Sworn to and subscribed before me, this, the day of Jebruary 1896. Rowers Urally Norn-State fully the nature of wonds or character of disease which causes the disability, and explain particularly the extent of the state disability, and the wond or character of disease. STATE OF GEORGIA, County. I, R le Benner Ordinary of said County, do certify that I.am well acquainted with December Ordinary of said County, do certify that I.am well acquainted with December Ordinary of said County, do certify that I.am well acquainted with December Ordinary Ordi	Sworn to and subscribed before me, this, the day of 1897, POST OFFICE Norra-State fully the nature of wound or character of disease which causes the disability, and explain perficularly the extent of the disability, resulting from the wound or character of disease which causes the disability, and explain perficularly the extent of the disability, resulting from the wound or character of disease which causes the disability, and explain perficularly the extent of the disability, resulting from the wound or character of disease which causes the disability, and explain perficularly the extent of the disability and explain perficularly the extent of the disability and explain performed the disability and explain perform
to receive and receipt for the pension paid hereon and request that he remit same to by at Louis IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2/54 day of Juby 1898 B'H K Spers. [L. S.] Executed in presence of R. L. Brawness Dody	I. B. H. Sperr hereby authorize J. J. Starbum of Humburn oga to receive and receipt for the pension paid hereon and request that he remit same to my tand at Humburn ogu. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 25 day of January 1899. Executed in presence of J. J. Liphons Leo Lactor ordinary Leo Lactor
Formy LLL G. Sold Brown C. S. No. 2766 INVALID SOLDIER'S PENSION. ISOB. P. C.	Spein, B. F. H. Canglell Cornor ass. (For Those Already Enrolled.) (S. No. 2777 INVALID Solidite 'S PENSION. 6 11899. Amount, \$ 50 Amount, \$ 60 Amo
Soli Name County Disabili Amoun	(For 1) (For 7) (Fo

Sphir, B. F. H. Complete Cor- one secretor tax (For Those Already Enrolled. C3 No. 2775 INVALID SOLDIER'S PERSI 1899. Name. B. H. R. Sphira- County. County. County. Amount, \$ 30 P2. RICHARD JOHNSON, RICHARD JOHNSON, RICHARD JOHNSON, P2. Omnibility. Chinu. O'S. Man. O'S. Chinu. O'S. Chinu
For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, County. Personally appears B. H. S. Shur of Cumpbell County, State of Georgia, who being duly sworn, says on oath that he is bona fide citizen and resident of said State, and has resided therein continuously ever since the Leady of Lammary 1887; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Property in Company L. of B. The Regiment of Bright Volunteers, Samb 's Brigade; that whilst engaged in such military service in the State of Now , on the 2 day of May 1864, he was wounded, injured or diseased as follows: In the Battle of the wilderness was short through the large work of the wilderness was short through the large work of any place of the wrist massing the arm useless.
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 Dollars, for the year 189 g. Sworn to and subscribed before me, this, the Body Post of October Jury Law Law Law Lasson Post of County and explain particularly the estent of the dishibity resulting from the wound or disease. STATE OF GEORGIA, Toump bell County. I. J.

LDIER'S PENSION INVALID

or Applicants Heretofore Allowed Pensions. ATE OF GEORGIA,

INVALID SOLDIER'S PENSION.

personally appears B. H. & Spein of Lampbell
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 January 1837; that he enlisted in the military service of the Con-
during the war between the
2 Singade, that whilst engaged
in the day, he was wounded, injured or diseased as follows:
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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 Dollars, for the year 189 8. Sworn to and subscribed before me, this, the South of Say of June 1899. Post office June hum year 1899. I was day of June hum. June 1899. South of
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This opening October 20th, 1899. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189 %. Sworn to and subscribed before me, this, the BAR A. S. Skir

and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1888. I have heretofore under said law as a resident of county been allowed an invalid pension of Dollars, for the year 189. Sworn to and subscribed before me, this, the day of 1898. FOST-OFFICE To the diability, sud explein particularly the extent of the diability, resulting from the wound or disease a blich causes the diability, and explein particularly the extent of the diability, resulting from the wound or disease. STATE OF GEORGIA, County. I. R. C. Marcon T. C. Ordinary of said County, do certify that I am well acquainted with D. T. C. S. C. 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 2.5 day of 1898. C. C. Saravors Ordinary County. County.	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 Dollars, for the year 1898. Sworn to and subscribed before me, this, the Source of Justine 1899. Post of Fire Justine 1999. Source size tally the sature of wound or character of disease. Which causes the disability, and explain particularly the extent of the disability few little from the wound or disease. STATE OF GEORGIA, County. I. Stephens Ordinary of said County. I. Stephens Ordinary of said County. I. Stephens Ordinary of said County. Given under my official signature and seal, this 25 day of Justine 1899. Signature and seal, this 25 day of Justine 1899. Ordinary County. County. County.
POWER OF ATTORNEY. STATE OF GEORGIA, County. I. B. H. Spein hereby authorize J. Staphens of Hairburn—ga to receive and receipt for the pension paid hereon and request that he remit same to My hand at Hairburn gal IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23 day of Juhnary 1900.	POWER OF ATTORNEY. STATE OF GEORGIA, County. I. J. J. L. S
Executed in presence of P.J. Spein [17.8] S PHNSION. S PHNSION. Carrier 1800. LINDSEY. Commissions of remain. Commission	STATE OF GEORGIA. Executed in beesence of W. S. for Louise Greek Winds To Victoria Annual
(For Those A INV SOLDIER TO Name (2, 2), 2 County (2, 2), 2 Amount, 5, 72 Warrant issued 2 JOHN W. JOHN W. P. CON REMARK ON R. REMA	STATE OF GEORGIA, County. Personally uppears of the No. And the district of the No. And

For Applicants Heretofore Allowed Pensions.

For Those Aireasy Enrilled. Solublick's PENSION. INVALID SOlublick's PENSION. IBOO. Name (B. H. J. April Amount, \$ 12 Warrant issued 2744 & 1800. JOHN W. LINDSEY, County Antana of Praise. Warrant issued 2744 & 1800. JOHN W. LINDSEY, County Read Fraise. Oct. V. IMPRINGENER, Con. V. IMPRINGENER, Con. V. IMPRINGENER, CON. V. IMPROPRIEDED TO SON V. IMPROPRIEDED TO OCT. V. IMPROPRIEDED T	Solubier Person and Parish Employ Solubier Solubier Person Name L.F. I. Sperin County County County County Disability from Mandre of Parish Mandre Solubier Solubier Ook W. Lindsen, and Parish, America. Solubier Solubier Ook W. Lindsen, and Parish, America. Solubier Solubier Ook W. Lindsen, and Parish, America. Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Solubier Sol
	For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, County. County of Property of Propert
For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Lampbell County. Personally appears B. J. S. Sperr 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 le day of Jamuary 1832; that he enlisted in the military service of the Confederate States (or of the State of during the war between the States, and served as a Drivate in Company L., of 53 th Regiment of The Graph Volunteers, Ams. Is Brigade; that whilst engaged in such military service in the State of Programia, on the 2 day of May 1864, he was wounded, injured or diseased as follows: In Maybattle of the wildsmiss in the State of Programia, on the 2 day of May 1864, he was wounded, injured or diseased as follows: In Maybattle of the wildsmiss in the State of Programia, on the 2 day of May 1864, he was wounded, injured or diseased as follows: In Maybattle of the wildsmiss in the State of Programma, was short with a manney bull in the State of Programma was short with a manney bull on the State of Programma was short with a manney bull on the Islamma with the warm of drawing the world of the year ending October 26th, 1900. I have heretofore under said law as a resident of Telumphall County been allowed an invalid pension of Harting State of The State of Dollars, for the year 189 g. Sworn to and subscribed before me, this, the Sworn for and subscribed before me, this, the	For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, County. Personally appears TN. Sfired of 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 the State of during the war between the States, and served as a fine of the State of during the war between the States, and served as a fine of the State of day
Non-State fully the nature of wound or character of disease which causes the disability, and explain perficularly the estate of disease which causes the disability, and explain perficularly the estate of disease. STATE OF GEORGIA, County. I, Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this day of Junuary Ordinary County. Ordinary County.	Note:—State fully the intume 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, Gounty, Go certify that I am well acquinted with I. J. N. J. L

ending October 26th, 1900. I have heretofore under said law as a resident of temperately County been allowed an invalid pension of Dollars, for the year 189 4. Sworn to and subscribed before me, this, the 2 3 day of Hebruary 1900. POST OFFICE Harring Office Harring of Wond or character of disease which causes the disability, and explain perticularly the extens of the disability resulting from the woond or character of disease. STATE OF GEORGIA, Geomphell County. 1. 1. 1. 1. 1. 1. 1. 1. 1.	County been allowed an invalid pension of Dollars, for the year 1900. Sworn to and subscribed before me, this the last of the year 1901. Postoffice I was a day of Jeon 1901. Postoffice I was a fixed County of Jeon 1901. Postoffice I was a day of Jeon 1901. Postoffice I was a fixed County of Jeon 1901. Postoffice I was a
POWER OF ATTORNEY. STATE OF GEORGIA, County built County. I, M. J. M. Spart bereby authorized to the pension paid bereon and request that he remit same to by the same to by the same to law the same to la	POWER OF ATTORNEY. STATE OF GEORGIA, Gour phere County. I, A.J. M. Speed hereby authorize It Sur Jornal of Frank busher La to receive and receipt for the pension paid hereon and reguest that he remit same to by st. Fort busher Ja IN WITNESS WHEREOF, I have hereunto set my hand and seal this 16 day of 1903. Executed in presence of H. M. Olinic (18)
County Control 1902. Name A. H. Apr. A. DISABLED No. GOV. No. GOV. IDOOR. AREADY ENSULED County Cont. Area. JOHN W. LINDERY, JOHN W. LINDERY, SOMMANY HANDED TO WARRAFT HANDED	SOLDIER'S PENSION SOLDIER'S PENSION No. 648 N
County County agreem.	t -

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

FOR APPLICANTS RERETOFORE ALLOWED PENSIONS

(FOR THOSE ALREADY ENROLLED.) SOLDIER'S PENSION SOLDIER'S PENSIO (FOR THOSE ALREADY ENROLLED.) County Comment of Regiment of S Spein 13.7.K. Campbell Caunty No. 605 DISABLED na Sate Disability Are Pro JOHN W. LINDSEY, JOHN W. LINDSEY, 1902. DISABLED M903. Name 19 7. 76. 1 pt WARRANTHARDED 1120 No. 648 Amount, \$ 5000

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TATE OF GEORGIA,

FOR APPLICANTS HERETOPORE ALLOWED PENSIONS

BUD IDDITE TALE BUSHLUARIE . ITUMED BLACKUM

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE	OF GEORGI	A 1		
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Personall	y appears 1. F.	1. Speir	of Court	bece
			oath that he is a bona fi	2. 1.1
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lay of	acing 180)	that he enlisted in	the military service of	the Con-
ederate States	(or of the State of_	Ha) during the war bet	
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1 Ju	Volunteers,		's Brigade; that whilst	
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Deponent	makes application fo	r the pension to wh	ich he is entitled for	the year
ding Octobe	r 26th, 1902. I have	e heretofore, under	said law, as a resid	dent of
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TATE OF	GEORGIA,)		. 1
-our	6 Lee County.	.]		
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certify that	I am well acquainted	with A. F. K.	Ordinary of said	County,
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in his said	fidewit are true and	t, and am well satisfied	d that the statements m	iade by
and that he n	ecides in this Course	I know he is the indiv	idual he represents him	iself to
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STATE OF GEORGIA,
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County
Personally appears . F. R. Speed of Com flee
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizer
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Deponent makes application for the pension to which he is entitled for the year
nave heretofore, under said law as a said
County, been allowed an invalid pension of
Dollars, for the year 1902.
Sworn to and subscribed before me, this the) B. F. R. Skeir
day of 1903. Post-office 7 - + 6 1.
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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.
Care pour County.
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to certify that I am well acquainted with 19. F. K. Speech
to certify that I am well acquainted with 10. F. C. Affect. he applicant in the foregoing affidavit, and am well satisfied that the statements made by
im in his said affidavit are true, and I know he is the individual he represents himself to
e and that he resides in this County.
Given under myofficial signature and seal, this 16
day of 1903.
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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	to so tod in ony le our of loton
Courte felle County, been allowed an invalid pension of Juffy Dollars, for the year 1901,	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
Sworn to and subscribed before me, this the	County, been allowed an invalid pension of Dollars, for the year 1902.
14. day of and 1902 Post-office For the the	Sworn to and subscribed before me, this the) & F. K. Skeen
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.	16 day of toring 1908, Post-office for the man 1
STATE OF GEORGIA,	Norz.—State fully the nature of the wound or character of disease which causes the disability and explain purticularly the extent of the disability resulting from the wound or disease.
I. It I well acquainted with A J. H. Speed of said County,	STATE OF GEORGIA
do certify that I am well acquainted with A. H. Jertany or said country, the applicant in the foregoing affidavit, and am well satisfied that the statements made by	I M. Suc Form
him in his said offidavit are true and I bear be in the in the in the	do certify that I am well acquainted with 10. J. K. J.
be and that he resides in this County. Given under my official signature and seal, this	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
day of 1902	be and that he resides in this County. Given under myrofficial signature and seal, this 16 44
any of 1992 1992 for the former of former of free County.	down of VOII'm and
Nora.—All vouchers and affidavits must bear date after January 1, 1902.	Ordinary County.
POWER OF ATTORNEY:	Norz.—Fill all blanks and of Company and Regiment. Norz.—All rouchers and affidavits must bear date after January 1, 1903.
POWER OF ATTORNEY.	POWER OF ATTORNEY.
STATE OF GEORGIA,	TOWER OF ATTORNEY.
STATE OF GEORGIA. One for County. Description bereby sytherise	STATE OF GEORGIA,
he A we carry of Land being supported	I, G. J. H. Speet hereby authorize
to receive and receipt for the pension paid hereon, and request that he remit same to	STATE OF GEORGIA, County, I, 9 J. 11. Spent hereby authorize M. S. We Low of Low burn 4 a
and binger you make the second	to receive and receipt for the pension paid hereon, and request that he remit same to
In Witness Whereof, I have hereunto set my hand and seal, this 27	at Lours
	In Witness, Whereof, I have hereunto set my hand and seal, this
Executed in presence of	day of Jacy 1905. B. G. / Spein, [L. 8.]
M. S. w. Lorin, Ordy	Executed in the presence of Affille Line State
	J. S. Milleline Rese
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FOR THOSE ALREADY ENFOLLED. No. LYJES DISABLED SOLDIER'S PENSION I DO A. Name O. P. Regiment Co. Disability of Co. Mandrut, & Co. Regiment Co. Mandrut, & Co. Regiment Co. Mandrut, & Co. Regiment Co. Mandruth, & Co. Regiment Co. Amorita, & Co. Regiment	Competing B. 1 W. Country Construction Country Construction Colors Reserve Labor Enforced Country Coun
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DISABLED SOLDIER'S PENSION (FOR THOSE ALREADY ENROLLED.) SOLDIER'S PENSIO Campbell Country na data WARRANT HANDED TO DISABLED 1904. JOHN W. LINDSEY, C 53 No. 174 No. 1453 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.
STATE OF GEORGIA,
Complete County.
Personally appears B. I. H. Spint of Com & her
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 18.7; 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 in Company of J. 3 th Regiment
of Volunteers Sur 's Brigade; that whilst engaged
in such military service in the State of Va , on the 2 day
of 186 7, he was wounded, injured or diseased as follows:
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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.
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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,)
County.
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1, 2 grdjuary of said County,
do certify that I am well acquainted with 13. J. 12. Death
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this 27
day of 1904.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.
STATE OF GEORGIA,
Personally appears G. F. K. Spin of Comp bece
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%; that he enlisted in the military service of the Confederate States (or of the State of 40 during the war between the States, and served as a first of 10 in Company 6, of 1 th Regiment of Volunteers 12 's Brigade; that whilst engaged in such military service in the State of 10 not he day of 186 he was wounded, injured or diseased as follows: 10 the service of the transition of the first of 10 not the service of the first of 10 not the service of the first
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 Dollars, for the year 1904.
Sworn to and subscribed before me, this the day of 1905. 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.
DATE OF OLDIVIN.

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

Affix your Beal here.

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 day of 1904. Norz.—State fully the nature of the wound or character of disease which causes the disability, and explain perficularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. I, M. J. L. J. County. I, M. J. L. J.	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 Dollars, for the year 1904. Sworn to and subscribed before me, this the day of 1905. Norn-State tally the nature of the wound or character of disease which causes the disability, and explain particularly the action of the disability resulting from the wound or disease. STATE OF GEORGIA, COUNTY. I, A Decrease of the disability resulting from the wound or disease. STATE OF GEORGIA, COUNTY. I, A Decrease of the disability resulting from the wound or disease. STATE OF GEORGIA, Government 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, Government 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, Government 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, Forting the wound or character of disease which causes the disability, and explain particularly the extent of the disability and explain particularly the extent of the disability, and explain particularly the extent of the disability, and explain particularly the extent of the disability, and explain particularly the extent of the disability and explain particularly the extent of the disability, and explain particularly the extent of the disability, and explain particularly the extent of the disability, and explain particularly the extent of the disability and explain particularly the extent of the disability and explain particularly the extent of the disability, and explain particularly the extent of the disability and explain particularly the extent of the disability and explain
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STATE OF GEORGIA, County fell County, I. D. J. K. Spein hereby authorize A. S. W. Lowin of Land burne la to receive and receipt for the pension paid hereon, and request that he remit same to by Louis IN WATNESS WHEREOF, I have hereunto set my hand and seal, this day of Jany 1906. B. H. J. S. B. Lir [L. S.] Executed in the presence of J. H. W. S. L.	POWER OF ATTORNEY. STATE OF GEORGIA, (and boll County.) I. D. J. K. of part The form of fair land up ya to receive and receipt for the pension paid hereon, and request that he remit same to by at IN WINNESS WHEREOF, I have hereunto set my hand and seal, this day of 1907. By Aller [L. S.] Executed in presence of
7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SOLDIER'S PENSION ATBOOTA County Co

Canifold G., Con Barrel 180. (FOR THOSE ALREADY ENPOLLED.) NO. 53 &	SOLDIER'S PENSION 1906. Name 0.2 1/ 3 per 1 County 6 county 4 county 6 c	MAN 18 18 18 18 18 18 18 18 18 18 18 18 18	Complete A. H. (FOR THOSE ARRENDY EMOLLED)	SOLDIER'S PENSION 1907. Name Q. P. N. Jaint County Count	Disability from h our of Amount, \$ 4 0 0 0 1907. JOHN W. LINDSEY, JOHN WARRANT HANDED TO	The or an angle of the formation of the state of the stat
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FOR APPLICANTS HERETOFORD ATLOWED DENSIONS

TOR ALL DIORITO HERETOPORE ADDORDO LENGIORO.
State of Georgia,
County.
Personally appears D. J. K. Spind of Care phere
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 16
day of Jony Je by 18 6; that he emisted in the military service of the Con-
federate States, (or of the State of 4a) during the war between the
States, and served as a in Company "C", of Jo th Regiment
of Ya Volunteers Seem 's Brigade; that whilst engaged
in such military service in the State of Va on the 2 day
of 186 4, he was wounded, injured or diseased as follows:
I was blook there' right wrist by a llie.
uis doct what in " Compet horning at
tout y du hadrons, fort hou
trostel doing right ore at wrigh
fourt, caused fourt town & pro hude
Our ofe of hord wound I am white for
todering al auror door
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 \ B I IR Spen
22 day of Jany 1906.
M. S. We Jonin, Ordy Post-Office of and office
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,
County.
I, M. S. We force Ordinary of said County
do certify that I am well acquainted with J. J. Il. Spin
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this 22 "
day of lawy 1906.
m. S. we forin
Ordinary Cour & Lett County.
Norg.—Fill all blanks and of Company and Regiment.

Campbell County.
Personally appears 1, & 16 Spent, of Count be
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 16
day of larry 1817; that he enlisted in the military service of the Con-
federate States (or of the State of 4a) during the war between the
States, and served as a find a Ly in Company C, of 3 th Regiment
of Ya Volunteers Line 's Brigade; that whilst engaged
in such military carvice in the Cast of
of the year 186 4, he was wounded, injured or diseased as follows:
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a Uliming how of house of the Dicker
on ofe of said mount of our brook lived
tus vertices un obte to do ordinor
manual Ithan
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 Dollars, for the year 1906.
Sworn to and subscribed before me, this the
151# 7 //
1907. (Special 1907.
M. S. M. Lorie, Order Postoffice of and dine ya
Name Country to the c
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.
St. J. V. C. S.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Ordinary Gamphell Norz.—Fill all blanks and of Company and Regiment.
Norz.—All vouchers and affidavits must bear date after January 1st, 19.7.

to be, and that he resides in this County.

do certify that I am well acquainted with B. J. K. ... 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 day official signature and seal this day of 1907

ederate States, (or of the State of 42) during the war between the	federate States (or of the State of 4a) during the war between the
States, and served as a free in Company C', of V th Regiment	States, and served as a rich a G in Company C, of J th Regiment
of Ya Volunteers 's Brigade; that whilst engaged	in such military against the Co. C. Drigade; that whilst engaged
n such military service in the State of . Va, on the, day	of 188 4, he was wounded, injured or diseased as follows:
186 4, he was wounded, injured or diseased as follows:	I was short There' The my let want to.
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nding October 26th, 1906, I have heretofore, under said law, as a resident of	County, been allowed an invalid pension of
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Dollars, for the year 1905.	Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the By In Ri Spen	1907. (Specin
22 day of Jarry 1906.	M. S. M. Lorie, Joshy Postoffice I and denne ya
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Norz.—State fully the nature of the wound or character of disease which causes the disability, and explain rescularly the extent of the disability resulting from the wound or disease.	Nora.—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,
State of Georgia,	Campbell County.
Mr. S. We form Ordinary of said County	Dr. C. L. C.
4 1 1/ 1/ 1/	do certify that I am well acquainted with D. J. K. Jeech
certify that I am well acquainted with J. J. J. J.	the applicant in the foregoing affidavit, and am well satisfied that the statements made
ne applicant in the foregoing affidavit, and am well satisfied that the statements made y him in his said affidavit are true, and I know he is the individual he represents himself	by him in his said affidavit are true, and I know he is the individual he represents himself
y him in his said amount are true, and I know he is the individual he represents himself be, and that he resides in this County.	to be, and that he resides in this County.
Given under myjofficial signature and seal, this 22 /	Given under day official signature and seal this
day of lary 1906.	he lu Lorin
M. S. W. form	ordinary Complete County.
Ordinary County County.	
Norz.—Fill all blanks and of Company and Regiment. Norz.—All roughers and affiduvits must be a date after January 1st, 1008.	Norz.—Fill all blanks and of Company and Regiment. Norz.—All wuchers and affidavits must bear date after January 1st, 1937.
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applicant

EXECUTIVE DEPARTMENT.

Amount \$ 50 Paid wBluj Ger Spein Para to Benj F. R. Speir For Right arm For arm disas Duaden Thely 11 Included in Warrant No. Included in warrant No. issued to Treasurer. issued to Treasurer. applicant No. 887 No. 5.02 STATE OF GEORGIA, EXECUTIVE DEPARTMENT. | Allanta, Ca. Hely 14 1889 STATE OF GEORGIA, Allanta, Sa., Febry 11 1090 Mr. Perj. D. S. Speir Mr. Benj. J. K. Spein . of Campbell of Campbell having filed his application in the Executive Department for an allowance under the Act opproved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same arving been examined and allowed for Department for, an allowance under the Act approved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same mining Dec. 24, 1888, and the same having been allowed for Right am Disabled He is entitled to receive the sum of Heffy 4004 for such disability, the same being the allowance due for the year ending October \$4, 1890 for such disability, the same being the allows such disability, the same being the allowance due for the year ending October 24, 1889.

The Treasurer will pay the same angusta his receipt on the voucher, and return same to The Treasurer will pay the same and hold his receipt on this voucher, and return same Blordon By the Governor WH Harrison CLERK EXECUTIVE DEPARTMENT. ,50 ECEIVED OF STATE THEASURER, R. U. HARDEMAN, RECEIVED OF STATE TREASURER R. S. HARDENAN Heft I rol J. W. a. Spein, B. F. K. Spein, Blud G. J. Se Spein.

Dec 24, 1888, and the same having been allowed for. oved, Dec. 24, 1888, and the sa He is entitled to receive the sum of Heffy + 00/ for such disability, the same being the for such disability, the same being the allowance due for the year ending October 24, 1890 The Treasurer will pay the same and hold his receipt on this voucher, and return same to Executive Department for warrant. Blordon By the Governor Warnism CLERK EXECUTIVE DEPARTMENT. CLERK EXECUTIVE DEPARTMENT. RECEIVED OF STATE THEASURER, R. U. HARDEMAN, Dollars Q E, 33 NAME, Speir, Benjamin F. K. 1890 COUNTY Campbell NAME, Speit, Benj. F.K. YEAR 1889 COUNTY Campbell WHEN AND WHERE BORN? WHEN AND WHERE BORN? ENLISTED WHEN AND WLERE? ENLISTED WHEN AND WHERE? RANK . Private RANK. COMPANY AND REGIMENT? Co. C, 53 regt. Georgia Vols. Sims Brigade. COMPANY AND REGIMENT? Private C ? 53rd. Regt. Georgia Vols. Sim's NAME OF CAPTAIN AND COLONEL? Brigade. NAME OF CAPTAIN ALD COLONEL? WOUNDED? Wilderness, va. May 2nd. 1864. Shot just above wrist right arm. WOUNDED? Wilderness, Va. May 2nd. 1864. Shot through the arm just above CAPTURED, WILL AND WELK-2? CAPTURED, WHEN AND WHERE? RELEASED. RELEASED. WHEN AND WHERL SUPA NDERED? WHEN AND WHERE SUPPLINDERED? IF NOT FRESUNT AT SURREIDER, WHERE WERE YOU? IF NOT PRESENT AT SURRENDER, WHIRE WERD YOU? DIED, WHEN AND WHERE? DIED, WHEN AND WHIRE? BURIED. BURIED.

WITNESSES. T.M. Tidwell, M.D. No data.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

RANK . Private

COMPANY AND REGIMENT? Co. C, 53 regt. Georgia Vols. Sims Brigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Wilderness, va. May 2nd. 1864. Shot just above wrist right arm.

CAPTURED, WHEN AND WHERE?

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IF NOT FRESURT AT CURRENDER, WHIRE WILL YOU?

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BURLED.

WITNESSES. None.

NAME, Speit, Benj. F.K.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WEERE?

RANK.

COMPANY AND REGIMENT? Private C ? 53rd. Regt. Georgia Vols. Sim's Brigade

YEAR 1889 COUNTY Campbell

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Wilderness, Va. May 2nd. 1864. Shot through the arm just above

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SUPKENDERED?

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WITNESSES. T.M. Tidwell, M.D. No data.

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Ja Campbell Coloty					
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333	& 21+1010 F	Sworn u	(/ """ in the state of the foregoing were distributed by me statements when the foregoing were distributed by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and orwite.	- 2	L. L. Know M
Widow's Application	Befor "You si Addit All at Only Attack Widow service	AL.)	ed to	heday That I also know,	Mr. Shay El
To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or	e any do so all giv ional a widows widows widows tion tion of 1 beca	der n		da	1 3 PO
Put on Under Act of July 11, 1910— As Amended by Act of 1919.	question demnly lemnly le will fifth will in the state of the will be deep led cop led	y han	specti	day of know	2 2 2 E
County Campbell	swear se the training to the may be made farried ites of the made	Sworn under my hand and official scal	ve aff	h elf to	566
	auswe that y ruth. E be att de bel prior marria no pre	of fi	idavit	6 8	El de
Name Epsey Elizabeth Spence	rod thou will to help ached i fore the to first to first ge lices of of of	pial se	s, and	\$ 1 E	2
Widow of J. A. Spence	ordinary true answy true da.s. f blank spu o Ordinary January, January, se the Blue service and		E .	t she	COUNTY
Company "I", and "G"		of office	they a	19.	YTTY
Regiment 10th & 53rd respectivel	shall swear pre make to the country of the country are estimable. If n Application was not re	8 6	ft bo	10	he ap
Approved John W. Class		12 /2.	with both of the foregoing were duly sworn by me are truthful and trustworthy and their statements	e cont	Ordinary of said County, do certifythe applicant for this pension, and that she
Commissioner of Parties	explicate and the witness in the following words each of the questions asked you and the ordinantificient, it desired the produces. How, readence, they readence, they remains the process of the process	13. 3 6	witness as to marriage, and I also know the foregoing were duly sworn by me and trustworthy and their statements	in	Ordinary of said County, do certify that I
11-13-12	nd the questi questi ncc. ncc. nrriage state a so.	day	oregoi rustw	resid	y of s
	d the witness in questions saked co. cc. rringe, by some I trate and prove free.	2	ng we	lent o	aid Co
7// 6/	ritness in the forms saked you an saked you an by some person, d prove full term	4	rage, redu	said	ounty,
J. W. LINDSEY,	following and the en a	Ordinary Cou	and I ly sw their	Coun	do ce
Commissioner of Pensions.	ring with evil	19.2 inary	orn b	ty an	rtify she
Byrd Printing Co., State Printers, Atlanta.	g words: ovidence general general	1921 w. 1921	know r me	d was	that I
11/2-1922					

(DUPLICATE,)

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
Campbell COUNTY.
I, W. S. McLarin, Ordinary of said County, do sertify that
know Mrs. Epsey Elizabeth Spence the applicant for this pension, and that she is the
person she represents herself to be, and that she is a bona fide continuing resident of said County and w
on theday of 1893
That I also know. J. W. Rivers witness as to marriage, and I also know.
AFS. Specy Elizabeth Spence ; that both of the foregoing were duly sworn by
before signing the respective affidavits, and that they are truthful and trustworthy and their statement
are entitled to full faith and credit.
Sworn under my hand and official seal of office this 11th day of July, 1922 (SEAL) Ordinary.
Ordinary.
Campbell
NOTES: 1. Refere any questions are nusered the Ordinary shall swear applicant and the witness in the following words "You do seleminy swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. But the same that the s

Widow's Application
To 29 Put on Roll for Com Rights Wass
Ruback Was on the Indigent Roll or
Put on Under Act of July 11, 1910—
A Amended by Act of 1919.

Name Epsey Elizabeth Spence,

County Campbell

Widow of J. A. Spence.

Company "I" and "G"

Regiment 10th & 53rd Ga. Vol.

John W. Gland

6-14-23.

Country }
I. M. J. UL Journal Ordinary of said County, do certify the
know Mrs & pay Elizabette Spece the applicant for this pension, and that she is
person she represents herself to be, and that she is a bona fide continuing resident of said County and
on theday of19 70
on theday of19 12 C That I also know for Revert witness as to marriage, and I also kn
; that both of the foregoing were duly sworn by
before signing the respective affidavits, and that they are truthful and trustworthy and their stateme
are entitled to full faith and credit
Sworn under my hand and official seal of office this /2 " day of July 192 (SEAL) Ordinary.
(SEAL.) In della Force Ordinary
County Leu County
NOTES: 1. Before any questions are numered the Ordinary shall swear applicant and the witness in the following wor "You do solemnly swear that you will true namers make to each of the questions asked you and the wride you shall give will be the truth. So belp you God. 2. Additional affairs may be attached it bank spaces are insufficient. 3. All affairs must be attached it bank spaces are insufficient.
 Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by gene reputation. Widows of Disabled Pentingers must be the Disabled Pentingers.

ORDINARY'S CERTIFICATE

TY.

