ss.

ORDINARY'S OFFICE, ss.

Ordinary of said County, do hereby certify that I have compared the foregoing copy of The Ularray's Liceuse and Carrein and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the In the day of The Grant and Carrein Cordinary and exofficio C. C. O.

Lory ia, Campbell County To any Ujuister of the Goopel ludge, Judge of the Suferor Court, or Justice of the acous. You ora luxe by agullonged join Millian Jackson and Quely free floyed in the It oly State of Matining according to the Caroli lu live and Lows of this State, and for so doing this shi all be your sufficient Li wisk. From under my hand and seal, dies 29 and day of Many 1. 747. R. C. Browns, 6. C. (L.S) Leary in ban plect bounty. I do estify that Milliam for Il son and Evily Au Floyd were duly fained in the himony by un this food day of June 1847.