

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

Sworn to and subscribed before me, this, the 14 day of February, 1896. R. C. Bravers Only.

STATE OF GEORGIA,
Campbell County.

I, R. C. Bravers Ordinary of said County, do certify that I am well acquainted with Benjamin F. H. Speer 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 14th day of February, 1896.



Ordinary Campbell 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 pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Campbell county been allowed an invalid pension of Twenty Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 14 day of February, 1897. R. C. Bravers Only.

STATE OF GEORGIA,
Campbell County.

I, R. C. Bravers Ordinary of said County, do certify that I am well acquainted with Benjamin F. H. Speer the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 14 day of February, 1897.



Ordinary Campbell County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, B. F. H. Speer hereby authorize J. T. Stephens of Fairburn Ga

to receive and receipt for the pension paid hereon and request that he remit same to me by Hand at home

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 21st day of February, 1896. B. F. H. Speer

[L. S.]

Executed in presence of

M. S. McClellan
R. C. Bravers Only

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, B. F. H. Speer hereby authorize J. T. Stephens of Fairburn Ga

to receive and receipt for the pension paid hereon and request that he remit same to me by Hand at Fairburn Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 25th day of January, 1899. B. F. H. Speer

[L. S.]

Executed in presence of

J. T. Stephens
Geo. Latham Ordinary

INVALID
SOLDIER'S PENSION.
1898.

Name B. F. H. Speer
County Campbell
Disability Armed Wound
Amount, \$ 50.00
2/23 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

HANDLED TO
J. T. Stephens
Geo. W. Harrison, State Printer, Atlanta

No data

INVALID
SOLDIER'S PENSION.
1899.

Name B. F. H. Speer
County Campbell
Disability Armed Wound
Amount, \$ 50.00
2/21 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

HANDLED TO
J. T. Stephens
Geo. W. Harrison, State Printer, Atlanta

No data

Spur, B. F. K.
Campbell Co.
 (For Those Already Enrolled.)
 CS3 No. 2766
 INVALID
 SOLDIER'S PENSION.
 1898.
 Name *B. F. K. Spur*
 County *Campbell*
 Disability *Armed Wound*
 Amount, \$ *2 1/2 3* 1898.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
J. T. Stephens
 U.S. DEPARTMENT OF WAR, WASHINGTON, D.C.

No data

Spur, B. F. K.
Campbell Co.
 (For Those Already Enrolled.)
 CS3 No. 2775
 INVALID
 SOLDIER'S PENSION.
 1899.
 Name *B. F. K. Spur*
 County *Campbell*
 Disability *Armed*
 Amount, \$ *50* 1899.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT HANDLED TO
J. T. Stephens
 U.S. DEPARTMENT OF WAR, WASHINGTON, D.C.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears *B. F. K. Spur* 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 *16* day of *January* 18*87*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *C*, of *12th* Regiment of *Georgia* Volunteers, *5th* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows:

I was shot through the right arm just below the wrist joint by a Minnie Ball while in service at the Battle of the Wilderness, and on account of being wounded so severely, I am rendered unable to perform ordinary manual labor and serve as an expert for myself.

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

Sworn to and subscribed before me, this, *21st* day of *July* 1898. *B. F. K. Spur*
R. C. Bravers, Ord. POST-OFFICE *Lawrenceville*

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

STATE OF GEORGIA,

Campbell County.

I, *R. C. Bravers* Ordinary of said County, do certify that I am well acquainted with *B. F. K. Spur* 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 *21st* day of *July* 1898.

R. C. Bravers
 Ordinary *Campbell* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears *B. F. K. Spur* 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 *16* day of *January* 1887; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *C*, of *53th* Regiment of *Georgia* Volunteers, *5th* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows:

I'm the Battle of the Wilderness was shot through the right arm just above the wrist joint breaking the larger bone & lacerated the little bone out of place at the wrist making 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 *Campbell* County been allowed an invalid pension of *Fifty* Dollars, for the year 1898.

Sworn to and subscribed before me, this, *25* day of *January* 1899. *B. F. K. Spur*
J. T. Stephens, Ord. POST OFFICE *Lawrenceville*

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

STATE OF GEORGIA,

Campbell County.

I, *J. T. Stephens* Ordinary of said County, do certify that I am well acquainted with *B. F. K. Spur* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *25* day of *January* 1899.

J. T. Stephens
 Ordinary *Campbell* County.



aid in a support for myself
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Campbell county been allowed an invalid pension of Twenty Dollars, for the year 1897.
Sworn to and subscribed before me, this, 21st day of July, 1898. B. F. H. Spain
R. E. Bravers, Indy POST OFFICE Fairburn, Ga

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

STATE OF GEORGIA,

Campbell County.
I, R. E. Bravers Ordinary of said County, do certify that I am well acquainted with B. F. H. Spain 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 21st day of July, 1898.

R. E. Bravers
Ordinary Campbell 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 Campbell County been allowed an invalid pension of Fifty \$50.00 Dollars, for the year 1898.

Sworn to and subscribed before me, this, 20 day of January, 1899. B. F. H. Spain
J. J. Stephens, Ordinary POST OFFICE Fairburn, Ga

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

STATE OF GEORGIA,

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

Given under my official signature and seal, this 20 day of January, 1899.

J. J. Stephens
Ordinary Campbell County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.
I, B. F. H. Spain hereby authorize J. J. Stephens of Fairburn, Ga to receive and receipt for the pension paid hereon and request that he remit same to my by Hand at Fairburn, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23 day of February, 1900.

B. F. H. Spain [L. S.]

Executed in presence of

J. J. Stephens
John W. Varner, C. S. C.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.
I, B. F. H. Spain hereby authorize J. J. Stephens of Fairburn, Ga to receive and receipt for the pension paid hereon and request that he remit same to my by Hand at Fairburn, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 25 day of February, 1901.

B. F. H. Spain [L. S.]

Executed in presence of

W. S. Lee, L. S.
Ordinary

Spain, B. F. H.
Campbell Co.
CODE SECTION 130
(For Those Already Enrolled.)
CS No. 600
INVALID
SOLDIER'S PENSION.
1900.
Name B. F. H. Spain
County Campbell
Disability arm
Amount, \$ 50
Warrant issued July 9 1898.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
J. J. Stephens
Chas. W. Harrison, State Printer, Atlanta.
W. S. Lee 961

Spain, B. F. H.
Campbell Co.
CODE SECTION 130
(For Those Already Enrolled.)
CS No. 3443
DISABLED
SOLDIER'S PENSION.
1901.
Name B. F. H. Spain
County Campbell
Disability arm wound
Amount, \$ 50.00
3/21
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
J. J. Stephens
Chas. W. Harrison, State Printer, Atlanta.
No data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

Spier, B. F. K.
Campbell Co.
 COOR SECTION 1900
 (For These Already Enrolled.)
CS No. 1650
INVALID
SOLDIER'S PENSION.
1900.
 Name *B. F. K. Spier*
 County *Campbell*
 Disability *arm*
 Amount, \$ *50*
 Warrant issued *July 9 1900.*
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
J. T. Stephens
 CHAS. W. BARTHOLOMEW, CLERK.
No date 960

Spier, B. F. K.
Campbell Co.
 COOR SECTION 1901
 (For These Already Enrolled.)
CS No. 34443
DISABLED
SOLDIER'S PENSION.
1901.
 Name *B. F. K. Spier*
 County *Campbell*
 Disability *arm wound*
 Amount, \$ *50*
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
J. T. Stephens
 CHAS. W. BARTHOLOMEW, CLERK.
No date

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears *B. F. K. Spier* 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 *16* day of *January* 1837; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *54*, of *53*th Regiment of *Georgia* Volunteers, *Smith's* Brigade; that whilst engaged in such military service in the State of *Virginia*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows:

In the battle of the wilderness in the State of Virginia was shot with a minnie ball in the right arm just above the wrist joint and bruising the bone and dislocating the wrist joint leaving the wrist & hand drawn so that can't work with said arm to make a living.

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1900. I have heretofore under said law as a resident of *Campbell* County been allowed an invalid pension of *Twenty* Dollars, for the year 1899.

Sworn to and subscribed before me, this, *13* day of *February* 1900, *B. F. K. Spier* POST OFFICE *Garrettsville Ga*

J. T. Stephens - Ordinary
 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,

Campbell County.

I, *J. T. Stephens* Ordinary of said County, do certify that I am well acquainted with *B. F. K. Spier* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *23* day of *February* 1900.

J. T. Stephens
 Ordinary *Campbell* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears *B. F. K. Spier* 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 *16* day of *January* 1837; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *54*, of *53*th Regiment of *Georgia* Volunteers, *Smith's* Brigade; that whilst engaged in such military service in the State of *Virginia*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows:

I was shot through right wrist by a minnie ball while in position at base of the Wilderness and bone broke bone of arm, dislocating numerous of bones and wrist on account of and wound as stated I am unable to perform ordinary manual labor

Deponent makes application for the pension to which he is entitled for year ending October 28th, 1901. I have heretofore under said law as a resident of *Campbell* County been allowed an invalid pension of *Fifty* Dollars, for the year 1900.

Sworn to and subscribed before me, this, *25* day of *July* 1901, *B. F. K. Spier* POST OFFICE *Garrettsville Ga*

W. S. Mc Lorie, Clerk
 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,

Campbell County.

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

Given under my official signature and seal, this *25* day of *July* 1901.

W. S. Mc Lorie
 Ordinary *Campbell* County.

POWER OF ATTORNEY

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Campbell County been allowed an invalid pension of Twenty \$50.00 Dollars, for the year 1899.

Sworn to and subscribed before me, this, the 23 day of February, 1900. POST OFFICE Fairburn Ga

J. J. Stephens - Ordinary

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

STATE OF GEORGIA,

Campbell County.

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

Given under my official signature and seal, this 23 day of February, 1900.

J. J. Stephens
Ordinary Campbell County.



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

Sworn to and subscribed before me, this the 25 day of July, 1901. Postoffice Fairburn Ga

W. S. Mc Lorie, Ord.

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,

Campbell County.

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

Given under my official signature and seal, this 25 day of July, 1901.

W. S. Mc Lorie
Ordinary Campbell County.



BOYER OF ALLOKIA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, B. F. R. Speir hereby authorize J. J. Stephens of Fairburn Ga to receive and receipt for the pension paid hereon and request that he remit same to me by hand at Fairburn Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 14th day of July, 1902.

Executed in presence of
W. S. Mc Lorie, Ord.

B. F. R. Speir [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, B. F. R. Speir hereby authorize W. S. Mc Lorie of Fairburn Ga to receive and receipt for the pension paid hereon and request that he remit same to me by hand at Fairburn Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 16 day of July, 1903.

Executed in presence of
J. H. Mc Lorie, Ord.

B. F. R. Speir [L. S.]

(FOR THOSE ALREADY ENROLLED.)

No. 608

DISABLED
SOLDIER'S PENSION
1902.

Name B. F. R. Speir
County Campbell
Co. "C" Regiment 53
Disability from Wound
Amount, \$ 50.00

1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

J. J. Stephens
Gen. W. Harrison, State Printer, Atlanta.

W. S. Mc Lorie

Speir B. F. R.
Campbell County

(FOR THOSE ALREADY ENROLLED.)

No. 608

DISABLED
SOLDIER'S PENSION
1903.

Name B. F. R. Speir
County Campbell
Co. "C" Regiment 53
Disability from Wound
Amount, \$ 50.00

1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

J. J. Stephens
Gen. W. Harrison, State Printer, Atlanta.

W. S. Mc Lorie

Spier, B. F. H.
Campbell Co

CODE SECTION 100.
(FOR THOSE ALREADY ENROLLED.)

No. *608*

**DISABLED
SOLDIER'S PENSION
1902.**

Name *B. F. H. Spier*
County *Campbell*
Co. *"C"* Regiment *53*
Disability *from wound*
Amount, \$ *120* 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
B. F. H. Spier
Gen. W. Harrison (See Private's Name).

Spier, B. F. H.
Campbell County
C33

CODE SECTION 100.
(FOR THOSE ALREADY ENROLLED.)

No. *608*

**DISABLED
SOLDIER'S PENSION
1903.**

Name *B. F. H. Spier*
County *Campbell*
Co. *"C"* Regiment *53*
Disability *from wound*
Amount, \$ *120* 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
B. F. H. Spier
Gen. W. Harrison (See Private's Name).

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Campbell County.

Personally appears *B. F. H. Spier* 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 *16* day of *January* 18*37*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *"C"*, of *53*th Regiment of *Georgia* Volunteers, *Spier*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows:
I was shot through the right wrist by a Minnie Ball while in service at the battle of the Milledgeville, said ball breaking through the bone and having been over of joint at wrist; on account of said wound so near and so close to the joint I was unable to perform ordinary manual labor in to serve a good part for any one.

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 *Campbell* County, been allowed an invalid pension of *Fifty* Dollars, for the year 1901.

Sworn to and subscribed before me, this *14* day of *January* 1902. *B. F. H. Spier*
M. S. McLaughlin Only

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,

Campbell County.

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

Given under my official signature and seal, this *14* day of *January* 1902.

M. S. McLaughlin
Ordinary *Campbell* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Campbell County.

Personally appears *B. F. H. Spier* 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 *16* day of *January* 18*37*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *"C"*, of *53*th Regiment of *Georgia* Volunteers, *Spier*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows:
I was shot through the right wrist by a Minnie Ball while in service at the battle of the Milledgeville, said ball breaking through the bone and having been over of joint at wrist; on account of said wound so near and so close to the joint I was unable to perform ordinary manual labor in to serve a good part for any one.

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 *Campbell* County, been allowed an invalid pension of *Fifty* Dollars, for the year 1902.

Sworn to and subscribed before me, this *16* day of *January* 1903. *B. F. H. Spier*
M. S. McLaughlin Only

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,

Campbell County.

I, *M. S. McLaughlin* Ordinary of said County, do certify that I am well acquainted with *B. F. H. Spier* 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 *16* day of *January* 1903.

M. S. McLaughlin
Ordinary *Campbell* County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1903.

To receive a pension for myself
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 Campbell County, been allowed an invalid pension of Fifty Dollars, for the year 1901.
Sworn to and subscribed before me, this 14 day of July, 1902. B. F. H. Spier
M. S. McLaughlin Only Post-office Fort Worth, Tex.

STATE OF GEORGIA,
Campbell County.

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

Given under my official signature and seal, this 14 day of July, 1902.
M. S. McLaughlin
Ordinary Campbell County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

DO NOT WRITE IN THESE SPACES

To receive a pension for myself
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 Campbell County, been allowed an invalid pension of Fifty Dollars, for the year 1902.
Sworn to and subscribed before me, this 16 day of July, 1903. B. F. H. Spier
M. S. McLaughlin Only Post-office Fort Worth, Tex.

STATE OF GEORGIA,
Campbell County.

I, M. S. McLaughlin Ordinary of said County, do certify that I am well acquainted with B. F. H. Spier 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 16 day of July, 1903.
M. S. McLaughlin
Ordinary Campbell County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, B. F. H. Spier hereby authorize M. S. McLaughlin of Fort Worth, Tex. to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at Fort Worth, Tex.

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 27 day of July, 1904.
B. F. H. Spier [L. S.]

Executed in presence of
M. S. McLaughlin Only

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, B. F. H. Spier hereby authorize M. S. McLaughlin of Fort Worth, Tex. to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at home

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of July, 1905.
B. F. H. Spier [L. S.]

Executed in the presence of
J. K. McLaughlin Only

DISABLED SOLDIER'S PENSION 1904.

Name B. F. H. Spier
County Campbell
Co. 16 Regiment 50
Disability from 1901
Amount, \$ 50.00 1904.
JOHN W. LINDSEY
Commissioner of Pensions.
WARRANT HANDLED TO
M. S. McLaughlin
Gen. W. H. Hutton, State Printer, Atlanta.

no data

DISABLED SOLDIER'S PENSION 1905.

Name B. F. H. Spier
County Campbell
Co. 16 Regiment 50
Disability from 1901
Amount, \$ 50.00 1905.
JOHN W. LINDSEY
Commissioner of Pensions.
WARRANT HANDLED TO
M. S. McLaughlin
Gen. W. H. Hutton, State Printer, Atlanta.

6/1/05 no date

Sperry, B. F. K.
Campbell County
 (FOR THOSE ALREADY ENROLLED.)
 No. 1403
 DISABLED
 SOLDIER'S PENSION
 1904.
 Name *B. F. K. Sperry*
 County *Campbell*
 Co. *16* Regiment *53*
 Disability *Long Wounded*
 Amount, \$ *50.00*
 1904.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
B. F. K. Sperry
 Geo. W. Harrison, State Printer, Atlanta.

Sperry, B. F. K.
Campbell County
 (FOR THOSE ALREADY ENROLLED.)
 No. 1404
 DISABLED
 SOLDIER'S PENSION
 1905.
 Name *B. F. K. Sperry*
 County *Campbell*
 Co. *16* Regiment *53*
 Disability *Long Wounded*
 Amount, \$ *50.00*
 1905.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
B. F. K. Sperry
 Geo. W. Harrison, State Printer, Atlanta.

Sperry, B. F. K.
Campbell County
 (FOR THOSE ALREADY ENROLLED.)
 No. 1405
 DISABLED
 SOLDIER'S PENSION
 1906.
 Name *B. F. K. Sperry*
 County *Campbell*
 Co. *16* Regiment *53*
 Disability *Long Wounded*
 Amount, \$ *50.00*
 1906.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
B. F. K. Sperry
 Geo. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Campbell County.

Personally appears *B. F. K. Sperry* 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 *16* day of *January* 18*67*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *16*, of *53*th Regiment of *Georgia* Volunteers *Sperry*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2* day of *May* 186*4*, he was wounded, injured or diseased as follows: *I was shot through the right arm just above the wrist joint by a Minnie Ball when in the fort service at the battle of the Wilderness - said ball breaking bones in said right arm - on account of said wound I am unable to perform ordinary manual labor*

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 *Campbell* County, been allowed an invalid pension of *Fifty* Dollars, for the year 1903.

Sworn to and subscribed before me, this the *27* day of *January* 1904. *B. F. K. Sperry*
N. S. McLaughlin, Ord. Post-office *Lawrenceville*

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,
Campbell County.

I, *N. S. McLaughlin* Ordinary of said County, do certify that I am well acquainted with *B. F. K. Sperry* 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 *January* 1904.
N. S. McLaughlin
 Ordinary *Campbell* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Campbell COUNTY.

Personally appears *B. F. K. Sperry* 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 *16* day of *January* 18*67*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *16*, of *53*th Regiment of *Georgia* Volunteers *Sperry*'s Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *2* day of *May* 186*4*, he was wounded, injured or diseased as follows: *I was shot through the right arm just above the wrist joint by a Minnie Ball when in the fort service at the battle of the Wilderness - on account of said wound I am unable to perform ordinary manual labor*

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 *Campbell* County, been allowed an invalid pension of *Fifty* Dollars, for the year 1904.

Sworn to and subscribed before me, this the *12* day of *January* 1905. *B. F. K. Sperry*
N. S. McLaughlin, Ord. Post-office *Lawrenceville*

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,
Campbell COUNTY.

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

Given under my official signature and seal, this *12* day of *January* 1905.
N. S. McLaughlin
 Ordinary *Campbell* County.

NOTE.—Fill all blanks and of Company and Regiment.
 NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

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 Campbell County, been allowed an invalid pension of Twenty Dollars, for the year 1903.

Sworn to and subscribed before me, this the 27 day of January, 1904. N. S. McLoon, Ord. Post-office Lawrence Ga.

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,
Campbell County.

I, N. S. McLoon Ordinary of said County, do certify that I am well acquainted with B. F. K. Spier 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 January, 1904.

N. S. McLoon
Ordinary, Campbell County.

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

NOTE.—All vouchers and affidavits must bear date after January 1, 1904.

POWER OF ATTORNEY

STATE OF GEORGIA,
Campbell County.

I, B. F. K. Spier hereby authorize N. S. McLoon of Lawrence Ga. to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at home

In Witness Whereof, I have hereunto set my hand and seal, this 22 day of January, 1906.

B. F. K. Spier [L. S.]

Executed in the presence of

J. H. Webb, Secy.

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 Campbell County, been allowed an invalid pension of Twenty Dollars, for the year 1904.

Sworn to and subscribed before me, this the 12 day of January, 1905. N. S. McLoon, Ord. Post-office Lawrence Ga.

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,
Campbell County.

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

Given under my official signature and seal, this 12 day of January, 1905.

N. S. McLoon
Ordinary, Campbell County.

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

NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, B. F. K. Spier hereby authorize N. S. McLoon of Lawrence Ga. to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at home

In Witness Whereof, I have hereunto set my hand and seal, this 3rd day of January, 1907.

B. F. K. Spier [L. S.]

Executed in presence of

J. H. Webb, Secy.

Cons. Section 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 234

DISABLED SOLDIER'S PENSION 1906.

Name B. F. K. Spier
County Campbell
Co. "C" Regiment 53rd
Disability from wound
Amount, \$ 50.00

JAN 1 1906
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Spier

THE PENSIONER'S NAME MUST BE WRITTEN IN THIS SPACE.

no data

Cons. Section 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 234

DISABLED SOLDIER'S PENSION 1907.

Name B. F. K. Spier
County Campbell
Co. "C" Regiment 53rd
Disability from wound
Amount, \$ 50.00

JAN 1 1907

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

THE PENSIONER'S NAME MUST BE WRITTEN IN THIS SPACE.

no data

Spin, B. F. K.
Campbell Co.,

One Service 1906.
(FOR THOSE ALREADY ENROLLED.)

No. *534*

**DISABLED
SOLDIER'S PENSION
1906.**

Name *B. F. K. Spin*
County *Campbell*
Co. *"C"* Regiment *53rd Regt.*
Disability *from injury*
Amount, \$ *50.00*

JAN 1 1906.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
only

no date

Spin, B. F. K.
Campbell Co.,

One Service 1907.
(FOR THOSE ALREADY ENROLLED.)

No. *534*

**DISABLED
SOLDIER'S PENSION
1907.**

Name *B. F. K. Spin*
County *Campbell*
Co. *"C"* Regiment *53rd*
Disability *from injury*
Amount, \$ *50.00*

1907.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDLED TO
only

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Campbell County.

Personally appears *B. F. K. Spin* 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 *16* day of *July* 18*76*; that he enlisted in the military service of the Confederate States, (or of the State of *GA*) during the war between the States, and served as a *private* in Company *"C"*, of *53*th Regiment of *GA* Volunteers *Spin*'s Brigade; that whilst engaged in such military service in the State of *GA*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows: *I was shot thro' right wrist by a Minnie ball while in Camp. During a battle of the Confederates; ball hole broke my right arm at wrist joint, caused pain & trouble for the rest of my wound & am unfit for training. We were losing.*

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 *Campbell* County, been allowed an invalid pension of *2.44* Dollars, for the year 1905.

Sworn to and subscribed before me, this *22* day of *July* 1906.
M. S. McLoon, Only Post-Office *Spin* *GA*

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,

Campbell County.