Ordinary of said County, do certify that I

'S CERTIFICATE

Month of the former About

Commissioner of Pensions.

 Widows of Disabled Pensioners must use the Bine Application Blank and state and prove full term of husb service—because he made no proof of service and was not required to do so.

Widow of J. A. Spence

County Campbell

Specy Elizabeth Spence

Widow of J. A. Spence

Company "I", and "G"

Regiment 10th & 53rd respective.

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

1/12-1922

Commissioner of leadions

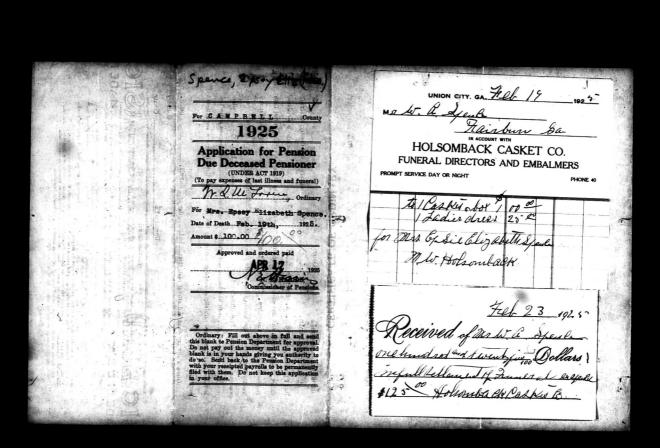
John W. Clark

Approved

representation of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.	5. Atted certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general 6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.
Widow's Application No. 100 Let 1-10 Widow's Application To de Pet on Boil is far own Right Wood Hubbard Was on the indigent Boil or Pet on Unit 1, 1810 Let A Amended by Act of 1912. County Campbell Name Epocy Elizabeth Spence. Widow of J. A. Spence. Widow of J. A. Spence. Company T. and "G" Company T. and "G" Why Speciment 10th & 55rd Ga. Vol. Regiment 10th & 55rd Ga. Vol. Approved 126.12. A. 2. Company Commissioned of Pension. Commissioned of Pension.	Widow's Application To Be Put on Boll in Eur Own Eight Went Runnen Runhaud Was on the Indigent Eul of Put on Boll in Eur Own Eight Went Fut on Under Ast of 1919. County Champbell Name Epesoy Ellzabeth Spence Widow of J. A. Spence Widow of J. A. Spence Company "I", and "G" Commissions of Landerth Approved fruit. M. Ellectett Commissions of Landerth Commissions of Landerth The Friedre Co. Here Friedre, Albania.
(DUPLICATE, 0) WIDOW'S AFFIDAVIT STATE OF GROEGIA.	ORDINARYS CERTIFICATE TIVADIPIA 8'WOOIW
Personally before me comes Mrs. Epsey Elizabeth Spence of said County, who, after being duly sworn, says that she is the widow of Jr. Ar. Spence to whom, in the County of Payette to whom, in the County of Payette to whom, in the County of Payette State of Georgia. she was married on the 9th day of November 18.69, and that she remained his wife, and resided with him to the (1922) date of his death in Feb. 26, 1922 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 "Indigent" Pension Roll of the State and paid a pension of \$.125_0Olin_Campbell County for 1921 per annum, on account of being a soldier in Company. "I" and "G" Regiment 10th & 55rd Ga. / (Volunteers or State Militia) That she is now a bona fide resident citizen of said County of Sampbell and she has so continuously resided since ATTEGEY SELECTION. Sworn to and subscribed before me, this the 11th day of July, 19 22. Mrd. W. Formal Ordinary of Campbell County. County.	Personally before me come the Open and the self of the State of St
Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband STATE OF GEORGIA, (Dupliwate.) Campbell COUNTY. Personally before me comes. J. W. Rivers. known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that his of tisk own personal knowledge Mrs. Epsey Elizabeth Spence, who made the foregoing affidavit, is the lawful widow of. J. A. Spence. who died in Campbell County in said State of Ga. on 26th day of Feb. 19.22, and that she has not since remarried. That she became the wife of J. A. Spence on the 9th day of Nov. 18.69, and that she and he had resided together as mas and wife continuously since. 9th day of Nov. 18.69, and that the said J. A. Spence was the same man who was on the pension roll of said State of Georgia, from Campbell County	Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband STATE OF GEORGIA. COUNTY, Personally before me comes. Assemt to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Assemble of their own personal knowledge Mrs. Assembl
Sworn by and subscribed before me, this the 11th day of July, 1922. N. J. W. For L. Ordinary of Campbell County. (SEAL)	County Lotty when he died. Sworn to and subscribed pefore me, this the 12 11 day of July 1922 W. S. Ull Form Ordinary of County Lucy County. (SEAL)

the time of the direct to ware residence of Company and Service to the Company of the Service to the Company of the Service to
of an analysis of sections of the control of the co
Company 1º and 1ºº Regiment 10th & 55rd Gh. (Voltamers we flow Millis) That she is war a loss fide minimal client of aid County of .08007831. More to and insurited before me, this the 112th
That she is one a five field "Mile 2" of Regions and the service and adversarially residue size. THE REGIONAL ABOUT. 1888
Survey to and enhanced before on, the the 12th of the survey and t
Street, to and enhanced before on, this the 12th year of the continuously resided time of the age of the first plant of the continuously resided time of the age of the first plant of the continuously resided time of the age of the first plant of the continuously resided time of the continuously
Complete 1 County Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband TATE OF OROBIA. (DEPLISARS) Complete 1 County Personally before me come. J. H. 588888 Affidavit of Witnesses to Prove Marriage and Date of Death of Husband Date of Death of H
The All Moreover Construction of College Construction of Const
Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband TATE OF OROBIA. (Dapliants.) Campbell Comply before me comm. J. N. B. NORE. Premarily before me comm. J. N. B. NORE. Campbell Comprised twenting in aid County, who after having been day sever, may that the composite twenting for the composite twenting in the County, who after having been day sever, may that the composite twenting in the County of The County in the
Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband (Dapplarate.) Complete Comple
Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband (Deplivate.) Compbell Complete of County of Proceedily before an enum. J. Nr. SEVES. Demonstrated promos, residing in aid County, who after having been day seven, say that the series where the seven who make the foregoing of the seven state of S. A. SPENDS. who gid in Compbell. County is naid State of Ge
Date of Death of Husband (Duplinates) Campbell Country Personally before me comes J. No. BAYPES Personally before me comes J. No. BAYPES Country is not situate or mercinal face which sponsor who did in Death of Death of Husband BrATE OF GROSGIA, Country is not situate or mercinal face which sponsor who did to the hand since remarked. That he because the wife of J. A. BPRODO Death of Personally before me comes J. No. BayPers Brate of Personally before me comes J. No. BayPers Brate of Ga 26th day of Peb 28th day of Nov. 11.69, and that she had resided together as mas and its continuously since. Phys. Nov. 11.69, and that she had resided together as mas and the same man who was on the pension roll of said State of J. A. By of
Date of Death of Husband Campbell Country Formulally before me comes. J. N. SEVERS Personally before me comes. J. N. SEVERS Who come personal knowledge Mrs. Spensos who made the foregoing who made the foregoing filterin; in the learned widow of J. A. SPENSOS who did that she has not since remarried. That also because the wife of J. A. SPENSOS on that the has not since remarried. That also because the wife of J. A. SPENSOS who made the mean and the same of the continuously since of the control video of the control video of J. S. Seven to and subscribed before me, this the 111th day of NOV. 1569, and that the metal J. A. SPENSOS who had dead to be possion roll of said State. A. Georgia, when he died. 111th day of J.
Compbell County Personally before me comes J. Nr. BAYSEA of their own personal knowledge Mr. Baysea of their
Personally before me come. J. N. BAVER. Known to be composited and truthful persons, residing in said County, who after having been daily every, say that the truth and the control of th
Personally before me couns. J. Results I think own personal knowledge Mr. PPOPY Elizabeth Sponce who made the foregoing fidewit, is the lawful widow of A. Sponce who died in (Smpbell 1 on
responsible and truthful persons, radding in aid County, who after having been of their own personal knowledge Mr. 5969. who did that she has not since remarried. That she became the wife of J. A. 596000 on 9.9th day of Nov. 18.69, and that she and he had resided together as man and fit continuously since. 9th day of Nov. 18.69, and that she and he had resided together as man and the continuously since. 9th day of Nov. 18.69, and that the anid J. A. 596000 was a man who was on the pension roll of said State. of Georgia, from Campbell with the Mr. 1917. Sworn to and subscribed before ms, this the lith day of July 1922. Campbell County RAD County Sworn to and subscribed before ms, this the lith day of July 1922. Campbell County County County Space, 2555 yell.
Comphell County and State of Ca. a. a. 28th day of Feb. 19.22, and that she has not since remarried. That she became the wife of J. A. 390000 on 2.6 ft. day of Feb. 19.22, and that she has not since remarried. That she became the wife of J. A. 390000 on 2.6 ft. day of Feb. 18.69, and that she and he had resided together as man and fee continuously since. 9th day of Rov. 18.69. and that she and he had resided together as man and as assessment who was on the pension roll of said State of County in s
outly in said State of Ga. 26th day of Feb. 19.22, and that she sand he had resided together as man and if its continuously since. 9th day of Nov. 16.98, and that the said J.A. Spence was some man who was on the pension roll of said State. of Georgia, from Gampbell will be and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to and subscribed before me, this the Country or Severa to an advance to the pension roll of said State of Severa go and subscribed before me, this the Country or Severa to an advance to the pension roll of said State of Severa go and subscribed before me, this the Country or Severa go and subscribed before me, this the Country or Severa go and subscribed before me, this the Country or Severa go and subscribed before me, this the Country or Severa go and subscribed before me, this the Country or Severa go and subscribed before me, this the Country or Severa go and subscribed before me, this the same man who was on the pension roll of said State of Severa go and subscribed before me, this the same man who was on the pension roll of said State of Severa go and subscribed before me, this the same man who was on the pension roll of said State of Severa go and subscribed before me, this the same man who was on the pension roll of said State of Severa go and subscribed before me, this the same man who was on the pension roll of said State of Severa go and subscribed before me, this the same man who was on the pension roll of said State of Severa g
med that she has not since remarried. That she became the wife of J. A. Spenne on the St. day of Nov. 18,68, and that she and he had resided together as mas and rife continuously since. St. day of Nov. 16.89, and that the said J. A. Spenne was the same man who was on the pennion roll of said State. of Georgia, from Campbell wind the same man who was on the pennion roll of said State. of Georgia, from Campbell wind the same man who was on the pennion roll of said State. of Georgia, from Campbell wind the same man who was on the pennion roll of said State. of Georgia, from Campbell wind the same man who was on the pennion roll of said State. of Georgia, from Campbell wind the same man who was on the pennion roll of said State. Of Georgia, from Campbell George me, this the State of Georgia and subscribed pefore me, this the County of Georgia and subscribed pefore me, this the first day of July, 19 22. M. J. W. J. R. W.
and that she has not since remarked. That she became the wife of J. H. In the continuously since. Pth. day of Nov. 1869, and that the said J. A. Spence was be same and who was on the pension roll of said State. Of Georgia, from Gampbell when he died. Sowers to and subscribed before me, this the 11th day of July 1922. July County Ordinary of Georgia Ordinary Ordinary of Georgia Ordinary Ordinary of Georgia Ordinary Ordina
the continuously since 9th day of Nov. 1689, and that the maid J.A.Spence was be same man who was on the pension roll of said State. Of Georgia, from Gampbell wife continuously since Ltd. day of Nov. 1861, and that she and he had residently before me, this the little day of July; 19 22. The Authorized Deforement of the died. Sworm for and subscribed before me, this the little day of July; 19 22. The Authorized Deforement of County. SEAL) Spence, Sprayers.
wife continuously since \$\frac{1}{2}\$ and who was on the pension roll of said State
when he died. Sworn to and subscribed before me, this the 11 th day of July, 1922. M. J. W. Joren. County County County County SBAL) Speare, Speare, Speare, County
Sworn to and subscribed before me, this the 11th ag of July, 1922. M. J. W. Fortus Ordinary County County County County Sworn to and subscribed before me, this the 1
Swora jo and subscribed before me, this the 12 11 day of July 1922 Compbell County Ordinary of County (SEAL) Spence, 253451
M. J. W. Jorce Ordinary A. M. Rivers 12.4. day of July 1922 M. J. W. J. W. Green Ordinary of Learn phene (SEAL) Spence, 2/50/j Ho.
County SEAL) County
Space, Eysoyche (SEAL)
Spane, Epsyche (1)
Spance, Exprayable (2)
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40/10
For CAMPRELL County Ma Lot. U. Spent
1925
Application for Panaion HOLSOMBACK CASKET CO
Due Deceased Pensioner FUNERAL DIRECTORS AND EMBALMERS
(UNDER ACT 1919) (To pay expenses of last illness and funeral) PROMPT SERVICE DAY OR NIGHT PHONE 40
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To Caskie of the contract of t
Date of Double Park 1905.
Anount \$ 100,00 100 for Mas Epsic Clinabelli Seed
Approved and ordered paid App. 199
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Approved and ordered paid 1925 1925 Commissioner of Pennick
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1995 Commissioner of Pennions
Daniel de Company de La Company de Company d
Ordinary: Fill out above in full and send Ordinary: Fill out above in full and send
Ordinary: Fill out above in full and send Ordinary: Fill out above in full and send
Ordinary: Fill out above in All and sould this blank to Pension Department for approval. Do not pay out the money until the approval. Do not pay out the money until the approval blank is in your bands giving you entheticly to do not. Bed back to the Pension Department generally the dot not. Bed back to the Pension Department generally approved to be permanently and the permanent of the Pension Department generally approved to be permanently and the permanent general permanent generally approved to be permanently and the permanent general permanent generally approved to be permanently approved to be permanently and the permanent general ge
Description of Penning

responsible and truthful persons, residing in said County, who after having been duly sworn, say: that	Personally before me comes
of time own personal knowledge Mrs. Epsey Elizabeth Spence , who made the foregoing	responsible and truthful persons, residing in said County, who after having been duly sworn, say: tha
affidavit, is the lawful widow of J. A. Spence who died in Campbell	of their own personal knowledge Mrs. Character of their own personal knowledge Mrs. Character of the foregoing
County in said State of Ga., 26th day of Feb. 19 22,	affidavit, is the lawful widow of f. A. Spen who died in Cour fless
and that she has not since remarried. That she became the wife of J. A. Spence	County in said State of theory in on 26 in day of Fr. by 1921
the 9th day of Nov. 18,69, and that she and he had resided together as man and	and that she has not since remarried. That she became the wife of J. A. diference of
wife continuously since 9th day of Nov. 1869, and that the said J.A. Spence was	the 1" day of 100 111 18,62, and that she and he had resided together as man and
the same man who was on the pension roll of said State of Georgia, from Campbell	wife continuously since 2 th day of Most 1862, and that the was
Countywhen he died.	the same man who was on the pension roll of said State from Caunh but
Sworn to and subscribed before me, this the	County when he died.
M. J. Ul Force Ordinary J. M. Rivers	Sworn to and subscribed before me, this the 12 th day of July 1922 D. M. Rivas No July Form
of Campbell County.	
(SEAL)	of Court phell county.
	(SEAL)



Approved and ordered paid

APB. 43

Onnmissioner of Penator

Ordinary: Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approval blank is in your hands giving you authority to low O. Send back to the Pension Department with your receipted payrolls to be permanently lied with them. Do not keep this application in your office. Mrs 6/ Sie Clizabell Spell

Received of the W. a. Spende one hindred and I went fine O Collars \ infull tellament of Jumes at everyale \$12500 Holisuba et Paskis &

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)

Personally before me, the Ordinary of said O	ounty, comes W. A. S	pense
	of said County,	who, after being sworn, on oath
says that he knew Mrs. Epsey Elizabe	th Spence of said	County, and that said Pensioner
was on the Pension Roll of said County at the tim	e of death, which occurred	in Campbell
County, in this State, on the 19th day of	February,	
a Pension of One Hundred	(\$-100-00) I	collars was due pensioner and
unpaid at the time of pensioner's death, and the	t pensioner left no widow o	r dependent children surviving,
and no estate of any value sufficient to pay thes	e funeral expenses, which ar	mounted to the sum of \$ 125.00
per sworn statements fully and completely ITEM	IZED hereto attached.	
Sworn to and subscribed before me	THE	AND B
this 14th day of March, 192	was	berne
Campbell Co		

I, W. S. McLerin, , Ordinary	of said County, do certify
that I personally know. W. A. Spence	, who is a resident
citizen of said County, and that said person bod truthful and trustworthy char-	seter, entitled to full faith
and credit; that I also knew Mrs. "pacy 1 tzabeth Spence	while in life and that this
was the same person whose name appears on the Pension Roll of Campbell	County, and
was paid a Pension of One Hundred	(\$100.00) Dollars

CERTIFICATE OF ORDINARY

hereto.

Given under my hand and official seal, this lath day of March, 192 5

(Seal or Ordinary) Roll Letter, Ordina

of this voucher have been carefully observed in making up this voucher and the bills which are attached

in said County for 192_4 ..., and I now believe said pensioner to be dead; and that the in

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let.	For use in a Boient property SES, AND MU	I cases where	pendener di	ed after	January Le	t, had not	been out o	d Blate les	per than t	weive menths	100	260 -
300	Scient property	y to pay such	екревые. 7	HIE WILL	DOM: OF A	ROLDIE	R. IF SHE	IR LIVING	SHAREPR	IOR CLAIM	VER	TREE

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make a regionable to come of the first the form of the second by the sec

GEORGIA, CAMPBELL COUNTY.

Received of W. S. McLarin, as Ordinary of said county, the sum of ONE HUNDRED (100) DOLLARS, in full of the amount of pension money due, by the State of Georgia, for 1925, to Mrs. Epsey Elizabeth Spence, a deceased pensioner of said county, and in part payment of funeral expenses of said deceased. This april 24, 1925.

(signed.) Ha a skence

Georgia, Campbell County.

Estate of Mrs. Epsey Elizabeth Spence, deceased,

1925. To W. A. Spence,

Mar. 18. To funeral expenses of said deceased, as per itemized statement hereto attached and made a part of this account - - - \$125.00

Georgia, Campbell County.

Before me, the undersigned Ordinary, this day personally came Mr. W. A. Spence, who, after having been duly sworn, says, on oath, that the above and foregoing account is rendered for funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill.

Sworn to & subscribed before me, this March 14, 1925.

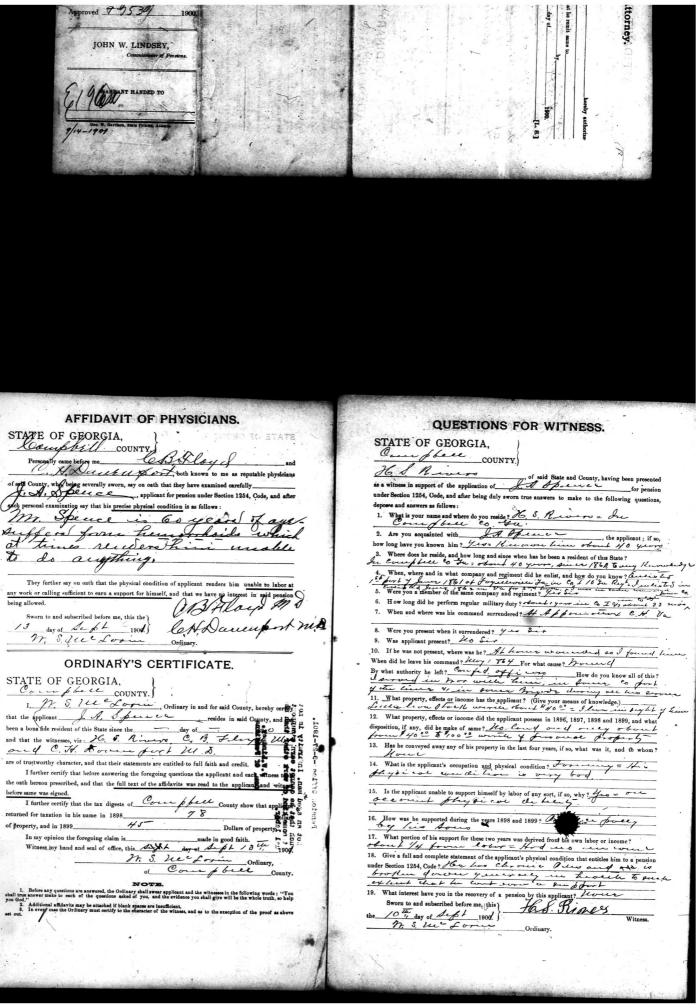
M. Ille Lorine , Ordinary ,

Dr.

Campbell county, Georgia.

way that he how. Now. Rosey Blackbeth Spanne of said county at Section 2 Sec	of said County, who, after being sworn, on oath	
Comply in this State, on the 19th. Apy of Sphrazzy 19th and that a Familian of One Standard 19th (1900) 19th and the spinners and manufact at the time of parameters had not able to produce the state of any value ordinary of said country, the sum of 185.00, per seven statements fully and completely TEMINED berrie stately. Severa to an all anterior before the seven that and anterior before the stately. CERTIFICATE OF ORDINARY GEORGIA, Campbell Country, and that said prome and formation and the seven that and anterior before the seven that are seven to the Pamilian and Country and the said Country, and that said prome and formation and the seven that are seven to the Pamilian and Country and the said Country, and that said prome and formation and the seven that are seven them are appears on the Pamilian Bill of Country and country, and that said prome and formation and the first which is the said country, and the said prome and formation and the first which are stateded or could be said Country, and that said prome and formation and the first which are stateded or country and the said prome whom more appears on the Pamilian Bill of Country and the said country and th	says that he knew Mrs. Epsay Elizabeth Spence of said County, and that said Pensioner	
Comply in this State, on the 19th. Apy of Sphrazzy 19th and that a Familian of One Standard 19th (1900) 19th and the spinners and manufact at the time of parameters had not able to produce the state of any value ordinary of said country, the sum of 185.00, per seven statements fully and completely TEMINED berrie stately. Severa to an all anterior before the seven that and anterior before the stately. CERTIFICATE OF ORDINARY GEORGIA, Campbell Country, and that said prome and formation and the seven that and anterior before the seven that are seven to the Pamilian and Country and the said Country, and that said prome and formation and the seven that are seven to the Pamilian and Country and the said Country, and that said prome and formation and the seven that are seven them are appears on the Pamilian Bill of Country and country, and that said prome and formation and the first which is the said country, and the said prome and formation and the first which are stateded or could be said Country, and that said prome and formation and the first which are stateded or country and the said prome whom more appears on the Pamilian Bill of Country and the said country and th	was on the Pension Roll of said County at the time of death, which occurred in Campbell	
a Pension of One Humbred		
major at the time of positioner's doubt, and that personner into a videow or degendent abilities serving and so exists of any value artificiant to by these famous parameters folly and completely TREMEDD hereto statished. Sworm to and subscribed before me that 14th day of March, 1965. Georgical — County March 1965. Georgical — County 1965. Mar. 14. To fune real expenses of said deceased, as per items of said proper of polyment and sense of the interest of the forty of the county 1965. Georgical —		
Second to detail of any value sufficient to pay these flavoral exposure, which amounted to the sum of a 185-00, per vivors statements fully and completely TEMILERED herete statement. Secon, to and subscribed before me that 14th		
Received of W. S. Kelarin, as Ordinary of said county, the sum of ONE HUNDRED (100) DOLLARS, in full of the amount of pension money that I gave March, 1965. M. M. Western, Ordinary (Need of Ordinary) Geombell County (Need of Ordinary) GERTIFICATE OF ORDINARY GEOMOLA. Compbell County. J. R. S. Melarin, Ordinary at all Orminy at all Orminy at all Orminy at all Orminy, and certify that I personally know. M. A. Spence. who is a resident citizen of anid County, and that said person land truthenthy classified pension. Was paid a Femine of Ordinary of County and that said person land truthenthy classified, and that the immensions at his feet of this venctor have been carefully classified in making up this venctor said the Bully which are sticked as part of this second to the state of this second to the understand of the understand and official said, this Lifeth day of March. Georgia, Campbell County. Mar. 16. To functed expenses of said deceased, as per itemized statement hereto attached and made a part of this second to the understand of the understa		GEORGIA, CAMPBELL COUNTY.
Swom to and subscribed before me this 14th day of March. 1955. Ordinary Compbell County (Seal of Ordinary) CERTIFICATE OF ORDINARY GENERAL Compbell County. (Seal of Ordinary) CERTIFICATE OF ORDINARY GENERAL Compbell County. I. R. A. Molaria, Ordinary of and County, do certify that I personally know M. A. Spence. who is a resident citizen of said County, and that said promos and traitfall and transversivy character, untilled to full faith and credit; that I also knew Mrs. Panty Elizabeth Spence. who is a resident citizen of said County, and that said promos are traitfall and transversivy character, untilled to full faith was the same person whose mass appears on the Pennine Reli of General Religion		Received of W. S. McLarin, as Ordinary of said county, the sum
the 14th day of March. M. M. Freedom, Ordinary Ordinar		
CERTIFICATE OF ORDINARY GBOGGIA, Campbell ———————————————————————————————————	是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	. 4
CERTIFICATE OF ORDINARY GENERAL Compbell ———— County J. M. S. McLarin, Ordinary of said County, do certify that I personally know N. A. Sponce with a first such that the county of said County, and that said person less freshold a fall falls and credit; that I also know Mra. "Pasty Blazabeth Sponce withe it if such that the was the same person whose mass appears on the Pension Reli of County, and was take same person whose mass appears on the Pension Reli of County, and was take same person whose mass appears on the Pension Reli of County, and was take same person whose mass appears on the Pension Reli of County, and was take a same person whose mass appears on the Pension Reli of County, and was take framework of One-Bundreed [2 300,00] Polliar in all County of 1924. , and I now believe said pensioner to be dead; and that the instructions at the foot of this vesscher have been carefully observed in making up this vesscher save been carefully observed in making up	n Ali, 9	
CERTIFICATE OF ORDINARY GEOGRIA. Campbell	- Committee of the comm	
CERTIFICATE OF ORDINARY J. M. S. McLarin, Ordinary of said County, do certify that I personally know. N. A. Spence with cruthul and transverty character, suitied to full faith and credit; that I also know krs. "pasy Blashath Spence. Wills in his and last this was the same person whose name appears on the Pension Reli of Campbell Downty, and was all a low believe said pensioner to be deed; and that the intraveltoms at the foot of this voucher have been carefully observed in making up this voucher end the Mills which are attached and made of this voucher have been carefully observed in making up this voucher end to be deed; and the this which are attached and part of this account — \$125.00 - herets. Given under my hand and official seal, this. 14th. Asy of March. 192 5. Georgia, Campbell County. Georgia, Campbell County. Before me, the undersigned Ordinary, this day personally came Mrs. W. A. Spence, who, after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who, after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who, after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who, after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who, after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who after having been duly sworm, says, on eath, that the above and foregoing account is rendered for funeral expenses of Mrs. Spence, who after having been duly sworm, says, on e		1/2
GEORGIA. Campbell County. 1. W. S. McLerin. Ordinary of said County, do certify that I personally know W. A. Spence who has and data said person here truthful and trustworthy shareles, suttilet to full faith and credit; that I also knew Mra. Pacy Bizabeth Spence while in life and has this was the same person whose name appears on its Premium Roll of Gamphell . County, and was the same person whose name appears on its Premium Roll of Gamphell . County, and was paid a Pension of . One Burdred. (\$4.00.00.) Dollar in said County for 192.4. and I now believe said pensioner to by dead; and that the instructions at the foot of this womeher have been carefully observed in making up this womeher and the Bills which are attached. Revenue and ordinary (Seal or Ordinary) Campbell . Oomty Description: A. Par of in all one wear measure and in the bills womeher and the Bills which are attached. A. Par of in all one wear measure and in the bills womeher and the bills womener and the bills which are attached. County Description: (Seal or Ordinary) Campbell . Oomty Description: Description: A. Par of in all one wear measure and the bills womener and the bills which are attached and made a part of this account \$125.00 Before me, the undersigned ordinary, this day personally came Mr. W. A. Spence, who, after having been duly sworn, says, on oath, that the above and foreign and the bills womener and the bills womener and the bills womener and the bills womener and the b		(Signed.) A. Skenee
that I personally know. W. A. Sponso. who is a resident citizen of said County, and that said person have fruthful and trustworthy character, smittled to full lath was the same person whose name appears on the Pension Roll of Campbell . County, and was naid County for 192.4., and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher said the fills which are attached nor continued by the county. (Scal or Ordinary) Campbell	CERTIFICATE OF ORDINARY	
that I personally know W. A. Spence who is a resident citizen of said County, and that said person sent truthful and trustworthy character, entitled to full faith and credit; that I also know Mrs. Pascy lizabath Spence. while in life and that this was the same person whose name appears on the Pussion Roll of Campbell County, and was paid a Pension of One-Hundred (\$100.00) Dollars in said County for 192 A., and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the Bills which are attached hereto. Given under my hand and official seal, this little day of March 192 f. (Seal or Ordinary) Campbell Ordinary Campbell County. Before me, the undersigned Ordinary; this day personally came Mrs. W. A. Spence, who, after having been duly sworn, says, on oath, that the above and foregoing account is rendered for funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill. When the same are all servers to be done to the same and the same are all servers to be done to the s	GEORGIA, Compbell County.	
citizen of said County, and that said person have frushful and treatworthy character, entitled to full faith and credit; that I also knew Mrs. Dasy Hizabeth Spence while is lifs and that this was the same person whose name appears on the Pension Roll of Gampbell County and was paid a Pension of One Hundred (\$100.00) Dollar in said County for 192.4., and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher said the bills which are attached hereto. Given under my hand and official seal, this 14th day of March 192.5. (Seal or Ordinary) Campbell County County DEFENCIONES: And March 18. To funeral expenses of said deceased, as per itemized statement here to attached and made a part of this account \$125.00 - Ordinary County DEFENCIONES: And March 18. To funeral expenses of said deceased, as per itemized statement here to attached and made a part of this account \$125.00 - Ordinary County DEFENCIONES: And March 18. To funeral expenses of said deceased, as per itemized statement here to attached and made a part of this account \$125.00 - Ordinary Campbell County. Before me, the undersigned Ordinary, this day personally came Mrs. W. A. Spence, who, after having been duly sworn, says, on oath, that the above and foregoing account is rendered for funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill. March 18. To funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill. March 18. To funeral expenses of said deceased, as per itemized for funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill. March 18. To funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill. March 18. To funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property with a day of the prop	I, W. S. McLarin, Ordinary of said County, do certify	
and credit; that I also know Mrs. Phary Elzabeth Spence. will in life and that this was the same person whose name appears on the Pension Roll of Gampbell . County, and was paid a Pension of One Hundred . (\$100.00) Dollars in said County for 192 4., and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher said the bills which are attached hereto. Given under my hand and official seal, this 14th day of March, 192 5. (Sail or Ordinary) County C	that I personally know. W. A. Spence , who is a resident	
was paid a Pension of One-Hundred (100.00) Dollars in said County for 192.4., and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto. Given under my hand and official seal, this little day of March 192.5. (Seal or Ordinary) Campbell County Campbell County DEFENORMENT AND A Spence, who, after having been duly sworm, says, on oath, that the above and foregoing account is rendered for funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill. MA A About A Sworm to & subscribed before me, this March 14, 1925. The above and foregoing account is named for account in the subscriber for subscriber to make the subscriber for subscriber to pay this bill. MA About 18. To funeral expenses of said deceased, as per itemized statement hereto attached and made a part of this account — \$125.00	citizen of said County, and that said person to truthful and trustworthy character, entitled to full faith	Georgia, Campbell County.
was paid a Pension of One-Hundred (100.00) Dollars in said County for 192.4., and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto. Given under my hand and official seal, this little day of March 192.5. (Seal or Ordinary) Campbell County Campbell County DEFENORMENT AND A Spence, who, after having been duly sworm, says, on oath, that the above and foregoing account is rendered for funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient property to pay this bill. MA A About A Sworm to & subscribed before me, this March 14, 1925. The above and foregoing account is named for account in the subscriber for subscriber to make the subscriber for subscriber to pay this bill. MA About 18. To funeral expenses of said deceased, as per itemized statement hereto attached and made a part of this account — \$125.00	and credit; that I also knew Mrs. "pasy 1 zabeth Spence while in life and that this	Estate of Mrs. Epsev Elizabeth Spance deceased
was paid a Pension of One Hundred (\$100.00) Dollars in said County for 1924, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the Bills which are attached hereto. Given under my hand and official seal, this 14th day of March, 1925. (Seal or Ordinary) Gampbell County Georgia, Campbell County. Before me, the undersigned Ordinary, this day personally came Mr. W. A. Spence, who, after having been duly sworn, says, on oath, that the above and foregoing account is rendered for funeral expenses of Mrs. Epsey Elizabeth Spence, who died without owning sufficient of the sound and he were to be the seal that the sound is making argues of the Ball Seal to the State of the S	was the same person whose name appears on the Pension Roll of Campbell County, and	
in said County for 192.4., and I now believe said pensioner to be dead; and that the instructions at the foot. of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto. Given under my hand and official seal, this 14th day of March, 192.5. (Seal or Ordinary) Campbell County General County County INSTRUCTIONS: As Per us in all case where pensioner did after Toward, the day and use of the first large which are strongly and the foot of the first large which are strongly as a first large which are strongly a		Dr.
of this voucher have been carefully observed in making up this woucher and the bills which are attached hereto. Given under my hand and official seal, this lifth day of March, 1925. (Seal or Ordinary) Campbell County Campbell County Before me, the undersigned Ordinary, this day personally came Mr. W. A. Spence, who, after having been duly sworn, says, on oath, that the above and foregoing account is rendered for funeral ex- recording and one of the lift seal of the seal of t		
Given under my hand and official seal, this 14th day of March, 1925. (Seal or Ordinary) Campbell County Campbell County Before me, the undersigned Ordinary, this day personally came Mr. W. A. Spence, who, after having been duly sworn, says, on oath, that the above and foregoing account is rendered for funeral ex- recognition of the special season was a season of the special season of the		62
Given under my hand and official seal, this 14th day of March, 1925. (Seal or Ordinary) Campbell County Description County Description Descri		a part of this account \$125.00 -
(Seal or Ordinary) Campbell County Campbell County Descriptions: As For we is a few ordinary and the seal of		Georgia Camphell County
Campbell County DETUDOROUS At Far was in a few and processes of the county of the co	hall L	
that the above and foregoing account is rendered for funeral ex- the foregoing account is rendered for funeral ex- that the above and foregoing account is rendered for funeral ex- penses of Mrs. Epsey Elizabeth Spence, who died without owning suf- that the above and foregoing account is rendered for funeral ex- penses of Mrs. Epsey Elizabeth Spence, who died without owning suf- that the above and foregoing account is entered to the second with the above in the ab		•
PRINCIPLE AND AND THE WINDOW DAY & SOLDER, P SET IS LATING, WE ARE THOSE CLARK OFFER WINDOW DAY OF A SOLDER, P SET IS LATING, WE ARE THOSE CLARK OFFER WINDOW DAY OF A SOLDER, P SET IS LATING, WE ARE THOSE CLARK OFFER WINDOW DAY OF A SOLDER, P SET IS LATING, WE ARE THOSE CLARK OFFER WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER, P SET IS LATING WINDOW DAY OF A SOLDER		
the state of the s	lat. For use in all cases where pendence died after January 12t, had not been out of Buile larger than twelve months, and did not	
The short and foregoing amount is unclosed for survival in the had from the control of the state of the foregoing amount in the had from the control of the state of the foregoing amount in the had from the control of the foregoing amount in the state of the foregoing amount in the state of the foregoing amount in the state of the foregoing amount in the foregoing	EXPENSES, AND MUST MAKE APPLICATION ON TRILLOW BLANK. 2nd. Require those claiming expenses of last librar and funeral, to make out their accounts in fully limited form, giving such them and	penses of Mrs. Epsey Elizabeth Spence, who died without owning suf-
The Tax officers state up on a few parts of Colleges and the parts of the Colleges and the College	2rd. Remainy accounts cannot be publi-parly those connected with the last librius, just before death when penalener grow wome to fife. dilt. Each account must be evern to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, un-	ficient property to pay this bill.
The Tax officers state up on a few parts of Colleges and the parts of the Colleges and the College	"The above and foregoing account is rendered for services in the last linear (or for funeral expenses, as the one may be) of who died without owning sufficient property to pay this bill."	Wa exerce
Country of Contractions and the Contraction of the	50. The Ordinary must see to 18 that south Mi is particuly instituted in order respect, and property arrows to, and all obtained nearly to this blank after this blank has been property completed as inflational. 6 the completed revision—this limits and the bille—must be sent to the Pennion Department for approved unid my money small be	Sworn to & subscribed before me, this March 14, 1925.
Country of Contractions and the Contraction of the	paid out until 1 is returned to you as your calledity is make the payment. This The Ordinary along pay rail, no Ordinary, for the position and then disburred the monthly binded and below recorded. All Accounts as Mile for careful was write the Panden Description, design the dispussments in very count deal.	n. Ille Lotine and name
-amposi councy, deorgia.	differen, or elictronisation, unger and electron for dusing only utual the law and assesses because of dusing of them. Oth. Better this application, and establish bills, with year final electronist, in the French Department,	
		Ampour country, Georgia.
	A Committee of the Comm	

