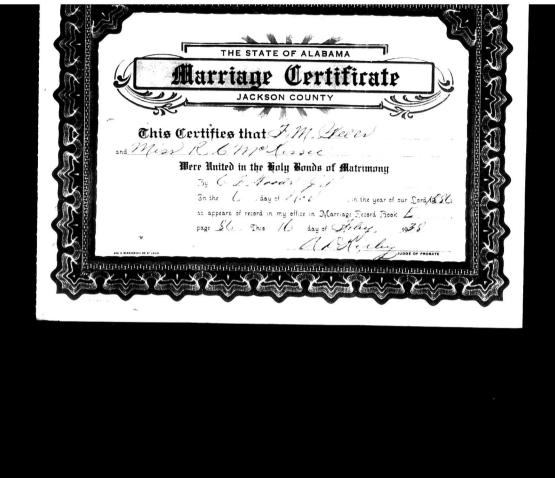
THE STATE OF ALABAMA Marriage Certificate JACKSON COUNTY This Certifies that F.M. Lever and Miss R. 6/11/0 Sizzee Were United in the Holy Bonds of Matrimony 3. 6 1. Hoods & 1 In the day of 1000 . in the year of our Lord & St. as appears of record in my office in Marriage Record Book & page St. This 16 day of Willy 1938 al Heily





		XX
4	Marriage Certificate Jackson county	Z A
	This Certifies that F.M. Keler	XX
and	Miss R. C. M. Cosec Were United in the Holy Bonds of Matrimony	X X ??
	an the day of 102 in the year of our Lord 1886 as appears of record in my office in Marriage Record Book	S. S. S.
	addity, MOSS OF PROBATE	

A F I M •

AFETY

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLAPTA

June 15, 1938.

Hon. H. A. Ross, Ordinary, Chattooga County, Summerville, Georgia.

WHEREAS:

MRS. R. C. McKISSIC WELLS, NIDOW OF F. M. WELLS,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military corrice as a Confederate soldier and was honorably somerated from such service; and that applicant was merried to said soldier prior to Journary let, 1920, and that she was not remarried; it is, therefore,

BRDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the Lenth of July 19 38, and thereafter; and that a copy of this prodr be sent to the Ortinary of said County.

This, the 15th day of June 1938 .

Live in a com

Director, Confederate Division State Department of Public Wolfare OFFICE OF

COURT OF ORDINARY

CHATTOGGA COUNTY

HA ROSS ORDINARY

SUMMERVILLE, GEORGIA

May 21, 1938

Hells, 7 m. Floyd Co. purts

Mr. L. Thomas Gillen, Director Confederate Division Burt Building Atlanta, Georgia

Dear Sir:

In reply to your letter of May 20th in regard to the county from which Mr. Wells drew his pension. The pension came through Floyd county about six years ago, and it was sent in care of me and I delivered it each month to Mrs. Wells.

Yours truly,

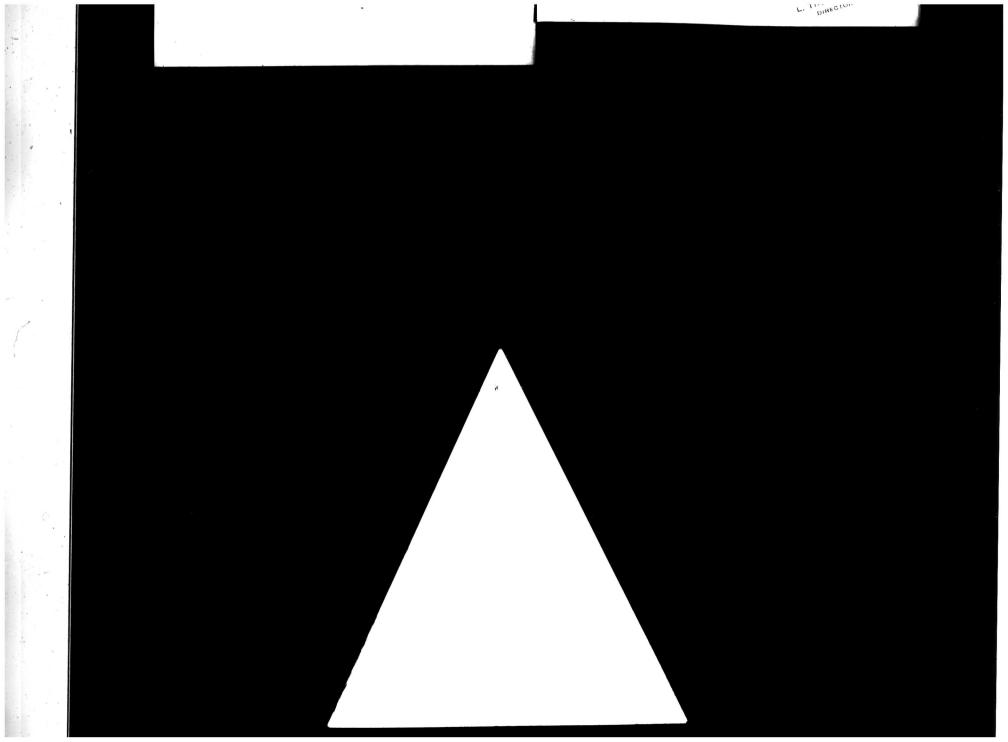
H. A. Ross, Ordinary Chattooga County, Ga.

RECEIVED

MAY 23 1938 L. THOS. GILLEN. DIRECTOR

.....

100



Turning of a 5/0109) Thisture Its thing is not certifica to be trust morthy-The mitous Houly does not show such infirms to as institute the proserve - Rich Sohner Com Johnson 1894. WARRANT HANDED TO

3/9.98

POWER OF ATTORNEY.

STATE OF GEORGIA,
_County.
1. hereby authorize
the face of a state of the
to receive and receipt for the pension allowed and request that he remit same to
morning with the classic
Witness my hand and send this . 27 day of . C. 4. 1806
Executed in presence of
a to the second of the second
Mileo, South Constana LA frem To about Clerk
rapide a menty) of a ment of to remain Pleas
10 tille (litelet) I tech Ville Alien.
the the the standing and worther of breef I also
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There I deal to the will be a for the select
17 4 Feb 1848 James Leaborn
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FIE 1 14 3 4 3. C.
3 4 3 4 4 2
4 3 2 4 3 CE
03 4 13 3 1 13.
49815
Control of the contro
SN.
TENT PE 1894.

Questions for Applicant.

	STATE OF GEORGIA,
	H. a May County.
	· · · · · · · · · · · · · · · · · · ·
	of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
	1. What is your name and where do you reside? (give State, County and post office)
	2. Where did you reside on January 1st. 1894, and how long have you been a resident of this State.
	2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
	3. When and where were you born ? I dity
	4. When and where and in what company and regiment did you enlist or serve 1) a 100
	- desire Add any of de al replication therepresented
ಡ್ಡ	i limination of the control of the c
Ä	how bong did you remain in anch company and regiment? Elling the fire free the state of the fire telen &
Б	114 5 11/20161 160 100 1100 1100 1100 1
P	6. For how long a period did you discharge regular military duty? ALC a LIT Il fice.
ď	7. When, where and under what circumstances where you discharged from service?
₫	it land in Suctor Started beck a start to letter or
•	8. What is your present occupation? Sold so buff it solders the sold south
ğ	9. How much can you carn (gross) per annum by your own exertions or labor? Let 2 2 2 2 2 2 4
r.	10. What has been your occupation since 1865?
Ö	11. Upon which of the following grounds do you base your application for pension, viz.: first "age and
ĥ	poverty," second "infirmity and poverty" or third "blindness and poverty"? If L. I Level y 12. If upon the first ground, state how long you have been in such condition that you could not earn
Ų	your support? If upon the second, give a full and complete history of the infirmity and its extent? If
Á	upon the third state whether you are totally blind and when and where you lost your sight?
þ	I for any land to the of the will have the to the tour
ö	I had be a reserve di a ut any fred a delling
uestion	13. What property, effects or income do you possess and its gross value?
94	and it would be eat , warm to sol from from
Q	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same?
k	Ctrotter Ces for
H	
0	15. In what County did you reside during those years and what property did you then return for taxation?
ú	16. How were you supported during the years 1895 and 1896? 104 116 126 12
• •	19626 Cal Outiles of Misterely
	M. How much did your support cost for each of those years, and what portion did you contribute thereto
	by your own labor or income? ? Co set & 5 re Con Colos \$100 Belower Carlo theter
	18. What was your employment during 1895 and 1890? What pay did you receive in each year?
	19. Have you a family? If so, who composes such family? Give their means of support? Have they
	a homestead? 36 de animaly: If so, who composes such minity: Give their means of support? Have they
	they land
	My Colonica Decide
	20. Are you receiving any pension, if so what amount and for what disability " /2121
	Sworn to and subscribed before me this the
	34 day of Applicant.
	Ordinary.

SULESTIONS FOR WITNESS. STATE OF SEORGIA Oconec County. I withibe in , of said State and Gounty, having been presented as a witness in support of the application of Loe Bushile under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows: Sener P.O. Cconwo South Carolina 2. Are you acquainted with acc 15 While, the applicant, is of how long have you known him three him for 15 years up to 1866 3. Where does he reside, and how long has he been a resident of this State? Do not Acron-4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this Het I were in the same company in confederale gerbica 5. When, where and in what company and regiment did be exlist? 14 Feby 1861, at Fair Ray OC Capter Kie hat riche 4 Regiment SCY, after one year he was in Jeen Keens Regiment of Pale fralle Heart shorts.

(a) Were you a member of the same company and regiment? 420 7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service ? I Know of nevre than 2 year Servica in them for uyears, We remained in some took Requirent but tel in salue Company ofter the first I years. He did his duly in a doldier 8. What property, effects or income has the applicant? (Give your means of knowledge.) be und rolling was there have 9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if and did be make of same " Eld it, time time time 10 What is the applicant's occupation and physicial condition? 20 0 11 11 1 1 wow 11 Is the applicant models to support himself by labor of any sort, if so, why? &v Inv 12 How was he supported during the years 1895 and 1896? Do not King w 13. What portion of his support for these two years was derived from his own labor or income? 21 not Itime 14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? DO 11 1 King 15. What interest have you in the recovery of a pension by this applicant? Hone

Sworn to and subscribed before me, this the 13 May of Mich

alle of the Ordin

Clerk Court Common Pleas and

AFFIDAVIT OF PHYSICIANS.
Personally came before me. State and before me. both known to me as reputable physicians
of said county who being severally sworn, say on oath that they have examined carefully if you'very applicant for pension under the Act of 1894, and after anch personal examination say that his precise physical condition is as follows:
Direct of Secure of the second Canada Service of the agent of a grant of the second of the
We 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 these day of the last of the Ordinary.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
1, De Vere - Cold (C X), Ordinary in and for said County, hereby certify that
the applicant resides in said County, and was a bona fide resident of this State on the first day of January, 1884, and that the witnesses, viz :
are of trustworthy character and that their antennents are entitled to full faith and credit. 1 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 witnesses before same was signed.
I further certify that the text digests of Charter to the total applicant
returned for taxation in his name in 1895,
of property, and in 1886,
In my opinion the foregoing clain is made in good faith.
Witness my hand and seal of office, this
of in the offer 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 such of the questions saked of you, and the ordinare you shall give will be the whole truth, so help you God." Additional additaries and additaries and additaries and additaries and satisfaction of the statehed if their spaces are insufficient.

RICHARD JOHNSON,

WARRANT HANDED TO

WARRANT ISSUED

124

Name . X ...

County _

POWER OF ATTORNEY.
STATE OF GEORGIA,
1, Addition County.
I, with it is authorize
To al of its ignit of attances
to receive and receipt for the pension allowed, and request that he remit same to
and successionally
by 6 () (1)
Witness my hand and seal this 3 day of secrets 1899.
Executed in presence of (L. s.)

SOLDIER'S PENSION,

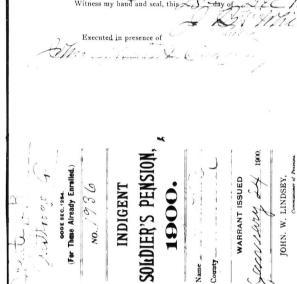
1899.

INDIGENT

(For Those Aiready Enrolled

CODE SEO 1254.

No. 3060



STATE OF GEORGIA,

POWER OF ATTORNEY.

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County.
Personally appears County, State of Georgia, who being duly sworn, says on oath that he is a bono fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18°; that he is 17° years old and by occupation a 18°; that he enlisted in the military service of the Confederate States (or of the State of 18°) during the war between the States and served for the term of 18°; that his physical condition is as follows: (And Other Land County and State of 18°) that his property consists of the following items from the said State continuously ever since the in Company of the Regiment of that his property consists of the following items from the said State continuously ever since the instance of the confederate states (or of the State of 18°) and the said State continuously ever since the instance of the confederate states (or of the State of 18°) and the said State continuously ever since the instance of the confederate states (or of the State of 18°) and the said State continuously ever since the instance of the confederate states (or of the State of 18°) and the instance of the confederate states (or of the State of 18°) and the instance of the confederate states (or of the State of 18°) and the instance of the confederate states (or of the State of 18°) and the instance of the confederate states (or of the State of 18°) and the instance of the confederate states (or of the State of 18°) and the instance of the confederate states (or of the State of 18°) and the instance of the confederate states (or of the State of 18°) and the instance of 18° (in the instance of 18°) and the instance of 18° (in the instance of 18°) and the instance of 18° (in the instance of 18°) and the instance of 18° (in the instance of 18°) and the instance of 18° (in the instance of 18°) and the instance of 18° (in the instance of 18° (in the instance of 18°) and the instance of 18° (in the instance of 18° (in the instance of 18°) and the instance of 18° (in the instance of 18° (in the in
of the value of Leave Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1800. I have heretofore as a resident of Clacella of
Sworn to and subscribed before me, this, the day of flavy 1800.
State of Georgia,
7
(/ setting County.)
1. Ordinary of said County,
do certify Mat I am well acquainted with & To Whate the
applicant in the foregoing affidavit, and au well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of . 1612 611 61 1899.
Gille ffeetlex
Note - The blank spaces must be filled Ordinary Liter House County.
Note. Addant should not be attested before January 1st, 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Citation County.
personally appears Braile of Chilles age
County, State of Georgia, who being duly sworn, says on oath that he is a bone fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of sterry 1866; that he is TC years old and
by occupation a Hanny it that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of 10711 feer in Company 3, of 12 th Regiment of
& Composition is as
follows: Ola (cone (series at brake down
bring 86 gentlet age
that his property consists of the following items from
The property common of the following feeling
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1900. I have heretofore as a resident of Charttenhar
county been allowed a pension for the year 1898
Sworn to and subscribed before me, this, the
15 day of 16 1800. \ Maco
STUM Malle Ordinary.
State of Georgia,
Clustrice County.
1 The flutter Ordinary of said County,
do certify that I am well acquainted with A 116.116. the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of VL 1878 +000,
) seed \
the folelity
Ordinary Charles The County

POWER OF ATTORNEY STATE OF GEORGIA hereby authorize

OHN W. LINDSEY.

SOLDIER'S PENSION

1901.

INDIGENT

Those Already Enrolled

135. 17

Executed in presence of WARRANT ISSUED

STATE OF GEORGIA,

Cliation of County.

by Clien

(FOR THOSE ALREADY ENROLLED.) INDIGENT

SOLDIER'S PENSION 1902.

POWER OF ATTORNEY.

to receive and receipt for the pension allowed and request that he remit same to at outmanier. The feet

Witness my hand and seal, this / 51/day of Harry

JOHN W. LINDSEY,

of Confirme for Inch.

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

C . T	County			
Dersonally appears	3 , 7 7	of i	7. 4.12	
County, State of Georgia, w	ho being duly sworn	says on earth	that he is a fam.	
and resident of said County	and State, and has	resided in s	id State continuous	e citizen
since the day of	32.	187 12 1000	ha is X 7	ay ever
by occupation a $\stackrel{\smile}{=}$	- that ha an	log that	ne is J / years	old and
federate States for of the St				
States, and served for the ter)	during the war betw	cen the
and a first of the				
560.			his physical conditi	
follows: The	~ · · · · · · · · ·	· ce		. (
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		,		,
that his property consess of	the following items	T	(1.7	
of the value of				
		Dollars, th:	it by reason of his p	hysical
condition and poverty he is i	anable to support him	iself by his	own exertion or lab	or, and
that he receives no pension 1				
Deponent desires to par	irripate in the benefi	ts of the Ac	t, approved Decembe	r 15th,
1894, and the Acts amendator	ry thereof, and makes	application	for the pension to w	hich he
is entirled for the year 1901,	I have heretofore as	a resident	Surce Toy	-
centry been allowed a pensio		, ,	7 7 4	7
Sworn to and subscribed	before me, this the	-		
A Color of Sec	1900			
27. V. 7	1	**		
		rdinary.		
STATE OF GEORGIA	1,			
6 . 1000	County.			
1				
	~		Ordinary of said C	ounty.
o certify that I am well acc	Attaches to the Control of the Contr			the
pplicant in the foregoing affic				
n his said affiliavit are true, a		ndividual h	represents houself	to be
nd that he resides in this Co-	unts		_	
	nder my official signat		this 1. C	_
Gaenar				
	(
Given ur day of	(1900		
	(1900	in the	
	٠. ١	1900	in the	onints.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Personally appears & 217216 of clienty
County, State of Geoogia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of lacy 1864; that he is \$77 years old and
by occupation a fill first that he collisted in the military service of the Con-
federate States (or of the State of) during the war between the
federate States (or of the State of) during the war between the States, and served for the term of, of, of, th Regiment
follows:
follows: 44 2 8 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
,
that his property consists of the following items 11 plant grant
1 mm m m m m m m m m m m m m m m m m m
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1002. I have heretofore as a resident of
county been allowed a pension for the year 1901
Sworn to and subscribed before me, this the
day of kerry 1902.
Ordinary.
STATE OF GEORGIA,
Checttie County.
7.1
1. If the 4 County,
do cettify that I am well acquainted with the Applicant in the foregoing affidavit, and sim 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 Half
day of 1902.
day of Victor 1909
(AMX)
ordinary decettory County.

POWER OF ATTORNEY. STATE OF GEORGIA, County. of Och Kerry Son Son to receive and receipt for the pension allowed and request that he remit same to a deminimiteda by Which Witness my hand and seal, this Executed in presence of SOLDIER'S PENSION (FOR THOSE ALREADY ENROLLED.) Name . L C. Milled WARRANT HANDED TO JOHN W. LINDSEY, 1903. WARRANT ISSUED INDIGENT 1.6 6 Lattooda

M. Jaite

POWER OF ATTORNEY.

STATE OF GEORGIA,	
County.	
I, 1 23 - z ZZZ hereby authorize	
in in in har at -de cotame you	
to receive and receipt for the pension allowed and request that he remit s	ame to
into (al ministration)	(200
by and of	
Witness my hand and seal, this - day of - day of	1804
Witness my hand and seal, this 2 day of	[1. 8.]
Executed in presence of	*
Silver and the second	

FOR THOSE ALREADY ENROLLED.

S. C. C. C.

INDIGENT

SOLDIER'S PENSION

1904. R.

WARRANT HANDED TO

JOHN W. LINDSEY

nedata

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Personally appears & Dittist of wettery
County, State of Georgie, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of few 1864; that he is years old and
by occupation a adam, that he enlisted in the military service of the Con.
federate States (or of the State of) during the war between the States and served for the term of # 4 and in Company 13, of the Regiment
of the theorem that his physical condition is as
follows: Condition is as
in disting in an arment
turn a burgond in sales -
that his property consists of the following items:
The state of the s
of the value ofDollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1903. I have heretofore as a resident of
county been allowed a pension for the year 1972
Sworn to and subscribed before me, this the
day of 1903. \
Ordinary.
STATE OF GEORGIA,
County.
Ordinary of said County.
do certify that I am well acquainted with Que
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
day of 1903.
And the second of the second o
Ordinary County.
Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January ist, 1008.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS:

The formation of the state of t
STATE OF GEORGIA,
County.
Personally appears V Do 177776 of care This
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of ba 1844; that he is 12 years old and
by occupation a that he enlisted in the military service of the Con-
States and served of the term of the company of that his physical condition is as
follows: 4.26 (14/2 - 14 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
to what
that his property consists of the following items:
- Marianto
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of same to the
County been allowed a pension for the year 1.
Sworn to and subscribed before me, this the
day of 2
Ordinary.
STATE OF GEORGIA,
County.
I, Ordinary of said County,
do certify that I am well acquainted with (1)
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of
Affir (Saint) Ordinary County
, , , , , , , , , , , , , , , , , , , ,
Note.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.
Pringe work of Miller County Lin
Muller Good of theller County Lin
to receive and receipt for the pension allowed, and request that he remit same
13 White at Their GA
by /
WITNESS my hand and seal, this day of farming 1905.
Dillia = Its
Executed in the presence of
Il formation , time
1 - france in terror

SOLDIER'S PENSION W. D. MILLEL CONTINUED WAR ISSUED Regiment # " 4 WARRANT HANDED TO 1905. Name . . Diffill INDIGENT JOHN W. LINDSEY. 4 10 6020 9 Co. 1 County

POWER OF ATTORNEY.

5-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
STATE OF GEORGIA,	
Tohatterga County.	
91.	White hereby authorize
Philip took	of Hulton Wounty and
to receive and receipt for the pension a	allowed, and request that he remit same to
7111	at duningrate
by Much	_
WITNESS my hand and seal, this	1 day of Ja14 1906.
	13 13 Fute [L. S.]
Executed in the presence of) mount
propolitistare	
1 Andina	411

SOLDIER'S PENSION COOR SMETTON 1254. (FOR THOSE ALREADY ENROLLED.) Marticage 1906. JOHN W. LINDSEY. WARRANT HANDED TO WARRANT ISSUED
JAN 27 Na 1 417 Regiment Nаme

no duta

(FOR THOSE ALREADY ENROLLED.)

No X 69.TL

Weither B

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
a nathery County.
Personally appears) WIthite of Whattooga
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day offer 35 care langes; that he is felt years old and
by occupation a day Laborrez, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States and served for the term of
States, and served for the term of Juny in Company Dollar Hat the Regiment of Jente Larolana Sharphorters; that his physical condition is as
follows roll old regeneral Poverty
tollows
2 2
that his property consists of the following items:
7,2
1616
by my labor, Protestedly nothing Dollars per month. That by reason of his
by my labor, freeliently nothing 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 1905. I have heretofore as a resident of the seat of
County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
day of Ja 11111 51, - 1905.
11 Bellatile _ Ordinary.
STATE OF GEORGIA, (
a hatticea County.
1. Pf thustone Ordinary of said County,
do certify that I am well acquainted with & BITTLE
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of 7-111111/21 1905.
1 Poliuston
Ordinary Manthoga County.
, , , , , , , , , , , , , , , , , , ,
Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Coomic
State of Georgia,
Matterya County.
Personally appears) Buhile of whattorga
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 theday of1842; that he is 95 years old and
by occupation a HAZIIIII, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of in Company in Company in Regiment
of douth lavoling Sharpshotters that his physical condition is as
States, and served for the term of in Company to the Regiment of Dollth legroline Sharpartath that his physical condition is as follows:
MARKET SAME TO BE AT ALL WAS TO THE RESIDENCE OF THE RESI
AND THE RESIDENCE AND THE PROPERTY OF THE PROP
that his property consists of the following items:
1 Marie Control of the Control of th
of the value of
by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1906. I have heretofore, as a resident of leftertle of a County, been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the day of Let 1 1906,
day of Jell 1906. S Till K
Ordinary.
State of Georgia.
Matthegal County.
do certify that I am well acquainted with Japh Lite
do certify that I am well acquainted with
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of
- Pelinelan
Amir Sour Ordinary County.
Norte — The blank spaces must be filled

75

the applicant in the foregoing amount, and am wen satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. to be, and that he resides in this County. Given under my official signature and seal, this Given under my official signature and seal, this ______ day of 901 (______1906. day of 7-11111121 1905. Ordinary Charteena County. Ordinary Country County. Affix your seal here Note.—The blank spaces must be filled.

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

Nore.—Affidavit should not be attested before January 1st, 1906.

While I Solve To White The Windsproved

INDIGENT PENSION, 1902.

Name When I Whate
County Clecitory a

Co. 10 - 3 5 12 Ja Reg'm't

Approved 1902.

JOHN W. LINDSEY,

Community of Pensio

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

The Def Chickens of Market I for the pening allower that he remit same to to receive and receipt for the pening allower to request that he remit same to to receive and receipt for the pening allower to request that he remit same to to receive and receipt for the pening allower to request that he will be the remit same to to receive and receipt for the pening allower that he will be the remit same to the r

POWER OF ATTORNEY. STATE OF GEORGIA. and Municipally by light 1902. At of the September 1902. Some & Se Maite [L. 8.] W. LINDSEY,

ury will

NDIGENT

Questions for Applicant.

STATE	OF	GEOR	GIA

Chactery County.

to avail himself of the Pension Act (Section 1254, Code), hereby substite him 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 realitef (give State, County and rost office)

- 1. What is your name and where do you reside? (give State, County and rost office)
- 2. How long and since when have you been a resident of this State? 48 from the form in foregree
- 3. When and where were you born? De(+ 2 2 1/834 1834 Beston Then Cof G Longer
- 5. How long did you remain in such company and regiment? in the Consequence

	11-00 termina (e. c			200				
6.	When and where we	your company	and regiment	surrendered and	discharged?	1.	Frenchora	, 5
	100	1165	·					

- 7. Were you present with your company and regiment when it was surrendered? 2.4.

 8. If not present, sate specifically and clearly where you were, when you left your command, for what cause and by whose authority? 2.

 1. How much can you carn (ages) her ainmut by your own exertions or labor?
- 10. What has been your occupation since 1865...
 11. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty,"
- second, "infirmity and poverty," or third, "blindness and poverty".