I, *M. S. McLoon* Ordinary of said County, do certify that I am well acquainted with *B. F. K. 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 *July* 1906.
M. S. McLoon Ordinary *Campbell* County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Campbell County.

Personally appears *B. F. K. Spin* 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 *16* day of *July* 18*76*; that he enlisted in the military service of the Confederate States (or of the State of *GA*) during the war between the States, and served as a *private* in Company *"C"*, of *53*th Regiment of *GA* Volunteers *Spin*'s Brigade; that whilst engaged in such military service in the State of *GA*, on the *2* day of *May* 1864, he was wounded, injured or diseased as follows: *I was shot thro' the right wrist by a Minnie ball at battle of the Red Bank, ball broke my arm at wrist joint, caused pain & trouble for the rest of my wound & am unfit for training. We were losing.*

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 *Campbell* County, been allowed an invalid pension of *2.44* Dollars, for the year 1906.

Sworn to and subscribed before me, this *22* day of *July* 1907.
M. S. McLoon, Only Postoffice *Spin* *GA*

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,

Campbell County.

I, *M. S. McLoon* Ordinary of said County, do certify that I am well acquainted with *B. F. K. 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 *July* 1907.
M. S. McLoon Ordinary *Campbell* County.



Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

day of July 14 1864; that he enlisted in the military service of the Confederate States, (or of the State of Georgia) during the war between the States, and served as a Private in Company "C" of 10th Regiment of Georgia Volunteers 1st's Brigade; that whilst engaged in such military service in the State of Georgia, on the 2 day of May 1864, he was wounded, injured or diseased as follows: I was shot thro' right wrist by a Minnie rifle ball while in Company "C" at battle of the Wilderness; said ball broke my bone of said wrist and causing end of said bone to protrude out of said wound; I am unable to do ordinary manual labor

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 Campbell County, been allowed an invalid pension of \$4.40 Dollars, for the year 1905.

Sworn to and subscribed before me, this the 22 day of January 1906.
M. S. McFosin, Clerk

B. F. McSpier
Post-Office Said County

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,

Campbell County.

I, M. S. McFosin Ordinary of said County, do certify that I am well acquainted with B. F. McSpier 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 22nd day of January 1906.
M. S. McFosin
Ordinary Campbell County.

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

federate States (or of the State of Georgia) during the war between the States, and served as a Private in Company C, of 10th Regiment of Georgia Volunteers 1st's Brigade; that whilst engaged in such military service in the State of Georgia, on the 2 day of May 1864, he was wounded, injured or diseased as follows: I was shot thro' the right wrist by a Minnie rifle ball at battle of the Wilderness, said ball broke my bone of said wrist and causing end of said bone to protrude out of said wound; I am unable to do ordinary manual labor

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 Campbell County, been allowed an invalid pension of \$4.40 Dollars, for the year 1906.

Sworn to and subscribed before me, this the 2nd day of January 1907.
M. S. McFosin, Clerk
Postoffice Said County

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,

Campbell County.

I, M. S. McFosin Ordinary of said County, do certify that I am well acquainted with B. F. McSpier 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 2nd day of January 1907.
M. S. McFosin
Ordinary Campbell County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

Audited 1891.

COMPTROLLER GENERAL.

Spier, B. F. K.
Campbell

1891.

Maimed Soldiers.

Voucher No. 537

Amount \$ 50

Paid to B. F. K. Spier

For Arm dis

Dec 11 1891.

Included in warrant No. _____

issued to Treasurer,

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

J. H. Ellington

Amount \$ 00
Paid to B. F. K. Speer
For Arm dis

Dec 11 1891.

Included in warrant No. _____
issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

J. H. Ellington

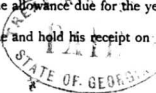
1891.
No. 537

STATE OF GEORGIA.
EXECUTIVE DEPARTMENT. }

Atlanta, Ga. Dec 11 1891.

Mr. B. F. K. Speer of the County
Campbell having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Arm dis
He is entitled to receive the sum of Fifty & 00/100 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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



H. J. Woodrum
GOVERNOR.

By the Governor.

W. H. Harrison
Sec'y EXECUTIVE DEPARTMENT.

\$ 50 ^a

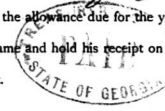
RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

Fifty & 00/100 Dollars,
per above voucher, this 11 of Dec 1891.

B. F. K. Speer
by Josiah A. Ellington attorney

Mr. B. F. K. Spier of the County
Campbell having filed his application in the Executive
 Department for an allowance under the Act approved October 24, 1887, as amended by Acts
 approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Arm dis
 He is entitled to receive the sum of Fifty + 00 Dollars
 for such disability, the same being the allowance due for the year ending October 24, 1891.

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



H. J. Northrup
 GOVERNOR.

By the Governor,

M. H. Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$ 50 ^a

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

Fifty + 00 Dollars,
 per above voucher, this 11 of July, 1891.

B. F. K. Spier
 by Josiah A. Ellington attorney

Audited Feb. 14 1889.

W. J. Campbell
 COMPTROLLER-GENERAL

Campbell

Maimed Soldiers.

Voucher No. 502

Amount. \$ 50

Paid to Benj. F. K. Spier
 For Right Arm
disabled
July 14, 1889.

Included in Warrant No.
 issued to Treasurer.

1889.

WARRANT CLERK.

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

B. F. K. Spier

Audited

18

COMPTROLLER-GENERAL.

Campbell

Maimed Soldiers.

Voucher No. 887

Amount \$ 50

Paid to Benj. F. K. Spier
 For Arm dis

July 11, 1890

Included in warrant No.
 issued to Treasurer.

18

WARRANT CLERK.

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

Spier

Amount \$ 50

Paid to *Benj. F. R. Spier*
For *Right Arm*
disabled
Feb'y 14 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK

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

J. M. A. Spier

COMPTROLLER-GENERAL

Amount \$ 50

Paid to *Benj. F. R. Spier*
For *Arm disa*
Feb'y 11 1890.

Included in warrant No.
issued to Treasurer.

1890.

WARRANT CLERK

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

Applicant

No. 502

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb'y 14 1889

Mr. *Benj. F. R. Spier* of the County
of *Campbell* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,

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

Right Arm Disabled
He is entitled to receive the sum of *Fifty 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/100 Dollars.
per above voucher, this *14* of *Feb'y* 1889.

J. W. A. Spier,
for
B. F. R. Spier.

No. 887

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb'y 11 1890

Mr. *Benj. F. R. Spier* of the County
of *Campbell* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,

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

Arm disabled
He is entitled to receive the sum of *Fifty* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.

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

By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty Dollars.
per above voucher, this *11* of *Feb'y* 1890.

Benj. F. R. Spier.

Department of the Interior under the Act approved October 24, 1891, as amended by Act,
Dec. 24, 1888, and the same having been allowed for
Right Arm Disabled
He is entitled to receive the sum of *Fifty 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.
The Treasurer will pay the same and hold his receipt on this voucher, and return same to
Executive Department for warrant.

By the Governor,
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

50
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Fifty 00/100 Dollars.
per above voucher, this *14* of *July* 1889.
J. W. A. Speir,
for
B. F. K. Speir.

approved, Dec. 24, 1888, and the same having been examined and allowed for
Arm disabled
He is entitled to receive the sum of *Fifty* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.
The Treasurer will pay the same and hold his receipt on this voucher, and return same
to Executive Department for warrant.

By the Governor,
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

50
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Fifty Dollars.
per above voucher, this of *Feb* 1890
Benj. F. K. Speir.

C. 5 D
NAME, Speir, Benjamin F. K. YEAR 1890 COUNTY Campbell
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?
RELEASED.
WHEN AND WHERE SURRENDERED?
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?
DIED, WHEN AND WHERE?
BURIED.
WITNESSES. None.

G. C. B. Amc
NAME, Speit, Benj. F.K. YEAR 1889 COUNTY Campbell
WHEN AND WHERE BORN?
ENLISTED WHEN AND WHERE?
RANK.
COMPANY AND REGIMENT? Private C ? 53rd. Regt. Georgia Vols. Sim's Brigade.
NAME OF CAPTAIN AND COLONEL?
WOUNDED? Wilderness, Va. May 2nd. 1864. Shot through the arm just above wrist.
CAPTURED, WHEN AND WHERE?
RELEASED.
WHEN AND WHERE SURRENDERED?
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?
DIED, WHEN AND WHERE?
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?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. None.

NAME, Speit, Benj. F.K.

YEAR 1889 COUNTY Campbell

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

RANK.

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

NAME OF CAPTAIN AND COLONEL?

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

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

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

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Campbell COUNTY,

I, W. D. McGinnis

Ordinary of said County, do certify that I know Mrs. Mary 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 was on the 1910 day of July 1922.

That I also know John W. Spence

both of the foregoing were truly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 12th day of July 1922.
(SEAL) W. D. McGinnis Ordinary.
Campbell County.

NOTES: 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following order: You shall give will be the truth, so help me God.
2. Additional affidavits may be attached if such persons are insufficient.
3. Affidavits shall be sworn to by the applicant and the witness.
4. Only widows who married prior to first January, 1865, are eligible.
5. Affidavits shall be sworn to by the applicant and the witness.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—witnesses are made no proof of service and was not required to do so.

W. D. McGinnis
Campbell County
No. Q-53

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

County Campbell
Name Spence Elizabeth Spence
Widow of J. A. Spence
Company "I", and "G"
Regiment 10th & 53rd respectively
Approved John W. Spence
Commissioner of Pensions
11-13-22

E. W. Lindsey
Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.
7/12-1922

IS CERTIFICATE

Ordinary of said County, do certify that I
the applicant for this pension, and that she is the
a bona fide continuing resident of said County and was
1920

Witness me to marriage, and I also know
that both of the foregoing were duly sworn by me
they are truthful and trustworthy and their statements

After this 12th day of July 1922
J. W. Lindsey
Commissioner of Pensions
Ordinary:
Campbell County.

any shall swear applicant and the witness in the following words:
I, J. W. Lindsey, Commissioner of Pensions, do hereby certify that
I have made to each of the questions asked you and the evidence
before me is true and correct.
If not, prove marriage, by some person, or by general
Blue Application Blank and state and prove full term of husband's
and you are not required to do so.

Company "I", and "G"
Regiment 10th & 53rd respectively
Approved John W. Lindsey
Commissioner of Pensions
11-13-22
J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co. State Printers, Atlanta.
7/12-1922

(DUPLICATE,)

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
Campbell

COUNTY.

I, W. S. McLarin, Ordinary of said County, do certify that I
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 was
on the 11th day of July, 1922.

That I also know J. W. Rivers witness as to marriage, and I also know
Mrs. Epsey Elizabeth Spence that both of the foregoing were duly sworn by me
before signing the respective affidavits, and that they are truthful and trustworthy and their statements
are entitled to full faith and credit.

Sworn under my hand and official seal of office this 11th day of July, 1922.

(SEAL) J. W. Rivers Ordinary.
Campbell County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
reputation.
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.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
Campbell

COUNTY.

I, M. D. McLean, Ordinary of said County, do certify that I
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 was
on the 12th day of July, 1922.

That I also know J. W. Rivers witness as to marriage, and I also know
that both of the foregoing were duly sworn by me
before signing the respective affidavits, and that they are truthful and trustworthy and their statements
are entitled to full faith and credit.

Sworn under my hand and official seal of office this 12th day of July, 1922.

(SEAL) M. D. McLean Ordinary.
Campbell County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
reputation.
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.

Spence Epsey Elizabeth
DUPLICATED
Campbell County
No. 9-53 (See 1-10)
Widow's Application
To Be Put on Roll in Her Own Right When
Husband Was on the Indian Roll or
Put on Under Act of July 11, 1910.
As Amended by Act of 1919.
County Campbell
Name Epsey Elizabeth Spence.
Widow of J. A. Spence.
Company "I" and "G"
Regiment 10th & 53rd Ga. Vol.
Approved John W. Lindsey
Commissioner of Pensions
674-23.
J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co. State Printers, Atlanta.
7/12-1922

Spence Epsey Elizabeth
DUPLICATED
Campbell County
No. 9-53.
Widow's Application
To Be Put on Roll in Her Own Right When
Husband Was on the Indian Roll or
Put on Under Act of July 11, 1910.
As Amended by Act of 1919.
County Campbell
Name Epsey Elizabeth Spence
Widow of J. A. Spence
Company "I" and "G"
Regiment 10th & 53rd respectively
Approved John W. Lindsey
Commissioner of Pensions
674-23.
J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co. State Printers, Atlanta.
7/12-1922

Spence to pay Elizabeth
(DUPLICATE)
CAMPBELL

No. 53 (See 1-10)
Widow's Application
To be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1919.
As Amended by Act of 1919.

County Campbell

Name, Eliza Elizabeth Spence.

Widow of J. A. Spence.

County "I" and "g"

Regiment 10th & 53rd Ca. Vol.

Approved 10.10.22
John W. Clark

674-23.

g / 1919

W-100000
Commissioner of Pension

Boyd Printing Co., State Printers, Atlanta.

Manned 1019

Wm. S. Davis & Co. Limited
Campbell, Ontario

9-570.

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910—
As Amended by Act of 1919.

County Campbell

Name Dorsey Elizabeth Spence

Widow of J. A. Spence

Company "I," and "G"

Regiment 10th & 53rd respectively

Approved John W. Stewart

Commissioner of Pensions.
11-18-22

E. J. Lindsey

J. W. LINDSEY,
Commissioner of Pensions.

Burd Printing Co., State Printers, Atlanta.

(DUPLICATE,)

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,
Campbell }
COUNTY }
Personally before me comes Mrs. Esey Elizabeth Spence of said County,
who, after being duly sworn, says that she is the widow of J. A. Spence
to whom, in the County of Fayette State of Georgia, she was married on
the 9th day of November 18 62, and that she remained his wife, and resided with him to the
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 \$125.00 in Campbell County for 1921 per annum, on account of being a soldier in
Company "I" and "G" Regiment 10th & 53rd Ga. Vol. (Volunteers or State Militia)
That she is now a bona fide resident citizen of said County of Campbell and she
has so continuously resided since ~~1922~~ about 1895.

Sworn to and subscribed before me, this the
11th day of July, 1922.
M. M. Foxie Ordinary
of Campbell County.
(SEAL)

Affidavit of Witnesses to Prove Marriage and to Whom.
Date of Death of Husband
 (Duplicate.)

STATE OF GEORGIA, (Duplicate.)
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 own personal knowledge Mrs. Essey 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 62, and that she and he had resided together as man 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 _____ when he died.

Sworn ~~to~~ and subscribed before me, this the
11th day of July, 1922.
M. & W. Lorie Ordinary *J. W. Rivers*
of Campbell County.
(SEAL)

WIDOW'S AFFIDAVIT

STATE OF GEORGIA
Campbell COUNTY. }
Personally before me, *Mrs. Mary Elizabeth Spencer* of said County,
who, after being duly sworn, says that she is the widow of *J. A. Spencer*
to whom, in the County of *Fayette* State of *Georgia* she was married on
the *9th* day of *November* 186*8*, and that she remained his wife, and resided with him to the
date of his death on *Feb. 26*, 188*2* 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 *Independent* Pension Roll of the State and paid a pension
of *\$12.00* in *Campbell* County for 1881 per annum, on account of being a soldier in
Company *F* *10th Regt* *55th* Regiment *Georgia* (Volunteers on *Sept 24th* in)
That she is now a bona fide resident citizen of said County of *Campbell* and she
has so continuously resided since *Feb* day of *1880*.

Sworn to and subscribed before me, this the
11th day of July, 1922.
Mr. H. K. Loring, Ordinary
of Cass & Bell County.
(SEAL)

Affidavit of Witnesses to Prove Marriage and to Whom.
Date of Death of Husband

STATE OF GEORGIA,
Cowan } COUNTY }
Personally before me comes *J. M. Rivers* known to be
responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
of their own personal knowledge *Mrs. Mary J. White* who made the foregoing
affidavit, is the lawful widow of *J. H. White* who died in *Cowan*
County in said State of *Georgia* on *26th* day of *Feb* 19 *22*
and that she has not since remarried. That she became the wife of *J. H. White*
of the *9th* day of *November* 18 *69*, and that she and he had resided together as man and
wife continuously since *9th* day of *Nov* 18 *62*, and that she *he* was
the same man who was on the pension roll of said State — — from *Cowan*
County *Georgia* when he died.

Sworn up and subscribed before me, this the
12th day of July 1922
W. M. Gorman Ordinary
of Lawrence County.
(SEAL)

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 \$125.00 in Campbell County for 1921 per annum, on account of being a soldier in Company "I" and "G" Regiment 10th & 53rd Ga. / (Volunteers or State Militia) Vol. 10th & 53rd Ga.

That she is now a bona fide resident citizen of said County of Campbell and she has so continuously resided since Feb. 26, 1868 about 1868.

Sworn to and subscribed before me, this the 11th day of July, 1922.
Mr. D. W. Lorie Ordinary
 of Campbell County.
 (SEAL)

Epsy Elizabeth Spence

Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband (Duplicate.)

STATE OF GEORGIA, 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 of their own personal knowledge Mrs. Epsy 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., 1922, and that she has not since remarried. That she became the wife of J. A. Spence on the 9th day of Nov., 1868, and that she and he had resided together as man and wife continuously since 9th day of Nov., 1868, 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 Georgia when he died.

Sworn to and subscribed before me, this the 11th day of July, 1922.
Mr. D. W. Lorie Ordinary
 of Campbell County.
 (SEAL)

J. W. Rivers

date of his death, 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 \$125.00 in Campbell County for 1921 per annum, on account of being a soldier in Company "I" & "G" 10th & 53rd Regiment Georgia (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of Campbell and she has so continuously resided since Feb. 26, 1868 day of Feb., 1868.

Sworn to and subscribed before me, this the 11th day of July, 1922.
Mr. D. W. Lorie Ordinary
 of Campbell County.
 (SEAL)

Epsy Elizabeth Spence

Affidavit of Witnesses to Prove Marriage and to Whom. Date of Death of Husband

STATE OF GEORGIA, 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 of their own personal knowledge Mrs. Epsy Elizabeth Spence, who made the foregoing affidavit, is the lawful widow of J. A. Spence who died in Campbell County in said State of Georgia on 26th day of Feb., 1922, and that she has not since remarried. That she became the wife of J. A. Spence on the 9th day of Nov., 1868, and that she and he had resided together as man and wife continuously since 9th day of Nov., 1868, and that the he was the same man who was on the pension roll of said State Georgia from Campbell County Georgia when he died.

Sworn to and subscribed before me, this the 12th day of July, 1922.
Mr. D. W. Lorie Ordinary
 of Campbell County.
 (SEAL)

J. W. Rivers

Spence, Epsy Elizabeth

For CAMPBELL County

1925

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Mr. D. W. Lorie Ordinary

For Mrs. Epsy Elizabeth Spence

Date of Death Feb. 19th, 1922.

Amount \$ 100.00

Approved and ordered paid

APR 12

Commissioner of Pensions

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

UNION CITY, GA. Feb 19, 1923

Mrs. W. R. Spence
Thaisburg Ga

HOLSOMBACK CASKET CO. FUNERAL DIRECTORS AND EMBALMERS

PROMPT SERVICE DAY OR NIGHT

PHONE 40

1 Casket	10.00
1 Burial dress	20.00
for Mrs. Epsy Elizabeth Spence	
M. W. Holsomback	

Feb 23, 1923
 Received of Mrs. W. R. Spence
one hundred and twenty five Dollars
in full settlement of funeral expenses
\$125.00 Holsomback Casket Co.

responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
 his own personal knowledge Mrs. Epsy Elisabeth 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. 1922,
 and that she has not since remarried. That she became the wife of J. A. Spence on
 the 9th day of Nov. 1862, and that she and he had resided together as man and
 wife continuously since 9th day of Nov. 1869, 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 ----- when he died.

Sworn to and subscribed before me, this the
11th day of July, 1922.
M. D. McFarrie Ordinary
 of Campbell County.
 (SEAL)

J. M. Rivers

Personally before me comes J. M. Rivers known to be
 responsible and truthful persons, residing in said County, who after having been duly sworn, say: that
 of their own personal knowledge Mrs. Epsy Elisabeth Spence, who made the foregoing
 affidavit, is the lawful widow of J. A. Spence who died in Campbell
 County in said State of Georgia on 26th day of Feb. 1922,
 and that she has not since remarried. That she became the wife of J. A. Spence on
 the 9th day of Nov. 1862, and that she and he had resided together as man and
 wife continuously since 9th day of Nov. 1869, and that the said J. A. Spence was
 the same man who was on the pension roll of said State ----- from Campbell
 County Georgia ----- when he died.

Sworn to and subscribed before me, this the
12th day of July, 1922.
M. D. McFarrie Ordinary
 of Campbell County.
 (SEAL)

J. M. Rivers

Spence, Epsy Elisabeth

For CAMPBELL County

1925

**Application for Pension
 Due Deceased Pensioner**

(UNDER ACT 1919)
 (To pay expenses of last illness and funeral)

M. D. McFarrie Ordinary

For Mrs. Epsy Elisabeth Spence.

Date of Death Feb. 19th, 1925.

Amount \$ 100.00 400.00

Approved and ordered paid

APR 12 1925
Commissioner of Pensions

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

UNION CITY, GA. Feb 19 1925

M. D. McFarrie
Union City Ga

IN ACCOUNT WITH
HOLSOMBACK CASKET CO.
 FUNERAL DIRECTORS AND EMBALMERS
 PROMPT SERVICE DAY OR NIGHT
 PHONE 40

<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				
<u>100.00</u>	<u>100.00</u>				

Feb 23 1925
 Received of M. D. McFarrie
one hundred and twenty five Dollars
in full settlement of funeral and expenses
\$125.00 Holsomback Casket Co.

Amount \$ 100.00
Approved and ordered paid
APR 17 1925
W. A. Spence
Commissioner of Pensions

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

for Mrs. Epsey Elizabeth Spence
M. W. Holcomb
Feb 23 1925
Received of Mrs. W. A. Spence
one hundred and twenty five Dollars
in full settlement of funeral expenses
\$125.00 Holcomb & Co. Cash P. Co.

Application for Pension Due to a Deceased Pensioner

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

GEORGIA, Campbell County.

Personally before me, the Ordinary of said County, comes W. A. Spence

of said County, who, after being sworn, on oath says that he knew Mrs. Epsey Elizabeth Spence of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Campbell County, in this State, on the 19th day of February, 1925, and that a Pension of One Hundred (\$100.00) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner 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 \$125.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me
this 14th day of March, 1925
W. A. Spence, Ordinary
Campbell County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Campbell County.