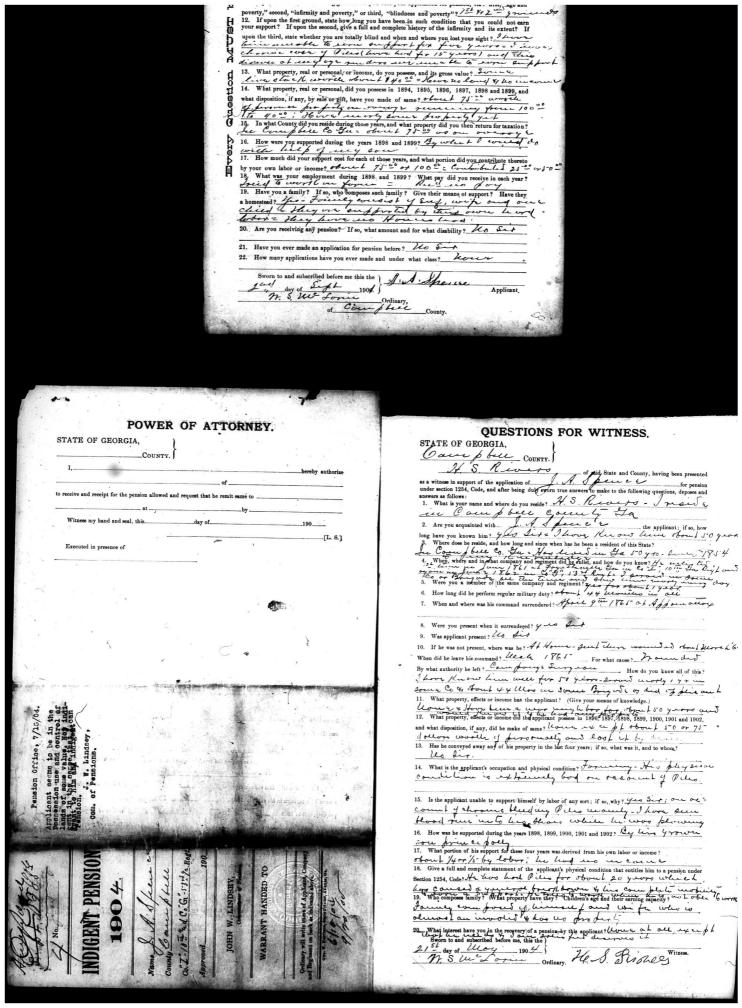
Theres 1, a,	President distribution and assessment		
INDIGENT PENSION,		Action of the second of the se	STATE OF GEORGI I. to receive and receipt for the penal to receipt and receipt for the penal Executed Apprecia
1900. 1904. Name J.A. Spencer	Pension office, 10/1/05. It would have been so easy and more satisfactory if applicant had stated where and when he made the transfer of his Bond for title, and for what consideration who is in the control of the land now. Prove all to be true.	TIL OVER	of the state of
County Confederate Co 2. 10 110 Approved 7 9530 1900.	now. Prove all to be true, J. V. Lingsey, Com. of Pensions.	4 W.	Power of Attorne
JOHN W. LINDSEY, Commissioner of Personal C / GARDANT HARDED TO		41.0	00 one
9/14-19-97 Starten, Bais Prince Atoms			thy substitution of the su



ORDINARY'S CERTIFICATE.	By what authority he left? Courfed only
STATE OF GEORGIA,	By what authority he left? Courted office on How do you know all of this? Larry on more with time, in four to fort
Complete COUNTY.	The true one ments during out him ?
1 M S Ule Larrie Ordinary in and Con said County back to the	11. What property, effects or income has the applicant? (Give your means of knowledge.) Little live Strell warrier though NHO " = 9 live in sugget
that the applicant & A. Spence resides in said County, and the	12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what
been a bona fide resident of this State since the day of	disposition, if any, did be make of same? Ho long one of one of one
been a bona fide resident of this State since the day of and that the witnesses, viz: 16. S. Rivery C. B. Fley Ular	disposition, if any, did be make of same? No long only only obout
and that the witnesses, viz: 16. I though the start witnesses, viz: 16. I town fort M. S.	13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
	Hour
are of trustworthy character, and that their statements are entitled to full faith and credit.	14. What is the applicant's occupation and physical condition? For your find
I further certify that before answering the foregoing questions the applicant and each attness to the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and with the full text of the affidavits was read to the applicant and with the full text of the affidavits.	7
before same was signed.	15. Is the applicant unable to support himself by labor of any sort, if so, why? He = oer
I further certify that the tax digests of Cour poeu County show that appliant	15. Is the applicant unable to support himself by labor of any sort, if so, why? If a - our
78	
of property, and in 1899 45 Dollars of property. In my opinion the foregoing claim is made in good faith.	16. How was he supported during the years 1898 and 1899?
Dollars of property, 2 to 4	17. What portion of his support for these two years was derived from his own labor or income?
In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this day of large 1 3 to 1900.	the former - stord and the long to
Made and seal of once, this to the form Ordinary,	18 Give a full and complete state of the sta
of Compbeel County.	under Section 1254, Code ? How how chrowie Oles and out is
	under Section 1254, Code? How how the applicant's physical condition that entitles him to a pension under Section 1254, Code? How how the form the and get is brother former your and you have been to get any heart to get any limit that he count some a purple of the former than the forme
NOTE.	10 What interest how and is the second of the fort
 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." 	19. What interest have you in the recovery of a pension by this applicant? Rours Sworn to and subscribed before me, this \ H \ R \ R \ R \ R \ R \ R \ R \ R \ R
you God. 2. Additional affidavits may be attached if blank spaces are insufficient, 5. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above	
est out,	A C 1 5 C
	Ordinary.
	Section 1
Questions for	r Annlicent
STATE OF GEORGIA.	т тррнеант.
0 11	TO STATE STATE REPRESANT
County.)	
to avail himself of the Pension Act (Section 1954 Code	of said State and County, desiring
1. What is your name and where do you reside? (r	we state, County and post office) A. A.
2. How long and since when have you been a resider	nt of this State? obout of years =
2. How long and since when have you been a residence 174 \$7 at 1745	4 09
3. When and where were you born? July 9.	1841 in States of S.C.
4. When and where and in what company and regime the 1st lines in June 1861 at June	ent did you enlist or serve? Encire Lod
Encipted 2nd liver June 6,18	362: en est 1-27 de 10. L.
5. How long did you remain in such company and re	minute 14 lung on many
6 1 10 Ju Ray touch obout 3.	3 Months : Ca" 4" 1-3 94
Righ	
6. When and where was your company and regiment	surrendered and discharged? I defent
Know be course I was	at home on a
fortlonga wounded	2. 4
7. Were you present with your company and regimer 8. If not present, state specifically and clearly where	nt when it was surrendered? He with
cause and by whose authority? I was at he	you were when you left your command to all the
george firstings on occour	you were, when you left your command, for what
9. How much can you earn (gross) per annum by you	you were, when you let your command, for what or the command of you have command by you have you considered by according
	you were, when you let your command, for what to work the beautiful of the fore full outstanding of the grant of the secretary of the secretar
10. What has been your occupation since 1865?	you were, when you left your command, for what Ly around I, by Compat, our terries is one exertions or labor? from bey others 5-0.06
10. What has been your occupation since 1865? 11. Upon which of the following grounds do you base	you were, when you let your command, for what we will not consider the constant of the forest constant of the
10. What has been your occupation since 1865? 11. Upon which of the following grounds do you base poverty," second, "infirmity and poverty third "the	you were, when you let your command, for what Ly wormen t, by Complete contenting or own exertions or labor? for subty of the start of the your application for pension, viz: first, "age and little your application for pension, viz: first, "age and
10. What has been your occupation since 1865? 11. Upon which of the following grounds do you base	you were, when you left your command, for what Ly commend the Compatitude of the continue of

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your support. It upon the second, give a full and complete history of the infirmity and its extent? If upon the second, give a full and owhen and where you lost your sight? If upon the full state whether you are totally blind and when and where you lost your sight? If you want to the full state when the f Question 21. Have you ever made an application for pension before? Wo San 22. How many applications have you ever made and under what class?_ kour Sworn to and subscribed before me this the full day of Sept 1904. Sherise nr. S. W. Lonie Ordinary. Applicant. of Complete ___County.





How do you know all of this? I have furness furne well for Se years derived from another 197 in Source Co 94. Found if yellow are Jones for yellow and for this? 11. What property, effects or income has the applicant? (Give your means of knowledge.) 12. What property, effects or income has the applicant of the property in the last four years; if so, what was it, and to whom? 13. Has be conveyed away and of his property in the last four years; if so, what was it, and to whom? 14. What is the applicant's occupation and physical condition? 15. Is the applicant unable to support himself by labor of any sort; if so, why? yes Ser; on one county of the property of the last four years; if so, why? yes Ser; on one county of the property in the last four years; if so, why? yes Ser; on one county of the property in the last four years; if so, why? yes Ser; on one county of the property in the last four years; if so, why? yes Ser; on one county of the applicant of the property in the last four years; if so, why? yes Ser; on one county of the property in the last four years; if so, why? yes Ser; on one county of the property in the last four years; if so, why? yes Ser; on one county of the applicant of the property in the last four years; if so, why? yes Ser; on one county of the property in the last four years; if so, why? yes Ser; on one county of the property in the last four years; if so, why? yes Ser; on one county of the grant yes for the years 1888, 1899, 1900, 1901 and 1902? If years yer one of the years 1888, 1899, 1900, 1901 and 1902? If years yer one of the years 1888, 1899, 1900, 1901 and 1902? If years yer one of the years 1888, 1899, 1900, 1901 and 1902? If years yer one of the years 1888, 1899, 1900, 1901 and 1902? If years yer one years yet yet yet yer yet		By what authority he left? Companys, Surgion How do you know all of this?
11. What property, effects or income has the applicant? (Cive your means of knowledge.) 12. What property, effects or income has the applicant? (Cive your means of knowledge.) 12. What property, effects or income did the applicant possess in 1886; 1897, 1898, 1899, 1900, 1901 and 1902. 13. What property, effects or income did the applicant possess in 1886; 1897, 1898, 1899, 1900, 1901 and 1902. 14. What is the applicant of performance of the four years; if so, what was it, and to whom? 14. What is the applicant occupation and physical condition? To read the four years if so, what was it, and to whom? 15. Is the applicant unable to support himself by labor of any sort; if so, why? Yes Sur; one of the four years is so, why? Yes Sur; one of the four years was derived from his siwn labor or income? 16. How was be supported during the years 1898, 1899, 1900, 1901 and 1902? My Ling Y your for these four years was derived from his siwn labor or income? 17. What portion of his support for these four years was derived from his siwn labor or income? 18. Give a full and complete statement of the applicants physical condition that entitles him to a pension under Section 1254, Code? He was hord I was for John 120 y yours when he was a full was complete statement of the applicants physical condition that entitles him to a pension under Section 1254, Code? What was hord I was for John 120 y yours when he was a full was complete statement of the applicants physical condition that entitles him to a pension under Section 1254, Code? What was hord I was for John 120 y yours when he was a full was complete statement of the applicants of the four years was derived from his sign labor or income? 18. What interest have you in the recovery of a pension-by this applicant? He was a get and their earning capacity? I will be a full was a full was the four was a full was a full was a full was full		By what authority he left? How do you know all of this?
11. What property, effects or income has the applicant? (Give your means of knowledge.) 12. What property, effects or income did the applicant possess in 1869; 1807; 1808, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? However, the property is and what disposition, if any, did he make of same? However, the property is a property in the last four years; if so, what was it, and to whom? 13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? 14. What is the applicant's occupation and physical condition? 15. Is the applicant unable to support himself by labor of any sort; if so, why? Yes Sar; on one. 16. How was he supported during the years 1808, 1899, 1900, 1901 and 1902? Ly lawy yrown. 17. What pertion of his support for these four years was derived from his swin labor or income? 18. Give a full and completes statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He have hood for the property have they thindren's age and their enring capacity. 18. Who composes family? What property have they thindren's age and their enring capacity. 19. Who composes family? What property have they thindren's age and their enring capacity. 20. What interest have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant? Here we have you in the recovery of a pension-by this applicant?		I hove fewous and well for 50 years - I would worky , 47 in
12. What property, effects or moome did the applicant possess in 1869, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did be make of amen's lawned as the plotter of the property in the last four years; if so, what was it, and to whom? 13. Has be conveyed away any of his property in the last four years; if so, what was it, and to whom? 14. What is the applicant's occupation and physical condition? 15. Is the applicant unable to support himself by labor of any sort; if so, why? You Sarri, on or or country of the property in the last four years; if so, why? You Sarri, on or or country of the property in the last four years; if so, why? You Sarri, on or or country of the property in the last four years; if so, why? You Sarri, on or or country of the property in the last four years was derived from his sym labor or income? 16. How was be supported during the years 1898, 1899, 1900, 1901 and 1902? My turn yround years was derived from his sym labor or income? 17. What portion of his support for these four years was derived from his sym labor or income? 18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1264, Code? He have bend I have for obvered to years with the last the complete statement of the applicant's physical condition that entitles him to a pension under Section 1264, Code? He have bend I have for obvered to year of the contract of the complete statement of the applicant's physical condition that entitles him to a pension under Section 1264, Code? He have bend I have for obvered to year of the contract of the complete statement of the applicant's physical condition that entitles him to a pension under Section 1264, Code? He have bend I have bend I have been dealered to the contract of the contract of the support of the contract of the co		some Co & Fout 44 llos an some Brig was or did of plie on h
and what disposition, if any, did he make of same? However we she bottom is 50 or 71- dethors worth of personally and look it by 13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? 14. What is the applicant's occupation and physical condition? 15. Is the applicant unable to support himself by labor of any sort; if so, why? yes Ser; on oe count of the support himself by labor of any sort; if so, why? yes Ser; on oe count of the support himself by labor of any sort; if so, why? yes Ser; on oe count of the support himself by labor of any sort; if so, why? yes Ser; on oe count of the support himself by labor of any sort; if so, why? yes Ser; on oe count of the support		11. What property, effects or income has the applicant? (Give your means of knowledge.)
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2/3- day of lloy 190 4		Sworn to and subscribed before me, this the
M. S. W. Loren Ordinary. H. S. Susces		21 dev of May 190 4
Ordinary. 1. C. W. W. W.		Mr. S. luc Lonin an He S Marios
		Ordinary. 4 0. Do. Ove
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	QUESTIONS	FOR	N	ITNESS.
STATE OF	GEORGIA,) -		

Campbell County.	
6. W. Host Long of spid State and County, having be	en mesented
· · · · · · · · · · · · · · · · · · ·	
under section 1254, Code, and after being duly sworn true answers to make to the following questions,	_for pension deposes and
answers as follows:	
1. What is your name and where do you reside:	- Cor
in bound best county La	
2. Are you acquainted with J. A. Specece the applicant	; if so, how
long have you known him? yes dis , love Known line 10	yeors
3. Where does he reside, and how long and since when has he seen a resident of this State?	
In Com place G. La. 50 yro, such 1814 6 my K	nowledge
4. When, where and in what company and regiment did he callet, and how de you know? June	1861
The Reyt - I was all the time of the time the	-
5. Were you a member of the same company and regiment?	time for
6. How long did be perform regular military duty? obout 44 deauths	- acc
7. When and where was his command surrendered? Could sory fositively	o I was
ou delvelut service at llocou da for a du	un while
Were you present when it surrendered the Sir was one de las hat &	dir.
6. Were you present when it surrendered	al /2000
9. Was applicant propent? Court for fourtively, I found time 10. If he was not propent, where was he? I have a work of the found of	1
10. If he was not present, where was he? at home would be dead on	uy dow IL
When did he leave his command? Much 1966 & book of the Power Country to left? Company of the company of the country he left?	us
By what authority he left ? Cou for officers, don bees How do you know	all of this?
I hoor Known him well to formably for 50 years	- lims un don
mighborhood all they lim - Know he us ody as good so	edier be come
11. What property, effects or income has the applicant! (Give your means of knowledge.)	
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and what disposition, if any, did be make of same? Morling buch a little of	roud
property which he look	
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom	1
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14. What is the applicant's occupation and physical condition? Forming - The	pluy 0 -
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15. Is the applicant unable to support himself by labor of any sort; if so, why? You Dir	ou ;
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	. L.
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? Un and 2002 or you four four	
17. What portion of his support for these four years was derived from his own labor or income?	
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18. Give a full and complete statement of the applicant's physical condition that entitles him to a pe	
Section 1254, Code? He has feles and is so bodly broken	
hearth gammaly that the man coul was	of Lawry to
19. Who composes family? What property have they? Children's age and their earning capacity?	
Jamies com food of him out & wife - He	uy .
how his property	
	bl cleat
20. What interest have you in the recovery of a pension by this applicant? Love up at	
Sworn to and subscribed before me, this the	n

AFFIDAVIT OF PHYSICIANS.

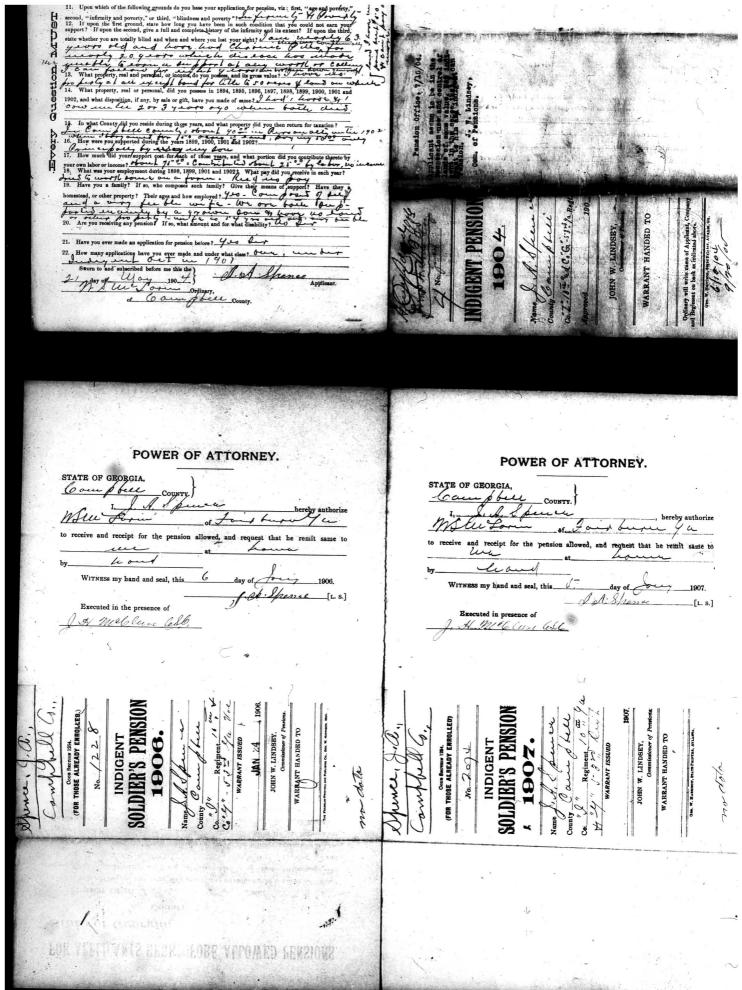
STATE OF GEORGIA,	
Campbell Country	
13, 4	
gersonally came before me A augus	and
both known to me as reputa	ble physicians
of said County, whoo being severally sworn, say on oath that they have examined carefully	m.
A. Spence, applicant for pension under Section 1254, Co	
, approximate for penaltic details 1201, (A	ode, and after
such personal examination say that his precise physical condition is as follows:	, /
mr. Spence in 63 years ald Suffe	no.
from herrospouls, which Cause gos	at debility
on is mable to lobor it any work or	Callin
which he is cobseited to do - outlined	to one
a support for himself	- wine
	make
Sworn to and subscribed before me, this, the	is min.
- 8 day of June 190 4 } letter avent	ust mas
Mr Sich Form Ordinary.	
ordinary.	

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,	
County.	
. It I we Lane	
1, Tr. D. ac Larue	Ordinary, in and for said County, hereby certify
A Shares	, , , , , , , , , , , , , , , , , , ,
that the applicant	resides in said County, and has
been a bona fide resident of this State since the	day of
and that the witnesses, viz .: CO, Fr. Hor Cou	, H. S. Kivers, & J.
and that the witnesses, viz. Co. M. Hor Low Langues U. D. and Co. I.	1. Down fort, see d.
are of trustworthy character, and that their statements are enti-	
I further certify that before answering the foregoing qu	pestions the applicant and each witness took the oath
hereon prescribed, and that the full text of the affidavits was re	ad to the applicant and witness before same was signed.
	- plue
I further certify that the tax digest of	County shows that applicant
returned for taxation in his name in 1899	15-00
returned for taxation in his name in 1899	Dollars of
property, and in 1900	' Della of : 1001
# 4000	Dollars of property; in 1901
", 47-	Dollars of property; in 1902
# 43100	
	Dollars of property.
In my opinion the foregoing claim is	10 100
a cu	made in good faith.
Witness my hand and seal of office, this	day of June 190 4
n	c 1.0e/- '
	O. Caroniary,
	of lace & bell County.
NOTE	•

 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true asserse make to each of the questions saked of you, and the evidence you shall give will be the whole truth, so help you God."
 In sweep case the Ordinary stacked; If blank spaces are insufficient.
 In sweep case the Ordinary must certify to the character of the entrees and state the average of the stress.