 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 whiter your extently blind and the condition of the infirmity and its extent?
- state whether you are totally blind and when and where you lost your sight? It is from your Change of the state of the sta
- 13. What property, real or personal, or income, do you possess, and its gross value? The state of the state o
- 15. In what County his you reside during those years, and what property did you then return for taxalion?
- 10. How were you supported during the years 1800, 1900 and 1901?
- 17. How much did your support cost for each of those years, and what portion did you contribute thereto by

- 20. Are you receiving any pension? If so, what amount and for what disability? On framework
- 21. Have you ever made an application for pension before? ...
- 22. How many applications have you ever made and under what class? Great to common forther

Howard to and subscribed before me this the Sohn & White Applicant.

Jihr Howard Ordinary,

of Charles Ordinary,

County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,	
I fatter P COUNTY!	
of said State and County, having been presented	
of a witness in support of the application of the application of the support of the application of the support of the application of the support of the supp	
Dunmarich Leconia	
2. Are you acquainted with _ check # Theck , the applicant; if so, how	
long have you known him? one the surface when has he been a resident of this State?	
When, where and in what company and regiment did he enlist, and how do you know?	
Mich 1862 commence in the state of the state	1
5. Were you a member of the same company and regiment? 6. How long did he perform regular military duty? 9 11 0 12 0 12 0 12 0 12 0 12 0 12 0 12	
6. How long did he perform regular military duty? Office and Lands	
Greenstore North Carolila	
8 Were you present when it surrendered?	
9 Was applicant present?	
10. If he was not present, where was he? Oh, survidually at Kingator da	
When did he leave his command? If a cut If is which best from Northers form By what authority he len? Cot of as above stouted How do you know all of this a	
I was a number of Lane Chimand	
What property, effects or Income high the applyment? (live your means of knowledge?) high second first him to the second for the second first her second for the second for	a
What property cheer of inchiernal the applicant forces in 1800, Two there town that the the manufacture	,
Wolf my the Fann now	
13. Has be conveyed away any of his property in the last four years, if so, what was it, and to whom?	
17) What is the Applicant's occupation and physical condition? Famer dos ather	
from What is the popularity occupation and physical condition? Manuar had affers	
is old and an oble to Lotor for a riphet	
15, Is the applicant unable to support himself by labor of any sort, if so, why? This Because	
from lage and Rhumatism in Rigo and	
1	
How was be supported during the year 1898, 1899, 1900 and 1901? North from the bille. Furner and what atte low he could do	
17. What portion of his support for these four years was derived from his own labor or income?	
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pengion under Section 1254, Orde . All & Herry 68 Meters and Just Laubt.	
Gun hos flan potions in his lines, which render	
him anoble to later for a suffert	
19. What interest have you in the recovery of a pension by this applicant?	
Sword po and subscribed before me, this the Subscribed by	
July 1 Method Ordinary Witness.	
Ordinary.	
<i>V</i>	

AFFIDAVIT OF PHYSICIANS

AFFIDAVII OF FRISICIANS.	
STATE OF GEORGIA,	
COUNTY.	
Personally came before use	
My Jose Gen Lea L. both known to me as reputable physicians	
of said County, who, being severally soorn, say on oath that they have examined carefully so low H. Mille	
applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:	
Shifteent John I Whate is son are here you many your a constate	
English from home wisson big mation on me our other south	
thinky for where he has her trette of the without much societ dece	
beings in the sign sur construtes forthers denette somonies a love more in other o	late
and a new hackoner ma lettery trucke to some a foffert is my line of mour	al co
and that we have no interest in said pension being allowed. Sworn to and subscribed before me, this the)	
Def day of fell 1902. 1 19, Fryant mile	
Jehn Malla Ordinary.	
STATE OF GEORGIA. COUNTY 1. Country Ordinary in and for said County, hereby certify that the applicant resides in said County, and has been a bona fide resident of this State since the and that the witnessee, viz.	
auf Massaux	
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	
property, and in 1900	
In my opinion the foregoing claim is mage in good faith.	
Witness my hand and seal of office, this # day of Saffburber 1902.	
Win Meetle Ordinary,	_
of Chutteryes 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 severy case the ordinary must certify to the character of the witness, and as to the execution of the proof.	

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POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,)		
illattroger	County.		
Littoga	Thereby aut	harize Hestry.	I horo fashiore
" ntlanta		o receive and receipt for	the pension allowed and
request that he remot some to	114	by ()	luck
request that he remark some to	.4a	Gr.	
'IN WITNLSS WHEREOF, I		and seal, this	2/20
day of 11114	1:06	. 4361	£ 11.81
V	15	on " Ih.	(LS)
Executed in the presence of	1		
Executed in the presence of	1 deriang		
	/		

Pension effice 9/14th 1808,

The, that may if true that the disease shown to treated in service is may the sole cities of his infilm con result of its effects he has been resident incompaniate the ordinary manual resolutions of life, this is that the i

SOLDIER'S PENSTON,

10 to

WARRANT HANDED TO

JOHN W. LINDSEY,

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA,
Viallerga County.
Personally appears Select it illete said Comitings
County, State of Georgia, who being duty sw rn, says on each that he was both or the A. 2.7 day of
Secretary that he is a trace of he citizen and resident of Georgia, and has been
continuously since the the factor dayor 21" Second 1837 , that he enlisted
in the military service of the Confederate States (or the States of Commercial Commercia
of a-f- 20 day of Jates, and _1862_ , during the war between the States, and
served in Company A of 35 th Regiment of Volunteers
Brigade, and was honorably discharged on the 2 4 5 day of that whilst engaged in such military service, and in line of duty in
that whilst engaged in such military service, and in line of duty in
the State of Jennies on the trans attaches day of Jack Insender to 1862
he was disabled or wounded as follows two a trucker with them, as while
the day sees the Combestera Mondana in Sant Territories
The proceder was followed just recommend of a spinisely.
" Widentide rotaria fresh me from my command about "
Made sugation . " prefection to they commone, where steel too.
treate to do a president executing dety long deter or to prome
The Angent Want of the to the Builton
Maying offic and to It belowne stoyed the open in smith
Tors exchanges some south to try Common south a branches
successe from topick intone. here ne some is rejource sig.
Common hear the services hage in dem first hope the battle of
Mi framery Prage but often that Butter, in totale of dut my part?
so heat I consider on goes bouch to efternte one doursping for one.
to to an having down where pay beauthy entered you and were love bottomy to the home of most of contraction of the section of
•
· ·
was he' at Norma How come there' day will invide age
And by whose authority? Heate fully is corner of frequency of the form tout for Coursel -
Tower Code
Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 190 —
and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 190 — Nwayn to and subscribed before me, this the 2/day of //// 4
2/ _day of 1/1/14
Ja policatore Port Office Surrenderde In

Norm.—State fully nature of wound or character of disease which causes the disability, and crypton particularly the steets of the disability. If claim is based on disease, give hall and consisted had an of disease, tracing it directly to the service.

Norm.—Do not trouble to mention wounds which do not disable.

Norm.—The Ordinary will see that all blank spaces are filled when the affidavite are signed.

AFFIDAVIT FOR THREE WITNESSES

Form No. 4.

Form No. A.

The state of the s
STATE OF GEORGIA.
Challer go County.
Ver all of a
PERSONALLY appears before me, the undersigned Ordinary in and for said County Modelle County
1. Ex Dujant and OH Horre
and Of Horri
personally known to me to be trustworthy citizens, each of whom, being duly swyrn according to law, severally say
under oath, that they are personally and well acquainted with John Ho Mile
whose application is herewith presented for a pension, that he has resided in this State continuously since the
22 day of De Cembr. 183), that he served in Company 16 of the
7 0
Regiment of Reguelds to William 12 Brigade, and from our personal knowledge he,
while in line of duty, was injured by the service as follows: (give full statement, and tell in your own language
when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is dis
abled 11/19 work as a direct result pierent. If he does any labor or can do any, state what.)
All hud phrades in day phonesses and made was
followed by Thesennyonia Was Captumed at the
Battle of Boker Creek or Champion Hill nip
The state of the printer page
and Chier to Diser at Horf Delenan, and Contracte
while thou or selection from there with a Brownied bout.
from which he has hever recovered, ofbrais retingen
from much he has here herene of arms helmasign
Lusor herizonys his Command but Dom his health
failed and he was declarated home being back
for duty. and was not oble for duty key more
Hellabored as a Farmy as long as he Could but is
the have the or of straining with any world content out to
now near 69 years ofd, and by reason of age and
to division with the state of the
The diseases with which he is officier, has grown full
and is known to make a support.
Cond of the cond to the cond
Where was applicant's command surrendered " Gilluston Al
Where was applicant's command surrendered. Julian William Command surrendered.
Was be with it Were all of you present? MRS Wilners Was
Was he with it Were all of you present? All Whites Was
If not, where was he' Thorns
Where were you all ? I & Cologhom was the the Command of Gentlem No
- A
Thanks I dit no cale
How do you know the facts you state to be true? Was members of the Lam Coupan
We personally know above stated facts. We were with him in the army and have known him ever since.
- 0.
He was honorably discharged or retired from the service on 260727 day of May
186 J. Applicant is permanently disabled as stated and has been so toyour certain knowledge over since 18 2867/889
We have no interest in the recovery of a pension by him.
Sworn to and subscribed before me, this \ All Delegan
214 May 1 1 h
and free 1100 & Maris AD
10 20/2 restore) It 3 ON ORY ON
Octionery 11 Vy Joy
Note 1 - The Orders will are that the fall has the
legally qualified to the same
2 — Witnesses are asked to make their statements full and explicit, tracing disability to its true cause. 3 — All blank spaces must be filled when signed.

Witnesses are asked to make their statements
 All blank spaces must be filled when signed.
 Three witnesses are required.

STATE OF GEORGIA County. Porhuster Cordinary of said County, PERSONALLY comes before me_ me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined woh . A Minte and after such personal examination, say that the present condition of applicant is as follows re is caffeing from Carrie Generalis and brights decree should of hidney from heiter of totale decent be poice poor recover spore the howchite he has inflying sence to long Menning in the Army in 1862, the Fright diserce in followed tales The prestinent in foth inces in frite to lave and The Tiday sivery being interester at his age well montally door and to Dissipation by is a sometimes anable to cake, within the attherens and that such condition is permanent. Said condition arises from the following facts: Louist ex etack of theopher forlowed by without Premioria duing for between the state army change Branslate and iste perhofe the highli sources was hesterne on by the Branches fines both of lotuck he new is in a disable condition person to recover We have treated applicant professionally for here new 30 years, and his condition, as above stated, arise from heredity or congenital causes or from the production of the control of Ordinary. State fully the physical condition and especially the extent of disability. If disability results from wound or location, character and character, and its causes or n, as understood by affants.

Nors 2 — The physicians will be careful to fill every blank space in oath Form No. 4 STATE OF GEORGIA, Whattooga County. do certify that I am well acquainted with grant but the applicant in the foregoing affidavit, and am well actually that the statements made by him in his said affidavit are resides in this County and has been a bona fide resident singe the finday of Galette 1844 and M. C. A. Dale Manut. are persons of respectability, that their statements are worthy of full

All amending proofs must be executed with the same formality as original proofs, and the Ordinary must so certify,

credit and belief, and that the full text of the affidavit was read to and understood by them before they signed me.

Given under my official signature and seal, this 2/ day of 1804

go Sthuster

Ordinary County County

STATE OF GEORGIA

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,
Challinga County.
PERSONALLY appears before me, the undersigned Ordinary in and for said County AUDULGUEN
personally known to me to be trustworthy citizens, each of whom, bajing duly swyrn according to law, severally say
under oath, that they are personally and well acquainted with the Marke whose application is herewith presented for a pension, that he has resided in this State continuously since the
22 day of Deamly 1837, that he served in Company 40 of the
Beginnent of Laguello + 6/// (gite full statement, and tell in your own language while in line of duty, was injured by the service as follows: (gite full statement, and tell in your own language
when, where, and how the mount harmoned or the disease was contracted and to what estant and to
the had meggets in least Jennesse and Misch what
Pollowed by Maseumonia Was Captuned atthe
and Church Piscon of Fort Delenon Will neigh
while they or retainer from there with a Brosseid boutel.
from which he has hever recovered ofbraspetingen
Lusor herizonys his Command, but Dorn his health
failed ash he was heart able for duty king some
The labored as a Farmy as long as he Could but is
now near 69 years of a and the reason of age and the diseases with which his offlicted, has fromfull
the distases with which he's offlicted, has grown full
and is known to make a suffert.
Where was applicant's command surrendered helenslow Al
Was he with it W Were all of you present US Whitnes Wood
If not, there was he athorn
Where were vous all I of & Cloghom was Att the Command at Desister No
How do you know the fact you state to be true Was member of the Lam Coupling
We personally know above stated facts. We were with him in the army and have known him ever since.
He was honorably discharged or retired from the service on 260727 day of May
186.7 . Applicant is permanently dualised as stated and has been so syour certain knowledge over since 18 8807/889. We have no interest in the recovery of a pension by how.
Swan to and a bank of the same

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

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

3.—Witnesses are required.

4.—Three witnesses are required.

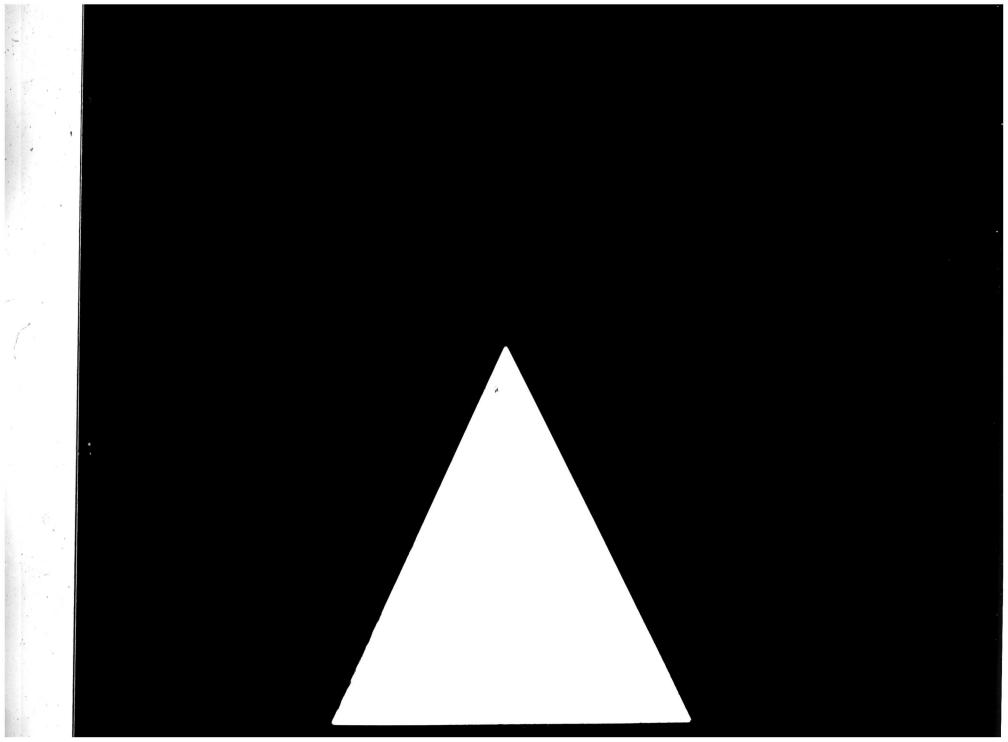
PHYSICIAN'S AFFIDAVIT.

County.	
Post it	
PERSONALLY comes before me Porthuster Cordinal	ry of said County,
me as reputable physicians of said County, who, heing severally sworn, say on oath, that the	., both known to sey have carefully
examined wohing Minds and after such personal examination, as	ny that the present
condition of applicant is as follows to Coffeeny from Carne &	on checks
and brights decine favour finding from dection	15%.16
december some server recommender The Simetake in	
since he hay Mannels . The story in 160, the Duglit of	/-,
Loccorned tales the protocol in foth come in frient to	
The Hidney sineses being interestee at his one well described	4 60000
lead to discontinuous by a commentary unable to rake, within the	intry or Mysian
and that such condition is permanent. Said condition arises from the following facts: Leaner	- 0/
stack of Meralio forlowed by wiferen Preminosna	· comme
lose between the state Garney Thomas Branchate and	126
perhaps the highle some was hesternes on by the 31.	1. 10 / · · · ·
both of lotuck he pow is in a disabled consistency proves	
We have treated applicant professionally for hore than 30 One years, and his condition,	as above stated,
arise from heredity or congenital causes, or from victory and the constant of	enst nedicte
	the ond inare
Note Nate fulls the physical and time and especially the extent of disability. If disability resultings, state its location, character and present condition. If from disease, give its nature and character, or origin as underfined by adjustic.	ts from wound or and its causes or
Norm State fully the physical condition and especially the extent of disability. If disability resultings, that its location, character and present condition. If from disease give its nature and showers	
Norm 1. State fully the physical condition and especially the extent of disability. If disability resultings state its location, character and present condition. If from disease, give its nature and character,	Is from twound or and its causes or
Ordinary. Nova — Nate fulls the physical condition and especially the extract of disability. If disability result in the extract of disability, and the interest of the extraction of the extraction of the extraction of the extraction of the extraction. If from disease, give its nature and disability result on extraction of the extract	
Ordinary. Nova — Nate fails the physical and interior and especially the extent of disability. If disability resultings, state its location, character and present condition. If from disease, give its nature and character, origin as understood by affaird. Nova 2—The physicians will be careful to fill every blank space in each. STATE OF GEORGIA, Willieffa County.	Form No. 4.
Ordinary. Nova — Nate fails the physical and imperialis the extend of disability. If disability resultings, state its location, character and present condition. If from disease, give its nature and character, origin as understood by affault. Nova 2—The physicians will be careful to fill every blank space in oath. STATE OF GEORGIA, What to off County. 1. Ordinary	
Ordinary. Nova — Nate fails the physical and internal appropriate the extent of disability. If disability error strayers, state its location, character and present condition. If from disease, give its nature and character, origin as understood by affairs. Nova 2—The physicians will be careful to fill every blank space in oath. STATE OF GEORGIA, Willief of County. I	Form No. 4.
Ordinary. Nova — Nate fails the physical and time and especially the extent of disability. If disability renal surjects, state its location, character and present condition. If from disease, give its nature and character, origin as understood by affairs. Nova 2—The physicians will be careful to fill every blank space in each. STATE OF GEORGIA, While I are County. L. County. And occurring that I am well acquainted with applicant in the foregoing affiliavit, and am well satisfied that the statements made by him in his true, and he is disabled, as he claims, and I know he is the 'individual be represents himself to	of said County, the said affidavit are be, and that he
Ordinary. Nova — State fulls the physical condition and especially the extent of disability. If disability renaisery state its location, character and present condition. If from disease, give its nature and character, origin as understood by affinish. Nova 2.—The physicians will be careful to fill every blank space in each. STATE OF GEORGIA, County. County. Ordinary do certify that I am well acquainted with gaplicant in the foregoing affidavit, and am well satisfied that the statements made by him in his true, and he is disabled, as he claims, and I know he is the 'individual be represents himself to recides in this County and has been a bona fide resident since that	of said County, the said affidavit are be, and that he
Ordinary. Nova — Nate fails the physical and impossible the extend of deschiels. If disability renaisings, state its location, character and present condition. If from disease, give its nature and character, origin as understand by adjustic. Nova 2.—The physicians will be careful to fill every blank space in each. STATE OF GEORGIA, County. County.	of said County, the said affidavit are be, and that he
Ordinary. Nova — Sate fails the physical and time and especially the extent of disability. If disability rend in the physical condition and especially the extent of disability and character and present condition. If from disease, give its nature and character, origin as understood by affairst. STATE OF GEORGIA, William — The physicians will be careful to fill every blank space in each. STATE OF GEORGIA, Ordinary do certify that I am well acquainted with applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his true, and he is disabiled, as he claims, and I know he is the 'individual he represents himself to resides in this County and has been a bona fide resident singe the disability. It also certify that the witnesses to-wit: Jalso certify that the witnesses to the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was read to and understood by them before the affidavit was rea	of enid County, the enid affidavit are be, and that he
Norm — State fails the physical condition and experialis the extent of disability. If disability retails the extent of disability retails in the state of the sta	of enid County, the enid affidavit are be, and that he
Norm 1—Sate fails the physical and the experialis the extent of deschibits. If disability resultings, state its location, character and present condition. If from disease, give its nature and character, origin as understood by affairst. Norm 2—The physicians will be careful to fill every blank space in oath. STATE OF GEORGIA, County. Count	of said County, the said affidavit are be, and that he 18/// worthy of full ore they signed
Norm 1—Sate fails the physical and the experialis the extent of deschibits. If disability resultings, state its location, character and present condition. If from disease, give its nature and character, origin as understood by affairst. Norm 2—The physicians will be careful to fill every blank space in oath. STATE OF GEORGIA, County. Count	of enid County, the enid affidavit are be, and that he like the said affidavit are be, and that he like the said the like the lin

We personally know above stated facts. We were with him in the army and have known him over since. He was honorably discharged or retired from the service on 2007 77 day of 2005. Applicant is permanently disabled as stated and has been as serout certain knowledge over since 18 2807/879. We have no interest in the recovery of a pension by him. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to and subscribed before me, this day of 2007 11 to 1907. Sworn to an accordance me, this day of 2007 11 to 1907. Sworn to an acc	and Law the works of the agriculture and seal, this day of James before they signed the same. Given under my official signature and seal, this day of James before they signed the same. Given under my official signature and seal, this day of James before they signed the same. Given under my official signature and seal, this day of James before they signed the same. Given under my official signature and seal, this day of James before they signed the same. Given under my official signature and seal, this day of James before they signed the same. Given under my official signature and seal, this day of James before they signed the same. Ordinary Conniy.
For additional tests	com of Pensions wany in Case of John #
, White Applicant for	Tensives wo swore outh that
, he has been a low	tand - sufferen from Chronice.
	attack of Mendles in 144.
	thirty years are are of the
	well segment with home for
	you 1844, and before that time
	and Close and we know the
Tion Commission Noice	make no mistake ne feething
10 Me news per Peneron	· Role
11 . 5 ac 1964	B & Rusine M &
N	this regaritans
" Su presence of	
38 Johnstore	
Oveler car	4
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14	

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

How do you know the facts you state to be true? Was member of the lam backang



Widow's Pension

UNDER ACT 1910

Name Mas MCA, Marte.
Widow of G JAF. 15:222

J. W. LINDSEY,

Widow's Pension

UNDER ACT 1910

County That Frage

County That Frage

County That I will be to the same plant of the sa

Application for Pension By a Widow Under Act of 1910 Questions for Applicant

	STATE OF GEORGIA, LINETTO County
	Personally before me comes / Dr. M. A. W. A. of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act
	of1910, and submit testimony to make out the same, 'rue answers makes to the fol-
	lowing questions to wit:
	1. What is your name, and where do you reside ISL a Mile Surresourcell
	2. How long and since when have you been a continuing resident of the State of Georgia?
	To years derice 18/19
	3. When, where and to whom were you married 1 1860 and chustinge
	Course Ha to g to White
	a. Have you married since the death of first and soldier husband?
	 When, where and in what Company and Regiment did your husband enlist as a soldier in Confederaty Army of Georgia Militia? (State the arms and class of Service.)
	MATER & Selfies incerville the lorrige Tot 99 Reg but Dog
	5. When and where did the Commands of your husband surrends or discharge from the army!
	6. Was your husband personally present at the time of the surrender or discharge of this Com-
	mand!
	7. If he was not present state clearly where he was! at Hours are all your relatings
	8. Where was his command when he left! World The world
	a For what cause did be leave his Command?
	b. By whose authority did he leave his Command? Les Officers
	What was his physical condition when he left his Command! A SHA
	g In what way was he prevented from going back to Command/ HAW FACK
	h. Was he captured by the Many at any time!
	i. If so, when and where captured and where held as a framer and when and for what cause
	released Harrot Kinoro where or whor at fit Helawase
	and the eyehriged
	J. When and where did your first husband die! Little to Jane Devel 7 1918
	k Were you residing together when he died!
	1. If not, how long had you resided apart! Living Toysallor.
	m. Are you now a widow! 9 What property of any description did you own, hold or control for your use and its cash
	value Nov. 4, 1908; State name by items and where situated) & Horry & State law Yearly
,	world and A me Hower Hold wood
	10. What property of any kind have you sold or given away since Nov. 4, 1908? What was re-
	ceived for it and what did you do with the proceeds thereof! (Give items and eash value.)
	sold one low for soft week for Ar bills
	and hiving experiences
	11. What property of any description of any value have you now! Horse
	Give list and cash value
	12. What are your annual earnings or income from any source and their value?
	Morre
	13. Have you or your husband heretofore been paid a pension by the State!
	If so, when and for what cause were you go your husband placed on the Roll Helstand
	Sworn to and subscribed before me this the 1 1/4 Way W
	day of Al Quest 1918 Min 114 Hille

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA, WINTERSTONE COUNTY
Personally Defore me comes T. Is original who after
being duly sworn, true answers to make to the following questions, answers as follows:
1 What is your name and where do you reside! & De Sugland Until
3 How long and since when have you known Mos Ma Muite applicant to the
Hery long and since when has she continuously resided in this State! (Give date.)
all there life
4 When anow whom was she married of A I fitte How do you know there highbor
husband CCOL 60 Herrs
10 20 White
the bushand of appleant the Lis & Chartoope County gues 29th 1918
Were the applicant and her husband living together as husband and wife at the date of his
death.t
8. If not, how long did they live apart before his death! were live gaternation
9. When where and in what Comment I Borne is a For I West.
Constons y 4-39 Son Is of ear ctry
100 Were you, a member of the same Company!
11. How long within your personal knowledge did be perform netural military service with his Company and Regiment.
pany and Regiment 9 11 Command surrender and was discharged 1 12 When and where did his Command surrender and was discharged 1 1 2 1 6
anima .
Were you personally present when it was surrendered! It not where were you let alleast the the and how came you there of a Patricle
and how came you there! OF 2 MILLALL
14 Was the instant of applicant personally as one temperature. Her
where was he'
authorized the beave line Command! Give date All Miller all Miller By whose authorized the beave line Command!
And how long das be granted leave! How do you know all this!
TOW GO VOIL KHOW HIL WIST
1) For a but cause if you know of your own knowledge, was he prevented from returning to his Command."
16. What effort did he make to return to his Command and how do you know this? Of your own
k ownedge or how
Swarp to and subscribed before a state of Alfrican
Sworn to and subscribed before me this the 15th Magland St.
9 PSTLINGTON Ordinary
of Ofert today county
County

Affidavit of Two Freeholders

11//100/11 0/ 1200 1	rreenotaers
STATE OF GEORGIA, Columbia	COUNTY
PPSNO	and a to Porvet
are freeholders of said County and that they know May	of a What I
of said County and know what property she owned on Nov. 4	1908 and its and all
Schedule (A) as follows:	. 1300, and its easi value to be set out by
Personal property	.45
Notes and accounts due	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Total.	. HIT
Schedule (B).	* 7 "
We know the property sold or given away since Nov.	4 1000
Personal property	4, 1908, its cash value to be as follows:
Money, Notes and Accounts	* Horce
	*
Schedule (C).	
We also know what property she has now in her possess	sion, use and control, to wit:
Acres of land worth	* Horac
Horses and Mules	*
Cows and Hogs	
Other Property	*
Income and earnings	* 2.5
Total value of all property and effect	O C 1 STORE
Sworn and subscribed before me this the	letelele chan
24 day of Using 1918	4.902
go gothestore Ordinary	V Ouvell
1 To Cartino	Total .
6	County.
Ordinary's. Cer	titicate
STATE OF GEORGIA, Shattage	,,,care
STATE OF GEORGIA, STORY 120 14	COUNTY
go gotherstock	Ordinary of said County do certify
that I know Man Man Man	
is the person she represents herself to be and she is a bona fide	continuing resident citizen of said County
and was on the 4th Nov., 1908 That I elso know & Regular Lag	
to the service of husband, and Detelement of freeholders. That all of them are now residents of said County the foregoing affidavits and that they all one truth fail or	
the foregoing affidavits and that they all are truthful, trustwort faith and credit.	by, and their statements are entitled to full
2 11	
~~	Returned for Tax is for 12 \$ 175 for 1913 \$ 144
Sworn under my hand and official seal of office this	911
attaxest 1918	day of.
SEAL 90	200 phrostore
	1/ With
NOTES 1 Before any questions are any more in the Control	County.
NOTES 1. Before any questions are answered the Ordinary shall as words: "You do solemnly swear that you will true may and the evidence you shall give will be the truth. So helped 2. Additional affidavits may be attached if blank spaces are as the property of the standary, 1870, at 18, and 18,	ear applicant and the witness in the following
2. Additional affidavits may be attached if blank spaces are 3. Only widows who married prior to first	p you God."
All affidavits must be made before the Ordinary, 1870, are Attach certified copies of marriage license if obtainable, general reputation.	If not prove marriage by
general reputation	and, prove marriage, by some person, or by

Georgia Chuttoon County Brankly apparation before the suschisiqued & H. Sliver who being duly droom on anth. Anys theet to fine factorial Knowledge & HA White and Meso 1888 and over living topeather at the dates of me - at the dates of the att flem at the dates of this bleath which Sworn to proce desberibed before one This 13th day of deptimber 1918 good freeton Ordis vary

18. 7. 39 X 2. Sonder hay is they is they sond they so 1864. They so 1864

Wiggins, C.a. Who. For Those Heretoffre Paid. Trom 1899 (898) NO. 1097

WIDOW'S PENSION,

For year ending February 15th, 1899.