I, W. A. Spence, 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 is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. Epsey Elizabeth 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 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 of Ordinary) W. A. Spence, Ordinary
Campbell County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, but not less than 12 months, and did not leave sufficient property to pay such expenses. THE WIDOW OF A SOLDIER, IF DEAD IN SERVICE, HAS PRIOR CLAIM OVER OTHER EXPENSES, AND MUST MAKE APPLICATION OF YELLOW BLANK.
- 2nd. Receipts showing expenses of last illness and funeral to be made out and attached to this blank, giving each item and the value of it, and with date.
- 3rd. Receipts showing amount to be paid only those connected with the last illness, just before death when pensioner grew worse to the end. Such receipts must be sworn to before the Ordinary, and in the following form: (Do not use the form: "Just, true, etc., we paid," etc.)
- 4th. The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of W. A. Spence, who died without leaving sufficient property to pay this bill.
- 5th. The Ordinary must see to it that each bill is properly legitimate in every respect, and properly sworn to, and all attached receipts to this blank, after this blank has been properly completed as indicated.
- 6th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money need be paid out until it is returned to you as your authority to make the payment.
- 7th. The Ordinary must pay out, as Ordinary, for the pension and then deliver the money himself and take receipt.
- 8th. Amount to be paid for the funeral must be paid to the Pension Department, giving the statement to the person who made the bill, or children, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.
- 9th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when filled, is filed out.

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.) W. A. Spence

Georgia, Campbell County.

Estate of Mrs. Epsey Elizabeth Spence, deceased,
1925. To W. A. Spence, Dr.

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.

W. A. Spence, Ordinary,
Campbell county, Georgia.

of said County, who, after being sworn, on oath says that he knew Mrs. Epsey Elizabeth Spence of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Campbell County, in this State, on the 19th day of February, 1925, and that a Pension of One Hundred (\$100.00) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner 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 \$125.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this 14th day of March, 1925.
Mr. W. A. Spence, Ordinary
Campbell County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Campbell County.

I, W. S. McLarin, 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 is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. Epsey Elizabeth 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 in said County for 1925, 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) Mr. W. A. Spence, Ordinary
Campbell County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, and had not been out of State longer than twelve months, and did not leave sufficient property to pay such expenses. THE WIDOW OF A PENSIONER, IF SHE IS LIVING, MAY PAID CLAIM OVER THESE EXPENSES AND MUST MAKE APPLICATION ON YELLOW BLANK.
- 2nd. Receipts showing amounts of bill items and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 3rd. Remaining accounts cannot be paid—only those connected with the last illness, paid before death when pensioner grew weak to the point of death.
- 4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the form: "Paid, here, due, no paid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without leaving sufficient property to pay this bill."
- 5th. The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without leaving sufficient property to pay this bill."
- 6th. The completed voucher—the blank and the bill—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 7th. The Ordinary does not pay out, as Ordinary, for the pension and then disburses the money himself and takes receipt.
- 8th. Except on bills for funeral expenses, the Pension Department, during the administration of every great detail. Pensioner's children, or administrators, must not charge the State for doing only what the law and common honesty demand of them.
- 9th. Return this application, and attached bills, with your final statement to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when filled, is filed out.

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.) W. A. Spence

Georgia, Campbell County.

Estate of Mrs. Epsey Elizabeth Spence, deceased,
1925. To W. A. Spence, Dr.

Mar. 14. 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.

Mr. W. A. Spence, Ordinary,
Campbell county, Georgia.

No. _____

INDIGENT PENSION,

1900.
1901.

Name J. B. Spencer

County Camphell

Co. D. 10

Approved 79534 1900

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Prison Agent.

9/14-1901

Pension Office - 10/1/05.

Not an aged man. Indigency is not such that he cannot earn a support at some kind of work other than men and labor.

J. W. Lindsey,
Com. of Pensions.

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.

J. W. Lindsey,
Com. of Pensions.

STATE OF GEORGIA.

Power of Attorney.

I, _____ County, }

being authorized

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

Witness my hand and seal, this _____ day of _____ 1900.

Executed in presence of _____

[L. 83]

JOHN W. LINDSEY,
Commissioner of Prisons.

61960
WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

7/14-1901

attorney.
at his recent name to
by
day of
1900
[L. 8.]
handy authorize

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Campbell COUNTY.

Personally came before me, W. S. McElorin and C. H. Danenfort, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully J. A. Spence, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Mr. Spence is 60 years of age. Suffered from hemorrhoids which at times renders him unable to do anything.

They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the
13 day of Sept 1900
W. S. McElorin
Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Campbell COUNTY.

I, W. S. McElorin, Ordinary in and for said County, hereby certify that the applicant J. A. Spence resides in said County, and has been a bona fide resident of this State since the ___ day of ___, 1900, and that the witnesses, viz: H. S. Rivers, C. H. Danenfort, M. S. McElorin and C. H. Danenfort M. S. 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 affidavit was read to the applicant and witnesses before same was signed.

I further certify that the tax digests of Campbell County show that applicant returned for taxation in his name in 1898 78 Dollars of property, and in 1899 45 Dollars of property.

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

Witness my hand and seal of office, this 13th day of Sept 1900.
W. S. McElorin
Ordinary,
of Campbell County.

NOTE.

1. 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."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Campbell COUNTY.

H. S. Rivers of said State and County, having been presented as a witness in support of the application of J. A. Spence for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? H. S. Rivers = In Campbell Co. Ga.
2. Are you acquainted with J. A. Spence, the applicant; if so, how long have you known him? Yes I know him about 40 years
3. Where does he reside, and how long and since when has he been a resident of this State? In Campbell Co. Ga. about 40 years, since 1860, being knowledge
4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted in 1861 at Fayetteville, Ga. in Co. I 10th Regt. Infantry in
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? About 23 months in Co. I 10th Regt. Infantry
7. When and where was his command surrendered? At Appomattox C. H. Va
8. Were you present when it surrendered? Yes Sir
9. Was applicant present? No Sir
10. If he was not present, where was he? At home wounded, so I found him
When did he leave his command? May 1864 For what cause? Wounded
By what authority he left? Conf. officer How do you know all of this? I served in 1861 with him, in power to put
11. What property, effects or income has the applicant? (Give your means of knowledge.) Little live stock worth about \$400 = I know in right of him
12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? No land and very about
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? None
14. What is the applicant's occupation and physical condition? Farming = His physical condition is very bad.
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes = on account physical debility.
16. How was he supported during the years 1898 and 1899? By his sons
17. What portion of his support for these two years was derived from his own labor or income? About 1/4 from labor = Had no income
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Has chronic rheumatism and is broken down generally in health to such extent that he cannot earn a support
19. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, (this) 13th day of Sept 1900.
W. S. McElorin Ordinary.
H. S. Rivers Witness.

STATE OF GEORGIA,
Campbell COUNTY.

I, M. S. McLorin, Ordinary in and for said County, hereby certify that the applicant J. A. Spence resides in said County, and has been a bona fide resident of this State since the _____ day of _____ and that the witnesses, viz: H. S. Rivers, C. B. Feltz, W. S. McLorin and C. H. Brown 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 have taken the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same was signed.

I further certify that the tax digests of Campbell County show that applicant returned for taxation in his name in 1898 _____ 78 _____ of property, and in 1899 _____ 45 _____ Dollars of property.

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

Witness my hand and seal of office, this _____ day of Sept 1899.
M. S. McLorin Ordinary,
of Campbell County.

NOTE.

1. 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."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

By what authority he left? Campbell office How do you know all of this? I served in war with Union Army from 1862 to 1865

11. What property, effects or income has the applicant? (Give your means of knowledge.) Little live stock worth about \$40.00 = I live in sight of him
12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? No land and very about \$40.00 to \$100.00 worth of personal property
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? None
14. What is the applicant's occupation and physical condition? Farming = His physical condition is very good.
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes = on account of physical disability
16. How was he supported during the years 1898 and 1899? By his sons
17. What portion of his support for these two years was derived from his own labor or income? About 1/4 from labor = Had no income
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Has chronic Rheumatism and is broken down generally in health to such extent that he cannot serve in any sort
19. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this _____ day of Sept 1900.
H. S. Rivers Witness.
M. S. McLorin Ordinary.

Questions for Applicant.

STATE OF GEORGIA,
Campbell County.

I, J. A. Spence of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and post office.) Spence - live in Campbell Co Ga = P.O. Fort Ben Hur Ga
2. How long and since when have you been a resident of this State? About 56 years = since 1843 at 1846
3. When and where were you born? July 9, 1841 in State of S.C.
4. When and where in what company and regiment did you enlist or serve? Enlisted in June 1861 at Fort Sumter in Co F 10th Regt. Cavalry 2nd Div. June 6, 1862 in Co F 10th Regt. Cavalry 2nd Div. in Ga
5. How long did you remain in such company and regiment? 12 Mo's or more in Co F 10th Regt. Cavalry 2nd Div. in Ga about 83 months in Co F 10th Regt. Cavalry
6. When and where was your company and regiment surrendered and discharged? I don't know because I was at home on a furlough wounded
7. Were you present with your company and regiment when it was surrendered? No Sir
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was at home, two months, given furlough on account of wound, by Conf. authorities
9. How much can you earn (gross) per annum by your own exertions or labor? Probably about \$50.00
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? 1st & 2nd grounds
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I have been unable to earn support for five years or more, chronic case of Rheumatism (have had for 15 years) and this disease oblige me to be unable to earn support
13. What property, real or personal, or income, do you possess, and its gross value? Some live stock worth about \$40.00 = Have no land & no income
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? About 75.00 worth of personal property in 1898 & 1899 = Had no income
15. In what County did you reside during those years, and what property did you then return for taxation? In Campbell Co Ga about 75.00 on one acre
16. How were you supported during the years 1898 and 1899? By what I could do with help of my sons
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About 75.00 or 100.00 = Contributed 25.00
18. What was your employment during 1898 and 1899? What pay did you receive in each year? Spent 6 months in prison = Had no pay
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes - Family consist of wife and one child - They are supported by their own hard labor - They have no home land
20. Are you receiving any pension? If so, what amount and for what disability? No Sir
21. Have you ever made an application for pension before? No Sir
22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the _____ day of Sept 1900.
M. S. McLorin Ordinary,
of Campbell County.

Applicant.

—
Tower

21st day of May 1904
W. S. McLaughlin Ordinary. H. S. Pioneer Witness.

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

© 2006 The Authors
Journal compilation © 2006 Blackwell Publishing Ltd

Every Question Must

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty?" Infirmary & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I am nearly 63 years old and have had Chronic Catarrh of the bladder for 15 years, which disease has entirely disabled me from doing any kind of work or calling. I can barely get up and sit down without pain.
13. What property, real and personal, or income, do you possess, and its gross value? I have no property at all except land for little 600 acres of land on which I have been 2 or 3 years ago when both died.
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? I had 1 horse & 1 cow in 1894 2 or 3 years ago when both died.
15. In what County did you reside during those years, and what property did you then return for taxation? Campbell County, about 700 in 1894 and 1901, 1902.
16. How were you supported during the years 1899, 1900, 1901 and 1902? Primarily by my own labor.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About 71-00 = Contributed about 21-00 by labor, no income.
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? I was a wood chopper on a farm. Received 400.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Yes - Consists of wife and a very feeble wife - We are both supported entirely by a grown son & have no other means of support. I will be 64 in 1904, my son be 20.
20. Are you receiving any pension? If so, what amount and for what disability? No.
21. Have you ever made an application for pension before? Yes
22. How many applications have you ever made and under what claim? One, under disability act in 1901.
- Sworn to and subscribed before me this 21 day of May, 1904. J. A. Spencer Applicant.
- Ordinary,
of Campbell County.

Pension Office, 7/15/04.

Applicant seems to be in the infirmity and poverty and cannot earn his support. His name value is \$100.00. He is a poor man. J. W. Lindsey, Comm. of Pensions.

INDIGENT PENSION

1904.

Name J. A. Spencer

County Campbell

Ca. 21-00 and 60-00 Reg.

Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

6/10/04
7/10/04

POWER OF ATTORNEY.

STATE OF GEORGIA.

Campbell COUNTY.

I, J. A. Spencer, hereby authorize Wm. L. Brown of Fairburn Ga to receive and receipt for the pension allowed, and request that he remit same to me at home by hand.

WITNESS my hand and seal, this 6 day of July, 1906. J. A. Spencer [L. S.]

Executed in the presence of

J. A. McClure Adl.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Campbell COUNTY.

I, J. A. Spencer, hereby authorize Wm. L. Brown of Fairburn Ga to receive and receipt for the pension allowed, and request that he remit same to me at home by hand.

WITNESS my hand and seal, this 6 day of July, 1907. J. A. Spencer [L. S.]

Executed in presence of

J. A. McClure Adl.

INDIGENT
SOLDIER'S PENSION
1906.

Name J. A. Spencer
County Campbell
Ca. 21-00 and 60-00 Reg. 10th
42nd 5th 9th Vol
WARRANT ISSUED 1

JAN 24 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Pension Office and Pension Co. Chas. W. Harrison, Sec.

no data

Spencer, J. A.,
Campbell Co.,

ORDINANCE 1284.
(FOR THOSE ALREADY ENROLLED)

No. 2074

INDIGENT
SOLDIER'S PENSION
1907.

Name J. A. Spencer
County Campbell
Ca. 21-00 and 60-00 Reg. 10th
42nd 5th 9th Vol
WARRANT ISSUED 1

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Pension Office and Pension Co. Chas. W. Harrison, Sec.

no data

Spencer, J. A.,
Campbell Co.,

Cons Section 1294.
(FOR THOSE ALREADY ENROLLED.)

No. *1228*

INDIGENT
SOLDIER'S PENSION
1906.

Name *J. A. Spencer*
County *Campbell*
Co. *"B"* Regiment *16th*
Co. 4th - 8th Regt
WARRANT ISSUED
JAN 24 1906.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
The Pensioners and Pensioners Co., Inc., W. H. HARRIS, Sec.

no data

Spencer, J. A.,
Campbell Co.,

Cons Section 1294.
(FOR THOSE ALREADY ENROLLED.)

No. *2074*

INDIGENT
SOLDIER'S PENSION
1907.

Name *J. A. Spencer*
County *Campbell*
Co. *"B"* Regiment *16th*
Co. 4th - 8th Regt
WARRANT ISSUED
1907.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
The Pensioners and Pensioners Co., Inc., W. H. HARRIS, Sec.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Campbell County.

Personally appears *J. A. Spencer* of *Campbell* County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the *9* day of *July* 1841; that he is *64* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *GA*) during the war between the States, and served for the term of *3 years* in Company *"B"*, of *10th* Regiment of *GA* *Vol 4 5th GA Co 4th*; that his physical condition is as follows: *I have piles & 1000 wounds in Camped Service*

that his property consists of the following items: *No property*

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

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

Sworn to and subscribed before me, this the *6* day of *July*, 1906. *J. A. Spencer*
W. L. Linn Ordinary.

State of Georgia,

Campbell County.

I, *W. L. Linn* Ordinary of said County, do certify that I am well acquainted with *J. A. Spencer* 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 *6* day of *July*, 1906. *W. L. Linn*
Ordinary, *Campbell* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Campbell County.

Personally appears *J. A. Spencer* of *Campbell* County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the *9* day of *July* 1841; that he is *65* years old and by occupation a *farmer*, that he enlisted in the military service of the Confederate States (or of the State of *GA*) during the war between the States, and served for the term of *3 years* in Company *"B"*, of *10th* Regiment of *GA* *Vol 4 5th GA Co 4th*; that his physical condition is as follows: *I have piles, Rheumatism & am/wounded in Camped Service*

that his property consists of the following items: *No property*

of the value of *no* Dollars. I am now earning by my labor, *no* 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 *Campbell* County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the *6* day of *July*, 1907. *J. A. Spencer*
W. L. Linn Ordinary.

State of Georgia,

Campbell County.

I, *W. L. Linn* Ordinary of said County, do certify that I am well acquainted with *J. A. Spencer* 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 *6* day of *July*, 1907. *W. L. Linn*
Ordinary, *Campbell* County.

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

Ordinary: Fill out above in full and send this blank to Pension Office for approval before you pay out the money, and then return it with your pay-rolls for permanent filing in the Pension Office.

Spence, J. A. m.
Campbell Co.

1922

Application for Pension Due Deceased Soldier
(UNDER ACT 1891)

(To be paid his Widow or Dependent Children)

BY

Mrs. *Spence Elizabeth Spence*
Widow of *J. A. Spence*
of *Campbell* County

Old or New. *"Old"*
Date of Death. *Feb. 26, 1922*

Approved and ordered paid, *7/12-1922* 1922
J. W. Lindberg
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for approval before you pay out the money, and then return the money to the Pension Office for permanent filing in the Pension Office.

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1922, through my deceased husband, _____, who was on Pension Roll and paid from _____ County for 19 _____.

Witness my hand this _____ day of _____, 1922.

Attested before me: _____

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1901.

STATE OF GEORGIA, *Campbell* County

Personally before me comes Mrs. *Spence Elizabeth Spence*, of said County, who after being duly sworn, on oath says that she is the widow of *J. A. Spence* who was duly enrolled as a "Private" (Soldier) Pensioner from the County of *Campbell* and was paid a Pension of *one hundred & twenty-five* Dollars from *Campbell* County for 1921, and that she said *J. A. Spence* died in *Campbell* County on the *26th* day of *Feb*, 1922, and at the time of his death a Pension of *\$100.00* was due him from *Campbell* County and unpaid for 1922.

Applicant further swears that she married the said *J. A. Spence* on the *9th* day of *November*, 1868, in *Lafayette* County and State of *Georgia*, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this *11th* day of *July*, 1922.
M. McTear Ordinary.
Campbell County. *Spence Elizabeth Spence* (L. S.)
(SEAL)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, *Campbell* County

Personally before me comes *J. W. Rivers* and *Mrs. W. J. Rivers*, who on oath says that he knew *J. A. Spence* while in life and that he knows Mrs. *Spence Elizabeth Spence*, the above applicant; that he knows that the said *J. A. Spence* and *Spence Elizabeth Spence* were in due form of law married in the County of *Lafayette* in the State of *Georgia* on the *9th* day of *November*, 1868, and that they were residing together, as husband and wife at the time of his death on the *26th* day of *Feb*, 1922, and I know that she is his dependent widow.

Sworn to and subscribed before me this *12th* day of *July*, 1922.
M. McTear Ordinary.
Campbell County. *J. W. Rivers*
(SEAL) *M. J. Rivers*

INSTRUCTIONS:
1. This form can be used by guardian, or minor children, where there is no widow.
2. The Ordinary must, in all cases, send certificate of marriage attached hereto, if marriage is not proven by witness.
3. Avoid the use of the word "widow" in any case where the marriage certificate is not attached.
4. This form is for use in cases where the pensioner is a soldier or sailor, and is not to be used in any other case.
5. The pensioner who died after November 1st, 1901, must be paid after October 1st, and for widows and dependent children must be paid after October 1st, and for widows and dependent children must be paid after October 1st, and for widows and dependent children must be paid after October 1st.
6. The pensioner who died before November 1st, 1901, must be paid after October 1st, and for widows and dependent children must be paid after October 1st, and for widows and dependent children must be paid after October 1st.
7. Return this application with your final settlement to the Pension Office.
8. The money due the pensioner or his widow, or his dependent children, must be paid to the Pension Office, and the money so paid must be returned to the Pension Office, and the money so returned must be used for the pensioner or his widow, or his dependent children.
9. This pension is for life, and the money so paid must be returned to the Pension Office, and the money so returned must be used for the pensioner or his widow, or his dependent children.
10. The pensioner who died after November 1st, 1901, must be paid after October 1st, and for widows and dependent children must be paid after October 1st, and for widows and dependent children must be paid after October 1st.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Campbell County

Personally before me comes J. W. Rivers who
on oath says that he knew J. A. Spencer while in life
and that he knows Mrs. Mary Elizabeth Spencer, the
above applicant; that he knows that the said J. A. Spencer
and Mary Elizabeth Spencer were in due form of law married in the County
of Georgia in the State of Georgia
on the 9th day of November, 1868 and that they were residing
together as husband and wife at the time of his death on the 26th day of
February, 1922, and I know that she is his dependent widow.

Sworn to and subscribed before me this 12th day of July, 1922.

M. M. Loxie

Ordinary.

J. W. Rivers

(SEAL)

County.

M. J. Rivers

INSTRUCTIONS:
1. This form may be used by guardian, or minor children, where there is no widow.
2. The Ordinary must, in all cases, send certificate of marriage attached hereto, if marriage is not proven by wit-
ness. Avoid the use of the enormous large form of marriage certificate in common vogue throughout this state, with
able only for printing and a certificate. This form is for use in any part of the state, and
3. This form is for use in the case of a deceased person who died after October 1st, and for widows and dependent children
of persons dying who died prior to October 1st, and for widows and dependent children
4. The Ordinary should examine the facts carefully and see that it is fully and correctly completed, and the seal
affixed, and that the facts, when taken in view of the
5. He may set on money on this application until it is approved in the Pension Office, and returned to you as your
6. He should also examine with your final settlement to the Pension Office.
7. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
8. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
9. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
10. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
11. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
12. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
13. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
14. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
15. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
16. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
17. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
18. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
19. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
20. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
21. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
22. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
23. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
24. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
25. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
26. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
27. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
28. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
29. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
30. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
31. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
32. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
33. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
34. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
35. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
36. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
37. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
38. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
39. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
40. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
41. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
42. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
43. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
44. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
45. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
46. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
47. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
48. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
49. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
50. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
51. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
52. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
53. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
54. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
55. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
56. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
57. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
58. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
59. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
60. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
61. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
62. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
63. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
64. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
65. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
66. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
67. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
68. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
69. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
70. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
71. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
72. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
73. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
74. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
75. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
76. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
77. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
78. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
79. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
80. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
81. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
82. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
83. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
84. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
85. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
86. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
87. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
88. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
89. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
90. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
91. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
92. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
93. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
94. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
95. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
96. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
97. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
98. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
99. The Pension Office is not for the purpose of the business, giving law same opposite his name above.
100. The Pension Office is not for the purpose of the business, giving law same opposite his name above.

Amendment -

Georgia, Campbell County
Before the undersigned
Ordinary of said county, personally
came C. M. Milam who
after being duly sworn deposes
and says that he is a next neigh-
bor of J. A. Spencer of plaintiff for
Indigent Pension and has lived
near him for 50 years and knows
him intimately for fifty years
or more and knows that said
J. A. Spencer has not any land
or any interest in any land and
does not own any property except
a little personally owned about
\$100.00; that said Spencer borrowed
for 50 acres of land, took bond for
title to said land after paying 50
dollars; that he (Spencer) was not
able to, and never did, pay any more
and had to give up the said land of
50 acres to other parties; that said
Spencer is not physically able to work
a support for himself at any work
he can follow.