Throw Kinowe him will & forora bly for 50 y rovo-lines in down	STATE OF GEORGIA,
This property, effects or income has the applicant? (Give your means of knowledge.)	COUNTY.
11. What property, effects or income has the applicant? (Give your means of knowledge.) Nous Jan found or well him and him of four	I, M. S. un Larue Ordinary, in and for said County, hereby certify
19 What property effects or income did the applicant possess in 1896 1897 1898 1899 1900 1901 and 1902	that the applicant for Spruce resides in said County, and has
and what disposition, if any, did he make of same, Holling but a little fire out	
property which he look	and that the witnesses, viz. 6. M. Hor Low, H. S. Rivers, J. T.
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?	Langues U. N. and Co. N. Novemport, U. d.
llo for	are of trustworthy character, and that their statements are entitled to full faith and credit.
14. What is the applicant's occupation and physical condition? Forming - The deep o-	I further certify that before answering the foregoing questions the applicant and each witness took the oath
isol consistion is very tod on see our !	hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.
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15. Is the applicant unable to support himself by labor of any sort; if so, why? 400 fir; ou	I further certify that the tax digest of County shows that applicant
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18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under	a che
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to some a support for himself	Ordinary,
Jamely cam foot of hum suf & wife - they	of loan & bell County.
Love no property	NOTE.
20. What interest have you in the recovery of a pension by this applicant? Hence we can be thank	1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole. Additional adders it may be attached if blank spaces are insufficient. 2. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.
Sworn to and subscribed before me, this the	the whole truth, so help you God." 2. Additional affidavits may be attached if blank spaces are insufficient.
2/ day of way 190, 4 Witness.	as above set out.
M. Sur Lance Ordinary.	
	C_{Ω}
	Arch
QUESTIONS FOR APPLICANT.	MANUEL ST. CONTROL
STATE OF GEORGIA.	POWER OF ATTORNEY.
Cam file Copy	STATE OF GEORGIA,
1 A hence	COUNTY.
	•
to avail imment of that genero Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and nanwers as follows: 1. What is your name and where do you reside? (Give State County and post-effice).	hereby authorize
It spence in Complier to ta. O. tant burne da	of
2. How long and since when have you been a resident of this State? Ober 1 60 years,	to market and a section of the secti
Since 1844 00 1845	to receive and receipt for the pension allowed and request that he remit same to
succe 1844 01/845	to receive and receipt for the pension allowed and request that he remit same to
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3. When and where were you born? Jarry 9.1 841 we State of S.C 4. When and where and in what company and regiment did you ealist or serve? I want to g 15t lives in the server of the	Winess my hand and seal, this day of 190
3. When and where were you born? Jarry 9,1841 we State of Sta. 4. When and where and in what confrany and regiment did you eallst or server a water to go 1st living in the 186 cm. 1	Witness my hand and seal, this
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3. When and where were you born? Joing for Still see Still and complete history of the infinity and poverty. 4. When and where again in what complany and regiment did you easilet or serve the still see that the still see	Witness my hand and seal, this
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3. When and where were you born? 4. When and where were you born? 5. How long did you remain in such company and regiment did you enlist or serve? 6. How long did you remain in such company and regiment? 6. When and where was your company and regiment surrendered and discharged? 7. Were you present with your company and regiment surrendered and discharged? 7. Were you present with your company and regiment when it was surrendered? 8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? 9. How much can'you earn (gross) per annum by your own exercision or labor? 10. What has been your occupation since 1865? 11. Upon which of the following grounds do you base your application, for pension, viv: first, "age and poverty," the condition that you could not earn your support. If upon the second, give a till and complete history of the infirmity and its extent if I upon the hird, state how long you have been in such condition that you could not earn your support. If upon the second, give a till and complete history of the infirmity and its extent if I upon the hird, state how long you have been in such condition that you could not earn your support. If upon the second, give a till and complete history of the infirmity and its extent if I upon the hird, state whether you are totally blind and when and where you lost your sight! A contract of the property and its extent of the property, and the property are totally blind and when and where you lost your sight! A contract of the property and its extent of the property and the property are totally blind and when and where you lost your sight! A contract of the property and the property and property and property and the property and property and the property and property and property and the property and property	Witness my hand and seal, this day of 1900 [L. E.) Executed in presence of [L. E.) And the seal of t
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3. When and where were you born! 4. When and where agad in what complany and regiment did you enlist or serve! 5. How long did you remain in such company and regiment to the first of th	Witness my hard and seal, this
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Cample A. C., Co., Co., Co. Series 134. Con THOSE ALFLAY ENOLLED. No. 122 8 INDICENT	SOLDIER'S PENSION 1906. Name & County County County County	Co. 19 - Co. 2 - Segiment 16 - Co. 19 -	no dete	Complete G. C. Con Hose ALEND EST	SOLDIER'S PENSION	Name J. J. John Ch. County County County County County Co. J.	1907. JOHN W. LINDBEY, Osmatissione of Presents WARRANT HANDED TO Om. W. Random, Perint Parter, Allery,
LOW WELLOW	WIZ Shiry 1E08	E ALLOWED PERSI	OWZ				

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

· au	Sheer	_	f		
- /	g our	County.)		
	ally appears	-	ie	of Cour	
County, State	of Georgia, who,	being duly swo	rn, says on oat	h that he is a box	na fide citize
and resident	of said County as	nd State, and	has resided in	said State cont	innonsly eve
since the	day of		_1841; that	he is 6 #	vears old an
by occupation	a former	that he	enlisted in the	military service	of the Co-
federate State	s (or of the State	of ya		during the war	
States, and se	rved for the term	of yours	in Company	his physical co	th Regimen
follows:			1000 -1	· and physical co	
in Co	- fed	de roce	·u		
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hat his prop	erty consists of the	e following iter	no. Us h	i bu 4-	
	,	te tottowing iter	113		
	5 m ²	C-		_	
of the value o	f lo			Dollars. I am	now earning
	4		Dollars per m	onth. That by	reason of hi
hysical cond	ition and poverty	he is unable	to support him	self by his own	
abor, and the	t he receives no p	pension but the	one herein and	lied for	exertion o
Depone	nt desires to parti	icipate in the be	mefits of the A	ot approved by	15.1
894, and the	Acts amendatory	thereof, and ma	kes application	for the persion	ember 15th
		,	application	of the pension	to which he
s entitled for	the year 1906.	I have heretofor	re. as a residen		6 huis
s entitled for	the year 1906.	I have heretofor	re, as a residen	01_0	6 huis
s entitled for County, been	allowed a pension	for the year 19	06 -	01 01	6 hui
S entitled for County, been Sworn t	allowed a pension o and subseribed b	for the year 19 before me, this t	he (of Spen	hie
Sworn t	allowed a pension o and subseribed b	for the year 19	he }	yof Span	his
S entitled for County, been Sworn t	allowed a pension o and subseribed b	for the year 19 before me, this t	he (of Spen	6 his
Sworn	allowed a pension o and subscribed b	before me, this t	he }	of Shor	his
Sworn	allowed a pension of and subscribed by a pension of the pension of	for the year 19 before me, this to 1906.	he }	yof Shor	his
Sworn	allowed a pension o and subscribed b	for the year 19 before me, this to 1906.	he }	yof Show	hei
Sworn	allowed a pension of and subscribed by a pension of the pension of	for the year 19 before me, this to 1906.	he }	yof Spas	hui.
Sentitled for County, been Sworn of County, been Sworn of County, been Sworn of County	o and subscribed by the subscr	before me, this to 1906.	he }	Ordinary of	said County
State I, J o certify tha	allowed a pension o and subscribed by all of George	before me, this to 1906.	he Ordinary.	Cordinary of	
State I, // o certify tha	of Georg	pefore me, this to 1906.	Ordinary. Ordinary.	Ordinary of s	ments made
State I, cocrtify that the applicant ty him in his	of Georg Tam well acque in the foregoing said affidavit are te	per for the year 19 before me, this to 1906. 14a, County. ainted with affidavit, and at true, and I know	Ordinary. Ordinary.	Ordinary of s	ments made
State I, Io certify tha the applicant ty him in his to be, and that	allowed a pension o and subspribed by a pension of George Tam well acquain the foregoing said affidavit are the resides in this	per for the year 19 before me, this to 1906. Ida, County. ainted with affidavit, and artrue, and I know County.	Ordinary. Ordinary. n well satisfies whe is the indi	Ordinary of s	ments made
State I, Io certify tha the applicant ty him in his to be, and that	of Georg Tam well acque in the foregoing said affidavit are te	per for the year 19 before me, this to 1906. Ida, County. ainted with affidavit, and artrue, and I know County.	Ordinary. Ordinary. n well satisfies whe is the indi	Ordinary of s	ments made
State I, Io certify tha the applicant ty him in his to be, and that	allowed a pension o and subspribed by a pension of George Tam well acquain the foregoing said affidavit are the resides in this	per for the year 19 before me, this to 1906. Ida, County. ainted with affidavit, and artrue, and I know County.	Ordinary. Ordinary. n well satisfies whe is the indi	Ordinary of s	ments made
State I, Io certify tha the applicant ty him in his to be, and that	of Georg Tam well acquain the foregoing said affidavit are the resides in this Given under by	per for the year 19 before me, this to 1906. Ida, County. ainted with affidavit, and artrue, and I know County.	Ordinary. Ordinary. n well satisfies whe is the indi	Ordinary of s	ments made
State I, Io certify tha the applicant ty him in his to be, and that	of Georg Tam well acquain the foregoing said affidavit are the resides in this Given under by	per for the year 19 before me, this to 1906. Ida, County. ainted with affidavit, and artrue, and I know County. Official signature.	Ordinary. Ordinary. n well satisfies whe is the indi	Ordinary of s	ments made

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run	ALLPIDANIO	HRKKIUKUKK	ALLINWEIL	PENSIONS	
		THAT AL AND	עם א טעעמ	THOTOND	

TUK APPLICANTS HERETUFORE ALLOWED PENSIONS						
State of Georgia,						
Campber county,						
Personally appears a chem of Compbell						
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen						
and resident of said County and State, and has resided in said State continuously ever						
since the day of day of 184/; that he is 65 years old						
and by occupation a that he enlisted in the military service of the Con-						
federate States (or of the State of) during the war between the						
States, and served for the term of 29 in Company ", of 10 th Regiment						
of ; that his physical condition is as'						
follows: I have file, Rheuma too in y authe						
wounded in low fed brown						
that his property consists of the following items: Up fro for 5-						
THE RESERVE OF THE STREET, AND THE PARTY OF						
of the value of Dollars. I am now earning						
by my labor,/Dollars per month. That by reason of his						
physical condition and poverty he is unable to support himself by his own exertion or						
labor, and that he receives no pension but the one herein applied for.						
Deponent desires to participate in the benefits of the Act approved December 15th.						
1894, and the Acts amendatory thereof, and makes application for the pension to which he						
is entitled for the year 1907. I have heretofore, as a resident of Court of Lill						
County, been allowed a pension for the year 1906.						
Sworn to and subscribed before me, this the 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
m lance .						
Ordinary.						
State of Georgia,						
County.						
I, Ordinary of said County,						
do certify that I am well acquainted with he a line but a						
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 Jour Jonin						
Ordinary Caur phere County						
here						

by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or	by my labor,
labor, and that he receives no pension but the one herein applied for.	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,	Deponent desires to participate in the benefits of the Act approved December 15th.
1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of	1894, and the Acts amendatory thereof, and makes application for the pension to which he
County, been allowed a pension for the year 1906	is entitled for the year 1907. I have heretofore, as a resident of County, been allowed a pension for the year 1906.
Sworn to and subspribed before me, this the	Sworn to and subscribed before me, this the Olay Skan.
When form Ordinary,	Mr. S. W. Some Ordinary.
State of Georgia,	State of Georgia,
Complete County.)	Ordinary of said County
Jointally of said county,	I, Ordinary of said County,
do certify that I am well acquainted with A. A. I fur the statements made the applicant in the foregoing affidavit, and am well satisfied that the statements made	do certify that I am well acquainted with a die fee
by him in his said affidavit are true, and I know he is the individual he represents himself	the applicant in the foregoing affidavit, and am well satisfied that the statements made
to be, and that he resides in this County.	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 day official signature and seal, this 6	Given under my official signature and scal this
day of 1906.	day of Joney By I. We Lovin
Affin Com of hour	
ordinary County. Norz.—The blank spaces most of filled. Norz.—Affidavit should not be attiesed before January 1st, 1906,	ordinary County
Norz.—Affidavit should not be attested before January 1st, 1906,	Norz.—The blank spaces must be filled. Norz.—Affidavit should not be attested before January 1st, 1907.
	and the second s
naion Due Deceased Soldier	And notice that A
. STATE OF GEORGIA Come phece	County
med lle Force de de de de	To macket
that I personally know less Epery Eligobeth & feer	Ordinary of said County, do certify
is the lawful widow of Jo A. a prince	, the applicant, and that she
the Ludy en & Persion Boll of said Caus	bles and was on
a Pension from Cauphette	County, and was paid County for 192, and at the time
of his death on the 26 th day of 12 by	1922, there was due to
him and unpaid his Pension of our lund of	To The Control of the
of Georgia, and I known to Rivert, 4 Wet. W. J. 10	, the within
witness, and here of a truthful and trustworthy character and	
Given under my hand and seal this 12 to of July	Mu Loria Continu
	ordinary Ordinary
- Que	County.
· · ·	
	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Lie County	7.2. 1924 J. C. Lindberry, f.
1922 1922 Complete Co	Approved and ordered paid, A. 1/2-2- J. W. IMMOSEY Commissione of Pension Ty : Fill out above in full made pay out the menory, and then the pay out the menory, and then the menory and the menory a
1922 1922 1922 in for Pension ased Soldier (UNDER ACT 1831) in Widow or Depend BY ST. A. Spence 37. A. Spence 111. 101d* in Peb. 26,	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
1922 1922 tion for Pension occased Soldier (UNDER ACT 1891) paid his Widor or Dopmin BY of J. A. Spento of J. A. Spento on Dosmin BY New "Old" New "Old"	A A A A A A A A A A A A A A A A A A A
OO CO OO Per OO CO	Commission of the commission o
L G G G W W W W W W W W W W W W W W W W	File File File File File File File File
ication f Decease (UD)	Approximation of the control of the
Campbell C., 1922 plication for Pension Due Deceased Soldier (UNDER ACT 1891) (To be paid his Widow or Dependent Children) BY Midow of J. A. Denne of Campbell County Old or New 'Old' Date of Death Peb. 26, 199 2.	A) Ordinary is blank or with you with you
Appli Appli Date	Order is the Paris of the Paris
	and the same and t
GEORGIA, County.	3
I hereby authorize and constitute	, of said County, my
lawful attorney to collect, and receipt for me in my name, for	or the Pension due me for 192,
through my deceased husband,	, who was on
Pension Roll and paid from	County for 19
Witness my hand this day of	199
Attested before me:	

			2	
Spine, J.A. M., Campbell C. 1922	Application for Penaion Due Deceased Soldier (UNDER ACT 1891) (To be paid his Widow or Dependent Children)	Widow of J. A. Spence of Gempbell County	Date of Death Peb. 264 197 2. Approved and ordered paid, (PV	Ordinary Fill out show in this same the formation. Ordinary Fill out show in full and send the bank to Fension of the fore spiroval before in paying the fore in the foreign the foreign of the foreign of file.
	eby authorize and const		Donate .	, of said County, my
through m	orney to collect, and r	eccipt for me in m		who was on
	oll and paid from	day of		County for 19
		}}	to the state of the state of	
			Y	
after being duly who was duly e of Government of the Local the Loc	before me comes Mrs. 8, sworn, on oath says the hard and was locally full and was down full and in the hard and the hard are the hard are full as wears that she marry of Mountain hard.	at she is the widow () Charley Le paid a Pension of C () Le paid a Pension of C (of J. A. Spenson of J. A. Spenson of J. A. Spenson of Line Spenson County for 102 A. A. Spenson of County for 102 A. Spe	County and unpaid for 1922. County and conductive
(SEAL.)	phere	_ County.	Elizobeth X d	buce (L. S.)
STATE OF	AFFIDA	VIT OF W	TTNESS	
Personally be 27 on oath says that 1724	Mrs Effey al	o obecu d	fuere Luce	, the
of Voy	day of Movement	the State of	corgea	on ·
together, as husban		of his death on the	26 n and that	they were residing
Sworn to and	and and wife at the time, 1922,	this / 2" day o	t Luly	dow, 1922.

jet. This form can be seed by peacedian, or make children where there is no widow.

In The Continuer must, in sees seem continues of marriage is not widow.

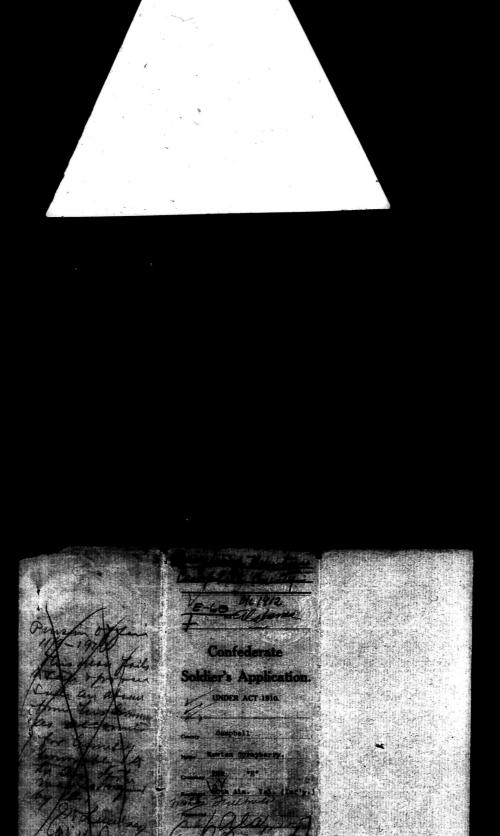
In the Continuer must, in the seem continues of marriage is not widow, the marriage is not proven by without a continuer of the continuer of the continuer of marriage continues in company copies throughout this State, suited on the continuer was due agree of marriage continues in company copies and dependent children and the continuer was due agree of marriage and that it is fully and correctly complete, and the seals and the continuer of t

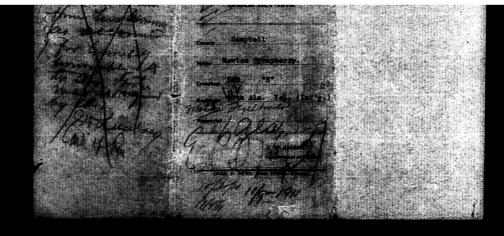
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Or fore the un diray my Ordi. wory person ally cause & A Spence whose of pleastion for Dedique Rus on is herewith presulted, who bring duly sworm deposes and says that the loud even hours in soid of perention more did belong a him; that he opposition any hod a boud for little to dried loud and man pand but fifty dollars on some ; that such paying soil amount he charly sow it is he would wears on other to pay any. trous for his bound for hilla 6other porties thanky losing the Lifty dollars he hat fait on the long and ploning any and all claime his sour hard on the land in the hands of other for the former com of the think in the dois land In one to 4 per horis hed be fore I A Spence M. S. C. Forin, Ordy





	When and to whom was it sold or given to! Require to aus.
	What was the price paid or stated to be paid?
	What relation is the party to applicant?
	What disposition was made of the proceeds of the cale?
	Was the disposition of this property made in good faith and full values? 11
ì	made to obtain a pension?
*	on to and subscribed before me, this the
!	fue forces 1910}
	Out Jorus Ordinary. 19 World Ma
	of law obelle o

STATE OF GEORGIA.

County

1. It I des County

I have four for Pension is Ordinary of said County, certify that I kn the applicant Seco Lou said County. That I also know. they are all residents of said County and were di they are all residents of said County and were di they are all truthful and trustworthy and their a Tax Results of value for tax is in 1908

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer. STATE OF GEORGIA.

8	County
3	
Ý	
ä	for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, wit
Œ	his testimony to make out the same, and after being duly sworn true answers to make to the question
Ž	propounded, answers as follows, to wit:

What is your name and where do you reside? (Give County and Post-office). Newton Spray.
 Earpy. In Campbell county, Ga. P. O. Palmette, Ga., R. 3.

- 2. How long and since when have you been a continuous resident citizen of this State? 30 years, er since 1880.
- 3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yas Sir. In Cs. "E" SCOR Alabama Regit.

 When and where, and in what Company and Regiment did you enlist? (Give the manage class of Service) In "Pall" et 1865, st. Tallsdegg, Ala., In Cs. "E" With Ala Regit of Infantry.

 5. How long did you remain in the actual Military Service with said Company and Regiment? ry. 5. How long did you remain in the actual Military Service with said Company and Regiment?

 (Give date of discharge). A little ever 12 menths, or from "Fall" of '63 to Nov. 1864.
 - When and where was your Company and Regiment surrendered or discharged from the Service?
 Can't say as I was at home on sick furlough, on account of Yellow Pever

b.	When did you leave the Command?	In Nov. 1864	
c.	For what cause did you leave?	Yellow Fever.	

- d. By whose authority did you leave? Board of Physicians.
- e. For how long was your leave granted? In what way? After staying in Hespital 60

days, I was given a 90 days furlength, & later a 60 days furlength, which kept me til after t why did you not return teyour command after leave expired. Mas net soles.

surrender. In what way were you prevented: Xellew Fever. 3 months after war I could not get in the decrepted when the decrepted with the decrepted w

- Were you captured during the war? No. Sir.
- j. If so, when, and where? In what prison were you held and when were you released?
- Requires no entered not need to the state of 10 00
- 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 at all. Had none to dispose of.

 11. What property of any discriptes of any kind, and of any value now owned and in the use possession and control of yourself and wife and its cash value? (Make itemized list). None at all.

I foret wayou	-1100 -
Furu luga	12 5
12. What annual or monthly income or ear	nings of vourself and wife and th

you! Neme. I am blind in 1 eye tetally, and can hardly see with other.

 Are you drawing a pension of any amount from this State or the United Statest. No. Sir.
 Have you ever applied for the Georgia Pension and had it refused? and for what tause it was Yes Sir .---- Under Indigent class, in 1905. Net an aged

New toux Sproybyry Sworn to and subscribed before me, this the Oth day of Sept. 1910. Ordinary,

of Compbell

ORDINARY'S CERTIFICATE. STATE OF GEORGIA. County. County.	Pever while in Confed. service at the your command when it was surrendered or discharged? . P. Sir. F. Rever while in Confed. service at Blackeley, Ale, was sent to Head that he believed the service at Blackeley, Ale, was sent to More was your command when you led it? At Blackeley, Ale, was the service at the confed. Service at the s
1. 24 Alle Lorenty Ordinary of said County, certify that I know the applicant from for Pension is the person he represents himself to be and resides in	b. When did you leave the Command: In Nov. 1854
said County. That I also know.	c. For what cause did you leave? Yellow Pever. d. By whose authority did you leave? Beard of Physicians.
they are all residents of said County and wer dull evern by me before signing the foregoing affideric and they are all truthful and trutsworthy and their assetments are entitled to full raily and credit. That the Tax Results of	e. For how long was your leave granted: In what way? After Straying in Hespital 60 days I was given a 90 days furlengt, & later a 60 days furlength, which kept me til after i. Why did you not return tayour Command after leave expired. Mas. net. able.
value for tax is in 1908 . Lo for 1900 a Lo for 1910 a Lo special water my hand and official seal of office bits. Lo day of 0 L 1910	til after g. In what way were you preyented. Xellew Fever. I months after war I could not get in the short of you make to return Anna. Rai net well enough. i. Were you explured during the war. Me. Sir.
Law Stell	j. If so, when, and where? In what prison were you held and when were you released?
NOTES 1. Before any pusitions are nevered the Ordinary shall severe synthesis and of references in the Delivery of contempts years that you will true assister thank to that possible question said the property of the ordinary years and the property of the ordinary years and property of the ordinary years and property of the ordinary years and property of the ordinary years are not to the ordinary years of the ordinary years are not to the ordinary and carefulfully year. 4. If applicant has no property at all in the possession, use or country of ordinary with publicant property of the ordinary years of the years of the ordinary years of the ordinary years of the ordinary years of the years	9. What property of every discription was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make just by items and value.). None at all
	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 at, all. Had hence to dispose of. 11. What property of any discription of any kind, and of any value now owned and in the use possession and control of yourself and wife and its cash value? (Make itemized list). None at all.
	1 Horaco wayou - 1,0000
	12. What annual or monthly income or earnings of yourself and wife and the source derived have you. Nene, I am Dlind in I eye tetelly, and can hardly see with other. 13. Are you drawing a pension of any amount from this Riste or the United Statest. No. Sir 14. Have you ever applied for the Georgia Pension and had it refused? and for what tause it was
	mot slowed? Yes Sir Under Indigent class, in 1905. "Not an aged man." "Infirmity net satisfagterily shewn.
	Sworn to and subscribed before me, this the 10th, day of Sept. 191 0.
	Ordinary, Or Compbell County.
	A PRINCE AS TO SERVICE
	STATE OF THE PARTY
	Line General dealth for the Company
	of said flate and County is hereby presented as a witness in supers of the application of the flat of the flat of 1810, in said flates, and after being secon true anywer to make it the questions propounded, unswers as follows:
	1. Use to your name and where do you reside: 4111 feet at the
1908? (State it fully by Hema.) Works	The long and since when have you known. Herethere of prosplicing applicant?
When and to whom was it sold or given to! What was the price paid or stated to be paid? What was the price paid or stated to be paid?	Where does he now reside and since when has he been a bounfide, continuing resident in this states and how the yes most. And Transack to Attacking in fraction that the latter than 20 querie to age.
What relation is the party to applicant. What disposition was made of the proceeds of the sale? What disposition was made of the proceeds of the sale?	4. When, where and in what Company and Regiment did Hearthras & prace Hearthfacousiest during var from 1861 to 1888; (Rive date and place) At Jackalaga. Else Wast young 1814 BA
6. Was the disposition of this property made in good faith and full values? 11 At or was it made to obtain a pension? Swon to and subscribed before me, this the 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	To How the year obtain your information of this Service! It at the Reins
h Ju dy of De t 1918 We Robert	8. How long within your own personal knowledge did he perform setual military service with the Company and Regiment . (give date) - The second that the Company and Regiment . (give date) - The second that t
of Care of the Founty.	this Company and Regiment! (give date)
ORDINARY'S CERTIFICATE.	S. Were you percolarly present strike Burrender
STATE OF GEORGIA,	10. Was the applicant personally present with his Command at surrender?
I. M. A. W. Forman Ordinary of said County, certify that I know the applicant for Pension is the person he represents himself to be and resides in	Et iste get Dependent the (Spring brity) Here get & Shepter
said County. That I also prow 0 0 1 the others proming to the	when he held it! Of test Clean at a leave it he leave? A leave that cause did he leave? A leave that the leave it he leave it
service and diverse and service and they are all regidents of service and they are all regident and their atstements are entitled to full fault and service and se	long was be granted leave? County to the How do you know all that you have stated to be true! If of your own knowledge (Tell shearly and specifically)
Sword unfler my hand and official seel of office this	11. In what pay was he prevented from returning to his Command? & Garat Day
A. A. W. Jones Ordinary Care Stell Comme	How do you know! 16. What effort did be make to return to his Command and how do you know?
NOTES 1. Before any questions are answered the Ordinary chall over a policant and fill witnesses in the fellowing word: You do solamnly sweat that you will true answers make to each question asked you and the exidence you Additional addesives what truth; so hely you God. Additional addesives what truth; so hely you God. Additional addesives what truth; so hely you God. If applicant has no property at all in his possession, use or control of self- and wife, addesivits of Free heighters unaccessary.	15. Was applicant explored as a pagener. 222 II so, when and where?
All affidavits must be made before the Ordinary and savided by him. If applicant has no property at all in his possession, use or control of self- and selfs, affidavits of Free holders unnecessary.	Is what prison was he held?and when released?
	Bedra to sad subscribed before me, this the & & B & Summer
	Jusqu'et Bostell of Chan county alchang
	AFFIDAVIT OF TWO FREEHOLDERS.
	SKATE OF GEORGIA
	Particulty before the comme Ra Rotherson & Milson who as outh
	says that they are free holders residing in said County and we know that I have fift of best the the property that is now in the use, possession and counts of himself

12. While did as paragin Community.

Where via his Community when he hat it?

By the authority of the leave?

By whose authority of the leave?

How do you know the traveled to be traveled to the server of the leave?

When type have stated to be trues. He of your own knowledge (Tell clearly and specifically). said County. That I siec know I will be they are all residents of said County and were dull even by me before a they are all truthful and trustuporthy and their atstements are entitled to Tax Results of Said County and their atstements are entitled to shows that value for tax is in 1908 \$ 100 (or 1600 \$ 100) that you have stated to be touch if of your own knowledge (Tell charty and specifically)

Track.

Track. Syppy unflay my hand and official seal of office this 10 m for 1010 s. 150 W. A. U.L. Ordinary O. Ordinary O. NOTES 1. Before any questions are answered the Ordinary Paul Cool.

NOTES 2. Before any questions are answered the Ordinary shall were applicant and all vinesaes in the following.

"You do solomely swear that you will true answer make to sake question asked you and the evidence shall give shall be the whole truth; so help you God."

Additional affective may be attached it stank spaces are familiested.

Additional affective may be attached it stank spaces are familiested.

It applicant has no property at all in his possession, use or control of self and selfs, affidavits of Free his unnecessary. Swam to and subscribed before me this the SMB committee of the day of Artifats 1910. Judge of Protecte of Chaig County alabar AFFIDAVIT OF TWO FREEHOLDERS. rangingly before me come of Afficiency on the Afficiency of the company of the co wife and of its cash value to pair. (Make List by Jissuaraha value y // ny, I say, has been sold or given away by the applicant or his wife since 4 Nov. QUESTIONS FOR APPLICANT. STATE OF GEORGIA, STATE OR GEORGIA,

COUNTY.

CO 5. When and where and in what company and regiment did you enlist or serve?

Company and regiment did you enlist or serve?

Company and regiment?

5. How long did you remain in such company and regiment? Pension effice 9/50/05 let an aged man the extent of his infirmity is pet shown to be such as will prevent him from earning his orn ampart at some kind of labor or calling hise tate the date of furleugh, by whem grant adder how long what cause, and has a seated his from returning to dity with his command before surrender. Preve all this to be true by some one whe of his ern knewledge knews it to be true. The witness submitted knews nothing of whis. 6. When and where was your company and regiment surrepdered and discharged? 7. Were you present with your company and regiment when it was surrendered? **Log**

8. If not present, tatle specifically and clearly where you were, when you left your command, for what same and by whose authority? **The Command of the command INDIGENT PENSION. 190 Name Menton Sprayleing. The say County Tulton. cd. 6. bord ala, Rogt. sees in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and ave you made of same? JOHN W. LINDSEY, 1902, and what disposition, if any, by sale or gift, have you made of same? Commissioner of Pensions. 16. In what County did you reside during they earn, and what property did you then return for taxation?

16. How were you supported during the years 1890, 1900, 1901 and 1902?

17. How much did your support you for each of know years, and what portion slid you contribute thereto by your own labor or income?

18. What was your employment during 1898, 1809, 1901 and 1902? What py did you recorde in each year?

19. Have you a family? It so, who composes such family? Sive their means of support? Have they e homestead, or other property? Their goes and how employed? WARRANT HANDED TO Ordinary will write name of Applicant, Company and Regiment on back as indicated above. 20. Are you receiving any pension? If so, what amount and for what disability?_ 21. Have you ever made an application for pension before? 2. How many applications have you every made and under what class?

Sworn to and subscribed before me this the?

May 1

John Mary 1964.

John Mary 1964.

of Jullien

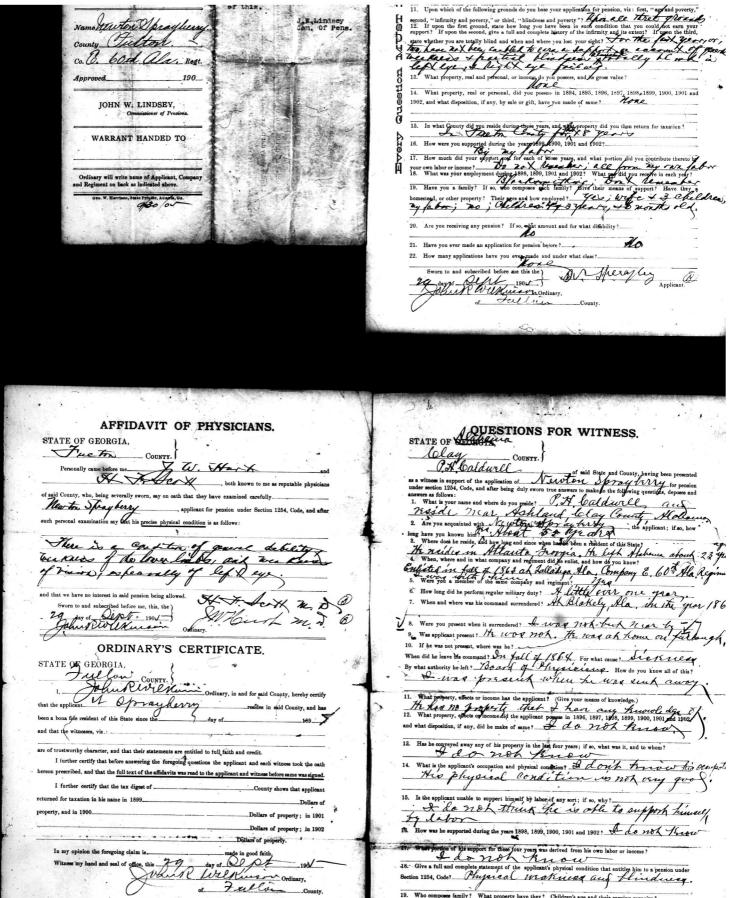
_County

11. If not where was be and her esma him there? Canh Lattery such & She fet, at 12. When the his formy horizing the way his Command?

12. When the his former of his Command?

Where of his Command?

1. If I les County. Ordinary of said County, certify that I know the applicant Free love for Penson is the person he represents himself to be and resides in



1. Defore any questions are answered, the Ordinary shall swear applicant and the witcesses in the following the let truth, so help you God, make to each of the questions saked of you, and the evidence you shall give will be 2. Additional affidavita may be attached if blank spaces are insufficient.

2. In egy one the Ordinary must certify to he house.

God."