Musical Miffins
Wildow of J. E. Miffins RICHARD JOHNSON.

WARRANT ISSUED

2// AND HANDED TO 1800.

GEU. W HANNISUN, STATE PARTIEN, ATLANTA

POWER OF ATTORNEY.

POWER OF ATTORNEY.

State of Georgia,	1				
OTREGOTION Coun					
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Amora mi	of.	arla	nto	Ja.	_
to receive and receipt for the I	pension paid l				ie to
Me		at For			
IN WITNESS WHERE	OF, I have he	•		seal this >	4
day of Jans	1899.				
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Executed in presence of	of .	unif	Ol	Jerry	3.7.
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Those Benefither Paig No. 1647 NOW'S PENSIO	£ 2.	RICHARD JOHNSON	WARRANT ISSUED	D 10	11.4.14
For Those Height Man Annual Floring Federal	10 5	7/ Z	I I	наховр	12 4
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POWER OF ATTORNEY

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State of Geor	gia,)			
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5 B D V	PS PENS	2 9	RICHARD JOHNSON,	ARRANT ISSUED	for of
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10	IDOW'S PENSIO	3 1	a of	-OXI	Mer. HACKISUN. 314
3F	# * #	12 1	Vido	V	3
3		Mar.	Widow of	0.	

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs. County of Contract Contract
who, being sworn, says on oath, that she is a bona fide resident of said county of
State of Georgia, and that she has restrict in said State
State of Georgia, and that she has negative in solutionary ever since 18 C. That she is the Widow of the property of the state of Georgia, and that she has negative in said State 18 C. That she is the Widow of
who was a soldier in Company
12 of the 3 Beginnent of Propie
V lunteers, that he emisted in said regiment on or about the month of
1867 and served in the Army up to Face 1867. That he lost his
the of the day of Said 1stery saw here
to program as at the hasterned's leath, when where and some what causes
6. 10 - su prision in pall of State
6-A-in training in vall is start
(Sich to your last Conductions)
Dependent exerts that she was the wife of said decreased soldier, during his service in the army as a soldier, and that so has been married since his durit aforested, and that she became his wife in the grant 1844.5
and the court is deal a accression, and that she became his wife in the court is 14.5
I have been allowed a pension as a resident of Collect Thomas County for the year ending
Is sensity 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.
Sworn to and subser bed before me, this
Total Martin Colinary Post Office For
Post Office , For
State of Gaorgia
State of Georgia, 1 1 Meet. Last Meet. Last County, County, Ord Bury of said County, certify that I am well acquainted
who made the above affidavit and an entise
to I that the facts therein stated and rue, and I know she is the individual she represents herself to be, and that she
The continuously resolution this State since the day of Getter 1858
Given under my odd and signature and seal this the day of Course 1899
John Marte
Collored .
(Collinary of Ciccetto year County

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of G. Cotton	1.4 bl glassing
Mo, being sworn, so	ys on oath, that she is a bona fide resident of said county of
and which a size of the special and	State of Georgia, and that she has RESIDED in said State
continuously eyer since/ 55 - 1	18 5 That she is the Widow of
	who was a soldier in Company
of the	Regiment of PETTIC
Volunteers, that he enlisted in said regiment on or also	
186 _ and served in the Army up to	For Co. 1864 That he lost his
life on the day of	fire the 1804 State here
full particulars of the husband's death, when, where	and from what crose)
Picely 5 Willet	At Admiraining which
i deterto y ling	221.726
. /	*
Demonstrates that the way the size of air 1	The Later of the Control of the Cont
sie has never married since his death aforesaid, and that	soldier, during his service in the army as a soldier, and that
	County for the year ending
	ovided by law for the your ending February 15th, 1899.
Name to and subscribed but as me at to)	1 trus
de day of personney 1899.	1 1 F-125
Ordinary.	Post-Office Dilarica Second
State of Georgia,	Ordbrary of said County, certify that I am well acquainted
- County. ∫	Ordinary of said County, certify that I am well acquainted
with Mrs. a CE of Species	who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know si	e is the individual she represents herself to be, and that she
has continuously resided in this State since the	day of xees 1498 Por Cartinate
Given under my official signature and seal this t	~ · · · · · · · · · · · · · · · · · · ·
	be 16 2 day of January 1819.
	the 16 2 May of January 1841.

POWER OF ATTORNEY.

STATE OF GEORGIA,	1	
Seputtour Coun	ty.	•
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om wami	est of affai	ta ha
to receive and neceipt for the pe		/
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	OF, I have hereunto set my ha	and and and this 29
	190) Luz	
day of . C	13 Cont	
<i>y</i>	a cour	Mifgind [L. S.]
Executed in presence of		
Executed in presence of	X Cardy	
- A1		
	<u>.</u> 1	ı -i -i
	County County	1801
TO Those Heretofore Paid TOO. No. 1733 IDOW'S PENSIO		
	Topics of Commerce on Commerce	B 50%
	TO THE TOTAL	ISSUED TO
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N° N	E WY C:	AND HAY
30 7	See Control	NAF AN
()	2 13 200	
V I	For Widow	1 8
	1 3	1

POWER OF ATTORNEY

to receive and receip	pt for the pension paid hereon, and request that he received, I have hereunto set my hand and seal, this	
Executed in p	oresence of Conty	LS.
To Those Heretofore Paid. 1902.	WIDOW'S PENSION, For year ending Dec. 31, 1902. For year ending Dec. 31, 1902. PAMP TO SERVICE TO SERVICE COUNTY. Widow of Regiment County. JOHN W. LINDSEY. Commissioner of Pression. WARRANT ISSUED	AND HANDERS TO

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Come	Mrs.
County of lettertropa le a migg	in
, who, being sworn, says on oath, that she is a bona fide resident of	mid Courter of
1690	
	the Widow of
who was a soldie	in Company
72 of the 12/2000 Regiment of Bens	ien
Volunteers, that he enlisted in said regiment on or about the month of Facel	
1865 and served in the Army up to / Feet 1864 - The	at he lost his
7/1	
particulars of the husband's death, when, where and from what cause	. (State here
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in alice of Buttog couring lara	March Land
on the su the drick of Istert . Is	minses
	*
	,
The second secon	-
Deponent swears that she was the wife of said deceased soldier, during his service in the army as a se	
	idier, and that
she has never married since his death aforesaid, and that she became his wife in the year 18 #- &	
I have been allowed a pension as a resident of Churtony County for the	
February 15th, 1500, and now apply for the pension provided by law for the year ending Februar	ry 15th, 1901.
Sworn to and subscribed before me, this	
22' day of Dec 1900 la Cat Mage	in
1200	
Ordinary Post Office Or Tue	
State 10	
State of Georgia, John Miles	
County Ordinary of said County, certify that I am w	
with Mr. C. C. Wiffer , who made the above affidavit and that the facts therein stated are true, and I know she is the individual she represents herself to be,	d am satisfied
that the facts therein stated are true, and I know she is the individual she represents herself to be	and that also
	18
Given under my official signature and seal, this the 22 day of Dec	190#
Official Soul	
Seal. 1 Ordinary of Charles of	Country

For Widows Heretofore Allowed Pensions.

STATE OF, GEORGIA, PERSONALLY COMES MICE.
who, being sworn, says on oath, that she is a bona fide resident of said County of
State of Georgia, and that she has RESIDED in said State
continuously over since feet 1949 . That she is the Widow of who was a soldier in Company
of the Regiment of Francisco
(,4A,
Volunteers, that he enlisted in said regiment on or about the month of 1808, and served in the Army up to 1804. That he lost his
life on the day of Fecce 1864 (State here
purisher of the hadrand's death, when where and from what source) Jelled I leaded it foots of control Count (10 12 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 18 4Ce
I have been paid a pension as a resident of Motto Tya County for the
year ending December 31, 1901, and now apply for the pension provided by law for the year ending
December 31, 1902
Swern to and subscribed before me, this 69 day of Court 1802. Ordinary. Post Office In Court of the Court of
State of Georgia,
County County Ordinary of said County, certify that I am web
acquainted with Mrs. AC A Wagen, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
hereself to be, and that she has continuously resided in this State since the
day of Jay of Jay 1898 Given under my official signature and soul, this this, B day of Jay 1102
Collen let The
(Official)

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

1. Co County.

1. Count

WIDOW'S PENSION,
For year ending Dec. 31, 1503.

PAID TO
OF
COUNTY,
Widow of A. W. LINDSEY,
Commission of Pension.

WARRANT ISSUED

AND MARRANT ISSUED

AND MARRANT ISSUED

The state of Pension.

The state of Pension.

1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,
on was from at Canton ga
to receive and receipt for the pension paid hereon, and request that he remit same to
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of Jan 1904 Tyr.
Executed in presence of
The Met to
ne a second

TO THOSE HERETOPORE PAID.

IBOOK.

No. 26 R.

PAID TO WAS PENSION

FOR THE EX DING DECEMBER 31, 1904.

Midow of Commissioner of Pension.

JOHN W. LINDSEY.

Cold History

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10 00 B 25 18 18

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.	1 ERSONALLY COMES WAS
County of 4 Gettorya	le a vingins
who, being sworn says on, ath, tha	t she is a bona fide resident of said County of
	orgia, and that she has RESIDED in said State
continuously ever since	That she is the Widow of
A la Miggain.	who was a soldier in Company
72 of the 1872	Regiment of Bushes
Volunteers, that he enlisted in said regiment on or about	at the month of
186 B and served in the Army up to Face	1804 . That he lost his
life on the day of 6	Hace 1864 (State here
particulars of the husband's death, when, where and from w	
Sich dy lucions	on about dut
or opursay lander l	forus forest bec
<i>U</i>	
	*
	· ·
Deponent swears that she was the wife of said decease	d soldier, during his service in the Army as a
soldier, and that she has never married since his death	aforesaid, and that she became his wife in
the year 1844	
I have been paid a pension as a resident of CC	County for the
year ending December 31, 1902, and now apply for the	pension provided by law for the year ending
December 31, 1903	P
Sworn to and subscribed before me,	a Com
his 3 T-day of Jazz 1903	a Company
Jethen Mellat Ordinary.	Post Office Las & Serie
State of Georgia,	John Hatter
Clintonger County. Or	
. 10	,who made the above affidavit and
am satisfied that the facts therein stated are true, and	
nerself to be, and that she has continuously resided in	this State since the 3
iny of Jan 1815	
Given under my official signature and seal, this th	Q . O.
/	e G day of Jan 1908.
(Official)	The flatter 1903.
	111

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

The second secon
TATE OF GEORGIA, PERSONALLY COMES MRS.
County of le with the live briggins
who, being sworn says on oath, that she is a bona fide resident of said County of
State of Georgia, and that she has RESIDED in said State
tinuously ever since 1829 That she is the Widow of
who was a soldier in Company
72 of the 192 Regiment of Sec.
lunteers, that he enlisted in said regiment on or about the month of
3 , and served in the Army up to FAR 1864 That he lost his
on the day of Field 18614 (State here
ticulars of the husband's death, when, where and from what cause)
died finances - let offethylining.
don't inter tice
V
Management and American Co.
ponent swears that she was the wife of said deceased soldier, during his service in the Army as a
dier, and that she has never mar id since his death aforesaid, and that she became his wife in
year 18474
I have been paid a pension as a resident of size Tony . County for the
ar ending December 31, 1903, and now apply for the pension provided by law for the year ending
camber 31, 1904
Sworn to and subscribed before me,
is 1/2 day of De 1904 the State of The
Sworn to and subscribed before me, is 1/2 day of 2 1904 Post Office Post Office
ALFELT FILL 47 Ordinary.
tate of Georgia, 1. John Matty
County. Ordinary of said County, certify that I am well
quainted with Mrs. LCL Miffig. 2.2 who made the above affidavit and
quantied with Mrs. 20 E. F. F. 22 E. who indicate the above minds it and
a satisfied that the facts therein stated are true, and I know she is the individual she represents
reself to be, and that she has continuously resided in this State since the
Given under my official signature and seal, this the 1/2 day of Service 1904.
Official - Secure & Clarka 7
Ordinary of Charter County

POWER OF ATTORNEY.

STATE OF GEORGIA,
1, 1144 & 12, Muggins , hereby authorize
I. Mar to it migains hereby authorize
to receive and receipt for the pension paid hereon, and request that he remit same to
Mes de a higgins at Luzien would fra
In Witness Whereof, I have hereunto set my hand and seal, this
day of 19271 1905.
day of 1221 2 1800.
Executed in presence of
V Chusten sody

JOHN, W. LINDSEY,

WARRY ISSUEL

1900 PRNSION For year ending Dec. 31, 1906. The Co. A. (700) For year ending Dec. 31, 1906. The Co. A. (1904).

TATE OF GEORGIA,

(Charlog of County),

I My GGL (M) hereby authorise

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

at Sillie 2 and receipt for the pension paid hereon, and request that he remit same to

at Sillie 2 and relief (M)

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

ag of Parametry 1908,

Executed in presence of

Profunction Christiany

JOHN W. LINDSEY,
Commissioner of

Regiment

AND HANDED TO

JAN 27

POWER OF ATTORNEY.

To Those Heretofore Paid.

1903.

No. 2 (L)

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Chattenger	Carriagino
21	, that she is a bona fide resident of said County of
Chattorgel State of	Georgia, and that she has RESIDED in said State
continuously ever since all Imy	That she is the Widow of
of is huggers	That she is the Widow ofwho was a soldier in Company Regiment of
Volunteers, that he collisted in said regiment on or	about the month of actober
volunteers, that he emission in said regiment on or	about the month of W21000
186,5 and served in the Army up to 27/2.	180 7 That he lost his
186 . and served in the Army up to the . 11to on the Lette fall of day at particulars as the bushands death, when, where and for	186// (Ninte here
Menelis 1864	
	* * * * * * * * * * * * * * * * * * *
98 F	
Deponent swears that she was the wife of said dece-	The state of the s
soldier, and that she has never married since his de	eath aforesaid, and that she became his wife in
the year 1846	P #
I have been paid a pension as a resident of	Mallorga County for the
year ending December 31, 1904, and now apply for	the pension provided by law for the year ending
December 31, 1905.	J4.
Sworn to and subscribed before me,	mes la Willeggina
this // day of / 1/ 1905. }	mus a lexit eggina
	Post-Office Crart Sire
-	
State of Georgia,	1. Jofallislance
. Wintlerga County.	1. 9 PJS/HISTOR. Ordinary of said County, certify that I am well . Who made the above affidavit and
acquainted with Mrs. 6 17 1/199	. Who made the above affidavit and
am satisfied that the facts therein stated are true, a	
herself to be, and that she has continuously resided	in this State since the 2.5
day of December 1840	
Given under my official signature and seal, the	nis the / day of Parc 1905
Official (nary of ble ttooga county
Ordi	nary of 10 fire Hooge County
	,

NOTE.—All blank spaces must be filled.

Voucher and Affidavit must bear date after January 1st, 1905.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.	PERSONALLY COMES MRS.
County of Willettorya	(11 11 iggins
who, being sworn, says on o	ath that she is a bona fide resident of said County of
1.1.77	te of Georgia, and that she has RESIDED in said State
continuously ever since 183	10
	That she is the Widow of
Ino Cf	riggliss who was a soldier in Company
of the	Regiment of (1101711
Volunteers, that he enlisted in said regiment of	n or about the month of CIT
186 3 and served in the Army up to	That he lost his
life on theday	of18k4 (State here
particulars of the humand's death, when, where and Alexander Granes	out
	and the same of th
	The second secon
Deponent swears that she was the wife of safti	deceased soldier, during his service in the Army as a
soldier, and that she has never married since h	nis death aforesaid, and that she became his wife in
the year 1844	
I have been paid a pension as a reside	int of William County, for the
year ending December 31, 1905, and now apply	for the pension provided by law for the year ending
December 31, 1906.	
	her.
Sworn to and subscribed before me this 22 day of Ant 1906.	2100 Ce ax magnins
this 22 day of Part 1906.	Mins Ce Ax maggins
Polisiton Ordinary.	Post Office_ / M
S	() A + -
State of Georgia,	1. Popaciston
Chattoga County.	Ordinary of said County, certify that I am well
acquainted with Mrs. 4127	offices, who made the above affidavit, and
am satisfied that the facts therein stated are tr	ue, and I know she is the individual she represents
herself to be, and that she has continuously resi	ded in this State since the
day of JAIL 1870	
Given under my official signature and seal	1000.
(Official)	Je pohiustoni
Seal	Ordinary of Man 1100 911 County
NOTE.—All blank spaces must be fill Yougher and Affidavits must	led.

POWER OF ATTORNEY

6						
	STATE	OF GEORGI	۸,	1		
Ĺ	(0	Master	A COUNTY			
à.	Ι,	- /	11/20 (1	a ma	gins	hereby authorize
	Best	y Shro	Eshire	of this	Mory	Courte lea
	to receive	and receipt for	the pension	paid bereon, and	request that	he remit same to
						rollien
	In W	itness Whereof,	I have hereus	to set my hand an	d seal, this	191
1	day of	DAIL		1907.	Fur	,
	0	.,		· Co	hur	19911192.01
-4	H	Executed in p	resence of		mark	//
	1	JA TE	ration	Service of the servic		
	0	1 20	rounta	ry.		
b						
Mary Labor.	and the same of	AND SAN	he have been dead of		CONTRACTOR OF THE PARTY OF THE	in the same of the same of
34 1.	The second secon	Action of the Paris of the Pari	A THE WAY TO			
3134	. ,,			,		•
12/10	.	18		County	non.	1907,
410	aid.	5	1907	3 July	LINDSEY, Summissioner of Pensions (1 ISSUED	7 11.
6:08	To Those Heretofore Paid 1907.	DR.W	, 3.	2.3/1	BEY,	0
119	tofor	1033 PR	12 3 B	My to	JOHN W. LINDSEY Commissioner 9 WARRANT ISSUED	ND HANDED TO
9 3		0/	ending De- PAID TO	Dent 60 Ct	Comm	HANDE.
812.	ğ 🔘 🔘	No.	PA C	Catte Latte 9 B	I W	AND HADED
20	the H	× 0	Year	V 171	OHO WA	ANI V
:350	To		For Year ending Dec. 31, 1907. PAID TO A MAGAL	Widow of	5	\$
13/61		3	" W	Wido		, N
1010			3	> 0	T.	1.14

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Constoog	a 1 to a Miggins
who, being sworn says	s on oath, that she is a bona fide resident of said County of
	State of Georgia, and that she has RESIDED in said State
continuously ever since	829 That she is the Widow of
· 9 & Mis	
	who was a soldier in Company Regiment of 4107914
Volounteers, that he enlisted in said regime	
	fall of 1864. That he lost his
life on the	186 7 That he lost his
months to the first of the firs	day of fall of 1864. (State here
particulars of the husband's death, when, when	les at Nospital at Spatatranes
nn of the	ces in stantine is afairment
	The state of the s
	The second secon
	The state of the s
soldier, and that she has never married si	and deceased soldier, during his service in the Army as a major his death aforesaid, and that she became his wife in a
soldier, and that she has never married si the year 18#4	ne his death aforesaid, and that she became his wife in a
soldier, and that she has never married at the year 18 ###. I have been paid a pension as a resic year ending December 31, 1996, and now ap	ne his death aforesaid, and that she became his wife inac
soldier, and that she has never married at the year is ###. I have been paid a pension as a residuest ending December 31, 1996, and now as December 31, 1997	then of Collar Thoga County, for the pply for the pension provided by law for the year ending
soldier, and that she has never married at the year 18 H4. I have been paid a pension as a reak year ending December 31, 1996, and now at December 31, 1997 Sworn to and subscribed before m	then of Cole at 180 ga County, for the poply for the pension provided by law for the year ending
I have been paid a pension as a real year ending December 31, 1997. Sworn to and subscribed before ments 1997.	then of Cole at 180 ga County, for the poly for the pension provided by law for the year ending the Mars Cole at the second seco
soldier, and that she has never married at the year 18 H4. I have been paid a pension as a reak year ending December 31, 1996, and now at December 31, 1997 Sworn to and subscribed before m	then of Cole at 180 ga County, for the poly for the pension provided by law for the year ending the Mars Cole at the second seco
I have been paid a pension as a residence ending December 31, 1995, and now appeared to any of this life day of any of any ordinary ordinary. State of Georgia.	then of Cole allowing County, for the pply for the pension provided by law for the year ending Aura Cole allowing County, for the posion provided by law for the year ending Aura Cole allowing County, for the pension provided by law for the year ending Aura Cole allowing County, for the pension provided by law for the year ending Aura Cole allowing County, for the pension provided by law for the year ending
I have been paid a pension as a residence ending December 31, 1995, and now appeared to any of this life day of any of any ordinary ordinary. State of Georgia.	then of Cole allowing County, for the pply for the pension provided by law for the year ending Aura Cole allowing County, for the posion provided by law for the year ending Aura Cole allowing County, for the pension provided by law for the year ending Aura Cole allowing County, for the pension provided by law for the year ending Aura Cole allowing County, for the pension provided by law for the year ending
I have been paid a pension as a resident pen	then of Collational County, for the position of the pension provided by law for the year ending for the pension provided by law for the year ending for the pension provided by law for the year ending for the pension provided by law for the year ending for the pension provided by law for the year ending for the pension provided by law for the year ending for the pension provided by law for the year ending for the pension provided by law for the year ending for the year end ye
J have been paid a pension as a real vear ending December 31, 1909, and now as December 31, 1909, and now as December 31, 1907 Sworn to and subscribed before methics of day of Jacob Cordinary Ordinary	then of Coll Alloyd County, for the populy for the pension provided by law for the year ending Miss Collins and that she became his wife inc. Post Office I would be above affidavit, and
I have been paid a pension as a real year ending December 31, 1909, and now as December 31, 1909, and now as December 31, 1907 Sworn to and subscribed before methics of day of first 1907 State of Georgia, County or and County or an artisfied that the facts therein stated are	then of Coll Alloyd County, for the populy for the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year ending the pension provided by law for the year ending the
I have been paid a pension as a reality sear ending December 31, 1996, and now as December 31, 1996, and now as December 31, 1997 Sworn to and subscribed before methics of day of the Control ordinary ordinary. State of Georgia, County ordinary	then of Coll Alloyd County, for the populy for the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year ending the pension provided by law for the year ending the
I have been paid a pension as a real year ending December 31, 1996, and now as December 31, 1996, and now as December 31, 1997 Sworn to and subscribed before methics of day of the total ordinary ordinary. State of Georgia, County ordinary ordi	then of Coll Alloyd County, for the populy for the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year end year e
I have been paid a pension as a reality sear ending December 31, 1996, and now as December 31, 1996, and now as December 31, 1997 Sworn to and subscribed before methics of day of the Control ordinary ordinary. State of Georgia, County ordinary	then of Coll Alloyd County, for the populy for the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year end year e
I have been paid a pension as a real year ending December 31, 1996, and now as December 31, 1996, and now as December 31, 1997 Sworn to and subscribed before methics of day of the total ordinary ordinary. State of Georgia, County ordinary ordi	then of Coll Alloyd County, for the populy for the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending to the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year end year e

am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the herself to be, and that she has continuously resided in this State since the day of ACM 1896
Given under my official signature and seal, this the /// Official | Seal | NOTE.—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1907.