Sworn to & subscribed
before me, this 16th
day of Sept 1905
M. S. McLoxie
Ordinary

Amendment -

Georgia, Campbell County
Before the undersigned
Ordinary of said county personally
came J. W. A. Spier, a witness to
the execution of application of J. A. Spencer
for Indigent Pension, who on oath
says that he sold said J. A. Spencer
about 57 acres of land in year 1901;
that said Spencer paid only \$50.00 and
took bond for title and never was
able to pay balance of purchase
money or any part of it and had
to let other parties have the said
land; that he (Spier) is a next
neighbor of Spencer and has known
him well for 50 years, and knows
that said Spencer owns no land or
interest in any land; that he
Spencer has no property except a
little personally owned about \$25.00;
that said Spencer is a farmer and
is not able to earn in his work at
any work or calling he can follow
Sworn to & subscribed
before me this
Sept 19, 1905
M. S. McLoxie
Ordinary

Georgia } I certify that the witnesses
Campbell } C. M. Milam & J. W. A. Spier and
} of plaintiff J. A. Spencer are entirely
} trustworthy & their statements worthy
} of free faith and credit.
} Pictures very hard to get of office, this
} Sept 19, 1905. M. S. McLoxie Ordinary
} Campbell Co. Ga

more than 50 years ago, I know
 him intimately for fifty years
 or more and knows that said
 J. A. Spencer does not own land
 or any interest in any land and
 does not own any property except
 a little personally worth about
 \$2000; that said Spencer bargained
 for 57 acres of land, took bond for
 title to said land after paying 50
 dollars; that he (Spencer) was not
 able to, and never did, pay any more
 and had to give up the said land
 57 acres to other parties; that said
 Spencer is not physically able to work
 a support for himself at any work
 he can follow.
 Sworn to & subscribed }
 before me, this 16th } B. M. Milam
 day of Sept, 1905 }
 W. S. McLosin
 Only

money or any part of it and had
 to let other parties have the said
 land; that he (Spencer) is a neighbor
 of Spencer and has known
 him well for 30 years, and knows
 that said Spencer owns no land or
 interest in any land; that he
 Spencer has no property except a
 little personally worth about \$2500;
 that said Spencer is a farmer and
 is not able to earn a support at
 any work or calling he can follow.
 Sworn to & subscribed }
 before me this } J. M. A. Speir
 Sept 19, 1905 }
 W. S. McLosin }
 Only }
 Georgia } I certify that the witnesses
 Campbell Co } C. M. Milam & J. M. A. Speir and
 Applicant J. A. Spencer are entirely
 trustworthy & their statements worthy
 of full faith and credit.
 Witness my hand & seal of office, this
 Sept 19, 1905. W. S. McLosin, Attorney
 Campbell Co. Ga

Answer given to =
 Georgia, Campbell County.
 Before the undersigned Ordie-
 nary personally came J. A. Spencer
 whose application for Indigent
 Pension is herewith presented,
 who being duly sworn deposes and
 says that the land mentioned in
 said application never did belong
 to him; that he ~~at present~~ only
 had a bond for title to said land
 and never paid but fifty dollars
 on same; that since paying said
 amount he clearly saw that he
 would never be able to pay any-
 more on the land so he had to
 transfer his bond for title to
 other parties thereby losing the
 fifty dollars he had paid on the
 land and placing any and all
 claims he had on the land
 in the hands of other parties
 and releasing him of any and all
 possession ^{interest} in the
 said land.
 Sworn to & subscribed before } J. A. Spencer
 me, this June 14, 1905 }
 W. S. McLosin, Ordie-

... on my part, I am poor & needy.
Before the undersigned Ordie-
nary personally came J. A. Spencer
whose application for Indigent
Pension is herewith presented,
who being duly sworn deposes and
says that the land mentioned in
said application never did belong
to him; that he ~~apportioned~~ ^{apportioned} only
had a bond for title to said land
and never paid but fifty dollars
on same; that since paying said
amount he shortly saw that he
would never be able to pay any-
more on the land so he had to
transfer his bond for title to
other parties thereby losing the
fifty dollars he had paid on the
land and placing any and all
claims he ever had on the land
in the hands of other parties
and relieving him of any and all
possession ^{interest} ~~of~~ ⁱⁿ the
said land

Sworn to & subscribed before
me, this June 14, 1905
W. S. McFarmer, Ordie-

J. A. Spencer

10/2/11 11/9-1911
11/9/11

- Ordinary,
of Campbell County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Campbell County.

I, H. J. McLaughlin Ordinary of said County, certify that I know the applicant Newton S. Sproyberry for Pension is the person he represents himself to be and resides in said County. That I also know R. C. Robinson & J. J. Wilson who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Campbell shows that of the county and its value for tax is in 1908 \$ 25 for 1909 \$ 25 for 1910 \$ 25

Sworn under my hand and official seal of office this 10th day of Oct 1910
H. J. McLaughlin Ordinary Campbell County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
 2. Additional affidavits may be attached if blank spaces are insufficient.
 3. All affidavits must be made before the Ordinary and certified by him.
 4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

7. Were you actually present with your Command when it was surrendered or discharged? No
 8. If you were not actually present, state specifically and clearly where you were. I took Yellow Fever while in Camped service at Blakeley, Ala. was sent to Hospital at Mobile, Ala., thence sent home, through twice extended (extended) by Enrolling Officers
 a. Where was your Command when you left it? At Blakeley, Ala.

- 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 Hospital 60 days, I was given a 90 days furlough, & later a 60 days furlough, which kept me till after
 f. Why did you not return to your Command after leave expired? Was not able to surrender.
 g. In what way were you prevented? Yellow Fever, 3 months after War I could not get in
 h. What effort did you make to return? None. Was not well enough.
 i. 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 answer.
 9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value). None at all.
My wife, Horst & Wayne \$100.00
Furniture about 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.
My wife & Horst & Wayne

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). None at all.
My wife & Horst & Wayne \$100.00
Furniture about 10.00

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None. I am blind in 1 eye totally, and can hardly see with other.

13. Are you drawing a pension of any amount from this State or the United States? No Sir.

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Yes Sir. Under Indigent class, in 1905. "Not an aged man." "Infirmary not satisfactorily shown."

Sworn to and subscribed before me, this the 10th day of Sept. 1910.
H. J. McLaughlin Ordinary,
Campbell County.

FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.
Campbell County.

I, H. J. McLaughlin Ordinary of said State and County is hereby presented as a witness to the application of Newton S. Sproyberry for the pension provided by the Act of 1891 in said State, and after being sworn true answers to the questions propounded, answer as follows:

What is your name and where do you reside? H. J. McLaughlin
Reside in Blakeley, Ala. about 60 years

Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? He moved to Blakeley, Ala. this State (Ala.) 20 years ago

When, where and in what Company and Regiment did Newton S. Sproyberry enlist during war from 1861 to 1865? (Give date and place) at Blakeley, Ala. May 1864, 2nd Regt. Ala. Inf.

How did you obtain your information of this Service? Was with him

How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) About eight months

When and where was his Command surrendered or discharged (give date and place) at Blakeley, Ala. May 1865

Were you personally present at the Surrender? I was

If not, where were you and how came you there?

Was the applicant personally present with his Command at surrender? No

If not, where was he and how came him there? He was sent to Hospital

Where did he have his Command? At Blakeley, Ala.

By whose authority did he leave? By order of his Command

How long was he granted leave? About 60 days

How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)

In what way was he prevented from returning to his Command? By Yellow Fever

What effort did he make to return to his Command and how do you know? He was not well enough

Was applicant captured as a prisoner? No If so, when and where?

In what prison was he held? None and when released?

Sworn to and subscribed before me, this the 10th day of Sept. 1910.
H. J. McLaughlin Ordinary
Newton S. Sproyberry of Campbell County, Alabama

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Campbell County.

Personally before me, R. C. Robinson & J. J. Wilson who on oath say that they are free holders residing in said County and we Newton S. Sproyberry the applicant for pension, and we know the property that is now in his use, possession and control of himself and wife and of its cash value to wit: My wife & Horst & Wayne \$100.00
Furniture about 10.00

- 1908? (State it fully by items) None
 2. When and to whom was it sold or given to? My wife & Horst
 3. What was the price paid or stated to be paid? " "
 4. What relation is the party to applicant? " "
 5. What disposition was made of the proceeds of the sale? " "
 6. Was the disposition of this property made in good faith and full value? " "
 or was it made to obtain a pension?

Sworn to and subscribed before me, this the 10th day of Oct 1910.
H. J. McLaughlin Ordinary
R. C. Robinson & J. J. Wilson of Campbell County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Campbell County.

I, H. J. McLaughlin Ordinary of said County, certify that I know the applicant Newton S. Sproyberry for Pension is the person he represents himself to be and resides in said County. That I also know R. C. Robinson & J. J. Wilson who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Campbell shows that of the county and its value for tax is in 1908 \$ 25 for 1909 \$ 25 for 1910 \$ 25

Sworn under my hand and official seal of office this 10th day of Oct 1910
H. J. McLaughlin Ordinary Campbell County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
 2. Additional affidavits may be attached if blank spaces are insufficient.
 3. All affidavits must be made before the Ordinary and certified by him.
 4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do solemnly swear that you will truthfully answer each question asked you and the evidence you shall give shall be the whole truth and help you to help your neighbor."

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

3. All affidavits must be made before the Ordinary and certified by him.

4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders may be taken.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do solemnly swear that you will truthfully answer each question asked you and the evidence you shall give shall be the whole truth and help you to help your neighbor."

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

3. All affidavits must be made before the Ordinary and certified by him.

4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders may be taken.

Sworn to and subscribed before me, this the 19th day of Sept. 1910, } S. M. Burman
J. J. Burman Ordinary
Judge of Probate of Clay County, Arkansas

STATE OF GEORGIA

County Rock
Personally before me, Ed. Robinson & J. H. Wilson, who on oath
says that they are free holders residing in said County and we know
the applicant for pension and we know the property that is now in his sole possession and control of himself
and wife and of the cash value of said 100.00 (Ten hundred and no/100ths) 100.00 Dollars & no/100ths

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov

STATE OF GEORGIA.

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

1. What is your name and where do you reside? (Give State, County and post office)
Newton Sprayberry, Ripley, Georgia
2. How long and since when have you been a resident of this State?
About 24 years. Since 1880 or 1881.
3. When and where were you born?
February 1843, Spiveyville, Ala.
4. When and where and in what company and regiment did you enlist or serve?
Enlisted in favor of 1862, Co. 100th Regt., Ala. Cavalry, Co. 1st, 1st Ala. Regiment.
5. How long did you remain in such company and regiment?
Something over 2 years
6. When and where was your company and regiment surrendered and discharged?
Spivey, Ala. in 1865.
7. Were you present with your company and regiment when it was surrendered? *Yes, & have a full copy of the same.*
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? *Not here or far from it, left command by order of Genl. of Physicians in place of 1864 in receipt of illness.*
9. How much can you earn (gross) per annum by your own exertions or labor? *Very little*
10. What has been your occupation since 1865?
Spoke nails
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *Upon all three grounds.*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? *For the last years or two, have not been able to care a sufficient amount of work, have had a great deal of trouble, especially in the left eye, & right eye failing.*
13. What property, real and personal, or income, do you possess, and to what gross value?
None
14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? *None*
15. In what County did you reside during those years, and what property did you then return for taxation?
In Newton County for 8 years
16. How were you supported during the years 1869, 1900, 1901 and 1902?
By my father
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
By 2000 dollars; all from my own labor
18. What was your employment during 1868, 1869, 1901 and 1902? What did you receive in each year?
Spoke nails; 2000 dollars
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed?
Yes; wife & 3 children; 24 years; no; children 14, 3 years, & 6 months old.
20. Are you receiving any pension? If so, what amount and for what disability?
No
21. Have you ever made an application for pension before?
No
22. How many applications have you ever made and under what class?
None
- Sworn to and subscribed before me this the
29 day of *Sept*, 190*2*
John W. Williams, Ordinary,
of *Spivey* County.
Applicant. *(S)*

Every Question MUST Be Answered.

No

190

Co. E. 60th Ala. Regt.

Approved _____ 190_____

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta, Ga.

Pension Office 9/30/95
 Not an aged man. The extent
 of his infirmity is not shown
 to be such as will prevent
 him from earning his own sup-
 port at some kind of labor
 or calling. Must state the
 date of furlough by whom grant-
 ed for how long, what cause,
 and what prevented him from
 returning to duty with his
 company before surrender. Prove
 all this to be true by some
 one who has some knowledge
 where it to be true. The wit-
 nesses submitted know nothing
 of this.

J. W. Lindsey
Com. Of Pens.

Name Newton Sprayberry
County Fulton
Co. C. 60th Ala. Regt.
Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta, Ga.

J. W. Lindsey
Com. of Pens.

Every Question Must

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? For the past year or more, have not been capable to earn a support, account of poor eyes and general weakness, especially at night. Left eye, & right eye failing.
13. What property, real and personal, or income, do you possess, and of gross value? None
14. What property, real and personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? None
15. In what County did you reside during those years, and what property did you then return for taxation? In Fulton County for 8 years
16. How were you supported during the years 1898, 1899, 1900, 1901 and 1902? By my labor
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Do not remember; all from my own labor
18. What was your employment during 1898, 1899, 1901 and 1902? What did you receive in each year? Reconstructions; Don't remember
19. Have you a family? If so, who composes each family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Yes; wife & 3 children; my labor; no; children 4, 3 years, & 8 months old.
20. Are you receiving any pension? If so, what amount and for what disability? No
21. Have you ever made an application for pension before? No
22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me, this the

29 day of Sept, 1901,
John W. Lindsey Ordinary,
of Fulton County.

Applicant.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me J. W. Lindsey and H. F. Smith, both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully Newton Sprayberry, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

There is a rupture of some debility because of the loss of blood, and weakness of vision, especially of left eye.

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

Sworn to and subscribed before me, this the

29 day of Sept, 1901,

John W. Lindsey Ordinary.

H. F. Smith M. D. H. F. Smith M. D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John W. Lindsey Ordinary, in and for said County, hereby certify that the applicant Newton Sprayberry resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 189__ and that the witnesses, viz: _____

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

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

I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1899 _____ Dollars of property, and in 1900 _____ Dollars of property; in 1901 _____ Dollars of property; in 1902 _____ Dollars of property.

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

Witness my hand and seal of office, this 29 day of Sept, 1901

John W. Lindsey Ordinary,

of Fulton County.

NOTE.

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

QUESTIONS FOR WITNESS.

STATE OF Alabama

Calhoun COUNTY.

I, P. H. Caldwell of said State and County, having been presented as a witness in support of the application of Newton Sprayberry for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

- What is your name and where do you reside? P. H. Caldwell, and reside near Ashland, Calhoun County, Alabama.
- Are you acquainted with Newton Sprayberry, the applicant; if so, how long have you known him? Yes, about 5 or 6 years.
- Where does he reside, and how long and since when has he been a resident of this State? He resides in Ashland, Georgia. He left Alabama about 23 yrs ago.
- When, where and in what company and regiment did he enlist, and how do you know? Enlisted in fall of 1864 at Talladega, Ala. Company E. 60th Ala. Regiment.
- Were you a member of the same company and regiment? Yes.
- How long did he perform regular military duty? A little over one year.
- When and where was his command surrendered? At Mobile, Ala. in the year 1866.
- Were you present when it surrendered? I was not but near by.
- Was applicant present? He was not. He was at home on furlough.
- If he was not present, where was he? When did he leave his command? In fall of 1864. For what cause? Sickness.
- By what authority he left? Board of Physicians. How do you know all of this? I was present when he was sent away.

- What property, effects or income has the applicant? (Give your means of knowledge.) He has no property that I have any knowledge of.
- What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902 and what disposition, if any, did he make of same? I do not know.
- Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know.
- What is the applicant's occupation and physical condition? I don't know his occupation. His physical condition is not very good.
- Is the applicant unable to support himself by labor of any sort; if so, why? I do not think he is able to support himself by labor.
- How was he supported during the years 1898, 1899, 1900, 1901 and 1902? I do not know.

What portion of his support for these four years was derived from his own labor or income? I do not know.

Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Physical weakness and blindness.

Who composes family? What property have they? Children's age and their earning capacity? I do not know.

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

Sworn to and subscribed before me, this the 30th day of August, 1901,
J. H. Stephens Ordinary,
of Calhoun County, Alabama.

Witness.

STATE OF GEORGIA.

I, John W. Wren County, Ordinary, in and for said County, hereby certify that the applicant John W. Wren resides in said County, and has been a bona fide resident of this State since the 1st day of June 1899 and that the witnesses, viz: _____

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

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

I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1899 _____ Dollars of property, and in 1900 _____ Dollars of property; in 1901 _____ Dollars of property; in 1902 _____ Dollars of property.

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

Witness my hand and seal of office, this 29 day of Sept 1902

John W. Wren Ordinary,
of Fulton County.

NOTE.

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

By what authority he left? Board of Physicians How do you know all of this? I was present when he was sent away.

11. What property, effects or income has the applicant? (Give your means of knowledge.) He has no property that I have any knowledge of.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902 and what disposition, if any, did he make of same? I do not know.
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know.
14. What is the applicant's occupation and physical condition? I don't know his occupation. His physical condition is not very good.
15. Is the applicant unable to support himself by labor of any sort; if so, why? I do not think he is able to support himself by labor.
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? I do not know.

17. What portion of his support for these four years was derived from his own labor or income? I do not know.

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Physical weakness and blindness.

19. Who composes family? What property have they? Children's age and their earning capacity? I do not know.

20. What interest have you in the recovery of a pension by this applicant? None whatever.
Sworn to and subscribed before me, this the 3rd day of August 1902 D. H. Caldwell Witness.
H. J. Ingram Ordinary,
Elbert County, Alabama

STATE OF GEORGIA, Cumple County

I, Mr. S. M. Loring Ordinary of said county, do certify that I personally know Mrs. Laura S. Grayberry the applicant, and that she is the lawful widow of Newton S. Grayberry and was on the "Service" Pension Roll of said Cumple county, and was paid a Pension from 1902 county for 1912, and at the time of his death on the 20th day of July 1920, there was due to him and unpaid his Pension of One Hundred (100) Dollars from the State of Georgia, and I know Mr. S. Grayberry the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 6th day of May 1920.

W. S. McGinnis (S.S.) Ordinary,
Cumple County.

Application for Pension Due Deceased Soldier

UNDER ACT 1891
To be paid his Widow or Dependent Children

BY Mrs. Laura S. Grayberry
Widow of Newton S. Grayberry
of Cumple County
20th - 60th Ala.
Date of Death July 20 1920

Approved and paid 100
1920

W. S. McGinnis
Commissioner of Pensions.

Printed and Published by the State Printer, Atlanta.

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1912, through my deceased husband, _____ who was on _____ Pension Roll and paid from _____ County for 1912.

Witness my hand this _____ day of _____ 1920.

Attested before me:

Sprayberry, Newton
Campbell

No. 1920

Application for Pension Due Deceased Soldier
UNDER ACT 1891

To be paid his Widow or Dependent Children

by *Mrs. Laura Sprayberry*
Widow of *Newton Sprayberry*
of *Campbell* County
"B" - 60th Ala.
Co. *10th*
Date of Death *July 2, 1919*

Approved and paid *10/17/20*
1920.

J. W. Spruill
Commissioner of Pensions.

Bryce Printing Co. 1111 1/2 First St., Atlanta.

GEORGIA, _____ County.

I hereby 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 _____ County for 191____.

Witness my hand this _____ day of _____, 1920.

Attested before me: _____

Application for Pension Due Deceased Soldier

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

STATE OF GEORGIA, *Campbell* County

Personally before me comes Mrs. *Laura Sprayberry* of said county, after being duly sworn, on oath says that she is the widow of *Newton Sprayberry* who was duly enrolled as a "Service" Pensioner from the county of *Campbell* and was paid a Pension of *Ninety (90)* Dollars from *Campbell* county for 191____, and that the said *Newton Sprayberry* died in *Campbell* county on the *20th* day of *July*, 191____, and at the time of his death a Pension of *\$100.00* was due him from *Campbell* county and unpaid for 1920.

Applicant further swears that she married the said *Newton Sprayberry* on the *17th* day of *June*, 1900, in *Georgia* county and State of *Georgia*, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this *6th* day of *May*, 1920.

W. M. Fox Ordinary.
Campbell County.

Laura Sprayberry

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, *Campbell* County

Personally before me comes *W. M. Fox*, who on oath says that he knew *Newton Sprayberry (his father)* while in life and that he knows *Mrs. Laura Sprayberry (his mother)* the above applicant; that he knows that the said *Newton Sprayberry* and *Laura Sprayberry* were in due form of law married in the county of *Georgia* in the State of *Georgia* on the *17th* day of *June*, 1900, and that they resided together as husband and wife from date of marriage to the day of his death on the *20th* day of *July*, 191____, and I now know that she is his dependent widow.

Sworn to and subscribed before me this *6th* day of *May*, 1920.

W. M. Fox Ordinary.
Campbell County.

J. W. Spruill

was due him from Georgia county and unpaid for 1920,
 Applicant further swears that she married the said Newton Sprayberry on
 the 17th day of June, 1900, in Greene county and
 State of Georgia and resided with him from the date of marriage to his death as his
 lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her.
 Sworn to and subscribed before me this 6th day of May, 1920.
W. M. Loring Ordinary.
Greene County. Laura Sprayberry

AFFIDAVIT OF WITNESS
STATE OF GEORGIA, Greene County
 Personally before me comes Mr. Sprayberry, who
 on oath says that he knew Newton Sprayberry (his father) while in life
 and that he knows Mrs. Laura Sprayberry (his mother)
 the above applicant; that he knows that the said Newton Sprayberry
 and Laura Sprayberry were in due form of law married in the county
 of Greene in the State of Georgia on
 the 17th day of June, 1900, and that they resided together
 as husband and wife from date of marriage to the day of his death on the 20th day of
July, 1920, and I now know that she is his dependent widow.
 Sworn to and subscribed before me this 6th day of May, 1920.
W. M. Loring Ordinary.
Greene County. J. M. Sprayberry

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.
 Before me, the undersigned Probate Judge of
 said County, this day personally came Clara Hallman
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 of her own knowledge she knows
 when Newton Sprayberry came to his
 home under furlough a little while
before close of the war and that he
 was exceedingly sick and ill from
 disease said to be yellow fever, and
 she knows that he remained ill and
 practically helpless at his home
 until long after close of the war,
 that he was never able to return
 to the service from time he came
 home until after close of the war.
Signature: Clara Hallman
 Sworn to and subscribed before me
 this 3rd day of Nov., 1911.
J. J. Ingram
Judge of Probate

State of Alabama, County of Clay.

Before me, the undersigned Probate Judge of said county, this day per-
 sonally came Mrs. Mary Thompson, of said county, known to me to be trust-
 worthy, 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 Camp-
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 hav-
 ing to be helped, or to crawl in or out. I saw his furlough twice extended
 by the Enrolling Officer.

Attest: J. J. Ingram (Signed.) Mrs. Mary Thompson
J. J. Ingram
 Sworn to and subscribed before me, this 21st day of Oct., 1910.

J. J. Ingram
Judge of Probate

that of her own knowledge she knows when Newton Sprayberry came to his home under furlough a little while before close of the war, and that he was exceedingly sick and ill from disease said to be yellow fever, and she knows that he remained ill and practically helpless at his home until long after close of the war, that he was never able to return to the service from time he came home until after close of the war.

Signature: Blom Hallman

Sworn to and subscribed before me this 3rd day of Nov. 1911.

J. J. Ingram
Judge of Probate

after having been duly sworn, deposes and says that she (deponent) has been personally acquainted with Mr. Newton Sprayberry, now a resident of Campbell 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 extended by the Enrolling Officer.

Attest:
J. B. Gibson
Clerk

(Signed.) Mrs. Mary X Thompson
Witness

Sworn to and subscribed before me, this 21st day of Oct. 1910.