Is may be attached if blank spaces are insufficient.

rdinary must certify to the character of the witness, and as to the execution of the pr

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

Algo of Bobote Clay County Alabama

STATE OF GEORGIA, STATE OF GEORGIA, COUNTY,	By what authority be left? To and of Physicians How do you know all of this? Duas present when he was such away.
I, Ordinary, in and for said County, hereby certify	11. What property, effects or income has the applicant? (Give your means of knowledge)
that the applicant resides in eaid County, and has been a bona fide resident of this State since the day of 169	12. What property, offices opinioned did the applicant possess in 1896, 1897, 1908, 1899, 1900, 1801, and 1902 and what disposition, if any, did he make of same?
	13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
are of trustworthy character, and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.	14. What is the applicant's occupation and physical condition? I don't know his dearp His physical Condition is not very good.
I further certify that the tax digest ofCounty shows that applicant	
returned for taxation in his name in 1889Dollars of	15. Is the applicant unable to support himself by labor of any sort; if so, why? A do 31 & Hourk The is ofte to support himself
property, and in 1900 Dollars of property; in 1901	Control Control
Dollars of property; in 1902 Dollars of property.	18. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? A do not Hugu
In my opinion the foregoing claim is made in good faith,	The forego of his support for these four years was derived from his own labor or income?
Witness my hand and seal of office, this and day of Olph 1800	18: Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
of Fully County	
NOTE.	19. Who composes family? What property have they? Children's age and their earning capacity?
Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you food." 2. Additional siftsavie may be statched if blank spaces are insufficient. 3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof	
Additional affidavita may be attached if blank spaces are insufficient. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.	20. What interest have you in the recovery of a pension by this applicant? How whatever
	3rd day of August 190 V
	Help of Bobite
in the second se	cley County Station
	and the state of t
- 1 Cold C	The state of the s
Due Deceased Soldier	Application to learning A
STATE OF GEORGIA Come blo	County
I. Mr. J. Me for un that I personally know Mar. Lauran Spray	Ordinary of said sounty, do certify
that I personally know Why. Laurate Spacy	the applicant, and that she
is the lawful widow of Well Con o fray &	ing
total of said	
of his death on the 20 th day of fare	county for 1912, and at the time
him and unpaid his Pension of Dun where de	1920, there was due to
of Georgie and I many 1 12 Street	Dollars from the State
of Georgia, and I know	the within
	the ory
	Mr. Sille France (SS) Ordinary
	Court bell
	County.
C •	
dren Ge	# # 2 \ \ & A
Due Due	Service 199.
Fion	A SECTION AND A
Sold Sold	The second of th
for P land of the state of the	The state of the s
	Approved App
Application No. 10 to be paid his we willow of Tuch	d d
Paris Co.	d d
Ap Ap	100 of 10
a J	
OBORGIA, County.	
I hereby authorize and constitute	of said county, my
lawful attorney to collect, and receipt for me in my name, for	or the Pension due me for 191, through my de-
ceased husband,	
Penaion Roll and paid from	
Witness my hand thisday ofday	
Attested before me:	

DEORGIA. County I fereby authorize and constitute I fereby authorize and constitute Of said county, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 191, through my deceased husband, who was on Pension Roll and paid from Witness my hand this day of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191 Witness my hand this Jay of County for 191
I hereby authorize and constitute
Pension Roll and paid from
Application for Pension Due Deceased Soldier To Be Faid to His Widow or Dependent Children To Start 2
Application for Pension Due Deceased Soldier To Be Paid to His Widow or Dependent Children Sto No STATE
Application for Pension Due Deceased Soldier To Be Paid to His Widow or Dependent Children Sto No STATE
To Be Paid to His Widow or Dependent Children
To Be Paid to His Widow or Dependent Children
STATE OF GEORGIA, County County
Personally before me comes Mrs. Accura a Stray betty Cowete loft, of soid sounty, after being day sworn, on oath says that she is the widow of Meulton Stray besty
after being duly sworn, on eath says that she is the widow of "Children of front further," who was duly enrolled as a "Settle L" Pensioner from the county
of Campbell and was paid a Pension of Minety (90) -
Dollars from Cauch bell country for 1911, and that the said
the 20 4 day of Larry 1920, and at the time of his death a Pension of 100 00
was due him from the cerepte ch
Applicant further swears that she married the said without Stray berry on the 1/2 day of free 1900 in File low country and
T. Luca
country of the state of many the data of many the state of many th
State of unid resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and also asks the Pension so due and unpaid be paid to her. Sworn to and subscribed before me this L. day of 1920.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Came fall County

Personally before me comes 17. Sary berry who on oath says that he knew Menther Strayberry (he falls) while in life and that he knows.

Mrs. 2012 of fray berry his 32 bellotter)

the above applicant; that he knows that the said Menther is bray berry his 32 bellotter)

and Acusa Stray berry

in the State of tray berry

of Fill to day of June 1900, 12 and that they resided together as husband and wife from date of marriage to the day of his death on the 20 th and any of stray berry his day of seven to gard subscribed before me this 6 th day of the gard of the gard subscribed before me this 6 th day of the gard of the gard subscribed before me this 6 th day of the gard of the gard subscribed before me this 6 th day of the gard of the gard subscribed before me this 6 th day of the gard of the

was due him from Careiphece was due him from Cauch the county and unpaid for 1920, Applicant further sweary that she married the said author Stroy butty on the 17 to day of free 1900 in Feel low county and State of Josepha und resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her. Sworn to and subscribed before me this 6 4 day of May 1920. M. S. Cli Loren Ordinary. Laura Spray herry Court flict. County. AFFIDAVIT OF WITNESS STATE OF GEORGIA, Van pher County Personally before me comes 177. Sorry berry on oath says that he knew Runton Stroy berry (his facture) and that he knows. Mrs. Saura & fray herry his Sah-Morart) the above applicant; that he knows that the said Meers for is fray herry and Yaura Spray berry were in due form of law married in the county of Feel to in the State of Longia on the 14 at day of June , 1900. 18 , and that they resided together as husband and wife from date of marriage to the day of his death on the 20 11 day of of Jacy 1920, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 6 1/2 day of Way 1920. Wisher Foren Ordinary. J. W. Sproglavy County.

Note 1st.—This form can be used by guardian or minor children where there is no widow. 2d.—Ordinary must send in all cases certified copy of marriage attached.

State of alabama County of Clay-Refor me, The undersigned probable hide of said County, This day personally law Clove Hallow ofsaid County, Known to me to be trustworther. and whose statements are entitled to fuce faith and credit and who after having been duly owom, deposes and days that of her our Knowledge She Knows when Revolve Spraybury Cume to him home under furlough a little while before close of the work and dist he was executing visit and ile from disease said to be gellow fever and The Knows that he remained ill and practically helpless at his home until long after close of the wor! that he was never able to return to the service from time he came home until after close of the war. Lignan. blin Hallman Sworn to routs en bed before me this 3th day of Nov. 1911. Judge of Profete

State of Alabama, County of Clay.

Before me, the undersigned Probate Judge of said county, this day personally came Mrs. Mary Thompson, of said county, known to me to be trustworthy, and whose statements are entitled to full faith and credit, and who after having been duly sworn, deposes and says that she (deponent) has been personally acquainted with Mr. Newton Sprayberry, now a resident of Cappbell county, Ga. for fifty years; that he (Newton Sprayberry) came to his home in Talledega Co.Ala. from the War in November 1864 with Yellow Fever; that said Sprayberry continued ill with said disease from that time until after the close of the said War, and that he was never physically able to return to said War, and that for 3 or 4 months after the surreader, he was unable to get in, or out of a door on account of said disease, without having to be helped, or to crawl in or out. I saw his furlough twice extened by the Enrolling Officer.

Mean Many Thompson Fuerer

Sworn to and subscribed before me, this 2/day of Oct. 1910.

Jusque of Probate

that of her our Knowledge She Knows when Newton Spraybury Come to him before close of the word and that he was expecious sick and ile from disease said to be gellow fever and The Knows that he remained ill and practically helpless at his hon until long after close of the work. that he was never able to return to the service from time he came home until after close of the war. Lignan blom Hellman Twom to Bubsen bid before me this 3rd day of Nov. 1911. Judge of Robote

personally acquainted with Mr. Newton Sprayberry, now a resident of Capp bell county, Ga. for fifty years; that he (Newton Sprayberry) came to his home in Talledega Co.Ala. from the War in November 1864 with Yellow Fever; that said Sprayberry continued ill with said disease from that time until after the close of the said War, and that he was never physically able to return to said War, and that for 3 or 4 months after the surrender, he was unable to get in, or out of a door on account of said disease, without having to be helped, or to crawl in or out. I saw his furlough twice extened by the Enrolling Officer. Attest of Sugar (Signed.) Mrs. Mary & Thompson Sworn to and subscribed before me, this 21 day of Oct. 1910.

after having been duly sworn, deposes and says that she (deponent) has been

NAME Sprayberry, Newton

1912

COUNTY

Campbell

WHEEN AND WHERE BORN? Resident of Georgis, 30 years, since 1880.

"NLISTED WHEN AND WHERE? Fall of 1863,- Talledga, Alabama.

RANK

COMPANY AND REGIMENT? Co.E. 62nd. Ala. Regt. Inf.

NAME OF CAPTAIN AND COLONEL?

COUNDED? Had yellow fever while in Confed. Service at Blakeley, Ala., sent to Hospital at Mobile, Ala., then sent home, furlough extended twice, by Enrolling Officer. Left Command Nov. 1864, authority of Board of Physicians Never able for further service during the war.

RELEASED.

WHEN AND WHERE SURRENDERED? 1865, Blakely, Alabama. The Command surrender-

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? At home, on furlough. Left Command Nov.1864, by order of Board of Physicians on account of illness.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. S.M. Bunn ,-- In Service with applicant Same Command --

No data.

Court of Ordinary

Fulton County

STATE OF GEORGIA

CERTIFIED COPY OF

MARRIAGE LICENSE

CERTIFICATE OF MARRIAGE

Newton & praybring

Laura Caffee

Those Siffine

**CUNDED? Had yellow fever while in Confed. Service at Blakeley, Ala., sent to Hospital at Mobile, Ala., then sent home, furlough extended twice, by Barciling Officer. Left Command Nov. 1864, authority of Board of Physicians Newer able for further service during the war. PELEASED. WHEN AND WHERE SURRENDERED? 1865, Blakely, Alabama. The Command surrender IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? At home, on furlough. Left Command Nov. 1864, by order of Board of Physicians on account of illness. DIED, WHEN AND WHERE? Those Seffices BURIED, WITNESSES. S.M. Bunn ,-- In Service with applicant Same Command -mh. MARRIAGE LICENSE ria-Fulton County. udge of the Superior Court, Instice of the Peace, or other Berson e hereby authorized and permitted to join in the honorable state of Matrimony h. hurton Spran and Miss Laura lesse ws of this State; and for so doing this shall be your sufficient License. Hulfrey Ordinary. Laura State of Georgia, ATLANTA, OA., Sty 25 Bulton County. , arthur a mestut. newton Spray Lerry Laura le offer my official Signature and Seal of the Court of Ordinary, axem personent Clerk Court of Ordinary.

The state of Matrimony to Levelar Spraying and Miss Saura Laffer According to the Rites of your Church, provided there be no levial cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License. RETURN THIS LICENSE. WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR, RECORD Oliven under my Hand and Seal this G. Aday of June 1980. The Aday of June 1980, by me. Share of General Record of Continuity. Share of General Record of Continuity. ATLANTA, OA., Boy 25 1922 ATLANTA, OA., Bo	The same of the same	pel, Judge of the Superior Court, Justice of the Peace, or other Person et.
and Miss Lave Coffee According to the Rites of your Charch, provided there be no lewful cause to obstruct the same, eccording to the Constitution and Lave of this State; and for so doing this aball be your sufficient License. RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD Given under my it and and Seel this. J. J	You are hereby	authorized and hormitted to isin in the hon-
According to the Rites of your Church, provided there be no lewful cause to obstruct the same, eccording to the Constitution and Laws of this State; and for so doing this aball be your sufficient License. RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON. TO MY OFFICE FOR RECORD Oliven under my Hand and Seel this. J. J	anable state of M	Action h 2015 16
According to the Rices of your Church, provided there be no lewful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License. RETURN THIS LICENSE. WITH YOUR CERTIFICATE THEREON. TO MY OFFICE FOR RECORD Oliven under my Hand and Seel this. J. J	1 Min Co	Controlled to Jacob the Spering
Constitution and Laws of this State; and for so doing this shall be your sufficient License. RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON. TO MY OFFICE FOR RECORD Oliven under my Hand and Seel this. J. J	According to the River of your	Character provided there have been lawful course to obstance the same according to the
Oiven under my Hand and Seel this		
I hereby certify that Rentire Spragury and Laura coffee were joined together in the HOLY BANS OF MATRIMONY on the 17" day of Janua 19 D.O., by me. State of Georgia, Sultan County. ATLANTA, OA., Bly 75. 19 22. Clerk Cours of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of Rentire Spray firmy and Laura Coffee as the same appears of record in this office. Oliven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.	RETURN THIS LICEN	SE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD
I hereby certify that Newton Spraying and Laura Office were joined together in the HOLY BANS OF NATRINONY on the	Oiven under my Hand	and Seel this 9 gay of time 1900
and Soura Coffee were joined together in the HOLY BANS OF MATRIMONY on the 17" day of July 19.00, by me. State of Generals, Bulton County. ATLANTA, OA., Phy 25 19.22 i Arthur Deflut Goeth Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of Plenton Spring Kruy and Laura Coffee as the same appears of record in this office. Oiven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		
State of Georgia, Sultan County. Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Narriage License and Certificate of Marriage of Court of Ordinary functions of the Spring functions of the same appears of record in this office. Oliven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		
State of Georgia, Sultan County. ATLANTA, OA., By 25 19.22 Clerk Court of Ordinary of said County, hereby certify ithat the foregoing is a true copy of the Marriage License and Certificate of Marriage of Mental Spring ferry and Laura Couffe. Oliven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		
State of Generals, Julian County. ATLANTA, OA., Siz 25 19 22 Gerk Cours of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of Mentin Spring First and Lauran of Ifte. Oliven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		
International ATLANTA, OA., Poly 21 1920. i. ATLANTA, OA., Poly 22 1920. i. ATLANTA, OA., Po	0	ms.
Internal County. ATLANTA, O.A., Siz 25	State of Chenrois	ORDINARY'S OFFICE
in the foregoing is a true copy of the Marriage License and Certificate of Marriage of Plentin Spring King and Lauran of fice. Oiven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of Rewish Spring formy and Aura Gyfe as the same appears of record in this office. Oiven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		1+
and Lawren Coffice. as the same appears of record in this office. Oiven under my official Signature and Scal of the Court of Ordinary, the day and year aforesaid.		
as the same appears of record in this office. Oiven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		
Oiven under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.		
the day and year aforesaid.		
Clerk Court of Ordinary.		
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In order to avoid unnecessary delays to applicants, and to enable all partice interested to understand payment granting interested in sidered soldiers, as well as the rules adopted by the Governor toolking the pure granting interested to payment granting interested and the soldiers, as well as the rules adopted by the Governor toolking the facilities.

1. It as applicant is divising suggestions are administed to a payment granting the carefully and fully set familities and payments and physicians are administed as the service, at all and carefully safed bisory of the disease about the given, training the disability test the service, at all and carefully staked 2. The in windows most industry of the disability test in the service and the servicing the disability and the service and the service and described where the service and the service and administration to the clause of the As in reference to be arm or leg but the limb must for all purposes by "substantially and resemble passed,"

There is no qualification to the clause of the As in reference to be arm or leg but the limb must for all purposes by "substantially and resemble passed,"

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The Ordinate of the service was a service of the country of the residence of the applicant. The Ordinate of any other will not be received in any case of the country of the residence of the payments and applicants to those points.

APPLICATION FOR ALLOWANCE Acretely from body hyper Applicant, Horsef Stacks County Conceptage 10 Amount - 50 Amount - 50

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Applicant John Streets Date of Warrant May 3/

amendments are added to any of the affidavits, the and the proofs must show that the amendments ha of the applicant

substantially useless for ordinary reference to the arm or leg, but t

of life, etc."
must for all

construction of the Act, and the y pursuits t the limb eription of the wound should be carefully and fully set y a pain statement of facts showing the catent of the assecontmented in the service, a full and carefully stated lashility by positive proofs to the service, teg, unless the arm or leg has been rendered substantially teg, unless the arm or leg has been rendered substantially

NOTES

In order to avoid unnecessary delays to applicants, and to enable all parties interested to unless granting allowances to disabled soldiers, as well as the rules adopted by the Governor tour wents provided, the following suggestions are submitted.

1. If an applicant has been wounded, the description of the wound should be carefully and thy applicant and physicians, and tollowed by a plain statement of facts showing the existability. If applicant claims disability from disease contracted in the service, a full and careful tory of the disease should be given, training the disability by positive proofs to the service.

2. The law makes no allowance for an arm or a leg, unless the arm or leg has been rendered subt

2. The law makes no allowance for an arm or a leg, unless the arm or leg has been rendered a constituity used assets of the control of the

ments must be made under outh before an officer, and the passis must show that the amendments have been duly sworn to. Every application must be certified by the Ordinary of the country of the residence of the applicant for 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 physician and applicants to these points.

For Use of Applicants Who Have not Heretofore Drawn.

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

STATE	OF	GEORGIA,	
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Daniball

PERSONALLY appears John J. Hacks 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 since the

day of October 18.28; that he enlisted in the military service of the Confederate States (or of the State of Company & of locations) during the war between the States, and served as a Sargent in Company & of 64 th Regiment of Georgia. Volunteers localities is Brigade; that whilst engaged in such military service, at the battle of The Corolla at Northern in the State of Lie grand, on the 30 day of July would as follows: he were long drown after a Chorp and a last the thirty service and a last the way wounded as follows: he were long drown after a Chorp and a last the last

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me it bonneed & street one on any right from and dislocated the right their occurs while I wir in line of duty or a tollowin and during conver us such said wound has according one forestelly encompetent to perform the ordering manual avocations of life, aspend and plan

Deponent desires to participate in the benefits of the Act, approved October 24, 1857. and the Act amendatory thereof, approved December 24, 1888, and makes application for the allowance to which he is entitled for the year thereunder ending October 26, 1889. Sworn to and subscribed before me, this the

John I Stacks day of Meany R.C. Beavers, Cordina Note:—State fully nature of wound or character of disease which can the disability.

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

Fulton

State of Georgia, who, being duly sworn, says that he was Commissioned officer in Company 2, of Regiment of Georgea.

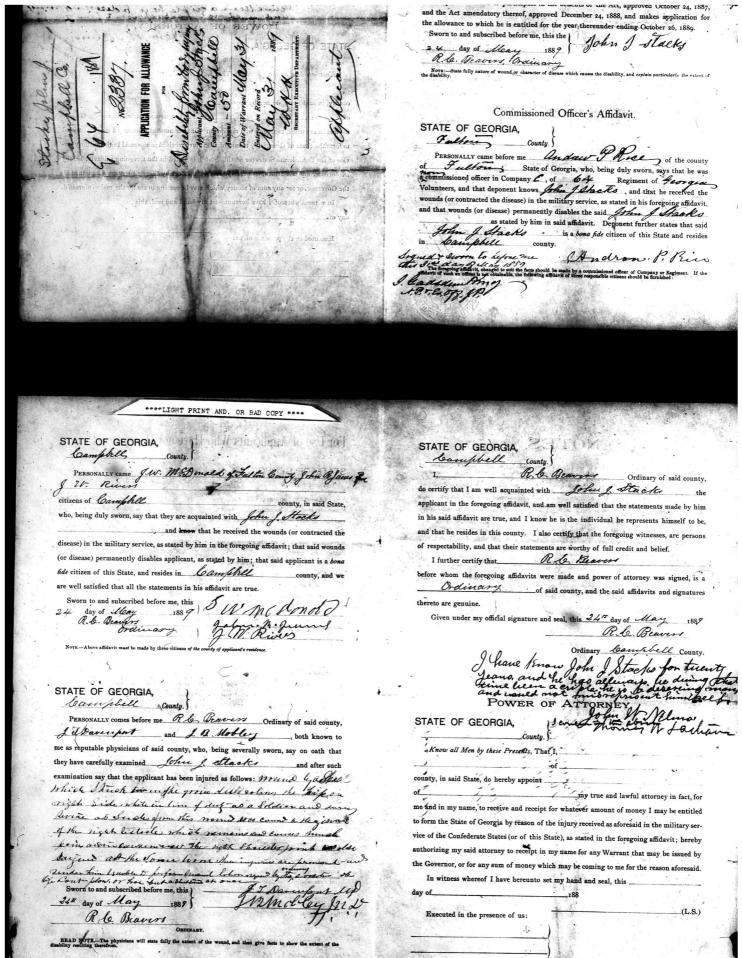
Volunteers, and that deponent knows fall fall that is, and that he received the

wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said John & Shacks

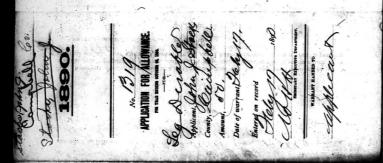
as stated by him in said affidavit. Deponent further states that said John of Stacks is a bona fide citizen of this State and resides

county.

Cou CAndrow P. Rico



PERSONALLY comes before me R. D. Devers Ordinary of said county, I Deversport and J. B. Mobiley, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Solve f. Stacks and after such examination say that the applicant has been injured as follows: Brench by applied which I brick I been sufficient for a sufficient of the sight Side which in land of duty as a stateless and survey device as Survey of the right latele which remains the count a king made of the right latele which remains and country through the source of the source of the survey of the sur	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, me and in my name, to receive and receipt for whatever amount of money I may be entity to form the State of Georgia by reason of the injury received as aforesaid in the militarys vice of the Confederate States (or of this State), as stated in the foregoing affidavit; here authorizing my said attorney to receipt in my name for any Warrant that may be issued the Governor, or for any sum of money which may be coming to me for the reason aforesa. In witness whereof I have hereunto set my hand and seal, this day of 188
R. G. Bravers DEDITARY. READ NOTE—The physicians will state fully the axiont of the wound, and then give facts to show the extent of the disability resulting therefore.	Executed in the presence of us:
STATE OF GEORGIA, Campibell County. 1. R. Beauty do certify that I am well acquainted with John J. Haels the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I further certify that R. B. Beauty before whom the foregoing affidavits were made and power of attorney was signed, is a Ordinary of said county, and the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this 13th day of February 1890. R. b. Beautys Ordinary County.	STATE OF GEORGIA, County. I. O. 6. Decoration Ordinary of said County of certify, that I am well acquainted with form of to the care that the statements made by his in the said affairt are true, and that he is disabled, to the extent he claims, and I know he the individual he represents himself to be, and that he resides in this County. I further certify that O.
APPLATION FOR ALLOWING. AND ALLOWING. APPLATION FOR ALLOWING. APPLAT	Application for Allowance The Test of Allowance The Application of Allowance The Application for Allowance The Application for Allowance The Application for Allowance The Application of Allowance The Application for Allowance American of Allowance American for
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For Applicants Freetefare Allowed Pensions state of Georgia.

Application for Allowance

STATE OF CHARAC.

For Applicants Recent of a Allower From Front

Por Applicants refetolore Allowed Pensions.
STATE OF GEORGIA
[
County.
PERSONALLY appears John & Stacks of Bampbell 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 24 th day of
October 1822; that he enlisted in the military service of the Con-
federate States (or of the State of Serger) during the war between the
States, and served as a Wargault in Company 6, of 64 th Regiment
of Georgia Volunteers Wright 's Brigade; that whilst engaged
in such military service, at the battle of Beleraburg in the State
of Virginia on the 30th day of July 1864, he was
wounded as follows: Hit by ashell in right graine
dislocating the right hip causing the
Leg Practially useless
All life and a second s
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
of 3 4 4 1
Sworn to and subscribed before me, this the
13" day of Fiberway 1890 Jehn J- stacks
R. b. Blavers, Ordinary
Note.—State fully nature of wound or character of disease which causes the disability, and explain perticularly the extent of the disability.
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POWER OF ATTORNEY.
STATE OF GEORGIA
}
County.
KNOW ALL MEN BY THESE PRESENTS, That I,
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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
hereby authorizing my said attorney to receipt in my name for any warrant that may be issued by the Governor, or tor any sum of money which may be coming to me for the reason
aforesaids we start in the start of the star
the pet cetter of nave herennto set my hand and seal, this
day of up any and the service out patricely to be and than he resides to the control of
Executed in the presence of us:
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and the fact that the real area to tell with the

P.O.

County, Georgia.

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For Applicants Heretofo	re Allowed Pe	neinne
STATE OF GEORGIA,	.o mionou i	MOIUHO.
PERSONALLY appears John &	took of loc	upbell
County, State of Georgia, who, being duly sworn,	ays on oath that he is a d	ona fide citizen and
resident of said State, and has resided therein continuate of oclober 1829, that he	uously ever since the	24
i that he	enlisted in the military s	ervice of the Con-
federate States (or of the State of States, and served as a	during t	ne war between the
States, and served as a Vrecory	in Company 6, of	64 th Regiment
Total total teers		that whilst engaged
		in the State
of Virguis , on the 30 wounded as follows: Phot by shell ,	_day of truly	186 4; he was
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recous his les they	int, which	wound
voless & which are	ible Al	tessection
him moble to perla	the age	1 treuders
Tierre O lite	n the order	uong over
Jan Jan		
Deponent desires to participate in the benefi and the acts amendatory thereof, and makes applica for the year ending October 26, 1891. I have herete		
Sworn to and subscribed before me, this, the	John J d	
K.6. Gravers Ordinas	~/ .	
NOTE.—State fully nature of wound or character of disease which the disability, resulting from the wound or disease.	causes the disability, and explain	harticularly the extent of
POWER OF A	ITORNEY.	
County.)		
Know all Men by these Presents, That	I,	
of County	, State of Georgia, de	hereby appoint
of		
me and in my name, to receive and receipt for what to from the State of Georgia by reason of the injury of the Confederate States (or of this State), as stated ing my said attorney to receipt in my name for any to nor, or for any sum of money which may be coming	received as aforesaid in the foregoing affidavit Varrant that may be issue to me for the reason afor	I may be entitled the military service ; hereby authoriz- ed by the Gover-
IN WITNESS WHEREON I have he	reunto set my hand	and seal, this
day of	1891.	
		[L. s.]
Executed in the presence of us:		*
2007		

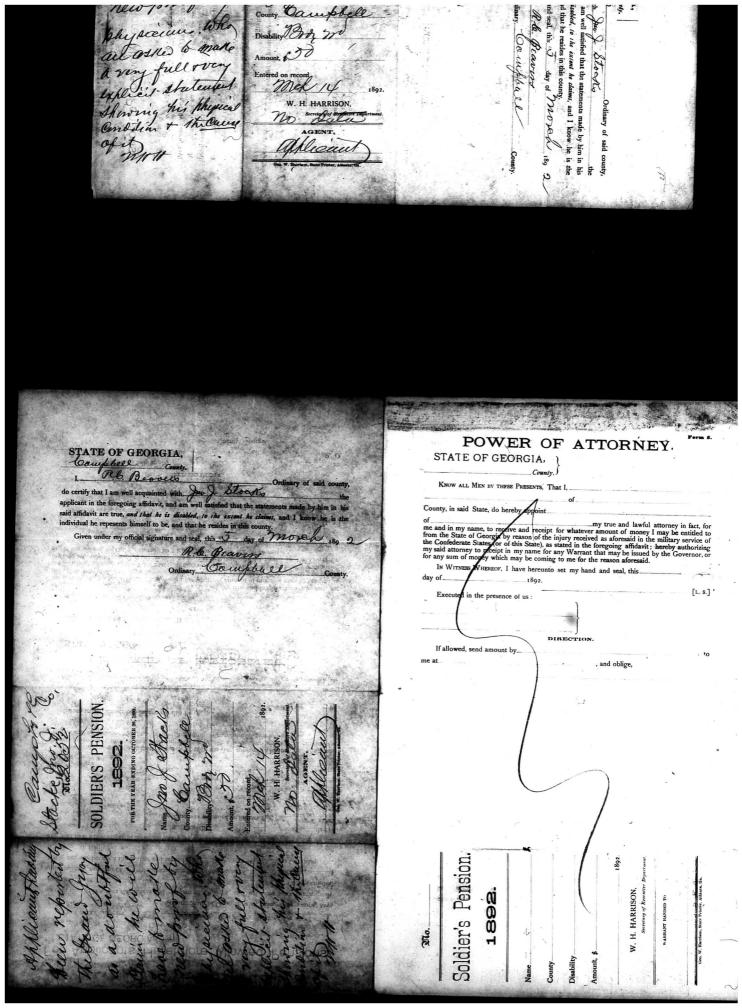
County, Georgia.

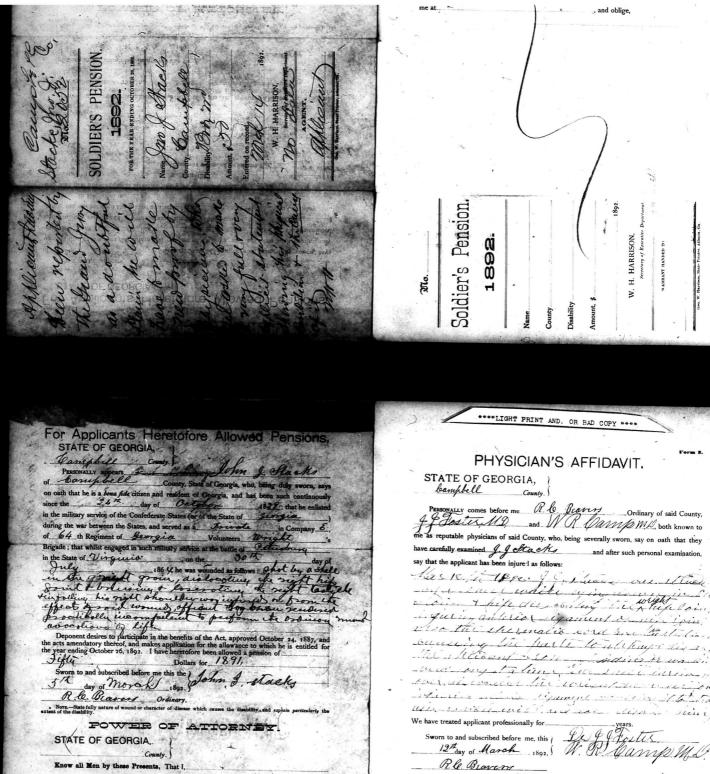
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in such military service, at the battle of retersburg in the State of Virguia, on the 30th day of fully 1864, he was wounded as follows: Att by adduell in right graine	of Storgia Volunteers Whight 's Brigade: that whilst engaged
day of the 1864, he was	in such military service at the battle of telephoney in the Same
wounded as tollows: It's agranted in right growne	of Virgues on the 30 day of Tall
Leg Practicity walled Causing the	wounded as follows. That by Shell in right or
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Mark the second	tions of life.
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,	
	Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
of 1 1 12	
entitled for the rear cuding Ogtober 26, 1890. I have heretofore been allowed a pension of Sworn to and subscribed before me, this the	for the year ending October 20, 1891. I have heretofore been allowed a pension of
Sworn to and subscribed before me, this the	
Rh Bicco of Coling	Sworn to and subscribed before me, this, the
R. b. Maury, Ordinary. Nor. State fully nature of wound or character of disease which causes the disability, and explain farticularly the extent of the disability.	Sworn to and subscribed before me, this, the
the disability.	16 day of February 1891. John of tacky
POWER OF ATTORNEY.	Norz. 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.
	the disability, resulting from the wound or disease.
STATE OF GEORGIA	POWER OF ATTORNEY.
County,	
KNOW ALL MEN BY THESE PRESENTS, That I,	STATE OF GEORGIA,
Organia of .	County.
county, in said State, do hereby appoint	Know all Men by these Presents, That I,
	ofCounty, State of Georgia, do hereby appoint
me and in my name, to receive and receipt for what ever amount of money I may be estilled	appoint
to from the State of Georgia by reason of the injury received as aforesaid in the military	of my true and lawful attorney in fact, for
service of the Confederate States (or of this State), as stated in the foregoing affidavit;	me and in my name, to receive and receipt for whatever amount of money I may be entitled
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 teason	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 authoriz-
IN WITNESS WHEDEOF I have and bower of strouter are strings in a	ing my said attorney to receipt in my name for any Warrant that may be issued by the Govern
Agoreacides the course of the second of the course of the	nor, or for any sum of money which may be coming to me for the reason aforesaid
of it the advictory assure in the property of the advice to the property of th	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
Executed in the presence of us:	day of1891.
and determined the large of the state of the	[L. S.]
ed man per i k i rete.	Executed in the presence of us:
DIRECTION.	
Send money to me as follows, by	DIRECTION.
P.O.	Send money to me as follows, by
County, Georgia.	toP. O.
	County, Georgia.
The second secon	
[20] - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	
	56. Chair. 171 4 1 1

Applicant has de SOLDIER'S PENSION. W. H. HARRISON,

individual he repesents himself to be, and that he resides in this county applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he it disabled, to the extent he claims; and I know he is the do certify that I am well acquainted with, STATE OF GEORGIA, Given under my official signature and seal, this J Mb. Beaver Ordinary of said county,

in the State 186 4; he was oin ais-wound torenders uong over





County, in said State, do hereby appoint

Send money to me as follows, by

of me and in my name, to receive and receipt for whatever amount of money I may be entid from the State of Georgia by reason of the injury received as aforesaid in the military serve the Confederate States (or of this State), as stated in the foregoing affidewet; hereby author my said attorney to receipt in my name for any Warrant that may be issued by the Gow 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

Ordinary of soil county

_P. O.