Code Section 1289.

K. 60 No. ON 1757

INWALID

SOLDIER'S PENSION,

190

Name of J Higgley
County County of Manager

Co. 11 60 Regl.

Disability 100

Amount, \$ 0

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

6/17/06.

Form Xo.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Litatioffic County.

1. Litatioffic

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN, STATE OF GEORGIA. Wentoosel County. _18#D , that he is a bona it le citizen and resident of Georgia, and has been day of 2 horen ____1862 , during the war between the States, and of 60 th Regiment of , Salar Plat Volunteers Luntare Brigade, and was honorably discharged on the worth 4th day of .186 7 ; that whilst engaged in such military service, and in line of duty in the State of Mary Land on the he was disabled or wounded as follows 10 My 100 milder del intering seem in printog left Nich smigning neros the back and making with from in as and Struck by glancing ball on lest side near It neart which Has given me trucke with Hey heart well Little Where was command surrendered " W/ of Fit Mex was he? Tolks Hlore to How come there! HTV I LUTION And by whose authority? State fully: LE ILU Lette IL Just LLE atter being a culled Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ending October 20th, 190— Sworn to and subscribed before me, this the _day of Much

styles. - Nots.—Do not trouble to mention wounds which do not disable. - Nots.—The Ordinary will see that all blank spaces are filled when the affidavits are signed.

Name M. H. H. H. H. H. J. M. County Co. L. M. Co. L. M. Co. L. M. Co. L. M. Commissioner of Peas WARRANT HANDED TO Ordinary will write Name of Applicant, Co. and Regiment on back as indicated above.

6/2 1/06

SOLDFER'S PENSION

11

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,	
PERSONALLY appears before me, the undersigned Ordinary in and for said County	
personally shown to me to be trustworthy chizens, each of whom, being duty sworn according to law, severally any under onth, that they are personally and well acquainted with the law of the law ontinuously since the whose application is herewith presented for a pension, that he has resided, in this State continuously since the	
day of	•
And minice sall writch havgive white traver will since hist was that in Left he has minice ball which in high across the sach	
will come dut on right fiet	,
Where was applicant's command surrendered. Left 1011 Atto 4. Was he with it. Were all of you present? 200	
Where was applicant's command surrendered? Left 1011 Attor. Was be with it? Were all of you present? MO If not, where was he? At Mo fill Mills Mill Mortismioniral Where were you all? Lill Mills In Confidence were	
Where was applicant's command surrendered? Lift will allow Were all of you present? More than the white the same was he? All the first somewhat the fortism contract where were you all? Lift the first somewhat the do you know the facts you state to be true? I CALITAL I I AS	
How do you know the facts you state to be true? a CCLIILE # 10 A.S	.
How do you know the facts you state to be true. A CALITAL # 10'70'S We personally know above stated facts. We were with him in the army and have known him ever since. He was honorably discharged or retired from the service on # day of # ### #### #####################) .
How do you know the facts you state to be true. A CALITAL # 10.79.3 "Let Let / / We personally know above stated facts. We were with him in the army and have known him ever since. He was honorably discharged or retired from the service on # day of # # # # # # # # # # # # # # # # # #	•

PHYSICIAN'S AFFIDAVIT.

STATE OF GEORGIA
County.
PERSONALLY comes before meOrdinary of said County.
11 79 Breast & apply 80 14 8
me as reputable physipians of said County, who, being severally sworn, say on oath, that they have carefully
examined A liegles and after such personal examination, say that the present
condition of applicant is as follows: The effects of two ilvamos one in
left hope ones one over mesion of ica. I - forthe dicume bace commen
received in busile of franciscolity file wound maying real fractions
eighthe rite producing transfer astronom, effect of which, and acrony doing
cheaten men the former in iff info deathy me sott in before and
the left wine there a fortice lawigar of left some and les occutings
they women from effect of these wanney he is herable is make a hing by lover esties
and that such condition is permanent. Said condition arises from the following facts: The true forwards
meet in sottle while in ratte in is found that halowar justill
of heart-from women near heart. Second from lavance in cell- hele
ing precuety paralyses of left-lower entremy pass i'm his som
portinely hearinger
We have treated applicant professionally for
doesarise from heredity or congenital causes, or from vicious or intemperate habits.
Sworn to and subscribed before me, this)
gth day of lighty 1906 ONE former ist
22 rouilstore
Ordinary.
NOTE 1.—State Jully the physical condition and especially the extent of disability. If disability results from wound or injury, table its location, character and present condition. If from disease, give its nature and character, and its causes or origin, as understood by affainted.
Note 2.—The physicians will be careful to fill every blank space in oath.
the physicians will be calculated in every brank space in bath.
Form Ro. 4.
STATE OF GEORGIA,
Form Ro. 4.
STATE OF GEORGIA, TO HAT WORK County.
STATE OF GEORGIA, Telestroga County. 1 Ordinary of said County,
STATE OF GEORGIA, White the control of the control
STATE OF GEORGIA, TO FLOW STATE OF GEORGIA Occurry, Occurry that I am well acquainted with Occurry the foregoing affidavit, and an well satisfies that the statements of the beginning of the continuous and I know he is the individual by represents himself to be, and that he
STATE OF GEORGIA, TO FLOW TO THE COUNTY. Occurrily that I am well acquainted with the population in the foregoing affidavit, and am well satisfied that the statements dutie by him in his said affidavit are rue, and he is disabled, as he citains, and I know he is the individual he represents himself to be, and that he obides in this County and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the county and has been a bona fide resident since the disable of the disable of the county and the co
STATE OF GEORGIA, TO FLOW TO THE COUNTY. Occurrily that I am well acquainted with Occurrily that I am well acquainted with The policient in the foregoing affidavit, and am well satisfied that the statements diade by him in his said affidavit are rue, and he is distributed, as he citatine, and I know he is the individual he represents himself to be, and that he obides in this County and has been a bona fide resident since the day of Milled House South also certify that the witnesses to wit: The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the The County and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since the county and has been a bona fide resident since t
STATE OF GEORGIA, Let all the statements are well as the resident into the statements are well as the statement are well as the statement and the statement and the statement and the statement and the statement are statement and the statement are statement and the statement are statement are statement are statement and the statement are statement are well as the statement as the statement are well as the
STATE OF GEORGIA, Let Land World County, 1. Ordinary of said County, 1.
STATE OF GEORGIA, TO LONG WORK County, 1
STATE OF GEORGIA, TO FLOW TO THE COUNTY. Ordinary of said County, the policent in the foregoing affidavit, and an well satisfies that the statements afface by him in his said affidavit are rue, and he is district, as he ciaims, and I know he is the individual he represents himself to be, and that he existe in this County and has been a bona fide resident since the day of full said afface of the county and has been a bona fide resident since the day of full said afface of the county and has been a bona fide resident since the day of full said afface of the county and that the full text of the affactivit was read to and understood by them before they signed the same.
STATE OF GEORGIA, TO FLOW TO THE COUNTY. Ordinary of said County, the policent in the foregoing affidavit, and an well satisfies that the statements afface by him in his said affidavit are rue, and he is district, as he ciaims, and I know he is the individual he represents himself to be, and that he existe in this County and has been a bona fide resident since the day of full said afface of the county and has been a bona fide resident since the day of full said afface of the county and has been a bona fide resident since the day of full said afface of the county and that the full text of the affactivit was read to and understood by them before they signed the same.

POWER OF ATTORNEY.

STATE OF GEORGIA, WILATTOORE COUNTY. Mislig Shropshored Attanta Ga at VICILIILITUILLE GIM IN WITNESS WHEREOF, I have hereunto set my hand and seal, this . a g Migley [L. 0.] Executed in presence of JP Johnston ording

Statefant County & Prairie . Dr. P. Parris do Dalemnty Dwear That I am ferdanally acquainted with Qf wifley whose some is signed to the faregoing offication and that I know of my coun knowledge that the said of wigley did serve a. Act fourth in the afflication and that he did not desert the Service but was humanably discharged therefram . Paris I warn to and Dulescribed before me this the 30" day of may 1906 and I certify that the afficient is fersamily Knawn to me and he is a fersan of Viracity and truth, Jno. T. Me mile My Cam Exf Hotary Public Jan 16, 1910

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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

tok applicants herefor	OKE VEFORED LEUZIOUS
State of Georgia,	**
(Bhatter All County.)	<u>۶</u> ۰
Personally appears_ 11 9 me	alice of Toliathoras
County, State of Georgia, who, being duly swort	
and resident of said State, and has resided there	
day of Menteh 18/10; that he en	listed in the military service of the Con-
federate States (or of the State of	🧋) during the war between the
States, and served as a Manualt	
	's Brigade; that whilst engaged
in such military service in the State of	ory for all on the day
of 90000 1883, he was	wounded, injured or diseased as follows:
greas Shot by Mil	review ball extering
Hip was Shot	ing the above right
Hila was shot a	I the with guil
Laure heart trucks	left briast while
entia remit million	
	No. State Com-
Deponent makes application for the pe	ension to which he is entitled for the year
ending October 29th, 1907. I have hereton	fore, under said law, as a resident of
anniver	County, been allowed an invalid pension of
-5.54	Dollars, for the year 1906.
Sworn to and subscribed before me, this t	d & Wigley
_day of1907.	S. J. Frig
J' Foliseston Ordinary	Postoffice de ministration file
Nors—State fully the nature of the wound or characteristicals dy the extent of the disability resulting from the wound	er of disease which causes the disability, and expluin and or disease.
State of Georgia,	
Wintlaga County.	
2 Parti	restort Ordinary of said County,
do certify that I am well acquainted with	a Qmialy
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	
to be, and that he resides in this County.	ist
Given under my official signatur	
day of Jelse	
AMX	To foliation
here	nary 1. Colla 1100 grounty.
Note.—Fill all blanks and of Com Note.—All vouchers and affidavits	pany and Regiment. must bear date after January 1st, 1907.

THE STATE OF Makaua

County of Dekalt

1. A. A. Migley do solomnly swear that I am personally acquainted with a.g. Migley do solomnly swear that I am personally acquainted with a.g. Migley do solomnly swear that I am personally acquainted with a.g. Migley did serve as set forth in the application, and that he said do not desert the service, but was honorably discharged therefrom.

Sworn to and subscribed before me this the 19th day of May 180, and I certify that the affiant is personally known to me, and he is a person of veracity and truth.

Qualquay Washate

by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this day of _______1907. Ordinary Collattong County. Affix your seal Nors.--Fill all blanks and of Company and Regiment. Nors.--All vouchers and affidavits must bear date after January 1st, 1907.

the applicant in the foregoing affidavit, and am well satisfied that the statements made

BAD COPYSSOORSOLIGHT PRINT

Widow's Pension
UNDER ACT 1919

County Chartonga

Name Mos Maney Mighy.
Widow of a Dolary Lucy.

V.

J. W. LINDSEY,
Commissioner of Pensions

1417-1916

for Applicant. STATE OF GEORGIA. Chafford County. Personally before me comes. Men Larrey Mily of said State and County, and after being duly sworn, on oath says that she desiges to apply or a pension allowed under the Act of______1910, and submit testimony to make out the same, true answers makes to the fol-1. What is your name, and where do you reside / 2111/2 / Mattay Summarille tog 2. How long and since when have you been a doutinum resident of the State of Georgia?

3. When, where and it who is were you married? A. A. Wighting Bartland 4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service) Helles.

The Many of Georgia Militia? (State the arms and class of Service) Helles. 5. When and where did the Commands of your husband surrender or discharge from the army? 1.1.1965 6. Was your husband personally present at the time of the surrender or discharge of this Command? How it Prison 7. If he was not present state clearly where he was? Let Mercane 8. Where was his command when he left?_____ a. For what cause did he leave his Command? b. By whose authority did he leave his Command? c. For how long was he granted leave of absence? e. What was his physical condition when he left his Command? f. What effort did he make to return to his Command? g. In what way was he prevented from going back to Command? h. Was he captured by the enemy at any time? ______ b. Was ne captured by the enemy at any time.

If so, when, and where captured and where held as a prisoner, and when and for what cause.

Additional Management of the captured and the captured of the captur j. When and where did your husband die? Totallorgale lan Oat 29th 1918 k. Were you residing together when he died? I. If not, how long had you resided apart?_____ 9 What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908 7 (State same by items,)..... 10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.)_____ -----11. What property of any description of any value have you now? Give list and cash value

Sworn to and subscribed before me this the

Application for Pension by a Widow Under Act of 1910 .-- Questions

13. Have you heretofore been paid a pension by the State?

If so, when and for what cause were you struck from the Roll?

How to the Roll?

Questions for the Witnesses as to Service of Husband and Marriage. STATE OF SECULA.
destable County.
2 2 10
Personally before the comes
1 What is some more and where do you resole? A. A. Wigley Hort Pape 960
" How long and once when have you known Romay Deepley applicant? 60 100
May lone and mo when has she continuously resided in this State? (dive date.)
whe has Resided in Georgie Since & Brown
attlement to allow was she married 2/866, A society on do you know the society her husband All his life the society has a fact of age
hosband All his like the to how 71 7 and of any
the his fail of Apple and the Viattooka Police in the fall of 1911-
Were the applicant and her husband living together as husband and wife at the date of his
Hearth
s. If not how long 1st they live apart before his death?
Were they have all the second
When where and in what Company and Regiment did. A. L. Herley enlist?
Darly fast Novas in Poullin Courty the
in to. It ha Ha. Reg-
to Were you a nember of the same Company
11 How long arthus your personal knowledge did he perform actual military service with his
s represent Regularies from the Hillers
a be and the love and his Command surrouter, and was discharged? Africa 1861-
18. Were you personally present when it was sutrendered?
and how campy on there' ho a laft,
und at martination thing
:- Was the husband of applicant personally present at surrender' (20 :- If not
where where and for what
s por let be leave their mands the date of affiliation By whose
archeres, del he leave his Command? and how
long was the granted leave?
2 ada fred with 9 1. Hot ply 102
Influent /
15. For what cause, if you know of your own knowledge, was he prevented from returning to
In Command Moser Helical from free
16. What effort did he make to return to his. Command and how do you know this? Of your
own knowledge of how?
Envoir to and subscribed before me this the
day of
Jan 1 A Stage free grade of moderate
of County.

AFFIDAVIT OF TWO FREEHOLDERS.

AFFIDAVIT OF TWO	FREEHOL	DERS.	880
STATE OF GEORGIA,			
Chattern County.			
Personally before me comes FML deside	erta have	who on oath says	that they
are freeholders of said County and that they know of said County and know what property she owned or	Ma Marcy	ex Minter	
	n 1th Nov. 1908, Car	fil its captival te to be	as set out
by Schedule (A) as follows:	02		
Personal property	10	3	
Notes and accounts due	5	*	
' Total	, ,	*	
Schedule We know the property sold or given away sine		s cash value to be as	follows
Personal property	10	ģ.	
	11	5	
Schedul			
We also know what property she has now in h		and control to wit	
Acres of land worth	10	s .	
Horses and Mules	00	s .	
. Cows and Hogs.	10	\$	
Other Property	10	\$	
Income and Earnings	00	5	
Total Value of all property a	nd effects	500	
Sworn and subscribed before me this the	41111	Sosaluce	
2 organization	Ordinary.	ity.	
ORDINARY'S C	ERTIFICAT	E.	
STATE OF GEORGIA,			
Chattor M. County.			
a organista	-7		w =
Jen 11 men 11		linary of said County	
is the person she represents herself to be and shorts	a bona fide con	the applicant for per tinuing resident citiz	ten of said
County and was on the 1th Nov., 1908.			
That I also know	and all	the witness v	vho swears
to the service of husband, and A. H. H. Soule, freeholders. That all of them are now residents of signing the foregoing affidavits and that they all a	said County and	were duly sworn by	me before
entitled to full faith and credit.	may my	Car.	
That the Tax Returns	THE STUR	eturned for	Tax is for
1908 \$ for 1910 \$		M	
Sworn under my hand and official seal of office	e this 190	di	y of
(SEAL.)	90	Chatter	nary.
(SEAL.)		7	
NOTES 1. Before any questions are answered the Ordinary s "You do coloranly swear that you will true answer you shall give will be the truth. So halp you to you shall give will be the rout. So halp you to 4. All affinities must be made before the Ordinary 5. All affinities must be made before the Ordinary 6. All affinities must be made before the Ordinary 7. Attach certified copies of marriage license if obtai eral reputation.	hall swear applicant: s make to each of the od.?" ces are insufficient. 1870, are entitled. inable. If not, prove	and the witness in the fol questions asked you and marriage, by some person	lowing words the evidence

15. For what cause, if you know of your own knowledge, was he prevented from returning to command.

16. What effort did he make to return to his. Command and how to you know this? Of your 1908 \$ for 1910 \$ 000 C Sworn under my hand and official seal of office this his Command? (SEAL) own knowledge or how? Clanto yas ounty (SEAL.) NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words
"You do celemnly swear that you will true answers make to each of the questions saked you and the existence
you shall give will be the truth. So belie you clother insufficient.

4. All affidavits must be made before the Ordinary.

3. Only widows who married prior to first January 1870, are entitled.

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

my aun
Caunty
28
PENSION,
)
milder
interior
hall Wilder
190
The second secon
W. LINDSEY.

POWER OF ATTORNEY.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.	milde	
to receive and receipf for the pension allowed and re	of Atlan	hereby authoriz
Witness my hand and seal, this		190 //
Executed in presence of	14,	Washington of Value

ACT DEC 16, 190

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA, Personally came Mrs. M. A. Wilder
COUNTY OF Chatterage who says on oath she is the
widow of Michael Hilder to whom, in the County of
Blate of Jacky CM , she was married on the
8 day of April 1852, that she remained his wife up to the 24
day of Danie My . 190 7 , at which time he died, and that she has not since married.
At the time of his death he was a resident of
Georgia, and was on the Landaust pension roll of the State of Georgia, having been allowed
a pension of 840per annum on account of being a soldier in Company.
12 Un Regiment, Volunteers or State
What affliction have you and how does it affect you? I have Kidning
trubble which affects my back
and Lide which rendygunable to do
What have you been doing to earn a support since 1st of January, 1900? how hor
hundle to-do mything
What property or offects had you on lat January, 1800? Hothing but M
- few-Nousehold goods
What have you acquired since, and what income have you now? Mathing Chang
no anconce
What disposition have you made of any property since let January, 1900, and at what price and ir what
purpose? France net distassed of
arrything.
Deponent further says that she is now a resident of Challe of County, and has contin-
uously resided in the State of Georgia since the fy day of Bolinary 1834
She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.
Sworn to and subscribed before me, this day of June 1907
20 To hustan
Ordinary of Bhattersan
County

Nors - All blank spaces must be filled before signing

i

APPIDAVIT FOR THREE WITNESSES.
STATE OF GEORGIA, COUNTY OF CHAMPING AND STATE OF GEORGIA, AND STATE OF GEORGIA, COUNTY OF CHAMPING AND STATE OF GEORGIA, AND STATE OF GEORGIA, COUNTY OF CHAMPING AND STATE OF GEORGIA, AND STATE OF GEORGIA, COUNTY OF CHAMPING AND STATE OF GEORGIA, AND STATE OF GEORGIA, COUNTY OF CHAMPING AND STATE OF GEORGIA AND STATE OF G
known to me to be genutable and truthful person, who says
on oath that from his own personal knowledge Mrs. Many A Milder
who made the foregoing phidaxis is the widow of the County and State of Georgia on the
29 day of January, 1907, and that she has not since married; that she became his
wife on the S day of 18 and so remajed up to the time of his death,
and that she has resided in this State continuously since the life day of the first with what affliction does she suffer?
Nothing but a small
and a house house
What has the in her possession and control now? Only her houseful and
Wilden Hurning how her husbands Plenein
and what Dome of the Children Contained
I have no personal interest in the pension asked for MSClcghoim *
Sworn to and subscribed before me, this // day of fflered 1807 - 1807 - 1807 - Ordinary Ordinary County, Georgia.
PHYSICIANS' APPIDAYIT.
STATE of GEORGIA, Personally came before me COUNTY of Autolga STV LU Bry and and Du right both of shorm are known to me to by reputable physicians, who say on oath that they personally know Mus, Many a Mildle V
mentioned in the foregoing affidayit, that she is permanently affilieted with (state disease and how it prevents her earning a support) . I know the Brone Shitis Ked Chemic
Sectestinal Catavah and from
above mentioned deseases,
Sworn to and subscribed before me, this day of All 116 1904.

CERTIFICATE OF ORDINARY OF THE COUNTY OF APPLICANT'S RESIDENCE.

STATE OF GEORGIA, I. Do Johnston, Ordinary,
COUNTY OF CONAMINATION in and for said County of Challeson
State of Georgia, hereby certify that I am acquainted with Mrs. IMANY A Wilder
the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to
me by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia con-
tinuously since the day of GMM 18/11, and has not lived out
of the State since that date. I also certify that the witnesses, to wir: QS Blightoner
whose testimony she presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith
and credit as such, and that the full text of the affidavit was read to and understood by them before same was
signed. I am fully satisfied that this claim is made in good faith, and I have caused the applicant and the
witnesses to read or hear read the proofs they sign.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the
day of gener 180 g gg/ huston
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

MOTES.

The Pension is only payable to those widows whose hubbands were on Pension Roll at the time of death. The death of such have existed at the time husband was soldier, and the widow must have remained unmarried since the death of such hubband. List of marrigate is essential and must be submitted. The proof by one winess and two physicians will be accepted when it is shown that the same cannot be furnished, but in the same cannot be furnished, covering the above points.

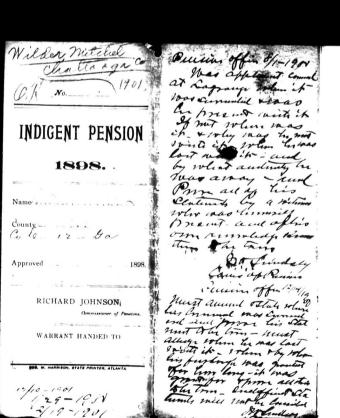
Affidavits must be made in presence of the Ordinary.



MOTES.

The Pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was soldier, and the widow must have remained unmarried since the death of such husband. Date of marriage is essential and must be submitted. Proofs by one witness and two physicians will be socepted when it is shown that the same cannot be furnished, but no all cases the best proof accessible will be required, and it is incumbent on the applicant to make out a clear case covering the above points.

Afficialis must be made in presence of the Ordinary.



POWER ATTORNEY.