J. J. Ingram
Judge of Probate

NAME Sprayberry, Newton YEAR 1912 COUNTY Campbell

WHEN AND WHERE BORN? Resident of Georgia, 30 years, since 1880.

ENLISTED WHEN AND WHERE? Fall of 1863, - Talledega, Alabama.

RANK

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

NAME OF CAPTAIN AND COLONEL?

WOUNDED? 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.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? 1865, Blakeley, Alabama. The Command surrendered.

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 -- No date.
P.H. Caldwell, -- Same Command --

mh.

Court of Ordinary

Fulton County

STATE OF GEORGIA

CERTIFIED COPY OF

MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

OF

Newton Sprayberry
AND
Laura Leaffer

Thos. Jeffers
ORDINARY

WOUNDED? 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.
CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? 1865, Blakeley, Alabama. The Command surrendered.

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
P.H. Caldwell, -- Same Command --

No data.

mh.

Newton Springberry
AND
Laura Coffey

Thos J. Harris
ORDINARY.

MARRIAGE LICENSE

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to perform Marriages.

You are hereby authorized and permitted to join in the honorable state of Matrimony *Mr. Newton Springberry* and *Miss Laura Coffey*

According to the Rites of your Church, provided there be no lawful 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

Given under my Hand and Seal this *9* day of *June* 19*00*.
H. H. Hufsey L. S. Ordinary.

I hereby certify that *Newton Springberry* and *Laura Coffey*

were joined together in the HOLY BANS OF MATRIMONY

on the *17* day of *June* 19*00*, by me.

J. D. Harris m.s.

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

ATLANTA, GA., *May 25* 19*00*

Arthur R. Mead

Clerk Court of Ordinary of said County, hereby certify

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

Newton Springberry
and *Laura Coffey*

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,

the day and year aforesaid.

Arthur R. Mead
Clerk Court of Ordinary.

Or any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to do so.

You are hereby authorized and permitted to join in the honorable state of Matrimony Mr. Newton Spraying and Miss Laura Coffey

According to the Rites of your Church, provided there be no lawful 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

Given under my Hand and Seal this 9 day of June 1900.

H. H. Hufsey

L. S. Ordinary.

I hereby certify that Newton Spraying and Laura Coffey

were joined together in the HOLY BANS OF MATRIMONY

on the 17 day of June 1900, by me.

J. D. Harris m.s.

State of Georgia,

Fulton County.

ORDINARY'S OFFICE

S. S.

ATLANTA, GA., May 25 1900.

Arthur R. Mead

Clerk Court of Ordinary of said County, hereby certify

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

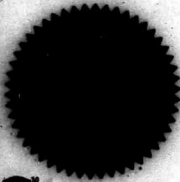
Newton Spraying and Laura Coffey

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,

the day and year aforesaid.

Arthur R. Mead
Clerk Court of Ordinary.



In order to add unnecessary delays to applicants, and to enable all parties interested to understand the law granting allowances to disabled soldiers, as well as the rules adopted by the Governor concerning the application process, the following suggestions are submitted:

1. The second should be carefully and fairly set out in the form of a question, and the answer should be given by the applicant, and not by the physician.
2. If applicant claims inability from disease contracted in the service, a full and carefully stated history of the disease should be given, treating the disability by positive point to the service.
3. *And essentially useless* to say that an arm is "voluntarily useless" when there has been evidence of *inability*.
4. It will not answer to say that an arm is "voluntarily useless" for ordinary purposes of *life*, as it is proposed to substantiate to the cause of the Act in reference to the arm or leg, but the final mark for all purposes be *essentially and seriously useless*.
5. There is no question as to the fact that a wounded leg it would seem to be a fair interpretation of the Act, and the words above quoted to say that a wounded leg is "essentially and seriously useless" is to ignore the words above quoted to say that the leg is not "voluntarily and essentially useless."
6. If papers are returned for correction, and amendments are *added* to any affidavits, the amendments must be made *under* and before an officer, and the proofs must show that the affidavits have been *corrected*.
7. Every applicant must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.
8. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

64 1884
No. 2337.

FOR

Discontinue from body, injury

Applicant, John Street

County Waukegan

Amount 50

Date of Warrant May 31

Entered on Record

May 31

W.H.H.

1889

SECRETARY EXECUTIVE DEPARTMENT.

Applicant

[illegible]

Applicant

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

- payments provided, the following suggestions are submitted.
1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease, the full and careful statement of the 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 a leg, unless the arm or leg has been rendered substantially and essentially useless.
 3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
 4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
 5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the papers must show that the amendments have been duly sworn to.
 6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.
 7. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

STATE OF GEORGIA

Campbell County

PERSONALLY appears John J. Weeks 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 24th day of October 1867; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company B, of 64th th Regiment of Georgia Volunteers Confederate States Brigade; that whilst engaged in such military service, at the battle of Five Forks at Petersburg in the State of Virginia, on the 30th day of July 1864, he was wounded as follows: He was lying down after a charge and a whole shell, coming down, struck him and ran up as it struck near him it burst & struck one or two right down and dislocated the right hip joint. This occurred while he was in line of duty as a soldier and during any service or such, and would have resulted in a fatal result, in compliance to perform the ordinary manual avocations of life, as usual with them and could not do any more. As for the pain & such of said hip joint, it is still

Dependent desires to participate in the benefits of the Act, approved October 24, 1887, 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

24 day of May 1889

R. C. Beavers, Ordinance

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

STATE OF GEORGIA

Fulton County.

PERSONALLY came before me Andrew Price of the county
of Fulton State of Georgia, who, being duly sworn, says that he was
a Commissioned officer in Company C, of 64 Regiment of Georgia
Volunteers, and that deponent knows John J. Stacks, 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 J. Stacks
as stated by him in said affidavit. Deponent further states that said
John J. Stacks is a bona fide citizen of this State and resides
in Cumpleville county.

Signed & sworn to before me this
the 1st day of May, 1919

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

J. C. Anderson
J. P. Anderson
J. P. Anderson

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 24 day of May 1889
R. C. Beavers, Ordinary

Commissioned Officer's Affidavit.

STATE OF GEORGIA,
Fulton County.
PERSONALLY came before me Andrew P. Rice of the county of Fulton State of Georgia, who, being duly sworn, says that he was commissioned officer in Company C, of 64 Regiment of Georgia Volunteers, and that deponent knows John J. Stacks, 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 J. Stacks as stated by him in said affidavit. Deponent further states that said John J. Stacks is a bona fide citizen of this State and resides in Campbell county.

Signed & sworn to before me this 24th day of May 1889
J. C. Adams, Jr.
J. P. Beavers, Jr.

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

STATE OF GEORGIA,
Campbell County.
PERSONALLY came J. W. McDonald of Fulton County John J. Rivers Jr citizens of Campbell county, in said State, who, being duly sworn, say that they are acquainted with John J. Stacks and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a bona fide citizen of this State, and resides in Campbell county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this 24 day of May 1889
R. C. Beavers, Ordinary
J. W. McDonald
John J. Rivers Jr

NOTE.—Above affidavit must be made by three citizens of the county of applicant's residence.

STATE OF GEORGIA,
Campbell County.
PERSONALLY comes before me R. C. Beavers Ordinary of said county, J. J. Beavers and J. A. Motley both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined John J. Stacks and after such examination say that the applicant has been injured as follows: Wound 4 inches which struck two inches from left elbow the knife on right side which in him of deep as a soldier and during service as Soldier from this wound he sustained a leg wound of the right leg which remains and causes much pain and discomfort. The right shoulder joint is also injured at the same time the injuries are permanent and render him unable to perform manual labor signed by the physician J. J. Beavers, J. A. Motley, or R. C. Beavers at once.

Sworn to and subscribed before me, this 24 day of May 1889
R. C. Beavers, Ordinary
J. J. Beavers
J. A. Motley

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

STATE OF GEORGIA,
Campbell County.
I, R. C. Beavers Ordinary of said county, do certify that I am well acquainted with John J. Stacks 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. I also certify that the foregoing witnesses, are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that R. C. Beavers 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 24th day of May 1889
R. C. Beavers
Ordinary Campbell County.

I have known John J. Stacks for twenty years, and he has always been a respectable man and would not misrepresent himself for POWER OF ATTORNEY

STATE OF GEORGIA,
Campbell County.
Know all Men by these Presents, That I, _____ of _____ county, in said State, do hereby appoint _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to form the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this _____ day of _____ 1889
Executed in the presence of us: _____ (L.S.)

Stacy John
Campbell Co.
1890.

No. **1319**
 APPLICATION FOR ALLOWANCE.
 FOR THE YEAR ENDING OCTOBER 24, 1887.

Leg. Dr. Campbell
Applicant, John J. Stacy
 County, *Campbell*
 Amount, *\$50.*
 Date of Warrant, *July 17.*
 Entered on record
July 17 1890
Warrant
 WARRANT GRANTED TO
 Applicant

Stacy John
Campbell Co.
1890.

No. **1010**
 APPLICATION FOR ALLOWANCE.
 FOR THE YEAR ENDING OCTOBER 24, 1887.

Leg. Dr. Stacy
Applicant, John J. Stacy
 County, *Campbell*
 Amount, *\$50.*
 Date of Warrant, *July 17*
 Entered on record
July 17 1890
Warrant
 WARRANT GRANTED TO
 Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County.
 PERSONALLY appears *John J. Stacy* of *Campbell* county,
 State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
 resident of said State, and has been such continuously since the *26th* day of
October 1822; that he enlisted in the military service of the Con-
 federate States (or of the State of *Georgia*) during the war between the
 States, and served as a *Private* in Company *C*, of *64th* Regiment
 of *Georgia* Volunteers *Wright's* Brigade; that whilst engaged
 in such military service, at the battle of *Petersburg* in the State
 of *Virginia*, on the *30th* day of *July* 1864, he was
 wounded as follows: *Hit by shell in right groin*
dislocating the right hip causing the
leg practically useless.

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

Sworn to and subscribed before me, this *15th* day of *February* 1890, *John J. Stacy*
R. C. Weaver, 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, *Campbell*.
 KNOW ALL MEN BY THESE PRESENTS, That I, _____ of _____ of _____ county, in said State, do hereby appoint _____ of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1890.

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

Send money to me as follows, by _____

STATE OF GEORGIA to _____ P.O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County.
 PERSONALLY appears *John J. Stacy* 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 *24*
 day of *October* 1829; that he enlisted in the military service of the Con-
 federate States (or of the State of *Georgia*) during the war between the
 States, and served as a *Private* in Company *C*, of *64th* Regiment
 of *Georgia* Volunteers *Wright's* Brigade; that whilst engaged
 in such military service at the battle of *Petersburg* in the State
 of *Virginia*, on the *30* day of *July* 1864, he was
 wounded as follows: *shot by shell in right groin dis-*
locating the leg joint which wound
caused his leg to be permanently useless
and which disabled him from per-
forming his ordinary occupa-
tions of life.

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

Sworn to and subscribed before me, this *16th* day of *February* 1891, *John J. Stacy*
R. C. Weaver, Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1891.

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

Send money to me as follows, by _____

STATE OF GEORGIA to _____ P.O.

County, Georgia.

in such military service, at the battle of Gettysburg in the State of Virginia, on the 30th day of July, 1864, he was wounded as follows: Shot by shell in right groin dislocating the right hip causing the leg practically useless.

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

Sworn to and subscribed before me, this the 13th day of February, 1890, John J. Stacks
R. C. Bravers, 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,

county, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th day of February, 1890.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

in Company Co. of 47th Regiment of Georgia Volunteers Light's Brigade; that whilst engaged in such military service at the battle of Gettysburg in the State of Virginia, on the 30 day of July, 1864, he was wounded as follows: shot by shell in right groin dislocating the leg joint which wound serious his leg still permanently essentially useless & which disallows efficient service him unable to perform the ordinary avocations of life.

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

Sworn to and subscribed before me, this, the 16th day of February, 1891, John J. Stacks
R. C. Bravers, Ordinary.

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

POWER OF ATTORNEY. STATE OF GEORGIA

County.

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16th day of February, 1891.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

Applicant having been reported by the Grand Jury as a doubtful claim he will have to make new proof by physician who at once to make a very full & very explicit statement showing his physical condition & the cause of it.

Campbell & Co.
Stacks, J. J.
March 22

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name John J. Stacks

County Campbell

Disability Brn 70

Amount 50

Entered on record March 14 1892.

W. H. HARRISON

Secretary of Department.

AGENT.

One W. Harrison, State Printer, Atlanta, Ga.

STATE OF GEORGIA.
Campbell County.
I, R. C. Bravers, Ordinary of said county, do certify that I am well acquainted with John J. Stacks the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in the 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.

Ordinary

R. C. Bravers

County.

new 1000
physician, who
attested to make
a very full & very
explicit statement
showing his physical
condition & the cause
of it
M.H.

County Campbell
Disability Br 2nd
Amount, \$ 50
Entered on record Mar 14 1892.
W. H. HARRISON,
No data
AGENT,
Applicant
Gen. W. Harrison, State Printer, Atlanta, Ga.

County Campbell
Ordinary of said county,
Geo J. Stacks
I am well satisfied that the statements made by him in his
affidavit, to the extent he claims, and I know he is the
individual that he resides in this county.
and seal, this 5 day of March 1892

STATE OF GEORGIA,
Campbell County.

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

Given under my official signature and seal, this 5 day of March 1892
R. B. Beaver
Ordinary Campbell County.

POWER OF ATTORNEY.
STATE OF GEORGIA, }
County, }

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

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

Executed in the presence of us: _____

DIRECTION.

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

Campbell Co.
Stacks Geo J.
Mar 14 1892

SOLDIER'S PENSION.
1892.

FOR THE YEAR ENDING OCTOBER 31, 1890.

Name Geo J. Stacks
County Campbell
Disability Br 2nd
Amount, \$ 50
Entered on record Mar 14 1892.
W. H. HARRISON,
No data
AGENT,
Applicant
Gen. W. Harrison, State Printer, Atlanta, Ga.

Applicant having
been reported by
the Grand Jury
as a doubtful
case he will
have to make
and proof by
physician, who
attested to make
a very full & very
explicit statement
showing his physical
condition & the cause
of it
M.H.

No.

Soldier's Pension.
1892.

Name _____
County _____
Disability _____
Amount, \$ _____

1892.

W. H. HARRISON,
Secretary of Revenue Department

WARRANT FORWARDED TO

Gen. W. Harrison, State Printer, Atlanta, Ga.

Ordinary _____ County _____

[illegible]

POWER OF ATTORNEY.
STATE OF GEORGIA.

Know all Men by these Presents, That I

County, State of Georgia, do hereby appoint

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

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

day of

1893.

Witness my hand and seal, this

day of

1893.

Send money to me as follows, by

to

County, Georgia.

P. O.

1893.

Campbell

No. 316

Application for Allowance

For the Year Ending October 31, 1893.

FOR

Body Hurt

Applicant, Geo. J. Smith

County, Campbell

Amount, 50

Date of Warrant, 3/16

Entered on record, 3/16

Campbell

WARRANT HANDLED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.
STATE OF GEORGIA.

Know all Men by these Presents, That I

County, State of Georgia, do hereby appoint

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

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

day of

1893.

Witness my hand and seal, this

day of

Send money to me as follows, by

to

County, Georgia.

P. O.

1893.

Campbell

No. 316

Application for Allowance

For the Year Ending October 31, 1893.

FOR

Body Hurt

Applicant, Geo. J. Smith

County, Campbell

Amount, 50

Date of Warrant, 3/16

Entered on record, 3/16

Campbell

WARRANT HANDLED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

3 OF ATTORNEY.

esents, That

County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for
 receipt for whatever amount of money I may be entitled to
 of the injury received as aforesaid in the military service of
 the State of Georgia, and to sign any affidavit, hereby authorizing
 me for any purpose that may be required by the Government, or
 pointing to me for the reason aforesaid.

I have hereunto set my hand and seal, this
 1893.

[L.S.]

WITNESSETH.

to
 County, Georgia. P. O.

FOR
 Bonds, Hush
 Applicant, John J. Stocks
 County, Campbell
 Amount, 150
 Date of Warrant, 3/16
 Entered on record, 3/16
 1893.
John J. Stocks
 No. 10
 Department.
 WARRANT HANDED TO
Applicant
 Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
 County, Campbell
 PERSONALLY appears John J. Stocks 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 24
 day of October 1829; that he enlisted in the military service of the Con-
 federate States (or of the State of Georgia) during the war between the
 States, and served as a Private in Company E, of 64th Regiment
 of Georgia Volunteers Wright's Brigade; that whilst engaged in
 such military service at the battle of Ratonsburg in the State
 of Virginia, on the 20 day of July 1864, he was
 wounded as follows: Struck with a spent shell in
the right groin, tearing the tendons loose
+ dislocating the hip joint + moving
the right testicles, also spraining right shoulder
 Deponent desires to participate in the benefits of the Act, approved October 26th, 1887, and
 the acts amendatory thereof, and makes application for the allowance to which he is entitled for
 the year ending October 26, 1893. I have heretofore been allowed a pension of
25 dollars for 1892
 Sworn to and subscribed before me, this, the 15
 day of March 1893, John J. Stocks
R. B. Brown Ordinan

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

STATE OF GEORGIA.
 County, Campbell
 I, R. B. Brown Ordinary of said County,
 do certify that I am well acquainted with John J. Stocks the
 applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
 said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
 dividual he represents himself to be, and that he resides in this County.
 I further certify that R. B. Brown
 before whom the foregoing affidavits were made, and power of attorney was signed, is a
 Justice of the Peace in and for said County, and the said affidavits and
 the foregoing power of attorney are true and correct, and the signatures thereto are genuine.
 Given under my official signature and seal, this 15 day of March 1893.
R. B. Brown
 County, State of Georgia, and was a Justice of the Peace in and for said County.

STATE OF GEORGIA
 POWER OF ATTORNEY

the year ending October 26, 1893. I have heretofore been allowed a pension of Eight dollars, for 1892
Sworn to and subscribed before me, this, the 15 day of March, 1893. John J. Stacks
R. B. Beaver Ordway
Notary—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA, Campbell County.
I, R. B. Beaver, Ordinary of said County, do certify that I am well acquainted with John J. Stacks 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. Beaver before whom the foregoing affidavits were made and power of attorney was signed, is a Ordway of said County; and the said affidavits and signatures thereto are genuine.
Given under my official signature and seal, this 15 day of March, 1893.
R. B. Beaver
Ordinary
Campbell County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }
Know all Men by these Presents, That I, _____ of _____ County, State of Georgia, do hereby appoint _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1894.
[L. S.]
Executed in the presence of us _____

DIRECTIONS.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

Soldier's Pension.
1894.

Name John J. Stacks
County Campbell
Disability Body hurt
Amount, \$ 50.00
1894.
W. H. HARRISON,
Secretary Executive Department.
WARRANT PASSED TO
Application
Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }
Know all Men by these Presents, That I, _____ of _____ County, State of Georgia, do hereby appoint _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1895.
[L. S.]
Executed in presence of us _____

DIRECTIONS.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

SOLDIER'S PENSION.
1895.

Name John J. Stacks
County Campbell
Disability Body injury
Amount, \$ 50.00
1895.
RICHARD JOHNSON,
Secretary Executive Department.
WARRANT PASSED TO
Application
Geo. W. Harrison, State Printer, Atlanta.

Campbell Co.
Stacks, John J.
(For These Already Enrolled.)
No. 447
Soldier's Pension.
1894.

Name *John J. Stacks*
County *Campbell*
Disability *Bodily injury*
Amount, \$ *50.00*
1894.
W. H. HARRISON,
Secretary Executive Department.

WARRANT FORWARDED TO
Applicant
On W. Harrison, State Printer, Atlanta.

Stacks, John J.
Campbell Co.
(For These Already Enrolled.)
No. 447
SOLDIER'S PENSION.
1895.

Name *John J. Stacks*
County *Campbell*
Disability *Bodily injury*
Amount, \$ *50.00*
1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT FORWARDED TO
Applicant
On W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Campbell County.

PERSONALLY appears *John J. Stacks* 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 24 day of *Oct* 1829; that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served as a *Private* in Company *E*, of 64th Regiment of *Ga* Volunteers *Wright's* Brigade; that whilst engaged in such military service at the battle of *Shallowford* in the State of *Ga*, on the 30 day of *July* 1864, he was wounded as follows: *I was struck by a shell, which in service in State of Ga in year 1864, in the right groin wounding right testicle, dislocating right hip joint & throwing out one right shoulder dislocating same, from which wounds I have suffered ever since, thus rendering me practically unfit for manual labor*

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, 1894. I have heretofore been allowed a pension of *Fifty* dollars, for the year 1893.

Sworn to and subscribed before me, this *13th* day of *March* 1894. } *John J. Stacks*
R. C. Beavers Only

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

STATE OF GEORGIA, }
Campbell County.

I, *R. C. Beavers* Ordinary of said County, do certify that I am well acquainted with *John J. Stacks* 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 *2nd* day of *March* 1894.

R. C. Beavers
Ordinary *Campbell* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Campbell County.

PERSONALLY appears *John J. Stacks* 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 24th day of *October* 1829; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *E*, of 64th Regiment of *Georgia* Volunteers, *Wright's* Brigade; that whilst engaged in such military service at the battle of *Petersburg* in the State of *Virginia*, on the 30th day of *July* 1864, he was wounded as follows: *I was struck by a shell dislocating my right hip and straining me in the groin, mashing my right testicle and knocking me down dislocating my right shoulder the effects of said wound makes me unable to do manual labor*

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 *Fifty* dollars, for the year 1894.

Sworn to and subscribed before me, this, the *13th* day of *March* 1895. } *John J. Stacks*
R. C. Beavers Only

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

STATE OF GEORGIA, }
Campbell County.

I, *R. C. Beavers* Ordinary of said County, do certify that I am well acquainted with *John J. Stacks* 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 *13th* day of *March* 1895.

R. C. Beavers
Ordinary *Campbell* County.

which wounds I have suffered ever since, thus rendering me practically unfit for manual labor

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 Eighty dollars, for the year 1893

Sworn to and subscribed before me, this, the 2 day of March 1894. John J. Stacks
R. C. Bravers Ordry

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

STATE OF GEORGIA, }

Campbell County. }

I, R. C. Bravers Ordinary of said County, do certify that I am well acquainted with John J. Stacks 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 day of March 1894.



R. C. Bravers
Ordinary Campbell County.

my right shoulder the effects of said wound makes me unable to do manual labor

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 Eighty dollars, for the year 1894

Sworn to and subscribed before me, this, the 13th day of March 1895. John J. Stacks
R. C. Bravers Ordry

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

STATE OF GEORGIA, }

Campbell County. }

I, R. C. Bravers Ordinary of said County, do certify that I am well acquainted with John J. Stacks 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 13th day of March 1895.



R. C. Bravers
Ordinary Campbell County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }

Campbell 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 _____ 1896.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA, }

Campbell 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 _____ 1897.

[L. S.]

Executed in presence of _____

Stacks John J.
Campbell Co.
ACT OF 24 OCT. 1887.
(For Those Already Enrolled.)