OTE 2.—If claim is for disability resulting from disease, state how the disease is known to tate how long physicians have known and treated applicant. STATE OF GEORGIA, Ordinary of said County, do certify that I am well acquainted with applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this County. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief. Given under my official signature and seal, this

Ordinary____

In the State of Computer 1 was mining up as the state of	STATE OF GEORGIA. County, in aid State, do hereby appoint of continued in the presence of the highest of the military service of the County, in aid State, do hereby appoint of the County, in aid State, do hereby appoint of the County in aid State, do hereby appoint of the County in aid State, do hereby appoint of County	STATE OF GEORGIA. County, in aid State, do hereby appoint of one and in my same, to receive and receipt for whatever successed in the military service of the County, in aid State, do hereby appoint of one and in my same, to receive and receipt for whatever successed in the military service of the County, in aid State, do hereby appoint of the County in aid State, do hereby appoint of the County in aid State, do hereby appoint of the County in aid State, do hereby appoint of the County in aid State, do hereby appoint of the County is made to the county of the state of th	STATE OF GEORGIA. County, in aid State, do hereby appoint of control in the presence of the higher state of the higher state of the control of the Confidence States (or of the State), as a storage of the mining provide of the Confidence States (or of the State), as a storage of the mining provide of the Confidence States (or of the State), as a storage of the mining provide of the Confidence States (or of the State), as a storage of the mining provide of the Confidence States (or of the State), as a storage of the mining provide of the Confidence States (or of the State), as a storage of the mining provide of the Confidence States (or of the State), as a storage of the confidence state (or of the State), as a storage of the Confidence States (or of the State), as a storage of the Confidence States (or of the State), as a storage of the Confidence States (or of the State), as a storage of the Confidence States (or of the State), as a storage of the Confidence States (or of the State), as a storage of the Confidence States (or of the State), as a storage of the Confidence States (or of the State), as a storage of the Confidence States (or of the State), as a storage of the State S	of 64 th Regiment of Groupia Volunteers Wright 's Brigade; that whilst engaged in such military service at the battle of Charactery	me as reputable physicians of said County, who, being severally sworn, say on oath that they have carefully examined I I often extended
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Soron to and subscribed before me this the day of March 1892. Regularized control of diseases the case of the	Soron to and subscribed before me this the day of March 1892. Regularized control of diseases the case of the	Soron to and subscribed before me this the day of Month. 1892. Recomply attended to word or chances of draws which assume the tisability, and replace personnels the states of the disability. **Row all Men by these Presents, That I. **County, in said State, do hereby appoint. **O. **County, in said State, do hereby appoint. **O.	Soron to and subscribed before me this the day of Month. 1892. All Classes. Ordinary. None-manuful attent of word ordinary. STATE OF GEORGIA. County. Row all Men by these Presents, That I. County, in said State, do hereby appoint. Of. County, in said State, do hereby appoint. Of. Outscribed before me, this Physicians all state fully the extent of the woord, and then give hers to so who the extent of the disability resulting the state of Georgia by reason of the signify received as a doctors of this State), as stated in the foregoing affidavit: hereby emborizing or for any state of money but have been stated by the Governor. IN WITNESS WHEREOF, have hereunto ext my hand and seal this. All and any of the state of Georgia by the seal of the statements and any statement of the statements made by him in his said affidavit are true, and he is disabled, as a the claim, and I know he is the individual he represents are persons of respectability, and that their statements are worthy of full credit and belief. County, Send money to me as follows, by County, Georgiai.	the year ending October 26, 1892. I have heretofore been allowed a pension of	Me Allicant selle indices is waring
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No. DIG

Application for Allowance

Por the Your liang dense 24, 1893.

FOR

By Sy Hund

Applicans, Star Josephin,

County, Caregory

Amount, 50

Date of Warrant,

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For Applicants Heretofore Allow	ed Pensions
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County, State of Georgia, who, being duly sworn, says on oath tha	t he is a bona fide citizen and
resident of said State, and has resided therein continuously ever sin	ce the 24
day of salther 1829; that he enlisted in the	military service of the Con-
federate States (or of the State of Georgian	during the war between the
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said affidavit are true, and V	W 1988 C T 1985	· · · · · · · · · · · · · · · · · · ·	
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POWER OF ATTORNEY.

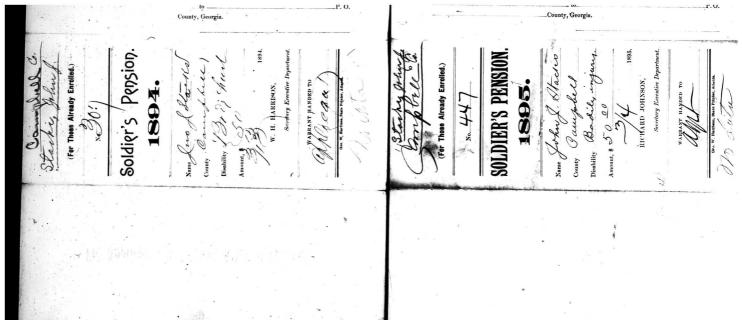
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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA. Campbell county. PERSONALLY appears In & Stocked of Compbell County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen day of State, and has resided therein continuously ever since the 24 has 1829; that he enlisted in the military service of the Confederate States (or of the State of the Confederate States, and served as a in Company E, of 64th Regiment of the Volunteers of the State of the Sta and resident of said State, and has resided therein continuously ever since the 44 day of 1829; that he enlisted in the military service of the Co such military service at the battle of Glow up at the look in in the State of Va on the do day of July 1864, he was wounded as follows: I was a trueth by a shell, while in article in Stoke of Va in year 1864, in the right grown hundred in year 1864, while in the right grown hundred in the Anomary and a disclose a language to the form of the order of the mening me practically weefit for mound lober 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 dollars, for the year 189 dollars, for the year 189 3 Sworm to and subscribed before me, this, the day of Morek 1894.

R. C. Bravers Ordy

STATE OF GEORGIA, County. do certify that I am well acquainted with force & States and 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 March 1894.

R. C. Bravers Ordinary Campbell County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, personally appears John J. Haires 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 Lyth day of October 1829; that he enlisted in the military service of the Confederate States (or of the State of Reorgy) during the war between the States, and served as a hierate in Company & of 64th Regiment of thory Volunteers, thoughto 's Brigade; that whilst engaged in such military service at the battle of Patendary in the State of Uniquency on the 30th day of July 1864; he was wounded as follows: I was struck by a scheel since the said marking my night Dected and Involving me down districting my upth Shoulden the effects of Bail wound Maken the effects of Bails wound Maken the effects of Bails wound Maken the support of Walnamers

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STATE OF GEORGIA, County.

P. C. Bearers I, Ordinary of said County, do certify that I am well acquainted with John J. Maries the applicant in the foregoing affidavit, and an 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 13 Th day of Much 1895.

R. C. Beurers Ordinary Causphell County.

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 dollars, for the year 189 Sworn to and subscribed before me, this, the dollars, for the year 189 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. STATE OF GEORGIA, Connection County. I, C. Brance County. I, C. Brance County. I, C. Brance County. I, C. Brance County. Gordinary of said County. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this day of March 1894. A. B. Brance County. Ordinary Caunfalur County.	Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of dollars, for the year 189. Sworn to and subscribed before me, this, the Sworn to and subscribed before me, this, the John Jacky 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. STATE OF GEORGIA, County. I, P. P. Particology do certify that I am well acquainted with John J. Markey do certify that I am well acquainted with John J. Markey the applicant in the foregoing affidavit, and a fix 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 / 3 The day of Markey Ordinary Outphall County. Ordinary Ocumphall County.
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SOLDIER'S PENSION 1. SOLDIER'S PENSION 1. SOLDIER'S PENSION 1. SOLDIER'S PENSION 1. SOLUTION County Coun	Starky from J. Complete Already Enrolled.) No. 102.3 INVALID SOLDIER'S PENSION. 1880.7 County Disability C. P. C. C. C. Amount, s. C. C. C. County RICHARD JOHNSON, Commissions of Presion. WARAAFT HANDED FO MACH. Contractions of Presion.
SOI Name County Amount	Name Name

SOLDIER'S PENSIO 1897. 9681 For Applicants Heretofore Allowed Pensions. For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, STATE OF GEORGIA, Complete County. Dersonally appears J. J. Stacks of Compbeel -Dersonally appears John & Stacke of County, State of Georgia who being duly sworn, says on oath that he is a bona fide citizen 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 1825; that he enlisted in the military service of the Confederate States (or of the State of during the war between the States, and served as a day of 1825; that he enlisted in Company E, of 6 th Regiment of Volunteers, he was wounded, in States, and served as a day of listen military service in the State of on the day of the state of the company E, of 6 th Regiment of the state of the service of the States of the said of the state o 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 alfated day of Olovell 1824; that he enlisted in the military service of the Con-1824; that he enlisted in the military service of the Cons, and served as a in Company D, of the Regiment in such military service in the State of Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is and the acts amendatory thereof, and makes application for the pension to which he is and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of county been allowed an invalid pension of Dollars, for the year 1890.

Sworn to and subscribed before me, this, the Jolen J. Stacky.

Sworn to and subscribed before me, this, the Jolen J. Stacky.

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. entitled for the year ending October 26th, 1896. I have heretofore as a resident of Lamphil county been allowed a pension of Lifty (1800) dollars, for the year 1895 . Sworn to and subscribed before me, this, the Aman Jacks R & BEWW Ordinary R. L. Braver STATE OF GEORGIA, STATE OF GEORGIA, Complete County. County. I, Ordinary of said County, do certify that I am well acquainted with the do certify that I am well acquainted with John J. Jacks applicant in the foregoing affidavit, and am well satisfied that the statements made applicant in the foregoing affidaving 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 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 Given under my official signature and seal, this_day of_Runnary_1896. your seal here. Ordinary Complete County.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory theseof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of County been allowed a pension of dollars, for the year 1890. Sworn to and subscribed before me, this, the Act of	Deponent desires to participate in the benefits of the Act, approved October 24th 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 1899. Sworn to and subscribed before me, this, the John Jacky day of 1897. POST OFFICE Rank County of the diashility, resulting from the wound or character of disease which causes the diashility, and explain particularly the extent of the diashility, resulting from the wound or disease. STATE OF GEORGIA, County. I, Questify that I am well acquainted with 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 1897. Ordinary County. County. County.
POWER OF ATTORNEY. STATE OF GEORGIA, County. I. hereby authorize of to receive and receipt for the pension paid hereon and request that he remit same to by at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1898. [L. s.]	POWER OF ATTORNEY. STATE OF ORGIA, County. I. hereby authorize of to receive and receipt for the pension paid hereon and request that he remit same to by at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of [L. S.] Executed in presence of
Solubier, Juhn. J. Solubier, Sphn. J. INVALID Solubier, Spenting ISBS. Name K. Stacker County County Amount, & Stacker Bisability C. J. Proceed Amount, & Stacker County Countsing County Countsing County Cou	Stacker, John J. Campbell Co. Campbell Co. Sold No. 2669 INVALID SOLDIER'S PENSION * 1889 Name Lehn J. Stacks County Lebner J. Stacks Name Lehn J. Stacks Name Lehn J. Stacks Name Lehn J. Stacks County Lebner J. Stacks Amount, \$ 50 Amount, \$ 60 County Counties Institute County Counties Institute Amount, \$ 50 Amount, \$ 60 Amount, \$ 6

SOLDIER'S PENSIO SOLDIER'S PENSI RICHARD JOHNSON, 1899. For Applicants Heretofore Allowed Pensions. For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, County. STATE OF GEORGIA. personally appears f. f. Stacks of Course for be ce County, State of Georgia, who being duly sworn, says on oath that he is a tona fide citizen damphelf _ County. Personally appears L. Stacks of Jean feel 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 24 and resident of said State, and has resided therein continuously ever since the 4 day of 0 2 1821; that he enlisted in the military service of the Confederate States (or of the State of day) during the war between the States, and served as a volunteers, of 4 Volunteers, of 8 Brigade; that whilst engaged in such military service in the State of day and resident of said State, and has resided therein continuously ever since the 24 day of Getoher 1829; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Sayant in Company. G of 4th Regiment of Gloryia. Volunteers, Wrights 's Brigade; that whilst engaged in such military service in the State of 12th on the 30 day in such military service in the State of "Ma , on the 30 day of feely 1864, he was wounded, injured or diseased as follows: I woo & here of by a bounding carrier boll of the Blow up" of Return bury, the three & hilling was an right grown, ear othery right to bed!

River category any right hip one of Knockling and on arright should then feet, Inching and on arright should der spraining the society only on occount of soil would be or received, Some was the bear a support in such military service in the State of Na , on the 30 day of July 1864, he was wounded, injured or diseased as follows:

Att crater or blow up ator mor peters bury has a shell bounded after striving the ground ros B injury hite my the right ground wis location my right hip and breaking the leaders in the grown making, my taking it between, them me ten fut on my right shoulder and stramme it so I am not able to work for a lumb of ramme, it so I am to the form the personent makes application for the pension to which he is entitled for the year ending October 28th, 1899. I have heretofore under said law as a resident of Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a county been allowed an invalid pension of Dollars, for the year 189 7. ing October 26th, 1899. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 1898. Sworn to and subscribed before me, this, the Sahan & Stacks

The day of Leby 1898. POST-OFFICE The of Carlo Sworn to and subscribed before me, this, the John of Stacks

3 day of January 1899. POST OFFICE And On H.

List Link of wond or character of disease which causes the disability, and explain particularly the tot the disability resulting from the wound or character of disease. 15 the day of Fe by A. & Fewers, Ordy Nore-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent STATE OF GEORGIA, STATE OF GEORGIA. I, R. C. Beaux deamphelf County. I, A. C. Be our to Ordinary of said County, do certify that I am well acquainted with fig. Stacks the sapplicant in the foregoing affidavit, and am well satisfied that the statements made by him & J. Stephens I. J. S. Lephens Ordinary of said County, do certify that I am well acquainted with John J. Stucks the applicant in the foregoing affidavit, and ani 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. in his said affidavit are true, and know he is the individual he represents himself to be Given under my official signature and seal, this 15- in and that he resides in this County. 1898 Given under my official signature and seal, this 30 day of Junuary 1899 J. Stephens Ordinary Campbell R. C. Bravers Ordinary Come for bece

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a county been allowed an invalid pension of county been allowed an invalid pension of Dollars, for the year 189 . Sworn to and subscribed before me, this, the Many of Law of Law of the disability, medical pension perticularly the extent of the disability, medical from the wound or character of disease which causes the disability, and explosis perticularly the extent of the disability, medical from the wound or disease. STATE OF GEORGIA, County. I, Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this Many of Tuby, 1898. Alo Baurry County. Ordinary County.	not sufe to work for a living ADD look to the State of Ground and Spranming it SOD and Not sufe to work for a living ADD look to the State of Ground and Spranming and Spranming of Sobolism Supplied to the pension to which he is entitled for the year ending October 20th, 1899. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 1893. Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this, the John of Stateky Sworn to and subscribed before me, this work of the subscribed before me, this which causes the disability, and explain particularly the extent of the disability, and explain particularly the extent of the disability, and explain particularly the extent of the disability and explain particularly the extent of the disability, and explain particularly the extent of the disability and
Ordinary County.	Ordinary lamphell county.
POWER OF ATTORNEY. STATE OF GEORGIA, County. L, bereby authorize of to receive and receipt for the pension paid hereon and request that he remit same to by at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1900. [L. S.] Executed in presence of	POWER OF ATTORNEY. STATE OF GEORGIA, Compline County. In I Stock hereby authorize from J. Local County of Complete Coda to receive and receipt for the pension paid hereon and request that he remit same to by Complete Coda IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of Jorry 1901. Executed in presence of HE. Sticysland M.S. W. Sorin, Only
1 1	

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

SOLDIER'S PENSION.	Name A Alacks County Alacks County Algorithm Algorithm Amount, 8 272 Warrant issued 77-44 9 1900. JOHN W. LINDSEY, Commission of Pancieu. WARRART BAKDED TO WA	Alachy & J. Countelle Countelle Countelle Co. Cook acquor we and the Those Aireay Enrilled.)	SOLDIER'S PENSION. 1901. Name of Stocks County County Stock	Amount, \$ 50 PLE 1801. JOHN W. LINDSEY. Committees of Parism. WARRANT BARDED TO PLEAS OF BATTERING, ARREST. THE A. BATTERING, ARREST.

For Applicants Heretofora Allowed Pensions.

For Annlicants Heretofore Allowed Pensions

STATE OF GEORG	TA .			
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dampbell	County.			
personally appears			Campo	
County, State of Georgia,	who being duly sw	orn, says on oath	that he is a bon	a fide citizen
and resident of said State a	nd County, and h	as resided thereir	continuouely a	war since the
_ Z 4 day of 4 ch	ner 182	L; that he enlis	ted in the milita	ary service of
the Confederate States (or o	of the State of	,		the war be-
tween the States, and serve	as a sorge	nt	in Company	056114
Regiment of Guorge	Volunteers	Man wrig	Mo 's Brigade	: that whilst
engaged in such military se	rvice in the Stat	e of Na		e 30
day of July	1864, he was	wounded, injured	or diseased as fo	ollows ·
at the blow	who atory	lar leter	Sour No	V.a Shell
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Just 11	y right	mouldera	end ofra	my itso
I um notables	o work for	aliving	notable	to work on
Deponent makes appli	cation for the p	ension to which	he is entitled	for the war
ending October 26th, 190	0. I have her	etofore under s	said law as a	resident of
- Teampbell	Co	unty been allow	red an invalid	pension of
Jufty \$5000	Dolla	ars, for the year 1	89 4	pension of
Sworn to and subscribe	d before me, this,	the) // //	alto olas	,
23 day of Fel		900. POST OFFIC	worth De of 6	ak, oga
h w of	0_		E /44.41	un, oga
J. Huphe	ns=Ordi	nary		
EXTE.—State fully the nature of a	wound or character of d	sease which causes the	disability, and explain	particularly the
and the same of th				
STATE OF GEORGIA	A,)	•		
Mamphell	County.			
1 1	0111			•
I,	Drephis	is	Ordinary of s	aid County,
do certify that I am well acq		J. J. Mai	0/28	the
applicant in the foregoing aff	davit, and am we	Il satisfied that th	he statements m	ade by him
in his said athdavit are true,	and I know he is	the individual h	e represents his	mself to be
and that he resides in this Co	ounty.			
Give	n under my offi	cial signature and	seal this 2	2 3
	February			-
your day or	Jun wall	A A	,	
		y Whil	Lines	

Ordinary Hampbell

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Personally appears & Store 1/2 of Comp fee	
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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 Oel 1829; 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 strong in Company E, of 6 th Regiment	
of Younteers, 2 regles 's Brigade; that whilst engaged	
in such military service in the State of Ja, on the Jo day	,
of 186 4, he was wounded, injured or diseased as follows:	
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Deponent makes application for the pension to which he is entitled for year end-	
ng October 26th, 1901. I have heretofore under said law as a resident of	
County been allowed an invalid pension of	
Dollars, for the year 1909 Luis	
Sworn to and subscribed before me, this the	_
day of Joney 1901. Postoffice Red Ook ly	
Mr. S. Lee Gr. 10 1. Postomee 24 00 1	9
1. en dorus Tog	
Nora.—State fully the nature of the wound or character of disease which causes the disability, and explain partic- larly the extent of the disability resulting from the wound or disease.	
STATE OF GEORGIA,	
County.	
J. S. Lue Loren Ordinary of said County,	
o certify that I am well assembled with	
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	
and that he resides in this County.	
The state of the s	
Given under my official signature and seal, this	
day of 1901	
m. S. W. Jones	
@ //·	
GE GEORGIV Ordinary County.	

Production of the state of the	to cora d Duffort.
Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1990. I have heretofore under said law as a resident of	Deponent makes application for the pension to which he is entitled for year end-
County been allowed an invalid pension of	ing October 26th, 1901. I have heretofore under said law as a resident of
Dollars, for the year 1894. Sworn to and subscribed before me, this, the	County been allowed an invalid pension of Dollars, for the year 1909
23 day of Hernary 1900. POST OFFICE Pred Jake, of a	Sworn to and subscribed before me, this the
	day of Joury 1901. Postoffice Red Ootle G
ASTUPLING = Ordinaly **RoreState fully the nature of wound or character of disease which causes the disability, and explain perticularly the attent of the disability resulting from the wound or disease.	M.S. he Lover Gody
	Nors.—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,	STATE OF GEORGIA,
deamphell County.	Complete and
I, J. Stephens Ordinary of said County, do certify that I am well acquainted with J. Stacks the	J. S Lee Lord Ordinary of said County, do certify that I am well acquinted with J. Stocks the
	do certify that I am well acquinted with & Stoe 125 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	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.	and that he resides in this County.
Given under my official signature and seal, this 23	Given under my official signature and seal, this
day of Behruary 1800.	day of 1901.
2 Staphens	mm Will down
Ordinary Hampbell County.	OR CEOKELY Ordinary Composer County.
	POWER OF ATTORNEY.
P. ATTS DF ACTOLMEY.	
The state of the s	
POWER OF ATTORNEY	POWER OF APPROPRIES
STATE OF GROUNTS	POWER OF ATTORNEY.
Care place County County	STATE OF GEORGIA,
I loke f. Stocks	County.
I, folie f. Stocks hereby authorize lessel & Suddette of Compseed to the	bereby authorize for the pension paid hereon and request that he remit same to
to receive and receipt for the pension paid hereon and request that he remit same to	of Complete o La
cure	in the same to
at leveren and me of some plants of more	f by how
IN WITNESS WHEREOF, I have hereunto set my hand and seal this	at
day of 1902	IN WITNESS WHEREOF, I have hereunto set my hand and seal this
John & dacks to	day of Joney 1903.
Executed in presence of	[L. s.]
A. Su Lorice, Ordy	Executed in presence of
	Olym Horam My
	10.
1905 P P P P P P P P P P P P P P P P P P P	2 12 E
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Personalty appeals	
	Branch Branch
County.)	County
STATE OF GEORGIA,	
[20] [20] [20] [20] [20] [20] [20] [20]	STATE OF GEORGIA.
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.	STATE OF GRORGIA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

SCHOLDIER'S PENSION

TOTAL PHONE

COON METERAL END

SOLDIER'S PENSION

TOOLS

Name force of the county

Coo F Regiment of March

Coo F Regiment of March

Mannelly Coo of March

Amount, S. L. O. O.

JOHN W. LINDSEY,

Commission of Protein.

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JOHN W. LINDSEY,

Commission of Protein.

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County.)

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

Stackes J.J. (John J.)
Stacks
Campbell Caunty
Connection of County

Name
DISABLED

SOLDIER'S PENSION

LAOOB.

Name
County
Co. X & Regiment & Y

Manout, \$ (4) 1908

JOHN W. LINDSEY,

JOHN W. LI

STATE OF GEORGIA.

FOR APPLICANTS HERETAFORE ALLOWED PENSIONS

and the second second		
	F GEORGIA,	
Course	plece County.	
100	John I Stocks . C. When	
	appears of Care par	
County, State of and resident of s	Georgia, who being duly sworn, says on oath that he is a bona fide citizen aid State, and has resided therein continuously ever since the 25	
lay of@e	1829; that he enlisted in the military service of the Con-	
ederate States (e	or of the State of La) during the war between the	
states, and serve		
1 - 4 -	Volunteers, Wright 's Brigade; that whilst engaged	
n such military	service in the State of , on the , on the day	
1. In	186 , he was wounded, injured or diseased as follows:	
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Deponent m	akes application for the pension to which he is entitled for the year	
nding October	26th, 1902. I have heretofore, under said law, as a resident of	
(" a	County, been allowed an invalid pension of	
- Fi	Dollars, for the year 1901.	
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Sworn to and	subscribed before me, this the John J stacks	
/ / " da	subscribed before me, this the John & stacks	
2. S. Hee	subscribed before me, this the John of stacky you for 1902 Post-office Red Ook, La	
2. S. Hee	subscribed before me, this the John I stacks	
Norz-State full	subscribed before me, this the John J stacky y of 1902. Post-office Red Corl, Lee y of the nature of the wound of character of disease which causes the disability resulting from the wound or disease.	
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Norre-State full ricularly the extent of	subscribed before me, this the John of stacks 1902 Post-office Red Coll, Gar y the nature of the wound of character of disease which causes the disability, and czploin of the disability resulting from the wound or disease. County.	
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North State full for the state of the state	subscribed before me, this the John J stacky by of 1902 Post-office Red Oon, La y of Lovely y the nature of the wound of character of disease which causes the disability, and exploin of the disability resulting from the wound of disease. GEORGIA, GEORGIA, Ordinary of said County, am well acquainted with John L. Stock R. ordinary of said County, am well acquainted with John L. Stock R. didavit are true, and I know he is the individual he represents himself to ides in this County.	ż
North State full State	subscribed before me, this the John J stacky by of 1902 Post-office Red Cont, Law y of the disability resulting from the wound or disease which causes the disability, and explain GEORGIA, Grant County. Sheet County. Ordinary of said County, am well acquainted with John J. Stack or ordinary of said County, are oregoing affidavit, and am well satisfied that the statements made by didavit are true, and I know he is the individual he represents himself to ides in this County. Given under my official signature and seal, this	
North State full State	subscribed before me, this the John J stacky yof 1902 Post-office Red Cont, Lee you the nature of the would of character of disease which causes the disability resulting from the wound or disease. GEORGIA, County. Ordinary of said County, am well acquainted with folia for the flow of the disability and explain ordinary of said County, am well acquainted with folia for the foregoing affidavit, and am well satisfied that the statements made by didavit are true, and I know he is the individual he represents himself to ides in this County. Given under my official signature and seal, this 1 for the day of 1902	*
North State full State	subscribed before me, this the John J stacky by of 1902 Post-office Red Cont, Law y of the disability resulting from the wound or disease which causes the disability, and explain GEORGIA, Grant County. Sheet County. Ordinary of said County, am well acquainted with John J. Stack or ordinary of said County, are oregoing affidavit, and am well satisfied that the statements made by didavit are true, and I know he is the individual he represents himself to ides in this County. Given under my official signature and seal, this	ż

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County,
Personally appears & Stocks of Complete
county, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
nd resident of said State, and has resided therein continuously ever since the
ay of
derate States (or of the State of
tates, and served as a broy dean in Company of the West Regiment
f Ju Volunteers, Hay let 's Brigade: that whilst appeared
such military service in the State of The on the 20 day
186 4, he was wounded, injured or diseased as follows:
I show at " crotes" - Pole to
July 30, 1864 - 2, wing
my let showever Know 16 in som
out of place .
On account y dril wow II a
and the last of th
The an mand won
Deponent makes application for the pension to which he is entitled for the year
nding October 26th, 1903, I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1902.
Sworn to and subscribed before me, this the
day of 1903. Post-office Ray Com
Mr. S. Me Lorie, Ording
Norz. State fully the nature of the wound or character of disease which causes the disability, and explain
pricularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA.
Complete County.
h line P
I, Ordinary of said County,
certify that I am well acquainted with
e applicant in the foregoing affidavit, and am well satisfied that the statements made by
m in his said affidavit are true, and I know he is the individual he represents himself to
and that he resides in this County.
Given under my official signature and seal, this
day of 1908.
Tally M. S. M. Lorin
and here Ordinary Com pour County.
Nora.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1903.
POWER OF ATTORNEY

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 John Jouly Market Gay of 1902. Post-office Red Cort, Such State fully the nature of the wound of character of disease which causes the disability, and crylorin particularly the extent of the disability resulting from the wound of disease. STATE OF GEORGIA, County. County. Ordinary of said County, do certify that I am well acquainted with John John Market Given under my official signature and seal, this day of 1902. Given under my official signature and seal, this day of 1902. Ordinary County. Ordinary County. County. Nore.—Fill all blanks and of Company and Regiment. Ordinary County. Nore.—Fill all blanks and of Company and Regiment. Nore.—All rouchers and afficient must bear date after January 1, 1902. Nore.—All rouchers and afficient must bear date after January 1, 1902.	Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1902. Sworn to and subscribed before me, this the day of 1903. Post-office Nora.—State folly 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.
POWER OF ATTORNEY. STATE OF GEORGIA, Gourphic County. Low Gourphic County. In Witness, Whereof, I have hereunto set my hand and seal, this In Witness, Whereof, I have hereunto set my hand and seal, this Executed in presence of M. Mur Jone Ordy	POWER OF ATTORNEY. STATE OF GEORGIA, County but County. Lessel find during of County but of the pension paid hereon, and request that he remit same to by at. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13 and 1905. Executed in the presence of M. Sur Sorium, Order
(FOR THOSE ALREADY ENROLLED.) (FOR THOSE ALREADY ENROLLED.) Name ALREADY ENROLLED. 1900.	FOR THOSE ALREADY ENROLLED, No. 44CV No. 44CV Nome ALIERD PENSION 1905. Name Amount, S. 9 9 9 9 10 10 10 10 10 10 10 10 10 10 10 10 10
STATE OF GEORGIA. County. Personally appears County and the best and	

FOR APPLACANTS HERETOFORE ALLOWED PENSIONS.

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SOLDIER'S PENSION

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SOLDIER'S PENSION

Name And Amount, & LOOA

NAREANT HANDED TO

COUNTY COM SECTION OF COUNTY

COUNTY COM SECTION OF COUNTY

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SOLDIER'S PENSION

NO. 464

NO. 46

COURT

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

	Analysis in Sec.				
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run	AFFLIUA	HIS HEREII	IPHKK ALLA	IWKI) PKNS	JANKS.