POWER OF ATTORNEY. STATE OF GEORGIA. Lette yet COUNTY! 1. 1. 1. Child field in a cit lieuter ga Witness my hand and seal this 1.50 day of Jeery 1000 HCC INDIGENT PENSION

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,	
4101	LINEY
- 14 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Donald of Fire dung
Alletter . TT, of	said State and County, having been presented
as a witness in support of the application of 7/14 Le	lule Willen for pension
under the Act approved December 15th, 1894, and after be	eing duly sworn true answer to make to the
following questions, deposes and answers as follows:	
1. What is your name and where do you reside?	trallerone foxus Hord
- County Tropping	
2. Are you nequalisted with Hatches De how long, have you known bim? I here herene	, the applicant; if so
how long have you known him? I here he	how prints this lever
3. Where does he reside, and how long and since when he	as he been a resident of this State?
4. When, where and in what company and regiment did	y and has line
4. When, where and in what company and regiment did	he eplist, and how do you know? 176
delical in fall of 1862 from Horn	I Coming in Company
wheth with menter of 116 2 from 14 or	iment? I. come.
6. How long did he perform regular military duty, and w	hat do you know of his service as a Confederate
soldier, and the time and circumstances of his dispharge from	in the service? In ferround
inguition muletary duty for our	in two my con Jucale
at the Close of the war	requiter descharged
at the Close of the war	lis 1865- 1
". What property, effects or income has the applicant?"	(Give your means of knowledge.)
Lectant horro Jutting	+ Hodel in suns
With Bine lived	y wife finale
8. What property, effects or income did the applicant pos	sess in 1896 and 1897, and what disposition if
any, did he make of same?	/
	100
9. Has he conveyed away any of his property in the last	three years, if so, what was it and to the
- done human	, , , , , , , , , , , , , , , , , , ,
10. What is the applicant's occupation and physical condition	
I don't Pricero	
C. C. VICE ILLEGIV.	,
	The second secon
11. Is the applicant unable to support himself by labor of	
I don't /zecon	And the second s
(1987 1 1 1 1 1 1 1 1 1	the contract of the second sec
12. How was he supported during the years 1896 and 189	
a doubtleet	
13. What portion of his support for these two years was de	erived from his own labor or income?
1 dout	
14. Give a full and complete statement of the applicant's pl	oysical condition that entitles him to a pen-ion
under the Act of December 15th, 1894?	The Income
No. 100	
5. What interest have you in the recovery of a pension b	y this applicant? Level Dec use
Sworn to and subscribed before me, this	B Tracellon
	Witness
	TALL STREET
the (c day of Delicely 1897.)	
the (c day of Delicely 1897.)	49 ollerson is burn to
and Start Clare Continued as 1807.	of other con is frequent to a so County and the regard of the

AFFIDAVIT OF PHYSICIANS.	Ougations on Applicant
STATE OF GEORGIA,	Questions for Applicant.
COUNTY	County.
Personally came before me Marie and	of said State and County, desiring
	to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after
both known to me as reputable physicians	being duly sworn true answers to make to the following questions, deposes and answers as follows:
of said County, who, being severally sworn, say on oath that they have examined carefully	1. What is your name and where do you reside? (give State, County and post office.)
applicant for pension under the Act of 1894, and after	2. How long and since when have you been a resident of this State
such personal examination say that his precise physical condition is as follows:	Acres 620 = 16.253
and a wellula Commentional	3. When and where were you born ? Secret 3 = 1865 Mountain Ca Sea
the winding to a said of the	3. When and where were you hurn? Secret - 1965 - Married and Men and where and in what copphany and regiment did you cullet or serve?
La de de	Mulinga - / Evan Buttering Co-La
The state of the s	
Lunde dividuel to you have my thing	5. How long did you remain in such company and regiment? - 111111 (Fyric 1865
the such amount superfred and some on it could will book	7
We surther say on eath that the physical condition of applicant renders from unable to labor at any	6. For how long a period did you discharge regular military duty? #1,211 1219 113 To Moil
work or fealling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.	7. When, where and under what circumstances were you discharged from service
	2 - willed at 28 inner 121 all all
Sworn to and subscribed before me this the	ext correct white water the the
3 day of gan 1900 RAJ 1110 711/	8. What is your present occupation? # LC/L/C.221 9. How much can you carn (gross) per annum by your own exertions or labor? # 1/2222
Ordinary,	10. What has been your occupation since 1865?
The state of the s	11. Upon which of the following grounds do you base your application for pension, viz : first, "age and
ORDINARY'S CERTIFICATE.	poverty," second, "infirmity and poverty," or third, "blindness and poverty "?
-STATE OF GEORGIA,	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 whyther you are totally blind and when and where you lost your sight?
✓ COUNTY.	LATENT Tell it the core still
Ordinary in and for said County, hereby certify	
that the applicant resides in said County, and has	0
the state of the s	13. What property, effects or income do you possess, and its gross value? Howe how
and that the witnesses, viz. gr	14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897, and what disposition,
and that the withermore, the first the second of the secon	Differential and the second of
are of trustworthy character, and that their statements are entitled to full faith and credit.	42.1854. Alst sichest \$15 - to te williamed see or
I further certify that before answering the foregoing questions the applicant and each witness took	which St. I feet 355 12 to the state of the
the eath berein prescribed, and that the full text of the affidavits was read to the applicant and witness	16. In what County did you reside during those years, and what property did you then return for taxation?
before same was signed.	a cotty worth flow at sied fill and determine porce
I further certify that the tax digests of L G. C. County show that applicant	16. How were yot supported during the years 1896 and 1897? July notes farmage
returned for taxation in his name in 1896 / 11/4 Dollars	17. How much did your support cost for each of those years, and what portion did you contribute thereto
of property, and in 1897 2 Dollars of property.	by your own labor or income ? 100 700 700 700 700 700 700 700 700 700
	18. What was your employment during 1896 and 1897? What pay did you receive in each year?
2 · 1 · · · · · · · · · · · · · · · · ·	The state of the s
Witness my land and seal of office, this day of feet way 1900 /5.	19. Have you a family? If so, who composes such family? Give their means of support? Have they
Ordinary Ordinary	a homestead? with - first - Country to be
of Lacetta's Let County.	to the diet sithet the ein was towards
NOTE,	the state of the state of the state of the state of
Hetero 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 find."	20. Are you receiving any pension? If so, what amount, and for what disability?
2 Additional affidavite may be attached if blank appears to me in a	Sworn to and subscribed before me this the
It is every caseaghe Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.	day of Applicant Applicant

a describite for 7 tppiloditi.
STATE OF GEORGIA,
County.
of said State and County, desiring
to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after
being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? (give State, County and post office.) 2. How long and since when have you been a resident of this State.
Live Ges -1525
3. When and where were you born ? Jackery 5 - 1325 - Manso . a Sa
4. When and where and in what obpipany and regiment did you cullet or serve?
Mail is he - / Lieu Butterin Co-la
5. How long did you remain in such company and regiment? - Millie C. Egint 1865
The second secon
6. For how long a period did you discharge regular military duty? \$1,211 124 00 Te Mark 1865
7. When, where and under what circumstances were you discharged from service
it is a say and the said 1865
but withe att Lade Unit of Main in Little
8. What is your present occupation? - Heart 1.211,
9. How much can you carn (gross) per annum by your own exertions or labor? Arthurage
10. What has been your occupation since 1865?
age and
poverty," second, "infirmity and poverty," or third, "blindness and poverty"?
12. If upon the first ground, state how long you have been in such condition that you could not earn

We the State thousander 6th 1099, Noos & flaw Ording

196 and 1897, and what disposition,

I have Jan 1882 \$ 1/37

I have the test of the formation?

I disposite the formation?

A sent before many be taken.

MITTER JANS a glass.

Ω

l Wilder Applicant. 17 frailstille or ilicuttion.

QUESTIONS FÖR WITNESS.

STATE OF GEOR	RGIA,
Meny	COUNTY.
Eli Walst	of said State and Sounty, having been presented
s a witness in support of the app	111.4 1.01.71.11
	ter being duly sworn true answers to make to the following questions
eposes and answers as follows:	1.
1. What is your name and w	berodo you reside? Eli Halston Bauthir
* tood county	The orgent
3. Are you acquainted with	the applicant; if go
w long have you known him?	
here does he reside, and he	ow long and since when has he been a resident of this State?
When where and in what or	meny and regiment did be eatilet, and how do you know? It's her
when, where and in what of	in Company and regiment did he earlist, and how do you know? It seems in Company 6 12 Georgian Batallion for
	ame company and regiment?
	gular military duty, and what do you know of his service as a Confederate
dier, and the time and circumsta	ances of his discharge from the service? He herformed
regular julitary	duly for about entern months he wa
lution Acoli ago	I comied to pospetal in The and of
	un efter that Measter a good coldies
. What property, effects or inco	ome has the applicant? (Give your means of knowledge.)
dout les	ow
What property, effects or inco-	ome did the applicant possess in 1896, 1897, 1898 and 1899, and what
position, if any, did he make of	same?
Has he conveyed away any of Log	same? Local last four years, if so, what was it, and to whom?
Has be conveyed away any of	same? Lote! Lote! Libis property in the last four years, if so, what was it, and to whom?
Position, if any, did he make of Has he conveyed away any of $\mathcal{L}_{\sigma_{I}}$. What is the applicant's occur $\mathcal{L}_{\sigma_{I}}$.	same? Lote! Libis property in the last four years, if so, what was it, and to whom? HELDELL PRINTER OF THE STATE OF THE
wosition, if any, did he make of Haa he conveyed away any of $\mathcal{L}_{\sigma_{I}}$. What is the applicant's occur $\mathcal{L}_{\sigma_{I}}$	same? Lote! Libis property in the last four years, if so, what was it, and to whom? MECHAL Pation and physical condition?
wosition, if any, did he make of Haa he conveyed away any of $\mathcal{L}_{\sigma_{I}}$. What is the applicant's occur $\mathcal{L}_{\sigma_{I}}$	same?
Has be conveyed away any of the third that is the applicant's occur for the spill that is the applicant's occur for the supplicant unable to supplicant unable to supplicant.	same? Libis property in the last four years, if so, what was it, and to whom? MERCHAN Patton and physical condition? MERCHAN Propert himself by labor of any sort, if so, why?
Has be conveyed away any of Log. (What is the applicant's occup Is the applicant unally to sup Log. How was he supported during	same? Libia property in the last four years, if so, what was it, and to whom? It can be seen to see the seen to see the seen to see the seen to see the see
Has be conveyed away any of Learn What is the applicant unable to sup Learn How was he supported during	same?
What is the applicant unable to sup	same? Libia property in the last four years, if so, what was it, and to whom? It can be seen to see the seen to see the seen to see the seen to see the see
Has be conveyed away any of Lar. What is the applicant's occur Lar. What is the applicant's occur Lar. How was he supported during What portion of his support, for	same? Like property in the last four years, if so, what was it, and to whom? Acception and physical condition? Acception the years 1888 and 1898? Acception or these two years was derived from his own labor or income?
What is the applicant's occur Is the applicant unable to sup How was he supported during What portion of his support, for	same? Like property in the last four years, if so, what was it, and to whom? Acceptable partin and physical condition? Acceptable the years 1888 and 1898? Acceptable or these two years was derived from his own labor or income? Acceptable or these two years was derived from his own labor or income?
Has be conveyed away any of Lar. What is the applicant's occur Lar. Is the applicant unable to sup How was be supported during What portion of his support, for	same? Like property in the last four years, if so, what was it, and to whom? Acceptable partin and physical condition? Acceptable the years 1888 and 1898? Acceptable or these two years was derived from his own labor or income? Acceptable or these two years was derived from his own labor or income?
Has be conveyed away any of Legs. What is the applicant's occur Is the applicant unable to sup How was he supported during What portion of his support, for	same? Like property in the last four years, if so, what was it, and to whom? Acceptable partin and physical condition? Acceptable the years 1888 and 1898? Acceptable or these two years was derived from his own labor or income? Acceptable or these two years was derived from his own labor or income?
Has be conveyed away any of Learn to complete the applicant unable to sup the applicant unable to support for the applicant unable to supp	the years 1898 and 1898? Control or these two years was derived from his own labor or income? Control or these two years was derived from his own labor or income? Control or these two years was derived from his own labor or income? Control of the applicant's physical condition that entitles him to a pension
Has he conveyed away any of Legs. What is the applicant's occup Is the applicant unally to sup Logs. How was he supported during What portion of his support for Give a full and complete staten r Section 1254, Code?	the years 1898 and 1898? Control or these two years was derived from his own labor or income? Control or these two years was derived from his own labor or income? Control or these two years was derived from his own labor or income? Control of the applicant's physical condition that entitles him to a pension
What is the applicant unable to sup form. How was he supported during What portion of his support for Section 1264, Code? What interest have you in the Sworn to aid subscribed before	the years 1898 and 1898? Control or these two years was derived from his own labor or income? Control or these two years was derived from his own labor or income? Control or these two years was derived from his own labor or income? Control of the applicant's physical condition that entitles him to a pension

QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
COUNTY. of said State and County, having been presented so witness in support of the application of Figure 11 11 11 11 11 11 11 11 11 11 11 11 11
of said State and County, having been presented
s a witness in support of the application of \(\sqrt{2} \), \(\lambda \) \(\lambda
leposes and answers as follows:
1. What is your name and where do you reside " CCT , 1 . CCC C . 7
2. Are you acquainted with. It of talks Iridal the applicant; it so
ow long have you known him" Since 1871
3. Where does he reside, and how long and since when has he been a resident of this State
Chatter a since 1577 - to say in fountality
1. When, where and in what company and regiment did be enlist, and how do you know?
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty, and what do you know of his service as a Confederate
dder, and the time and circumstances of his discharge from the service?
7. What property, effects or income has the applicant? (Give your means of knowledge.)
cook de south of from this sains
sitmal described from Light tein
 What property, effects or income did the applicant possess in 1896, 1397, 1898 and 1899, and what
eposition, it any, did be make of same Provide Stay to the 15 18 18 18 18 18 18 18 18 18 18 18 18 18
1. Has be exactlyed away any of his property in the last four years, if so, what was it, and to whom?
jus on stated in stens & of the application
), What is the applicant's occupation and physical condition?
to count to anything.
. Is the applicant unable to support bimself by labor of any sort, if so, why? Lit & 1222
felt truppet tribult by ween of con fort
How was to supported during the years 1898 and 1899 Ja 2 1856 the arasarch
one in 185-1184 Proposition the last to dans
What pertion of his support for these two years was derived from his own labor or income?
451.4. hlll in 1888 1 June In 1888
Given tall and complete statement of the applicants physical condition that entitles him to a pension plan Section 12:4, Gold's ciffelist the distill best to the conditions.
on in the state of the state of the state of the state of
a class til applicant, all Dies o depending
. What interest have you in the recovery of a pension by this applicant? 222 Z
Sworm to and subscribed before me, this 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1 1 /day of \delta C/ 1900.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
county. of said State and County, having been presented as a witness in support of the application of Said-Med 117661 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? ECT & 1. illetist
2. Are you acquainted with. Mitstalled Fredder, the applicant; if so low long have you known him? First 1877-
d. Where does he reside, and how long and since when has he been a resident of this State of Court of the State of the Sta
When, where and in what company and regiment did be culist, And how do you know?
 Were you a member of the same company and regiment? 'How long did he perform regular military duty, and what do you know of his service as a Confederate
solder, and the time and circumstances of his discharge from the service?
7. What properly, effects or income has the applicant? Give your means of knowledge.)
his truck buy delety first Latter them what what what what what when the applicant possess in 1896, 1897, 1898 and 1899, and what
disposition, if any, did he make of same? 1: 1/3248 44 41 15: 1/3 24 2/188 181-
Has been revered away any orbits property in the last four years, if so, what was it, and to whom?
What is the applicant's occupation and physical condition. Done see work work to competition the control to come the control to control
11. Is the applicant anable to support himself by labor of any sort, if so, why: # 27 .2221
12 How was he supported during the years 1898 and 1899 Jaz 185 & the arcentage
From the 1885 - 18 24 12 42.10 tree by Taid days The Branch 13. What pertien of his support for these two years was derived from his own labor or income?
14. Give a tall and complete statement of the applicant's physical condition that entitles him to a pension
under Section 1254, Code? interior the harles thanks
suidens til applicant, delibles s vies andans
15. What interest have you in the recovery of a pension by this applicant? Sworn to and subscribed before me, this
the 13/4 day of Jacob 1900.
Ordinary.

QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
Strong COUNTY.
as a witness in support of the application of
under Section 1254, Code, and after being duly sworn true answers to make to the following questions,
dangers and appropriate follows
1. What is your name and where to you reside? Elisable . Transfiles
2. Are you acquainted with. Allehell helden the applicant I 1 90
how long have you known him? I don't here here force before
3. Where does he reside, and how long and since when has he been a resident of this state? It was the me hallowgas long, said the has line
4. When, where and in what company and regiment did he entity and how do you know? It therefore the contract of the contract o
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty, and what do you know of his service as a Confidence
soldier, and the time and circumstances of his discharge from the send of the
- regular weldery duly for about a steen to the he was
Comes to pospetal in 110 and
were hard and Corned to hospital in the and
7. What property, effects or income has the applicant? (Give your means of knowledge)
A cred Lord
<u> </u>
8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what
disposition, if any, did be make of same?
3. Has be conveyed away any of his property in the last four years, if so, what was it, and to whom?
10. What is the applicant's occupation and physical condition?
Lord herow
11. Is the applicant unable to support himself by labor of any sort, if so, why?
lour Busen
12. How was he supported during the years 1898 and 1899?
loud duren
13. What portion of his support for these two years was derived from his own labor or income?
14. Give a full and complete extra the control of t
and complete statement of the applicant's physical condition that entitles him to a pension
under Section 1254, Code !
AND SALES AND SA
15. What interest have now in the
have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this
the day of 1909.
Ordinary.
and wrote certify that the Land ble halden is known to
he withthe to full fourthered bredit ron would of which the to full from the

· e, .

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA. 14 . 1776 County. STATE OF GEORGIA, 1. Will hair harder hereby authorize Straight 1. 12 Mind will at the bereby authorize of Attante Son to receive and receipt for the pension allowed and request that he remit same to to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this day of day of by Circle Witness my hand and seal, this 5.2 day of Large 1994. -11. Wilder [L.S.] Executed in presence of Executed in presence of Am vicitar SOLDIER'S PENSION SOLDIER'S PENSION 1904. INDIGENT JOHN W. LINDSEY INDIGENT 1903

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STA	ATE OF GEORGIA,
Ll.	County.
Po	ersonally appears he tille trateler of Matterger
County	y, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and res	sident of said County and State, and has resided in said State continuously ever
since t	he day of 1824; that he is years old and
by occu	, that he enlisted in the military service of the Con-
federate	e States (or of the State of) during the war between the
States,	and served for the term of / h were in Company (f of / th Regiment
of.	that his physical condition is as
follows	in theile with - wing Triver
٠, ٠,	The cital
that his	s property consists of the following items: 121. Desperty
	value of Dollars, that by reason of his physical
	en and poverty he is unable to support himself by his own exertion or labor, and
	receives no pension but the one herein applied for.
1894 at	ponent desires to participate in the benefits of the Act, approved December 15th, id the Acts amendatory thereof, and makes application for the pension to which he
is entit	led for the year 1903. I have heretofore as a resident of
	been allowed a pension for the year 1
1	orn to and subscribed before me, this the day of 1903.
- 11	Ordinary.
	TE OF GEORGIA,
	County
do certif	ordinary of said County,
the appl	icant in the foregoing affidavit, and am well satisfied that the statements made by
him in 1	sis said affidavit are true, and I know he is the individual he represents himself to
be and t	hat he resides in this County.
	Given under my official signature and seal, this
~	
A Win)	day of 1908.
()	Ordinary County.
	Nors The blank spaces must be filled.
	Nors — Affidavit should not be attested before January iss, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Personally appears Titalibuc Pricely of Chuttering
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of Joseph 1844; that he is 80 years old and
by occupation a flum of that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of the firm in Company G, of the Regiment of the Ballation ; that his physical condition is as follows: Helly estimated that he are the care
of that his physical condition is as
follows: fill, estim, batant ital ofe out
Girabined Chamber and amake to
Zarra Infan for intelle
that his property consists of the following items: / sir per perty
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of
County been allowed a pension for the year 152's Milchel. Wiell 1
Sworn to and subscribed before me, this the
ay of American 1904.
Ordinary.
STATE OF GEORGIA, County.
1, XIII 4, willet Ordinary of said County,
do courtly that I am well acquainted with first died girller
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of Sectional 1904.
(ami)
Ordinary & Section County.
Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,
- AM AMIC COUNTY.
to receive and receipt for the pension allowed, and request that he remit same to
to receive and receipt for the pension allowed, and request that he remit same to
by 1.16/72
WITNESS my hand and seal, this day of Juni C 1905.
Executed in the presence of

Wilder nitchell

(FOR THOSE ALREADY ENROLLED.)

No. 6. 956

SOLDIER'S PENSION

INDIGENT

1905.

Regiment /

WARRANT ISSUED

WARRANT HANDED TO

JOHN W. LINDSEY.

POWER OF ATTORNEY.

No. of the contract of the Contract of Con
STATE OF GEORGIA,
Chattenga County.
I, leli Chail Mildir, hereby authorize
Mesley Abrofishing of Attanta Cia
to receive and receipt for the pension allowed, and request that he remit same to
me at dermouville for
by Chick
WITNESS my hand and seal, this day of Del (1907.
Executed in presence of
Se John Water Ordi, 12014
· · · · · · · · · · · · · · · · · · ·
4

Wilder, Michael Chattory Co.

no duta

Oon Berten 154.
(FOR THOSE ALREADY EMBOLLED)

SOLDIER'S PENSION

Name Michiel Milder.
County D. Matter 341.
Co. M. Regiment L. 41.

1907.

JOHN W. LINDSEY,
Commissioner of Pension
WARRANT HANDED TO

A deta

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Personally appears, William Wilder of Maltanga
Personally appears, withis wilder of whattanger
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of J'AIC 1824; that he is years old and
since the day of JHI 1824; that he is years old and by occupation a JHIII , that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of / 1741 bin Company . 4 , of /2 th Regiment
of selection of the historical selection is as follows: I want to the historical selection of the historical selection of the
No.
that his property consists of the following items: > (.*
of the value of by my labor, Dollars. I am now earning, by my labor, Dollars per month. That by reason of his ophysical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one ferein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1891, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1995. I have heretofore as a resident of the Act approved December 15th, Sworn to and subscribed before me, this the day of if of the pension for the year 1994. Sworn to and subscribed before me, this the day of if of the pension for the year 1994. STATE OF GEORGIA,
STATE OF GEORGIA,
Definition of said County.
1, Ordinary of said County,
do certify that I am well acquainted with ML 11114UL
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.
to be, and that he resides in this County. Given under my official signature and seal, this
day of 14 14 14 1905.
The frantisce
Ordinary. al. thank out County.

Nork.—The blank spaces must be filled.

Nork.—Affidavit should not be attested before January 1st, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS
State of Georgia,
Co ha Horgacounty.
Personally appears Michael Milder of Christon
County, State of Georgia, who, being duly sworn, says en oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1824; that he is 84 years old
and by occupation a Harrey, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the States, and served for the term of 2 Heave in Company (6, of /2 the comment
States, and served for the term of A Grand in Company (0, of)2 th Regiment
of CIA ; that his physical condition is as follows:
tollows: In optionerusis a Lung trubble
the material and the state of t
that his property consists of the following items:
allow water a solidary to the terminal transfer
of the value of Dollars. I am now earning
by my labor, 220 Mary 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 secree, and makes application for the pension to which he
is entitled for the year 1907. I have heretofore, as a resident of Barroll
County, been allowed a pension for the year 1900.
Sworn to and subscribed before me, this the
day of
A Joseph Cordinary.
84-4
State of Georgia,
Khattooga County
A hattroga County.
do certify that I am well acquainted with Mile Hall Shilder
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal this
day of x 1 1 1 101/1/1/1/1907.
Dep Str. 21stanz
Adia 7007 Ordinary Olivities County

that I personally know Mars Market I was the lawful widow of the lawful widow of the lawful Pension Roll of said County, and was paid a Pension from Market day of Jennicola and at the time of his death on the day of Jennicola and at the time due to him and unpaid his Pension Roll of Squares and at the time due to him and unpaid his Pension Roll of Squares and at the time due to him and unpaid his Pension Roll of Squares Roll of Roll of Squares Roll of Roll o of his death on the due to him and unpaid his Pension of Harring and I know Harring and I know witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this find day of Marsh. 19 day of MULLA 1907 Colenttoon County. Application for Pension Approved and Paid Due Deceased Commissioner of Pen Soldier 16/10TTOOGA County. GEORGIA, Thereby authorize and constitute

Metality Alle fallity of said county, my lawful attorney to collect and receipt for me in my, name the Penison due me for 100 ft., through my deceased husband

Alle Alle Alle Manufacture, who was on Attaching text. Penison Attested before me Air A brilder o Johnston ordinary

APPLICATION FOR PENSIONS DUE DECEASED SOLDIER
UNDER ACT APPROVED OCTOBER 9, 1891.
STATE OF GEORGIA. Canattooga County.
Personally before me comes Mrs Mary a Willey, of said county,
after being duly sworn, on oath says that she is the widow of Michael Wilder
who was duly enrolled as a Sowalid Pensioner from the county
of Chattongol and was paid a Pension of Sixty
Dollars from Carroll county for 1904, and that the said
Machael Wilder died in Chattorga county on
the 29th day of January 190 J, and at the time of his death a
Pension of 160 county was due him from Chatterna county
and unpaid for 1997. Applicant further swears that she married the said
Michael Wildwon the 8th day of Afaril
1802, in Troof county and State of Lacorgia and
resided with him from 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 of day of March 1907
good hunter ORDINARY, Auch Wildow IL S.
Connector County. A st Milder [I. S.]
AFFIDAVIT OF WITNESS.
GEORGIA, Charlotta County.
Personally before me comes & F Wilder , who
on oath says that he knew Machael Wilder while in life
and that he knows Mrs. M.A. Wildur
the above applicant; that he knows that the said Hickard Wilder
and Mwy Dohnson were in due form of law married in the county
of Troops in the State of Island on
the day of 18 , and that they resided
together as husband and wife from date of marriage to the day of his death on the
day of January 190 /, and I now know that she is his dependent/widow.
Sworn to and subscribed before me this day of March 1907
Jogs Anston ONDINARY, 1 7 1000
Tohn Mosay County of J. (, Millen

Note lat.—This form can be used by guardian of minor children where there is no widow.

2nd.—Ordinary must send in all cases certified copy of marriage license attached.