No. 1199

SOLDIER'S PENSION.
1896.

Name John J. Stacks
County Campbell
Disability Amended by
Amount, \$ Eighty Dollars
2/29 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDLED TO
Stacks
Geo. W. Harrison, State Printer, Atlanta.

No later

Stacks John J.
Campbell Co.
ACT OF 24 OCT. 1887.
(For Those Already Enrolled.)

No. 1023

INVALID
SOLDIER'S PENSION.
1897.

Name J. J. Stacks
County Campbell
Disability Amended by
Amount, \$ Eighty Dollars
2/29 1897

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDLED TO
Stacks
Geo. W. Harrison, State Printer, Atlanta.

No later

Stacks John J.
Campbell Co.

ACT OF 24 OCT. 1887.
(For Those Already Enrolled.)

No. *1199*

SOLDIER'S PENSION.
1896.

Name *John J. Stacks*
County *Campbell*
Disability *Wounded leg*
Amount, \$ *Eighty Dollars*
249 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
appt

Wm. W. Harrison, State Printer, Atlanta.

No war

Stacks John J.
Campbell Co.

ACT OF 24 OCT. 1887.
(For Those Already Enrolled.)

No. *1123*

INVALID
SOLDIER'S PENSION.
1897.

Name *J. J. Stacks*
County *Campbell*
Disability *Wounded*
Amount, \$ *50.00*
249 1897.

RICHARD JOHNSON,
Comptroller of Pensions.

WARRANT HANDED TO
appt

Wm. W. Harrison, State Printer, Atlanta.

No war

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County.

Personally appears *John J. Stacks* 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 *24th* day of *October* 1829; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sergeant* in Company *D*, 64th Regiment of *Georgia* Volunteers, *Wright's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *20th* day of *July* 1864, he was wounded, injured or diseased, as follows:

*I was struck by a shell in the right side hip, dislocating the same. During the war I was also struck in the right arm, also injured the right shoulder by being hit by said shell and falling on my right shoulder. Said injuries were required at the post of *Stonewall* Ga. Deponent is unable to perform manual labor.*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of *Campbell* county been allowed a pension of *Eighty (80.00)* dollars, for the year 1895.

Sworn to and subscribed before me, this, *16th* day of *February* 1896. *John J. Stacks*

R. C. Beavers Ordinary.

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

STATE OF GEORGIA,
Campbell County.

I, *R. C. Beavers* Ordinary of said County, do certify that I am well acquainted with *John J. Stacks* 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 *16th* day of *February* 1896.



R. C. Beavers
Ordinary *Campbell* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County.

Personally appears *J. J. Stacks* 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 *24th* day of *Oct* 1829; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sergeant* in Company *E*, of 64th Regiment of *Georgia* Volunteers, *Wright's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *20th* day of *July* 1864, he was wounded, injured or diseased, as follows:

I was struck by a shell at the "Blow up" of Peterburg; said shell hit me in right leg, dislocating right hip, knocking right shoulder, placing my arm about 10 feet from operating right shoulder thus permanently dislocating my arm rendering me unfit for ordinary manual labor.

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 *Campbell* county been allowed an invalid pension of *Twenty (20.00)* Dollars, for the year 1896.

Sworn to and subscribed before me, this, *16th* day of *Feb* 1897. *John J. Stacks*

R. C. Beavers Ordinary.

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

STATE OF GEORGIA,
Campbell County.

I, *R. C. Beavers* Ordinary of said County, do certify that I am well acquainted with *J. J. Stacks* 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 *16th* day of *Feb* 1897.



R. C. Beavers
Ordinary *Campbell* County.

of Starks, John J. Deponent Sworn to before me and subscribed before me the following: said Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Campbell county been allowed a pension of fifty (\$50) dollars, for the year 1896.

Sworn to and subscribed before me, this, the 12th day of February, 1896. John J. Starks

R. C. Beavers Ordinary

STATE OF GEORGIA,
Campbell County.

I, R. C. Beavers Ordinary of said County, do certify that I am well acquainted with John J. Starks 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 12th day of February, 1896.



R. C. Beavers
Ordinary Campbell 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 pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Campbell county been allowed an invalid pension of five (\$5) Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 16 day of Feb, 1897. John J. Starks

R. C. Beavers Ordinary

STATE OF GEORGIA,
Campbell County.

I, R. C. Beavers Ordinary of said County, do certify that I am well acquainted with John J. Starks 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 16 day of Feb, 1897.



R. C. Beavers
Ordinary Campbell 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.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 1899.

[L. S.]

Executed in presence of _____

Starks, John J.
Campbell Co.
(For Those Already Enrolled.)
664 No. 2631
INVALID
SOLDIER'S PENSION.
1898.
Name John J. Starks
County Campbell
Disability by wound
Amount, \$ 50.00
2/21 1898.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO apoh
GEO. W. HAWKINS, STATE PRINTER, ATLANTA

No data

Starks, John J.
Campbell Co.
(For Those Already Enrolled.)
664 No. 2664
INVALID
SOLDIER'S PENSION.
1899.
Name John J. Starks
County Campbell
Disability by wound
Amount, \$ 50
2/20 1899.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO apoh
GEO. W. HAWKINS, STATE PRINTER, ATLANTA

Stacks, John J.
Campbell Co.
(For Those Already Enrolled.)
No. 2631
INVALID
SOLDIER'S PENSION.
1898.
Name John J. Stacks
County Campbell Co.
Disability Day Wound
Amount, \$ 50.00
2/21 1898.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO
Appch
No data

Stacks, John J.
Campbell Co.
(For Those Already Enrolled.)
No. 2669
INVALID
SOLDIER'S PENSION.
1898.
Name John J. Stacks
County Campbell Co.
Disability Wound & leg
Amount, \$ 50.00
2/20 1898.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO
Appch
No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears J. J. Stacks 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 24 day of Oct 2 1829; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Sergeant in Company E, of 64th Regiment of 29 Volunteers, Wright's Brigade; that whilst engaged in such military service in the State of Ga, on the 30 day of July 1864, he was wounded, injured or diseased as follows:

I was struck by a bounding cannon ball at the "Blow up" of Petersburg, the shell striking me in right groin, crushing right hip, dislocating my right hip and knocking me about ten feet, landing me on my right shoulder spraining the joint and on account of wound was so receiving, I am unable to be a support

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

Sworn to and subscribed before me, this, the 15th day of Feb 1898, by John J. Stacks
A. C. Savers, Ord.

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

STATE OF GEORGIA,

Campbell County.

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

Given under my official signature and seal, this 15th day of Feb 1898.

A. C. Savers
Ordinary Campbell County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears J. J. Stacks 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 24 day of Oct 2 1829; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Sargent in Company E, of 64th Regiment of Georgia Volunteers, Wright's Brigade; that whilst engaged in such military service in the State of Ga, on the 30 day of July 1864, he was wounded, injured or diseased as follows:

Aterator or blow up at Petersburg, Va. a shell bounded after striking the ground 2 or 3 times hit me in the right groin dislocating my right hip and breaking the bones in the groin mashing my right testicles, threw my ten feet on my right shoulder and spraining it so I am not able to work for a living, so I look to the State for help

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 Campbell County been allowed an invalid pension of Fifty Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 30 day of January 1899, by John J. Stacks
J. J. Stephens-Ordinary

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

STATE OF GEORGIA,

Campbell County.

I, J. J. Stephens Ordinary of said County, do certify that I am well acquainted with John J. Stacks 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 30 day of January 1899.

J. J. Stephens
Ordinary Campbell County.



if said wound was received, I am unable to perform a support

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

Sworn to and subscribed before me, this, 15th day of July, 1898. John J. Stacks POST OFFICE Red Oak Ga
R. C. Bravers Ord.

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

STATE OF GEORGIA,

Campbell County.

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

Given under my official signature and seal, this 15th day of July, 1898.

R. C. Bravers
Ordinary Campbell County.



on my right shoulder and spraining it so I am not able to work for a living, so I look to the state of Georgia for help

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 Campbell County been allowed an invalid pension of Forty Dollars, for the year 1898.

Sworn to and subscribed before me, this, 30 day of January, 1899. John J. Stacks POST OFFICE Red Oak Ga
J. J. Stephens Ord.

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

STATE OF GEORGIA,

Campbell County.

I, J. J. Stephens Ordinary of said County, do certify that I am well acquainted with John J. Stacks 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 30 day of January, 1899.

J. J. Stephens
Ordinary Campbell 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 _____, 1900.

Executed in presence of _____

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, John J. Stacks hereby authorize John J. Stacks of Campbell County to receive and receipt for the pension paid hereon and request that he remit same to _____ by hand at home

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

John J. Stacks [L. S.]

Executed in presence of

H. E. Stienlander
W. S. McSwain, Ord.

CODE SECTION 120.

(For Those Already Enrolled.)

664 No. 769

INVALID

SOLDIER'S PENSION.

1900.

Name John J. Stacks

County Campbell

Disability Leg Wound

Amount, \$ 52

Warrant issued July 9, 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

John J. Stacks

Geo. W. Harrison, State Printer, Atlanta.

No data

CODE SECTION 120.

(For Those Already Enrolled.)

664 No. 2895

DISABLED

SOLDIER'S PENSION.

1901.

Name John J. Stacks

County Campbell

Disability Leg

Amount, \$ 50

Warrant issued July 9, 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

John J. Stacks

Geo. W. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

Stacks, J. J.
Campbell, G.

CODE SECTION 100
(For Those Already Enrolled.)

No. *769*

INVALID

SOLDIER'S PENSION.

1900.

Name *J. J. Stacks*
County *Campbell*
Disability *Sig. Wound*
Amount, \$ *5.72*
Warrant issued *July 9* 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
J. J. Stacks
No date

Stacks, J. J.
Campbell, G.

CODE SECTION 100
(For Those Already Enrolled.)

No. *2895*

DISABLED

SOLDIER'S PENSION.

1901.

Name *J. J. Stacks*
County *Campbell*
Disability
Amount, \$ *50*

2/18 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
J. J. Stacks
No. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears *J. J. Stacks* 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 *24* day of *October* 18*79*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sergeant* in Company *E*, of *64th* Regiment of *Georgia* Volunteers, *Man Wright's* Brigade; that whilst engaged in such military service in the State of *Virginia*, on the *30* day of *July* 186*4*, he was wounded, injured or diseased as follows:

at the Colaw up at or near Petersburg, Va. a shell bounded after striking the ground 2 or 3 times hit me in the right groin and dislocated my right hip and breaking the leaders bone in the groin, mashing my right shoulder, threw me ten feet in my right shoulder and sprained it so I am not able to work for a living, not able to work any

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of *Campbell* County been allowed an invalid pension of *Five Dollars* for the year 189*9*.

Sworn to and subscribed before me, this, *J. J. Stacks* *33* day of *February* 1900. POST OFFICE *Red Oak, Ga.*

J. J. Stephens - Ordinary.

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

STATE OF GEORGIA,

Campbell County.

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

Given under my official signature and seal, this *23* day of *February* 1900.

J. J. Stephens
Ordinary *Campbell* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Campbell County.

Personally appears *J. J. Stacks* 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 *24* day of *Oct* 18*79*; that he enlisted in the military service of the Confederate States (or of the State of *Va*) during the war between the States, and served as a *Sergeant* in Company *E*, of *64th* Regiment of *Ga* Volunteers, *Wright's* Brigade; that whilst engaged in such military service in the State of *Va*, on the *30* day of *July* 186*4*, he was wounded, injured or diseased as follows:

I was hit by a shell in right groin dislocating right hip & breaking leaders bone in right thigh, throwing me ten feet on right shoulder spraining said shoulder, thus permanently disabling me & rendering me unable to earn a support.

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

Sworn to and subscribed before me, this, *J. J. Stacks* *8* day of *January* 1901. Postoffice *Red Oak, Ga.*

M. S. McSorin - Ordinary.

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,

Campbell County.

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

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

M. S. McSorin
Ordinary *Campbell* County.

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1900. I have heretofore under said law as a resident of Campbell County been allowed an invalid pension of Twenty \$50.00 Dollars, for the year 1899.
Sworn to and subscribed before me, this, the 23 day of February, 1900. POST OFFICE Red Oak, Ga
J. J. Stephens Ordinary

STATE OF GEORGIA,

Campbell County.

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

Given under my official signature and seal, this 23 day of February, 1900.
J. J. Stephens Ordinary Campbell County.

to some of support.

Deponent makes application for the pension to which he is entitled for year ending October 28th, 1901. I have heretofore under said law as a resident of Campbell County been allowed an invalid pension of Twenty Dollars, for the year 1900.
Sworn to and subscribed before me, this the 8 day of January, 1901. Postoffice Red Oak, Ga
M. S. Mc Lorin Ordinary

STATE OF GEORGIA,

Campbell County.

I, M. S. Mc Lorin Ordinary of said County, do certify that I am well acquainted with J. J. Stocks 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 8 day of January, 1901.
M. S. Mc Lorin Ordinary Campbell County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, John J. Stocks hereby authorize Jessie J. Stock of Campbell Co Ga to receive and receipt for the pension paid hereon and request that he remit same to me by hand at home

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15 day of January, 1902.

John J. Stocks [L. S.]

Executed in presence of

M. S. Mc Lorin, Ord.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, J. J. Stocks hereby authorize J. J. Stock of Campbell Co Ga to receive and receipt for the pension paid hereon and request that he remit same to me by hand at home

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15 day of January, 1902.

J. J. Stocks [L. S.]

Executed in presence of

M. S. Mc Lorin, Ord.

DISABLED SOLDIER'S PENSION 1902.

Name John J. Stocks
County Campbell
Co. E Regiment 64
Disability Body Wound
Amount, \$ 50.00

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
J. J. Stocks
GEO. W. HARRISON Blue Printer, Atlanta.

no data

Stocks J. J. (John J.)
Campbell County

DISABLED SOLDIER'S PENSION 1903.

Name J. J. Stocks
County Campbell
Co. E Regiment 64
Disability Body Wound
Amount, \$ 50.00

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
J. J. Stocks
GEO. W. HARRISON Blue Printer, Atlanta.

no data

Stacks John J. Campbell

(FOR THOSE ALREADY ENROLLED.)

E-64 No. *488*

DISABLED

SOLDIER'S PENSION

1902.

Name *John J. Stacks*
 County *Campbell*
 Co. *E* Regiment *64*
 Disability *lost right leg*
 Amount, \$ *50.00*

120 1902.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO *[Signature]*
 ONE, WASHINGTON, D.C. 20540, ALABAMA.

Stacks John J. (John J.) Stacks

(FOR THOSE ALREADY ENROLLED.)

Abv No. *498*

DISABLED

SOLDIER'S PENSION

1903.

Name *John J. Stacks*
 County *Campbell*
 Co. *E* Regiment *64*
 Disability *lost right leg*
 Amount, \$ *50.00*

137 1903.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO *[Signature]*
 ONE, WASHINGTON, D.C. 20540, ALABAMA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Campbell County.

Personally appears *John J. Stacks* 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 *24* day of *Oct* 18*99*; that he enlisted in the military service of the Confederate States (or of the State of *La*) during the war between the States, and served as a *Private* in Company *E*, of *64*th Regiment of *La* Volunteers, *Wright*'s Brigade; that whilst engaged in such military service in the State of *La*, on the *20*th day of *July* 18*64*, he was wounded, injured or diseased as follows: *I was struck by a shell, it hit me in the groin, at the "blow up" of Petersburg, while in Company E, 64th Regt. La. Vol. I was shot in right groin by a piece of shell on July 20th 1864 - I was wounded in groin, wounded right testicle, there were no other wounds. I was unable to work for some time.*

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 *Campbell* County, been allowed an invalid pension of *Fifty* Dollars, for the year 1901.

Sworn to and subscribed before me, this *10*th day of *Jan* 1902. Post-office *Red Oak, La*

M. S. McLoon Clerk

STATE OF GEORGIA,

Campbell County.

I, *M. S. McLoon* Ordinary of said County, do certify that I am well acquainted with *John J. Stacks* 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 *15*th day of *Jan* 1902.

M. S. McLoon Ordinary *Campbell* County.

NOTE.—Fill all blanks and of Company and Regiment.
 NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Campbell County.

Personally appears *John J. Stacks* 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 *24* day of *Oct* 18*99*; that he enlisted in the military service of the Confederate States (or of the State of *La*) during the war between the States, and served as a *Private* in Company *E*, of *64*th Regiment of *La* Volunteers, *Wright*'s Brigade; that whilst engaged in such military service in the State of *La*, on the *20*th day of *July* 18*64*, he was wounded, injured or diseased as follows:

I was shot in right groin by a piece of shell at "Grotto" - Petersburg - on July 20th 1864 - I was wounded in right shoulder the walking down out of place - On account of this wound I am unable to do any more work.

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 *Campbell* County, been allowed an invalid pension of *Fifty* Dollars, for the year 1902.

Sworn to and subscribed before me, this *15*th day of *Jan* 1903. Post-office *Red Oak, La*

M. S. McLoon Clerk

STATE OF GEORGIA,

Campbell County.

I, *M. S. McLoon* Ordinary of said County, do certify that I am well acquainted with *John J. Stacks* 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 *15*th day of *Jan* 1903.

M. S. McLoon Ordinary *Campbell* County.

NOTE.—Fill all blanks and of Company and Regiment.
 NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1902. I have heretofore, under said law, as a resident of Campbell County, been allowed an invalid pension of Fifty Dollars, for the year 1901.

Sworn to and subscribed before me, this 15th day of January, 1902. John J. Stacks Post-office Red Oak, Ga
M. McLaughlin, Ord.

STATE OF GEORGIA,
Campbell County.

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

Given under my official signature and seal, this 15th day of January, 1902.
M. McLaughlin Ordinary Campbell County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1903. I have heretofore, under said law, as a resident of Campbell County, been allowed an invalid pension of Fifty Dollars, for the year 1902.

Sworn to and subscribed before me, this 15th day of January, 1903. John J. Stacks Post-office Red Oak, Ga
M. McLaughlin, Ord.

STATE OF GEORGIA,
Campbell County.

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

Given under my official signature and seal, this 15th day of January, 1903.
M. McLaughlin Ordinary Campbell County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, John J. Stacks hereby authorize Jesse J. Stacks of Campbell County to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at Louisiana

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of January, 1904.
John J. Stacks [L. S.]

Executed in presence of
M. McLaughlin, Ord.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, John J. Stacks hereby authorize Jesse J. Stacks of Campbell County to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at Louisiana

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th day of January, 1905.
John J. Stacks [L. S.]

Executed in the presence of
M. McLaughlin, Ord.

**SOLDIER'S PENSION
1904.**

Name John J. Stacks
County Campbell
Co. "E" Regiment 64th
Disability Wound
Amount, \$ 50.00
1/37 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
Jesse J. Stacks

no data

**SOLDIER'S PENSION
1905.**

Name John J. Stacks
County Campbell
Co. "E" Regiment 64th
Disability Wound
Amount, \$ 50.00
1/37 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
Jesse J. Stacks

no data

Stacks, John J.
Campbell County

(FOR THOSE ALREADY ENROLLED.)

No. *607*

DISABLED

SOLDIER'S PENSION

1904.

Name *J. J. Stacks*
County *Campbell*
Co. *"E"* Regiment *64*
Disability *Wounded*
Amount, \$ *30.00*
1/27 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. J. Stacks

no data

Stacks, John J.
Campbell County

(FOR THOSE ALREADY ENROLLED.)

No. *568*

DISABLED

SOLDIER'S PENSION

1905.

Name *J. J. Stacks*
County *Campbell*
Co. *"E"* Regiment *64*
Disability *Wounded*
Amount, \$ *30.00*
1/27 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. J. Stacks

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Campbell County.

Personally appears *J. J. Stacks* 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 *24* day of *Oct* 1829, that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served as a *Sergeant* in Company *"E"*, of *64*th Regiment of *Ga* Volunteers *Wright*'s Brigade; that whilst engaged in such military service in the State of *Ga*, on the *30* day of *July* 1864, he was wounded, injured or diseased as follows:
I shall strike in the right groin causing me to fall & dislocate my left hip, breaking my bones in bones in groin, making right to fall. I was wounded in the groin for seven or more months before

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 *Campbell* County, been allowed an invalid pension of *30.00* Dollars, for the year 1903.

Sworn to and subscribed before me, this the *9* day of *Jan* 1904. *J. J. Stacks*
M. S. Loring Only Post-office *Red Oak Ga*

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,
Campbell County.

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

Given under my official signature and seal, this *9* day of *Jan* 1904. *M. S. Loring*
Ordinary *Campbell* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Campbell COUNTY.

Personally appears *J. J. Stacks* 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 *24* day of *Oct* 1829, that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served as a *Sergeant* in Company *"E"*, of *64*th Regiment of *Ga* Volunteers *Wright*'s Brigade; that whilst engaged in such military service in the State of *Ga*, on the *30* day of *July* 1864, he was wounded, injured or diseased as follows:
I shall strike in the right groin by a shell after it had struck the ground 2 or 3 times. said wound dislocated my right hip, breaking the bones and making my right leg little & throwing me 10 feet on my shoulder on the ground and I am unable to do any manual labor

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 *Campbell* County, been allowed an invalid pension of *30.00* Dollars, for the year 1904.

Sworn to and subscribed before me, this the *13* day of *Jan* 1905. *J. J. Stacks*
M. S. Loring Only Post-office *Red Oak Ga*

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,
Campbell COUNTY.

I, *M. S. Loring* Ordinary of said County, do certify that I am well acquainted with *J. J. Stacks* 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 *13* day of *Jan* 1905. *M. S. Loring*
Ordinary *Campbell* County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

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 Campbell County, been allowed an invalid pension of Five Dollars, for the year 1903.

Sworn to and subscribed before me, this the 9 day of January, 1904. N. S. McCloskey, Ord. Post-office Red Oak Ga

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,
Campbell County.

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

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

Ordinary Campbell County.

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

Note.—All vouchers and affidavits must bear date after January 1, 1904.

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 Campbell County, been allowed an invalid pension of Five Dollars, for the year 1904.

Sworn to and subscribed before me, this the 13 day of January, 1905. N. S. McCloskey, Ord. Post-office Red Oak Ga

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,
Campbell County.

I, N. S. McCloskey Ordinary of said County, do certify that I am well acquainted with J. J. Stacks 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 13 day of January, 1905.

Ordinary Campbell County.

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

Note.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, J. J. Stacks hereby authorize J. J. Stacks of Red Oak Ga to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at home

In Witness Whereof, I have hereunto set my hand and seal, this 8 day of January, 1906.

J. J. Stacks [L. S.]

Executed in the presence of

N. S. McCloskey, Ord.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

I, John J. Stacks hereby authorize J. J. Stacks of Red Oak Ga to receive and receipt for the pension paid hereon, and request that he remit same to me by hand at home

In Witness Whereof, I have hereunto set my hand and seal, this 9 day of January, 1907.

J. J. Stacks [L. S.]

Executed in presence of

N. S. McCloskey, Ord.

Stacks John J.
Campbell Co.

Cons. Section 120.
(FOR THOSE ALREADY ENROLLED.)