Personally appears 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 last, and has resided therein continuously ever since the day of last, and has resided therein continuously ever since the day of last, and has resided therein continuously ever since the day of last, and has resided therein continuously ever since the day of last, and has resided therein continuously ever since the day of last, and last he military service of the Conductor of the State of last whilst engaged in such military service in the State of last whilst engaged in such military service in the State of last last last was wounded, injured or diseased as follows: 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 day of last last last 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 last last 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 last last 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 last 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 last 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 last 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 pension to which he is entitled for the year ending of the year 1903. Sworn to and subscribed before me, this	STATE OF	GEORGIA,		
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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 2 day 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 2 day of Georgia and continuously ever since the 2 day of Georgia and served as a solution of the general continuously ever since the 2 day of Georgia and served as a solution of Georgia and such military service in the State of Georgia and States, and served as a Solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and served as a solution of Georgia and States, and service of the service of the service of the service of the service of Georgia and County, and certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of Given under my official signature and seal, this of Given under my official signature and seal, this of Given under my official signature and seal, this of Given under my official signature and seal, this of Given under my official signature and seal, this of Given under my official signature and seal, this of Given under my official signature and seal, this of Given under my official signature and seal, this of Given	.0	0.00	- N	1 11
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Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1994. I have heretofore under said law, as a resident of Country, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904. The day of	and resident of said	State, and has resided th	erein continuously	ever since the 2 ×
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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 day of 1904. Post-office which causes the disability, and explain particularly the actual of the wound or character of disease which causes the disability, and explain the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904. Norz.—Fill all blanks and of Company and Regiment.	01		yak 's Brig	gade; that whilst engaged
Deponent makes application for the pension to which he is entitled for the year ending October, 26th, 1994. I have heretofore under said law, as a resident of Country, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904. Post-office Lad Corl of Post-office Lad Corl of Syra-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, Country, Go certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this Country. Given under my official signature and seal, this day of 1904. Ordinary Country and Regiment. Norz-Fill all blanks and of Company and Regiment.	U	/	Va	
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 day of 1904. Post-office Law County Post-office Post-o	of of the	186 , he	was wounded, injure	ed or diseased as follows:
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 day of 1904. Post-office Law County Post-office Post-o	John	e sheell	me me	right yroun
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904. Post-office Led Corl & Post-of	cousin	- min & Je	re + an	sloc a la
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904. Post-office Lad Oorl J. 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. Ordinary Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County.	my al	teefer, free	slang le	eder in
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904. Post-office Lad Oorl J. 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. Ordinary Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County.	liven	in yroin	, and oal	ming night
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County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904. Post-office Lad Oorl J. 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. Ordinary Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County.	for ord	m on he	our al	lovor
County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904. Post-office Lad Oorl J. 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. Ordinary Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County. Ordinary Ordinary of Said County.				
Post-office Post-o	Sworn to and	subscribed before me, this		ear 1903.
STATE OF GEORGIA, I, W. Gounty. I, W. Gounty. I, Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904. Ordinary Gounty More-Fill all blanks and of Company and Regiment.	n	Fried Of) 0 ()	Red Ook Je
I, Jr. S. Lu J. Ordinary of said County, do certify that I am well acquainted with	Norn.—State fully particularly the extent of	the nature of the wound or chi he disability resulting from the w	aracter of disease which cound or disease	auses the disability, and explain
I, Jr. S. Lu J. Ordinary of said County, do certify that I am well acquainted with	STATE OF	GEORGIA)		
I, M. Liu J. Ordinary of said County, do certify that I am well acquainted with	lown,	A /		
the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904. ARR. Ordinary O O Ordinary O Ordinary And Regiment.	2-0	County.		
do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of 1904 Ordinary O Worker-Fill all blanks and of Company and Regiment.	I, //.	s. in I	0	Ordinary of said County
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	do certify that I am	well acquainted with _	1.1	
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	the applicant in the	foregoing affidavit, and	am well satisfied th	at the statements made
Given under my official signature and seal, this day of 1904. All of the resides in this County. Ordinary. Nore.—Fill all blanks and of Company and Regiment.	by him in his said a	fidavit are true, and I kno	w he is the individu	nal he represents himself
Given under my official signature and seal, this day of 1904. S. U. J. Ordinary Company and Regiment. Nove.—Fill all blanks and of Company and Regiment.	to be, and that he re	sides in this County.	ar is the ibuiling	
day of 1904. M. J. W. Jorney. Ordinary. Come of the Scenty. Nore.—Fill all blanks and of Company and Regiment.			ture and seal this	9 -
Ordinary Come of bull Sentity. Nore.—Fill all blanks and of Company and Regiment.		V		
Note.—Fill all blanks and of Company and Regiment.	~~~	0	72 / 1	
Note.—Fill all blanks and of Company and Regiment.	your Seal		17.10.00	or or
Nore.—Fill all blanks and of Company and Regiment. Nore.—All vouchers and affidavits must bear date after January 1, 1904.	bore.	Ord	inary Com	- dellounty.
Note.—All vouchers and affidavits must bear date after January 1, 1904.	market of a few	Note.—Fill all blanks an	d of Company and Regime	nt.
		NoteAll vouchers and	affidavits must bear date	after January 1, 1904.

Campbell COUNTY.	
Personally appears I Stacko	Baue plea
County, State of Georgia, who, being duly sworn, says on oath that h	ne is a bona fide citizen
and resident of said State, and has resided therein continuously ever day of	

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

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 2 had of 182 f; that he enlisted in the military service of the Confederate States (or of the State of 1 during the war between the States, and served as a stylent in Company "E", of 6 h th Regiment of fa Volunteers hangle he was brigade; that whilst engaged in such military service in the State of Va , on the JO day of 186 h, he was wounded, injured or diseased as follows:

I would have the fact of the fa

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 Dollars, for the year 1904.

Sworn to and subscribed before me, this the 1 of Stacks

1 stacks

M Sue Lorun, Oray

Post-office New Oork ya

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

STATE OF GEORGIA.
STATE OF GEORGIA,
1 h Suc forin

STATE OF GEORGIA.

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

to be, and that he resides in this County.

Given under my ficial signature and seal, this / 3 ture

day of 1805.

day of Joseph 1995.

N. Sille Lorin

Ordinary Count phere Count

Note: -Fili all blanks and of Company and Regiment.

ending October 28th, 1994. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of ending October 26th, 1905. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1904. County, been allowed an invalid pension of _Dollars, for the year 1903. Sworn to and subscribed before me, this the day of 1904.

A sure of the wound or character of disease which causes the disability, and explainly the extent of the disability resulting from the wound or disease. Sworn to and subscribed before me, this the 199 stacks 19 th day of Joney 1905. Post-office Red Ook Le W. Suc Lorin, Ordy Post-office Ned Ooth & a Nore.—State fully the nature of the wound or character of disease which causes the disability, and explain cularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, STATE OF GEORGIA, COUNTY. S I, M. Sur Lorur J. Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. 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 Given under my afficial signature and seal, this / 3 tue day of 1995. day of h. I le Lorie M. S. un Affix your Beat here. Ordinary Campbeel County. NOTE.—Fill all blanks and of Company and Regiment.

NOTE.—All vouchers and affidavits must bear date after January 1, 1904. Note.—Fill all blanks and of Company and Regiment.

Note.—All vouchers and affidavits must bear date after January 1, 1906. LER OF LITIORNEY. POWER OF ATTORNEY. Gamphin POWER OF ATTORNEY. of Red ook ya to receive and receipt for the pension paid hereon, and request that he remit same to receipt for the pension paid hereon, and request that he IN WITNESS WHEREOF, I have hereunto set my hand and seal, this_ find Loc IN WITNESS WHEREOF, I have hereunto set my hand and seal, this Executed in the presence of II stack nother Loring Only [L. S.] Executed in presence of M. S. lu form, Ordy FOR THOSE ALREADY ENROLLED.) DISABLED **JIER'S PEI** LINDSEY

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FOR APPLICANTS

Deponent makes application for the pension to which he is entitled for the year

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Deponent makes application for the pension to which he is entitled for the year

JOHN W. LINDSEY LUMBO Standar FOR APPLICANTS HERETOFORE ALLOWED PENSIONS FOR APPLICANTS HERETOFORE ALLOWED PENSIONS State of Georgia. State of Georgia, Personally appears John Latonk of Complete County. Personally appears I I Stacks of 6 amplece 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 2 4 and resident of said State, and has resided therein continuously ever since the 24 day of Ocl 1829; that he enlisted in the military service of the Conday of 1821; that he enlisted in the military service of the Confederate States, (or of the State of 1821; the company of the war between the States, and served as a served a federate States (or of the State of the State of the States, and served as a volunteers range of the Wolunteers range of the W Volunteers nright 's Brigade; that whilst engaged va in such military service in the State of _ ___, on the__3 0 ___, on the 3 0 va in such military service in the State of____ 186 4, he was wounded, injured or diseased as follows: 186#, he was wounded, injured or diseased as follows: here of the stilling the ground, 2 or 3 ground, It I have It was in my my het a bounded and hit we in the right y my night himp, and grain, distocat to, mosting right to wick it it right the time on of good we I am on the for ording on one - grow + au fit for and way we have at hos Cobor Deponent makes application for the pension to which he is entitled for the year Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1907. I have heretofore, under said law, as a resident of

County, been allowed an invalid pension of

Dollars, for the very 1908 ending October 26th, 1906. I have heretofore, under said law, as a resident of Dollars, for the year 1906. _Dollars, for the year 1905. Sworn to and subscribed before me, this the Sworp to and subscribed before me, this the life of the stock II stacks day of Joney 1907. Post-Office Ray Or 1906. 7 furforin . Grely Norz.—State fully the nature of the wound or character of disease which causes the disability, and exploit furly the extent of the disability resulting from the wound or disease. Note.—State fully the nature of the wound or character of disease larly the extent of the disability resulting from the wound or disease. State of Georgia, State of Georgia, County.) I, W. J. Coordinary of said County do certify that I am well acquainted with fine applicant in the foregoing affidavit, and am well satisfied that the statements made Ordinary of said County, John do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself 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. to be, and that he resides in this County. Given under my official signature and seal, this

Nors.—Fill all blanks and of Company and Regiment.
Nors.—All vouchers and affidavits must bear date after January 1st, 1906.

1906. h. S. un

Ordinary Courf County.

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your seal here

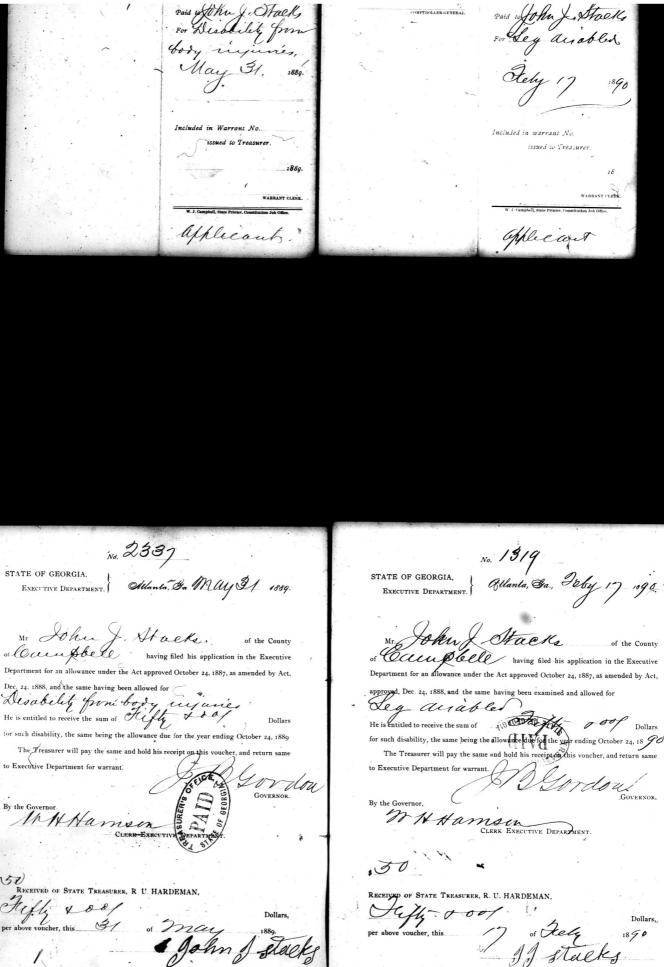
Affix your seal

Mr. S. lee Loon

Ordinary Courf beel County.

Norz.—Fill all blanks and of Company and Regiment.
Norz.—All vouchers and affidavits must bear date after January 1st, 1937.

federate States, (or of the State of States, and served as a work of Wolunteers, in such military service in the State of 1862 Jack My by control of the State of 1862 Jack My by control of the State of 1862 Jack My by control of the State of 1862 Jack My by control of the State of 1862 Jack My by control of the State of 1862 Deponent makes application ending October 26th, 1906. I have been supplied to the Swort to and subscribed before the state of the Swort to and subscribed before the state of the s	The was wounded, injured or diseased as follow the was a resident with the pension to which he is entitled for the year heretofore, under said law, as a resident which county, been allowed an invalid pension Dollars, for the year 1905. The me, this the post-Office Red Cook of the way the disability, and the way the disability and the way the disability.	States, and served as a long of your Vole in such military service in the distribution of the long of	in company E, of the Regiment anteers of the State of the
do certify that I am well acquain the applicant in the foregoing aff by him in his said affidavit are tru to be, and that he resides in this C. Given under my of day of	ordinary of said Courty. Ordinary of said Courty davit, and am well satisfied that the statements me, and I know he is the individual he represents him	do certify that I am well ace the applicant in the foregoin by him in his said affidavit a to be, and that he resides in Given under day of	County. Ordinary of said County, quainted with folia for the statements made g affidavit, and am well satisfied that the statements made are true, and I know he is the individual he represents himself
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		, -	naving filed his application in the Executive	
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The Treasurer will pay the same and hold his receipt on this vouc	cher, and return same	The Treasurer will pay the same and hold	d his receipt on this voucher, and return same	
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	Paid to folin y, Stock,
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: 25,	John of steely 1891.
	WARRANT-CLERK.
	Geo. W. Harrison. Rate Printer, Alfania.
,	applicant.
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STATE OF GEO	
Executive D	Allanda, Ga. Delly 19 1891.
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	allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1	1888 and Nov. 11, 1889, and the same having been examined and allowed for
He is entitled to rec	() () () () () () () () () ()
	ne same being the allowance due for the year ending October 24, 1891. will pay the same and hold his receipt on this voucher and return same to
Executive Departme	ent for warrant.
	WITH DE CONTRACT
By the Governor.	GOVERNOR.
By the Governor.	GOVERNOR.
By the Governor.	W Harreson, Secy Executive Department.
9n.	SECY EXECUTIVE DEPARTMENT.
RECEIVED OF R. U. H	ARDEMAN, Treasurer of the State of Georgia.
RECEIVED OF R. U. H	ARDEMAN, Treasurer of the State of Georgia.

Allanta, Ba Helig 19 STATE OF GEORGIA, EXECUTIVE DEPARTMENT. 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 He is entitled to receive the sum of Juffly a for such disability, the same being the allowance due for the year ending October 24, 1891. The Treasurer will pay the same and hold his receipt on this voucher and return same to cutive Department for warrant. Executive Department for warrant. By the Governor DRN Harreson Secv Executive Department. \$50 RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia. Sifly 1001 _Dollars, per above voucher, this 17 of Deely John of Stacks

No. JUIU

Thirties not not an analysis of the state of

	Name Sarah M. Stacks Soldier Husbage's Name H. T. Cook	
	Company "B" Regiment 27th Ga. Vol. Name of Last Husband J. J. Stacks.	
	Approved i. W. LINDSEY, Commissioner of resilies. Chas. P. Byrd. State Printer, Atlanta.	
Entered Roster affice	9/23/1913	
ORDINARY'S CERTIFICA STATE OF GEORGIA. County.	ATE.	Widow's AffidavitWho Lost Husband-Killed Daring War and Afterwards Married, now a Widow.
am ordinary of said County and do certify the applicant for Pension and that I know that she is the person that she re is a bona fide continuing resident of said county, and waron the stid of That I also know. J. C. Ohambers, 1914 of the same of Husband, and I also know. W. H. Wallker and whom I know to county, that all of said persons were duly sworn by me before signing: the are truthful and trustworthy persons and their statements are envisionable to the said of the	presents herself to be, and that she ye of November, 1998. Rubband's marriage, and the death be resident and free-holder of said heir respective affidavits and that	Personally before me comes Set of the Stank of said county who after being sworn on oath easy that she became the lawful wife of the on the day of the law of the day of the law of the result of analysis residently law of the man on the law of
of Campbell County	day of Sep. 191 3.	in line of duty on the day of list and died as the result of assigning researed will be a first of the same of leaving this applicant, his widow. That on the day of list as was married to first of leaving the applicant, his widow. County, and that on the day of list o
team for not yourtiens are asserted the Ordinary shall swear applicant a You do solemnily swear that you will trea anamab to each of the questions give will be the whole truth. So help you God." 2. Add infinite an affactive may be attached if blank space? Fin issufficient, a finite with the state of the country of the rest and the state of	dence of the person to be sworn. time of duty before 26 April 1865, since by some who know it, or by general	Horses or mules Hogs and cows and other stock money, notes, ste. actual income and savings
		SCHEDULE B. That since the 4 of November, 1908 or the death of her husband, she has sold or given away the following property of the cash value. As follows.
		and that the proceeds were disposed of.
· ·		That she is now in the use, possession and control of the following property at the cash value attached Line acres of land of the cash value. Horses and cown of the cash value. Bogs and other stock Cotton and other farm Producis, worth.
	•	and that the valuation of all of said property, is stated strict true cash value. Soften to and subscribed to by me this for day of Mary 1913. What the company of the co
		Affidavit of the Witness to the Service and Death of Soldier Hasband and Her Marriage. STATE OF GEORGIA,
		Personally before me come of the who after being duly awars on eath says that he know who were the control of t
	JE	while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.

	Total value bollowy
	and that the proceeds were disposed of
	9
	SCHEDULE C;
	That she is now in the use, possession and control of the following property at the cash value attached
	scree of land of the cash value. Horses and cows of the cash value.
	Hogs and other stock
	Cotton and other farm Products, worth
ω	Total value of all property to cliving
	and that the galuation of all of said property, is stated stile true cash value. [1] Sport to and subscribed to by me this fig. day of the land of th
	County Star Ks
	Affidavit of the Witness to the Service and Death of Soldier
	Husband and Her Marriage.
	STATE OF GEORGIA
	Court bell County
	Personally before me come C. Chan have who after being duly swom on oath says that he knew 1.7. Cool , that he enlisted in Company 16/12/ Regiment of 12.
	knew 1. 10071, that he enlisted in Company 16 127 Regiment of 9a
	veterans on the first day of future 186/ and that on the day of future 186/ and that on the day of fitting 186/ he was billed or died as a result of the insury received
	While in line of duty as a soldier, in the Confederate army, and that he knows Mrs.
	At Corp from June 18 6 mile time in Oping 9 1762 port
	and any of surpline of surpline of surpline
	Alle Salata de Calabra
o the of Join so tip pis that	1000 DECEMBER 1
Sorth UL Stork, the applicant. She and her said soldier husband was married on the day of 1807 and that she was his widow at his death, that he know that the said to the said	Widow's Afficient Who Lort Husband Killed During War and
married again on the day of / 66 0 . 19 to one	Afterwards Married, now a Widow.
that her said husband died on the day of 19/2 and that the	STATE OF GEORGIA,
Theorem to and subscribed before me this 21 stday of Sugar X, 1913. Of Sul X of the Ordinary. Ordinary.	County.
It Sll & oren, Ordinary. Il & blown bers	Personally inform me comes of said county who after being sworn on oath says that she become the lawful wife of on the day of 18 and
of County of the County of the Chambers	says that she became the lawful wife of on the day of 18. sind that he did on the day of 18. enlist in Company Regiment
Accident of the William and D. C. Commission	t and was on the day of 18 billed on died as the sente of the termination of the day of the day of the billed on died as the sente of the day o
Affidavit of the Witness to the Property and its Value.	an line of duty on the day of 18 leaving this sentions to
STATE OF GEORGIA,	That on the day of 18 she was married to of County, and that on the day of 19 in the county
Personally before me & Do Cort on the star below the	of State of the said died and that this deponent is now widow.
Personally before me h S. Corri on who after being sworn on oath says that they are so. Free Holders of said County of Game p that and that they know Mrs. South M. Sand	That she was on the 4th day of November, 1908 or at the death of her lest husband left in the
that she was on the 4th day of November or at the death of her last husband, on the day of Mey and that he left her in the use, possession and control of property at its true cash	possession and control of the purperty. Stated in schedule (A) acres of land cash value of
value, as follows.	Horses or males
SCHEDULE A.	Hogs and cow and other stock
Lands whose cash value	actual income and evings
Horses mules Cows hogs and other stock	Total
	SCHROULE B.
4 Money, notes and accounts.	That since the 4 of November, 1908 or the teath of her husband, she has sold or given away the
	following property of the cash value as follows
Total cash value of all property SCHEDULE B.	
We know that since the 4th November, 1908 or since the death of her last husband she has sold or	Total value and that the proceeds were disposed of
given away property of the eash value of to-wit:	1 U
Horses and mules	SCREDULE C.
Cows, hogs and stock of all kind	That she is now in the use, possession and control of the following property at the cash value attached
Total cash value Leading	acres of land of the cash value
and we know that the proceeds of this property were	Horses and cows of the each value
	Cotion and other farm Products, worth
	Total value of all property
SCHEDULE C.	and that the valuation of all of said property, is stated at its true cash value.
We know that the applicant is now in the use, possession and control of property of the actual	Sworm to and subscribed to by me this
cash value as follows, to-wit: Land of the cash value of Uorthury	County County
Horses and mules, cash value of	
// Cows hogs, and other stock // Wagon and Buggy	Affidavit of the Witness to the Service and Death of Soldier
Other personal property	Husband and Her Marriage.
// Money notes and accounts.	STATE OF GEORGIA,
Total cash value of all property Localing	Campbel 1 County.
Swort/to and subscribed before me this 20 m day of May 10/3	Personally before me come. J. A. Last ter who after being duly sworn on oath says that he
The die Loter Ordinary 10 16	veterans on the Carack day of Jump
of Capingbell County Only the MAN ALL	and that on the lat day of May 18 62 he was the died as a result disease contract
- Waller	ed while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.

Money, notes and accounts All other property	That since the 4 of November, 1908 or the leath of her husband, she has sold or given away the
An other property	following property of the cash value
Total eash value of all property Horling	
SCHEDULE B.	and that the proceeds were disposed of
We know that since the 4th November, 1908 or since the death of her last husband she has sold or given away property of the cash value of to-wit;	and this ser process are disposed of a
	SCHEDULE C.
Cows, hogs and stock of all kind	
// any and all other property.	That she is now in the use, possession and control of the following ploperty at the cash value attached
and we know that the proceeds of this property were	acres of land of the cash value.
and we know that the proceeds of this property were X its full cash value and was disposed of	Horses and cows of the cash value.
(State fully.)	Hogs and other stock
	Cotton and other farm Products, worth
	Total value of all property.
SCHROULE C.	and that the valuation of all of said property, is stated at its true cash value.
	Sworn to and subscribed to by me thisday of
. We know that the applicant is now in the use, possession and control of property of the actual	Ordinary.)
cash value as follows, to-wit:	
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Cows hogs, and other stock	Affidavit of the Witness to the Service and Death of Soldier
y Wagon and Buggy	这一只是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一
// Other personal property	Husband and Her Marriage.
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// Actual income and savings	
Total each value of all property Louising	County.
Sworg to and subscribed before me this 20 th day of May 19/3	Personally before me come J.A.Lasiter who after being duly sworn on oath says that he knew H. T. Cook, that he enlisted in Company "R"-27th Regiment of St.
The water Ordinary A. D. Leverk	veterans on the Manual day of June 18 61
of Care ptill county Could Me will	and that on the 18th day of May 18.52 he will start died as a result of the and contract
- Waller	while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.

that her said bushe	ad that she was his widow at about day of	the 31st day of May	J. Stanks and
A Sworn to a	nd subscribed before me this.	22nd day of Sept. 1913 2 A. X. Lage	
mo m zo	Ordinary.	2 Ax Lage	tu
of Campbell		O work	
Affida	vit of the Witness	to the Property and i	ts Value.
STATE OF G	EORGIA.		
	County.		CACAMINET STREET
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Free Holders of said	County of	and that they know Mrs	A CHARLES OF THE SAME
that she was on the 4	th day of November or at the	death of her last husband, on the	day
value, as follows.	and that he left her in the	use, possession and control of p	roperty at its true cash
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Cows, hogs and stock of	(all kind
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Other personal property	
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Actual income and savin	188
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Sworn to and subscribed before me this	day of 19
· · · · · · · · · · · · · · · · · · ·	The state of the s
Ordinary	
County	Carrie and Carried to the Committee of the Committee of the Carried Com
THE PROPERTY OF THE PROPERTY O	The second secon

/stacky, sarah M/mus, "OLD" CLASS 1921 1921

Application for Pension Due **Deceased Pensioner**

(UNDER ACT 1904) (% pay expenses of last illness or funeral)

W. S. McLarin, Ordinary For Mrs. Sarah M. Stacks of Cempbell County Old or New Class ! "Ld" Died July 15th, Amount \$ 25.00 (balance 1291.)

Approved and ordered paid. 1921.

J. W. LINDSEY,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval. Do not pay out the money until the approval of the property of the property of the send of the data is a your hands giving you suthority to date in the property of the property of the property of the property of the property your receipted pay. Folls to be permanently filed with them. Do not keep this application in your office.

Index Printing Co., Atlanta, Ga.

HOLSOMBACK CASKET COMPANY

HIGH GRADE CASKETS AND FUNERAL SUPPLIES
PHONE NO. 40 ON UNION CITY EXCHANGE

UNION CITY, GA. Jacky 14 192/

Carket · 1 Rote 1 for blever Lorans Sara on Stack This account is fa

Hohomback Carpy Es cer Duh- Hotzonil-col-Dec 23/2/

Georgia, Campbell County.

Before me, the undersified Ordinary, this day personally came R. M. Stacks, a grand-son of Sarah M. Stacks, deceased, who, on oath, says the above account was remisered for Funeral expenses of Sarah M. Stacks, who died without owning sufficient property to pay this bill, and that same is umpaid.

R. M. Stacks

Sworn to & subscribed before me, this Dec. 23, 1921.

Ordinory

Amount \$ 25.00 (balance 1291.)

Part Approved and ordered paid 677
172/36 J. W. LINDSEY.

Ordinary: Fill out above in full and send this blank to Pension Office for approval. Do not pay out the money until the approval blank is in your hands giving you authority to do so. Send back to the Pension Office with your receipted pay-rolls to be permanently filed with them. Do not keep this application in your office.

nder Frinting Co., Atlanta, Ga.

State of Georgia, Campbell County.

Before me, the undersigned Ordinary, this day personally came W. H. Walker and J. D. Cook, both of said county and presented as witnesses in of Sarah M. Stacks, support of the application, herewith filed, and both of whom are known to me to be trustworthy and their statements entitled to full faith and cred it, who after being duly sworn, say that they are the brother, and brothin-law respectively of the the applicant, Mrs. Sarah M. Stacks, formerly Sarah M. Cook, and that they each know that H. m. Cook, the first husband of applicann, (Sarah M. Stacks) lived together as man and wife from Sept. 1858 to the time of his death while in the Confed. service in 1862; that recognized they were reseguated as husband and wife all this time; that such relationshap was never questioned at all by anyone; that this cauple had one child only and that child died soon after the death of its father; that no one ever doubted that said child was born in lawful wedlock as the legitimate offspring of a legally married couple, to wit: the appliant and her deceased first husband H. ". Cook; that for saome reason, unknown to deponents, the marriage lincense of the applicant and H. ". Cook can not be found of record in the county of Fayette, the county where it should have been recorded; and that understand and believe that a license for the marriage of applicant and H. T. Cook was bought and that the marriage ceremony regularly solemnized. Witness our hands and seal, this August 20, 1913.

fr & Walker (1. s.)

Sworn to and subscribed before me, this August 20, 1913.

It Stu Losiu, Ortinory.

Hoho	imbre	d Carlet &	3
Dee	211h-H	olsond-car-	_
Georgia, Co Beforesonally Stacks, dec dount was a Stacks, who	ampbell County. ors me, the under ceme R. M. Sta- ceased, who, on rendered for Pur o died without	ersigned Ordinary, the oks, a grand-son of Son oath, says the above seral expenses of Sarowing sufficient protesses is urpaid. M. M. Stack	is day arah M. ac- ah M. perty
to pay this		n. W. Mack	,

Application for Pension Due to a Deceased Pensioner

(Under the Act of Angust 15, 1904)

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

GEORGIA. County bell

County.

Personally before me, the Ordinary of said County, comes A.M. Stock

of said County, who, after being sworn, on oath that he knew More Sorola M. Stock

of said County, who, after being sworn, on oath that he knew More Sorola M. Stock

of said County, and that said pensions.

that he knew More Rorote M. Alot N of said County, who, after being sworn, on eath says of said County, and that said pensioner was on the Ne 19/0" Pension Roll of County at the time of death, which occurred in County in this State, on the 15 " day of 192", and that a Pension of bolance of Loung From 125" Dollars was due pensioner and unpaid at the time of pensioner's death. That he left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of a 77" per sworn statement fully and completely itemised, hereto attached.

Sworn to and subscribed before me

Sworn to and subscribed before me	Dry 11
M. S. M. Jorie Ordina	1. M. Stacks
Courfield Coun	ty.)

GEORGIA Com Stul	VIT OF ORDINARY
that I personally know RML &C	who is a resident
citizen of said County, and that said pe	erson is of a truthful and trustworthy character, entitled to ful
I also knew lurs doroh!	m. Stack while in life and that this
was the same person whose name appear	M. Lack while in life and that this are on the "Held 1916" Pension
Roll of Care	County and was paid to Pension
of au hundred (100	Dollars in said County for 192 0, and
I now believe said pensioner to be dead	
Given under my hand and official	seal, this 2 3 th day of secure des 1921
(SEAL)	Ordinary.
1 K 1	Camp hell County

Lit. For use it all cases where pendoner died after Zamany risk had not been out of Stale longer than twelve months and died writing the stale of th

1

Walker and J. D. Cook, both of said county and presented as witnesses in of Sarah M. Stacks, support of the application, herewith filed, and both of whom are known to me to be trustworthy and their statements entitled to full faith and cred it, who after being duly sworn, say that they are the brother, and brothin-law respectively of the the applicant, Mrs. Sarah M. Stacks, formerly Sarah M. Cook, and that they each know that H. m. Cook, the first husband of applicann, (Sarah M. Stacks) lived together as man and wife from Sept. 1858 to the time of his death while in the Confed. service in 1862; that they were recognized as husband and wife all this time; that such relationship was never questioned at all by anyone; that this c.uple had one child only and that child died soon after the death of its father; that no one ever doubted that said child was born in lawful wedlock as the legitimate offspring of a legally married couple, to wit: the appliant and her deceased first husband H. T. Cook; that for saome reason, unknown to deponents, the marriage lincense of the

applicant and H. T. Cook can not be found of record in the county of Payette, the county where it should have been recorded; and that understand and believe that a license for the marriage of applicant and H. T. Cook was bought and that the marriage ceremony regularly solemnized. Witness our hands and seal, this August 20, 1913.

W. H. Walker (L. S.)

Sworn to and subscribed before me, this August 29, 1913.

It S.M. Lorin. Ordinory.

	of said County who after him
that he knew Uirs. Lorole W. Lloi	of said County, who, after being sworn, on oath says
"A X . C "	of said County, and that said pensioner
was on the "Ac 2 19/0" Pension R	
time of death, which occurred in Caux	County, in this
State, on the 15 4 day of	July 192 / and that
a Pension of bolance of levery	Levis (25-/ Dollars was due pensioner and
Account of the second of the s	e left no widow or dependent children surviving, and
no estate of any value sufficient to pay these fun	
per sworn statement fully and completely itemise	
	1
Sworn to and subscribed before me this 2 3rd day of Se secur bear 1921 Mr. S. W. Jorne Ordinar	1. M. Lacks
Campbell Count	1
AFFIDAVIT C	OF ORDINARY
GEORGIA County Louis	3
ma /// Parenty	F
	Ordinary of said County, do certify
that I personally know A.M. Stocks	, who is a resident
	a truthful and trustworthy character, entitled to full
faith and gredit	4
I also knew lurs. Lorok M. L.	ack while in life and shot the
was the same person whose name appears on the	"Hel 1916" while in life and that this
Boll of Campbell	
du hundred (100)	County, and was paid a Pension
	Dollars in said County for 192 0, and
I now believe said pensioner to be dead.	m. M. Force Ordinary.
Given under my hand and official seal, this	23 17 day of de cue des 192/
(SEAL)	m. a. Ill Lorein Ordinary.
· 62	Campbell :
	County.
th. Each account must be sworn to before the Ordinary.	
e) of The Ordinary must see to it that such bill who died tached neatly to the blank, after this blank has bearing sth. The completed woucher, this blank has bearing must be paid out until it is returned to you as your authorit and the paid out until it is returned to you as your authorit \$35. Accept, no bills you namely multy you write the in-	I without owning sufficient property to pay this bill." otty legitimate in every respect, and property sworn to, and all sperty completed as indicated. sint be sent to the Peanion Office for approval and no money ty to make the payment. sention and them disburses the money himself and takes receipts.
ensioner's children, or children-in-law, must not charge the nand of them. The sturn his application, and attached bills with ro	se State for doing only what the law and common humanity de-

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

The finding should see that the back of this blank, when folded, is filled out.