18 ___, and that they resided together as husband and wife from date of marriage to the day of his death on the 29th day of January 190 /, and I now know that she is his dependent widow. Sworn to and subscribed before me this day of March 1907 Johnston Ordinary, & J. (Villen Note 1st.—This form can be used by guardian of minor children where there is no widow 2nd.—Ordinary must send in all cases certified copy of marriage license attached. Hote of Georgen whallwage County Mile in dute we Cyulas By in me The Sods onler a notary Julle and in offers Marine Glace Coffee To sind prestice of the Dine in and for said County of roundly Jane Miller and Rout fin appened Metabel Wilder and are onthe Jays. Charles and more to minute fine his Command was Counted it thundelold or Comp Brief or Wind hora, & locard, below Savannah you and left There to go to Vagina I was is to me the sand it. A list. sick and they left me at Columba south Cordina in o lyting winder de San Inc The hospital. I round Their les works I have get any The today & Thousand furturely but got a descharge from The frepital to go home I relapped ofter I got have and home got all and the contract of the contract Topo back to my tommand, Mitchel, Wilder in the second Swarm to and Subscribed before me to and white the color con The 11th day of November 1901. I'M Smith noryo also appeared Mis Margh White. who we oaks Juys to alone ocht X,. musuurs an Carret and true 61.16 maz. Hary et Tuilder Viccorn tound duberited before me This 11the day of Counter 1901 (9 A Smith 710-80

it in guetter Corentze I down will a til by for the soulasi The Contract orden - ightiant for purin ingline a grant to fourthers - igade in the withing which incomes provino Michael E the sale of second and for stay the right for the constraint of the inde of mone con singe profer Pour api de the hingely du and to the the fillier - comic no for proving - con (in in the fact many of Wilder Hollet Hader MI Trunk on but the stace the -Sec 12/47 Entre of the other of 一たん いれていない ロールニニ - will white the over in deal for part county The orthon To them to home wearles por tothe to a moder- - the diede Bilan Tanto Commend persons and from them to the truthonty n a inte-The man in and and officing and The Dec 5 1800. wien , Carlot U. Timey

State of Georgia Heart County Personally Come before ne. Bt. Tallerson, & 6H Lesly (Kleow to the attesting officer as Reputable alizena) who on oach has that they were numbers of the 12th Leogia Batallion with. Nutches Wilder, That said Command was surended at appromatter Court how, Raid Hilder was With the Command at the time it furrendment for the reason that he was at home lies, out a furlow, and the said furlow had not ex fined when his Command purrendered. The hour no interest in the recogning of a Swow to and subscribed before me Collis Isley Seffruter 22, 1400. Robert Promi Ordinory Georg in Hart County (I Robb Glower Ordinary in and for Paid Coming de Cereby certify that BF Pollerson and lett Leely are treesend to me to be Truckworthy Citypus of said County that their statements are eliteled to feel fait and tudent and are worthy of bilit and the Of. fedor't was read to and understood by ilam befor they signed the saule Hitrus Try hours and officed feel this Sept 22, 1900 Robe Strain

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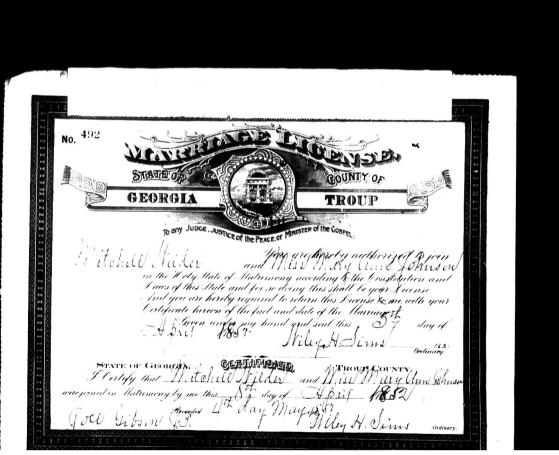
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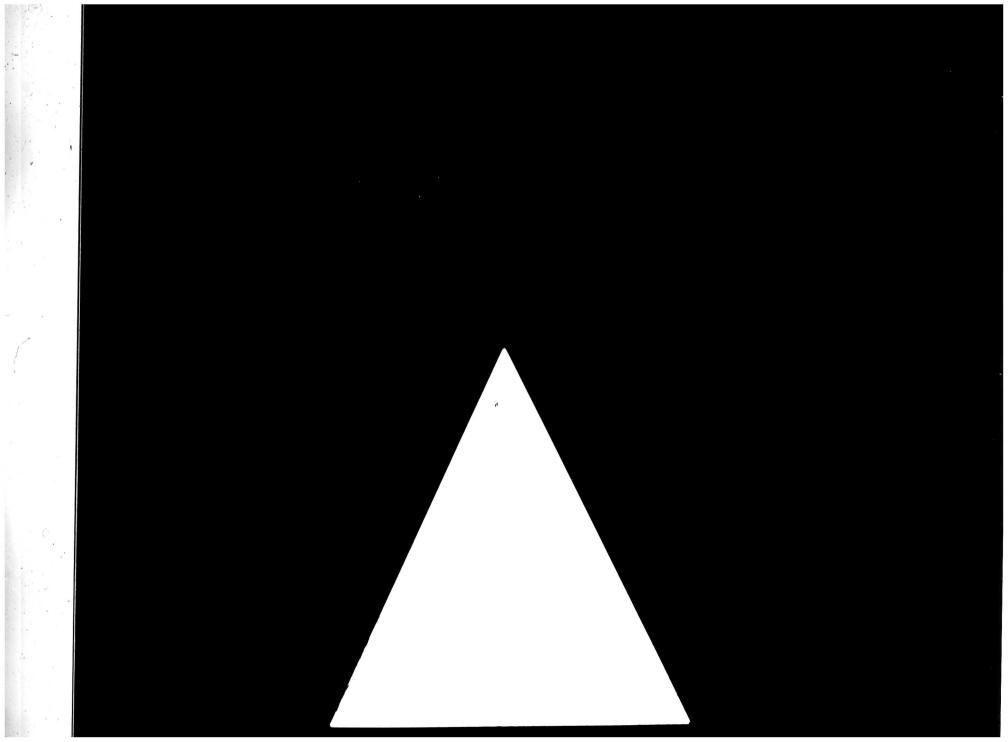
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State of Georgia, County. ORDINARY'S OFFICE-SS. My arrived said Compared to hereby certify that I have compared the foregoing serve of arrived as I because of the hell Nider and Miss Mary and Johnson (except a littly difference in the working of then and nm), with the original record thereof now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record. In Testimony Whereof, I have hereinto set my hand and affixed the seal of the ourt of Ordinary, this the

Ordingary and ex officio C O





Cleation of President Warrant Hardeled to

is lata

POWER OF ATTORNEY.

POWER OF ATTORNEY.	
STATE OF GEORGIA,	
County.	
County. County. 1, 17 11 11 11 County. Arrived and receive and receive for the receive for the receive for the receive and receive for the receive for t	igra
receive and receipt for the pension allowed and request that he re	emit same to
1712 n. Children C	roun
by and the	
Witness my hand and seal, this day of day of	1002.
Witness my hand and seal, this day of History	[L. S.]
Executed in presence of	
LECTION .	

Hereiment H

WARRANT HARDED TO

in Cale

JOHN W. LINDSEY,

SOLDIER'S PENSION

1902.

Name 17.11 . 12.11.11

INDIGENT

Willan William 20.

(FOR THOSE ALREADY ENROLLED,

No. 3331

DOD INDITATION HEDDEMORODE TITOMED DENGLONG

	FOR APPLICANTS HERETURORE ALLOWED PENSIONS.
	STATE OF GEORGIA.
	Chattoria County.
	1 1-1
	County, State of Geoogia, 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 12 day of Clark 1816; that he is 716 years old and
	by occupation a hr/bing that he enlisted in the military service of the Confederate States (or of the State of
60	States, and served for the terms of washing Company A Golf W. th Regiment
Ú.	of Storgin of a roops; that his physical condition is as
	follows: We is are Crippere in Sonto Observing
	transferest believe Change land
	down, a Plysical rach such binhow
	that his property consists of the following items to people by. Supple Blue + 18 welling
	of copy would fill the said
	of the value of Pan Dollars, that by reason of his physical
	of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and
	that he receives no pension but the ane herein applied for.
	Deponent desires to participate in the benefits of the Act, approved December 15th,
	1894, and the Acts amendatory thereof, and makes application for the pension to which he
	is entitled for the year 1902. I have heretofore as a resident of
	county been allowed a pension for the year 1901 (time in diathroga to be)
	Sworn to and subscribed before me, this the
	2 = day of gay 1902.
	Ordinary
	STATE OF GEORGIA.
	Chattery County
	and the second s
	do certify that I am well acquainted with IN12 5% Chick
	the applicant in the learning of L.
	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.
	2.4
	Given under my official signature and seal, this
	day of Joseph _ 1902.
	(II) Collection (Cilled
	· Ordinary
	Norm: The blank spaces must be illied. Norm: Affidavit should not be attested before January 1st, 1902.

num 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.

WIDOW'S
Indigent Pension.

1901.

Name Attitudes Indiana
County Eductions
Widow of Harrison Deignford
Widow of Harrison Deignford
Williams
Approved

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

4/2/19018

POWER OF ATTORNEY.

Witness or a property.

When the All County best of the Latest of the La

Shine s

₹ 1

POWER OF ATTORNEY.

of.	Witness m	y hand this	5/15 ence of	n Hau Iny of H	1	anda	190/		7
· (4	7/1/20 9	11.01.4	Cordina		CAMIL	anda i	I We	(C ⊙eAti ∫L.	8.
(~~)		- Management	county.]					
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	/ `	ion.			1901	Pendina		1901.	4
botten -	/	nsion.	•	iline	1961 - 1901	IRY,	2	1901.	Charles, Ca.
		Pension.)1.	ME Williams	38 Mylest.	INDSEY, Committees of Provine.	ANDED TO	1901.	Prince: Jahren, Gr.
The state of the s	VIDOWS	it Pension.	901.	a Strilling	the 36 feet	JOHN W. LINDSEY,	WARRANT HANDED TO	1901.	is, State Printer, Jahren, Co.

Questions for Applicant.

Questions for Applicant.
STATE OF GEORGIA,
County County
County.)
Sincurde & Milliams of said State and County, desiring to
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly
avail herself of the Persion allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside ! (Give State, County and Poet Office)
Invende & Miliams. Viside at 12 in flators to
2. How long and since when have you been a resident of this State? A True See 518/18/12
3. When and where were you born? Ice 5th 1842- fit lotter picked Co.
brosin
And the grand where was your husband, born-state his full name, and when way you and he married?
Milliamo min martial July 5 1/16/1
5. When and where, and in what Company and Regiment did your husband enlist or serve during the
war between the States? In Miller Cla / State - New Man a brue A - State box Mr. A
The search during a Bourge the serin-
6. How long did your husband serve in said Company and Regiment? Officer force
hears
When and where did your husband's Company and Regiment surrender and was discharged?
upon 1865 trues born A. C.
8. Was your husband present at the time and place when his Company and Regiment surrendered?
The was present at persunder
9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
mand, for what cause, and by what authority? . Lows present
10 What had a state of the stat
10. When and where til your husband die? Any not a but of alice of
11. Which of the following grounds do you base your application for Pension, viz: First-Age and
Poverty; Second-Infirmity and Poverty, or Third-Blindness and Poverty!
12. If upon the first ground state how long you have been in such a condition that you cannot earn
our support. If upon the second, give a full and complete history of the infirmity and its extent. If upon
he third, state whether you are totally blind, and when and where you lost your sight. On fleaned
frame my hands one down examine and the
Orm the upwater mot that I can not way for a let his
13. What has been your occupation since your husband's death? Attainst of such yells
14. How much can you earn gross, by your own exertion or labor? The least dellars 15. What property, real or personal, or income do you have or possess, and its gross value?
16. What property, real or personal, did you penses at death of husband or he left you, and of the year
899-1900, and what disposition, if any, by sale or gift, have you made of the same? Howe Guell
mills to beneficial
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Chattorya Co bu - returned an propert
18. How have you been supported since death of husband, and especially for 1899 and 1900?
A Der the best or of you willown
19. How much did your support test for each of those years, and how much did you contribute by your
we labor or income? along the of the or fort - about \$1400
20. What was your employment during 1899 and 1900—how much did you receive for each year?
The tour thing then and box & sor dose al ver \$400
21. Have you a family? If so, who composes such family? Give their means of support. Have they
iny lands or other property Buly anyde If a dorn gold won he six latter lined.
22. Have you ever made an application for pension before?
23. How many applications have you made for a Pension, and under what class? Ligarity
Sworn to and subscribed before me this 8/12
day of Atthracy 1904 of estande of Willows
190.

Questions for Witnesses.

•	
STATE OF GEORGIA,	8
County.	
And al sel.	\ of mid State and County harden
been presented as a witness in support of the Application of M	of said State and County, having
	having been duly sworn true answers to make to the
following questions, deposes and answers as follows:	2 . / 1
1. What is your name and where do you reside?	worth Hem
at inim taling all	comment therein
2. Are you acquainted with the applicant, Mrs. C	
If so, how long have you known her?	church her since told
Dim Hadra mon diatoga Ce	
	hum her enty find 18tel
5. Were you ever acquainted with her husband?	es , ,
6. Where did he reside in 1861? . ULL	mitgild County ba
7. When and to whom was he married?	Filter partiductions miliens
8, When and where was he born?	
9. How long have you known him?	
the States, and in what Company and Regiment did he cull	h and how do you know this?
cored april 18td - In whit fin	d Co fa. A-86- my fry
11. Were you a member of the same Company and	Regiment?
12. How long did he perform regular military dur	about Briefler
Al Pours boro All - 1865	egiment surrendered and discharged from service?
Al gouriboro Asto-1865	(Apolie)
15. Were you with the command when it surrend	(Harle) with well applicant present?
Les-	the australia or applicant present?
16. If not present, where was he? Mes	red cont
17. When and where did he leave his Command?	at trensbor so Ale
For what cause? What sudden	
By whose authority be left? Mun Ender How do you know all this? (State fully and clearly.)	and was parallel
Clay or by before from	mas prosent
1 dista traces a la Tor	
18 When and where did : Hasses	Which for ex Williams die?
Mind may from west	at sumplin lam
A the whole and he reside at his death and how lon	g had he been a resident of Georgia at his death?
20. Do you of your own knowledge know that app	licent is the lawful widow
Jusism Binbud mille	
21. Has she remained unmarried since her sudier he	sband's death, and is now his widow?
pos not married	nod two death -
22. What property, effects or income has the app own knowledge? Thurk Court Charm	dicant, if any, and how do you know this of your
Times	July - mor would being
230 What property, effects or income did applicant p	ossess in 1899 and 1900 and what disposition did she
make of it? How woll ing with	lung Thing
whom? Jobs Just	vo years or given any away, if so what was it and to
WWW VIII	Analysis are as accommendation than the second of the seco
of 25. What is applicant's physical condition and her of	bances and ability to earn a support?
aram-Sre which were	south Blesson to

26. Is applicant able to earn a support at labor of any sort, if not why the
my april to work court trus ver anime
Month
127. How was she supported for 1899 and 1900? - Pry Tun Jon som when its
28. How much did applicant contribute to her support for last two years ? As and though the Com
28. How much did applicant contribute to her support for last two years? As any think & Can
29. Give a full and complete statement of applicant's physical condition change complete statement
of much har bu is mable to work from oriumalism
30. What interest have you in the recovery of this pension by the applicant?
The state of the s
Sworn to and subscribed before me this 5/2
lay of Horning 1801 Joseph La
Corre Contrat
July Silled & Ordinary, Call Los of 31 Ba
County County. Witnessed
Affidavits of Physicians.
2
Chatterge County.
Personally before me comes
bushes of the state of the stat
chysicians of said county, who, being severally sworn, say on oath that they have examined carefully Mra.
Amanaga & Mellinum applicant for a Pension under Act of 1900, and after
uch personal examination say that her physical condition is this Lafter from Chrome
mucular Oftamation Comple in the Contractions of
the veryens of both hours the has mesutaries
Interestario effects of which is a general defily and
Constant - Chronic burrhace
nd we have no interest in said pension if allowed.
Sworn to and sub cribed before me this
my coping 180) not trung my
(Dias Macristian)
County. County.
OPPINARYIS OFFICIALE
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
County.
County.)
I, Ordinary in and for said county, hereby
ertify that the applicant, Mrs Julinda LWilliams resides in said
ounty, and has been a bona fide resident of this State sings
and that the witnesses, Mr. Joraph Henn, Ir b forther auch
are of trustworthy character, and that their statements
To the state of full faith and credit.
I do further certify that before answering the foregoing questions, the applicant and said witnesses took the
ath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same
I further certify that the tax digest of characteristics county shows that applicant
eturned for taxation in her own name in 1899 Mr. dollars worth
f property, and in 1900 Month of property.
Witness my hand and official seal, this day of March 1904
SEAL Ordinary,
County,
orse-1. Refore any questions are answired, the Ordinary shall swear applicant and the witnesses in the following words: You do solemnly aware that you will true answers make to each of the questions asked of you, and the swidges you shall give will be the whole truth, So help you God, " Additional affidating may be askeded, if blanks paces in intelligibles."
 Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.

4

POWER OF ATTORNEY.

STATE OF GEORGIA.
CHARLES OF GEORGIA.
L. MILLENNING.
L. MILLENNING.

WIDOW'S PENSION, 70 Hunnela Million Willow of A Prail (Regiment of) OHN W. LINDSEY.

1902

POWER OF ATTORNEY.
STATE OF GEORGIA, County
to receive and receipt for the pension paid hereon, and request that he remit same to
In Witness Whereof, I have hereunto set my hand and seal, this day of Lat 1 1903.
Executed in the presence of
Aim Here 4 Oct-
^
SION, 1948. County, 1948. County, 1948. County, 1949. Lights

WIDOW'S PENS For year ending Dec. 31, 19
PAID TO

MUS. A. M. M. M. M. M. M. M. M. OF 1903. JOHN W. LINDSEN WARRANT ISSUE No. 1503

PERSONALLY COMES MRS.

- Munda milliams

_State of Georgia, and that she has RESIDED in said State

Regiment of Breezewa

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of he the	1 . C. the selections -
who, being sworn, says on oath	, that she is a bona fide resident of said County of
State of	f Georgia, and that she has RESIDED in said State
continuously ever since	. That she is the Widow of
(x " Principles	who was a soldier in Company
continuosis ever some (* **) Printingino	Regiment of . S 872 7
of the 2.6.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	about the month of
1867 and served in the Army up to	1505 That he died
on the 2 day of .	W-1 / / / /
on the Z day of .	
	•
Deponent swears that see was the wife of said dece-	eased soldier, during his service in the Army as a
seider and that she has never married since his	death aforesaid, and that she became his wife in
me vene 1-611	
There been adowed as ludgent pension as	a resident of Multerga
Courty causes Act 1980 for the year 1902 and no	m apply for the pension provided by law for the
car a many December of 1965	
18 16 day of file (Boog)	Y
in 1516 day in feel most	1 Cx Millions
	best Other Il ion Predict Son
/ '	
State of Georgia,	i irina
State of Georgia, Line Herrit County 1 0	redinary of said County, century that I am well
acquainted with Mrs.	f. of ext, who made the above attidavit and
	and I know she is the individual she represents
hereself to be, and that she has continuously reside	ed in this State since the
day of ACCCCCCC 1842 Green under my official signature and seal, this COfficial (the day of Quincing 1902
Official i	Lean Buckey
Sent (ordinary of the collins of the County.
NOTE. All blanks must be filled. Vouchers and affidavits must be	car date after January set year

Ordinary of Multinga County NOTE.—All blanks must be filled. Vouchers and amdavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Volunteers, that he enlisted in said regiment on or about the month of Illes ch

soldier, and that she has never married since his death aforesaid, and that she became his wife in

Sworn to and subscribed before me, day of 1997 1998 Hiller of the Country Post-Office Land Hiller of the Country

County. Ordinary of said County, certify that I am well acquainted with Mrs Hillande millians, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the____/ #_____

Given under my official signature and seal, this the day of Joseph 1908.

I have been allowed an Indigent pension as a resident of Chattery's County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the

STATE OF GEORGIA.

the year 184

year ending December 31, 1908.

State of Georgia,

Official Seal.

day of \$ 62 1 1850

County of Chuttory

POWER OF ATTORNEY.

STATE OF GEORGIA.	. County.		
Controla Controla The Training 66	- William	Henton bu	y authorize
to receive and receipt for th	e pension paid hereon,		it same to
day of Acit is come	1904 Arran	Le thalliam	J [L. S.]
Executed in presence of		3	

WIDOW'S PENSION Mrs. Jones William FOR YEAR ENDING DECEMBER 31, 1904 INDICENT JOHN W. LINDSEY. WARRANT ISSUED PAID TO Widow of

POWER OF ATTORNEY.

STATE OF GEORGIA,
Chattooga COUNTY.
I. aucunda g Philliann , hereby authorize
- Chattooga COUNTY. I. Assessed of Stutton County L'an
to receive and receipt for the pension paid hereen, and request that he remit same to
amanda g Williams at Annumerville
In Witness Whereof, I have hereunto set my hand and seal, this
day of gare 1905. Two.
amanda grindlimus [s.]
Executed in presence of
- Jet Pohicatore or dinary

To Those Heretofore Paid. No. # 145 1905.

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

Widow of A Millianse 36 Lda Regiment. Mes & new word & milianes Co. A

MARRANT ISSUED
MARRANT ISSUED
AND HANDED TO

JOHN W. LINDSEY,

''ommissioner of Pen

Williams amanda

TO THOSE HERETOFORE PAID.

1904.