No. 547

**DISABLED
SOLDIER'S PENSION
1906.**

Name J. J. Stacks
County Campbell
Co. E Regiment 64
Disability Right Arm
Amount, \$ 5.00

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
J. J. Stacks

year-date 1906

Stacks John J.
Campbell Co.

Cons. Section 120.
(FOR THOSE ALREADY ENROLLED.)

No. 547

**DISABLED
SOLDIER'S PENSION
1907.**

Name John J. Stacks
County Campbell
Co. E Regiment 64
Disability Right Arm
Amount, \$ 5.00

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
J. J. Stacks

year-date 1907

Stokes John
Campbell

Cons. Service 1860.
(FOR THOSE ALREADY ENROLLED)

No. *547*

DISABLED
SOLDIER'S PENS.
1906.

Name *J. J. Stokes*
County *Campbell*
Co. *E* Regiment *64*
Disability *Body Wound*
Amount, \$ *10.00*

JOHN W. LINDSEY
Commissioner of Pensions

WARRANT HANDED TO
J. J. Stokes

Year-date *1906*

Stokes John J.
Campbell Co.

Cons. Service 1860.
(FOR THOSE ALREADY ENROLLED)

No. *547*

DISABLED
SOLDIER'S PENS.
1907.

Name *John J. Stokes*
County *Campbell*
Co. *E* Regiment *64*
Disability *Body Wound*
Amount, \$ *10.00*

JOHN W. LINDSEY
Commissioner of Pensions

WARRANT HANDED TO
J. J. Stokes

Year-date *1907*

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Campbell County.

Personally appears *J. J. Stokes* 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 *24* day of *Oct* 18*64*; that he enlisted in the military service of the Confederate States, (or of the State of *Ga*) during the war between the States, and served as a *Sergeant* in Company *E* of *64*th Regiment of *4a* Volunteers *Wright*'s Brigade; that whilst engaged in such military service in the State of *Va*, on the *30* day of *July* 18*64*, he was wounded, injured or diseased as follows: *I was hit by a shell of 12 lb. at 2 p.m. 16 in ground, it struck me in my right groin, dislocating my right hip, and breaking leaders in groin & wounding right testicle. On 4th of said month I was unfit for ordinary manual labor.*

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 *Campbell* County, been allowed an invalid pension of *7.50* Dollars, for the year 1906.

Sworn to and subscribed before me, this the *7* day of *July* 1906. *J. J. Stokes*
M. S. McSorin, Ord. Post-Office *Red Oak Ga*

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

State of Georgia,

Campbell County.

I, *M. S. McSorin* Ordinary of said County, do certify that I am well acquainted with *J. J. Stokes* 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 *8* day of *July* 1906. *M. S. McSorin*

Ordinary *Campbell* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Campbell County.

Personally appears *John J. Stokes* 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 *24* day of *Oct* 18*64*; that he enlisted in the military service of the Confederate States (or of the State of *Ga*) during the war between the States, and served as a *1st Sergeant* in Company *E*, of *64*th Regiment of *4a* Volunteers *Wright*'s Brigade; that whilst engaged in such military service in the State of *Va*, on the *30* day of *July* 18*64*, he was wounded, injured or diseased as follows: *I fell off top of hill in the ground, 2 or 3 times bounded and hit me in the right groin, dislocating right hip, breaking leaders, wounding right testicle & drawing me 10 feet & rendering me a coward unfit for ordinary manual labor.*

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 *Campbell* County, been allowed an invalid pension of *7.50* Dollars, for the year 1906.

Sworn to and subscribed before me, this the *7* day of *July* 1907. *J. J. Stokes*
M. S. McSorin, Ord. Postoffice *Red Oak Ga*

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

State of Georgia,

Campbell County.

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

Given under my official signature and seal this *7* day of *July* 1907. *M. S. McSorin*

Ordinary *Campbell* County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

day of 1874, that he enlisted in the military service of the Confederate States, (or of the State of 4a) during the war between the States, and served as a Private in Company E, of 64th Regiment of 4a Volunteers Wright's Brigade; that whilst engaged in such military service in the State of 4a, on the 30 day of July 1864, he was wounded, injured or diseased as follows: I was hit by a shell of 24 lbs. at 24 miles in my right groin, dislocating my right hip, and breaking blades in groin & wounding right testicle. One of 4 solid wounds I am unfit for ordinary manual labor

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 Campbell County, been allowed an invalid pension of 75¢ Dollars, for the year 1905.

Sworn to and subscribed before me, this 8th day of July 1906. W. J. Campbell Post-Office Red Oak Ga

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

Given under my official signature and seal, this 8th day of July 1906. W. J. Campbell

Ordinary Campbell County.

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

federate States (or of the State of 4a) during the war between the States, and served as a Private in Company "E", of 64th Regiment of 4a Volunteers Wright's Brigade; that whilst engaged in such military service in the State of 4a, on the 30 day of July 1864, he was wounded, injured or diseased as follows: I shell of 24 lbs. hit me in the right groin, dislocating my right hip, breaking blades in groin & wounding right testicle. One of 4 solid wounds I am unfit for ordinary manual labor

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 Campbell County, been allowed an invalid pension of 75¢ Dollars, for the year 1906.

Sworn to and subscribed before me, this 7th day of July 1907. W. J. Campbell Post-Office Red Oak Ga

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

Given under my official signature and seal this 7th day of July 1907. W. J. Campbell

Ordinary Campbell County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

Audited May 31 1889.

Wm. J. Campbell
COMPTROLLER-GENERAL

Campbell
Maimed Soldiers.

Voucher No 2337
Amount, \$ 50.
Paid to John J. Stacks
For Disability from
body injuries,
May 31, 1889.

Included in Warrant No. _____
issued to Treasurer.

1889.

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

Applicant.

Audited _____ 18 _____

COMPTROLLER-GENERAL

Campbell Co
Maimed Soldiers.

Voucher No 1319
Amount \$ 50.
Paid to John J. Stacks
For Leg disabled,
July 17 1890

Included in warrant No. _____
issued to Treasurer.

18 _____

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

Applicant

Paid to *John J. Stacks*
For Disability from
body injuries,
May 31, 1889.

Included in Warrant No. _____
issued to Treasurer.

1889.

WARRANT CLERK.

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

Applicants.

COMPTROLLER-GENERAL.

Paid to *John J. Stacks*
For *Leg disabled*
July 17, 1890.

Included in warrant No. _____
issued to Treasurer.

18

WARRANT CLERK.

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

Applicant

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

No. *2337*
Atlanta, Ga. May 31 1889.

Mr. *John J. Stacks* of the County
of *Campbell* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Dec. 24, 1888, and the same having been allowed for
Disability from body injuries
He is entitled to receive the sum of *Five 5.00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor,

W. H. Hamson

CLERK EXECUTIVE DEPARTMENT.



GOVERNOR.

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

No. *1319*
Atlanta, Ga., July 17 1890.

Mr. *John J. Stacks* of the County
of *Campbell* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for
Leg disabled
He is entitled to receive the sum of *Five 5.00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.
The Treasurer will pay the same and hold his receipt on this voucher, and return same
to Executive Department for warrant.

By the Governor,

W. H. Hamson

CLERK EXECUTIVE DEPARTMENT.

W. H. Hamson

GOVERNOR.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

per above voucher, this

Five 5.00 Dollars,
17 of *July* 1890
J. J. Stacks

Dollars,

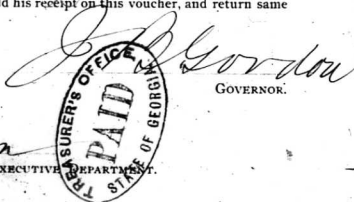
Mr. *John J. Stacks* of the County
of *Campbell* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Dec. 24, 1888, and the same having been allowed for
Disability from body injuries
He is entitled to receive the sum of *Fifty 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889

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

By the Governor,

W H Hamson

CLERK EXECUTIVE DEPARTMENT.



RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/100
per above voucher, this *31*

of *May*
John J. Stacks
1889.

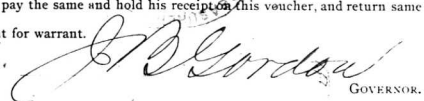
Mr. *John J. Stacks* of the County
of *Campbell* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for
Leg disabled
He is entitled to receive the sum of *Fifty 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890

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

By the Governor,

W H Hamson

CLERK EXECUTIVE DEPARTMENT.



RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/100
per above voucher, this *7*

of *July*
J. J. Stacks
1890

Audited _____ 1891. COMPTROLLER GENERAL.	<i>Stacks, John J.</i> <i>Campbell</i>
	1891.
	Maimed Soldiers.
	Voucher No. 1010
	Amount \$ 50.
	Paid to <i>John J. Stacks</i>
	For <i>Leg dis</i>
	<i>July 1891</i>
	Included in warrant No. _____
	issued to Treasurer.
	<i>John J. Stacks</i> , 1891.
	WARRANT-CLERK.
	Gen. W. Harrison, State Printer, Atlanta.
	<i>Applicant.</i>

Paid to John J. Stock
For Leg. dis.
July 17 1891.

Included in warrant No.

issued to Treasurer.

John J. Stock 1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant.

1891.

No. 1010

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

Atlanta, Ga. July 17 1891.

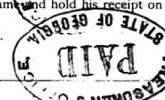
Mr. John J. Stock of the County
of Campbell having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Dis. leg
He is entitled to receive the sum of Twenty Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor.

Geo. W. Harrison

Sec'y EXECUTIVE DEPARTMENT.



M. J. Gordon
GOVERNOR.

\$ 50

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

July 1891 Dollars,
per above voucher, this 17 of July 1891.

John J. Stock

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 1010

Atlanta, Ga. July 17 1891.

Mr. John J. Stock of the County
of Campbell having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for

Dis' leg
He is entitled to receive the sum of Twenty Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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



A. J. Mordine
GOVERNOR.

By the Governor.

W. H. Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$ 50

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

Twenty Dollars,
per above voucher, this 17 of July 1891.

John J. Stock

Sample Sept. 9, 1913.
Witness not on record.

Stacks, Sarah M.
Widow of H. T. Cook

Widow's Application

UNDER ACT 1910.

Who Lost a Husband During War as a
Soldier, Remarried and is Now
a Widow.

County Campbell
Name Sarah M. Stacks
Soldier Husband's Name H. T. Cook
Co. 27th Ga. Inf.
Company "E"
Regiment 27th Ga. Vol.
Name of Last Husband J. J. Stacks

Approved _____

I. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer, Atlanta.

9/23/1913

entered Roster Office
9/26/13

interior Poster Office
9/26/13.

I know that I served in some fine army south of Mobile to 1862 was found
at Fort Coffee, Texas / 1861 & better leave in Spring of 1862 just
before his death, when I was discharged on account of sickness

Warrenton County.

I personally know me come 80 numbers who after being duly sworn on oath says that he
knows P. Cook, that he enlisted in Company "B" 1st Regiment of Ore
veterans on the four day of June 1861
and that on the day of May which was killed or died as a result of the injury received
while in time of duty as a soldier, in the Confederate army, and that he knows Mrs
Cook lived in town of Warrenton, Oregon, until she came to live in
at Cook's house since I have been back at home I have seen her
for her death when I was discharged on account of illness

County.

Personally before me comes _____ of said county, who after being sworn on oath says that she became the lawful wife of _____ on the day of _____ 18____ and that he did on the _____ day of _____ 18____ enlist in Company _____ Regiment _____ and was on the _____ day of _____ 18____ killed or died as the result of an injury received while in line of duty on the _____ day of _____ 18____ leaving this applicant, his widow. That on the _____ day of _____ 18____ she was married to _____ of _____ County, and that on the _____ day of _____ 19____ in the county of _____ State of _____ the said _____ died and that this deponent is now a widow.

That she was on the 4th day of November, 1908 or at the death of her last husband left in the use possession and control of the property. Stated in schedule (A)

_____ acres of land cash value of _____
Horses or mules _____
Hogs and cows and other stock _____
money, notes, etc _____
_____ actual income and savings _____

Total _____

SCHEDULE C.

That she is now in the use, possession and control of the following property at the cash value attached

_____	acres of land of the cash value _____
_____	Horses and cows of the cash value _____
_____	Hogs and other stock _____
_____	Cotton and other farm Products, worth _____
_____	_____
_____	_____
_____	Total value of all property _____

and that the valuation of all of said property, is stated at its true cash value.

Sworn to and subscribed to by me this _____ day of _____ 191____

Ordinary }
County }

STATE OF GEORGIA,
Campbell County.

Personally before me come J. A. Lanster who after being duly sworn on oath says that he
knows H. T. Cook, that he enlisted in Company Re-27th Regiment of Ge.
veterans on the 24th day of June 18 61
and that on the 1st day of May 18 62 he was killed as a result of disease contracted
while in line of duty as a soldier, in the Confederate army, and that he knows Mr.

1
Sarah Mc Stark the applicant, She and her said soldier husband was married on the _____ day of _____ 1882 and that she was his widow at his death, that *John Mc Stark* the said soldier married again on the _____ day of 1888 to one *John J. Stark* and that her said husband *John J. Stark* died on the _____ day of 1903 and that the applicant is now a widow.
 sworn to and subscribed before me this 24th day of August, 1913
Thos Mc Cormac, Ordinary.
James Stark 16th & 6th November 1903

STATE OF GEORGIA,
County of Bainbridge
Personally before me E. D. Cook and J. H. Hockett, who after being sworn on oath says that they are Free Holders of said County of Bainbridge and that they know Mrs. Sarah M. Hockett and that she was on the 4th day of November or at the death of her last husband, on the 31st day of May 1913 and that he left her in the use, possession and control of property at its true cash

SCHEDULE A.

<u>100</u>	..... Lands whose cash value
<u>11</u>	..... Horses mules
<u>111</u>	..... Cows hogs and other stock
<u>4</u>	..... Money, notes and accounts
<u>44</u>	..... All other property
<u>5</u>	..... Total cash value of all property. <u>Nothing</u>

SCHEDULE B.

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:

<u>120</u>	land worth	.....
<u>17</u>	Horses and mules	.....
<u>11</u>	Cows, hogs and stock of all kind	.....
<u>11</u>	any and all other property	.....
	Total cash value	<u>269</u>

and we know that the proceeds of this property were vested in its full cash value and was disposed of (State fully):

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the actual cash value as follows, to-wit:

<u>No</u>	Land of the cash value of <u>nothing</u>
"	Horses and mules, cash value of
"	Cows, hogs, and other stock
"	Wagon and Buggy
"	Other personal property
"	Money notes and accounts
"	Actual income and savings

Total cash value of all property nothing

Sworn to and subscribed before me this 20th day of Aug. 1913

W. H. Walker Ordinary
of Cape Fear County

J. P. Cook
W. H. Walker

Money, notes and accounts
All other property

Total cash value of all property nothing

SCHEDULE B.

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:

land worth

Horses and mules

Cows, hogs and stock of all kind

any and all other property

Total cash value

and we know that the proceeds of this property were X its full cash value and was disposed of (State fully.)

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the actual cash value as follows, to-wit:

Land of the cash value of nothing

Horses and mules, cash value of

Cows hogs, and other stock

Wagon and Buggy

Other personal property

Money notes and accounts

Actual income and savings

Total cash value of all property nothing

Sworn to and subscribed before me this 20th day of Aug. 1913

W. S. McSorin Ordinary
of Campbell County

J. P. Cook
W. H. Walker

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

Total value

and that the proceeds were disposed of

SCHEDULE C.

That she is now in the use, possession and control of the following property at the cash value attached

acres of land of the cash value

Horses and cows of the cash value

Hogs and other stock

Cotton and other farm Products, worth

Total value of all property

and that the valuation of all of said property, is stated at its true cash value.

Sworn to and subscribed to by me this day of 191

Ordinary

County

Affidavit of the Witness to the Service and Death of Soldier Husband and Her Marriage.

STATE OF GEORGIA,

Campbell

County.

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 "B"-27th Regiment of Ge. veterans on the 20th day of June 1861 and that on the 1st day of May 1862 he died as a result of disease contracted while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.

Stah M. Stacks the applicant. She and her said soldier husband were married on the 15th day of Sept. 1861 and that she was his widow at his death, that he died that the said Stah M. Stacks married again on the about day of 1868 19 to one John J. Stacks and that her said husband died on the 1st day of May 1862 and that the applicant is now a widow.

Sworn to and subscribed before me this 22nd day of Sept. 1913.

W. S. McSorin Ordinary

of Campbell County

J. A. Lasiter
W. H. Walker

Affidavit of the Witness to the Property and its Value.

STATE OF GEORGIA,

County.

Personally before me who after being sworn on oath says that they are Free Holders of said County of and that they know Mrs. and that she was on the 4th day of November or at the death of her last husband, on the day of 19 and that he left her in the use, possession and control of property at its true cash value, as follows.

SCHEDULE A.

Lands whose cash value

Horses mules

Cows hogs and other stock

Money, notes and accounts

All other property

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 given away property of the cash value of to-wit:

land worth

Horses and mules

Cows, hogs and stock of all kind

any and all other property

Total cash value

and we know that the proceeds of this property were its full cash value and was disposed of (State fully.)

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the actual cash value as follows, to-wit:

Land of the cash value of

Horses and mules, cash value of

Cows hogs, and other stock

Wagon and Buggy

Other personal property

Money notes and accounts

Actual income and savings

Total cash value of all property

Sworn to and subscribed before me this day of 19

Ordinary
County

Free Holders of said County of _____ and that they know Mrs. _____ and that she was on the 4th day of November or at the death of her last husband, on the _____ day of _____ 19____ and that he left her in the use, possession and control of property at its true cash value, as follows.

SCHEDULE A.

Lands _____ whose cash value _____
Horses _____ mules _____
Cows hogs and other stock _____
Money, notes and accounts _____
All other property _____
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 given away property of the cash value of to-wit:

Land worth _____
Horses and mules _____
Cows, hogs and stock of all kind _____
any and all other property _____
Total cash value _____

and we know that the proceeds of this property were _____ its full cash value and was disposed of (State fully.) _____

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the actual cash value as follows, to-wit:

Land of the cash value of _____
Horses and mules, cash value of _____
Cows hogs, and other stock _____
Wagon and Buggy _____
Other personal property _____
Money notes and accounts _____
Actual income and savings _____
Total cash value of all property _____

Sworn to and subscribed before me this _____ day of _____ 19____
Ordinary _____
of _____ County _____

old *Stacks, Sarah M. (Mrs.)*
old Campbell Co.
"OLD" CLASS 1921
1921

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

W. S. McFarlin, Ordinary

For Mrs. Sarah M. Stacks

of Campbell County

Old or New Class "Old"

Died July 15th, 1921.

Amount \$ 25.00 (balance 1291.)

Approved and ordered paid.
July 17/21

J. W. LINDSEY,
Commissioner of Pensions.
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 approved 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.

Index Printing Co. Atlanta, Ga.

HOLSONBACK CASKET COMPANY

MANUFACTURERS OF

HIGH GRADE CASKETS AND FUNERAL SUPPLIES

PHONE NO. 40 ON UNION CITY EXCHANGE

UNION CITY, GA. July 14, 1921.

1 Casket
1 Robe } \$ 75.00
1 pr gloves
for Mrs. Sarah M. Stacks
their account as per
bill and unpaid
Holsonback Casket Co
per J. W. Lindsey
Dec 23/21

Georgia, Campbell County.

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

R. M. Stacks

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

J. W. Lindsey
Ordinary

Index Printing Co. Atlanta, Ga.

W. A. M. Loring
Ordinary

[illegible]

Walker and J. D. Cook, both of said county and presented as witnesses in 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 broth in-law respectively of the the applicant, Mrs. Sarah M. Stacks, formerly Sarah M. Cook, and that they each know that H. T. Cook, the first husband of applican, (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 rela tionship was never questioned at all by anyone; that this couple 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 le gitimate offspring of a legally married couple, to wit: the appliaent and her deceased first husband H. T. Cook;

that for same reason, unknown to deponents, the marriage lincense of the applicant and H. T. Cook can not be found of record in the county of Pay ette, 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 (J. S.)
J. D. Cook (J. S.)

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

H. M. Loxie
Ordinary

of said County, who, after being sworn, on oath says that he knew Mrs. Sarah M. Stacks of said County, and that said pensioner was on the "Feb 1910" Pension Roll of Campbell County at the time of death, which occurred in Campbell County, in this State, on the 15th day of July 1921, and that a Pension of balance of twenty five (25) 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 \$ 75⁰⁰ per sworn statement fully and completely itemized, hereto attached.

Sworn to and subscribed before me
this 23rd day of December 1921
H. M. Loxie Ordinary.
Campbell County.

AFFIDAVIT OF ORDINARY

GEORGIA, Campbell County.
I, H. M. Loxie Ordinary of said County, do certify that I personally know Mrs. Sarah M. Stacks, who is a resident citizen of said County, and that said person is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Mrs. Sarah M. Stacks while in life and that this was the same person whose name appears on the "Feb 1910" Pension Roll of Campbell County, and was paid a Pension of balance of twenty five (25) Dollars in said County for 1920, and I now believe said pensioner to be dead.

Given under my hand and official seal, this 23rd day of December 1921
(SEAL) H. M. Loxie Ordinary.
Campbell County.

INSTRUCTIONS:
1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and died without leaving sufficient property to pay such expenses. The widow of a soldier, if she is living, has prior claim over these expenses, and must make application on yellow blank.
2nd. Require those claiming accounts for expenses of last illness and expenses of funeral, to make out their account in fully itemized form, giving each item and the value of it, and each date.
3rd. Such accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
4th. Such account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid" etc.)
The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without leaving sufficient property to pay this bill."
5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached thereto in this blank, after this blank has been properly completed as indicated.
6th. The completed voucher, this blank and the bills, must be sent to the Pension Office for approval and no money must be paid out until it is returned to you or your authority to make the payment.
7th. The Ordinary signs pay-roll as Ordinary, for the pension and then disburses the money himself and takes receipts.
8th. The Ordinary or his authorized agent, until you write the Pension Office, stating the circumstances in very great detail, Pension Office, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.
9th. Return this application, and attached bills, with your final settlement to the Pension Office.
10th. Ordinary should see that the back of this blank, when filled, is filed out.
11th. Funeral expenses of deceased "war" pensioners covering all or part of both the 1890 and 1891 pensions require two separate sets of this voucher and bills—one set to be filed in the Pension Office with the pension papers of each year.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

CAMPBELL COUNTY.

I, S. McInnis,

Ordinary of said County, do certify that I

know Mrs. Annie Martha Stead, the applicant for this pension, and that she is the

person she represents herself to be, and that she is a bona fide continuing resident of said County and was

on the 1st day of 1902.

That I also know that Mrs. Annie Martha Stead, (nee Stead) was before signing the foregoing affidavit, and that her name is true and her statements

are entitled to full faith and credit.

Sworn under my hand and official seal of office this 28th day of August, 1902.

(SEAL) S. McInnis, Ordinary, Campbell County.

NOTES: 1. Before any questions are answered, the Ordinary shall examine the applicant and the witness in the following words: "You are solemnly sworn that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

answers, and that you will not answer more to any of the questions asked you than the witness

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910. As Amended by Act of 1919.