The finding should see that the back of this blank, when folded, is filled out.

The finding should see that the back of this blank, when folded, is filled out.

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117. 1	4 10	100
Widow's	Annh	CATIO
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	1	

County .				-92
Name 1	drs. Anni	e Mari	ha,	Stee
Widow	F. H.	Steed	- 1	7
	n _T n			S .

Company		
Regiment	2nd Ga.	Cav'y

pproved	



ORDINARY'S CERTIFICATE

STATE OF GEORGIA, CAPRELI

L. S. McIn'lly. COUNTY, J Ordinary of said County, do certify that I know Mrs. Annie Enritha Steed. Description the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was				
linary of said County, do certify that for this pension, and that she is the nuing resident of said County and w	person she represents herself to be, and that she is a bona fide conti	know Mrs. Annie Martha Steed, the applicant		COUNTY.)
	nuing resident of said County and w	for this pension, and that she is t	linary of said County, do certify that	

are entitled to full faith and credit. on the ... That I also know_that__ day of ... NAMED OF PARTY AND PARTY OF THE PARTY OF THE

Sworn under my hand and official scal of office this. 29th. day of. August, 1923.

RALL Free Ordinary.

Campbell .

NOTES: 1. Before any quantions are asserted the Ordinary shall seem applicant and the witness in the following worths:

yes shall give will be the truth. See will introduction make to each of the questions stated you and the evidence

2. Additional artifaction may be attached it Mark spreas are instructions.

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

4. Only widows the marked pipe to first Australy, 181, are carlied,

5. Addition cordined copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
resultation.

repliation.

Wikes of Disabled Pensioners must use the Bire Application Blank and state and prove full term of husband's service-phename he made no proof of service and was not required to do so.

Widow of F. H. Steed "I" Company	Ordinary shall sweet up a mayor make t u God." Bank spaces are in ordinary of the state of the state of the state of the ordinary of the state of the ordinary of the ordinar	of office this 29th	at the years trut	ne is a bona fide	the app
Approved	shall seem applicant and the variety make to each of the questions of the control of the control of the country of residence. Set are country of residence. Set are country of the country	29th day of My f	Wilson Was a state of the state	continuing resid	icant for this p
OSMA Gegor	Deliany shall seem applicant and the witness in the federing words of the plant make to each of the questions saked you and the withinse the plant of the plant of the plant of the county of realisence. Stikany of the county of realisence. Stikany of the county of realisence. The object of the county of the	August,	ST ST ST	ne is a bona fide continuing resident of said County and was	the applicant for this pension, and that she
Commissioner of Pensions. Byrd Printing Co., State Printers, Atlanta. Sign 7/1923	he evidence by general by general	nary.	gustal design states and the second states of the second s	y and was	she is the
			and the same of th		i.

ORDINARY'S CERTIFICATE

)
COUNTY.
,
Ordinary of said County, do certify that I
eed, the applicant for this pension, and that she is the
and that she is a bona fide continuing resident of said County and was
1900.
witherstone to mentings, sand disclose kinase
in the both words ware duly sworn by me her
its, and that they are truthful and trustworthy and their statements
icial scal of office this 29th day of August, 1923.
modelle Loring Ordinary.
Campbell County.

3. All affidavits must be made before the Ordinary of the county of molecuse.
4. Only widows who married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage licease if obtainable. If not, prove marriage, by some person, or by general (Widows of Danhale) Pensioners must use the Blue Application Blanks and state and prove full term of bushand's service—because he made no proof of service and was not required to do so.

lication		Steed		٠			dDSET,	Atlanta.
pp fer ov July Act o	5	Annie Martha	20	Cav'y		Hego	d. W. LINDSEY Commissioner of Pen	State Printers,
low's A Put on Roll in H and Was on the ton Under Act of As Amended by	CAMPBELI		I,	2nd Ga.		Mis	ď	Printing Co
Wido To Be Put Rusband Put on	County .	Name Mrs.	Company	Regiment	Approved	1		Pard

GEORGIA COWETA COUNTY. I.J.A.R.Camp, Ordinary of said County, and ex-	WIDOW'S AFFIDAVIT STATE OF GEORGIA. C A M P B E L L COUNTY. Personally before me comes Mrs. Annie Martha Steed, of said County, who, after being duly sworn, says that she is the widow of F. H. Steed to whom, in the County of Coweta State of Georgia she was married on
officio Clerk of the Court of Ordinary, certify that the attached and foreges oing one page of printing and writing contain a true, full, and complete copy of marriage license of F.H.Steed and Miss A.M.Perkins as the same	the 19th day of October 1871, and that she remained his wife, and resided with him to the date of his death in June 12, 19,25 and that she has not since his death remarried. At
This the 28th day of August 1923. Ordinary and ex-offi. Clerk C.O.C.C.Ga.	the time of his death he was a resident of Campball
MARRIAGE MARRIAGE NO NO Lissued CC L. Lissued CC L. O Marri PAMCC.	Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband STATE OF GEORGIA, (Certified copy of Marriage License enclosed/) COUNTY. Personally before me comes
	affidavit, is the lawful widow of

(SEAL)

Widow's Application
To Be But on Roll in Her own fight when
Person Dafe Act of July 11, 1810—
As Amended by Act of 1819.

Name Wrs. Annie Martha Steed.

County CAMPBELL

Widow of F. H. Steed

"I"

Regiment 2nd Ga. Cav'y

Byrd Printing Co., State Printers, Atlanta.

man who was on the pension roll of said State _____from ___

GEORGIA COWETA COUNTY.

officio Clerk of the Court of Ordinary, certify that the attached and foregeoing one page of printing and writing contain a true, full, and complete copy of marriage license of F.H.Steed and Miss A.M.Perkins as the same appears of record and file in my office.

WIDOW'S AFFIDAVIT

	MIDOW S ALLEAVII
	STATE OF GEORGIA,
	CAMPBELL COUNTY.
	Personally before me comes _ Mrs. Annie Martha Steed,of said County
	who, after-being duly sworn, says that she is the widow of F. H. Steed
	to whom, in the County of Coweta State of Georgia she was married or
	the 19th day of October 1871, and that she remained his wife, and resided with him to the
	date of his death in June 12, 19 23 and that she has not since his death remarried. A
	the time of his death he was a resident ofCampbellCounty, in said State
	of Georgia, and he was on the "Act 1919" (Service ension-Roll of the State and paid a pension
	of \$125.00 in Campbell County for 121 per annum, on account of being a soldier in
	Company "I" Regiment 2nd Ga. Cay'y (Volunteers or State Militia
	That she is now a bona fide resident citizen of said County of _Campbelland she
	has so continuously resided sinceday of1871
	Sworn to and subscribed before me, this the
	27th day of August, 1923. Mas Annie Mart
	ofCampbellCounty.
	(SEAL)
	Affidavit of Witnesses to Prove Marriage and to Whom.
	Date of Death of Husband
	STATE OF GEORGIA, (Certified copy of Marriage License enclosed/)
	COUNTY.)
	Personally before mc comesknown to b
	responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
	of their own personal knowledge Mrs, who made the foregoing
	affidavit, is the lawful widow of
	County in said State ofday of
	and that she has not since remarried. That she became the wife ofor
	theday of18,, and that she and he had resided together as man and
,	wife continuously sinceday of18, and that thewar
	the same man who was on the pension roll of said Statefrom
	Countywhen he died.
	Sworn to and subscribed before me, this the

(SEAL)

GEORGIA COESTA COUNTY.

Officio Clerk of the Court of Crimary certify that the attached and forege copy of marriage license of P. H. Steed and File in my office appears of record and file in my office.

Although the Seth day of August 1925.

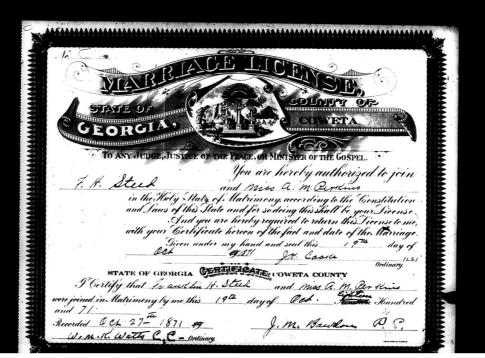
Ordinary and ex-offi. Clerk C.O.C.C.Ga.

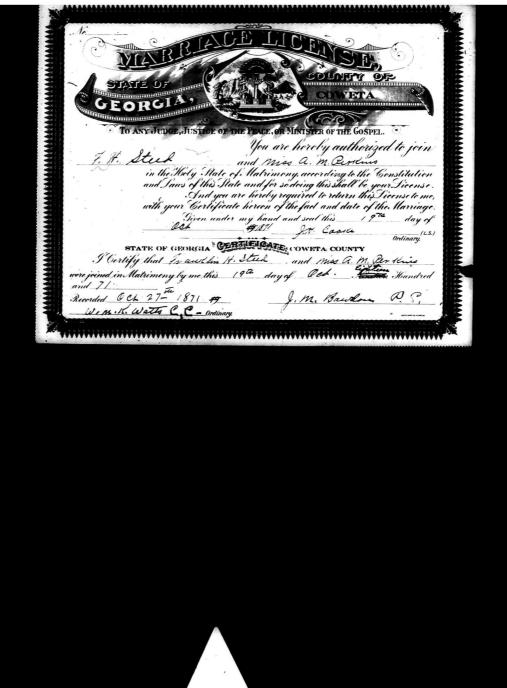
This the 26th day of August 1925.

Ordinary and ex-offi. Clerk C.O.C.C.Ga.

This the is now a bona fide resident citizen of said County of Coun

date of his death in June 12, 19 23 and	that she has not since his death remarried. At
the time of his death he was a resident ofCampba;	County, in said State
of Georgia, and he was on the "Act 1919" (Se	ervice ension Roll of the State and paid a pension
of \$ 125.00 in Campbell County for 12	L_per annum, on account of being a soldier in
Company "I" Regiment 2nd (
	County of Campbell and she
has so continuously resided sinceday of	1871. Ax
Sworn to and subscribed before me, this the	1
27th day of August, 1923. M. A. W. Lo Ordinary	The Americ Month
of Campbell 'County.	3.
(SEAL)	,
	of Husband of Marriage License enclosed/)
COUNTY.)	•
Personally before me comes	known to be
responsible and truthful persons, residing in said Count	ty, who after having been duly sworn, say: that
of their own personal knowledge Mrs.	, who made the foregoing
affidavit, is the lawful widow of	who died in
County in said State ofonon	day of19
and that she has not since remarried. That she becam	
theday of18,, an	
wife continuously sinceday of18	
the same man who was on the pension roll of said State	from
Countywhen h	e died.
Sworn to and subscribed before me, this the	
day of19	
Ordinary	}
of County.	
(SEAL)	
	1
	- A





) lee	a. J. H. &
16	Campbell Goy
\angle	No. 19142
	Confederate
	lier's Application
Under A	ot 1910 As Amended by Act of 191
County _	Campbell
Name	F. H. Steed
Company	"I"
Regiment	2nd Ga Cavalry
Approved	
- 1	
185	
*	1.

dinary's Certificate

7, 7, 81,		100				
of Court Kee Country	Sworn unger, my hand and official seal of office this 3 7-4.	sension; that they are both recibents of said county and were shily sworn by me before signing the forego- ing affiderit and they are all truthful and trustworthy and their statements are entitled to full faith and	the applicants	1, mille Horas	Carry Lee	Crumary a Certificate
ر:	day of Suplime	duly sworn by me before sig	the person he represents h	Ordinary of said County, certify that I know	*	ilicate
it	19/1	gning the forego- to full faith and	imself to be and as swearing to the	rtify that I know		

(SEALI)

NOTES: 1. Indices my quantime.are asserted the Ordinary shall seem applicant and witnessed in the following worth: you will know marrow made to each of the quantition stated you and the ordinate you therefore the quantities and the ordinate of the property of the county in which the applicant or witness resides and must be certified by such Ordinary.

J. W. LINDSEY,
unissiones of Pensions.

do Printers, Atlanta.

5

Beginnent 2nd Ges.— Ogwalry

on the 3th and were duly sworn by me before signing the foregostworthy and their electements are entitled to full faith and

limits

approved

Approved

J. W. LINDSBY.
Commissiones of Pensions.

Bred Finting Cs. Signit Finisher. Attent.

G. H. 1919

G. H. 1919

J. W. LINDSBY.
Commissiones of Pensions.

Ordinary's Certificate

STATE OF GEORGIA.

COUNTY.

1. Della Formation of said County, certify that I know the applicant F. Stand for pension is the person he represents himself to be and resides in said county. That I also know for pension is the person he represents himself to be and resides in said county. That I also know for pension is the person he represents himself to be and resides in said county. That I also know for pension is the person he represents himself to be and resides in said county and were duly aworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworm under my hand and official seal of office this for day of Saffacian for the formation of the for

Notice: Interior any questions are nawered the Ordinary shall swear applicant and witnesses in the following words:

you give shall be the whice that you will run answer make to each of the questions asked you and the evidence
you give shall be the whole that the property of the proper

with	424 e	1 8				•	SEY, Pensions.	Adabta.
the land	derate	s Amended by A	Ę.	Gavalr			f. W. LIND	Printen, All
in in	Confec	t 1910—As Am	F. H. Steed	2nd 98			Comm	The Co., Basic
See See	Confederate	Under Act 1910 County Camp	Name F.	古	paaouddw	. , ,	13.7	Byrd Print

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

or position is the person he represents himself to be and

Ordinary of said County, certify that I know

NTY.

Questions For Applicants to Answer

STATE OF GEORGIA,
Train blett
F. H. Stud
for the parties and County, hereby application parties and County, hereby applications are seen as a second
for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits a submit of the submits and submits are submits as a submit of the submits and submits are submits as a submit of the submits are submits as a submit of the su
his sworn statement, with his testimony to make out the same, and after being duly sworn true answers
nake to the questions propounded, answers as follows, to-wit: 1. What is your name and where do you reside! (Give County and Post-office) + N. S leader for Policies, Carref hell Cofa; Policies, Policies, Ta.
2. How long and since when have you been a continuous resident citizen of this State 1.15 years.
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State fro
4. When and where, and in what Company and Regiment did you enlist! (Give the arm and class ervice) Hory 1, 1842, in Court fell 91 a - 6, 120. 2 and 92 - 6 ory
5. How long did you remain in the actual military service with said Company and Regiment! (Gi ate of discharge)
6. When and where was your Company and Regiment surrendered or discharged from the Service for
7. Were you actually present with your command when it was surrendered or discharged 1/20 5
8. If you were not actually present, state specifically and clearly where you were the sure L
a Where was your command when you left it has left well sustanted or
b. When did you leave the command? Heart left it
c. For what cause did you leave! Ry was by any wind
d. By whose authority did you leave?
d. By whose authority did you leave!
e. For how long was your leave granted! In what way!////////////
e. For how long was your leave granted † In what way †
e. For how long was your leave granted? In what way?
e. For how long was your leave granted † In what way †
e. For how long was your leave granted! In what way!
e. For how long was your leave granted! In what way!
e. For how long was your leave granted? In what way?
e. For how long was your leave granted! In what way!
e. For how long was your leave granted? In what way?
e. For how long was your leave granted! In what way! f. Why did you not return to your command after leave expired! f. Why did you not return to your command after leave expired! f. Why did you not return to your command after leave expired! f. What effort did you make to return! f. What effort did you make to return! f. Were you captured during the war! f. S. if so, when, and where! In what prison were you held and when were you released! f. Are you drawing a pension of any amount from this State or the United States! f. Are you drawing a pension of any amount from this State or the United States! f. Have you drawing a pension of any amount from this State or the United States!
e. For how long was your leave granted! In what way! f. Why did you not return to your command after leave expired! f. Why did you not return to your command after leave expired! f. Why did you not return to your command after leave expired! f. What effort did you make to return! f. What effort did you make to return! f. Were you captured during the war! f. S. if so, when, and where! In what prison were you held and when were you released! f. Are you drawing a pension of any amount from this State or the United States! f. Are you drawing a pension of any amount from this State or the United States! f. Have you drawing a pension of any amount from this State or the United States!

or Coamphier

		7. Were you actually present with your command 8. If you were not actually present, state specific
Confederate Soldier's Application Under An 1816 - A mended by Act of 1818 County County County County County County County Name F. H. Straed	Approved Approved Approved A. W. INNUSSY, Commissions of Pentions Print Prints Co. Web Prints A. H. INNUSSY, A. M. INNU	a. Where was your command when you left it? A. When did you leave the command? b. When did you leave the command? c. For what cause did you leave? d. By whose authority did you leave? e. For how long was your leave granted? In what way were you prevented? h. What effort did you make to return? i Were you captured during the war! i Were you expured during the war!
Y		9. Are you drawing a pension of any amount fro 10. Have you ever applied for the Georgia Pension allowed!
•		Sworm to and subscribed before me, this the first before me, the firs

The spirit of the following to the part of the second section in

r. The state of the between

7. Were you actually present with your command when it was surrendered or discharged!

8. If you were not actually present, state specifically and clearly where you were the sunt in the state specifically and clearly where you were the sunt in the state of the sta

Questions for Witness as to Service COUNTY. For Luid as in support of the application of 2. H. Stell U. et of 1910, as amended by the Act of 1919 in said State, and, after being make to the questions propounded, answers as follows: 1. What is your name and where do you resident if 2 field in Polements; Carry fill Co. Yes. 3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State, and how do you know the Daniel Coffe, for Ckyrote or longer tour personal Rundledy to 4. When, where and in what Company and Regiment did V. N. Sleet mellist during was from 1861 to 1865. Give date and place #404/1/166 tue Court State Coffe in Coffe State Coffe in Coffe State S 6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment's (Give date) Jynests, of force Ugy1, 177 2 6 44, 26, 1761 mand surrendered or discharged (give date and place) 26,1865 was Sain bury M.C. 8. Were you personally present at the surrender ! Yes Les 9. If not, where were you and how came you there! Osesue X 10. Was the applicant personally present with his command at surrenders 11. If not where was he and how came him there! en did he leave his command! Wour left L all that you have stated to be true! If of your own knowledge, tell clearly and specifically, I have a cumber of some by one was of flut and by survey will be there for 8 4 2007, as there & ballet nted from returning to his command? Require us aus west 15. Was applicant captured as a prisoner Us End 15 so, when and where? Requires of auto cuing In what prison was be held? Require to auto and and subscribed before me, this the office trusted 1998 Basfield

County.

of Com flew

(SEAL)

1. 4. When, where and in what Company and Regiment did 7. N. State of enlist during war from 1861 to 1865; Give date and place 1964/1 187 in County that Cope on Co 77 - 2 to 98 to 1865. Give date and place 1964/1 187 in County that Cope on Co 77 - 2 to 98 to 1865 t 6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment (Give date) Jyunta, of from Uday 1, 1772 to Off. 26, 1761 7. When and where was his command surres amand surrendered or discharged (give date and place) Atric 8. Were you personally present at the surrender! Yes all 9. If not, where were you and how came you there ! Oses us X 10. Was the applicant personally present with his command at surreader; Yes Set

11. If not where was he and how came him there! I should X

12. When did he leave his command! Limb left it where was his command when he left in Lymno to Shus. For what cause did he leave! Rymno to ano was ---Where was his command long was he granted leavet _______ How do you know all that you have stated to be true! If of your own knowledge, tell clearly and specifically, I was a well-bed of forms of one of file can have there well land for 8 years, as there had way was be prevented from returning to his command; Require the account How do you know! 15. Was applicant captured as a prisoner 1/4 2. If so, when and where 1 May was to held? Requires the auto and and Sworn to and subscriped before me, this the J. Basfield my day of the tunber 10/9 My Basfield My Me John Ordinary) or Count bell county. (SEAL) WITNESSES: T. J. Barfield, -- Enlisted with applicant, -- Ho date.

N.IE Stood, P. H.

YEAR 1929 COUNTY Campbell.

WHEN AND WEERE BORN? September 8th, 1845. Georgia.

ENLISTED WHEN AND WHERE? May 1st, 1862, Campbell County, Georgia.

RANK:

COMPANY AND REGIMENT? Company I, 2nd Georgia Regt. Cavalry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

GAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 26th, 1865, Salisbury, M. C.

. . . IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURTED:

WHEN AND WEERE BORN? September 8th, 1845. Georgia.

ENLISTED WHEN AND WHERE? May lot, 1862, Campbell County, Georgia.

RANK:

COMPANY AND REGIMENT? Company I, 2nd Georgia Regt. Cavalry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WEEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? April 26th, 1865, Salisbury, M. C.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

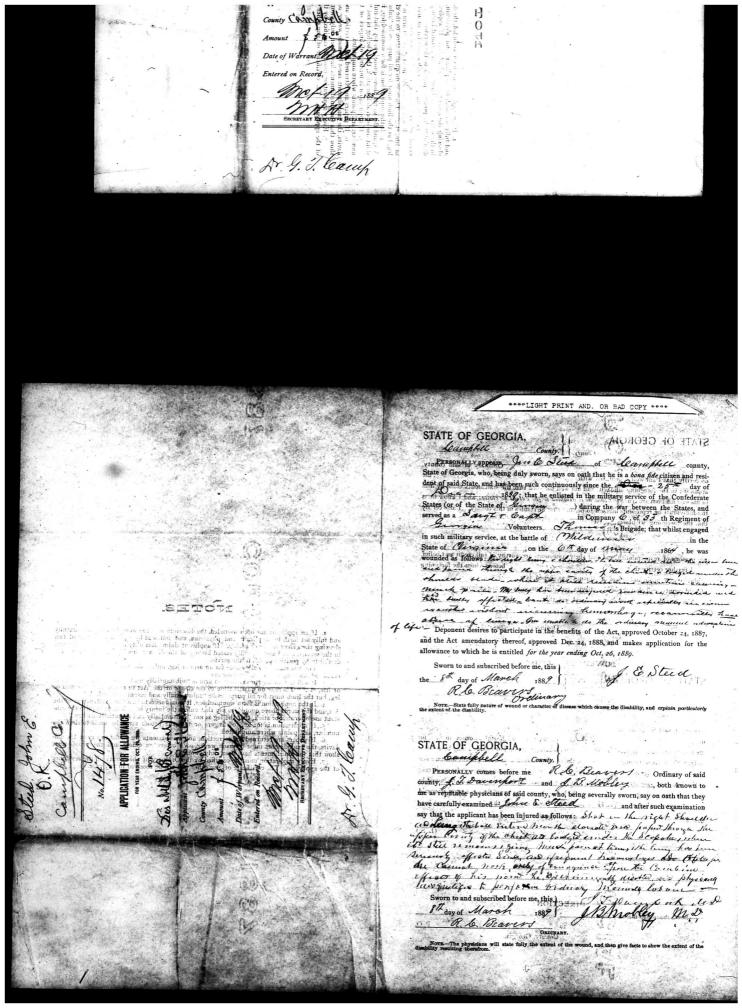
BURIED:

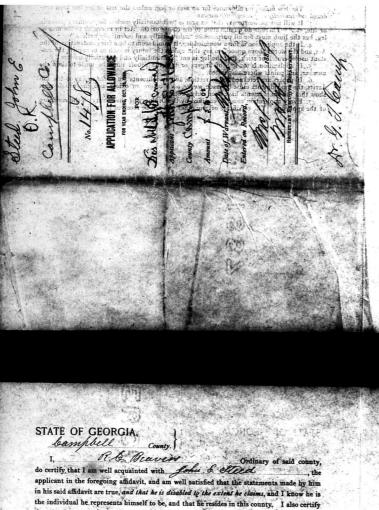
WITNESSES: T. J. Barfield, -- Enlisted with applicant, -- No data,

APPLICATION FOR ALLEWANCE

FOR YEAR ENDING OUT AS AREA HOLD AND AN AREA HOLD AND AREA

Ar. G. G. leauf





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 R. C. Beavers 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 and day of March 1889 R. C. Beavers

Ordinary Campbell County.

POWER OF ATTORNEY.

STATE OF GEORGIA. Compret

County. KNOW ALL MEN BY THESE PRESENTS, That I, I & Steed of Camp bell nty, in said State, do hereby appoint & Toking

county, in said State, do hereby appoint __ of Campbell County is my true and Iswful 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 the 19

March day of

Executed in the presence of us:

1

J. E. Steed (L.S.)

wy bank

DIRECTION :

Send money to me as follows, by.

County, Georgia.

8th day of March 1889 R. lo. Beavers

& Steed

STATE OF GEORGIA,

Campbell PERSONALLY comes before me R.G. Blanth Ordinary of said country. A Daventer and J. M. Molley, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined in Johns G. Classical and after such examination have carefully examined where & Stack in and after such examination say that the applicant has been injured as follows: Shot in the right Should be colleged the best State of the stocked to the property of the cheek at looking territory in a copy of the state of th R. C. Beavers ORDINARY.

MOTES.

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

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

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, if 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 cratch or stick, that the leg is not "spatially useless."

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

6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments have been duly sworn to the proofs must be made to show that the smendments have been duly sworn to the proofs must be received in any case.

KNOW ALL MEN BY THESE PRESENTS, That I, I have been county, in said State, do hereby appoint of learnsphell county and 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 the 19 have been been supported 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 the 19 have been been supported 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 the 19 have been supported by the Governor, or for any sum of money to me as follows, by the Governor, or for any sum of money to me as follows, by the Governor, or for any sum of money to me as follows, by the Governor, or for any sum of money to me as follows, by the Governor, or for any sum of money to me as follows, by the Governor, or for any sum of money to me as follows, by the Governor, or for any sum of money to me as follows, by the Governor, or for any sum of money to me as follows, by the Governor for the control of the co	dered substimitally and essentially useless. 3. It will not answer to say that an arm of leg, unless the arm or leg has been red of life, etc." There is no qualification to the clause of the Act in reference to the arm leg, but the limb must for all purposes be "substantially useless in the application is for a wounded leg, it ould 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 estant use of crutch or stick, that the leg is not "gostsantially and essentially useless." 5. If application is for loss of fingers or to the proofs must be made to show to number, and points where ampuitted. 6. If papers argretured for correction, and amendments are added to any of the address, the amendments must be made under out before an officer, and the proofs mushow that the sumendments have been duly sworn to. 7. Every application must be excitised by the Ordinary of the country of the resident of the applicant. The certificate of any other will add be received in any case.
STATE OF GEORGIA, Cankbell County, I. Re Success Ordinary of said county, do certify that I am well acquainted with John & Steed the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I further certify that Re Revers 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 14K day of February 1896 Re Revers Ordinary County.	STATE OF GEORGIA, Lampbew Commy. I. Complete Commy. In the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County. I further certify that Defore whom the foregoing affidavits were made and power of attorney was signed, is a commy of said County, and the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this R. L. Roomers.
APPLEATION FOR ALLOWINGE. NO. 1229 NO. 1229 NO. 1229 NO. 1220	Application for Allowance of the state of view o
FOR Applicants Heretofore Attowned Pension STATE OF GEOPGIA State of G. Figure 1. The first of	For Applicants Heretofore Allowed Pensions, STATE OF GEORGIA. **Proposition of Contains and Con

States, a sound the boundary of the Allowinge.

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STATE OF GEOPG!

For Applicants Heretofore Allowed Pensions

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STATE OF CIECHCIA.

. For Applicants Heretofore Allowed Pensions

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA, County,
PERSONALLY appears John E. Steed of Carupbell 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
to 25, that he emissed in the military service of the Con-
federate States (or of the State of States, and served as a Confidence in Company 6, of 35 th Regiment
of Georgia Volunteers Thomas 's Brigade; that whilst engaged
to and allow the state of the s
of Virginia on the day of May 1864, he was
wounded as follows: Shot with minuice ball just above The
Collar bone and just through the upper cavety of the
Chest and lodged under the Scapelar where it still
remains causing mutch Pain it afectionythings
and neves of buy right doing bleft leg saw hotable
to perferse brilinary avocation of life.
Deponent desires to participate in the benefits of the Act approved October 24 1887
Deponent desires to puritionate in the Lemonts of the Act, approved October 24, 1887, and the acts amendatory thereoff, and inche application for the allowance to which he is entitled for, the year ending October 36, 1890. I have heretofore been allowed a penision
dollars.
Sworn to and subscribed before me, this the
R. C. Beavers, Ordinary.
NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
POWER OF ATTORNEY.
STATE OF GEORGIA
County.
KNOW ALL MEN BY THESE PRESENTS. That I, John E. Steed
of Campbell
county in said State, do hereby appoint f. J. Stephens
me and in my name, to receive and receipt for what ever amount of money I may be entitled
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
need by the Governor, or for any sum of money which may be coming to me for the feason
aloresaid.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
John & Stelle [i. s.]
she Executed in the presence of as and an act of the statements image have.
M. HWood dall boble
R. le Beavers Ordinary
Dipercon

P.O.

County, Georgia.

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. rop adi	olicants H	eretofore	Allowed Pension	18
STATE OF GE	ORGIA		and a romotor	
Manphe	AND THE RESERVE AND THE PERSON AND T		4. 1	
			. 1	0 .
PERSONALLY appo	ears John	Q Dleed	of Camp	ell
County, State of Geo	orgia, who, being	duly sworn, says or	oath that he is a bona fide	itizen an
resident of said State,	and has resided	therein continuously	ever since the	
day of (Ace M	185	that he enliste	d in the military service of	the Cor
federate States (or of	the State of	-	during the war b	tween th
States, and served as	a wast	au ir	Company 6, of 351 th	Regimen
of genje	Volunteers	Thomas	's Brigade; that while	t engage
in such military service	ce at the battle o	The Wil	dessiss in	
	on the			4, he wa
wounded as follows:	- Shoule	Mining 13		
Q. 1 66.7	in to the			taste
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to herform	the Orde		Time of the	ave of
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Night an	ne		7	11/
Deponent desire	es to participate	in the benefits of	the Act, approved October	24. 188
				is entitle
Fifty		della control de la control de	een allowed a pension of 8 8 9 7 8 90,	
Sworn to and sub			. 1	****
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1400	of Helevinan	4 1801.		
18th day	The second secon			
R.b. Braver	J Ordinary		-	
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County, Georgia.

Sworn to and subscribed before me, this the May of Iteraty 1890	Aday of Active 1891. Aday of Active 1891. Nore.—State fully nature of wound or character of disease which causes the disability, and enplain particularly the extent of the disability, resulting from the wound or character of disease. POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all Men by these Presents; That I. of
STATE OF GEORGIA: Carry bull County. N. C. B	POWER OF ATTORNEY. STATE OF GEORGIA. County. Know all Men by these Presents, That! Of County, State of Georgia, do hereby appoint of men and in my name, to receive and receipt for whatever amount of money! may be entitled to from the State, of Georgia, by reason of the injury received as aforecast in the mility service of the Confederate States (or of this State, as stated in the foregoing affining service of the Confederate States (or of this State, as stated in the foregoing affining service of the Confederate States (or of this State, as stated in the foregoing affining service of the Confederate States (or of this State, as stated in the foregoing affining service of the Confederate States (or of this State, as stated in the foregoing affining service of the Confederate States (or of the Confederate States). IN WITNESS WHEREOF, I have become set my hand and seal, this states are confederated in the presence of us: [L. 8] Executed in the presence of us:
SOLDIER'S PENSION. SINOISMO DENVITE AMOUNT, & COUNTY, MANOREL DENVITE, 1992. Name A County, A	County, Georgia STATE HOROTA County, Georgia The County of the county