8 850/ 18

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Control To	Trumda milians
who, being sworn, says on oath that s	she is a bona fide resident of said County of
Grattery State of Go	eorgia, and that she has RESIDED in said State
continuously eyer since Scar 11712	That she is the Widow of
of the SCE	who was a soldier in Company
of the S (C/2	Regiment of SEASPILL
Volunteers, that he enlisted in said regiment on or ab	
186 2 and served to the Army up to	Dizt 1864 That he died
Sind Course Can	_1888
But To Court Con	tone
	5.
Deponent swears that she was the wife of said decease	ed soldier, during his service in the Army as a
soldier, and that she has never married since his de-	
the year 1864	
I have been allowed an Indigent pension as a re	emident of Estattories
County, under Act 1900, for the year 1908, and now	/
year ending December 31, 1904	
Sworn to and subscribed before me,	~ inn
this Sta day of Jeers 1904 -	Territory of Stations
Ordinary	ost Office of FICE The Chang To
	,
State, of Georgia,	1. lener dicetter
4 County, County,	Ordinary of said County, certify that I am well
acquainted with Mrs C. Conclet Miles	who made the above affidavit, and
am satisfied that the facts therein stated are true, a	and I know she is the individual she represents
herself to be, and that she has continuously resided	in this State since the
day of Jon 1415	. 6
Given under my official signature and seal, this	the Saday of Singian 1904.
~~~	Van Matx
Omeiai	dinary of County
	ar date after January 1st, 1904.

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

PERSONALLY COMES MRS.

STATE OF GEORGIA,

County of Challonga	annanda gerelliams
who, being sworn says on oath	, that she is a bona fide resident of said County of
id lattooga State of	Georgia, and that she has accepted in said State
continuously over since for sing the	That she is the Widow of
A Smilliams	who was a soldier in Company
A of the 86	
A P A S A S A S A S A S A S A S A S A S	
the Little Army up to African Ar	rel 1865 . That he died on
the Lot day of A	eliquest 1488
- Dud of Heart faile	vie
	-
•	8
Deponent swears that she was the wife of said decer	ased soldier, during his service in the Army as a
soldier, and that she has never married since his de-	ath aforesaid, and that she became his wife in
the year 18 Wf	
I have been allowed an Indigent pension as	a resident of allocan
County, under Act 1900, for the year 1904, and nov	wapply for the pension provided by law for the
year ending December 31, 1905	
Sworn to and subscribed before me, this 4 day of 1816 1905.	Tur !
this 4 day of 121 1905.	Millianda ganilleams
1) Johnston Ordinary.	Post-Office Jeson Cix
State of Georgia,  County,	1. go Po huston
Chattooga County.	Ordinary of said County certify that I am wall
acquainted with Mrs. Amanda & Still	liams , who made the above affidavit and
am satisfied that the facts therein stated are true, as	nd I know she is the individual she represents
herself to be, and that she has continuously resided	
day of delectiver 1490	11.7
Given under my official signature and seal, th	is the 6 day of JAIL 1905.
T (Major)	1) 1 Ballington
Official { Seal. {	may of Charloge County.
Ordin	mry of County.

NOTE.—All blanks must be filled. Youthers and Affidavits must bear date after January 181, 1905.

# POWER OF ATTORNEY

STATE OF GEORGIA,
Chattoogu County.
11/41 Declared in a million
Philip Grok of Hullow leverty for
to receive and receipt for the pension paid hereon, and request that he remit same to
and the state of the little
In Wilness Whereof, I have hereunto set my hand and seal, this
day of JA1 (
Assionala Marthanus. 8)
Executed in presence of
VA Jeluston
professione ordinatil

WIDOW'S PENSION,
For year ending Dec. 31, 1906.
Thus Wiston of My My Midow of My My My County,
Widow of My My My Regiment.
JOHN W. LINDSEY,
Co. A. My Regiment.
MARRANT ISSUED
JAN 27
AND HANDED TO

**~1906.** 

No.586

### POWER OF ATTORNEY,

COUNTY.	. , ,	¥ .
hire of At	tasta &	oy authorize
nsion paid hereon, an	d request that he rem	it same to
1907		
411.14	mark mill	ans[1 s.]
or whit		
	nsion paid hereon, an at at ve hereunto set my ha	MIIIMILA X Molli

To Those Heretofore Paid.

To Those Heretofore Paid.

To Those Heretofore Paid.

TO Those Heretofore Paid.

INDIGENT

For year enting Dec. 31, 1907.

Hos (Lauracida Prelliams)

(Brigal Terre I. County, Widow of TY P. Pulliams)

Co. M. 34 L.M. Regiment.

Co. M. 34 L.M. Regiment.

JOHN W. LINDSEY,

Co. M. 34 L.M. Regiment.

AND BARDED TO

AND BARDED T

CONTRACTOREP PENSIONS

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES Mrs.
	ath, that she is a bona fide resident of said County of te of Georgia, and that she has RESIDED in said State
continuously ever since	That she is the Widow of
of the	Regiment of Claracy
Volunteers, that he enlisted in said regiment of	Aleri 1805 That he died on
the Mill of Still	ruguet 1888.
· · · · · · · · · · · · · · · · · · ·	
soldier, and the as never married since	deceased soldier, during his service in the Army as a " his death aforesaid, and that she became his wife in
	on as a resident of MILLETTO FILL
County, under Act 1900, for the year 1905 and year ending December 31, 1906.	now apply for the pension provided by law for the
Sworn to and subscribed before me this day of 1906.	Luanda XXIII liano
State of Georgia,	Post Office 1990 Per Character
a SIMITEOGRA County.	
	Halliantes, who made the above affidavit, and rue, and I know she is the individual she represents
herself to be, and that she has continuously res	sided in this State since the/S/H 2
Given under my official signature and see	al, this the day of 3011 1906.
Official     Seal	Ordinary of Chartone get County.

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

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Chatterga	PRASONALLY COMES MRS.
who, being sworn says	on oath, that she is a bona fide resident of said County of State of Georgia, and that she has RESDED in said State
	That she is the Widow of
_ (1 of the 196	Regiment of LLC , 410
the Kied of the	Afabil 1988  Alignary 1988  Althory action on 19 1888
	de a
	said deceased soldier, during his service in the Army as a
the year 18.44.	ince his death aforesaid, and that she became his wife in
	sion as a resident of Clartarya.  and now apply for the pension provided by law for the
year ending December 31, 1907.	
Sworn to and subscribed before m	Post Office & M. M. Marchelle Sin
	y Post Office & M. 12.111111111111111111111111111111111
State of Georgia, County	ordinary of said County, certify that I ma well
acquainted with Mrs //////A///A	I Mulaniss who made the above affidavit, and e true, and I know she is the individual she represents
herself to be, and that she has continuously	
day of18 \$\mathbb{\gamma}\$  Given under my official signature and	I seed, this the 2 day of Jair 1907
Official ( Seal )	Ordinary of Colombrogn County

NOTE .- All blanks must be filled.

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

	, who mode the above amusylt, and
am satisfied that the facts therein stated ar	e true, and I know she is the individual she represents
herself to be, and that she has continuously	resided in this State since the 18H2
day of184/	
Given under my official signature and	seal, this the day of 3011 1906.
(Official)	P. P. Palineston
Seal	Ordinary of Charles H County.
NOTE -All blanks must be filled	,

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

am satisfied that the facts therein stated are	true, and I know she is the individual she represents
herself to be, and that she has continuously r	esided in this State since the
day of1880	*5
Given under my official signature and	seal, this the 2 day of Jail 1907
Official ( Seal )	Ordinary of Chatterga County
NOTE All blanks must be filled.	Ordinary of LOHIMPOGR County

Vouchers and Affidavits must bear date after January lst, 1907.

Williams, John M.
No. 62.3 Chattorga Co
APPLICATION FOR
Conficial Leg
Formorphisman Solution
County Linds
Date of Warrant AF Cor. 12
Date of Warrant AF Cor.

50	: - > -		and the second second second	A Han C THE STREET
· ·	Amount		S S	8 E
C	Warra		100	15
2	b m		N S	Cham.
	î K	60	Intheial Fortisperate Salver	7 1
_	12 12			2
*		1 :	R R	of the hours
		,	74	2.0

#### STATE OF GEORGIA.

() 1100 0 g .. County.)

	5, ,
	Personally appeared before me.
	the county of and says that he was on the 20th day of September, 1879, a bona fide resident of this State; that he
	enlisted in the military service of the Confederate States, or of this State, as an annual state, and an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, or of this State, as an annual state of the Confederate States, and the Confederate States of the Confederate States, and the Confederate States of
	in Company 2
	that while engaged in such military service, to wit: at the battle or engagement of
	in the State of
	that the same was amputated
	20th, 1879; that he has supplied himself with an artificial; or that, not having
	done so, he prefers to supply himself with an artificial
	Sworn to and subscribed before me this
	day of willer 18.
	Nork.—The above affidavit must made before some officer authorized to administer eaths, a Judge of the Superior county Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.
	COMMISSIONED OFFICER'S AFFIDAVIT.
	STATE OF GEORGIA.
	County.
	Personally came before me.
	the county of, State of Georgia, who, being duly sworn, depose
i	and says that he was
1	and that A
	n said Company, and that this deponent knows that said,
1	ost ain the military service as said in the above affidavit.
	Sworn to and subscribed before me this
"	nust be furnished

#### AN ACT

To carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877.

SECTION I. Be it enacted by the General Assembly of the State of Georgia. That any person now a bone fideresistent of this State, who emisted in the indutary service of the Confederate States, or of this State, who, while emission of such additions service lost a limit or limits, may familist be the Governor of this State proof that such applicant has supplied bimself with such seefful artific all limits or limits, and the larged vermor, on reception of such proof, is hereta authorized to down his warrant on the Toursurs of this State in favor of such applicant for either amount herefular from introduct, to will lost a log extending above the shore, one bounded dollars, for a log not extending above the above such specifics, but shollars, for an arm not extending above the effort, staty dollars, for an arm not extending above the effort, staty dollars, for an arm not extending above the effort, forther and arm not extending above the effort, forther and arm not extending above the efforther provided to the proof of the supply himself with the sol artificial limit.

Sq. II. Be it further exacted by the said notherity. That such application shall contain proof of such applicants being entitled to the benefits of this Act, and shall further state whether arm or leg has been supplied. If an arm, whether extending above the circum or of a leg whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted.

Sig. 111. Be it further enacted by the said authority. That no applicant shall receive the sum allowed under the Act offence this once in the years.

Sec. IV. Beat further emodes by the authority aforesaid, That all laws and parts of lows in conflict with this At-Act be and the same are benefit to posted.

HENRY R. GORTCHIES,
Secretary House Representatives,
WS. A. HARRIS,
Secretary Senate,
Approved, Soptember John, 1876.

A. O. HACON,
specker House Representatio
RUFUS E. LESTER,
President Senice

ALERED H. Colquitt, Governor

#### STATE OF GEORGIA.

#### County.

Personally came
who, being duly sworn, depose and say they are acquainted with
and know that he lost ain the military service during the late war;
that said
citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.
Sworn to and subscribed before me this
day of
HINE CONTRACTOR OF THE CONTRAC
STATE OF GEORGIA.
Chieffe County,
I
county, do certify that I am well acquainted with and action to action the country.
the applicant for a
affidavit are trpg, and that I am walkacquainted with,
Land of the Control o
the citizens who makes their addayit, that they are respectable citizens of this county, and that the facts tated by them are true.
Given under my hand and official seal, this
day of
1216.46
Y.

•

Deponent 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 ending October 26, 1889.

Sworn to and subscribed before me, this the John. Ab Milliann.

188 g. John

#### STATE OF GEORGIA

County.

PURSONALLY comes before me

Ordinary of said county, , both known to

me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined and after such examination say that the applicant has been injured as follows:

Sworn to and subscribed before me, this

day of

ORDINARY

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

Chattergee county | words do ceftify that I am well acquainted with Alery We I Wallacon with applicant in the foregoing affidavit, and and 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 Police 11: allow before whom the foregoing affidavits were made and power of attorney was signed, is a . 11 ( Lection attack) or said county, and the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this / 8 day of # 8 188 9 di viene hije the

Ordinary a Che Horas County

#### POWER OF ATTORNEY

STATE OF GEORGIA, counts, in said State, do however appears "That I, Alling the Test Comptters of State of however appears "The Colling the Test (Comptters) of State of however appears "The Colling the Test of the Comptters of the State of however appears "The Colling the Col

and receipt for where are account of money I may be entitled to them the State of Garage the reason of the migration of an aforesaid in the military service of the Confederate States for of this State), as stated in the foregoing affidavit; hereby authorizing my said at the to receipt they name for any Warrant that may be issued by the Governor, or for all same if money which may be coming to me for the reason aforesaid.

in witness where I in a chereunto of my hand and scal, this /5/16

John M. Millians

NOTES.

1. It an applicant has been wounded, the description of the wound should be carefully and fully set 1. It an applicant has been wounded, the description of the wound shown be carefully and only set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. It 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 substratially

3. It will not answer to say that an arm is "substantially uscless for ordinary pursuits of life, etc." The purpose be "substantially and essentially uscless."

4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the that the leg is not "substantially and essentially useless."

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

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

where amputated.

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

7. 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,

County.

1. How they do certify that I am well acquainted with Although the Hill County the applicant in the foregoing affidavit, and sen 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 // /211 // // // before whom the foregoing affidavits were made and power of attorney was signed, is a region of said county, and the said affidavits and signatures thereto are genuine. natures thereto are genuine.

Given under my official signature and seal, this find day of FET 1890

Ordinary Courter Torygon County

STATE OF GEORGIA,
Selice To 2 Sec. County.
I. Ordinary of said County
do certify that I am well acquainted with
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and 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
before whom the foregoing affidavits were made and power of attorney was signed, is
of said County, and the said affidavits and signatures thereto are genuine.
Given under my official signature and seal, this day of
-7711 Ville 104
Ordinary Control County
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OT Allows  Or Allows  Or Allows  Or Allows  Or Allows  At col  Or Allows  Inch   Col  Or Allows  Or
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No. No. Opplication  Policant.  A. J. O. C. O.
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No. No. No. No. Application material material Mannani, General on record

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,  PERSONALLY appears Will Millions of Colla Macy a county.  State of Georgia, who, being duly sworn, says on oath that he is a bona had citizen and resident of said State, and has been such continually since the day of Colla 1866, that he enlisted in the military service of the Confederate States (or of the State of 1212 16000) during the war between the States, and served as a prince of in Company of State whilst engaged in such military service, at the battle of Allionity's Brigade; that whilst engaged in such military service, at the battle of Allionity is Brigade; that whilst engaged in the State of the said on the State of the said of t
· · · · · · · · · · · · · · · · · · ·
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 the second of the second october 26, 1890. I have heretofore been allowed a pension of the second october 26, 1890. I have heretofore been allowed a pension of the second october 26, 1890. I have heretofore been allowed a pension of dollars.  Swort to and subscribed before me, this the
POWER OF ATTORNEY,
STATE OF GEORGIA
Little Courses Country
KNOW ALL MEN BY THESE PRESENTS, That I. John J. C. Helliens
my true and lawful attorney in fact, for me and in my hame, 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.  [IV IVINESS WHEREOF, I have hereunto set my hand and seal, this
day of Historica 1890
Executed in the presence of us: fol. 1/6 Millia. Jus
Sitty Matty Occurry
DIRECTION.
Send money to me as follows, by
to Min Hacken P.O.

STATE OF GEORGIA,
Chentle Types County.
PERSONALLY appears Children of Contallances of Contallance
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 Control of the Control of th
federate States (or of the State of
States, and served as a 11 1 11 11 11 11 Company 4. of 37 th Regiment
of Management Volunteers ( Wolunteers & Brigade: that whilst engaged
in such military service at the battle of Africa. The in the State
of Despite Volunteers of Brigade: that whilst engaged in such military service at the battle of Afficiate in the State of Service on the day of Consent 1864 he was
wounded as follows:
Kit from District to la compostatice estre
Mil price property
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. Thave heretofore been allowed a pension of
Sworn to and subscribed before me, this, the
G. day of T. 1891.
vine stilling 6 ranias
Norse. State fully rature of would be character of disease which causes the distallats, and explain rectanistic the excent of the distallity, resulting from the second distallative.
POWER OF ATTORNEY.
STATE OF GEORGIA,
School Territory County.
Know all Men by these Presents, That I The Hill of Clicing
of the control of Georgia, do hereby appoint
. I stilled the completences became
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 authoriz
ing my said attorney to receipt in my name for any Warrant that may be issued by the Gover-
nor, 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
Service day of Service 1990
Jan 1 Miliang [ s]
Executed in the presence of us.
John, helletinder
Side liter to Commonion.
Send money to me as follows, by
to Dien Milliam P. O.
County, Georgia.
Chillian Contraction

	, Alex	· ·	
STATE OF GEO	RGIA,		
Collection is	County.		
L	Ley	Ordinary of	said county,
do certify that I am well acqua	inted with	Li di di chi	rice the
applicant in the foregoing affidi			
said affidavit are true, and that individual he represents himself	he is disabled, to the ex-	in this county	w he is the
Given under my official sig			. 0 1
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1 00	2		
	Ordinary C.	a Man	County.
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SOLDIER'S PI

1

POWER OF ATTORNEY. STATE OF GEORGIA, ) Know all Men by these Presents, That L County, State of Georgia, do hereby appoint IN WITNESS WHEREOF, I have hereunto set my hand and seal, this Executed in the presence of us: Mai William Send money to me as follows, by 1 cice Application for Allowance 3

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For Applicants Heretofore Allowed Pensions.  STATE OF GEORGIA,  County.  Pensional Its appears  of County State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously since the day of Isaac and served as a latest of the Confederate States (or of the State of during the war between the States and served as a latest of the Regiment of County State of the State of the Confederate States (or of the State of the Regiment of County State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously in the State of the Confederate States (or of the State of the Regiment of County State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously interpretable that the enlisted in the military service of the State of the Regiment of County State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, who, being duly sworn, says on oath that he enlisted in the military service of the Confederate States (or of the State of the Regiment of County States (or of the State of the Regiment of County States (or of the State of the Regiment of County States (or of the State of the Regiment of County States (or of the State of the Regiment of County States (or of the State of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the States of the Regiment of County States (or of the St
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and
the acts amendatory thereof, and makes application for the a lowance to which he is entitled for the year ending October 26, 1862.—I have herestofore been allowed a pension of
A Company of the Comp
Sworn to and subscribed before the this the form The Millians
2 - day of 1892 \ 1892
Ordinary.
Note - State fully nature of would or character of thereon which causes the disability and come performally the
POWER OF ATTORNEY
STATE OF GEORGIA.
County \
Know all Men by these Presents. That I.
County, in said State, do hereby appoint of the first of the said State.
of the 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 Contribute States not of this States as stated in the foregoing attribute borological
my said atteries to receipt in my name for any Warrant that may be issued by the Governor, or for my dimoney which may be coming to my for the reason aforesaid
IN WITCHESS WHEREOF, Unaverhereunto set my hand and seal this
day of the second of the secon
Executeffin the presence of us
1 ( Muchen
1 min with x1 invitation
DIRECTION.
Send money to me as follows, by
receit fift Hours to Securities P.O.
County, Georgia.
Kat 11 Decide.

**
STATE OF GEORGIA, )
Country Country S
PERSONALLY Appears
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
resident of said State, and has resided therein continuously ever since the
day of
federate States (or of the State of) during the war between the
States, and served as a constant fine Company in Compan
of Scan Volunteers College 's Brigade; that whilst engaged in
such military service at the battle of Contact in the State
of day of Law 1864, he was
Wounded as follows and the train to the color of the
· fish - (.c. in Front seem the Top siend
No. 2
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and
the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of
Sworn to and subscribed before ac, this, the
1 day of 1 can 1893.
weller this test Lander
Norz.—State fully nature of wounding 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.
Ordinary of said County,
do certify that I am well acquainted with the state of the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.
I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
of said County, and the said affidavits and
signatures thereto are genuine.
Given under my official signature and seal, this & day of 1803.
and your white the
Ordinary & Levelle . County.
Section 1997 But the second section of the section of the second section of the secti
INTERNAL AND AND COMPANY OF

# POWER OF ATTORNEY.

STATE OF GEORGIA	(
Know all Men by these Presents.	That I fil Madiner
x	on Chetterja
County, State of Freorgia, do hereby app	
m cilica a cri	e de la companya del companya de la companya de la companya del companya de la co
State of Georgia by reason of an injury	pt for whatever amount of money I may be entitled to from the 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 Attor- ant that may be issued by the Governor, or for any sum of money
day of Account A No.	or aforesaid.  ve hereunto set my hand and seal, this.
day of	1894. A. Mr. Millians [1. s.]
Secured in the presence of w	• )
J. OTheriti	4
Withen product Co	Carrier S.
Survey Site in	DIRECTIONS
Send money to me as follows, by	P.O.
C. Horn	County Consula
	file Me Ardham
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For Those Already Enrolled  ### 17  Idign's Papsi  1894.	
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1 %	Name Count
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#### POWER OF ATTORNEY.

POWER OF ATTORNEY.
STATE OF GEORGIA,
Challer County.
KNOW ALL MEN BY THESE PRESENTS, That I.
County, State of Georgia, do hereby appoint (Horn Sichard file of
of M. Tolling Test my true and Invite attention in fact for
<i>y</i>
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 Warrrant 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 Arillians [1.8]
Executed in presence of us
1 1/4
Samy hellett
Lotter and the Chelinary
DIRECTIONS.
Send money to me as follows, by Clifcha
100 Fun hadery P.O.
DIRECTIONS.  Send money to me as follows, by Children Fraction P.O.  Cher de dy C. County, Georgia. John Mr. Williams
N. 1895.
R'S PENSION  R'S PENSION  BD5. 1.  SD5. 1888  ARI JOHNSON, WOODING Exercite Department  ARI JOHNSON, WOODING EXERC
DIER'S PENSI  Son SHERMEN TO SON SON SON SON SON SON SON SON SON SO
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Those A No. 3. N
Those Aiready Emr.  Those Aiready Emr.  JER'S PEN.  1895.  1895.  AIR CARD JOHNSON Secretary Exercitors  WARRANT HANDED TO  WAR
S00] Name Count, Disabi

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
Line There carry
PERSONALLY appears.
PERSONALLY appears  County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the fide and said States, and has resided therein continuously ever since the fide and said States, and served as a fide fide in the military service of the Confederate States (or of the State of fide fide fide fide fide fide fide fid
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, 1884. I have heretofore been allowed a pension of dollars, for the year 189.  Sworn to and subscribed before me, this, the Act of the year 189.  Any of Act of the sature of wound or hander of downs which causes the doubledy and explain particularly the extent of the backety made replace protocolerly the extent of the participate of the participate in the backety and explain protocolerly the extent of the participate of
Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Given under my official signature and seal, this
day of little 1804.
Ordinary Colice Ronge County.

# POWER OF ATTORNEY. STATE OF GEORGIA, Chatter County. 1. Min MI Sicilianschereby authorize An ili le Wright to receive and receipt for the pension paid hereon and request that he remit same to a Prior Freiter fre IN WITNESS WHEREOF, I have hereunto see my hand and seal, this Folio Du Million [ 1.8] Executed in presence of us ESKICLET in Tox 1 SOLDIER'S PENSION RICHARD JOHNSON

# POWER OF ATTORNEY. STATE OF GEORGIA. County. I. With me villians hereby authorize box (11/1) to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this Join The Postine [L. s.] Executed in presence of SOLDIER'S PENSION 1897. RICHARD JOHNSON

# For Applicants Heretofore Allowed Pensions.

Personally appears All Mallimon of Classific Add.

County, State of Georgia, who being duly sworn, says on oath that he is a boha fide citizent and resident of said State, and has resided therein continuously ever since the Add and of 1835; that he enlisted in the military service of the Con-

County.

STATE OF GEORGIA,

Chattanger

day of the contract in the minute of the contract of the contr
federate States (or of the State of ) during the war between the
States, and served as an Indiany long of in Company M, of J. th Regimen
of. Volunteers, Strange _'s Brigade; that whilst engaged
in such military service in the State of France, on the 5/2 day
of City, he was wounded, injured or diseased as follows:
of Cling 1864, he was wounded, injured or diseased as follows:
1 = 1 1 + 2 - 167
tame to be Soundentets of beder
21 con dift tence point
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
entitled for the year ending October 25th, 1550 I have nevertore as a resident of
Clarity county been allowed a pension of Dre Breeder
dollars, for the year 189 .
dollars, for the year 1896.  Sworn to and subscribed before me, this, the
150 day of 1)circ 1886.
/3 - day of . 2 /2112 1800. )
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,
Clastifica County.
In Illian Mollette , Ordinary of said Counter,
do certify that I am well acquainted with 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of/ /c+
1000
Affix pour four flored x
bere.
Ordinary Chailtong ( County.
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# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
alacticity County.	
personally appears with the Williams of Chile The	
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citiz	en
and resident of said State, and has resided therein continuously ever since the	
day of 1855; that he enlisted in the military service of the Co	)D
federate States (or of the State of ) during the war between t	he
States, and served as a Company to of the Regime	nt
of Singade; that whilst engage	ed
· · · · · · · · · · · · · · · · · · ·	ay
of 1/271. 1867 he was wounded, injured or diseased of follows:	51
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Entre confict for source of the fire	in the
•	1
Deponent desires to participate in the benefits of the Act, approved October 24th. 18	37,
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	s a
resident of county been allowed an invalid pension	of
Dollars, for the year 189 (	
Sworn to and subscriped before me, this, the Police Particle day of Lord 1897, Post OFFICE Particles	
1907 DESTRUCTION	
- day of 12.777 1800. Post of Fice , 77.11, 221.00	6, 7
Not K. State fully the nature of wound or character of thoses which raises the disability, and cepture particularly the ext	
Note State fully that nature of wound or character of disease which Pauses the disability, and replain particularly the ext	ent
The dimently, resisting from the would of dieses	
STATE OF GEORGIA,	
County.	
	he
applicant in the foregoing affidavit, and an well satisfied that the statements made by h	
in his said affidavit are true, and I know he is the individual he represents himself to	be
and that he resides in this County.	
Given under my official signature and seal, this	
day of 2000 1897.	
Adia Toma Toma Toma Toma Toma Toma Toma Tom	
Sport level here	

Ordinary / County.

### POWER OF ATTORNEY.

STATE OF GEORGIA, County.

A County.

A Millionus hereby authorize these Celled.

Circultury of Claudury receipt for the pension paid hereon and request that he remit same to by Claud Chutten a at 18101 Heelts of
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1815 John M Willow [i.s.] J. & Howell SOLDIER'S PENSION. RICHARD JOHNSON, INVALID WARRANT HANDED TO For Those Already Enrol 1898

POWER OF ATTORNEY.
STATE OF GEORGIA,
(Shattroja County.)
Har Markingus hereby authorize
the Marigus of atlante and
,
at Mion factory gran
at Whon Hactory for
1. WITNESS WHEREOF, I have heredulto set my hand and seal, this / a
day of Alexenary - 1899. y
day of January - 1899. y file Millians [L. S.]
Executed in presence of
John Mattof Chaman
Strom In contex Stamage

SOLDIER'S PENSION INVALID 1899. (For Those Aiready Enri No.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County.
personally appears file the transof Clear Sugar
County, State of Georgia, who being duly sworn, says on oath that he is a tond fide citizen
and resident of said State, and has resided therein continuously ever since the
day of Him 1814; that he enlisted in the military service of the Con-
federate States for of the State of
States, and served as an Or des actly day in Company N., of I th Regiment
of 1 Volunteers & 1 Prince of 12 Prince of 1
of Solutions of Volunteers, & Shipman significant is Brigade; that whilst engaged in such military service in the State of Jay
of Cryst 1864, he was wounded, injured or diseased as follows:
Dyd pare that would right lip
of the training the state of the
Altrong The Time frist Cours is The
there to be chapter to by
Bakker 14 Cex handa Sei
e n son ( in some
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and makes application for the pension to which he is
entitled for the year ending October 20th, 1898. I have heretofore under said law as a
resident of 47. 2003 754 county been allowed an invalid pension of
Dollars, for the year 1897
Sworn to and subscribed before me, this, the form the first free free free free free free free fre
day of 1898. Post-office II Juli Here 13
- TNLUI Maray
Note - State fully the nature of wound or character of direase which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA,
Clarity of a County.
lo certify that I am well acquainted with the
policant in the foregoing officiality and are all and a little and a l
pplicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Given under my official signature and seal, this
day of Act with 1 = 1898.
1000,
( pour )

Ordinary Chickles . L.

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA. County. _ County.

personally appears Alm IN Milliam of Celecttown County, State of Georgia who being duly sworn, says on oath that he is a bond fide citizen and resident of said State, and has resided therein continuously ever since the 18 day of Ash 1835 ; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served as a Cracky South in Company H, of 35 th Regiment of Jan Volunteers, Lewy many 's Brigade; that whilst engaged in such military service in the State of Francis of Curyun 186th, he was wounded, injured or diseased as follows:

Mountail be present in right by the state of suit of most washed suit of most whole the suit for the suit for &

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of