County CAMPBELL
Name Mrs. Annie Martha Stead
Widow of F. H. Stead
Company "I"
Regiment 2nd Ga. Cav'y
Approved

J. W. HINDSETT,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

8/27/1923

WIDOW'S CERTIFICATE

COUNTY

Ordinary of said County, do certify that I
the applicant for this pension, and that she is the
in a bona fide continuing resident of said County and was
1900.

Ordinary of said County, do certify that I
the applicant for this pension, and that she is the
in a bona fide continuing resident of said County and was
1900.

Ordinary of said County, do certify that I
the applicant for this pension, and that she is the
in a bona fide continuing resident of said County and was
1900.

Ordinary of said County, do certify that I
the applicant for this pension, and that she is the
in a bona fide continuing resident of said County and was
1900.

Widow of F. H. Steed
Company "I"
Regiment 2nd Ga. Cav'y
Approved
J. W. Lindsey, Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.
8/27/1923

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
CAMPBELL COUNTY.

I, W. S. McLavin, Ordinary of said County, do certify that I
know Mrs. Annie Martha Steed, the applicant for this pension, and that she is the
person she represents herself to be, and that she is a bona fide continuing resident of said County and was
on the day of 1900.

That I also know that Mrs. Annie Martha Steed, (applicant) was
before signing the respective affidavits, and that they are truthful and trustworthy and their statements
are entitled to full faith and credit.

Sworn under my hand and official seal of office this 29th day of August, 1923.
(SEAL) W. S. McLavin, Ordinary.
Campbell County.

- NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general
reputation.
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.

Copy Annie Martha Steed
Order 1924
No. 100
Campbell

1874
Widow's Application
To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910—
As Amended by Act of 1919.

County CAMPBELL
Name Mrs. Annie Martha Steed,
Widow of F. H. Steed
Company "I"
Regiment 2nd Ga. Cav'y
Approved

J. W. Lindsey,
Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.
8/27/1923

1874
 No. 1974
 Campbell

Widow's Application
 To Be Put on Roll in Her Own Right When
 Husband Was on the Indigent Roll or
 Put on Under Act of July 11, 1910—
 As Amended by Act of 1919.

County CAMPBELL

Name Mrs. Annie Martha Steed

Widow of F. H. Steed

Company "I"

Regiment 2nd Ga. Cav'y

Approved _____

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

87-4/1925

GEORGIA COWETA COUNTY.

I, J. A. R. Camp, Ordinary of said County, and ex-officio Clerk of the Court of Ordinary, certify that the attached and foregoing 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.

Witness my hand and the seal of said Court, at Newman, Ga.
 this the 28th day of August 1923.

[Signature]
 Ordinary and ex-officio Clerk C.O.C.C.Ga.

Copy to Copy
MARRIAGE LICENSE
 OF
F. H. Steed
 AND
Miss A. M. Perkins
 Issued Oct 9th 1871
 and Recorded on Page 251 Book
2 of Marriage Licenses
[Signature]
 Ordinary

WIDOW'S AFFIDAVIT

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 on 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, 1923, 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 "Act 1919" (Service) Pension Roll of the State and paid a pension of \$125.00 in Campbell County for 1921 per annum, on account of being a soldier in Company "I" Regiment 2nd Ga. Cav'y (Volunteers or State Militia).

That she is now a bona fide resident citizen of said County of Campbell and she has so continuously resided since _____ day of _____ 1871.

Sworn to and subscribed before me, this the 27th day of August, 1923.
[Signature] Ordinary
 of Campbell County.

(SEAL)

Affidavit of Witnesses to Prove Marriage and to Whom Date of Death of Husband

STATE OF GEORGIA, (Certified copy of Marriage License enclosed,)
CAMPBELL COUNTY.

Personally before me comes _____ known to be 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 _____ who died in _____ County in said State of _____ on _____ day of _____ 19____, and that she has not since remarried. That she became the wife of _____ on the _____ day of _____ 18____, and that she and he had resided together as man and wife continuously since _____ day of _____ 18____, and that the _____ was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the _____ day of _____ 19____
 _____ Ordinary
 of _____ County.

(SEAL)

GEORGIA COWETA COUNTY.

I, J.A.R. Camp, Ordinary of said County, and ex-officio Clerk of the Court of Ordinary, certify that the attached and foregoing 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.

Witness my hand and the seal of said Court, at Newman, Ga.
this the 28th day of August 1923.

J.A.R. Camp
Ordinary and ex-offi. Clerk C.O.C.C.Ga.

Certified Copy
MARRIAGE LICENSE
OF
F.H. Steed
AND
Miss A.M. Perkins
Issued *Oct 27* 1871
and Recorded on Page *251* Book
J.A.R. Camp
Ordinary

WIDOW'S AFFIDAVIT

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 on 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*, 1923 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 "Act 1919" (Service) Pension Roll of the State and paid a pension of \$125.00 in *Campbell* County for *1921* per annum, on account of being a soldier in Company "I" Regiment *2nd* Ga. Cav'y (Volunteers or State Militia) That she is now a bona fide resident citizen of said County of *Campbell* and she has no continuously resided since *1871* day of *XX*.

Sworn to and subscribed before me, this the

27th day of *August*, 1923.

M. D. W. Loring, Ordinary

of *Campbell* County.

(SEAL)

Mrs. Annie Martha Steed

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 _____ known to be 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 _____ who died in _____ County in said State of _____ on _____ day of _____ 19____, and that she has not since remarried. That she became the wife of _____ on the _____ day of _____ 18____, and that she and he had resided together as man and wife continuously since _____ day of _____ 18____, and that the _____ was the same man who was on the pension roll of said State _____ from _____ County _____ when he died.

Sworn to and subscribed before me, this the

_____ day of _____ 19____

_____ Ordinary

of _____ County.

(SEAL)

GEORGIA COWETA COUNTY.

I, J. A. R. Camp, Ordinary of said County, and ex-officio Clerk of the Court of Ordinary, certify that the attached and foregoing 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.

Witness my hand and the seal of said Court, at Newnan, Ga. this the 28th day of August 1923.

J. A. R. Camp
Ordinary and ex-offi. Clerk C.O.C.C.Ga.

Can't find Copy
MARRIAGE LICENSE

OF
F. H. Steed

AND

Miss A. M. Perkins

Issued *Oct. 19th* 1871

and Recorded on Page *251* Book

of Marriage Licenses

Ordinary

J. A. R. Camp

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 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* 1923 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 "Act 1919" (Service) Pension Roll of the State and paid a pension of \$125.00 in *Campbell* County for 1921 per annum, on account of being a soldier in Company *"I"* Regiment *2nd Ga. Cav'y* (Volunteers or State Militia)

That she is now a bona fide resident citizen of said County of *Campbell* and she has so continuously resided since *day of* 1871.

Sworn to and subscribed before me, this the

27th day of *August* 1923.

M. D. W. Loring Ordinary

of *Campbell* County.

(SEAL)

Mrs. Annie Martha St

**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 *known to be* 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 *who died in* County in said State of *on* day of *19* and that she has not since remarried. That she became the wife of *on* the *day of* 18, and that she and he had resided together as man and wife continuously since *day of* 18, and that the *was* the same man who was on the pension roll of said State *from* County *when he died*.

Sworn to and subscribed before me, this the

day of 19

Ordinary

of *County.*

(SEAL)



TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

F. H. Steed

You are hereby authorized to join and Miss A. M. Perkins

in the Holy State of Matrimony, according to the Constitution and Laws of this State and for so doing this shall be your license.

And you are hereby required to return this License to me, with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 19th day of Oct. 1871

J. A. Camp (L.S.) Ordinary

STATE OF GEORGIA **CERTIFICATE** COWETA COUNTY

I Certify that F. H. Steed and Miss A. M. Perkins were joined in Matrimony by me this 19th day of Oct. 1871 and 71.

Recorded Oct. 27th 1871 # W. M. R. Watts C. C. - Ordinary

J. M. Bawdon P. P.

16
MARRIAGE LICENSE
STATE OF **GEORGIA** COUNTY OF **COWETA**

TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

You are hereby authorized to join
F. H. Steub and *Miss A. M. Perkins*
in the Holy State of Matrimony, according to the Constitution
and Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me,
with your Certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this 19th day of
Oct 1871 *J. R. Casie* Ordinary (L.S.)

STATE OF GEORGIA **CERTIFICATE** COWETA COUNTY

I Certify that *F. H. Steub* and *Miss A. M. Perkins*
were joined in Matrimony by me this 19th day of Oct 1871 19th Hundred
and 71.
Recorded Oct 27th 1871 *J. M. Bawdon R. S.*
W. M. H. Watts C. C. - Ordinary

Ordinary's Certificate

STATE OF GEORGIA

Campbell COUNTY

I, W. H. Steed

Ordinary of said County, certify that I know

the applicant, W. H. Steed for pension in the person he represents himself to be and resides in said county. That I also know J. W. Lindsey the witness swearing to the

services that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn unto my hand and official seal of office this 3rd day of September 1919 at Campbell County }
(SEAL)

NOTES: 1. Before any application is presented the Ordinary shall swear applicant and witnesses in the following words: "You are solemnly sworn that you will answer all the questions asked you and the evidence you give shall be the whole truth, for help you God." 2. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Steed, W. H.
Campbell Co.
No. 107-1420

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1912

County Campbell

Name P. H. Steed

Company "I"

Regiment 2nd Ge. Cavalry

Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Best Printing Co. State Printers, Atlanta.

9-4-1919

Regiment 2nd Ga. - Cavalry

Approved

J. W. LINDSEY,
Commissioner of Pensions.

State Printing Co. State Prison, Atlanta.

9-4-1919

Ordinary of said County, certify that I know
or person he represents himself to be and
the witness swearing to the
my said were duly sworn by me before signing the foregoing
statements and their statements are entitled to full faith and
credit.

Ordinary's Certificate

NTV

on this 3rd day of September 1919

Ordinary's Certificate

STATE OF GEORGIA,

Campbell COUNTY

I, Mr. H. Steed Ordinary of said County, certify that I know
the applicant, F. H. Steed for pension is the person he represents himself to be and
resides in said county. That I also know J. H. Steed the witness swearing to the
service; that they are both residents of said county and were duly sworn by me before signing the foregoing
affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and
credit.

Sworn under my hand and official seal of office this 3rd day of September 1919

Mr. H. Steed Ordinary
of Campbell County.

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and
must be certified by such Ordinary.

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

Questions For Applicants to Answer

STATE OF GEORGIA,

Campbell COUNTY

F. H. Steed of said State and County, hereby applies
for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits
his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to
make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) F. H. Steed -
in Columbus, Campbell Co. Ga. - P.O. - Columbus, Ga.
2. How long and since when have you been a continuous resident citizen of this State? 75 years.
Sept. 8, 1844, the date of my birth.
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from
1861 to 1865? in Confed. Army
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of
Service) May 1, 1862, in Campbell Co. Ga. - Co. 2nd Ga. - Co. 2nd
5. How long did you remain in the actual military service with said Company and Regiment? (Give
date of discharge) Sept. 1, 1862 to Apr. 26, 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service?
Apr. 26, 1865, near Salisbury, N.C.
7. Were you actually present with your command when it was surrendered or discharged? Yes Sir
8. If you were not actually present, state specifically and clearly where you were. Prison

- a. Where was your command when you left it? Went left until surrendered or
other stated
- b. When did you leave the command? Went left it
- c. For what cause did you leave? Regiment was disbanded
- d. By whose authority did you leave? " " "
- e. For how long was your leave granted? In what way? " " "
- f. Why did you not return to your command after leave expired? " " "
- g. In what way were you prevented? " " "
- h. What effort did you make to return? " " "
- i. 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? Regiment
was disbanded
9. Are you drawing a pension of any amount from this State or the United States? No Sir
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed? No Sir

Sworn to and subscribed before me, this the

3rd day of September 1919

Mr. H. Steed Ordinary

of Campbell County.

(SEAL)

Confederate Soldier's Application

Under Act 1910 - As Amended by Act of 1919.

County Campbell
Name P. H. Steed
Company " "
Regiment 2nd Ga. - Cavalry
Approved

J. W. LINDSEY,
Commissioner of Pensions.

State Printing Co. State Prison, Atlanta.

9-4-1919

Steed, J. H. Steed
Campbell Co. Ga.
No. 1422

Steed, J. H. E.
Campbell Co.
No. 104-1420

**Confederate
Soldier's Application**
Under Act 1910-As Amended by Act of 1919.

County Campbell
Name P. H. Steed
Company "
Regiment 2nd Ga. Cavalry
Approved _____

J. W. LINDSEY
Commissioner of Pensions.
Burd Printing Co. State Prison, Atlanta.

9-4-1919

7. Were you actually present with your command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were Prison
a. Where was your command when you left it? Went left until surrendered or above stated
b. When did you leave the command? Went left it
c. For what cause did you leave? Requires no answer
d. By whose authority did you leave? "
e. For how long was your leave granted? In what way? "
f. Why did you not return to your command after leave expired? "
g. In what way were you prevented? "
h. What effort did you make to return? "
i. Were you captured during the war? No
j. If so, when, and where? In what prison were you held and when were you released? Requires no answer
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the
1st day of September 1919.
J. W. Lindsey
Ordinary
of Campbell County.
(SEAL)

J. H. Steed

Questions for Witness as to Service

STATE OF GEORGIA
Campbell COUNTY.
J. H. Steed of said State and County is hereby presented
as a witness in support of the application of J. H. Steed for the pension provided
by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to
make to the questions propounded, answers as follows:
1. What is your name and where do you reside? J. H. Steed in Polk Co. Ga.
2. How long and since when have you known J. H. Steed the applicant?
64 years, since 1855 as he was
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? in Campbell Co. Ga. for 64 years or longer
to my personal knowledge
4. When, where and in what Company and Regiment did J. H. Steed enlist during
war from 1861 to 1865? (Give date and place) May 1, 1861 in Campbell Co. Ga. in Co. 2nd
2nd Ga. Regt. Cavalry
5. How did you obtain your information of this Service? Seeing it at home time
6. How long within your own personal knowledge did he perform actual military service with this
Company and Regiment? (Give date) 3 years, from May 1, 1861 to Apr. 26, 1865
7. When and where was his command surrendered or discharged (give date and place) April
26, 1865 near Salisbury N.C.
8. Were you personally present at the surrender? Yes
9. If not, where were you and how came you there? Prison
10. Was the applicant personally present with his command at surrender? Yes
11. If not where was he and how came him there? Prison
12. When did he leave his command? Went left it Where was his command
when he left it? Requires no answer For what cause did he leave? Requires no answer
By whose authority did he leave? " and how
long was he granted leave? " How do you know
all that you have stated to be true? If of your own knowledge, tell clearly and specifically, from a
number of years & as was of place & I heard with him for 64 years,
as above stated
13. In what way was he prevented from returning to his command? Requires no answer
How do you know? "
14. What effort did he make to return to his command and how do you know? "
15. Was applicant captured as a prisoner? No If so, when and where? Requires
no answer In what prison was he held? Requires no answer and
when released "
Sworn to and subscribed before me, this the
1st day of September 1919.
J. W. Lindsey
Ordinary
of Campbell County.
(SEAL)

J. H. Steed

4. When, where and in what Company and Regiment did F. H. Stead enlist during war from 1861 to 1865? (Give date and place) May 1, 1862, in Campbell Co. Ga. in Co. I, 2nd Regt. Cavalry

5. How did you obtain your information of this Service? Family at home time

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) 3 years, from May 1, 1862 to Apr. 26, 1865

7. When and where was his command surrendered or discharged (give date and place) April 26, 1865 near Salisbury N.C.

8. Were you personally present at the surrender? Yes Sir

9. If not, where were you and how came you there? Prisoner

10. Was the applicant personally present with his command at surrender? Yes Sir

11. If not where was he and how came him there? Prisoner

12. When did he leave his command? When left it Where was his command when he left it? Requires no answer For what cause did he leave? Requires no answer

By whose authority did he leave? " " " " and how long was he granted leave? " " " "

all that you have stated to be true? If of your own knowledge, tell clearly and specifically, I was a member of Co. I, 2nd Regt. Cavalry and served with them for 3 years, as then stated

13. In what way was he prevented from returning to his command? Requires no answer

How do you know? " " " "

14. What effort did he make to return to his command and how do you know? " " " "

15. Was applicant captured as a prisoner? Yes Sir If so, when and where? Requires no answer

In what prison was he held? Requires no answer and when released " " " "

Sworn to and subscribed before me, this the 1st day of September 1892. J. J. Barfield

Not. P. L. Jones Ordinary
of Campbell County.

(SEAL)

NAME Stead, F. H. YEAR 1862 COUNTY Campbell.

WHEN AND WHERE 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?

CAPTURED, WHEN AND WHERE?

RELEASED:

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

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

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

IDEAL COUNTY

1.21.

9

7

COLC

10

•

En

ch

Steel, John E.
O.R.

Campbell Co.

No. 1478

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 31, 1908.

Applicant *John E. Steel*

County *Campbell*

Amount *\$20.00*

Date of Warrant *Oct 19*

Entered on Record *Oct 19*

SECRETARY EXECUTIVE DEPARTMENT

Dr. G. J. Kaup

RECEIVED

Steed John E.
O.R.
Campbell C.
no. 1478
APPLICATION FOR ALLOWANCE
FOR YOUR SERVICE ACT. 1864
FOR
Applicant
County
Amount
Date of Warrant
Entered on Receipt
Dr. G. J. Camp

OWNED TO AND SUBSCRIBED BEFORE ME, THIS
the 8th day of March 1889
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.

STATE OF GEORGIA,

Campbell County.
PERSONALLY comes before me R. C. Beavers Ordinary of said county, J. E. Davenport and J. R. Mobley, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined John E. Steed and after such examination say that the applicant has been injured as follows: Shot in the right shoulder, the bullet entered from the outside and passed through the upper part of the chest and lodged under the scapula, where it still remains, giving much pain at times, the bullet has been removed, affecting sinews and frequent hemorrhages have been the result, with only of temporary relief. From the combined effect of his wound he, the applicant, is unable to perform his regular business or ordinary manual labor.
Sworn to and subscribed before me, this
8th day of March 1889
R. C. Beavers Ordinary
NOTE—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA,

Campbell County.
I, R. C. Beavers Ordinary of said county, do certify that I am well acquainted with John E. 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 also certify that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief. I further certify that R. C. Beavers before whom the foregoing affidavits were made and power of attorney was signed, is a Ordinary of said county, and that the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this 8th day of March 1889
R. C. Beavers Ordinary Campbell County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Campbell County.
KNOW ALL MEN BY THESE PRESENTS, That I, J. E. Steed of Campbell County, do hereby appoint G. J. Camp 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 11th day of March 1889

Executed in the presence of us:

W. J. Camp
R. P. McLean

DIRECTION:

Send money to me as follows, by
to
County, Georgia. P. O.

NOTES.

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

STATE OF GEORGIA.

Campbell County.

KNOW ALL MEN BY THESE PRESENTS, That I, J. E. Steedof Campbell

county, in said State, do hereby appoint J. E. Steed
 of Campbell County as 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 18th
 day of March 1889

Executed in the presence of us:

W. J. CampR. P. McLean

DIRECTION:

Send money to me as follows, by

to

P. O.

County, Georgia.

1. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
 2. 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."
 3. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
 4. If application is for loss of fingers or toes, the proofs must be made to show the number and points where amputated.
 5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
 6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA.

Campbell County.

I, R. C. Beavers Ordinary of said county,
 do certify that I am well acquainted with John E. 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 R. C. Beavers 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 14th day of February 1890

R. C. Beavers
 Ordinary Campbell County.

STATE OF GEORGIA.

Campbell County.

I, R. C. Beavers Ordinary of said County,
 do certify that I am well acquainted with John E. 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 R. C. Beavers
 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 18th day of February 1891.

R. C. Beavers
 Ordinary Campbell County.

APPLICATION FOR ALLOWANCE

No. 1229

FOR THE YEAR ENDING OCTOBER 31, 1890.

Deadly John E. SteedApplicantCampbellCountyAmount, \$50Date of Warrant, Feb 10Entered on record, Feb 10Ob. N. 1890DO NOTWARRANT HANDED TOJ. E. Steed

Application for Allowance

No. 1244

FOR THE YEAR ENDING OCTOBER 31, 1891.

Deadly John E. SteedApplicantCampbellCountyAmount, \$50Date of Warrant, Feb 10Entered on record, Feb 10Ob. N. 1891DO NOTWARRANT HANDED TOJ. E. Steed

STATE OF GEORGIA

FOR APPLICANTS HOLDING ALLOWED PENSIONS

STATE OF GEORGIA

FOR APPLICANTS HOLDING ALLOWED PENSIONS

Steel John C. Co.
Campbell
1890.

No. 1229
APPLICATION FOR ALLOWANCE.
FOR THE YEAR ENDING OCTOBER 26, 1890.
Deceased by his own hand
Applicant John C. Steel
County, Campbell
Amount, \$50
Date of warrant, Aug 10
Entry record
Feb. 11, 1890
do H.H.
WARRANT ISSUED TO
J. Stephens

Steel John C. Co.
Campbell
1891
PAID 1891, 1892

No. 1244
Application for Allowance
FOR THE YEAR ENDING OCTOBER 26, 1891.
Arm de
Applicant J. C. Steel
County, Campbell
Amount, \$50
Date of Warrant, Aug 11
Entered on record
Sept 11
WARRANT ISSUED TO
J. Stephens

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County.

PERSONALLY appears John C. Steel 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 continually since the day of December 1839; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Captain in Company C, of 55th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service, at the battle of Wilderness in the State of Virginia, on the 5th day of May 1864, he was wounded as follows: Shot with Minnie ball just above the collar bone and passed through the upper cavity of the chest and lodged under the scapular where it still remains causing much pain, it affects my lungs and nerves of my right arm, left leg, I am not able to perform ordinary avocations of life.

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

Sworn to and subscribed before me, this the 14th day of February 1890.
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,
Campbell County.

KNOW ALL MEN BY THESE PRESENTS, That I, John C. Steel of Campbell county, in said State, do hereby appoint J. J. Stephens of Campbell County, Ga. my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit, hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14th day of February 1890.

Executed in the presence of us:
M. H. Woodall, J. J. Stephens
R. C. Beavers, Ordinary.

Send money to me as follows, by _____ to _____ County, Georgia. P. O. _____

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Campbell County.

PERSONALLY appears John C. Steel of Campbell County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of December 1839; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Captain in Company C, of 55th Regiment of Georgia Volunteers, Thomas's Brigade; that whilst engaged in such military service at the battle of "The Wilderness" in the State of Virginia, on the 6th day of May 1864, he was wounded as follows: With a Minnie Ball, the ball entered the right shoulder, just behind the olecranon, and passed in to the chest, and shoulder, where it still remains, said wound renders me unable to perform the ordinary avocations of life, and has caused the total almost total uselessness of my right arm.

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

Sworn to and subscribed before me, this the 14th day of February 1891.
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, resulting from the wound or disease.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Campbell County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1891.

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

Send money to me as follows, by _____ to _____ County, Georgia. P. O. _____