County been allowed an invalid pension of County been allowed an invalid pension of County been allowed an invalid pension of County been allowed an invalid pension of County been allowed an invalid pension of County below the first the first of the County been allowed an invalid pension of County been allowed an invalid p Nore-State fully the nature of wound or character of disease which sound the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA, County.

1 John Matter do der My that I am well acquainted with John Milliams the applicant in the foregoing affidavit, and an well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this

# POWER OF ATTORNEY. STATE OF GEORGIA, Light of County o to receive and receipt for the pension paid bereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1900. fair tu Miliam [L.s] Executed in presence of

SOLDIER'S PENSION For Those Aiready Enrolled.) No. 1225 DISABLED 1901. Will amy Name ... Disability

JOHN W. LINDSEY,

WARRANT HANDED TO

Amount, \$ Disability

SOLDIER'S PENSION

1900.

INVALID

For Those Aiready Enrolled.)

No. 8165

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	1		
Conterior of	County.		
personally appears	Mirillin	of Chatter	e
County, State of Georgia, who be			
and resident of said State and Co			
DE day of JERY		enlisted in the military se	
the Confederate States (or 6f the tween the States, and served as	State of	) during the	war be-
Regiment of JEzysa			
engaged in such military service			
day of Mayers 1811	, he was wounded, in	njured or diseased as follow	/s:
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Dans 199	compant a	tim ogo	Levi
aron Carrie	- 18us	/	*
<i>C</i> -			
	_	w •	10
Tr. Tr. P. P. P.			
Deponent makes application ending October 26th, 1900.			
iliatrozu	County been	n allowed an invalid per	
Chi Court Chia Con	Dollars, for the	year 189 9.	
Sworn to and subscribed be	fore me, this, the	de Aic, Millia	ner . 1
all day of will	1900, Pros	TOFFICE DIVERTY	7ado
and the stand	- Jane	11.	1
Norse State fully the nature of wound		tuses the dashelity, and replans parts	colarly the
	u or manage,		
STATE OF GEORGIA,	}		
be atterne	County.		
Votation fle	1611/12	, Qrdjnary of said	County,
do destify that I am well acquain	nted with Man		
applicant in the foregoing affidav	it, and am well satisfie	d that the statements made	by him
in his said affidavit are true, and		idual he represents himse	If to be
and that he resides in this Count		11	9
1/	inder my official signa	ture and seal, this 4	-
day of 1.7	7 19	00,	
(here )	1 Homi	446114	-
	Ordinary 4	with se	County.
		/	

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,					
County!					
Personally appears with 111 /11 /11 /11 of Chatterpre					
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen					
and resident of said State, and has resided therein continuously ever since the					
day of 18) ( ) that he enlisted in the military service of the Con-					
falarate States (or of the State of					
States and served as a 12 17 tu in Company Y of 12 th Regiment					
of States Volunteers Way 's Brigade: that whilst engaged					
of Volunteers, Wolunteers, Wolfer, Living, 's Brigade; that whilst engaged in such military service in the State of Harpita, on the day					
of_ lugart 186/ , he was wounded, injured or diseased as follows:					
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Her tour years A					
Will the fine					
and the state of t					
× 118					
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Deponent makes application for the pension to which he is entitled for year end-					
ing October 20th, 1901. I have heretofore under said law as a resident of					
County been allowed an invalid pension of					
County been allowed an invalid pension of Dollars, for the year 1900.					
Sworn to and subscribed before me, this the I Ale moilliams					
Sworn to and subscribed before me, this the file williams	4.				
	19				
John Ji Celt Couly					
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.					
STATE OF GEORGIA.					
STATE OF GEORGIA,					
County. County. Ordinary of said County,					
Ordinary of said County,					
do certify that I am well acquinted with TIME // 1/16/1/1/1/ 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 Atticion 12 1901					
Sami)					
County.					

18

#### POWER OF ATTORNEY

The same second
STATE OF GEORGIA,
County.
1, Line 1 Million hereby authorize 1221 186
11 in of Siffanta ba-
to receive and receipt for the pension paid hereon and request that he remit same t
A lice by check
and Dien Stater of the
IN WITNESS WHEREOF, I have hereunto set my hand and seal this
day of 2017 1902.
J. M. Williams Ins
Executed in presence of
- Acre middle Goda -

GEORGIA, Cleathrog County.

I. Addition of Johnson of Milliam of the applicant, and that she is the lawful widow of Johnson of Milliam of the applicant, and was on the Johnson of Milliam of the Action of the Johnson of Milliam of the State of Georgia, and I know of the Johnson of Milliam of the Witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this Love day of himson of Ordinay County.

Application for Pension
Due Deceased Soldier
Under Act 1891.

BY
Mrs. M. Wildiams
of Cognity

Commissioner of Pension

Approved and plan

Commissioner of Pension

Commissioner of Pensions

GEORGIA Lollecttory County.

I hereby authorise and constitute bloss Will Wifted of while county, my lawful attorney to collect and receipt for me in iny name the Pension due me for 100 J. through my deceased husband folding the Wall Constitution of the was on the was on the was in the was in the was in the was on the was in the

ORE ALLOWED PENSIONS

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

S	TATE OF GEORGIA,
	County.
c	Personally appears Action 2000, 1276 and of Meethanger
ar	d resident of said State, and has resided therein continuously ever since the 26
	y of 17:200 7 1835; that he enlisted in the military service of the Con-
fe	lerate States (or of the State of) during the war between the
Si	ates, and served as a Brace of the in Company A of 32-th Regiment
oi in	Volunteers, American 's Brigade; that whilst engaged
of	such military service in the State of Jungara, on the 572 day
,	24 Jamestart 20 plat in Courans ann Antation
	4.
	2
	and the second s
	Deponent makes application for the pension to which he is entitled for the year
	ling October 26th, 1902. I have heretofore, under said law, as a resident of
	County, been allowed an invalid pension of a
	Sworn to and subscribed before me, this the   . J. H. Williams
	day of Long 1902 Post-office It is in interesting for
Herr	Nors - State fully the nature of the wound or character of disease which causes the disability, and explain isolately the extent of the disability resulting from the wound or disease.
	TATE OF GEORGIA, County.   Julia Williams
	I. Ordinary of said County,
	certify that I am well acquainted with the The T. ( 4/2267
the	applicant in the foregoing affidavit, and am well satisfied that the statements made by
	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
{	Attle of Country
	Nors.—Fill all blanks and of Company and Regiment Nors.—All vouchers and affidavits must bear date after January 1, 1902.

#### APPLICATION FOR PENSIONS DUE DECEASED SOLDIER.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Sixto of County.
Personally before me come Mrs. & hie Hallicens, of said county,
after being duly sworn, on oath says that she is the widow of from hit william
who was duly enrolled as act lo : 14 clied Pensioner from the county
of Wiestform and was paid a Pension of City hundered
Dollars from L. Cattoriacounty for 1902 , and that the said
Mull Williams died in Hloger county on
the 3th day of Surger 1906 and at the time of his death a
Pension of Herez was due him from Al. 44
and unpaid for 190 J. Applicant further swears that she married the said
Jehn In Williams on the 5th day of Witholin .
1874 in Mattery a county and State of Jana and
resided with him from date of marriage to his death as his lawful wife, and is now his
dependant widow, and she asks that the Pension so due and unpaid be paid to her.
Sworn to and subscribed before me this 204 day of fixer 1903
Mattonya County (118 friting [L.S.)
( ) // ( Palle u.c.)
Cleation County County
AFFIDAVIT OF WITNESS.
AFFIDAVIT OF WITNESS.
AFFIDAVIT OF WITNESS. GEORGIA, Chattorya County,
GEORGIA, Chattorya County, Personally before me come A & TEL
GEORGIA, Chattorya County,  Personally before me come 1 2 1 TEL , who on oath says that he knew Jelm M. Walliam while in life
AFFIDAVIT OF WITNESS.  GEORGIA, County,  Personally before me come for A for the whole on oath says that he knew Jelin Me William while in life and that he knows  Mrs. SIM Williams
AFFIDAVIT OF WITNESS.  GEORGIA, County,  Personally before me come  A A TEG  on oath says that he knew It Im Ill Williams while in life and that he knows  the above applicant; that he knows that the said Islan Ill Williams
AFFIDAVIT OF WITNESS.  GEORGIA, Chattorya County,  Personally before me come A A Title who on oath says that he knew It has It William while in life and that he knows  Mrs. Ill Williams that he knows that the said It williams and I'll Williams were in due form of law married in the county
AFFIDAVIT OF WITNESS.  GEORGIA, Chattorya County,  Personally before me come on the first while in life and that he knows Mrs. Ill williams while in life and that he knows that he knows the above applicant; that he knows that the said future Ill williams and Ill Williams were in due form of law married in the county
AFFIDAVIT OF WITNESS.  GEORGIA, Chattorya County,  Personally before me come on the says that he knew felm the Millians while in life and that he knows  Mrs. Still willians while in life and that he knows that the said felm the Willians were in due form of law married in the county of Chattary in the State of Fearpine on the 5th day of Utilians
AFFIDAVIT OF WITNESS.  GEORGIA, Chattorya County,  Personally before me come A A TEC who on oath says that he knew Ichin Ill William while in life and that he knows  the above applicant; that he knows that the said Island William were in due form of law married in the county of Chattary and Island were in due form of law married in the county of Chattary and the State of Italy and that they resided together as husband and wife from date of marriage to the day of his death on the State of the st
AFFIDAVIT OF WITNESS.  GEORGIA, Chattorya County,  Personally before me come on the says that he knew felm the Mrs. It william while in life and that he knows  Mrs. It william while in life and that he knows that the said feller the trelliam and of the training on the State of the spine on the say of the state of the spine on the say of th
AFFIDAVIT OF WITNESS.  GEORGIA, Chattorya County,  Personally before me come on the says that he knew felm the Mrs. It william while in life and that he knows  Mrs. It william while in life and that he knows that the said feller the trelliam and of the training on the State of the spine on the say of the state of the spine on the say of th
AFFIDAVIT OF WITNESS.  GEORGIA, Charley a County, Personally before me come on oath says that he knew follows the Mrs. It will follow while in life and that he knows  the above applicant; that he knows that the said follows the trible of the county of the following of the same of the same of the same on the state of the same on the state of the same on the state of the same on the same of the same of the same on the same of the same of the same on the same of the same o
AFFIDAVIT OF WITNESS.  GEORGIA, Chartorya County,  Personally before me come  on oath says that he knew Jelin III Millians while in life and that he knows  Mrs. III willians while in life and that he knows that the said Jelin III Willians and III (Willians were in due form of law married in the county of Climber of day of Climber on the 5/2 day of Climber of Mrs. IIII and that they resided together as husband and wife from date of marriage to the day of his death on the 5/2 day of Accounts 1902, and I now know that she is his dependant widow.  Sworn to and subscribed before me this 21/2 day of Hanney 1903

NOTE 1st - This form can be used by guardian of minor children where there is no widos

the applicant in the foregoing affidavit, and am whim in his said affidavit are true, and I know he is be and that he resides in this County.  Given under my official signa day of	ture and seal, this	Sworn to and subscribed before me	date of marriage to the day of his death on the \$42.  and I now know that she is his dependant widow.  this 2012 day of fernance 1993  DINARY  OUNTY.
	, market and the second and the seco		
	200700300000000000000000000000000000000		
*	Challooga		(10)
`	Maimed Soldiers.		Maimed Soldiers.
Audited Mich 5 1889.			Voucher No. 572
War Am gh	Voucher No. 10 JJ Amount & 10 V	Audited Fib. 8 1802	Amount \$ 100
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. ,			1 / 1890
	, <del>(</del>		
	Included in Warrani No issued to Treusurer		Included in warrant No.
	1889		El Fron CA Tompso
	WARHANT CLERK		
is.	W. J. Campbell, State Printer, Conflittution Job Office		WARRANT CLERK.  W J Campbell, Mate Printer, Constitution Job Office.
Sa.	4:10 10		Wallnytt

STATE OF GEORGIA, KNOWLINE DEPARTMENT & Manta, Ga March 4 1889 Mr Ino In William 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 Yarropley He is entitled to receive the sum of Cur Hundred your Dollars for such disability, the same being the allowance due for the year Billing October 21, 1889 The Treasurer will pay the same and hold his recipi on this queler, and return same to Executive Department for warrant By the Governor Harrover CLERK EXECUTIVE DEPARTMENT

Ino m Willeams

An urmglis

RECEIVED OF STATE THASURER, R. U. HARDEMAN, Cuc Hecudion Year per above voucher, this If of 2110 26 K

No. 1678

Atlanta, Ba. Fly 7 1890 EXECUTIVE DEPARTMENT. My Sno, M. Milliamy of the County of Challoo ga having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, approed, Dec. 24, 1888, and the same having been examined and allowed for ass apley He is entitled to receive the sum of The Hunared & 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 warrants

One Hundred 109

STATE OF GEORGIA.

: 100

per above voucher, this

Inom willcains For wirmgles Williams, J. 77.

> AUDITED 1891 Mained Soldiers.

Wm Smah

Audited

L'oucher No. 7604 Amounts 100

raid w Milliania tor Vera de leg

1891.

7. ch 19 1801

Included in warrant No issued to Treasurer

1891

TECCIA

W VERANT CLERK

Hat night

Mr. Allanta, Ga. Mich. 13 1891.

In the County of the County of the County of 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 Noy. 11, 1889, and the same having been examined and allowed for the is entitled to receive the same of Allanta and the same having been examined and allowed for the same having been examined and allowed 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 warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on this voucher and return same to Executive Department for warrange and hold his receipt on the same having beautiful to the same having beautiful to the same having beautiful to

9 Sto Williams

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

per above voucher, this...

No. 2604

§ Slo Williams WAYY per above voucher, this....

# POWER OF ATTORNEY.

STATE OF GEORGIA,

County. S

In the Contract of the Contract Section of

hereby authorize

County.

CALUL nome Sales Sales	
of san	
blittings G.	·
INDIGENT PENSION	
Name John F. Williams	
Ground Ground	
Juny / INIL	
RICHARD JOHNSON,  Necessary Executive Department	
tto	
tico. W. Harrison, State Printer, Atlanta.	

Concern descript for the person allowed and request that he remit same to 1971. Fig. Withula Ltex the day of Courts - 1866.

Executed in pre-en

#### POWER OF ATTORNEY.

STATE OF GEORGIA. 1. I. Store . To be designed 27 Com Cimera a cel anta Sec MALLattex **PENSION** 895

#### OUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

Spattered County. State and County, desiring of said State and County, desiring the said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

- 1. What is your name and where do you reside? (give State, County and post office)

  2. Where did you reside on January 1st, 1894 and how long bave you been a resident of this State?

  (hall eye Co. All 1894 and how long bave you been a resident of this State?

  3. When and where were you born? They is the state of the

- 6. In what company and regiment did you enlist? Lo B / Buy Competent Le U l

  7. How long did you remain in that company and regiment? Hold the 20 of July 1864
- 8. If you were discharged from same and joined another, or if you were transferred to another, give an
- account of such discharge or transfer? . /it in //a)
- 9. For how long a period did you discharge regular military duty? LAC 1 1862 to Classoftlas
- 10. When, where and under what circumstances were you discharged from service?

  Revealed at Classes that a harpital. in Swiffin In
- 11. What is your present occupation? How berry It had I flow for them I to
- 12. How much can you carn (gross) per annum by your own exertions or labor? Comparitively, I. Thirty, 12. What has been your occupation since 1865? Soircy arrighting that they health allowed
- 14. What sum would be necessary for your support for this pension year, and how much are you able to
- contribute thereto either in labor or income " 167 at 70 La 17 ing 15. What is your present-physical condition and how long have you been in such condition?
- monthly to do and hard link an perant of
- hat throng the lighten hour
- 10. Upon which of the following grounds do you base your application for pension, viz.; first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Por of the transfer of
- 17. 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?
  - One taking and The Mund I coul land
- 18. What property, effects or income do you possess and its value?
- 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same?
- 20. In what County did you reside during those years and what property did you then return for taxation?
- 21. How were you supported during the years 1893 and 1894? . Heilly ! Cherily
- 22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I let as 71. lone facility the thing
- 23. What was your employment during 1893 and 1894? What pay did you receive in each year?

  Assifficing that I could to had highly to the first to the second to the second
- 24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? 120. 1/4 is time, If hild age

They to Friends & Hack for any one that hill

andlesson Only Cataora Colo

#### AFFIDAVIT OF PHYSICIANS

" rupley Them

STATE OF GEORGIA,
County.
Personally came before me Mil British of Descrit and
, both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully  A Man 2 Mil Clark and after applicant for pension under the Act of 1894, and after
such personal examination say that his precise physical condition is as follows:
by and passing the lower fourth of legt
lond as around the of the muster of the out on excelional syndshine with uncle such found and sarranged women withing the application with the week of about
we 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 a being allowed.
Swern to and subscribed before me, this the Coday of Control 1895. The formation of the State of State
Transfer Commence
OPDINARYS CERTIFICATE

#### ORDINARY'S CERTIFICATE

STATE OF GEORGIA, Willtage 1, Tithe Wester ... Ordinary in and for said County, hereby certify that the applicant Dome 1 411 Chianos resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: the DI gout on distance 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 witnesses before same were signed. I further certify that the tax digests of Latter a County show that applicant returned for taxation in his name in 1893, dollars he Dunk of property, and in 1894,. dollars of property. In my opinion the foregoing claim is

day of Colation

Witness my hand and seal of office, this.

#### POWER OF ATTORNEY.

TOWER OF ATTORNET.
STATE OF GEORGIA,
County.
1. My Milliones hereby authorize Allen
timester of Officenter Isa
to receive and receipt for the pension paid hereon and request that he remit same to
My Clarity
at X aprily
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of free 1 x 11/1 / Sienes [ s. S.
ten f XIII / Samo 1. S.
Executed in presence of
for Houry _ h
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II.
For Those Already Enrolled  No. 157  INDIGENT  INDIGENT  IRCHARD JOHNSON,  FIRTHARD JOHNSON,  FIRTHARD JOHNSON,  FIRTHARD JOHNSON,  FIRTHARD JOHNSON,  FIRTHARD JOHNSON TO  WARRANT HANDED TO
Those Already Enrol  Those Alr
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Sol Name.

#### POWER OF ATTORNEY

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(For Those Already Enrolled.)	1	INI	PEN				SSUED	, !	RICHARD JOHNSON,	DED TO	
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## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	1
County.	ſ
County, State of Georgia, who being duly sworn, and resident of said County and State, and has re	says on oath that he is a bona fide citizen sided in said State continuously ever since 1821; that he is 4 5 years old and
the day of / (2	
by occupation a C that he enliste	) during the war between the States,
and served for the term of 2002 gases	
Just a South town	; that his physical condition is as
follows:	a liver for himself
of and the second	
that his property consists of the following items	her the perty
of the value of	Dollars, that by reason of his physical
condition and poverty he is unable to support hi	mself by his own exertion or labor, and
Deponent desires to participate in the benefi 1894, and the acts amendatory thereof, and makes is entitled for the year 1897. I have heretofore as a county been allowed a pension for the year 1894.  Sworn to and subscribed before me, this, the	application for the pension to which he resident of
STATE OF GEORGIA,	
County.	0.11
	Ordinary of said County,
do certify that I am well acquainted with applicant in the foregoing affidavit, and am well s	The transfer the
in his said affidavit are true, and I know he is the	
and that he resides in this County.	and represents ministration
	nature and seal, this 24 6
day of	
Affix / your / seal / herr	1241 - 12 2 X
Ord	inary Courtles County.
part of the same o	

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Chattage County.
Personally appears Ken i Williamos Changveses
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 1112 day of 111 ay 1833; that he is 65° years old and
by occupation a france that he culisted in the military service of the Confed-
erate States (or of the State of ) during the war between the States.
erate States (or of the State of ) during the war between the States,
and served for the term of glass in Company B, of jet all Redment of She yie Breather it that his physical condition is as
that his physical condition is as
follows: I Pering to an melen for light lay
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that his property consists of the following items - 11021
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of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act; approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1898. I have heretofore as a resident of Clautte 1996
county been allowed a pension for the year 1897
a contract of the contract of
1)
follie of Called & Ordinary.
State of Georgia,
M. Lucting La. County.
7.7/
do certify that I am well acquainted with # ### ##############################
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of fern ward 1898.
CAME LOSO.
Silling (all)

# POWER OF ATTORNEY. STATE OF GEORGIA, Diagrams County. Linguistant Maissense Sin In a Marigha of Cit. to receive and receipt for the pension allowed, and 1200 Witness my hand and seal this All day of Council Executed in presence of Arthur Market Executed in presence of Cartainery

SOLDIER'S PENSION

1899.

INDIGENT

(For These Aiready Enr

No. 3061

# WARRANT HANDED T

RICHARD JOHNSON,

WARRANT ISSUED

POWER OF ATTORNEY.
STATE OF GEORGIA,
County.
I Man I Will Green hereby authorize
the Allerget of lettanter ga
to receive and receipt for the pension allowed, and request that he remit same to
The style fell
by Check
Witness my hand and seal, this 2 Cday of Algenty 1800.
Tilm (x Williams [L. S.]
Executed in presence of
What Matter Cull ving
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PENS PENS O. O. NDSEY,
PENT STORY OF EATH OF THE STORY

For These Airead NO. 19 INDIGI JOHN. W. L. WARRANT SOLDIER'S minar Name CHILL

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County.
Personally appears of Milliam of Chatteryer
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 aday of they 1813; that he is 66 years old and
by occupation a Discourt; that he enlisted in the military service of the Confed-
erate States (or of the State of ) during the war between the State
and served for the term of Jacques in Company
Confederate See Ortunter; that his physical condition is as
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that has property consists of the following items
of the value of
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 1809. I have heretofore as a resident of Liestonya.
county been allowed a pension for the year 189
Sworn to and subscribed before me, this, the
1.2 day of Jacoby 1800. This IX Millstein
Ordinary.
State of Georgia,
Cicattrages County.
. 7.4
do certif that I am well acquainted with forms I foul County the
applicant in the foregoing affidavit, and an well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of Chry 1899.
Affix Jour Control of
bern flatter
Ordinary County.
Norz.—The blank spaces must be filled.  Norz.: A ffidavit should not be attested before January 1st, 1899.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County County
personally appears will Millians of Lactor- ve
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 ir said State continuously ever
since the // day of May 1837; that he is 66 years old and
by occupation a, that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of Mor fear, in Company , of Ith Regiment of
harfey Overnteers that his physical condition is as
follows frompicled in bother above The
Some misto disableing be to pade an estat
the tile Can not want a endlost & home
that his property consists of the following items Del Malen and
bold of poten
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of the value of \$8009 Dollars, that by reason of his physical
of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1900. I have heretofore as a resident of Alex Hory year
country been allowed a pension for the year 1899
Sworn to and subscribed before me, this, the
17/1 0 1 1053 X 1111 X 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
10.7
Arrin fluid Ordinary.
State of Commit
State of Georgia,
Clearty County.
1, Or Mile of County, Ordinary of said County,
do certify that I am well acquainted with Aller I Market 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
(Ami) day of lessely 1000
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yeller the totally
Nors.—The blank spaces must be filled.
NOTE.—A findavit should not be attested before January 1st, 1900.

## POWER OF ATTORNEY STATE OF GEORGIA. County | hereby authorize to receive and receipt for the person allowed and request that he remit same to women willing Warness my hand and seal, this for day of a 1990 1900 SOLDIER'S PENSION. For Those Already Enrolled. Name of the Country o JOHN W LINDSEY, 1831 1901. INDIGENT WARRANT ISSUED

#### POWER OF ATTORNEY

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	STATE	OF GEOR	GIA,	1					
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2 2	4 E	NDIGENT	ER'S PE	1 1	49	WARRANT ISSUED	JOHN W. LINDSEY	WARRANT HANDED TO  W. Harrison, State Printer, Atlanta	1
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7	<b>E</b>	1	22	Name	County	i l			
1		10	<b>J</b> 2	11 /4	000			I Lil	

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County.
Personally appears and Markey of Montages
County, State of Georgia, who being duly sworn, says on oath that he is a hona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1832; that he is 67 years old and
by occupation a that he enlisted in the military service of the Con-
federate States (or of the State of ) during the war between the
States, and served for the term of the grant in Company & of the Regiment
that his physical condition is as
regions . To go can de service ais l'of d'rechiere Cart
Million to and fring a rome or from drawn from
that his property consists of the following items
227
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of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of
Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
day of Ceres 11 - 1910
Ordinary.
STATE OF GEORGIA.
County.
County.
do certify hat I am well acquinted with his first the first the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County
Given under my official signature and seal, this
day of Sic C 1908.
- 11 1 1 1 1 T
the form
Ordinary County.
Note: Addays should not be attested before January 1st, 1991

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
But you County.
Personally appears Alin Dillians of Charles
County, State of Geoogia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the // day of Miles 1863; that he is & Y years old and
by occupation a 22 11 4 5 that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of Jacob in Company &, of /-th Regiment
of Cartelle with Ja : that his physical condition is as
follows: _ There of the cheer to figuricary
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that his property consists of the following items . I compared to
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Note that the second se
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1902. I have heretofore as a resident of ite Trace
county been allowed a pension for the year 1791
Sworn to and subscribed before me, this the that the Milliams day of Jay 1002. Ordinary.
STATE OF GEORGIA,
1. July County.
do centry that I am well acquainted with 177111 2 1176 30000
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 1902.
out seal the seal that the seal the sea
Ordinary County.
Norm.—The blank spaces must be filled.  Norm.—Affidavit should not be attested before January 1st. 1902.
AUTE. TAIMENT SHOULD BUT OF STREET DELICE SHOULT IN. 1998.

# POWER OF ATTORNEY. STATE OF GEORGIA, County. I. Jeffer Assillations hereby authorize that he remit same to at the pension allowed and request that he remit same to at the witness my hand and seal, this 1012 day of the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request that he remit same to at the pension allowed and request the pension allo

JOHNW. LINDSEY,

SOLDIER'S PENSION

INDIGENT

#### POWER OF ATTORNEY.

to receive and receipt for the pension allowed and request that he remit same to at the witness my hand and seal, this to day of the pension allowed and request that he remit same to at the first same to be a supplied to the pension allowed and request that he remit same to at the first same to at the

# SOLDIER'S PENSION

FOR THOSE ALREADY ENROLLED.

Regiment Collection WARRANT ISSLED

JOHN W. LINDSEN, Conductor of P.

A HARRING SIM- PERSON IN

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
County.)	
Personally appears  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 /2 day of 1803; that he is 72 years old and by occupation a 1803; that he enlisted in the military service of the Confederate States (or of the State of ) during the war between the States, and served for the term of 2 in Company of h Regiment in Company of the Regiment of 2 in that his physical condition is as follows:	
of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.  Deponent desires to participate in the benefits of the Act, approved December 15th, 1814, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of december 15th, 1814 and subscribed before me, this the 1903 day of 1844 1903.  Sworn to and subscribed before me, this the 1903 Act of 1903.  STATE OF GEORGIA, County.  Ordinary.  STATE OF GEORGIA, County, descentify that I am well acquainted with 1844 Act of 1844 Act o	
the applicant in the foregoing affidavit, and am well satisfied that the statements made by	
him in his said affidavit are true, and I know he is the individual he represents himself to	
Given under my official signature and seal, this day of 1903.  Ordinary County.  Nore—The blank spaces must be filled Nore—Affidavit should not be attested before January 1st, 1903.	

#### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
county.	
Personally appears  County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citize and resident of said County and State, and has resided in said State continuously evince the day of 1833; that he is years old at by occupation a that he enlisted in the military service of the Co federate States (or of the State of during the war between the States, and served for the term of the county of the Regime of the County of the Regime of the county of the States, and served for the term of the county of the Regime of the county of the state of the county of the Regime of the county of the state of the county of the Regime of the county of the state of the county of the state of the county of the Regime of the county of the state of the county of the Regime of the county of the state of the county of the Regime of the county of the state of the county of the Regime of the county of the state of the county of the Regime of the county of the county of the Regime of the Regime of the Regime of the Regime o	en er nd on- he ent as
that his property consists of the following items: 12 / 2 plasty	
Dollars, that by reason of his physic condition and poverty he is unable to support himself by his own exertion or labor, at that he receives no pension but the one herein applied for.  Deponent desires to participate in the benefits of the Act, approved December 15t 1894, and the Acts amendatory thereof, and makes application for the pension to which is entitled for the year 1904.  County been allowed a pension for the year 17th.  Sworn to and subscribed before me, this the day of the Act approved December 15t 1904.  Ordinary.	nd th, he
County.  I. Ordinary of said County do certify that I am well acquainted with Alexander of said County the applicant in the foregoing affidavit, and am well satisfied that the statements may be a said affidavit are true, and I know he is the individual he represents hims to be, and that he resides in this County.  Given under my official signature and seal, this day of 1904.	ade self
Ordinary E/A Coun	ty.

Nors.—The blank spaces must be filled Nors.—Affidavit should not be attested before January 1st, 1984.